



PSW POCKET GUIDE



Your insight can help you identify when things don't seem right! Report when your client is experiencing...

- **Delirium** – a new, sudden change in their ability to think, remember, and understand what is going on around them which may come and go.
- **Physical Activity** – little physical activity, or you see things that could be getting in the way of them moving to the best of their ability
- **Social engagement** – signs of loneliness or depression
- **Eating and drinking** – difficulty with eating or drinking or signs of dehydration or poor nutrition
- **Pain** – new pain, or chronic pain which is moderate or severe
- **Urinary incontinence** – clothing, bedding or furniture that is wet or smells of urine
- **Medications** – difficulty managing their medications

- Watch for:**
- Signs of loneliness, such as statements suggesting that your client wants more company, feels left out or feels isolated from life. Being alone is not the same thing as being lonely; some older adults prefer very little social contact, while it may cause loneliness for others.
 - Signs of depression, such as: expressions of being helpless, hopeless, or a burden to others, such as "No one cares about me", "I don't want to try anymore" or "What's the point...I'll never get better."
 - changes in mood and/or behaviour, seems sad, worried, or nervous / on edge, or stops doing their normal activities
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SOCIAL ENGAGEMENT

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- What to do:**
- Each visit is an opportunity for social engagement! Social engagement does not mean that there has to be a lot of talking and activity; people need to feel like they matter, and sometimes it's the little things that you do that can help them feel this way, such as:
 - allow your client as much control as possible with the visit (such as what to talk about, where to sit, just being present. E.g. sit and enjoy the moment with them
 - ask open-ended questions like "How are you today?" "Make sure to listen to and acknowledge what they say. For one word answers like "fine", engage them further by asking "what are you looking forward to today?"
 - Suggest the client or caregiver call 211 to explore community services or programs

- Watch for:**
- Decreased physical activity and things that might be preventing them from moving to the best of their ability (such as not having energy, fear of falling, or pain)
- What to do:**
- Use positive, encouraging, and motivating statements such as:
 - "Moving more during the day could help you sleep better at night and give you more energy"
 - "The safest way to prevent falls is to stay active so that your muscles stay strong"
 - "Moving more or stretching might help your pain"
 - "You can get a lot of benefit even from small amounts of activity"

PHYSICAL ACTIVITY

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- What to do (continued):**
- Encourage independence; offer assistance as needed. E.g. "I am here "I am here to bathe you"
 - Look for opportunities with your client to help them move more during daily activities, such as:
 - squeezing toes in tub or while putting on socks
 - raising arms while dressing
 - playing music during other activities and encouraging dancing, clapping or drumming
 - folding laundry
 - Be respectful of your client's decisions around when and how they want to move. If they say "not right now", try again another time

DELIRIUM

DELIRIUM

- Delirium is a medical emergency!**
- Watch for:**
- A change in their usual level of alertness; they may become very hyper (excited) or very drowsy
 - Not thinking straight; the things they say don't make sense or they have difficulty answering a question; they seem confused
 - Mood changes from one minute to the next; appearing depressed or extremely happy for no reason
 - Bizarre or inappropriate behaviour; behaviour that doesn't make sense or seem to have a purpose
 - Hallucinating – seeing or hearing things that others don't
 - Unexplained difficulty moving or doing things that they are normally able to do for themselves like eating, drinking, bathing or dressing

- What to do:**
- Delirium is a medical emergency; report to your supervisor as soon as possible if you are observing signs that could be delirium
 - Be patient and calm, use reassuring words, for example: "I can tell that you aren't feeling well right now. It's going to be ok."
 - Provide simple, one-step directions in a calm voice, such as "follow me", or "eat this"
 - Encourage their normal routine; keep things calm and familiar for them

EATING AND DRINKING
<p>Watch for:</p> <ul style="list-style-type: none"> • Coughing while eating or drinking, or difficulty chewing or swallowing. These could be signs of health issues. • Potential signs of dehydration or poor nutrition, such as: <ul style="list-style-type: none"> • dry mouth • dark urine • Constipation • feeling tired • rapid weight loss or gain <p>What to do:</p> <ul style="list-style-type: none"> • Eat together or sit with your client during mealtimes if appropriate. • Encourage your client to drink enough fluids by saying something like: “Drinking enough fluids (usually 6-8 cups), every day can help you feel your best.”

PAIN
<p>Watch for:</p> <ul style="list-style-type: none"> • Signs that your client may be experiencing pain: <ul style="list-style-type: none"> • Facial expressions, like grimacing (which usually includes eyes squeezed closed or almost closed and teeth clenched) • Body postures, like rubbing parts of the body or protectively holding parts of the body • Verbal expressions like: <ul style="list-style-type: none"> • groaning • crying out • or being unusually quiet

CONTINENCE
<p>Watch for:</p> <ul style="list-style-type: none"> • Signs of urinary incontinence such as: <ul style="list-style-type: none"> • Rushing to the bathroom and not making it • Peeing when laughing, coughing or sneezing • Clothing, bedding or furniture that are wet or smell like urine <p>What to do:</p> <p>Start a respectful conversation such as:</p> <ul style="list-style-type: none"> • “I know that passing urine accidentally can be embarrassing, and most people don’t want to talk about it, but I noticed that your clothes (bedding, furniture, etc.) are wet, and having urine next to your skin can cause your skin to break down. I would like to help you to stay comfortable, clean, and dry.”

MEDICATIONS
<p>Watch for:</p> <ul style="list-style-type: none"> • Difficulty taking medication, such as having a hard time opening packaging, or remembering to take them. • Signs that your client does not want to take their medications such as hiding or discarding medication. • Pills on the floor – this may be a sign of either difficulty taking medication or not wanting to take medication. • Possible side effects; while you may not know what medications your client is taking or the potential side effects, watch for any changes in behaviour, for example: nausea, vomiting, dizzy, tired.

EATING AND DRINKING
<p>What to do (continued):</p> <ul style="list-style-type: none"> • Encourage healthy beverages and whole foods instead of processed ones, which are often high in chemicals, sugars, salts, and unhealthy fats. For example water instead of a soft drink; or a baked potato instead of French fries. • Learn more about your client’s eating preferences by asking questions such as: <ul style="list-style-type: none"> • “Do you have a favourite meal of the day / why is it your favourite?” • “What are some of your favourite foods?” • “Do you prefer to eat at certain times of the day, or does it change based on when you feel hungry?”

PAIN
<p>What to do:</p> <ul style="list-style-type: none"> • Ask your client: <ul style="list-style-type: none"> • “Are you having pain?” • “Is your pain new or one that you have been living with for some time?” • “Is your pain mild, moderate, or severe?” • Ask your client what makes their pain better or worse, and how you can help them. • Ways that you might be able to help: <ul style="list-style-type: none"> • Encouraging physical activity as long as it doesn’t make their pain worse • Trying to re-direct your client’s focus away from the pain, such as suggesting an activity or having a conversation • Helping them get into a comfortable position, using pillows to support them as needed

CONTINENCE
<p>What to do (continued):</p> <p>Start a respectful conversation such as:</p> <ul style="list-style-type: none"> • “Did you know there are simple things you can do to help keep your bladder healthy, like: <ul style="list-style-type: none"> • drinking enough fluid (usually 6-8 cups every day), because if you are dehydrated it can irritate the bladder” • avoiding or drinking less coffee, tea, cola, or alcohol” • preventing constipation (hard, dry bowel movements) because it can cause pressure on the bladder. Eating more fiber and drinking enough fluid every day can help.” • emptying your bladder completely every 3-4 hours during the day and before going to sleep whether you feel the urge to go or not.”

MEDICATIONS
<p>What to do:</p> <ul style="list-style-type: none"> • If you see pills on the floor, start a respectful and helpful conversation with your client, such as “I noticed pills on the floor. Do you know how these got there?” • If your client appears to need help managing their medications, suggest that they speak to their primary care provider or pharmacist. Offer to get the pharmacist on the phone for them, if appropriate.

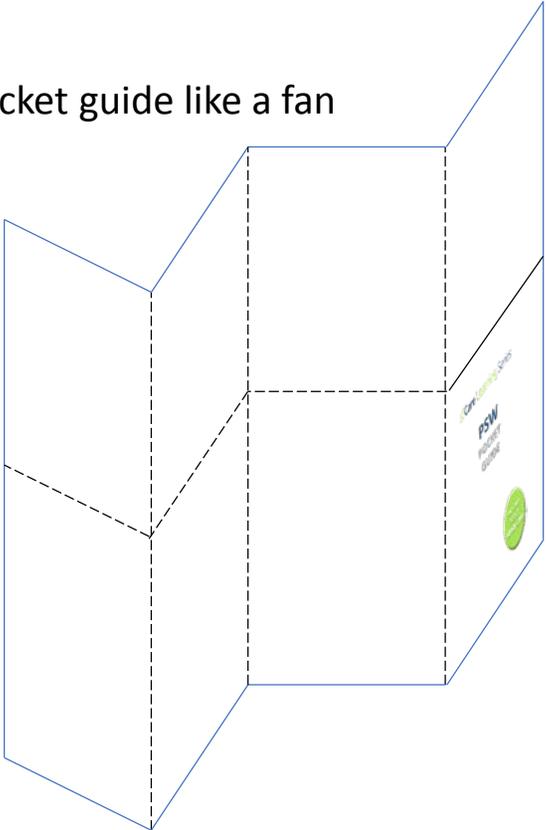
1



PSW Pocket Guide printing instructions:
Select "Actual Size" (not "fit"), set to print on both sides and select "flip on long edge".

2

Fold the pocket guide like a fan



3

