

BACKGROUND

Programs for All-Inclusive Care for the Elderly (PACE) provide comprehensive care for community-dwelling older adults who have:

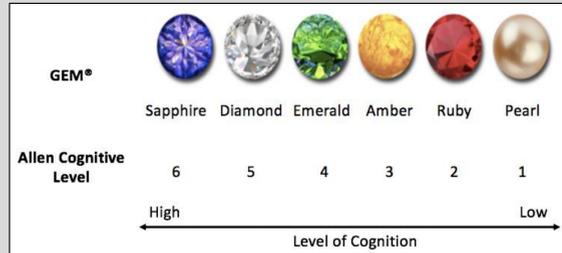
- Medicaid and Medicare dual-eligibility (i.e., low-income)
- Physical, psychosocial, and/or cognitive disability (i.e., nursing home eligible)
 - 46% of the national PACE population has a dementia diagnosis.¹

PACE Models include site day programs that provide:

- Medical and personal care
- Activity programming

Incorporation of a cognitive model that matches participant cognition with day program activities can increase participant engagement and well-being.

The **Cognitive Disabilities Model (CDM)** applied through the consumer-friendly **GEMS®** approach may be an effective approach for increasing participant engagement.^{2, 3}



OBJECTIVES

- 1) Examine the feasibility of implementing a cognition-focused program based on the CDM and GEMS® in a local PACE day program.
- 2) Explore the preliminary effect of a cognition-focused program on participant engagement.

METHODS

Participants

- Enrollee at Community LIFE McKeesport
- Attend Community LIFE McKeesport day program ≥1x per week

Outcome Measures

Participant	Staff
Cognitive Level – Allen Cognitive Level Screen 5 (ACLS-5), GEMS® Observation Checklist	Training – number of staff trained, length of training sessions, satisfaction
Engagement – Menorah Park Engagement Scale (MPES)	Self-report – comprehension of GEM® levels, applying GEM® levels to practice

Process



RESULTS

Educational Materials

- Nine distinct educational materials developed (examples below)

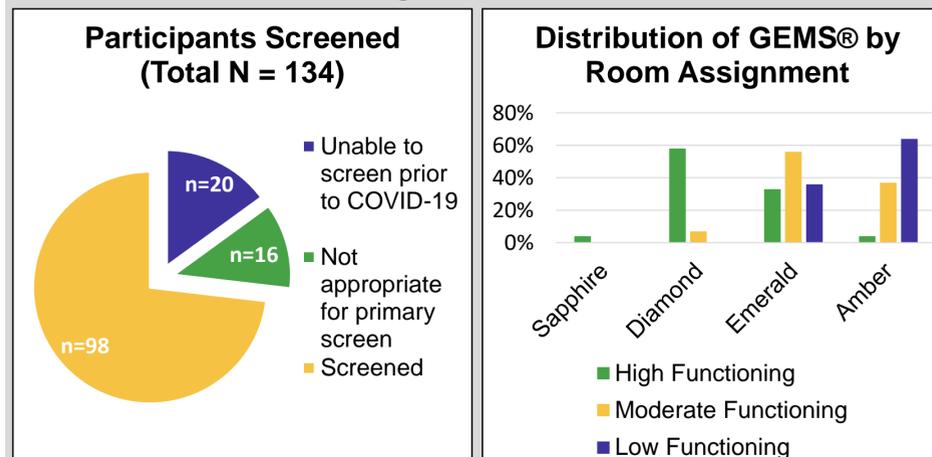
Behavior Binder and Resource Guide			
How you can change the activity and environment:			
Amber	Emerald	Diamond	Sapphire
What you can do for the participant:			
Amber	Emerald	Diamond	Sapphire

Activity Binder	
Category:	GEM Level: Number of participants:
Things you will need:	Skills required of participant:
Key steps:	Ideas for each GEM Level:
1.	Sapphire
2.	Diamond
3.	Emerald
	Amber

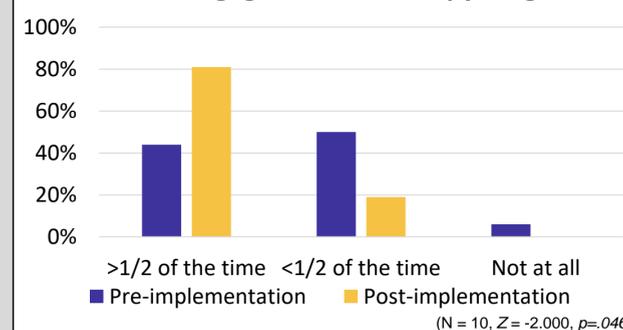
Training

- n= 61 (~76%) staff
- Post-training survey indicated that 100% of staff trained understood GEMS® terminology and materials presented.

Program Outcomes



Active Engagement in Therapy Bingo



Staff-Report/Observation:

- Spontaneous use of GEMS information during interdisciplinary team meetings by Center Manager, Aide Supervisor, OT, PT, Music Therapist, and RN Case Manager
- Spontaneous staff categorization of participant GEM levels >15x

DISCUSSION

- Use of cognition-focused program led to a better understanding of participants' abilities, more tailored activities and more effective interventions.
 - Understanding of cognition can guide more appropriate room assignment.
- A multimodal approach is ideal for screening participants and training staff.

Screening

A CDM-based screening tool combined with clinical observations should be used to identify cognitive levels.

Training

- Various training methods allow for:
- Program sustainability
 - Transferability
 - Transdisciplinary application
 - Site-wide dissemination

Facilitators:

- Accessibility of expert clinicians
- Top-down support from site staff
- Ample resources (i.e., time, space, supplies)

Barriers:

- Daily schedules and medical appointments for participants
- Staff job responsibilities and expectations
- Shortened program implementation due to COVID-19 pandemic

CONCLUSIONS

- The systematic characterization of participants' cognitive abilities is essential in establishing effective activities and interventions that appropriately challenge cognitive abilities.
- Occupational therapy practitioners are experts in using a cognition-focused model of practice and modifying it for interdisciplinary implementation.
- Further examination should trial different screening tools and further assess participant and staff outcomes.

ACKNOWLEDGEMENTS AND DISCLOSURES

The work done to complete this project was completed as part of the authors' Doctoral Capstone Experience (DCE), thus the authors do not have any funding disclosures. The University of Pittsburgh's Department of Occupational Therapy provided all necessary screening materials. Beth Polonchak and Community LIFE administration provided access to Community LIFE McKeesport as a partner in this project. Allyson Luketiich, Community LIFE McKeesport staff, and participants engaged in project development and implementation. Some materials were developed using language based around Skills2Care® and Teepa Snow's GEMS terminology.

REFERENCES

1. National PACE Association. (2019). *PACE by the numbers*. Retrieved from https://www.npaonline.org/sites/default/files/PDFs/pace_infographic_update_final_0719.pdf
2. Smallfield, S., & Molitor, W. L. (2018). Occupational Therapy Interventions Supporting Social Participation and Leisure Engagement for Community-Dwelling Older Adults: A Systematic Review. *American Journal of Occupational Therapy*, 72(4). doi:10.5014/ajot.2018.030627
3. Marx, K. A., Scott, J. B., Piersol, C. V., & Gitlin, L. N. (2019). Tailored activities to reduce neuropsychiatric behaviors with dementia: Case report. *American Journal of Occupational Therapy*, 73(2). doi:10.5014/ajot.2019.029546