

Donald W. Reynolds Foundation
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Donald W. Reynolds Foundation Awards \$10 Million for Geriatrics Training

LAS VEGAS – The Donald W. Reynolds Foundation announced that its board of trustees has approved 10 grants, totaling \$9,998,731, to strengthen physicians’ geriatrics training at medical schools across the United States. Foundation President Steven L. Anderson made the announcement from the Foundation’s Las Vegas headquarters today. The grants will support comprehensive projects in academic health centers to train medical students, residents and faculty in geriatrics.

Fred W. Smith, chairman of the Foundation’s board of trustees, announced today, “The Reynolds Foundation has now committed almost \$100 million under this initiative. The Foundation’s goal is to improve the quality of health care for elderly people across America by teaching physicians and other health care providers to address their special needs. The trustees and I are impressed by the work that the Foundation’s grantees have conducted thus far. We look forward to the accomplishments of this new group of exciting projects.”

Under the Foundation’s Aging and Quality of Life program, the Foundation’s trustees have previously awarded four cohorts of 10 grants in April 2001, July 2003, May 2006, and October 2008, totaling almost \$80 million. In 2011, grantees from the first two cohorts were competitively awarded \$10 million in grants under a new initiative referred to as “Next Steps in Physicians’ Training in Geriatrics.” Eligibility was restricted to those medical schools that had already successfully completed Foundation-funded projects aimed at preparing physicians to care for frail older people. The Next Steps initiative was designed to support additional ways to fill the continued need to

train physicians in the care of older patients and reward the hard work and accomplishments of successful grantees that have completed their initial projects. The grants announced today comprise the second and final iteration of the Next Steps initiative.

The Foundation's Aging and Quality of Life program was conceived in response to a growing consensus that physicians lack adequate training to meet the increasing needs of the frail elderly patient. Such patients typically suffer from multiple, interactive physical and psychosocial conditions – both acute and chronic – that compromise their ability to function in daily life and lessen their independence. This new set of ten grants is referred to as "Next Steps in Physicians' Training in Geriatrics II" for third and fourth cohort grantees. Both Next Steps I and II calls for proposals stipulated that programs focus on one of two areas of interest:

- geriatrics training for physicians who are surgical and medical specialists or hospitalists, or
- improving the ability of physicians to work with other health disciplines in teams to provide better care for older patients.

The first focus area is an acknowledgement that geriatricians continue to be in short supply. Therefore surgical and medical specialists must carry considerable responsibility for future geriatric care. The second focus on interdisciplinary team care is an approach to providing comprehensive primary care that facilitates partnerships between individual patients and their various health care providers, and when appropriate, the patient's family. Interdisciplinary team-coordinated medical care is recognized as a way to better identify, assess, manage and prevent older individuals' overlapping acute and chronic medical and psychosocial problems. "As each set of grantees make greater and greater strides in geriatrics medical education, they are increasingly incorporating systems changes that include and go beyond geriatrics education. This will continually improve health care and its outcomes for older Americans. It is important to our Trustees that we further advance geriatrics in medical education and reward good work." said Anderson.

Twenty-one academic health centers applied for grants in response to a call for proposals issued by the Foundation in 2012. With the assistance of a set of expert advisors, 10 were chosen. The institutions selected and the grant amounts are as follows:

- Beth Israel Deaconess Medical Center / Harvard University, Boston, MA – \$1,000,000
- Brown University Medical School, Providence, RI – \$1,000,000
- Rowan University School of Osteopathic Medicine (formerly University of Medicine and Dentistry of New Jersey-School of Osteopathic Medicine), Stratford, NJ - \$998,895
- University of Arizona School of Medicine, Tucson, AZ – \$1,000,000
- University of California, San Francisco, San Francisco, CA – \$1,000,000
- University of Kansas School of Medicine, Kansas City, KS – \$1,000,000
- University of North Texas, College of Osteopathic Medicine, Fort Worth, TX – \$999,857
- University of Texas Southwestern Medical Center, Dallas, TX – \$1,000,000
- University of Utah School of Medicine, Salt Lake City, UT – \$1,000,000
- Wake Forest University School of Medicine, Winston-Salem, NC – \$999,979

Training activities under both areas of interest will be supported under the grants. Five grants focus on interdisciplinary team training in medical education and the other five are focused on adding geriatrics education to the training of specialty and sub-specialty physicians.

In addition to the Aging and Quality of Life initiative, the Foundation's other national programs have supported cardiovascular clinical research and journalism. The Foundation's regional initiatives provide grants to non-profit organizations that serve the citizens of Arkansas, Nevada and Oklahoma in education, social services, arts, food security and other areas.

The Donald W. Reynolds Foundation is a national philanthropic organization founded in 1954 by the late media entrepreneur for whom it is named. Headquartered in Las Vegas, Nevada, it has committed over \$245 million nationwide to its Aging and Quality of Life program.

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attachment: The names of advisory panel members and detailed descriptions of the grant-supported projects are attached.

NEXT STEPS IN PHYSICIANS' TRAINING IN GERIATRICS ADVISORS

John R. Burton, MD, Johns Hopkins University School of Medicine

Harvey J. Cohen, MD, Duke University Medical Center

William J. Hall, MD, University of Rochester School of Medicine and Dentistry

Rosanne M. Leipzig, MD, PhD, Mount Sinai School of Medicine

David B. Reuben, MD, University of California, Los Angeles School of Medicine

Donald W. Reynolds Foundation

Description of Next Steps in Geriatrics Training Grants II Announced June 7, 2013

Beth Israel Deaconess Medical Center / Harvard University, Boston, MA - \$1,000,000

The Beth Israel Deaconess Medical Center is one of Harvard's teaching hospitals and headquarters for Harvard's Interdisciplinary Center on Aging. Together, Beth Israel and Harvard Medical School recognize that transitions that move patients from one facility to another, or to a new provider, are high-risk events for elderly individuals. Therefore, based on the University of New Mexico's successful Extension for Community Healthcare Outcomes (ECHO) program, they will initiate a program called ECHO-Care Transitions. The program, to be developed by Beth Israel faculty, will use on-line video communication technology to educate practicing hospitalist physicians, medical residents, and medical students in best practices to care for medically complex older patients who have recently been discharged from the hospital. Beth Israel projects that it will educate at least 500 physicians, residents and medical students on preparing, communicating and managing appropriate care transitions of elderly patients, which will reduce health risks that too frequently occur during transfers.

Brown University Medical School, Providence, RI - \$1,000,000

At Brown University, the Foundation's first award's success proved the value of geriatrics education to their medical students, faculty and leadership. A second grant will allow geriatricians to focus on hospital quality and patient safety to ensure that new geriatrics education interventions will improve both knowledge and, most importantly, clinical outcomes. Brown's program will focus on seven specialty areas, including Hospitalists at their two major teaching hospitals and nearly 200 residents in Orthopedics, Surgery, Emergency Medicine, Psychiatry, Neurology and Neurosurgery. In two orthopedics programs (hip fracture and major joint replacement) and trauma surgery, geriatricians will partner with faculty from the specialty to train them as geriatrics educators, co-manage patients, and execute care plans together daily. For the other specialties, curriculum innovation will be provided. Curricula will vary according to the needs of each specialty. By the end of year one, they expect to have 160 new formal teaching hours across specialties and 465 informal teaching hours.

Rowan University School of Osteopathic Medicine (formerly University of Medicine and Dentistry of New Jersey-School of Osteopathic Medicine), Stratford, NJ - \$998,895

RowanSOM, formerly UMDNJ-SOM, is an osteopathic medical school with a longstanding reputation as a leader in geriatrics in the osteopathic profession. For the first time, RowanSOM will bring together learners from across disciplines to learn from and with each other. Medical students across all four years will work together with students from nursing, pharmacy and a range of allied health students. In addition,

curricula will be developed for primary care residents in internal medicine, family medicine and psychiatry, as well as fellows in osteopathic manipulative medicine, geriatrics, dentistry and psychiatry. RowanSOM will deliver various inter-professional experiences across a continuum of ambulatory, acute, sub-acute and long-term care settings, including an immersion experience that is essential to reinforcing the skills needed to work optimally with other disciplines for successful inter-professional practice. The new coursework will impact more than 2,284 students, 520 residents and fellows and 135 faculty members during the four-year grant.

University of Arizona School of Medicine, Tucson, AZ - \$1,000,000

The state of Arizona is experiencing sharply increasing numbers of culturally diverse, frail elderly people. To help improve the medical care they receive, the University of Arizona plans a new program to strengthen specialist physician training in geriatrics, with an emphasis on improving care delivered by hospitalists and surgical medical specialists. Geriatric principles of care curricula will be delivered to five specialties that are responsible for the acute care older adults receive across the spectrum of care, from the emergency department to acute medical-surgical units, to the medical and surgical ICU, and transition to home and community. They are: 1) emergency medicine, 2) pulmonary/critical care, 3) hospital medicine, 4) orthopedics, and 5) surgery. Their goal is to create an enduring program that will spread geriatric principles of care to approximately 200 residents, chief residents, fellows, hospitalists and selected surgical and medical specialists, all with the overarching aim of improving care for the frail elderly.

University of California, San Francisco, San Francisco, CA - \$1,000,000

The University of California San Francisco (UCSF) aims to transform the medical care received by older Americans by teaching physicians to work effectively with a team of health care professionals, such as nurses and pharmacists. Breaking away from the traditional model of doctors training mainly with other doctors, this proposal will enable all medical students and internal medicine residents to train closely with other health care professionals in teams. First year medical students will partner with pharmacy students to examine the safety of lengthy medication lists in older adults admitted to hospitals and nursing homes. Second year students will learn to diagnose and develop a care plan for ill older patients that integrates important input from other team members, such as physical therapists and social workers. Third year students will discuss a complex medical case with students from other disciplines, including dentistry. And finally, fourth year medical students will crystalize critical skills needed to safely hand-off appropriate aspects of care to colleagues such as nurses and other team members. UCSF internal medicine residents will experience the power of working in a new model of integrated inter-professional hospital teams focused on patient-centered care and enhanced team communication. Faculty and staff will be trained in high-quality teamwork and will model exceptional team-based care. Students' and

residents' learning experiences will be augmented by technologically advanced learning tools to ensure competence in this vital skill of teamwork.

University of Kansas School of Medicine, Kansas City, KS - \$1,000,000

Inter-professional education and practice is an overarching goal in the strategic plans for the four health profession schools at the University of Kansas as well as in residency training and at the KU Hospital. The new Kansas Reynolds Program in Aging has five objectives: bringing innovative approaches and outstanding skills in collaborative team building to their work; addressing a major gap in geriatrics education – training physicians to work effectively in inter-professional teams to optimize health care quality for older adults; undertaking a major effort to improve not only the quality of geriatric team care education but more importantly the quality of care provided to older adult patients; reaching all medical students, all family medicine and internal medicine residents, many students in nursing, health professions, social welfare, pharmacy and law, as well as faculty from the various schools; and providing a significant tangible financial commitment to successfully complete the project and to maintain activities after Reynolds support ends. In a show of strong institutional support and broad organizational commitment for the program, the University of Kansas has pledged a match exceeding the \$1 million available from the Reynolds Foundation.

University of North Texas, College of Osteopathic Medicine, Fort Worth, TX - \$999,857

The University of North Texas Health Science Center's (UNTHSC) Texas College of Osteopathic Medicine and School of Health Professions will partner with the University of North Texas (UNT) System College of Pharmacy, as well as the Texas Christian University Harris College of Nursing and Health Sciences and Department of Nutritional Sciences to develop and implement a program to improve the ability of physicians to work in teams with other health care disciplines. They will employ three major innovations to provide better team care for older adults: expanding the Seniors Assisting in Geriatrics Education (SAGE) program for students of the various health professions; create an Inter-professional web-based Team Capstone (ITC) geriatrics experience for all senior year health professions students; and develop inter-professional e-learning modules in collaboration with the National Board of Osteopathic Medical Examiners (NBOME) for residents and practicing physicians. UNTHSC will partner with Reynolds Foundation grantee Virginia Commonwealth University to adapt their Virtual Classroom as the model for its ITC geriatrics experience.

University of Texas Southwestern Medical Center, Dallas, TX - \$1,000,000

The University of Texas Southwestern and its affiliated hospitals plan to leverage the successes and partnerships developed during their prior Reynolds Foundation grant to develop, implement and integrate an inter-professional geriatrics curriculum that

emphasizes patient safety, quality, patient-centered care and communication and teamwork skills. The program will train students in medicine, health professions in clinical nutrition, physical therapy, physician assistant studies, prosthetics-orthotics, radiation therapy and rehabilitation counseling, as well as chief residents and inter-professional faculty and clinicians. They will develop four inter-professional web-based geriatrics education modules for students. In addition they plan to develop and implement an innovative electronic health record case-based inter-professional curricula that students will complete through the second, third and fourth years of medical school and incorporate non-physician healthcare professionals in their Chief Resident Immersion Training (CRIT) program.

University of Utah School of Medicine, Salt Lake City, UT - \$1,000,000

The University of Utah will develop a competency-based training program in patient quality, safety, and care transitions grounded in principles of geriatric medicine for all of its graduate medical education (GME) trainees. The entry level for all 27 residency and 41 fellowship programs will include required quality and safety training modules, review of Patient Safety Net reports involving older patients, and timely completion of a discharge summary on the day of discharge to a skilled nursing facility. The advanced level will target six residency programs involved in Chief Resident Immersion Training (CRIT) and the ten fellowship programs within Internal Medicine subspecialties. These trainees will receive advanced geriatrics training consisting of didactic materials, case-based presentations, and support with their quality improvement projects from geriatrician and hospitalist faculty. This new GME-focused training program will impact approximately 250 physicians each year to promote high quality, safe care for the geriatric patients they will encounter throughout their careers.

Wake Forest University School of Medicine, Winston-Salem, NC - \$999,979

Wake Forest School of Medicine will extend its 25-year track record of innovation in geriatrics education with a new Geriatrics Principles for Specialists (GPS) program. GPS will feature a curriculum of adaptable and sustainable short courses designed to train specialty faculty, fellows and chief residents first in core geriatrics skills and then in advanced team leadership and transitional care management for older adult patients. This train-the-trainer approach will build upon previously developed faculty development programs to further “gerontologize” patient care offered by specialist physicians at Wake Forest. Thirteen specialty disciplines will be targeted for GPS training, including Internal Medicine subspecialties that are highly relevant to geriatric care and hospitalist co-management teams within surgical specialties serving high volumes of geriatric patients. The capstone assignment for participating specialty teams will be to design and implement quality improvement projects to advance geriatrics education for their respective departments. By 2017, the GPS program will involve 33 non-geriatrician faculty and 41 chief residents and fellows who will impact over 526 residents and 480 medical students annually.