Health care in the golden years is getting brighter

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From the clothes they wear to the places they live, the elderly will continue to be exposed to technology-rich innovations and improved methods of geriatric care that intend to make their golden years a little more golden.

The developments also aim to lower the care costs for this population: half of one’s health-care expenditures is spent in the senior years.

Further, under national health care reform provisions, provider reimbursements increasingly will be based on quality and value of treatment and services delivered.

Accommodating the elderly means fighting the onslaught of unavoidable age-related problems, such as a tendency to fall. One-third of those who live at home and half of those in nursing homes will fall at least once a year.

Once a person falls, he or she is likely to fall again, according to Merck & Co.

Sensible shoes

Falls can be fatal or lead to fatal conditions, but researchers at the University at Buffalo are testing technology and developing a strategy that could lead to better balance.

Machiko Tomita, a clinical professor in the UB Department of Rehabilitation Science, leads a team that developed sensors which, when placed in the footbed of socks or shoes, measure the wearer’s foot pressure and pick up on changes.

At the same time, Tomita is researching the most effective exercises to strengthen the hips, knees and feet.

She is hopeful the combination will help patients end predictable falls with strengthening exercises.

“There is tremendous potential that we can predict the fallers,” Tomita said.

“If we can predict who will fall in three months, then we can do some exercise or therapy.”

Laser walkers
Willcare, the home health-care company based in Buffalo, is helping to prevent falls with a walker developed especially for people with Parkinson's disease and other neurological conditions.

The walker offers balance and stability and shines a laser across the path of the user, giving him or her a visual cue where to take the next step. A metronome attachment adds a rhythmic pattern for further stimulation.

"It improves their walking patterns tremendously compared to a regular walker," said Phil Ricafort, rehabilitation manager for Willcare's Western New York division.

A $30 purchase at the corner drugstore, this is not. The laser walker costs $1,000 to purchase and is not covered by insurance.

Ricafort said the company bought two such devices for clients in Erie and Chautauqua counties to try out before making the investment.

Another strategy to improve walking is anodyne therapy, which uses infrared light to improve circulation, which in turn improves muscle function.

Ricafort said Willcare offers this therapy to patients with nerve damage or peripheral neuropathy, usually caused by diabetes.

Electronic beds

In late 2016, the Schofield Residence Nursing Facility in Tonawanda installed electronic beds that use hydraulics to lower the beds at night to just 7 inches from the floor.

They run $1,800 each, but they do away with the old side rails, which were seen as a restraint, and the placement of mats on the floor around traditional beds of regular height, said Randy Gerlach, administrator.

The nursing home also installed a smartphone-based system that keeps track of patients who wander that is more sophisticated than the old technology that placed an alarm at the door.

Bed and chair alarms identify restlessness and can monitor the number of times a resident gets up during the night.

A change in patterns could indicate a medical condition in need of a doctor's attention, Gerlach said.

Smart apartments

Lutheran Social Services continues to model the high-tech living of the future with 14 "smart" apartments on the senior-living campus in Jamestown.

The organization used a portion of a $23 million grant through the Health Care Efficiency and Affordability Law of New York State to build the apartment complex with universal design, motion-sensor monitoring and wireless capability. The goal was to help residents live as independently as possible yet have access to health services.
For example, a resident who was prone to falls was found and given care within an hour of falling.

"If she were still living independently in the community, she may not have gotten service for three hours," said Tom Holt, president and CEO.

Lutheran Social Services also applied the state grant to downsize a 254-bed skilled nursing facility, giving up about 40 percent of its skilled-nursing capacity to gain assisted living, day care and private rooms.

Holt predicts the industry will continue to de-emphasize the traditional nursing home.

"Nursing homes are the most expensive and the least-appealing level of service," he said. "You want to keep people in lower levels of care for as long as you can."

**Service coordination**

Greater attention will continue to be paid across the nation to maximize the cost-effectiveness and sustainability of community-based services for the elderly.

The Health Foundation of Western and Central New York has taken a lead role in the region to help health-service organizations set up community-based integrated care networks.

These have become widespread among physician groups but unheard of in the rest of the health-service industry.

The rationale, said Diane Oyler, foundation program officer, is to build a stronger aging network that works in conjunction with the health care system, rather than parallel to it.

The result is better service delivery to older adults, particularly in rural areas.

**Canine therapy**

A furry snout resting on a lap or the arm of a chair is neither a technology-rich innovation nor improved method of geriatric care.

It just makes sense to a facility that is trying to make the residents feel comfortable.

Cooper the dog does that at the Schofield Residence, where residents call out to the 87-pound goldendoodle when he's on duty.

"No matter what innovation we do, we can't make it 100 percent like home," Gerlach said. "Little things like that make a huge impact."