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TexMed 2017 Clinical Abstract

Please complete all of the following sections and include supporting charts and graphs in this document. Submit a total of two documents - this document and the Biographical Data and Disclosure Form to posters@texmed.org by midnight March 17, 2017.

Procedure and Selection Criteria
- Submissions not directly related to quality improvement or research may be accepted and should follow the standardized format outlined below. Content should enhance knowledge in the field of clinical care and be relevant to a given patient population.

PROJECT NAME: Innovations in Interprofessional Geriatrics Training: Improving the Quality of Care for an Aging Texas Population

Institution or Practice Name: University of North Texas Health Science Center, JPS Health Network

Setting of Care: Academic and Community-based settings

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Is the Primary Author, Secondary Author or Member of Project Team a TMA member (required)?
        ☒ Yes ☐ No
Please provide name(s) and their role in the project:
TMA Member Name: Lesca Hadley, MD, FAAFP, AGSF: Primary Author

TexMed Poster Session Specialty Subject Area: Please check if these apply.
☐ **Enhanced Perioperative Recovery**
☐ **Disaster Medicine and Emergency Preparedness**

Clinical

Background (15 points max): *Describe the purpose for sharing the content. What caused this subject matter to be approached? Why is this content important to share? What is the potential impact if this content is not shared?*

As the population ages, future health care professionals must be equipped in managing medical conditions and syndromes affecting older adults while addressing social determinants of health. An academic health science center expanded partnerships with a county hospital, a private university, and the Area Agency on Aging to create the only HRSA-awarded Geriatric Workforce Enhancement Program in Texas to promote and deliver collaborative approaches to geriatric care and training of the primary care workforce.

Intended Stakeholders (15 points max): *Identify those individuals, organizations, or interest groups that could be potentially impacted by this information or benefit by obtaining this information.*

This project provides training for health professional students, primary care residents, and practicing health professionals as well as caregivers and older adults themselves. United Way's Area Agency on Aging brings together community based resources as collaborating partners for the program. Partners include Meals on Wheels, Alzheimer's Association, James L. West Alzheimer's Center, and Senior Citizen Services of Greater Tarrant County, Inc. in addition to others.

Description of Accomplished Work (25 points max): *Provide an overview of the work that was accomplished, including any specific methods, tools or techniques. Also, include any milestones or key accomplishments. Note charts, graphs and tables here and send as addendum with abstract form.*

Five interprofessional teams enhanced existing curricula with geriatric content and evidence-based community programs for older adults. Training enhancements focused on a community needs assessment to prioritize health literacy, falls prevention, medication management, chronic disease management and dementia. UNTHSC's *Workforce Enhancement in Healthy Aging and Independent Living (WE HAIL)* assembled a community advisory board and subject matter experts to inform health workforce education program development. Applying the Rapid Cycle Quality Improvement (RCQI) method, WE HAIL developed geriatric training, including 1) a health literacy project for interprofessional student teams; 2) experiential modules for family medicine residents; and 3) continuing education and clinical decision tools for practicing health care professionals. Teams expanded service areas for caregivers into rural communities and developed a new Geriatric Certificate for Family Medicine Residents. A Geriatric Professional Leadership Institute was also created. Preliminary trainee feedback demonstrates improved knowledge, confidence, and attitudes in providing geriatric care and connecting older adults and caregivers to needed social supports. Evidence based programs enhanced caregiver knowledge and decreased stress. At this time, 649 interprofessional students have completed their curriculum with the expectation that 1,017 students will complete training by July 2017. Forty-one Family medicine residents will have completed geriatric training enhancements by July 2017. Ten Family Medicine residents are in the process of completing the requirements for the Geriatric Certificate. 27 health professionals will graduate from the Geriatric Practice Leadership Institute in June 2017. 46 primary care practices have completed geriatric education online provided through WE HAIL. 117 caregivers have received caregiving support through the WE HAIL programs.

Please see addendum for graphs and tables.

Timeframe and Budget (20 points max): *Provide the start and end dates for the work along with any financial implications that were incurred due to the work accomplished. Note charts, graphs and tables here and send as addendum with abstract form.*

UNT Health Science Center's Center for Geriatrics was awarded a $2.55M grant from the Health Resources and Services Administration (HRSA) in July 2015 to establish a Geriatrics Workforce Enhancement Program (GWEP). UNTHSC's Center for Geriatrics was the only GWEP funded program in Texas, and one of only 44 awardees in the nation. This is a three year project that will end in June 2018.

Intended Use (25 points max): *Describe how this information could be used moving forward to impact patient care.*

Collaborative efforts to equip future health care professionals with the ability to serve our most vulnerable elderly patients is most successful when it is grounded in community needs. Interprofessional team training in diverse settings enriches the experience by providing realistic and participatory learning opportunities. Rapid Cycle Quality Improvement evaluations can identify new opportunities to improve workflow patterns and educational connections. Collaboration can increase knowledge, skills and competence in geriatrics across the professional lifespan. It can also improve the health care and lives of older adults and their caregivers by building bridges between community and clinical settings.

Addendum:

Overview of the Five WE HAIL Innovations

Group 1: Undergraduate And Graduate Students	• Senior HELP • Meals On Wheels' HomeMeds Program And Diabetes & Nutritional Counseling
Group 2: Family Medicine Residents	• Family Medicine Residency Programs At JPS And UNTHSC/TCOM- Plaza Medical Center • Geriatrics Certificate Program
Group 3: Health Care Professionals (Including Seven Different Disciplines)	• Clinical Decision Support Tools • PACE's Continuing Education Modules • NorTex PBRN's QI Projects • Geriatrics Practice Leadership Institute • James L. West's Dementia Podcasts
Group 4: Families And Caregivers	• Alzheimer's Associations' REACH II Program • James L. West's Stress Busting Program • James L. West's Dementia Podcasts
Impact	• Increased Geriatric Workforce • Collaborative Health Systems • Engaged, Healthier Older Adults • Healthier Communities

Professions Impacted by WE HAIL

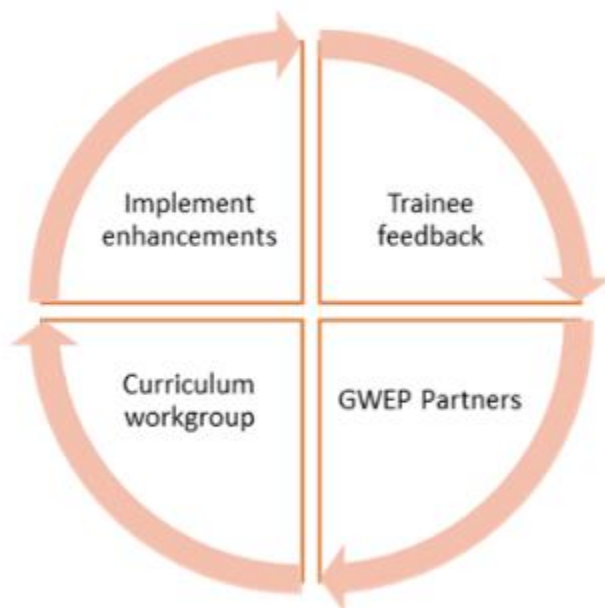|	
Undergraduate And Graduate Students	Family Medicine Residents
Physicians	Nurses
Physician Assistants	Pharmacists
Physical Therapists	Social Workers
Dieticians	Caregivers

Rapid Cycle Quality Improvement for WE HAIL

Emphasized Areas of Training Based on Community Needs Assessment