2015 Hartford Change AGEnts Communications Institute Participants

Fran Anderson, MSM
Director
Senior Services of Southeastern Virginia

Brief project description: An evidence based care transitions program is being implemented by this AAA in partnership with four hospitals. Impressive outcomes are being achieved. Efforts are being made to partner with health plans serving Medicare patients to gain sustainability for the program and to serve more patients.

Sarah Bellefleur, MSW, MHA
Director, Strategic Projects
SCAN Health Plan

Brief project description: My practice change effort involves implementing a home and community-based intervention and counseling program for older adults identified with risky alcohol and/or substance abuse issues.

Kathleen Blake, MSN, RN
VP, Seniors and Post Acute Service Line
Neuroscience Service Line, Summa Health

Brief project description: My project targets the top 1-2% of older adults with advanced chronic illness who are at highest risk of adverse health outcomes and avoidable healthcare utilization. These are the patients who can overwhelm the resources of typical primary care practices. We have developed a high intensity clinic that integrates geriatrics and primary care either directly or through collaborative care.

Jennifer Carnahan, MD, MPH
Advanced Geriatrics Research Fellow
Indiana University Center for Aging Research (IUCAR), Regenstrief Institute Inc.

Brief project description: My goal is to improve transitions from the Skilled Nursing Facility (SNF) to home, in order to improve patient outcomes and reduce readmissions. I am investigating the characteristics and outcomes of Skilled Nursing Facility (SNF) short stay patients and I am a member of a regional, multidisciplinary coalition whose mission is to improve care transitions in our community.

Jo-Ana Chase, PhD, APRN-BC
Assistant Professor
University of Missouri – Columbia

Brief project description: My practice/research change effort focuses on preventing functional decline among hospitalized older adults. Findings from my current postdoctoral project will lead to developing and testing an algorithm to identify older patients most at-risk for developing new impairments in activities of daily living while in the hospital. The algorithm would be embedded in the hospital electronic health record, and may be used system-wide by clinicians to prompt and track interdisciplinary interventions to prevent functional decline.

Lynda Crandall, RN, GNP
Executive Director
Pioneer Network

Brief project description: We desire to strengthen our organizational efforts to change values and practices of aging care and support by creating a culture of aging which is more life affirming, satisfying, humane and meaningful for elders, through the development of a foundational, integrated communication plan which includes establishing formal guidelines for Pioneer Network communications.

Kerri Criswell, MSW
Manager, Fund Development
National Association of Social Workers (NASW) Foundation

Joel Rubin, MSW, ACSW, CAE
Executive Director
National Association of Social Workers (NASW) Illinois Chapter

Brief project description: Through the SLA grant initiative, the NASW Foundation will strengthen the role of the social work profession in delivery of services to older adults by improving the supervisory and leadership skills and gerontological knowledge of MSW supervisors who are essential in bringing about practice change, thus ensuring a workforce trained in best practices to provide care for older adults.

Melissa Dattalo, MD, MPH
Advanced Fellow/Clinical Instructor
Veteran's Administration/University of Wisconsin

Brief project description: My goal is to build a home-based care management program for high-cost, high-need patients at my university. I plan to use the new Chronic Care Management (CCM) Medicare reimbursement fee in addition to other underutilized billing codes to build an infrastructure for care coordination, home visits, and facility visits within our primary care practice.

Joan Davitt, PhD, MSW, MLSP
Associate Professor & Hartford SW Faculty Scholar
University of Maryland

Brief project description: My research has demonstrated continued disparities in access to and outcomes of Medicare home health care, including a better understanding of the contributing factors. I am pursuing both policy and practice changes to improve access to quality care and thus outcomes of care for Medicare beneficiaries of color.

Nancy Dudley, PhD(c)
Doctoral Student
University of California, San Francisco

Brief project description: To define the role of nursing and implement a model of community-based palliative care in the primary care setting for older adults living longer in the community with advanced illness, before hospice.

Deborah Dyjak, RN, BSN, MS
Education Coordinator
Archie Hendricks Senior Skilled Nursing Facility

Brief project description: Early implementation of a National Tribal Long Term Care Educational Collaborative to champion "best practices" for tribal Elders in Long Term Care with implications for Long Term Care Elders across the country. Inaugural National gathering to be held in the Fall of 2015.

Reneé Gall, RN
Gardenside Rehab Program Leader
Jennings Center for Older Adults

Susan LoDolce, RN
Director of Nursing
Jennings Center for Older Adults

Brief project description: Our initiative will place the patient and their family at the center of an inter-professional team that will create person-centered care interventions. Our PCC team includes nursing, therapists, NP, MD, and SW. Alongside them are housekeeping, dining services, and life enrichment coordinators. Our initiative will utilize team communication tools such as Stop and Watch and care intervention symbols customized for each patient.

Sharon Inouye, MD, MPH
Professor of Medicine
Harvard Medical School

Shin-Yi Lao, MPH, BSN, RN
Program Coordinator
Hebrew SeniorLife

Brief project description: 1. Widespread system change and dissemination of the Hospital Elder Life Program (HELP) 2. Policy initiatives related to delirium prevention 3. Quality improvement/process improvement related to acute care of older people.

Angela Jenkins, MPH
Project Manager, Value Advocacy Project
Community Catalyst

Brief project description: Our newly launched program, the Value Advocacy Project, will support consumer health advocates to engage in state and local health policy and systems change efforts that aim to increase the value of health care by improving health outcomes and lowering health care costs, especially for populations that have disproportionately poor outcomes.

Oliver Kim, JD, LLM
Independent Consultant to the White House Conference on Aging
Mousetrap

Brief project description: I have been a longtime congressional staffer who worked on health and human service issues and recently served as the deputy director of the Senate Aging Committee. I am in the process of creating a policy consulting firm working on health and aging issues.

Nancy Kropf, PhD
Associate Dean & Professor
Georgia State University

Brief project description: Our goal is to increase capacity of future and current health and human service providers to effectively practice with older adults. To that end, our Geriatric Education Center has developed web-based infusion modules on topics relating to geriatric health care. This initiative will help transmit evidence-based practices that can be integrated into various health care settings.

Gina M. McCaskill, PhD, MSW, MPA
Advanced Fellow in Geriatrics & Hartford Social Work Scholar
GRECC Birmingham VA Medical Center

Brief project description: My practice/policy change effort is Project STEPS! (Seniors Taking Exercise Promotion Seriously!). In an attempt to address environmental barriers to physical activity among low-income older adults, such as dilapidated sidewalks, poor lighting, and unsafe communities, I will develop indoor walking trails for older adults who live in senior public housing.

Marcia Mecca, MD
Geriatrician/Assistant Professor
VA Connecticut and Yale University

David DeWorsop, MD
Research Associate
Yale University School of Medicine

Brief project description:
Our Hartford Change AGEnts Action Award is for the SPRING Project (Screening PRogram to Identify Needs due to Geriatric Syndromes in homeless veterans). We are aiming to link homeless veterans with geriatric syndromes to the appropriate resources and improve housing outcomes among these veterans.

Eran Metzger, MD
Director of Psychiatry
Hebrew SeniorLIfe

Lori Feldman, MSW
Depression Care Manager
Hebrew SeniorLife

Brief project description: MARPEH is Hebrew for "Health" and is the acronym for Making Real Progress in Emotional Health. The program builds on the work of the IMPACT and Healthy IDEAS depression care models to provide problem-solving therapy for depression as well as strategies for preserving independence in the face of mild cognitive impairment or early dementia. The MARPEH care manager provides on-site care to residents of low-income senior housing at five sites in the Boston metropolitan area.

Maria D. Oquendo-Scharneck
Health and Diversity Coordinator
AgeOptions

Brief project description: The development of Pathways to Health referral process which links clinical practices to community driven evidence based program. Pathways would meet HIPPA compliance and include a feedback mechanism. The process would be piloted in suburban Cook County with statewide potential.

Claudia Sanford, BFA
Tenant Resource Network (TRN) Organizer
United Community Housing Coalition

Brief project description: The "Relocation Amidst Revitalization: Recreating Social Worlds for Older Adults" advocacy project conducted by a locally-based interdisciplinary team is studying how older adults respond to the ongoing challenges of resettlement. This project will advance public policy by demonstrating the need for advocates to balance growth and revitalization concerns with the costs of supporting older adults through relocation and resettlement.

Sandra Spoelstra, PhD, RN
Assistant Professor
Michigan State University College of Nursing

Brief project description: Implementation of MiCAPABLE, an evidence-based care model in the Michigan Home and Community Based Wavier program to improve the function, quality of life, and cost of care for nearly 20,000 elderly or disabled adults living in the community in lieu of nursing home placement.

Kathleen Unroe, MD, MHA
Assistant Professor of Medicine, Geriatrics
Indiana University

Nicole Fowler, PhD, MHSA
Assistant Professor of Medicine
Indiana University Center for Aging Research

Brief project description: Our project is a CMS Innovations Center sponsored demonstration project to improve care in nursing homes. This project ends in fall of 2016, and we have just received a Hartford Foundation grant for next steps planning. Our goal is to launch an OPTIMISTIC Resource Center in the fall of 2016 for wider dissemination of our project.

Amy Vandenbroucke, JD
Executive Director
National POLST Paradigm

Brief project description: Through multiple avenues, I am seeking to change changing the current approach to end of life care by advocating for advancement of the National POLST (Physician Orders for Life-Sustaining Treatment) Program, immediate access of advance care planning documents (including advance directives and POLST), and utilizing technology to improve knowledge of patient end of life care wishes and goals with health care professionals.

Jeremy Walston, MD
Raymond and Anna Lublin Professor of Geriatric Medicine
Johns Hopkins University School of Medicine

Brief project description: I am making a concerted effort to better communicate the highly clinically relevant frailty research portfolio that I and many of my colleagues have developed over the past decade. This will be targeted at health care professionals, policy makers, and insurance companies. I plan to work with both internal (Johns Hopkins) and external (TBD) partners in order to accomplish this.

Amy York
Executive Director
Eldercare Workforce Alliance

Brief project description: 1) Administrative outreach to gain support for and the implementation of workforce provisions through the regulatory process; 2) pursue opportunities to ensure the eldercare workforce is considered throughout the development of policies and programs; 3) advocate for language and funding for geriatrics and gerontology training and competencies within legislative proposals; and 4) maintain and update workforce data.