Schedule D.3

# Annual Evaluation Report Project ECHO Care of the Elderly 2020-2021







North East Specialized Geriatric Centre Centre gériatrique spécialisé du Nord-Est

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This report includes data requested by the Ontario Ministry of Health and Long-Term Care for Project ECHO Care of the Elderly for our Schedule D.3 Annual Evaluation Report.

# **Executive Summary**

What a year this has been!

At the start of the 2020-2021 fiscal year, the COVID-19 pandemic was just in the first wave. Healthcare providers were struggling with ever-changing information, practices and restrictions. It was difficult to know where to go for information and what information was accurate. Especially hard hit was the long-term care (LTC) sector. We quickly pivoted and altered our originally planned ECHO Care of the Elderly (ECHO COE): LTC program, to focus instead on COVID-19. In collaboration with the Ontario Centres for Learning, Research and Innovation in LTC, this ECHO supported healthcare providers working in LTC to build capacity, strengthen their LTC teams and support residents through just-in-time learning. More recently, we ran evening sessions for LTC leaders with a focus on increasing vaccine acceptance in their LTC homes.

Despite the pandemic, or maybe because of the pandemic, **the need for ECHO COE has never been stronger**. Overall, our number of learning partners increased by 80%! With the ECHO infrastructure already in place, we were easily able to move forward with our Community (September-December) and Dementia (January-March) programs. Not surprisingly, many of the cases and didactic presentations had a "pandemic" lens. It was clear that older adults and those who care for them had to navigate through the waters of COVID-19 restrictions in order to continue to provide excellent care. Learning partners told us that they looked forward to sharing best practices, tools and discussing cases, and noted that this was a way to stay personally and professionally connected in an incredibly isolating time.

The success of ECHO COE, validated through our continuous program evaluation, highlighted the need for expansion at a national level. There are great challenges facing healthcare of older adults across the country now and

# **Executive Summary**

in the future that can be addressed, in part, by building capacity of primary care providers. The pandemic has magnified the vulnerability of older adults across the continuum of care. Issues such as equity in care provision and ageism are in the headlines. By sharing knowledge and building a community of practice, ECHO COE is one way to raise awareness, build capacity, break down "care silos" and address these issues. We were fortunate this year to receive funding from the Royal Bank of Canada Foundation to pilot a National ECHO COE: Mental Health program. Learning together with primary care providers across Canada emphasized the need for continued growth and expansion of ECHO COE.

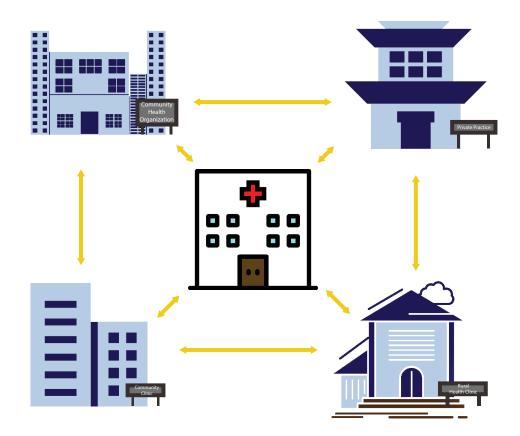
Over the next fiscal year, we plan to continue evaluating the impact of case recommendations on patient-level outcomes, investigate whether tools and strategies discussed during sessions are being implemented and evaluate engagement of learning partners.

We are grateful for the opportunity to continue implementing such a wonderful program and to be part of the ECHO Ontario team.

**David Conn**, VP Education ECHO COE Medical Lead **Lisa Sokoloff**, Manager, Training and Simulation ECHO COE Program Director

# About ECHO Care of the Elderly

Since 2018, Project ECHO (Extension of Community Health Outcomes) Care of the Elderly (COE) has aimed to enhance the quality of care of older adults in Ontario by improving the knowledge, skills, and abilities of health care providers. Providers, or learning partners, are connected both to each other as well as an interprofessional team of geriatric specialists through weekly videoconferencing sessions where both didactic presentations and case studies are used to increase healthcare providers' capacity. Through this multi-directional exchange of knowledge, ECHO COE has increased the knowledge and confidence of providers in the care of older adults with complex health needs.



## ECHO Care of the Elderly: Community

ECHO COE targets community-based health care providers who wish to expand their skills and build their capacity in caring for older adults with complex care needs.

## ECHO Care of the Elderly: Long-Term Care

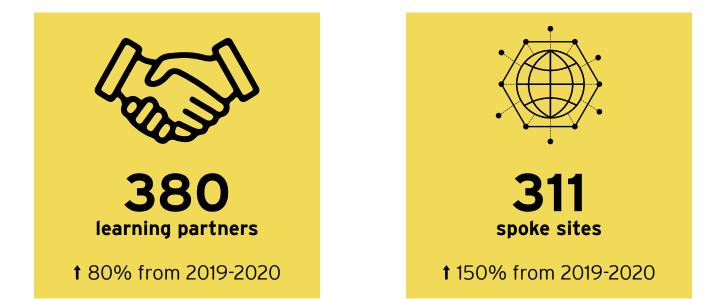
ECHO COE-LTC targets interprofessional teams who wish to expand their skills and build their capacity in caring for older adults living in long-term care homes.\*

## ECHO Care of the Elderly: Dementia

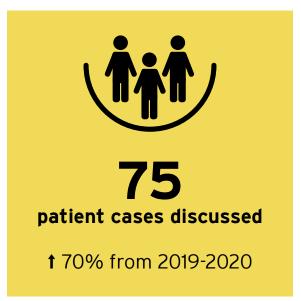
ECHO COE Dementia targets community-based health care providers who wish to expand their skills and build their capacity in caring for older adults living with dementia.\*

\*Program was developed based on learning partner needs and request for programs with a more targeted focus.

# 2020-2021 Highlights







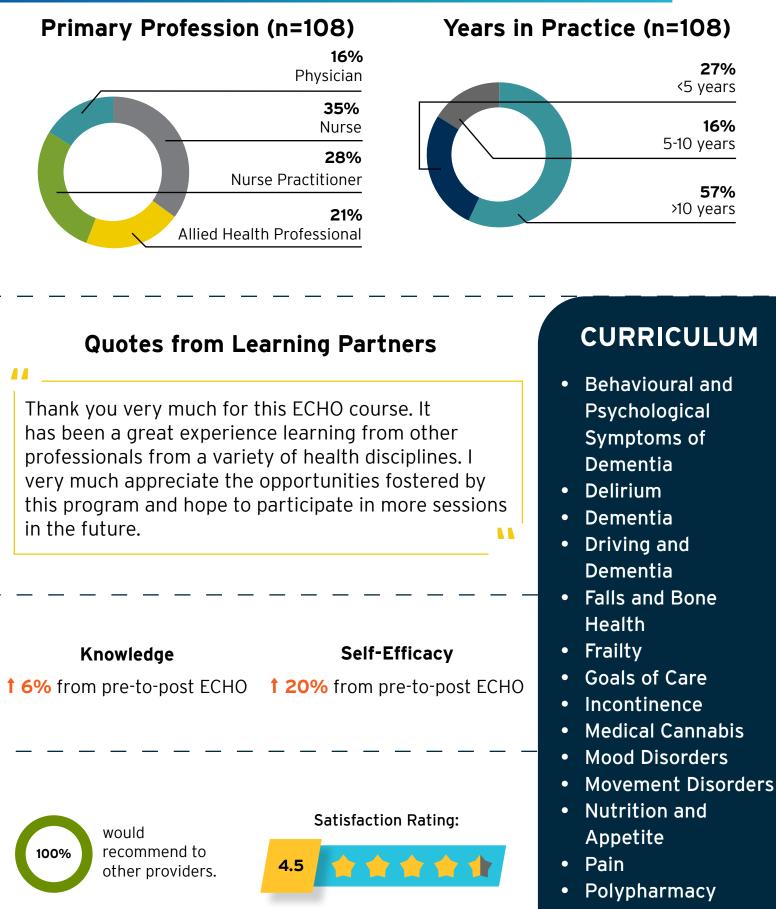
# **Geographical Reach**

Participating ECHO Spoke Sites by Local Health **Integration Networks** 40+ 30-40 20-30 10-20 As part of our recruitment strategy, Sudbury we aim to have representation of learning partners across all LHINs and the province. Our partnership Toronto with North East Specialized Geriatric Centre continues to facilitate recruitment in northern Ontario. For the third year in a row, the North East LHIN recorded the highest number of

spoke sites/organizations.

## ECHO Care of the Elderly: Community

Spring and Fall 2020



Sleep Disorders

#### 9

## ECHO Care of the Elderly: Long-Term Care COVID-19

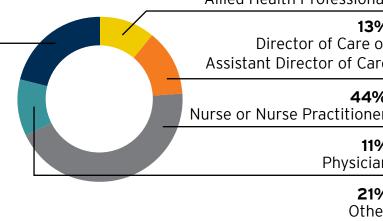
Spring 2020

19%

16%

#### Years in Practice (n=161) 11% Allied Health Professional <5 years 13% Director of Care or Assistant Director of Care 5-10 years 44% Nurse or Nurse Practitioner 65% >10 years 11% Physician 21% Other

### Primary Profession (n=161)



## **CURRICULUM**

- **Burnout and Resilience**
- **COVID-19 Myth Busters**
- **Delirium: Prevention,** Assessment & Management
- Ethical Guidance and Tools for Staff
- Loneliness & Social Isolation
- Preparing your Long-Term **Care Home**
- **Rebuilding Relationships** with Families
- Rewiring Our Approach to Safety
- Symptom Management and End-of-Life Care
- **Stress and Anxiety**
- Team Integration of **Redeployed Staff**
- Virtual Care and Wellness

### **Quotes from Learning Partners**

The sessions highlighted the professional and personal realities we bring to the work we do; the people we serve; and, those we feel a great sense of responsibility for, especially, in light of COVID-19 this includes our residents; LTC staff colleagues; our loved ones; and ourselves. Being able to speak with staff who are returning to the LTC, not just around their plans for the care they hope to provide to residents with responsive behaviors, but also, how they are 'feeling' about going back in, was critically important. I know there may be challenges ahead, but [I] have a few more tools in the 'kit bag' to draw from. 

#### Self-Efficacy

17% from pre-to-post ECHO

would recommend to other providers.

100%

#### Satisfaction Rating:



## ECHO Care of the Elderly: Long-Term Care COVID-19

### Integration of Knowledge into Practice

#### **Quotes from Learning Partners**

"Based on [the palliative care] presentation I have drafted our End-of-Life Order Set: COVID-19 and have reviewed with my physician group who are very pleased to have this information and guidance."

"I used learning from the session on ethical care in isolation to help a depressed [resident] who had stopped eating."

"[I] understood more the different ways to care for the residents during this pandemic and provided the emotional support for the family."

"[We have] improved management of those dying from severe respiratory infections who may or may not have COVID-19."

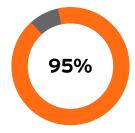
## ECHO Care of the Elderly-Long-Term Care: Vaccine Acceptance



Provider confidence in their knowledge of COVID-19 vaccines increased from neutral to confident after session.



would recommend to other providers.



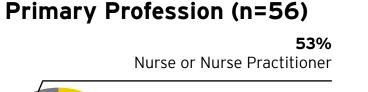
reported they will use information from the session.

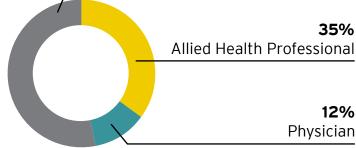


Provider confidence in discussing vaccine acceptance with LTC staff increased from neutral to confident after session.

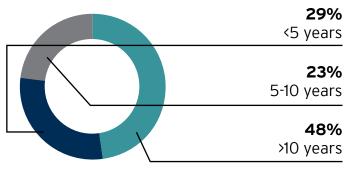
## ECHO Care of the Elderly: Dementia

Winter 2021





## Years in Practice (n=56)



## CURRICULUM

- Behavioural and Psychological Symptoms of Dementia
- Depression and Delirium
- Driving and Dementia
- Managing Risk Factors: Lifestyle Strategies
- Pharmacological Approaches to Dementia Care
- Psychosocial Care
- Screening and Assessment in Dementia
- Subtypes of Dementia
- The Canadian Indigenous Cognitive Assessment (CICA) Tool
- Caregiver/ Care Partner
  Support

## **Quotes from Learning Partners**

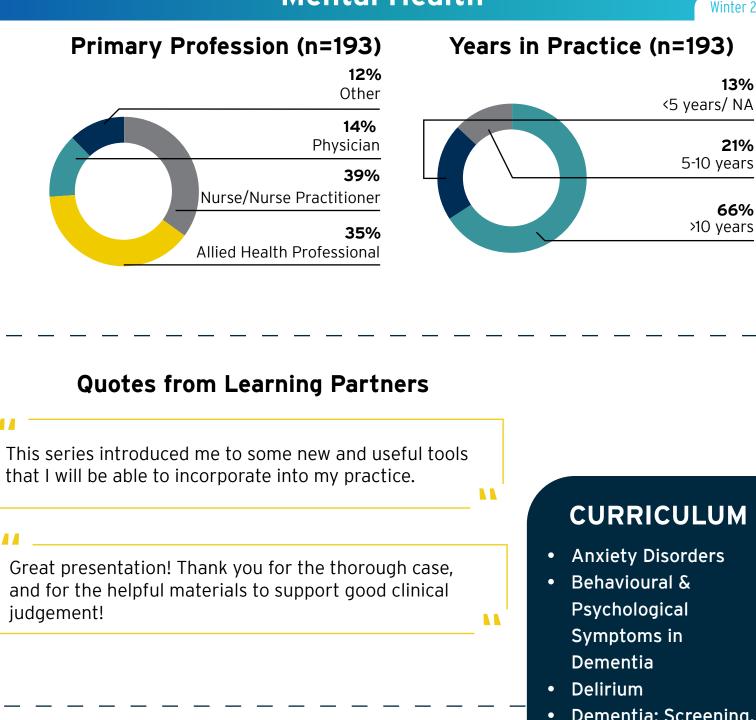
I am grateful that I was given the opportunity to attend the program. Thank you for all the speakers, facilitators, ECHO program staff, and people who presented their cases. My clinical knowledge is enhanced. I will share my knowledge with my colleagues and apply them in my practice. I hope more people will benefit from the program.





## National ECHO Care of the Elderly: Mental Health

Winter 2021



Satisfaction Rating:

4.5

from the sessions with

colleagues/team members

have already shared information

would

99%

recommend to

other providers.

67%

- Dementia: Screening, Assessment and Diagnosis
- Engaging Caregivers/ **Care-Partners**
- Mood Disorders

# **Provider Practice Change**

What I learned from the sleep session and promoting sleep in elderly (nonpharmacological strategies) were shared with my team. The session on behaviours was a great update and I have implemented some of the nonpharmacological strategies with the team.

- Learning partner from Sleep Disorders session

I will be reassessing anticholinergics and memantine more often for effectiveness and the challenge the need to continue/stop depending on the patient's progress.

- Learning partner from Dementia session

#### 

I will implement the clear strategy outlined in discussion (tolerable vs. intolerable and actual vs. potential) to help prioritize risks for older community dwelling adults. Use of this clear strategy will also help family members and other care providers see through the (often emotional and fear driven) clutter that so often accompanies those in care giving roles. – Learning partner from Frailty session

I shall review all medications on all my elderly patients during their visit, and educate them regarding the health hazards of polypharmacy, working with each one of them to reduce their meds to absolutely essential ones, eliminating any psychoactive drugs that are non-essential for their emotional / mental stability, switching all patients currently on older versions of anticholinergics to second generation ones with significantly less anticholinergic side effects.

- Learning partner from Polypharmacy session

# **Impact on Patient Care**

[I have used knowledge learned during ECHO COE in] many ways. I've had a difficult discussion with a patient whom I gave a new diagnosis of dementia, regarding reporting driving to the Ministry of Transportation. The conversation in the office surprisingly went better than expected.

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One of my clients with dementia has frequent falls. I have recommended the daily toileting routine and wear the hip protector pant, fall prevention helmet, fall mat and high low bed and night light in the room. Also Physical Therapy to assess with appropriate interventions. All this works good [sic] and has decreased of falls.

#### 

I have had many successful outcomes with my clients with advanced dementia and their use of a doll or interactive cat or dog within their home. One [client] in particular ...is smiling more, [their spouse] plays music when [they are] agitated ([client] keeps saying wants to go home or take me home....) and [they] will dance/sing with [their] doll and all of [their] comfort friends sleep on [their] bed with [them] at night. Beautiful intervention.

# Dissemination

#### **Publications**

Lingum NR, Sokoloff LG, Chau J, Feldman S, Gingrich S, Grief CJ, Meyer RM, Moser AL, Shaikh S, Santiago AT, Sham R, Sodums DJ and Conn DK. ECHO Care of the Elderly: Innovative Learning to Build Capacity in Long-term Care. *Canadian Geriatrics Journal*. 24(1), 36.

Lingum NR, Sokoloff LG, Meyer RM, Gingrich S, Sodums DJ, Santiago AT, Feldman S, Guy S, Moser A, Shaikh S, Grief CJ and Conn DK. Building long-term care staff capacity during COVID-19 through just-in-time learning: evaluation of a modified ECHO model. *Journal of the American Medical Directors Association*. 2(22), 238-244.

#### In the media

Baycrest. (2020, December 31). *Baycrest-led virtual education program effective in supporting long-term care workers during the COVID-19 pandemic*. https://www.baycrest.org/Baycrest-Pages/News-Media/News/COVID-19-Resources/Baycrest-led-virtual-education-program-effective

Baycrest-led virtual education program effective in supporting longterm care workers during the COVID-19 pandemic

# Dissemination

#### **Invited Presentations**

ECHO Care of the Elderly: Dementia - Research and Evaluation. Alzheimer's Association International Conference 2020. Virtual.

#### **Peer-Reviewed Presentations**

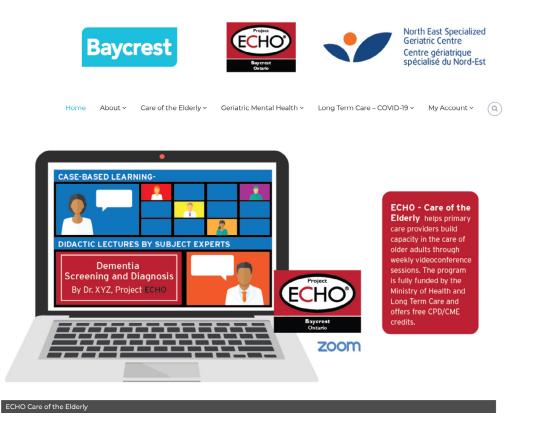
The Role of Geriatric Psychiatry in Project ECHO® Care of the Elderly. Poster presentation at the Canadian Academy of Geriatric Psychiatry/ Canadian Coalition for Seniors Mental Health Annual General Meeting 2020. Virtual.

Project ECHO® Care of the Elderly: Response to COVID-19 Needs in Long-Term Care. Oral presentation at the Canadian Academy of Geriatric Psychiatry/ Canadian Coalition for Seniors Mental Health Annual General Meeting 2020. Virtual.

## Resources



## ECHO Care of the Elderly for LTC: COVID-19



# Partnerships





North East Specialized Geriatric Centre Centre gériatrique spécialisé du Nord-Est



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We would like to acknowledge the work of the Kunin-Lunenfeld Centre for Applied Research & Evaluation (KL-CARE) team at Baycrest for overseeing the evaluation and research components for our ECHO Care of the Elderly programs.



This report was designed and prepared by: Brittany Ellington and Navena Lingum with the help of Shaen Gingrich.