Building Capacity for Elder Care in Rural Ontario

Geriatric Care Team
Cynthia Berry, BSP

Who Are We?

- Interdisciplinary team
  - Physicians, nurses, social work, pharmacists, dieticians, mental health workers.
- Primary health care
  - Health promotion
  - Disease prevention
  - Chronic disease management
- Specialized teams
  - Geriatric Care Team
  - Palliative Care Team

Geriatric Care Team
- Lisa Hildebrand, RN, Team Lead
- Andrea Moser, MD, Care of the Elderly
- Joanne Osborne, RN
- Ramona Hill, BScPh
- Cynthia Berry, BSP

Mission
- Optimize the health, independence and quality of life for at-risk seniors
- Increase the capacity for geriatric care.
  - Interdisciplinary assessments and consultation
  - Advocacy
  - Education
  - Evaluation
  - Community development of geriatric care

Vision
- To be recognized for excellence in community-based geriatric care through:
  - Education and knowledge transfer promoting evidence-based practice for geriatric care.
  - Evaluation of services.
  - Responsiveness to community needs.
Goals and Objectives

- Coordinated access point to geriatric care for at-risk seniors.
- Comprehensive Geriatric Assessment
- Maximize independent function and quality of life.
- Improve health care utilization, reduce unnecessary or premature institutionalization
- Education to health care professionals, seniors and family/caregivers
- Partnerships with community agencies
- Identify community needs re geriatric care

How Do We Do This?

- Referral from family physicians
- In home assessment – nursing, physician
- Pharmacy review – in home visit when required
- Interdisciplinary consult with recommendations to family physician
- Interdisciplinary Case Conferences monthly
- Ongoing follow up and review until patient stable for discharge

How Do We Do This? The Geriatric Giants

- Complex/multiple medical issues
- Falls risk
- Sensory difficulties (sight, hearing)
- Habits (Vitamin EtOH)
- Communication
- Bladder/Bowel
- Pain
- Polypharmacy
- Sleep
- IADL/ADL
- Depression
- Delirium
- Dementia
- Behaviours
- Caregiver
- Safety
- Advance directives

Outcomes

- Improved quality of life
- Appropriate medication therapy
- Decreased hospital admissions
- Decreased caregiver burden
- Safe home environment
- Greater connection to community supports
- Education of disease and treatment goals

...LTC admission is NOT a failure!

Complex interventions to improve physical function and maintain independent living in elderly people: a systematic review and meta-analysis. Beeskie J, Lu A, 2008 March; JAMA 309(9):725-735

Measurement/Evaluation

- Goal Attainment Scaling:
  - Individualized: compliance, caregiver burden, new therapy outcome...
  - Scale of +2 (best possible scenario) to -2 (where we don’t want to be)
  - Reviewed at case conference
  - Team developed

Measurement/Evaluation

What did I mean by building capacity...?

- Increasingly, referrals are faster and at an earlier stage (before the wheels come off)
- High doctor acceptance
The Pharmacists

Home visits:
- Best Possible Medication History
- Medication storage and "environmental reminders" (i.e., the Tupperware container of pills, supertime meds by stove…)
- Indications of compliance
- Relationship with client

The Pharmacists

Medication reviews – goals:
- Indication for every drug
- Duplicate/inappropriate therapy
- PK and Pharmacodynamic considerations
- Outcomes (example warfarin + falls risk)
- Prescribing cascade
- Compliance
- Make a recommendation to the team and follow up!

The Pharmacists

Some common themes:
- HCTZ, dizziness, and low water/fluid intake
- Dizziness and SSRI/TCA/BZD/achol
- Long term benzos
- Preventative therapy (Calcium and vitamin D, ASA)
- OTCs/Herbals

The Pharmacists

Resources:
- The Medication Appropriateness Index
- The Beers List
- OPA Certified Geriatric Pharmacist Preparation Course (One down, one to go)

The Pharmacists

Other things we do:
- Drug information questions
- Healthy Heart Program
- Linking with community pharmacists (a work in progress)
- Stats (yipes!)

Questions?