



GERIATRIC EDUCATION AND TRAINING IN TEXAS

 DONALD W. REYNOLDS FOUNDATION

2014 SPRING / SUMMER NEWSLETTER

The Reynolds Interprofessional Geriatric Education and Training in Texas (IGET-IT) programs has had a very busy spring! Presentations at three professional meetings, the continued development of the IGET-IT Innovations, ongoing geriatric education sessions, Grand Rounds, SAGE Visits for medical professions students, and an annual visit from the Reynolds Foundation.

Why Include Geriatric Curriculum in Medical School Education?

Between 2005 and 2030, the number of adults in the US aged 65 and older will almost double from 12% to almost 20% of the population, with those who are 80 and over, “the oldest old”, expected to nearly double, from 11 million to 20 million. This group, along with changes in the US Health Care System, will place increased demand on the patchwork of US health care services. The UNTHSC Reynolds Geriatric Education & Training in Texas (GET-IT) Program sought to address the national shortage of physicians trained in geriatrics in order to better address the medical needs of a growing geriatric population with the development and implementation of programs to strengthen physicians’ training in geriatrics. Two objectives were the focus of the Reynolds GET-IT Program: 1) Increase the content of geriatric education to the medical education curriculum and 2) To evaluate the attitudes of student perceptions related to the health care of older adults.

Along with embedded geriatric curriculum of 64 hours in first year and 75 hours in second year, students were also actively involved for 24 hours in the Seniors Assisting in Geriatric Education (SAGE) Program for a total of 163 hours geriatric content. Educational objectives of the study: Impact of geriatric content in medical education Years 1 and 2, and, an exploratory analysis of medical students’ attitudes toward older adults.

Y1: Medical Education (64 contact hours) included geriatric content in: Cell Science, Musculoskeletal, Nervous System, Cardiopulmonary, Osteopathic Manipulation Medicine 1 & 2, Clinical Medicine 1, Community Resources, Medical Ethics, Gastrointestinal, Hematopoietic and Mechanisms of Disease 1 & 2. **Y2: Medical Education (75 contact hours)** included geriatric content in: Renal System 2, Cardiovascular System, Respiratory System, Hematopoietic System 2, Gastrointestinal System 2, Osteopathic Manipulation 3 & 4, Endocrine 2, Reproductive System 2, Nervous System 2, Fundamentals of Behavioral Sciences Clinical Medicine and Community Resources.

Seniors Assisting in Geriatric Education (SAGE) Program (24 contact hours) teams of 2-3 medical students made eight home visits with a senior citizen volunteer using pre-visit preparations and a competency based curriculum. Faculty mentors using the CANVAS open source learning management system reviewed, graded and provided feedback to the students as they progress through the 8 home visits.

The survey was administered twice over a three year period (2009-2011); once at orientation as a pre-test and again as post-test at the end of the second year of medical school, after medical students were exposed to geriatric curriculum and the SAGE Program. **Survey Instrument:** The study used a 52 item questionnaire; *Aging and Healthcare: Medical Students Perceptions* by Tomasa & Senf (2009), University of Arizona used a 5-point Likert Scale for measurement. The instrument was developed to evaluate student perceptions and attitudes toward aging adults and healthcare. A modified copy of the questionnaire is included along with a table of the significant results.

The *Aging and Healthcare: Medical Students Perceptions Survey* was delivered using the online software system Survey Pro 5. The first administration was during new student orientation and the second administration was administered at the end of Y2 in the Clinical Medicine Course. Of the n=571 surveys administered n=439 were returned and deemed useable resulting in a 77% return rate. An independent 2 tailed t-Test was conducted for significance on the mean scores of survey items. Only responses that contained significance at $P < .001$ were included in this report. A sample of the survey questionnaire is included and all items that contained significant results.

Student Perceptions of Aging & Geriatric Curriculum

As part of the overall assessment of the new curriculum an assessment of students' perceptions was administered at various times over the program. The Aging and Healthcare Survey: Medical Student Perceptions was developed by Tomasa, L. & Senf; J. (2009) from University of Arizona was administered as a pre-test at new student orientation and again as a post-test at the end of Year 2. The study was used to track changes in student perceptions on aging and health care between Y1 and end of Y2.

Results from the study were mixed:

- Exposure to the geriatric curriculum showed a positive impact on student's awareness and understanding of older adults.
- Current levels of geriatric content (163 hours) in the Reynolds GET-IT curricula were believed to be sufficient.
- Exposure to the geriatric curriculum showed a positive impact on student's awareness and understanding of older adults.

Recommendations for further research:

- This survey will be administered to students in their fourth year after completion of a geriatric rotation to further evaluate student perceptions related to the care of older adults and the overall impact of the geriatric curriculum.

References

1. Alford, C., Miles, T., Palmer, R., and Espino, D. (2001). An Introduction to Geriatrics for First-Year Medical Students. American Geriatrics Society **49**:782-787.
2. Institute of Medicine (IOM) 2008. Retooling for Aging America, Washington, DC: The National Academies Press.
3. Longo, P. J., L. Kirk, C. Rubin and S. A (2013). Improvement of Knowledge and Attitudes in Aging and Healthcare: Efficacy of an Integrative Undergraduate Geriatrics Education Program. American Geriatrics Society **61**(S1): S45-46.
4. The American Geriatrics Society. http://www.americangeriatrics.org/news/ags_factsheet.shtml
5. Tomasa, L. and Senf, J. (2009). Aging and Healthcare Survey Medical Students Perceptions. University of Arizona, Department of Family and Community Medicine.

2014 Geriatric Grand Rounds

- *January 2014 Janice Knebl, DO, MBA, Professor and DSWOP Endowed Chair in Clinical Geriatrics, Section Chief, Division of Geriatrics and Reynolds IGET-IT Principle Investigator presented "Discharge Planning & Care Coordination for Medicaid-eligible Elders: An Opportunity to Improve Patient Outcomes."*
- *March 2014 Amitabh Gupta MD, PhD, Director of Texas Movement Disorders, THPG and Movement Disorders Program, THD presented an interactive Grand Rounds entitled: "Parkinson's Disease Treatment Paradigms and Challenges."*
- *April 2014 Roy Lowery, DO and Jeff Morgan AuD from the Fort Worth Office of Pediatric and Adult Otolaryngology presented an insightful and sensitive presentation on "Hearing Evaluation in the Geriatric Population."*
- *May 2014 Ah O-Yurvati, DO, FACOS, FICS, FAHA, Professor and Chair of Surgery University of North Texas Health Science Center presented a comprehensive overview on "Cardiovascular Interventions in the Old & Frail."*
- *August, 2014 Jane F. Potter, MD, Harris Professor of Geriatric Medicine, Chief, division of geriatrics and Gerontology, Department of Internal Medicine, University of Nebraska Medical Center, Home Instead Center for Successful Aging presented content on the benefits of Interprofessional Education and Team STEPPS in professional practice, "Using the MOS and*

Awards and Presentations

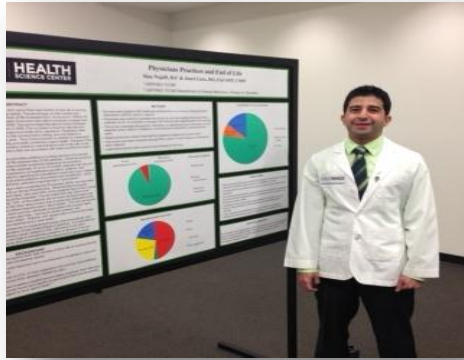
Recent graduate Benjamin J. Cameron, DO, TCOM 2014 received the **"Geriatrics in your Future Award 2014"** just prior to his graduation in May. His comments at the event follow:



"Thank you Dr. Knebl. First of all, I would like to express my appreciation to TCOM, the Geriatrics department, and Dr. Knebl, for ensuring that our education includes a strong basis in geriatric medicine. With the oldest of the Baby Boomers recently reaching retirement age, and the rest soon to follow, I truly believe that proficiency in geriatrics is a necessity, so that we future physicians may provide the best care possible to the largest segment of our population, while at the same time, efficiently utilizing the resources of our healthcare

system. Second, I would like to thank my SAGE Mentor, Mrs. Pauline Derby, my first "patient." Our encounters not only helped to reinforce geriatric principles, but also fostered comfort and confidence in interacting with patients. Finally, I want to express my sincerest gratitude to the Clinical Clerkship Director at Good Shepherd Medical Center and the preceptor of my Geriatrics Rotation, Dr. John McDonald, DO, FACOI. His instruction, mentorship, and leadership have been instrumental throughout my clinical years, and he serves as the ideal role model in geriatric medicine through the care of his aging patients" (Benjamin J. Cameron).

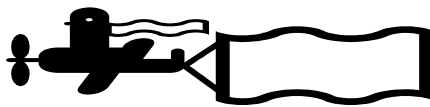
Awards and Presentations (continued)



Sina Najafi, MSTAR Student, won the NIADYNE Award for his RAD poster submission. He was a part of the MSTAR program under Dr. Janet Lieto.

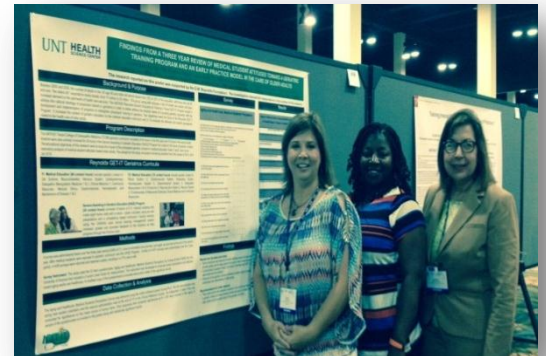
Horacio Sosa, MSTAR Student
for the Research

Appreciation Day (RAD) poster entitled “Physicians Practices and End of Life.” He was a part of the MSTAR program under Dr. Leigh Johnson. His presentation was accepted for the American Geriatric Society (AGS) National Meeting and he is shown with Dr. Janice Knebl at that event.



The **Reynolds IGET-IT**

Team attended the 2014 American Association of Colleges of Osteopathic Medicine Conference in Washington DC in April and gave a presentation about Interprofessional Education (IPE) entitled “Innovative Interprofessional Education Models: Reynolds Next Steps-Funded Osteopathic Colleges Experience. The presentation included a representative from Rowan School of Medicine who also shared their Reynolds Program IPE model for integrating geriatric education in osteopathic medical education.



The **Reynolds IGET-IT Team** also attended the 2014 American Geriatrics Society Annual Scientific Meeting in Orlando, FL in May and presented research results from the Aging and Healthcare Survey entitled, “Findings from a Three Year Review of Medical Student Attitudes toward Geriatric Training Program and An Early Practice Model in the Care of Older Adults.”

Reynolds Team Contact Information

Janice Knebl, DO, MBA
janice.knebl@unthsc.edu
(817) 735-0291

Sandra Marquez Hall, PhD
sandra.marquez-hall@unthsc.edu
(817) 735-2949

Office Location
Geri Annex/Blue House
3501 W. 7th Street

Brenda Harless
brendagayle.harless@unthsc.edu
(817) 735-0291

Yolanda Lane, MEd, CHES
yolanda.pitts-lane@unthsc.edu
(817) 735-0289

Raina Smith, MS
raina.smith@unthsc.edu
(817) 735-0287