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RESEARCH ARTICLE

Geriatric Nursing Practitioner's Impact on Home Healthcare Quality: A Systematic Review

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ARTICLE INFO	ABSTRACT
Received: Apr 24, 2024	Background: Home healthcare is critical in modern healthcare systems because people in the current dispensation tend to live longer and want to
Accepted: Jun 10, 2024	age with dignity. Quality home health care refers to secure, safe, and
Keywords	effective services involving and empowering patients and enhancing the effective utilization of resources. This literature review evaluates the
Home healthcare	effects and the influence of geriatric nursing practitioners (GNPs) on the
Geriatric nurse practitioner	quality and effectiveness of the treatment of patients in home health care
Evidence-based Practice	and satisfaction. Methods: The literature search was conducted on
Integrated Care	PubMed, Google Scholar, and JSTOR. The review consisted of 10 articles
Literature Review	which had been evaluated for their relevance in the context of geriatric nursing practice. Results: The study's results were such that nursing
*Corresponding Author:	professionals can enhance the quality of home healthcare by using technology to provide Care, comprehensive geriatric assessment,
firas.alzain.1986@gmail.com	evidence-based practice, and integrated Care. Conclusion: The paper concludes that GNPs play a critical role in providing and enhancing the quality of home care.

INTRODUCTION

Home health care is a component of healthcare in which professionals provide care services to individuals and families in their places of residence to maintain and restore health (O'Brien, 2021). This approach is critical in modern healthcare systems because people now live longer, want to age with dignity, and tend to have more chronic and complex conditions (Baker et al., 2017). This therefore calls for quality care which refers to the delivery of secure, safe, and effective services involving and empowering patients and enhancing the effective utilization of resources (Aase et al., 2021). For the elderly, implementing this type of care in the context of home is paramount as it not only allows intervention on the basis of a familiar environment but also enhances the satisfaction threshold of patients. Through this method, it becomes possible to make sure there is reduced mortality and improvement of the elderly patients' health outcomes (Pouw et al., 2018). In making sure this is possible, geriatrics nursing practitioners (GNP) often have to come in handy.

According to Mora et al (2017), GNPs can influence the quality and effectiveness of home care by providing transitional Care home visits to enable geriatric patients to transition from the hospital to the home setting. Also, the GNP can influence quality by collaborating with the patient's primary care provider (Ritchie & Leff, 2018). This collaboration will enhance the interdisciplinary care approach, which improves the quality of Care and reduces 30-day readmissions and preventable hospitalizations. Anthony (2017) indicates that the GNP role involves not only isolated visits but also provision of primary care, health education, chronic disease management, and referrals. GNPs can also influence the effectiveness and quality of home healthcare by providing environmental, psychological, functional, and physical assessments and providing, as well as supervising care for older adults with diverse needs (Touhy & Jett, 202). Therefore, countries should purpose to invest in this category of nursing practice as more people continue to age. Israel is one such country whose

the demand for home care for elderly is rampant owed to the demographic characteristics of its population.

With a rapidly aging population, Israel has been investing in home healthcare services to meet the needs of older people. Services often include medical care, assistance with daily activities, and emotional support (Cohen & Resnizky,2022). In this, a multidisciplinary team of professionals usually undertakes the responsibility. This approach ensures that various aspects of a patient's health, including medical, social, and psychological, are addressed comprehensively. The Israeli government provides financial support and regulation for home healthcare services to ensure that many people access home care services. Subsidies and allowances are often available to help families afford home healthcare for their elderly relatives (Cohen & Resnizky,2022). With this understanding, this study will focus on the geriatric nursing practitioner's impact on home healthcare quality: a systematic review in the context of Israel.

APPROACH

The systematic review will explore the influence of geriatric nursing practitioners on the quality and effectiveness of treating patients in home health care. The literature review will involve searching for studies globally because limited studies focus on Israel. These global studies have explored home healthcare's benefits in improving patient outcomes, reducing hospital readmissions, enhancing patient satisfaction, and providing a viable alternative to inpatient care. Through these studies, it will become easier to understand the specific role of geriatric nursing practitioners (GNPs) and the extent of their influence on the quality and effectiveness of home healthcare in the Israeli context. This is because the similarity in the fundamental objectives and principles of homecare quality across countries underscores the notion that successful practices in one nation can indeed be extrapolated to another. The underlying premise lies in the universal nature of patient needs, irrespective of geographical boundaries.

Consequently, insights from studies conducted in different parts of the world can serve as valuable guides for optimizing home healthcare services in Israel. By extrapolating successful practices and tailoring them to Israel's unique sociocultural and healthcare landscape, the integration of geriatric nursing practitioners into the homecare framework can be streamlined, ensuring the delivery of high-quality, effective, and patient-centric services for the geriatric population. The review will also discuss the implications of the results on the Israeli healthcare system and geriatric professionals.

3. Research Objectives

- i. To analyze the effectiveness of GNP interventions in reducing hospital readmissions among elderly patients receiving home-based Care.
- ii. To evaluate GNP's impact on older adults' home care quality, satisfaction, and relatives' well-being.
- iii. To investigate the influence of GNPs on staff retention rates and overall organizational performance in home healthcare settings.

Research Questions

- a. Do geriatric nurse practitioners enhance the quality of Care, health service use, quality of life, and satisfaction among older adults in their home residential setting?
- b. Does the GNP improve the quality of life of the relatives of older adults who receive home-based Care?
- c. Does the GNP improve the skills, quality of Care, and job satisfaction of the home-based care staff?

4. Rationale

Home-based care models have gained widespread popularity in global healthcare, reflecting a shift towards patient-centered, community-based healthcare delivery. Extensive literature underscores the effectiveness of home-based Care in numerous countries, showcasing its potential to enhance

patient outcomes, ensure personalized treatment, and optimize healthcare resources. Despite the global prevalence of home-based Care, there exists a noticeable gap in the literature, particularly concerning the pivotal role of Geriatric Nursing Practitioners (GNPs) in ensuring its effectiveness, especially in the context of geriatric patients. While studies from various countries have explored the nuances of home-based Care, a significant portion of the research conducted in Israel has yet to delve deeply into the unique contributions of GNPs to the success of home healthcare delivery for elderly patients.

METHODOLOGY

Types of Studies

This study will adopt a multi-faced methodology approach consisting of systematic literature reviews, randomized controlled trials, quasi-randomized, controlled before-after, cohort, and quasi-experimental study designs.

Types of Participants

To qualify for this study, the patients to be evaluated will have to be aged 65 years and above. Pediatric, obstetric, and mental health patients will also come in handy considering their effective and efficient role in the intervention measures to be undertaken (Mora et al., 2017).

Types of Interventions

To determine the type of study to be included in the systematic review, the first approach was to provide a rationalized definition of the homecare. In this, it was postulated that home healthcare is the provision of care services at the home of a patient for an illness that could require hospitalization of the patient. Specifically, home-based Care by the GNP denoted a healthcare service that required the presence of the GNP at the patient's home. Therefore, such services as hospital outpatient care and self-care by the patient at home were excluded from this study.

Types of Outcome Measures

Health outcomes include mortality rate, hospital readmission, functional status, disease complications, GNP outcomes such as satisfaction, and effects on healthcare costs such as the cost of the intervention and patient satisfaction.

Search Process

The search of the relevant articles focused on evaluating various databases such as the PubMed, Google Scholar, and JSTOR to conduct an efficient PRISMA protocol. In doing this, the primary research question, "What is the quality of care for geriatric patients in home-based centers?" was inserted in the serach spaces using quotation marks. The purpose of quotation marks is to limit the number of articles available for selection to a reasonable number.

5. Inclusion Criteria and Exclusion Criteria

The inclusion criteria was such that only the articles examining patients older than 65 years, nursing practitioner articles, and articles less than five years old were considered. The final articles which met the pre-set criteria were 10 as depicted in the *PRISMA diagram* below. It is also good to note that the selected articles had to bear a boundary of the impact of GNPs on the effects of the other care providers if the studies evaluated multidisciplinary-based interventions.

Search Outcome

The search brought back a total of 3617 articles, which entailed duplicates. Then, the research criteria were made more specific by inputting articles published within the last five years. The record was then analysed, and 1,754 articles about patients not in the senior age group were eliminated. The exclusion criteria of this PRISMA needed analysis of patients older than 65 years, and elimination of articles that assessed patients younger than 65 years, non-practitioner articles and articles more than

five years, book reports, public health articles, and book chapters were excluded. The reason for excluding books and book chapters is that they need to be more timely. This means academic books, especially comprehensive ones, can take several years to be published. In fast-evolving fields, the information in books might need to be updated by the time they are published. Books may not undergo the same rigorous peer-review process as academic journal articles. This lack of peer review can raise concerns about the quality and reliability of the information contained in these sources.

Because of time and funding challenges, the title and abstract reviewing of every study to determine relevance was carried out by a trained reviewer as opposed to two independent reviewers as the Cochrane Collaboration requirements dictate. After reviewing every study's title and abstract to determine their relevance, a total of 64 articles were obtained. Every full text was reviewed independently using two members so the research team, with the underlying discrepancies being addressed. Some of the reasons for papers not meeting the inclusion criteria involved during this level of full-text review entails the inability to meet the inclusion criteria, for example, intervention being provided by a registered nurse instead of GNP. Having considered all the criteria, ten articles qualified for the review.

PRISMA diagram

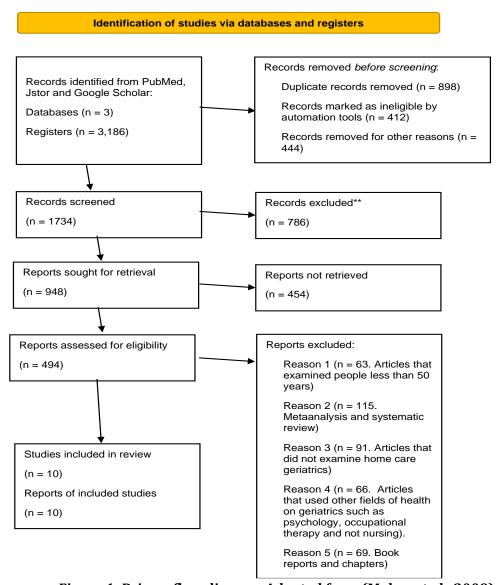


Figure 1: Prisma flow diagram Adapted from (Moher et al., 2009)

Synthesis

The ten studies that met the inclusion criteria never tested the same outcome measures. Therefore, the appropriate approach was to summarize the outcome measures narratively instead of conducting statistical pooling using meta-analysis.

3.0 RESULTS

The literature search identified 10 articles relevant to the research topic. This results section discusses the general findings and common themes of these ten articles.

These articles were published within the last five years in peer-reviewed articles. These articles include one review of reviews (Bertoncello et al., 2018), one consensus paper (Scotte et al., 2018), two systematic reviews and meta-analyses (Hshieh et al., 2018; Pu et al., 2019) and six systematic reviews (Garrard et al., 2020; Lauretani et al., 2020; Liljas et al., 2019; Panza et al., 2018; Santosaputri et al., 2018; Wagle et al., 2018). (Appendix A presents a table indicating the features of the included studies).

The table below depicts the ten articles and the rationale behind their choice.

Author	Rationale				
Bertoncello et al., 2018:	This paper discusses the effectiveness of telemedicine home interventions, which could be relevant to understanding the role of technology and remote interventions by geriatric nurse practitioners in residential settings.				
Garrard et al., 2020: This paper directly addresses the impact of geriatric assess in a primary care setting, providing insights into the positive benefits of geriatric nurse practitioners.					
Hshieh et al., 2018:	This article on systematic review and meta-analysis of the Hospital Elder Life Program (HELP) evaluates the effectiveness of a program targeting hospital care for older adults, contributing to the understanding of interventions that geriatric nurse practitioners might engage in.				
Lauretani et al., 2020:	The systematic review of the clinical and ethical implications of COVID-19 in older individuals in this article provides insights into the challenges and strategies for geriatric Care in home settings during a critical period involving senior nurse practitioners.				
Liljas et al., 2019:	This systematic review on the impact of integrated Care on patient-related outcomes in older people directly addresses the effectiveness of a care model that may involve the coordination and collaboration of geriatric nurse practitioners.				

Panza et al., 2018:	As elucidated in this paper, the systematic review on comprehensive geriatric assessment (CGA) in long-term care facilities provides insights into the application of CGA involving old nurse practitioners in long-term care settings.
Pu et al., 2019:	This paper indirectly provides information on the potential use of technology and innovative interventions by geriatric nurse practitioners to enhance older adults' well-being.
Santosaputri et al., 2019:	As addressed in this article, the systematic review of interventions led by staff with geriatrics expertise in reducing hospitalization in nursing home residents directly addresses the effectiveness of interventions involving geriatric nurse practitioners in reducing hospitalizations in a residential setting.
Scotté et al., 2018:	This is a consensus paper addressing the quality of life needs of older patients with cancer. This paper contributes insights into the broader considerations of quality of life for older adults, potentially involving geriatric nurse practitioners in palliative or supportive Care.
Wagle et al., 2018:	This paper on a systematic review of caregiver-based interventions to optimize medication safety in vulnerable elderly adults directly addresses the impact of caregiver-focused interventions, including the potential role of geriatric nurse practitioners, in improving medication safety and overall care outcomes.

These reviews analysed primary studies conducted in different countries. The general findings from the above selected articles are that geriatric patients in home healthcare require specialized treatment and have a high utilization of healthcare services. Geriatric nursing practitioners have a significant role in enhancing this population's quality and effectiveness of Care. The major themes derived from the selected articles are using technology to provide care, comprehensive geriatric assessment, evidence-based practice, and integrated Care.

3.1 Using Technology to Provide Care

Bertoncello et al. (2018) argue that information and communication technologies effectively address crucial public health problems such as geriatric populations and rising chronic disease prevalence rates. For instance, GNPs can utilize telemedicine to care for geriatric patients in their homes. In particular, the older population often struggles with chronic diseases such as hypertension and many other conditions. Since the GNPs are responsible for providing customized care for such patients, telemedicine would enhance patient engagement, manage chronic conditions, and enhance the quality of life. Technology can also trigger health behaviors. Pu et al. (2018) also report that social robots can improve older people's well-being. Social robots positively improve quality of life, anxiety, patient engagement, agitation, stress reduction, and medication adherence. By embracing these technological advancements, GNPs can further personalize and optimize the delivery of healthcare

services to older people, addressing their unique health challenges and ultimately contributing to the overall well-being of geriatric populations.

3.2 Comprehensive Geriatric Assessment (CGA)

CGA is the multidimensional assessment and management of an elderly individual. This approach determines the pathological risk, prognosis, clinical profile, and personalized care plan. Garrard et al. (2019) found that CGA is acceptable and produces outcomes which are beneficial in addressing the health concerns of the elderly people . Lauretani et al. (2020) posit that healthcare providers should use relevant and validated assessment tools to perform diagnostic evaluations and inform treatment. Similarly, Panza et al. (2017) argue that CGA improves the quality of life and reduces hospitalization of geriatric patients with complex conditions. Therefore, GNPs can influence the quality and effectiveness of treatment by implementing CGA.

In the context of home care, implementing CGA allows GNPs to:

- Identify Multifaceted Needs: CGA helps GNPs identify not only the medical conditions of patients but also their functional limitations, mental health issues, and social support systems. This holistic understanding enables tailored interventions.
- Personalized Care Plans: By utilizing CGA, GNPs can create customized care plans that address the specific needs identified during the assessment. This tailored approach ensures that patients receive Care focused on their requirements.
- Monitor Progress: CGA provides a baseline assessment that can be used to monitor patients' progress over time. GNPs can track changes in the patient's health status and adjust the care plan accordingly, ensuring continuous and adaptive Care.
- Enhance Patient Satisfaction: By comprehensively addressing a wide range of needs, CGA contributes to higher patient satisfaction. Patients feel heard and cared for when healthcare providers thoroughly understand their health and well-being.
- Prevent Hospitalizations: Through early identification of health issues and proactive management, CGA can help prevent health deterioration that might lead to hospitalizations. This benefits the patient and reduces the strain on healthcare resources.

3.4 Evidence-Based Practice (EBP)

Hshieh et al. (2018) advocate for promoting the implementation of EBP in Senior Care. The study recommends the implementation of the Hospital Elder Life Program (HELP) after finding it effective in reducing delirium and fall incidences, preventing institutionalization, and decreasing the length of stay. HELP is a multi-component approach for preventing cognitive and functional decline in hospitalized elderly individuals. Its original objective is to maximize independence at discharge, enhance mental and physical functioning, and enhance the transition from hospital to home. The study also reports that HELP is growing as a model for improving the effectiveness and quality of Care for the elderly population globally.

3.6 Integrated Care

Wagle et al. (2018) recommend implementing caregiver-based interventions to enhance medication safety for geriatric patients. Such interventions improve caregivers' medication knowledge. Scott et al. (2018) recommend using multidisciplinary teams and a multi-professional approach to provide patient care. This enhances the management of patients' health aspects and improve health and quality of life. The team's composition can vary according to the patient's needs. Santosaptri (2018) recommends the implementation of geriatrics-focused interventions. Using this evidence, a GNP can implement a geriatrics-focused intervention for their patients in home care settings. According to Liljas et al. (2019), integrated Care reduces hospital admission rates and length of hospital stay and enhances patient outcomes.

4.0 DISCUSSION

As depicted in the analysed studies, geriatric patients receiving home healthcare require specialized treatment and highly utilize healthcare services. The literature also indicates that old nursing practitioners have a significant role in enhancing this population's quality and effectiveness of Care. The major themes derived from the selected articles are that nursing professionals can improve the quality of home healthcare by using technology to provide care, comprehensive geriatric assessment, evidence-based practice, and integrated Care.

The studies included showed that GNPs could enhance the quality and effectiveness of Care by performing comprehensive geriatric assessment (CGA). Garrard et al. (2019) found that CGA produces positive outcomes. Similarly, Panza et al. (2017) report that CGA improves the quality of life and minimizes geriatric patients' readmission risk. GNPs thus require the use of relevant and validated assessment tools to assess patients. The results of such assessments are critical to informing treatment plans. Therefore, performing CGA is a practical approach that GNPs can use to enhance home healthcare quality and effectiveness.

The findings further indicate that nursing professionals enhance patient care when they use technology. Pu et al. (2018) note that using social robots improves older adults' well-being, enhances patient engagement, medication, and quality of life, and minimizes anxiety, agitation, and stress. Bertoncello et al. (2018) indicate that healthcare technology addresses public health issues. For instance, GNPs can use telemedicine to provide healthcare services to geriatric patients in their homes. Therefore, GNPs influence the quality and effectiveness of treatment of patients in home health by utilizing health technology.

GNPs can also enhance the quality of Care by providing integrated Care. For instance, Santosaptri (2018) found that interventions implemented by geriatrics-trained staff can reduce hospitalizations among nursing home residents. Scott et al. (2018) propose using a multi-professional approach and multidisciplinary teams to provide senior Care as they improve health, quality of life, and other patients' health. Wagle et al. (2018) argue that caregiver-based interventions improve geriatric patients' medication safety. The rationale for providing integrated Care is that this Care enhances patient outcomes and reduces hospitalization (Liljas et al., 2019).

Lastly, GNPs can enhance the quality and effectiveness of treating patients in home health by utilizing EBP in Senior Care. Hshieh et al. (2018) propose that geriatric providers use the Hospital Elder Life Program (HELP) to reduce hospital stays and hospitalization and prevent functional and cognitive decline.

4.1 Strengths and Limitations

The strengths of this literature review is that it includes recently published studies that provide upto-date evidence. It comprehensively examines quantitative and qualitative studies on different aspects, and it contains meta-analyses of randomized controlled trials, which provide high-quality data. The study's limitations are that most of the included studies are secondary studies and provide limited evidence due to including homogenous studies. Also, the systematic reviews have only ten articles, limiting the research exploration to a broader perspective.

4.2 Practice implications

The findings of this research highlight several critical implications for practice in the field of geriatric nursing in home healthcare. Firstly, the study emphasizes the crucial role of technology, such as telemedicine and social robots, in providing specialized Care to geriatric patients at home. Geriatric nursing practitioners (GNPs) can enhance patient engagement, manage chronic conditions effectively, and improve overall quality of life by integrating these technological solutions into their caregiving approaches. Secondly, implementing a Comprehensive Geriatric Assessment (CGA) is a pivotal strategy for GNPs. By conducting CGA, GNPs can identify multifaceted patient needs, personalize care plans, monitor progress, enhance patient satisfaction, and prevent hospitalizations.

5.0 CONCLUSIONS

This literature review explores the effects and influence of a Geriatric nursing practitioner on the quality and effectiveness of treating patients in home health care and satisfaction. The literature indicates that GNPs significantly influence the quality and effectiveness of treatment for patients. The literature also suggests that GNPs enhance the quality and effectiveness of Care by using technology to provide Care, comprehensive geriatric assessment, evidence-based practice, and integrated Care. Health educators can use the literature review findings to train GNPs on the most effective care methods for geriatric patients receiving home care. On the same note, policymakers should develop procedures specific to home healthcare for GNP. These policies will inform GNPs on the best practices for home care. This literature review has focused on the general quality and effectiveness of Care. Future research should investigate specific interventions for patients living with particular conditions such as dementia / Alzheimer's or cancer.

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Conflict of interest

None

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Appendix A: Table of results

Authors and Year	Title	Design	Purpose	Level	Findings
Bertoncello, C., Colucci, M., Baldovin, T., Buja, A., & Baldo, V. (2018).	How does it work? Factors involved in telemedicine home-interventions effectiveness: A review of reviews	Review of reviews	To examine whether and how published reviews consider and discuss the influence on outcomes of diverse factors such as patient education and support, setting, the organizational model, intensity of intervention, patient engagement, and the perspectives of patients, caregivers, and health practitioners.	III	Information and communication technologies effectively address crucial public health problems such as geriatric populations and rising chronic disease prevalence rates. For instance, telemedicine would enhance patient engagement, manage chronic conditions, and enhance the quality of life.
Garrard, J. W., Cox, N. J., Dodds, R. M., Roberts, H. C., & Sayer, A. A. (2020)	Comprehensive geriatric assessment in primary Care: A systematic review	Systematic review	To appraise the evidence on comprehensive geriatric assessment implemented within the primary care practice.	II	Comprehensive geriatric assessment was acceptable and provided variable outcome benefits. Its benefits include improved medication adherence, costeffectiveness, and reduced hospital admission. It also indicates that primary Care is the best setting for CGA to identify and support individuals with multiple conditions and frailty.
Hsieh, T. T., Yang, T., Gartaganis, S. L., Yue, J., &	Hospital elder life program: systematic review and	Systematic review and meta- analysis	To summarize the current evidence regarding the Hospital Elder Life Program	III	HELP effectively reduces the prevalence of delirium and the rate of falls, which

Inouye, S. K. (2018)	meta-analysis of effectiveness		(HELP) and determine its effectiveness and cost-savings.		reduces the length of hospital stay and prevents institutionalization. The program can serve as a reference standard model for improving the quality and effectiveness of hospital care for senior adults.
Lauretani, F., Ravazzoni, G., Roberti, M. F., Longobucco, Y., Adorni, E., Grossi, M., & Maggio, M. (2020)	Clinical and ethical implications include assessing and treating older individuals with COVID-19 multi-system disease.	Systematic review	To address the different aspects of COVID-19 multi-system disease such as diagnostic evaluation, continuing with the innovative classification of phases, and proposing sequential adapted pharmacological treatment.	III	Healthcare providers should use relevant and validated assessment tools to perform diagnostic evaluations and inform treatment.
Liljas, A. E., Brattström, F., Burström, B., Schön, P., & Agerholm, J. (2019)	Impact of integrated Care on patient-related outcomes among older people–a systematic review	Systematic review	To determine critical patient-related outcomes of integrated Care provided to older adults.	III	Integrated Care reduces hospital admissions, length of stay, and readmission rates and improves patient satisfaction. However, integrated Care does not have any impact on mortality.
Panza, F., Solfrizzi, V., Lozupone, M., Barulli, M. R., D'Urso, F., Stallone, R., & Logroscino, G. (2018).	An old challenge with new promises: a systematic review on comprehensive geriatric assessment in long-term care facilities	Systematic Review	To review the current evidence on clinical research on the implementation of comprehensive geriatric assessment (CGA) programs in long-term care facilities and	III	In long-term care facilities, CGA improves the quality of Care and reduces hospitalization rates. CGA also helps develop rapid screening CGA-based tools to improve

			analyze the benefits derived from applying CGA-based tools.		physicians' ability to identify and treat geriatric syndromes.
Pu, L., Moyle, W., Jones, C., & Todorovic, M. (2019)	The effectiveness of social robots for older adults: a systematic review and meta-analysis of randomized controlled studies	Systematic review and meta- analysis	To summarize the effectiveness of social robots on outcomes of older adults from randomized controlled trials.	I	Social robots can improve older adults' well-being.
Santosaputri, E., Laver, K., & To, T. (2019)	Efficacy of interventions led by staff with geriatrics expertise in reducing hospitalization in nursing home residents: a systematic review	Systematic review	To determine the effectiveness of interventions delivered by geriatrics-trained staff for nursing home residents in reducing hospitalization.	III	There was limited evidence that interventions implemented by geriatrics-trained staff reduce hospitalizations in nursing home residents.
Scotté, F., Bossi, P., Carola, E., Cudennec, T., Dielenseger, P., Gomes, F., & Strasser, F. (2018).	Addressing the quality of life needs of older patients with cancer: a SIOG consensus paper and practical guide	Consensus paper	To summarize the current perspectives on critical issues regarding the significance of addressing the quality of life needs of older cancer patients and make recommendations and provide practical guidance.	V	The quality of life of elderly patients should be significantly considered in patient care. It recommends that quality of life (QoL) assessments should be performed at baseline and repeated at regular intervals; performing QoL assessments is feasible as it enables the detection of unknown geriatric problems, leading to patient-appropriate

					interventions and treatment.
Wagle, K. C., Skopelja, E. N., & Campbell, N. L. (2018).	Caregiver- based interventions to optimize medication safety in vulnerable elderly adults: a systematic evidence-based review	Systematic review	To investigate the impact of caregiver-focused interventions to support medication safety in older adults with chronic conditions	III	Educational interventions improve caregivers' preparedness, confidence and efficacy, and medication knowledge. Collaborative Care enhances the quality of care outcomes and reduces hospitalization.