

# The Truth About Quality of Life Assessments

These truths can help healthcare professionals correct any common misconceptions about the use of quality of life (QOL) assessments for **older adults** living with frailty, and their **family caregivers**.

MYTH	TRUTH
<input checked="" type="checkbox"/> QOL assessments take away from the relational side of healthcare.	<input checked="" type="checkbox"/> QOL assessments <b>promote relational care</b> by uncovering unsaid needs and providing an opportunity to facilitate a therapeutic relationship.
<input checked="" type="checkbox"/> QOL assessments are only for patients.	<input checked="" type="checkbox"/> Some QOL assessment tools specifically assess the QOL and healthcare experiences of <b>family caregivers</b> .
<input checked="" type="checkbox"/> Healthcare providers are not able to respond to the needs revealed by the QOL assessments.	<input checked="" type="checkbox"/> Together with patients, you can <b>determine the next steps of care</b> , involving other members of the healthcare team and resources in the community.
<input checked="" type="checkbox"/> Older adults living with frailty do not perceive QOL assessment tools as valuable.	<input checked="" type="checkbox"/> QOL assessment tools enable older adults living with frailty to share <b>what matters to them about their healthcare and their experiences of care</b> .
<input checked="" type="checkbox"/> There is no need for another assessment tool. Patients and family caregivers will tell you when they have concerns and unmet needs.	<input checked="" type="checkbox"/> While some <b>patients</b> might discuss their needs, most will wait for you to ask. Many <b>family caregivers</b> won't voice their own needs because they want the patient's concerns to take priority.
<input checked="" type="checkbox"/> QOL assessments take too much time out of already busy days.	<input checked="" type="checkbox"/> QOL assessments help to direct attention to health-related issues that might otherwise get missed, and can potentially save time by <b>identifying problems early</b> .
<input checked="" type="checkbox"/> It is too difficult for patients living with frailty to answer questions about their QOL due to decreased cognitive function, language barriers, or vision or hearing problems.	<input checked="" type="checkbox"/> QOL assessments can be delivered in <b>various forms and languages</b> . Even incomplete information you gather about a patient's QOL can be valuable.
<input checked="" type="checkbox"/> QOL assessments undermine your clinical expertise.	<input checked="" type="checkbox"/> Patients can provide you with <b>information that can't be assessed otherwise</b> . This can be used to enhance decisions made with your clinical expertise.

Together, let's build a person-centred healthcare system for **everyone**.

Learn more at: [healthyqol.com](https://healthyqol.com)

and find additional resources and supporting evidence.