

# SENIORS HEALTH STRATEGIC CLINICAL NETWORK

## Alberta Dementia Strategy and Action Plan (ADSAP) Progress Report

Reports from all six ADSAP Working Groups will be completed by the end of June 2015. Over the past 4 months over 200 working group members and their co-chairs and support staff have worked diligently to seek input from stakeholders, and develop recommendations and potential actions in the following areas: public awareness, the dementia journey, care partner support, research and innovation, primary health care, and acute care and crisis management.

In July, the co-chairs of all working groups and the project team reviewed the recommendations and identified any gaps or overlaps. In August, members of the ADSAP Advisory Committee, which has broad representation of people living with dementia, care partners, clinicians and providers, and the ADSAP Steering Committee, will meet together to review and prioritize the recommendations and proposed actions. It is anticipated that a comprehensive report will be submitted to the Minister of Health this fall.



## Congratulations, Team!



## On receiving the President's Excellence Award in two categories this year!!

### 1. *Quality Improvement*

The Seniors Health—Appropriate Use of Antipsychotics (AUA) Long Term Care Project Team

The AUA project is being implemented provincially in all 170 LTC facilities (14,500 beds) in Alberta.

### 2. *Innovation on behalf of all the Strategic Clinical Network teams*

Accepted by Tracy Wasylak and  
Dr. Tom Noseworthy

The review panel was impressed with how the SCNs are developing provincial strategies that aim to keep Albertans healthy by providing high-quality, evidence based innovative health care.

## *Well done, SCN teams!*

### Seniors Health Web Page

Our web page has the most page views in our SCN family with over 6,500 visits in 2014-2015. The average time spent on our

# Project Updates

## Dementia Link– Planning Underway

Development of the Dementia Link clinical advice line within Health Link is well underway. It will provide telephone-based support for Albertans living with dementia, as well as for family care partners, formal care providers and clinicians.

Dementia Link will support the enhancement of services as part of the pending Provincial Dementia Strategy and Action Plan. The Dementia Link clinical advice line is planning an initial launch in the Fall 2015, in North, Central and South zones. The Dementia Link Practice Lead is updating service navigation resources and working with an expert advisory group to develop decision support tools. Focus groups have been organized to develop an understanding of the calls to be anticipated by Dementia Link.

Recruitment of the Dementia Link nurse positions, who will respond to calls, will begin shortly. The nurses will start early September 2015. Strategies for communication and evaluation of the service are also underway.

For information on Dementia Link, please contact Shawna Reid

[shawna.reid@albertahealthservices.ca](mailto:shawna.reid@albertahealthservices.ca)

## Things you don't want to miss in this issue

- Seniors Health Community of Practice
- CoACT update
- PCN – Help Wanted!
- CARNA award
- New research; STOP Fracture Study
- Dr. Robertson closes shop in Central Zone
- Celebration of Dr. Cy Frank's Life
- Frailty Conference 2015 Toronto—TextBook Changes Hands

## Did you know....



811 was launched on June 1 as the new phone number for Health Link, Alberta Health Services' (AHS) 24/7 health information and advice line. 811 replaces the 10 digit local Health Link numbers in Calgary and Edmonton, as well as the province wide toll-free number.

Last year, Health Link provided support to over one million Albertans. It was estimated that 308 Albertans avoided a trip to emergency departments every day, thanks to the advice they received from Health Link.



## Geriatric Society Ronald Cape Distinguished Service Award

Dr. Jean Triscott, Care of the Elderly physician and member of the SH SCN, is the 2015 recipient of the Canadian Geriatric Society Ronald Cape Distinguished Service Award.



Dr. Jean Triscott

This award recognizes an individual who has made a significant contribution to the field of Geriatrics in Canada.

Congratulations to Dr. Triscott!

## AUA Success

Congratulations to the AUA Team for successfully engaging more than 95 % of the 170 LTC in Alberta in AUA project. Current Alberta average of use of antipsychotics for people living with dementia is 22.5%, down from 28.1% in 2011.

Staff in LTC achieved these great results by implementing 5 key interventions: Monthly inter professional medication reviews, staff education regarding antipsychotic side effects, exploring underlying reasons or responsive behaviors and, improved person-centered care.

Please visit the CIHI website (listed below) for additional LTC availability indicators

<http://www.cihi.ca/CIHI-ext-portal/internet/EN/Home/home/cihi000001>

# CoACT gives seniors a voice

CoACT is an innovative model of care in which care provider teams collaborate more closely with patients and their families, giving them a strong voice in their individual care plans.

Evidence shows that when care providers collaborate and patients and their families are involved in decision-making, care is better coordinated, quality increases and patient outcomes improve.

The overall goal of CoACT is to help build a more sustainable health system to meet the needs of a growing and aging Alberta population with more complex health needs. Several of the CoACT leading practices including Comfort Rounds and Patient Bedside Whiteboards have direct benefits for seniors and for Elder Friendly Care.

Other CoACT practices include Care Hubs (including Huddles and Assignment of Care), Bedside Shift Report, and RAPID Rounds.

The CoACT program is initially being implemented in 20 community and acute care facilities (medicine, surgery and mental health) across Alberta between now and March 2017.

For more information on CoACT, visit the Insite page at <http://insite.albertahealthservices.ca/9614.asp>.

Questions or comments can be emailed to [CoACT@albertahealthservices.ca](mailto:CoACT@albertahealthservices.ca).



**“CoACT is transformative. There is close alignment with everything we are doing; just about everything I do.**

**The keys for our team are; How can we support it? How can we make this a success?”**

**-Dr. Duncan Robertson,  
Physician, Seniors Medical  
Director, Seniors Health  
Strategic Clinical Network**

## Seniors Health Welcomes New Senior Provincial Director

Scott Fielding will be starting this summer with Seniors Health SCN and comes to us from Alberta Health.



He has over 25 years of health care experience with a Masters degree in Business Administration.

Scott has worked in many roles including Director of Nursing, Operations Manager in the Emergency Department and Senior Clinical Advisor.

In his new position, Scott will be responsible for leading the work

of the Seniors Health and Emergency Strategic Clinical Networks. We are very excited to have Scott join our Network Leadership team. Scott will be located in Edmonton.

## The Seniors Health SCN Community of Practice (CoP)

It is comprised of over 330 people including health care providers, policy makers, health administrators, educators, patient engagement researchers and others.

It is a group of members who have common interest in the care of older Albertans. Members share their knowledge and expertise to advance the quality of care in Alberta.

Members of the CoP are being engaged in the work of the Seniors Health SCN, including an update of two Alberta Medical Association Toward Optimization Practice (TOP) guidelines related to dementia care.

If you would like to participate in the CoP, Please contact Dennis Cleaver  
[dennis.cleaver@albertahealthservices.ca](mailto:dennis.cleaver@albertahealthservices.ca)

## “First edition — Brocklehurst Textbook changes hands”

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Caption; Paul Stolee (left) Associate Professor of Gerontology University of Waterloo; Duncan Robertson (centre) SMD Seniors Health SCN; Kenneth Rockwood (right) Professor of Medicine (Geriatric Medicine & Neurology) and Professor of the Kathryn Weldon Alzheimer Research at Dalhousie University

Photo Credit: Dr Tom Noseworthy.

Tech Value Net (TVN) is a National Center of Excellence whose trademark is "Improving Care for the Frail Elderly" The first Canadian National Forum on Frailty sponsored by TVN was held in Toronto June 4–5 2015.

The occasion marked a reunion of three colleagues who first worked together at the University of Saskatchewan over 35 years ago alongside Professor John C Brocklehurst, from the University of Manchester UK, who was a visiting professor in Canada in 1978-80. Ken and Paul were Research Associates in projects including the Saskatchewan Health Status Survey of the Elderly, while Duncan was Professor and Head of Geriatric Medicine after John Brocklehurst returned to UK.

Professor Rockwood, a prolific author and editor of the seventh edition of Brocklehurst's Textbook of Geriatric Medicine and Gerontology, has a collection that included all previous editions of the textbook except the first edition. His searches for the 1976 Edition over many years in used bookshops yielded no result.

Duncan's library included a first edition presented to him in 1978 by Dr. Ramsey W Gunton, formerly President of the Royal College of Physicians and Surgeons of Canada. Dr. Gunton was influential in having Geriatric Medicine recognized as a specialty in 1980. That 1976 edition (as shown in image) will now reside in Ken's library in Halifax.

### Congratulations!

Lynne Mansell, Senior Provincial Director of the Seniors Health Strategic Clinical Network has been with us since it's inception in 2012.

Her career has spanned over 40 years and her current role sees her providing provincial leadership for reshaping health care for seniors in Alberta by improving quality, access and sustainability.

Outside of Alberta Health Services, she has been involved in a number of research projects as a Knowledge User and a surveyor for Accreditation Canada for twelve years focusing on health system surveys within long term care, palliative/end of life care and home care.

We would like to congratulate her on her retirement at the end of June 2015 and wish her the best of luck... especially on the golf course.



Lynne Mansell

## STOP Fracture Study Introduction

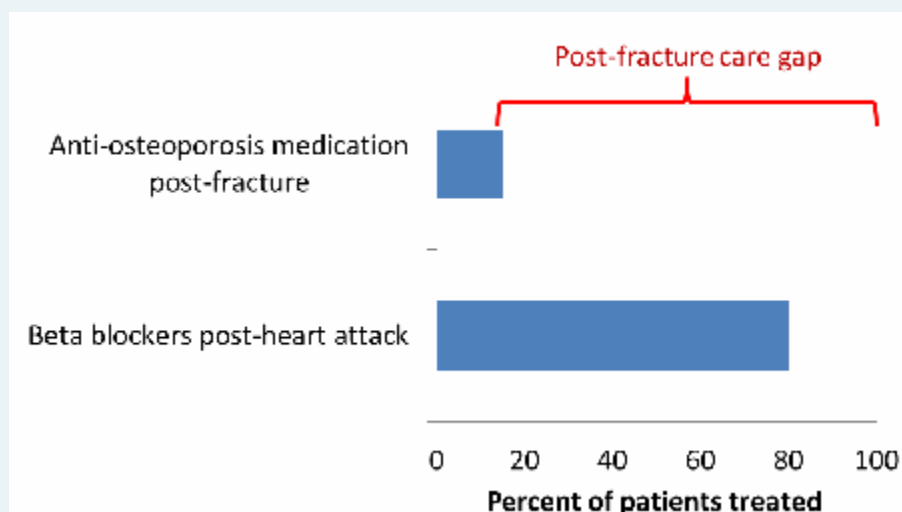
Osteoporosis, characterized by low bone mass and deterioration of bone tissue, is a disease with severe consequences for individuals and society. It results in low-trauma fragility fractures, impairs quality of life, can lead to loss of independence, and even death. Osteoporosis affects 250,000 Albertans, 25% of women and 12% of men 50 years of age and older, and results in tens of thousands of fractures in the province annually.

Despite safe and effective treatments and high quality guidelines, osteoporosis is poorly managed. Global data, including Alberta data, suggest that less than 20% of adults over the age of 50 are treated for osteoporosis after a fracture.

Secondary fracture prevention rates are lower than other rates of secondary prevention, such as the care offered to those following heart attacks. As shown in the figure below, approximately 80% of individuals are started on a beta blocker post-heart attack, while only about 15% of individuals are started on an anti-osteoporosis medication following a fragility fracture. This is the post-fracture osteoporosis care gap.

To address and improve the care gap for osteoporosis detection and treatment, a group of researchers sponsored by the Seniors Health SCN and Primary Care SCN were awarded funds by Alberta Innovates-Health Solutions within the second cohort of PRIHS grants. The Strategies Targeting Osteoporosis to Prevent recurrent FRACTURES (STOP Fracture) Study team will undertake a pragmatic mixed-methods evaluation of three different approaches to the prevention of recurrent fractures.

The multidisciplinary and multi-sectoral team is working in collaboration with Alberta Health Services, 3 Strategic Clinical Networks, Alberta Bone and Joint Health Institute, and Covenant Health to comprehensively evaluate three different interventions: Catch A Break (non-hip fractures), Fracture Liaison Service (hip fractures), and the C-STOP randomized controlled trial (upper extremity fractures). Each intervention will be evaluated using qualitative, quantitative, and economic data to improve quality of care by closing the unnecessary care gaps through evidence-based interventions. This work aims to decrease fractures, improve quality of life, and demonstrate value-for-money in secondary fracture prevention for the Alberta healthcare system.



For more information on the STOP Fracture Study,

please contact Dr. Heather Hanson ([heather.hanson@albertahealthservices.ca](mailto:heather.hanson@albertahealthservices.ca)).

THE 16<sup>TH</sup> ANNUAL  
**CARNA  
AWARDS**

## ***Congratulations Charlene Knudsen!***

***For receiving the 2015 CARNA award for  
Excellence in Administration!***

Charlene Knudsen recently joined the Seniors Health SCN Team as the new Practice Lead for the Dementia Strategy.

Charlene's passion for improving education and mentorship has led to an emphasis in case management education for front-line staff and her influence reaches far beyond the team she manages. Charlene has recognized the importance of collaborating with community partners and has formed strong alliances with many non-profit community organizations.



Charlene Knudsen

## **Dr. Duncan Robertson closes shop in Central Alberta**

After nearly 10 years of geriatric medicine practice in Red Deer and serving patients and their caregivers in many Central Zones communities through teleconsultation and outreach visits. Duncan will end his geriatric consulting practice in Central Zone this month (June 2015).

He will devote his time to the Seniors Health Strategic Network, of which he is Senior Medical Director.

## **EFC (Elder Friendly Care) Project Update**

**Approaches to the Surgical Environment (EASE study)**



**Click the link to access the update**

<http://www.aihealthsolutions.ca/news-and-events/media-centre/elder-friendly-approaches-to-the-surgical-environment/>



## **PCNs that have special skills/programs for People Living With Dementia**

The Seniors Health SCN is making connections with PCNs from across the province that have staff with enhanced skills and/or programs to support people living with dementia (PLWD).

We are looking to showcase promising practices in dementia care in the community in the Fall 2015 and would like to highlight the great work being done by PCNs to support PLWD in the community.

We would like to hear from if you are from one of these PCNs or if you know of one.

Please contact either Dr. Duncan Robertson, Senior Medical Director ([duncan.robertson@albertahealthservices](mailto:duncan.robertson@albertahealthservices)) or Dennis Cleaver, Executive Director ([dennis.cleaver@albertahealthservices.ca](mailto:dennis.cleaver@albertahealthservices.ca)).

# Celebration of Dr. Cy Frank's Life



Dr. Cy Frank

The Seniors Health SCN Core Committee and Leadership Team would like to recognize the significant leadership Cy Frank provided in the creation of the SCNs.

With his leadership, along with a few others, Alberta's healthcare system would not be in the position it is with the SCNs being a driving force for clinical innovation.

Below are selected comments made by Dr. Linda Woodhouse, Scientific Director, Bone & Joint SCN at a celebration of Cy Frank's life.

"Cy was always positive, passionate and resolute in his determination to build a sustainable public health care system for all Canadians. He worked tirelessly to achieve that goal.

Cy's presence in a room gave quiet comfort to all. Whether on a panel, in a Board meeting, or chairing a research session, Cy never took over or dominated a meeting.....in fact, he was a man of few words who chose his opportunities to speak very carefully. When he spoke, it was with quiet wisdom, saying a great deal in a very few words. Cy taught me many things, but there are a few key lessons that I would like to share with you today, in honor of Cy's memory.

**Lesson #1. Lead from behind, not in front – and be patient.**

Cy was a master at engaging people to share his vision: one person at a time. He accepted everyone for who they were – he never tried to change people – he only ever sought to engage them in his vision, supporting them to be all that they could be.

**Lesson #2. Research and Innovation are not the same.**

It takes a team that includes scientists from all 4 pillars of research - to do research. But it takes an army that includes patients, clinicians, decision and policy makers and many more people to build a pipeline to implement, measure and evaluate innovation.

While the terms "research" and "innovation" are often used in the same sentence, and sometimes synonymously, they have very different meanings. Research refers to a systematic approach or study to find or create new knowledge. Innovation is the realization of a new or improved product, service, method, or approach to generate value.

**Lesson #3. With every good crisis, there is always an opportunity.**

Cy would encourage people to stay positive and work together as a team to identify and capitalize on those opportunities. Cy used to say "build the team out of the people that you have around you; people actually WANT to be on the same team".

**Lesson #4. Engage broadly, give everyone an equal voice and a role - empower them to change the health care system– one person at a time.**

He used to say "everyone comes to the table to see what you are doing – those who stay do so because they are getting something out of it.... everyone has to be a winner."

**Lesson #5. Take time to let your mentors know how much you appreciated their mentorship.**

Cy challenged us to reach out to each of our mentors over the following year, meet with them in person, and tell them how much their mentorship meant.