# GEC PIPELINE



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## Reminder: NAGEC/NAGE Annual Meeting at the Gerontological Society of America (GSA) Conference

The 2010 Annual Meeting of NAGE/NAGEC is currently scheduled for Friday, November 19, from 4:00 to 6:30 p.m., at the <u>Doubletree Hotel</u>, 300 Canal Street, New Orleans, LA 70130. A specific room for the meeting will be assigned at a later date. Light refreshments will be served beginning at 4:00, with the meeting to start at 4:30. Please note that the Doubletree Hotel is approximately three blocks from the Hilton, which is the GSA host hotel.

## National Training and Coordination Collaborative (NTACC) Geriatric Education Centers

Julianne Manchester, PhD, NTACC Project Director

## NTACC at the Gerontological Society of America (GSA) 2010

The NTACC will be presenting a Pre-Conference Institute (PCI) at GSA 2010 in New Orleans, LA, November 19, 2010, (8 a.m. to Noon). We are also offering NTACC-GEC Evaluation Consultations on November 20 during the conference (look for details by e-mail).

#### **Pre-Conference Institute**

"Mixed Methods for Evaluating Educational Interventions in Support of Evidence Based Practices (EBPs)" The Workshop will focus on:

- Applying the literature and field evidence from diabetes management and falls prevention on linkages between educational interventions, knowledge gain, and Evidence Based Practices. Presenters will specifically demonstrate geriatric education outcomes of a field-based case study in the area of diabetes management.
- Map the translation of literature and GEC field examples to local programming and evaluation. Participants will work together through discussion groups to place measurable indicators into a model for their own evaluation planning.
- Demonstrate the importance of project stakeholders in evaluation planning for specific practice demonstrations. Participants will discuss the importance of selecting and involving stakeholders at the front end of projects that seek practice change outcomes.
- Identify contextual factors pertinent to implementing EBP-based interventions. These may include organizational
  opportunities for practices to occur, facility-specific policies and procedures, trainee willingness to adopt practices,
  professional discipline, or program exposure levels (among others). Strategies for integrating these contextual
  factors into evaluation designs will be offered.

Faculty: Christine Arenson, MD (Pennsylvania GEC- Thomas Jefferson University); Karen Bowman, PhD (CWRU); Julianne Manchester, PhD (CWRU); Elyse A. Perweiler, MPP, RN (UMDNJ GEC); Julia Rose, PhD (CWRU); Joan Weiss, PhD (HRSA)

### NTACC-GEC Evaluation Consultation at GSA 2010

Set up an appointment with an evaluation specialist to discuss your evaluation plans or ideas and questions for NTACC evaluation experts at GSA. Guidance on developing logic models, creating evaluation plans, or general evaluation strategies may be discussed. Feel free to contact Julianne Manchester, PhD, NTACC Project Director, 216-778-7147, or Vanessa Astraitis, Project Coordinator, 216-778-8367, for more information. Check the NTACC website, <a href="http://ntacc.bhpr.hrsa.gov/">http://ntacc.bhpr.hrsa.gov/</a> periodically for updates.

## **West Virginia Geriatric Education Center**

## Nancy Daugherty, Program Coordinator

## **Inter-professional Curriculum Committee**

The WVGEC has engaged a small but dedicated group of health professionals to assist in overseeing grant outcomes and evaluate effectiveness, as well as, assist with development of training modules on End of Life Care, Inter-professional Competency Guide for Geriatrics, and Action Planning for organizational change. The group reviewed the WVGEC Annual Report for 2007 – 2010 and approved a job description for members from medicine, nursing, pharmacy, social work, dentistry and education. They will meet bi-monthly, either in person or via teleconference.

### **WVGEC Annual Report**

The WVGEC Annual Report was distributed to our state legislator, rural partner, consortium members, other interested individuals and the GEC network.

### **Friends of Geriatrics**

Work continues from this inter-professional group who meet monthly to network and advance work in geriatrics. Recently the WVGEC presented at an Advanced Nurse Practitioners training event, VA Medical Center, Grand Rounds and monthly geriatrics lunchtime learning events.

### West Virginia Geriatric Society Annual Scientific Assembly

Planning has been underway for the West Virginia Geriatric Society Annual Scientific Assembly which includes panel discussions about dementia, cancer screening for the elderly and overcoming barriers to inter-professional care in clinical practice and education. Poster presentations and abstracts from residents and students were judged with the winner receiving a scholarship to the AGS meeting in May.

## **Health Literacy in Older Adults**

Health Literacy in Older Adults continues to be a priority and the 4<sup>th</sup> Training session sponsored by the WVGEC will be held in December. We continue to emphasize completion of an action plan that focuses on improving patient encounters, faculty education and/or student teaching projects.

A special guest lecture was presented by Jose' R Maldonado, MD, FAPM, FACFE, Associate Professor of Psychiatry and Medicine from Stanford University on "From Metabolic Disorder to Psychiatric Disturbance: Presentation, Prevention and Treatment of Delirium"

## South, West, and Central Consortium GEC of Texas (SWAC-C GEC)

## Joe Zapata, Jr., Geriatrics Education Specialist

The San Antonio-based South, West, and Central Consortium GEC of Texas is delighted to be the beneficiary of a contract agreement award from HRSA for the next five years. We just completed our "Annual Conference on Aging: Maximizing Health in the Boomer Generation;" and in early spring of 2011, we will hold our annual Medico-legal Conference in Aging

with the primary goal of increasing the knowledge and expertise of today's and tomorrow's health care, legal, and law enforcement professionals in the critical arena of exploitation and abuse issues in aging. Then, in the summer of 2011, we will hold our annual Summer Institute on Aging ("G&G 101"). The proposed 40-speaker, 40-hour introductory program in geriatrics is open to all community health care professionals. Faculty from the University of Texas Health Science Center at San Antonio, the San Antonio GRECC at the VA, and area universities will present their expertise as it relates to the treatment and care of aging patients. We also are in the planning stages for the Annual Conference on Aging scheduled for early fall 2011 with topics from new and recognized speakers across the nation.

We are seeking your participation not only as attendees, but *if you have eminent faculty to suggest as speakers*, please let us know. If you would like to join any of the conferences that we offer, have names to suggest, or have any questions, please contact Barbara Giles, our GEC's Administrator, who will be able to assist you. She can be reached at 210-562-6561 or e-mailed at GilesB@uthscsa.edu.

## **Texas Consortium Geriatrics Education Center**

Robert E. Roush, EdD, MPH, Director

## How Health Care Professionals Can Help Prevent Elder Financial Abuse

Note: this article has been edited for length. Please contact Dr. Robert Roush directly at <u>rroush@bcm.edu</u> for the complete article.

A March 2009 study, "Broken Trust: Elders, Family and Finances," funded by the MetLife Mature Market Institute showed that financial losses by maybe a million exploited seniors could be as high as \$2.6 billion a year. See this report at <a href="http://www.metlife.com/assets/cao/mmi/publications/studies/mmi-study-broken-trust-elders-family-finances.pdf">http://www.metlife.com/assets/cao/mmi/publications/studies/mmi-study-broken-trust-elders-family-finances.pdf</a>. And in survey results released this past June 15<sup>th</sup> on World Elder Abuse Awareness Day, the non-profit Investor Protection Trust (IPT) reported that as many as one in five older Americans say they have experienced financial exploitation or been targeted by persons attempting to defraud them of their hard-earned savings. See this link for the full report: <a href="http://www.investorprotection.org/learn/research/?fa=eiffeSurvey">http://www.investorprotection.org/learn/research/?fa=eiffeSurvey</a>

As the aging population nearly doubles in another 20 years, so will those with the risk [for financial exploitation]...and generally, health care providers don't delve into this highly personal area of a patient's life. There are, though, some unscrupulous financial advisors who know how much more risk a person with Mild Cognitive Impairment is likely to take; sadly, so do equally unscrupulous family members. If the amount lost to fraud is significant, seniors simply don't have the time to make it back. This has health consequences when victims have to choose between out-of-pocket health services and food and shelter.

To combat this serious and growing problem, clinicians at Baylor College of Medicine's Huffington Center on Aging and Texas Consortium Geriatric Education Center developed an easy-to-use set of "red flag" questions that busy primary care physicians and their office staff could use with their older patients. This "clinician's pocket guide" also gives referral routes if there is a positive screen.

See this hyperlink – <a href="http://www.investorprotection.org/downloads/pdf/learn/research/EIFFE\_Clinicians\_Pocket\_Guide.pdf">http://www.investorprotection.org/downloads/pdf/learn/research/EIFFE\_Clinicians\_Pocket\_Guide.pdf</a> – to obtain a copy of the pocket guide. The pocket guide can also be downloaded on the website of the American Academy of Family Physicians, who has a cooperative agreement with the non-profit Investor Protection Trust (IPT) to use the materials produced by the Baylor project in their annual geriatrics course. See this link for the pocket guide from the AAFP: <a href="http://www.aafp.org/online/en/home/publications/news/news-now/news-in-brief/20100714wklynwsbrfs.html">http://www.aafp.org/online/en/home/publications/news/news-now/news-in-brief/20100714wklynwsbrfs.html</a>

The IPT, NASSA, and the National Adult Protective Services Association have teamed to work with multiple national health-related organizations to offer continuing education for health professionals to increase their clinical awareness of the issue and to provide them with a proven screening tool and with effective referral routes. GEC's are perfectly situated to work with the investor educators in their states to coordinate this much needed professional development program that has the potential to save many elders from losing their wherewithal to have a good old age.

### Montana Geriatric Education Center

Terry Egan, M.S. Associate Director MTGEC

#### **Alzheimer's Disease: From Research to Best Practices**

On October 12, 2010 the Montana Geriatric Education Center (MTGEC) in cooperation with the Alzheimer's Association of Montana, the Montana Gerontology Society, The University of Montana Skaggs School of Pharmacy, and Northwest Research & Education Institute provided a daylong conference to apply research to best practices. The four conference presenters are internationally recognized for their contributions to the understanding and treatment of Alzheimer's Disease. Davis S. Knopman, M.D., Mayo Clinic, provided insight into a new view of Alzheimer's Disease and what it means for future diagnosis, research and treatment. Susan McCurry, PhD., University of Washington, focused on diagnosis and treatment of cognitive disorders in older adults. Assessment and management of behavioral problems in dementia was explored by Lilian Thorpe, M.D., PhD, FRCPC, University of Saskatchewan. The conference ended with Carol J. Farran, RN, FAAN, Ph.D., Rush University College of Nursing, relating the critical role of family caregivers in today's changing health care climate.

This interactive videoconference, designed for health care professionals working in geriatric care and education, had 256 participants in twenty sites across the state. Participants completed pre- and post-test evaluations and an implementation plan that they will work on in coming months. CE/CME credits were awarded to health care professional in nine different professions.

Two video conference follow-up sessions are planned for early 2011. These sessions focus on putting knowledge into practice through assessment, management, and development of care plans for patients.

## **Meharry Consortium Geriatric Education Center**

## Ruth G. Garrett, Ph.D., MPH

Many changes are underway at Meharry Consortium Geriatric Education Center (MCGEC Meharry/Vanderbilt at Tennessee State University). Dr. Garrett retired, but continues to serve as a consultant for Meharry and Vanderbilt Geriatric Educational Centers. Dr. Gary Duncan also has retired and Dr. Pradumna Singh has become the chair of neurology. Mr. Joseph Beaver will retire at the end of 2010. Neurology is now positioned in internal medicine, but their offices remain on the same floor as MCGEC.

The new Dean of the School of Medicine, and Vice President for Health Affairs at Meharry Medical College, Charles P. Mouton, M.D., M.S., has assumed the position of PI of the new five-year grant, awarded in July 2010. The MCGEC now falls under the Dean's office and has enlarged its potential with Dr. Mouton who is a geriatrician with board certification in family medicine, as PI. His major areas of research interests are violence and elderly mistreatment of older women, as well as health promotion and disease prevention in minority elders.

Grace Smith has left the Council on Aging of Greater Nashville to join MCGEC as the project coordinator. Smith, an MSW and a creative and collaborative aging services professional with over 15 years of experience in project management, program coordination and grant administration, assumes this position in late October.

The first series of the Geriatric Certificate Program has just been completed with a "full to capacity room" of 24 professionals! Due to the over abundance in attendance, the course will be repeated in November. Our affiliation with family medicine continues, with Dr. M. Sidani, geriatrician, leading an excellent training program for his 15 residents in family medicine.

On November 12, a Senior Wellness Seminar will be presented with keynote speaker, Emily Kimball, MSW, (www.TheAgingAdventurer.com); Dr. Nieli Langer, Ph.D., New Rochelle, NY and Vincent Morelli, M.D., Associate Professor, Community and Family Medicine, Meharry Medical College. Responders at the seminar will include Vanessa J. Briscoe, Ph.D., N.P. and Kristy Goodman, MSW. This seminar continues to meet our interprofessional training sessions.

## Ohio Valley Appalachian Regional Geriatric Education Center (OVAR/GEC)

Arleen Johnson, PhD, Director and Julie Brock, MA, Associate Director

## **Evidence-Based Falls Prevention Project**

A partnership between the OVAR/GEC at the University of Cincinnati and Maple Knoll Village (MKV) Nursing Home in Springdale, Ohio, will enable the establishment of an evidence-based falls prevention initiative. Maple Knoll Village is a 180-bed nursing home facility with rehabilitation, dementia and long term care units. This site was chosen because MKV is interested in creating a culture of safety across the facility and although it has a pilot falls- prevention program in place, still experiences fall rates higher than desired. Gregg Warshaw, MD, Director of OVAR at UC also Medical Director of MKV Nursing Home, will oversee program design and evaluation.

The Inter-professional Falls Management Program Team will have representation from medicine, nursing, housekeeping, physical therapy, social work, and activities. The team will determine baseline fall/injury rates and identify roles and responsibilities of team members. All 140 professional and support employees with patient contact will participate in training and retraining. The curriculum will emphasize a case-based, interactive learning experience, with clinical and didactic components. Interventions will include diagnosis and medication reviews; assessment of gait and balance, orthostatic hypotension, muscle strength, vision, hearing, environmental safety, osteoporosis and "fear of falling" and provision of timely physical and occupational therapy, counseling and encouragement of activity and routine exercise. Evaluation strategies resulted from the collaborative efforts of Dr. Warshaw at UC, who provided process knowledge; Dr. Barber, the OVAR evaluator at UL, who provided logic model experience; and Dr. Bonaguro, the OVAR outside evaluator at Western KY University, who assess the educational experience and document changes in falls outcomes for MKV patients.

## **Essentials of Dementia: Becoming an Effective Trainer**

On Thursday, November 4, 2010, the OVAR GEC will co-sponsor a training with the local Alzheimer's Association. "Essentials of Dementia: Becoming an Effective Trainer" is a train-the-trainer format. It will be at the Barren River Development District building in Bowling Green, KY from 8:00 a.m. – 4:30 p.m. Central time.

An estimated 4.5 million Americans have Alzheimer's disease. The quality of life for persons with Alzheimer's disease is directly related to the relationship they have with their direct care providers. In order to provide quality care, direct care providers must be trained in dementia care. This training will help trainers and educators to develop effective dementia care training programs for their direct care providers and family caregivers. Participants in the training will learn creative ways to teach dementia care concepts as well as innovative strategies for incorporating training into everyday work. Participants will receive a training manual complete with presentations and interchangeable learning activities for implementation within their training programs.

This training is designed for professionals who are responsible for implementing training in their care settings (e.g., Physicians, Nurses, Nursing Home Administrators, Home Health, Area Agencies on Aging, Allied Health, Social Workers, Extension Agents, Staff Development Coordinators, and other health care professionals). 8.4 hours of CE will be requested for Social Work (KY) and Nursing (KY/TN) (includes KY Nursing Home Administrators).

A registration fee of \$30 is payable to the University of Kentucky. This fee includes refreshments, instructor manual, training materials, lunch, and CE credits. See *Pipeline* Calendar for registration information. For more information, contact Julie Brock at 859.257.1510.

## 2010 CALENDAR OF EVENTS

DATE/TIME	EVENT	LOCATION	CONTACT
November 4, 8 a.m. to 4:30 p.m.	Essentials of Dementia: Becoming an Effective Trainer	Bowling Green, Kentucky	Julie Brock julie.brock@uky.edu 859-257-1510 http://www.mc.uky.edu/aging/gec. html
November 12, 2010 8:30 a.m. to 4:00 p.m.	Greater Cincinnati Chapter of Alzheimer's Association: The 21 <sup>st</sup> Symposium		513-721-4284 www.alz.org/cincinnati/in my co mmunity_12385.asp
November 19, 2010 4:00 – 6:30 p.m.	Annual meetings of NAGE and NAGEC at the Gerontological Society of America Meeting	Doubletree Hotel, New Orleans, LA (room TBA)	Phil Clark, President aging@uri.edu (401) 874-2689
December 2-4, 2010	Health Literacy in Older Adults	Ramada Inn South Charleston West Virginia	Ms. Mary Annie Program Specialist WV Geriatric Education Ctr 3110 MacCorkle Avenue Charleston, WV 25304 mannie@hsc.wvu.edu or 304-347- 1295
December 3, 2010	East Tennessee State University Geriatric Conference on Incontinence	Johnson City, Tennessee	Peggy McMonnell MCCONNEL@mail.etsu.eduemail 423-439-4508
May 9-10, 2011	Issues in Aging Conference	Dearborn Inn 20301 Oakwood Blvd., Dearborn, MI	Donna MacDonald donnamacdonald@wayne.edu 313-577-2297

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