





Does Comprehensive Geriatric Assessment have a role in Care Homes?

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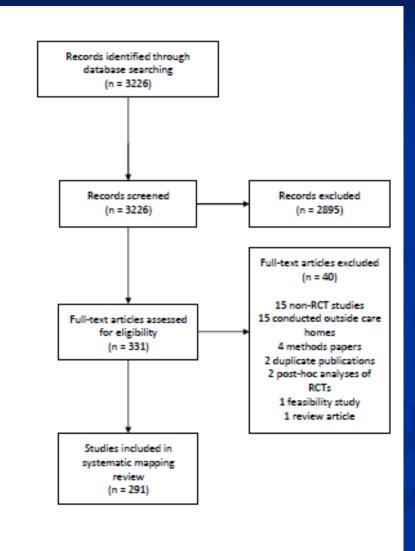
Care Home Literature Review

Identification

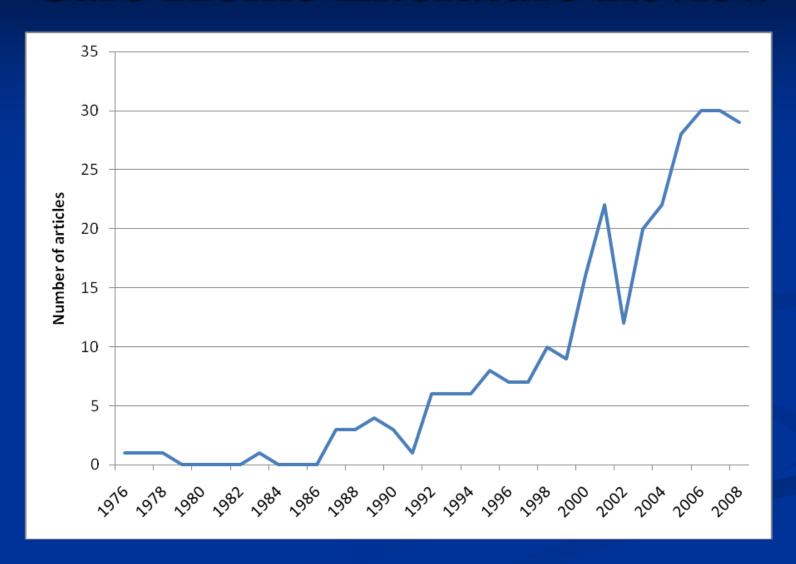
Screening

Elig Ibility

Included



Care Home Literature Review



Issues....

Often very small studies.

Often not adequately blinded.

Often not accounting for cluster effect.

Or where they did, the cluster sizes were all wrong....

Existing models of care were inadequate

- 57% of residents couldn't access all healthcare services required.
- One of more prescribing error in up to 80% of residents.
- Quality outcomes Framework:
 - 29% exception reported for CHD
 - 34% for stroke
 - 35% for diabetes

Care Home Outcome Study

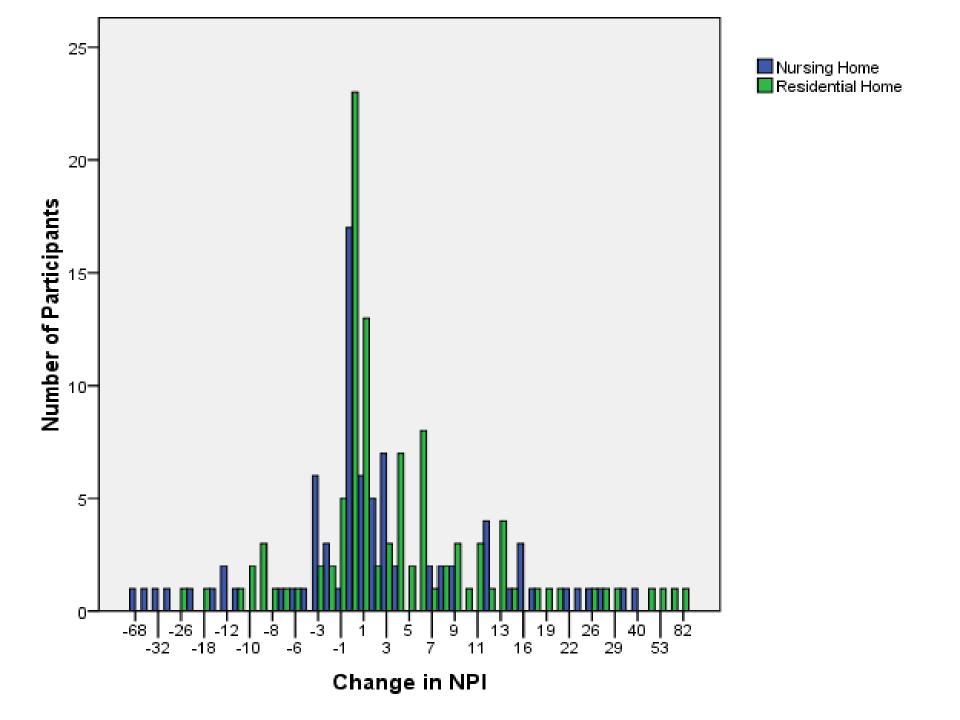
- Observational Cohort study
- Baseline data collection with 6 month follow-up
- Inclusion criteria:
 - Care home resident
 - Aged 65 years or over
- Exclusion criteria:
 - Actively dying
 - Short-term respite

Care Home Outcome Study

Variable	Whole	Residential homes	Nursing Homes	
	Cohort			
Number of participants	227	124	103	
Mean Age (SD)	85.2 (7.5)	86.8 (7.3)	83.2 (7.3)**	
% of residents who are female	78.9	80.6	76.7	
Mean no of GPs per home (SD)	4.63 (2.73)	5 (2.60)	4.2 (3.11)	
Median no. of days since admitted to	79 (148)	68 (157)	94 (132)	
home (IQR)				
Median MNA Score (IQR)	20 (6.5)	21.5 (5.5)	17.5 (7)**	
Mean body mass index (SD)	23.8 (5.9)	24.5 (5.9)	22.8 (5.7)	
Median Barthel Index (IQR)	9 (11)	11 (8)	5 (7)**	
Median MMSE (IQR)	13 (18)	16 (15)	10 (18)**	
Mean SOF Score (SD)	0.9 (0.7)	1.1 (0.7)	0.8 (0.7)**	
Median grip strength in PSI (IQR)	4 (5)	5 (2.5)	3 (6)**	
Mean no of diagnoses (SD)	6.2 (4)	6.9 (3.1)	5.5 (2.4)**	
Median no of medications (IQR)	8 (5)	7 (5)	8 (5)	
Median NPI score (IQR)	3 (15)	2 (9)	6 (27)**	
**Significant difference between residential/ nursing homes (p<0.01)				

Specific Dependencies from BI	Whole	Residential	Nursing	<i>p</i> -value*	
	cohort	Homes	Homes		
	%	%	%		
Incontinent of urine (regularly)	56.83	42.74	73.79	<0.01	
Incontinent of faeces (regularly)	41.85	28.23	58.25	<0.01	
Need help to wash/brush hair	59.47	45.16	76.70	<0.01	
Need at least some help to use the toilet (help	74.89	62.90	89.32	<0.01	
on off; wiping)					
Need at least some help with eating (food	45.37	29.84	64.08	<0.01	
cutting; spreading)					
Need help of two people to transfer to	38.33	18.55	62.14	<0.01	
bed/chair					
Have no mobility (cannot walk even with aids	36.12	18.55	57.28	<0.01	
or help of one person; unable to be					
independent with wheelchair					
Need at least some help to walk or wheel	29.07	35.48	21.36	<0.01	
indoors					
Need to be dressed (unable to do half the task	86.78	81.45	93.20	<0.01	
unaided)					
Unable to manage stairs	80.62	77.42	84.47	0.21	
Needs help with bathing	93.83	91.94	96.12	0.19	
* Calculated using Mann-Whitney U for difference between residential and nursing homes					

	Number (%) of respondents			
	Any	Severe	Frequent	
	Behavioural	Behavioural	Behavioural	
	Symptoms	Symptoms	Symptoms	
Agitation	37.9%	16.7%	25.6%	
Nervousness	33.5%	11%	27.1%	
Irritability	30.4%	15.4%	21.1%	
Depression	22.9%	8.4%	17.2%	
Difficulty sleeping	20.3%	5.3%	14.1%	
Appetite disturbance	17.2%	11.5%	15.0%	
Motor behaviour	16.7%	11%	13.2%	
Apathy	13.7%	7.5%	11%	
Disinhibition	13.2%	10.1%	9.3%	
Delusions	8.8%	5.7%	17%	
Hallucinations	7.9%	3.5%	5.7%	
Elation	2.6%	1.8%	1.8%	
Elation	2.6%	1.8%	1.8%	



		MNA categories			
				Normal	
			At risk of	nutritional	
		Malnourished	malnutrition	status	Total
Weight lost	No weight loss	23	97	28	148
	Weight loss	38	16	1	55
Total		61	113	29	203

Deaths

- Death rate over 6 months
 - 16% for whole group
 - Range 0-31% between homes
 - 21⁷% for nursing
 - 12% for residential

- Mean no. of days to death
 - 83 for the cohort as a whole
 - 96 for residential homes
 - 72 for nursing homes

To summarise

- Care home residents:
 - Frail
 - Malnourished
 - Dependent
 - Effected by challenging behaviour.
 - Have multiple diagnoses.
 - Take multiple medications.
 - Are approaching death.

Effective healthcare responses will....

- Take account of the evidence-base.
- Have expertise in management of:
 - Multiple diagnoses
 - Immobility
 - Incontinence
 - Challenging behaviour
 - Polypharmacy
 - Manutrition
 - End-of-life care

Staff Interviews in Care Homes (STICH) Study

- 7 care home managers
- 2 care home nurses
- 9 care home care assistants
- 6 GPs
- 3 dementia outreach nurses
- 2 district nurses
- 2 advance nurse practitioners
- 1 OT

Important observation

•Care home managers are pivotal.

•Relationships between GPs and care home managers are pivotal.

Common problems

- Older people are very complicated.
- Trajectories are difficult to predict.
- Don't have the training.
- Resources are tight.
- Regulation is always present.
- Roles and responsibilities aren't clear.
- Communication is a problem.

Identified responses

Regulate (stick)

Remunerate (carrot)

Parachute in troops

■ The social movement model.

Mechanistic solutions – the "LES"

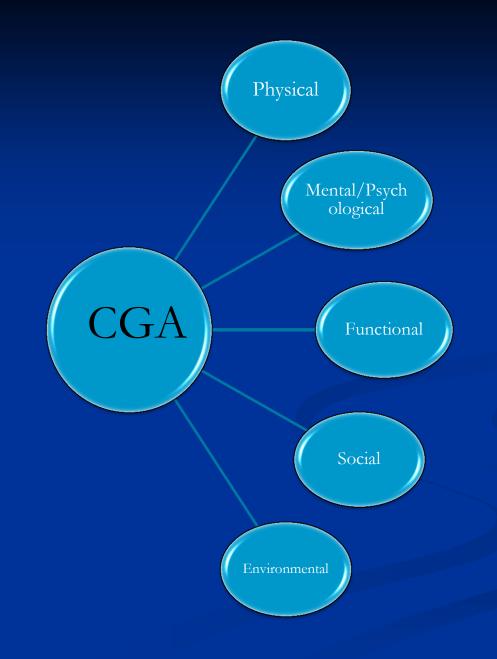
- Comprehensive assessment at the point of admission.
- Regular contact with home (at least two weekly).
- Regular review of resident (at least 6 monthly).
- 1:1 relationships GP:care home.

Necessary but not sufficient

1:1 relationship

Trusting relationship with mutual respect

"I wouldn't wish our GP/care home on my worst enemy"

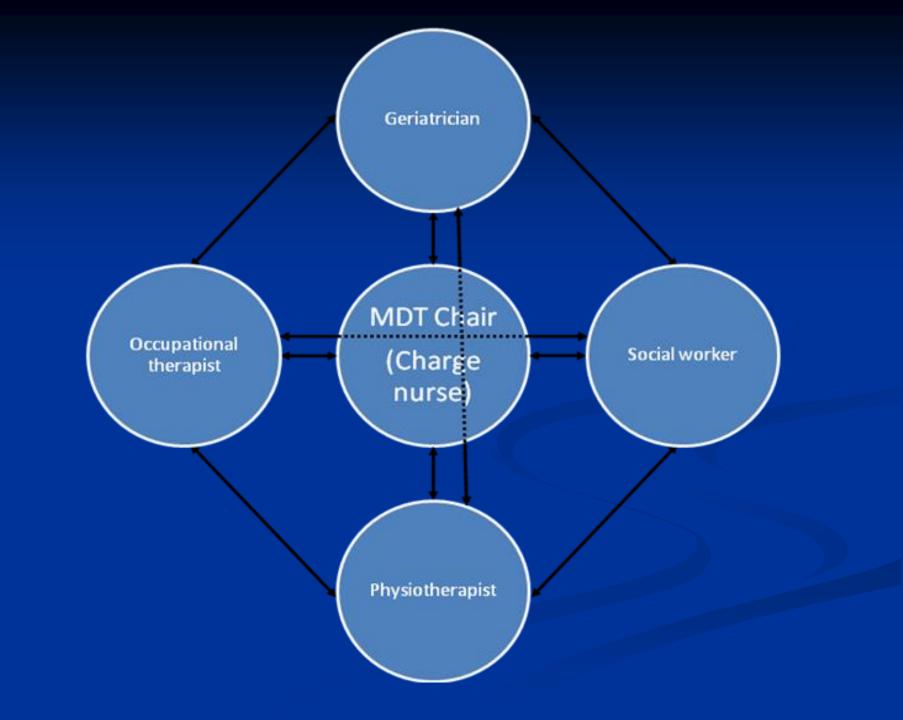


Assessment

Goals

Stratified problem list

Bespoke Management Plan



References

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