

## People are Talking, and That's a Good Thing

I'm blessed at Lathrop with the opportunity to hear a lot of people's stories. They are not always easy to hear, and I'm sure in many cases, not easy to tell. Sometimes, as with the Wellness annual home visit, these are stories I pursue, as a process of helping residents reflect on how life is going. Many of the things I hear come to me unsolicited as reports, updates or concerns about a resident's well-being. These are the workings of our community connections, the vibrations that travel along our "web of care." Often it is a neighbor who sees a change or observes an event that might suggest someone is in need of help at home. I frequently hear from resident's children or others in their social or care network who have questions about how best to support a resident's changing needs. And of course staff are here to pay attention. Their eyes and ears help gather information when something has happened or when the team needs to step in to address a possible problem or celebrate a happy turn of events.

Yes, people are listening, and people are talking. It's clearly part of my responsibility to speak up when there is an issue of concern. When word comes to me of someone "in the soup" I try to reach out directly to see what support might be needed. If needed I will try to contact hospital or rehab case managers to help consider issues around returning to life at Lathrop. I look for insights from VNA clinicians. And sometimes I call sons and daughters to see if and how they might be following life changes in the person who is their loved one and our neighbor. And it is human nature for neighbors to talk too, to each other and to me. In most cases, beyond a general tendency to be curious, I feel strongly that people are looking for ways to help.

This is where our life in community can get uncomfortable. As adults we feel that we are able to manage our own business. We've made our own decisions, good and bad for many years and living independently means continuing to do that. The implication of course is that should we need help we will ask for it, and further, that our business is our business and other's discomfort with that is their business. But from where I stand there are problems with this perspective. Isolation, cognitive decline and denial of emerging safety risks are one of the hard paths that most people would hope to avoid. Perhaps some residents would risk that road if it meant walking it under their own volition. But none of us do truly walk it alone. We are in community for better or worse. We benefit from the shared social benefits of community- having people who are concerned with our well-being and having people to care about in return. These are our allies who can sometimes see the things we cannot or will not.

In practice I always urge neighbors to share their concerns directly with their friend or neighbor. This can be understandably awkward but honors the nature of a relationship. While it takes courage, for me a supportive relationship suggests that each be able to speak their truth and allow the other to be free in how they accept or reject that view. This goes for family relationships of course, which we know can come with both deep trust and lots of complex history. Again, in practice, I always try to speak directly to a resident when I have concerns and seek their permission before I reach out to family or care partners. Here's where the challenge can come. I have found that it takes insights from many voices to build a truly accurate picture. (I can't count the number of times a doctor's office has asked me the VNA or Lathrop nurse to confirm what medicines their patient is taking.) While the perspective and preferences of the person living the change is clearly central, we as a community of witnesses, allies and

caregivers also have some stake in helping a situation to the best solution as possible. The choices we make about our own life affect the life experience of those woven into our life.

In regards to sharing medical information, the nurses and wellness team are governed by the medical privacy regulations. As a staff we always default to seeking permission before sharing any information within the community. But it's a grey line when it involves reassuring friends and neighbors about the status of people who they have come to know and care about. People in community see and they share. We have opinions, some of which are of great value, some of which perhaps lack strong insight. But I like to believe they always come from a place of heartfelt concern. Yes people are talking, and all in all I believe that's a good thing.