

# [Patient-centered care for seniors essay](https://assignbuster.com/patient-centered-care-for-seniors-essay/)

[](https://assignbuster.com/)[Sociology](https://assignbuster.com/essay-subjects/sociology/), [Women](https://assignbuster.com/essay-subjects/sociology/women/)

#1. Patient-centered care   
Today’s healthcare system has changed dramatically in terms of the methods or procedures adopted in the provision of care. Apart from the technological inventions that have immensely transformed care and the need for critical thinking skills for nurses in decision-making, there has been more focus on the provision of patient-centered care. This entails the individualization of the care process to suit the individual needs of the patient (DiGioia, 2014). This approach has been adopted highly due to the changing demographics and the public awareness programs that have advocated for more involvement of the patient the in the decision-making process and the adoption of research-based methods that have equated patient-centered care to quality outcomes.   
The diversity of the population at economic, social and cultural levels calls for care processes that are responsive to these variations seemingly because, they all have an influence on the patient’s psychological, emotional and physical wellbeing. Henry’s case is one that can be termed as a situation that requires a patient-centered approach. On one hand, there is the change of environment and lifestyle from an active life to a more restrained and passive life owing to his illness and that of his wife Ertha which has continuously and rapidly deteriorated (National League of Nursing, 2011). On the other hand, there is the case of the psychological and emotional disturbances owing to the death of their son a while back. Currently, Henry is admitted in a hospital setting, and the wife is living with the daughter-in-law. These events indicate a wide range of issues going on in Henry’s mind. As such, the nurse needs to understand not just the cases of Chronic-Obstructive Pulmonary Disease but also the primary causes of the illness and the aggravating factors for this illness.   
On another aspect, Henry is disturbed by the imagination of being in a nursing home with preference to receiving care from his home together with his ailing wife. Further, Henry is worried of the costs of his treatment and that of his wife but he has been a member of a social benefits scheme which is strength for him (National League of Nursing, 2011). With the nurse understanding all these needs and the related problems, developing a treatment plan that will positively impact Henry will be easier, it should be one that caters for the physical illness, the psychological and emotional needs. Ignoring any of the needs will negatively affect the outcomes for all other needs (Rich et al., 2012).   
#2. Complex health needs   
Chronic patients especially at old age usually experience a host of problem concerning their health. These problems lead to a situation where the patient is limited in functionality and requires assistance from a family member for a pied social worker to perform basic techniques that are crucial such as walking, bathing, toileting and so on Ickowicz, 2012). While Henry does not seem limited at this time in terms of performing normal functionalities, he is thinking of his wife whose health has deteriorated to a point where she has lost memory and cannot perform basic functions without close supervision (DiGioia, 2014). Henry, in this case, is the secondary patient with complex health needs. Currently in hospital, he wishes he would go back to care for his wife as soon as possible.   
The emotional, psychological and physical strain on Henry could easily overwhelm him especially if the nurse discharges him without a care plan that integrates as assistance for this couple. Henry is motivated and hopeful about getting well, for the nurse thus it is right to keep this motivation high by actively engaging Henry in developing his care plan and one that will not sideline the care for his wife with whom they are so emotionally attached (Rich, et al., 2012). Henry reckons that he is at times forced to lose patience with Ertha especially because of her memory loss and a post-traumatic experience of her son’s death. These adverse secondary effects are what the nurse should seek to place barriers so that they do not impact negatively on the care process.   
#3. Care coordination   
Henry and his wife are essentially in a situation where there is a need for a collaborative approach from specialists in healthcare and the nurse to achieve positive outcomes and prevent the occurrence of more complications regarding the care process. The complexity if Henry’s situation cannot be adequately handled in the Emergency room or long term care without focusing on the more pertinent needs such as communication and emotional support (Rich, et al., 2012). As such, to avoid the likelihood of fragmented care and medical errors since Henry is experiencing a wide range of illnesses, it would be appropriate that the nurse seeks more time with Henry. Upon realizing his needs, they can develop an overall care plan essentially one that will involve a family member or a paid social worker who will accompany Henry back home and help him and his ailing wife. This help will encompass spiritual and physical support as well as ensuring adherence to medication and therapy prescribed.   
#4. Patient care processes.   
In many cases, the complexity of care tends to overwhelm nurses due to issues such as the patient’s social vulnerability multiple chronic and acute-physical health problems, and the multiplicity of care providers involved in the care process Ickowicz, 2012). This may subsequently affect the nurse’s or physicians routine work schedules and as such, the care provided to other patients. In a bid to avert these limitations, nurses need to focus on four key areas including comprehensive needs assessment, individualized care plans, communication and monitoring as well as facilitating access ability to required care (Rich, et al., 2012). In Henry’s case, the comprehensive needs assessment plan encompasses his wealth, that of his wife and the continued functional limitations owing to health problems and age.   
The individualized care plan will involve a focus on the behavioral aspect of Henry’s health including his frequent cases of breath shortness a situation that could be attributed to his smoking habits and poor dietary planning. However, all these depend on the availability of a communication platform between the nurse and Henry’s. This implies that the nurse should focus on developing a working relationship so that it is easier to unearth the developments of the care plan adopted and the related outcomes (Ickowicz, 2012). Henry is destined to make several demands as regard the process and setting of care he would wish to have. As such, the nurse should be in a position to help Henry make an appropriate decision regarding the care setting that would satisfy his overall needs.

## References

DiGioia, A. M. (2014). Putting Patients at the Center of Care: Start by Shadowing [Video file]. Retrieved from https://www. youtube. com/watch? v= 8SwL-imESQs&feature= youtu. be   
Ickowicz, E. (2012). Patient-centered care for older adults with multiple chronic conditions: a stepwise approach from the American Geriatrics Society. Journal of the American Geriatrics Society, 60(10), 1957-1968.   
National League of Nursing. (2011). Advancing Care Excellence for Seniors: Case 3 Henry Williams. Retrieved from http://www. nln. org/facultyprograms/facultyresources/aces/henry. htm   
Rich, E., Lipson, D., Libersky, J., & Parchman, M. (2012). Coordinating Care for Adults With Complex Care Needs in the Patient-Centered Medical Home: Challenges and Solutions. Rockville, MD: Agency for Healthcare Research and Quality.