

Care Planning, Technology and Integration: Bright Spots & View from On-the-Ground Frail Elderly People

Putting the Person at the Center Workshop

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October 16, 2014



Sad Tale - NY Times Sept 28, 2014





The MediCaring Service Delivery Model:

1. Frail elders enrolled in a geographic community:

(>65 w/2+ ADLs or dementia, or 80+)

- 2. Longitudinal, elder-driven care plans
- 3. More efficient medical care tailored to frail elders (including at home)
- 4. Incorporating health, social, and supportive services
- 5. Ongoing monitoring and improvement guided at the local level by a Community Board
- 6. Using core funding derived from Medicare savings in a modified ACO structure



Care Plan Decision Modifiers Patient/family preferences (values, priorities, wishes, adv directives, expectations, etc...) • Patient situation (access to care, support, resources, setting, transportation, etc...) Patient allergies/intolerances Goals Interventions/Actions **Health Conditions/** (e.g. medications, wound Desired outcomes Care Concerns Plan Readiness consults, rehab, calling MD **Active Problems** Prognosis Prioritize Orders, etc... Related Conditions Disease Progression services, support, etc...) Related **Risks/Concerns:** Start/stop date, interval Wellness Interventions Authorizing/responsible Decision Barriers Progress Decision parties/roles/contact info • Injury (e.g. falls) Support Support Setting of care • Illness (e.g. ulcers, Instructions/parameters Barriers **Patient Status** cancer, stroke, Supplies/Vendors hypoglycemia, Functional Planned assessments **Assessments** hepatitis, diarrhea, Cognitive Concerns Expected outcomes depression, etc. Physical Related Conditions **Environmental** Status of intervention **Outcomes** Side effects **Risk Factors**

- Age, gender
- Significant Past Medical/Surgical Hx
- Family Hx, Race/Ethnicity, Genetics
- Historical exposures/lifestyle (e.g. alcohol, smoke, radiation, diet, exercise, workplace, sexual...)

The Care Plan (Concerns, Goals, Interventions, and Care Team), along with Risk Factors and Decision Modifiers, iteratively evolve over time

Disaster for the Frail Elderly: A Root Cause

Social Services

- Funded as safety net
- Under-measured
- Many programs, many gaps





Unreliable

Unmanaged

Wasteful "care"

Medical Services

- Open-ended funding
- Inappropriate "standard" goals
- Dysfx quality measures





Challenges and Opportunities

- Adequate understanding of individual situation
- Adequate prognostication of likely courses
- ▲ Frail elder (and family) goals and priorities
- ▲ Limitations in the services available
- Converging on a plan
- ▲ Making it available and dynamic and efficient
- ▲ Feedback on care plan performance
- Aggregating care plans and performance for a population to create a management instrument!!

