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HPM&B

Judging Dept.

Linda Spokane

Student

HPM&B

3

Yuchi Young

Dept or Program Years in program

Mentor

Evaluation Of The Effectiveness Of Coordinated Care

Author (s)

Linda Spokane, Yuchi Young, Benjamin A. Shaw, Mark Macera

Research Objectives and Significance: To assess the effectiveness of coordinated care on functional outcomes and self-rated health in two independent living older adult populations.

Data: Data come from 131 randomly selected residents living independently in two upstate New York retirement communities that provide coordinated care services (e.g. meals, housekeeping, social activities, on-site nursing home, on-site medical services) and a nationally representative sample of 2,612 community-dwelling older adults (LSOA II). All subjects were age 70 or older, Caucasian, and had 12 or more years of education.

Methods: We regressed measures of functional status and self-rated health on type of residence (coordinated care vs. no coordinated care) in both bivariate and multivariate models that included age, gender, education, living arrangement, and comorbidity as covariates.

Results: Bi-variate analyses showed similar levels of functional ability between the two groups. However, after adjusting for covariates, results indicated that residents of coordinated care settings had significantly fewer activities of daily living (ADL) limitations (Beta =-.064, p=.001), fewer Nagi impairments (Beta =-.046, p=.015), and better self-rated health (OR=2.38; 95% CI 1.56-3.62) than the reference group.

Conclusion: Coordinated care appears to have positive effects on functional outcomes and self-rated health. Future studies should explore specific components of coordinated care (e.g. social activities, home health) that may account for these desirable health outcomes.

Relevance to Public Health: Improving function and promoting functional independence of older adults is one of the national health priorities. Coordinated care may be used as an intervention to achieve this goal.