

Department of Veterans Affairs
Office of Geriatrics and Extended Care



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INTRODUCTION

This report summarizes fiscal year (FY) 2019 activities of the Veteran Administration geriatric centers of excellence, the Geriatric Research, Education, and Clinical Centers (GRECCs). As is evident from even a brief perusal of their work, the GRECCs enhance the VA's mission in countless ways. GRECCs conduct cutting-edge biological, clinical, and health services research; generate novel and exportable clinical interventions; and provide critical geriatrics-related education to VA's workforce. GRECC staff serve as a valuable resource for VISNs and medical centers and hold many crucial leadership positions within them. Although, this report contains many numerical outcomes, including performance measures, it is impossible to quantify all the activities of the twenty GRECC sites.

The GRECCs would not exist, and would not thrive, without the support of their Veteran Integrated Service Networks (VISN) and medical centers. On behalf of the Office of Geriatrics and Extended Care, I offer them a hearty thanks for making this work possible.

I also thank the Geriatrics and Gerontology Advisory Committee (GGAC), which provides policy guidance to the Secretary about all geriatric issues, oversees the GRECCs, and conducts site visits to each GRECC. The VA greatly benefits from the expertise and thoughtfulness of the Committee in crafting its recommendations for national programs and GRECC sites.

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BACKGROUND, HISTORY AND OVERSIGHT

GRECCs were formed to prepare for the wave of aging Veterans with unique health needs that was going to challenge the resources and expertise of the Veterans Health Administration (VHA). The first six GRECCs were initiated in 1976. In 1980, Public Law 96-330 mandated GRECCs to “advance scientific knowledge regarding the medical, psychological, and social needs of older Veterans, and the means for addressing them, through: (1) geriatric and gerontological research; (2) the training of personnel providing health care services to older persons; and (3) the development and evaluation of improved models of clinical services for eligible, older Veterans.”

In 1985, Public Law 99-166 authorized up to 25 sites to be designated as GRECCs. Presently, 20 GRECCs are in operation at 25 sites in 17 Veterans Integrated Service Networks (VISNs); all VISNs except VISN 15 have at least one GRECC. Three VISNs (8, 10, and 19) each have two GRECCs. Other than the original six GRECCs, each site subsequently chosen has been selected in response to a call for proposals that was then subjected to peer review from both within and beyond VA. A subset of the original applicants was then subjected to on-site reviews by a team made up of members of the VA Geriatrics and Gerontology Advisory Committee (GGAC), a group of non-VA stakeholders and geriatrics experts chartered in the same 1980 legislation that authorized the GRECCs. GGAC is charged with overseeing GRECCs as well as providing input to the Secretary and Under Secretary for Health on aging Veterans and the agency’s programs on their behalf.

The GRECC mission was and remains devoted to: (1) conducting research to address the origins and management of diseases and disabilities affecting the elderly; (2) employing those findings to develop, test, and disseminate clinical approaches and models of care to improve the clinical management of aging Veterans; and (3) educating the workforce and trainees in VA and the community on the healthcare needs and management strategies that have been found to be most successful.

By law, each GRECC has a tripartite mission of geriatric and gerontological research, education, and clinical innovation:

- The research mission at each site consists of funded, peer-reviewed investigations within one or more circumscribed focus areas in the basic biomedical, applied clinical, and health services/rehabilitative issues surrounding aging, the aged, their health care and functional needs;
- The education mission is focused on the training of health providers in the care of the elderly, at undergraduate and postgraduate levels; among both VA staff and community providers, and in partnership with academic affiliates; within local as well as regional and national spheres; and covering a broad range of disciplines; and

- The clinical innovation mission is intended to advance the practice of geriatric care through the development and evaluation of new approaches—which when demonstrated as effective, are to become integrated into the fabric of, and supported by, the parent health care system; and then, ideally, exported elsewhere within VA and beyond.

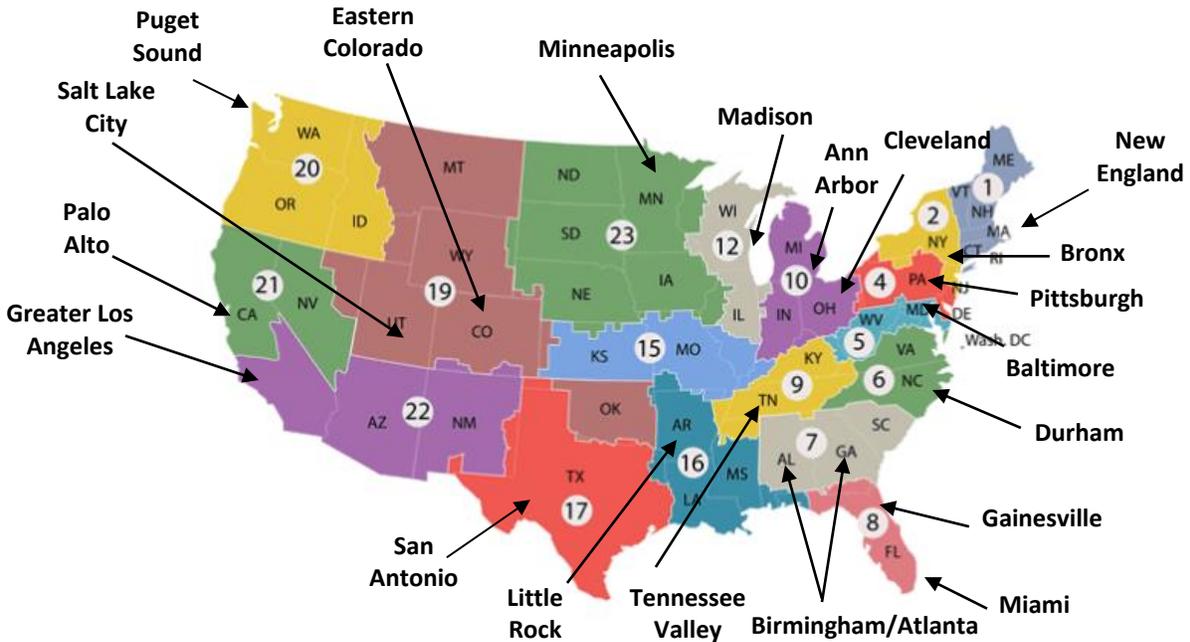
GRECCs are VHA Centers of Excellence and are therefore subject to the terms for oversight described in Directive 1215, “Standards for VHA Centers of Excellence”. The Office of Geriatrics and Extended Care conducts ongoing oversight of GRECC activities, responds to queries from GRECCs, and organizes cross-GRECC activities, including monthly calls of the Directors and each of the Associate Director groups, as well as other ad hoc committees.

Each GRECC submits information on an annual basis about their research, educational, and clinical activities, as well as any challenges in accomplishing goals. The information is entered into a database, from which reports are compiled. Performance measures are computed from this data. GEC leadership holds calls with each GRECC to review the report and to discuss plans for the coming year.

In its oversight role, GGAC convenes twice annually in VA Central Office and the findings of the annual reports are reviewed. GGAC follows a 5-year cycle of site-visits to the GRECCs, during which the GGAC Chair, GEC Leadership, and several committee members review the previously-submitted annual reports and a more thorough self-study completed by the GRECC, and interview leadership of the GRECC, the VA Medical Center, the VISN, the University Affiliate, and the Advisory Subcommittee. The site visit reports become part of the GGAC’s annual report to the VA Secretary, which by statute is also sent to the Chair and Ranking Members of the House and Senate VA oversight committees.

GEOGRAPHY OF GRECCS

Twenty GRECCs are in operation in 17 Veterans Integrated Service Networks (VISNs); all VISNs except VISN 15 have at least one GRECC. Three VISNs (8,10, and 19) each have two GRECCs (Map below).



VA's Geriatric Research, Education, and Clinical Centers

A list of all the GRECCs, including leadership and areas of focus, is included at the end of this report.

GRECCS by the NUMBERS 2019

These national totals provide some perspective on the scope and overall contributions of the GRECCs:

	Totals
Number of GRECCs	20
Total GRECC Staff	533
Total GRECC FTE	298
Number of aging-related presentations by GRECC staff	2721
Career development awardee mentees	273*
Number of grants and projects	782
Grants reviewed	649
Scholarly manuscripts reviewed	4296
Peer-reviewed publications	1545
Trainees slots for allied health	457
Medicine residents, fellows, & students who rotated through GRECC sites	1656
Total annual grant and projects expenditures*	\$119,546,684
Total qualified research expenditures (subject to VERA) *	\$69,968,078
VERA allocation for GRECC trainees	\$16,398,870

*This sums the mentees that each GRECC staff person supervised. This was not necessarily as the primary or only mentor, so some mentees may be double counted.

*These totals are only for grants and projects in which the principal investigator dedicates at least 50% effort in the GRECC. All grants and projects with GRECC investigators totaled \$185,426,682. VERA: Veterans Equitable Resource Allocation

GRECC CONTRIBUTIONS:

As part of their annual reporting process, GRECCs enumerate their contributions to research, education, clinical, and administrative programs within their VISNs, medical centers, and national program offices. National contributions include dissemination of novel clinical programs such as Gerofit offered in 15 VA facilities and Advanced Care Planning-Group Visits offered in 41 VA facilities. GRECC national education activities for VA trainees and staff include the Geriatric Scholars Program, GRECC Webinars, dementia training, and GRECC Connect. All these educational offerings are critical to enhancing the VA's diminishing geriatric workforce. GRECC research has national impact in the areas of infection control, traumatic brain injury, medication safety, cardiovascular disease, diabetes, and exercise mobility. Lastly, two GRECCs are part of modernizing the national Electronic Health Record (EHR) workgroup working specifically on geriatric and intensive care unit (ICU).

GRECCs also contribute at VISN levels to ensuring that geriatric research, education, and clinical projects reach facilities within their VISN along with their host site. GRECC research activities conducted at a VISN level include Aging in Place, medication management, post-hospitalization transition care, sleep disturbance, Alzheimer's disease relationship to traumatic brain injury, Regional Health Information Organizations, and statistical support. GRECC clinical projects include medication deprescribing, dementia care coordination, telehealth expansion, PACT dementia care models and dementia clinics, GeriPACT expansion, geriatric education for community providers, and Hospital in Home. GRECC clinic projects that directly impact Community Living Centers (CLC) include mobility that led to improving Strategic Analytics for Improvement and Learning (SAIL) metrics, residential aphasia treatment and education, and medication deprescribing. GRECC Education for VA staff and trainees included Grand Rounds, capacity assessments, infection control, and non-pharmacological interventions. Noteworthy is the Cleveland GRECCs infection control program which resulted in their emergency department becoming the first accredited Geriatric Emergency Department in VA. GRECC educational contributions for CLCs include non-pharmacological interventions, geriatric nursing, dementia simulation, CLC Survey Readiness, Minimum Data Set (MDS) training, and mini residencies for CLC staff on skill development.

At a local level, GRECC investigations include infection control, cardiovascular safety, cardiovascular mobility, and frailty prevention. Clinical programs at the local level include mobility programs like Gerofit and **ASsisTed EaRly MobIility for Hospitalized Older VetErans (STRIDE)**, medication management, Amyotrophic Lateral Sclerosis

(ALS) care, Palliative Care, Advanced Care Planning, and memory assessment and management. Education offerings for VA staff include Whole Health, Caregiver quality of life, falls, goals of care, ICU, geriatric emergency department care, delirium, Alzheimer's and dementia, driving, and speech/aphasia. CLC trainings made available include a CLC toolkit, delirium, and quality improvements. Education programs for trainees include geriatric and palliative care fellowship programs, residency programs, and expansion of geriatric nursing.

Another important contribution, difficult to quantify but regularly brought to light during every GRECC site visit by GGAC, concerns recruitment of talented and productive clinicians to VHA. Many of the associated health trainees' clinical preceptors state that their training experiences in VA began in GRECC, and the interdisciplinary care VHA provides to Veterans remains unmatched in the private sector. Many funded GRECC researcher-physicians avow that they would not be in full-time academic positions if not for the resources, collaborations, research possibilities, and stability and mix of responsibilities within a GRECC. These scholars bring tangible and intangible assets to their VAMCs and university affiliates. They serve as magnets for other recruitments, trainees, and resources; and assist in strengthening ties with academic affiliates. They elevate the visibility, academic environments, and clinical capabilities of their host medical centers and of the VA system as a whole.

GRECCs provide material value to their VISNs by several mechanisms. First, research expenditures are "recaptured" by means of the Veterans Equitable Resource Allocation (VERA) research allocation, in which a proportion of the total money spent on a grant is calculated, and this amount is given to the medical center to support the research. (It is analogous to "indirect costs" in NIH grants.) Second, medical centers receive money through VERA for educational activities, based on the number of trainee slots. Third, education projects receive money through various mechanisms, including the Office of Rural Health. Finally, GRECC staff perform clinical activities that are not directly related to the GRECC, but that benefit the medical center.

Awards:

In FY 2019, GRECC staff were recognized locally for their contributions. They received numerous teaching awards, "top doctor" recognitions, and awards for mentoring, research, scholarship, and humanitarian work.

From the dozens of awards and recognitions earned by GRECC researchers, several deserve special mention. Dr. Al Siu of the Bronx GRECC was elected to the National Academy of Medicine. Dr. Bill Banks of Puget Sound and Dr. Robert Bonomo of Cleveland received the VA's William S. Middleton Award for outstanding achievement in research. Dr. Bandana Chatterjee of San Antonio received a Fulbright Scholar Award. GRECC researchers won best paper awards at the American Geriatrics Society, Academy of Geriatric Emergency Medicine, and International Medical Informatics Association meetings.

Key Leadership Activities:

GRECC staff led and participated in key national committees and initiatives, including the Geriatric Scholars Program, the Palliative Scholars Program, the Dementia Education and Training Committee, the Dementia Steering Committee, the Aging and Cognition Education Workgroup, the Cognition and Mood Assessment in Dementia Evaluation Workgroup, and numerous research panels.

GRECC staff served on and chaired numerous medical center committees, including Research and Development, Ethics, Radiation Safety, Medical Executive Council, and Institutional Review Boards. GRECC staff led departments, service lines, residency programs, and clinical programs at their host facilities and academic affiliates.

Members of GRECCs were elected President or President-elect of the Obesity Society, the International Diabetes Neuropathy Consortium, the American Academy of Sleep Medicine Foundation, the Association for Gerontology in Higher Education, Southern Society of General Internal Medicine, and the American Aging Association. They also have main leadership roles in national organizations focused on clinical care, medical subspecialties, education, and research. They also sit as boards of directors for community organizations.

RESEARCH ACTIVITIES

GRECCs are required by statute to conduct research on aging-related topics, including basic biomedical, applied clinical, and health services research. GRECC primary core staffing is recommended to include 5.0 research Full Time Employee Equivalent (FTEE); and an average research effort of at least 40% time by all GRECC research staff is required and enforced as a performance monitor.

GRECC researchers served as principal investigators on over 780 funded projects in FY2019. The total annual research expenditures for projects with GRECC investigators were over \$185 million, of which 39% was VA-supported research (e.g., Merit, Cooperative Study, Career Development, etc.); 54% non-VA governmental and other peer-reviewed funding (e.g., National Institutes of Health (NIH), university support); and 7% private corporation, donated, or proprietary funds.

GRECC staff published over 1500 peer-reviewed publications in FY2019, including some key breakthroughs in advancing the science of geriatrics. Many have direct relevance for the health of older adults. Some of the highlights are:

- Indwelling urethral versus suprapubic catheters in nursing home residents: determining the safest option for long-term use (Ann Arbor)
- A multimodal rehabilitation program for patients with ICU acquired weakness improves ventilator weaning and discharge home (Baltimore)
- Development and evolution of a two-day intensive resident experience in geriatric medicine (Birmingham/Atlanta)

- Advance Care Planning Codes-Getting Paid for Quality Care (Bronx)
- Trends in Collection of Microbiological Cultures Across Veterans Affairs Community Living Centers in the United States Over 8 Years (Cleveland)
- Association of Sensory and Cognitive Impairment with Healthcare Utilization and Cost in Older Adults (Durham)
- Physician and Family Discussions about Driving Safety: Findings from the Long ROAD Study (Eastern Colorado)
- Preventing Falls in Hospitalized Patients: State of the Science (Gainesville)
- VA Geriatric Scholars Program's impact on prescribing potentially inappropriate medications (Greater LA)
- An Individualized Low-Intensity Walking Clinic Leads to Improvement in Frailty Characteristics in Older Veterans (Little Rock)
- Predicting Risk for Dementia: Is It Ready for the Clinic? (Madison)
- Playing the Long Game: Addressing the Shortage of Geriatrics Educators (Miami)
- Association of bone mineral density with hemoglobin and change in hemoglobin among older men and women: The Cardiovascular Health Study (Minneapolis)
- Nursing Home Staff Perceptions of Barriers and Facilitators to Implementing a Quality Improvement Intervention (New England)
- High-Need Patients' Goals and Goal Progress in a Veterans Affairs Intensive Outpatient Care Program (Palo Alto)
- Frailty Among Older Adults with Acute Myocardial Infarction and Outcomes from Percutaneous Coronary Interventions (Pittsburgh)
- Associations Between Depression, Traumatic Brain Injury, and Cognitively Defined Late-Onset Alzheimer's Disease Subgroups (Puget Sound)
- Learning to Lead: Reflections from the Tideswell-AGS-ADGAP Emerging Leaders in Aging Program Scholars (Salt Lake City)
- Distinguishing Comorbidity, Disability, and Frailty (San Antonio)
- The Importance of Geriatric Care Models (Tennessee Valley)

GRECCs helped to ensure the high quality of scientific research in America, reviewing 652 grants and 4240 publications, serving on 480 editorial boards, and leading local and national research societies. GRECC staff promoted the next generation of research investigators, with 275 research mentoring relationships (a GRECC investigator with a career development awardee).

EDUCATION AND EVALUATION ACTIVITIES

The GRECCs are charged with a broad education mission: 1) to provide on-going training in geriatrics for the host facility clinical staff, 2) to provide regional and national continuing medical education, 3) to train medical and healthcare professions students in geriatrics and gerontology and 4) to mentor junior faculty and post-doctoral researchers. All GRECCs have close ties to their affiliated medical school; many maintain close working relationships as well with other health professional programs (e.g., nursing, psychology, social work, pharmacy, rehabilitation therapies, audiology/speech

pathology, dentistry, podiatry, and optometry) of the medical school affiliate and of other universities as well.

GRECCs carried out a number of innovative education projects in FY2019, aimed at ensuring that VA's workforce has the skills and experience needed to provide high-quality care to aging Veterans. Some of the highlights are:

- Developed a new conference series: Aging, Cognition, and Mental Health Lecture Series: Practical and Ethical Considerations for Interprofessional Teams (Ann Arbor)
- New VA Office of Academic Affiliation expansion initiative for Adult Gerontology Primary Care Nurse Practitioner residency programs (Baltimore)
- EQUIPPED Team worked with colleagues at Durham VA and Salt Lake City VA to develop an EQUIPPED PIM dashboard to provide just-in-time feedback to providers on prescribing safety toward older adults (Birmingham/Atlanta)
- Non-pharmacological interventions for pain, anxiety, and discomfort for Veterans on the Chillicothe CLC (Cleveland)
- Development of a new, case-based e-learning module for primary care staff entitled Recognizing and Managing Dementia in Primary Care that was released on the TMS platform Item #38887 in July 2019, and later the interagency TRAIN platform (Durham)
- Integrate Associated Health Trainees and Geriatric Medicine Fellows into tele-geriatric and tele-palliative care consultations for older Veterans at Community Based Outpatient Clinics (CBOC) and contract nursing facilities, as well as in their own homes (Eastern Colorado)
- "Facilitator's Guide: Infection Control and Pressure Injury", developed by Miami GRECC, was edited and provided as a train-the-trainer reference for CLC Nurse Educators (Gainesville)
- Geriatric Scholars Program Clinical Practicum on Whole Health (Greater LA)
- Expanded national webinar series to include bi-monthly CLC topics taken from the CLC Learner Needs Assessment (Little Rock)
- Hosted the Biannual Wisconsin Update in Geriatric Medicine conference collaborating with Medical College of Wisconsin and the Milwaukee VAMC (Madison)
- Provided Geriatrics Core Curriculum Conference: weekly session to Geriatrics Fellows providing a scientific, literature-based review of clinical topics in geriatrics medicine, along with a series of didactic seminars on clinical topics in aging, gerontology and geriatric medicine (Miami)
- Developed a new Geriatrics Rotation for Internal Medicine residents from the University of Minnesota which includes experiences in Physical Medicine and Rehabilitation, Spinal Cord Injury, on the CLC, and with Palliative Care with rotations beginning December 2019 (Minnesota)
- Developed three new Dementia Caregiver Education videos for caregivers of veterans with dementia (New England)

- Created a Dementia Simulation Training to teach staff about managing dementia-related behaviors and how to communicate with Veterans who have dementia (Palo Alto)
- Presented live broadcasts of monthly Geriatrics Grand Rounds and Geriatrics Research Update Conference for CME in collaboration with University of Utah School of Medicine, Division of Geriatrics (Salt Lake City)
- Developed pocket-sized clinical guides that educates physicians on hospice eligibility and includes disease-specific guidelines, pain and opioid risks, and dealing with difficult patients (San Antonio)
- Flipping the Acute Care for the Elderly Teaching Sessions (FACETS™): An Innovative, Competency-based Curriculum for Internal Medicine Residents (Tennessee Valley)

GRECCs provided a total of **198,793 qualified person-hours** of educational activities in FY2019. These were learning events on a geriatric-related subject, geared at VA staff, and including an evaluation process. This represents a substantial part of geriatrics-related educational content in VA. In addition, GRECC staff gave **2721 lectures** in FY2019. (Note: These two processes may have some overlap.) The GRECC supported HRSA-funded Geriatric Workforce Enhancement Project (GWEP) sites by providing lectures and organizational support.

GRECCs hosted 42 education and training grants in FY2019, totaling about \$14 million.

GRECCs serve as an institutional home for the Geriatric Scholars program, the Rural Intensive Team Training program, and the GRECC-CBOC Connect initiatives. In FY2019, the Geriatric Scholars Program (organized through the Greater Los Angeles GRECC) engaged 1,509 learners and a total of 10,621-person hours of education/training and has broadly enhanced VA’s capacity to care for older Veterans across treatment settings.

GRECCs provide medical students, medical residents, and fellows with valuable clinical experiences in geriatrics through a selection of inpatient and outpatient programs:

Medical Discipline	Total Trainees FY2019
Internal Medicine Resident	612
Psychiatry Resident	28
Family Medicine Resident	43
Other Resident	16
Geriatric Medicine Fellow	98
Geriatric Psychiatry Fellow	14
Other Fellow	52
Medical Student	793
Total Medical Trainees	1656

The GRECCs also support a large number of affiliated health disciplines, ensuring that they gain clinical experience in the care of older adults. Each “slot” in the table below represents a full-time position, which may be split across multiple trainees.

Affiliated Health Discipline	OAA Slots	Non-OAA Slots	# Taking VA Job
Audiology/Speech Pathology	33	15	10
Chaplainry	16	7	1
Dietetics	2.5	0	0
Nurse Practitioner	49	6	1
Nursing	20	2	1
Occupational Therapy	25	7	2
Optometry	22	3	4
Other	1	9	0
Pharmacy	33	41.3	22.5
Physical Therapy	26	12.9	1
Physician Assistant	5	3	1
Psychology	31.5	16.1	12
Social Work	57.2	14	13
Total	321	136	68

Although it is difficult to track post-fellowship outcomes, the data collected for this report indicates that at minimum, 68 (21%) of the OAA-affiliated health trainees took jobs within the VA after completion of their program. This suggests that the GRECCs serve a crucial role in developing geriatric trained clinicians for the VA.

CLINICAL ACTIVITIES

GRECCs are responsible for enhancing the clinical care of elderly Veterans through development, evaluation, and dissemination of innovative approaches to care. Numerous innovative approaches have been developed in GRECCs in the four decades since the inception of the program, and many are now part of the mainstream VHA clinical portfolio. GRECCs have a mandate to conduct clinical demonstration programs, by developing, field-testing, evaluating, and disseminating novel models of care for older Veterans. The projects are supported by VISNs through memoranda of understanding. Each has a roughly five-year cycle. Not all clinical innovations will succeed, so there is no expectation that every project will be disseminated.

The GRECCs carried out 140 clinical demonstration projects in FY2019. Fifteen projects were in development, 23 were being field-tested, 62 were being applied and evaluated, and 37 were disseminated to other sites. Many of these projects address high priority areas for VA, including improving quality in long-term care, optimizing use of telehealth, and management of complex chronic conditions. Many also support the Whole Health transformation. The table below shows all the projects in FY 2019.

GRECC Site	Clinical Demonstration Projects
Ann Arbor	<ul style="list-style-type: none"> • Long Term Follow-Up of Deprescribing Initiative at Rural CBOCs • Optimizing Safe Medication Use in Older Adults via In-home Telepharmacy • Understanding Falls in a Post-Acute Care Setting (CLC) • Gerofit • Home-based Team Transitional Telecare to Optimize Mobility and Physical Activity in Recently Hospitalized Older Veterans • Pain Scores and Pain Medication in the Community Living Center • Washtenaw Health Initiative: Friendly Visitor Program • Interdisciplinary Geriatrics Clinic with Behavioral Health and Neuropsychological Evaluation and Management
Baltimore	<ul style="list-style-type: none"> • Home Exercise Program for Home Bound Older Veterans (HEX) • Gerofit • AssiSTed EaRly Mobllity for Hospitalized OIdEr VetErans (STRIDE) • Renal Interdisciplinary Safety Clinic (RISC) • Veterans Enrolled in Restorative Care Intervention • Falls and Frailty Clinic • Veteran & Companion Dog Foster Program • Tele-Gerofit
Birmingham/ Atlanta	<ul style="list-style-type: none"> • Tele-IMPROVE: Remote Integrated Management and Polypharmacy Review of Vulnerable Elders • Expanding Enhancing Quality of Prescribing Practices for Veterans Discharged from the Emergency Department (EQUIPPED) • Continence Clinical Video Telehealth (CVT) • GRECC Connect • Incontinence Self-Management Home Telehealth Programs • STRIDE Program: Assisted Early Mobility for Hospitalized Older Veterans
Bronx/New York Harbor	<ul style="list-style-type: none"> • GRECC Connect • Enhancing the Quality of Prescribing Practices for Elderly Veterans Discharged from the Emergency Department (EQUIPPED) • Interdisciplinary ALS Program • Rural Interdisciplinary Team Training • Hospital in Home

Cleveland	<ul style="list-style-type: none"> • Factors involved in Readmission for Older Veterans Receiving Early Homecare • Geri-Vet • MACE - Mobile Acute Care of the Elderly
Durham	<ul style="list-style-type: none"> • Falls Assessment of Medications in the Elderly • Dementia Warning Signs to Promote Dementia Detection in Primary Care • Elder Care in Hospital (ECHO) • Gerofit Dissemination • Perioperative Optimization of Senior Health (POSH) • Renal Silver • STRIDE: Assisted Early Mobility for Hospitalized Older Veterans • "COACH" Integrated Dementia Care Clinic • GRECC CONNECT • VISN 6 Bone Health Service • Improving Care of High-Risk Older Adults in the Emergency Department
Eastern Colorado	<ul style="list-style-type: none"> • ECHCS GRECC Connect • Access to Care Rounds • Targeted Audiologic Training for Associated Health Trainees and Geriatric Medicine Fellows • Tele-Palliative Care • Vet Connect • Geriatric Scholars Physical Function Workshop Hosted by the ECHCS GRECC • Interdisciplinary Mobility Program for Veterans in Skilled Nursing Facilities • Virtual Tours for Community Nursing Homes: Improve Care Coordination via Video Technology
Gainesville	<ul style="list-style-type: none"> • Creating a simulated delirium curriculum with a virtual reality simulated environment • Development of a Delirium Simulation Education Curriculum • Virtual Reality Delirium Prototype Development • Improving medication adherence for Veterans with complex medical issues • Dementia simulation-based learning (DeSiBeL) project
Greater Los Angeles	<ul style="list-style-type: none"> • Gerofit@UCLA (UCLA undergraduate volunteer to serve as trainers at the facility) • Pre Hab (Dissemination) • Gerofit – Dissemination to rural CBOCs • Prehab to Improve Outcomes in Elective Surgeries in Frail, Older Veterans

	<ul style="list-style-type: none"> • Use of UCLA Undergraduate Volunteers (Gerofit@UCLA) to facilitate post-op mobilization of Gerofit Prehab participants • Pharmacist-Led Interdisciplinary Support of Older Veterans with Difficult to Control Hypertension
Little Rock	<ul style="list-style-type: none"> • Advance Care Planning via Group Visits (ACP-GV) • Gerofit Geriatric Walking Clinic • Tai Chi Collaboration for Veterans Whole Health • Tele-memory Clinic • Implementing Innovations in Rehabilitation to Promote More Rapid Goal Attainment
Madison	<ul style="list-style-type: none"> • GRECC Connect Enhancement Project • Care Transitions and Health Disparity/Equity Program • Elder Veterans Prevention Program • Becoming a Model Dementia Friendly Hospital within VHA • Cognitive Care Clinic
Miami	<ul style="list-style-type: none"> • GEROFIT • Improving Access to Geriatric Care in Rural Areas: GRECC Connect • MyHealthVet to Enable Shared Decision Making (SDM) Regarding Menopausal and Associated Symptoms (MAS) in Postmenopausal Women Veterans • An Inter-Disciplinary Outpatient Care Model Providing Comprehensive Geriatric Assessment, Care-Coordination and Co-management of High Need High Risk Veterans Meeting Home Based Primary Care (HBPC) Criteria • Educational Needs Assessment for CLC Providers • VSAFE-SURG/Geriatric Surgery Verification Program • Whole Health for Healthy Aging • An Intervention to Reduce Overtreatment of Type 2 Diabetes in Older Veterans Hypoglycemia Detection & Prevention Project (HDPP) for older Veterans at High Risk • Educational Needs Assessment for VISN 8 CLC Staff
Minneapolis	<ul style="list-style-type: none"> • PACT Dementia Care Model • Palliative Home Care Consultations • Behavioral Recovery Outreach Team • Health Care Directives for Veterans with Dementia • Patient Education in Dementia
New England	<ul style="list-style-type: none"> • FaCT Clinic (Family and Caregiver Telemedicine) • The Coordinated Transitions of Care (C-TraC) program • The Palliative Coordinated Transitions of Care (C-TraC) program • Geriatric Capacity Evaluation Clinic • Live Long Walk Strong • Neuropsychology Visit Experience Survey

	<ul style="list-style-type: none"> • The Geri Renal Clinic • The Geriatric Cardiology Clinic • CAPABLE • Gerofit • Hospital in Home • Geriatric Capacity Evaluation Clinic
Palo Alto	<ul style="list-style-type: none"> • Incorporating Life Sustaining Treatment Initiative into Outpatient Clinics • Geri-Mobile Health • Cognitive Assessment Clinic • E-Consults for Behaviors in Dementia
Pittsburgh	<ul style="list-style-type: none"> • Office of Rural Health (ORH), Promising Practice Home-based Cardiac Rehabilitation • The Program for Intensive Residential Aphasia Treatment and Education • Geriatric Polypharmacy e-consult • Gerofit • Office of Rural Health (ORH), Promising Practice TeleDementia Caregiver Support Group • Office of Rural Health (ORH), Promising Practice TeleDementia Clinic
Puget Sound	<ul style="list-style-type: none"> • Evaluation and Management of Fall Risk in Patients at High Risk for Fracture • Evaluation and Management of Osteoporosis in Veterans at High Risk for Fracture • Fall Prevention Education Class (Moving Free-ly) • Healthy Teaching Kitchens for Older Veterans • Healthy Aging Project – Brain (HAP-B) • Dementia Immersion Simulation Experience (DISE) • Veteran Increased Access to Neuropsychological Services via Telehealth (via TeleNP)
Salt Lake City	<ul style="list-style-type: none"> • Modeling Future Need for Long-Term Support Services • Connecting Rural Veterans to the Utah Aging and Disability Resource Connection for Information and Referral and Options Counseling Services • Remote Home-Based Delivery of Cardiac Rehabilitation • VA Life-Sustaining Treatment Decision Initiative
San Antonio	<ul style="list-style-type: none"> • VISN 17 CLC Needs Assessment • DISE (Dementia Immersion Simulation Experience) • Geriatrics Medication Education at Discharge (GMED) • GRECC Connect • Life Sustaining Treatment Decisions Initiative (LSTDI) • Acceptance Rates and Sustainability of Pharmacist Recommendations for Short-Stay Veterans

	<ul style="list-style-type: none"> • Dementia Caregiver Support & Education • Enhancing Quality of Prescribing Practices among older Veterans discharged from the Emergency Department (EQUIPPED) • Former Prisoner of War Clinic (FPOW) • GeriPACT Implementation • Implementation of VA Patient Priorities Care in Geriatrics Services (PPC)
Tennessee Valley	<ul style="list-style-type: none"> • Implementation of a Geriatric Patient-Centered Medical Home: Geriatric Patient Aligned Care Team (GeriPACT) • Reaching Out to Rural Caregivers and Veterans with Dementia Utilizing Clinical Video-Telehealth • The ICU Liberation Collaborative: Large Scale Implementation of the ABCDEF Bundle in ICUs Around the United States • A personalized provider-based intervention to improve adherence to initial consultation and decrease no-show rates in a GEC program specialty clinic. • Shared decision-making interventions to address health care goals of Veterans in Geri-PACT with serious advanced illness and high predicted mortality in one year. • Aging Care Transformation through Whole Health Opportunities Leveraging Evaluation, Co-ordination, Allocation of Resources and Empowerment • Embedding Palliative Care in Clinic in Oncology (EPIC-O) • The Virtual Veteran Centered Accelerated Palliative Care Clinic (V-CAP) • Use of a Clinically Derived Risk Calculator to Assess Advance Care Planning for Elderly Veterans in the Outpatient Setting • Use of the brief Confusion Assessment Method in a Veteran Palliative Care Population: A Pilot Validation Study

PERFORMANCE MEASURES

The system of GRECC performance Metrics was developed in 1996 to ensure that the reassignment for financial support of GRECCs from GEC to the VA Medical Centers (VAMCs) would not result in individual, localized performance expectations. The metrics underwent an extensive reassessment in 2005 and again in 2008, and since 2009 have been the focus of a standing committee (with rotating membership) that constantly monitors the metrics, the GRECCs' performance on them, and the need to modify them in response to changing VHA and GEC priorities. The measures are described in the table on the following two pages. With very few exceptions, all the GRECC sites accomplished all the performance measures in FY2019.

Performance Measure	Target	Ann Arbor	Baltimore	Birmingham Atlanta	Bronx/New York Harbor	Cleveland	Durham	Eastern Colorado	Gainesville	Greater Los Angeles	Little Rock
Negotiated VISN/GRECC Memorandum of Understanding	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Average # of funded aging-related research projects per GRECC investigator	1+	4.1	2.5	2.4	3	2.2	3.2	2.1	3.5	11.8	2.1
Average direct research expenditures per GRECC primary core devoted to research	\$500K+	\$832k	\$920k	\$455k	\$2.0mil	\$316k	\$640k	\$520k	\$446k	\$712k	\$1.2mil
Average # publications and papers per GRECC core staff	2+	3.6	3	3.6	2	4.5	4.9	3.8	2.2	3.5	1.2
Average # peer-reviewed papers per GRECC research investigator	3+	12.8	5.6	8	4.7	7.4	8.8	7.8	3.5	5.3	2.3
Total # papers for the GRECC	21+	65	71	79	45	115	78	130	24	60	34
Percentage of papers and publications listing VA affiliation	95%+	100%	95%	100%	100%	100%	100%	97%	96%	97%	100%
# individuals mentored by GRECC staff in a research career development award	1+	19	9	15	34	1	13	28	2	13	0
Total education/training person-hours delivered by GRECC core staff	1500+	5420	18866	7283	56478	5376	2280	2336	5118	21254	2970
# innovative evaluation strategies undertaken for assessing impact of programs	1+	1	1	9	1	4	3	3	1	6	1
# OAA-supported associated health disciplines receiving GRECC-related training	4+	4.8	6	10.7	5	6.8	7.1	5.4	12.9	10.8	10.5
Average # scholarly or educational presentations per GRECC core staff	2+	8	8	6	5	3	11	8	5	6	5
# innovative clinical demonstration projects	1+	4	3	4	3	2	3	4	1	3	2
# clinical demonstration projects that were evaluated	1+	1	1	1	2	1	3	1	1	2	2
# clinical demonstration projects that were disseminated	45%+	58%	73%	49%	53%	41%	52%	58%	37%	38%	6%
Percentage of GRECC professional staff time devoted to research activities	10%+	15%	12%	25%	24%	17%	11%	15%	17%	18%	11%
Percentage of GRECC professional staff time devoted to education/training activities	<20%	0%	4%	7%	9%	11%	1%	2%	1%	11%	1%

Performance Measure	Target	Madison	Miami	Minneapolis	New England	Palo Alto	Pittsburgh	Puget Sound	Salt Lake City	San Antonio	Tennessee Valley
Negotiated VISN/GRECC Memorandum of Understanding	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Average # of funded aging-related research projects per GRECC investigator	1+	9.5	3.7	3.8	4	7.2	2.2	4.4	3	7.6	6.5
Average direct research expenditures per GRECC primary core devoted to research	\$500K+	\$1.3mil	\$743k	\$1.1mil	\$8.2mil	\$1.4mil	\$539k	\$751k	\$610k	\$1.9mil	\$1.0mil
Average # publications and papers per GRECC core staff	2+	5.8	2.6	2.3	5	4.5	3.6	5.4	5.9	2.8	7.4
Average # peer-reviewed papers per GRECC research investigator	3+	11.3	4.3	4.7	12.5	7.8	5.3	6.5	11.5	6.9	17.2
Total # papers for the GRECC	21+	73	59	26	181	56	90	92	100	58	133
Percentage of papers and publications listing VA affiliation	95%+	99%	97%	100%	100%	98%	98%	100%	100%	100%	100%
# individuals mentored by GRECC staff in a research career development award	1+	4	4	2	14	6	18	7	16	15	53
Total education/training person-hours delivered by GRECC core staff	1500+	2100	8500	4602	8830	2497	2489	3428	3515	17850	17601
# innovative evaluation strategies undertaken for assessing impact of programs	1+	1	3	3	3	2	1	1	2	10	2
# OAA-supported associated health disciplines receiving GRECC-related training	3+	5	4	6	9	6	8	4	7	6	7
Average # scholarly or educational presentations per GRECC core staff	4+	9.8	8.4	9	6.5	7.2	7	9.4	4.2	8.2	17.6
# innovative clinical demonstration projects	2+	7	9	5	12	4	6	7	4	11	10
# clinical demonstration projects that were evaluated	1+	1	4	1	5	2	4	1	2	6	7
# clinical demonstration projects that were disseminated	1+	1	3	1	2	1	1	4	1	3	3
Percentage of GRECC professional staff time devoted to research activities	45%+	49%	55%	53%	70%	51%	66%	52%	53%	66%	57%
Percentage of GRECC professional staff time devoted to education/training activities	10%+	20%	11%	10%	12%	19%	15%	16%	11%	17%	19%
Percentage of GRECC professional staff time devoted to non-GRECC clinical activities	<20%	5%	18%	1%	2%	2%	3%	2%	2%	5%	4%

(Performance Measures table, continued)

FUTURE OF THE GRECCS

As evidenced by their legacy, ongoing accomplishments, current resources, and institutional support, GRECCs are well poised to continue their success as VA's geriatric centers of excellence. The GGAC remains committed to and involved in the GRECCs and will offer valuable guidance both during site visits and biannual meetings.

In order to address pressing issues for VA and American health care, GEC will ask that GRECCs apply their attention and expertise to several issues. First, GRECCs have been and continue to be innovators in assisting VHA response to the global pandemic of COVID-19. GRECCs introduced GRECC Connect, which expands the reach of geriatric care providers to VA rural sites and led in rolling out telehealth management of complex care needs of older Veterans during lockdown. Second, GRECCs are key to ensuring that VHA's Whole Health transformation engages older adults. Third, GRECCs can further develop the next generation of the geriatric workforce, by providing training sites and helping recent graduates to find geriatric-related jobs in VA. In addition, GRECC sites can learn from each other's successes, and use the GRECC network to ensure that effective interventions receive broad dissemination, thus increasing attention to GRECC collaborations in cross-cutting initiatives.

SEARCHABLE DATABASE

The attached Access application includes all the GRECC staff interests, research studies, clinical demonstration projects, education initiatives, and contributions. It can be searched by keyword or GRECC site. To access: click on the link to the GRECC SharePoint: <https://dvagov.sharepoint.com/sites/VHAPCSCOE/default.aspx>. If you don't have access to the GRECC SharePoint, request access. Once granted, open a read-only version of the Search-A-GRECC Database and Save-As to download Search-A-GRECC on your government computer desktop.

GRECC SITES, STAFF, AND FOCUS AREA:

Ann Arbor, VISN 10

Geriatric Academic Affiliate: University of Michigan

Nursing Academic Affiliate: University of Michigan

Director: Neil Alexander, M.D. (since 10/3/2005)

Associate Director for Research: Roger Albin, M.D. (since 9/1/2017)

Associate Director for Clinical: Christine Cigolle, M.D. (since 8/10/2015)

Associate Director for Education and Evaluation: Caroline Vitale (since 7/7/2019)

Administrative Officer: Susan Smoter (since 10/26/2009)

Areas of Research Focus

Mobility and Physical Activity Assessment and Enhancement

Infection Control in Long-term Care

Parkinson's Disease and Movement Disorders

Baltimore, VISN 5

Geriatric Affiliates: University of Maryland School of Medicine, Johns Hopkins University School of Medicine

Nursing Academic Affiliates: University of Maryland School of Nursing and George Washington University School of Nursing

Director: Leslie Katzel, M.D., Ph.D. (since 5/23/2016)

Associate Director for Research: Richard Macko, M.D. (since 7/1/2001)

Associate Director for Education and Evaluation: Beth Hogans, M.D., Ph.D. (since 4/19/2019)

Associate Director for Clinical (Acting): Jacob Blumenthal, M.D. (since 7/9/2018)

Associate Director: John Sorkin, MD., Ph.D.

Administrative Officer: Tim Foley (since 12/30/2013)

Areas of Research Focus

Exercise rehabilitation, weight loss, metabolism, and physical function in older Veterans with a focus on age-related chronic disease and disability conditions

Functional genomics, genetics, molecular, and cellular biomarkers of aging and chronic disease in Veterans, and how these factors influence outcomes in aging

Chronic Pain

Birmingham/Atlanta, VISN 7

Geriatric Academic Affiliates: University of Alabama at Birmingham SOM, Emory University SOM

Nursing Academic Affiliates: University of Alabama at Birmingham SON, Emory University SON

Director Acting: Marcos Bamman, Ph.D. (since 1/25/2015)

Associate Director for Research: Kathryn Burgio, Ph.D. (since 4/22/2001)

Associate Director for Education and Evaluation: Katharina Echt, Ph.D. (since 6/26/2016)

Associate Director for Clinical: Alayne Markland, D.O. (since 10/4/2015)

Administrative Officer: Latricia Williams (since 10/28/2007)

Associate Director: Elizabeth Vaughan, M.D. (since 4/15/2018)

Associate Director: Molly Perkins, Ph.D. (since 5/20/2012)

Associate Director: Theodore Johnson, M.D. (since 4/15/2018)

Associate Director: Marcas Bamman, Ph.D. (since 4/22/2001)

Areas of Research Focus

Incontinence and related disorders

Mobility

Palliative care

Bronx/New York Harbor, VISN 2

Geriatric Academic Affiliate: Icahn School of Medicine at Mount Sinai

Nursing Academic Affiliates: New York University Rory Meyers College of Nursing;

Fordham University Graduate School of Social Service; Silberman School of Social

Work at Hunter College; City University of New York - Lehman College; New York

University Silver School of Social Work; James J Peters VAMC PGY-2 Geriatrics

Pharmacy Residency Program

Director: Albert Siu, M, D., (since 10/1/2003)

Associate Director for Research: Kenneth Boockvar, M.D. (since 10/1/2007)

Associate Director for Education and Evaluation: Judith Howe, Ph.D. (since 4/1/2001)

Associate Director for Clinical (Acting): William Hung, M.D. (since 1/2/2014)

Administrative Officer: Valerie Menocal (since 12/12/2016)

Areas of Research Focus

Improving palliative care

Prevention of functional disability

Improving processes and outcomes between sites of care including VA/non-VA, rural/non-rural, home/medical center

Cleveland, VISN 10

Geriatric Academic Affiliates: Case Western Reserve School of Medicine, University Hospitals

Nursing Academic Affiliate: Frances Payne Bolton School of Nursing

Director: Robert Bonomo, M.D. (since 10/1/2008)

Associate Director for Research: David Canaday, M.D. (since 9/1/2010)

Associate Director for Education and Evaluation: Denise Kresevic, Ph.D. (since 10/1/2010)

Associate Director for Clinical: Thomas Hornick, M.D. (since 2/1/1999)

Associate Director: Robin Jump, M.D., Ph.D. (since 6/1/2018)

Administrative Officer: Malva Rashid, None (since 7/1/2008)

Areas of Research Focus

Infection in the Elderly (HIV/HCV, Zoster, C. diff., E. coli, Strep)
Antibiotic Stewardship in Long-Term Care
Immunology of Aging

Durham, VISN 6

Geriatric Academic Affiliate: Duke University School of Medicine
Nursing Academic Affiliate: Duke University School of Nursing

Director: Kenneth Schmader, M.D. (since 3/1/2007)
Associate Director for Research: Miriam Morey, Ph.D. (since 10/1/2006)
Associate Director for Education and Evaluation: Connie Bales, Ph.D. (since 7/7/1996)
Associate Director for Clinical: Christopher Bowling, M.D. (since 3/5/2019)
Administrative Officer: Harry Babwah, M.A., M.S. (since 10/5/2015)

Areas of Research Focus

Infection, immune function, vaccines; polypharmacy, medication management;
osteoporosis, falls and fracture management
Innovative models of care delivery, transitions and caregiving
Optimizing fitness, mobility and nutrition, strategies for health promotion

Eastern Colorado, VISN 19

Geriatric Academic Affiliate: University of Colorado School of Medicine
Nursing Academic Affiliate: N/A

Director: Robert Schwartz, M.D. (since 10/1/2014)
Associate Director for Research: Wendy Kohrt, Ph.D. (since 10/1/2014)
Associate Director for Education and Evaluation: Kathryn Nearing, Ph.D. (since 8/19/2018)
Associate Director for Clinical: (Acting) Skotti Church M.D. (since 10/1/2016)
Administrative Officer: Colleen Costello (since 4/1/2018)
Associate Director: Lauren Abbate, M.D. (since 7/1/2019)

Areas of Research Focus

Treatment and consequences of obesity in older Veterans (primary)
Gender differences in the health of Veterans (primary)
Intensive approaches to rehabilitation to improve function in older Veterans

Gainesville, VISN 8

Geriatric Academic Affiliate: University of Florida
Nursing Academic Affiliate: University of Florida

Director: Ronald Shorr, M.D. (since 1/7/2007)
Associate Director for Research (Acting): Constance Uphold, Ph.D. (since 1/1/2017)
Associate Director for Education and Evaluation: Carmen Fernandez, Ph.D. (since 6/18/2012)

Associate Director for Clinical: Rebecca Beyth, M.D. (since 7/1/2014)
Administrative Officer: Ruth Franklin (since 8/20/2006)

Areas of Research Focus

Patient safety and healthcare quality
Identification, management, and prevention of age-related physical and cognitive disability

Greater Los Angeles, VISN 22

Geriatric Academic Affiliates: David Geffen School of Medicine at University of California at Los Angeles, University of Southern California
Nursing Academic Affiliates: University of California at Los Angeles, California State University (CSU) Long Beach, CSU Northridge, CSU Los Angeles, CSU Dominguez Hills, University of Southern California and Drew University

Director: Cathy Alessi, M.D. (since 7/18/2011)
Associate Director for Research: Jennifer Martin, Ph.D. (since 6/1/2017)
Associate Director for Research: Gregory Cole, Ph.D. (since 1/1/1994)
Associate Director for Education and Evaluation: Josea Kramer, Ph.D. (since 1/1/1993)
Associate Director for Clinical: Steven Castle, MD (since 1/1/1995)
Administrative Officer: Eliot Mitchell (since 9/6/2014)

Areas of Research Focus

Cognitive disorders
Sleep
Vulnerable elders

Little Rock, VISN 16

Geriatric Academic Affiliate: University of Arkansas for Medical Sciences
Nursing Academic Affiliates: University of Arkansas for Medical Sciences; University of Central Arkansas, University of Arkansas at Little Rock; Harding University

Director: Dennis Sullivan, M.D. (since 8/5/1998)
Associate Director for Research (Acting): Kalpana Padala, M.D. (11/22/2019)
Associate Director for Education and Evaluation: Kimberly Garner, M.D. (since 7/31/2016)
Associate Director for Clinical: Prasad Padala, M.D. (since 9/16/2011)
Associate Director: Lana Brown, Ph.D. (since 8/7/2017)
Administrative Officer: Julie Smith (since 3/10/2013)

Areas of Research Focus

Biology of Aging Outcomes
Exercise & Nutrition Interventions
Positive Changes in Mental Health, Health Literacy & Behavior

Madison, VISN 12

Geriatric Academic Affiliate: University of Wisconsin (UW) School of Medicine and Public Health

Nursing Affiliates: UW School of Nursing; UW School of Social Work, UW School of Pharmacy

Director: Sanjay Asthana, M.D. (since 7/29/2001)

Associate Director for Research: Rozalyn Anderson, Ph.D. (since 4/1/2019)

Associate Director for Education and Evaluation: Elizabeth Chapman, M.D. (since 4/1/2019)

Associate Director for Clinical: Steven Barczi, M.D. (since 4/1/2018)

Administrative Officer: Charity Frey (since 4/30/2017)

Areas of Research Focus

Alzheimer's disease and related dementias

Care transitions

Dysphagia

Biology of Aging

Miami, VISN 8

Geriatric Academic Affiliates: University of Miami, Florida International University

Nursing Academic Affiliate: Florida International University (RN and PT)

Director: Hermes Florez, MD (since 5/1/2014)

Associate Director for Research (Acting): Stuti Dang, M.D. (since 10/1/2018)

Associate Director for Education and Evaluation: Michael Mintzer, M.D. (since 10/1/2014)

Associate Director for Clinical: Jorge Ruiz, M.D. (since 10/1/2014)

Administrative Officer: Mitscher Gajardo (since 6/24/2019)

Areas of Research Focus

Metabolism and Aging (diabetes, cardiovascular disease, and cancer)

Frailty and Related Geriatric Syndromes and Interventions for Veterans and Caregivers, including Stem Cells and Reparative/Regenerative Therapies

Bone and Joint Diseases

Minneapolis, VISN 23

Geriatric Academic Affiliate: University of Minnesota

Nursing Academic Affiliate: University of Minnesota

Director: Howard Fink, M.D. (since 8/18/2019)

Associate Director for Research (Acting): Catherine Kotz, Ph.D. (since 11/15/2015)

Associate Director for Education and Evaluation: Edward Ratner, M.D. (since 8/21/2017)

Associate Director for Clinical: J. Riley McCarten, M.D. (since 7/1/1996)

Administrative Officer: Ann Bolan, M.A., M.S. (since 3/8/2013)

Areas of Research Focus

Dementia evaluation and management

The Aging Brain to include neurodegeneration such as AD and PD

Animal models of metabolic aging

New England, VISN 1

Geriatric Academic Affiliates: Harvard Medical School, Boston University School of Medicine

Nursing Academic Affiliate: Boston College

Director: Jonathan Bean, M.D.

Associate Director for Research: William Milberg, Ph.D.

Associate Director for Education and Evaluation: Jennifer Moye, Ph.D. (since 4/1/2016)

Associate Director for Clinical: Jane Driver, M.D.

Administrative Officer: Myriame Wortham, B.A., B.S.

Administrative Officer: Thomas Lucian B.A., B.S.

Associate Director: Lauren Moo, M.D.

Associate Director: Regina McGlinchey, Ph.D.

Areas of Research Focus

The Aging Brain

Function and Frailty

Technology and Telehealth

Palo Alto, VISN 21

Geriatric Academic Affiliate: Stanford University/School of Medicine

Nursing Academic Affiliates: University of California, San Francisco; Merritt College; San Francisco State; University of San Francisco.

Other Affiliates: San Jose State; UC Berkeley; Cal State East Bay/Stanislaus/Monterey Bay; Touro University of California; Marshall B. Ketchum University of Southern California College of Optometry; California State University- Long Beach; University of Southern California - Los Angeles; VA San Francisco; Foothill-DeAnza Community College; Mission College

Director: Manjula Tamura, M.D. (since 9/3/2017)

Associate Director for Research: Salman Azhar, Ph.D. (since 8/1/2000)

Associate Director for Education and Evaluation (Acting): Christine Gould, Ph.D. (since 3/19/2018)

Associate Director for Clinical: Joyce Tenover, M.D., Ph.D. (since 1/18/2009)

Administrative Officer: Elizabeth Turner-Nichols (since 9/23/2013)

Areas of Research Focus

Biology of Aging

Inflammatory Mechanisms in Degenerative Diseases

Chronic Disease Management in Older Adults

Pittsburgh, VISN 4

Geriatric Academic Affiliate: University of Pittsburgh

Nursing Academic Affiliate: N/A

Director: Steven Graham, M.D., Ph.D.

Associate Director for Research: Patrick Doyle, Ph.D.

Associate Director for Education and Evaluation (Acting): Debra Weiner, M.D.

Associate Director for Clinical: Michelle Rossi, M.D.

Administrative Officer: Dawn Fuhrer

Areas of Research Focus

Mechanisms of recovery and novel treatments for neurodegenerative disease, stroke and TBI

Novel rehabilitations strategies for stroke, aphasia, frailty and cardiac disorders

Developing novel clinical care systems for pain and dementia

Puget Sound, VISN 20

Geriatric Academic Affiliate: University of Washington School of Medicine

Nursing Academic Affiliate: University of Washington Schools of Nursing, Social Work

Director: Debby Tsuang, M.D. (since 9/25/2011)

Associate Director for Research: Brian Kraemer, Ph.D. (since 9/2/2018)

Associate Director for Education and Evaluation: Stephen Thielke, M.D. (since 7/1/2014)

Associate Director for Clinical: Alvin Matsumoto, M.D. (since 3/31/1993)

Administrative Officer: Elizabeth Aigbe, M.A., M.S. (since 2/1/2009)

Areas of Research Focus

Aging, genetics, and environmental factors in neurodegeneration and dementia

Brain pharmacodynamics and drug transport in normative aging, injury, and dementia

The endocrinology relating aging, body composition, and cancer

Salt Lake City, VISN 19

Geriatric Academic Affiliate: University of Utah

Nursing Academic Affiliate: University of Utah

Director: Mark Supiano, M.D.

Associate Director for Research: Russell Richardson, Ph.D.

Associate Director for Education and Evaluation: Jorie Butler, Ph.D.

Associate Director for Clinical: Randall Rupper, M.D.

Administrative Officer: Vacant

Areas of Research Focus

Basic Biomedical: Investigations of the fundamental changes during aging that lead to a decline in brain function especially in the context of impaired immunity and inflammation

Applied Clinical: The integrated assessment of vascular function, blood flow, and

metabolic regulation in both aging and diseased skeletal muscle and how this impacts function both at rest and in response to physical challenges

Health Services: Studies that test interventions to improve outcomes, mainly focusing on medical informatics and computerized clinical systems with respect to decision support tools and collection of data for surveillance, analysis, and program evaluation

San Antonio, VISN 18

Geriatric Academic Affiliate: University of Texas Health Science Center at San Antonio
Nursing Academic Affiliates: University of Texas Health Science Center at San Antonio – School of Nursing, San Antonio Uniformed Services Health Education Consortium

Director: Nicolas Musi, M.D. (since 7/1/2010)

Associate Director for Research (Acting): Chih-Ko Yeh, D.D.S. (since 6/10/2018)

Associate Director for Education and Evaluation (Acting): Jeanette Ross, M.D. (since 10/1/2017)

Associate Director for Education and Evaluation (Acting): Becky Powers, M.D. (since 10/1/2017)

Associate Director for Clinical: Sara Espinoza, M.D. (since 3/1/2011)

Administrative Officer: Veronica Camacho (since 1/21/2018)

Areas of Research Focus

Metabolism/Inflammation

Cognitive Disorders

Sarcopenia/Frailty/Exercise

Tennessee Valley, VISN 9

Geriatric Academic Affiliate: Vanderbilt University School of Medicine

Nursing Academic Affiliate: Vanderbilt University School of Nursing

Director: Robert Dittus, M.D. (since 11/1/1999)

Associate Director for Research: Wes Ely, M.D. (since 7/16/2000)

Associate Director for Education and Evaluation: Sumathi Misra, M.D. (since 9/22/2013)

Associate Director for Clinical: James Powers, M.D. (since 11/1/1999)

Administrative Officer: Jeannie Helton (since 12/13/2015)

Areas of Research Focus

Cognitive Impairment

Quality and Safety of Care

Chronic Disease Prevention and Management