The 4M's in a Pandemic: A Survey of **Training Needs Among Healthcare Professionals, Older Adults, and Community Members**

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INTRO

The University of New England, in collaboration with the University of Maine, received funding from the Health Resources and Services Administration (HRSA) to improve the health and well-being of Maine's older adults through enhanced training under HRSA's Geriatrics Workforce Enhancement Program (GWEP). AgingME GWEP is a statewide collaborative effort focused on training enhancements and practice transformation processes at the primary care level. Participants of AgingME GWEP programming and events were surveyed for feedback on geriatrics training needs and gaps in training in context of the 4Ms, a framework for understanding age-friendly healthcare. These 4Ms comprise What Matters, Medication, Mentation, and Mobility.

METHODS

- N = 159 (68 AgingME GWEP program partners, community members, and healthcare providers participants; 26 colloquium survey participants; 65 Lunch and Learn surveys participants).
- 2. The AgingME GWEP training needs assessment survey, colloquium survey, and Lunch and Learn surveys consisted of demographic, openresponse, and multiple choice questions.
- Common themes were identified in the open response questions and descriptives were gathered for demographic and multiple choice questions.

RESULTS

Торіс	Primary responses
4Ms training needs themes from write-in responses	 Medications Healthy aging Cognition changes Social isolation & loneliness Dementia/Alzheimer's
Training format personal preference	 In-person training: instructor led (26%) In-person training: subject matter expert (23%) Webinar trainings (14%)
Requested future training topics	 Aging-in-place (14%) Isolation and loneliness (12%) Alzheimer's Disease and related dementia

DISCUSSION

The combined results from all responses of the COVID-19 training needs survey indicate a need for continued awareness of emotional and mental health and well-being, as well as the importance of encouraging connections and mitigating the effects of social isolation during these unusual times. Findings provide insights into preferred training formats for older adults and professionals in these topics. Understanding the needs of older adults in the age of COVID-19 and meeting those needs through continued education and training is an important aspect of an age-friendly healthcare system.

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Needs Assessment Survey Respondents

- 68 total responses from partners and community members
- 26 were older adults/community members
- 12 were program administrators
- 13 represented "other": including a state legislator, those working in elder justice, older adult leaders and volunteers, and a chaplain
- Majority of respondents did not work in primary care (3% did)

COVID-19 Specific Training Needs

Respondents of the training needs assessment survey were asked to select from a pre-populated list of all training topics related to COVID-19 and older adults that they had interest in learning about. The top result, keeping older adults socially connected, made up 28% (34) of the responses. Interest in this training topic is reflective of the participants' stated interest in improving and supporting social connections for older adults across the state, and finding ways to prevent and ameliorate social isolation among older adults in Maine. In a predominantly rural state such as Maine, social isolation can pose a significant challenge for older adults; training needs designed to meet this concern are of particular interest to many community members and statewide partners.

During COVID-19, isolation has had considerable impact on older adults, and concerns of isolation and loneliness must be considered through the lens of continued safety and precautions as the pandemic continues. The second most popular topic, mental health and well-being, at 21% (26) of responses, indicates a similar interest in continued awareness of how COVID-19 is affecting older adults' emotional health

4Ms Framework

What Matters

Knowing and aligning care with each older adult's specific health outcome goals and care preferences Ms across settings of care and including, but not limited to, endof-life care, and across settings of care.

Medication

Age-friendly medication that does not interfere with the other three routine assessment of high risk medication, opioid use and the need for medication dose reduction and discontinuation of unnecessary medications.

Mentation

Preventing, identifying, treating, and managing delirium, depression and dementia across settings of care.

Mobility

Ensuring that each older adult moves safely every day to maintain function and do What Matters.

Source: Institute for Healthcare Improvement (2021)



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References: Institute for Healthcare Improvement. (2021). What is an Age-Friendly Healthcare System? http://www.ihi.org/Engage/Initiatives/Age-Friendly-Health-Systems/Pages/default.aspx