

CANADIAN GERIATRIC SOCIETY CANADIAN MEDICAL STUDENT: AGING CARE 5M COMPETENCIES

The competencies incorporate the principles highlighted by the Geriatrics 5Ms Framework, CanMEDS Competency Framework. Examples of specific competencies and related topics with available Medical Council of Canada objectives are included in Appendix 1.

COMPETENCIES
AGING
1. (A) Describe the demography and epidemiology of aging and its implications. (B) Recognize the impact of social determinants of health (SDH) on aging.
2. Demonstrate knowledge about healthy aging, health promotion and preventive measures in older adults.
3. Describe the physiological changes of aging, and their clinical implications.
CARING FOR OLDER ADULTS
4. Complete a comprehensive geriatric assessment (CGA) (A) Complete the data gathering involved in a CGA (B) Perform a mental status and physical exam. (C) Apply validated screening/diagnostic tools relevant to the assessment (D) Develop a problem list and preliminary management plan

5. Communicate respectfully and effectively with older adults, family members and other healthcare professionals.

6. Understand the role and contribution of different healthcare providers in caring for older adults.

7. Understand the epidemiology, pathophysiology, risk factors, clinical features, diagnosis, management and preventive strategies of common geriatric syndromes.

8. Differentiate geriatric syndromes from normal aging.

9. Identify risk factors, signs and prevention strategies of caregiver stress.

10. (A) Describe the continuum of care options for older adults, including home-based and care facility-based resources.

(B) Understand the components of safe transfers of care for older adults.

11. Identify hazards facing older adults in different health care settings, and participate in efforts to reduce potential vulnerabilities.

12. Identify the presence of ageism, elder maltreatment, neglect, system gaps and opportunities for advocacy when caring for older adults.

MIND

13. Administer standardized cognitive testing using validated tools and understand their limitations.

14. Recognize and differentiate between delirium, dementia and depression.

15. (A) Recognize delirium as a medical emergency and initiate diagnostic work-up to identify precipitating factors.

(B) Identify predisposing factors and apply preventive measures to decrease the risk of delirium in hospitalized patients.

16. Identify safety concerns related to cognitive impairment.

17. Identify behaviours arising from delirium or dementia and outline an initial nonpharmacologic and pharmacologic management approach.

MOBILITY and FUNCTION

18. Screen for falls, identify risk factors, and formulate a plan for prevention.

19. (A) Elicit functional status including basic activities of daily living and instrumental activities of daily living.
(B) Identify safety risks in the living environment.

20. Assess mobility and functional deficits in collaboration with other healthcare professionals.

MEDICATIONS

21. Conduct a Best Possible Medication History (BPMH) and structured medication review.

22. Outline pharmacokinetic and pharmacodynamic changes that commonly occur with aging and know how to modify drug regimens.

23. (A).Identify potentially inappropriate medication classes in older adults.

(B.)Recognize that new symptomatology, including geriatric syndromes, may be due to medications or medication changes.

24. (A) Understand the principles of appropriate prescribing to minimize risk of polypharmacy and under treatment.

(B) Identify opportunities for deprescribing.

MULTI COMPLEXITY

25. Identify frailty using validated screening tools, and recognize that frailty informs health care decisions and impacts health outcomes.

26. Recognize atypical presentations of common medical conditions in older adults.

27. Understand that the approach to diagnosing and managing common chronic medical conditions can differ in older adults, particularly frail older adults, compared to young adults.

28. Understand the basic principles of managing multi-morbidity in a patient-centered manner and be aware of resources to guide appropriate care in older adults.

29. Identify patients with limited life expectancy and recognize a palliative approach to care as an appropriate treatment option for a patient with advanced disease.

MATTERS THE MOST

30. Apply a holistic and patient-centred approach to care. Demonstrate the ability to assess patient priorities and goals.

31. Identify gaps in equity and highlight systemic challenges encountered by older adults with an anti-oppression and anti-racism lens.

32. Identify and recognize the impact of social isolation and loneliness in older adults

33. Understand the key ethical and legal issues in caring for older adults