

ARCHSTONE  
FOUNDATION  
AND THE  
AGING & PUBLIC  
HEALTH SECTION

*of the*  
AMERICAN  
PUBLIC HEALTH ASSOCIATION  
*present the*  
2010 AWARD  
FOR EXCELLENCE  
IN PROGRAM INNOVATION



ARCHSTONE  
FOUNDATION

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# AWARD PRESENTATION

ARCHSTONE FOUNDATION

AND

THE AGING & PUBLIC HEALTH SECTION OF  
THE AMERICAN PUBLIC HEALTH ASSOCIATION PRESENT

## THE 2010 AWARD FOR EXCELLENCE IN PROGRAM INNOVATION

APHA ANNUAL MEETING IN DENVER, COLORADO  
AGING & PUBLIC HEALTH SECTION AWARDS PROGRAM  
MONDAY, NOVEMBER 8, 2010

4:30 PM

COLORADO CONVENTION CENTER

ROOM # 708

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# FOREWORD

The Award for Excellence in Program Innovation was established by an endowment from the Archstone Foundation to the Gerontological Health Section, now known as the Aging & Public Health Section, of the American Public Health Association to recognize best practice models in gerontology and geriatrics. Programs that innovatively link academic theory with applied practice in the field of public health and aging are considered annually for the award. It is our hope that these model programs will be replicated and continue to be evaluated in an effort to enhance services to the aging population throughout the United States.

*The 2010 Archstone Foundation Award for Excellence in Program Innovation recipient is:*

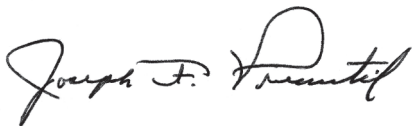
**Area Geriatric Education Scholars Program for Upper Peninsula Youth (AGES)**  
Upper Peninsula Health Education Corporation  
Marquette, Michigan

*Honorable mention goes to:*

**Put a Brake on Fractures Program**  
Foundation for Osteoporosis Research & Education  
Oakland, California

To Allan Goldman, M.P.H., Chair of the Archstone Foundation Award Selection Committee, and the other members of the selection advisory committee, we extend our deep appreciation for their efforts in reviewing the nominations and selecting the outstanding programs to receive this year's award and honorable mentions.

To the winner of the 2010 Archstone Foundation Award for Excellence in Program Innovation, all the nominees, and to all who participated in the award process as applicants or reviewers, we offer our best wishes for continued success in their commitment to develop service models in the field of aging.



Joseph F. Prevratil, J.D.  
President & Chief Executive Officer  
Archstone Foundation



Susan Miller, Ph.D., M.B.A.  
Chair, Aging & Public Health Section  
American Public Health Association

# WINNER

## AREA GERIATRIC EDUCATION SCHOLARS PROGRAM FOR UPPER PENINSULA YOUTH (AGES)

The Area Geriatric Education Scholars (AGES) Summer Program is a community-based collaborative effort introducing high school students to geriatric healthcare professions. The AGES program is designed to care for an aging population through outreach, recruitment, pre-career education, training, and placements at long-term care (LTC) facilities throughout the rural Upper Peninsula of Michigan. Community issues addressed through the AGES program include:

1. Increased aging adult population;
2. Current and projected shortages of healthcare professionals;
3. Lack of pre-career exploration opportunities for local youth; and
4. Need for greater understanding of geriatric health issues and aging among the youth, prospective healthcare professionals and the general community.

Since 2006, the Upper Peninsula Health Education Corporation (UPHEC) has sponsored 173 students in the AGES program in partnership with local LTC facilities, schools of healthcare professions, high schools, and workforce agencies. AGES provides a 3-day orientation for all participants selected through a competitive application and interview process. Participants learn about geriatric health issues, LTC practices, healthcare professions, career path opportunities,



professionalism, communication skills, and giving back to their communities through philanthropy and service. Participants are placed in a LTC site for seven weeks, where they lead group activities (e.g., Bingo, Sing-Along, crafts), provide one-on-one companionship, assist with basic care, and job shadow healthcare professionals including nurses, physical therapists, physicians, social workers, and pharmacists.

AGES is serving as a model for other communities and regions. Over the past five years, AGES participants have served more than 8,000 LTC residents and provided 25,000 hours of service in the community. Student participants represent 34 high schools from 14 counties in the Upper Peninsula of Michigan.

Evaluation of the AGES Program is collected through the use of surveys and follow-up calls to former participants. Surveys have shown high satisfaction outcomes among 86% of the high school participants, 100% of the older adult residents, and 100% of the 2009 LTC sites. Approximately 86% of the high school participants recommended the program to their friends and many return to serve as counselors for the program. Ninety-eight percent of AGES alumni have pursued higher education and professional studies in healthcare; attending nursing school, physical therapy programs and applying to medical school. Several have secured employment in LTC and hospital settings. UPHEC plans to submit the AGES program design, activities and outcomes for journal publication in the near future.

To learn more about the Area Geriatric Education Scholars Program and its resources, please visit [www.mgh.org/uphec](http://www.mgh.org/uphec).



For further information contact:

**Carolyn Weissbach, JD, MPH**  
AGES Program Director  
Upper Peninsula Health Education Corporation  
418 W. Magnetic Street  
Marquette, MI 49855  
Phone: (906) 228-7970  
E-mail: [cweissbach@mgh.org](mailto:cweissbach@mgh.org)

# HONORABLE MENTION

## PUT A BRAKE ON FRACTURES PROGRAM

The Foundation for Osteoporosis Research and Education (FORE) developed the 10-Year Fracture Risk Calculator (FRC). The FRC is a web-based osteoporosis risk management tool that takes specific data and provides an estimate of fracture risk for postmenopausal women and men over the age of 45 who are not receiving treatment for osteoporosis. The tool is free to use and consists of a short survey regarding age, height, weight, and seven additional risk factors (e.g., alcoholic consumption, arthritis diagnosis, family medical history). The FRC tool immediately calculates 10-year fracture risks and produces an easy to understand graph. The graph is used to help determine an individualized treatment and prevention strategy for bone health and osteoporosis prevention. Fracture risk is categorized as low, medium or high and the tool provides two results: 1) a 10-year risk of having a hip fracture, and 2) a 10-year risk of having any one of four fractures (hip, wrist, shoulder, or spine).

In May 2009, FORE collaborated with local hospitals and a television station to launch the *Put A Brake on Fractures* awareness campaign. The campaign was created to raise awareness about osteoporosis and highlight the FRC tool. Throughout the campaign, over 120 ninety-minute vignettes were shown during newscasts, reaching over 1 million Northern Californian residents. The campaign also consisted of community events where participants were screened by trained volunteers and received educational information in addition to an individualized graph print-out of their fracture risk. Volunteers conducted counseling sessions with participants on how to approach their personal physicians about their results. Over 3,700 individuals were screened during the campaign. Among those screened, 20.4% were shown to be at high risk for fracture and an additional 24.9% were at moderate risk.

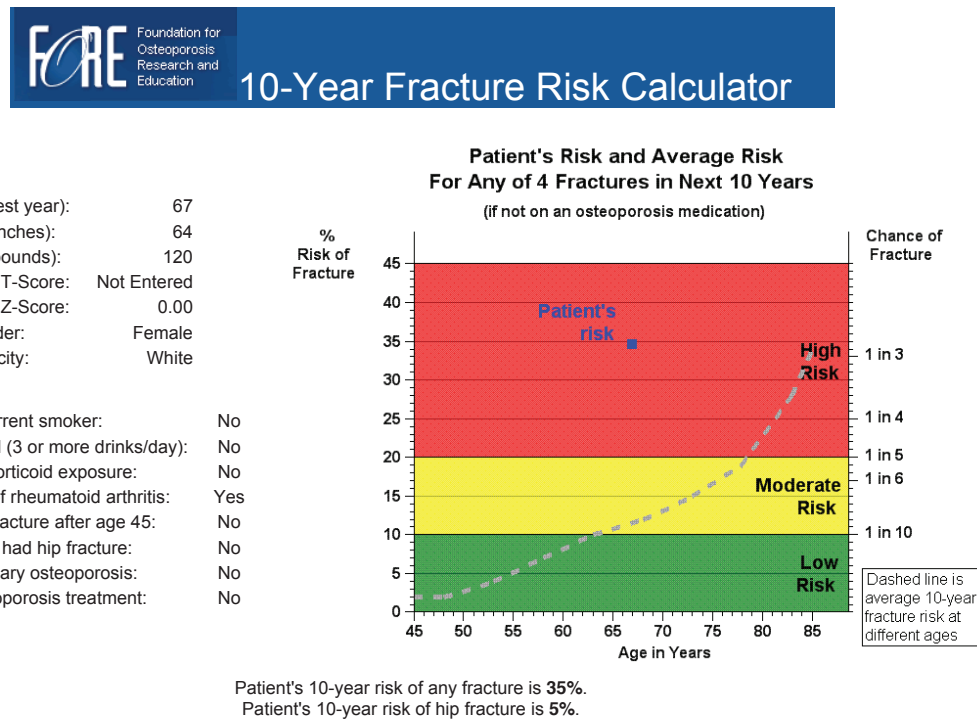
Since the campaign, approximately 35,000 individuals have been screened and physicians and older adults themselves have accessed the tool on the internet. Given current health care resources, fracture risk is an efficient way to detect patients who would benefit



from osteoporosis management. The majority of the 44 million Americans at-risk for or with osteoporosis are unaware of their risk(s).

FORE plans to launch additional campaigns in San Francisco, Chicago and Philadelphia and widely disseminate the FRC tool to patients, providers and communities throughout the nation. It is the hope of FORE that osteoporosis can be prevented by raising awareness to the point where consumers take action.

Below is an example of a graph that is produced after information is inputted in the FRC tool. To learn more about the 10-Year Fracture Risk Calculator, please visit [www.fore.org](http://www.fore.org).



For further information contact:

**Kathleen Cody, M.B.A.**  
Executive Director  
American Bone Health and Foundation for Osteoporosis Research and Education  
1814 Franklin Street, Suite 620  
Oakland, CA 94612  
Phone: (510) 832-2663 ext.15  
E-mail: [kathleen@americanbonehealth.org](mailto:kathleen@americanbonehealth.org)

## PAST WINNERS

**2009**

PREPARE: Disaster and Emergency Preparedness for Long-Term Facilities  
Mather LifeWays Institute on Aging - Evanston, Illinois

**2008**

Guided Care: Improving Chronic Care for High Risk Seniors  
The Roger C. Lipitz Center for Integrated Health Care  
Department of Health Policy & Management  
Johns Hopkins Bloomberg School of Public Health - Baltimore, Maryland

**2007**

The Dancing Heart: Vital Elders Moving in Community Memory Loss Program  
Kairos Dance Theatre - Minneapolis, Minnesota

**2006**

Brain Get Your Mind Moving  
New England Cognitive Center - Hartford, Connecticut

**2005**

Legacy Corps for Health and Independent Living  
University of Maryland, Center on Aging - College Park, Maryland

**2004**

Dignified Transportation for Seniors  
Independent Transportation Network - Westbrook, Maine

**2003**

Alzheimer's Health Education Initiative  
Alzheimer's Association - Los Angeles, California

**2002**

Kinship Support Network  
Edgewood Center for Children and Families - San Francisco, California

**2001**

Groceries to Go  
Elder Services Network - Mountain Iron, Minnesota

**2000**

Experience Corps  
Johns Hopkins Medical Institutions, Center on Aging and Health - Baltimore, Maryland

Assistive Equipment Demonstration Project  
University of Massachusetts, Gerontology Institute - Boston, Massachusetts

**1999**

Senior Wellness Project  
Northshore Senior Center - Seattle, Washington

**1998**

A Matter of Balance: An Intervention to Reduce Fear of Falling  
Boston University, Royal Center for Enhancement of Late-Life Function - Boston, Massachusetts



## CALL FOR NOMINATIONS

As of November 1, 2010, the Aging & Public Health Section of the American Public Health Association will accept nominations for the 2011 Archstone Foundation Award for Excellence in Program Innovation. The award was established in 1997 to identify best practice models in the field of health and aging, and to provide recognition and an opportunity to highlight the work at the annual meetings of the American Public Health Association.

Programs that effectively link academic theory to applied practice in the field of public health and aging are eligible for nomination. Nominees should also have documented results, but have been in operation less than 10 years. Preference will be given to nominees who have not received prior awards or special recognition.

In two single-space typed pages, please describe the program to be nominated. The narrative should include information about the problem being addressed, the population served, the project's design, partnerships or collaboration, funding, and measurable benefits and outcomes. Only one program may be nominated per agency or organization.

An independent panel will review all nominations. The criteria for award selection will include:

- Creativity in project design;
- Documented outcomes and benefits of the program;
- Replication potential;
- Evidence of collaboration and partnerships; and
- Dissemination strategy.

The winner is expected to attend the 139th Annual Meeting of the American Public Health Association in Washington, D.C., October 29-November 2, 2011 at a special Aging & Public Health Section Award Session and attend the awards ceremony. In recognition of this achievement, and to assist with the travel expenses, the winning organization will receive a \$1,000 cash award. Honorable mention(s) may also be awarded to one or more nominees submitting distinguished programs as determined by the review panel.

Nominations are to be postmarked by April 1, 2011 and may be sent or E-mailed to:

**Allan Goldman, M.P.H.**

Chair, Archstone Foundation Awards Committee

Planning and Policy Development Specialist

Georgia Department of Human Resources

Division of Aging Services

Two Peachtree Street N.W., 9th Floor

Atlanta, GA 30303

Phone: (404) 657-5254

E-mail: [abgoldman@dhr.state.ga.us](mailto:abgoldman@dhr.state.ga.us)

## SELECTION COMMITTEE

**Patricia Alt, Ph.D.**

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Towson University

**Larry Branch, Ph.D.**

Professor, College of Public Health  
University of South Florida

**Lucinda Bryant, Ph.D., M.B.A., M.S.H.A.**

Associate Professor  
Colorado School of Public Health  
University of Colorado Denver

**Gerry Eggert, Ph.D.**

Rural Health Care Consultant

**Allan Goldman, M.P.H. (Committee Chair)**

Health Policy and Planning Specialist  
Georgia Division of Aging Services

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## AGING & PUBLIC HEALTH SECTION

The American Public Health Association (APHA) is the world's largest and oldest organization of public health professionals, representing more than 50,000 members from over 50 public health occupations. The Aging & Public Health Section, formally known as the Gerontological Health Section, was established in 1978 to stimulate public health actions to improve the health, functioning, and quality of life of older persons and to call attention to their health care needs. Section members fulfill that mission in part through research and advocacy aimed at reforming governmental health care programs, particularly Medicare and Medicaid. Section members are also active in administration, direct service, research, and education in community health promotion, community organizing, program development and evaluation, and other ways of bringing public health innovations to older persons. The Aging & Public Health Section is also concerned with the health and social needs of younger people with disabilities as they make their transition into the healthcare delivery system for the aged.

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## ARCHSTONE FOUNDATION

The Archstone Foundation is a private grantmaking organization whose mission is to contribute toward the preparation of society in meeting the needs of an aging population. Under the leadership of Joseph F. Prevratil, J.D., President and CEO, the Archstone Foundation has awarded more than \$74 million in grants since it was established in 1986. The Foundation's current funding priorities include fall prevention, elder abuse and neglect, end-of-life issues, and responsive grantmaking to address emerging issues within the aging population.

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ARCHSTONE  
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401 E. Ocean Blvd., Suite 1000, Long Beach, CA 90802-4933  
Phone: (562) 590-8655 | Fax: (562) 495-0317 | [www.archstone.org](http://www.archstone.org)