



# Access to Care: one perspective

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# Story

- Mrs. H is a 58 year old woman with early onset Alzheimer's; diagnosed 5 years ago at age 53. Now severe stage (MMSE 0)
- Recently admitted to our ACE (Acute Care for the Elderly) unit for uncontrollable crying x weeks-months
  - Sent to ED by Adult Day Care because she was disruptive to other clients
  - Spent 5 days in the hospital getting medication titration (sedatives) with modest improvement

# Mrs. H

- Discharged home with husband to resume care at adult day care; husband working full time
- 4 days later, crying persisting, husband asked me to facilitate admission to a nearby Geriatric Psychiatry inpatient unit
  - They declined to accept her for admission
- 2 weeks later husband places her in a SNF/memory care unit due to fears she will be asked not to return to day care

# Health System Failed Her

- Estimated that we have 150,000 persons with Alzheimer's in NC<sup>1</sup>
- ~ 66 geriatric psychiatry beds in 4 hospitals<sup>2</sup>
- NC has 2.3 hospital beds per 1,000 people<sup>3</sup>
- Up to 345 geriatric psychiatry beds could be needed for the number of Alzheimer's patients in NC

1. Alzheimer's Association Facts and Figures 2014

2. unofficial count; I could be missing some hospitals

3. Kaiser Family Foundation; kff.org

# Recommendation

- Increase the number of geriatric psychiatry inpatient units to manage severe behavioral complications of dementia
  - Behavioral and psychological symptoms of dementia occur in nearly all patients at some point in the disease
  - Associated with worse prognosis, NH placement
  - No proven drug therapy
    - Need to train providers, caregivers (paid and unpaid) in non-drug management strategies
    - But sometimes, when all else fails, inpatient admission is needed

# Too few physicians with specialty training in Dementia diagnosis and care

- As of 2011
  - ~7150 board certified geriatricians in the US
  - ~1750 board certified geriatric psychiatrists
- Unclear how many behavioral neurologists

# At Wake Forest Baptist health

- 5-6 month wait for a new patient appointment in our Memory Assessment Clinic
- 2 geriatricians with expertise in memory disorders
- No inpatient geriatric psychiatry beds

# Recommendation

- Create programs to increase the knowledge and competence among primary care providers for dementia related assessment and care
  - There will never be enough “specialists” to provide all the care for patients with AD and related disorders

# Recommendation

- Increase the number ACE units in hospitals to care for acutely ill patients with AD
  - Being hospitalized is hazardous to older adults, but especially to persons with AD or other dementias
    - Agitation, delirium, falls, restraints, functional decline
  - ACE unit is an evidence based model of care that focuses on maintaining cognitive and physical function in older adults while hospitalized
    - Interdisciplinary teams, patient centered care

# Recommendation

- Improve access to Adult Day Centers
  - Help patients remain in their homes longer
  - In Winston-Salem, there are 2 adult day centers
  - Lack of options in rural communities
  - Cost can be prohibitive
    - Average in NC \$1100/month\*