

A MEDICAL STUDENT FORAY INTO THE DEPTHS OF PUBLIC HEALTH: AN EXPLORATORY INVESTIGATION TOWARD A COMMUNITY DASHBOARD CHARACTERIZING THE EXPERIENCES OF FRAILTY IN ORDER TO GUIDE IMPROVEMENT

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Background

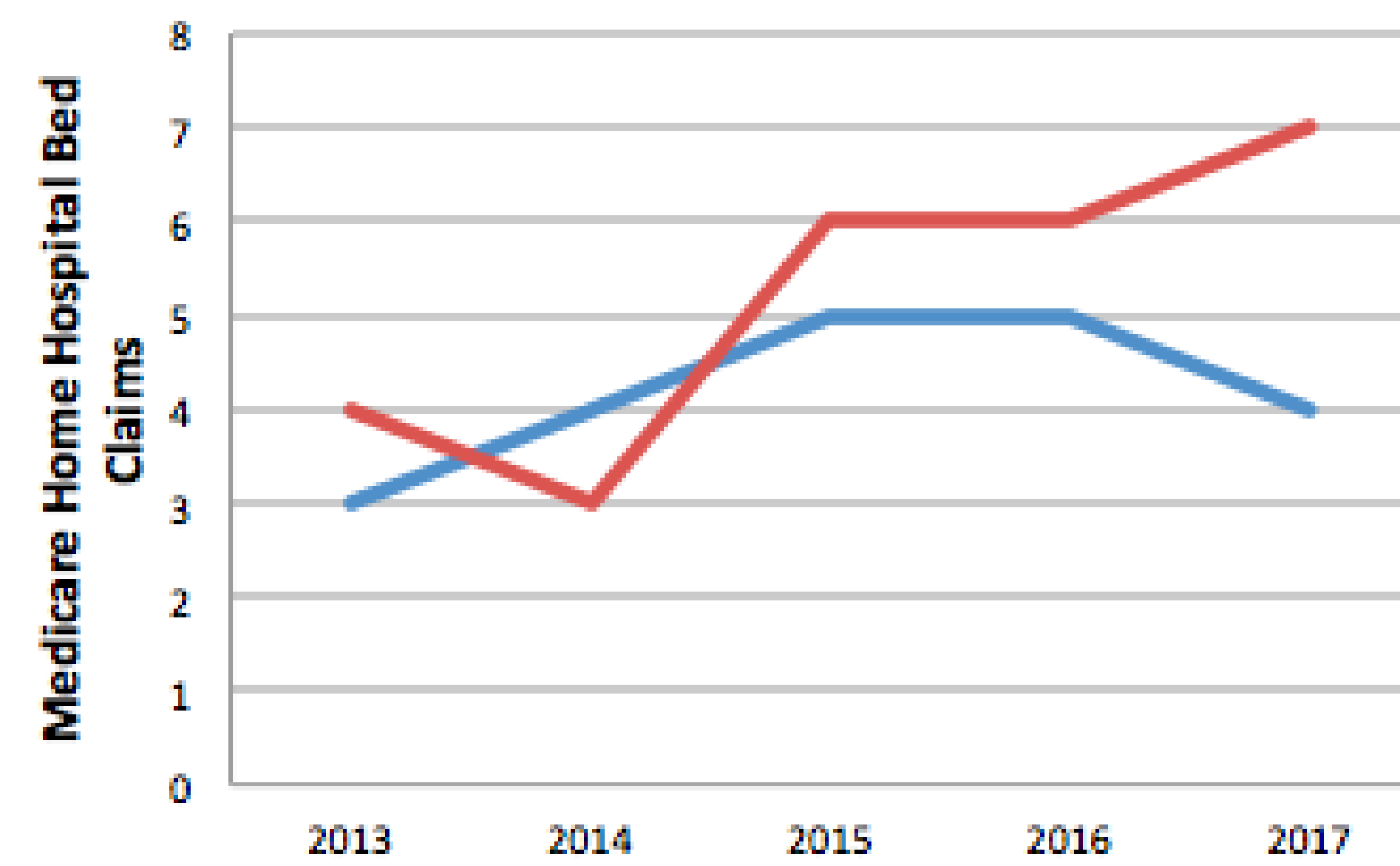
- As older adults live longer in the U.S., some experience frailty towards the end of life. This demographic shift challenges the well-being of the nation's economy, family structures, and current arrangements for services and financing.
- While some proposals aim to enhance the efficiency of care for frail elders, only a few quality measures are relevant to the last years of life.
- While work is underway to improve metrics for individual experience in advanced age, no measure development efforts aim to monitor the experience of elderly people in a geographic area.

Purpose

- To make an easily accessible, reliable and relevant community dashboard that will paint a picture of the quality of elder care and frailty burden regionally, aiming to guide improvement initiatives.
- The dashboard will be populated with data gathered from sources including follow-back interviews with surviving caregivers, Medicare claims, and nursing and home health data.

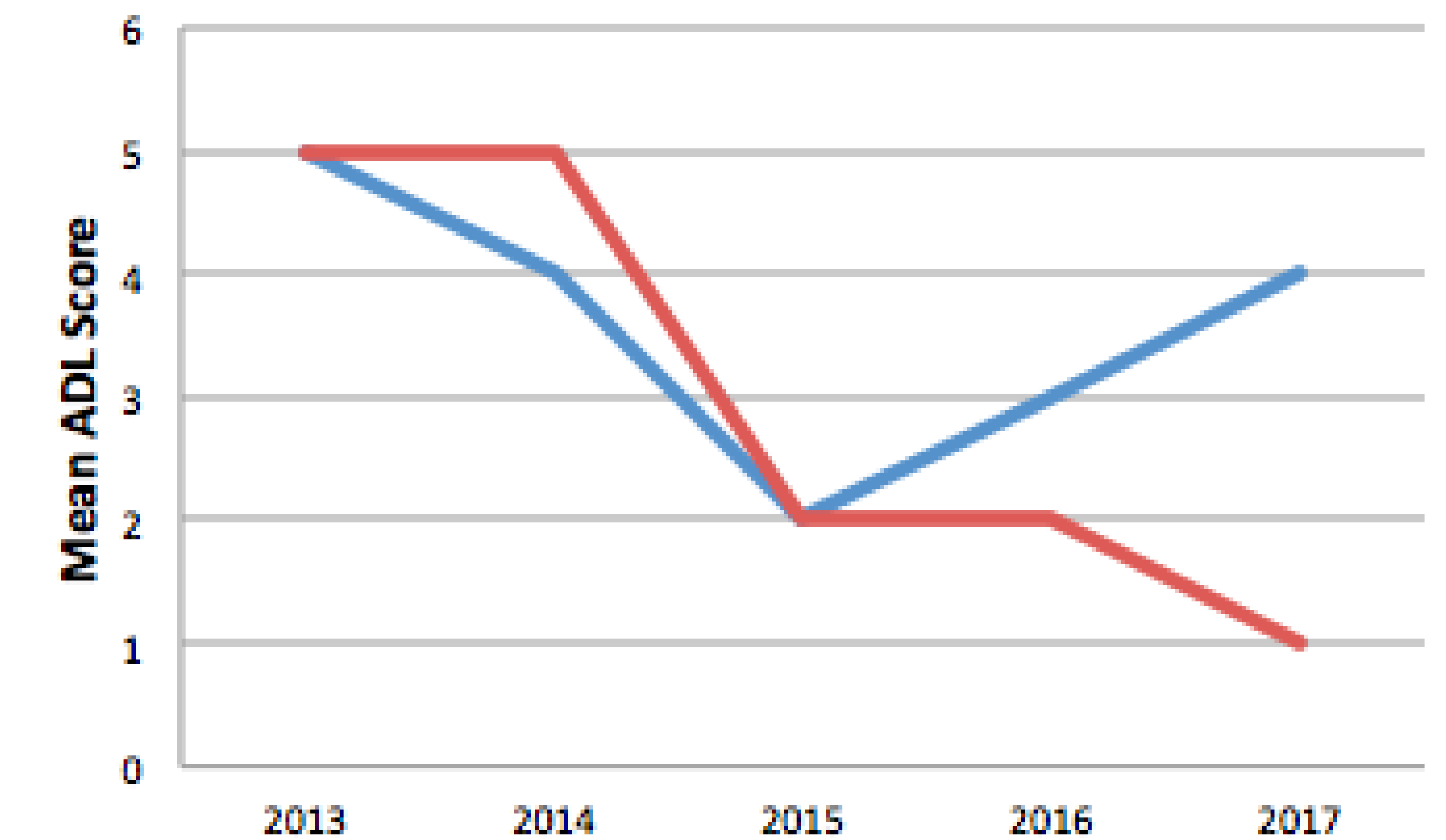
Conclusions

- By using existing data from utilization and other required data sets, a geographic community could construct a useful dashboard to prioritize and monitor improvements in elder care.
- The biases, which would be fairly stable across time for any one community, could be estimated. The costs could be mitigated with inexpensive access and off-the-shelf analytic packages.
- By marrying the breadth of information from large data sources with the depth of caregiver interviews, a platform could be created that motivates communities to undergo a very necessary elder care reform.



Medicare Claims

Metrics of Interest: Diagnoses, DME charges, procedures, medications
Limitations: No useful data from Medicare Advantage or those without Medicare or using other systems (veterans), and very little LTSS



MDS

Metrics of Interest: Functional/cognitive status, mood, ED use, help/care in home

Limitations: Only those who spent time in a nursing home, regional variation, data quality

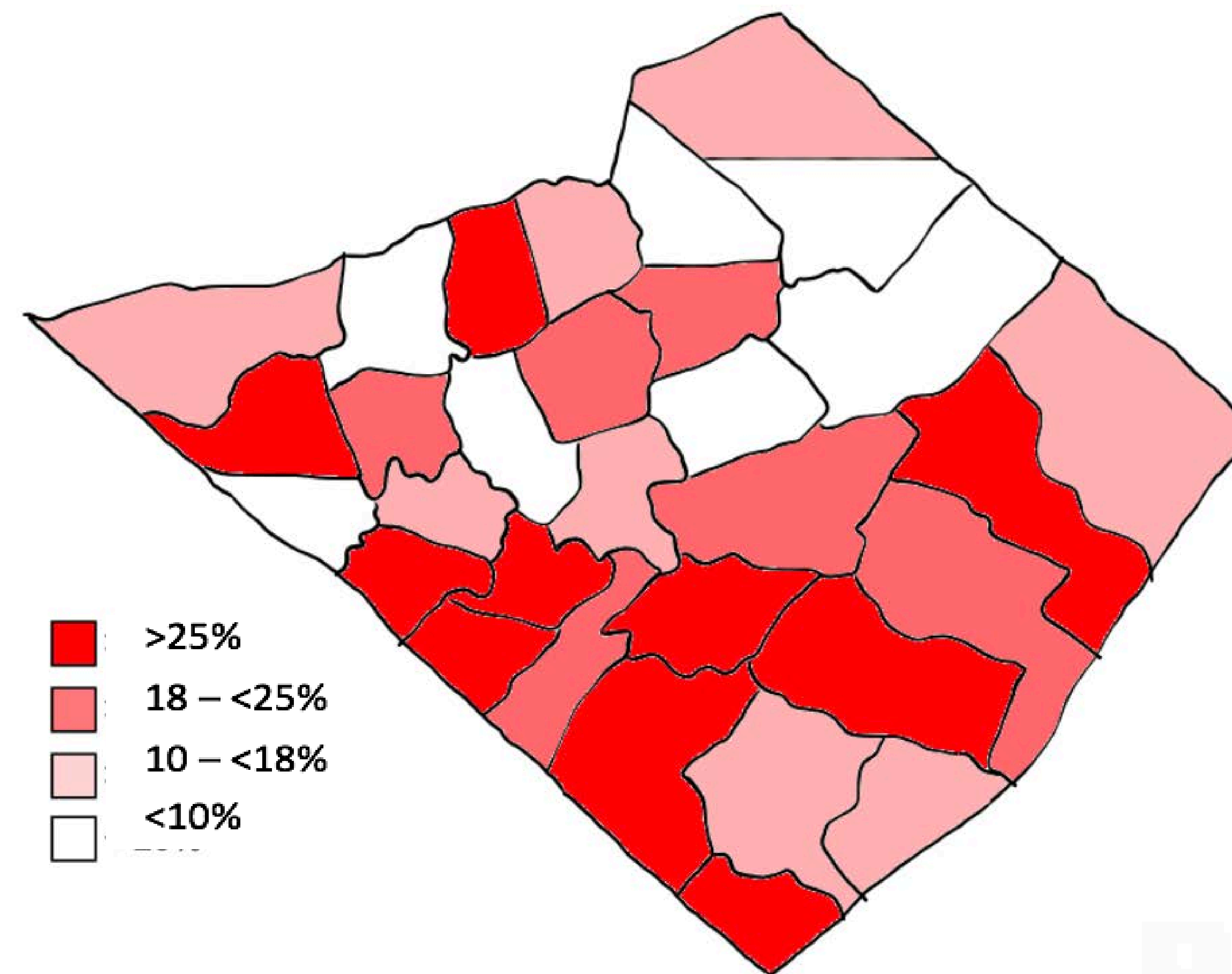
OASIS

Metrics of Interest: Functional/cognitive status, mood, ED use

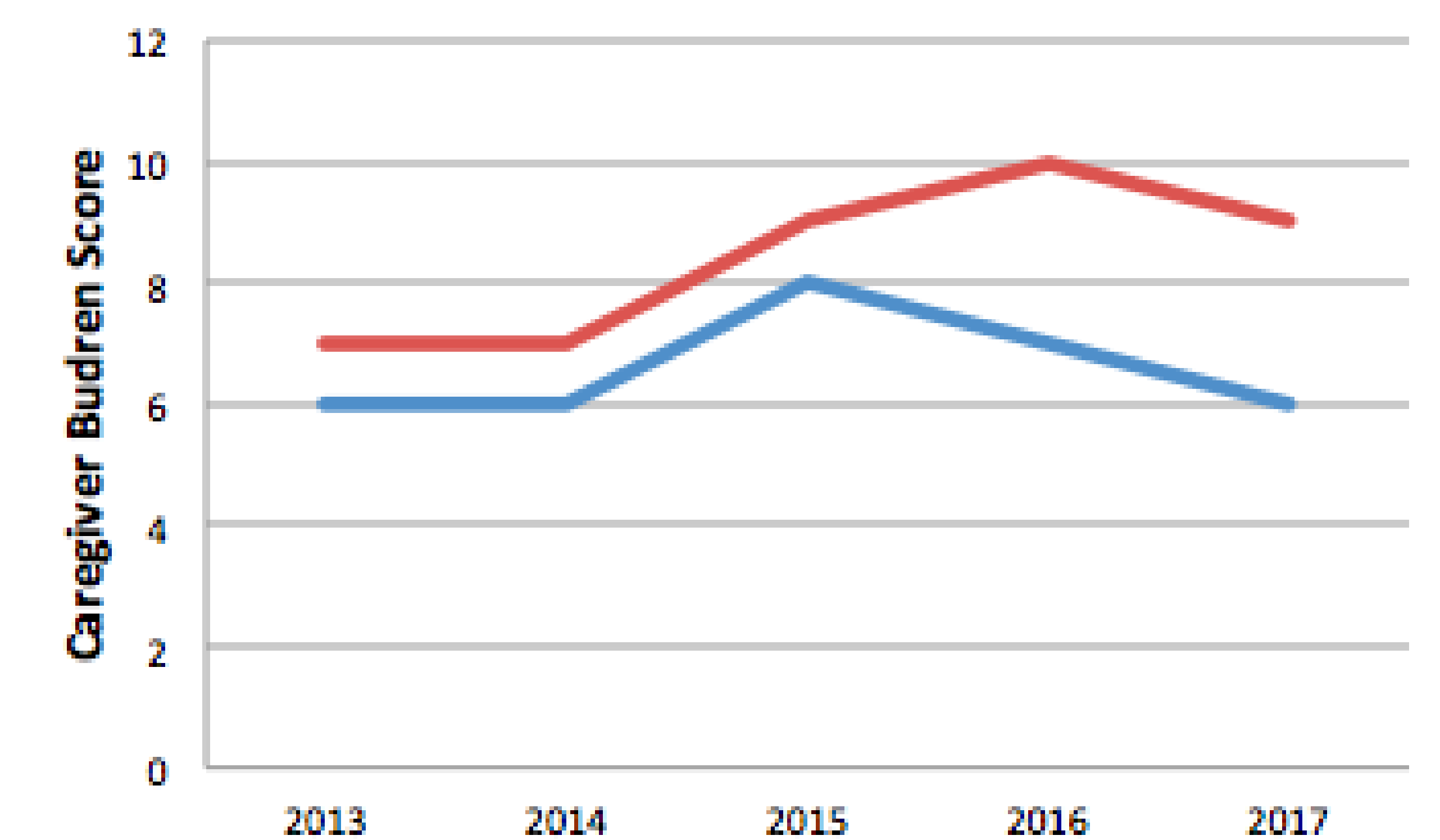
Limitations: Only those utilizing home health, regional variation, data quality

(MDS: Minimum Dataset; OASIS: Outcome and Assessment Information Set)

Frail Persons Aged 60 and Older, 2016



*Graphics are simply illustrative and do not reflect actual data.



Death Certificates Follow back

Metrics of Interest: Cause of death, other conditions at time of death, location of death, informant

Limitations: Inaccuracy in completion, esp. regarding cause of death

Interviews with Surviving Caregivers

Metrics of Interest: Patient/caregiver perspective on healthcare, life quality, and needs

Limitations: Focused on caregivers, those interviewed often had cognitive impairment