Healthcare and Community Based Services: Key Partnerships to Promote Aging in Place

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About AOTA

National professional association established 1917
Represents 213,000 occupational therapy practitioners and students in US
Current AOTA membership is about 60,000
About AOTA

Major programs and activities
• assuring the quality OT therapy services
• improving consumer access to OT services
• promoting the professional development of members

Public awareness and advancing the profession
• providing resources
• setting standards
• serving as an advocate to improve health care
OLDER ADULT FALLS
A Growing Burden

2014

46M PEOPLE
29M FALLS
7M INJURIES

2030

74M PEOPLE
49M FALLS
12M INJURIES

STEADI
Stopping Elderly Accidents, Deaths & Injuries

www.cdc.gov/steadi
OLDER ADULT FALLS
Startling Statistics

1 second
An older adult falls every second of every day.

1 in 4
One in four older adults reported a fall in 2014.

#1 cause
Falls are the #1 cause of hip fractures.

STEADI
Stopping Elderly Accidents, Deaths & Injuries

www.cdc.gov/steadi

2018 MEALS ON WHEELS ANNUAL CONFERENCE & EXPO
OLDER ADULT FALLS
A Common Concern

IN 2014:

1 in 4 older adults reported a fall.

More than 7 MILLION of those falls required medical treatment or restricted activity for at least a day.

More than 27,000 older adults died as a result of falls — that’s 74 older adults every day.

STEADI Stopping Elderly Accidents, Deaths & Injuries

www.cdc.gov/steadi
Falls and Community Living

- Continue to be a high cost, high burden issue
- Traditional models not generally successful
- Demographic pressure with ‘Silver Tsunami’
- Issue transcends care settings and community
- Opportunity to enhance prevention and community wellness initiatives
- Collaborative management is lacking in current care models and traditional primary care settings
The Crux of the Problem

“OTs don’t address falls, that’s PT”

Our colleagues beliefs are often inculcated by our own comments.

We need a dramatic culture change to make headway!
Why - Occupational Therapy?

• Assist people in regaining the skills and abilities necessary for independent and satisfying lives

• Address everyday activities
  • ADL – dressing, bathing, toileting, feeding
  • IADL – cooking, medication management, money management, shopping, driving and community mobility.
Why are falls perfect for Interprofessional Teams?

Multi-factorial

- Strength/physical status
- Roles and routines
- Functional status
- Functional Cognition
- Vision
- Environment

More than just gait and balance!!
Home sweet home?
Home Safe Home

- Unrealistic to establish complete safety.
- Goal is to develop a **SAFER** environment.
- Safety may be considered regardless
  - of an individual’s functional level.
- Seek to establish concepts, rather
  - than absolutes.
- One size does not fit all.
- A person’s home is their castle.
Falls and Fires

Unintentional Fall Death Rates, Adults 65+

2005 - 2014, United States
Unintentional Fall Death Rates per 100,000
All Races, Both Sexes, Ages 65+
Source: www.cdc.gov/ injury/wisqars

Death Rate

Don’t Let Your World Go Up In Smoke.
Home fires are preventable.

Make a fire escape plan around your abilities.

U.S. Fire Administration
FEMA

Learn more about fire prevention: www.safe-homes.gov
Poisoning

- Med Errors
- Household Cleaners
- Carbon Monoxide
Assessment Considerations

Person Centered
- Functional status
- Client factors

Home Environment Focused
- Features of the built environment

Diagnosis Specific
- Know your population
Accidents and injuries are costly, but by definition are **PREVENTABLE**

Costs are both $$ and human

- Health care costs
- Lost productivity
- Pain and suffering
- Disability and potential death

One in four older adults will die each year from fall injuries (CDC, 2016)
The juggling act

- Family is often the expert about the context and care for their loved one.
- May be difficult to accept the potential risks associated with the chronic disease.
- Disease awareness and knowledge is critical.
- Prevention can be very hard to sell.
High intensity risks

Multiple incidents with guns.
Knives used as weapons.
Night time wandering in inclement weather.
Poisoning with cleaning supplies.
Driving incidents.
High frequency risks

Falls.

Stove incidents.

General wandering.

Medication errors.
Empirical Research

Higher Hospital Spending on Occupational Therapy Is Associated With Lower Readmission Rates

Andrew T. Rogers¹, Ge Bai¹, Robert A. Lavin², and Gerard F. Anderson¹

Abstract
Hospital executives are under continual pressure to control spending and improve quality. While prior studies have focused on the relationship between overall hospital spending and quality, the relationship between spending on specific services and quality has received minimal attention. The literature thus provides executives limited guidance regarding how they should allocate scarce resources. Using Medicare claims and cost report data, we examined the association between hospital spending for specific services and 30-day readmission rates for heart failure, pneumonia, and acute myocardial infarction. We found that occupational therapy is the only spending category where additional spending has a statistically significant association with lower readmission rates for all three medical conditions. One possible explanation is that occupational therapy places a unique and immediate focus on patients' functional and social needs, which can be important drivers of readmission if left unaddressed.
Evidence from CAPABLE

AGING & HEALTH

Home-Based Care Program Reduces Disability And Promotes Aging In Place

By Sarah L. Santon, Bruce Leff, Jennifer L. Wolff, Laken Roberts, and Laura N. Gitlin

ABSTRACT: The Community Aging in Place, Advancing Better Living for Elders (CAPABLE) program, funded by the Center for Medicare and Medicaid Improvement, Quality Improvement, and Program Dissemination

Background/Objectives: Little is known about cost savings of programs that reduce disability in older adults. The objective was to determine whether the Community Aging in Place, Advancing Better Living for Elders (CAPABLE) program saves Medicaid more money than it costs to provide.

Design: Single-arm clinical trial (N = 204) with a comparison group of individuals (N = 2,013) dually eligible for Medicaid and Medicare matched on baseline prognostic factors.

Conclusion: CAPABLE is associated with lower likelihood of inpatient and long-term service use and lower overall Medicaid spending. The magnitude of reduced Medicaid spending could pay for CAPABLE delivery and provide further Medicaid program savings due to averted services use.

Cost Savings of a Preventive Home Visit Program for Disabled Older Adults

Sarah L. Santon, PhD, † Y. Natalia Alfonso, MS, † Bruce Leff, MD, † Jack Guralnik, MD, PhD, † Jennifer L. Wolff, PhD, † Ian Stockwell, PhD, † Laura N. Gitlin, PhD, † and David Bisbain, PhD †

Functional Goals and Predictors of Their Attainment in Low-Income Community-Dwelling Older Adults

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Abstract: To describe functional goals and factors associated with goal attainment among low-income older adults with disabilities living in the community.

Setting: Participants’ homes.

Participants: Older adults (N = 236) with disability who participated in the Community Aging in Place, Advancing Better Living for Elders trial.

Interventions: A 5-month, home-based, person-directed, structured program delivered by an interdisciplinary team: occupational therapist, registered nurse, and audiologist.

Results: Participants identified 720 functional goals (mean of 3.2 goals per participant, most commonly related to transfers); 82% achieved at least 75% of their goals.
Improving stair visibility
Medication issues
Kitchen Hazards
Safer stoves
Limit access to hazards
Bathroom safety
Prevent wandering

- Send for an identification bracelet from the Alzheimer’s Association “Safe Return” Program.
- Call 1-800-548-2111 for information.
Wandering continued

Give the name and a recent picture of the person to your local police in case the person wanders away and gets lost.
Independence IN the Home
AND in the Community

Prevention of isolation
Prevention of injury
Prolong ability to “age in place?”
Ultimate goal is to promote participation!!
THANK YOU!

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