



# Age-Related and Health Condition Changes in Older Adults (for nurses)

## Why is knowledge of age-related changes important for your LTC practice?

The primary population in long-term care (LTC) is older adults who may be living with several complex and/or chronic geriatric conditions. It is important for care providers in LTC to understand common geriatric conditions and age-related changes. Nurses are responsible for observing and assessing residents living with age-related and complex health conditions for signs and symptoms of *acute deterioration* (worsening of these conditions). Nurses are also responsible for requesting, receiving and investigating observations and assessments from other team members.

Observation of age-related and health condition changes is the first step in the nursing clinical reasoning process (i.e., observation, assessment, nursing diagnosis and treatment planning for the best intervention). Noticing changes in the older adults is important because acute deterioration can lead to worsening of existing conditions, new problems or conditions, unnecessary suffering or even death. Some complex and/or chronic health conditions you need to know to succeed in your LTC practice include:

- Dementia, depression and delirium (3Ds)
- Incontinence
- Orthostatic hypotension
- Falls
- Osteoporosis
- Polypharmacy
- Pain
- Failure to thrive
- Frailty
- Abuse

## Caring for older adults living with long-term health conditions

For most older adults living in LTC, it is the last place they live, and it is where they will receive end-of-life care. That is why the goal of LTC must include creating the best life possible for residents. Preceptors can help students focus their learning plan towards a perspective of improving resident quality of life, rather than restoration. This is especially important to keep in mind if a student's previous experiences have been in rehabilitation and acute care, since the idea of 'quality of life' may be new to them.

# What are age-related changes?

The aging process naturally causes biological changes to the body that are usually unavoidable, regardless of other health conditions that an older adult may be living with. Some examples include:

- fewer nerves cells
- reduced feelings of touch, pain and temperature
- poorer short-term memory
- reduced taste and smell
- reduced lung-muscle strength and cardiac reserve
- slower recovery of activity
- shortness of breath
- less flexible joints and tendons
- weaker swallowing muscles
- reduced kidney function in regulating water and salt
- reduced immunity

To learn more about age-related changes please see the Ontario Centres for Learning, Research and Innovation in Long-Term Care's [Age-Related Changes and Care Implications](#).

## How you can apply knowledge of age-related and health condition changes in your LTC practice

When you are familiar with age-related and health condition changes in older adults, you are better able to understand and respond to the resident's needs. For example, by being able to offer:

- Better assessment through earlier identification of acute deterioration.
- Better treatment planning that is more suited to the resident's needs.

For nurses, the process of coming to understand and respond to resident needs is *clinical reasoning*. The process of clinical reasoning includes several important steps in providing care:

- Observing
- Assessing
- Diagnosing
- Planning
- Intervening
- Evaluating

Nurses play a major role in leading the team to contribute to all these clinical-reasoning steps. Observation is an important example because it is much more complete and accurate when all team members participate in collecting information. The team can also work together to reflect on causes of changes, choosing the best treatment plan and monitoring any further changes. Nurses help the team in this monitoring, by educating them about which key signs and symptoms of acute changes to watch for.

Ontario Centres for Learning, Research and Innovation in Long-Term Care offer practice tools to help clinical reasoning. Using these tools in practice helps team members provide positive, person-centred care experiences and better health outcomes. They help you accurately and safely diagnose and provide care. Two specific practice tools in the areas of observation and assessment are [Recognizing Acute Deterioration in the Older Adult](#) and [Know Your Resident's Baseline](#). The [Sensory Observation System](#) tool can also help guide you step-by-step through the clinical-reasoning process. We also recommend using this [Sensory Observation System Conditions Resource](#) to learn more about what residents going through an acute change in their health condition may be experiencing.

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