

2014 Donald P. Kent Award Lecture

Care, Discovery, and Leadership – Connections to Practice and Policy

Richard M. Allman, MD

Chief Consultant, Geriatrics and Extended Care

Department of Veterans Affairs

Washington, DC

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Funding

- Department of Veterans Affairs
- National Institute on Aging
- National Center for Advancing Translational Sciences
- John A. Hartford Foundation



Donald P. Kent Award

The Donald P. Kent Award is given annually to a member of The Gerontological Society of America for professional ***leadership in gerontology through teaching, service, and interpretation of gerontology to the larger society.***

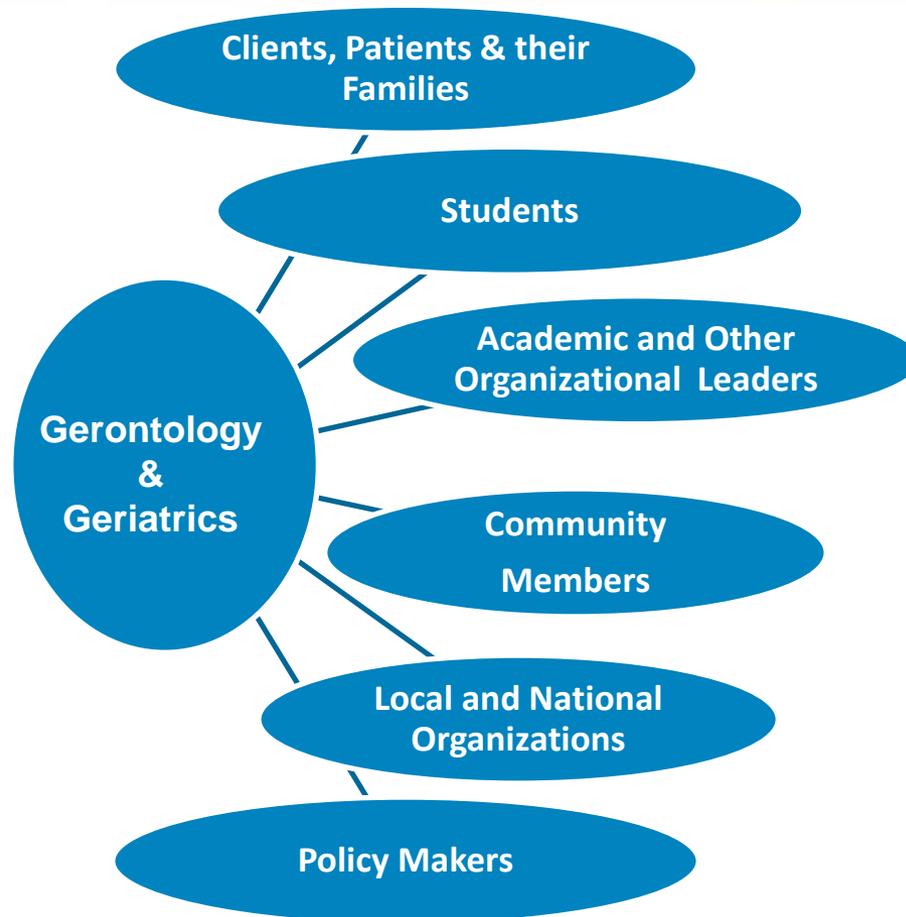
Making Connections: From Cells to Societies

- 2014 Theme for Gerontological Society of America (GSA) 67th Annual Scientific Meeting
- My personal mission statement – Bring together people and new ideas to improve programs and people's lives
- “Be a Connector”

Presentation Goals

- Consider together what it means to translate and interpret Gerontology to the larger society and how we do that
- Share personal experiences and observations to identify connections between care, discovery, and leadership with practice and policy
- Examine the implications for scholars, practitioners, and policy makers in Gerontology

Target Audiences for Messages in the Language of Gerontology and Geriatrics



Translation versus Interpretation

- A translator understands the source language and the culture of the country where the text originated and then writes down the text clearly and accurately in the target language.
- Interpreters process and memorize the words that a source-language speaker is saying, while simultaneously outputting in the target language the translation of words the speaker said 5-10 seconds earlier.

Products of Translation and Interpretation

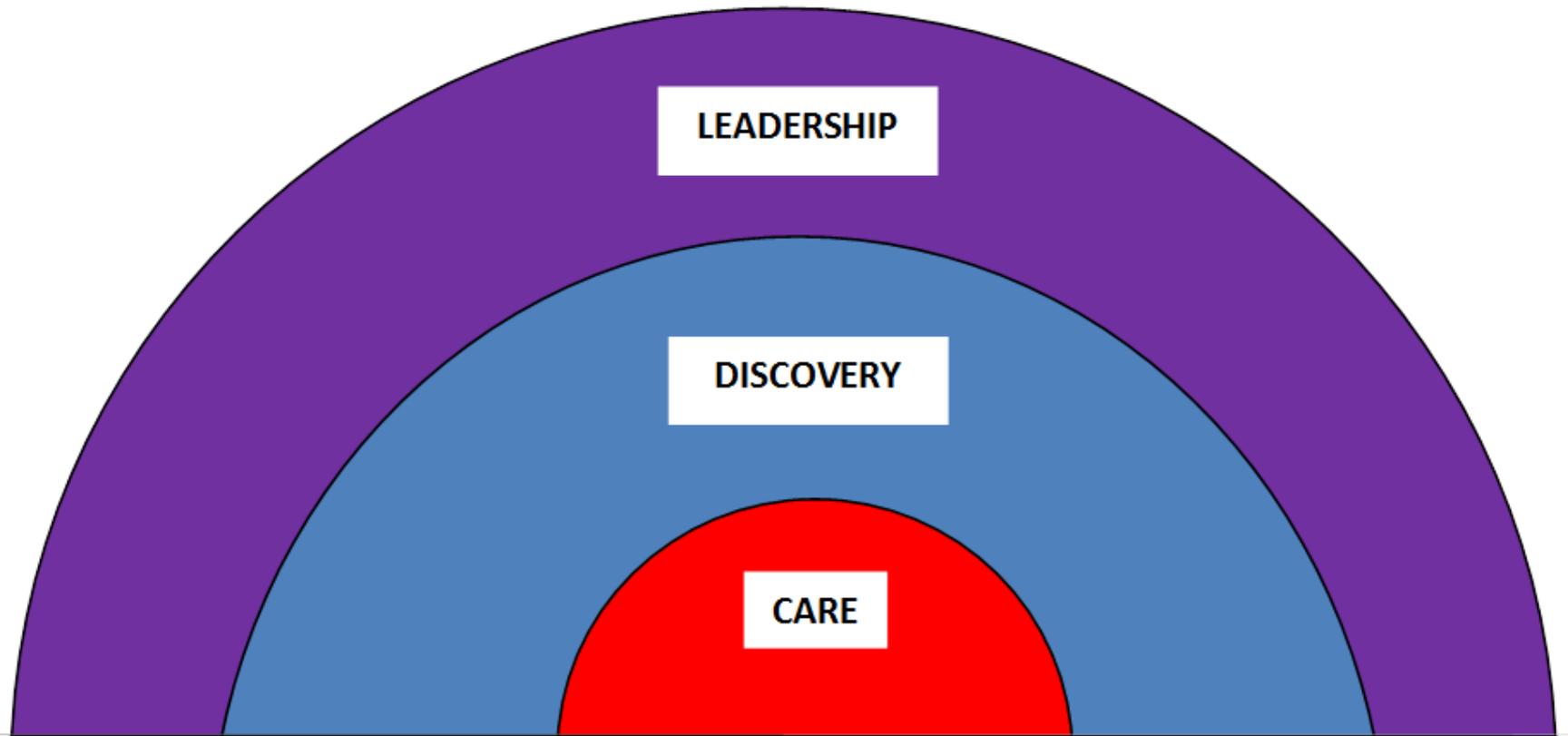
Translation

- Written reports
- Peer reviewed publications
- Chapters and books
- Grant applications
- Model curricula
- Program manuals
- Newspaper and magazine articles
- Social media posts
- Guidelines and policy
- Laws and regulations

• Interpretation

- Discussions with patients, families, colleagues, and friends
- Lectures to students
- Team meetings
- Mentoring sessions
- Supervisor briefings
- Presentations to local, regional, and national groups and leaders
- Media interviews, videos, movies and use of the arts

Career Opportunities for Interpreting Gerontology to Others



Care is Foundational to Effective Leadership

Noun

- The provision of what is necessary for the health, welfare, maintenance, and protection of someone or something

Verb

- Feel concern or interest
- Attach importance to something
- Feel affection or liking
- Look after and provide for the needs of
- Love

Care Leads to Commitments to Competency, Service, and Teaching

- Educational Preparation and Training – Medical School, Residency, Fellowship
- Practice and Service - Faculty Member, Practitioner, Primary and Consultative Geriatrics
- Teaching and Mentoring – Medical and Other Health Professional Students, Graduate Students, Post-Doctoral Fellows, Junior Faculty

Improved Patient Outcomes Result from Caring Connections



“I know you. You saw me 3 years ago and told me to stop smoking, and I did.”

Patient in Constanta, Romania

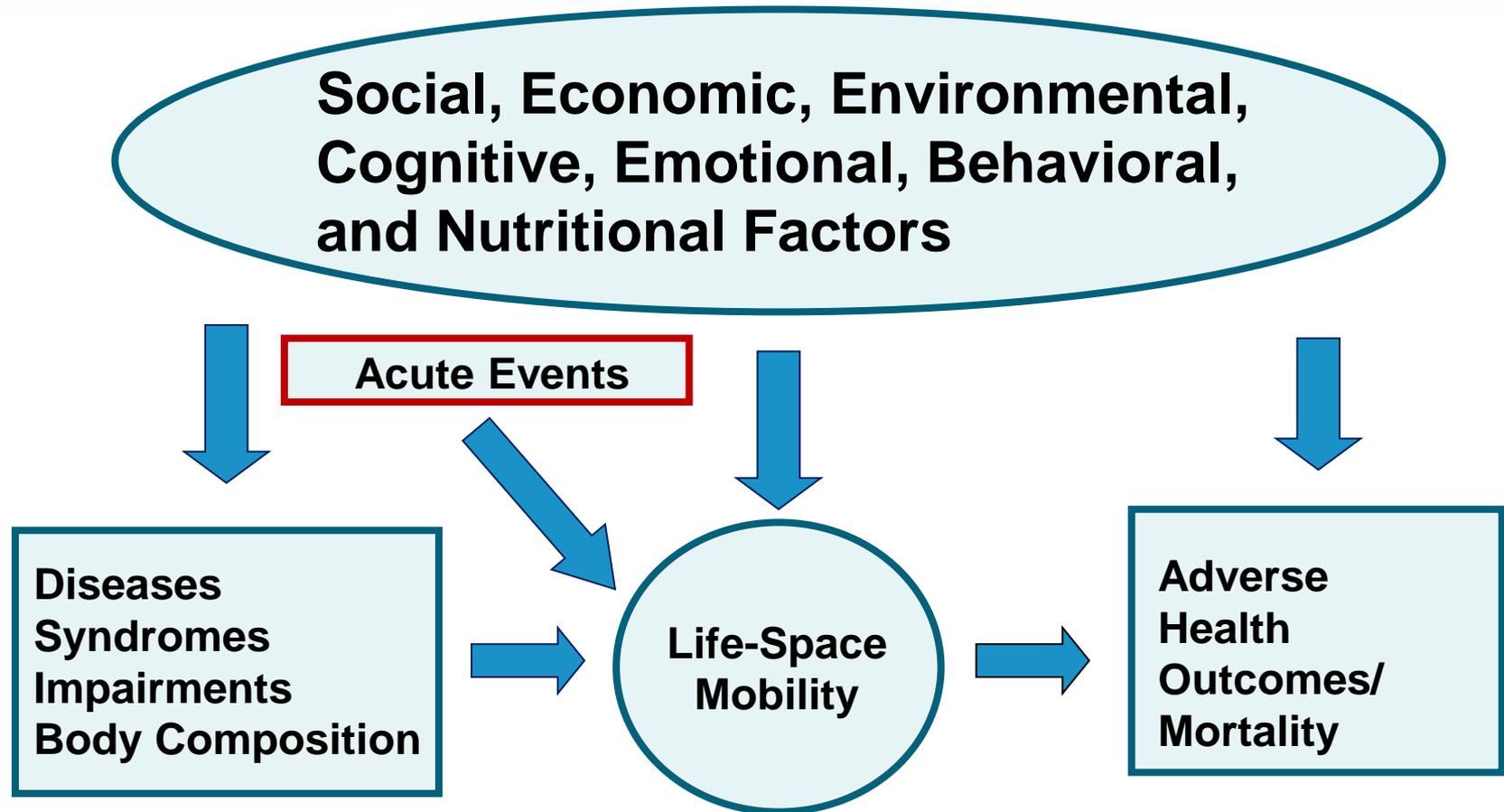
Connection of Caring Educational Efforts to Health System Improvement Over 25 Years

- **Practicing Physician in Tuscaloosa, Alabama** – I had you as an attending physician in 1986. You were the only attending that ever taught me anything about pressure ulcers. I learned from you about how prolonged stays in emergency rooms on stretchers may be factor in the development of pressure ulcers . I have annually given lectures to the Emergency Room staff, telling them how important it is to reposition patients. I also serve as a nursing home medical director, where I regularly provide staff training on pressure ulcer prevention.

Care Inspires Discovery

- **Cardiovascular Disease**
- **Quality Improvement**
- **Health Disparities**
- **Mobility and Complications of Mobility Loss**

Conceptual Model for Mobility and Outcomes in Older Adults



The Life-Space Assessment

For additional information about the UAB Study of Aging Life-Space Assessment, please contact psawyer@uab.edu.

UAB Study of Aging Life-Space Assessment

Name: _____ Date: _____

These questions refer to your activities just within the past month.



LIFE-SPACE LEVEL	FREQUENCY						INDEPENDENCE	SCORE
During the past four weeks, have you been to . . .	How often did you get there?						Did you use aids or equipment? Did you need help from another person?	Level X Frequency X Independence
<i>Life-Space Level 1 . . . Other rooms of your home besides the room where you sleep?</i>	Yes	No	Less than 1 /week	1-3 times /week	4-6 times /week	Daily	1 = personal assistance 1.5 = equipment only 2 = no equipment or personal assistance	
Score	_____ X _____		_____ X _____				=	<i>Level 1 Score</i>
<i>Life-Space Level 2 . . . An area outside your home such as your porch, deck or patio, hallway (of an apartment building) or garage, in your own yard or driveway?</i>	Yes	No	Less than 1 /week	1-3 times /week	4-6 times /week	Daily	1 = Personal assistance 1.5 = Equipment only 2 = No equipment or personal assistance	
Score	_____ X _____		_____ X _____				=	<i>Level 2 Score</i>
<i>Life-Space Level 3 . . . Places in your neighborhood, other than your own yard or apartment building?</i>	Yes	No	Less than 1 /week	1-3 times /week	4-6 times /week	Daily	1 = Personal assistance 1.5 = Equipment only 2 = No equipment or personal assistance	
Score	_____ X _____		_____ X _____				=	<i>Level 3 Score</i>
<i>Life-Space Level 4 . . . Places outside your neighborhood, but within your town?</i>	Yes	No	Less than 1 /week	1-3 times /week	4-6 times /week	Daily	1 = Personal assistance 1.5 = Equipment only 2 = No equipment or personal assistance	
Score	_____ X _____		_____ X _____				=	<i>Level 4 Score</i>
<i>Life-Space Level 5 . . . Places outside your town?</i>	Yes	No	Less than 1 /week	1-3 times /week	4-6 times /week	Daily	1 = Personal assistance 1.5 = Equipment only 2 = No equipment or personal assistance	
Score	_____ X _____		_____ X _____				=	<i>Level 5 Score</i>
TOTAL SCORE (ADD)								<i>Sum of Levels</i>



Life-Space Mobility – Predictor and Outcome

- Proved to be a reliable and valid measure of community mobility reflecting quality of life and function in the domain of social participation
- Administered by interview or in a self-administered form
- Predicts disability, cognitive change, nursing home admissions, hospitalizations, and mortality
- Detects clinically important changes in mobility and changes in life-space reflect the severity of the adverse event
- Post-acute care declines in life-space can be prevented
- Translated and used in at least 8 different languages

Care Inspiring Academic Program Leadership (1990-2014)

- Division of Gerontology, Geriatrics, and Palliative Care, 1990-2013
- Comprehensive Center for Healthy Aging, 1992-2014
- Geriatric Education Center, 1993-2007
- Alabama Quality Assurance Foundation (AQAF), 1995-2005
- Southeast Center of Excellence in Geriatric Medicine, 1998-2014
- Birmingham/Atlanta VA Geriatric Research, Education, and Clinical Center (GRECC), 2001-2014
- Deep South Resource Center for Minority Aging Research, 2007-2014
- Center for Clinical and Translational Science (CCTS) Nascent Project and Pilot Grant Programs, 2010-2014

Connection Between Academic Leadership with Practice

- Patient Care Programs
 - Acute Care for Elders (ACE) Unit (UAB)
 - Community Nursing Home Medical Directorships (UAB)
 - Community Hospice Medical Directorships (UAB)
 - Geriatric Primary Care and Consultative Clinics (UAB and VA)
 - Geriatric Hospital Consults (UAB and VA)
 - Home Based Primary Care/Geriatric Assessment Clinic (VA)
 - Specialty Clinics in Continence (UAB and VA)
 - Specialty Clinic in Mobility and Fall Prevention (VA)
 - Palliative Care Clinics (UAB and VA)
 - Palliative Care Consult Services (UAB, VA, and Children's Hospital)
 - Palliative Care Inpatient Units (UAB and VA)

Connection Between Academic Leadership and Teaching

- **Education Programs**

- Clinical Training Academy in Palliative Care
- Geriatric Education Center
- Geriatric Fellowship Program
- Geriatric Scholars Program
- Palliative Care Fellowship Program
- Palliative Care Leadership Center
- VA Special Fellowship in Advanced Geriatrics
- Reynolds Program
- Southeast Center of Excellence in Geriatric Medicine
- NIA Center of Excellence in Pain Education

Increasing Connections Between Academic Leadership with Practice and Policy

- Ali Ahmed, MD, MPH
- Donna Bearden, MD, MPH
- Cynthia Brown, MD, MSPH
- C. Barrett Bowling, MD
- Katrina Booth, MD
- Olivio Clay, PhD
- Martha Crowther, PhD
- Yvonne Eaves, PhD
- Kellie Flood, MD
- Cassandra Ford, PhD
- Stephanie Garrett, MD, MPH
- Marianthe Grammas, MD
- Stephen Gray, MD, MSPH
- Patricia Goode, MD
- Lonnie Hannon, PhD
- Caroline Harada, MD
- Heather Herrington, MD
- Giyeon Kim, PhD
- Anne Halli-Tierney, MD
- Richard Kennedy, MD, PhD
- Elizabeth Kvale, MD
- Alexander Lo, MD, PhD
- Victor Mark, MD
- Alayne Markland, DO, MSPH
- Ryan Nash, MD, MA
- Holly Richter, PhD, MD
- Christine Ritchie, MD, MSPH
- Patricia Sawyer, PhD
- Kendra Sheppard, MD, MSPH
- Trygve Tollefsbol, DO, PhD

Outcomes of Translation and Interpretation of Gerontology as an Academic Leader

- Improved patient outcomes
- Enhanced student knowledge, skills and abilities
- Recruitment of others into Gerontology
- Funding and support for local and regional programs
- Minimal impact on national policy or issues

VA Mission

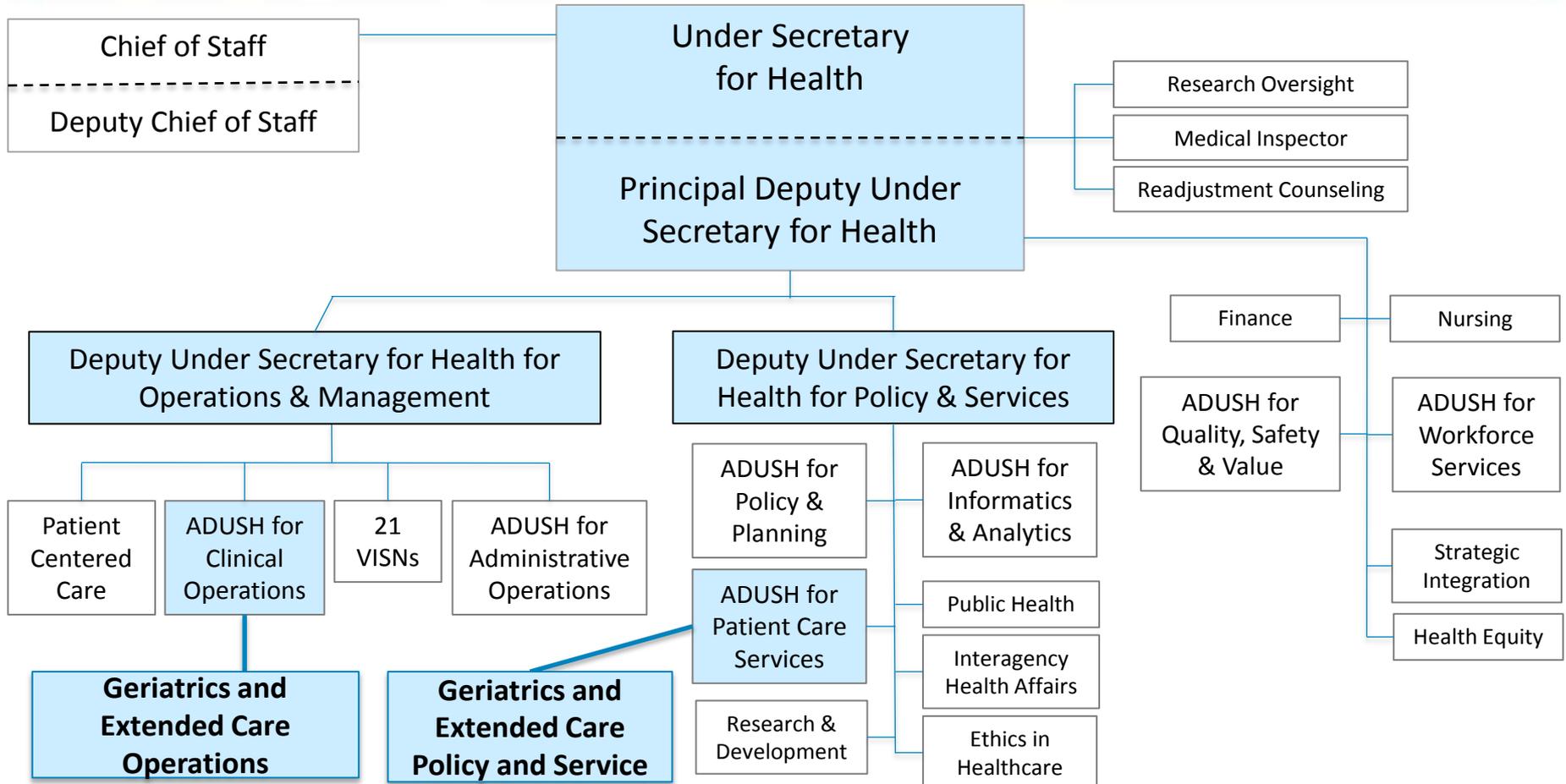
Mission:



Core Values: Integrity, Commitment, Advocacy, Respect & Excellence

Core Characteristics: Trustworthy, Accessible, Quality, Innovative, Agile & Integrated

Veterans Health Administration (VHA) Organizational Chart



Geriatrics and Extended Care (GEC) Vision

**Chief Consultant,
Policy and Services**

Richard M. Allman, MD

**Executive Director,
Operations**

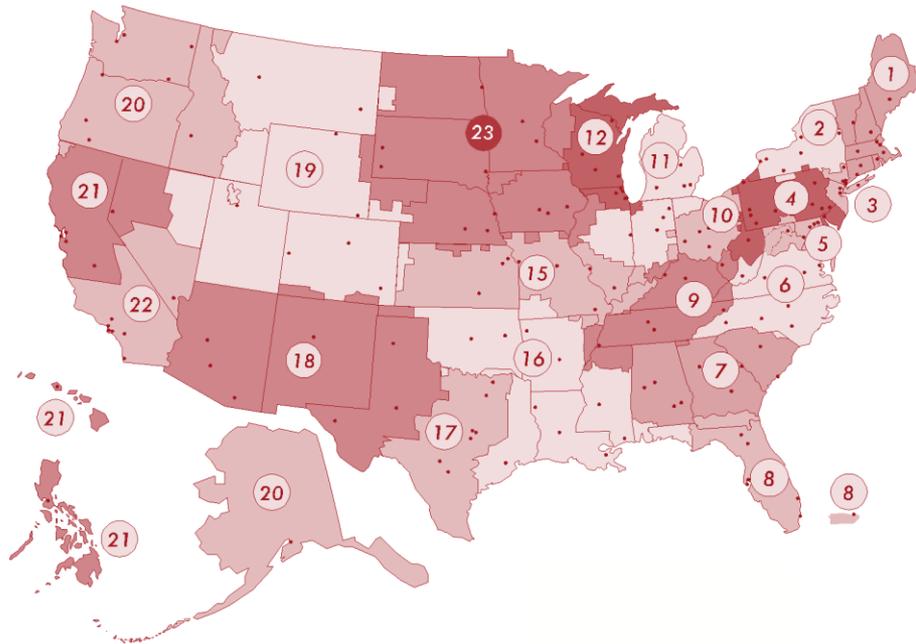
Thomas Edes, MD

Common Vision: One GEC –

Empowering Veterans and the Nation to rise above the challenges of aging, disability, or serious illness

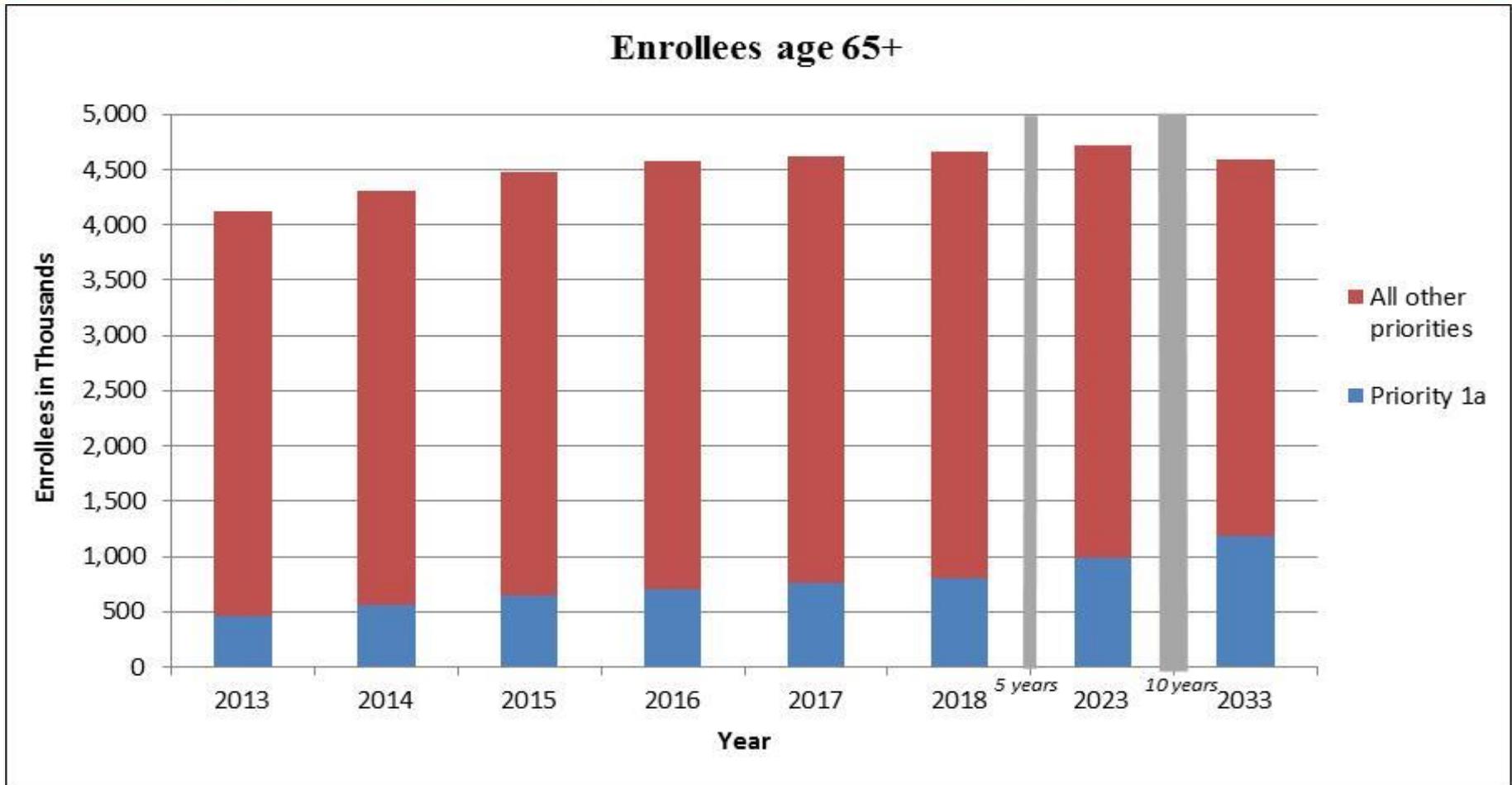
Veterans Health Administration (VHA) Health System

In 1996, VA began the creation of Veterans Integrated Service Networks (VISNs) to transform VA Health Care from a “*Hospital System*” to a “*Health System*” with 21 VISNs.

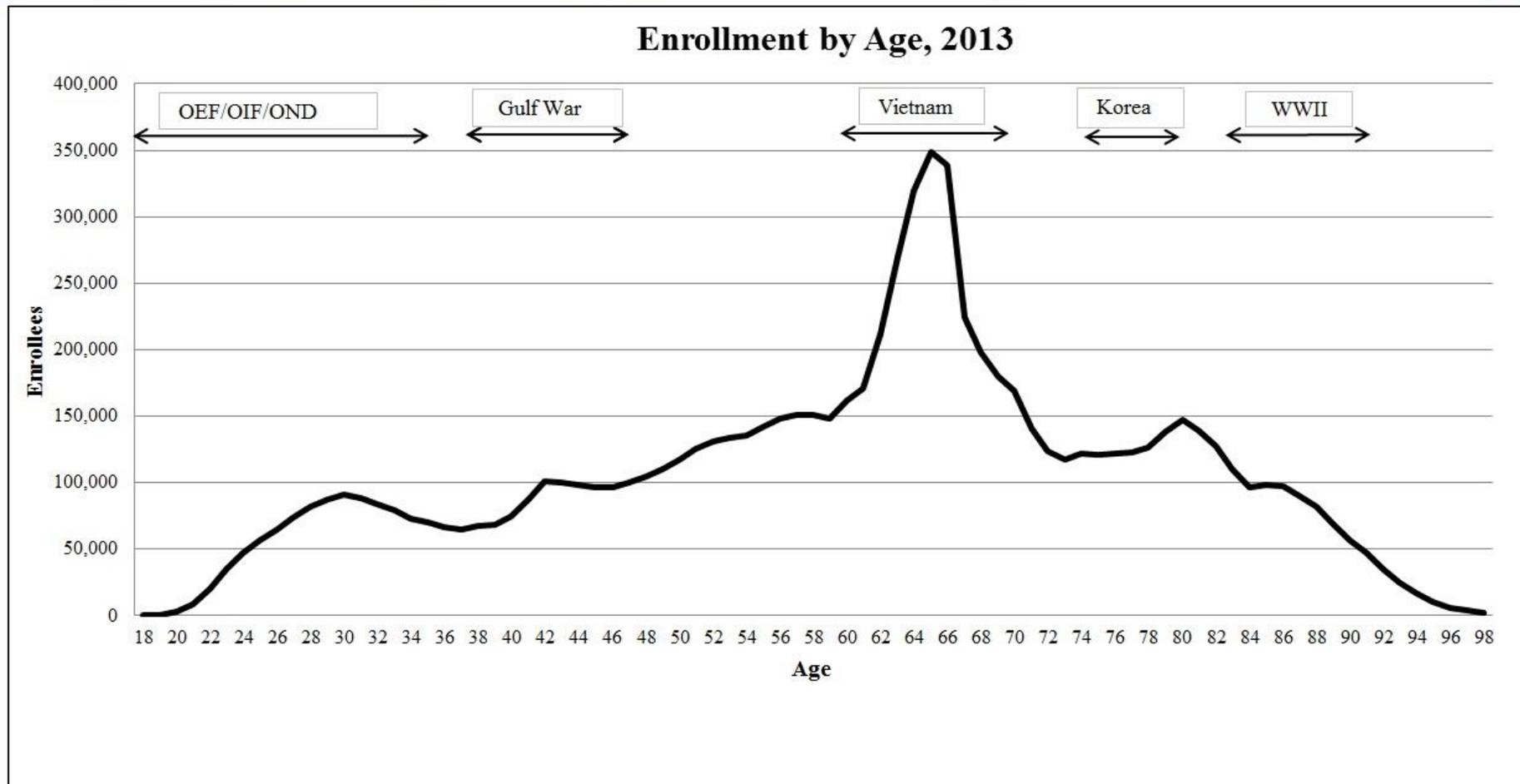


- **150** Medical Centers
 - 820 Community-Based
 - 150 Hospital-Based
 - 9 Mobile
 - 6 Independent
- **300** Vet Centers
 - 70 Mobile Vet Centers
- **104** Domiciliary Residential Rehabilitation Programs
- **135** Community Living Centers

Projected VHA Enrollees Over 65 Years Old



VA Enrollees By Age, 2013

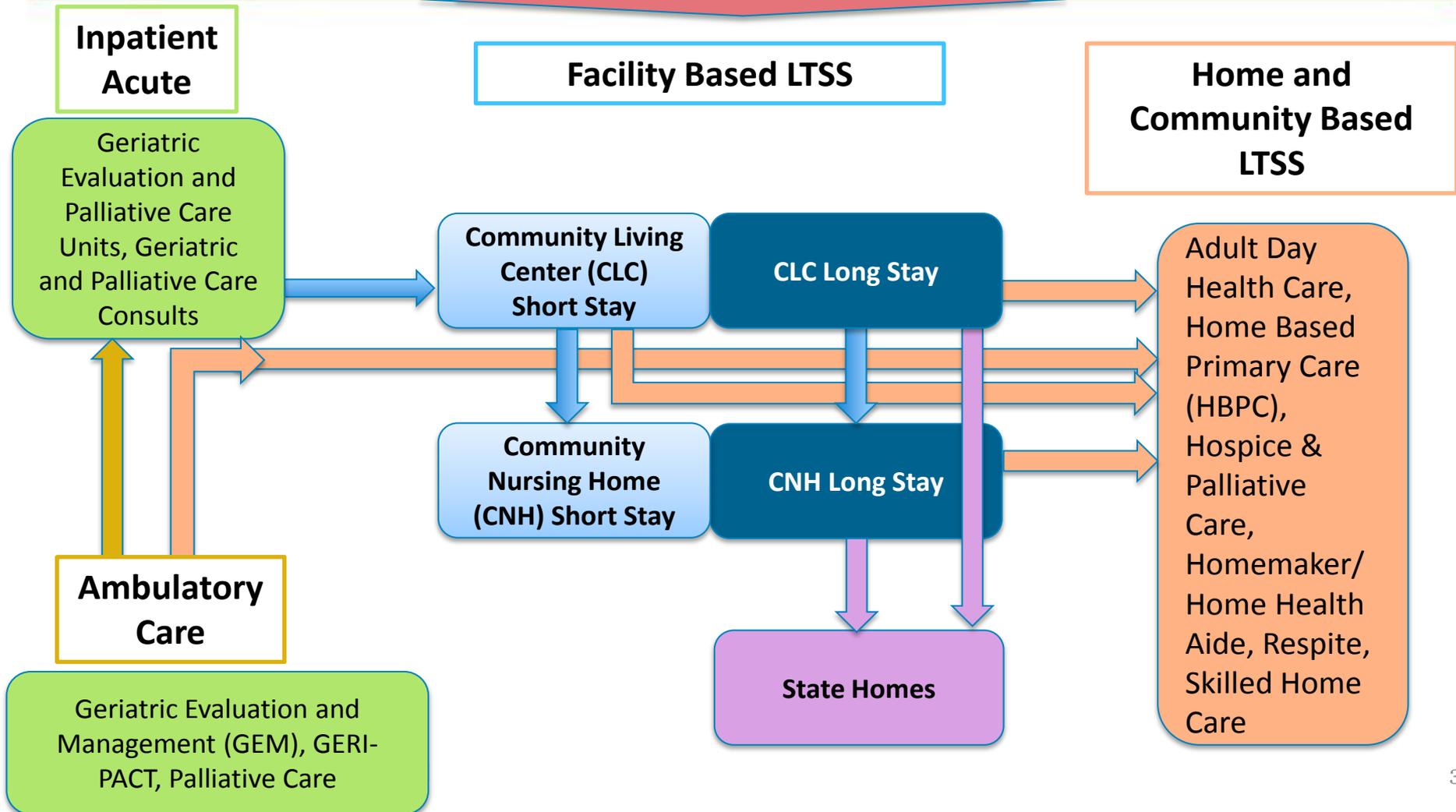


GEC MISSION

Honor Veteran's preferences for health, independence, and well-being in the face of aging, disability, or illness by advancing expertise, programs, and partnerships.

Geriatrics and Extended Care Programs and Long Term Support and Services (LTSS)

Transitional Care Programs Impacting Outcomes in All Settings



Goals to Guide The Way Forward

- Provide **leadership and oversight** for a well-integrated, system-wide continuum of evidence-based, Veteran-centric GEC programs and services to meet the needs of Veterans, families, and their caregivers.
- Establish **infrastructure and** promote the use of **data, tools, and continuous quality improvement** approaches to ensure personalized, proactive, Veteran-centered care.
- Ensure Veterans have reliable **access to quality care** in facility, community, and home-based settings, delivered by **appropriately trained health care professionals, teams, and caregivers.**

Goals to Guide The Way Forward

- Achieve **exceptional outcomes** including exemplary Veteran, employee, and other **stakeholder satisfaction** with our programs and services.
- Be excellent **financial stewards** in delivering high-value programs and services through **accountability, collaboration, engagement, and alignment** of GEC resources with VACO, VISN, medical centers, clinics, and external partners.

GEC Accomplishments Since January 2014

- Developed common vision, mission and goals
- Obtained \$10 million to expand Veteran Directed-Home and Community Based Services in FY 14
- Funded first new Geriatric Research, Education, and Clinical Center (GRECC) since 2001 in Denver, Colorado
- Expanded and enhanced partnerships within VA and with external partners to pursue common goals
- Continued successful Geriatric and Palliative Care programs during a period of challenge and change

Presentation Goals

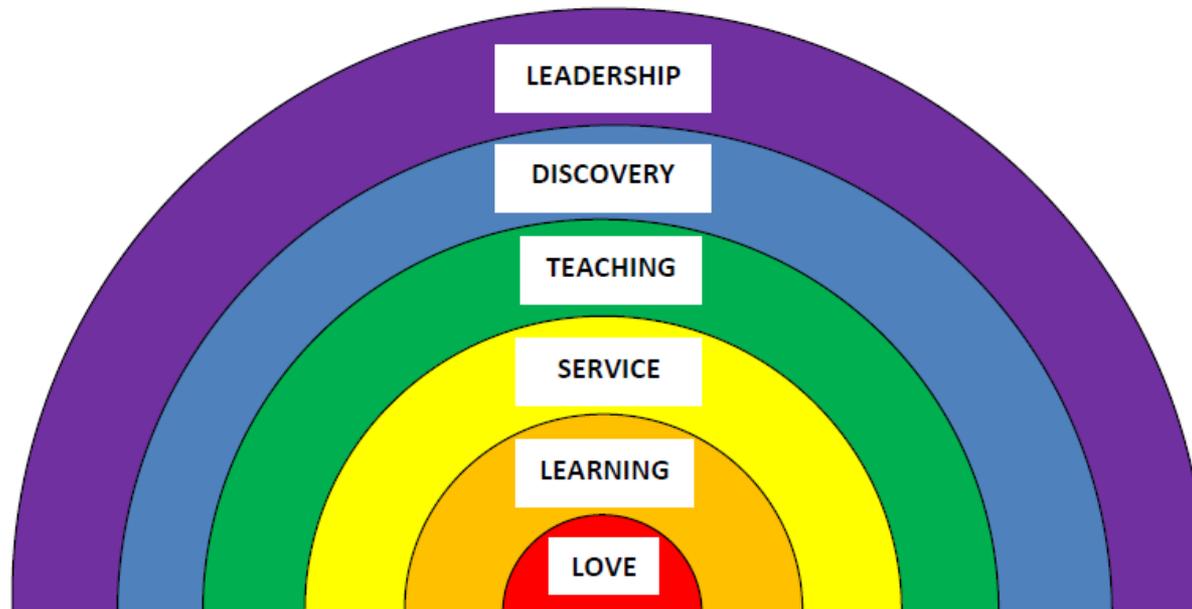
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Implications for Scholars, Practitioners, and Policy Makers

- Let your care for others, i.e. love , be your primary motivator for your work in Gerontology – whether it involves practice, teaching, discovery or policy
- Remember multiple audiences need to have an understanding of Gerontology
- Recognize the impact of your efforts will be tremendously multiplied over time by investing in the lives of others
- Consider how to go beyond traditional approaches to enhance the effectiveness of your interpretation of Gerontology to the larger society
- Define a personal purpose, vision, & mission and establish personal goals
- Pursue new leadership opportunities and expand your network of contacts and friends throughout your career

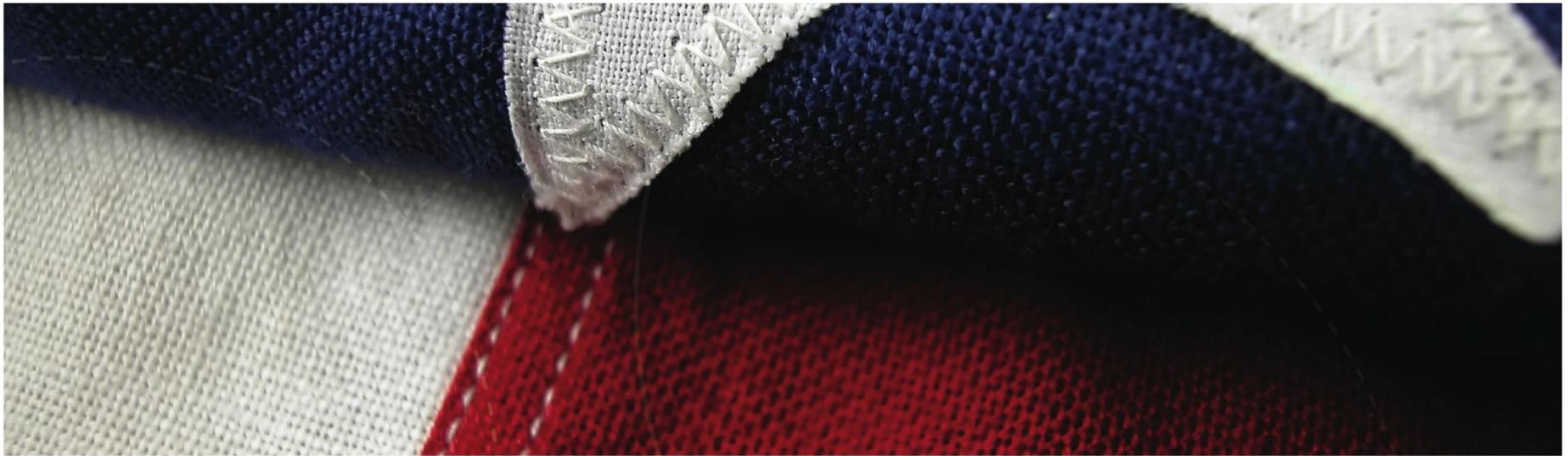
Love – The Foundational Principle for Effective and Meaningful Work

“The only thing that counts is faith expressing itself through love.”



Thank You!





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