



SEPT 5-8, 2019 - MARRIOTT MARQUIS WDC

Integrating Geriatric Assessments into Practice

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Association of Nurses in AIDS Care

Why Now?

- The number of comorbidities among older PLWH is increasing and has become a complex chronic disease (multimorbidities)
- Aging related syndromes may be seen before they are chronologically elderly
- Identifying factors that lead to disability may prevent or slow further disability
- Unique care models are needed to effectively care for this aging, vulnerable population
- Requires the attention and expertise of providers from multiple health care domains and disciplines

What Can be Done?

- Re-visit what successful aging with HIV looks like
 - Vance, David E.; Blake, Barbara J.; Brennan-Ing, Mark; More; Revisiting successful aging with HIV through a revised psychosocial model. *Journal of the Association of Nurses in AIDS Care*.30(1):5-14, January-February 2019
- Assessment of what is being done/or not, to help our patients avoid disease progression and disability
- Develop interventions to close the gaps
 - Utilize geriatric principles (5M's)
 - Care Team (clinicians, geriatricians, pharmacists, primary care, social worker, case manager, CHW, PT, OT, etc.)

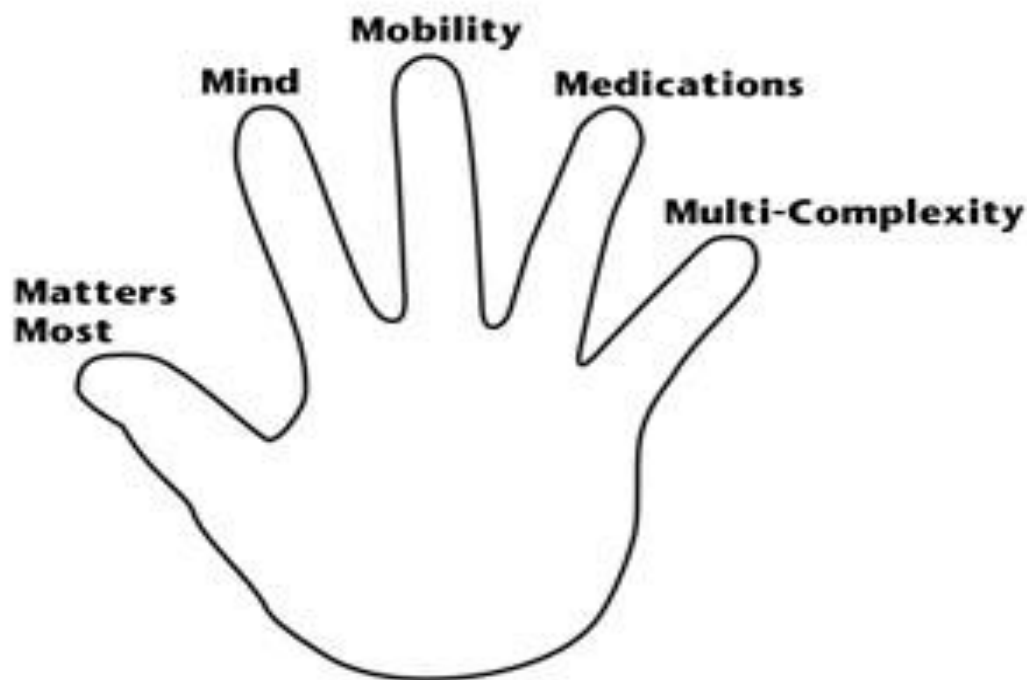
UPDATE: THE PUBLIC LAUNCH OF THE GERIATRIC 5Ms

APRIL 28, 2017

On April 21, 2017 Dr. Mary Tinetti gave the Keynote Address at the Canadian Geriatrics Society 37th Annual Scientific Meeting in Toronto, Ontario, Canada. During that address she presented the GERIATRIC 5Ms[®] – a simplified communication framework to describe the core competencies in Geriatrics in a fashion that should be more comprehensible and more memorable to those outside of the field. The GERIATRIC 5Ms[®] are a merging of the 4M framework that had been developed in the United States for use in J.A. Harford Foundation project with the Institute for Health Care Improvement aimed at defining Age Friendly Health Systems with an overlapping and slightly different 4M framework that had been independently developed at the University Ottawa Division of Geriatric Medicine for their Strategic Plan (2015). To review the discussion that led to this merged GERIATRIC 5Ms[®] framework please see the Editor's Response and the Letter to the Editor in the CGS CME Journal Volume 6, Issue 2, December 2016 here. The framework describing core competencies in Geriatric Medicine and Care of the Elderly is shown below:

GERIATRIC 5Ms [®]	
MIND	Mentation, Dementia, Delirium, Depression
MOBILITY	Impaired gait and balance, Fall injury prevention
MEDICATIONS	Polypharmacy, De-prescribing, Optimal prescribing, Adverse medication effects and medication burden
MULTI-COMPLEXITY	Multi-morbidity, Complex bio-psycho-social situations
MATTERS MOST	Each individual's own meaningful health outcome goals and care preferences.

Visual of a hand providing an alternative representation of the GERIATRIC 5Ms[®] framework



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University of Ottawa; Mary Tinetti, Yale University

Models of Care

- Compass Clinic, San Francisco
 - Comprehensive Geriatric Assessment
 1. North (heart and mind)
 2. East (bones and strength)
 3. West (dental, vision, hearing)
 4. South (network and navigation)
- Weill Cornell Medicine, New York Presbyterian Hospital
 - Geriatrician visits once a week in HIV clinic
 - No fixed referral criteria
 - Sponsors support groups, in-services and arts
- Massachusetts General, Age Positively Program, Boston
 - Consultative
 - Referrals from ID

Barriers and Challenges

- Whom do you target?
- Recommendations may not be followed
- Sustainability not guaranteed
- Focusing more on comorbidities and less on social interventions
- Unmet needs (nutrition, housing, transportation, support)
- What works in a geriatric clinic, may not work in outpt.ID
- Decreasing #s geriatricians in the field

Resources

- <https://www.americannursetoday.com/geriatric-assessment-essential-skills-for-nurses/>
- <https://www.uptodate.com/contents/comprehensive-geriatric-assessment>
- <https://hiv-age.org>
- <https://geriatricscareonline.org/>
- Harjot K.Singh, Tessa Del Carmen, Ryann Freeman, Marshall J. Glesby and Eugenia Siegler
From one syndrome to many: incorporating geriatric consultation into HIV care.
2017;65(1 August) Geriatric Consultation in HIV/Aging; CID 2017:65 (1 August)

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