



IU GERIATRICS

NEWS FROM THE INDIANA UNIVERSITY GERIATRICS PROGRAM
& THE INDIANA UNIVERSITY CENTER FOR AGING RESEARCH

SENIORS AGING WITH GRACE

The Indiana University Geriatrics Program believes that the most powerful interventions to achieve quality improvement for older adults involve system-level changes. With that in mind, they designed “GRACE.”

Geriatrics Resources for Assessment and Collaborative Care of Elders is an innovative home-based model of primary care that addresses the challenges that providers of medical and community services face in providing quality geriatric care to low income seniors—constrained resources and fragmentation of care. GRACE builds on the growing body of geriatric health services research suggesting that geriatric assessment and coordinated care across the continuum of care may improve outcomes for older patients with chronic illness.

The specific aims of GRACE are to improve quality of care, optimize functional status and independence, prevent nursing home placement, and decrease hospitalization among community dwelling low income seniors.

Patients eligible for GRACE are aged 65 and older, at <200% poverty level, live in the community and receive health care from their established primary care physician (PCP) at a community health center.

GRACE provides a geriatrics nurse practitioner (NP) and social worker (SW) caring for the patient in collaboration with the patient’s PCP to improve diagnosis and treatment of common geriatric syndromes, coordination of care, and long-term monitoring of the outcomes of care.

The NP and SW conduct an initial in-home patient assessment that identifies the geriatric conditions that GRACE has chosen to target for intervention.



- targeting elders at risk
- collaborative expertise in geriatrics
- integration into primary care
- institutionally endorsed clinical practice guidelines
- coordination of care across all sites of care
- integration of data systems that support clinical practice and facilitate longitudinal monitoring

TARGETED CONDITIONS

Institutionally endorsed clinical practice guidelines have been developed for 12 common geriatric conditions: difficulty walking/falls, depression, dementia, urinary incontinence, malnutrition/weight loss, chronic pain, vision and hearing impairment, medication management, health maintenance, caregiver support, and advance care planning.

GRACE care plans and suggestions for the selected targets are developed with the assistance of the GRACE interdisciplinary team that includes a geriatrician, pharmacist, occupational therapist, mental health specialist, and community resource expert.

These plans and suggestions are discussed with the primary care physician then implemented by the NP and SW who also provide ongoing care management. The GRACE

interdisciplinary team periodically reviews the care plans.

TRACKING

Implementation of the GRACE model of care is tracked in intervention patients using a Web-based care management tool. Preliminary data from 107 intervention subjects show a mean of 6 targeted conditions were selected for each patient with difficulty walking (69%), chronic pain (47%), urinary incontinence (45%), and visual impairment (43%) as the guidelines most commonly selected by the PCP and GRACE team.

Steve Counsell, MD, is the Principal Investigator for this four-year randomized controlled clinical trial testing the effectiveness of the GRACE model compared to usual care. The Nina Mason Pulliam Charitable Trust funds the GRACE clinical program with matching support from Wishard Health Services.



INDIANA
UNIVERSITY
SCHOOL OF
MEDICINE

GERIATRIC MEDICINE EXPANDS TO ROUDEBUSH VA



Trish Moore, MSN, RN, CNS, and Michael Sha, MD, consult with a patient at the VA geriatric primary care clinic.

Recognizing not only our recent accomplishments but also our potential, the Indiana University Geriatrics Program was selected by the Association of Directors of Geriatric Academic Programs (ADGAP) to participate in "Developing a New Generation of Academic Programs in Geriatrics." Funded by the John A. Hartford Foundation, Inc., this award supports a major expansion of our academic geriatric program to the Roudebush Veterans Affairs Medical Center in Indianapolis. Nearly 600,000 Veterans live in Indiana, and approximately 60,000 receive care in the state's VA facilities.

Support from the ADGAP academic geriatric program development initiative has established geriatric pri-

mary care clinics at the VA in collaboration with colleagues in the Roudebush VA Division of General Internal Medicine. With the support of the leadership of the VAMC, the initiative represents an important first step in VA geriatrics program development.

The geriatric primary care clinics are staffed by two geriatricians, both of whom completed their fellowship training in the IUSM Geriatric Medicine Fellowship Program. The clinics are serving as important new sites for geriatrics education for fellows, internal medicine residents, and medical students.

A new Geriatrics Steering Committee facilitates strategic planning and geriatrics program development at the Roudebush VAMC, and organizes didactic lectures in geriatric medicine and a Geriatrics Visiting Professor Program. Finally, the committee helps facilitate collaboration between the IU Center for Aging Research and the VAMC Health Services Research & Development program.

The IU Geriatrics Program looks forward to a long-term collaboration with the VA as we work toward our shared goal to improve the quality of life of older adults.

BOUSTANI JOINS IU GERIATRICS PROGRAM



Malaz Boustani, MD, MPH was appointed Assistant Professor of Medicine in July, 2002. He completed Clinical Research Curriculum and Geriatric Medicine Fellowships at the University of North Carolina at Chapel Hill. He also earned a Master's Degree in Public Health Care & Prevention in 2002.

Dr. Boustani's clinical duties include consulting in the IU Center for Senior Health, and seeing patients in the Alzheimer's Unit at Lockefield Village and in the House Calls for Seniors program.

His research focuses on improving the current management of agitated behavior among patients with dementia in residential care assisted living settings using integrated combined pharmacological and non-pharmacological interventions.

He has also joined the IU Center for Aging Research as a Center Scientist and Regenstrief Institute as a Research Scientist.

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PALLIATIVE CARE PROGRAM PARTNERS WITH SENIOR CARE AT WISHARD

- providing the opportunity to experience the end of life with dignity, support and compassion ■

Wishard Health Services' Palliative Care Program and Senior Care at Wishard are collaborating to provide quality palliative care services for older adults served by Wishard.

Program Director Gregory Gramespacher, MD, announces the program has received a grant from St. Margaret's Guild to fund a full time nurse practitioner. Combined with support from the Efroymsen Fund, the position will significantly

expand the ability of the program to care for indigent patients who are terminally ill through timely referral to hospice and palliative care.

To meet the patients' and families' medical, spiritual and psychosocial needs, the program's interdisciplinary team members provide a variety of services, including inpatient consultation by the team, assessment and treatment options for pain management, checkups by palliative care in the IU Center for

Senior Health, palliative home care coordination, home visits by the palliative care team members, and bereavement services.

Continuing education is integral to the program; the team is available for lectures, seminars, tutorial sessions and courses. The palliative care team follows the latest advances in research to improve the care and quality of life for patients.

Clinical services ■ 630-6357
Community Outreach ■ 630-2556

WHAT IS GERIATRICS HEALTH SERVICES RESEARCH?

- translating "what we know" into "what we do" ■

In describing the research focus of IU Geriatrics, we often use the phrase "geriatrics health services research."

Some academic geriatrics programs focus on specific aging-related diseases such as Alzheimer's disease, or cancer, or osteoarthritis. Often these programs pursue investigation about the pathophysiology of the disease or seek new discoveries about effective treatments or cures.

This biomedical research produces important new knowledge that can improve the lives of older adults. Unfortunately, generating new knowledge does not assure its effective application in clinical practice. Indeed, true change in clinical practice may lag a decade or more behind the new recommendations for care.

True change in clinical practice typically requires substantive changes in the system of care. Geriatric health services research seeks to close the gap between knowledge and practice in the care of older adults.

Changing the practice environment or health care system in a manner that enables practitioners to deliver quality state-of-the-art care represents one important mechanism to close the gap between knowledge and

practice. Changing provider behavior or patient behavior is another important tool.

Whether the target of the research is the system, the provider, or the patient (or all three), the ultimate goal is to raise the quality and efficiency of health care.

Within the broader theme of geriatric health services research, IU Geriatrics has a specific focus on improving the quality of care provided to older adults in primary care settings. To accomplish this, we

- bring team resources and interdisciplinary tools to the generalist physician that help coordinate care across the continuum of care,
- apply information technology to help bridge gaps in care that occur when an older adult transitions between sites of care, including the home, and
- help older adults and their families become more effective in self-management.

At Indiana University, geriatrics health services research takes "what we know" and translates it into "what we do."

IMPACT RESULTS PUBLISHED IN JAMA

"The IMPACT model, a collaborative, stepped care management intervention for late-life depression, appears to be feasible and significantly more effective than usual care in a wide range of primary care practices," states Christopher Callahan, MD, and study co-authors in the December 11, 2002 issue of JAMA. Callahan was the IU site principal investigator.

The Wishard Adult Medicine Clinical Practice was one of 18 primary care clinics from 5 states, participating in IMPACT—Improving Mood: Providing Access To Collaborative Treatment For Late Life Depression. The 1,801 participants were aged 60 years or older (65 percent women) with major depression (17 percent), dysthymic disorder (30 percent), or both (53 percent).

Unutzer J, Katon W, Callahan CM, et al (Counsell SR, Dickens J, Hendrie HC, Kroenke K, Steinmetz CA). Collaborative care management of late-life depression in the primary care setting: a randomized controlled trial. JAMA. 2002; 288(22):2836-45.

BUTTAR & MCHORNEY RECEIVE CAREER AWARDS

Amna Buttar, MD, MS has been awarded a five-year Geriatrics Academic Career Award from the US Department of Health and Human Services. The HRSA



award provides salary support to facilitate career development of geriatricians in junior faculty positions who are committed to academic careers teaching clinical geriatrics. Steve Counsell, MD will serve as Dr. Buttar's primary mentor for award activities along with local co-mentor Lisa Harris, MD, and Robert Palmer, MD, MPH, Head of Geriatric Medicine, Cleveland Clinic Foundation.

Colleen A. McHorney, PhD, is the recipient of a HSR&D Research Career Scientist Award. RCS awards are for



established, independent investigators who have distinguished themselves through scientific achievement and who contribute to the VA research program by training and mentoring junior VA scientists, by functioning as a resource for the research community, by serving on VA research or other committees, and/or by collaborating with clinician investigators.

HULMAN AWARD GOES TO COUNSELL

Steve Counsell, MD, was honored with a 2002 Hulman Health Achievement Award in Geriatrics and Gerontology on October 17, 2002 at the Indiana Public Health Foundation's annual awards banquet. The award is Indiana's "PREMIER" health award in recognition of Indiana's citizens and organizations whose efforts have resulted in a significant improvement to the human race.



CLINICAL SPOTLIGHT

IU Center for Senior Health Call 317-630-8000

GERIATRICS CONSULTATION

to support primary care physicians
in caring for the needs
of their patients 65 and older

SPECIALTY CONSULTATION

Neurology ■ Neuropsychology
Physical Medicine & Rehabilitation
Geriatric Psychiatry ■ Podiatry
Palliative Care ■ Urology

PRIMARY CARE SERVICES

limited to adults needing help
with two or more ADL's

The center is a clinical venue of
Senior Care at Wishard

IU GERIATRICS

is a publication of the
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IU GERIATRICS CONFERENCES

Wishard T2008 A&B, Wednesdays, 7:30–8:30am

- May 7 **Practical Management of Parkinson's Disease
and Complications**
Joanne Wojcieszek, MD, Associate Professor of Clinical Neurology
- May 21 **You Ain't Too Old To Dance To The Beat: The Aging Ear**
Michael Wynne, PhD, Associate Professor
Dept of Otolaryngology Head and Neck Surgery
- June 4 **Cytokines and Cognition**
Craig Wilson, MD, Geriatrician
Director, St. Vincent Geriatric Medicine Fellowship Program
- June 18 **Breast Cancer in Older Women**
Anna Maria Storniolo, MD, Professor of Clinical Medicine

CME credit is given for attending the conferences.

To confirm speaker topics and dates, call Kathy Frank at 630-8183.