

ABSTRACT

The Medical Practitioner - Elderly Patient Encounter within Jamaica's South East Region

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Introduction

In Jamaica the elderly is the fastest growing segment of the population. Local data regarding the quality of care provided to this emerging target group is non-existent. An analysis of the four components of the medical practitioner - elderly patient encounter was therefore undertaken in the South East Regional Health Authority in an effort to correct this deficiency.

Methods

Three instruments were developed and utilized to collect this data. The Gascon Checklist to observe the medical encounters: Exit Interviews of the elderly patients on departure and: Questionnaires administered and completed by the medical practitioners.

Results

In this study the mean encounter time is 16 minutes. However the medical encounters were incomprehensive. They were lacking in terms of preventive maneuvers and health promotion. Despite this the patients were quite involved in the decision making process.

Patient recall of the information provided was poor, and so were patient enablement scores. On the contrary, patient satisfaction was good. The barriers to the delivery of geriatric care stemmed mainly from the inadequacy of financial resources.

Discussion

The encounter time was woefully inadequate and the medical practitioner-elderly patient communication was ineffective based on the poor recall and adherence noted. The inadequacy of the encounter time has far reaching implications in terms of poor long-term patient outcomes. Such patient outcomes can increase the health budget. Medical practitioner elderly patient interaction was also limited by time constraints.

Patient enablement scores were low, and therefore higher scores must now be achieved. The barriers encountered in the deliver of geriatric care were mainly financial in origin and must be overcome to improve the health of the elderly. Medical practitioners confessed their need for more training in the area of geriatrics and this must also be addressed. The study was comprehensive however more work needs to be done at the secondary and tertiary levels.