



Maintaining Elder Independence with Technology

Kathleen Krichbaum, PhD, RN
University of Minnesota
School of Nursing

A project cosponsored by the National Institutes of Standards and
Technology and Honeywell Laboratories

Maintaining Elder Independence with Technology



Maintaining Elder Independence with Technology

- Program Goal

Develop an intelligent home automation system with situation awareness and decision-making capability based on integration of diverse sensors to support enable elderly users to live independently at home and to support family caregivers

Maintaining Elder Independence with Technology

■ Program Aims

- *Support elder independent living
 - *Provide peace of mind to caregivers
 - *Support efficient quality of care for caregiving organizations
 - *Provide cost savings for government and industry
-

Maintaining Elder Independence with Technology



Quality of life

- Desire to maintain independence
- Limitations
 - ◆ Arthritis (49%)
 - ◆ Hypertension (35%)
 - ◆ Heart Disease (31%)
 - ◆ Hearing (31%)
 - ◆ Activities of daily living
 - ◆ Falling
 - ◆ Fraud



Support systems (Caregivers)

- Institutions are costly
- Remote families
- Decreased availability (aging population)

Technology developments

- Widespread, diverse products and services
- Lack overall, integrated infrastructure
- Resistance to new technology



Honeywell Laboratories

Your File Name - NY Dept of Health Care for People with Dementia
4-24-01

Maintaining Elder Independence with Technology

- Correlates of Elder Institutionalization
 - Safety
 - Dementia
 - Caregiver Burnout
 - Medication Management
 - Medical Monitoring
 - Toileting
 - Mobility
 - Eating
 - Transportation
 - Isolation
 - Managing Money
-

Maintaining Elder Independence with Technology

Results of Home Care Analysis

- Assessing and Monitoring Function
 - Coordinating Care
 - Managing Information
 - Educating the Care Community
-

Maintaining Elder Independence with Technology

■ Field Test Aims

- **Gather information** about elder, activity, and home status by listening to the home and communicating with devices
 - **Assess the need for assistance** based on the system's understanding the elder's condition and what activities are going on inside the home
 - **Respond to a given situation** by providing assistance to the elder and getting help when necessary
 - **Share health and status information with authorized caregivers** to help improve the quality and timely delivery of care
-

Maintaining Elder Independence with Technology

What ILSA Looked Like

- Control Boxes
 - **Wireless base station** - Hidden in closet, talks to sensors
 - **Telephone** - I.L.S.A can call elder with a message
 - **WebPad** - Elder able to get information from I.L.S.A.
 - Sensors
 - **Motion Sensors** - Sense motion in a room
 - **Call Button** - Same as elder's current call button
 - **Medicine Caddy** - Tells I.L.S.A. when medications taken
-

Maintaining Elder Independence with Technology

- **What ILSA Did**
Functions¹

- **Reminders:** Notes to help elder remember what to do today
- **Mobility²:** Summary of elder activity level for each time period of the day
- **Medicine²:** List of the medications elder should take and whether he or she opened the caddy at the correct time
- **Controls:** The status of I.L.S.A. in elder's home (on/off)
- **Help:** What to do in an emergency and who to call if elder required assistance

Support

- **Caregiver/family member, user guides, and technical support**

¹*Critical to have accurate information*

²*Thresholds have been established to issue alerts for these functions*

Maintaining Elder Independence with Technology

■ Messages/Alerts

An **alert** suggested that the caregiver may want to check on the parent at his/her convenience.

Caregivers were called with alerts, and saw them on the web browser.

- No Mobility for more than 5 hours during normal wakeful times
 - A 50% increase or decrease in mobility (activity) from normal levels over the course of three days.
 - Missed medications for a period of at least 24 hours.
-

Maintaining Elder Independence with Technology

- Field test aims
 - Assess design of interface and interaction
 - Assess attitudes and perceptions of elders and family caregivers
 - Assess patterns of behavior
 - Evaluate system operation
 - Evaluate system effects
-

Maintaining Elder Independence with Technology

Field Test

Design: Longitudinal, single group repeated measures

- **Sites: Minnesota and Florida independent and assisted living facilities**
 - **ILSA placed in all homes**
-

Maintaining Elder Independence with Technology

- Sample

Inclusion criteria:

1. Takes one or more medications daily
 2. Independent in ADLs
 3. Needs assistance with one IADL
 4. Has family caregiver who provides regular support
 5. Family caregiver willing to participate
-

Maintaining Elder Independence with Technology

- Field Test Measures

Useability questionnaires-weekly, monthly

Motion sensors

Medication caddy sensors

Elder health: SF-36

Elder cognition level: MMSE

Elder comfort with technology

Focus groups: elders and caregivers

Maintaining Elder Independence with Technology

- Short Form-36 (SF-36)

- Physical Health

- Physical functioning

- Role-physical

- Bodily pain

- General health

- Mental Health

- Vitality

- Social functioning

- Role-emotional

- Mental health

Maintaining Elder Independence with Technology

- Field Test Results

- Demographics (n=7)

- Age: 83.42 (range 76-96)

- Gender: 1 male, 6 female

- Marital status: 6 widowed, 1 married (f)

- Level of education: 4 HS, 2 College grads, 1 mastersí degree

Maintaining Elder Independence with Technology

- Comfort with technology: 40.29 (range 37-45)

■ Mobility

- One uses wheelchair for long distances, walker in apt.
- Others very active; all but two still drive

Med Adherence:

- One has meds set up
 - Others set up own weekly
 - Number of meds range from 1-16 per day
-

Maintaining Elder Independence with Technology

■ Field Test Results

- Elders are living independently
 - All were physically active
 - All were "healthy" with at least one chronic illness
 - All were comfortable with remotes, programmable appliances
 - Five had some computer literacy-wide variation in abilities
-

Maintaining Elder Independence with Technology

Field Test Results: SF-36

SF 36 FACTORS	T1	T2	T3	p
Physical Function	62.9 (21.6)	59.3 (22.9)	50.7 (20.3)	.38
Role-Physical	53.6 (44.3)	53.6 (36.6)	57.1 (34.5)	.97
Pain	76.8 (25.4)	84.9 (19.2)	72.3 (27.8)	.51
General Health	71.6(35.9)	66.9 (21.0)	65.9 (23.8)	.76

(Standard Deviation)

Maintaining Elder Independence with Technology

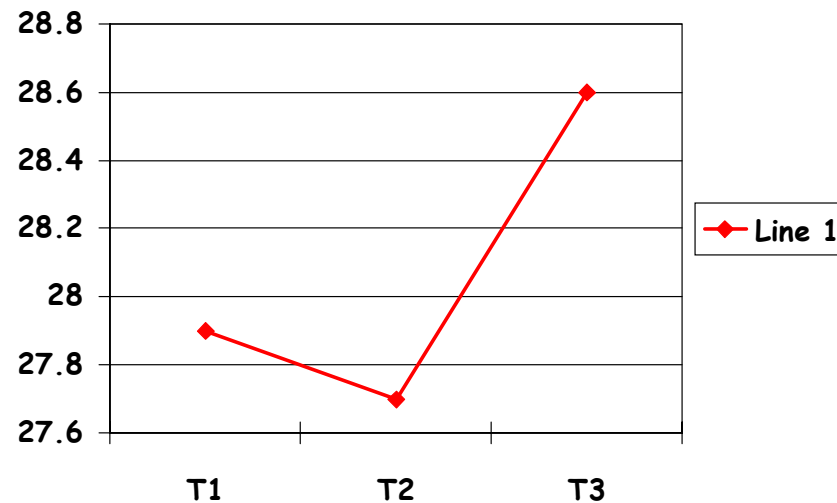
Field Test Results: SF-36

SF 36 FACTORS	T1	T2	T3	p
Vitality	52.9 (24.8)	58.6 (20.3)	49.3 (15.4)	.29
Social Function	87.5 (17.7)	91.1 (15.7)	75.0 (22.8)	.21
Role-Emotional	83.3 (27.9)	90.5 (25.2)	76.2 (46.0)	.75
Mental Health	82.9 (11.9)	86.9 (6.8)	76.6 (14.7)	.09

(Standard Deviation)

Maintaining Elder Independence with Technology

Mini Mental Status Exam Results



Maintaining Elder Independence with Technology

■ Field Test Results: Correlations

■ Age with general health	.245	.487	.721
■ Age with pain (p=.023)			.823
■ Gender (f)with PF	-.618	-.612	-.618
■ Gender (f) with MMSE	.683	.642	.642
■ Comfort with MH	-.430	-.731	-.542

Maintaining Elder Independence with Technology

- Field Test Results: Focus Groups
 - Enjoyed interactivity-desired more
 - Disliked telephone remindersó tried to ìbeat the systemî
 - Able to tolerate multiple devices
 - Liked medication caddies
 - Challenged by ILSA
 - Greatest fear is falling, then safety
-

Maintaining Elder Independence with Technology
