



Geriatric Education Centers

# PIPELINE

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## NAGE/NAGEC

*Stacy Barnes, Ph. D., President*

At the time of writing, our membership is anxiously awaiting the announcement of the Geriatric Workforce Enhancement Program (GWEP) awards. While these awards represent a significant deviation from the past several decades of federal funding provided to Geriatric Education Centers (GECs), the new awards will not significantly change the role or operations of NAGE or NAGEC. We have helped create a tight-knit community of GECs over the past three decades and the new GWEP award recipients will now be folded into our network. We recognize that many GECs may continue, even if they do not receive a GWEP award, and we hope that these organizations will continue their membership in NAGE/NAGEC.

Our Board of Directors wishes to assure you that NAGE and NAGEC will remain in continuous operation throughout the transition period and beyond. All current Board members have agreed to serve out the current year, regardless of whether or not their organization receives a GWEP award. Board elections will be held, as usual, at our annual meeting in November during the Gerontological Society of America's annual meeting in Orlando, Florida.

Our Board members have also recently reviewed the bylaws of both organizations and only minor edits were necessary in order to move us forward. All current and past geriatric education centers – whether funded by the GEC award or the GWEP award – are welcome to be members. The GEC Pipeline newsletter will also continue, highlighting upcoming trainings, programs, success stories, and lessons learned. NAGE will continue to employ a public policy advisor so we can effectively advocate for geriatric education and funding at the national level, and continue to serve as a unified voice for the goals and interests of organizations providing education in geriatrics and gerontology. And, last but not least, our Website Development Committee will continue to build upon and expand our website to make it a useful resource for all stakeholders ([www.n-age.org](http://www.n-age.org)).

On behalf of our Board of Directors, I would like to take this opportunity to extend a heartfelt thank you to the GEC network. Together, we have educated and trained thousands of health professionals in geriatric care. Geriatric's curriculum is now integrated into many educational and health care systems throughout the country. We have improved the functioning and clinical skills of interprofessional teams, and improved the quality of health care for all older adults in the United States. We should take pride in these accomplishments and take time to celebrate them. The NAGE/NAGEC Board does not view the new GWEP funding awards as an "end" to the GECs, but rather a continuation of the great work we have done over the past three decades. Despite our best efforts, there remains an urgent and growing need to educate health professionals, caregivers, patients and families in geriatric care. GWEP

award recipients and other geriatric education centers will carry on this mission. I hope that many of you remain an active part of this important and vital network.

## **Florida Coastal Geriatric Resources, Education and Training Center**

*Kristine Freitas, B.S. - Continuing Education Coordinator for the Florida Coastal Geriatric Resources, Education and Training Center (GREAT GEC) at Nova Southeastern University*

### **Dr. Naushira Pandya Participates in Important White House Forum on Antibiotic Stewardship**

Dr. Naushira Pandya, Project Director of the GREAT GEC and Professor and Chair of the Geriatrics Department at Nova Southeastern University's College of Osteopathic Medicine was invited to participate in the White House Forum on Antibiotic Stewardship on June 2nd, 2015.

The more often antibiotics are used, the more likely they are to lose their effectiveness - a realization much of the health care community is already quite familiar with. Overuse and misuse of antibiotics have allowed some infectious bacteria to become increasingly resistant to them, making the drugs less effective in fighting infection and illness. Combating and addressing antibiotic resistance requires a concerted effort by health care providers, stakeholders, and patients to unite in their efforts to utilize antibiotics responsibly.

In this effort, Dr. Pandya was one of approximately 250 leaders from health care, food and agriculture, and business organizations invited to participate in discussions surrounding the appropriate use of antibiotics. The forum consisted of an Opening Session which was live-streamed by the White House, followed by separate breakout sessions for health care and food and agriculture. The health care sessions focused on challenges concerning appropriate antibiotic use and development of antibiotic stewardship programs in the inpatient, outpatient, and long-term care settings, as well as diagnostics and development of new drugs. Dr. Pandya participated as a panelist in the long-term care session and spoke of the changes in the long-term care setting, including, increasing acuity and medical complexity, care processes, and staff and practitioner knowledge. Dr. Pandya specifically highlighted the difficulty in bringing about change in practice and culture in the long-term care setting where infection propensity is high, care transitions common, and pressure from families and caregivers to use antibiotics and perform tests is commonplace.

Additional information on the White House Forum on Antibiotic Resistance can be found on [www.whitehouse.gov](http://www.whitehouse.gov) and in the document, [\*National Action Plan for Combating Antibiotic-Resistant Bacteria\*](#).

## **Montana Geriatric Education Center**

*Gayle Hudgins, Pharm. D., Director, MTGEC; Terry Egan, M.S., Associate Director, MTGEC*

### **Montana Alzheimer's/Dementia Workgroup Developing ADRD State Plan**

Montana is one of seven states without a plan for Alzheimer's Disease and Related Dementias (ADRD). The Montana Chapter of the Alzheimer's Association and the Billings Clinic organized a group of concerned citizens, healthcare providers and agencies to begin working on a state plan. The group has been meeting for a year and has made good progress on the goal to have a draft state plan by the end of 2015.

The Montana Alzheimer's / Dementia Work Group exists to thoroughly understand the needs of Montanans affected by Alzheimer's Disease and Related Dementias, and to recommend and implement the best ways possible to detect, manage and support the individuals, their families and care givers across the spectrum of the diseases.

Vision statements focus on Montana citizens, individuals with ADRD, family members and caregivers, providers and policy makers. The group is working toward making Montana a dementia friendly state.

The Montana Geriatric Education Center has been involved with the workgroup from the beginning. A partnership formed to provide education on dementia in Montana communities and to hear stories of how families and communities were addressing the needs of individuals with dementia and what supports or services are needed. Thirteen Town Hall Meetings were conducted in May and June 2015 in order to provide education and find out what patients, caregivers, families, and communities need. Input from these meetings is currently being analyzed and will be used to shape the Montana ADRD State Plan. A statewide inventory of services and educational programs is being conducted.

The information gathering stage is about completed and the workgroup is ready to look at the data and resources in the state to determine challenges and strengths as we begin the task of drafting the Montana State Alzheimer's/Dementia Plan.

## **Pacific Islands Geriatric Education Center (PI-GEC)**

*Ritabelle Fernandes, M.D., MPH*

### **Support for Home Health and Hospice Services in Palau**

For the last five years, there has been steady and deliberate effort within the Republic of Palau to infuse the healthcare infra-structure with a solid base from which to build a home health and hospice program. Now after years of planning and preparing, it seems like implementation for these services is at hand. In order to understand how much work and thought has gone into having these services available to the people of Palau, let's take a quick look at events that have led us up to the present state.

On May 7, 2010, the National Healthcare Financing Act was signed into law, becoming Palau's first step in helping its citizens pay for medical expenses. Universal access to healthcare is now available to everyone through the National Health Insurance and Medical Savings Account. Private medical insurance companies have also entered the healthcare market.

In October of 2014, the director of the Palau AHEC, Dr. Greg Dever, recommended sending a team from Palau to Guam for a two-week practicum to learn and observe first hand from a successful home health and hospice program model. The trainees accompanied staff on home visits, sat in on interdisciplinary team meetings, observed intake and admissions protocols, as well as received instruction on policy and procedures.

During the entire five-year GEC grant period, the PI-GEC has provided geriatric and palliative care training to healthcare professionals and administrators; and has served as a catalyst in support of developing a program of home health and hospice services in the area. The homebound program at the Belau National Hospital provides physician and nurse home visits to homebound frail elderly and disabled adults. This was an ideal setting for the expansion of a home health and hospice program in Palau.

Most recently, PI-GEC faculty provided home health and hospice training at Belau National Hospital in March 2015. A stakeholder meeting was also conducted in March 2015 to discuss implementation and identify a payer source for these new services. There was overwhelming support to institutionalize home health services at the Belau National Hospital and expand by including hospice services to the list of services available to hospital patients and families. This has been a major undertaking (of which the PI-GEC was a partner) and success story of the government and private sector working in tandem to address the need for home health and hospice care in this medically underserved area of the world.

## Stanford Geriatric Education Center

*Dongmei Tan, MPH, Marian Tzuang, MSW, Melen McBride, PhD, RN, FGSA*

### **Raising Dementia Awareness and Caregiving for LGBT Older Adults from Diverse Communities**

On February 20th, 2015, an educational conference on “Preparing for the Changing Horizon: Dementia Awareness and Caregiving for LGBT Older Adults from Diverse Communities” was held in San Francisco, CA. The conference was designed for diverse Lesbian/Gay/Bisexual and Transgender older adult caregivers, their care receivers with cognitive challenges, family and friends, as well as healthcare/social service providers and policy makers. The conference was developed and sponsored by the LGBT conference planning committee from a partnership between the Stanford Geriatric Education Center (SGEC), Family Caregiver Alliance, San Francisco (FCA/SF); Openhouse San Francisco (SF-OH; Alzheimer’s Association, Northern California/Northern Nevada Chapter (AA-NCal/NNVC); UCSF Northern California Geriatric Education Center/Institute on Aging Consortium (UCSF/NorCal GEC); and the County and City of San Francisco Department of Aging and Adult Services (SFDAAS). In her opening welcome at the conference, Dr. Marcy Adelman, Co-Founder of Openhouse, the only senior service program in San Francisco serving the older LGBT community, called the meeting a historic event as it is the first time that LGBT caregivers, LGBT care receivers, families, and healthcare providers are talking with each other about dementia care and the LGBT senior community.

Members of the Planning Committee were: Chair, Melen McBride, PhD, RN, FGSA, Associate Director Emeriti, SGEC, Stanford University, School of Medicine, Palo Alto; Co-Chairs Leah Eskenazi, MSW, Operations Director, FCA/SF and Michelle Alcedo, Director of Programs, SF-OH; and Members: Marcy Adelman, PhD, Board Member and Chair, Research and Policy Committee, SF-OH and Member, Advisory Council, SFDAAS; Edie Yau, MA, Director of Diversity & Inclusion, AA-NCal/NNVC, San Jose; Joan Abrams, MPA, Associate Director, NorCal GEC, SF and Academic Coordinator, Geriatrics Division, Department of Medicine, UCSF; Louise Aronson, MD, MFA, Director, NorCal GEC, SF and Associate Professor, Geriatrics Division, Department of Medicine, UCSF; A.J. Dugay, Education Coordinator, FCA/SF; Erica J. Erney, LCSW, Dementia Case Manager, Continuing Care Department-Memory Clinic, Kaiser Permanente, Santa Clara Medical Center, Sunnyvale; and Caitlin Morgan, Community Liaison, NorCal/Institute on Aging Consortium, SF. The SGEC team included: Dolores Gallagher-Thompson, PhD, Director, Marian Tzuang, MSW, Program Coordinator, Ann Blick Hamer, MA, LCSW, Dementia Specialist, Dongmei Tan, MPH and Anney Majoros, Program Assistants.

The purpose of the one-day program is to educate participants about dementia and the unique caregiving issues that are experienced by LGBT caregivers, care recipients, family and friends, as well as national, state, and local resources to support LGBT caregivers and service providers. The sessions covered topics on the challenges of addressing LGBT aging and caregiving issues for providers in senior services, health equity and aging among LGBT older adults, considerations for LGBT affirming assessments, support and resources for dementia care, diagnosis and treatment, and

cultural differences in dementia care of LGBT older adults. These topics emphasized perspectives in diverse communities and cultural competency.

Individual presentations with PowerPoint slides, roundtable discussion between health professionals and LGBT caregivers, panel session of health professionals and LGBT care providers and care receivers, post-session Q & A, and a Resource area for 10 service agencies and non-profit organizations serving the LGBT community or run by LGBT organizations were strategies used to deliver information and encourage interactions among participants. The main presenters are listed below:

<p>Karen Fredriksen-Goldsen, PhD  <b>(keynote speaker)</b>          Professor and Director of Healthy Generations Harford Center of Excellence, University of Washington</p>	<p>Health equity and aging among LGBT older adults, addressing dementia awareness and priority needs in diverse communities</p>
<p>David W. Coon, PhD  <b>(keynote speaker)</b>          Associate Vice Provost and Professor College of Nursing &amp; Health Innovation, Arizona State University</p>	<p>Dementia care: considerations for LGBT affirming assessments, support and resource provision</p>
<p>Geoffrey A. Kerchner, MD, PhD          Associate Medical Director at Genentech and “Consulting” faculty at Stanford University, School of Medicine</p>	<p>Alzheimer’s disease and other dementias: early and ongoing diagnosis, treatment and clinical trails          Sharing lessons learned: integrating cultural values, beliefs and practices into dementia care of LGBT older adults</p>
<p>Lou A. Bordisso, Ed.D, LMFT          Early Stage Advisor, speaker, and media spokesperson for the national Alzheimer’s Association</p>	<p>Sharing lessons learned: integrating cultural values, beliefs and practices into dementia care of LGBT older adults</p>
<p>Lawrence M. Mc Glynn, MD          Clinical Associate Professor, Psychiatry &amp; Behavioral Science, Stanford University Positive Care Clinic</p>	<p>Substance use and effects on cognition in the LGBT senior population</p>
<p>Judith Redwing Keyssar, BA, RN          Director of Palliative Care Program and End of Life Care, Seniors at Home, Jewish Family and Children’s Services</p>	<p>Be prepared! Lessons for the living</p>

One of the highlights was the welcome talk of State Senator Mark Leno (D-San Francisco), a member of the LGBT community, whose family spent 10 years caring for his mother who had Alzheimer's disease. He expressed support and encouragement to the LGBT caregivers and care receivers, families, and service providers to continue to help bring caregiving issues to the policy level. Another highlight was the presentation of the keynote speakers, Dr. Karen Fredriksen-Goldsen and Dr. David W. Coon. Dr. Fredriksen-Goldsen discussed extensively health disparities among LGBT older adults and efforts to close the gap. She also introduced some of her research on LGBT communities. Dr. Coon’s presentation about several models applied to LGBT population studies and interventions also attracted the participants’ attentions. Another highlight was the roundtable discussion of an LGBT family or partner caregivers from

diverse communities. They shared their life experiences and personal stories of caring for their loved ones with dementia.

The 227 conference attendees included: LGBT caregivers (9.6%), older LGBT care recipients (1.7%), healthcare providers (33.9%) and others. The service providers included: nurses, social workers, public health workers, direct care workers, therapists, psychologists, and advocates. The race/ethnicity of attendees was: White (53%), Asian (21%), Black or African American (7%), American Indian or Alaska Native (0.6%), and Native Hawaiian or other Pacific Islander (0.6%), and others. Most of the attendees expressed great satisfaction with the conference and gave high marks for the presentations, conference contents, networking, resource exhibits and the venue (the Milton Marks Conference Center, Hiram W. Johnson State Office Building). During the Q & A that followed each session, there was active and substantive exchange of information, sharing/clarification of perceptions and candid examination of critical issues related to the need for more LGBT affirming healthcare services and resources for LGBT older adults with dementia and LGBT caregivers. Many hoped that more programs would be offered in the future on dementia and caregiving issues and identified future topics on: end of life, financial issue, self-care for caregivers, cultural competency training, and transgender health issues.

The success of the conference underscores the importance of community collaboration. Together, SGEC and the partners reached out to their networks and beyond through a planning committee. The committee shared expertise, resources and powers of persuasion to communicate the value of awareness and understanding about cognitive changes in the aging LGBT community. Results of a literature review and a pre-event needs assessment survey of the LGBT community and healthcare providers guided the process of developing the curriculum for the program.

Two newspapers that serve the LGBT community gave visibility to the conference and the generous support from several local businesses helped create a welcoming environment. Other marketing approaches were used. Dr. Marcia Adelman, a clinical psychologist and a columnist for the San Francisco Bay Times (SF-BT) published three articles on dementia and the LGBT community before the event; the e-blasts on Betty's List and announcements were posted on the SF-BT website. The Bay Area Reporter published news on the conference that can be accessed at <http://www.ebar.com/news/article.php?sec=news&article=70440>

The videos of the presentation are available through the SGEC YouTube website:

<https://www.youtube.com/playlist?list=PLa9zTEPoIDSew966Zd8Lyw1Zg7irtfOHH>

For more information, please contact Dr. Melen McBride at [mcbride@stanford.edu](mailto:mcbride@stanford.edu)

## **West Virginia Geriatric Education Center**

*Hanna Thurman, MSW, LGSW, MPA, Training & Development Manager*

Elder abuse is a serious public health problem. A recent White House Conference on Aging Policy Brief on Elder Justice examines the impact of elder abuse, neglect and financial exploitation and challenges organizations in the aging field to respond. In West Virginia issues around elder abuse and financial exploitation in particular have become front and center on the minds of health professionals and those who provide services for older adults. The West Virginia Future of Aging and Caregiving Task Force of which Nancy Daugherty, WVGEC Associate Director, is a member, meets monthly for ongoing dialogue about addressing and preventing elder abuse. Trainees at one of the WVGEC's major yearly initiatives, the Advanced Geriatrics Skills Program, suggested elder abuse should be a stand-alone topic in the core curriculum.

WVGEC's current training activities ensure providers and caregivers have the opportunity to learn about elder abuse, especially as it relates to Alzheimer's disease and related dementias. The Alzheimer's Association – WV Chapter,

WVGEC, and WV Area Health Education Centers sponsored eight statewide “Alzheimer’s and Dementia University” summer events for families, caregivers and professionals. Caregivers in attendance had numerous questions during the legal and financial sessions – preventing financial exploitation was discussed again and again. Another opportunity to address decision-making is the Respecting Choices™ curriculum clarifying choices at the end of life. WVGEC Training & Development Manager, Hanna Thurman, MSW, LGSW, MPA, Advance Care Planning Facilitator, will assist with the training event in July.

Additionally, WVGEC recently partnered with the West Virginia School of Osteopathic Medicine (WVSOM), Southeastern Area Health Education Center, Mountain STATE OPTI, WVSOM Rural Health Initiative and the WVSOM Alumni Association, Inc. for the Primary Care Seminar “A Continuum of Care for Vulnerable Populations: Special Needs and Elderly Patients.” Attended by osteopathic medical students, nurses, social workers, physicians, and physician assistants, the program highlighted abuse and neglect issues, differences between capacity and competency, guardianship and conservatorship, advanced planning, estate/elder planning, and the Elder Justice Act.

In September, WVGEC will co-sponsor the WV Geriatrics Society for the 2015 Annual Scientific Assembly, “A Tragic Story of Elder Abuse and Addiction: The Case of Lila Perkins.” Video vignettes will be shown to emphasize a number of elder abuse topics such as working with adult protective services.

## Calendar of Upcoming Events

<b>July</b>			
<b>DATE</b>	<b>EVENT</b>	<b>LOCATION</b>	<b>CONTACT</b>
July 9, 2015 8:00 am – 12:00 pm	The 2015 Research Conference on Aging	Los Angeles, CA	UCLA Multicampus Program in Geriatric Medicine and Gerontology (MPGMG) 310-825-8253
July 22, 2015 12:00 – 1:00 pm	Geriatrics Lunchtime Learning Health Disparities from a Geriatrics Perspective	Charleston, WV	Hanna Thurman hthurman@hsc.wvu.edu 304-347-1225 (To access this program via webcast, please visit <a href="http://www.camcinstitute.org/education/catalogs/geriatrics.htm">http://www.camcinstitute.org/education/catalogs/geriatrics.htm</a> )
July 28, 2015 8:00 – 4:00 pm	Respecting Choices	Beckley, WV	Hanna Thurman <a href="mailto:hthurman@hsc.wvu.edu">hthurman@hsc.wvu.edu</a> 304-347-1225
<b>August</b>			
<b>DATE</b>	<b>EVENT</b>	<b>LOCATION</b>	<b>CONTACT</b>
August 26, 2015 12:00 – 1:00 pm	Geriatrics Lunchtime Learning “Fall Screening and Prevention: How Everyone Can Make A Difference”	Charleston, WV	Hanna Thurman hthurman@hsc.wvu.edu 304-347-1225 (To access this program via webcast, please visit <a href="http://www.camcinstitute.org/education/catalogs/geriatrics.htm">http://www.camcinstitute.org/education/catalogs/geriatrics.htm</a> )

<b>September</b>			
<b>DATE</b>	<b>EVENT</b>	<b>LOCATION</b>	<b>CONTACT</b>
September 9 - 12, 2015	2015 Intensive Course in Geriatric Medicine and Board Review	Los Angeles, CA	Office of Continuing Medical Education David Geffen School of Medicine at UCLA 310-794-2620 <a href="https://www.cme.ucla.edu/courses/event-description?registration_id=94281">https://www.cme.ucla.edu/courses/event-description?registration_id=94281</a>
September 9 - 12, 2015	2015 Intensive Course in Geriatric Pharmacy and Board Review	Los Angeles, CA	Office of Continuing Medical Education David Geffen School of Medicine at UCLA (310) 794-2620 <a href="https://www.cme.ucla.edu/courses/event-description?registration_id=94281">https://www.cme.ucla.edu/courses/event-description?registration_id=94281</a>
September 15, 2015	Annual Long-Term Care Conference Synergy & Synthesis Empowering Care of the Elderly	Oahu, HI	Michiko Inaba, M.D. Conference Chair 808-523-8461
September 17- 20, 2015	Wisconsin Update in Geriatric Medicine & Board Review Course	Delavan, WI	Carol Hermann <a href="mailto:chermann@medicine.wisc.edu">chermann@medicine.wisc.edu</a> (60) 280-7000 x11643 GeriatricsBoardReview.com
September 17, 2015	West Virginia Geriatrics Society 11th Annual Scientific Assembly “A Tragic Story of Elder Abuse and Addiction: The Case of Lila Perkins”	Charleston, WV	Vanessa Ferrari <a href="mailto:vaferrari@hsc.wvu.edu">vaferrari@hsc.wvu.edu</a> 304-347-1295
September 23, 2015 12:00 – 1:00 pm	Geriatrics Lunchtime Learning “Yes, (West) Virginia: They Do Exist – Addressing the Unique Issues of Transgender Older Adults”	Charleston, WV	Hanna Thurman <a href="mailto:hthurman@hsc.wvu.edu">hthurman@hsc.wvu.edu</a> 304-347-1225 (To access this program via webcast, please visit <a href="http://www.camcinstitute.org/education/catalogs/geriatrics.htm">http://www.camcinstitute.org/education/catalogs/geriatrics.htm</a>

*The Geriatric Education Center of Michigan (GECM) is not responsible for the content of the newsletter, other than GECM articles. GECM edits to enhance readability, appropriateness and format.*