

Psychosocial Needs of the Elderly

Instructor Guide



UPDATED JUNE 23, 2011



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INSTRUCTOR GUIDE:**PSYCHOSOCIAL NEEDS OF THE ELDERLY**

Overview	This module will address basic understanding of psychosocial care needs, seeing the resident as a whole person and an individual, implementing interventions for effective psychosocial care, strategies and tips for successful activity programs, and making life meaningful for your residents.
Video(s)	"Psychosocial Care" (31 minutes)
Special Supplies	None
Learning Objectives	<ol style="list-style-type: none">1. Physical well being is important, but we also need to be concerned about care for the resident's psychosocial well being.2. Look at our residents as individuals.3. The resident's psychosocial needs should be evaluated at the time of admission as well as on an on-going basis. Understanding the resident's history and past will help us understand who the resident is today and provide outstanding care.

QUIZ: PSYCHOSOCIAL NEEDS OF THE ELDERLY

Name: _____

Date: _____

1. How does knowing a resident's previous coping mechanisms in life help us as caregivers?
 - a. It helps us to decide what medications are best for the resident
 - b. It helps us know what can make a resident feel better
 - c. It does not help us; the resident is older now
2. List at least six things you would want to know about the history of a resident:
3. What can help a resident to feel safe and secure?
 - a. Keeping other residents from walking in his room without permission
 - b. Keeping your promises
 - c. Monitoring the resident for care needs
 - d. All of the above
4. You can promote bonding by:
 - a. Giving the resident his medication
 - b. Giving the resident plenty of "alone time" so he can relax
 - c. Help the resident from meaningful relationships by pointing out what he has in common with other residents.
 - d. Discouraging group activities
 - e. All of the above
5. A resident will have a good sense of esteem if you:
 - a. Do all of his personal care for him
 - b. Don't bring up his past work so he does not miss it
 - c. Review on a monthly basis his increasing need for care
 - d. All of the above
 - e. None of the above

6. List 4 good topics when reminiscing with your resident:
7. How would you know a resident might be depressed? Name at least 5 symptoms:
8. What should you do if you suspect your resident is depressed?
 - a. Suggest the family purchase some herbal remedies
 - b. Tell the resident it will get better; just act happy
 - c. Report changes immediately to your supervisor
 - d. All of the above
9. When a spiritual advisor, minister, etc. comes to visit a resident, it is helpful if we:
 - a. Ask them not to visit too often, as the resident may become a fanatic
 - b. Provide a quiet area for visiting
 - c. None of the above
10. An alert and oriented resident is sexually interested in another resident who is moderately confused. It appears the confused resident does not understand fully what is happening when the alert resident makes advances. You should:
 - a. Immediately contact your supervisor for further instruction
 - b. Tell the alert resident he should be ashamed of himself
 - c. Discuss safe sex practices with the confused resident
 - d. All of the above

QUIZ KEY: PSYCHOSOCIAL NEEDS OF THE ELDERLY

Name: _____

Date: _____

1. How does knowing a resident's previous coping mechanisms in life help us as caregivers?

- a. It helps us to decide what medications are best for the resident
- b. It helps us know what can make a resident feel better
- c. It does not help us; the resident is older now

2. List at least six things you would want to know about the history of a resident:

Family history, work history, hobbies and interests, history of psychiatric illness, coping mechanisms, religious history, birthplace, cultural considerations, significant losses, accomplishments

3. What can help a resident to feel safe and secure?

- a. Keeping other residents from walking in his room without permission
- b. Keeping your promises
- c. Monitoring the resident for care needs
- d. All of the above

4. You can promote bonding by:

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- a. Do all of his personal care for him
- b. Don't bring up his past work so he does not miss it
- c. Review on a monthly basis his increasing need for care
- d. All of the above
- e. None of the above

6. List 4 good topics when reminiscing with your resident:

Their home and family, what they did for a living, purchasing their first home or automobile, holidays or seasons

7. How would you know a resident might be depressed? Name at least 5 symptoms:

Change in sleep and/or eating habits, change in activity patterns, not enjoying usual activities, isolation, physical symptoms, suicidal ideations

8. What should you do if you suspect your resident is depressed?

- a. Suggest the family purchase some herbal remedies
- b. Tell the resident it will get better; just act happy
- c. Report changes immediately to your supervisor
- d. All of the above

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Certificate of Completion

THIS IS TO RECOGNIZE

FOR DEDICATION TO QUALITY RESIDENT CARE
THROUGH EDUCATION AND PROFESSIONAL DEVELOPMENT.

PSYCHOSOCIAL CARE

Instructor Signature

Date

Psychosocial Needs of The Elderly

Learner Workbook



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BASIC CONCEPTS

There are several basic concepts to understand when addressing psychosocial needs of the elderly. While physical well being is important, we also need to be concerned about care for the resident's psychosocial well being.

Important basic concepts include:

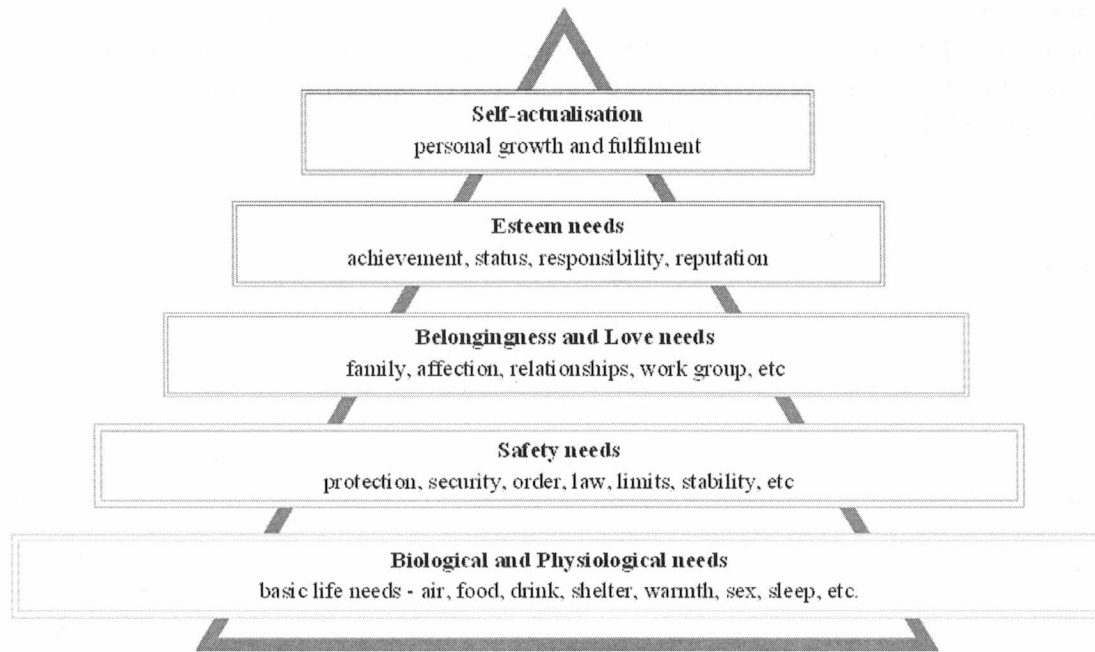
- We treat our residents as individuals and plan care accordingly.
- The resident's psychosocial needs should be evaluated at the time of admission as well as on an on-going basis. Understanding the resident's history and past will help us understand who the resident is today and provide outstanding care.

Consider the Following When Evaluating Resident Needs and Preferences:

- Family history
- Privacy issues
- Career/work history
- Hobbies and interests
- History of psychiatric illness
- Coping mechanisms
- Spirituality/religion
- Cultural considerations
- Birthplace
- Significant losses
- Accomplishments

Maslow's Hierarchy of Needs

We can use Maslow's Hierarchy of Needs as a structure to consider a resident's psychosocial needs and our role in providing care.



© alan chapman 2001-4, based on Maslow's Hierarchy of Needs

Physical Needs

Make sure the fundamental needs are met, including if the resident has enough food, is warm enough, is clean, and is well groomed. Make sure the resident is medically managed for any illness or pain.

Safety/Security

Monitor the resident. Follow safety protocol. Build security by keeping your work. Be honest and never trick a resident. Make sure the resident feels safe by introducing new caregivers to the resident, so he/she does not feel surrounded by strangers. Keep wandering residents out of other resident rooms.

Belonging

Encourage a resident to make friends in the Community. Introduce him/her to other residents and point out common interests. Help the resident learn the Community routine so he/she feels "part of the group." Make a resident's family feel at home. Frequent pleasant family visits will help the resident to continue to feel like an important part of his/her family.

Esteem

Allow the resident to do as much for himself/herself as possible. Focus on what the resident can do, rather than his limitations. Recognize achievements. Remind the resident of past accomplishments.

Self actualization

Personal growth and fulfillment is different for everyone. Your activity programming and other opportunities within the Community can help provide opportunities for self-actualization, but it is not something you simply "give" to someone.

Depression

When considering psychosocial needs, watch for abnormal conditions such as depression.

Signs and Symptoms:

- Change in sleep pattern
- Change in eating habits
- Change in activity patterns
- Not enjoying usual activities
- Isolation
- Physical symptoms (e.g., upset stomach, headache)
- Changes in mood or emotion
- Suicidal thoughts or statements

Report any changes or concerns to your supervisor immediately.

Treatment and Management of Depression:

- Always follow physician orders
- Medication
- Therapy
- Maintain open communication
- Allow residents to express concerns
- Encourage/provide meaningful activities

Spirituality

Our residents may view religion in a different way from us. Each resident has a right to his/her own personal beliefs. Assisting the resident to practice his/her spirituality is an important component to good psychosocial care.

- Be mindful and respectful of the resident's beliefs
- Assist the resident to meet his/her spiritual needs
- Assist in placing religious items in the physical environment
- Arrange for transportation to place of worship
- Arrange for visitors
- Provide privacy (as appropriate)
- Monitor other residents to ensure rights are not violated

Sexuality

Basic concepts to consider regarding sexuality include:

- The resident has the right to develop personal relationships
- Staff should allow for privacy
- If you feel a relationship is not consensual or you have concerns, contact your supervisor.

Learner Activities

Complete the following activities. Your Instructor will sign and date when completed.

1. Interview two residents about their life history. Focus on:	Date Completed Instructor Signature
a. Where he/she grew up	
b. Professional accomplishments	
c. Family history	
d. Activities he/she enjoys	

2. Spirituality	Date Completed Instructor Signature
a. Arrange a meeting with a spiritual advisor (pastor, priest, etc.)	
b. Discuss ways you can enhance your residents' opportunities for spiritual expression and explain your findings here:	

3. Setup and conduct two resident-centered activities	Date Completed Instructor Signature
a. What supplies will be needed?	
b. How will you encourage residents to attend?	
c. How will you obtain feedback from your residents about the activity?	
d. Activity #1 completed	
e. Activity #2 completed	