

Caring for Older People

A Nurse's Guide

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MARY CARROLL

RN, C, MA

L. JANE BRUE

RN, M.Ed., MSN

Editor, UK Edition

BRIAN BOOTH

RGN



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<i>Acknowledgements</i>	vii
<i>Introduction</i>	viii

**PART I FIRST STEPS OF THE NURSING
PROCESS**

1	<i>The initial interview and health history</i>	3
	Subjective assessment worksheet	8
2	<i>The physical changes of ageing and how to assess them</i>	24
	Introductory note	24
	Head and neck	26
	Skin/Integument	28
	Respiratory system	28
	Cardiovascular system	29
	Abdomen	31
	Musculoskeletal system	32
	Neurological system	32
	Genitourinary system	35
	Endocrine system	35
	Physical assessment worksheet	36

**PART II ACTUAL OR POTENTIAL HEALTH
PROBLEMS OF OLDER PEOPLE**

	<i>Introduction</i>	47
	Nursing diagnosis	47
3	<i>Respiratory problems</i>	50
4	<i>Cardiovascular problems</i>	56
5	<i>Urinary problems and problems of the reproductive organs</i>	66

6	<i>Gastrointestinal problems</i>	74
7	<i>Musculoskeletal problems</i>	81
8	<i>Neurological disorders</i>	87
9	<i>Health problems associated with vision and hearing</i>	102
10	<i>Metabolic disorders</i>	105
11	<i>Skin disorders</i>	109
PART III FOCUSING ON THE WHOLE PERSON		
12	<i>Psychosocial aspects of care (Brian Booth, RGN)</i>	115
	Introduction	115
	Classification	118
	Conclusion	129
13	<i>Nutrition</i>	130
	Promoting sound nutrition	132
14	<i>The facilitative environment</i>	135
	Long-term care facilities	135
	Home environment	138
PART IV REFINING A PLAN OF CARE		
15	<i>Formulating and following up on a plan of care</i>	145
	Introduction	145
	Nursing plan of care	146
	Evaluation and quality assurance	147
	Multidisciplinary plan of care	149
	Considerations in home health (community) care	150
16	<i>Selected case studies</i>	153
	<i>Appendix A: American Nurses' Association Standards of Gerontological Nursing Practice</i>	165
	<i>Appendix B: Approved nursing diagnoses (North American Nursing Diagnosis Association – NANDA) 1990</i>	167
	<i>Notes and References</i>	170
	<i>Index</i>	180

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M. C.
L. J. B.

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The care of older people is possibly the most complex, challenging and rewarding area of nursing. This fact has become apparent to many British nurses in the last few years: managers who were once grateful for anyone willing to work in the speciality, now often find that they have more applicants than vacancies. Where once the dedicated few who had freely chosen elderly care stood out a mile, there is now a growing pool of professionals whose work has benefited all areas of care. Consider the nursing development units, the recognised centres of excellence in Britain: how many of them are elderly-care units?

It is an area characterised by the most rapid growth in demand. The number of people aged 85 and over in England and Wales grew at 3.8 per cent per annum throughout the 1980s; and the 146 000 people over the age of 90 in 1981 is estimated to become over 300 000 by the year 2000.¹ By the end of the century, some sources suggest, 11.1 million people in the United Kingdom will be over 70 years of age – one in five of the total population.^{2, 3}

As a result of this increased 'elderly' population, there will be an increasing demand for health care; put bluntly, we are seeing people fall ill with age-related conditions who, not that many years ago, simply would not have lived long enough for these to develop. As a result, there is a growing need for nurses skilled in the care of the older person.

As demand for acute hospital beds rises, the pressure on the health service to reduce average lengths of stay in hospital has increased, with the result that the treatment of people in their own homes has expanded immeasurably. The trend towards increased care in the home is reflected in this volume, which has been designed to be of use to nurses in both 'institutional' and domestic settings. Practitioners in rehabilitation, in continuing care and in the community are being challenged to care for people who are more

acutely ill, and thus require complex nursing; they need special clinical skills (including communication skills), the ability to use the nursing process effectively, and, most importantly, a love and respect for older people. All of these are essential to the provision of high-quality nursing care.

Gerontological nursing – or ‘care of the elderly’, as it is now commonly called in Britain, ‘geriatrics’ having acquired connotations of decrepitude and poor standards of care – is particularly difficult because older people commonly have multiple health problems; there are also more individual differences between older persons than amongst any other age group. Everyone ages at different rate; one of us recently nursed a 97-year-old lady who had fractured the neck of her femur, but due to her iron constitution, eventually walked off the ward and back to her own home, whilst a 67-year-old lady in a nearby bed would require total nursing care for the rest of her life, due to chronic ill-health. It is vital that we understand differences in functions that occur with ageing, if we are to use the nursing process to best effect.

In the past, the focus of traditional medicine (and nursing) has been largely on the treatment of disease; more than one person has suggested that the National Health Service (NHS) be rechristened the national *sickness* service. Now, however, there is an international trend towards ‘wellness-orientated’ health care, disease prevention, and health promotion. In the United Kingdom, this is perhaps best exemplified by Project 2000, the national nurse-training programme that is firmly rooted in the health of the individual.⁴ Gerontological nurses are in an excellent position to assist older people in the attainment of better health, through functional assessment and nursing interventions that are both supportive and educative in nature.

This book is intended to provide the nurse with essential information in a brief, easy-to-use format for treating common health problems of the elderly. Nursing diagnoses (see the Introduction to part II on page 47) are integrated throughout. In addition to discussing the basic categories of health problems, the book addresses general principles of promoting wellness, including psychosocial considerations, nutrition, and the creation of an environment that facilitates improvement of the older person’s quality of life.

Briefly, Chapter 1 begins with the first step in the nursing process: the initial interview and health history. A detailed assessment document is provided as a sample interview tool. Chapter 2 provides

information about normal age-related changes commonly seen in the older person, and gives some pointers to physical assessment, approached from the perspective of 'top to toe'. An in-depth physical guide is also provided.

In Chapters 3 to 11, various potential health problems and common pathological conditions of older people are discussed; each chapter looks at possible nursing diagnoses and related interventions.

Chapters 12, 13 and 14 take a more holistic viewpoint, looking at psychosocial, environmental and nutritional aspects of ageing. Chapter 15 offers some guidance on drawing up care plans, whilst the final chapter contains several case studies, followed by suggested nursing diagnoses and interventions.

At the end of some chapters are 'discussion points', none of which has right or wrong answers; they are included to highlight some of the less cut-and-dried issues raised in the preceding sections, and may be of use in less formal teaching sessions as starting points for debate.

It is the wish of the authors and the editor of this volume that this book will be useful, in one way or another, to everyone who has the good fortune to be working in this most rewarding of specialities.

To avoid clumsy circumlocutions, the nurse is referred to as 'she' throughout the book, while patients or clients are 'he/she', unless their gender is relevant to the topic under discussion.