# Sof Excellence in Program Innovation





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### DEDICATION

The Archstone Foundation Award for Excellence in Program Innovation was created in collaboration with the Aging & Public Health Section of APHA to recognize best practice models in Gerontology & Geriatrics. This year marks the 20th year of recognizing innovative programs that effectively link academic theory with applied practice.

In addition to marking the 20th year of the Award for Excellence, Archstone Foundation is also celebrating 30 years

of grantmaking. To commemorate these two milestones, the Foundation approved an expansion of the endowment to support the continuation of the Award for Excellence. Archstone Foundation is honored to collaborate with APHA to highlight innovative programs annually.

We would like to extend our deep appreciation to Irena Pesis-Katz, PhD, Chair of the Award Selection Committee,



and to the other members of the committee, for their efforts in naming the outstanding programs to receive this year's awards. To the winner and honorable mention of the 2017 Archstone Foundation Award for Excellence in Program Innovation, and the nominees, we offer our best wishes for continued success and we thank them for their commitment.

For the past 20 years, award winners and honorable mentions have represented a variety of innovative programs. It is

our hope that these model programs will be replicated and will continue to enhance services for older people throughout the United States.

Joseph F. Prevratil, JD

President & CEO

Campa D. Zhim

Caryn D. Etkin, PhD, MPH Section Chair

# PAST AWARD WINNERS

- 2016 Support And Services at Home (SASH), Cathedral Square Corporation
- 2015 Student-Run Free Clinic Project Eldercare Program, University of California, San Diego
- 2014 Mobile Medicare Health Clinics, University of the Pacific
- 2013 Age-Friendly New York City, A Partnership between the Office of the Mayor, New York City Council, and New York Academy of Medicine
- 2012 Livable Community Initiative, City of Kingsport
- $2\,0\,1\,2$   $\,$  Healthy Steps in Silicon Valley, The Health Trust
- 2011 PEARLS, University of Washington, Health Promotion Research Center
- 2010 Area Geriatric Education Scholars Program for Upper Peninsula Youth (AGES), Upper Peninsula Health Education Corporation
- 2009 PREPARE: Disaster and Emergency Preparedness for Long-Term Care, Mather LifeWays Institute on Aging
- 2008 Guided Care: Improving Chronic Care for High Risk Seniors, Johns Hopkins University Bloomberg School of Public Health
- 2007 The Dancing Heart Program, Kairos Dance Theatre
- $2\,0\,0\,6$  Brain Get Your Mind Moving, New England Cognitive Center
- 2005 Legacy Corps for Health and Independent Living, University of Maryland, Center on Aging
- 2004 Dignified Transportation for Seniors, Independent Transportation Network
- 2003 Alzheimer's Health Education Initiative, Alzheimer's Association
- 2002 Kinship Support Network, Edgewood Center for Children and Families
- 2001 Groceries to Go, Elder Services Network
- 2000 Experience Corps, Johns Hopkins Medical Institutions, Center on Aging and Health
- 2000 Assistive Equipment Demonstration Project, University of Massachusetts, Gerontology Institute
- 1999 Senior Wellness Project, Northshore Senior Center
- 1998 A Matter of Balance, Boston University, Royal Center for Enhancement of Late-Life Function

# 2017 AWARD WINNER

# PREVENTION & WELLNESS TRUST FUND

## **FALL PREVENTION**

Massachusetts Department of Public Health

### PROGRAM

The Prevention and Wellness Trust Fund (PWTF) was established in 2012, by the Massachusetts (MA) legislature, and aims to improve health outcomes, while containing health care spending. Fifty organizations, including 23 clinical sites and 27 community-based organizations (CBOs), participate in the PWTF fall prevention interventions.

PWTF tests the feasibility and effectiveness of an integrated approach to fall prevention by linking primary care and community resources. Goals of the PWTF falls interven-

tions include: improving screening and clinical assessment of patients 65 and older; engaging older adults in community programs (A Matter of Balance, Tai Chi, and Assisted Home Safety Assessments) to prevent falls; and reducing the burden of falls, fall-related injuries, and associated health care costs.

To coordinate efforts across agencies, PWTF utilizes bidirectional communications for referrals and participant feedback. Clinical teams at primary care sites offer screenings, assessments, and treatments, using the Centers for Disease Control and Prevention's STEADI (Stopping Elderly Accidents, Deaths and Injuries) toolkit. Patients are then referred to fall prevention programs at local CBOs.

The 50 partner organizations are involved in a Falls Prevention Learning Collaborative where they share best practices and receive training and technical assistance. Technical assistance is provided by the MA Department of Public Health (DPH) and fall prevention experts.

### OUTCOMES

**A**s of March 2017, approximately 17,000 older adults received an annual screening for risk of falls; over 6,000



were referred to community-based fall prevention programs. Hundreds of providers and clinical staff received training on clinical and communitybased falls interventions; thereby, increasing their capacity to offer falls interventions and reach those at risk.

Evaluation conducted by Harvard Catalyst concluded that the PWTF falls interventions resulted in 901 fewer falls, 220 fewer injuries, prevented seven hospitalizations, averted 48 cases requiring medical care, and reduced healthcare costs by \$188,000.

### DISSEMINATION

The MA DPH created training materials and developed best practices for supporting the implementation of falls interventions on a larger scale. Dissemination strategies have included publications, presentations at national and state conferences, and reports to the legislature.

Sustainability efforts include: promoting systems changes to incorporate STEADI; integrating community health workers into clinical care teams; identifying local funding opportunities; and promoting interventions for reimbursement by insurance or inclusion in Accountable Care Organizations.

To learn more, please contact:



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# 2017 HONORABLE MENTION



University of North Texas Health Science Center, Center for Geriatrics

### PROGRAM

In July 2015, the Center for Geriatrics, UNT Health Science Center, received a Health Resources and Services Administration grant to create the Workforce Enhancement in Healthy Aging and Independent Living Program (WE HAIL), a partnership with John Peter Smith Health Network, Texas Christian University, and United Way's Area Agency on Aging of Tarrant County. This partnership brings together community-based organizations to develop and deliver student and family medicine resident training opportunities.

WE HAIL identified specific training areas in health literacy, chronic disease self-management, fall prevention, medication management, and dementia care. Training in the community expands the geriatric workforce to improve health care and health outcomes for older adults in Tarrant County and surrounding rural areas. WE HAIL also offers geriatrics training for students of undergraduate and graduate health professions; family medicine residents; practicing health care professionals; and caregivers.

### OUTCOMES

WE HAIL has trained more than 5,000 older adults

and caregivers, 400 health care professionals in over 12 disciplines, and 3,500 health professions students in over seven disciplines. Evaluation showed that 77% of those trained have gained knowledge of services for older patients, and 85% increased confidence in talking with older people about their needs. Through expanded efforts in rural counties, over 180 older adults and caregivers have participated in free, community evidence-based programs on Alzheimer's Disease counseling, stress management techniques, and problem solving skills.

### DISSEMINATION

WE HAIL is expanding partnerships to replicate its training. Dissemination efforts include presenting at national conferences, and co-authoring manuscripts for publications with university faculty and community partners. These combined efforts maximize WE HAIL's overall impact and influence in the wider community of geriatrics care and education.

To learn more, please contact:



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### AWARD SELECTION COMMITTEE

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