

The Quality and Continuity of Mental Health Care for Seniors in Assisted Living and Long Term Care



Colleen J Maxwell, PhD

Community Health Sciences & Medicine, University of Calgary

*Co-authors: Strain LA, Hogan D, Patten SB, Wanless D, Gilbert E, Soo A,
on behalf of the ACCES Mental Health Group.*

Found in Translation: Sharing Alberta Research for
Mental Wellness in Seniors and Persons with Disabilities
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Why research in this area...

- Continuing care reform/financial constraints – rapid growth in ALFs
- How we “care” for vulnerable populations – implications for Health System
 - Poor quality in continuing care sector – increased AC utilization/ALC bed use (major prov’l priority areas)
 - ↓ AC LOS – increased acuity of clients (HC/AL/LTC)
- A population *vulnerable* to falling through cracks:
 - Financial constraints
 - Lack of available resources/services
 - Insufficient public/policy awareness of their situations
 - Poor quality of care

Assisted Living in Canada

- Rapid Expansion (~ 50%+ opened last 5-10 yrs)
- Growth spurred by:
 - health system reform;
 - Aging population, preference for home-like setting
 - availability of federal-provincial cost-shared affordable housing programs
- ~70%+ state designed to support ‘aging in place’
... but admission/discharge criteria vary
- Absence of research – (mental) health needs and outcomes, quality of care and quality of life

Key Domains Under Study...

- System capability to respond to those with complex needs
 - Seniors with ADRD and/or depression in AL/SL & LTC
 - Definition and role of special care units (dementia care)
- Optimal Medication Use
 - overuse, misuse and underuse
 - Primary conditions (dementia and/or depression) and associated conditions (behavioural problems, pain)
- Supports and barriers to independent living
 - Assistance from family caregivers
 - Burden on family caregivers (care, financial, health)

Research Objectives

- Examine the health, social needs, quality of care & outcomes of seniors with ADRD and/or depression across designated assisted living (DAL) & long-term care (LTC) settings in AB
- Describe and compare the prevalence and correlates (resident & facility) of cognitive impairment, depression, behavioural symptoms, pain and related treatments levels
- Examine and compare patterns of family engagement, caregiver health & well-being (and associations with resident/facility factors)



Data Collection

- ✓ Baseline with ~ 1-year follow-up
 - Resident Assessments - interRAI-AL and interRAI-LTCF
- ✓ Link ACCES data with AB Admin Data (2 year outcomes)
- ✓ Resident satisfaction/quality of life survey
- ✓ Interviews with family caregivers
 - Including discharge / decedent interviews
- ✓ Facility survey (staffing, services, policies etc.)
- Interviews with key decision-makers...
- Focus groups (clinicians, providers)...

Outcomes of Interest

- Change in physical and cognitive functioning
- Change in emotional well-being, depressive symptoms
- Relocation to higher levels of care (2 yr f-up)
- Hospitalization and mortality rates (2 yr f-up)
- Quality indicators

Sample Size - Baseline

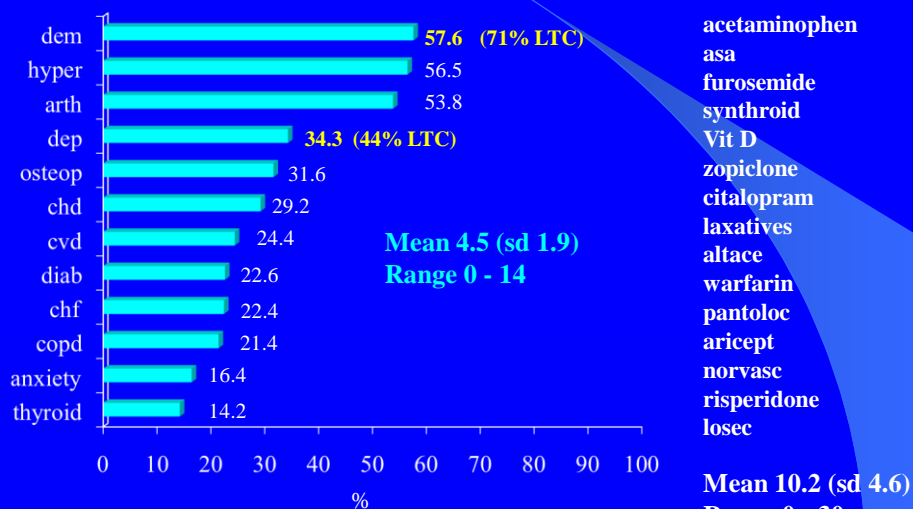
	DAL Residents	DAL Caregivers	LTC Residents	LTC Caregivers	TOTAL
Calgary Health Region	311	274	296	271	1152
Chinook Health Region	234	188	206	178	806
David Thompson Health Region	155	147	149	144	595
Capital Health	281	267	239	221	1008
East Central Health	108	98	110	104	420
ALL REGIONS	1089	974	1000	918	3981

¹¹ There were also 33 RAIs (16 in DAL and 17 in LTC) completed with residents under the age of 65 . In addition, there were 28 family interviews (14 in DAL and 14 in LTC) completed for family members of residents under the age of 65 .

Facilities

Region	Number of DAL Facilities	Number of LTC Facilities
Calgary Health Region	13	14
Chinook Health Region	11	8
David Thompson Health Region	12	10
Capital Health	14	14
East Central Health	9	8
TOTAL	59	54

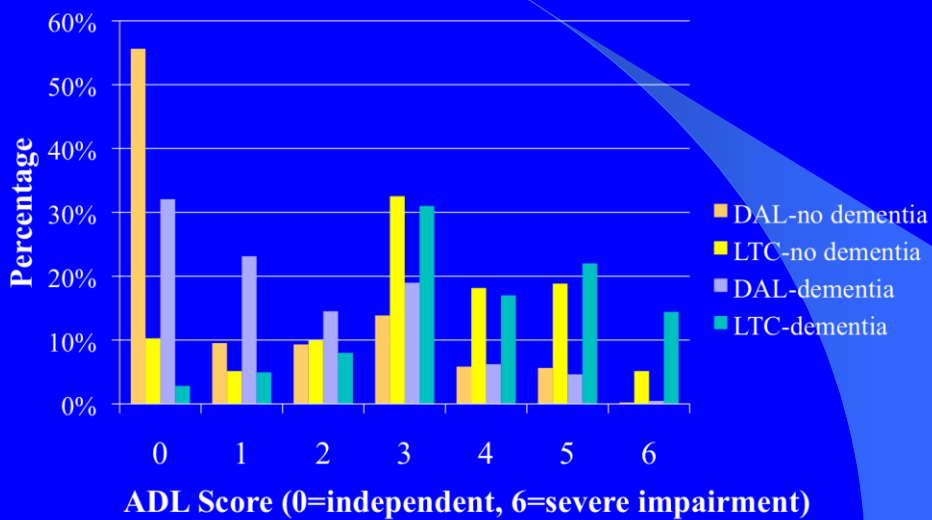
Most Common Diagnoses / Drugs



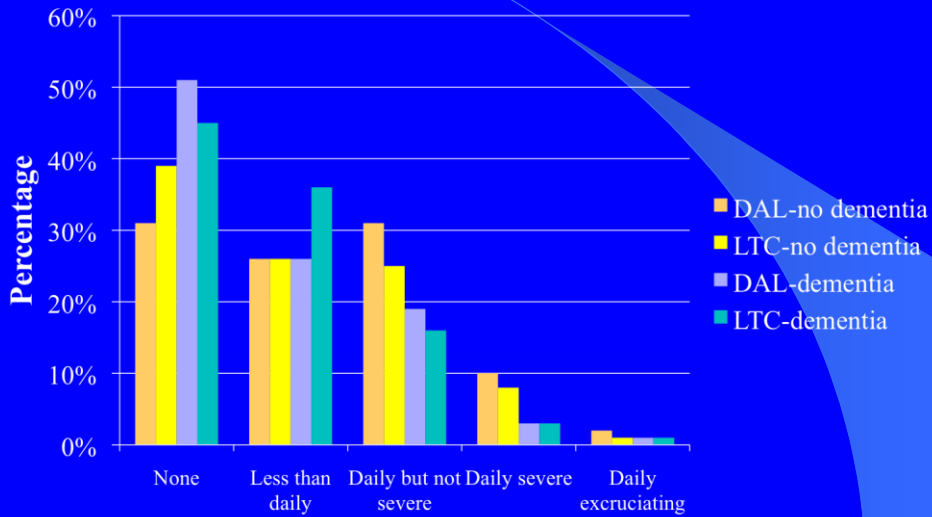
ACCES Study: Preliminary findings

Characteristics of Residents by Dementia Diagnosis	DAL (n=1089)		LTC (n=1000)	
	No Dementia (n=462)	Dementia (n=627)	No Dementia (n=292)	Dementia (n=708)
Mean (SD) Age	83.4 (8.0)	85.2 (6.7)	82.6 (8.8)	85.9 (6.9)
% Female	75.1%	77.8%	62.0%	67.2%
% Married/sig. other	13.4%	15.5%	25.7%	25.3%
% Diagnosed depression	33.1%	35.3%	47.6%	42.1%
% DRS score >=3*	13.6%	23.3%	45.9%	52.6%
% Moderate/high social engagement	85.1%	79.0%	75.7%	61.7%
Mean (SD) # of documented diseases	4.4 (1.9)	4.8 (2.0)	4.9 (2.0)	5.4 (2.1)
Mean (SD) # of medications	9.1 (3.6)	7.7 (3.6)	9.1 (3.8)	7.4 (3.5)

Activities of Daily Living (ADL) Hierarchy Scale among Residents with and without Dementia



Pain Scale among Residents with and without Dementia



Next Steps

- Ongoing Analyses of ACCES cohort:
 - New PhD student & Post-Doctoral Fellows
 - Resident and Family Caregiver Data and Policy Issues
- Workshop for Research / Provider / Decision-Maker Team Partners (April 28-30, 2011)
- Planned (new) Data Collection Activities:
 - Focus Groups (Health Care Providers and Clinicians)
 - Key Informant Interviews (Providers / Policy Makers)

*Thank You
Questions?...*



Contact Information

Colleen Maxwell / Laurel Strain (UofA)

University of Calgary

3280 Hospital Drive NW

Calgary, AB T2N 4Z6

(403) 220-6557

e-mail: maxwell@ucalgary.ca

laurel.strain@ualberta.ca

Research Team

- Principal Investigator
 - Colleen Maxwell, University of Calgary
- Co-investigators
 - Laurel Strain, University of Alberta
 - David Hogan, University of Calgary
 - Scott Patten, University of Calgary
 - Andrea Gruneir, University of Toronto
 - Brad Hagen, University of Lethbridge
 - Anne Sales, University of Alberta
 - Ken Le Clair, Queens University & CCSMH
 - Kimberly Wilson, CCSMH
- Decision Maker & Provider Partners
 - Carmen Grabusic, Alberta Seniors & Community Supports
 - Bruce West, Alberta Continuing Care Association
 - Corinne Schalm, Shepherd's Care Foundation
 - Edythe Andison, Good Samaritan Society
 - Melina Dharma-Wardene, Bethany Care Society
 - Brigitte Berry, Extendicare Canada
 - Colin Zieber, Seniors Health, AHS
- Graduate Students & Research Associates
(Deanna Wanless, Dr. Monica Cepoiu, Dr. Erin Gilbert, Andrea Soo)