Title: Better Health through Education and Transformation of Older Adult Care in Illinois
Applicant Organization: Rush University College of Nursing
Address: 710 South Paulina St., Suite 422, Chicago, IL 60612
Project Director: Robyn Golden, LCSW
Phone: 312-942-4436
Fax: 312-942-3601
Email: Robyn_L_Golden@rush.edu
Grant funds requested: $2,247,791
Funding preference request: Substantial Benefit for Rural or Underserved Populations
Project Period: July, 2015 – June, 2018
Collaborating Partners: Rush University Medical Center, Lawndale Christian Health Center, Illinois Association of Area Agencies on Aging, Southern Illinois University
Trainee types: older adults, families, caregivers, direct care workers, health professions providers, students, residents, fellows, and faculty

i. Project Abstract
The geriatric population in Illinois is growing faster than the nation. Minority older adults increased by nearly 40% since 2000, 8% live in poverty, and 17% live in rural areas. The ratio of rural physicians is 30% lower than in urban communities despite the higher percent of older adults in rural areas. Even in urban areas, finding geriatric providers is challenging. Illinois has made progress addressing the needs of older adults, especially individuals with Alzheimer’s Disease and Related Dementias (ADRD), but gaps remain. ADRD is a chronic condition poorly managed among older adults. In Illinois, the rate of older adults with multiple chronic conditions (MCC) is 15.5% higher than the national average. MCC are associated with health decline, decreased quality of life, increased emergency room visits, hospital stays, and post-operative complications. It is critical for the wellbeing of older adults in Illinois, and the nation, to enhance the geriatric workforce capable of managing MCC, including ADRD.

The Geriatric Workforce Enhancement Program of Illinois’ (GWEPI) two primary aims, address all HRSA GWEP focus areas. (1) Educate older adults, families, caregivers, direct care workers, health professions providers, students, residents, fellows, and faculty about person-centered, culturally competent management of MCC among diverse older adults, especially those with cognitive decline, and ADRD). This includes development, validation, and dissemination of region-wide and state-wide co-learning programs regarding management of MCC/ADRD.

(2) Transform existing primary care systems to meet the needs of older adults with MCC/ADRD by implementing evidence-based programs that utilize provider, patient and community resources. Critical innovations to achieve these aims include: interactive, universally accessible online modules regarding MCC/ADRD for all learners, regional and state-wide Learning Communities, Health Ambassadors for community health, and including Health Ambassadors in creation of the new CATCH-ON primary care model.

Assuring that the GWEPI will achieve its aims, the program evaluators will work closely with HRSA. Plan, Do, Study, Act rapid cycles will be utilized within the RE-AIM framework to develop and improve products and processes. We will track numbers of learners and patients impacted by education and clinical programs, assessing their subjective experience and objective outcomes. Objective outcomes include pre- and post-tests for all programs, fidelity to protocols; validated team development and patient self-report wellness measures. Objective measures include participant behavior change, Healthy People 2020 indicators, and Medicare utilization.

The 34 state-wide GWEPI collaborators and partners have decades of experience educating patients, families, students, and professionals in innovative programs and strategies to care for older adults, particularly those with MCC including ADRD. We are positioned to bring change the geriatric workforce in the state of Illinois, upper Midwest region, and nation.