# When There Is No Perfect Answer: Navigating Complexity in Older Adult Care

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# POLL

When you encounter a truly complex situation, what makes it complex?

a. Multimorbidity
b. Conflicting patient and family wishes
c. Managing risk and safety concerns
d. Limited resources and system barriers
e. Uncertainty about the “right” decision
f. Competing priorities

# Learning objectives

By the end of this session, participants will be able to:

- Describe factors that contribute to complexity
- Differentiate complicated from complex situations
- Apply a practical framework for understanding complexity
- Identify strategies to support collaborative decision-making
- Recognize practical approaches when no perfect solution exists

# Complicated vs complex

***complicated*** (adj.)
1. made up of intricate parts or aspects that are difficult to understand or analyze

***complex*** (adj.)
1. composed of many interconnected parts
2. so complicated or intricate as to be hard to understand or deal with

Dictionary.com

*All complex situations are complicated, but not all complicated situations are complex.*

# Complicated vs complex

| Complicated | Complex |
| --- | --- |
| Difficult to understand or manage | Difficult to understand or manage |
| May involve many moving parts | Involves many interacting parts |
| Expertise helps find the answer | Expertise helps navigate the situation |
| Cause-and-effect is usually knowable | Cause-and-effect is often unclear or evolving |
| Often has a solution | May not have a single best solution |
| Goal is to solve the problem | Goal is to move forward despite uncertainty |

# Complicated vs complex

Betty, a 79-year-old woman, falls at home and sustains a hip fracture.

↓

Clinical problem is clear

↓

Evidence-based treatment pathway exists

↓

Expertise helps determine the intervention

↓

Goal is relatively straightforward

Asaad, an 82-year-old man living with moderate dementia is living at home alone.

↓

Problem is not singular

↓

Multiple interacting factors influence decisions

↓

Expertise helps navigate uncertainty

↓

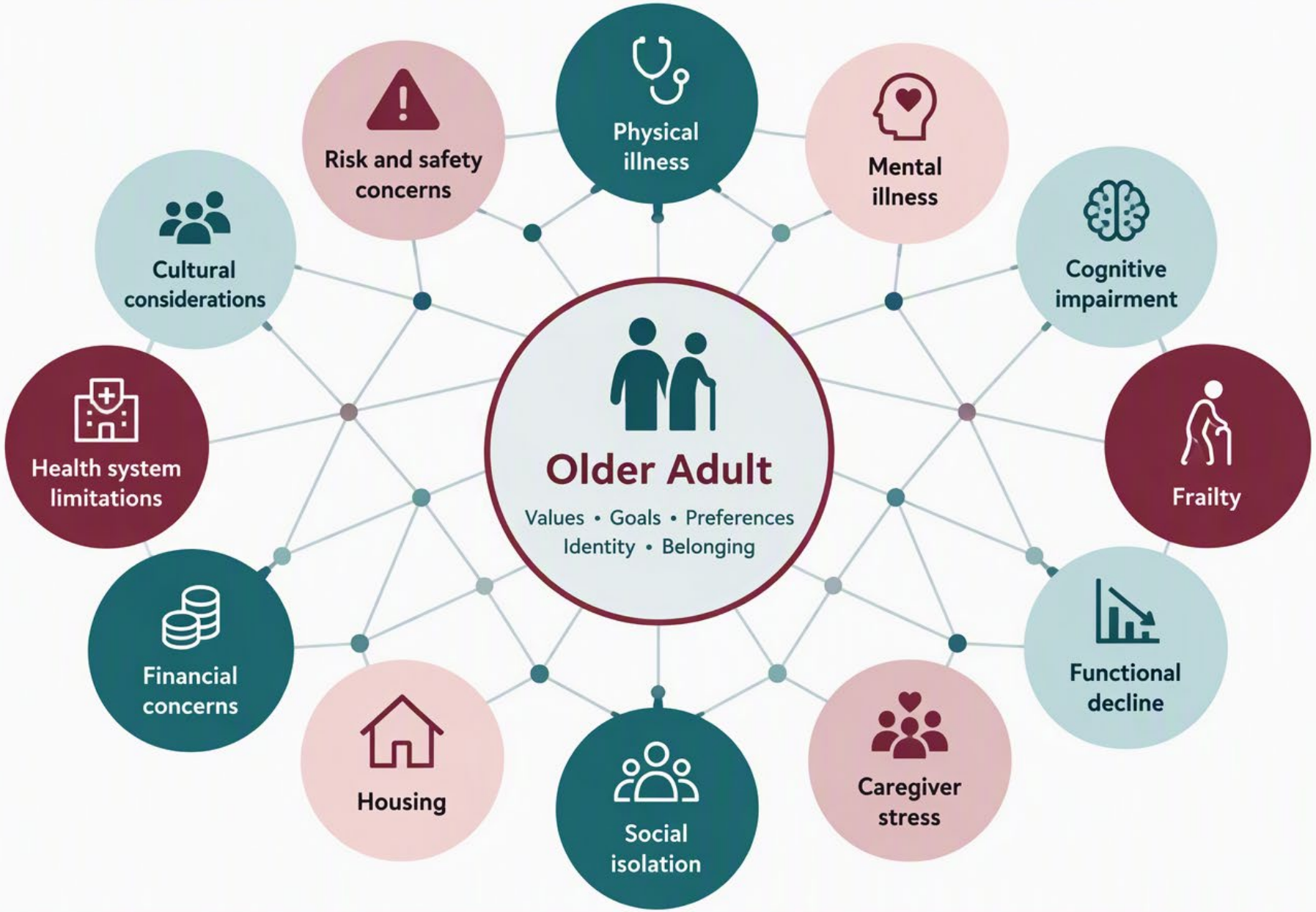
Goals may differ across stakeholders

- ✓ Wants to remain at home.
- ✓ Forgets medications.
- ✓ Occasionally leaves the stove on.
- ✓ Daughter believes he should be in LTC.
- ✓ Son believes more home supports should be tried first.
- ✓ Has capacity for some decisions but not others.
- ✓ Home care services are inconsistent (staffing and rural area).
- ✓ Family members disagree about acceptable levels of risk.
- ✓ Financial resources are limited.

Expertise helps us:

- Clarify priorities
- Explore risks and benefits
- Support shared decision-making
- Navigate uncertainty

# Why older adult care becomes complex




**Complexity often emerges not from one problem, but from the interaction between many factors.**

Each person's situation is unique, and these factors can interact, overlap, and change over time.

# Complexity in decision-making

**Where teams get stuck:**

*What should we do?*

vs

*What outcomes are we trying to achieve?*

| Stakeholder | | Desired outcome |
|---|---|---|
| Asaad | → | Remain at home<br>Maintain independence |
| Daughter | → | Reduce risks<br>Prevent a crisis |
| Son | → | Respect wishes<br>Maximize supports |
| Team | → | Support safety, dignity and quality of life |

# Case scenario

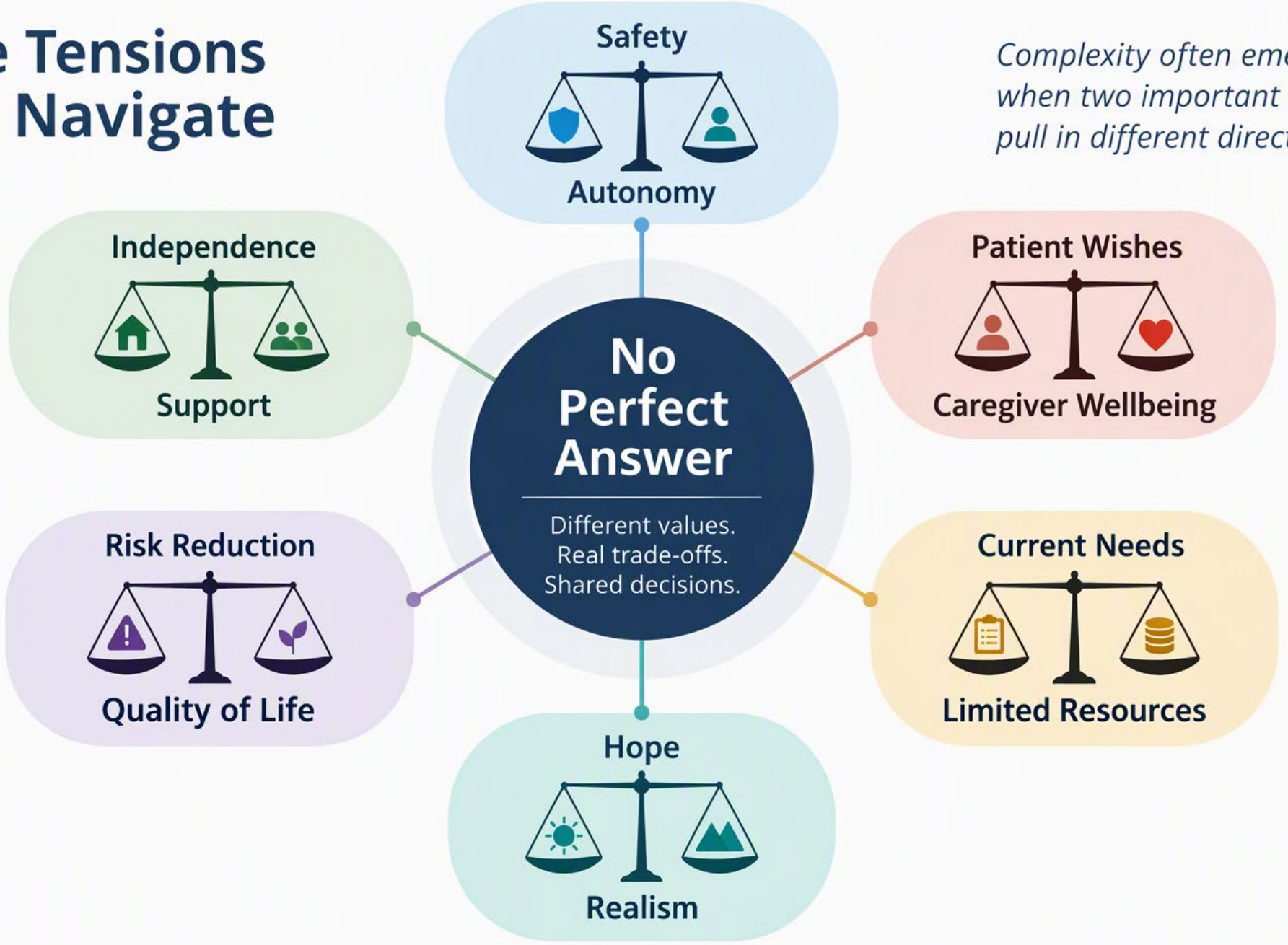
Alistair is a 76-year-old man living with Bipolar I Disorder

- ✓ Lives alone in subsidized housing
- ✓ Has a long history of mood instability, but has generally been well for several years
- ✓ Recently experiencing symptoms suggestive of emerging hypomania
- ✓ Has begun spending excessively and making impulsive financial decisions
- ✓ Sleeping 3-4 hours per night and reports feeling "better than ever“
- ✓ Declining psychiatric follow-up, stating he doesn't need help
- ✓ Daughter is concerned and wants the healthcare team to intervene
- ✓ Alistair insists he has the right to make his own decisions
- ✓ Property manager has reported concerns about conflicts with neighbours
- ✓ Limited informal supports available

# What makes this complex ?

# The Tensions We Navigate

*Complexity often emerges when two important values pull in different directions.*




COMPLEX SITUATIONS. SHARED PERSPECTIVES. MEANINGFUL NEXT STEPS.

# 3-Question template to navigate complexity

1. What are the **priority** concerns?

2. What are the **RISKS** and **possible contributing factors**?

3. What are the **actions**?

(Pieces Canada, 2020)

# Case scenario: 1. What are the priority concerns?

| For Alistair | For his daughter | For his healthcare team |
| --- | --- | --- |
| • Independence<br>• Autonomy<br>• Avoiding unwanted intervention | • Risk of relapse<br>• Financial loss<br>• Potential hospitalization<br>• Threat to housing security | • Emerging mood instability / signs of hypomania<br>• Deteriorating insight<br>• Increasing vulnerability |

(Pieces Canada, 2020)

# Case scenario: 2. What are the RISKS and possible contributing factors?

**R** Roaming

**I** Imminent harm: Frailty, Falls, Fire, Firearms

**S** Suicide Ideation

**K** Kinship Relationships (risk of harm to self or others)

**S** Substance use, Self-neglect, Safe driving, Security (finances, food, housing)

(Pieces Canada, 2020)

# Case scenario: 2. What are the RISKS and possible contributing factors?

| | |
|---|---|
| Physical | • Sleep disruption, substance use, medications, ?medical concern |
| Intellectual | • ?executive dysfunction, ?difficulty appreciating consequences |
| Emotional | • Emerging hypomania, anxiety, stress, loneliness |
| Capabilities | • Ability to manage finances, reduced med. adherence |
| Environment | • Lives alone, limited supervision, risk of housing instability |
| Social | • Limited support network, family distress, conflict with neighbours, reduced engagement with services / supports |

(Pieces Canada, 2020)

# Case scenario: 3. What are the actions?
## Investigations, Interactions, Interventions

**Assess**: mood, function, risks

**Problem-solve**: food access, financial concerns, supports

**Reassess**: new information, emerging risks, change in MSE

What is the solution?

vs

What are the most appropriate next steps given what matters most, what risks exist, and what we know right now?

**Engage**: understand priorities, concerns, readiness for support

**Monitor**: mental status, housing, safety, function

**Adapt**: ED assessment, treatment of UTI, stabilization in hospital

(Pieces Canada, 2020)

# Strategies to support collaborative decision-making
# What helps when there is no perfect answer?

**1) Understand perspectives before proposing solutions**

*What matters most to each person involved?*

**2) Clarify desired outcomes**

*What are we trying to achieve?*

**3) Make competing priorities visible**

*Safety, autonomy, quality of life, resource realities, caregiver wellbeing*

**4) Focus on shared goals**

*Identify areas of agreement before addressing areas of disagreement*

**5) Be transparent about uncertainty**

*Acknowledge that there may not be a perfect answer*

**6) Seek the next best step and revisit decisions as circumstances change**

*Does not necessarily mean the final solution*

In the care of older adults, ***success*** is often ***not*** about finding the ***perfect solution***. It is about helping people make the ***best possible decision*** in an ***imperfect situation***.

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# Thank you!
# Questions?

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# References

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