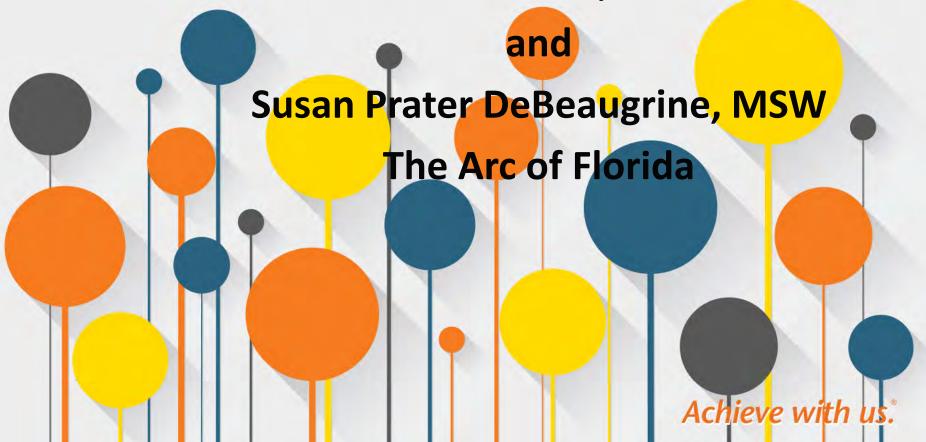


# Developing a Well Trained and Educated Workforce

Ron Lucchino, Ph.D.





of Florida

# Florida's Home and Community Based Waiver – iBudget and CDC+

- Serves 32,000 individuals
- 20,000+ remain on a waitlist
- Requires specific training hours by service type and required training (Zero Tolerance, Core Competencies, HIPAA- now free to anyone)
- Currently around 3,600 providers billing for services
- Many providers are providing multiple services such as behavior assistant and respite



## The Need

- Older Population = Older Parents and Siblings
- Older Caretakers = Longer Hospital and Rehab
- More Medications
- Increased Risk of Falls
- Increased Risk of Choking
- Complex Behavioral and Medical Needs
- Equals = The need for well-educated and trained respite workers



The Arc of Florida = Solutions

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How do we reach all providers, families and self-advocates through training opportunities?

#### **TRAIN**

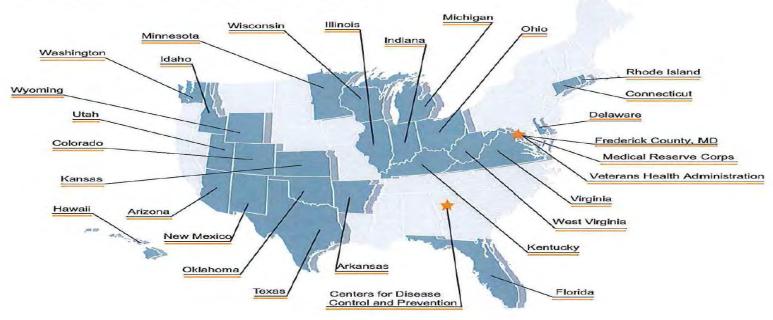
Public Health Foundation www.TRAIN.org

A Learning Management Solution
Transcript of training by employee - Stores Certificates
Worked with local State Agencies to Implement



# THE NATION'S PREMIER TRAINING PORTAL FOR PUBLIC HEALTH

"For Us, By Us" Designed with Extensive Input from Public Health Professionals

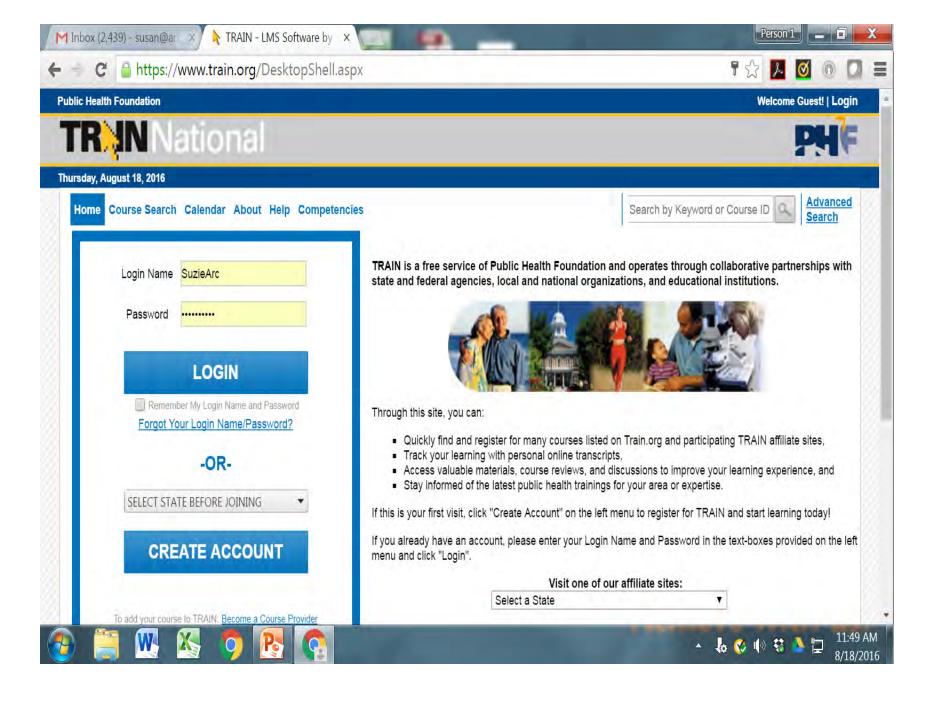


OUR VISION

A learning management solution that helps to advance the preparedness of individuals and systems that protect and improve the public's health.









1

Tuesday, August 23, 2018

#### Home Calendar Competency Assessment Resources Discussions Library Help Administration

Search by Keyword or Course ID



#### Search Options

- ▶ Browse 'CDC'
- ▶ Browse 'Florida'
- ▶ Browse All
- ▶ By Course ID
- ▶ By Subject
- ▶ By Audience
- By Competencies and
- Capabilities
- ▶ By Format
- ▶ By Credit Type
- ▶ By Sponsor/Offerer
- ▶ By Date
- ▶ By Distance
- ▶ By Accreditation
- ▶ By Certificate
- Keyword Search
- ▶ By Training plan
- ▶ By Language
- ▶ By Custom Tag
- ▶ Advanced Search
- ➤ Saved Search Criteria

#### Course Search

Search Parameters

Search Result

Tip: To sort by any column, click the column heading. Or use default order by Keyword Search Proximity.

Tip: To view course description, click on the Course Title

Tip: Alphabetical page indexing is used when sorted by Title, Sponsor/Offerer or Format.

\$ = Fee associated with the course \* = Credit is offered

Title

Show expired courses

20 rows per page \* Filter \* A B C D E F G H I J K L M N O P Q R S T U V W X Y Z All

Select page within selected letter:

ter: 1 2 3 4 5 6 7 8 9 10 ...

Arc of Florida - Community Living Strategies for

Arc of Florida- FDDC presents: "Oral Health Care for

Successful Behavioral Outcomes-Part 2

Displaying page 1 of 104, items from 1 to 20 of 206

Rating

4.8 out of 5 stars

(64)

Sponsor/Offerer

Arc of Florida - The Arc

Sunrise of Central

Florida

-			9.7	The state of the s	0
R	*	Arc of Florida- FHC & FHFC present: "Finding Affordable Rental Housing"	Course	Arc of Florida	4.9 out of 5 stars
	*	Arc of Florida- FHC & FHFC present: "Introduction to Florida's State-Funded Affordable Housing Programs"	Course	Arc of Florida	4.5 out of 5 stars
2	*	Arc of Florida - Community Living Strategies for Successful Behavioral Outcomes- Part 1	Course	Arc of Florida - The Arc Sunrise of Central Florida	4.1 out of 5 stars

Type

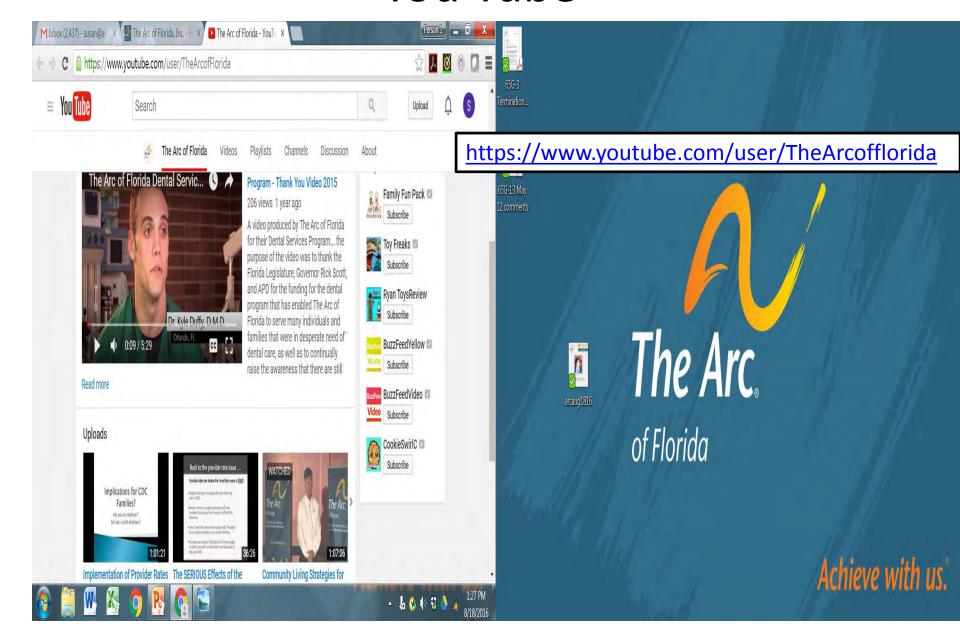
Course



## **More Solutions**

- Website and You Tube
- Facebook use daily calendar to educate and provide access to resources
- Webinars and Face to Face Training
- Housing Funds \$9 million awarded to Arc
   Chapters to build new homes and renovate
  - 5 Bedrooms plus a Respite Bedroom for new homes being built (1 person to bedroom)

## You Tube









Information about the Zika virus, updates, and tips for prevention can be found on the Florida Department of Health's website. The Department of Health also provides guidance for travelers who may have trips planned to areas of local risk. Guidance can be accessed at <a href="http://www.-floridahealth.gov/diseases-and-conditions/zika-vi-rus/index.html?utm\_source=flhealthIndex.">http://www.-floridahealth.gov/diseases-and-conditions/zika-vi-rus/index.html?utm\_source=flhealthIndex.</a>

**Facebook** 







A Direct Service Professional (DSP) is a person who assists an individual with a developmental disability to lead a self-directed life and contribute to the community, assists with activities of daily living if needed, and encourages attitudes and behaviors that enhance community inclusion. A DSP may provide supports to a person with a disability at home, work, school, church and other places in the community.







When Was The Arc Founded?

The Arc was founded in 1950 by a small group of parents and other concerned individuals. At that tie, little was known about the condition of intellectual disability or its causes. There were virtually no programs or activities in communities to assist in the development and care of children and adults with intellectual disabilities or to help support families.

Facebook - Please Like Us





# Florida Housing Finance Corporation Our Partner

- Funded 22 new Arc homes throughout Florida
  - 1 person per bedroom
  - Aging in Place
  - New grants for 5 bedrooms and one respite bed
- 10 renovations
- Reverse Respite The Arc Nature Coast

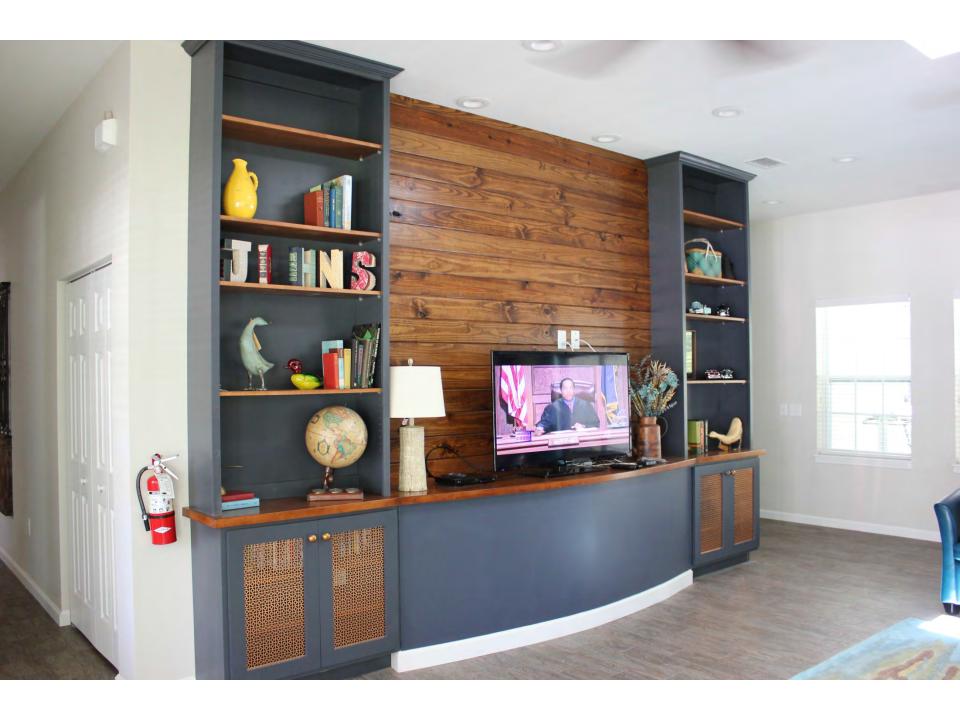




John's Place - The Arc of Putnam County











# **Training**

- Webinars and Face to Face since 12/2015 we have trained over 1,500 staff, family members and self-advocates
- Partnered with the Agency for Persons with Disabilities – Dr. Steve Coleman and Amanda Jackson, BCBA and nursing staff Lori Gephart and Lori Kohler to develop training and educational information on behavioral and choking prevention needs.



- Maximum Potential Kids 17 on-line modules
- Supported Decision Making The Quality Trust Jonathan Martinis - Webinars
- Behavioral Supports for Successful Community Living – Mark Swain, Arc Sunrise
- Working with Individuals with I/DD who have challenging behaviors – 5 Face to Face
- Choking Prevention all group homes/day programs to receive posters and cutting boards
- Registered Behavioral Technician Relias, Inc.
   (Arc US affiliation provides us with a discount)

# Planning Ahead Guide

Personal Information
Summary – great info for
Respite Workers to have
on hand

**Medical Proxy** 

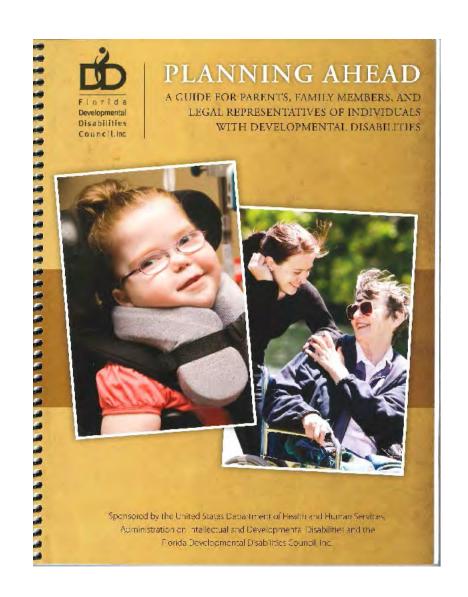
**Health Care Surrogate** 

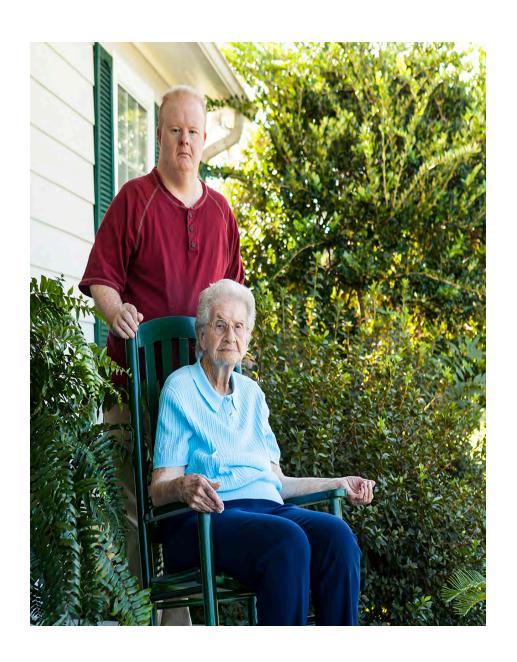
**Living Will** 

**Power of Attorney** 

**Representative Payee** 

Will





Aging Issues Impacting Individuals with Intellectual and Developmental Disabilities

Dr. Ronald Lucchino

Three (3) recorded videos:

- 1. Myths on Aging
- 2. Dementia
- 3. Medications

Available on You Tube and TRAIN

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Reduced Access to Health Care: Disparities in the Older Adult Population of Persons with Intellectual and Developmental Disabilities

**Preparing Caregivers with Information** 





The older adult population of individuals with intellectual and developmental disabilities (I/DD) has 5 to 6 times greater risk of becoming hospitalized and for readmission than the general population.

This is due to the disparities in accessing health care for the older adult with I/DD and their families. This brief presentation explains how, by empowering families, individuals and caregivers, these disparities can be overcome.

Communication and Documentation of this information is key in educating and training respite workers.



# THE THREE DISPARITIES IN ACCESSING HEALTH CARE







The <u>Three Disparities</u> in accessing health care in the I/DD population:

The difference in morbidity between adults with I/DD and the general population is the compounding effect of disparities, each adding to the other.

The three major disparities are:

- 1. Not recognizing early possible healthcare issue.
- 2. Limited diagnosis or assessment of healthcare issue.
- 3. Limited access to appropriate health care services.





## THE FIVE BARRIERS CAUSING DISPARITIES





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The FIVE overarching barriers to health care causing the three disparities that places the I/DD population at risk:

- 1. Communication: Limited verbal and non-verbal skills to express health care concerns or changes being experienced could limit early recognition of a health care problem.
- 2. Caregiver involvement: Lack of inclusion of the primary care provider and/or individual by the health care professionals may result in wrong diagnosis or inappropriate intervention.
- 3. **Training**: Limited vertical training of the professional health care providers, could result in suboptimal care.



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- 4. Diagnostic Over-Shadowing: Process of overattributing a patient's symptoms to a particular condition associated with the person with I/DD disabilities, resulting in aging changes or key comorbid conditions being undiagnosed and untreated.
- 5. Ambulatory Care Sensitive Conditions: ACSC are a clustering of serious health related changes or conditions that may go unrecognized due to disparities, increasing the risk of being admitted to a hospital or residential care facility.



### **Empowerment:**

To understand that the role of the caregiver and staff is to be empowered healthcare advocates for the older individual with I/DD at all levels of vertical health care by using reporting forms to document any observe changes and present these reporting forms to the health care practitioners with follow-up.







#### **Barriers reducing access to health care:**

Limited communication Limited caregiver involvement Limited training Increased risk for ACSC Diagnostic over-shadowing

#### Disparities to increased health risk:

Timely access to health care Appropriate intervention services Access to effective health care

## Principles for reducing disparities through empowerment:

Increasing awareness of barriers Increasing knowledge of aging Increasing assessment skills Increasing understanding of interventions



<u>Strategies</u>: Empower the caregivers and the older adult with I/DD to be included in discussions with the healthcare practitioners on health problems and types of services needed at all levels of health care.

### Strategy 1

Communicating with the healthcare practitioners to recognize behavior changes that may be expressions of pain or discomfort in the older adult with limited communication skills.





Strengthen the advocacy role for the older adult with I/DD and the caregiver by empowering them to present the appropriate reporting forms of health concerns to the professional health care practitioners.

### Strategy 3

Define diagnostic over-shadowing to all levels of healthcare practitioners and illustrate how to avoid the risk of diagnostic over-shadowing in the older individual with an intellectual or developmental disability.

a political process by

or example -



### Strategy 4

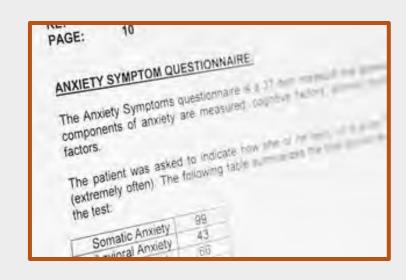
Reducing the risk for hospitalization in the older adult with I/DD by increasing the healthcare professional's awareness of ACSC associated with the I/DD population.





## Documentation and Reporting Forms

- Communication
- Observation of Changes
- Hospital Admissions
- Discharge Planning
- Dementia
- Medications
- Environment





Examples of changes in older adults with I/DD that may not be recognized = Diagnostic Over-Shadowing





### RISK for Hospitalization

- The population of individuals with I/DD is at greater risk for health concerns than the general population due, in part, to:
  - Overlapping of I/DD associated disabilities with age associated and age related changes
  - High co-morbidity of age associated diseases
  - Health care disparity and barriers to health care
  - Over use of medications (ADRs)

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• The increased health risk results in individuals with I/DD being overrepresented by 5 to 6 times the general population in hospital admissions.



Changes in Central Nervous System

Older Adults with Down syndrome

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- Higher prevalence of seizures (epilepsy) between the ages of 20-30 years old, but can occur in older adults
- Late-onset seizures after the age of 50 in 75%
  - 85% of adults with late on-set seizures diagnosed with Alzheimer's disease

Central Nervous System

Spinal cord

Usually tonic-clonic seizures most common (Grand Mal)

but others may occur



### Changes in Senses: Vision

- •Overlapping age related changes with age associated changes in vision in the older adult with Down syndrome (DS)
  - Earlier decline in adults with Down Syndrome (30 vs. 60 in general population and older adults with I/DD)
  - Cataracts: clouding of vision

 Keratoconus : degenerative disorder of the eye causing substantial distortion of vision with multiple images, streaking and sensitivity to light



### Changes in Senses: Hearing

- Overlapping age-related changes with age associated changes in hearing in the older adult with Down syndrome
  - Earlier occurrence in the adult with Down Syndrome (30 vs. 60 in general population and older adults with I/DD)
  - Conductive hearing loss ear tubes decrease in size
  - Excess Cerumen high build-up of wax in ear interferes with balance and hearing



# Changes in Senses: Vision and Hearing Changes Overlapping

 Accumulative overlapping age related changes with the age associated changes in vision and hearing may increase diagnostic over-shadowing





### Changes in Skin

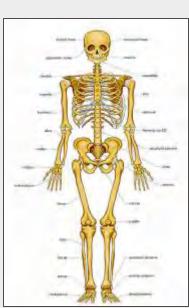
- Age related and age associated changes in the skin that my increases the risk for serious skin problems:
  - Dermatomycosis
    - Fungal infections
    - Psoriasis
    - -Skin rash
    - Eczema
    - Erysipelas (bright-red, butterfly-shaped rash appearing across the bridge of the nose and the cheeks)
  - Decubitus bed sores in older adults with Cerebral Palsy



### Changes in Bone

- Age related and age associated loss of bone in the older adult with Cerebral Palsy increases the risk for:
  - Osteoporosis

- -High risk in older adults with Cerebral Palsy and Down Syndrome
- Increased risk of broken bones from falls
- Increased risk of dental problems (gum diseases/abscess tooth)
- Increased lower back pain
- Kyphosis





## Changes in Joints

- Overlapping age related with age associated changes in joints in the older adult with Cerebral Palsy increases the risk for age associated problems:
  - Limited communication may result in pain not being recognized but expressed as behavior change
  - High risk in older adults with Cerebral Palsy
    - Osteoarthritis
    - Spondylitis (degenerative osteoarthritis of the joints in the spine)
    - Increase in contractures (locked joints)
    - Kyphosis of the spine (risk for severe pain and discomfort, breathing and digestion difficulties)



### Changes in Digestive System

- Gastro-esophageal Reflux Disorder (GERD)or heart burn
  - Older adults with Down syndrome at higher risk
  - May not communicate pain from heart burn
- Ulcers exhibit H. pylori gastric infection at approximately twice the rate of the general population and recurrences rate seven times that of the general population
- Curling

- Reduced esophagus muscle tone results in food lodged in esophagus causing reverse movement into throat and possible choking or aspiration pneumonia
- Increased risk for older adults with Cerebral palsy



Changes in Digestive System (cont'd)

### Intestines

- Increased risk in adults with Down Syndrome (pain unreported)
  - Chronic constipation no bowl movement more than three days
  - Increase in fecal incontinence
  - Weakening of anal muscles possible staining of undergarments
  - Celiac disease (gluten intolerance): excessive diarrhea, nausea, abdominal distension or unexplained lethargy



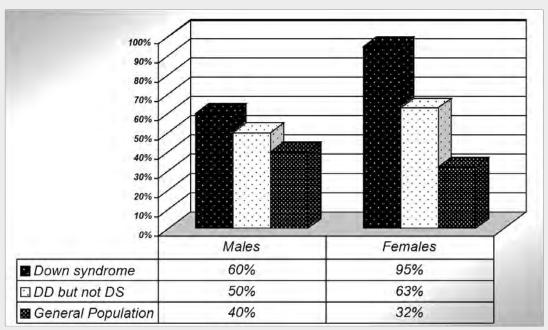
Changes in Nutrition

Age associated effects of poor nutrition

- Anemic decrease iron absorption (mimics acute dementia – anemia (low RBC count)
- Chronic constipation no bowl movement more than three days (high risk for adults with Down Syndrome)
- Increased weight (obesity) high caloric intake
- Increase risk for osteoporosis reduced calcium and Vitamin D (high risk for adults with Cerebral Palsy)
- Dehydration- acute dementia, increase ADR to medications



# Age-Associated Obesity in Adults with Down Syndrome



- Julie Murray and Patricia Ryan-Krause, Disclosures Pediatr Nurs. 2010;36(6):314-319.
- A, McGrother CW, Thorp CF, Collacott R. in adults with Down syndrome: A case-control study. Journal of Intellectual Disability Research 2005;49:125-133



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### Changes in Sleep

- Older adults with Down syndrome are at high risk for obstructive sleep apnea - disorder leads to poor quality, non-restorative sleep
  - Signs: snoring, gasping noises, daytime sleepiness, morning fatigue (difficulty getting out of bed) excessive napping and fragmented sleep
  - Untreated: leads to irritability, poor concentration, behavior changes and impaired attention
  - Health problems: high blood pressure and strain on the heart and lungs



### Changes in Hormones

- Hypothyroidism reduced thyroid function
  - Older adults with DS are at risk for an age associated decline in thyroid function
    - Possible short term memory loss
    - Fatigue
    - Sleep disturbance (too much or not enough)
    - Feeling cold, reduced body temperature
    - Unresponsive
    - Symptoms of acute dementia (possible misdiagnosis as Alzheimer's disease)
- Diabetes 1 and 2
  - DS children are at risk for Diabetes 1, but as they age there is an increased risk in co-morbidity with Diabetes 2



Changes in Male Reproductive System

Prostate Cancer

- Age associated problems with similar prevalence as in the general population (symptoms include difficulty in urination, reduced flow of urine, reduced force of urine flow)
  - Male adults with I/DD may not report reduced ability to urinate due to lack of communication skills
- Enlarged non-cancerous prostate
  - Benign Prostate Hyperplasia (BPH)
    - Age related change with similar symptoms as prostate cancer
  - Male adults with I/DD may not report reduced ability to urinate due to lack of communication skills



### **Questions and Answers**

Thank you!

www.arcflorida.org

https://www.facebook.com/TheArcOfFlorida/