



COD 9 - Assessing and managing complex psycho-social issues unique to vulnerable older adults
Part A: Case discussion & Part B: Portfolio and supervisor discussion

Key Features

- This EPA focuses on identifying, assessing, and managing complex psycho-social issues, including vulnerability, caregiver burden, conflictual family dynamics, elder abuse and neglect, safety issues and risks, legal and ethical issues in care planning, and high risk transitions of care
- This EPA includes optimizing safety consistent with patient preferences, taking legal action when required and appropriate, demonstrating cultural competence, referring patients to appropriate resources, and counseling patients and/or caregivers
- This EPA may be observed in any clinical setting, including family meetings, through direct observation of components of the CGA and discussions with other health professionals, family, and substitute decision makers
- The observation of this EPA is divided into two parts: case discussion; and submission of case narratives
- The submission of case narratives requires the resident to submit a portfolio with five narrative reflections (on different topics) for discussion with the faculty advisor/supervisor. A copy of the portfolio is then submitted to the Competence Committee

Target

- Collect 1 observation of achievement (Part A)
- Collect 1 observation of achievement (Part B)

Case presentation

Part A: case discussion with supervising geriatrician

Part B: Supervisor review of 5 narrative cases submitted by resident on different topics

Setting

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Assessor

- Geriatrician

Milestones in Elentra

- ME 1.6 Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice
- ME 2.2 Identify patients with complex psycho-social issues
- ME 1.4 Recognize urgent situations that may need the involvement of more experienced colleagues, team members and community resources
- ME 2.2 Recognize patients at risk of elder abuse/neglect or safety issues, or legal and ethical issues in care planning, and report if appropriate
- COM 5.1 Document clinical encounters to adequately convey identified risks of elder abuse/neglect, safety issues and/or legal and ethical issues
- ME 2.4 Establish patient-centred management plans that demonstrate cultural competence, incorporating all of the patient’s health problems and needs, values and preferences
- COM 1.3 Reflect on how personal bias and cultural competence impacts care delivery
- COM 1.3 Recognize when strong emotions such as anger, fear, anxiety, or sadness are impacting on interactions and respond appropriately with suggestions for future encounters
- HA 1.1 Identify the risk factors, consequences and potential interventions for social isolation and elder abuse/neglect

- HA 1.1 Reflect on the determinants of health that affect access to health care and resources for older adult patients
- P 3.1 Apply provincial laws governing practice as it pertains to consent, capacity, and elder abuse and neglect