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Welcome

...to the fall 2017 edition of the Geriatric Health Systems Research Group (GHS) Bulletin, which highlights recent activities and accomplishments of the GHS Group, and provides updates on ongoing projects. We hope you find the bulletin informative and that it provides material to stimulate dialogue and generate new ideas. For more frequent updates on our work, follow us on Twitter [@GHS_UW](#) or like the [Geriatric Health Systems Research Group - UW Facebook page](#). If you would like to be included in our email distribution of the bulletin or would like further information on the material presented, please complete our [Contact Us](#) form on our website. If you no longer wish to receive emails from the GHS group or be included on the bulletin distribution list, please contact us at information.ghs@uwaterloo.ca directly.

The SHARP Network is Expanding!

The Seniors Helping as Research Partners (SHARP) group is an engaged group of older adults that meets on a monthly basis as partners in research conducted by the GHS group.

We want to learn from older adults and their families with the goal of improving the health care system.

We are expanding this group within the Waterloo Region. If you are **55+** and interested in more information or volunteering with SHARP, **you are invited to attend our information meeting Monday December 4, 2:30 PM at Luther Village on the Park, Waterloo**. Please contact sharp@uwaterloo.ca or call 519-888-4567 ext. 33160 to RSVP or for more information on the SHARP network.



Transforming primary care for older Canadians living with frailty: Update



Canadian
Frailty
Network

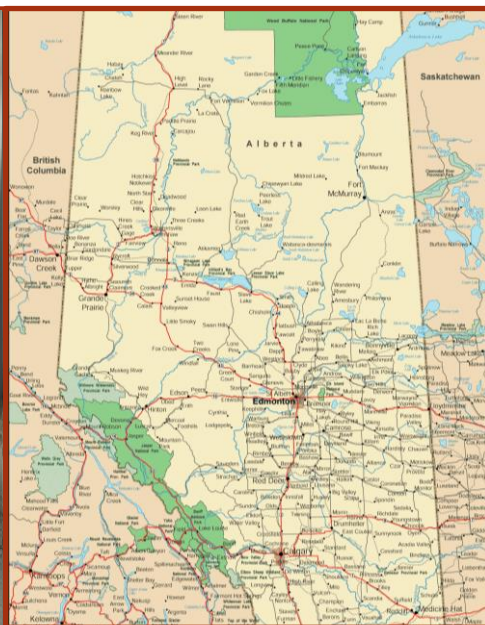
Réseau canadien
des soins aux
personnes fragilisées

In our previous bulletin, we announced the success of our GHS group and several other investigators in our application to the Canadian Frailty Network (CFN, formerly TVN) Transformative Grant competition.

The grant, **Transforming primary care for older Canadians living with frailty**, aims to facilitate health system improvements through interventions in primary care settings. Primary care is an ideal setting to provide and coordinate care for at-risk older adults. The grant is designed to address the following key areas:

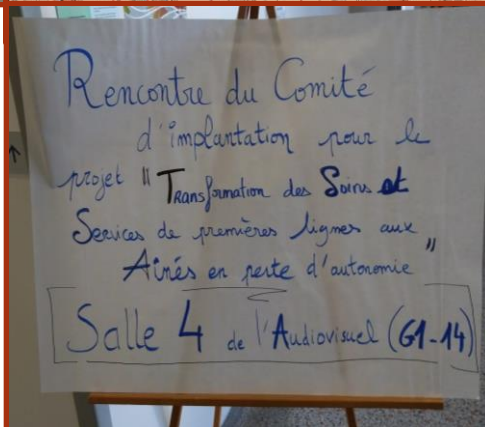
1. Consistent risk screening and assessment;
2. Care coordination and system navigation;
3. Patient/caregiver engagement and shared decisions-making; and
4. Enabling technology supports.

Since being awarded this grant, the project team has been conducting site visits to build connections and position ourselves for baseline data collection to begin this fall.



Several members of the research team met in Quebec and Alberta over the summer, to plan for implementation of the study in each province.

Watch for a special section of the GHS bulletin dedicated to updates on our Transformative Grant work in the next edition.



Dr. Anik Giguère is pictured above leading a meeting of the research team together with older adults and health system stakeholders.

Above left are Dr. Jacobi Elliott, Susie Gregg, Dr. Paul Stolee, Veronique Turcotte, Dr. Edeltraut Kröger, and Dr. Laetitia Coudert, after a lunch meeting.

Looking Back: Conferences & Presentations

HTAi 2017



From June 17 to June 21, Dr. Don Juzwishin attended the Health Technology Assessment international (HTAi) annual meeting in Rome, Italy. This meeting is an international gathering to share the latest research to advance discussions in policy and build global networks. Dr. Juzwishin presented as part of an international panel, *Health Technology Assessment and aging: Responding to challenges and opportunities in the ecosystem*.

Network for Aging Research (NAR) Spring Symposium

On June 26, GHS members attended the NAR Spring Symposium. The theme of the symposium was engagement in innovation, and its purpose was to discuss strategies to engage stakeholders, including older adults, in research. The keynote speaker was Olive Bryanton, a PhD candidate from UPEI using photovoice to understand the experiences of older women in rural PEI. The NAR also conducted a priority setting partnership activity to allow attendants to participate in setting research priorities for the Network. For more information on the event and the resulting research priorities, visit the [NAR website](#).



Featuring keynote speaker
Olive Bryanton



GHS group presentations at the event were as follows:

McNeil, H., Carson, J. (2017). *Engagement in Innovation: The SHARP Group*. Oral presentation

Gordon, A. (2017). *Research Priority Setting Partnership for the Network for Aging Research*. Oral presentation

Sanyal, C., Stolee, P., Juzwishin, D., Huserau, D. (2017). *A systematic review of economic evaluations of eHealth technologies*. Poster presentation

MacNeil, M., Koch, M., Sanyal, C., Juzwishin, D., Stolee, P. (2017). *"The messiest space for technology adoption": Barriers and facilitators to enabling health technology innovation and adoption for Canadian older adults*. Poster presentation

McMurray, J., McNeil, H., Sixsmith, A., Waldbrook, N., Stolee, P., Sveistrup, H. (2017) *Lessons from the innovation boulevard: A case study of a regional innovation ecosystem to support the development of technologies in health and aging*. Poster presentation

Fernandes, P., Pauloff, K., Elliott, J., Heckman, G., Boscart, V., Stolee, P. (2017). *Engaging Older Community and Primary Care Patients in Healthcare Decision-Making*. Poster Presentation

Gordon, A., Elliott, J., Heckman, G., Stolee, P. (2017). *Implementing the Assessment Urgency Algorithm in Team-Based Primary Care*. Poster Presentation

International Shared Decision Making Conference (ISDM)



From July 2 to 5, Dr. Jacobi Elliott attended the 9th International Shared Decision Making conference in Lyon, France. The theme of the conference was time to reflect on shared decision making: where we are now and where we want to be. The conference aims to bring together world professionals and stakeholder to improve care for patients and their families. Dr. Elliott gave an oral presentation at the event, entitled *"Meaningful relationships to support shared decision-making with older adults and caregivers"*.

International Association of Gerontology and Geriatrics (IAGG)



From July 23 to 27, Drs. Stolee and Elliott attended the IAGG World Congress in San Francisco, California. The conference brings together experts from around the world to present the latest evidence in science, research, training and policy developments related to global aging and health. Posters on recent work by the GHS group were presented:

Stolee, P., Elliott, J., Heckman, G., Boscart, V., SHARP (2017). *Improving Patient-Provider Partnerships across the Healthcare System*.

Elliott, J., Stolee, P., Heckman, G., Boscart, V., Giangregorio, L. (2017). *Implementing a Process of Risk-Stratified Care Coordination for Older Adults in Primary Care*.

McNeil, H., McMurray, J., Byrne, K., Grindrod, K., McKinnon, A., Stolee, P. (2017, July) *Engaging Older Adults and Their Caregivers in Innovation Ecosystems for Health and Aging*.

New Publications

Glenny, C., Kuspinar, A., Naglie, G., Stolee, P. (2017). [A qualitative study of healthcare provider perspectives on measuring functional outcomes in geriatric rehabilitation](#). *Clinical Rehabilitation*, 1-11. doi: 10.1177/0269215517733114

The perspective of health care providers regarding the barriers and facilitators of using standardized outcome measures of physical function in geriatric rehabilitation settings was explored. Barriers included that standardized outcome measures cannot be used in isolation from clinical decision-making, are difficult to complete an interpret with older, complex patients, may not be useful to all team members, and are used for reasons unrelated to patient care. Facilitators included dividing the outcome measure into components that are useful for each team member, encouraging the use of these tools for improving daily communication, and providing education and support for their daily use.



Heckman, G., Boscart, V., Huson, K., Costa, A., Harkness, K., Hirdes, J., Stolee, P., McKelvie, R. (2018). [Enhancing Knowledge and Interprofessional care for Heart Failure in Long-Term Care \(EKWIP-HF\): A pilot study](#). *Pilot and Feasibility Studies*, 4(9). doi: 10.1186/s40814-017-0153-8

This pilot study was conducted to assess the acceptability, feasibility and impact of an intervention for heart failure patients. The goal of the intervention was to improve heart failure knowledge, improve interprofessional communication among front-line staff, and integrate improved knowledge and communication processes into health care provider work routines. The intervention was delivered in five phases, where educational modules, sessions, and care planning tools were provided, working groups were developed to implement communication, and documentation processes tailored to the care setting. Results suggested a perceived increase in staff confidence and self-efficacy, improved assessment and clinical proficiency skills, and more effective interprofessional collaboration.

Piraino, E., Byrne, K., Heckman, G., Stolee, P. (2017). [Caring in the information age: Personal online networks to improve caregiver support](#). *Canadian Geriatrics Journal*, 20(2), 85-93. doi: 10.5770/cgj.20.271

This study examined the potential for using a shared online network as a technology-based communication tool to improve care and social support for family caregivers and service providers in home care. The example tool provided a shared calendar where care members could make (or record) appointments, share documents, store information, send messages, create tasks, and post stories and photos. Participants believed that tools like this present an opportunity to fill communication gaps present in other modalities of communication, but there were concerns of policy-related restrictions, privacy, security, and information ownership. The adoption of online support networks such as these by the care partners was crucial for the success of online support networks. In future research, it will be important to design online networks with the consideration of the facilitators and barriers identified in this study.

Heckman, G., Boscart, V., D'Elia, T., Kaasalainen, S., McAiney, C., Kelly, M.L., Stolee, P., Strachan, P., McKelvie, R.S. (2017). [The role of unregulated care providers in managing heart failure patients in long-term care facilities](#). *Journal of Clinical Nursing*, 26(5-6) 849-861. doi: 10.1111/jocn.13413

This study conducted focus group interviews to understand the perceptions and potential role of unregulated care providers in long-term care homes in improving heart failure management in Ontario. Barriers to optimal heart failure management were discussed and three concepts emerged: the complexity of providing management for heart failure in the long-term care setting; efforts to make decision-making resident-centred; and the unregulated care provider's perceived role, nested within an interprofessional team in a long-term care setting. Lack of information pertaining to the clinical presentation and care delivery, role confusion, a task-focused as opposed to person-focused culture, and a breakdown of interprofessional communication were all identified as key barriers within these overarching concepts. Greater engagement of unregulated health care providers as active care partners will facilitate the optimization of heart failure management. Appropriate education for all long-term care staff will be important when implementing heart failure management interventions.

Welcome, New Members



Kayla Brooks

Kayla is a Masters student in the School of Public Health and Health Systems working with supervisor Professor Paul Stolee. She completed her first Bachelor of Science degree in the Health Sciences program at Wilfrid Laurier University before moving on to McMaster University for her Bachelor of Science in Nursing. During her BScN, she had the opportunity to work in a long-term care facility for a clinical placement. Working in this environment sparked her interest in exploring transitions across the healthcare field for the senior population. Upon graduating, Kayla won a recognition award for her contributions and dedication to caring for the senior population.

Kayla is now a Registered Nurse working at St. Joseph's West 5th in Hamilton, in the Concurrent Disorders program to support individuals that live with mental health and addiction issues.

Jill Van Damme

Jill completed her Bachelors of Human Kinetics, majoring in movement science, from the University of Windsor. Throughout her undergraduate career, Jill volunteered with the Windsor Essex Community Health Centre in the Chronic Diseases Management Program. It was through this experience that she developed an interest in working within the realm of long-term care and the field of gerontology. She continued to take subjects relating to this topic throughout her undergraduate degree, and found herself back in her hometown of Waterloo upon discovering the Public Health and Health Systems Program at the University of Waterloo. Jill is a first year Masters of Science student at the school of Public Health and Health Systems, currently working under the supervision and guidance of Professor Stolee.

In her spare time, Jill enjoys spending time with family and friends, and finding balance in life through Yoga and other forms of exercise.



Awards and Nominations

Paige Fernandes and Kathleen Pauloff received the University of Waterloo Graduate Studies Research Travel Assistantship

Maggie MacNeil, Melissa Koch, Paige Fernandes, and Kathleen Pauloff received a Travel Grant from the Canadian Association on Gerontology

Successful Student Milestones

Congratulations to Maggie MacNeil on the successful completion of her PhD comprehensive examinations.

Congratulations to Melissa Koch on her successful Master's thesis defence on September 12, 2017.

Seniors Helping as Research Partners

Our goal is to learn from seniors and their families, to develop a sustainable network, and to advance the development of research priorities and collaborations with the ultimate objective of improving the health care system for older adults.

If you are **55+** and interested in more information or volunteering with the SHARP network, please contact the GHS research group through **Sheila Bodemer** at **519-888-4567 ext. 33160** or email information.ghs@uwaterloo.ca

Check out the following video where we collaborated with SHARP members to find out why they choose to volunteer with SHARP: where https://www.youtube.com/watch?v=Amdgbgl_tno



Serves: 4

Preparation Time: 20 minutes

Cooking Time: 8 minutes

Healthy Recipe: Mediterranean portobello burger

Ingredients:

- 1 clove garlic, minced
- ½ tsp kosher salt
- 2 tbsp olive oil, divided
- 4 portobello mushroom caps, stems and gills removed
- 4 large slices of sourdough bread
- ½ cup sliced jarred roasted red peppers
- ½ cup chopped tomato
- ¼ cup crumbled feta cheese

Preparation

1. Preheat grill to medium-high.
2. Mash garlic and salt on a cutting board with the side of a knife until it is a smooth paste. Mix the paste with 1 tbsp oil in a small dish. Lightly brush the oil mixture over portobellos and then on one side of each slice of bread.

- 2 tbsp chopped pitted Kalamata olives
- 1 tbsp red wine vinegar
- ½ tsp dried oregano
- 2 cups loosely packed mixed baby salad

Nutrition Information

Amount Per Serving

Calories 300

Total Fat 10g

Saturated Fat 2g

Sodium 692mg

Total Carbohydrate 40g

Sugar 5g

Protein 11g

3. Combine red peppers, tomato, feta, olives, vinegar, oregano and the remaining 1 tbsp oil in a medium bowl.
4. Grill the mushroom caps until tender, about 4 minutes per side; grill the bread until crisp, about 1 minute per side.
5. Toss salad greens with the red pepper mixture. Place grilled mushrooms top-side down on 4 half-slices of bread. Top with the salad mixture and the remaining bread

This recipe was borrowed from: <http://www.eatingwell.com/recipe/251862/mediterranean-portobello-burger/>