



Hartford Change AGENTS Action Awards Recipients

June 2015 – May 2016

Perioperative Geriatrics 101

Sheila Ryan Barnett, MD, Beth Israel Deaconess Medical Center, Boston, MA

Marianne Mcauliffe, MSN, RN, Beth Israel Deaconess Medical Center, Boston, MA

Domain of Practice Change: Connecting health professions education and practice

Summary:

The focus of this project is to develop a geriatric educational series to address the lack of training in perioperative geriatric principles amongst the nursing staff in the preanesthesia holding area and post anesthesia recovery units. The course will include lectures, case discussions, and a simulation session, plus the team will engage patients and caregivers in focus group discussions on the surgical experience and use the data to direct educational objectives. Advanced geriatric risk assessment will be taught through a series of tutorials provided in parallel. Retention of the basic geriatric principles will be reinforced through the use of a web based spaced-learning tool (Qstream) following the lectures and seminars.

Early Intervention for Informal Caregivers using High Fidelity Simulation via Community-Based Participatory Ethnodrama

Jacqueline Eaton, PhD, University of Utah, Salt Lake City, UT

Nancy Madsen, MS, SSW, Utah Division of Aging & Adult Services, Salt Lake City, UT

Domain of Practice Change: Transforming practice, care and services

Summary:

This project will bring together 12 experienced and 12 new caregivers to develop an ethnodrama targeting the needs of early caregivers. Ethnodrama is the process of turning verbatim nonfictionalized personal accounts into a performance with the goal of making research findings accessible to the general public. The participants will meet four times over a four month period and the resulting ethnodrama will be performed for them and family members by professional performers. Small group discussion and simulation will follow the performance. The performance will be conducted for the wider caregiving community at three other time points: during caregiver month in November; a caregiver conference held in Utah in November; and during the legislative session held in February 2016.

Transforming Practice: Innovative Care Delivery Redesign at the Hospital Unit Level to Improve Patient-Centered Outcomes in Vulnerable Elders

Kellie Flood, MD, University of Alabama at Birmingham, Birmingham, AL

Emily Simmons, MSN, RN-BC, CNL, University of Alabama at Birmingham Hospital, Birmingham, AL

Domain of Practice Change: Transforming practice, care and services

Summary:

This project addresses the need to disseminate the Acute Care for Elders (ACE) interprofessional team model of care to all hospital units via the implementation and evaluation of a Virtual ACE Intervention. The Virtual ACE Intervention utilizes unit-based provider training on geriatric

conditions, proactive identification of at-risk patients, and collaborative interprofessional team management of geriatric syndromes. The project team has already conducted a successful pilot test of the Virtual ACE Intervention on an orthopedic surgery unit, and will use the Action Awards year to evaluate the effectiveness of this practice change on both a medical and surgical unit.

Emergency Department Transitions with Nursing Homes: Improving and Standardizing Communication

Sharon Foerster, LCSW, MSW, MaineHealth, Portland, ME

Domain of Practice Change: Redesigning delivery systems

Summary:

In response to the challenge of communicating essential information between a nursing home and a hospital emergency department during a patient transfer, a group from the MaineHealth system of hospitals and nursing homes/skilled nursing facilities came together to find a solution. The group, which included representatives from each part of the care continuum during a resident transfer, developed a standardized process for what information is communicated verbally and in writing. Based on the success of the pilot, this project focuses on further dissemination of the standardized process to other hospitals in the MaineHealth system with the goal of embedding more widespread process standardization.

Improving Access to Palliative Care in Underserved Communities: Developing a Community-Based Screening Tool for Older Adults

Daniel S. Gardner, PhD, LCSW, Silberman School of Social Work at Hunter College, New York, NY

Elizabeth Capezuti, PhD, RN, FAAN, Hunter College School of Nursing, New York, NY

M. Carrington Reid, MD, PhD, Weill Cornell Medical College, New York, NY

Angela Ghesquiere, PhD, MSW, Brookdale Center for Health Aging, New York, NY

Domain of Practice Change: Strengthening quality measures and tools

Summary:

This project will develop and test a multi-domain Palliative Care (PC) screening tool, specifically for use in community-dwelling, chronically ill elders in the East and Central Harlem communities of New York City. Currently no screening tool exists for community-dwelling chronically-ill populations. Once the new tool is created, the team will partner with four sites to implement it: a case management agency and senior center will act as pilot testing sites, while two outpatient PC clinics will act as referral sites for positive screens. If the tool is found to be feasible, acceptable, and effective, the project team anticipates widespread implementation at both pilot sites, with eventual dissemination to senior centers and case management centers and case management agencies throughout the New York area and beyond.

Opening the Door: A Training for Engaging in Attuned Adult Protective Services Work

Caroline Gelman, PhD, LCSW, Silberman School of Social Work at Hunter College, New York, NY

Geoff Rogers, BA, Brookdale Center for Healthy Aging, New York, NY

Domain of Practice Change: Connecting health professions education and practice

Summary:

This project will evaluate the feasibility of training Adult Protective Services (APS) workers in a person-centered approach designed to develop trust and facilitate a collaborative worker-elder relationship to help with detection, disclosure/reporting and intervention in cases of elder abuse. The project team will implement and evaluate an interactive 8-hour, 2-unit training developed with extensive input from APS workers and supervisors. The NYC Human Resources

Administration's (HRA) APS program has committed to providing two cohorts of 20 APS workers each to participate in the training. HRA has committed to system-wide implementation if the training is found to be effective.

Calhoun County Coordinated Community Response: Redesigning Service Delivery for Victims of Elder Abuse and Neglect

Carolyn E.Z. Pickering, PhD, RN, Michigan State University College of Nursing, East Lansing, MI

Domain of Practice Change: Redesigning delivery systems

Summary:

This project focuses on redesigning the service delivery system for victims of elder abuse and neglect by using a Coordinated Community Response (CCR) model. CCRs provide a single-point-of-entry system in which the victim only has to tell their story once, coordination of service planning occurs between the agencies, and the victim is connected with the appropriate service providers. The project aims to strengthen service coordination and collaborations among community agencies through creation and adoption of a uniform intake form and case management system; successfully implement the CCR model as evidenced by an increase in services available to older adults who have experienced elder abuse and/or neglect and service coordination among agencies; and collect data for further program planning aimed at addressing elder abuse and/or neglect in the community.