

Overview of the Activities of Seniors Health Strategic Clinical Network

2012-2014

Duncan Robertson Senior Medical Director For presentation at BSA Meeting 2014-02-20 Edmonton, AB

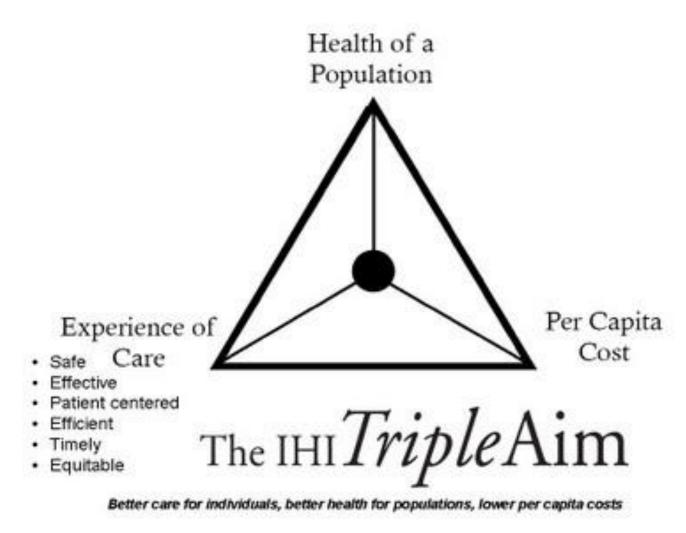


What are Strategic Clinical Networks (SCNs)?

- Collaborative clinical teams (with a strategic mandate)
- Led by clinicians and driven by clinical needs
- Seniors Health SCN comprised of:
 - Front-line physicians and clinicians from all professions (including primary care and community-based providers)
 - Zone leaders
 - Primary & Community Care
 - Researchers
 - Public/patients
 - AH & other external partners





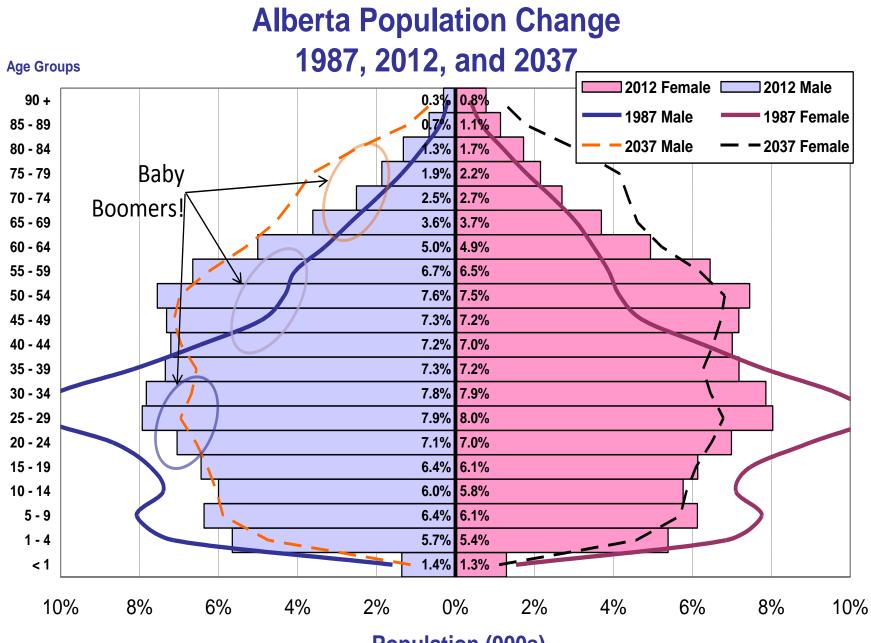




Seniors Health SCN

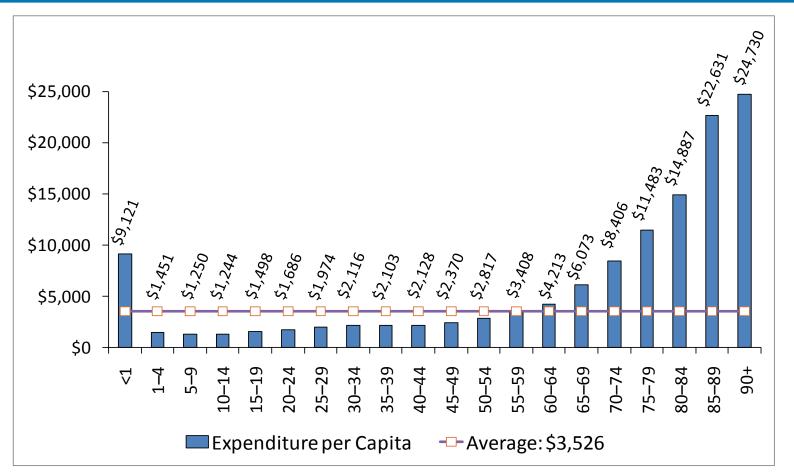
- Launched June 2012
- Vice President: Lynne Mansell
- Senior Medical Director: Duncan Robertson
- Assistant Scientific Director: Heather Hanson
- Scientific Director: Jayna Holroyd Leduc
- Manager: Mollie Cole
- Executive Director: Dennis Cleaver
- Core Committee (40 members)
- 4 Working Groups
- 200+ Community of Practice/Interest Members
- 60+ Researcher Network

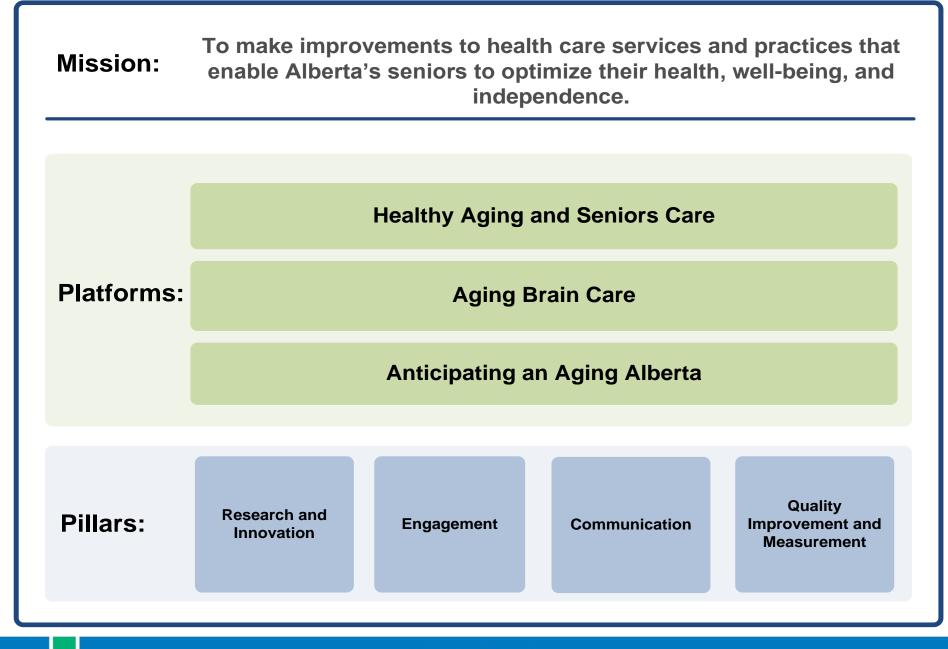




Population (000s)

Alberta Health Services Total Expenditure per Capita by Age Group in 2009 - Canada







Seniors Health SCN Platforms

1. Healthy Aging and Seniors Care

Incorporates evidence-informed strategies on preventing, anticipating, optimizing and living with conditions that compromise health and functional abilities in later life

Examples of Key Initiatives

- Promotion of elder-friendly care practices within and across all service settings (underway)
- Care pathway for healthy aging from health promotion and prevention of frailty to end of life care (future)
- Model for appropriate and timely access to specialized geriatric services



Seniors Health SCN Platforms

2. Aging Brain Care

Incorporates evidence-informed strategies on preventing, anticipating and living with conditions common in later life that result in cognitive changes and that compromise ability to maintain independent living.

Examples of Key Initiatives

- Appropriate Use of Antipsychotics (underway)
- Aging brain care pathway (underway)
- Dementia advice line (proposal stage)
- Public education to increase awareness and dispel myths (future)



Seniors Health SCN Platforms

3. Anticipating an Aging Alberta

Proactively address opportunities and challenges posed by Alberta's demographic challenges through collaboration, consultation and engagement with Albertans, clinicians, researchers, educators and other key stakeholders

Examples of Key Initiatives

- Contributing to Provincial Territorial Committee aging and dementia priorities (in collaboration with Alberta Health)
- Contributing to new Continuing Care Strategy and Quality Assurance initiatives (in collaboration with PCC Seniors Health and HQCA)



Seniors Health Transformational Roadmap

Outlines the strategies and actions the SCN will undertake in the next 3 to 5 years to make improvements to health care services and practices that will enable Alberta seniors to optimize their health, well-being and independence





Seniors Health Transformational Roadmap

Development of the Roadmap

- Purposeful dialogue using variety of engagement methods
- Core Committee led (June 2013 to January 2014)
- Internal and external stakeholders including patients/families, clinicians, researchers, community agencies, government
- Feedback from over 200 people

Alberta Health Services Seniors Health SCN Transformational Roadmap (SH SCN TRM) January 2014

Next Steps

- Share with all participants
- Share and engage with more patients/families, clinicians and community/professional groups
- Select annual priorities and timelines
- Copies will be available-please contact vanessa.bulmer@albertahealthservices.ca



Our Key Performance Indicator

Prevalence of Antipsychotic Drug Use in Absence of Psychotic and Related Conditions (%) - April 2011 - March 2012						
North Zone	Edmonton Zone	Central Zone	Calgary Zone	South Zone	Alberta	Rest of Canada
34.4	27.3	33.3	26.4	35.4	28.1	32.5

Target: Provincial Target of 20% by March 2018

(A five year target)



AUA Guideline – draft

Alberta AUA Guideline is based on BC (2012)

- assess the behavior treat underlying cause(s)
- try non-pharmacologic alternatives
- involve family/alternate decision maker
- monitor behavior (monthly medication reviews)
- decrease/discontinue medication resources



AUA Toolkit of Resources – draft

Posted with AUA guidelines on:

- Continuing Care Desktop (Provincial/AUA tab)
- AHS External Web Page (soon)

Aligns to AUA Guideline

- Behaviour maps/assess frequency/severity
- Assessment tools
- Prescribing information
- Family information guides/links
- Medication review steps
- Withdrawal protocols



Early Adopter Sites

North Sector

Athabasca

Extendicare

Edmonton

- Covenant: Youville
- Capital Care: Strathcona
- Good Samaritan: Southgate

South Sector

Rimbey

• LTC: AHS site

Calgary

- Revera: Bow-Crest
- AgeCare: Beverly
- Brenda Strafford: Bow View
- Bethany Care: Calgary

Lethbridge

• Covenant: St. Michael's

Medicine Hat

Revera: Riverview



Monthly medication reviews

- Required by CC Standards (2008)
- Project team suggested strategies to complete monthly reviews:
 - Monitor behaviour for 1 week prior to review
 - Discuss care with HCAs, other members of team (Rec therapy, staff from evening/nights, etc.); family
 - Alternative care strategies discussed/trialed
 - If behaviour stable, recommended trial weaning of antipsychotic meds; continue to monitor and eventually discontinue



Success in EAS

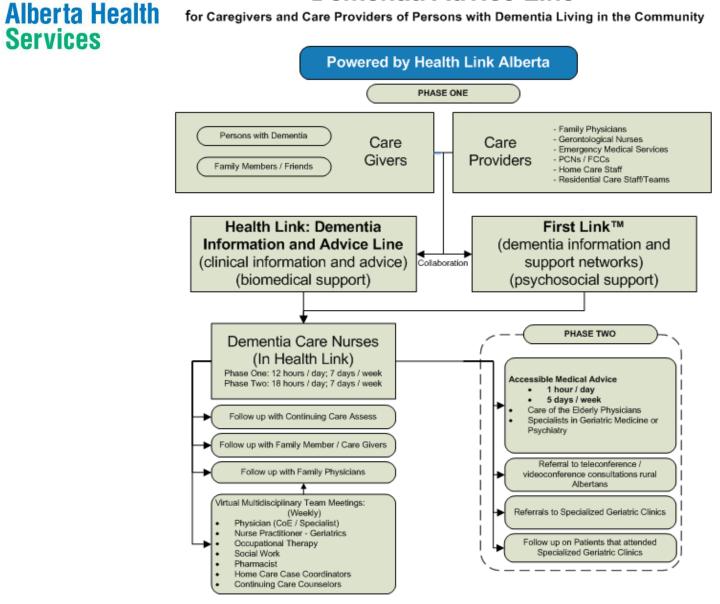
Average RAI 2.0 AUA QI for all 11 EAS sites

- July 2013 40%
- Nov 2013 26%
- 5 EAS achieved project target of AUA QI of below 20%

Dementia Advice Line

for Caregivers and Care Providers of Persons with Dementia Living in the Community

Services





Discussion. Questions?

For information please contact Vanessa.Bulmer@albertahealthservices.ca

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