

Introduction

The older adult community represents a vulnerable population that deserves empathetic, respectful, and empowering healthcare. When compared with other populations, the older adult community faces unique health challenges that require unique solutions from providers (Figure 1). It is important that healthcare providers work with and continue learning from the elderly community in order to provide this crucial care.

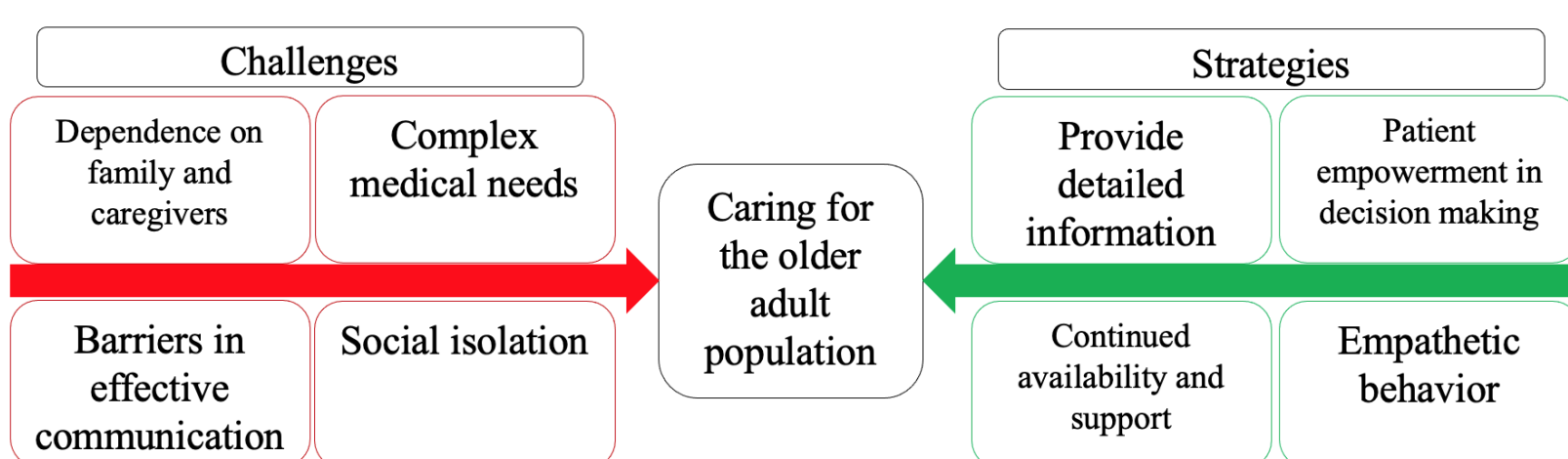


Figure 1. Strategies and challenges to providing care for the older adult population

In the Service-Learning (SL) course at WSUSOM, one program has the potential to augment the foundational curriculum and provide medical students with the opportunity to build rapport with an older adult through the lens of evaluating fall risk in an assisted-living facility. Students in the Class of 2023 were divided into groups and took turns interviewing an older adult, utilizing surveys that assessed various topics such as biographical information, wheelchair usage, falls history, the patient's personal life, family history, and hobbies (Figure 2). This information was collected from the patient in one session by each student. As a result, final falls assessments were based on short encounters that lacked rapport with the older adult and were filled with survey questions.

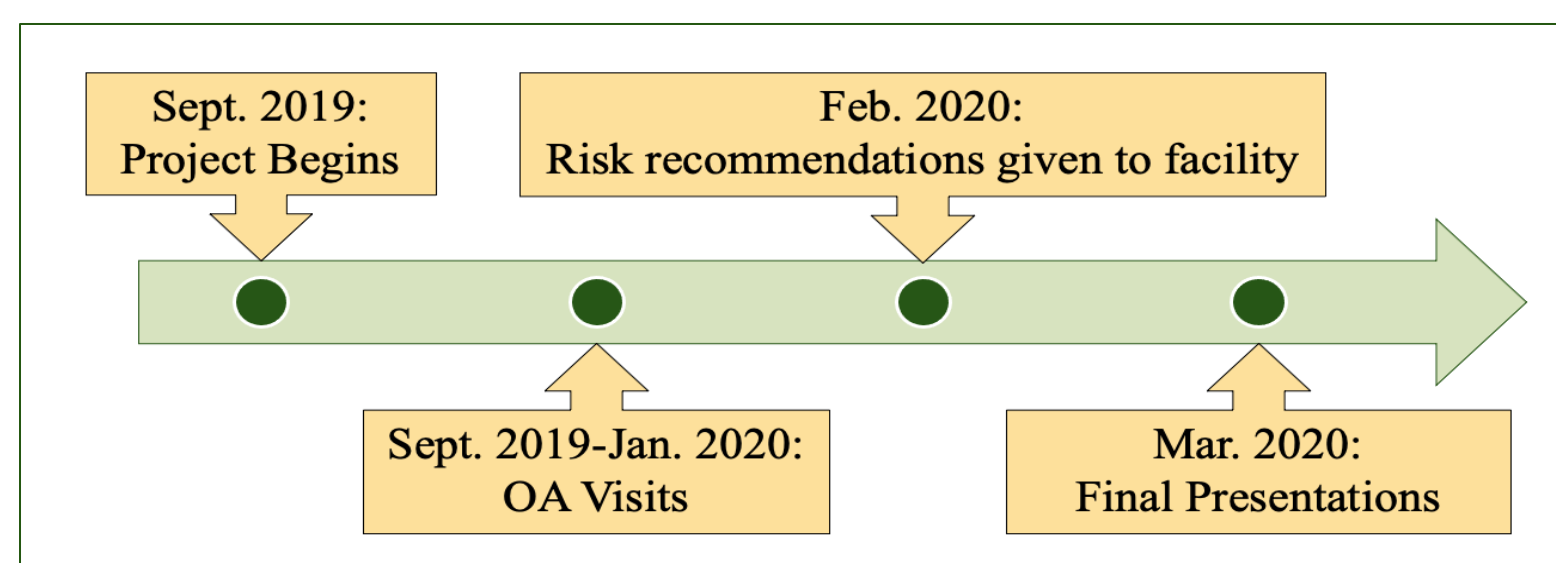


Figure 2: Roadmap of Falls Prevention Project with Older Adult (OA) visits

Our group found that this project would benefit from improvements that focus on building rapport with the older adult in order to provide accurate evaluations of the patient's fall risk. We believe other groups had similar experiences and plan to ultimately provide WSUSOM faculty with a recommendation on how to improve this SL project.

Objective

The goal of this ongoing research project is to assess the effectiveness of the current Falls Prevention component of the Service-Learning course at Wayne State University School of Medicine (WSUSOM) in order to provide a recommendation on how future programs can best introduce medical students to building rapport with and addressing the healthcare needs of the older adult community.

Future Research-Methods

This initiative includes surveying the Class of 2023 at WSUSOM to determine if evolving the Falls Prevention project to specifically allow for an opportunity to build rapport with an older adult would improve student ability to assess fall risk and provide the assisted-living facility with safety recommendations.

Surveys conducted via Qualtrics and utilizing a 6-Point Likert scale will be emailed to students for completion remotely. Surveys will remain anonymous and will not collect participant name or email.

Figure 3. Prospective Survey Questions to Assess Program Goals

1. I felt confident in my ability to provide an accurate assessment of fall risk for my older adult.
2. I feel that building rapport with an older adult is an important part of assessing their fall risk.
3. Through this project, I feel that I had an opportunity to develop a relationship with an older adult before assessing for fall risk.
4. I feel I would better understand the specific needs of the older adult if I knew them better.
5. In the future, decreasing the number of surveys for each student would provide a better opportunity to build rapport with an older adult.
6. In the future, having a session designated for building rapport with the assigned older adult would be beneficial in assessing fall risk.

To view a complete draft of the survey tool, please utilize this QR code!



Future Research-Timeline

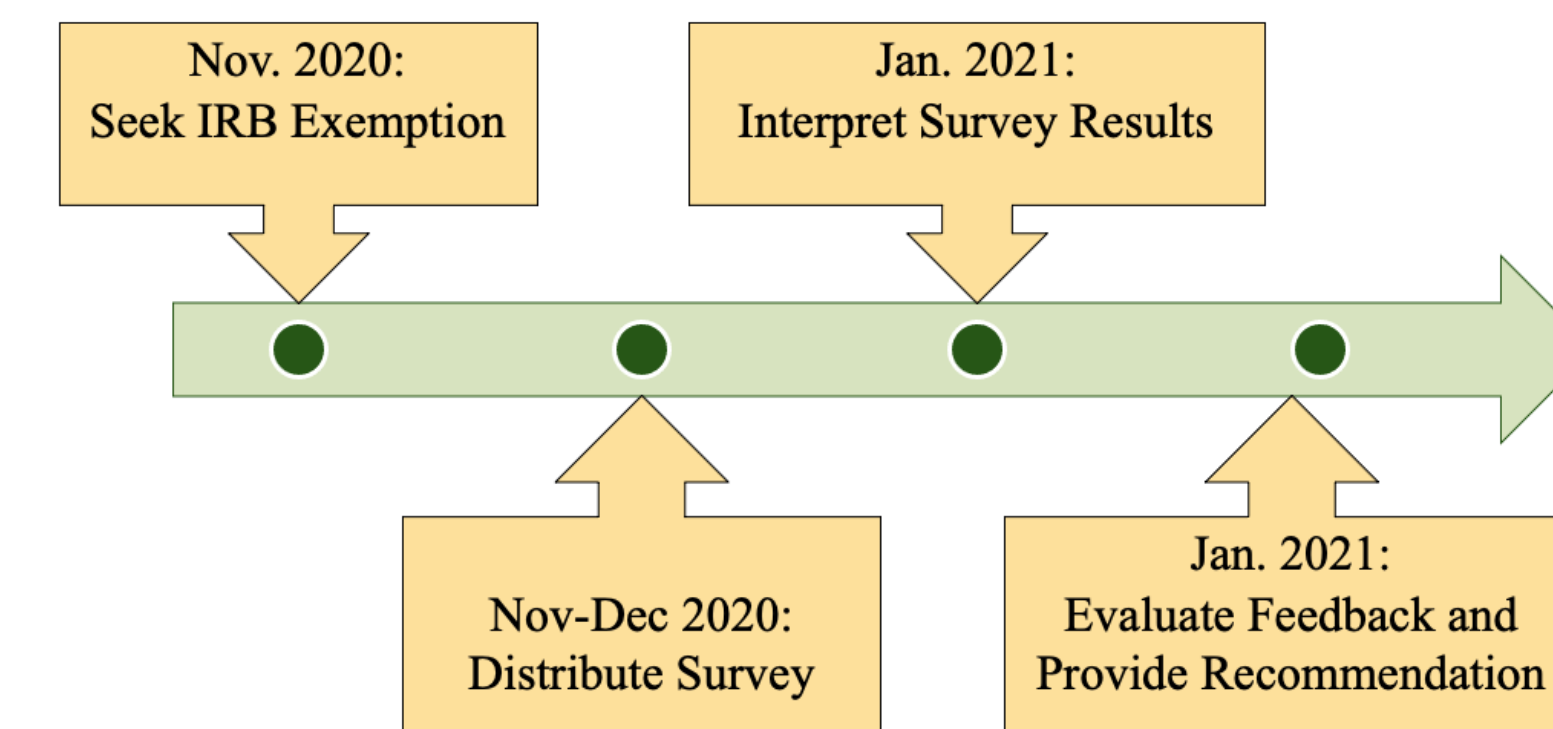


Figure 4: Future Project Plans

Conclusion

The pre-clinical curriculum at WSUSOM includes a SL course designed to augment basic science courses and introduce medical students to working with vulnerable populations such as the elderly through assessing patient fall risk. Our group felt this SL project would benefit from first focusing on the experience of building a rapport with an older adult in order to better inform fall risk. We will be conducting a survey in order to assess the experiences of other medical students and provide a concrete recommendation to course faculty.

References

- van Vliet, L. M., Lindenberger, E., & van Weert, J. C. M. (2015). Communication with older, seriously ill patients. *Clinics in Geriatric Medicine*, 31(2), 219–230. <https://doi.org/10.1016/j.cger.2015.01.007>
- Williams, S. L., Haskard, K. B., & DiMatteo, M. R. (2007). The therapeutic effects of the physician-older patient relationship: effective communication with vulnerable older patients. *Clinical Interventions in Aging*, 2(3), 453–467. <https://www.ncbi.nlm.nih.gov/pubmed/18044195>

Acknowledgements

This project was made possible by Wayne State University School of Medicine and older adult facilities that allowed our entry.

Special thanks to the older adults who lent us their time and shared their experiences.

