Support for Older People with Intellectual Disability in Group Homes:
A Manual for Group Home Staff

MANAGER’S GUIDE
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INTRODUCTION
This Manager’s Guide is designed to help you work with your staff as they learn to use Support for Older People with Intellectual Disability in Group Homes: A Manual for Group Home Staff. We hope it will help you to assist your staff as they support residents who are experiencing health problems. The Manager’s Guide can be used to help orient new staff, to initiate conversations with current staff about residents with health conditions and to assist staff who might be concerned or anxious about resident health conditions. This Manager’s Guide has several components:

- Case studies that will walk staff through problems commonly experienced by older people.
- Suggestions on how to best support residents.

The case studies are based on real experiences of people living in group homes. Each has two parts:

- A case study for group home staff that includes questions to think about, and
- A manager’s version of the case study that includes questions and suggestions to guide you in your discussions with staff.

Where should I begin?
Supporting people with chronic health problems can be very challenging. When everyone is working together, things go much more smoothly. Sometimes there is inconsistency across the levels of the organisation, or even among staff in a single home, about what the policy is and what can be done to help support residents with health conditions. Lack of clarity about what the options are, what the commitment is and who is responsible for what can make this difficult to achieve. Discussions between group home staff and their managers/supervisors could include the following questions.

- What is the organisation’s commitment to people who are ageing?
- What needs to be done to fulfill this commitment?
- What is the role of group home staff, group home managers and supervisors and the organisation?
- How confident are staff in supporting residents with health conditions?
- Do staff have the knowledge needed to support people to age at home?

One way to get started is to review one chapter at a time with staff. You might ask staff to read the first section of the Manual on normal changes as a person ages and talk about whether they see some of these changes and how the changes might be experienced by current residents. Each of the first four chapters is very short, only a few pages, so they can be read quickly. You might even consider reading a chapter out loud at a meeting. Ask staff to think about specific residents and what these age related changes might mean for them. It’s probably best to discuss only one chapter at a time. What is most important is discussing how staff can use the information to help individual residents.
Chapter 1: Normal Changes as a Person Ages
Understanding the effects of ageing is important for many reasons. First, much can be done to support people experiencing age related changes to make the changes easier to live with. For example, people with age related changes in their vision could benefit greatly from modifications to the environment and visual aids. You might want to start by asking staff to use the Manual to address the following questions.

1. What are some changes that occur as people age?
2. What are some difficulties created by age related changes to vision, hearing, skin, muscles, bones, stomach and intestines?
3. What are some things that group home staff can do to help people experiencing age related vision changes?
4. How often should older people have vision and hearing tests?
5. What would you do if the family or GP did not think a vision or hearing test was necessary, but you felt there was a problem? Ask staff to identify when they would advocate for further assessment of a resident’s vision or hearing changes. What would you do if one of the residents had a sudden change in vision? Hearing?
6. How can you help prevent falls in older people? Are there any people in your home who might be at risk of falls?
7. What are some things that you can do for people who are having trouble sleeping?
8. What screening tests are important for older people?

Learning will be enhanced if staff can apply what is in the description of normal ageing to some of the residents they know well. Encourage staff to think about these changes in relation to individual residents and to identify some things they can do to help a particular resident. Learning, and changes in how staff approach residents, are much more likely if staff have the opportunity to apply the information to residents they know personally.

There are many tips listed in this chapter. The most effective way to use the Manual is to think about residents who have experienced some of these changes and discuss how some of the tips might be helpful for specific residents already living in the group homes.

Chapter 2: Building Successful Partnerships
This section draws on many resources and research studies. The best way to use this section with the staff is to apply it to a resident in the home. Discuss with the staff whether they have had any difficulties communicating with health professionals or family members and what might have happened to group home residents who were hospitalised. Health care delivery environments can be frustrating and confusing. This section provides some tips on making visits with health professionals a better experience for everyone which is more likely to result in good care for the resident with intellectual disability (ID). Ask staff to discuss:

1. What happens when you have to wait for long periods of time in a doctor’s waiting rooms?
2. What are some things that would help the visit go more smoothly e.g. if only the people in the office would listen to you?
3. What happens when family members take residents to appointments and you don’t really know what happened?
4. What would you do if recommended screening was not being done at a resident’s annual GP appointment or if some, but not all, screening was being done?
5. What will you do to ensure that the family conveys correct and comprehensive information to the GP and that the family brings back information to the group home that staff need to know?