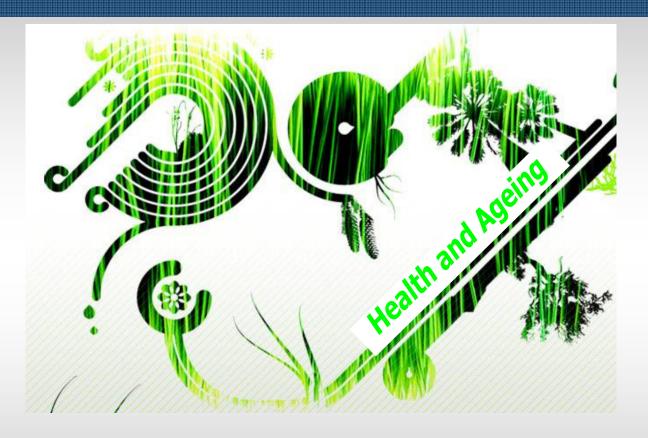
### Health Informatics and Geriatric Medicine



Tracey Fisher

Master of Health Informatics

Dalhousie University

### **Introduction to Health Informatics**

- "Health informatics is the intersection of clinical, IT and management practices to achieve better health."
- ➤ It is the rational study of the way we think about patients, and the way that treatments are defined, selected and evolved.
- ➤ It is the study of how medical knowledge is created, shaped, shared and applied. (Enrico Coiera 1997)
- ➤ Health Informaticians can be the bridge between technology and clinical practice.

### **Health Informatics**

#### Goals of Informaticians:

- right information is available
- right people within an organization
- at the right time and place
- and for the right price
- ➤ Health Informatics is currently gaining in awareness as it supports patient safety, evidence based medicine, patient education and knowledge translation and

exchange.



### **Gero-informatics**

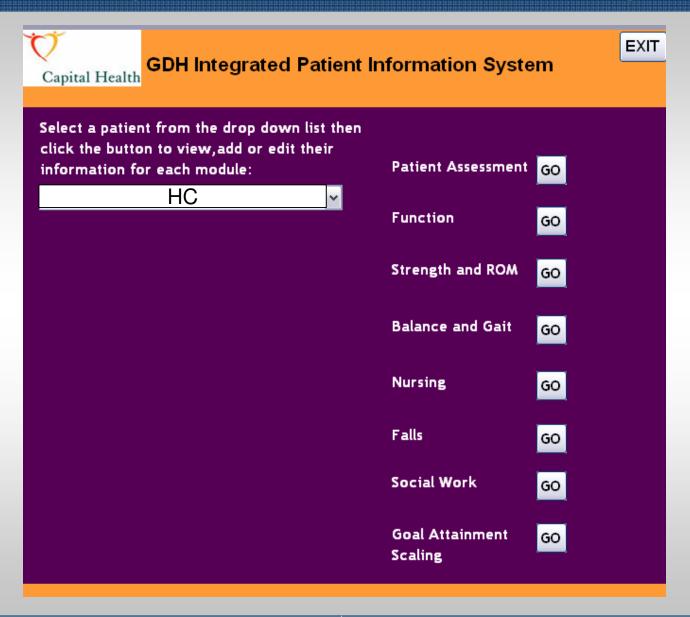
### **GERO-INFORMATICS**

- Not a widely known term but exists!!
- Important because of our ageing population.
- Gaps in knowledge, practice, outcome evaluation, will begin to weigh heavily on geriatric medicine.\*
- Gero-informatics specifically targets
  - Physical functional status, IADLs and ADLs.
  - Cognitive status
  - > Patients' preferences for care
  - Key information from and about caregivers

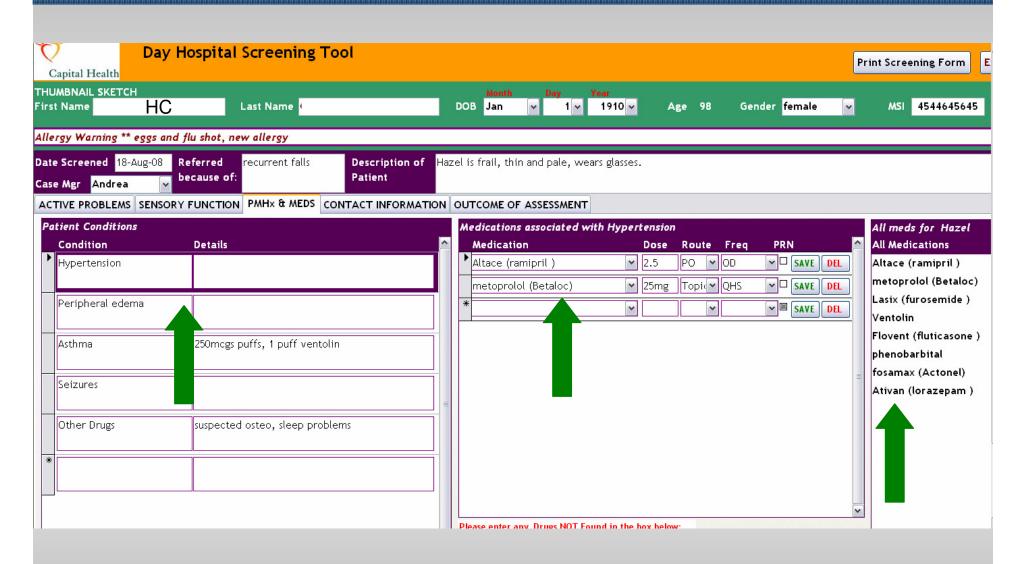
### **Gero-informatics and the GDH**

- ➤ Older adults face many challenges in improving health and obtaining high-quality, comprehensive, coordinated healthcare.
- Geriatric Day Hospital and the Interdisciplinary team
  - ➤ Evidence regarding long-term outcomes such as quality of life and institutionalization related to Canadian day hospital programs has been largely **inconclusive** (Crilly et al., 2005, Myint, 2005)
    - > due to lack of **systematic data collection** tools
    - > methodological **pitfalls** in defining and measuring **outcomes** in this dynamic population.\*

## **GDH Integrated Patient Information System**



## **Medication Management**



## **Function**

O	Fur	nction	Mod	dule							
Capital He	ealth First I	Vame	-	IC	Last Name	0000 400	Age 9	98		Print Function Report	Exit
Allergy Warı	ning ** egg	s and flu	shot, n	ew allergy							
Instrumental Activities of Daily Living Basic Activities of Daily Living											
col	LATERAL	NEVER D	ID	CURRENT	DESCRIPTION					CONCERNS	GOAL SET?
FINANCES			Notes:	~		~				☐ Missing Bills ☐ Paying Twice ☐ Spending ☐ POA Needed	V
DRIVING			Notes:	~		<b>Y</b>				☐ MVA's ☐ Risky Behaviour ☐ Family Concerned ☐ Failed Previous Drivi	ing Test
SHOPPING			Notes:	<u> </u>		<u> </u>				☐ Poor Nutrition ☐ Inadequate Access	~
COOKING			Notes:	<u> </u>		<b>V</b>				☐ Leaves Stove On ☐ Burning Pots ☐ Needs Pre-made Me	als
MEDS			Notes:	<b>V</b>		<b>V</b>				☐ Missed Doses ☐ Double Doses ☐ Complex Schedule ☐ Needs Blister Pack ☐ Needs Dosette ☐ Needs VON/Supervis	ion
PHONE			Notes:	<u> </u>		V				☐ Problems using Lifel ☐ Needs Lifeline	ine 💌
LAUNDRY			Notes:	<u> </u>		~					~
CLEANING			Notes:	<b>v</b>		<b>V</b>				☐ Cannot Maintain House Interior/Exterior	~

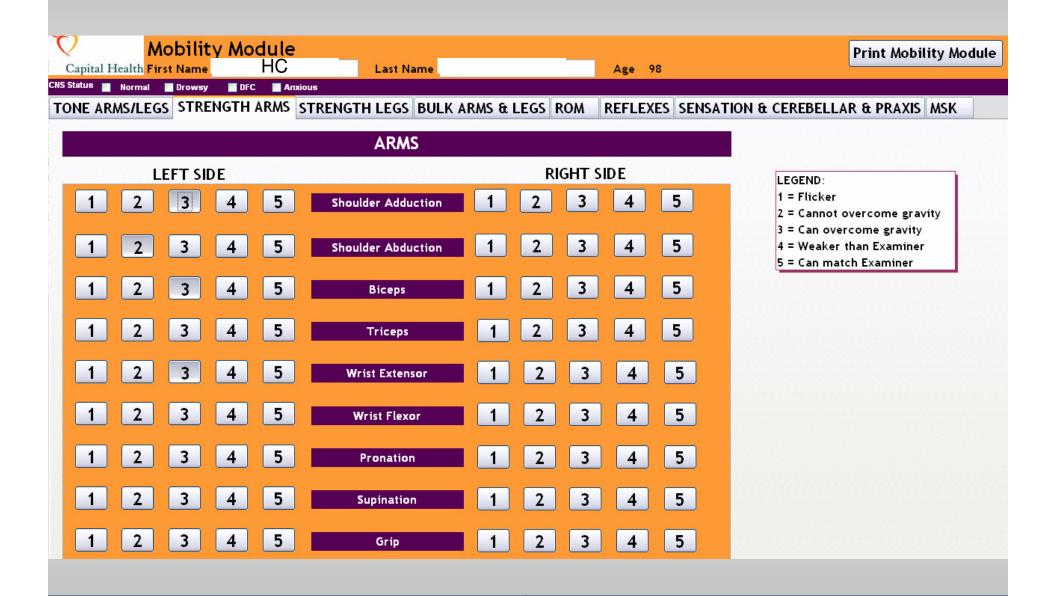


# IADL and ADL Report

Capital Health Geriatric Medicine Functional History: In Patient and Caregive		PATIENT LABEL
Case Manager: Andrea HC is a 98 year old fem	MSI 4544645645 rale screened on 8/18/2008 who was	
referred because of : recurrent fa	lls	
HC		
INSTRUMENTAL ACTIVIT	TIES OF DAILY LIVING	Legend: A= Assisted, I=Independent, D=Dependent
COL. N/A CI	URRENT DESCRIPTION	CONCERNS GOAL SET
FINANCES 🔽 🗌	A Needs help with major	r purchases
Instructs her son regarding finar	ncial transactions.	✓ Paying Twice
		☐ Spending ☑ POA Needed
DRIVING  ☑ □	D Always needs assista	nce MVA's
		Risky Behaviour
		☐ Family Concerned ☐ Failed Previous Driving Test
SHOPPING 🗹 🗆	A Independent for smal	purchases
<del>_</del>		☐ Inadequate Access



## **Mobility Module**



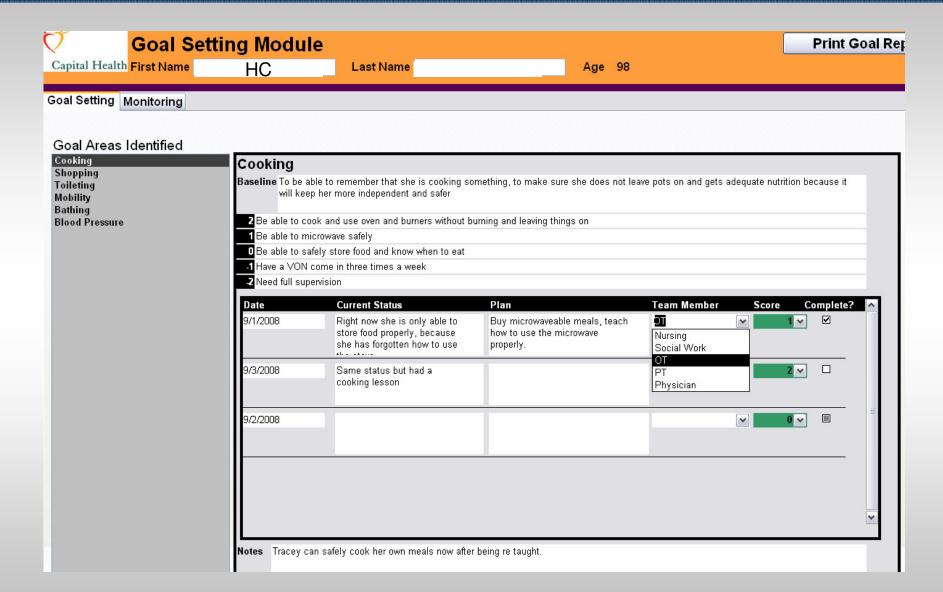
September 3rd, 2008

**Geriatric Medicine Research** 

## **Balance and Gait**

Balance and Gait Module							Print Balance Information Exit	
Capital Health First Nam	HC	Last Name	Age 98	3				
BALANCE GAIT								
Date 19-Aug-08 Assesso	r Debbie W.	TUG:	Aid 4 pronged cane	~				
		omin walk:			Berg	POMA	Balance Notes	
Sitting Balance Unsupported	Able to sit 30sec or more			~	2	1		
Sitting to Standing	Able to stand using hands	Able to stand using hands after several tries						
Immediate Standing Balance	Steady but uses walker or	Steady but uses walker or other support				1		
Standing Balance Unsupported	Able to stand 2min with su	pervision (standby)		~	3	1		
Standing to Sitting				~	0	0		
Transfers (Bed to Chair)	Needs assistance to sit Sits independently but has uncontrolled descent Uses back legs against chair to control descent				0	0	]	
Sternal Nudge	Controls transfer from star Sits safely with minimal us		0	0				
Standing Eyes Closed				~	0	0		
Standing Feet Together				~	0	0		
Functional Reach Dist-> 0 M				~	0	0		
Retrieving Object from Floor				~	0	0		
Turning neck to look behind				~	0	0		
Turn 360 degrees				~	0	0		
Place Alternate Foot on Stool				~	0	0		
Tandem Stance				~	0	0		

## **Goal Attainment Scaling (Prototype)**

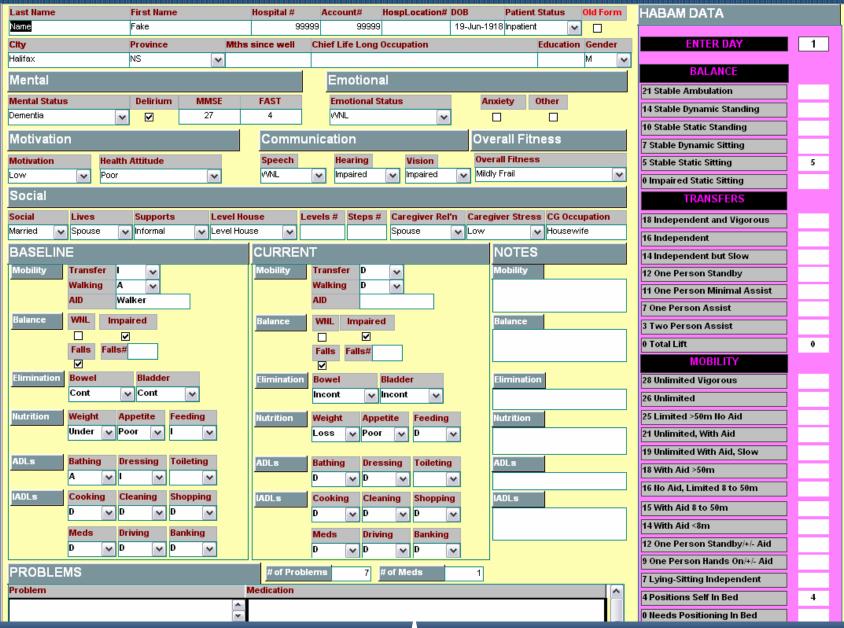




### **CGA Assessment and HABAM Data**

- Computerized a prototype for the CGA assessment form and HABAM assessment scale
- Can calculate the frailty score instantly
- > Data can be extracted and used for research
- Links the CGA to HABAM all HABAM scores entered each day.

### **CGA and HABAM**

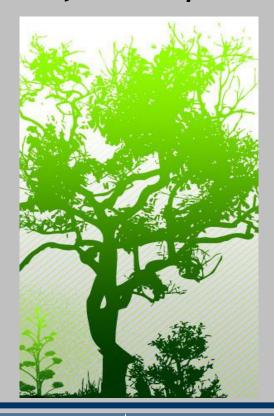


## **Moving Forward**

- ➤ We have the data which when organized becomes meaningful information.
- Information is then interpreted and processed by our minds to become knowledge.
- Knowledge can then be shared to make care better.
  - Patient focused approach
  - > Be used to inform policy makers
  - Drive research
  - Help with accountability
  - Produce reports for management
  - ➤ Be used to measure patient OUTCOMES

### **Gero-informatics**

If we take care of our little corner, together we can better patient care and be leaders in innovation to help those that follow in our footsteps.



## **Questions...Comments...Thoughts?**



Thank you!