

TOPICS

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What Is Being Done to Implement Age-Friendly Health Care?

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SAVE THE DATE MAGIC Virtual Fall Conference October 29, 2020	

Today's geriatrics care implementation gap

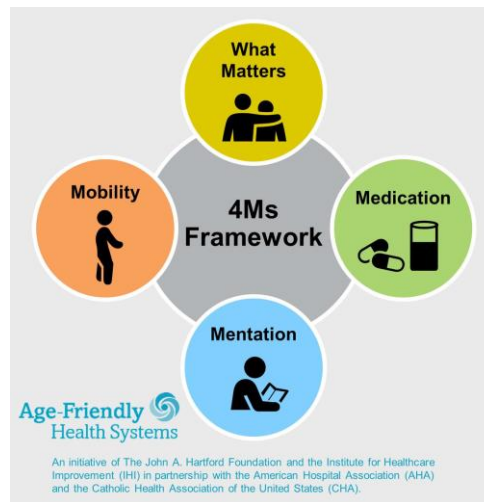
Right now an implementation gap exists in the medical field: what geriatricians know produces more effective health outcomes for older adults versus what healthcare providers are currently able to provide. Despite three decades of work in the geriatrics field—developing and testing effective Triple Aim outcomes in older adults—we are simply not seeing healthcare systems put the proven advances into action.

As geriatrics professionals, one of our core missions is to educate the healthcare workforce and promote care system change to implement evidence-based interventions that improve outcomes for older adults. This can be a challenge as primary care providers may be unaware of effective interventions and may practice in health systems that are entrenched in models that do not embrace effective geriatrics principles.

Providers in Minnesota have long recognized the need for improved geriatrics care. In a 2014 survey of aging services providers, the Minnesota Geriatric Workforce and Education Survey, nearly 50 percent indicated they were very concerned or somewhat concerned with their ability to hire general practitioners with competence in caring for older adults, and 78 percent perceived a need for more education related to the care of older adults in their organization.

The field of geriatrics has come a long way in research to identify practices that produce better outcomes in our patients. Our next collective step is to make a concerted effort toward closing the implementation gap in Age-Friendly care.

The creation of the 4Ms



Notable strides have been made in the past few years to understand evidence-based geriatric care. Beginning in 2017, the Institute for Healthcare Improvement (IHI) teamed with the John A. Hartford Foundation and other stakeholders to create a movement designed to close the implementation gap: Age-Friendly Health Systems. The IHI reviewed all available literature to determine which care models tended to improve the health of older adults, enabling them to identify 11 effective interventions. From there, they distilled those interventions into what we call the 4Ms:

1. **What Matters:** understanding each patient’s health goals and care preferences so that we align care appropriately
2. **Mentation:** preventing, identifying, treating, and managing dementia, depression, and delirium across care settings
3. **Medications:** using Age-Friendly medications and being aware that older adults use more medications and are therefore more likely to suffer harm from their medications
4. **Mobility:** ensuring that older adults move safely while considering the increased likelihood of falls, the importance of exercise, and maintaining physical function to enable social engagement and personal safety

Creation of the 4Ms has led to incredible outcomes—just one of which is that a central strategy now exists for delivering Age-Friendly health care driven by the 4Ms. It is no exaggeration to assert that we now have hundreds of healthcare systems signing on to the Age-Friendly Movement.

A vitally important program to improve geriatric care

Beginning in July 2019, the University of Minnesota Department of Family Medicine and Community Health (DFMCH) and the Medical School received a powerful stimulus to meet these high-care standards. The Minnesota Northstar Geriatrics Workforce Enhancement Program (MN Northstar GWEP) is a five-year, \$3.74 million project funded by the Health Resources and Services Administration (HRSA). While the Minnesota Northstar GWEP is housed within the University of Minnesota DFMCH, it is a collaborative project that involves the Medical School, M Health Fairview, the DFMCH, the School of Nursing, the School of Public Health, the College of Pharmacy, the School of Social Work, and eight vibrant community partners. The community partners include respected agencies, described further below.

The purpose of the MN Northstar GWEP is to improve the healthcare and health of older adults across the entire state of Minnesota, with efforts to reach older adults, their families, and their caregivers. To ensure that we reach this population throughout the entire state, our organizing footprint will be the Minnesota Association of Area Agencies on Aging (m4a), composed of the seven AAAs that cover all 87 counties and the Chippewa Tribe in Minnesota.

The goals of MN Northstar GWEP

We have established specific goals that underlie the project: 1) educate and train Minnesota's primary care and geriatrics workforce to care for older adults in integrated geriatrics and primary care models; and 2) partner with community-based organizations across the state in rectifying gaps in the care of older adults and in promoting Age-Friendly primary health care and dementia-friendly communities.

MN GWEP seeks to rectify gaps in several key areas:

- Geriatrics knowledge and skills of health professions trainees and practitioners, particularly in primary care, to include addressing social determinants of health
- Processes and environments needed to provide patient-centered, high-quality team primary care for older adults
- Knowledge and skills needed for patients, families, caregivers, direct care workers, and the public at large to promote health and healthcare that is goal-oriented, safe, and effective for older adults
- Care of patients with Alzheimer's Disease and Related Dementias (ADRD) that is respectful, dignified, and effective

The University of Minnesota Medical School also received a \$1 million grant from the Otto Bremer Trust to improve geriatric training and care, which we are using to enhance and supplement our program. With the mission and funding, we are well positioned to make progress in achieving our goals. Over the past year, we have built up a great deal of momentum and excitement as we proceed with 13 distinct projects within MN Northstar GWEP.

Minnesota Northstar GWEP projects in-progress

The following projects support the goals of Minnesota Northstar GWEP and will help improve the healthcare and health of older adults across Minnesota:

1. Create a governance structure for Minnesota Northstar GWEP that will oversee and be accountable for effective training of healthcare professionals in high-value geriatrics care. The MN Northstar GWEP Community Advisory Board meets quarterly and consists of representatives from the University of Minnesota and eight community organizations.
2. Create a Geriatrics Education and Training (GET) repository of educational resources spanning the full range of health professional trainees and learner levels. The repository will be called the **Age-Friendly Care and Education Collection**. This collection highlights educational and clinical resources for health professionals, educators, learners, and others interested in improving care for older adults. This has been created and is currently undergoing testing prior to being unveiled to the public. In addition, development is underway for interactive online modules to cover a variety of key topics, including urinary incontinence, opioid use, and mobility.
3. Deploy GET Repository materials to deliver innovative and effective Interprofessional geriatrics education to address specific primary health needs of older adults. An Interprofessional Geriatric Case Competition, planned for fall 2020 at the University of Minnesota, will bring together university student participants from various disciplines in an effort to present treatment plans for a complex geriatrics case.
4. Transform the University of Minnesota Community-University Health Care Center (CUHCC) and eight family medicine residency clinics in Minnesota to train primary care residents, other interprofessional learners, and clinic staff in providing high-quality, Age-Friendly geriatrics care.
5. Transform all 56 community clinics in the M Health Fairview system's Primary Care Service Line to provide high-quality, Age-Friendly primary care to older adults. Two pilot clinics serving disadvantaged

populations have been recruited to join the GWEP Age Friendly Action Community and are on track to achieve Age-Friendly Health System recognition.

6. Support ADRD caregivers through Caring For a Person With Memory Loss (CPWML) program.
7. Deliver the Dementia Educational Experience Roadshow (DEER), skills training, and education in-person and via telehealth.
8. Offer asynchronous / real-time education.
9. Deliver public education programs through Minnesota Public Radio (MPR) and Hippocrates Cafe, which are live shows that use professional actors and musicians to explore healthcare topics through story and song.
10. Implement Dementia Friends information sessions. To date, we have hosted two information sessions with 65 attendees.
11. Implement Dementia Friendly Dental Practices (DFDP), which will entail the development of dental practice-focused dementia care tools to augment existing resources. We also plan to enroll, train, and certify at least eight Minnesota dental practice teams per year as DFDPs.
12. Deliver FIT-AD Certificate program. This program will deliver basic training to community exercise providers and advanced training in-person workshops in three sites (Twin Cities, Duluth, and Rochester).
13. Prepare the geriatric workforce to maximize reasonable safety for long-term care patients, including those with ADRD.

By December 31, 2020, the Minnesota Northstar GWEP will have addressed each of the 4Ms in the primary care of 600 patients over the age of 65 at two clinics: an M Health Fairview clinic known as Smiley's and Community-University Health Care Center. These two clinics are the pilot primary care delivery sites for Age-Friendly primary care transformation. For our second grant year, we plan to continue clinical transformation operations in the two pilot clinics while adding three additional primary care clinics. As a result, our second-year activities will allow us to reach as many as 1,500 participants/patients.

Our program progress and all of these critical activities now have a digital home. In 2019, we created a program website, mngwep.umn.edu, that is designed to not only list all of the goals, activities, and events of the Minnesota Northstar GWEP, but also provide HRSA-required updates on the numbers of individuals and counties reached through our efforts. The website is updated regularly to reflect the launch of events and the increasing number of caretakers, providers, and community members reached.

The team behind the work

The coordination and execution of the GWEP activities could not take place without a team of dedicated experts behind it. We are extremely fortunate to have subject matter experts contributing their knowledge, experience, and guidance. Many of them are clinicians and MAGIC members. Minnesota Northstar GWEP is directed and managed by an administrative core that includes the following individuals:

- James Pacala, MD, MS, Professor and Head, Department of Family Medicine and Community Health, UMN Medical School, Minnesota Northstar GWEP Program Director
- Jean Wyman, PhD, RN, Professor, UMN School of Nursing
- Joseph Gaugler, PhD, Professor and Robert L. Kane Endowed Chair in Long-Term Care and Aging, UMN School of Public Health
- Teresa Schicker, MPA, Minnesota Northstar GWEP Program Manager

We also have an Interprofessional Geriatrics Coordinating Council comprising an interprofessional team that provides content expertise:

- Teresa (Terri) McCarthy, MD, MS (Medicine)
- Rajean Paul Moone, PhD, LNHA (Long-Term Care)
- Becky J. Olson-Kellogg, PT, DPT, GCS, CEEAA (Physical Therapy)
- Edward Ratner, MD (Medicine)

- Shellina R. Scheiner, PharmD, BCGP (Pharmacy)
- Stephen K. Shuman, DDS, MS (Dentistry)
- Kristine M. Talley, PhD, RN, GNP-BC (Nursing)

Finally, a Community Advisory Board provides overall strategic vision, direction, and accountability throughout the program's implementation:

- Community-University Health Care Center
Colleen McDonald Diouf, CEO
Primary site for interprofessional education and clinic transformation
- Fairview Health Services
Kim DeRoche, MD, Director of Primary Care Service Line
Community-based healthcare system for transforming primary care clinics to age-friendly sites
- Minnesota Association of Area Agencies on Aging (m4a)
Lori Vrolson, Director of m4a
Executive Director of Central MN Council on Aging
Represent all seven state AAAs to advocate for community-based GWEP activities
- Minnesota Board on Aging
Kari Benson, Executive Director of MBA
DHS Director of Aging and Adult Services
Represent MN Department of Human Services; advocacy and policy for older adults
- Minnesota Gerontological Society
Tom Hyder, Executive Director
Educate and connect to statewide geriatrics healthcare professionals and direct care workers
- Dementia Friends
Dawn Simonson, Director of Metropolitan Area Agency on Aging
Advocate for promotion of dementia-friendly communities
- Stratis Health (State QIO)
Jane Pederson, MD, MS, Chief Medical Quality Officer
Share expertise in Quality Improvement, capacity building, strategy, and systems change
- Minnesota Leadership Council on Aging
Adam Suomala, MPA, Executive Director
Represent 30 community organizations serving older adults in Minnesota
- Community Care Systems
Tom von Sternberg, MD, Medical Director
HealthPartners
Medicare, MSHO, Care Management and Government Programs

It is only through the partnership among all of these individuals and organizations that we are able to make progress with our mission. The Minnesota Northstar GWEP continues to exemplify interprofessional cooperation toward our shared outcome of enhanced geriatrics care throughout the state.

CARES Act Funding

Recently the Northstar GWEP has received \$90,625 in funding from the CARES Act to address care of vulnerable older adult populations during the COVID pandemic. This allocation will fund a project to provide on-site nursing care, improve access, and promote care coordination to the residents of the Cedar Riverside community, many of whom are older adults living alone in high rise buildings managed by the Minneapolis Public Housing Authority.

Learn more and get in touch

We invite you to explore our website, mn.gwep.umn. There you will find a dashboard showing our progress to date, an overview of all planned projects, details on upcoming events, and GWEP-related news stories. Share your thoughts, submit questions, and join our mailing list on our website as well. The Minnesota Northstar GWEP cannot be effective without partnership and community input, and your feedback and ideas are encouraged as we continue our mission.

President's Letter

Dear MAGIC Members and Supporters,

Thank you for your ongoing commitment to caring for those who are medically complex, frail, and aging during this time. The COVID-19 pandemic has taken a toll at senior congregate care communities. Your leadership and presence in those care settings has and will continue to make a tremendous impact in our communities across Minnesota.

During the pandemic we have had several successes on behalf of those we serve.

Our Clinical Practice Alliance Committee (CPAC) led by member Kelli Petersen NP, was published in the CMS guide for nursing facilities during COVID-19:

<https://www.cms.gov/files/document/covid-toolkit-states-mitigate-covid-19-nursing-homes.pdf>

Our voice was represented at two Minnesota legislative committee hearings regarding policies for COVID-19 management in congregate care.

We are looking forward to our first virtual annual conference this fall! Please plan to attend on October 29th and check out the details on our website.

Please enjoy our article in this month's TOPICS.

Sincerely,
Emily Downing, MD
MAGIC president



November 20-21, 2020 | paltc.org/leadership

AMDA is excited to announce that its inaugural Leadership, Ethics & PALTC Virtual Symposium will take place November 20-21, 2020. Open to everyone who works in the PALTC setting, this live, online, interactive program will focus on the myriad leadership and ethical challenges that have emerged because of the COVID-19 pandemic. Over the coming months, please [visit the meeting webpage](#) for more details on the program, schedule, learning objectives, and credit information. **Registration will open September 1!**

One Stop for all Your Online Education Needs

AMDA's APEX Learning Management System is your one-stop shop for all of [AMDA's online education offerings](#). Access the searchable catalog that includes all education and product offerings filtered by program format, content, credit type, and other criteria. Register for upcoming webinars and listen to archived sessions; purchase annual conference recordings; sign up for the Core Curriculum and the QAPI course; listen to podcasts; purchase and download products and resources; and more. Check out everything APEX has to offer and get started.

AMDA's Board Adopts Statement on Racial Inequities

In response to recent events, the AMDA Board of Directors has adopted a Statement on Racial Inequities that notes, "The current pandemic has revealed the wide racial gaps among older adults stricken with COVID-19 in our nursing homes that is mirrored in our PALTC direct care workforce. We can and must do better as a nation, not only to heal systemic racism in the U.S., but also to honor our residents of color, and to support those who care for them."

[Read the Complete Statement](#)

Upcoming Webinars

2020 International Pressure Ulcer/Injury Guideline: The Long-Term Care Specific Updates

Date: July 21, 2020 Time: 7:00PM – 7:30PM

[Learn More](#)

Recently Archived Webinars

- [Strategic Leadership for Collaborative Engagement of Interdisciplinary Teams in Care, Quality and Resource Management –Lessons Learned from PACE](#)
- [A Proven Formula for Improving Outcomes, Increasing Medication Safety, and Reducing Healthcare Costs: Demonstrating the Value of Integrating Clinical Pharmacy Services into the Patient Care Team](#)
- [View All Upcoming & Archived Webinars](#)

AMDA Resources

- [Events](#)
- [Educational Programs](#)
- [Product Store](#)
- [Caring for the Ages](#)
- [JAMDA](#)
- [Foundation](#)
- [ABPLM \(Certification\)\)](#)

AMDA On-The-Go Podcast Series



[Anticoagulation in the Post-Acute Setting During COVID-19](#) (07/07/2020)

[Mitigating the Fears and Stresses from COVID-19](#) (06/29/2020)

[FMDA – COVID-19: In the Trenches](#) (06/26/2020)

[FMDA – COVID-19: Current State, Challenges, and Opportunities](#) (06/22/2020)

[JAMDA On-The-Go](#) (06/19/2020)

[AMDA On-The-Hill: COVID-19 Update](#) (06/17/2020)

[FMDA – Telehealth in the Time of Pandemic in PALTC](#) (06/15/2020)

[COVID-19: Evolving Our Infection Control Policies and Response](#) (06/08/2020)

[FMDA – COVID-19: Behavioral Health Impact](#) (06/04/2020)

PALTC POLICY SNAPSHOT

[Senate Aging Committee Minority Members Release Report On COVID-19 in Nursing Homes](#)

[Society Urges HHS to Waive Budget Neutrality for Medicare E&M Visits](#)

[2021 MIPS Self-Nomination Materials Now Available](#)

[Nursing Home Training Series Webcasts on July 9 and July 16](#)

[Guidance on Allowance of Telehealth Encounters in eCOMs Now Available](#)

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