

Silent companionship – roles of social workers in promoting palliative care to elderly in residential care homes and challenges ahead

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An overview of service users of current RCHEs

- **Under promotion of aging in place, still long queue of waiting list for residential care homes for the elderly (RCHEs)**

According to the Social Welfare Department, as at 31 Aug 2013, 29 659 older adults are queuing for government subvented residential service for elderly, with an average waiting time of 21 months and 36 months for care and attention homes and nursing homes respectively

An overview of service users of current RCHEs

- **Suffering from multiple chronic illnesses for years**
- **Elderly admitted to RCHEs tend to be more frail**
 - **RCHEs inevitably become the last stop to most residents**

An overview of service users of current RCHEs

- **Implementation of palliative care in RCHEs to terminally ill residents**
→ **emphasis on quality of life**
- **Social workers should play an active role**

Primary responsibilities of social workers in RCHEs

- **Facilitating admissions and discharges**
- **Assessing and addressing psychosocial needs of residents**
- **Part of the multi-disciplinary team in arranging care plans for residents (providing developmental, educational, spiritual services)**

Primary responsibilities of social workers in RCHEs

- **Linking up resources with the residents**
- **Case management**
- **Major contact role and mediator between residents/relatives & staff**
- **Administrative work**

Social Workers' roles in RCHEs practicing palliative care

- **Vary regarding different health status of residents**
- **From individual to institutional context**



Sowing seeds of palliative care

Enabler - facilitate adaptation to the home

- **Transition as a crisis**
- **Trustful relationship built – base of successful PC and ACP**
- **E. g. Suggestion of life story making
→ enhance familiarity and personhood of residents (Bern-Klug, 2010)**

Sowing seeds of palliative care

Educator

- **To enhance knowledge & awareness through life and death education**
- **To empower and encourage self-determination**
- **To introduce ways they could express own will of arrangement at the end of life**
 - **Advance Directive and living wills and else**



Legal Talk of Preparing Will

Life and Death Education



Sowing seeds of palliative care

Messenger

- **Communication with residents and families regarding changes of elderly's' health status
→ prepare for declining health and changing conditions**

Diversified roles in Palliative Care process

Broker

- **linking resources to address residents and their families' needs**

Educator/information provider

- **regarding dying symptoms and issues arise during dying process**
- **Regarding post-mortal arrangement**

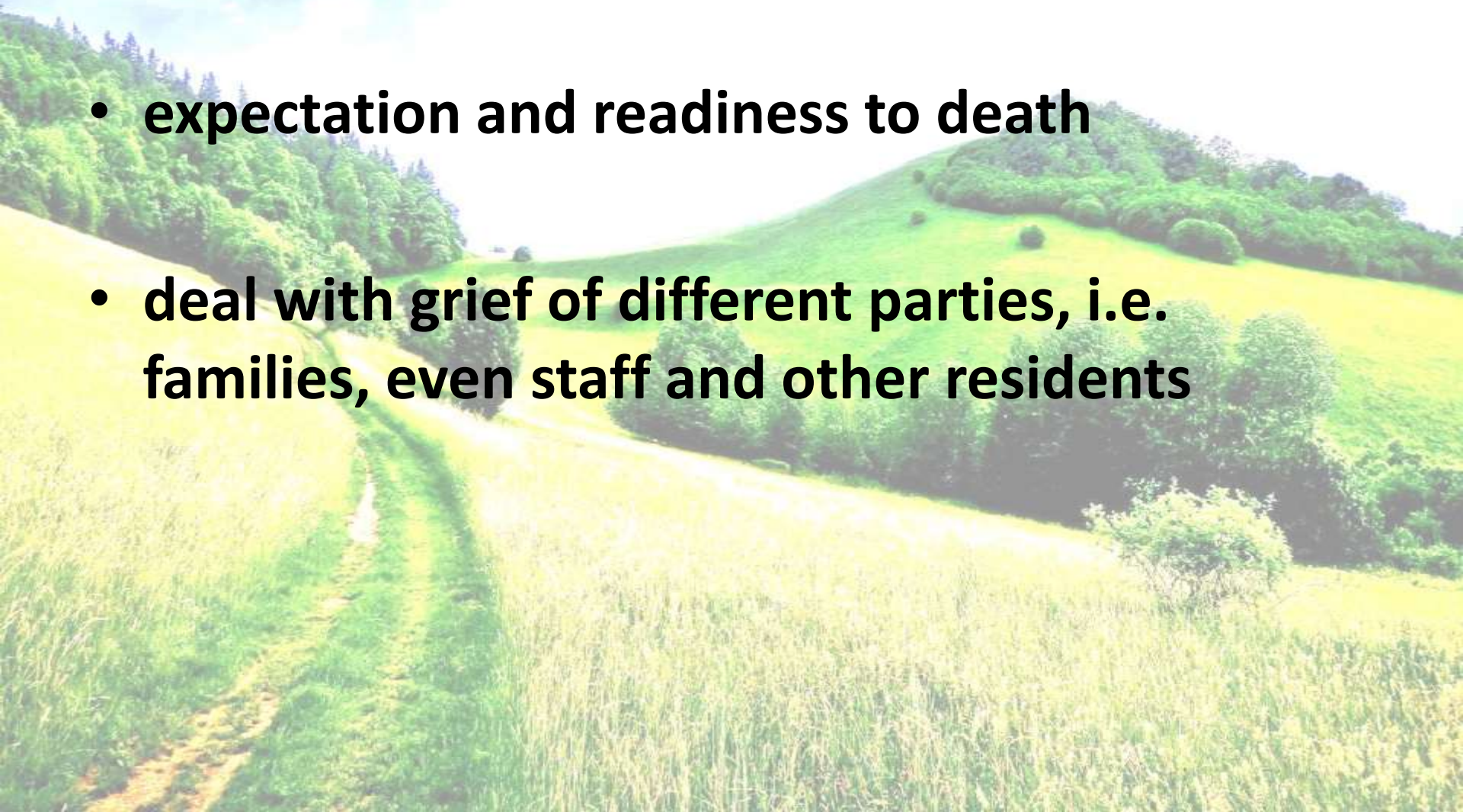
Diversified roles in Palliative Care process

As counselor and case manager to address psychosocial needs

- psychological distress, i.e. fear, worries...**
- unfinished business, reconciliation with significant figures...**
- maintain appropriate social contacts
(activity vs disengagement → respect of own preference)**

Diversified roles in Palliative Care process

- **expectation and readiness to death**
- **deal with grief of different parties, i.e. families, even staff and other residents**



Diversified roles in Palliative Care process

Addressing spiritual needs

- Of different aspects (religious, acceptance of death, meaning searching...)**
- arranging religious support (i.e. support from staff with the same religious belief or liaison with related parties)**



Terminally ill residents attending religious activities



Interdisciplinary cooperation is essential in promoting residents' QoL under PC

Diversified roles in Palliative Care process

Advocate of residents and families' rights

- **Conserve own rights of decision making**
- **Coordination with other disciplines**
- **Institutional and legislative aspects**

→ Multiple roles at a time

Challenges ahead in promoting PC in RCHEs currently in Hong Kong

Declining cognitive ability of elderly residents

- Majority of seniors are suffering from dementia and cognitive impairment**
 - 10% of adults over 65 years old are suffering from dementia (cited in HKCSS, 2012)**
- unable to make decision by their own**

Challenges ahead in promoting PC in RCHEs currently in Hong Kong

- **Culture and taboo**
- **Residents' hesitation and resistance**



Challenges ahead in promoting PC in RCHEs currently in Hong Kong

- **Assessments and specialized training in PC**
- **Communication with frail elderly**
- **Support and competency of other disciplines in RCHEs**
- **Institutional limitations**
e.g. death certification cannot be issued in C&A Home, communication with Transfer Services of hospitals...

Making use of features and advantages of residential home social work setting

A long term companionship

- companionship from preadmission till death**
- Isolated older adults may reconfigure their social network to include physicians and nursing home staff (Munn et al., 2008)**
- Frequent contacts with residents and participation in their daily life → ample of intervention opportunities implied as well as familiarity with residents**

Making use of features and advantages of residential home social work setting

- **Close working relationship with other disciplines**
 - **Firsthand information regarding changes of elderly' condition**
 - **Prompt responses can be carried out**

Making use of features and advantages of residential home social work setting

- **Grab hold of opportunity and proper timing to introduce and promote PC**
- **Early assessment and education are essential**
- **Not only deal with the terminally ill residents & relatives**
 - **social network within the home, even staff are included**
- **Making use of “follow suit phenomenon” to promote PC**

Conclusion

- **Multiple roles in promoting palliative care to residents with different status**
- **As companion with the service-users**
- **Make use of advantages in home setting and opportunities to promote PC**
- **Should take proactive role**
- **Interdisciplinary cooperation is indispensable**

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