Limitations of the Facility: Exceeding Care Capacities

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Overview

- Community Resources
- Behavioral Management
- Indications for Transfer

Community Resources

- Case

85 yo female retired teacher has a history of CHF and arthritis-she has been in your assisted living for the past two years. She has been hospitalized twice in the past 3 months and is needing more assistance with dressing and bathing.

Community Resources: Group Breakout

- What community resources are available when a person is requiring more care?
- What are the limitations in your community?
- What are the limitations of your facility?

Community Resources

- Home Health
- Private pay aids
- Parish Nurses
- Hospice
- PACE programs

Community Resources

- Hospice
  - Criteria
  - Hospice Diagnosis
  - Less than 6 month prognosis
  - Certified by two physicians

Behavioral Problems

- Case

90 yo with advanced dementia is having increasing problems with paranoia-thinking that others are stealing from her. One morning after being awakened she becomes very aggressive and knocks her dresser over-the staff calls 911

Behavioral Problems

- ABCs
- Evaluation
- Management

ABCs

- Antecedent
- Behavior
- Consequence

Evaluation

- Any change warrants an evaluation
  - ?Medication
  - ?Infection
  - ?Trauma/Pain
  - ?Metabolic Disturbance
  - ?Hypoxia

Types of Behavior

- Aggression/Agitation
- Pacing
- Wandering
- Hallucinations
- Paranoia
- Inappropriate sexual behavior

Management

- Structure
- Routine
- Behavioral modification
- Preventing the “catastrophic reaction”
- Medications-LAST RESORT

Behavioral Problems: Group Breakout

- What are the most common behavioral problems you see?
- What are the most difficult?
- Does your staff have a consistent approach?

Indications for Transfer

- Trauma/Fall
- Behavioral
- Medical

Trauma/Fall

- ?Head Injury
- ?Deformity
- ?Change in ambulation

Behavioral

- Danger to themselves
- Danger to others
- Interfering with vital medical treatment

Medical

- General--?Distress
- Vitals
  - Elderly may not have typical vital changes-ie –no fever in infection
- Blood sugar if diabetic
- Discuss with on-call

Transfers: Breakout

- Does your facility have a protocol for evaluating someone after a fall?
- What are the most common reasons you have transferred someone to the hospital?
- What are the most common reasons you have recommended transfer to a skilled nursing facility and are there measures your facility could put in place to prevent transfers ?

Measures to Avoid Transfers

- Multidisciplinary approach
- Physician
- Community Resources
- Staff training
- Home Health/Hospice
- Family
- Advance Directives

Summary

- Familiarity with community resources
- ABCs of behavioral management
- Multidisciplinary approach to decrease transfers