## **Attachment 4: Updated Project Abstract**

Award Number: U1QHP33111

Project Title: Improving Care of Elders through Community and Academic Partnerships (ICECAP)

in Nevada: An Interprofessional Geriatrics Education Network

Awardee Name: Board of Regents, NSHE, obo University of Nevada, Reno School of Medicine

(UNR Med) Sanford Center for Aging

Principal Investigator / Project Director: Peter Reed, PhD, MPH

The ICECAP Nevada GWEP fully emerged from the pandemic in this past year with strong engagement of partners and active participation in each of our major training programs. This included completing our third and launching our fourth cohort of the Interprofessional Certificate in Geraitrics Care with our clinical partners and health professions students. We also offered five full series of Bravo Zulu, our innovative professional and family caregiver training, which is one more than we had planned. Finally, we added an additional session to our 6-part *Project ECHO* series on dementia care, making it a 7-part series, which we offer twice each year. Overall, the specific objectives of the ICECAP Nevada GWEP remain unchanged: 1) Develop partnerships between academia, primary care delivery sites or systems, and community-based organizations to educate and train a workforce, including curriculum development as necessary, to provide value-based care that improves health outcomes for older adults; 2) Train geriatrics specialists, primary care providers, and health professions students, residents, fellows and faculty to assess and address the primary care needs of older adults; 3) Transform clinical training environments into integrated geriatrics and primary care systems to become age-friendly health systems that incorporate the HRSA-19-008 2 principles of value-based care and alternative-payment models; 4) Deliver community-based programs that provide patients, families, caregivers, and direct care workers with the knowledge and skills to improve health outcomes for older adults; and 5) Provide training to patients, families, caregivers, direct care workers, healthcare providers, and health professions students, residents, fellows and faculty on ADRD and how cognitive and behavioral impairments impact medical care throughout the course of illness, including the value of supporting dementiafriendly communities and when it is appropriate to recruit older adults into research. The ICECAP Nevada network of community, academic, and primary care partners established during the first year of this project, and expanded during the second year to include an additional primary care partner, remains robust and actively engaged in the project. The partners directly support our core activities of training primary care providers, health professions students, professional and family caregivers, and patients, while supporting the expansion of Age-Friendly Health Systems for our region. In addition to sustaining and growing our core ICECAP training programs, we also have been actively working on translating the 4Ms framework into a nursing home context to launch a new training program for Certified Nursing Assistant students and fourth-year BSN students. This resulted in a new partner being added to our network, the Perry Foundation, which offers a CNA school, with multiple cohorts each year. As of March 2023, we are wrapping up the final phases of program development, and intend to launch the program, embedded in the CNA school curriculum on March 27<sup>th</sup>. Further, while it didn't occur in the prior year, as we had hoped, we continue working to bring a new primary care partner on board with ICECAP Nevada, the Renown Health Medical Group. We hope their large primary care group will engage in the *Certificate* and pursue an Age-Friendly Health System designation. Integrating primary care and geriatrics into a well-trained, Age-Friendly Health System will positively impact patient outcomes, including: dementia caregiver education and support; risk of opioid misuse; advance care planning; fall risk assessment; high-risk medication use; 30-day all-cause readmission rates; diabetes control and high blood pressure control.