



Preparing People and Programs to Care for the Elderly

In 2005, there were 36.8 million people age 65 and older in the US (12.4 percent of the population), according to the Administration on Aging. By 2030, the number is expected to swell to 71 million and comprise 20 percent of our population. At the same time, New Hampshire and Vermont are among the fastest aging states in the country and future projections show a dramatic increase in the number of older adults who will need health services.

In anticipation of this demographic shift, a geriatrics initiative has been underway over the past two years involving DHMC, the Hitchcock Clinic, DMS, and local providers to develop a comprehensive plan addressing education, clinical services, and research.

In response to a mandate and vision statement by senior leadership, the Geriatric Initiative has been guided by an Executive Committee and an Operations Committee chaired by Dr. Stephen Bartels, co-director of Dartmouth's Center for Aging. These committees have focused on both raising awareness and planning for programs that will increase Medical Center and regional capacity to care for older adults.

EDUCATION, TRAINING AND WORKFORCE DEVELOPMENT

"One of our first priorities is to grow our workforce of healthcare professionals with expertise in geriatrics and to educate the public on prevention and optimizing health in older age," explains Bartels.

According to Sandra Dickau, who as Vice President of Patient Care is helping to lead the effort, "Dr. Bartels and our other geriatricians—Drs. Lisa Furmanski, Julie Bynum, Margo Krasnoff, and John Wasson—are helping to lead efforts to develop a geriatric education program for our residents and house staff." New programs include bedside geriatric teaching rounds on the 1 East Hospital Unit, an expanded one-month geriatric experience for medical residents, and house staff participation in one-week mini-residency programs in geriatrics to acquire advanced training.

In addition, Darlene Saler in the Office of Care Management is overseeing a workgroup to develop an Aging Resource Center at DHMC that will provide older patients and family members with current information on senior health and resources, to help in making difficult healthcare decisions commonly confronted by older adults.

ENHANCING GERIATRIC NURSING

A major focus of the initiative has been to enhance nurse training in clinical geriatrics. One of the most impressive efforts underway involves DHMC's grant-funded participation in Nurses Improving Care for Health System Elders (NICHE)—a national geriatric nursing program that works to achieve systemic nursing change that will benefit hospitalized older patients.

"We've distributed approximately 1,400 surveys to nursing staff and other non-physician clinicians as part of NICHE's Geriatric Institutional Assessment Profile, to try to understand the knowledge, attitudes, and beliefs of our staff about caring for geriatric patients," says Suzanne Beyea, Director of Nursing Research and a member of the Geriatric Operations Committee. "The results will benchmark us against other participating organizations and help us to target activities to support our overall staff development."

A number of nursing leaders have also attended NICHE educational conferences. "Currently, no schools of nursing in the area focus on geriatric nursing programs," she says. "So the training has been key in helping people begin to define this population as having special needs. I think it's really helping us to increase our capacity to care for the elderly."

This year, DHMC has sponsored a series of geriatric nursing training conferences that have been fully attended.

NEW THINKING ABOUT AGING

In addition to education for professionals, a highly successful public education program occurred over April and May of this year through the Dartmouth Community Medical School Program (DCMS) entitled, "The New Thinking About Aging."

According to Dr. Donald St. Germain—who developed the program in collaboration with Drs. Bartels, Bynum, Wasson, Fago, and others—over 500 members of the public participated in this eight-week program that presented new advances in geriatrics and successful aging.

"As we presented the very latest thinking about the unique spectrum of medical conditions that occur in older adults, we also tried to stress the dynamic continuum that exists between vitality and frailty that occurs in this population," explains St. Germain. "Through the use of interactive case presentation and panel discussions, our goal was to help our audience better understand their healthcare options and thus empower individuals and their family members to direct their care."

For the first time, in addition to holding its Tuesday evening series in Kellogg Auditorium on the Dartmouth Medical School campus, the DCMS program also held sessions at the Lebanon Senior Center on Saturday morning. "It proved to be a wonderful venue that helped us attract participants with a more diverse background and from a

broader geographic area," he says.

"We have also been using the DCMS program to encourage community involvement in the planning of our geriatrics program at DHMC," adds St. Germain. "The last session included a community forum event where participants lent their ideas to our planning efforts and those of other institutions involved in elder care programs in the region. This was a very exciting event and was attended by all our institutional leaders."

SENIOR HEALTH SERVICES AND RESEARCH IN AGING AND GERIATRICS

A central component of the geriatric planning process has been the development of a plan for a program of Senior Health Services designed to improve quality of care and outcomes for older adults.

"In addition to senior health quality improvement initiatives and programs at DHMC, a major area of focus involves connecting with our community resources," explains Dickau. "Hospitalization is only a brief event of this growing population, and we want to assure those community connections are made once they leave the hospital."

"We're considering launching a couple of major initiatives," she adds. "One is an 'Elder Care' program that will focus on issues like mobility and cognition in an effort to prevent patients from becoming debilitated as a result of their hospital admission. We're also working with the Visiting Nurse Alliance Association of Vermont and New Hampshire on the concept of a 'bridge' program, which will allow us to make stronger connections with community providers and resources."

"Also, through the Center for Aging, with Drs. Bartels, Wasson, Bynum, and others, we are able to inform our planning by conducting quality improvement research, while also looking at the qualitative and important public health research that is going on nationally in the aging population," Dickau says.

According to Bartels, "We are at a very exciting and critical juncture in which we have the opportunity to develop the Center for Aging that currently exists at Dartmouth into a world-class Center on Senior Health and Aging that integrates innovative programs in senior health care, education, and research."



Sandra Dickau, Vice President of Patient Care, is helping to lead DHMC's Geriatric Initiative.