

Introduction

Families who are vigilant in monitoring signs of neglect or abuse noted below and voicing their concerns are apt to receive more care giving attention. Sons and daughters need to be constant advocates, persistent observers, and relentless protectors of their vulnerable parents. The professional staff generally respects a family's attentiveness and admire their devotion.

Family members need to frequently visit and establish strong rapport with caregivers. Be careful to avoid offensive postures that will only alienate the caregivers. Instead encourage a constructive approaches to your loved one's care among staff and family members.

Be sure to report any of the following observations or concerns immediately to the attention of Director of Nursing, appropriate nursing staff, and physicians in the home where your loved one resides.

1. Review the Plan of Care (POC)

Ask to see **Plan of Care**, review carefully, make copy and ask to have it revised if not addressing all needs. Monitor during visits that staff is following care plan. Ask nursing aides actually providing care if they have seen the plan of care and if it is reviewed with them regularly, or when any changes are made. The tasks outlined in the plan should be logged on Assignment sheets by the person completing the task

2. Watch for Weight Loss or Gain

Visit at mealtimes to see if eating OK and getting any necessary assistance from staff. Watch for weight loss or gain especially by inspecting upper arms and calves. Weekly weights are monitored by staff and review results noting significant changes in a short time period, usually 2-4 weeks.

3. Monitor Water Intake

Check if drinking enough water by looking for **signs of dehydration**. Evaluate skin tone by pinching forehead to see if skin makes a crease that is slow to disappear. Look inside mouth and lips for signs of dryness. Check to see if water pitcher is regularly full and accessible.

4. Advocate for Pressure Sore Prevention

When a patient is at risk for pressure sores (also known as bedsores and decubitus ulcers) due to limited mobility, check to see if the staff is following preventive measures such as proper cushioning (egg crate or air mattress on beds and chairs) or padding of high risk areas (heel and elbow protectors) and frequent positional changes especially when in bed or chair for long periods of time.

If Decubitus is present the Patient should be receiving decubitus care.

5. Look out for Pressure Sores

Check for developing bedsores or any signs of skin breakdown. Inspect heels, elbows, sacral/coccyx area (above buttocks also known as tailbone), upper back ear cartilage, and any bony areas such as shoulder blades and base of neck. If see any redness, press and see if blanches or whitens. If remains reddened, it may be start of a pressure sore that requires specific care.

5. Monitor Toileting and Incontinence

Check for toileting problems such as onset of incontinence. Note whether staff available to assist to bathroom when needed and on a regular basis. If adult diapers are used, determine whether usage is based on need or convenience. Check if diapers changed regularly by looking for reddened, irritated skin and rashes in diaper area.

6. Keep tabs on Physical Therapy

If getting physical therapy or any other special therapies, check to see if schedule is being followed. Attend a therapy session to observe what therapy is actually provided and whether progress noted over time.

8. Make Sure Activities are readily available

Check to see if staff follows posted daily activities schedule and if residents are encouraged to participate and given necessary assistance in order to participate

The Homes are required to keep attendance records for the patients.

Ask for the records. Activities are supposed to be tailored for the patient's preferences. Example: TV shows or Arts that they enjoy.