Flexing Your Core – Domain 4 Comfort and Quality of Life
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Resources:

BCCPC Symptom management guidelines: **https://www.bc-cpc.ca/publications/symptom-management-guidelines/**

Case Study:

Mrs. Lin is at home, enjoying time with her family. So far, she has been able to dress and do the household cooking herself.

Over the past few days, she has noticed she is getting more tired. When climbing stairs to her bedroom, she has to pause several times. She has stopped showering and does a sponge bath instead.

Her family is worried she seems "down" and doesn't laugh like she used to.

Case Study Questions & Discussion summary:

Thinking about your role...

1. **What questions would you want to ask Mrs. Lin and her family?**

   - Social interaction – has family come to see her? What is her engagement level like?

   - How did she feel these days?

   - Asking her what has she noticed about her health and life changes?

   - Has she been to her doctor recently?

   - Asking more around what's changed for her?

2. **What would you suggest to help her with fatigue?**

   - Having a regular nap. Asking if she is getting enough rest?

   - Are you short of breath?

   - How are you managing your energy?

   - Asking if she would be open to support. Any equipment that would be helpful in her house

3. **How could you support her individual and family wellness?**

   - Encourage family to help her connect with friends – phone, video call, ways to connect with others

     - Ask her who makes you feel joy? Who makes you feel connected?

- Asking how can her family support her for meals on wheels or home services?

- Asking what would help you?

- Does family need support in some way?

4. **Are there other team members you would like to bring into Mrs. Lin's care? (could be formal or informal)**

- Social worker, OT, spiritual care, hospice volunteer

- Ask if she belongs to any faith

- Respite care

- Social prescribing - Volunteers that visit assist with some tasks such as grocery shopping etc and just friendly visitors

- Social visiting/friendly visitors/counselling

Group Discussion:

Create a care plan together for each team member to contribute to Mrs. Lin's comfort and quality of life

Person-centred goal of care: to stay at home and enjoy time with family

1. Health Care Assistant:
   - Asking if it would be helpful to assist with bathing
   - Bed, linen change – asking if that's something she would feel comfortable with

2. Social worker or counselor:
   - SW often support family and client – providing them with resources
   - Explore her coping and stressors
   - Helping with plan of care – heading in direction she wants. She may be able to talk with SW/counsellor about how's she's feeling without burdening family – caregiver burnout may be a part of this
   - If Mrs Lin's native language is not English, perhaps employ a translator sense could express herself fully to the SW or a counselor. – can be a challenge to find in health authorities sometimes

3. Nurse:
   - Revisit GOC, assess symptoms
   - Reviewing medication, educating family
   - Nurse is usually the one in first and getting more info, liaison with physician
   - Can escalate care if need

4. Physician:
   - Review medications, depression /mood changes risks?
   - Investigate causes of fatigue
   - Write referrals to sub specialists
   - Infection (ie. UTI)
   - Need for RT/bloodwork/other tests if needed

5. Allied health:

- Dietician – she's cooking but is she eating properly

- OT/PT for home modification or physiotherapist need

  - Safety assessment

  - Is there a bedroom on the main floor, raised toilet seat maybe?

- Art of music therapy – what brings her joy?

- Massage therapist

-These roles are all different pieces of the puzzle. Important to support each other as care providers and work towards person-centred care

-We are likely doing some education with Mrs Lin as well. This could be the time we start to have bigger conversations. ACP if needed / SIC and documenting these