

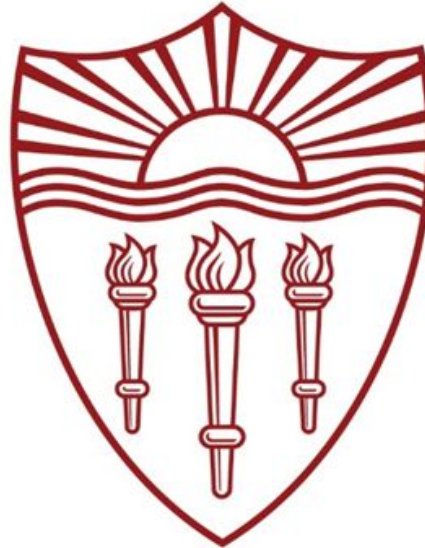
Welcome to the IECG Orientation

September 9, 2022
2:00pm-4:30pm



Keck School of Medicine of **USC**
Geriatric Healthcare Collective

2022-2023 Interprofessional Education and Collaboration for Geriatrics



Keck School of Medicine of **USC**

Geriatric Healthcare Collective

This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U1QHP28740, Geriatrics Workforce Enhancement Program for \$3.5 million. This information or content and conclusions are those of the author and should not be construed as the official position or policy or, nor should any endorsements be inferred by, HRSA, HHS or the U.S. Government.

2:05 p.m. – 2:20 p.m.	Welcome to IECG	Freddi Segal-Gidan
2:20 p.m.- 2:30 p.m	Why is IECG important?	Carolyn Kaloostian
2:30 p.m. – 2:45 p.m.	Expectations of Program	Cheryl Resnik Mitzi D'Aquila Tatyana Gurvich
2:45 p.m. – 3:15 p.m	Community Building	Dawn Joosten-Hagye Ashley Halle Chris Beam
3:15 p.m. – 3:25 p.m	Break/Transition	ALL
3:25 p.m. - 4:25 p.m.	Team break-out rooms	ALL
4:25 p.m. – 4:30 p.m	Conclusion	All Team Facilitators

IECG Orientation Agenda

IECG Faculty



Ashley Halle, OTC, OTR/L
Associate Professor of Clinical
Occupational Therapy



Bruna Martins-Klein, PhD
Assistant Professor of Psychology
Department of Psychology



Carolyn Kaloostian MD MPH
FAAFP
Associate clinical professor of Family Medicine
Assistant director of Keck Signature Care Clinic
Department of Family Medicine



**Cheryl Resnik, PT, DPT, FNAP,
FAPTA**
Professor of Clinical Physical Therapy
Director, Community Outreach



Christopher R. Beam, Ph.D.
Assistant Professor of Psychology
and Gerontology Department of
Psychology



**Dawn Joosten-Hagye, PhD, LCSW,
GC-C**
Clinical Associate Professor
Department of Adult Mental Health and
Wellness



Freddi Segal-Gidan, PhD
Associate Professor of Clinical
Neurology and Family Medicine,
Director, USC Rancho California
Alzheimer's Disease Center



Isabel Edge, MD
Assistant Professor of Clinical Family
Medicine
Keck School of Medicine of USC

IECG Faculty



**Janice Tramel, MS-HPE, PA-C
Emeritus**

Instructor of Clinical Family Medicine
Division of Physician Assistant Studies



Jennifer Okuno, MPT, GCS

Assistant Professor of Clinical Physical
Therapy USC Division of Biokinesiology
and Physical Therapy



Jo Marie Reilly, MD, MPH, FAFP

Professor of Clinical Family Medicine and
Population and Public Health Sciences
Vice Chair of Education, Family Medicine
Director, Primary Care Initiative Pre Doc
Director, Family Medicine Keck School of
Medicine of USC



Kelsey Sena Peterson, OTD

OTR/L, Neuro-IFRAH Certified
Assistant Professor of Clinical
Occupational Therapy



Mitzi D'Aquila, MACM, PA-C

Interim Program Director | Clinical
Assistant Professor

Keck School of Medicine of USC
Division of Physician Assistant Studies
Primary Care Physician Assistant Program



**Patrick Tabon, PharmD, BCPS,
BCGP**

Assistant Professor of Clinical
Pharmacy
USC School of Pharmacy



**Suh Chen Hsiao, DPPD, PPSC,
LCSW**

Associate Professor & Associate
Director, Field Education



**Tatyana Gurvich, Pharm. D.,
BCGP**

Assistant Professor of Clinical
Pharmacy
USC School of Pharmacy

SUPPORT STAFF



Carmen Van Den Heever
Clinical Project Coordinator



Christina Penate, MFT
Clinical Research Program Manager



Erin Thayer, MPH
Research Coordinator



Ilana Greenberg, MPH
Primary Care Initiative Manager



Janinne Solorza
Administrative Budget Assistant



Sandra Vasquez
Community Outreach Coordinator and
IECG Lead

Course Meetings

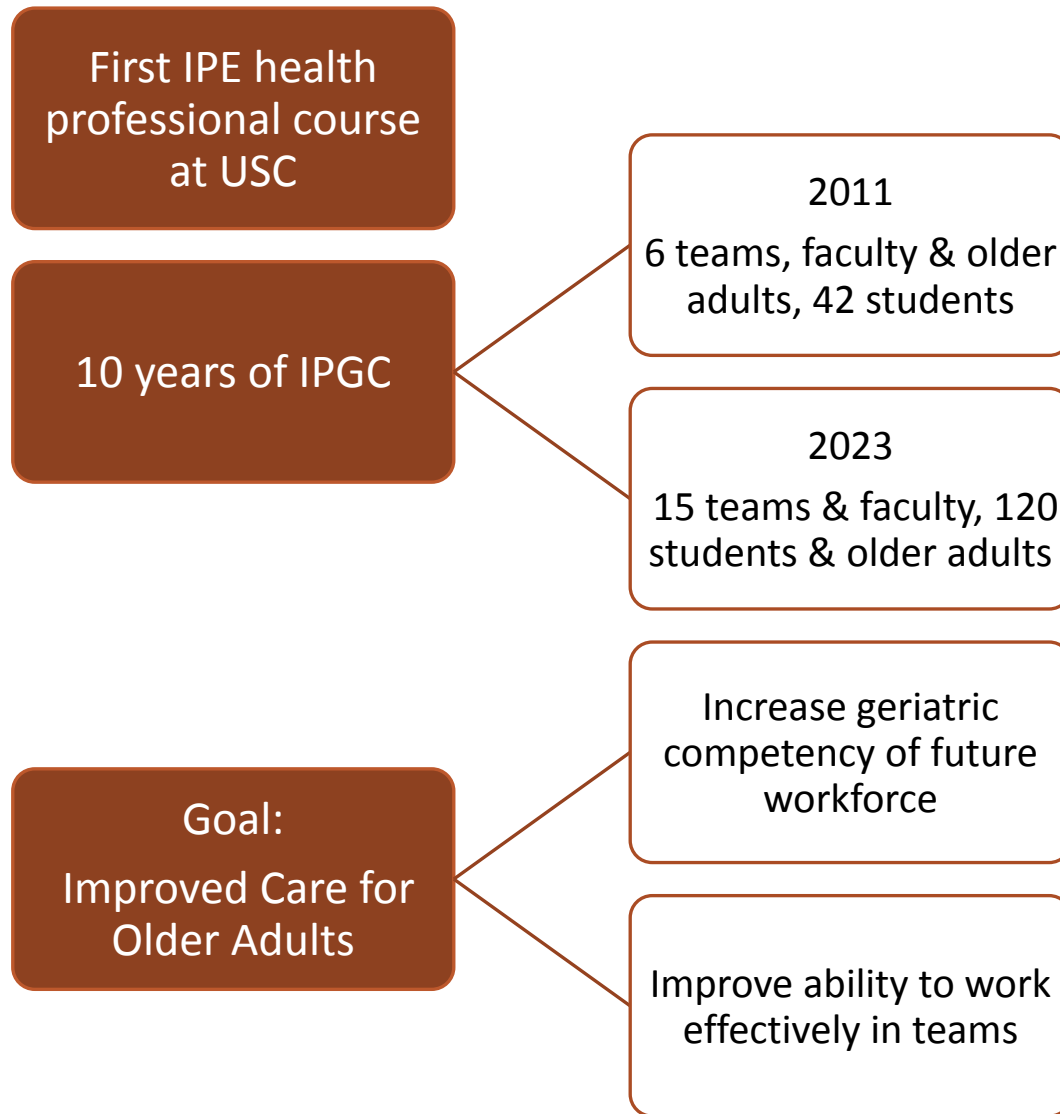
When: 6 Friday afternoons 2:00 PM- 4:30 PM

- Orientation: Sept. 9
- Sessions:
 - Oct 21
 - Nov 4
 - Dec 2,
 - Jan 20*
- Wrap up: Feb 24

Where: Alhambra campus 1000 S. Fremont Ave, Build A6- Auditorium

- *January at housing site with older adult

IECG Course; Formerly IPGC



Course Content & Structure

Geriatrics: Care of Older Adult (4 Ms)

- What Matters,
- Medication,
- Mentation,
- Mobility
- Knowledge, Skills, & Tools

IPE Team

- Roles & responsibilities
- Overlapping and complementary
- Collaborative practice
- Communication

Community Partners and Older Adults

Low-income Housing Site

1. Menorah Housing Foundation
2. TELACU Senior Housing

Community Dwelling

1. USC EMERITI Ctr and alumni
2. Senior Centers
3. Villages (Pasadena, Westside)
4. Religious congregations
5. Family, friends, neighbors



Why is IECG Important?

Presented by:

CAROLYN KALOOSTIAN MD, MPH

ASSOCIATE PROFESSOR OF CLINICAL FAMILY MEDICINE



Course Description

- Provides students with interprofessional (IP) clinical training in the care of an independently living, community –based older adult
- Focuses on the critical role of collaborative health for the maximal well-being of a person

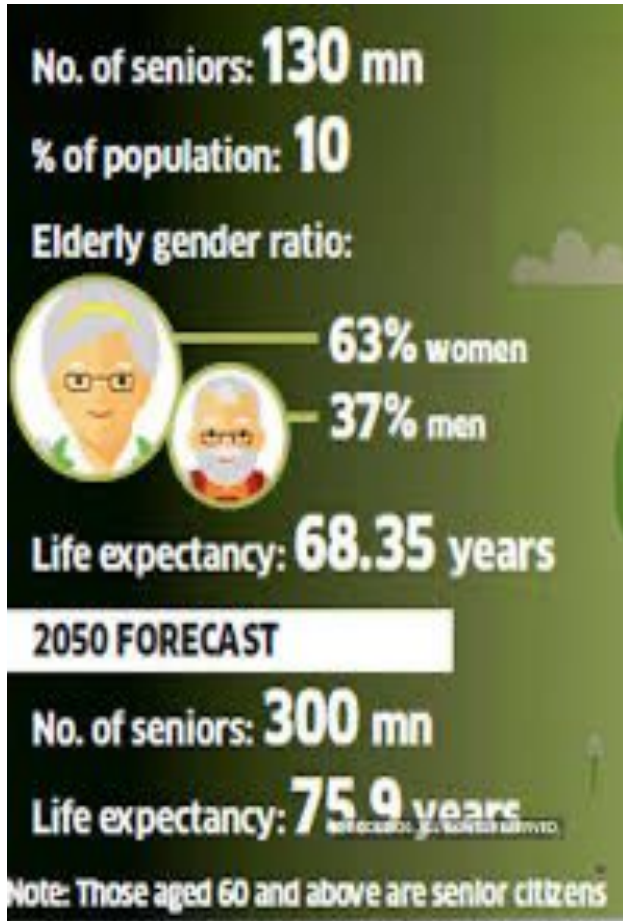


Who is an Older Adult? Aging in America

- **Who is An older Adult: “Young old” = 65-75; “Old” = 75-85“Very old” > 85**
- About 52 million Americans are age 65 or older, according to the [Census Bureau’s 2018 population estimates](#).
- One quarter of these older Americans live in one of three states: California, Florida, and Texas.
- Seven other states—Georgia, Illinois, Michigan, New York, North Carolina, Ohio, and Pennsylvania—account for another one-quarter of Americans age 65 or older
- Need for health care workers who understand/trained to meet the health care needs of this population



The elderly are a vulnerable, growing population



Our older adult population is growing. In 2025 is estimated to be 21% of the total USA population.

By 2025, 25% of the workforce will be older than 55 years of age.

There is a great deal of variability in the elderly; Such variability in needs require a variety of health professional skill sets to best support their needs

How to Best Meet Those Needs: Age-Friendly Health System: The 4 “M’s”



Video links here: 1 & 2

https://www.youtube.com/playlist?list=PLHWxeEqcNV7wNMrlab_mnvRruwEMGXMHm

Best Population Health strategy to care for older adults: Inter-professional: Geriatric Team

- In 2007, the Institute of Medicine (IOM) charged the committee on the Future Health Care Workforce for Older Americans to determine the health care needs of the aging population .
- Primary findings: The need to train more health care providers in the basics of geriatric care.
- Also recommended: "Health care professionals should be required to demonstrate their competence in the care of older adults as a criterion for licensure and certification."



Training an Inter-Professional (IP) health professional (HP) workforce is key

- Interprofessional education is critical for older adult care
- Comprehensive team-based health professional care is best
- Holistic care best improves health outcomes
- Must establish IP health professional team-based training programs to improve student attitudes and promote professional practice with older adults



YOU ARE THE TEAM!

Objectives of IECG

Journey

Journey with an older adult over 6 months and develop a relationship with them through weekly phone conversations.

Understand

Understand the **role of an inter-professional team** in caring for an older adult.

Discuss

Discuss mobility, mentation, medication and “what matters” with an older adult and **learn** the corresponding **assessment tools/resources**

Develop

Develop skills through phone conversations about health and helping older adult access their health care.

IECG Nuts and Bolts

6 Friday In-Person Meetings at Alhambra Campus
(see schedule on the IECG website)

Weekly 30 minute phone meetings with older adult

You will receive your older adult partner pair information in the next two weeks via email

Calls are weekly between Sept 2022 - February 2023

Weekly times are negotiated with your senior partner. If missed leave a detailed message

Learn about their life experience, medical conditions & health concerns help/educate with health resources

Practice health assessments/screens on a variety of the 4 "M's"

Phone audio or Facetime/Zoom calls

4 Reflections
turned into your discipline faculty

IECG Schedule 2022-2023

IECG Timeline: 2pm - 4:30pm

- IP large group faculty/student didactic discussion
- IP small team meetings
- Sessions end with final/ comments with team leads



**IECG Gives you
the chance to
explore being
part of an IP
Team and learn
and share your
discipline's skills
in caring for an
older adult**



Expectations of IECG Program

Presented By:

Cheryl Resnik

Mitzi D'Aquila

Tatyana Gurvich

Code of Conduct



USC Virtual Code of Conduct

It is important that our student members, participants and guests feel welcomed at USC and in our programs. The code of conduct embodies the spirit of our college, and is intended to help everyone feel comfortable, grow, and thrive. As a USC participant or guest, we ask you to agree to follow this code of conduct which is rooted in our core Trojan values.

These requirements also serve as an extension and supplement to any codes of conduct students and participants must abide given by their program leadership:

1. Appropriate Video Call Etiquette:
 - When registering/signing-in for any video call or meeting, please use your **First & Last Name** (not a random username).
Example: Clement Duran (NY). This helps us to ensure the privacy of our meetings.
 - Please find a quiet area and call in at the scheduled meeting time so that you can be fully present in the virtual experience. We ask that all participants have their video function on their device so that we can see and hear you.
 - Please do your best to keep background noise or distractions to a minimum.
 - Please do not take your phone or computer to the bathroom.
 - Photos and videos of others without the expressed consent is prohibited.
 - Posting of screenshots, photos, videos or other IPGC activities on any type of social media platform is prohibited
2. Appropriate attire: Appropriate attire must always be worn. Clothing with vulgar language, obscene gestures, racial slurs, or anything that contributes to a hostile environment or would be considered inappropriate and is not allowed. Appropriate tops and bottoms should be worn.
3. Appropriate language: Vulgar language, including swearing, name-calling, discussion about personal sexual matters, shouting/yelling at others is prohibited. When communicating in the chat box, please do not send links or information that is not aligned with our USC values.
4. Creating a welcoming environment: Respect others' cultures and personal way of being. We strive to create a safe emotional and physical space. We encourage participants to honor diversity in all dimensions and respect opinions or perspectives. USC stands up against all forms of bullying, discrimination and racism.
5. Appropriate conduct: Any other conduct of an inappropriate, threatening or offensive nature will be investigated/evaluated by USC leadership. Participants that do not abide by this agreement may be prohibited from participating in future virtual events or in person activities.
6. Alcohol, Tobacco and Drugs: The use of alcohol, tobacco, and drugs (including e-cigs/ tobacco-like products) is not permitted in or outside of ALL virtual calls. Participants that show, obtain, see in the background, make references to or use during the virtual calls will be removed from meeting



and removed from future virtual and in-person events. Law enforcement may be involved if necessary.

If a member, participant or guest feels uncomfortable in confronting someone directly about offensive behavior or other issues that are in violation of this code of conduct, we ask that you please report the behavior or issue to Bonnie Olsen, Ph.D. at Bonnie.Olsen@med.usc.edu or Freddi Segal-Gidan, PA, Ph.D. at segalgi@usc.edu

To create and maintain a space that embodies our core values, USC is serious about being clear regarding activities that are not allowed. If you violate this code of conduct, consequences can include termination of program privileges and involving appropriate legal authority. USC reserves the right to make situational decisions based on our policies, mission and values.

As part of the USC personnel we expect behavior that is professional & demonstrates integrity. All participants must submit their digital signature agreeing to this code of conduct prior to participating in all USC virtual programming.

Print Name: _____ Date: _____

Signature: _____

Code of Conduct

- Create a welcoming environment
 - respect others' cultures and personal way of being. We encourage you to honor diversity in all dimensions and respect opinions or perspectives.
- Appropriate language
 - both within your teams and with your older adult participant. Be sensitive to how your messages are being received by others.
- Appropriate attire
 - Business casual – dress for a meeting with Dr. Folt.
 - No sports attire, jeans, flip flops, revealing clothing. No white coats.
- Active Participation
 - Contribute to the discussion, actively engage your teammates. Let the team know of unexpected absences.

Student Role

Active learner

- Student participants are at a variety of levels in their professional development. Begin with a growth mindset.

Team member

- Support your teammates learning, be open to other perspectives. Practice collaboration.

Reflective practitioner

- While we're not providing treatment, there is a lot to learn from your own and your teammates experiences throughout the program. Active reflection is a requirement for excellence in practice.

Visit Website:

- <https://gwep.usc.edu/age-friendly-student-senior-connection-resources/>

Faculty Role

Facilitate

Facilitate not lead or create the interdisciplinary discussion and group interaction

Communicate

You will have our contact information for any issues that need to be addressed between meeting times

Reach Out

Be available for issues with residents or student team members

- Reach out to us if you think there is something urgent with your resident
- If you have made reasonable attempts to reach a team member and unable to do so

Older Adult Role

Your older adult may be new to this program or may have years of experience with previous students

They will be available for weekly chats with you

Use of technology to communicate

Through the interaction with you they will be sharing with personal information: Medical history, social history, daily activities, their ability to ambulate etc

They are not your patient or client

Please don't provide any kind of medical advice

Reach out to your team as issues come up

Staff Role

Support Students

- Issues with materials, website, resources
- Issues with resident engagement
- Programmatic questions

Support Faculty

- Contacting students
- Contacting housing sites and wellness checks

Support Senior Residents

- Questions regarding program
- Issues with student engagement
- Assist with outside resources

Your Team Role

8 students on team

1 faculty facilitator

Practice collaboration

Build community practice

Lead with curiosity

Open to learn about different roles



Team & Community Building

Ashley Halle, OTD, OTR/L, CAPS

Associate Professor of Clinical Occupational Therapy

Coordinator of Primary Care Residency & Services

USC Mrs. T. H. Chan Division of Occupational Science &
Occupational Therapy



Stages of team development

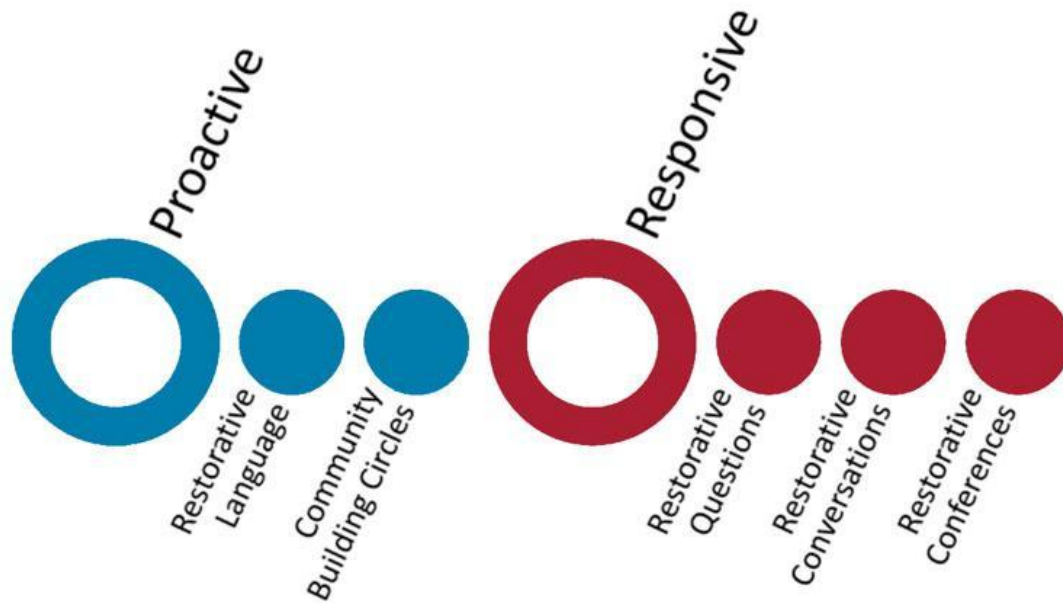
Tuckman's Stages of Group Development



Community Building Circles

To further enhance our collaboration, partnership and reflective capacities, we will be embracing elements of circle processes in our small groups

Restorative Practices



Restorative Practices support community building in a way that is inclusive and collaborative, validating everyone's experiences and needs, but especially those who have previously been marginalized

Community Building Circles

Circle processes are seen in indigenous and tribal cultures throughout the world and in history focused on maintaining equitable justice for the members of these communities

The circle, which has no beginning or end, symbolically illustrates that all present are valued as significant and that insights shared are held respectfully within the space

Community Building Circles

Purpose:

Honest communications

Relationship development

Community building

Create trust, reciprocity and belonging

Build connection, collaboration and mutual understanding

Circle Values





Community Agreements

Community Agreements

What's said here, stays here. What's learned here, leaves here.

Speak from the heart, stay present and listen fully.

Use "I" statements, be sincere, practice respectful honesty.

If you do not have anything to share, that is ok. You can say "pass".

Do not share someone else's story without their consent.

Acknowledge emotions and discomfort.

Say just enough: speak one at a time; give others an opportunity to speak and do not dominate discussions.

Begin Learning about each other

- As healthcare professionals, we do not necessarily do what others assume that we do?
- What are the assumptions you have about your profession?
 - Pair with someone in your profession and discuss for 1-2 minutes?
- What are the assumptions you have about other professions?
 - Pair with someone NOT in your profession and discuss for 1-2 minutes?



How to Get Started

My Story & Beautiful Questions

Dawn Joosten-Hagye, PhD, LCSW, GC-C

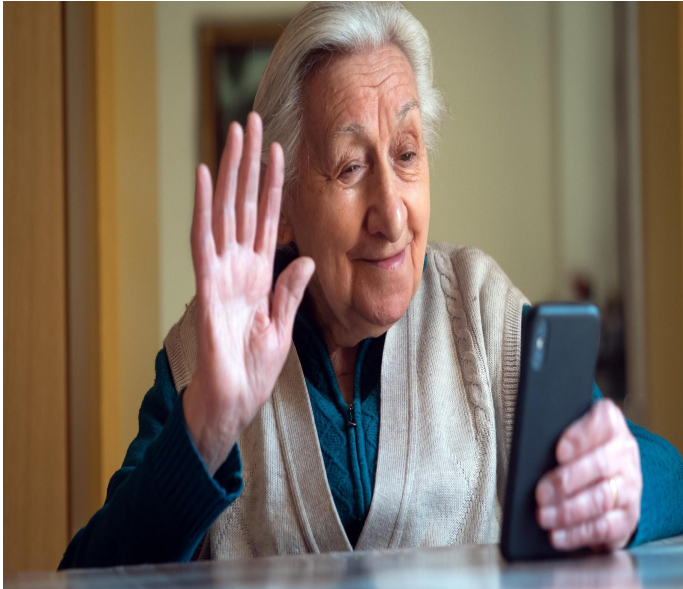
Clinical Associate Professor of Social Work Suzanne
Dworak-Peck School of Social Work

How to Get Started- Communication Tips

- Avoid using medical jargon they may not understand
- Refrain from using “elderspeak”
- Use their name
- Ask one question at a time
- Give one direction at a time
- Speak slowly and clearly; ask older adult preferences
- Be mindful of older adult; allow extra time for responses if needed; become comfortable with pauses
- Avoid interrupting, unless necessary for time or redirection
- REMEMBER– they are NOT your patient, you are NOT providing treatment



Having a Conversation

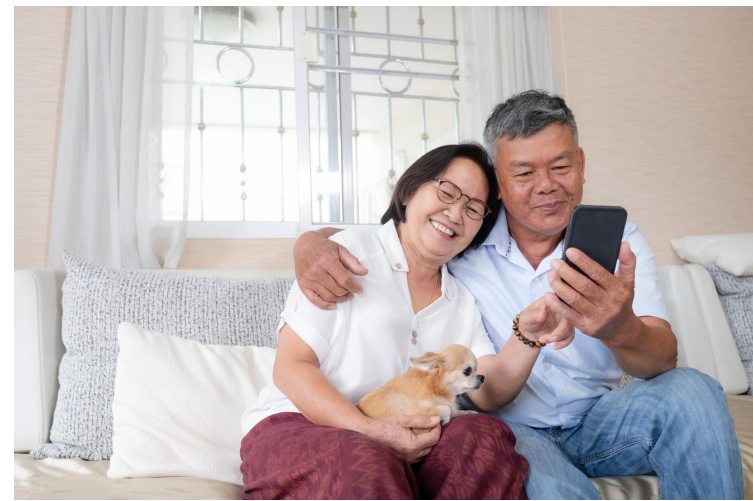


- **Research suggests:** Non-Verbal Communication accounts for 70-90% of communication
- **Some tips to be mindful of:**
 - Body language
 - “Eye contact”
 - Always show respect and caring
 - Calm tone of voice
 - Minimize distractions (auditory and visual)

Getting Started

AIDET Principle

- **Acknowledge** everyone present.
Smile, make eye contact, and be pleasant
- **Introduce** yourself and your role
- **Duration** – at the start, state how long the visit will be and clarify the length of any assessments
- **Explain** all the processes and procedures so they know what to expect
- **Thank** the older adult (and others) for inviting you into their lives and for their time. Identify any “to do” items and remind them you will have your next visit.



My Story

- In the 1st couple of weeks use 'My Story' to *get to know your older adult, establish rapport*
- It is ok to use self disclosure



My Story

- MY FULL NAME IS:
- THINGS I'D LIKE YOU TO KNOW ABOUT ME:
- MY LOVED ONES ARE:
- MY JOB/CAREER IS/WAS:
- MY FAVORITE MUSIC/SONG IS:

MY FAVORITE TV SHOW IS:

MY HOBBIES/INTERESTS ARE:

MY GREATEST LIFE ACCOMPLISHMENT is:

I AM HAPPIEST WHEN:

TELL US ABOUT HOW COVID-19 IMPACTED YOU OVER THE LAST YEAR:

Asking “Beautiful Questions”

What are they?

“A Beautiful Question opens a shared path of discovery, by asking an open-ended question with no right or wrong answer”
(TimeSlips, 2020)

How do I ask them?

“I have a Beautiful Question – would you like to hear it? There is no wrong answer – you can answer any way you like.”
(TimeSlips, 2020)

- What is something you treasure in your home? Why?
- What kind of food makes you happy?
- What is a place with special meaning for you?
- Who is someone you're grateful for? Why?
- What gift would you give the next generation?
- What is courage to you?
- How do you show courage in your everyday life?
- Who in your life do you see as courageous?
- What is something about life that puzzles you?
- What is something you've learned in life?
- What is something you could teach another person?
- What is something you would like to learn?
- What is a song with meaning for you?
- What sounds do you associate with your home?
- What sounds do you associate with being in nature?
- What smells make you happy?
- What is something in nature that brings you joy?
- What does your name mean to you?
- What feeling are you feeling right now?
- What is something you are proud of in your life?

Break Out Rooms



Location	Team
Auditorium	Jo Marie Reilly
Auditorium	Janice Tramel
Auditorium	Jennifer Okuno
PA 192	Chris Beam
PA 193	Kelsey Peterson
PA 194	Isabel Edge
PA 195	Bruna Martins-Klein
PA 196	Cheryl Resnik
4th floor RM 6404	Patrick Tabon
4th floor RM 6403	Dawn Joosten-Hagye
4th floor RM 6425	Carolyn Kaloostian
4th floor RM 7415	Ashley Halle
4th floor RM 6414	Mitzi D'Aquila
4th floor RM 6413	Suh Chen Hsiao
4th floor RM 6427	Tanya Gurvich