Gerontological, Geriatric and Dementia Care in Malta & Gozo:
Present & Future Challenges

organised by the
International Institute on Ageing,
United Nations – Malta (INIA)

in collaboration with
Department of Gerontology
Faculty for Social Wellbeing
University of Malta

Keynote speakers:
Professor Malcolm Johnson, University of Bath
Professor Adam Gordon, University of Nottingham
Professor Mario D. Garrett, San Diego State University

7 December 2018
InterContinental Hotel
St. Julian’s
Malta

Main Sponsor
Leaders in Care
Care Malta
08.00 - 08.55
Registration

09.00 - 09.15
Opening
Hon. Anthony Agius Decelis
Parliamentary Secretary for Persons with Disability and Active Ageing

Professor Marvin Formosa
Director, International Institute on Ageing, United Nations - Malta
Head, Department of Gerontology, Faculty for Social Wellbeing, University of Malta

09.15 - 10.45
THE AGE OF AGEING: GERONTOLOGICAL CONCERNS
Chair: Professor Carmen Sammut,
Pro-Rector, Staff & Student Affairs and Outreach,
University of Malta

09.15 - 09.45
Keynote I
The role of care homes in the palliative and end of life care
Professor Malcolm Johnson,
University of Bath

Older people have been living and dying in Care Homes for many decades. But as life expectancy has extended and those who live longer lives do so largely in functional good health for much longer, the demography and epidemiology of dying and death have changed dramatically. The latest available data provide strong evidence of the rising numbers of old age deaths in Care Homes and previously unavailable material on the causes of those deaths. A new and important picture emerges, which needs to be central to discussions about policies and practices for end of life care. It reveals distinctive patterns of multiple co-morbidities now bundled together as frailty, which require revised patterns of end of life care that rely more on sustained support rather than elaborate palliation. In addition, dementia has become the principal cause of death in the United Kingdom and nearly 60% of those deaths take place in care homes. These trends are also present in Malta and whilst they are signalled in the Malta’s Strategic Policy for Active Ageing (2014-2020), they demand more attention and new practices to improve the last lap of life.

09.45 - 10.05
Making homes fun
Cynthia Formosa,
Active Ageing and Community Care Department,
Parliamentary Secretariat for Persons with Disability and Active Ageing

This pilot project was held at Msida care home with the aim to increase opportunities for active ageing within the home. The project involved a group of residents who were engaged in activities by three carers. These residents were compared to a group of residents who were not engaged in activities. Data collection included: focus groups with the elderly and staff, the PHQ9 test prior and post the implementation of the project and individual interviews. Results: The mean PHQ-9 at the end of the project is significantly lower for the residents exposed to activities than for the residents not exposed to activities. These results were supported by positive feedback during focus groups and individual interviews.
The research was designed to address a lacuna in fourth age learning, outside of formal settings and within a residential home for older adults. The main goal was to investigate older adult participation in a learning programme and to determine the kind of learning that occurs when they attend a weekly programme of visual art dialogues over a 7-week period. It sought to investigate the effect these reproductions of visual art had on the kind of learning experienced: learning in terms of personal gains and identity capital, learning in terms of the social/peer interactions and in terms of the exposure to the projected images of the medium of visual arts shown. The study was qualitative in nature, employing an action research approach. Analysis and discussion of the findings led to the emergence of six main identifiable themes: the importance of reminiscence, intergenerational and ‘intra’-generational learning, visual art dialogues as springboard for more contemporary issues, visual art dialogues encouraging art appreciation, visual art as a vehicle to dialogue and socialization, and stimulation of cognitive abilities. Recommendations across different spheres ranged from practice to policy issues.
For a long-time, healthcare professionals working in geriatric medicine and allied specialties have struggled to describe who their core constituency is. Age was always, at best, a correlate for what they had in mind when they thought of patients who would benefit from their expertise. It is unsurprising, therefore, that the rise of frailty as a defined and measurable entity that may be amenable to intervention has excited these professions. Health and social care systems the world over struggle to find effective ways to cope with the care requirements of the oldest old, it has also provided a touchpoint for discussions of service reconfiguration. This talk will describe frailty models and the evidence-base for frailty-specific healthcare design. It will consider the limitations of Frailty and how the model might evolve to better encompass the needs of the patients currently described as frail.

This ongoing PhD research at the University of Edinburgh explores the effects of the dementia care environment on its users, stemming from the premise that the self is shaped in a social context, reflective of a given place in time - a culture. The cross-cultural analysis currently underway seeks to reveal salient elements of the physical care environment that can positively impact the quality of life of the persons with dementia and their carers. Recognition of non-pharmacological approaches such as the built environment in the treatment of dementia coupled with the belief that each person is unique can cause the paradigm shift necessary towards holistic person-centred care.

People with dementia will reach a stage when they no longer have the ability to voice their needs for oral health care and treatment, carry out daily oral hygiene to a level that prevents disease, make informed choice and give valid consent for treatment. This can lead to a negative effect on the daily quality of life of the person. The presentation deals with the approach to provide dental treatment to keep the oral state free from infection, restore the dentition of such persons so that they can continue to enjoy eating, maintain speech and aesthetics as long as possible.
The management of swallowing difficulty in end-stage dementia in institutions is a complex issue involving medical, social, ethical, administrative, and legal issues. To this end, the various stakeholders in decision-making, namely the clinicians and the family, do often interact with difficulty in the management of the patient’s care, particularly as the person with dementia lacks real-time presence in decision-making in view of cognitive decline. This presentation will explore the findings of a qualitative study and analyses how clinicians and family members interact together in the quest to define a consensus care plan that safeguards patient interests and dignity in end-of-life care.

In 2018, the U.S. National Institute on Aging and the Alzheimer’s Association published a new “Framework” that reverted back to the original definition of Alzheimer’s disease. A definition relying solely on the presence of plaques and tangles arguing that such a definition helps the search for a cure. Such reliance on biology is however premature and flawed. In one study that looked at 2,332 brains of people that died from various causes, including children, everyone over the age of 24 years had plaques and tangles. Even the authors admit that there are high false positives. The new Framework aims to find a cure by repurposing drugs, a random game of trying different drugs to see which one will reduce these biological markers. Science has become relegated to the background in preference to drug interests. We cannot waste another century of research.

A mixed-method research study investigated the effects of alternative non-pharmacological approaches on the behaviour of thirteen older persons with dementia in a long-term care setting who were exposed, in an active manner, to varying music modalities. Findings demonstrated that music has the potential to enhance the wellbeing of older persons with dementia, whilst also contributing positively towards the management of challenging behaviours. Using the CMAI-short as a data collection and analysis tool, findings demonstrated decreasing levels of physically aggressive behaviour, physically non-aggressive behaviour, and verbally agitated behaviour. Qualitative data indicated enhanced social interaction, meaningful enjoyment, consolidation of the self and increased wellbeing of older persons living with dementia in a long term care setting.
Dementia needs no introduction to society at large. Yet, it is a known fact that the exploration of dementia itself is understood in different ways and means. Whilst, the term and ailment itself are under continuous exploration, the ethical challenges from a reasoning perspective are merely sought. Ethical theories can be applied to context of disease whilst guiding principles can lead care provision. The differentiation between theory and principles can be explored to tangents and dilemmas that dementia care is facing. This paper will argue on the basis of theoretical application that will focus on inherent and universal rights of a person.

Due to lack of verbal communication, dementia is considered to be a social marginalisation mental health illness. Music and imagery of recollection are most effective in enhancing communication with people with dementia. The research study set out to better understand the effectiveness of customised audio-visual strategies that help people with dementia reconnect. It involved repeated audio-visual sessions with a focus group. The effectiveness of these strategies was determined by the levels of responses and interaction amongst the group. Positive results obtained indicate that customised audio-visual strategies do stimulate engagement and response in people with dementia.

Coffee Break

Panel Discussion:
End-of-life issues in gerontological, geriatric and dementia care
Chair: Professor Andrew Azzopardi,
Dean, Faculty for Social Wellbeing, University of Malta
Professor David Mamo,
Department of Gerontology, Faculty for Social Wellbeing, University of Malta
Professor Pierre Mallia,
Department of Family Medicine, Faculty for Medicine & Surgery, University of Malta

Closing remarks
Professor Marvin Formosa
Director, International Institute on Ageing, United Nations - Malta
Head, Department of Gerontology, Faculty for Social Wellbeing, University of Malta
POSTER PRESENTATIONS

Cognitive Assessment of Older Patients at the Medical Outpatients (MOP) at Karin Grech Hospital
Dr. Doriella Galea, Rehabilitation Hospital Karen Grech, Pieta
Dr. Thomas Aquilina, Mater Dei Hospital, Msida

Case Presentation: Catatonia
Dr. Doriella Galea, Rehabilitation Hospital Karen Grech, Pieta

To tube feed or not to tube feed? Dementia, swallowing, and end-of-life care
Dr. Michelle Grech, HST Geriatrics
Dr. Joe Dimech, Consultant Geriatrician

Intergenerational Programme
Cynthia Formosa, Active Ageing and Community Care Department
Nicholas Agius, Maria Regina College Wardija Resource Centre

Length of stay of patients at KGH Rehab Ward 1 relative to their admission reason. How can this be improved?
Gabriella Buttigieg, Department of Medicine and Surgery, Mater Dei Hospital, Msida
Paul Zammit, Department of Geriatrics, Karen Grech Hospital, Pieta

Exploring the knowledge, explicit and implicit attitudes of health care professionals on sexuality amongst older persons
Karryn Darmanin Kissau, St. Vincent de Paul Long-Term Facility, Luqa
Dr. Kristina Bezzina, Department of Psychology, Faculty for Social Wellbeing, University of Malta
Dr. Greta Darmanin Kissau, Head, Department of Psychology, Deputy Dean, Faculty for Social Wellbeing, University of Malta

Ankle joint range of motion and its association with mobility and falls amongst older adults
Laura Abdilla, Faculty of Health Science, University of Malta
Andrew Scicluna, Faculty of Health Science, University of Malta

Giving voice to older persons admitted for residential respite care: A qualitative study.
Roberta Sultana, PhD Candidate, Department of Gerontology, Faculty for Social Wellbeing, University of Malta
Andee Agius, Faculty of Medicine and Surgery, University of Malta
Professor Marvin Formosa, Department of Gerontology, Faculty for Social Wellbeing, University of Malta

DEMENTIA - A LOCAL CHALLENGE. Creating Dementia Friendly Communities in Malaysia: The Atria-ADFM Community Corner (AACC) - A pilot local corporate partnership initiative (the first in the Asia Pacific)
Datin Jacqueline WM Wong, Alzheimer’s Disease Foundation MALAYSIA (ADFM)

GLOBAL ISSUES - LOCAL RESPONSES. The Dementia Care Skills Train-The-Trainer Programme in Malaysia and Brunei: An Asia Pacific Region initiative”
DY Suharya, Regional Director - Asia Pacific, Alzheimer’s Disease International; and
Datin Jacqueline WM Wong, Alzheimer’s Disease Foundation MALAYSIA (ADFM)

Challenges in the Prevention and Management of Vitamin D Deficiency
Dr. Nicole Sciberras, Mater Dei Hospital, Msida