CONFERENCE ABSTRACT

Development of the GeriatrICS, an ICF-based and person-centred assessment tool for evaluation of health-related problems in community-living older adults

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Introduction: Ideally, older adults should receive person-centred care and support that meets their individual needs and wishes, taking all relevant health-related problems into account. The International Classification of Functioning, Disability and Health ICF might offer a basis for identification of these problems as it provides a unified language for evaluation of functioning and disability associated with someone’s health status. ICF Core Sets have been developed to describe the spectrum of disabilities of specific patient populations. Therefore, aim of this study was to develop a valid Geriatric ICF Core Set GeriatrICS reflecting all relevant health-related problems of community-living older adults without dementia.

Methods: This study consisted of two sub-studies: 1 a written Delphi study to select ICF categories, and 2 assessing content validity in a cross-sectional study. For the Delphi study, a representative panel of experts older adults and non-medical experts on health-related problems due to ageing was constituted. Panel members had to select second-level categories from the ICF-classification relevant to community-living, non-demented older adults 75+, and had to reach consensus on this selection. For the validation study, older adults frail or with complex care needs were visited by a case manager district nurse or social worker who used the initial GeriatrICS as an assessment tool. Older adults had to rate all categories on a scale ranging from 0 no problem to 10 complete problem. Content validity of a category was guaranteed if ≥10% indicated a problem with that category.

Results: 41 Delphi panel members obtained consensus in two rounds on 30 ICF-categories. Next, 267 older adults participated in the validation study. All categories met the criterion for content validity except for d530 Toileting. The final GeriatrICS consists of 29 categories: fourteen Body Functions categories, nine Activities and Participation categories and six Environmental Factors categories.
Discussions and conclusions: This study resulted in a valid ICF Core Set GeriatrICS including 29 ICF categories representing the most relevant health-related problems among community-living older adults without the diagnosis of dementia. The GeriatrICS included categories from all ICF components, showing that older people’s health is a multidimensional construct. Compared to commonly used, profession-based tools, the GeriatrICS is unique as it is a population-based, cross-domain tool. Therefore, the GeriatrICS is a good starting point for the delivery of person-centred and integrated care.

Lessons learned: The GeriatrICS may be used in person-centred and integrated care practice as an assessment tool, in order to tailor care and support to the needs of older adults. Analysis and interpretation of an older adult’s outcomes, and translation into an appropriate care plan, requires highly competent and experienced professionals.

Limitations: Older adults with dementia or cognitive impairments may have been included in the validation study since dementia was not an exclusion criterion. Impact on the results is expected to be trivial as case managers were experienced interviewers and a partner or family member participated in the assessment in case of cognitive problems.

Suggestions for future research: Future research should investigate the health-related problems of older adults with dementia and robust older adults.

Keywords: assessment tool; health-related problems; icf; older adults; validation