

Section 2

When does a person become a Care-Receiver

Aging in Place:

Indicators of health problems needing assistance:

- repeated memory loss
- failure to cook meals, not getting proper nutrition
- forgetting to turn stove off, burned pots
- unable to organize shopping
- forgetting to do banking or pay bills
- unable to bath, incontinence
- personal appearance begins to look messy
- unable to do laundry or do housekeeping
- becomes isolated in home
- misuse or under use of medications
- continued worrying about not having enough money
- obsession with theft of money or possessions
- weight loss

Cognitive Impairment Symptoms:

- loss of short-term memory, repetition of thoughts
- impaired visual-spatial ability
- disorientation
- difficulty choosing and using words
- loss of ability to perform daily functions
- hallucinating

Signs of Dementia:

- loss of short-term memory and long-term memory
- impaired visual-spatial ability
- problems with abstract thinking
- impaired judgement
- difficulties with language
- personality changes

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Signs of Depression:

- inability to concentrate or make decisions
- lack of enjoyment or enthusiasm for anything
- changes in eating habits - weight loss or gain
- lack of interest in being with other people
- feeling unwanted or worthless
- sadness or crying for no apparent reason
- problems with sleeping
- feeling tired most of the time

What Leads to Depression:

- recent physical or medical problems
- reaction to medication
- changes in hearing, seeing, moving or other functions
- recent personal losses, (family, friend or pet)
- isolation
- not feeling useful
- not being mentally stimulated
- focusing on the past and not feeling enthusiastic about the future
- not getting the proper nutrition

Mental Health

You can encourage positive mental health by:

- involving your Care-Receiver in decision-making as long as possible
- accepting the personality and emotional changes after an illness
- recognizing the strengths and abilities of the Care-Receiver
- encouraging the Care-Receiver to socialize with friends and relatives
- arranging fun times
- helping Care-Receiver to start hobbies or revive old ones
- encouraging activities outside, if possible
- listening, talking and sharing feelings
- assuring privacy and dignity
- encouraging exercise
- communicating with the Care-Receiver

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If you are concerned about the mental health of the Care-Receiver and/or you notice these symptoms as previously described then:

- have a family conference
- discuss with Care-Receiver/spouse and develop a plan
- discuss with family doctor, nurse, or social worker
- call Community Care Access Centre (CCAC) or POINT Community Information Service (CIS) for in-home resources

Paranoia

Many Care-Recipients experience paranoia or anxiety and deal every day with fear, panic attacks, obsessions, confusion, irritability, restlessness, and anger.

Causes:

- Worrying
- Poor nutrition
- Depression – psychiatric disorders
- Brain damage or memory loss
- Reactions to medications
- Alcoholism
- Medical problems (pain infections, heart disease, blood sugar disorders)
- Reduced hearing or sight
- A blow to the head
- Environmental changes – change and disruption

The Caregiver can help by:

- Don't take accusations personally
- Maintain a calm, caring manner
- Reassure
- Don't argue or contradict – redirect the conversation
- Remind where valuables are kept and help to look for them – never scold for losing or hiding items
- Remind and repeat information about visits and care plans
- Take the person's hand in yours to sooth
- Engage the person in a familiar activity
- Following routine builds a sense of security

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Your Notes – Section 2