

#### **GEMS Minutes**

Monday, February 15, 2021

Attendees: Lauren Southerland, MD, FACEP; Maura Kennedy, MD; Rachel Skains, MD; Luna Ragsdale, MD, FACEP.

### 1. SAEM abstract acceptance - Maura Kennedy

- 2. Guest Speaker Paul B. Rosenberg, M.D. Professor of Psychiatry and Behavioral Sciences
  - World renowned leader in the field of Alzheimer's and dementia care.
  - International Psychogeritaric Association Agitation Definition Work Group (ADWG) working to finalize a draft consensus definitions of agitation.
  - Provisional criteria for agitation in Alzheimer's
  - Agitation and Alzheimer's presents in different environments (nursing homes, home care, ED)
  - Maura: what does agitation represent? Could it be communication? ED does not have tools to identify what is going on. How do the providers, the environment trigger agitation?
  - Agitation may look different in the ED environment
  - Agitation becomes something to treat first and figure out later? "signing forms first" and instead of figuring out patient
  - Definition: Excess motor, verbal, physical aggression/activity
  - 1<sup>st</sup> paper: revising criteria
  - 2<sup>nd</sup> paper is agitation in different environments
  - Wants to work on sharing information

### 3. Geriatric CME course offerings

## (a) ACEP20 Pre-conference re-recording status:

- Nicole/Maura to update group
- ACEP Preconference Recordings ongoing
- Make Keynote a stand alone speech

# (b) Topic-Oriented Calls with CME:

- First webinar: "What is a geriatric friendly order set?" April 19<sup>th</sup>, 2021 noon EST/11 am CST
  - Cerner Rachel Skains, Epic Katren Tyler/UCSD (Level 1 Brie Purcell might be able to share their data), Luna Ragsdale, VA system.
  - o Will use April GEMS meeting time for this educational session.
- Other topics of interest (2-3)
  - Geriatric agitation definition, approaches to management, medication management
  - Transition from ED straight to hospice care

- How to get a med review done
- Home hospital/telemedicine

### (c) Geriatric CME spreadsheet

## 4. GeriEM Fellowship Journal Club (Shan and Maura)

- Lauren Cameron Comasco, MD; Beaumont Hospital Royal Oak hosted February 4, frailty as the topic. Link to share?
- Quarterly
- UNC to sponsor next in May 2021
- Mimic Washington University's structure, set up as a PICO question may limit flexibility
- Writing up the one for palliative care
- Set up more time in the end for discussion, fewer articles, structured questions to guide discussion

#### 5. GEMS Newsletter Content

- (March, July, Fall)
  - i. March: Highlight Nicole Fiallos (Meritus Health) Cameron Gettel (Yale School of Medicine) GEDA reviewers and GEMs members, highlight innovation & their own work, GEM CME info, GEDA stats, add announcement for resident/fellow position?
  - ii. July: Katren Tyler, UCSD, Marc Squillante, OSF St. Francis
    - 1. GEDA reviewer and GEMs members, highlight innovation & their own work, other content TBD
  - iii. Late fall: fellowships recruiting, ACEP21, Dr, highlight/feature TBD

## 6. Bylaws Update

- ACEP Board request to add Resident and Fellows approved by ACEP board at end of January
- Can elect during this interim?
- Start election process prior to ACEP22.
- How to message this out? Newsletter addition, message on list serv, self nominate or nominate a colleague/learner – Confirm with Nicole?
- Personal statement and letter of interest (paragraph)

## 7. Councillor proposals to be brought up for coming year

- Geriatric ED boarding for placement?
- Should get full complement of care as in inpatient
- Mobility, etc.
- Different from one place to another
- "crap shoot" as to
- Affects patient care, billing and revenue, ED workflow
- Reach out to another section, Administration, Quality Improvement and Safety, EM Mgmt and Health Policy?, EM Medical Directors to co author a position statement → goes to Council for review → then approve/disapprove
- Do we only co sponsor legislation specific to geriatrics? What is our role as councilors?
- ACEP Director's Survey? Maura to look into this
- The ED is not intended for prolonged care and meant for episodic and acute short of length care. Patients who are awaiting long term care placement should not have prolonged ED stays residence should be avoided and could lead to physical and cognitive decline.

- How can you look at outliers for LOS
- SAEM AAAEM dataset?
- Policy for boarding for geri psychiatry patients and for geri patient for boarding?
  - i. On average, how many consultants have you involved in these patient
  - ii. What is average length of stay
  - iii. What is your longest
  - iv. Do you have a policy for a prolonged length of stay (definition) greater than 48-72 hours
  - v. Is their a policy when the patient will be admitted?
  - vi. What is that policy?

#### Action items:

- 1. Work with Paul Rosenburg
- 2. Councillor Resolution
  - a. Luna to email Robert Strauss
  - b. Maura emailed Kevin B. and others
  - c. Email from Lauren to intro
- 3. Lauren to reach out to Cooper
- 4. Ask Shan and Phil if they are interested
- 5. Gather data on how LOS affects older adults
- 6. Talk to WestHealth if they track LOS
- 7. Pulling together GEM CME
- 8. April topic Geriatric order sets (0.5)