

# FORUM ON AGING

Biannual Newsmagazine – Spring 2021

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## GRECC Forum on Aging Goes Digital

Greetings and welcome to the first digital edition of the *GRECC Forum on Aging!* We are pleased to significantly reduce our carbon footprint by offering this biannual news magazine style periodical in an electronic form that we expect will increase our reach even further. It is slated for publication in the spring and fall.

We now offer two publications to showcase GRECC work and keep colleagues abreast of new knowledge in geriatric care – to improve health care and quality of life for older Veterans and all older Americans:

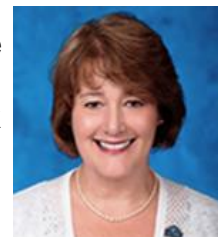
*GRECC Forum on Aging* is an in-depth newsmagazine that is published two times a year. The *Forum* features research findings, best practices in caring for older adults, training opportunities and staff highlights.

*GRECC AdvAnces*, a two-page newsletter, is published quarterly. It features a director's message and short articles about research, education and evaluation and clinical innovations.

Since our last edition, we have seen dramatic changes in our country and the world: discovery and deployment of a vaccine to address a global pandemic, an election and change in Federal administration and holidays celebrated virtually and “socially distanced.”

Yet the GRECCs continue to pivot and move forward as they always have. It has been my pleasure to read annual reports from the GRECC sites and see the creative ways in which many have deftly modified study protocols, clinical demonstration projects and educational strategies to meet the challenges brought on by COVID-19.

GRECC's annual report will be published soon, so more on that in the next issue. In the meantime, enjoy the articles published here that describe the wonderful work happening in *GEC* and *GRECC* programs nationwide.



Marianne Shaughnessy, PhD, CRNP  
Director GRECC Programs

## See Me, Hear Me, Comfort Me: Preventing Terminal Delirium Cleveland GRECC

Delirium or acute confusion is a distressing syndrome experienced by 62-88% patients at the end of life. Many patients and families experience fear and anger at not being able to communicate their needs and preferences, robbing them of valuable family interactions, and decreasing their quality of life. Veterans pose a unique challenge at the end of life, given the high rate of PTSD and moral injury. In addition, the COVID 19 pandemic and physical isolation has increased the complexity of managing delirium and engaging families.

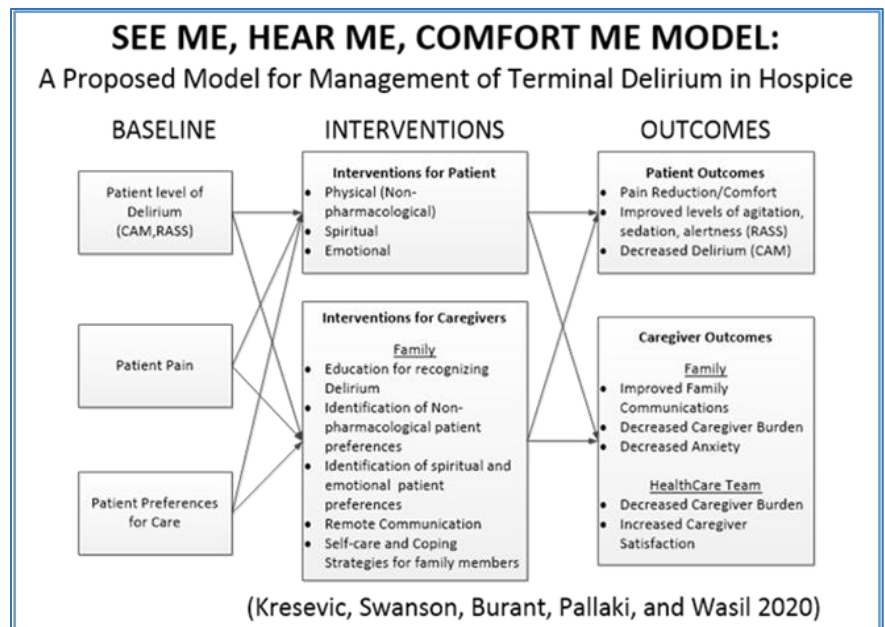
While not all delirium can be prevented, one study estimated that as much as 50% of delirium in terminal adults may be ameliorated. A search of four major electronic databases (PsycInfo, Medline, CINHALL and Scopus) revealed over 1,300 records on terminal delirium and family caregivers.

This integrative review revealed four themes to describe the experiences of caregivers including: (i) generalized distress and negative emotions, (ii) difficult or deteriorating relationships, (iii) balancing the need to relieve suffering with the desire to communicate and (iv) helplessness versus control.

Buss, et al. (2007) found that caregivers of patients with advanced cancer who were delirious were twelve times more likely to have anxiety, compared with caregivers of patients who were not delirious. Other negative emotions including fear, embarrassment, anger, sadness and guilt are also experienced. There is limited data on caregiver outcomes.

This project, supported by the Innovations Network, will develop prototype “bundle of care” interventions for Veterans with terminal delirium. These interventions will be adapted and expanded from previously identified non-pharmacological interventions including cognitive stimulation, physical care, communication, and relaxation previously used in intensive care units.

Several innovative strategies will actively engage, support and educate Veterans and family caregivers. Education will focus on delirium symptoms, communication and psychosocial interventions such as relaxation, guided imagery, aromatherapy, music, weighted blankets, stuffed animals and hearing amplifiers. These will be trialed to test for decreases in delirium, anxiety and caregiver burden.



Denise M. Krešević PhD, RN, GNP, FGSA, FAAN, GRECC Associate Director, Education; Muralidhar Pallaki, MD, FACP Section Chief, Hospice and Palliative Care, Interim Section Chief, Geriatrics Associate Director Clinical, VISN 10 GRECC; Bridget Wasil, RN, Head Nurse, Hero’s Harbor Hospice Unit; Christopher Burant, PhD, FGSA, GRECC Statistician; Marilyn Swanson, RN, NP, DNP, GRECC; Anton Vehovec, PhD, RN, VA Quality Scholar; Barbara Heath, RN, MSN, GRECC Education Coordinator

## Little Rock GRECC Steps Up COVID Clinical Research

Like many GRECCs around the nation, the Little Rock GRECC stepped up its clinical research efforts pertaining to COVID. Our primary objective was to improve understanding of how COVID is impacting Veterans and our clinical research enterprise and to provide support to both Veterans and VA researchers.



As Centers of Excellence, GRECCs have the responsibility to take on the research fight against the COVID infection, so we immersed ourselves in conducting COVID research studies.<sup>1,2</sup> Apart from conducting infection related research, we obtained research grants (HSRD rapid response grants and project modifications) to study the myriad of mental health and physical health consequences of the pandemic.<sup>3,4</sup>

### *COVID infection related studies:*

Inspired by Dr. Ramoni's efforts to fast-track VA partnership with industry on COVID studies, GRECC investigators started the Romark/VA Nitazoxanide study for prophylaxis against COVID infection among residents of the CLCs.<sup>1</sup> Our site was one of the first VAs to recruit patients for this study and is currently launching the Janssen/ENSEMBLE COVID vaccine trial. It has been heartening to see the immense support from local and national VA leadership for the study.<sup>2</sup>

### *COVID impact on clinical research enterprise:*

Our team studied the perspectives of Veterans (N=51) and caregivers currently enrolled in VA and National Institute of Health ongoing clinical trials. Most of the participants said they felt safe going to

their scheduled appointments and the VA medical center was either prepared or very prepared for the pandemic.<sup>3</sup> We found that caregivers play a critical role in the Veteran's acceptance of VA care and hence we suggest investing in ways to send timely and accurate messages to patients and their caregivers, and offer them more telehealth options during pandemics.<sup>4</sup> We discussed all the necessary steps before opening a clinical trial during the COVID pandemic to help researchers around the country.<sup>5</sup> In a cross-sectional study of older Veterans (N=118) conducted at CAVHS, we found that rural Veterans have disproportionately lower internet access and lower capability for the VA Video Connect (VVC) visit. Despite these barriers, we found that more than two-thirds of Veterans with an upcoming appointment preferred a VVC visit over a telephone visit.<sup>6</sup>

### *COVID impact on isolation, mental health, physical activity, and medical conditions:*

One of the responsibilities of clinical researchers is to chronicle the impact of the pandemic on facets of health, resilience and treatment factors, and to generate hypotheses for future research. We found that the COVID pandemic increased loneliness, worsened behavioral problems in the context of dementia, and disrupted care in those with serious mental illness.<sup>7-9</sup> Our team found that technology in various platforms including VVC, Zoom, and FaceTime brought Veterans close to their loved ones and alleviated some of the stress caused by the pandemic.<sup>10,11</sup> We are now launching an HSRD-funded study to systematically study the biopsychosocial risk factors of social isolation caused or exacerbated by the COVID pandemic. We received a project modification grant to study the impact of COVID on cognition, function, and neuropsychiatric symptoms

- continued on page 4 -

of dementia.<sup>12</sup> Via another project modification we are studying the impact of COVID on physical activity and disruptions in healthcare access among older Veterans.<sup>13</sup>

Kalpna Padala, MD, MS, AGSF, Associate Director for Clinical Research, Little Rock GRECC

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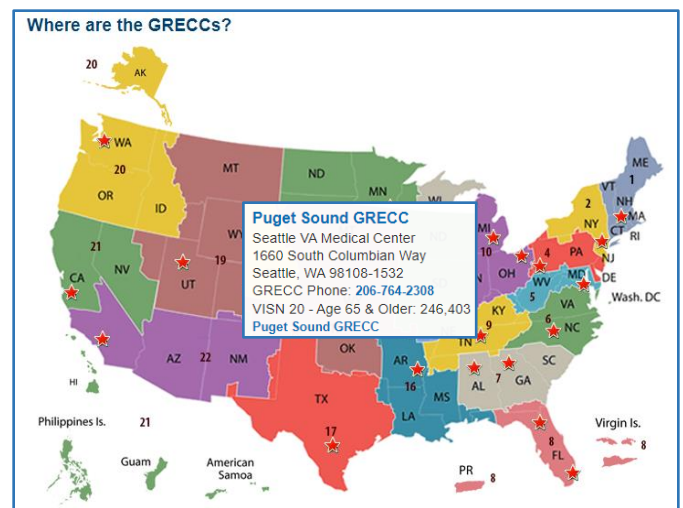
13. <https://clinicaltrials.gov/ct2/show/NCT03733041?term=kalpna+padala&draw=2&rank=4>

## GRECC Website Makeover

The refreshed GRECC website features sections on:

- **GRECC Home** – with banners that are updated quarterly, buttons to subscribe to GRECC News and VHA TRAIN, and an interactive map that links to a site-specific page for each local GRECC

**NOTE:** Site-specific pages also list and link to recent publications.



- **About Us** – with details about Centers of Excellence, GRECC leadership and partners, the most recent annual report and links to GRECC locations
- Newsletters – with tabs to **GRECC AdVAnces** and **GRECC Forum on Aging**, including links to archived editions
- **Clinical Projects Disseminated** – highlights projects expanding nationally
- **VA Fellowship in Advanced Geriatrics** – includes information on how to apply and testimonials from recent fellows
- **Awards** – lists major recent awards to people and programs

## Need to Optimize the Electronic Health Record to Improve Nutritional Care for Hospitalized Veterans – Gainesville GRECC

In 2019, 29% of veterans hospitalized at Malcolm Randall VA had a malnutrition-related diagnosis. Nutrition support therapies (NST) are used to prevent and treat complications associated with malnutrition.<sup>1</sup> Unfortunately, poor coordination and documentation of NST care has been reported in hospitals.<sup>2,3</sup>

As part of a Clinical Demonstration Project at the Gainesville GRECC, a multidisciplinary team conducted baseline evaluation of the NST processes for Veterans hospitalized at Malcom Randall VAMC between January-April 2020. We reviewed 41 patient charts and 238 opportunities for NST administration. We found that 98% of oral nutrition supplements (ONS) and 22% of tube feeding (TF) were not documented and 100% of ONS and TF were not bar-code scanned.

Through interviews with nursing staff and

process mapping, we found that NST are ordered for malnourished adults but there is difficulty determining what is ordered, what has been administered, and if there are any risks for drug/nutrient interactions. Vitamins, minerals, lipids, ONS, TF formulas, and parenteral nutrition therapies are listed within the VA National Drug File; however, not all of them are available for inpatient electronic ordering through the CPRS preventing them from being administered via bar-code medication administration (BCMA) system. Unfortunately, this leads to errors of omission, potential safety events and inadequate documentation for malnourished patients.

Through fact-findings efforts, we found at least 15 VAs who have many of these NST available for ordering, administering, and documenting in the BCMA systems and have improved outcomes. For example, after implementation of BCMA for NST, Phoenix VA reported improved administration, documentation, monitoring and safety for malnourished Veterans.<sup>4</sup> Our project identifies opportunities for the VA to become a high-reliability organization using the bar-code scanning capabilities to document administration of NST effectively.<sup>3</sup>

Site	EN Product	Number Observations	Given (Documented either in BCMA or intake area as ONS/EN)	Held or Refused (Documented)	Not Given/Unknown (Not Documented)	EN Product Bar Code Scanned
<b>GNV VA (238 observations)</b>	ONS	193	3 (2%)	0 (0%)	190 (98%)	0 (0%)
	Tube Feed	45	35 (78%)	0 (0%)	10 (22%)	0 (0%)
<b>Phoenix VA (415 observations)</b>	ONS	297	261 (88%)	36 (12%)	0 (0%)	297 (100%)
	Tube Feed	118	109 (92%)	9 (8%)	0 (0%)	118 (100%)

Sandra W. Citty, PhD, APRN; Mary Chew, MS, RD; Rebecca Beyth, MD; Charles Zeilman PhD, RN; Ken Arlinghaus, RD, LDN; Valerie Weyenberg, RD, LDN; Maritza Banks, RD, LDN; Lisa Zumberg, PharmD; Dawn Harris, RN, DNP; Diane Carter, RN, BSN, WOCN; Patrick Hyers, RN, BSN, MS; Jeanine Beatty, RD, LDN

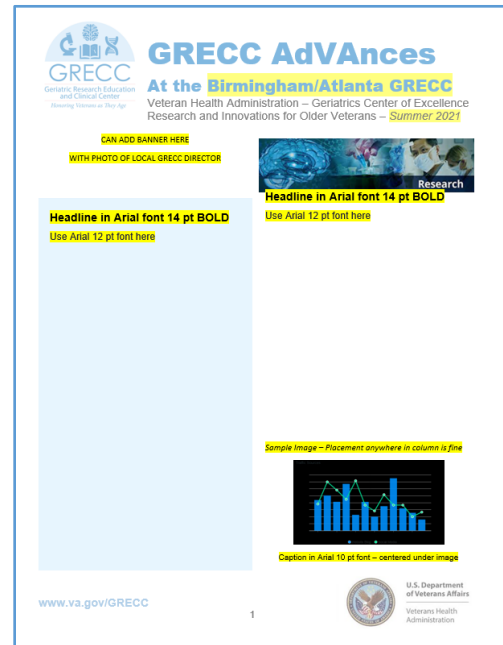
- See references on page 6 -

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In addition, GRECC AdVances is offered as a WORD template that can be customized by local GRECCs, can be published on your GRECC site's desired schedule, can be uploaded to your local website, if you have one, and distributed as desired.

Template Cover – Page 1



GRECC AdVances – Template for Local GRECCs

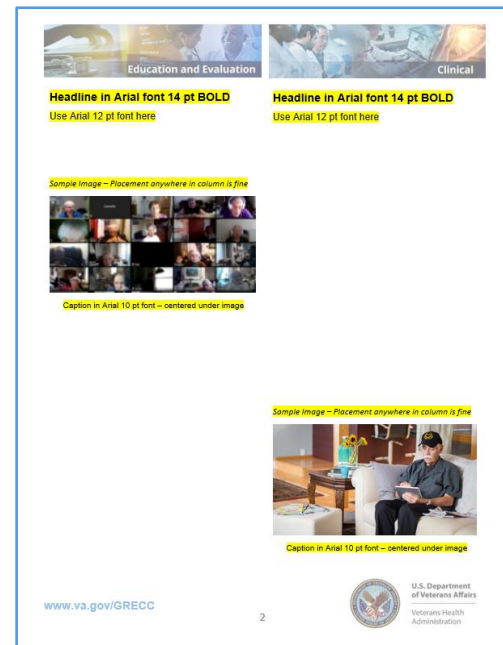
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GRECC's new quarterly publication GRECC AdVances is a two-page newsletter that is uploaded to the GRECC website and distributed via the GOV.delivery system, to which GRECC staff, other VA staff, interested geriatrics

students and professionals and academic affiliates can subscribe.

The GRECC Forum on Aging will also be linked in the GOV.delivery bulletins in the spring and fall quarters.



## VA Geriatric Scholars Program – Psychology Track Receives Training Award

While the COVID-19 pandemic has affected nearly all sectors of society, older adults have experienced disproportionately greater adverse effects, not only in terms of medical complications and mortality, but also with respect to mental health concerns. In turn, this highlights the continued need for mental health providers with specialized training in geriatrics and programs like the VA Geriatrics Scholars Program – Psychology Track (GSP-P).

Recognizing the need, unique design, and positive impact, the VA Geriatric Scholars Program - Psychology Track received the 2020 Award for Excellence in Geropsychology Training from the Council of Professional Geropsychology Training Programs (CoPGTP). [CoPGTP](#) is an international organization committed to the promotion and support of high-quality training programs in professional geropsychology.

GSP-P was developed as an expansion of the [Geriatric Scholars Program](#), a national VA workforce training program led by Dr. B. Josea Kramer at the Greater Los Angeles GRECC. The Psychology Track is currently led by Drs. Rachel Rodriguez and Jay Gregg at the Durham VA Health Care System and Dr. Christine Gould at the Palo Alto GRECC. The Geriatric Scholars Program is funded by the Office of Rural Health as one of their Rural Promising Practices.

The primary goal of the GSP-P is to enhance geropsychology competencies among psychologists who work in settings serving predominantly older Veterans (e.g., primary care, skilled nursing facilities, home-based primary care, rural clinics), but who have little-to-no prior geropsychology

training experience. To date, the primary geropsychology course has been offered five times at VA Palo Alto and 105 VHA psychologists have participated.



Evaluations of the course have shown that Scholars have increased their confidence and knowledge in program management and four key areas of geropsychology (general knowledge about adult development and aging, assessment, intervention, consultation). Following the course, Scholars have the option to participate in additional learning opportunities such as webinars on geriatric mental health and, more recently, advanced workshops designed for a deeper dive into selected geropsychology topics (e.g., palliative care/chronic illness).

Interested readers can learn more about the program development and outcomes of the GSP-P in the following peer-reviewed journal articles:

- Huh JWT, Rodriguez R, Gould CE, Brunskill SR, Melendez L, Kramer BJ. (2020). Developing a program to increase geropsychology competencies of Veterans Health Administration (VHA) psychologists, *Gerontology & Geriatrics Education*, 41:4, 463-479, DOI: [10.1080/02701960.2018.1491402](https://doi.org/10.1080/02701960.2018.1491402)
- Huh JWT, Rodriguez RL, Gregg, JJ, Scales, AN, Kramer, BJ, Gould, CE. Improving Geropsychology Competencies of Veterans Affairs Psychologists. *J Am Geriatr Soc*. Published online Jan 16, 2021:0-8. DOI: [10.1111/jgs.17029](https://doi.org/10.1111/jgs.17029)

Rachel Rodriguez, PhD, MPH, Jay Gregg, PhD, Christine Gould, PhD, Priyanka Mehta, MS & AJ Alfaro, PsyD – Durham VAHCS Psychology Service & VA Palo Alto GRECC

## Expanding Advance Care Planning for Veterans in Home Based Primary Care

As part of the VA Geriatric Scholar Program, Elke Baker, NP-C, APRN, and her Tampa Home Based Primary Care team undertook a quality improvement project to improve completion rates of Life-Sustaining Treatment Orders, empowering older Veterans to communicate their authentic wishes for care at the end of life.

Ms. Baker stressed how COVID-19 has heightened the need for conversations about end-of-life treatment plans.

“It has never been more important to have goals-of-care conversations with our patients during this pandemic. We need to talk about potential complications from COVID due to advanced age and underlying health conditions, and how this might cut the potential success rate of treatment options like ventilator support, for example.”

“The reactions of the Veterans and the caregivers was overwhelmingly positive,” said Ms. Baker. “Many discussions turned into meaningful and loving conversations. “An article in the VA blog, *VAntage Point*, and reprinted in the *VA Insider*, shared the experience of discussing goals of goals with a patient and family.



Elke Baker, NP-C, APRN,  
James A. Haley Veterans' Hospital -Tampa, FL

Navy Korean War Veteran Don Begg, age 90, completed a Life Sustaining Treatment Order with his wife, Beatrice Begg.



“We did it together. We talked about it – he was adamant about no resuscitation,” said Mrs. Begg. “He says he has lived a good, long life, and he doesn't want to be kept alive by artificial means.”

“It's informative, and it puts you in a good mood because you can understand what's wrong with you,” shared Mr. Begg. His daughter, Molly Houssian, said knowing her father's preferences has provided peace of mind for family members.

Ms. Baker credits her colleagues for the snowball effect of her project in 2020. The team included Care Manager Imelda Singer, RN, and June Leland, MD, Medical Director of the Home Based Primary Care (HBPC) Program in Tampa, Florida.

“Ms. Baker began a leadership role as a support coach to HBPC teams nationally, helping her peers increase the completion of Life Sustaining Treatment Orders among older Veterans. Her quality improvement project and experiences were shared with the national VA GEC Leads in January 2021.

- Excerpted from an article by Maureen Jerrett, a communications contractor for the VA Geriatric Scholars Program -



## Staff News

### San Antonio GRECC Appoints New Director



The San Antonio GRECC proudly announces the appointment of Sara E. Espinoza, MD as their new director. She succeeds Dr. Nicolas Musi, becoming the third person and first woman to hold this title

since the establishment of the SA GRECC at the South Texas Veterans Health Care System (STVHCS) in 1989.

Dr. Espinoza is a nationally recognized geriatrician and clinical investigator with expertise in frailty and translational geroscience. The Texas native is a fellowship-trained, dual board-certified internist and geriatrician that earned her medical degree in 2000 from the University of Virginia and completed her residency training at the University of Rochester Medical Center in 2003.

That is where she first became intrigued with the geriatric syndrome of frailty. She then completed a three-year clinical and research fellowship in geriatrics and gerontology at the Johns Hopkins Medical Institutions.

In 2006 Dr. Espinoza returned to Texas to join the SA GRECC as a clinical investigator and staff physician and has since sustained an active aging research program with a focus on investigating frailty. In 2011, she was appointed Associate Director for Clinical Programs for the SA GRECC. In this role, she

demonstrated her leadership qualities as well as her ability to build collaborations and partnerships to help grow the program exponentially.

Dr. Espinoza shared feeling excited to use her unique expertise to help carry the three main GRECC missions. “I’m excited for the opportunity to lead a team of clinicians and scientists that strive to build new knowledge in geriatric care through research, who like me are driven to improve the overall health and function of aging Veterans and will assist with the training of the next generation of leaders in aging and geriatrics.”

As an active provider of clinical care as a G/EC geriatrician at the Audie L. Murphy Memorial VA Hospital, Dr. Espinoza’s love for geriatrics remains as strong as it did when she first discovered she wanted to be a geriatrician during medical school.

“When I am in clinic, I love making meaningful connections with patients and truly enjoy helping them feel better, or cope better, or live their lives better. But I also enjoy diving deep into a problem and figuring out how we can answer a question – that’s where the science comes into play,” she said.

Dr. Espinoza also teaches and mentors trainees at multiple levels through her clinical activities at the STVHCS, as well as through her role as Associate Chief for Research with the Division of Geriatrics, Gerontology and Palliative Medicine in the Department of Medicine at The University of Texas Health Science Center at San Antonio.

- Staff News continued on page 10 -

## In Memoriam: Dr. Patty Goode Birmingham/Atlanta GRECC

Patricia Goode, MSN, MD retired in 2019 as University of Alabama's Gwen McWhorter Professor of Geriatric Medicine and as the Director of the Birmingham/Atlanta VA GRECC (2014-2019).



One of the founding leaders of VISN 7's GRECC, she served as the Associate Director of Clinical Programs from 2000 to 2014, prior to assuming the role of GRECC Director.

During her career she published over 140 manuscripts. Her research (JAMA, the New England Journal of Medicine, and other leading journals) and patient care (Medical Director of the Continence Clinics at UAB and Birmingham VA) advanced prevention and treatment of urinary incontinence and improved the quality of life of thousands of men and women, especially Veterans.

She inspired many clinical trainees over her tenure to pursue geriatrics and improve conditions that impact quality of life in older Veterans.

Most importantly, to all who knew Patty, she was esteemed as a colleague and loved as a friend. She enjoyed spending time with friends and family at the lake, and she loved a good sunset. Patty passed away November 23, 2020 and will be dearly missed.

## SUBMIT TO FORUM ON AGING

We welcome submissions from GRECCs for this newsmagazine, including:

- Updates and results about research, education and evaluation efforts and clinical innovations
- Notices of awards, grants, training opportunities
- Staff news
- Photos or images to accompany your submission

GRECC *Forum on Aging* is published by VA Puget Sound Health Care System, Geriatric Research, Education and Clinical Center.

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