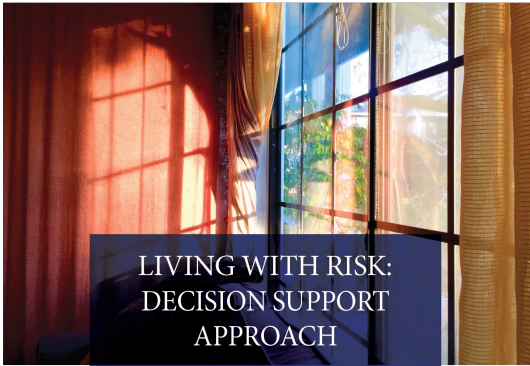




**LIVING WITH RISK:
DECISION SUPPORT
APPROACH**

INSTRUCTION GUIDE FOR CLINICIANS
WORKING WITH OLDER ADULTS

**LWR: DSA
STEP 1**

UDS Université de Sherbrooke

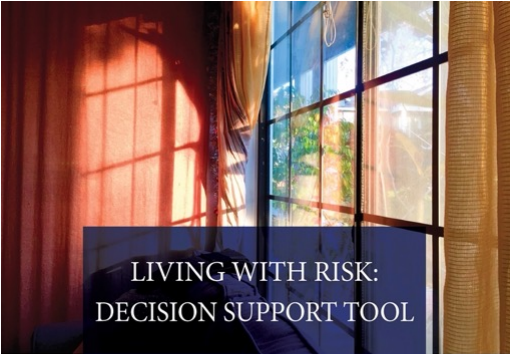
Centre de recherche sur le vieillissement
Research Centre on Aging

Queen's UNIVERSITY

CIHR IRSC Canadian Institutes of Health Research
Instituts de recherche en santé du Canada



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**LIVING WITH RISK:
DECISION SUPPORT TOOL**

INSTRUCTION MANUAL FOR CLINICIANS
WORKING WITH OLDER ADULTS

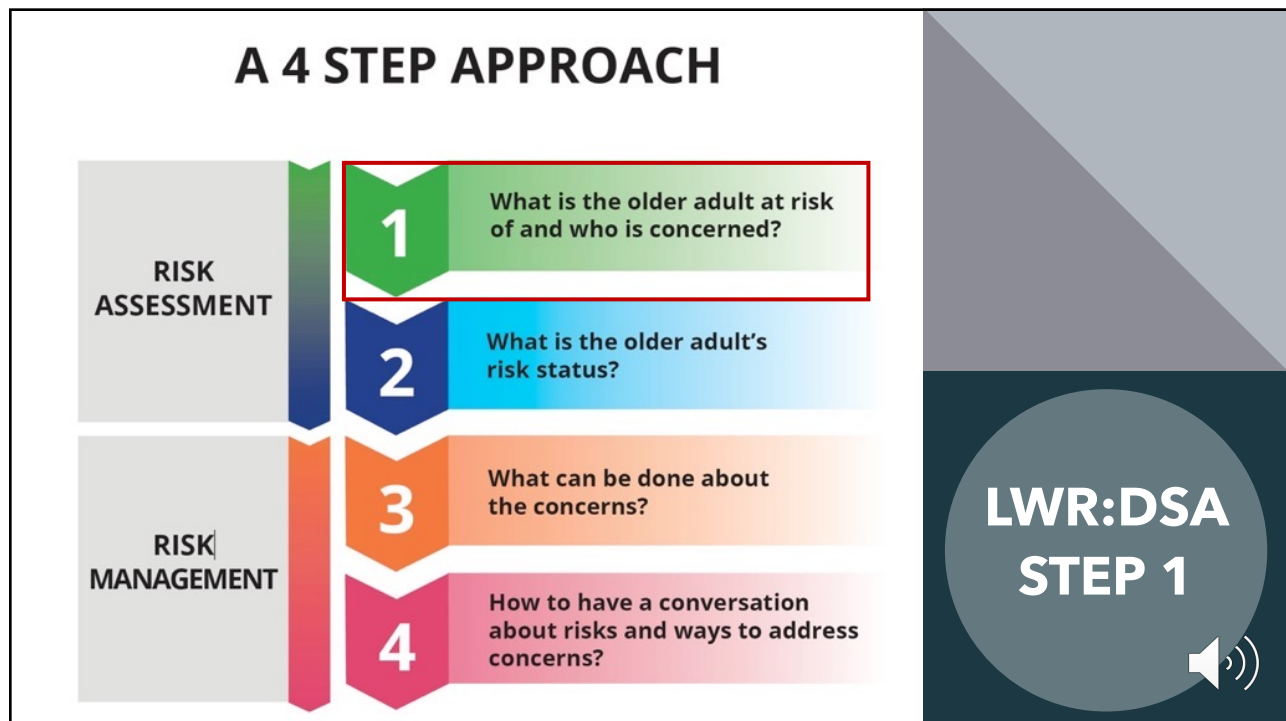
**SUPPORTING
LIVING WITH RISK**



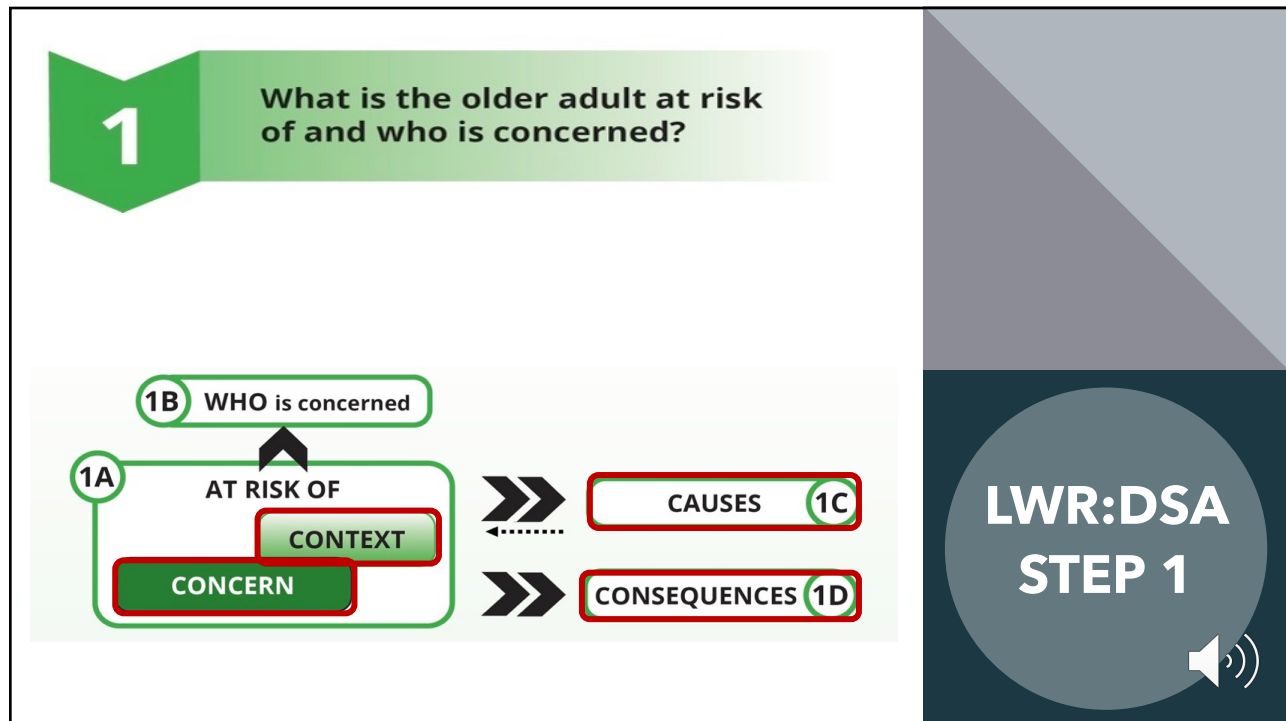
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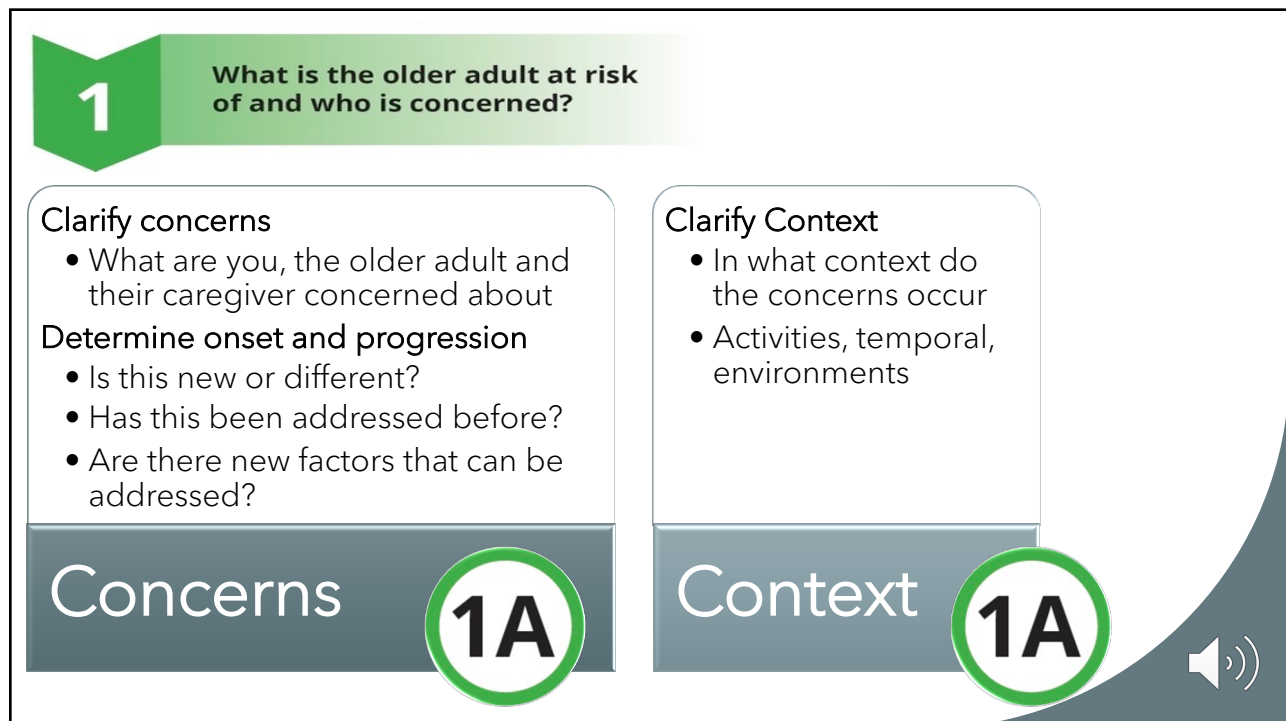
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1

What is the older adult at risk of and who is concerned?

- Is there a **change** in
 - deficits
 - health
 - environments (social or physical)
 - personality (values)
- Is the cause treatable?
- Can the environments be adapted or better supported

- Are they related to health?
- Are they related to quality of life

Causes

Consequences

1C

1D

🔊

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Meet Sam

85-year-old bachelor referred by out of province brother for assessment of cognition, mood, decline in function and safety.

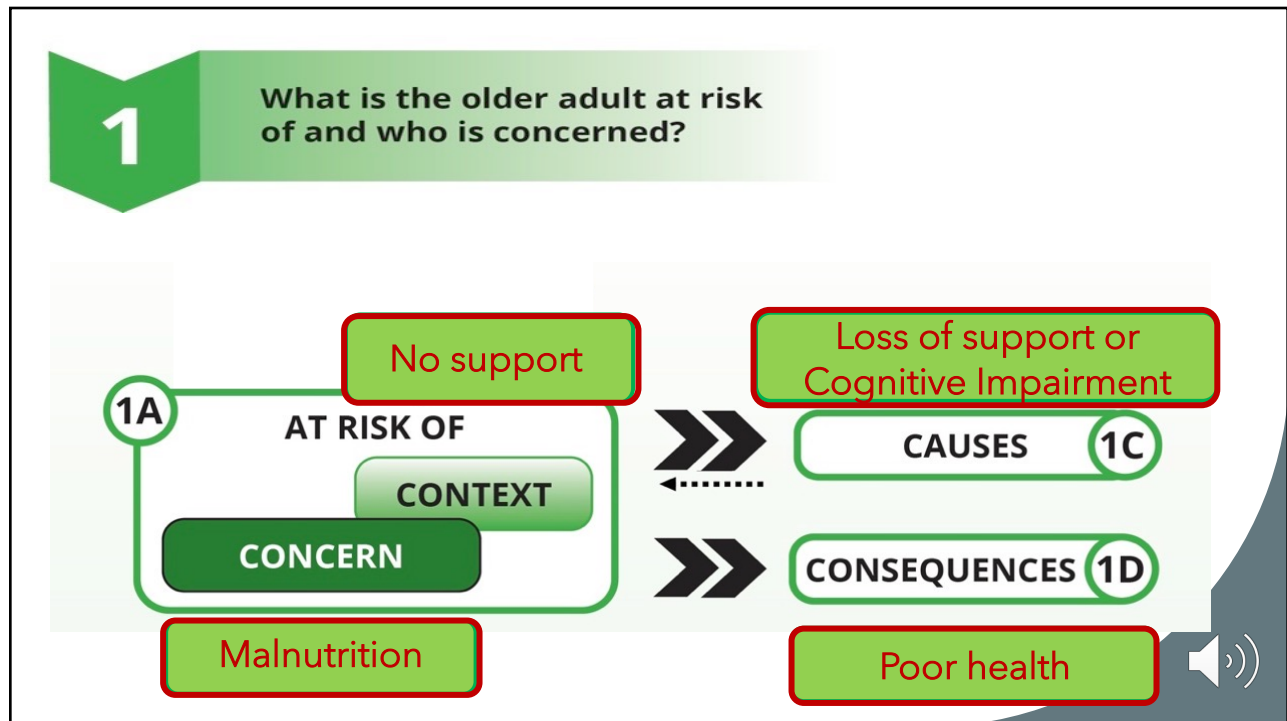
Lived with sister since he was 65 but she passed away a few weeks prior to the referral. During the assessment

- Client is unshaven and food-stained clothing
- Tearful, admitted to SI,
- Poor appetite, weight loss, minimal food in fridge
- Home is dirty, dilapidated, grass 4-6 inches long,
- Unpaid bills, could not find will, manage estate
- 15/30 on the MoCA

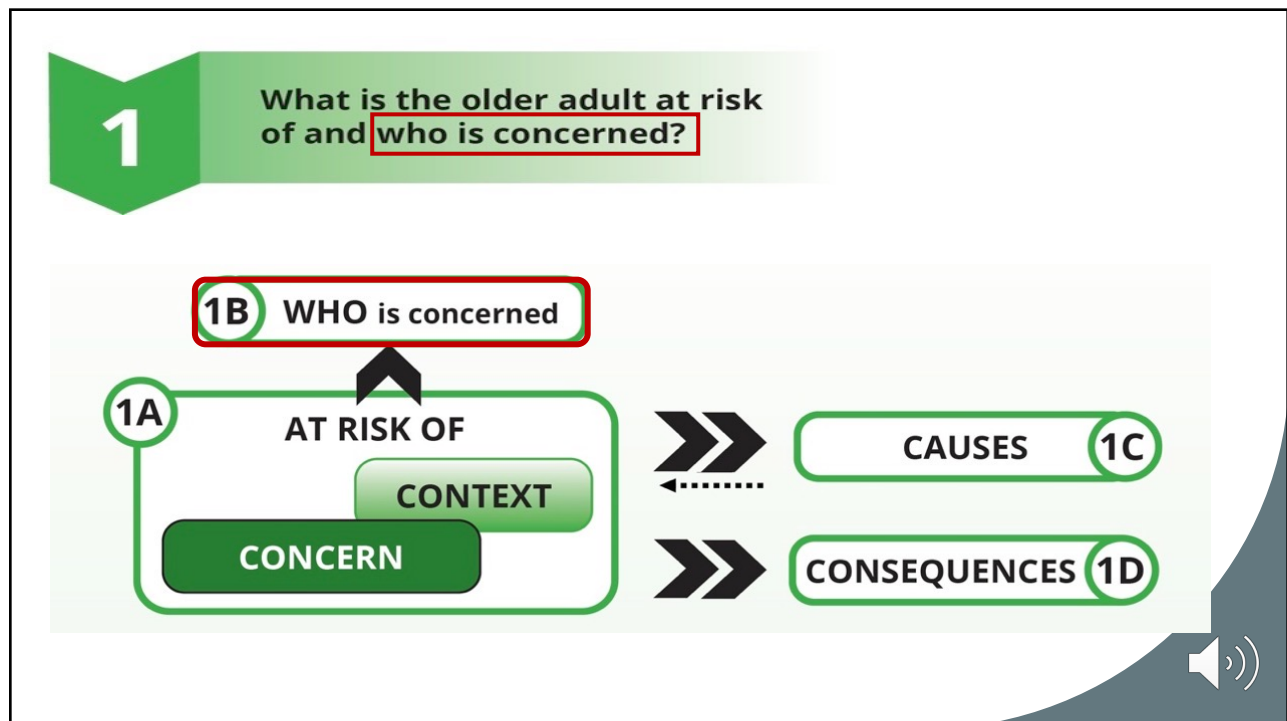


🔊

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PERCEIVING RISK DIFFERENTLY

*'We don't see things as **they** are, we see things as **we** are'*

Anaïs Nin 

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PERCEIVING RISK DIFFERENTLY¹

Our perceptions and tolerances of risk

- Informed by
 - Life history (previous occupations)
 - Psychological processes
- Shaped by
 - Experiences and situations and emotions 

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1

What is the older adult at risk of and who is concerned?

1B

PERCEIVING RISK DIFFERENTLY

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OLDER ADULTS

Risk Identification

- Rare as it is often related to values and activities that are important to them, coherent with personal identity^{1,2}
- More concerned with maintaining independence rather than focusing on risks¹
- Risks related to loss of identity³
- Risks related to outside of themselves an unsafe neighbourhood⁴

Risk Taking²

- Deciding to take a risk – and deciding when to give up
- Try something as risky as long as you can and before it is too late
- Constantly concentrating and controlling everything you do – otherwise you are done for
- Do it to be who you are through another's eyes
- Do it to correspond to social norms and avoid stigmatisation

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CAREGIVERS

Risk Identification

- Emphasis on the present³
- Impact on relationships³

Risk Mitigation

- Continuum of acceptable to unacceptable risk⁴
- Tipping points differed from clinicians⁵
 - QOL, psychosocial wellbeing
- Accommodate by knowing the person⁵



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CLINICIANS

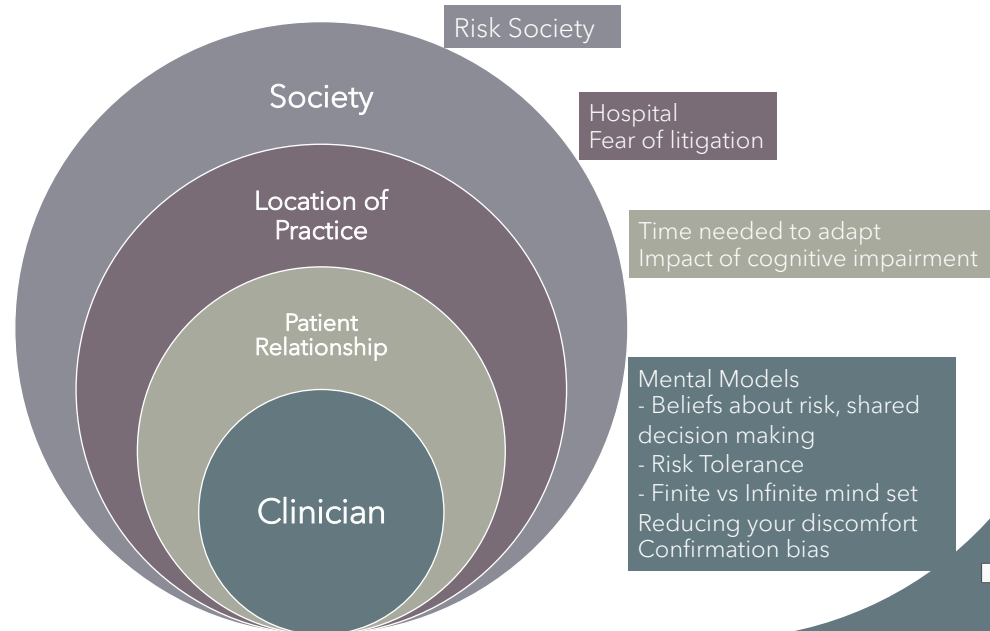
Risk Identification

- Emphasis on the negative consequences⁶
- Emphasis on the physical consequences⁶
- Emphasis on the future⁴
- Overestimate risk⁷
- Focus on extreme harms⁸
- Paternalistic⁸, risk averse⁹



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CLINICIAN REFLECTION



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