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Consortium of New York Geriatric Education Centers

Judy Howe, PhD, Principle Investigator, Consortium of New York Geriatric Education Centers
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Online Podcast Offerings

The CNYGEC provides online learning opportunities developed by partner Hartford Institute for Geriatric Nursing, New York University College of Nursing, and available through the Hartford Institute's E-learning Center. Topics cover the curriculum in Core Days 1, 2 and 3, and Elective Modules, and additional modules focus on dementia care. All can be accessed at the participants' convenience.

For those enrolled for the 40 hour Geriatric Scholars Certificate, 7 hours (equivalent of 1 full day) can be completed through this online learning, with Nursing Contact Hours available. This online offering also enables wide access to CNYGEC curriculum to those outside the program. Nursing CEs are available, provided by The NYU College of Nursing Center for Continuing Education in Nursing, accredited as a provider of continuing nursing education by the American Nurses' Credentialing Center's Commission on Accreditation. For more information, visit www.hartfordign.org/education/cnygec.

Core Days 1, 2 and 3 and Elective Topics include:

Risk Factors for Poor Outcomes in Older Adults:
Iatrogenesis, Frailty, Geriatric Syndromes, and Atypical
Presentation of Illness
Medication Management in the Older Adult-An
Overview
Internet Geriatric Resources
Chronic Disease in the Older Adult
Compliance vs. Adherence: Consequences for Older Adults
Preventive Measures
Palliative Care
Interdisciplinary Geriatric Assessment
Entitlements and Financial Issues
Settings in Care and Transition
Overview on Dementia

Comprehensive Geriatric Assessment
Some Preventive Measures for the Elderly
Forgotten Care: Oral Health-
Oral Health Issues and Management for Older Adults
Managing Emergencies
NH Module-Overview
NH Module-Nursing Care
NH Module-Culture Change and Res Dir Care
Oral Systemic Health Connection
Geriatric Assessment: Try This and How to Try This
Swallowing Disorders and the Management of the
Older Patient

Dementia topics include:

Overview on Dementia
Dementia Online Modules for Primary Care
Delirium: Patient- and Family-Centered Care Modules

Houston Geriatric Education Center

Kathleen Pace Murphy, PhD, Co-Investigator and Program Director

The Houston Geriatric Education Center (H-GEC), in partnership with Sam Houston State University and the Law Enforcement Management Institute of Texas hosted a **Demystifying Dementia Educational Conference for Law Enforcement Professionals** in Huntsville, Texas. Our H-GEC faculty, **Carmel Dyer, MD** (Geriatrician), **Kathleen Pace Murphy, PhD** (Geriatric Nurse Practitioner) **David Flores, PhD** (Social Work) presented topics on Dementia, Depression and Delirium, Elder Abuse and Mistreatment, Drug and Alcohol Misuse in Older Adults and **Ann St. John, OTR, MS** (occupational therapist) presented on Driving and Cognitive Impairment. Law Enforcement officers representing rural, urban and state law organizations evaluated the program very favorably. In addition, the officers provided excellent insight regarding additional aging topics that would be helpful in their professional roles working with an aging population.

Our **7th Annual Houston Geriatric Interprofessional Student Competition** was a great success. This year's competition **focused on certified nursing assistants (CNA) caring for older adults diagnosed with dementia in long term care facilities**. The five interprofessional student teams were challenged to conduct CNA needs assessments and identify cost neutral modifiable factors which could potentially enhance the CNA's work environment and job satisfaction. Fifty one certified nursing assistants participated in the needs assessments from five different long term care units. The participants represented all three shifts and completed questionnaires, surveys and face-to-face interviews. Students analyzed the quantitative and qualitative data and made cost neutral recommendations to assist the facility administration with tools for staff retention and enhancement of staff satisfaction. **Five themes emerged** which were consistent among the five different long term care units. The themes are **educational needs, tools for daily work, CNA recognition, professional communication, and work environment**. Students presented their findings during our April Competition. As of this writing, student reports have been presented in 66% of the facilities to senior leadership teams and have had (thus far) 100% commitment to incorporate several of the student's recommendations in their individual facilities. We are tremendously proud of our interprofessional geriatric student participants for a job well done!

Meharry Consortium Geriatric Education Center (MCGEC), Nashville, TN

Grace Smith, LMSW, MCGEC Project Manager, Meharry Medical College

Anna Lea Cothron, Program Coordinator, Vanderbilt University

The Meharry Consortium Geriatric Education Center (Meharry Medical College, Tennessee State University and Vanderbilt University) report the following activities for **MCGEC's Delirium EBP project**:

During the past year, Dr. Parul Goyal at Vanderbilt Medical Center has successfully led implementation of a delirium nursing screen and automated physician notification into the work-flow of a unit with high prevalence of delirium - Palliative Care. The project has incorporated an acceptable nursing risk assessment, delirium intervention table and delirium intervention (S-CAM) into the daily nursing assessment on the unit. Along with Vanderbilt programmers, Dr. Goyal has automated the delirium risk assessment, intervention and S-CAM in the nursing EMR and has successfully programmed a physician notification of positive nursing screen for delirium in the EMR. An estimated 50 health professionals including physicians, residents, fellows, nurses, pharmacists and social workers have been trained in delirium prevention, screening and intervention, with specific training on utilizing the S-CAM and automated notification with delirium order set. Preliminary data indicates that 170 patients age 65 and over were admitted over a 2-month period, with over 60% receiving S-CAM screens with every nursing shift change. Assessment of physician responses to positive screens continues. Future plans include booster training sessions for unit staff and analysis of data at 6 months and 1 year.

Montana Geriatric Education Center (MTGEC)

Gayle Hudgins, PharmD, Director
Terry Egan, MS, Associate Director

Using Behavioral Activation to Address Depression in LTC Residents

Behavioral Activation skills and techniques were shared with 57 long term care staff members as part of MTGEC's evidence based practice program. Cynthia Garthwait, MSSW, MTGEC Social Work faculty, presented mechanisms for identifying and documenting depression including the PHQ-9 which is the mood assessment embedded in the MDS 3.0 documentation required on all long term care residents. As documented by chart audits, these facilities have a 99% PHQ-9 completion rate.

Explanation of Behavioral Activation theory provided information on the process and four implementation steps for Behavioral Activation were identified: **identify** activities with the resident, **plan** activities with the resident, **do** - the resident completes the planned activities, and **document** steps in the electronic medical record. During the training, staff members were able to use examples of current residents and brainstorm ways staff could work together to address residents' depression using behavioral activation techniques. At the end of the training, staff members received a "Behavioral Activation Steps" card to remind them of the process, including documentation of the process and observed changes in patient behaviors.

MTGEC conducted a pre-training chart audit looking for evidence of behavioral activation. A follow-up chart audit will be conducted in July 2014 and the results will be analyzed for improvements in the quantity and quality of charting on depressive symptoms and the use of behavioral activation by staff. Chart audits from MTGEC's 2013 Behavioral Activation training indicated an initial increase in the use and documentation of behavioral activation techniques, but in the preliminary 2014 chart audit, these behaviors had declined. This finding is consistent with current literature which indicates that after staff training staff are likely to make a change in practice. However, the change in practice tends to fade unless there are incentives or "booster" sessions that remind staff to incorporate the practice. Methods to maintain or increase the quality and quantity of charting need to be identified and implemented at the facility level.

Nevada Geriatric Education Consortium

Suzanne Brown, PhD
Shannon Martin, OTR/L
Lisa Rosenberg, MD

The Nevada Geriatric Education Consortium hosted the event "Dementia Detection and Management at the Medicare Annual Wellness Visit" on November 8, 2013 as a commitment of HRSA FY2012 and FY2014 Supplemental Funding Opportunity. A portion of this program is available as enduring material, for Certificate of Completion at no charge or as Continuing Education for a nominal document fee.

The Nevada Geriatric Education Consortium is pleased to offer a free educational opportunity "**Dementia Detection and Management at the Medicare Annual Wellness Visit**".

- Original release date and most recent review or update: April 15, 2014
- Expiration date (date after which enduring material is no longer certified for credit): April 15, 2015
- Estimate time to complete: 4 hours
- Medium or combination of media used: Online video presentations
- Method of participation in the learning process: Internet

CME Accreditation and Designation

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education through the joint providership of the University of Nevada School of Medicine and Touro University Nevada. The University of Nevada School of Medicine is accredited by the ACCME to provide continuing medical education to

physicians. The University of Nevada School of Medicine designates this enduring material for a maximum of 4.00 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity. The University of Nevada School of Medicine approves this program for 4.00 hours of nursing continuing education credit. To register and receive the video link, please go to http://tun.touro.edu/dementia_cme/. There is a nominal \$10 fee for each professional who wishes to obtain continuing education credit for Medicine or Nursing. You may pay by check or on-line. Students may receive a certificate of completion at no charge.

Please e-mail Renata.Kilibarda-Walker@tun.touro.edu with any questions.
Download additional CE information [here](#).

We hope that you are able to utilize this information in your practice immediately. Thank you for your support. We look forward to providing you more educational opportunities in the future!

Please feel free to share this opportunity with your listservs.

Stanford Geriatric Education Center

Dolores Gallagher-Thompson PhD, Director
Marian Tzuang, MSW, Program Coordinator

16th Annual Updates on Dementia: Translating Research into Practice

The Stanford GEC co-sponsored the Alzheimer's Association Northern California and Northern Nevada Chapter annual conference on May 6, 2014, in Foster City, CA. A distinguished panel of researchers and practitioners presented the following topics: Plaques, Tangles and Prevention: AD Research Highlights in 2014; Chronic Traumatic Encephalopathy & the Athlete; Effects of Traumatic Brain Injury and Post Traumatic Stress Disorder on the Development of Alzheimer's Disease using the Alzheimer's Disease Neuroimaging Initiative; Pharmacological Management of Psychiatric Behavioral Issues Associated with Dementia: Progress and Pitfalls; Oral Health in Dementia; and a panel convened by the SGEC on Caregiving & Culture: Perspectives from Three Asian-American Communities. The conference was attended by more than 350 participants.

Evaluation results (n=160) from the panel on Caregiving & Culture: Perspectives from Three Asian-American Communities (Filipino, Korean and South Asian American) found that: 97% indicated learning at least one thing about views of dementia among these three ethnic groups; with regards to specific skills learned, 66% reported learning the LEARN model of cross cultural communication, and 68% reported learning cultural humility. When asked, "How will you use the knowledge/skills that you learned?" some more frequent responses included: sharing the knowledge/skills learned with colleagues and apply to dementia education curricula, recognizing the importance of involving the family when working with these populations, being more sensitive to cultural differences, keeping in mind the role of family and stigma related to dementia when working with patients and their families, ask patient/family what they think about what is causing the disease and symptoms, and employing the LEARN model in their own work, etc.

Rich in information from the field's cutting edge experts, we encourage you to find the video recordings of the entire day's presentations at the SGEC website: http://sgec.stanford.edu/16th_annual_updates_on_dementia.html

West Virginia Geriatric Education Center

Nancy Daugherty, Associate Director

West Virginia Geriatric Education Center (WVGEC) recently conducted a Geriatrics Leadership Summit entitled "Shaping the Future". The goals included showcasing successes and best practices in geriatrics health education and training, examining solutions, opportunities and results to strengthen and integrate geriatrics education and training across systems, share insights, ideas and actions to address agreed-upon priorities to guide the GEC collaborative into the future and network and learn from one another. Fifty consortium partners and stakeholders from throughout the state met and heard a presentation about Linking Primary Care and Elder Care by Louise Reese, Chief Executive Officer of the WV Primary Care Association. Mary Emmett, PhD discussed the results of the

Geriatrics Needs and Gaps Survey highlighting current knowledge versus interest in receiving knowledge about various geriatrics topics and summarized written comments into themes of interest to help guide discussion focusing on identifying priorities that will have the greatest impact upon the future of geriatrics training, education and care of older adults that should be addressed moving forward. A panel discussion by Guillermo Madero MD, Julie Testman PharmD, Marlena Chestnut MSW and Tamara Gravano DPT included their personal experiences of working with and on behalf of the WVGEC, including how knowledge and skills gained were translated into better patient care, improved delivery and/or spreading education to wider networks.

Tamara Gravano PT, DPT, GCS, Assistant Professor and Director of Clinical Education at Marshall University's College of Health Professions recently completed the requirements of the David K. Brown Geriatrics Scholar program and was awarded her certificate of excellence. She joins the ranks of ten other prestigious scholars that participated in interprofessional evidence based learning experiences thereby increasing their skills and expertise to promote competence in the diagnosis, treatment and prevention of disease, disability and other health related needs of older adults, including psycho social aspects of aging.

Plans are on-going for the 10th annual WV Geriatrics Society annual scientific assembly being held on September 17th. The theme "Care Across the Continuum: One Patient's Journey" includes a case based curriculum that follows the care of an older adult who receives the Medicare Annual Wellness Visit, through an acute care event leading to placement in a skilled nursing facility and culminating in palliative care and end of life decision making. The conference is co-sponsored by WVGEC, the University of Charleston School of Pharmacy and CAMC Health Education and Research Institute.

Wisconsin Geriatric Education Center

*E Duthie, K Denson, D Simpson, M Malone, G Manzi, K Padua, D Brown, J Rehm,
and the Aurora Health Care Collaborative*

Teach & Problem Solve Geriatric Care with Mobile Geriatric Fast Facts

Your Problem: Health professionals must care for complex geriatric patients and they need evidence-based clinical information at their fingertips.

Your Solution: Geriatric Fast Facts! Geriatric Fast Facts are evidence-based summaries of key topics relevant to clinicians and trainees caring for older adults. This educational tool can be integrated into the providers' daily clinical life to provide fast, evidence-based clinical solutions and algorithms at the point-of-care via any mobile device.

How do you access and use it?

- From your smartphone or iPad at www.geriatricfastfacts.com
- Geriatric Fast Facts are searchable—type in a keyword or illness, or choose from the list of common geriatric complaints, organ systems, relevant basic science principles, and Accreditation Council on Graduate Medical Education (ACGME) competencies

The Medical College of Wisconsin, in partnership with Aurora Health Care, invites you to use this free resource designed for all mobile devices. Geriatricians worked with specialty experts to develop this mobile delivery point-of-care tool.

Geriatric Fast Facts were developed through support from the Donald W. Reynolds Foundation, the Wisconsin Geriatric Education Center, the Medical College of Wisconsin, and Aurora Health Care. Please share Geriatric Fast Facts, www.geriatricfastfacts.com with colleagues, staff and learners via social media (#geriatricfastfacts) and by linking to them from your website. For more information contact Judi Rehm at jrehm@mcw.edu.

Calendar of Upcoming Events

DATE	EVENT	LOCATION	CONTACT
July 30, 2014 12:00 p.m.	Stroke and Older Adults Geriatrics lunchtime learning series	WVU – Health Sciences Center Charleston, WV	Hanna Thurman MSW, LGSW, MPA hthurman@hsc.wvu.edu
August 27, 2014	Behavioral and Psychological Symptoms in Dementia: Medication and Non-Medication Management	WVU – Health Sciences Center Charleston, WV	Hanna Thurman MSW, LGSW, MPA hthurman@hsc.wvu.edu
September 10-13, 2014	31 st Annual Intensive Course in Geriatric Pharmacy and Board Review	Los Angeles Airport Marriott Hotel Los Angeles, CA	Anne Hu, MPH annehu@mednet.ucla.edu 310-312-0531
September 10-13, 2014	31 st Annual UCLA Intensive Course in Geriatric Medicine and Board Review	Los Angeles Airport Marriott Hotel Los Angeles, CA	Anne Hu, MPH annehu@mednet.ucla.edu 310-312-0531
September 17, 2014	Care Across the Continuum: One Family's Journey	University of Charleston Charleston, WV	Hanna Thurman MSW, LGSW, MPA hthurman@hsc.wvu.edu
October 4, 2014	2014 Geriatric Update	Boone Business Center, Trevecca Nazarene University Nashville, TN	Mary Ann Ruley, Meharry Consortium GEC mruley@mmc.edu
October 14, 2014 8:00 a.m. - 4:00 p.m.	Long-Term Care Conference 2014: Getting to the Heart of Person Centered Care	Honolulu, HI	Michiko Inaba, M.D. Conference Program Director
October 14, 2014 7:45 a.m. - 4:15 p.m.	MTGEC Annual Conference: Mental Health Issues of Aging Veterans	Missoula, Billings and multiple rural teleconference locations	Terry Egan Terry.egan@umontana.edu 406-243-2480 www.health.umt.edu/mtgec

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.