

In my second meeting with the Barton family in the winter, I focused on the lifespan development group of late adulthood individuals who are over fifty years old. The late adulthood stage is often considered as the 'Golden Ages' in which some individuals consider as their retirement years and their opportunity to enjoy life, but often individuals struggle with mobility and independence health issues that may influence change in their lifestyle. For this lifespan development group, I will focus on the great-grandmother of the Barton family's great-grandchildren. The Barton's great-grandmother has her granddaughter's family living with her at her home and acts as her care-takers.

Follow up

Before I conduct an assessment and refer services to accommodate the great-grandmother's needs, I will do a brief follow-up with the referrals I suggested to the father, mother, and boyfriend. The health of the father of the Barton family has worsened since the last meeting. He had a medical emergency recently causing him to go to the hospital for several of days. His family reports that the doctor explained that he had a liver failure and was in a coma for ten days. He has not taken any of the referrals seriously, but with his latest medical emergency he has greatly considered his alcoholic consumption. The mother of the Barton family has not followed-up on the referrals I recommended, but has increased her time at home to spend more time with her family. She had has also recently started sharing her bed at night with her youngest child. The Barton's oldest daughter's boyfriend has yet to follow-up on the referrals I provided him during the last consultation. He reports that is he continues to be working fulltime on his family's seed farm. (unfortunately realistic that folks may not follow up with all [or even any] of our suggestions...)

Comment [jk1]: Good idea to point this out

Assessment and Identified Needs

The ninety year old great-grandmother has poor health with signs and symptoms of dementia, but is able to manage many of her activities of daily living. Dementia is a “progressive loss of cognitive capacities such as memory and judgment that affects some aging individuals” (Sigelman & Rider, 2008, p. 491). The Barton mother and sixteen year old daughter act as the grandmother’s primary caregiver. Due to the mother’s chaotic work schedule, the great-granddaughter has taken over most of the caregiver role and struggles to balance her caregiver task with school work. The great-granddaughter ~~worry-worries~~ about her great-grandmother’s decrease of appetite, lack of comfort at night, and often sleeps on a mattress on the floor beside her great-grandmother’s bed to conveniently assist her throughout the night. With the holiday seasons and the great-grandmother’s ninetieth birthday, the Barton family is struggling to make ends meet and tend to the house. The great-grandmother enjoys her time with her family and does not like the added attention of celebrating her birthday. The grandmother is in need of medical, interventions to deal with her signs and symptoms of dementia, companionship, support group, clothing, nourishment, source of income, housing, and transportation. [Nice recap here](#)

Comment [jk2]: May be easier to simply refer to her by name

Comment [jk3]: But she seemed to enjoy it overall...

Referrals and Anticipated Outcomes

The great-grandmother is in need of assistance to meet her various needs. She is fortunate to have her granddaughter’s family as support allies, but needs support from local agencies and organizations to better accommodate their needs they are unable to meet on a daily basis. I have suggested that she apply for Department of Social and Health Services (DSHS) who provide an array of services to adults and seniors; including medical programs, legal planning considerations, housing modifications and options, and in-home care. There are also several local organizations that provide other beneficial services.

Medical

I would strongly advise her to apply for DSHS medical benefits to seek assistance in coping with her signs and symptoms of dementia. The three medical program are Categorically Needy Program, Medically Needy Program with no spenddown, and Medically Needy with spenddown which each have a limit of \$2,000 per individual (Age, blind, and disabled medical programs, 2011). A spenddown is “the amount of medical expense you must incur within a specified period of time to qualify for Medically Needy benefits. Spenddown is required only if your income exceeds program limits” (Spenddown, 2011). I anticipate her having some issues in applying for DSHS services because she does not report having any source of income which is one of the requirements they request a proof of to receive benefits. If approved for medical benefits through DSHS, I anticipate her receive adequate assistance to better cope with her medical conditions and her family’s concerns about dementia. DSHS also provide free transportation to preapproved medical appointments covered by their medical program (Medicaid Transporation, 2011). [Great advice here](#)

Housing Options and Caregivers

The greatgrandmother reports enjoying spending time with her family, but with her increasing medical conditions she needs to consider other housing options and potentially seek more adequate housing to meet her condition. DSHS offer state and non-state-licensed residential care option; including adult family homes, boarding homes, nursing homes, retirement communities, and continuing care retirement communities (Other Housing Options, 2011).

I anticipate her being reluctant to move out of her home, but she does have the option [of](#) ~~in~~ staying in her own home with her family, [and](#) she could consider hiring a caregiver. There are

various caregiver agencies that provide companionship by certified nursing assistance, such as Visiting Angels. Visiting Angels provide non-medical home care services in a familiar surrounding and is partnered with the Alzheimer's Foundation of America (Visiting Angels, 2011). [Good alternatives](#)

If she and her family insist on continuing being her caregiver, they could inquire in Able Data products that could ease their caregiver roles. Able Data provide various home modifications including handlebars and alarms (AbleData Products, 2011). Since her greatgrandchildren and granddaughter are not home at all times, I highly recommend her to inquire ~~in~~[about](#) a personal emergency response system (PERS) through DSHS in which is personal device that will contact a response center in case of an emergency (Legal Information, 2011). I anticipate the Barton family being reluctant to these modifications if they are not able to receive them at a discounted cost and/or if they are unable to purchase these products. With the recent event of the greatgrandmother going to the neighbors house to get a message to her greatgrandchildren, I would prioritize getting a PERS device if they are unable to acquire any of the home modification products.

I have also referred great-grandmother and her family to either contact Habitat for Humanity of Island County in regards of assistance with either small home modification projects and/or inquiring in partnering up to acquire a Habitat home. If selected by the Family Selection committee, I anticipate the family having adequate housing to meet all their needs especially the great-grandmother's daily needs.

Companionship

The great-grandmother report that she has a good support system at home, but it does concern me does not report to interact with anyone other than the Barton family. I have referred

her to the Oak Harbor Senior Center to socially interact with individuals in her lifespan development stage, join a support group, and to become involved in activities to increase her sense of personal accomplishments (Senior Services, 2011). The center provides an array of services to their participants; including fitness classes, trips, support groups, classes, and community involvement. The center is in charge of the Meals on Wheels program, where she can inquire in having meals delivered to her home when she is unable to join them for brunch. By becoming involved with the Oak Harbor Senior Center, she will challenge her mind set of aging and become self empowered to enjoy her life (Senior Services, 2011). The brain is continuously enduring changes and it is “key to remain intellectually active – to create an ‘enriched environment’ for the brain...old brains can learn new tricks” (Sigelman & Rider, 2008, p. 129). The great-grandmother can challenge her to participate in the various programs offered by the center to stimulate her brain functions. By acknowledging that she has signs and symptoms of dementia, joining a support group will allow her to debrief about her feelings of the disease and how others have cope with loved ones who are also experiencing dementia. I anticipate her interacting with her peers even to brag about their families, but I do anticipate her being reluctant to get out of the house and interact with others because she had recently turned ninety years old. ~~By acknowledging that she has signs and symptoms of dementia, joining a support group~~

Clothing & Nourishment

The great-grandmother may not require new trendy clothing, but adequate clothing to meet her needs to get through the seasons could be acquired through local thrift stores, churches, and the non-profit organization Rice Bowl who provider free clothing to the community. There are also several food banks, churches that provide community meals, and community gardens where they

Comment [jk4]: Great idea to have some socialization, etc...

Comment [jk5]: Ha!

can get hold of other nutrition items for their family. I have her to refer to DSHS to apply for food stamps. If not approved by DSHS for food stamps, she could inquire with Oak Harbor Senior Center about their Meals on Wheels Program which will deliver freshly made meals to older adults. I anticipate her at having a well-balanced meal through these resources and adequate clothing to get through the winter season. Good, practical suggestions

Legal Planning – great idea!

Death and declining health is often a hard concept to comprehend, but since the Barton family is living their great-grandmother she should consider utilizing the legal planning services offered by the DSHS. Legal planning includes advance directives as to what she may want in a medical emergency, a variety of wills that will define their wishes after they pass, and guardianship to determine who has the power of authority if she is unable to advocate for herself (Legal Planning, 2011). I anticipate the great-grandmother struggling to cope with the concept of death, but I do encourage her to consider what will happen to her family when she does pass. I would emphasize that having a plan will ease the families distress on who gets what. If she utilizes these services offered by DSHS her advance planning will help her family determine what she wanted in the case that she is unable to advocate for herself.

Plan of Action

I will work with the Barton family to overcome their adversity throughout the next few months to hopefully prevent any future problems that may delay them to living a better lifestyle. I will follow-up on the referred services for the great-grandmother of the Barton family as well as focusing on Infancy/Childhood during their next consultation. I will assess the Barton's youngest child and refer appropriate services to meet her daily needs.

Nice job of concisely explaining the circumstances, and coming up with very useful suggestions here – I think they could be very helpful to the whole family. Nice job of addressing the element/requirements of the assignment – a close final proofing may have caught some of the typos, but overall, some very useful ideas... 9

Reference

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