

Embedding sfCare in OHTs as the foundation of care for older adults with frailty

Guidance for OHT leaders as they re-design care in pandemic times and beyond



Why senior friendly care is important for your Ontario Health Team

The pandemic has revealed health inequities in senior care across the continuum that have resulted in poor outcomes and increased care needs.

Ontario Health Teams (OHTs) are now revising their plans to incorporate learnings from wave one of the pandemic so that a shared responsibility for the population health management of older adults with frailty becomes a reality.

Ensuring equitable and seamless access to care in all parts of the health care system by providers who are knowledgeable and skilled in addressing the unique needs of older adults will be especially important in these plans.

sfCare is preventive and proactive care for the unique needs of older adults. It is not an add-on to care; it is essential, foundational care. sfCare can mean the difference between an older adult with frailty living as independently as possible or suffering from preventable complications, resulting in disability and increased care needs.

★ What prioritizing sfCare in a pandemic looks like

If we think about change in the context of the pandemic, we know that rapid, large-scale change is very possible when everyone is aligned on the priority. **The Canadian Armed Forces (CAF) provided an excellent example of rapidly prioritizing and implementing a senior friendly approach to care.** Soldiers underwent four days of intensive geriatric-specific training including courses on elder care, feeding, safe movement, care for persons with cognitive impairment and other health topics before providing care in long term care homes. They used many of the sfCare resources created by the RGP.

Prioritizing sfCare in hospitals - the [sfCare Hospital Policy Brief](#) provides evidence for sfCare approaches and guidance for implementation in the context of the pandemic.



8 Recommendations for OHT Leaders

Implementation of sfCare leads to improved health equity and quality of care, and better outcomes for older adults. Now is the right time to re-imagine and purposefully design your OHT with sfCare firmly embedded in it; making it part of the “new normal”.

01

Endorse and support sfCare as an OHT priority by creating culture change and accountability. At the OHT executive level, establish sfCare leadership to guide and implement change. Empower and enable care provider champions across your OHT.

02

Integrate sfCare in conjunction with IPAC policies. Include someone with expertise in sfCare when decisions are made around access to care during the reopening phases and subsequent pandemic wave(s), and when implementing new IPAC policies such as those regarding visitors. Leverage your sfCare leaders to apply a senior friendly lens to IPAC policy changes and to mitigate unintended harm where possible.

03

Use the sfCare Framework as the foundation and common language for what sfCare should look like across your OHT. This evidence-based framework was developed with clinical experts across sectors, and with older adults and caregivers. Resources: [Senior Friendly Care Framework](#), [An introduction to sfCare: top tips for all staff](#) (5 min video), [An introduction to sfCare: a primer for executives](#) (5 min video).

04

Understand areas of strength and opportunities for sfCare across OHT partners. Using the sfCare self-assessment tool with each partner provides a common starting point for collective discussions. sfCare provides a lens for aligning on goals across your OHT and for developing plans to achieve these goals. Resources: [sfCare self-assessment tool](#) (the online assessment will be reviewed by the RGP and a report card sent to the organization), [sfCare getting started toolkit](#) (implementation resources).

05

Use a common approach to case-finding and identifying frailty levels. A foundational concept in population health management is to intervene early with preventive care, which involves active case-finding of older adults who are pre-frail or demonstrating early signs of frailty. Older adults with frailty as well as those who are experiencing functional decline should be receiving care to mitigate risk of preventable complications. The approach should be easily accessible to all care providers and also allow for self-reporting of health status by older adults and their caregivers. Resources: [Pictorial fit-frail scale](#).

06

Acknowledge functional decline and delirium as preventable harm.

Prioritize mobilization and delirium prevention and management across your OHT. Both deconditioning and delirium have been described as a pandemic within the pandemic. Aligning on these processes of care strengthens harm prevention across your OHT. Resources: [How to provide sfCare during the pandemic – spotlight on delirium](#) and [How to provide sfCare during the pandemic – spotlight on mobilization](#).

07

Build capacity for ALL staff and volunteers so that they are proficient in the provision of sfCare, and support older adults and caregivers as partners,

especially around mobilization and delirium prevention. Strengthening care competencies in healthcare providers, as well as enabling older adults and caregivers to provide preventive self-care are key factors in minimizing preventable harm. Resources: [sfCare Learning Series](#) (ready-to-use training modules for clinicians and non-clinical care providers, and education materials for older adults and caregivers), [RGP's COVID-19 resources](#) (ready-to-use tools for sfCare in a pandemic) and [Senior Friendly 7 Toolkit](#).

08

Design and build geriatric services to support care during the reopening and through subsequent waves of the pandemic.

These services are needed to address exacerbation of chronic illness and functional decline, and to support patients transitioning from acute care to other care levels. Redesign should incorporate lessons learned from the first pandemic wave, including the need to make technology accessible, strengthen ambulatory care, support in-home caregiving and optimize virtual care. Resources: [The Impact Of Covid-19 Pandemic Restrictions On Geriatric Day Hospitals And Geriatric Ambulatory Care In Canada: Adapting For Future Waves And Beyond](#) (includes practical tips).