

# Psychosocial Assessment in Aging | Tutor Guide



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## Psychosocial Assessment in Aging: Tutor Guide

**Course:** Common Geriatric Assessments

**Topic:** Psychosocial Aspects of Aging - Mental Well-being and Social Support

**Duration:** 3 Hours

**Session Type:** Group Activity and Peer Learning

**Number of Groups:** 5 Groups

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### Pre-Session Preparation for Instructors

#### Learning Environment Setup

- **Room arrangement:** 5 distinct group areas with flip chart space
- **Materials distribution:** Ensure each group has complete assessment packets
- **Technology needs:** Timer, projector for demonstrations, microphone if needed
- **Assessment forms:** Prepare scoring sheets and interpretation guides

#### Instructor Preparation Checklist

- ✓ Review all five assessment tools thoroughly
- ✓ Prepare challenging patient scenarios for each group
- ✓ Create evaluation rubrics for demonstrations
- ✓ Develop intervention strategies for struggling groups
- ✓ Prepare summary slides for integration discussion

### Detailed Facilitation Guide

#### Phase 1: Introduction and Group Formation (15 minutes)

##### Opening (5 minutes)

###### Key Messages to Convey:

- Psychosocial assessment is as important as physical assessment
- Mental health conditions are underdiagnosed in older adults

- Multiple tools may be needed for comprehensive assessment
- Cultural sensitivity is crucial in psychosocial evaluation

**Group Formation Strategy:**

- Consider mixing students from different backgrounds
- Ensure each group has varied skill levels
- Assign groups based on interest or random selection
- Provide group number tags and seating assignments

**Tool Assignment and Overview (10 minutes)****For Each Tool, Briefly Cover:**

- Target condition and population
- Approximate administration time
- Key strengths and limitations
- Integration with comprehensive assessment

**Phase 2: Active Facilitation During Group Work (90 minutes)****Circulation Strategy (Throughout 90 minutes)****Recommended Schedule:**

**Minutes 1-30:** Visit each group twice, 3 minutes each visit

**Minutes 31-60:** Focus on struggling groups, longer consultations

**Minutes 61-80:** Final check-ins, demonstration preparation support

**Minutes 81-90:** Quick rehearsal observations

**Group-Specific Facilitation Points****Group 1 (GDS-15) - Common Issues to Address:**

- Students may rush through questions
- Remind about importance of allowing thinking time
- Discuss when to use 15-item vs. 30-item version
- Address scoring ambiguities

**Facilitation Prompts:**

"How might medical illness mask depression symptoms?"

"What would you do if a patient says 'I'm just old'?"

"How do cultural attitudes toward mental health affect responses?"

**Group 2 (PHQ-9) - Common Issues to Address:**

- Students may focus too much on scoring
- Emphasize suicide risk assessment (question 9)
- Discuss limitations in cognitively impaired patients
- Address follow-up planning

**Facilitation Prompts:**

"How does this compare to geriatric-specific depression scales?"

"What's your plan if someone scores high on question 9?"

"How might you adapt this for patients with mild cognitive impairment?"

**Group 3 (UCLA Loneliness Scale) - Common Issues to Address:**

- Students may not differentiate loneliness from depression
- Emphasize social vs. emotional loneliness concepts
- Discuss intervention implications
- Address reverse-scored items

**Facilitation Prompts:**

"Can someone be alone but not lonely? Lonely but not alone?"

"How does loneliness relate to health outcomes?"

"What interventions might you recommend based on results?"

**Group 4 (GAI) - Common Issues to Address:**

- Students may struggle with somatic vs. anxiety symptoms
- Discuss age-related changes in anxiety presentation
- Address medication-related anxiety
- Emphasize geriatric-specific design

**Facilitation Prompts:**

"How does anxiety present differently in older adults?"

"What medical conditions commonly cause anxiety symptoms?"

"Why might standard anxiety scales be less effective for older adults?"

**Group 5 (RAID) - Common Issues to Address:**

- Students may struggle with observer-rating concept
- Emphasize behavioral indicators
- Discuss caregiver training needs
- Address reliability concerns

**Facilitation Prompts:**

"How do you assess emotions when someone can't tell you how they feel?"

"What behaviors might indicate anxiety in dementia?"

"How would you train a family caregiver to use this?"

**Phase 3: Demonstration Management (45 minutes)****Pre-Demonstration Setup (2 minutes before each group)**

- **Ensure proper positioning** for visibility
- **Check materials** are ready and accessible
- **Set timer** and brief group on time management
- **Prepare transition** to next group

**During Each Demonstration Your Role:**

- ☒ **Timekeeper:** Give 1-minute warning signals
- ☒ **Quality observer:** Note teaching effectiveness
- ☒ **Question facilitator:** Help manage Q&A if needed
- ☒ **Safety monitor:** Intervene if content is inaccurate

**Common Issues and Interventions If a Group Runs Over Time:**

- Give clear time signals
- Step in diplomatically: "Let's hold questions for after all demonstrations"
- Keep demonstrations moving smoothly

**If Information is Inaccurate:**

- Make note for clarification during wrap-up
- Don't interrupt unless safety/clinical accuracy is at risk
- Address privately with group if needed

**If Demonstrations Lack Engagement:**

- Ask clarifying questions to help the group
- Encourage audience participation
- Model active listening and note-taking

**Evaluation During Demonstrations****Use This Real-Time Assessment Framework:**

- ☒ **Excellent (4):** Accurate, engaging, well-organized, clear teaching
- ☒ **Good (3):** Mostly accurate, some engagement, adequate organization
- ☒ **Satisfactory (2):** Basic accuracy, minimal engagement, unclear organization
- ☒ **Needs Improvement (1):** Inaccurate information, poor engagement, disorganized

**Rate Each Group On:**

- Clinical accuracy and adherence to protocol
- Teaching effectiveness and peer engagement
- Organization and time management
- Demonstration quality and realism
- Response to questions and flexibility

## Phase 4: Integration and Wrap-Up Facilitation (15 minutes)

### Discussion Questions to Pose

1. **Clinical Integration:** "When might you use multiple tools together?"
2. **Cultural Considerations:** "How do cultural factors influence these assessments?"
3. **Practical Applications:** "What challenges do you anticipate in real practice?"
4. **Professional Development:** "What additional training might you need?"

### Key Points to Reinforce

- **Screening vs. diagnosis:** These are screening tools, not diagnostic instruments
- **Clinical judgment:** Scores must be interpreted within clinical context
- **Follow-up importance:** Positive screens require appropriate referral
- **Documentation:** Proper documentation and communication of results
- **Ethical considerations:** Consent, confidentiality, and patient autonomy

## Assessment and Evaluation Framework

### Formative Assessment Opportunities

#### During Group Work:

- Individual engagement and participation
- Quality of peer interactions
- Problem-solving approaches
- Help-seeking behavior when needed

#### During Demonstrations:

- Accuracy of tool administration
- Quality of peer teaching
- Professional communication skills
- Ability to answer questions effectively

## Summative Assessment Options

### Group Demonstration Rubric (100 points total):

**Clinical Accuracy** (30 points): Correct administration and scoring

**Teaching Effectiveness** (25 points): Clear explanation and peer engagement

**Professional Communication** (20 points): Appropriate patient interaction

**Organization and Preparation** (15 points): Smooth flow and time management

**Critical Thinking** (10 points): Thoughtful responses to questions

## Individual Assessment Options

- Reflective journal entries (post-session)
- Case study analysis assignments
- Peer evaluation forms
- Self-assessment questionnaires

## Alternative Assessment for Struggling Students

- **Additional practice sessions** with instructor support
- **Modified demonstration format** (e.g., co-presenting)
- **Extended reflection assignment** in lieu of presentation
- **Peer mentoring** arrangements

## Troubleshooting Guide

### Common Student Challenges and Solutions

**Challenge:** Students uncomfortable with mental health topics **Solution:** Normalize mental health as part of comprehensive care, provide safe discussion space

**Challenge:** Cultural resistance to mental health assessment **Solution:** Discuss cultural adaptation strategies, emphasize screening vs. diagnosis

**Challenge:** Students rush through assessments **Solution:** Emphasize quality over speed, model appropriate pacing

**Challenge:** Difficulty with scoring/interpretation **Solution:** Provide additional practice examples, use worked examples

**Challenge:** Poor group dynamics **Solution:** Intervene early, reassign roles if needed, provide structure

### Technical Issues and Solutions

**Challenge:** Assessment forms unclear or incomplete **Solution:** Have backup copies, clarify instructions, provide examples

**Challenge:** Time management problems **Solution:** Use visible timer, give regular time updates, adjust schedule if needed

**Challenge:** Room setup issues **Solution:** Have backup plan for space, ensure adequate materials for all groups

## Post-Session Activities

### Immediate Follow-Up (Within 24 hours)

- **Provide feedback** to each group on their demonstration
- **Share assessment results** and overall performance
- **Distribute additional resources** for continued learning
- **Address any** unresolved questions or concerns

### Extended Learning Opportunities

- **Arrange practice sessions** with standardized patients
- **Organize visits** to geriatric mental health settings
- **Provide access** to online assessment training modules
- **Connect with** clinical preceptors for supervised practice

### Assessment Documentation

- **Complete evaluation forms** for each student
- **Document learning objectives** achievement
- **Note areas** for curriculum improvement
- **Prepare feedback** for course coordinator

## Resources for Continued Learning

### Professional Development Opportunities

- Mental Health First Aid for Older Adults
- Geriatric Mental Health Specialty Training
- Cultural Competency in Aging Services
- Suicide Prevention in Later Life

**Assessment Tool Resources**

- Original validation studies for each tool
- Cultural adaptation guidelines
- Electronic administration platforms
- Training videos and webinars

**Clinical Practice Integration**

- Integration with electronic health records
- Workflow development for routine screening
- Staff training protocols
- Quality improvement initiatives

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This comprehensive guide ensures effective facilitation of psychosocial assessment training while promoting deep learning and clinical application skills among students