



Family members: part of the health care team

by Josie Padro



In 2008, Louise Donald's vibrant ninety-year-old mother Dorothy had a fall and was admitted to hospital where she passed away nine days later.

What Louise Donald's mother experienced is not uncommon. According to *A Profile of Seniors in British Columbia*, "In 2001, 10,000 seniors in B.C. were hospitalized because of a fall, and 771 people died either directly or indirectly as a result of a fall."

In a video released earlier this year titled *Dorothy's Story* Louise Donald, a long-time volunteer with Vancouver Coastal Health, recounts her mother's experience so that patients, their families and health care workers can be more aware of the special needs of the elderly. "I believe that patients and families and volunteers all have to be part of the integrated team," says Ms. Donald.

Ms. Donald points out that the elderly are especially vulnerable to stresses such as prolonged periods without eating while awaiting surgery, changes in medication and disruptions to their normal routines. To complicate matters, many seniors have hearing and vision problems that can impair their ability to communicate with staff. Add to that, surgery and anaesthesia puts a strain on the already low physical reserves of an older person.

Taken together, all these factors can make recovery a challenge. It's during this time that family members can be helpful by communicating with staff.

One issue that often arises is pain. With adequate pain control, patients are able to move more easily, maintain their muscle strength and take the deep breaths that help keep the lungs clear.

Prolonged bed rest can be particularly dangerous. A 2010 study put it this way: "with advancing age, it becomes increasingly likely that even a brief, clinically mandated period of bed rest could initiate a serious decline in muscle strength and functional capacity, i.e., a "tipping point" from which some may not fully recover."

Family members are entitled to ask what kind of pain medication their family members are taking, and how often they may have it. They are also in a good position to note and report any adverse effects of the medication.

Another issue that can arise is confusion. Seniors can become disoriented with a change in setting, medication, sleep patterns, or as a result of surgery and anesthesia. This confusion, also called delirium, affects up to 56 percent of older people admitted to hospital and is not the same as dementia. While delirium is usually temporary, it can persist for months and is linked to a decline in health as well as loss of life.

Seeing a parent or spouse in a confused state can be alarming. Family members can help by holding the person's hand and reminding them of why they are in hospital, as well as the date and time of day, information that's easy for a patient to lose track of.

Family members can also help by providing comfort measures. These may include a back or foot rub, an opportunity to brush their teeth or a warm face cloth to freshen up with. Patients may appreciate having some of their favourite foods brought in, though family members should check with staff to make sure there are no dietary restrictions.

One way to find out about a patient's care is to request a family meeting. These can be arranged at a time that works best for everyone, usually during the day, and include members of the health care team, including the physician managing the patient's care, nurse clinician, dietician, and any other health care professional involved. Family members will be able to get an update of the patient's condition, present treatment plan, progress and any current problems. This is a good time to ask questions, share observations and voice concerns.

Health care professionals can also be reached individually either by phoning the hospital ward or through the switch board. Speaking individually to health care team members can be helpful for questions related to their specialty. For example, a family meeting may not be necessary if you want to discuss a food-related issue with the dietician.

As *Dorothy's Story* points out, family members are an important part of the health care team. They know what's normal for their loved one and can often speak for that person. Family input is valuable allowing health care team members to address issues that arise and provide the best care possible. View *Dorothy's Story* on the Vancouver Coastal Health website www.vch.ca/your_health/seniors