

Section 9

Health Care Resources

If you cannot locate the health card for the Care-Receiver, call 416-327-7567 or visit their website.

When a Care-Receiver is diagnosed with a particular illness or condition, learn all you can about the symptoms, treatments and prognosis.

Contact the specific Association or Society for information and support:

Alzheimer's Society for Toronto (for Dementia also)	416-322-6560
Arthritis Society	416-979-3760
Canadian Cancer Society Information Line	1-888-939-3333
Canadian Hearing Society	416- 964-9595
Canadian National Institute for the Blind - CNIB	416-486-2500
Cystic Fibrosis Foundation	416-932-3900
Drug Benefits (seniors)	416-314-7444
Heart and Stroke Healthline	416-631-1557
Multiple Sclerosis Society of Canada	416-922-6065
Ontario Naturopathic Association	416-233-2001
Osteoporosis Society of Canada	1-800-463-6842
Parkinson Foundation Caregivers' Support Group	416-444-3486

Hospital Information

RGP Geriatric Outreach Team	416-480-6111
The Anne Johnston Health Station	416-486-8666
The Doctor's Office (for the nearest walk-in clinic)	416-488-1455
Sunnybrook & Women's Health Sciences Centre	416-480-6100
Toronto Rehabilitation Institute	416-597-3422

Hospital Discharge

After a hospital stay, if the patient must move from his/her present home, facility information and an application form can be obtained through the Community Care Access Centre. It is important for the patient's family or Caregiver to visit a few facilities to allow an informed decision to be made.

Seniors' Caregiver Handbook

Be part of the hospital discharge plan for the Care-Receiver

- Connect with the CCAC (Community Care Access Centre) representative at the hospital.
- Respect the wishes of the Care-Receiver when planning for hospital discharge

Under the Public Hospitals Act, a member of the medical staff designated by the physician shall make an order that the patient be discharged when the patient is no longer in need of hospital treatment. It is then communicated in writing to the patient. The patient shall leave on the date set out in the discharge order although there is a provision for a 24-hour grace period. A hospital cannot discharge the patient unless there is a facility that can give the care needed. The Ministry of Health and Long-Term Care can give advice and assistance at 416-327-8952.

Health Care Resources

Visiting and Shift Nursing:

Visiting nurses provide up to two hours service while shift nurses provide service over a three to twelve hour period.

Registered Nurses and Registered Practical Nurses will:

- Provide palliative care for a person living with a life-threatening, chronic or terminal illness
 - Assist an individual recovering from an acute illness, injury or surgical procedure
 - Offer respite care for caregivers
 - Assist in adjusting to home life following discharge from a hospital or institution
 - Assist with a chronic or debilitating illness
- Certified Health Care Aides and Personal Support Workers will:
- Provide homemaking services including laundry, grocery shopping, light housekeeping, meal planning and preparation
 - Provide personal care including bathing, skin care, dressing, grooming, feeding, exercise, medication supervision
 - Provide respite care and relief for family members or friends who are the caregivers

Seniors' Caregiver Handbook

Special care can be provided for the frail elderly, people recovering from surgery, injury or illness, people with cognitive impairment, and terminally ill individuals. All services are available for a reasonable fee.

Healthy eating is essential to everyone but the elderly are particularly at risk for malnutrition, which is associated with a variety of medical risk factors. These include disease complications, poor healing, pressure ulcers and longer hospital stays. Malnutrition can be treated and prevented. Symptoms of nutritional problems can include:

- Pale skin
- Sunken eyes
- Poor skin
- Minimal muscle and fat stores
- Weakness, fatigue
- Irritability
- Change in functional status
- Dehydration
- Fluid retention

The "DETERMINE" nutrition checklist for warning signs of malnutrition.

- | | |
|---|------------------------------|
| D | Disease |
| E | Eating poorly |
| T | Tooth loss/mouth pain |
| E | Economic hardship |
| R | Reduced social contact |
| M | Multiple medications |
| I | Involuntary weight loss/gain |
| N | Needs assistance in selfcare |
| E | Elder years above age 80 |

The Caregiver can ask for a home care dietitian to make an assessment. In the meantime, the caregiver can:

- Arrange Meals-on-Wheels or congregate dining
- Buy canned foods for convenience
- Buy nutritional supplements as snacks or part of a meal, such as Ensure or Ensure Plus

Regular meals, nutritious snacks, healthy eating out and appropriate use of nutrition supplements may help to improve the quality of the Care-Receiver's diet.

Seniors' Caregiver Handbook

Factors that affect nutritional risk are:

- Physical – difficulty preparing food, loss of teeth
- Physiological – diseases, changes in taste or appetite
- Socio-economic – financial, isolation
- Psychological - depression

Health Care Resources

Chronic Illness – chronic diseases are the leading causes of death in Ontario.

Common chronic diseases include heart disease, stroke, cancer, chronic lung diseases such as emphysema, diabetes, osteoporosis.

Regional Geriatric Programs (RGPs) of Ontario

Toronto – 416 480-6026

Web site – www.rgps.on.ca

For further assistance on resources

POINT Community Information Service

416-487-2427

Your Notes - Section 9

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