EXCERPT FROM

Geriatric Physician

Cooperative Care Training

Instructional Design Project – Portfolio

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Introduction

Client Information

The American Geriatrics Society (AGS) is a not-for-profit organization of more than 6,000 health professionals devoted to improving the health, independence and quality of life of all older people. The Society provides leadership to healthcare professionals, policy makers and the public by implementing and advocating for programs in patient care, research, professional and public education, and public policy. The Society's e-learning special interest group (el-SIG) of geriatric educators from multiple disciplines is dedicated to developing, standardizing, sharing, using or evaluating e-learning resources and other educational technologies in support of geriatrics blended learning instruction and assessment of health care professionals. The el-SIG has hired our team to provide a comprehensive course on dealing with geriatric patients who have health care proxies. To launch the course, the el-SIG chair has asked us to present our course at the Society's annual meeting in May, 2014 in Orlando.

Statement of the Performance Problem

Physicians guide their patients in making informed decisions and behaving in ways that maximize their health related benefits. Typically the physicians direct their interaction toward the patient until the patient becomes unable to participate appropriately. At this point, a healthcare proxy or surrogate must be engaged. The act of requiring a proxy can create friction between the patient, proxy and attending physician as the patient views *their* role in *their* care and decision making responsibilities as diminishing. Ideally, the physician would minimize or eliminate the obstacles to engaging a proxy, which would maximize success of future care outcomes.

Statement of the Instructional Design Problem

Patient populations that include dependent geriatric individuals receiving care from a family member face challenging interpersonal and professional situations. These patients' physicians have observed friction between these individuals and recognized resulting deficiencies in health care decision-making functions. Older patients may suffer from conditions that render them incapable of making medical decisions. However, these patients may still retain a significant amount of awareness and must be treated with respect. Equipping medical providers with the skills and knowledge necessary for effectively handling health proxies while preserving the patients' dignity in these challenging scenarios is key to maximizing positive health outcomes and increasing patient satisfaction among this population.

Implementation

The course will be launched at the American Geriatric Society's annual meeting in May, 2014 in Orlando. At that time, attendees will be notified of the course's launch and will be able to register for the course and receive access to course materials as soon as they are registered. In order to register for a course iteration, the learner will choose which inperson session they wish to attend from three iterations being presented at medical conferences later in 2014. October 10 in Las Vegas, NV; November 7 in Aspen, CO; and December 12 in Miami, FL.



(http://saradeclares.weebly.com/)

Unit 2: Psychological Implications of the Cooperative Care Relationship



OBJECTIVES

2.1 PSYCHOLOGICAL CONCEPTS OVERVIEW
2.2 RESOURCE PORTFOLIO
2.3THEORIES OF AGING
2.4 ROLE THEORY
2.5 PRACTICAL RESEARCH

(Right Click on the picture and choose "open hyperlink" and then download the presentation.)

Summary and Conclusion

Upon completion of the instructional program, physicians who serve patients accompanied by a health care proxy will have developed a better understanding of common obstacles to cooperative care. They will have the skills, knowledge and attitudes to facilitate successful care outcomes and promote a high quality of life for both the patient and proxy. Mechanisms for maintaining relevance are built into the instructional system as a way of assessing the changing needs of learners and preventing instruction from becoming obsolete. The American Geriatrics Society can continue to serve the needs of their member physicians and promote quality of life for the geriatric population AGS was established to serve by continuing to offer the course on a long-term basis.