USING TELEHEALTH TO PROVIDE CARE TO ISOLATED OLDER ADULTS DURING THE COVID19 PANDEMIC

Magdalena Bednarczyk, MD
Alexander Rackman, MD

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Disclosure

Presenters have no financial relationships to disclose.
Learning Objectives

1. Recognize the consequences of social isolation on an older adult’s health and functional status
2. Discuss the best practices for delivering care to older adults at home via telehealth
3. Identify opportunities for home health teams to provide high quality care remotely
COVID-19 pandemic

- The WHO declared a global pandemic on March 11th, 2020
- As of May 11th more than 4.65 million cases in 188 countries and territories were reported
- Highest mortality rates >60 years old
Social Isolation and loneliness

- Loneliness - subjective perception of lack of meaningful relationships

- Social isolation – lack of social engagements and contacts among older adults

- Loneliness and social isolation among the world’s older adult population is a global epidemic
43% of seniors feel lonely on a regular basis.

There is a 45% increased risk of mortality in seniors who report feeling lonely.

Loneliness is more dangerous than smoking 15 cigarettes a day, similar to obesity and as damaging to health as smoking 15 cigarettes a day.
Negative Health Effects of Isolation and Loneliness

Associated with higher rates of:

- Chronic health conditions, including heart disease
- Weakened immune system
- Depression and anxiety
- Dementia, including Alzheimer's disease
- Admission to nursing homes or use of emergency services
- Death
• Predictors for loneliness and social isolation:
  • advanced age
  • living alone or in a rural community
  • poor functional status
  • widowhood
  • female
  • lower income/education
  • depression
  • feeling misunderstood by others

https://doi.org/10.1016/j.archger.2005.03.002
Adverse Effects of Shelter in Place Orders
The health care system is poised to develop methods that identify social isolation and loneliness in health care settings.
Intervention

- Identify those at risk for social isolation during an emergency
- Use analytics and predictive models
- Planning and careful execution are the key to communicating effectively with elderly patients
Prioritize Safety

- Healthcare Access
- Food
- Medications
- Water
- Perform Personal Care
Measuring loneliness

- UCLA Loneliness Scale
- 20 point survey
- 3 item survey is more commonly used

### The 3-Item UCLA Loneliness Scale

<table>
<thead>
<tr>
<th>Question</th>
<th>None of the Time (1)</th>
<th>Some of the Time (2)</th>
<th>Often (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you Feel Left Out</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you feel isolated</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you lack companionship</td>
<td></td>
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</tr>
</tbody>
</table>

*Increasing score indicates increased severity of symptoms*

- Score 3-5: not lonely
- Score 6-9: lonely
# Measuring social isolation

- Lubben Social Network Scale

<table>
<thead>
<tr>
<th>LSNS-6 Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 1: How many relatives do you see or hear from at least once a month?</td>
</tr>
<tr>
<td>Item 2: How many relatives do you feel at ease with that you can talk to about private matters?</td>
</tr>
<tr>
<td>Item 3: How many relatives do you feel close to such an extent that you could call on them for help?</td>
</tr>
<tr>
<td>Item 4: How many friends do you see or hear from at least once a month?</td>
</tr>
<tr>
<td>Item 5: How many friends do you feel at ease with that you can talk to about private matters?</td>
</tr>
<tr>
<td>Item 6: How many friends do you feel close to such an extent that you could call on them for help?</td>
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</tbody>
</table>
Four Emergency Communications Objectives

1. Target elderly patients with timely, relevant, and factual messaging that avoids unnecessary disruption
2. Prepare responses for common post-crisis questions - emergency updates and access to healthcare, food and water, and other essential services.
3. Use multiple channels to increase engagement
4. Think of crisis communications as one part of a larger, more comprehensive engagement program

Best Practice Interventions

- More frequent telephone contact
  - close family and friends
  - voluntary organizations
  - health-care professionals
  - community outreach projects providing peer support

- Cognitive behavioral therapies could be delivered online to decrease loneliness and improve mental wellbeing
Preparing for a telephone or video visit

• Ensure patients are wearing their hearing aids
• Enlist the help of a family member, friend, paid caregiver, or staff member in advance of the visit to familiarize older adults with video-call technology
• Practice ahead of time to increase utilization of these modalities
• Engage caregivers in a visit through a 3-way call
• Coach patients to be prepared with their questions, medication lists and vital signs prior to the visit
Utilizing Home Health

• Importance of having a ‘preferred agency’
  • Agencies are not all equal

• Communication with HH nurse is key
  • HHRN # is critical
    • googlevoice# for RN communication (if wish to keep cell# private)
  • Can have nurses help perform video visits, perform med rec, relay vital signs, physical exam etc
  • Variable success depending on nurse, but can arrange with office staff

• Shifting Covid-related precautions
  • Clarify ability to care for Covid patients, perform home-testing, infection control policies etc.
Home-based Diagnostics

• Can either go thru Home Health Agency or private vendors
• Private vendors often very easy to work with directly (especially if no active HH)
  • Fax Insurance info and orders/requests
  • e.g. US Diagnostics for imaging, CCL or Star labs for bloodwork

• Shifting Covid-related precautions
  • Clarify ability of HHA to care for Covid patients, perform home-testing, infection control policies etc.
  • Ask vendors or HHA of any geographical or other restrictions
Virtual Therapy / Referrals

• Can request therapists to attempt therapy sessions virtually (video/telephone)
• OT: Functional assessments, cognitive testing (limited)
• SLP: Cognitive testing (limited), dysphagia therapy (limited), communication and speech therapy
• PT: Review/recommend home exercise program (limited)
• SW: Maximize home care services (homemaker referral), food insecurity (Meals On Wheels), transportation, teletherapy, community resources
Conclusions

• Devastating consequences of social isolation, loneliness, and Covid-related stay-at-home orders on older adults

• Delivering care to elders in their homes via telehealth is crucial now more than ever

• Utilizing home health agencies and other home-based therapies/referrals is easy and necessary to provide home-based care to isolated elders