

CENTER ON AGING

THE UNIVERSITY OF VERMONT LARNER COLLEGE OF MEDICINE



CONNECTING GENERATIONS TO ENRICH AGING IN VERMONT

WELCOME FROM THE DIRECTOR

At the point where education, medicine, advocacy and government intersect, The Center on Aging at the UVM Larner College of Medicine is employing its energy, vision and passion to improve the lives of aging Vermonters.



Forging strong connections throughout this community of learners and professionals, using a culturally sensitive and equitable approach, is increasingly important as Vermont's aging population continues to grow. It will take all of us in the field of aging to successfully create an evidence-based support structure that allows older Vermonters to remain safe, healthy and engaged in their chosen homes.

This publication offers a brief overview of the work that the Center's staff is doing to make this vision a reality.

- The students we educate and pair with community partners will enter the field with a solid foundation and on-the-ground experience.
- Our research findings and clinical programs will provide clinicians with additional tools to address the physical, emotional and cognitive issues of aging.
- The partnerships built by our staff will support greater collaboration and efficiency in service delivery by the professionals who treat, support and protect older adults and their families.
- The Center will continue to grow as a resource for Vermont, attracting external funding and forging academic collaborations to address specific questions underlying policy debates.

There is much left to do on this journey, and exciting things lie ahead. I hope you will be inspired to join us along the way.

Gratefully,



Michael LaMantia, M.D., M.P.H.
Holly and Bob Miller Chair in Memory and Aging
Director, UVM Larner College of Medicine
Center on Aging



THE AGE-FRIENDLY UNIVERSITY

THE UNIVERSITY OF VERMONT is embracing an innovative global education movement that will benefit older Vermonters as their numbers grow and support intergenerational opportunities within the university.

Members of the **Age-Friendly University** (AFU) Global Network craft policies and programs to welcome students of all ages for social, personal and economic benefits. AFU provides a framework to guide UVM in innovative practices in teaching, research, community engagement and more, directed toward older Vermonters.

The alliance will support UVM as it broadens efforts to prepare students to work with an aging Vermont population and be engaged citizens. Expanding multi-generational activities will boost psychological, physical and social well-being of a broader audience and will help reduce ageism.

AFU members follow 10 principles addressing opportunities and responsibilities that span the breadth of University activities. These principles align with UVM's Academic Success Goal priorities of teaching and learning, knowledge creation and evidence-based engagement to address challenges and contribute to positive community impact.

The Center on Aging's Advisory Board is spearheading this work, led by **Dr. Jason Garbarino** of the College of Nursing and Health Sciences and **Janet Nunziata**, Center on Aging associate director for education.

(Above) Jason Garbarino, clinical associate professor and vice chair, Nursing Undergraduate Program, and Janet Nunziata, Center on Aging associate director for education, have led the effort to make UVM an age-friendly university.



IMPROVING CARE FOR OLDER ADULTS

THE GERIATRIC CONSULT SERVICE at the University of Vermont Medical Center is improving the hospital experience for frail, older patients with complex health problems. Through early intervention, clinicians can prevent a common medical event from starting a cascade of problems.

The team—an attending geriatrician, nurse specialist, chaplain, pharmacist and a rotating group of learners (residents and advanced practice nursing, pharmacy and chaplaincy students)—identifies a patient’s risk factors. They then work to maintain function and mobility and prevent acute confusion/delirium, which is a common problem in the hospital.

The consult service advises their colleagues on medical interventions,

including medications, to help ensure that the benefits of treatment outweigh the risks. They also focus on transitions of care from hospital to home—a critical juncture that, handled appropriately, can prevent readmissions.

The service works mostly with patients on the three internal medicine units, but any internal medicine physician practicing at UVMHC can request a consult for a hospitalized patient. The hospital’s medical record also flags at-risk patients, so team members can step in to offer help.

Geriatrician **Amy Gennari, M.D.**, notes that the interdisciplinary nature of the service helps providers look at all the angles of what’s important to patients and families. “Our goal is to improve health outcomes for our frail and more vulnerable patients.”

GRAND FRIENDS PROGRAM

THE UNIVERSITY OF VERMONT is preparing a new generation of health care clinicians to care for aging adults.

The Grand Friends program, administered by the Center on Aging, connects students with older Vermonters to engage and form friendships. Pairs are matched by interests and meet several times over a few months, either virtually or in person. Some guidance in conversation is provided, but each pair can choose their own activities.

Students at the College of Nursing and Health Sciences engage with older adults through coursework, providing a more structured experience. Two students are

paired with an older Vermonter, and students write a biography about their paired volunteer.

The Center on Aging’s internship program provides yet another opportunity for intergenerational understanding.

These engagement efforts allow older adults to share their life experiences and provide students with insight into the strengths and challenges of the aging population. As one student noted after their participation in Grand Friends, “Encouraging and supporting people and programs that push for change and positive treatment of elders is so important.”



BUILDING BRIDGES

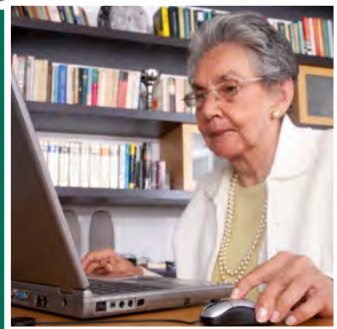
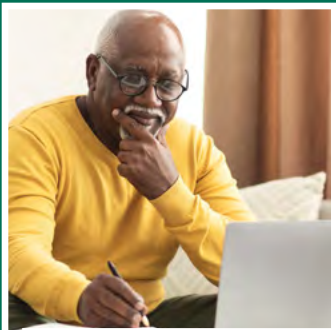
BETWEEN GENERATIONS

PARTNERS IN RESEARCH

The Vermont Older Adult Research Registry includes Vermonters 50+ who are willing to participate in UVM research studies. It allows for quick recruitment for research throughout UVM and partner organizations. Volunteers fill out a quick online survey to help researchers find appropriate subjects, can choose whether to participate in any study and can leave the registry at any time.

They can also indicate their willingness to work with students in programs such as Grand Friends.

Learn more and sign up (click the JOIN NOW button) at: go.uvm.edu/adultresearchreg



“HOW DO YOU HELP ADULTS WITH KIDNEY DISEASE MAKE DECISIONS ABOUT WHAT THEY WANT FOR THE REST OF THEIR LIVES, PARTICULARLY IF THEY HAVE COGNITIVE IMPAIRMENT?”

— KATHERINE CHEUNG, M.D.

OLDER KIDNEY PATIENTS face a slow decline to the ends of their lives. The disease comes with altered cognition, a higher rate of dementia, frailty or other mobility impairments, and communication challenges. Dialysis also takes a toll. At what point does quality of life outweigh the benefits of treatment?

The ideal treatment plan would note what care patients want now, and what they want as their health declines. “Our patients need to have these conversations,” says nephrologist **Katharine Cheung M.D., Ph.D.**, “but they need tools and guidance. And our busy clinicians don’t know how to have those conversations.”



SUPPORTING RESEARCH

This is not an insignificant challenge: 10 to 15 percent of people have kidney disease. So Cheung focuses her research efforts on how to give medical providers and patients the time and language to start these discussions and continue them over time.


Cheung is a project director at UVM’s newest Center on Biomedical Research Excellence (COBRE) Vermont Center for Cardiovascular and Brain Health (VCCBH), and is studying the trajectory of cognitive impairment in this population to understand if and how cognition may alter the timing of treatment discussions.

Cheung is also studying the feasibility of TelePalliative Care consultation with

patients in rural dialysis units during treatments. Vermont subjects found that this approach saved time, was as good or better than in-person conversations, and spurred discussions with family members. It helped align their goals with treatment plans and gave them—and clinicians—tools to talk about it.

Cheung mentors Larner College of Medicine summer research fellows (second-year medical students) who are interested in doing research on kidney disease. One feasibility study looked at the effects of mindfulness, meditation and yogic breathing. A second, funded by a Center on Aging grant, tracked the function and resilience of dialysis patients in their first year of treatment.



 Robert Larner, M.D.
College of Medicine



In 2008, Lois McClure of Shelburne, Vermont, honored the Center on Aging with a generous philanthropic gift.

She, like those of us who work within the Center, recognized that the significant demographic shift taking place locally, nationally and internationally will create major social, political, economic and health issues.

We are forever grateful for her support.



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