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Interdisciplinary Telementoring for Therapists in SNFs to Improve Dementia Care Knowledge and Skills

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Along with a set of compensatory strategies, assistive technologies play a promising role in augmenting individuals' capacity and reducing environmental demands in daily activities. Using data from the five survey rounds of the National Health and Aging Trends Study (2015–2019), we aimed to investigate the longitudinal associations between disabilities, assistive technologies, and subjective well-being among older adults. A multi-class hierarchical spectrum was constructed to capture the state of disability and assistive technology use. Overall, results showed that subjective well-being decreased progressively along the spectrum. Additionally, assistive technologies were found to differentiate the associations between disabilities and well-being outcomes. Discussions focused on the insights and implications for successful accommodation to disabilities in later life.

EDUCATION AND PERCEIVED FUTURE NEED FOR ADL HELP

Julia Finan, *Syracuse University, Syracuse, New York, United States*

Extant literature suggests that adults with higher education are more likely to avoid poor health outcomes and to rate their health as better than individuals with less education. The current study builds on prior research by analyzing the association between educational attainment and the perceived need for future help with activities of daily living (ADLs), often measuring disability in the literature. 2011-2014 National Health Interview Survey (NHIS) data for adults in the United States age 40 to 65 (N=55,166) were analyzed using multivariate regression analysis. Among non-Hispanic Whites, increased years of education predicted stronger anticipation of the need for future ADL assistance. For non-Hispanic Blacks, this relationship was reversed at the some-college level. Education was not predictive of perceived future ADL assistance need for all other racial-ethnic groups. Results of this study suggest education has a unique impact on anticipation of future need for ADL assistance among non-Hispanic Whites.

CONCEPTUALIZING SUCCESSFUL AGING IN THE PRESENCE OF DISABILITY

Madina Khamzina, and Wendy Rogers, *University of Illinois Urbana Champaign, Champaign, Illinois, United States*

With the rapid demographic changes, it is predicted that every fifth person in the U.S. will be age 65 or older in the next decade. The quality of life and successful aging of older adults, who now live longer, is an important research area from societal and public health perspectives. Rowe and Kahn (1997) defined successful aging as having a low probability of disease and disability, high cognitive and physical functioning, and active engagement with life. A prominent limitation of this model is that it initially neglects essential components of aging and factors that are beyond an individual's choice and control, such as health declines and disabilities. We used the National Health & Aging Trends Study data to understand successful aging from the perspectives of those who experience disability integrating subjective components of self-rated health and well-being. These data provide insights on subjective perceptions on successful aging among older adults with disabilities.

SESSION 2060 (SYMPOSIUM)

ENSURING A KNOWLEDGEABLE GERIATRIC WORKFORCE: INTERDISCIPLINARY EDUCATION IN LONG-TERM SERVICES AND SUPPORTS

Chair: Gina Tucker-Roghi Co-Chair: Gail Towsley
Discussant: Linda Edelman

In this symposium, we describe five interdisciplinary educational programs to enhance the geriatric workforce in long-term services and supports (LTSS): Skilled nursing facilities (SNFs), assisted living, and home health and hospice. The interdisciplinary teams that came together to offer the programs leveraged technology to maximize access to experts in both the curriculum development process and the delivery of the educational programs for a wide range of target learners. The first program, an interdisciplinary telementoring series on dementia care for therapists in SNFs, was developed by a team of experts from occupational, physical and speech therapy. The program included asynchronous online didactic content and case-based learning relevant to therapists. The second program engaged faculty from seven graduate programs: Pharmacy, Physical Therapy, Occupational Therapy, Dentistry, Social Work, Nursing and Physician Assistant to co-create an interprofessional LTSS graduate certificate in Gerontology. The certificate encompasses asynchronous online courses to enable flexibility across programs and cover content specific to LTSS. In the third program, LTSS nurses completed an online educational course to better prepare them to care for complex older adults, improve leadership skills, become more resilient, and complete QAPI projects. The fourth program focused on utilizing interdisciplinary perspectives to educate LTSS direct care staff on the unique needs of LGBTQ older adults. The fifth program offered a virtual telehealth clinical experience to prepare physical therapy students for practice in a SNF setting. The curriculum included eight virtual modules and four telehealth patient encounters that exposed students to interdisciplinary teams in the SNF context.

INTERDISCIPLINARY TELEMENTORING FOR THERAPISTS IN SNFS TO IMPROVE DEMENTIA CARE KNOWLEDGE AND SKILLS

Gina Tucker-Roghi, *Dominican University of California, Santa Rosa, California, United States*

Occupational, physical, and speech therapists possess knowledge and skills that have the potential to reduce the burden of care and improve the quality of life of skilled nursing facility (SNF) residents living with dementia. Despite this opportunity to impact the well-being of residents with dementia, many therapy practitioners lack specialized training on the management of dementia. Therapy practitioners (n=31) from 22 SNFs participated in eight weekly interdisciplinary educational sessions using the Project ECHO (Extension for Community Health Outcomes) tele-mentoring model. An interdisciplinary team of therapy experts collaborated on the development of the curriculum, which included didactic content on dementia-care best practices as well as case-based learning. This presentation describes the process of developing an interprofessional tele-mentoring therapy education

program, challenges encountered during implementation, and strategies to retain learners. Evaluation data from participants will be shared and implications for future tele-mentoring interprofessional educational offerings for therapists will be discussed.

DEVELOPING AN INTERPROFESSIONAL GRADUATE CERTIFICATE IN LONG-TERM SERVICES AND SUPPORTS

Gail Towsley¹, Leigh Elrod², Nicholas Cox³, Alberto Varela⁴, and Linda Edelman⁵, 1. *University of Utah, Salt Lake City, Utah, United States*, 2. *University of Utah Physician Assistant Studies, Salt Lake City, Utah, United States*, 3. *University of Utah College of Pharmacy, Salt Lake City, Utah, United States*, 4. *University of Utah School of Dentistry, Salt Lake City, Utah, United States*, 5. *University of Utah College of Nursing, Salt Lake City, Utah, United States*

The demand for long-term services and supports (LTSS) is increasing and the capacity and competencies of the interprofessional LTSS workforce need to be expanded to provide value-based, person-centered care. The purpose of this presentation is to describe the process of developing an interprofessional LTSS graduate certificate in Gerontology. We broadened an existing nursing graduate certificate to encompass content related to skilled nursing facilities, assisted living and home health and hospice agencies. We will discuss: 1) how we engaged faculty from seven graduate programs: Pharmacy, Physical Therapy, Occupational Therapy, Dentistry, Social Work, Nursing and Physician Assistant to co-create the certificate; 2) challenges and benefits to developing a certificate; and 3) the 15-credit hour certificate components. Our faculty partners were committed to offering a LTSS focused graduate certificate which includes didactic courses and clinical hours. Four students have enrolled in the LTSS graduate certificate in Gerontology since implementation in Spring 2021.

TRAINING TO SERVE: INTERDISCIPLINARY EDUCATION ON LESBIAN, GAY, BISEXUAL, TRANSGENDER, AND/OR QUEER AGING

Rajeane Moone, *University of Minnesota, St Paul, Minnesota, United States*

Contemporary research details the significant health, economic, and social disparities experienced by lesbian, gay, bisexual, transgender, and/or queer (LGBTQ) older adults in comparison to their peers. Fundamental to overcoming these disparities is service provider understanding of the unique needs and challenges faced by LGBTQ older adults. This presentation will focus on the development and implementation of the research-based, interdisciplinary curriculum Training to Serve (TTS). TTS is designed to provide LGBTQ age-sensitivity training to service providers and since its inception over 15,000 providers have been trained. Evaluation data from participants will be presented. The framework for the development of the curriculum, based on interprofessional education, adult learning, and minority stress theories, will be shared. Implications for future training development and translation to electronic modules will be discussed.

IMPACT OF AN ONLINE COURSE ON GERIATRICS AND QUALITY IMPROVEMENT SKILLS FOR NURSES IN LONG-TERM SERVICES AND SUPPORTS

Jacqueline Telonidis¹, Kirstie Savage², Nanci McLeskey², and Linda Edelman², 1. *University of Utah, Salt Lake City, Utah, United States*, 2. *University of Utah College of Nursing, Salt Lake City, Utah, United States*

Nurses working in long-term services and supports (LTSS) settings need training in geriatrics and quality improvement (QI). Our Geriatric Workforce Enhancement Program (GWEP) created an online Nurse Residency Program for nurses from other LTSS settings. Nurses (n=7) who completed the program showed statistically significant improvements in confidence in performing geriatrics skills ($t = -3.12$, $df = 6$, $p = 0.01$), attitudes about community-centeredness ($t = -2.14$, $df = 6$, $p = 0.04$), self-efficacy to engage in the treatment and assessment of depression ($t = -3.06$, $df = 6$, $p = 0.01$), and dementia ($t = -2.04$, $df = 6$, $p = 0.04$). Open-ended, satisfaction responses revealed improved self-efficacy with conducting a QI project. Empowering nurses in LTSS settings may improve quality of care, and decrease burnout and turnover. Future revisions will make the course both asynchronous and applicable to other professions in order to build stronger interprofessional LTSS teams.

VIRTUAL TELEHEALTH CLINICAL EXPERIENCE TO PREPARE STUDENT PHYSICAL THERAPISTS FOR PRACTICE IN A SNF

Kathleen Manella¹, Kai Williams², and Jon Anderson³, 1. *Nova Southeastern University- Tampa Bay Regional Campus, Indian Rocks Beach, Florida, United States*, 2. *Ensign Services, Inc, Cypress, Texas, United States*, 3. *Ensign Services, Inc, San Antonio, Texas, United States*

Student training was suspended in most post-acute settings in the United States due to the COVID-19 pandemic. Through a collaborative partnership between a university and a healthcare organization we offered a virtual telehealth clinical experience to prepare student physical therapists for practice in a skilled nursing facility (SNF) setting. 35 students engaged virtually for 80 hours with two clinical instructors. The curriculum included eight virtual learning modules along with four telehealth patient encounters that exposed students to interdisciplinary teams in the SNF context. Students completed a retrospective pre/post Self-Perception of Learning Survey. Results demonstrated students' self-perception of learning was significantly increased implying an improved ability to practice in the SNF setting. This approach advanced student learning in patient care management, interprofessional practice, and telehealth practice in the SNF setting. Future work is planned to expand the program to include 20 physical therapy, occupational therapy, and speech and language pathology students.

SESSION 2070 (SYMPOSIUM)

ESPO AND BEHAVIORAL AND SOCIAL SCIENCES SECTION SYMPOSIUM: TAILORING INTERVENTIONS TO REACH AND MEET THE DIVERSE NEEDS OF DIVERSE CAREGIVERS

Chair: Kylie Meyer Co-Chair: Sara Hackett