

00:28:27 Conor Sullivan: If you share our vision, your ED can join us, currently for free. Check out

GEDCOLLABORATIVE.com

Follow us: @theGEDC.

Additionally, please review the GEDC Membership Criteria and Application.

https://gedcollaborative.com/partnership/

00:28:54 Conor Sullivan: The GEDC is generously supported by the John A. Hartford Foundation

and the Gary and Mary West Foundation. Thank you!

The John A. Hartford Foundation

https://www.johnahartford.org/

Follow us: @johnahartford

The 4Ms framework and Joining the Age Friendly Health System group

http://www.ihi.org/Engage/Initiatives/Age-Friendly-Health-Systems/Pages/default.aspx

00:29:29 Heather Mae Wojtarowicz: If you share our vision, your ED can join us, currently for

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00:29:31 Conor Sullivan: West health Resources Page

https://www.westhealth.org/

Follow us: @WestHealth

West's specific work around GEDs here: https://www.westhealth.org/geriatric-

emergency-care/

00:30:02 Ula Hwang: New Haven, CT

00:30:05 Conor Sullivan: Today's webinar moderated by:

Don Melady, MD, MSc(Ed)

Emergency Physician

Mount Sinai Hospital, Toronto, Canada

GEDC Faculty

Follow me: @geri_EM



00:30:17	Conor Sullivan: Please set your chat to "Everyone" so we can all see your comments and questions. Thanks!					
	Add comments	and questions for our panelists into the CHAT.				
00:30:21	Simon Conroy:	Nice, France - teaching geriatricians about frailty:)				
00:33:20	Arthur Doran: Good Evening					
00:33:22	Sarah Connelly: Calling in from Toronto, Canada - GEM RN at Mt. Sinai Hospital. I get to work with Dr. Melady!					
00:33:44	Jonathan Zamn	Jonathan Zammit: Malta. Good evening				
00:33:46		Today's webinar is being recorded and a link to the recording and the hat and the resources will be on the website later this week.				
00:33:48	Mohamed A Ele London	okl: Consultant in Acute Frailty , St Helier Hospital , South West				
00:33:54	Anna Björg Jón the University I	dóttir: I am from Reykjavik Iceland. I am the chief of geriatric service at lospital.				
00:33:56	Deb Tomasino: Research Associate at Yale in New Haven, CT, US.					
00:33:59	Jessica Fleischer-Black: Jessica Fleischer-Black. Mount Sinai Beth Israel. NYC. GED Medical Director					
00:34:02	Cameron Jones	:Cameron Jones NP@Niagara Health				
00:34:02	Todd James:	UC San Francisco, California, geriatrician				
00:34:10	David Ekermo:	Sweden, Linköping. ER nurse.				
00:34:12	Amie Isaac:	Southlake Regional Health Centre, Newmarket. GEM RN				
00:34:14	Tara Powell:	Dr Powell. Geriatrician. Medicine Hat Alberta				
00:34:31		Calling in from Dublin, Ireland. Working in Emergency Department S Nurse Practitioner				
00:34:31	Christophe A Fo	hlmann:Geneva Switzerland, EM senior physician, with research interest				
00:34:32	Ellen Danto-No	cton: Geriatrician in Milwaukee, WI				
00:34:37	Savannah Forre	ster: Victoria, BC, emergency physician and previous GEM fellow				
00:34:38	Ceri Battle:	Wales, UK. Physiotherapist				
00:34:41	Ting Pun:	Palo Alto, CA. Patient partner, Stanford Healthcare				

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00:34:41	Simon Conroy: Nice, France - teaching geriatricians about frailty:)			
00:34:43	Cheryl Brunk: Northern California, Health Systems Director, Alzheimer's Association			
00:34:43	Thomas Dreher-Hummel: Thomas Dreher-Hummel, ANP, Basel Switzerland			
00:34:44	Brittany Ellis: Brittany Ellis. Emerg Doc and GeriEM provincial lead. Saskatoon, SK, Canada			
00:34:49	Teresita Hogan: Tess Hogan Chicago, IL			
00:34:53	Susan Bower: Susan Bower, RN- Mayo Clinic Rochester, MN			
00:34:54	Heidi Martin: Heidi Martin, Director of UAB Highlands Emergency Department, Level Geriatric ER, Birmingham, Alabama			
00:35:02	Christian Nickel: Christian Nickel, emergency physician in Basel, Switzerland			
00:35:05	Alice Cusworth: South Yorkshire, UK - Occupational therapist			
00:35:07	Santiago Castejón Hernández: I am Santiago Castejón, a Geriatrician working at Hospital de Terrassa (Barcelona, Spain). Interested in Frailty and Geriatric Emergency Medicine.			
00:35:14	Deirdre Breslin: Dublin, Ireland. Geriatric EM fellow. Excited to be here!			
00:35:18	Jane Carmody: Jane Carmody, The John A. Hartford Foundation. New York City. Love a GEDC webinar. thank you			
00:35:22	Lauren Abbate: Lauren Abbate, VA Eastern Colorado Health Care System			
00:35:23	Virginia Painter: Marrero, Louisiana RN ER Navigator			
00:35:23	Katren Tyler: Katren Tyler, EM physician Sacramento California			
00:35:26	Lauren Spinelli: Lauren Spinelli, Occupational Therapist in Toronto			
00:35:28	martine sanon: Martine Sanon, Geriatrician, Acute care Mount Sinai Hospital NYC			
00:35:33	Joan Michelle Moccia: Michelle Moccia DNP, Livonia, Michigan			
00:35:33	Julie van Baardwijk: Geriatric fellow in Milwaukee, WI at Advocate Aurora (but originally from Toronto)			
00:35:45	Christina Ostwald: Christina Ostwald Williamsville, New York			
00:35:51	Jolie Crowder: Jolie Crowder, National Elder Program Coordinator, Indian Health Service			
00:35:53	Stephen Meldon: Steve Meldon Emergency Medicine, Cleveland OH			
00:35:56	Hidetake Yamanaka: Hidé Yamanaka, NP NLOT. Ottawa, Canada			



00:36:00	özge can: Özge Can, Emergency physician in Izmir, Turkey
00:36:00	Kevin Corcoran: Kevin Corcoran GED Director Syracuse VA Medical Center Syracuse NY
00:36:14	Sean Heavey: Sean Heavey - Geri EM fellow, Sacramento CA
00:36:28	Isabel Sebjørnsen: Isabel Sebjørnsen, physician and researcher, Bergen, Norway
00:36:32	Michelle Kennedy: Michelle, Nursing Professional Development in Emergency Department Fort Wayne Indiana
00:36:35	Nancy Stynchula: UPMC - Pittsburgh PA - USA - RN Emergency Department- Education
00:36:36	Luca Ünlü: Luca Uenlue, Medical Student from Germany
00:36:40	Adam Perry: Home Based Acute Care. Naples, FL
00:36:52	Ondine Boulter: Ondine Boulter, San Francisco Bay Area, CA, Health Systems Director, Alzheimer's Association
00:36:56	Kieron Connolly: Kieron Connolly , Senior Physiotherapist, Dublin, Ireland
00:36:59	Kellie Brendle: Kellie Brendle, Geriatric CNS. Sacramento CA
00:37:09	Petal Samuel: Petal Samuel APN, Toronto
00:37:11	Dyan Hagy: ED Social Worker Cleveland, OH Veterans Administration, Level 1 Geriatrics
00:37:16	Jacob Varney: Jacob Varney, Hospice / Palliative care physician & Internal Medicine hospitalist, Springfield, IL
00:37:22	Samia Munir Ehrlington: Samia Munir Ehrlington, ED physician, Linköping, Sweden
00:37:45	Cecilia Anthonysamy: Cecilia , Emergency Physician , Malaysia
00:37:47	Anja Hermann: Anja Hermann, Deputy Director of Nursing and Health Allied Professionals, University Hospital, Basel, Switzerland
00:37:48	Sasha Binford: Sasha Binford, Geriatrics CNS at UCSF Health
00:37:56	Jill Strachan: Joining today from Barrie Ontario, Canada. Registered Nurse working in Specialized Geriatric Services . Currently working on capacity building/mentoring GEM RN positions in our region .
00:38:10	Heather Mae Wojtarowicz: Clinical Frailty Scale
	https://www.dal.ca/sites/gmr/our-tools/clinical-frailty-scale.html
00:38:21	Michelle Simpson: Michelle Simpson, PhD, RN, Milwaukee Wisconsin



00:39:29	Heather Mae Wojtarowicz: More on the Clinical Frailty Scale from NHS Specialised Clinical Frailty Network:			
	https://www.scfn.org.uk/clinical-frailty-scale			
00:40:21	Anabelen Vena: Ana Vena .Geriatrician (MD and PhD) of the Geriatric Emergency Departament .Hospital universitario Arnau de Vilanova (LLeida).Spain			
00:40:38	Kara Mc loughlin: Kara Mcloughlin OT, Dublin Ireland			
00:40:42	Heather Wojtarowicz, GEDC: Again, the Clinical Frailty Scale			
	https://www.dal.ca/sites/gmr/our-tools/clinical-frailty-scale.html			
00:41:02	carol lyons: Nurse practitioner in Dublin Ireland , falls and frailty			
00:41:09	paula williams: Paula Williams, Health Systems Director, Alzheimer's Association, Charlotte, NC			
00:41:25	Orla Sheil: Orla Sheil OT, Galway Ireland			
00:42:16	Danielle Carolan: Danielle Carolan ED CNM Co Louth Ireland			
00:42:26	Emily Weaver: Emily Weaver, West Health Institute, San Diego, CA			
00:42:50	Carrie Heer: Carrie Heer, Nurse Practitioner Emergency Department/Nurse Led Outreach Team (NLOT), Brantford, Ontario			
00:43:44	Jennifer Koop: Jen Koop, Advanced Practice Nurse in Geriatrics (Dementia Behavioural Support Team and Geriatric Medicine Consult Team) at The Ottawa Hospital			
00:45:05	Heather Wojtarowicz, GEDC: Top Tips to help you use the Clinical Frailty Scale:			
	https://www.scfn.org.uk/clinical-frailty-scale			
00:45:09	Ula Hwang: Rockwood key points:			
	1. Frailty is when people accumulate deficits that manifest from aging			
	2. Frailty is constituently linked to aging: whenever age is important, frailty will be too.			
	3. Ages 75 and 90 are critical ages when we will see presentations associated with frailty in the ED (e.g., falls), worsening ability to function with independence			
	4. To develop sensible care plan, it is important to know not just whether a person is frail, but to know how frail they are.			
00:52:39	Joan Michelle Moccia: Those are important points Ula. Thank you. Also once we recognize frailty that it is important to have a discussion with the patient and their caregiver on advance care planning.			



00:54:37	Ting Pun: cancer treatme	What about temporary situation of elderly patient say going through nt?			
00:58:00	Ula Hwang: transient frailty				
00:58:04	Conor Sullivan: Aaron Malsch, RN, MS, GCNS-BC				
	Senior Service Program Manager				
	Advocate Aurora Health				
	Wisconsin				
00:58:23	Ula Hwang:	Conroy key points:			
	1. Acute frailty	network leveraged 120 sites for QI improvement implementation.			
	2. For Conroy, he finds frailty best concept to help categorize risk (mortality) and incorporate this into clinical decision making rather than just (ED) protocols				
	3. Understand frailty of the patient to help design a treatment plan. Use frailty marker to guide discussion with patient what matters most and goals of care with ED visit, considerations of diagnostic testing, discussion with care partner.				
00:58:52	Don Melady:	Paula, please put your question into the Chat.			
01:01:20		Moccia: I have also read a percent change in weight in one year is also frailty. Weight 1 year ago - current weight/weight 1 year ago. Percent			
01:04:48	Heather Wojtar discharge refer	rowicz, GEDC: Association of Geriatric Emergency Department postral order and follow-up with healthcare utilization (Malsch)			
	https://pubmed.ncbi.nlm.nih.gov/36455283/				
01:05:16		Moccia: I agree with Aaron. The ISAR is more than a screening tool. The s a conversation with the older adults to find out about them besides plaint.			
01:07:00	Ula Hwang:	Aaron key points:			
	(e.g., parts of IS	nave frailty scoring, engage with the topic by using PROXY information AR question and "do you need help on a regular basis?"" do you need usual?") to inform future frailty specific implementation			
	2. Weave concerneglect, etc.	epts of frailty into your GED protocols: Falls, mobility, PT, dispo planning,			



	3. Pull in interprofessional stakeholders to address frailty. Interventions and approaches by MD, RN, CM, PT, ST are often different but require cohesive comprehensive coordination.
01:07:56	Ula Hwang: Rockwood cautions: Proxy assessments for frailty may not capture degree of frailty
01:09:59	Heather Wojtarowicz, GEDC: Frailty affects the initial treatment response and time to recovery of mobility in acutely ill older adults admitted to hospital
	(Rockwood)
	https://pubmed.ncbi.nlm.nih.gov/28104595/
01:10:56	Heather Wojtarowicz, GEDC: How older people move in bed when they are ill
	Kenneth Rockwood MD
	https://www.bgs.org.uk/blog/how-older-people-move-in-bed-when-they-are-ill
01:12:08	Heather Wojtarowicz, GEDC: Impact of frailty on persistent critical illness: a population-based cohort study (Rockwood)
	https://pubmed.ncbi.nlm.nih.gov/35119497/
01:12:24	liz Moloney: Liz Moloney, Geriatrician, Cork, Ireland
01:12:57	Anna Björg Jónsdóttir: Thank you for this very interesting webinar. To Dr. Rockwood: can anyone use the CFS? Or do people need special training?
01:12:59	Ula Hwang: Think about Frailty as a measure of what the patient baseline is (well before the patient's ED illness presentation) not when then are in the ED). Use the baseline frailty of what the patient normally is before they became acutely ill to guide ED clinical care decision making.
01:13:12	Mohamed A Elokl: Is there any work comparing CFS with WHO performance status in People with frailty?
01:14:14	Heather Wojtarowicz, GEDC: The Frailty Index
	https://www.dal.ca/sites/gmr/our-tools/the-frailty-index.html
01:15:07	Isabel Sebjørnsen: Do you know of any tools that has been developed to screen for frailty in telephone triage?
01:18:02	Heather Wojtarowicz, GEDC: Using the Clinical Frailty Scale in Allocating Scarce Health Care Resources (Rockwood)
	https://pubmed.ncbi.nlm.nih.gov/32904824/



David Ekermo: CFS is a great tool to set realistic goals (according to the meassurement 2 weeks ago). But I meet a lot of frustration among nursing collegues who would like to measure the nursing care burden today. Do they need another scale, or can you apply CFS to that in any way?

01:20:38 Conor Sullivan: Simon's main points:

- 1. Frailty is fundamental to understanding where someone is on their life trajectory: you need to understand it to design a treatment plan.
- 2. Frailty scoring can be quick simple and easy to implement even at large scale. It provides a common currency in the care of older people.
- 3. The CFS is to geriatric emergency care what the ECG is to the cardiology.

01:20:48 Heather Wojtarowicz, GEDC: Silver Book II

Quality care for older people with urgent care needs

https://www.bgs.org.uk/resources/resource-series/silver-book-ii

01:21:08 Conor Sullivan: **Ken's main points:**

- 1. Frailty is constituently linked to aging: whenever age is important, frailty will be too.
- 2. To develop sensible care plan, it is important to know not just whether a person is frail, but to know how frail they are.
- 3. We must avoid all-or-none, dichotomous decisions in the ED, e.g., "do you want us to do everything for your father? Or nothing?" Instead, we need to set up for trials of treatment and dynamic decision-making that include a consideration of frailty.

01:21:40 Kalpana Shankar: Do you think CFS should change a patient's ESI score in initial triage?

01:22:23 Emily Weaver: *

01:22:31 Heather Wojtarowicz, GEDC: The role of illness acuity on the association between frailty and mortality in emergency department patients referred to internal medicine (Rockwood)

https://pubmed.ncbi.nlm.nih.gov/32392289/

01:22:56 Ting Pun: Thank you

01:22:57 Ondine Boulter: Great panel! Thank you all.

01:23:00 Heather Wojtarowicz, GEDC: GEDC: Frailty in the Older ED Patient



A Geri-EM.com E-learning Module

https://gedcollaborative.com/course/frailty/

01:23:07 Emily Weaver: There is a lot of valuable information in the chat. Can it be made

available after the webinar?

01:23:27 Conor Sullivan: A Special thanks to our Rockstars..and GEDC EXPERT PANEL

Kenneth Rockwood, MD, MPA, FRCPC, FRCP

Professor of Medicine (Geriatric Medicine & Neurology)

Dalhousie University, Halifax, Canada

Simon Conroy, MB ChB, FRCP, PhD

Professor of Geriatric Medicine

University College London

Lead, Acute Frailty Network, England

Aaron Malsch, RN, MS, GCNS-BC

Senior Service Program Manager

Advocate Aurora Health

Wisconsin

And of course a huge thank you to our Magnificent Maestro and moderator

Don Melady

01:23:28	Ula Hwang:	The chat will be posted along with link to video webinar!
01:23:41	Emily Weaver:	Perfect, thank you!
01:23:59	Brian Holroyd:	Thanks for an excellent session!
01:24:02	Jane Carmody:	Excellent webinar reaching the world! thank you, panel and GEDC team.

01:24:26 Joan Michelle Moccia: Thank you.



01:24:50	John Schumach	ner:	Great information. Well done.	
01:24:53	özge can:	Thank	you.	
01:25:01	Nicola Lee:	Thank	you	
01:25:04	Christophe A Fehlmann:Merci beaucoup!			
01:25:04	Conor Sullivan: What a great conversation! Thank you!			
01:25:06	Paul Martin: Thank you			
01:25:11	Marcus Dearns: thank you			
01:25:17	Kevin Corcoran: Thank you!			
01:25:18	Isabel Sebjørnsen: Thank you			
01:25:18	Jessica Fleischer-Black: Thank you all.			
01:25:21	Luis Nogueira: Muito obrigado			
01:25:26	David Ekermo: Tusen tack! Vad fina ni är!			
01:25:29	Danielle Carola	n:	Thank you Very informative	
01:25:30	Giovanni Ricevo Looking forwar		Thank you for the excellent and very interesting webinar! re.	
	Ognjen Kovic, 4	Ith year	medical student, Pavia, Italy (from Edmonton, Canada)	
01:30:34	Don Melady:	Hi Don	,	
	Thank you so much for this great webinar, it was really cool to listen to these amazing presenters!			
	Have a nice we	ek		
	CF			
01:34:15	Kevin Biese:	Huge tl	hanks to all of you!!!	
01:35:04	Conor Sullivan:	Tess!		
01:35:13	Teresita Hogan	: Wonde	erful thanks all	
01:41:20	Conor Sullivan:	Its awe	esome!!	