GHS BULLETIN





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Welcome

...to the Fall 2019 edition of the Geriatric Health Systems Research Group (GHS) bulletin, which contains recent events and accomplishments of the GHS Group, as well as updates on ongoing projects. We hope that 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 Amazing Benefits of Walking



From stronger bones to a trimmer physique, there are countless reasons to start walking" – The Editors of Prevention

Less than 15 percent of older adults 60 years of age and older meet recommendations of at least 150 minutes/week of moderate-to-vigorous physical activity (Colley et al., 2011; Troiano et al., 2008).

Moderate temperatures and sunny skies make autumn a beautiful time of year to increase activity levels outdoors and witness the marvelous colors around the neighbourhood!

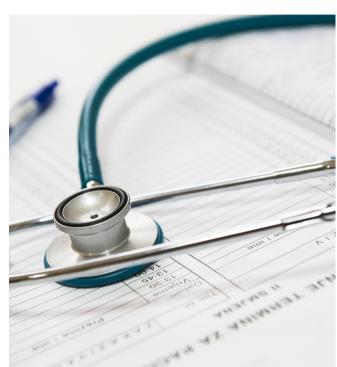
In Ontario, the seniors' hiking initiative is a new program for adults 55 years of age and older. The seniors' hiking initiative is meant to provide the training and support system for beginner hikers and walkers that would love to hike but are not yet comfortable with hiking or have no one to hike with. This program also has opportunities for more experienced hikers who want to help others get on the trail. For more information click here.



Réseau canadien des soins aux personnes fragilisées

Frailty Screening with the *interRAI*Assessment Urgency Algorithm (AUA)

As part of the CFN-funded study "Transforming Primary Care for Older Canadians Living with Frailty," primary care clinics in Ontario, Alberta and Quebec have introduced an electronic screening tool as a quick and efficient way to detect risk of frailty among their older-adult patients. The interRAI Assessment Urgency Algorithm (AUA) is a standardized screening tool that asks a series of questions about a patient's health and ability to perform daily tasks. The tool then uses an algorithm to classify patients in terms of risk levels. Based on the score, health care providers and patients can discuss appropriate next steps including further assessments, or referrals to clinics, community support services or specialist services.



By adding frailty screening to their routine practice, health care providers have an opportunity to take a proactive approach in understanding the overall health of their older patients and are better able to identify possible treatments or programs that can prevent or delay negative outcomes that come with frailty.

Dépistage de la fragilité à l'aide de l'Algorithme d'évaluation InterRAI pour l'Urgence (AUÉ)

Dans le cadre de l'étude « Transformer les soins de première ligne pour les Canadiens âgés vivant avec la fragilité », financée par le RCSPF, des cliniques de soins de première ligne de l'Ontario, de l'Alberta et du Québec ont implanté un outil électronique pour détecter rapidement et efficacement le risque de fragilité chez leurs patients plus âgés. L'Algorithme d'évaluation InterRAI pour l'Urgence (AIU) est un outil de dépistage normalisé qui comprend une série de questions sur la santé d'un patient et sur sa capacité à accomplir des tâches quotidiennes. L'outil utilise ensuite un algorithme pour catégoriser les patients en fonction de leur niveau de risque. Le score obtenu peut être utilisé par les prestataires de soins de santé et les patients pour discuter des soins qui seraient les plus appropriés dans les étapes à venir, incluant notamment les prochaines évaluations, ou l'orientation vers des cliniques, des services de soutien communautaire ou des spécialistes. En intégrant le dépistage de la fragilité à leur pratique courante, les prestataires de soins peuvent adopter une

approche proactive pour évaluer l'état de santé général de leurs patients âgés. Ceci leur permet également de mieux définir les traitements ou les programmes qui permettraient de prévenir ou de retarder la survenue de complications associées à la fragilité.



Looking Back: Conferences & Presentations

Canadian Frailty Network Conference (CFN)



On September 26-27, 2019 the Geriatric Health Systems Research Group attended the Canadian Frailty Network (CFN) Conference in Toronto. CFN is Canada's only national network dedicated to older Canadians living with frailty and all responsible for their well-being. There were four different posters presented.

- 1. Lemmon, K., Christian, P., Kernoghan, A., & Stolee, P. (2019, Sept). Co-designing and testing a mobile app for older adults: MyCareMapp. Poster presentation at the Canadian Frailty Network Conference in Toronto, ON.
- 2. Sacco, V., & Stolee, P. (2019, Sept). Exploring the experiences of service providers supporting older homeless adults in community-based settings. Poster presentation at the Canadian Frailty Network Conference in Toronto, ON.
- 3. Van Damme, J., Lemmon, K., Oremus, M., Neiterman, E., & Stolee, P. (2019, Sept). Assessing the whole person: Understanding frailty screening tools. Poster presentation at the Canadian Frailty Network Conference in Toronto, ON.
- 4. Acakpo, G., Maranda-Pelletier, S., Elliott, J., Costa, A., Theou, O., Stolee, P., Heckman, G., Sirois, M-J., McPhedran, P., Rockwood, K., Kernoghan, A., & Giguère, AMC. (2019, Sept). *Study of the factors influencing implementation of four frailty-screening tools in family medicine clinics in Canada*. Poster presentation at the Canadian Frailty Network Conference in Toronto, ON.

National Initiatitive for the Care of the Elderly Knowledge Exchange

On May 30, 2019 Dr. Catherine Tong presented her poster at the National Initiatives for the Care of the Elderly. This study challenges the assumption that foreign-born older adults are less active than their non-immigrant peers and confirms the key role of "nonexercise" and low activity, rather than moderate to vigorous, in older adults' physical activity acquisition.

1. Tong, C., & Sims-Gould, J. (2019, May). *The physical activity and mobility of foreign-born older adults: A mixed methods study in five languages*. Poster presentation at the 2019 National Initiatives for the Care of the Elderly in Toronto, ON.

Canadian Association for Health Services and Policy Research (CAHSPR)

Melissa Koch and Maggie McNeil attended the Canadian Association for Health Services and Policy Research conference in Halifax, Nova Scotia on May 29 to 31, 2019. The poster they presented explained how their work aims to understand expert stakeholders' perceptions about the relevance and feasibility of evidence-formed policy options to facilitate innovation and adoption of health technologies for older adults.

1. MacNeil, M., Koch, M., Juzwishin, D., & Stolee, P. (2019, May). Moving beyond facilitators and barriers: Policy options to facilitate innovation and adoption of health technologies for older adults. Poster presentation at the 2019 Canadian Association for Health Services and Policy Research Conference in Halifax, NS.



Education & Training

York Summer Workshop in Health Economic Evaluation

On July 1-3, 2019 Maggie MacNeil attended the 'Outcomes measurement and valuation for health technology assessment' York Summer Workshop in Health Economic Evaluation, York, UK. The York Summer Workshops are aimed at those involved in initiating, undertaking, managing or interpreting economic evaluations or quality of life assessments of medicines and other technologies within pharmaceutical and medical device companies, clinical and health services research and health care decision-making organizations.

Welcome, New Members



Meagan Arbeau

Meagan is in her third year at the University of Waterloo majoring in Health Studies (BSc). This is her second co-op position and first as part of the Geriatric Health Systems (GHS) Research Group. Meagan is eager to contribute and learn from the team at GHS. She has always had an interest in many different areas of health and well-being and is hoping to pursue a future in this field when she graduates. She has previous experience shadowing doctors in a hospital and abroad, volunteering in a rehabilitation setting with a focus on physical exercise and positive well-being for cancer patients and working as a research assistant during her first co-op term as part of the COMPASS research team here at the University of Waterloo.

Meagan loves travelling and seeing what the world has to offer. In her spare time, she enjoys dancing, practicing hot yoga and spending time with family and friends.

Student Milestones

Congratulations to Kayla Brooks on her successful MSc thesis defense!

Congratulations to Jill Van Damme on her successful MSc thesis defense & acceptance to the dual-degree program at McMaster University (Physiotherapy MPT and Rehabilitation Science PhD) beginning September 2019!

Congratulations to Veronica Sacco on receiving a 2019 Interdisciplinary Fellowship with the Canadian Frailty Network! Veronica has also received the Susan Pearce and Leslie Harwood Endowment Scholarship which is awarded on the basis of scholarly excellence and a demonstrated interest in research related to aging and older populations, including Alzheimer's and dementia.

Congratulations to former GHS Postdoctoral Fellow Ayse Kuspinar who is the proud recipient of the Parkinson Canada New Investigator Award! Her two-year project focuses on the development of a new health-related quality of life measure for Parkinson's disease.



New Publications



Brooks, L. (2019). Health care provider experiences of and perspectives on medical assistance in dying: A scoping review of qualitative studies. Canadian Journal on Aging, 38(3), 384-396.

This scoping review aimed to summarize the existing qualitative literature focused on provider experiences in the medical assistance in dying (MAiD) process. Key themes emerged across the literature that were related to the complexity of the MAiD process, the importance of relationships and communication, interprofessional roles and dynamics, and the coping process. The results of this review demonstrate the need for further investigation into the experiences of diverse MAiD providers, especially within the Canadian context.

Giosa, J., Holyoke, P., & Stolee, P. (2019). Let's get real about person-family-centred geriatric home care: A realist synthesis. Canadian Journal on Aging, 27(1), 1-19.

This study investigated the complex mechanisms underlying team-based delivery of person- and familycentred care (PFCC) in geriatric home care. The framework details the predominant discipline-specific contributions of nurses, occupational therapists, and physiotherapists, their collective contributions through communication in the context of a virtual team, and the system-level support required for comprehensive team-based PFCC delivery. Findings from this study could inform improvements to PFCC education, best practice guidelines, and more integrated delivery of PFCC in geriatric home care and other team-based care environments.

Gibbs, J., McArthur, C., Milligan, J., Clemson, L., Boscart, V. M., Heckman, G., Stolee, P., & Giangregorio, L. M. (April 2019). Measuring the implementation of life-style-integrated functional exercise in primary care for older adults: Results of a feasibility study. Canadian Journal on Aging, 5(1), 1-17.

This pilot study evaluated the feasibility, effectiveness, and implementation of a group-based lifestyleintegrated functional exercise (Mi-LiFE) program for older adults in an interprofessional primary care practice. A physical therapist taught participants how to integrate strength and balance activities into daily routines during one individual and four group sessions, and two follow-up phone calls. Feasibility outcomes were recruitment, adherence, and retention over 6 months. These findings inform the feasibility of future pragmatic exercise programs in primary care for older adults.



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 Jacobi Elliott at 519-888-4567 ext. 38982.

Check out the following video where we collaborated with SHARP members to find out why they choose to volunteer with SHARP: https://www.youtube.com/watch?v=Amd9b9l_tn0







Broiled Salmon with Tomatoes, Spinach, and Capers

Ingredients:

4 fish, salmon fillet 6-ounce, skin on

- 1 pound plum tomatoes chopped
- 3 ounces of baby spinach
- 1 medium onion chopped
- 2 cloves of garlic minced
- 1 tablespoon capers
- 1 tablespoon of extra virgin olive oil ground black pepper to taste
- 1 lemon cut into wedges

Serves: 4

Preparation Time: 15 minutes Cooking Time: 10 minutes

This recipe was borrowed from: https://www.everydayhealth.com/reci pes/grilled-salmon-with-tomatoesspinach-and-capers/



Preparation

- 1. Heat the oven to broil. Lightly coat a large heat-resistant baking dish with cooking spray.
- 2. Place salmon, flesh side up, in the baking dish, lightly season with salt and pepper, and broil without turning until salmon is cooked through, 8 to 10 minutes.
- 3. Meanwhile, in a large saucepan, heat oil over medium heat. Add onion and garlic; cook, stirring occasionally, until softened, about 7 minutes. Stir in tomatoes, spinach, and capers; cook for 2 minutes longer. Remove the pan from the heat.
- 4. Remove salmon from broiler and transfer to 4 serving plates. Spoon tomato mixture over salmon, squeeze lemon wedges over the top, and serve warm.