



# Geriatric Evaluation and Management--Emergency Department (GEM-ED)

*Interview with Dr. Jed Shimizu, Care of the Elderly Physician, Rice Geriatric Unit, Misericordia Hospital*

Reflection: *“Seniors and their families value the geriatric focus that GEM-ED provides in the Emergency Department and physicians feel more supported in managing care of the frail elderly.”*

Geriatric Evaluation and Management in the Emergency Department (GEM-ED) was a pilot project at the Misericordia Hospital led by Dr. Jed Shimizu and his team to introduce a new model of geriatric care in Emergency Departments. GEM-ED brought Emergency Department (ED) care staff and community care resource partners together to offer a new service to frail seniors with multiple health issues and their families. At the core of the service is an assessment tool, used in the ED, that thoroughly evaluates the health status of seniors and helps determine appropriate community supports for continuity of care.

## What changed?

As Shimizu notes, “The Emergency Department is an unfriendly place for frail seniors with multiple health issues. It’s a critical care environment that is not equipped to deal with them. Yet, the ED is where many frail seniors and their families wind up as a last resort, often because they are unaware of or can’t find their way to community care and services. That situation—seniors waiting for care in the ED—was an opportunity for us to test an innovation for better seniors’ care.”

The project resulted in five outcomes:

- More than 75% of participating patients were referred to services and supports in the community at time of discharge from the ED
- 82% of patients who received referrals followed up with the community support recommended.
- There was a significant reduction in return visits to the Emergency Department three and six month after admission dates, compared to baseline rate.
- The assessments from GEM-ED now are part of patient records.
- GEM-ED is now integrated into the geriatric care provided in the Emergency Department.



## How did seniors' voice or experience inform your project?

Of the 97 seniors recommended for community follow-up, 69% responded to a telephone survey. Of that number, more than 90% said that GEM-ED is a valuable service in the Emergency Department. "The frail seniors and their families who participated in GEM-Ed were so appreciative of the thorough assessment we provided. Families of frail seniors know what the Emergency Department is like, and the survey results about GEM-ED were overwhelmingly positive," says Shimizu.

## How did your thinking and/or that of your colleagues change?

Shimizu and his colleagues know that the GEM-ED fills an important gap in the care of elderly patients in the Emergency Department, but they realized a broader view is needed. "It would have been beneficial for the GEM-ED service to have been able to promote and link with other hospital-wide initiatives meant to improve the care of older adults."

## What do we need to ensure all seniors who need it can benefit from this change?

Seniors' care is an issue and a priority across the board, says Shimizu, especially as we face the aging boomer generation. "Everyone in the ED wants the most appropriate care for seniors," he says. Similar services to GEM-ED have developed at both the Grey Nuns Hospital and Royal Alexandra Hospital, and continued collaborative work across the Edmonton area through the Departments of Geriatrics and Emergency will be important. Making GEM-ED more widespread means regional hospitals investing in training, ongoing education and specialized staffing. "Developing a truly seniors-friendly Emergency Department requires improvements in areas beyond geriatric speciality care, such as policies and procedures, staffing, environmental changes and education," he says.