

## British Columbia Ministry of Health

### Patients as Partners Initiative

# Seniors with Complex Medical Conditions Engagement Tip Sheet

*Our health system works well, but there are challenges – such as an aging population, more chronic diseases and an over-reliance on hospitals. As the health care system develops initiatives to address these challenges, the need to engage patients, families and caregivers in specific population groups can be anticipated. With this in mind, we have developed a series of tip sheets on engagement processes and for engaging patient population groups including: people who receive primary care services, caregivers, older adults that have complex medical conditions or are frail, people experiencing mental health or substance use, people who will receive surgical services, people in rural or remote locations, and multicultural populations. These tips apply to all three domains of health-system engagement: individual care; program and community services; and system redesign.*

***The purpose of the tip sheets is to provide guidance and support to health-care organizations in their patient, family and community engagement activities. The tip sheets are intended for use by engagement staff, health service practitioners, program managers, community development officers, and any health-care staff across the B.C. health system who works on engagement projects related to the co-design of health care.***

## Engaging Older Adults including those with Complex Medical Conditions or Frailty

### What is the rationale?

As people get older, the likelihood of chronic conditions increases. The aim of care for this population is about helping older adults manage their chronic diseases and reducing the need for early entry to residential care and avoid unnecessary hospital admissions. Together with patients and their families, the goal is to deliver high-quality, person-centered care for seniors that will improve their health outcomes, help them stay active, and help them prepare for the end-of-life process. Complex medical conditions can include chronic and/or multiple conditions that require ongoing care through the health system. This priority applies across all aspects of health care province-wide.

### Who are the stakeholders?

- |                                                                                                    |                                                                                           |
|----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| ✓ Older adults with chronic medical conditions                                                     | ✓ Office of the BC Seniors Advocate                                                       |
| ✓ Older adults with acute medical conditions                                                       | ✓ Community health service providers                                                      |
| ✓ Family, and other informal caregivers                                                            | ✓ Healthy older adults                                                                    |
| ✓ Health practitioners who care for seniors, including family doctors, nurses, geriatricians, etc. | ✓ Community organizations and other agencies, both public and private, that serve seniors |

\*Each of these stakeholder groups includes multiple sub-groups that should be considered as you design and undertake engagement activities related to this population. For example, it may be important to include older

adults with chronic, complex conditions, who are living independently, as well as those who receive home care support and those who reside in supportive housing, assisted living and residential care.

Multicultural and non-English speaking populations should also be considered in engagement planning. In general, older adults should not be treated as a single, homogenous group.

*While other stakeholder groups are identified, the barriers, tips and techniques below are specific to engaging the patient and family/informal caregiver populations related to seniors, particularly those with complex medical conditions or frailty.*

### **Barriers to engagement**

- Physical and cognitive limitations due to health status:
  - Impaired mobility
  - Lack of energy
  - Mental and physical fatigue
  - Impaired vision and/or hearing loss
  - Chronic disease
  - Cognitive impairment, such as dementia and other mental health conditions
- Lack of time (for healthier, active older adults)
- Lack of awareness or knowledge of the engagement opportunity
- Lack of interest in the engagement opportunity
- Lack of, or limited, health literacy
- Caregiver burden
- Mistrust

### **Tips and tools for effective engagement**

- Build relationships between dedicated engagement staff and patients, as well as community organizations and leaders who already have established relationships with older adults.
- Expect and plan for extra time to reach and engage older adults with complex care needs.
- Connect with older adults where they already are – through existing health system access points and established community-based interactions.
- Communicate clearly through multiple methods and follow up with participants. Ask how they prefer to receive information and be contacted. Whenever possible, streamline information for clarity.
- Design engagement activities to be patient-centred – identify barriers and work to overcome them. For example, arrange for transportation and family caregiver respite care.
- Consider accessibility to engagement events, both in terms of distance and mobility challenges. When possible, provide transportation, arrange convenient locations or go to the patient.
- Provide incentives, such as refreshments, and reimburse patients and family caregivers for any direct costs associated with participating.
- Ask patients how they want to participate and be realistic about possible limitations to ongoing involvement.
- Avoid duplication across engagement projects and in information being sought from participants.
- Thank participants for their contribution, and ensure that results/outcomes of the engagement are reported back.

- Seek a diversity of voices, and treat patients and family caregivers as separate stakeholder groups.
- Plan accordingly when engaging ethnic groups or participants. Provide both written and spoken translation services for non-English speaking participants, and research cultural barriers or differences that may need to be integrated into your engagement plan.

### **Recommended engagement techniques**

- In-person engagement is preferred.
- One-on-one interviews (in-person is best).
- Home visits for the very frail.
- Phone interviews are not ideal, but can be used for rural/remote participants.
- Try partnering with organizers of a seniors fair or event or a seniors community group as a way to establish initial connection/recruit participants.
- Some jurisdictions have found success with establishing and continually growing a connected network/group of older adults – who connect with each other and patient engagement practitioners.

