CAMROSE | BASHAW | DAYSLAND | FORESTBURG
HARDISTY | KILLAM | TOFIELD

Camrose Primary Care Network (PCN) Geriatric Assessment Program (GAP)

Care Pathway for anyone >65 years

or younger patients living with Down Syndrome

TEAM

- Patient/Family/Caregivers
- Family Physicians
- Care of the Elderly Physician
- Geriatric Nurse Lead FTE .6
- Mental Health/ Seniors Outreach Team
- Admin Assistant FTE .4
- Camrose PCN Dietitian, Pharmacist and other programs

OBJECTIVE

To improve health, maximize quality of life and independent living for seniors aged 65+

PARTNERS

- AHS HomeCare/Allied Health
- AHS Mental Health
- Covenant Health St. Mary's Hospital
- Local Pharmacies
- Alzheimer Society - First Link
- SOS - Service Options for Seniors
- Crossroads Program
- Vendors of Adaptive Aid

Total GAP Referrals * **437**

initials **282** follow ups **268**

Average Age **82.6** Total Patients 183

Average Age **78.65** Total Patients 145

Physician Referral received and triaged by GAP nurse for appropriateness

NOT APPROPRIATE

- Where possible, we suggest alternate referral options and suggestions
- Letter sent to referring physician

APPROPRIATE

- Referral is faxed to MH for Ax In Home
- MH Ax faxed to PCN, appointment booked
  - Call to patient/ family/ caregiver—encourage someone to accompany
  - Appt letter sent to referring physician
- COE completes assessment @ PCN clinic
  - Further investigation/ testing and visits as required
  - No further investigation/ testing or visits required
  - Consult letter to Dr., MH and others as indicated
  - Discharge from GAP with appropriate follow up plan in place

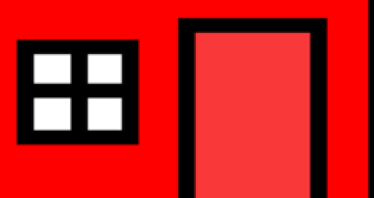
ASSESSMENT PROCESS

1. Greeted and consent obtained
2. Med reconciliation
3. COE interviews patient alone
4. RN completes vitals, TUG, further cognitive testing, prep for physical exam
5. COE meets with family for collateral info - if patient consents
6. COE completes physical
7. COE meets with patient and family for Dx, further tests, determine F/U by needs of pt, family and request of family doctor.

Reason for Referral*

Reason	Count
Frequent Falls	25
Signs of memory loss or established dementia	252
Bladder concerns	7
Decreased Mobility	4
Difficulty coping in own home or community	18
Comprehensive review of meds and related health concerns	22
Other	45

COE	*Care of the Elderly Physician*
MH	*AHS Mental Health*
GAP	*Geriatric Assessment Program*
F/U	*Follow-up*
DX	*Diagnosis*
TUG	*Time up and Go*
*	*Stats compiled October 2012 to January 2016*



Medical Diagnosis reviewed in clinic:

Dementia-Alzheimer, Mixed, Vascular, Lewy Body, Parkinson's, Frontal-Temporal, PSP, Depression, Anxiety, Delirium, NPH, Brain Tumour

THE CAMROSE PRIMARY CARE NETWORK IS PART OF YOUR HEALTH HOME