COVID-19 pandemic has affected many people around the world and has posed serious challenges in less than two months to the world's health systems. The fatality of disease is directly related to old age and chronic diseases, so that the highest number of deaths has been reported over 65 years (1) in people with chronic diseases including high blood pressure, diabetes, coronary artery, and Cerebrovascular diseases (2).

According to the United Nations World Population Age 2019, Iran has 5,272,000 people over the age of 65(3), which about 15,000 live in nursing homes. Residents of nursing homes mainly suffer from two or more chronic diseases, living with serious/advanced diseases, and sometimes near the end of their lives. Many of them are at risk of infection due to the side effects of taking antibiotics, threaten physiological barriers (such as the fragility of the skin, use of devices such as catheters), suppression of the immune system, malnutrition, dehydration, anemia, or functional disorders. Therefore, compared to hospitals, it is more difficult to effectively manage infections in nursing homes due to shared living space, gathering in common dining and recreational areas, and limited technical and human resources. The Centers for Medicare & Medicaid Services (CMS) annual report shows that about 40% of nursing homes in the USA have poor infection control (4). Providing High-quality care for the elder living in care centers is one of the most challenging issues related to health care, which is multiplied in crisis such as the COVID-19 pandemic.

In addition to the spread of infection and biological problems caused by the disease in the elder residents in these centers, there are also some serious challenges related to the mental health of these people. News agencies are constantly talking about the high number of deaths of the elderly due to COVID-19, which is a form of stigma and harassment of the elderly. In this situation, Elderly people are asked to do self-isolation to reduce the spread of the disease (5). With the isolation of nursing homes and the restriction of meeting with friends and family members, these people are more exposed to social disconnection and will have more social and psychological consequences in the elders. In a study by Santini et al., It was shown that social disconnection exposes older people to more anxiety and depression (6). Also, the isolation of nursing homes increases the fall and use of restraint. Nursing homes have higher rates of dementia, delirium, and behavioral disorders that require more nursing care under isolation (7).

In most nursing homes, many nursing activities are performed by volunteer caregivers, and there is no specialized nursing staff in these centers. In the Kahrizak charity foundation, 87 elder people and 68 volunteer caregivers were infected with COVID-19. Many volunteers have relinquished the work and many problems have been noticed in this nursing home.
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charity (8). In this regard, Nurses play an important role in meeting the complex needs of the elderly in the crisis and it is essential to use specialist nurses for addressing the physical and psychological needs of this high-risk population (9). In this crisis, the lack of nurses in nursing homes causes problems such as the rapid spread of infection, lack of access to quarantine and proper prevention, and further infection of patients and caregivers. Nursing homes in Iran do not hire nurses however, they could take many responsibilities in special condition such as the provision of specialized courses for other care providers who are working in these facilities to prevent the complications of being affected by the disease. However geriatric nursing has been created around the world for 40 years, it still faces major challenges such as lack of trained professionals, lack of faculties, lack of research funding, the need for interdisciplinary training, and poor interest between young nurses (10). In Iran, the Geriatric Nursing Master’s Degree Program was established in 2011 (11). Poor acceptance of graduates of Geriatric Nurses in the health system of Iran and nursing homes has created serious problems for nursing homes (12). In the meantime, these nurses can train volunteers to use their capacity in helping nurses for strenuous activities, while short-term care centers have difficulty in train and retain of volunteers, and they with inadequate training often pose major challenges (13).

Conclusion

Therefore, it is recommended to prioritize the employment of specialist geriatric nurses, support staff more, and use appropriate technologies to minimize contact with patients, effectively train volunteers in the programs of these centers. Also formulate and implement strict regulations and guidelines to prevention, rapid diagnosis, infection control, and personal protection, distribution of food, laundry, meeting, and isolation of residents of nursing homes.

References