Services in Northern Michigan Geared Toward Growing Elderly Population

A2 Geriatric Assessment Clinic Identifies Needs
From physical and cognitive abilities, to medical management of behavioral issues, clinic provides evaluation and recommendations

A3 ’Train Your Brain’ Helps Patient Flex Their Muscle
Program is designed to help older patients retain cognitive capacity

A4 Improving Inpatient Care of Older Patients
Unit at Munson Medical Center meets and embraces challenges of caring for medically complex older patients

A6 Munson Home Health Services Cover Continuum of Care
New Medicare regulations are in effect for home care referrals

A7 Kalkaska Memorial Assisted Living Offers Option
The first hospital-based assisted living facility in northern Michigan offers independent living and close, convenient medical care

munsonhealthcare.org
Geriatric Assessment Clinic is Valuable Resource for Older Patients and Their Families

Would you like to avoid that unpleasant conversation with your 85-year-old patient about why she must stop driving? Do you get repeated calls from family members who don’t know how to handle dad’s bizarre late-day “sundowning” behavior?

Primary care physicians often don’t have the time or in-office resources to assess and deal with the complex medical and social needs of older patients. That’s where the Geriatric Assessment Clinic can help. The consulting clinic’s multi-disciplinary team specializes in geriatric care and coordinates the multiple services older patients may need— as well as provides guidance and education for families.

Located in Traverse City, the clinic has no geographic boundaries and will conference call with patients and families all over the world. The clinic typically serves patients over 60—up to its oldest patient of 103. All major insurances are accepted with a physician’s referral.

David J. Straight, MD, the clinic’s medical director, is a hospitalist at Munson Medical Center board certified in Geriatric Medicine. The team working with him includes a certified gerontology nurse, a licensed clinical social worker, pharmacists, a referral coordinator, and neuropsychologists at the MS and Doctoral level who test for cognitive function when indicated.

“We can handle things that are too time consuming for a primary care physician to take on,” Straight said. “All of our patients are extremely complicated medically. Our initial consultation with a patient and their family lasts three to four hours, and we spend an hour or two during subsequent visits. That’s something that typically can’t happen in a medical practice.”

During the first visit, team members complete a full evaluation of the patient’s physical and cognitive abilities and needs, including medical management of dementia and behavioral issues. Straight provides the referring physician with a detailed comprehensive dictation covering the team’s assessment and recommendations. “A physician can either refer a patient and allow us to prescribe, make medication changes, and initiate therapy, or ask for a consult and receive medical/medication recommendations only, but avail the patient of all other services we provide, including the RN home visit, medication review, social services, and guidance,” Straight said.

Is Your Patient Safe At Home?

“arbitrator of whether a person is safe in their home,” Straight said. “If not, what is needed to make it safe for them, and if it can’t be made safe, then where is a good place for them to be? We see a lot of cognitive disorders and the child or spouse is looking for help—they’s where is a good place for them to be? We see a lot of cognitive disorders and the child or spouse is looking for help—that’s probably 70 percent of everything we do. When people get older, their medical and social problems become so inter-twined—you almost need a social worker to co-manage the patient’s medical issues.”

“Someone needs to sit down with the family and explain the ‘how to’—for instance, how to avoid crises, unnecessary emergency room (ER) visits, and re-admissions,” said Paula Gibeson, RNC. “Often the patient doesn’t need the ER but the family is so burned out they just don’t know how to handle the person who is up all night wandering.”

During home visits, it’s common for Gibeson to find patients aren’t following medication instructions. “I’ve had examples when they just threw their medication away because they couldn’t follow the instructions. We sort out what they are actually swallowing and explain why it’s so important to take medication as prescribed.”

Telling Mrs. Smith She Can’t Drive

“Driving is something the personal physician often doesn’t want to address because it can permanently damage that relationship,” Straight said. “We can play the bad guy because the patient is only going to see us a few times—we can take the slings and arrows that tend to come with this conversation. If driving is an issue the physician wants to tackle, a good place to start is Munson Occupational Therapy’s driving evaluation program. The Secretary of State also conducts road tests—sometimes it’s better to just test their abilities.”

To initiate a referral to the Geriatric Assessment Clinic, call (231) 935-6650 or fax (231) 935-6652.

What is Train Your Brain?

The Train Your Brain program was developed by Paul Callaghan, PsyD, of Traverse City in response to neuropsychological research that demonstrates that a lifetime of cognitive stimulation helps preserve cognitive capacities as people age. The Train Your Brain program utilizes a combination of community, game, puzzle, and technology resources to challenge the essential capacities of attention, language, memory, and executive functions.

“The biggest thing is the social dilemma of whether a person is safe in their home,” Straight said. “We can play the bad guy because the personal physician often doesn’t want to address because it can permanently damage that relationship,” Straight said. “We can play the bad guy because the patient is only going to see us a few times—we can take the slings and arrows that tend to come with this conversation. If driving is an issue the physician wants to tackle, a good place to start is Munson Occupational Therapy’s driving evaluation program. The Secretary of State also conducts road tests—sometimes it’s better to just test their abilities.”

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Region Has Five Geriatric Specialists

Five physicians associated with Munson Healthcare are currently board certified in Geriatric Medicine. They are:

Alan J. Conrad, MD
Family Practice/ Geriatric Medicine
Cadillac Family Physicians
8950 Professional Dr.
Cadillac, MI 49601
(231) 775-2493
(231) 775-2570 (fax)

Mark A. Jackson, MD
Family Practice/ Geriatric Medicine
Grand Traverse Pavilions
1000 Pavilions Circle
Traverse City, MI 49684
(231) 932-3800
(231) 932-3801 (fax)

Jay A. Klein, DO
Family Practice/ Geriatric Medicine
PO Box 6516
Traverse City, MI 49684
(231) 935-5000
(231) 946-5477 (fax)

David J. Straight, MD
Hospitalist/Geriatric Medicine
Hospitals of Northern Michigan
Munson Medical Center
1105 Sixth St.
Traverse City, MI 49684
(231) 935-5000
(231) 922-9271 (fax)

Steven J. Wisniewski, MD
Internal Medicine/ Geriatric Medicine
OMH Medical Group
829 N. Center Ave.
Gaylord, MI 49735
(989) 731-7837 (fax)
(989) 731-7837 (fax)
Physicians are familiar with the distinct “three Ds” that present with older patients: delirium, depression, dementia. But that’s not all. Often older patients can’t see or hear well. They can be fragile and fearful. Easily confused. Brittle and belligerent. Or, completely charming and disarming. Beyond behavior, their bodies react differently to medications and competing co-morbidities make managing their care extremely complex and challenging.

Now, an inpatient unit at Munson Medical Center has taken up that challenge by participating in a program called Nurses Improving Care for Healthsystem Elders (NICHE), developed by Hartford Institute for Geriatric Nursing at New York University’s College of Nursing.

All unit nurses have completed specialized education in best practice models to become Geriatric Resource Nurses (GRN); two are certified in Geriatric Nursing through the American Nurses Credentialing Center. GRN training at Munson has resulted in reduced use of restraints, improved ulcer treatment, and more appropriate use of pain medication and urinary catheters.

“We are integrating medical management and nursing interventions to provide appropriate care for older patients,” said Dawn Halleck, BSN, CMSRN, Manager, B4 Medical Unit. “By doing so, we are decreasing our patients’ functional decline, and that’s huge.”

“Over 50 percent of the patients in the hospital are older, so in a way, nearly everybody ought to be focused on care of the elderly,” said David J. Straight, MD, a hospitalist who is board certified in Geriatric Medicine. “What’s being done to improve inpatient care for the elderly is a great idea.”

Research shows that NICHE sites have reduced use of restraints and Foley catheters, fewer falls, and shorter length of stays.

“By better understanding the geriatric population, nurses can dig deeper and get to the source of why the patient is confused, why their gait is unsteady,” Halleck said. “With this training, nurses are better able to work effectively with patients and their families and look at these patients holistically. It is a specialty – they are very complex patients.”

Work is ongoing to develop a nursing delirium protocol with order sets that eventually could be used hospital-wide, Halleck said. Having a better understanding of how to care for patients with delirium or dementia, along with increased knowledge about pain medications in older adults and use of safety companions, limits the need for restraints and increases patient satisfaction.

“We’ve had physicians transfer their patients to us because they know we are trained to take care of patients who might otherwise end up in restraints.” Dawn Halleck, BSN, CMSRN

Customizing Care

The average age of patients on B4 is 68.2, and 62 percent are older than 64. “We want to adapt our nursing care and our physical environment and equipment to better care for them,” Halleck said. “When more than half of your population is geriatric, you should really customize your care to them. If we can make things better for them while they’re here – the care provided will be better.”

About half of the patient rooms on the 40-bed medical unit are private, which benefit patients with delirium and dementia who are easily confused or frightened by noise and distractions.

Each afternoon, Quiet Time from 2 - 4 pm will soon be followed by Happy Hour. “We are planning to start a Happy Hour where patients can gather for cards, checkers, and we will serve lemon or cucumber water to help them hydrate while they socialize,” Halleck said.

A geriatric activity cart includes items of “Reminiscence” and other reading materials and puzzles to stimulate minds. A selection of stuffed animals help reduce anxiety and, once selected, belongs to the patient. “Patients find them so comforting, especially if they have an animal at home,” Halleck said. “You’ll see a patient who was agitated take a nap holding and stroking a stuffed animal.”

Geriatric training has increased sensitivity and awareness of what it’s like to be elderly, including special glasses that show staff how cataracts or macular degeneration impact vision.

Above all, the unit shares a mindset that caring for older patients is a privilege. “Taking care of elderly patients, hearing what they have to say, is truly rewarding – they are very enjoyable to care for,” said Chantal Toth, Resource Clinician, BSN, RN. “We have a vision we’re very excited about. When we hire nurses now, we’re looking for a passion for geriatrics – we want people who will embrace this vision with us.”

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Munson Home Health Services Help Patients Stay Safely Independent

One call, 1-800-252-2065, puts you or your patient in touch with the following Munson Home Health services:

**Munson Home Care**
Munson Home Care provides service to 17 counties in northern Michigan, including skilled intermittent nursing or therapy, such as certified nursing, physical, speech, and occupational therapy, telehealth, home infusion, home health aide services, and medical social worker services.

**Medicare Regulations for Home Care Referrals**
In accordance with the Patient Protection Affordable Care Act, the Center for Medicare and Medicaid Services (CMS) issued a Final Regulation that went into effect Jan. 1, 2011, whereby patients referred to home health agencies must have a face-to-face encounter with the physician that certifies the home health plan of care 90 days prior to, or 30 days after, the start of home health services.

The face-to-face encounter must be:
- Made by the physician responsible for certifying home health services (or non-physician practitioner)
- Related to the primary reason for which the patient requires home health services

The encounter must be documented on the home health plan of care, or an addendum to that plan of care. Documentation of the certification of a face-to-face encounter must include:
- Date of the encounter
- Indication that the encounter was related to the primary reason for home health services
- An explanation of how the clinical findings of the encounter support the need for skilled nursing or therapy services
- An explanation of why the clinical findings of the encounter support the need for skilled nursing or therapy services
- Physician’s signature, and date of that signature
- Physicians making home care referrals through Munson Medical Center’s Physician Order Entry (POE) may have already noticed these changes. Otherwise, physicians will be notified of this documentation as referrals are made to any Medicare certified home health agency.

**Munson Hospice & Palliative Care**
Compassionate, end-of-life care and symptom management is provided in the home, hospital, assisted living, nursing home, or Munson Hospice House.

**Two Physician-Friendly Resources From Munson Hospice**
1) Free 12-minute DVDs, “The Gift of Time,” are available to give to patients and families as a tool to decrease the workload for physicians and their staff in initiating “end of life” conversations.
2) Free laminated referral guides answer frequently asked questions about physician hospice billing, making hospice referrals, and guidelines for determining terminal prognosis.

To request copies of the DVD or the Munson Hospice Referral Guide (form #10117), call 1-800-252-2065.

**Munson Home Services Private Duty**
Munson Home Health offers Private Duty Services as part of its continuum of care with Munson Home Care, Munson Hospice, and Munson Lifeline.

What sets Munson Home Services Private Duty apart from its growing network of competitors is that it not only provides companion care, but also can provide round-the-clock medical service in the home, including nursing or specialty aides.

**Home Telemonitoring is Standard of Care for Open Heart and CHF**
Munson Home Health Telemonitoring program, now in its fifth year, has demonstrated improved outcomes for its patients and is now routinely ordered for patients who have undergone open heart surgery and those with congestive heart failure. Munson’s Telehealth program also has been working closely with Priority Health the past two years as part of its Congestive Heart Failure initiative.

For more information about any Home Health service, contact Munson Home Health Representative Kristin Harrison, BSN, RN, at kharrison@mhc.net or 1-800-252-2065 or (231) 935-9126.

**Kalkaska Memorial Assisted Living Provides Options to Area Seniors**

The new Kalkaska Memorial Assisted Living (KMAL) facility provides an additional option for northern Michigan residents and extends the continuum of care provided by Munson Healthcare.

Opened in 2009, this assisted living community offers the privacy of apartment living, with the companionship of peers and the assistance of professionals to meet individual needs. Residents can enjoy worry-free living in a safe and secure environment. Assisted Living can be an important “in-between” step to help people maintain their independence and safety, often delaying or eliminating the move to a nursing home.

Kalkaska Memorial Assisted Living is located on the Kalkaska Memorial Health Center (KMHC) campus. Levels of care are tiered to meet individual needs. A registered nurse is on staff and residents have convenient next-door access to local family practice physicians, Munson Healthcare specialists, the Dialysis Center, and other health care services.

**Less Worry, More Fun and Activity**
Kalkaska Memorial Assisted Living residents are finding that taking the worry out of everyday life allows more time for fun, socializing, and staying active. They recently enjoyed spending the holidays with one another and look forward to events and outings planned for the warmer months ahead.

“This is my home away from home. The staff and residents are like my extended family,” said resident Nancy Tinker. “The atmosphere is just terrific. A place like this is long overdue for the area.”

To refer patients to Kalkaska Memorial Assisted Living, contact Laura Murray, Director, at (231) 258-3030 or lmurray@mhc.net.

Kalkaska Memorial Assisted Living offers its residents:
- Easy access to hospital services, including quality outpatient surgery, emergency care, rehab, lab, x-ray, primary care
- Visiting Munson Healthcare specialists at KMHC include orthopedics, podiatry, cardiology, pulmonology/sleep, and gastroenterology
- RN on staff at KMAL oversees medication management, wellness, and serves as a liaison with physicians
- Emergency call system as well as 24-hour staffing
- Personal care and assistance
- Licensed by the State of Michigan as a Home for the Aged

Contact Munson Healthcare for more information or to refer a patient to Munson Health services.