The ageing process is a biological reality. Most developed world countries have accept chronological age of 65 years as a definition of 'elderly' or older person .Many evidence indicates that the Australia’s ageing population is increasing as many other countries of the world Science and technology will make a major contribution to healthy ageing. Australia’s population is ageing as a result of increased life expectancies, declining fertility rates, lower mortality rates and the impact of migration levels. . Older people are more likely to provide care for others than to receive care. However, assistance may be required by some, particularly by persons aged 80 and over. So the government and authorities are paying more concentration to bring better health support, illness prevention and treatment for them. . By 2020 the world's population will include more than 1,000 million people aged 60 and older. The number of people in Australia aged 65 or larger is anticipated to raise from 2.3 million in 1999 to 5.1 million by 2031(Plank&Parker, 2007) .The aim for nursing care is to support older persons in achieving optimal health, well-being, and quality of life, as determined by those receiving care or reliable with the values and known wishes of the individual. To keep up high class of care the organization required a trained and educated multidisciplinary team consists of nurse, doctors, physiotherapist, occupational therapist, dietician and other paramedical staffs. Healthy ageing can be considered an individual, society, public and private sector approach that aim to retain and improve the physical, emotional and mental wellbeing of older people (Andrews 2005)

Healthy childhood and adulthood may be the most significant determinants of healthy old age. Many older people are living long and healthy lives, but others may have one or more chronic diseases, and the frailer older adult may be extremely disabled and dependent. The aims of the healthy ageing are maintains physical and mental health, avoid disorders and stay active and self-regulating (Stratton, et al., 2006).Even though Some people believe that old age is the period of depression, anxiety, diseases, loneliness and so on, majority of people in Australia believe that old age is a peaceful life to enjoy the benefits and facilities given by the government. While delivering care to the older people, the nurses should think about the client’s mental strength physical and psychological level and also the specific area where the health support and attention required. This essay explains different health problems of the patient which is given in the case study and also included the nursing management and interventions to resolve those problems with the limited health services available in the rural communities. More over that, it describes how the services of multidisciplinary group reflect in the care and support of the client.

In the given study Audra is a fairly active old lady living in a caravan in a coastal area. She is suffering from arthritis, sciatica and chronic back pain. Besides that she had a history of fall and broke her right hip last year.Audra lives in a coastal area, so the accessibility of health care services is also a trouble. The nursing care of this old lady and the impact of ageing up on health requirements, moreover, link with carers and the require for seamless care will be discussed. There are some other problems also need to take in to consideration when thinking about her nursing management, like poor social interactions, lack of help from relatives and insomnia. Moreover ,the Australian government introduced many programs and services to promote better health for the aged people who lives in coastal areas, The programs include Home and Community Care (HACC),Aged care Assessment program(ACAP),Community Aged Care Packages (CACPS), Extended Aged Care Assessment Programme(TCP),and Veterans’ Home Care (VHC) (Nay, Garratt, 2009)

It is very essential for the nurse to have systematic knowledge about the physical, psychological, social and environmental effects on Audra before undertaking the evaluation. These health determinants may assist to recognize the inconvenience and the cause behind her health problems. Falls have significant negative outcomes on older individuals, including physical injury (Bell, Talbot-Stern, & Hennessy, 2000 ;). The Canters for Disease Control and Prevention reported accidental injuries, with falls as the leading type, as the seventh leading cause of death in the United States in the 65 and over age group. Hence, understanding the causes and risk factors for falls is of significant public health importance. A number of Confounding variables may modulate the association between injury and falls, including environmental hazards such as rugs,clutter,poor lighting and improper footwear(Yeung&Chou, 2006), medical Conditions such as arthritis, stroke, and Parkinson’s disease; and Medication use ( Nevitt, 2004).Audra is high risk for fall due to her intrinsic factors like arthritis, sciatica, polypharmacy and older age.Audra also had a fall an year before, so she is having fear of fall even after rehabilitation. Hip fracture is one of the most serious consequences of falls, with more than 300,000 hospitalizations among persons 65 years and older due to hip fractures each year (National Council on ageing, cited November 24, 2006). In addition to physical injury, falls can also have psychological and social consequences. Fear of falling and post fall anxiety syndrome are the negative consequences of falls (Eliopoulose2005).The loss of self-conﬁdence that leads to an inability to ambulate safely can result in self imposed functional limitations. In case of Audra fall assessment should be done by community health nurse include a review of all reference and alternative medicines; examination of vision, gait, balance; strength and ﬂexibility of extremities; and evaluation of Cardiovascular, neurologic, and any other medical problems that may have contributed to the fall. Evaluation should focus on the number of fall within the past year, events leading up to any falls, post fall evaluation, and environmental status surrounding falls. Mobility may be resolute by observing the patient as she stands up from a chair without assistance, walks several steps (Patient Safety Goals, cited April3, 2007). Environmental factors such as dim lighting, unsafe stairs, loose carpeting, or small pets should be identified and addressed when possible. Here, the community nurse can play vital role to check caravan to clean and maintenance intermittently and provide her hip protectors. Proper diets with high calcium and vit D will reduce the risk of fracture in elderly. Consultation with dietician also helps to improve her condition .Exercise directly strengthens muscles and improves balance so that falls are prevented (Eley ,R 2007). Finding the balance between removing hazards and respecting the person’s autonomy is one of the greatest challenges in fall prevention Faced by health care professionals One of the most important strategies proposed in the action plan is a public policy agenda to prevent falls (National council on Aging cited April3, 2007). To build progress toward fall and injury avoidance across settings, health care organizations, consumer groups, legislators and other Stakeholders must work together on local, regional and national levels to recognize possible interventions to decrease falls. facts that fall risk assessment and comprehensive, multidimensional fall prevention programs are effective in reducing falls and injuries already exists, and effective prevention programs are likely to result in lower total health care costs. An aggressive public policy agenda to reduce the number of injurious falls should be pursued, given the high human cost of falls and hip fractures (smith 2008).

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Arthritis is a disease that affects the joints and surrounding tissues to cause pain, stiffness and inflammation. The incidence of arthritis and joint pain increases with age. Women are affected more frequently than men (Blumenthal, 2004). Exact cause of arthritis is unknown. There are a number of risk factors that predispose arthritis are ageing, being female,hereditary,major trauma ,knee bending or lifting and environmental factors like cold climate and living condition(Oliver& Hill 2005). The primary symptom of many forms of arthritis is pain. The other warning signs and symptoms includes stiffness, fatigue, anaemia, anorexia, weight lose and vague articular symptoms like joint swelling and joint loosing (Oliver& Hill 2005).In case of Audra,the aim of nursing care includes support independence and the optimum quality of life, provide a holistic approach to the assessment and management of the older person with arthritis including nutritional aspects ,skin integrity and foot care, ensure pain is controlled using pharmacological and non-pharmacological approaches. Although drug therapy plays an important role in pain management, there are a number of non pharmacological therapies that, the community health nurse can include while taking care of Audra like importance of exercise, local and general rest ,application of hot or cold packs, transcutaneous electrical nerve stimulation and massage relaxation (Wilken, Ineck,&Rule,2005).Education and advice on joint protection and safe environment ,usage of walking sticks, encourage slower but more purpose full mobility, muscle strengthening exercise s are some of factors which the physiotherapist can assess while visiting Audra periodically. Occupational therapist can explain and teach her about the use of appropriate equipment which might include large –handled cutlery, brushes, use zip attachments and special shoelaces and so on. Nurses can provide emotional support to her . Encourage Audra to express her fears concerning body images and self esteem(Veehof,et al 2006).Audra taking some medication like anti-inflammatory drugs and morphine .The physician and community health care nurse should provide appropriate health education regarding the medication and its side effects. Dietary fatty acids such as omega-3s found in the oil of fish nutritional loss of these supplements from anti- inflammatory drugs (Smith, A.2008) so the dietician also has an important role in Audra’s life. and sea animals may have some benefit for sufferers. Supplementation of calcium and vitamin D content food helps to decrease the risk of arthritis that result from

The other problem which is affected by Audra is Sciatica. It is a symptom usually recognised to lumbosacral spine pathology. Sciatica is defined as “pain radiating down the legs below the knee along the distribution of the sciatic nerve; usually related to mechanical pressure or inflammation of lumbosacral nerve roots”(Riddle&jewell,2005 pp 1139-1150).The main risk factors for sciatica are previous trauma to the lower back, taller beight,smoking,and work related postures or movements.Audra already had the history of trauma to the lower back. Management options for sciatica includes analgesic medication, manipulation, bed rest .In case of Audra, physiotherapist can visit her regularly and do the interventions like therapeutic exercise, functional training manual therapy techniques including mobilisation and manipulation (Atkinson 2005). The community health nurse can give health education regarding the important of joint mobility and exercises (van Tulder MW, Malmivaara A 2004) .Audra is suffering from left heel pain due to sciatica. It is important for the nurse to focus on Audra’s emotional well being, in addition to providing them with information regarding medical treatement.Provide health education regarding pain management and medication should be done by medical care team.

Chronic back pain is another problem for Audra.One of the barriers of healthy ageing is chronic back pain and it affects their activities of daily living. Here, the patient back pain may be due to the past history of fall, sciatica and arthritis. Here the role of nurse is to assess and identify the pain, frequency, duration of pain, the number of tablets she consumes for pain and also her daily routine (Gibson, Weiner, 2005).Non pharmacological management of pain includes massage, relaxation, aromatherapyand visualization (Mitchell, C. 2005).The multidisciplinary team can solve the pain related problem of Audra by providing suitable management like controlling the stress and strain, maintaining proper position and applying heat packs. Regular visits of physiotherapist help her to get a proper advice related to exercise. Pharmacological management of chronic back pain includes analgesics, anti inflammatory drugs and opioids.In case of Audra she is already on medication such as morphine and anti inflammatory drugs. Health education regarding the usage of this medications and side effects should be explained by the community health nurse (Kopec JA, Sayre, 2004).

The prevalence of insomnia is very common in older adult. Insomnia defines that inability to obtain an adequate amount of sleep. In case of Audra, she often uses sedatives to help her sleep. Insomnia is characterised by fatigue and lethargy, mood disturbances, cognitive inefficiency and motor impairments (Lemoine et al 2007).Insomnia mainly due to some causes like, social, circumstances and medical. In this case study audra lives in a caravan in a coastal area and the caravan park has been burgled twice in the last 18 months, so the social factors like loneliness and insecurity may cause disturbed sleep, In addition to that side effects from the medications, arthritis pain, chronic back pain are some of the additional causes for her insomnia. Non pharmacological management of insomnia includes improving reading habits and listening to music and practicing meditation (Gilliam, T. (2009).Here the role of community health nurse is to access sleeping patterns and find out the reasons for the cause of sleeplessness. Health education regarding avoidance of food, drugs or drinks which contains caffeine should be explained by the nurse. For safety issues she can be moved in to aged care facility.

Decreased social interaction and loneliness are the other problem which is affected by Audra. Old people seems to be most prone to loneliness because of loss of close tie and increasing dependency.Lonliness in old age often results in an increase depression and sleeping problem. It is clear that living alone may worse the conditions ,in order to solve such problems ,the multi disciplinary team can suggest to the patient about the old age homes, independent living units and retirement villages and it may help to maintain a good physical condition since they provide all basic requirements and facilities as well. More over that, the community health nurse can encourage the client to maintain a good relationship with the relatives (Cheek,Ballantyne&Roder Allen,2005).Social Worker should provide the overall idea regarding the benefits of being with aged care. As long as Audra lives alone, the multidisciplinary team may work closely to asses her regarding her living arrangements social activities and hobbies community involvement and support (Tabloski, 2006, p.59).

Polypharmacy is another problem of Audra.Polypharmacy means a patient is taking more medication than are actually needed (Fulton&Allen, 2005). In the given study Audra attend her Gp regularly and some time she visits naturopath and local pharmacist and seeks advice.Audra is taking analgesics according to physician and pharmacist. In addition to that she is taking other medications such as anti inflammatory drugs and morphine 5 mg patches. She often uses sedatives and takes variety of medications according to naturopath. Main Complications of polypharmacy includes increased adverse reaction and noncompliance.Polypharmacy can be avoided by patient education .In case of Audra, physicians, nurse’s pharmacists, and all health providers should work

as a team to educate her about consequences of poly pharmacy.

In case of Audra a seamless care should be provided. It includes an ill defined set of entities people location diseases treatments, tests rules and regulations. That means in that care must bring all of these part together in an orderly logically and aesthetically consistent way.

In short, it is a fact that, ageing is a natural process and it can bring about a lot of physical variations in one’s life. There is variety of programmes conducted by Australian government to carry out better services and care to the older people in the country. In this case study Audra suffers different kinds of health problem. Although she stays in a caravan, the patient has the right to get better health services and support to maintain healthy life.So joint effort the multidisciplinary team members helps to cure the problem of the patient and it may make the patient to lead a satisfactory life.