Improving Patient Outcomes Through an Interdisciplinary Geriatric Team Approach in the Home Care Setting

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Objectives

• Describe multidisciplinary vs. interdisciplinary model of care
• Identify challenges to implementing an interdisciplinary team model in the homecare setting
• Identify training needs and tools required to develop the clinical skills of an interdisciplinary geriatric team
• Discuss screening tools that can be utilized in the homecare setting to assist with a comprehensive geriatric assessment
• Discuss outcome indicators that measure success of interdisciplinary model of care in homecare setting

Changes in Geriatric Population

• Geriatric population will double to 71 million by 2030
• People older than 85 are the fastest growing age group
• Older people with greater than 4 chronic conditions consume 80% of Medicare resources

[American Geriatrics Society, n.d.a; Gillman, Parker, & Tabioski, 2009]
Value of Geriatric Teams

- Comprehensive geriatric assessment
- Coordinated plan of care
- Resolve issues related to geriatric pharmacology
- Emphasis on prevention and rehabilitation

(American Geriatrics Society, n.d.b)

Multidisciplinary Teams

- Discipline-specific care
- Planning and priorities are not integrated
- Each discipline functions in parallel
- Decision making by rank or status

Interdisciplinary Teams

- Care plan is a collaborative effort
- Team members understand each others roles
- Work on problems as a team
- Decision making is shared

(Drinka & Clark, 2000)
Internal Team Members
• Nurses
• Physical Therapists
• Occupational Therapists
• Speech Language Pathologists
• Medical Social Workers
• Home Health Aides

External Team Members
• Patient and family
• Physicians
• Pharmacists
• Respiratory therapists
• Dietitians
• Community resources

Challenges of Implementing an Interdisciplinary Team in Homecare
• Geographic challenges
• Clinician autonomy
• Organizing effective meetings
• Resistance to change
• Barriers to communication
Specialty Oversight

- Develop the collaborative team
- Establish and maintain integrity
- Facilitate interdisciplinary conferences
- Coordinate care between team members
- Evaluate clinical results

Goal of Geriatric Specialty

- Allow seniors to age in place
- Reduce unnecessary hospitalizations
- Improve quality of life
- Increase patient independence

Initial Clinical Training

- Normal aging process
- Geriatric assessment
- Drug therapy
- Safety for the geriatric patient
Interdisciplinary Team Training
- Concepts of collaborative care
- Patient-centered goal writing
- Process flows
- Discipline-specific scopes of practice
- Structure of effective teams
- Elements for holding successful meetings

Final Clinical Training
- Alzheimer's disease
- Dementia
- Heart Failure
- COPD
- Cardiovascular disease
- Cardiac medications
- Parkinson's disease

Comprehensive Assessment and Screening Tools
- Comprehensive Assessment
  - Physiological
  - Functional
  - Cognitive
  - Psychosocial
  - Environmental
- Screenings tools
  - Cognition
  - Depression
  - Nutrition
  - Fall risk
Patient Outcomes

- Validate effectiveness of interventions
- Process improvement
- Improve clinical delivery
- Build internal support

Outcomes (Cont.)

- Self management of condition
- Management of medications
- Diet adherence
- Independence with ADL’s and IADL’s
- Participation in an exercise program
- Reduced hospitalizations and ER visits

Gender

- Male: 69%
- Female: 31%
Age

I Know Which Signs & Symptoms Require Physician Notification

I am Managing my Condition Well
I am Taking my Medications as Prescribed

- Admission: 90%
- Discharge: 96%

I Can Explain the Actions of my Medications

- Admission: 46%
- Discharge: 89%

I Know the Side Effects of my Medications

- Admission: 30%
- Discharge: 86%
I Use a Pillbox to Organize my Medication

- Admission: 52%
- Discharge: 65%

Almost Always/Frequently

I am Following my Meal Plan that is Best for my Condition

- Admission: 60%
- Discharge: 88%

Almost Always/Frequently

I am Able to Bathe Myself

- Admission: 40%
- Discharge: 77%

Almost Always/Frequently
I am Able to Dress Myself

- Admission: 59%
- Discharge: 85%
- Almost Always/Frequently

I am Able to Prepare my Meals

- Admission: 19%
- Discharge: 48%
- Almost Always/Frequently

I am Able to Perform Housekeeping Duties

- Admission: 13%
- Discharge: 38%
- Almost Always/Frequently
I am Following an Exercise Plan

Almost Always/Frequently

I had to Visit the Emergency Department While on Service with Gentiva

YES ED Visits

I had a Hospitalization While on Service with Gentiva

YES Hospital Visits
Questions and Discussion

References