Thriving in Place:

A Chronic Disease Management Guide for AL and IL

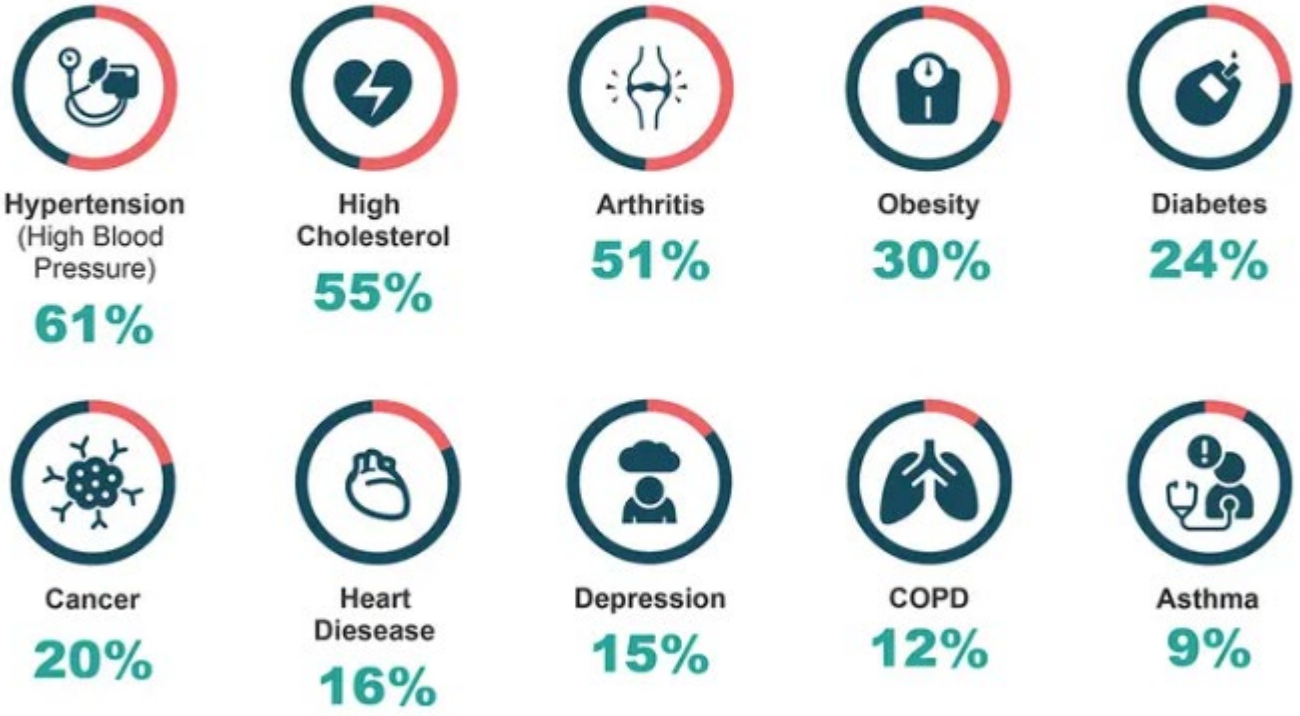
What percentage of adults age 65-74 have at least 1 chronic disease?

- **60%**
- **70%**
- **80%**

What are the most common Chronic Conditions experienced by residents in your community?

- Nearly 80% of adults 65-74 have at least 1 chronic condition
- 68% managing 2 or more
  - These numbers increase with aging
- 5 out of top 10 leading causes of death are strongly associated with preventable and treatable chronic disease
- 90% of health care dollars are spent on chronic and mental health conditions
- An understanding of chronic disease is crucial for providing appropriate care across senior living campuses
  - Allows our residents to age in place
  - Reduces hospital visits
  - Reduces need for Long-Term Care placement

10 Common Chronic Conditions for Adults 65+



Source:Centers for Medicare & Medicaid Services, Chronic Conditions Prevalence State/County Table: All Fee-for-Service Beneficiaries.
Centers for Disease Control and Prevention. Adult Obesity Facts.

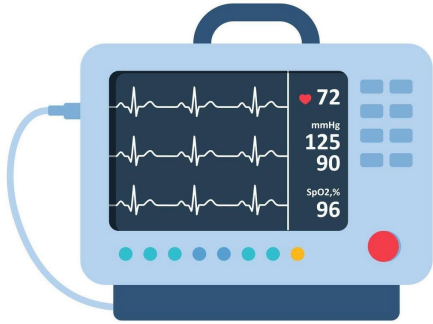
Challenge is that many residents have multiple health issues making coordination even more paramount

Structured Interventions

- Prioritizing residents' needs and preferences
- Incorporates SDOH
- Specialized, personalized Care Plans or Life Plans
  - Assistance with daily activities to age in place
  - Plans for prevention, intervention and ongoing management
- Goals
  - Stabilize health
  - Improve engagement

Routine Medical Care and Monitoring

- Annual doctor’s visits
- Medical Transportation
- Medical monitoring: Access to onsite care providers who specialize in chronic disease management
- Dental and eye care
- Routine screening for functional declines, mental health and health needs
- Advanced Care Planning and Palliative/Hospice Services



Communication Between Healthcare Providers and Residents

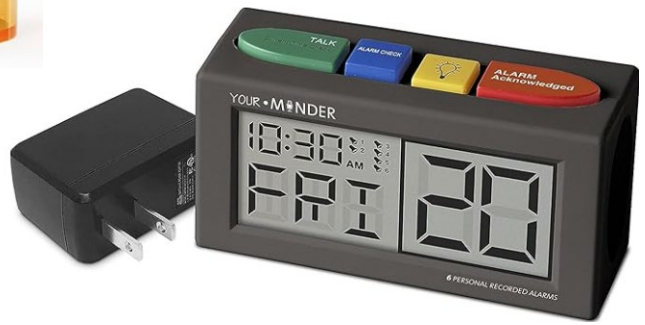
- Educational workshops
- Access to resources
- Proactive management of conditions
- Referrals to Wellness Programs or Recreational activity programs
- List of questions to bring to MD appointment
- Written or printed out materials
- Compensation for low vision or hearing deficits

Medication Management

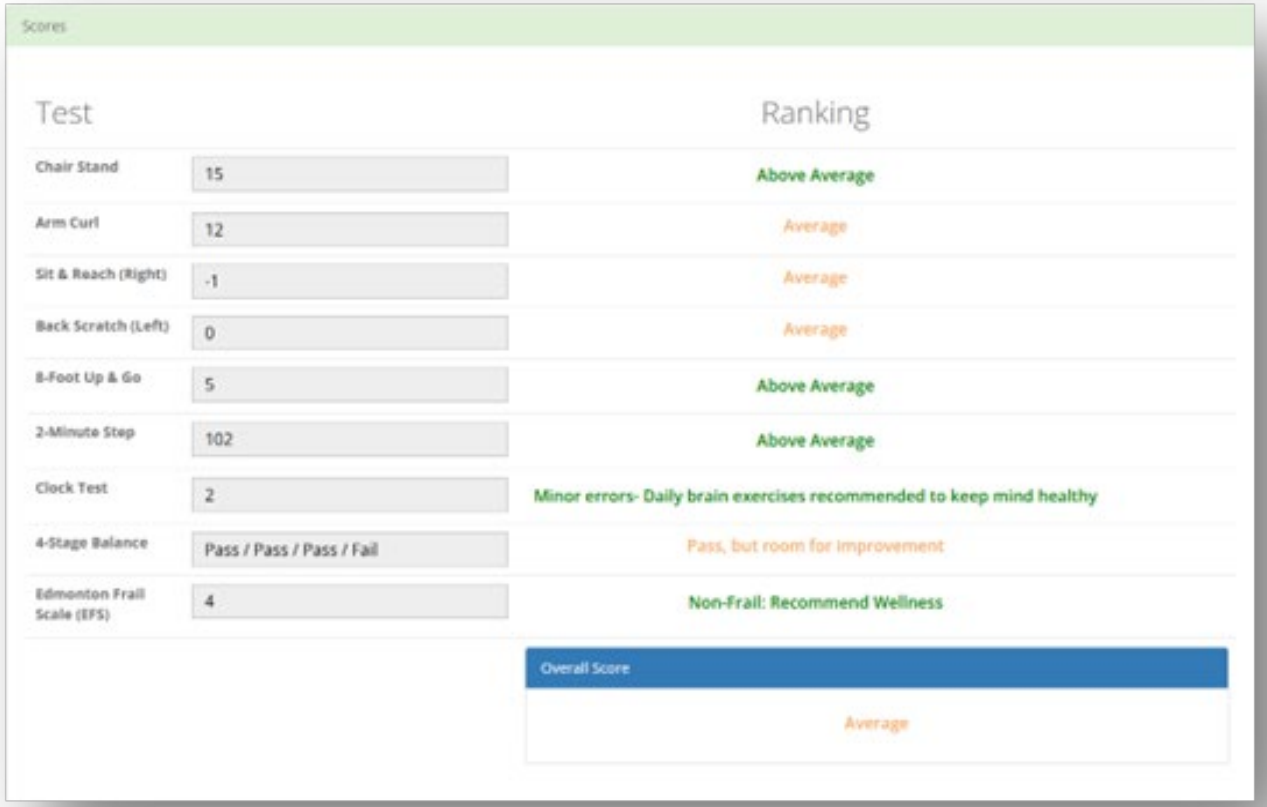
- Risks
  - Missed doses lead to treatment failures
  - 50% of treatment failures stem from lapses in medication adherence
  - Drug interactions
  - Multiple comorbidities
  - Poor understand of medication esp. with care transitions
    - Return from hospital, new med after visit

Medication Strategies

- Keeping track of medications
  - Pill organizers
  - Reminder systems
  - Burst packs
- Knowledge of medications
- Staff assistance
- Transportation/delivery of medications
  - Automatic refills
- Therapy interventions
  - Cognitive tasks
  - Internal/external memory supports
  - Fine motor strength/coordination
  - Adaptive bottles
  - Swallowing difficulties



Health Monitoring



Scores

Test		Ranking
Chair Stand	15	Above Average
Arm Curl	12	Average
Sit & Reach (Right)	-1	Average
Back Scratch (Left)	0	Average
8-Foot Up & Go	5	Above Average
2-Minute Step	102	Above Average
Clock Test	2	Minor errors- Daily brain exercises recommended to keep mind healthy
4-Stage Balance	Pass / Pass / Pass / Fail	Pass, but room for improvement
Edmonton Frail Scale (EFS)	4	Non-Frail: Recommend Wellness

Overall Score

Average

- Vital signs
- Blood sugars
- Changes in walking speed
- Changes in strength or function
  - Functional Fit Scorecards
- Monitoring for Frailty
- Scheduling MD Appointments
- Transportation to appointments
- Food insecurities
- Emergency response system
- Proactive monitoring

Assessments

- Why are they important?
- What are some of the different assessments?
  - Functional
    - Functional Fitness Test
    - BERG Balance Test
    - 4-Stage Balance Test
    - Otago
  - Cognitive Testing
  - Frailty

Frailty

Definition of frail – an agreed upon, standard definition for Frail is missing – so what do we know?

- Frailty is not a disease, but more a warning for that person being at increased risk of poor health outcomes
- Frailty can be described as a transition between successful aging and disability
- State of increased vulnerability across multiple health domains that leads to adverse health outcomes
- "Physical frailty in older adults is a clinically recognizable state of increased vulnerability to adverse health outcomes…" (Jeremy Walston, MD, Johns Hopkins)
- ***Not*** part of normal aging process

Identify the Frail

Robust	Subclinically Frail	Early Frailty	Late Frailty	Endstage Frailty
Resilient: able to recover from stressors	Appears resilient, but recovers more slowly or incompletely from stressors	Clinical appearance of being frail Poor tolerance of stressors; No disability	Clinical appearance of being frail Poor tolerance of stressors, very slow recovery Outcomes: disability d/t decreased strength and energy	Clinical appearance of severe frailty. Poor strength, weight loss Outcomes: dependent, high risk of death within 12 months

Source: Hazzard's Geriatric Medicine and Gerontology, 6th edition

Assessments – Frailty

Edmonton Frail Scale (U of Alberta, Rolfson, et al.)

- Cognition (Clock drawing)
- General health
- Functional Independence
- Social support
- Medication use (5 or more)
- Nutrition-weight loss
- Mood
- Continence
- Balance and mobility (TUG)

Edmonton Frail Scale (EFS)

Scoring: The EFS score ranges from zero to 17 points. Severe Frailty is defined as a score of 12-17 possible points; apparent vulnerability is a score of 6-11 points; and non-frail is a score of 5 or less points.

Frailty Criterion	Definition
Cognition	Clock Drawing Test: place numbers the correct positions on a pre-drawn circle, and place hands to indicate the time of 'ten after eleven' • 0 points if no errors • 1 point if minor spacing errors • 2 points if other errors
General Health Status	"In the past year, how many times have you been admitted to a hospital?" • 0 points if 0 • 1 point is 1-2 • 2 points if >2
	"In general, how would you describe your health?" • 0 points if 'Excellent', 'Very Good', or 'Good' • 1 point if 'Fair' • 2 points if 'Poor'
Functional Independence	"With how many of the following activities do you require help? (meal preparation, shopping, transportation, telephone, housekeeping, laundry, managing money, taking medications)" • 0 points if 0-1 • 1 point is 2-4 • 2 points if 5-8
Social Support	"When you need help, can you count on someone who is willing and able to meet your needs?" • 0 points if 'Always' • 1 point if 'Sometimes' • 2 points if 'Never'
Medication Use	"Do you use five or more different prescription medications on a regular basis?" • 0 points if 'No' • 1 point if 'Yes'
	"At times, do you forget to take your prescription medications?" • 0 points if 'No' • 1 point if 'Yes'
Nutrition	"Have you recently lost weight such that your clothing has become looser?" • 0 points if 'No' • 1 point if 'Yes'
Mood	"Do you often feel sad or depressed?" • 0 points if 'No' • 1 point if 'Yes'
Continence	"Do you have a problem with losing control of urine when you don't want to?" • 0 points if 'No' • 1 point if 'Yes'
Function Performance (balance and mobility)	Timed Up and Go test: "sit in this chair with your back and arms resting. Then, when I say 'GO', please stand up and walk at a safe and comfortable pace to the mark on the floor (approximately 3m away), return to the chair and sit down" • 0 points if completed in 0-10 seconds • 1 point if completed in 11-20 seconds • 2 points if completed in >20 seconds, or if the person is not willing or if they require assistance.

Lifestyle adjustments

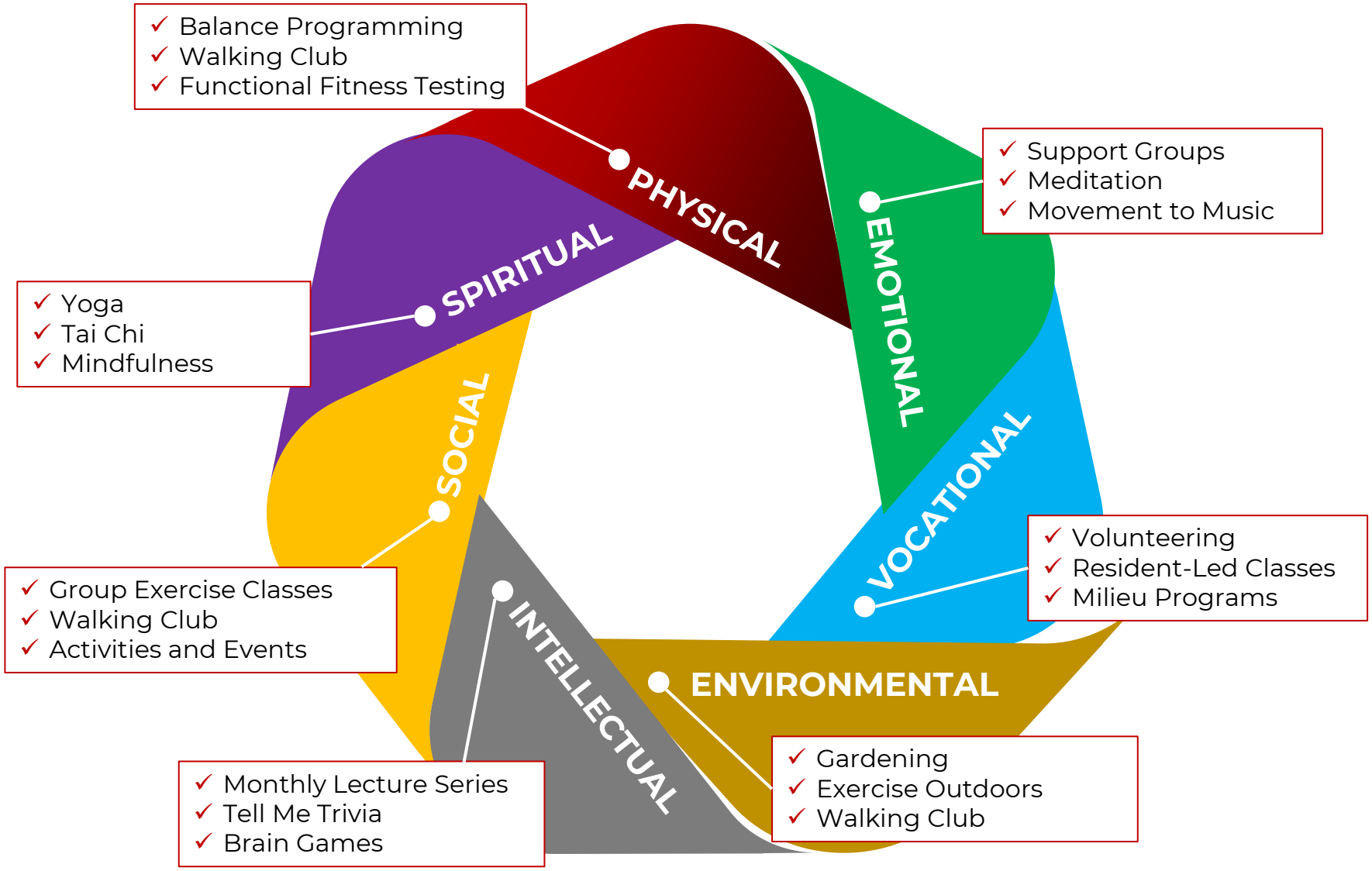
- Promote a physical active lifestyle
- Nutrition/maintaining healthy weight
- Increase health literacy
- Smoking cessation
- Moderate alcohol consumption
- Adequate sleep

****Focus should be on ENGAGEMENT. Less than 7% of adults adhere to all above healthy behaviors**

7 Dimensions of Wellness

- The dimensions overlap and work together to provide a rich environment for living
- Think of wellness as a pie, and each dimension is a piece of the pie
  - We want to have a “full pie” to embrace our greatest potential
- Some events/activities may hit on more than 1 dimensions at once
- Several of these dimensions directly impact mental and emotional health: **emotional, spiritual, intellectual**

Examples of 7 Dimensions of Wellness

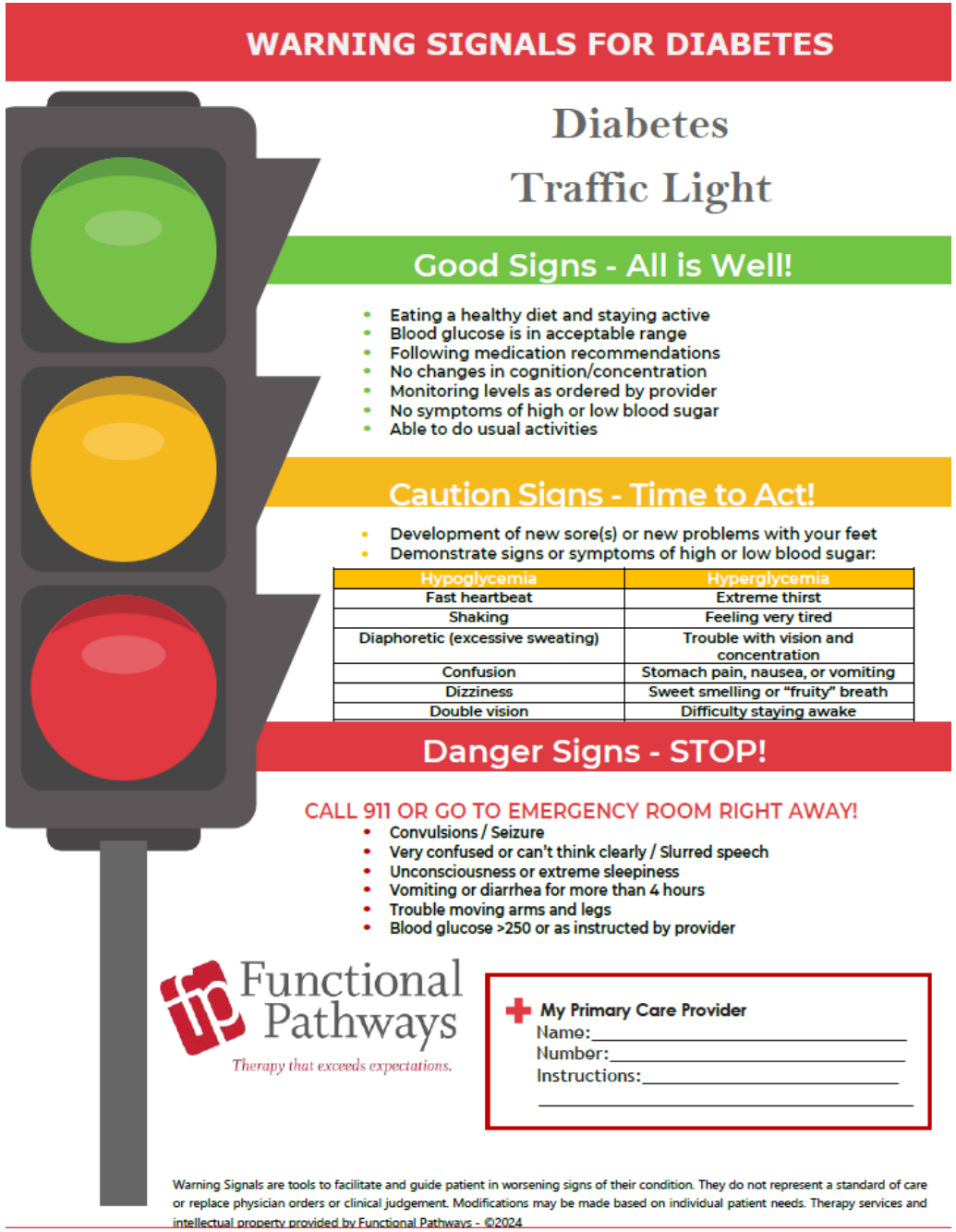


Health Literacy

- **Definition:** ability to understand and use health information to make informed decisions about one's health
  - Encourage open dialogue with providers
  - Simplify health information
  - Utilize community resources
  - Leverage technology
  - Support family and caregiver involvement

- Improved health outcomes, reduces stress and enhances quality of life
  - Less hospital stays, less emergency room visits, lower healthcare costs, reduces errors

Traffic Lights



Health Talks

- Why Walking
- Aquatics and YOU!
- Dealing with Osteoporosis
- Improving Your Breathing
- Normal Aging
- Season's Greetings
- Better Hearing and Speech
- Great Outdoors Month
- Heart Health
- Month of Gratitude
- Breast Cancer Related Edema
- Living with Arthritis
- Low Vision
- New Year, New You
- Successful Sleep Habits
- Nutrition Awareness
- Parkinson's
- Physical Therapy
- Celebrating Independence
- Stress Management
- Men's Health
- Women's Health
- Breathing Techniques
- Hydration Awareness
- Fall Prevention
- Speech Therapy
- Occupational Therapy
- Urinary Incontinence
- Body Mechanics
- The Aging Brain
- Bladder Control

Self-Management Programs

- Evidence-Based Chronic Disease Self-Management Education Programs
  - Better Choices, Better Health®
  - Suite of Chronic Disease Self-Management Education from Stanford
    - SMRC Self-Management Resource Center - SMRC - Self-Management Resource Center
  - Eat Smart, Move More, Weigh Less
  - Walk with Ease
  - Health Coaches for Hypertension Control
  - Toolkit for Active Living with Chronic Pain
  - Cancer: Thriving and Surviving
  - And the list goes on and on

Dietary and Nutrition Plans

- Education programs to understand nutrition and recommended dietary guidelines
- Offerings that include:
  - Balance diet offerings
  - Ensure adequate protein intake
  - Proper caloric intake
  - Fiber
  - Supplements like B12, Calcium and Vitamin D
  - Hydration
  - Chronic Disease considerations
    - Low salt, low saturated/trans fat, glycemic control
    - Inflammatory bowel disease
    - Eliminating bladder irritants options for urinary support
    - Nutrition to support cancer treatment
    - Weight management

Mental Health and Social Connections

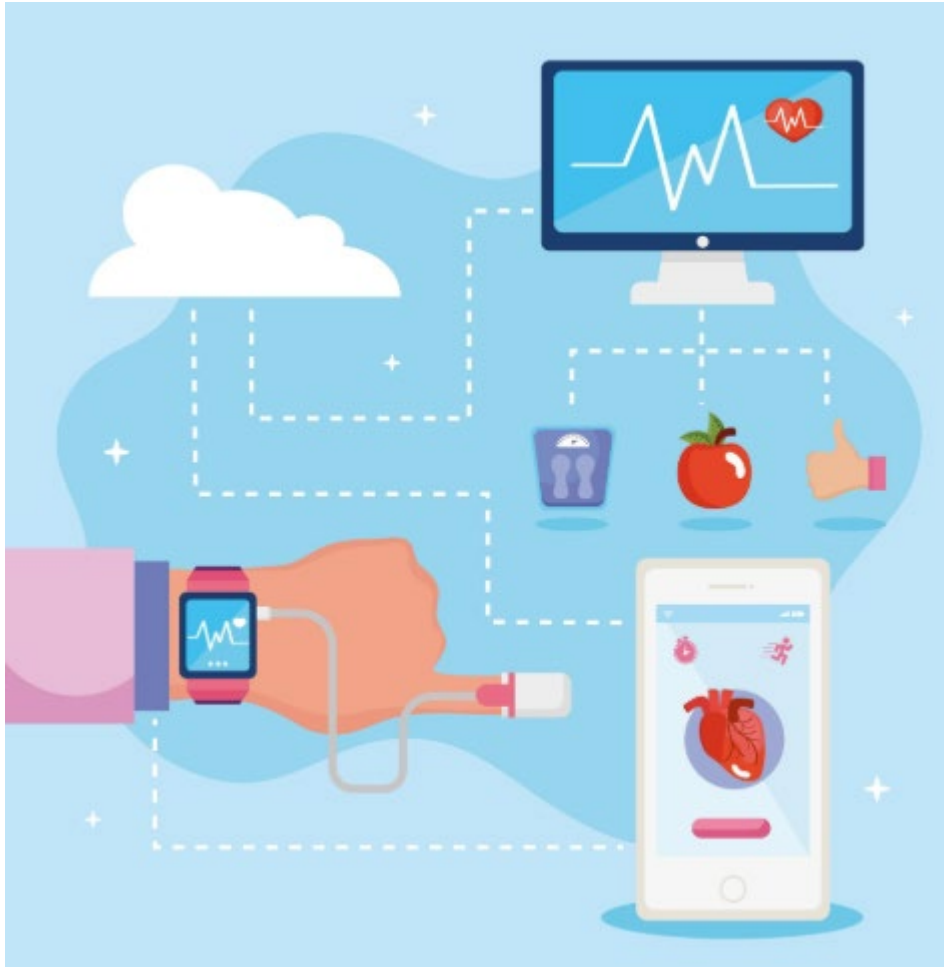
- Anxiety
- Depression
- Stress reduction
- Grief support
- Access to mental health professionals
- Support groups
- Socialization activities for all levels

Caregiver and Family Support

- Caregivers are frequently facilitators and reinforcers
- Caregivers are the “hidden patients”
  - Emotional
  - Financial
  - Physical challenges
  - Managing their own health concerns
  - Higher risk of physical, mental health issues, sleep problems, and chronic conditions themselves
  - Be alert for signs of illness, stress, and burnout
- Education, support, respite
- Make sure necessary approvals prior to communication

Leveraging Technology

- Personalized Health Monitoring
  - Vital signs, movement, walking ability, strength, sleep etc.
  - Smart wearables
  - Fall detection and prevention
- Predictive analytics and AI
  - Predict health issues, fall risk, optimize medication management
- Telemedicine
  - Remote medical consultations and care
  - Remote monitoring
- Increase engagement
  - Communication platforms, video calling, social media
  - Virtual Reality systems
  - Smart devices
- Memory Care
  - Engagement platforms
  - Wander management



Support for Those Living with Dementia

- Structured programming
  - Staging of dementia
  - Engagement in function and purpose
  - Activities/wellness geared towards each stage
  - Staff training on techniques to support residents
  - Interventions available to help with resident reactions
- Caregiver support for spouses and loved ones
- Support groups
- Educational series

Physical Activity Programs

Rehabilitation Services

- Comprehensive suite of therapy services to meet any chronic condition need
  - Identification of resident goals
  - Chronic pain
  - Chronic disease education
  - Fall prevention
  - Interdisciplinary programming
  - Evidence based specialty programming
  - Dementia programming support
  - Post therapy recommendations including Wellness partnership

Functional Pathways CORE 4+

Breathe Steady • Be Steady • Chi • Engagement

BE STEADY

PATHWAYS TO ENGAGEMENT

A holistic, partnered approach to memory care.

breathe steady

Cardiopulmonary Program

PATHWAYS TO CHI

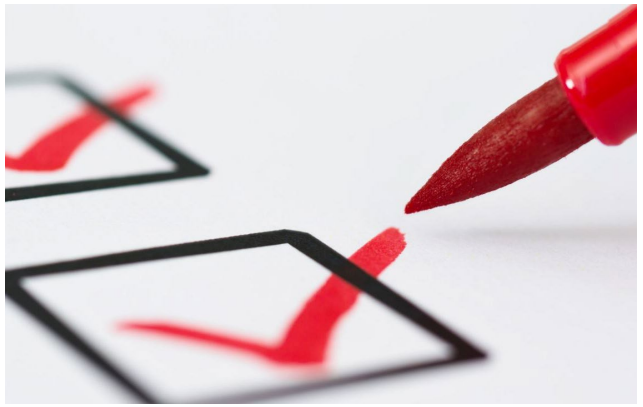
PATHWAYS TO CONTINENCE

Brain Matters

Functional Pathways

AquaFlow

Evaluating Your Existing Offerings



- ✓ What do your community offerings look like?
- ✓ Who is providing your services for your residents?
- ✓ Are you doing any functional fitness testing regularly?
- ✓ Capturing all dimensions of wellness?
- ✓ Core 4+ Programming?
- ✓ Well-rounded support for your residents and their disease management?

Case Study: Specialized Program

- John, 85, and Sara Smith, 80, a married couple, are moving into Prime Life communities. John will be moving into Independent Living and Sara will be moving into Prime Life's memory care assisted living.

- John had been Sara's primary caregiver at home, but as she has needed more help, John has recently decided the care is becoming too difficult. He has been a diabetic for 20 years, with pain from arthritis and new heart problems further challenging him. He has chosen Prime Life because of their excellent dementia care and wants to be able to live nearby to visit every day as he no longer drives.

John

Routine Medical Care

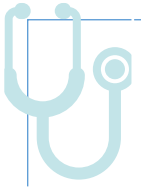
- Annual Wellness Reminder
- Transportation to appointment

Communication Between Providers

- Handout of services to bring to MD appointment
- List of questions for MD

Medication Management

- Pill Organizer
- Access to classes
- Referral to therapy
- Medication delivery/auto refill



Health Monitoring

- Free monthly vital sign screening
- Functional Fit Scorecard 2 times per year
- Monthly Weigh-ins

Lifestyle Adjustments

- Motivational interviewing used to engage
- Readiness to change survey
- Resources offered to reduce alcohol consumption and maintain healthy weight

Health Literacy

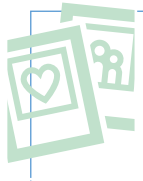
- Monthly Health Talks
- Easy to understand resources like Traffic Lights
- Connection to national organizations

Dietary and Nutrition

- Dietary Plan specific to Diabetes and heart conditions
- Monthly support from dietician as part of community outreach program

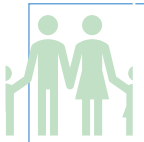
Mental Health

- Depression and anxiety screening once/quarter
- Referral as needed



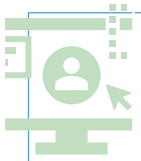
Social Connections

- Support Groups specific to John's needs
- DM, Heart Disease, Caregiver Support
- Current Resident Mentor



Caregiver and Family Support

- Caregiver support specific to those living with dementia
- Caregiver training to increase ability to communicate with those living with dementia



Technology

- Smart Watch to track fitness and nutrition
- Access to physician who provides remote monitoring for chronic conditions

Rehab

- Education on services provided
- Falls, Power WC mobility, Environmental safety
- Referrals from Functional Fit Scorecard

Wellness

- Functional Fit Scorecard
- Twice yearly interest survey
- Robust program that meets interests

Sara

Routine Medical Care
- POC developed and followed in AL
- Followed by NP monthly
- Staging of dementia to drive care needs

Communication Between Providers
- Handout of services to bring to MD appointment
- Coordination of services
- Advanced Care Plan in place

Medication Management
- Management of medications part of AL services

Health Monitoring
- Vital sign assessment according to care plan
- Functional Fit Scorecard for AL 2 times per year

Lifestyle Adjustments
- Motivational interviewing used to engage
- Advanced staff education
- Resources offered to maintain healthy weight

Health Literacy
- Monthly Health Talks
- Easy to understand resources like Traffic Lights

Dietary and Nutrition
- Dietary Plan specific to nutrition, eating and Dementia
- Monthly support from dietician
- Monthly to Bimonthly weighing

Mental Health
- Depression and anxiety screening once/quarter
- Referrals as needed
- Advanced staff education

Social Connections
- Support Groups specific to Sara's needs
- Current Resident Mentor
- Socialization guided by stage of dementia

Caregiver and Family Support
- Caregiver support specific to those living with dementia
- Caregiver training to increase ability to communicate with those living with dementia

Technology
- Advanced fall detection system
- Virtual reality system to increase engagement

Rehab
- Education on services provided
- Falls, Power WC mobility, Environmental safety
- Referrals from Functional Fit Scorecard/Staff

Wellness
- Functional Fit Scorecard
- Twice yearly interest survey
- Robust program that meets interests by stage

Return on Investment

QUESTIONS?

FP Client Portal

https://portal.fprehab.com

Password: academypath

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