Wellness Resources for Colchester Vermont's Senior Population

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The Importance of Wellness for Colchester VT’s Senior Population

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Problem Identification and Description of Need: Our Aging Population

- Vermont is the second oldest state in the nation - median age 42.6.¹
  - 15.9% of VT population >65 this ranks VT as #4 in country.¹
  - By 2032, 23.8% of the Vermont population will be over age 65 ranking VT #1 in US.¹

- About 28% of older Americans not living in nursing homes live alone (70% of these are women, 30% men).²

- Delivery of healthcare in VT is shifting towards performance based payment for services.
  - Increases pressure to integrate social services with health care.
  - Need to increase community ownership of programs for older Vermonters.
  - Many healthcare providers are integrated in PCMH with access to social workers but often there is only one SW shared amongst multiple practices.

Problem Identification and Description of Need

- Nearly 90% of seniors want to “age in place”.

- Nursing home care cost state millions annually.
  - Fiscally smarter for Vermont to support and help seniors live independently as long as possible.

- Organizations supporting seniors at home exist in Vermont.
  - CVAA – serves all of Northwestern Vermont.
    - Many of their services are made possible through volunteers that are themselves retired seniors.
    - Seniors helping seniors.

- Healthcare providers could play an integral role in connecting seniors looking to stay active and help their community.

Areas for Seniors QOL Improvement

- Wellness (mental health, physical fitness)
  - Suicide is 8th leading cause of death in VT – rates in individuals age >55 are increasing.
  - Increase from 16.9 to 20.2 from 2007-2009.
  - Older adults who are active have lower rates of all-cause mortality and a higher level of cardiorespiratory and muscular fitness, higher level of functional health and better cognitive function.

- Social Engagement
  - Lack of social support negatively impacts health and well being.
  - Loss of life-time partner for many seniors leads to drastic lifestyle changes.

- Volunteering
  - Research suggests volunteering is associated with better self-health ratings, increased life satisfaction, decreased mortality and lower levels of functional dependence.
Public Health Costs

- Median Annual Rate of Nursing Home Care in VT is Increasing (2015)\(^6\)
  - VT Semi-private room: $102,018 with 3% five-year annual growth.
  - VT Private Room: $105,120 with 2% five-year annual growth.
  - USA comparison: $80,300 – 91,250 with 4% five-year annual growth.

- Median Annual Cost of Assisted Living Facilities in VT (2015) \(^6\)
  - VT Single occupancy: $48,240 with 6% five-year annual growth.
  - USA comparison: $43,200 with 2% five-year annual growth rate.

- Estimated that annual cost of nursing home care will increase to 190,600 by 2030. \(^7\)

- Out-of-Pocket Health-Care Costs. \(^8\)
  - Annual cost for 65 year old couple: \$6,999.
  - Annual cost for 85 year old couple: \$14,530.
  - This highlights a need for ways to decrease out-of-pocket costs. Having more seniors living independently at home and having more volunteer run services available would decrease costs.
Community Perspective

CVAA - Services and Support for Seniors

Role: assessing the needs of older Vermonters and facilitating development of services.

Senior HelpLine: 1 800 642 5119 (~22,000 calls/year).

- Preventative: Short term services that help Vermonters retain their independence.
  - Contract with services that assist with: nutrition, transportation, mental health.

- Run mostly on senior volunteers that offer:
  - Fitness services, companionship, computer services, help with shopping, homemaking, respite for caretakers, financial help, transportation.
  - Example: new group of veteran volunteers that visit other veterans and offer support.

Community Health Teams - UVM Family Medicine

Services: Mental Health, Social Work, Diabetes Education, Tobacco Cessation, Activity Coach, Nutrition as a part of the Patient Centered Medical Home housed in primary care offices.

Role: Help connect patients that are referred by providers to resources to help underlying psychosocial stressors and problems that may not be addressed in medical appointments.
Interviews:

Erica Marks - Director of Volunteer Services, CVAA

- She wishes that more PCPs knew about CVAA and their services so they would refer more of the senior patients to increase program utilization.
- CVAA programs are mostly heard about via word of mouth.
- Some of CVAA’s programs have federal funding but a majority of the services are volunteer run.
- CVAA currently has ~ 842 volunteers.
- Volunteers are mostly retired seniors living in the communities they serve.
- Need for volunteers in Richmond, Huntington, Grand Isle, Hinesburg.
- Average of 20 new requests for volunteer services a week.
  - These come from CVAA’s case workers and the Senior Help Line.
  - Can take up to 8 weeks to fulfill the request in geographic areas of the state with low numbers of volunteers.

Audrey Monroe – Community Health Team LCSW

- Covers Colchester, Richmond, Hinesburg, Milton family practices and Williston Internal Medicine - spends at least half or full day at each site/week and does home visits.
- ~60% of her clients are older or disabled.
- Biggest need: housing assistance, help around the home, advanced directive assistance and help applying for social security.
- Gaps she sees in our community:
  - Affordable housing, services for seniors aging in place, in home medicine reconciliation, help with homemaking (Moderate Needs Grant is not enough).
- Moderate Needs Grant is a program for adult Vermonters who do not meet nursing home level of care but require assistance at home allowing them to remain independent.
  - Great in theory - brings people into Vermonters homes for 4-6hrs a week to assist with homemaking.
  - Downfall: there is a year long waiting list.
  - Great opportunity for CVAA volunteer assistance!
- LCSW are in high demand, they are always busy and are an integral part of patient care because often providers do not inquire about or do not have time to inquire about social issues.
Intervention and Methodology

- Interviews with Director of Volunteer Services at CVAA and CHT LCSW to identify.
  - Social services available.
  - Utilization level of those services.
  - Needs in the senior community that still exist.

- Goal was to create a pamphlet highlighting services and activities that can fulfill three meaningful areas of VT seniors lives to help them to continue leading healthy, independent lives.

- Three areas included:
  - Wellness – Mental Health, Fitness.
  - Social Enrichment and continuing education opportunities.
  - Volunteering – CVAA, Foster Grandparents.

- By providing resources to seniors the hope is to keep them involved in the community and help improve their quality of life.

- The goal is to have the pamphlets available in each patient room at Colchester Family Practice and in the Community Health Team office.

- Additional placement of pamphlets in the waiting room areas will hopefully attract attention of seniors or caretakers who otherwise may have not asked for help.

- Received informational pamphlets from CVAA to place in patient rooms at Colchester Family Practice.
Intervention and Methodology

Sample of tri-fold pamphlet to be distributed
Results/ Response

- The pamphlet was reviewed by various members of Colchester Family Practice and was well received. Practitioners are excited to be able to share it with their patients.

- One practitioner at Colchester family practice remarked that she can identify multiple of her elderly patients that would benefit from this. that are looking for ways to stay connected and this pamphlet is a great concise way to introduce patients to options

- Approved for dispersal in Colchester Family Practice.

- Printing of the pamphlet will be undertaken by Colchester Family Practice

- Looking to see if it can be approved for use in other offices in Chittenden County.
Effectiveness and Limitations

Effectiveness

▪ Pamphlet written in larger font for those who are visually impaired and phone numbers are provided for contact information rather than e-mail addresses.

▪ Pamphlet includes information for resources around Chittenden County and is not isolated to Colchester.

▪ Having a readily accessible pamphlet in the office serves to:
  ▪ Remind providers to inquire about their patients quality of life.
  ▪ Help satisfy older patients looking for ways to stay busy and make a difference in retirement.
  ▪ Let’s seniors that are struggling with grief, inactivity or boredom connect with resources without having to make another appointment with the community health team.
  ▪ Increases utilization of and provides volunteers for local community agencies.
    ▪ It will hopefully increase the number of volunteers at CVAA.
Effectiveness and Limitations

Limitations

- This was only a 6 week long project and did not allow for time to measure many outcomes.
- While trying to create a comprehensive but detailed pamphlet it is impossible to include information about every resource.
  - Mental health resources were hard to include due to space constraints.
- The resources identified in this project only apply to Northwestern VT.
- Including free resources was prioritized but some of the resources require payment.
- CVAA will be undergoing a name change this fall – therefore that could be a source of confusion on the pamphlet.
- Space was a limiting factor: since pamphlet font was a larger size it limited the number of resources provided.
- Through researching resources it became apparent that many of the published resources online are out dated.
Future Interventions

▪ Ideas for follow up:
  ▪ Follow a group of senior patients who show a need in 1/3 areas included in pamphlet and assess their self-reported QOL via a survey before and after they connected with a new resource they found on the pamphlet.
  ▪ Collect quantitative information from UVM Family Medicine Office Community Health Teams about how many seniors are sent their way and what resources are being offered to them.
  ▪ Evaluate change in PCPs likelihood of referring patients to resources like CVAA and United Way.
  ▪ This could turn into a great collaboration with seniors that volunteer in the community to keep the pamphlet up to day annually and include more resources as they become available.