

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/covid-19-frontlines/reforming-geriatric-care-in-nursing-homes-amid-covid-19/11859/>

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Reforming Geriatric Care in Nursing Homes Amid COVID-19

Announcer:

Coming to you from the ReachMD studios, this is *COVID-19: On the Frontlines*. On this program, we'll hear from Dr. Michael Wasserman, Medical Director at the Eisenberg Village Skilled Nursing Facility and President of California's Long Term Care Medicine. Dr. Wasserman joins us to talk about how the COVID-19 pandemic may help lead to reform in nursing homes. Let's hear from him now.

Dr. Wasserman:

I go back to late February or early March when my colleagues and I, we knew exactly what was coming. Having spent our careers in the field of geriatrics dealing with vulnerable older adults and their health, we understand immediately what the impact of this virus might be, and that has been borne out multifold. So I really think one of the key elements that I would continue to impress on folks at all levels, particularly policymakers and physicians as well, and in particular non-geriatrics physicians and for physicians who haven't spent their lives focused on geriatric medicine and long-term care medicine, the complexity of vulnerable older adults in nursing homes is very unique. I've often said, "If I've seen one nursing home resident, I've seen one nursing home resident," and the same could actually be said for the nursing homes themselves. They all function with their own culture, their own milieu, their own demographics, and so I think it's really critical that clinicians be actively involved. And that's not just physicians. It's nurse practitioners. It's physician assistants. It's geriatric pharmacists. It's geriatric social workers.

I think if there's one positive from COVID that will come out of this pandemic, it's the need to make sure that those in the healthcare field with expertise in geriatrics are included. I hate to say it, but over my career that's often not been the case. I can't tell you how many times for the last 30 years my colleagues will say, "Oh, I know geriatrics because I have patients who are over 80," and that's not what geriatric medicine is. Geriatric medicine is its own discipline with its own level of expertise. Actually, most of us have developed our expertise in geriatric medicine and long-term care medicine from experience because there are very few randomized controlled trials in 90-year-old nursing home residents or 85-year-old, complex, chronically ill, ambulatory patients.

The field of geriatrics is very much into using what is called a Delphi process where we develop consensus based on expert opinion, and to that, CALTCM has actually organized now 4 separate expert Delphi groups to develop responses to the COVID-19 pandemic. Our first group was put together in April and focused on testing, and we actually published a paper at the end of May on the dramatic need to do widespread testing of all staff in all nursing homes based on the literature that was available at the time and the experiences that were going on in nursing homes around the country that told us that asymptomatic staff were spreading the virus, and if we didn't know that they had the virus, we couldn't do anything about it.

Subsequent to that we've had another Delphi group that's lately been working on how to deal with visitation because that's actually the other aspect of COVID-19 that has now come to the fore, and that is, while we want to do everything we can to protect nursing home residents, assisted living residents, group home residents from this virus, in the process we've isolated them. Before this pandemic there was a body of literature that was growing on the impact of social isolation on vulnerable older adults, and so we've now reached a point where, yes, we might be protecting vulnerable older adults from COVID-19, but we're also killing them with social isolation, and so we really need to develop approaches that will allow for these vulnerable older adults to have socialization, activity, etc.

Announcer:

That was Dr. Michael Wasserman, Medical Director at the Eisenberg Village Skilled Nursing Facility and President of California's Long Term Care Medicine. To access more episodes from *COVID-19: On the Frontlines*, and to add *your* perspectives toward the fight against this global pandemic, visit us at ReachMD.com and become Part of the Knowledge. Thank you for listening.

