

Nurturing the Seeds of Health Care Innovation:  
An Evaluation of the Hartford Geriatrics  
Health Outcomes Research Scholars Awards Program



The John A. Hartford Foundation  
55 East 59th Street 16th Floor  
New York, New York 10022-1713  
[www.jhartfound.org](http://www.jhartfound.org)

## *Purpose of this report*

This report reviews the accomplishments of the Hartford Geriatrics Health Outcomes Research Scholars Awards Program. In addition to detailing the lessons learned by the participants and advisors most closely associated with the program, it is offered here in the hope that other funders and institutions will want to build on its findings as a successful model for career development and leadership capacity-building for junior faculty in academics, medicine, and other pertinent fields of endeavor.

## *About the John A. Hartford Foundation*

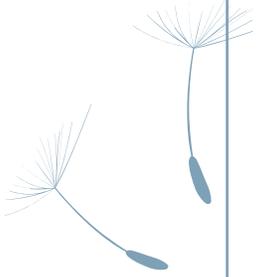
The mission of the John A. Hartford Foundation is to improve the health of older Americans. It was founded in 1929 by the brothers, John and George Hartford, both former executives of the Great Atlantic and Pacific Tea Company (the A&P grocery store chain). Since 1982, the Foundation has been a committed champion of health care training, research, and service system innovations that will ensure the well-being and vitality of older adults.

## EXECUTIVE SUMMARY

The Hartford Geriatrics Health Outcomes Research Scholars Awards Program (Hartford Outcomes Award) was established in 2004 to support the career development of junior faculty members working in the field of aging research. The program's immediate goal: to help these Scholars make the most successful possible transition from fellowship training to independent research careers by providing early-stage research funding. Its long term strategic goal: to support the most promising young academics in joining and enhancing the ranks of geriatricians and physician-scientists committed to developing new knowledge and innovative health interventions and to improving the health outcomes of older adults.

The impact of the Hartford Outcomes Award on the Scholars' research careers has been considerable and their achievements have been exceptional. All 20 Scholars continue to pursue careers in geriatric health outcomes research since receiving their awards. The vast majority increased their output during the program, including publishing a total of 251 peer-reviewed journal articles, 26 literature reviews, 29 book chapters, and nearly 300 presentations. They have earned significant awards, promotions, and recognition as well as media attention.

Success in the arenas of continued research funding and promotion is also impressive. One hundred percent of the Scholars report securing additional federal and/or private funding. Sixty-five percent have received the prestigious Beeson Career Development Award. The Hartford Health Outcomes Research Scholars are also advancing in tenure-track professorial positions, including 20 percent who have already been promoted in rank to the Associate level. In total, these Scholars have secured approximately \$15.5 million in additional funding.



## PREPARING FOR AN AGING AMERICA, CULTIVATING ACADEMIC LEADERS

The expected boom in the number of older Americans will force dramatic changes in the way that health care is practiced and delivered. Experts widely acknowledge that the burden of disease will shift from acute to chronic illness, resulting in increased demand for health care professionals with training in geriatrics and gerontology. As incontrovertible as this reality is, our nation has not taken meaningful steps to prepare for it, and the number of gero-trained professionals remains staggeringly low.

At the root of this crisis is the shortage of academic faculty with expertise in geriatrics and gerontology in all health-related fields. In addition, there is a lack of faculty with expertise in geriatrics working in the critical area of translating scientific advances into real-world changes at the bedside.

To address this challenge, the John A. Hartford Foundation (JAHF) has dedicated itself to improving the health care of older Americans. For the last 30 years, the Foundation has worked to develop a more highly skilled workforce and a better-designed health care system that is responsive to the special needs of older adults. An integral component of JAHF's strategy is to cultivate leaders in academic geriatric medicine as well as in nursing and social work.

## THE HARTFORD GERIATRICS HEALTH OUTCOMES RESEARCH AWARD

To support very junior faculty working at the forefront of this effort, JAHF established a career development award in 2004, the Hartford Geriatrics Health Outcomes Research Scholars (Hartford Outcomes Award). The program built on a successful but discontinued program that was funded by Pfizer Corporation starting in 1997.

The Hartford Outcomes Award was designed to help young scholars devoted to aging research make the transition from fellowship training to independent research careers. The program targeted well-trained but early stage physician-scientists who hold full-time faculty appointments at accredited U.S. medical institutions and who are working to develop new knowledge on health interventions that can lead to improved care and better health outcomes for older adults.

This report highlights the experiences and achievements of the Hartford Geriatrics Health Outcomes Research Scholars. It includes aggregated data about the Scholars obtained through surveys conducted by the American Geriatrics Society (AGS) through its Foundation for Health in Aging (FHA), the program administrator. It also includes testimonials from Scholars affirming the benefits of the program's design and the significance of the award to their careers.

By all accounts, the award came at a pivotal moment in the early career of each Scholar and provided a stepping stone that enabled each of them to achieve greater recognition and prominence. Given their shared effort to integrate geriatrics in education and research, the program's success is a win for the field of health and aging as a whole and comes at a critical time for the nation's rapidly increasing population of older adults.

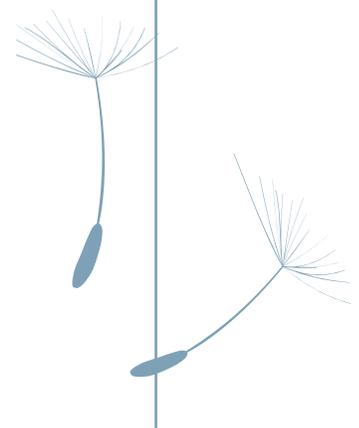
Although the program selected its last cohort in 2009, the careers of 20 Scholars are indelibly marked by their participation. With the passage of time, and as they progress in their careers, their influence on academic medicine and delivery of actual care will only grow. As the nation faces what has been called an existential threat from the combination of growing health care costs and an aging population, the lessons of this program must be shared to inform other decision makers about the value and impact of the support provided for the professional development of scholars at the forefront of geriatric health outcomes research.

## THE NEED FOR GERIATRIC HEALTH OUTCOMES RESEARCH

Geriatric health outcomes research examines the effect of health care practices and interventions on the health, function, and well-being of older adults. This broad field of study investigates how functional status, impairments, perceptions, social opportunities, and health services utilization are affected by disease, injury, treatment, intervention, or health policy. The purpose of this research is to develop new knowledge about health care practices and interventions that can improve the quality and length of life of older individuals and improve the delivery and distribution of health services. Patient-focused care, safety, effectiveness, cost, and access are common research themes.

The potential for scholars in geriatric health outcomes research to make a meaningful impact is significant, particularly because of the serious gaps in knowledge surrounding the care of older adults and the higher costs generated by suboptimal care. A major source of the problem can be traced to the structural weaknesses of existing research protocols. For example, the design of clinical trials tends systematically to exclude older adults through upper age limits and the use of eligibility criteria that affect older patients with multiple comorbidities (Zulman, et al., 2011). A downstream consequence is the lack of appropriate health care quality indicators for older patients with complex medical needs (Lee & Walter, 2011).

Equally concerning is the disproportionate share of personal health care costs consumed by older adults. Consider that in 2002, older adults accounted for 13 percent of the population but 36 percent of health care spending (AHRQ, June 2006). These percentages are expected to grow even further. By 2030, older adults will account for 20 percent of the population and 50 percent of health care spending (Vincent & Velkoff, 2010). Chronic conditions among the elderly are a primary driver of higher expenditures. A recent study showed that more than 75



percent of Medicare beneficiaries in the top-spending quartile had one or more of seven major chronic conditions, including coronary artery disease, congestive heart failure, and diabetes (CBO, May 2005).

Interest in, and demand for, health outcomes research is expanding in no small measure due to the media spotlight on spiraling health care costs and the proportion that government assumes for the care of the poor and elderly. It is now well recognized that rising health care costs are financially unsustainable. The recent economic downturn has further exposed systemic problems and gaps in health care, leading to mounting public pressure on politicians for new care models and new coverage and financing policies. In response to these calls, the passage of the Patient Protection and Affordable Care Act in 2010 authorized the creation of the Patient-Centered Outcomes Research Institute (PCORI), an independent, not-for-profit, private entity. Among its goals, PCORI will conduct outcomes research assessing the benefits and harms of preventive, diagnostic, therapeutic, or delivery-system interventions, highlighting comparisons and outcomes that people care about and experience, such as survival, function, symptoms, and health-related quality of life (Washington & Lipstein, 2011).

From this standpoint, the Hartford Outcomes Award positions Scholars to help our nation's leaders understand how best to improve health care outcomes for a rapidly increasing older population and how best to simultaneously improve the quality and lower the cost of care. Their research can inform the design and implementation of care delivery, guide the improvement of care coordination and continuity, and show how best to foster the integration of health care services.

## PROGRAM DESCRIPTION

For early stage scholars in geriatric health outcomes research, few other sources of funding are available at that critical point in their career. The challenge is compounded by the multi-disciplinary nature of geriatric health outcomes research, a focus that does not fit neatly into existing funding mechanisms which are, by and large, designed for narrow, highly specialized research perspectives.

The Hartford Outcomes Award filled this gap by targeting the first two years of faculty appointment. It enhanced the Scholars' profiles and enabled them to compete successfully for more advanced career development awards such as those offered through the National Institute on Aging (NIA), the Agency for Healthcare Research and Quality (AHRQ) or the Veterans Administration (VA). Among these is the JAHF-sponsored Paul Beeson Faculty Scholars in Aging Research Award, one of the most sought-after awards in aging research. Receiving such an award is an important milestone in the trajectory of an academic research career.

To generate maximum impact, the program invited applicants from general internal medicine, subspecialties in internal medicine, and family medicine, in addition to geriatric medicine and geriatric psychiatry.



## A foundational step for scholars in geriatrics research

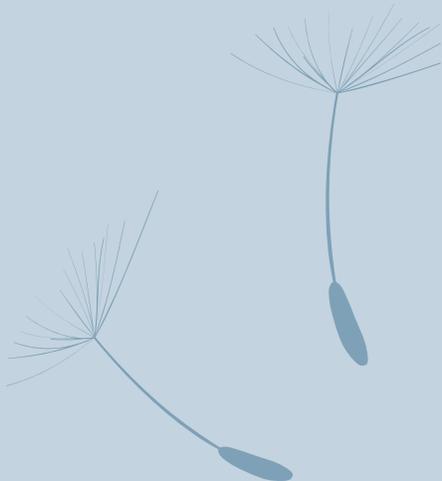
Psychiatrist Stephen Thielke, MD, MSPH, MA, received the Hartford Outcomes Award in 2008 for research that focuses on the role of pain and pain medications in the physical and mental health of older adults. As a result, he was able to develop and test target interventions for pain in primary care settings. In 2010, Dr. Thielke was promoted from Instructor to Assistant Professor in the University of Washington's Department of Psychiatry and Behavioral Sciences. He is also the Associate Director for Education at the GRECC of the Seattle Puget Sound Veterans Administration, where he has been responsible for the geriatrics content for a national veterans education initiative, and where he is an active member of the Dementia Education Workgroup.

For Dr. Thielke,

*This award was instrumental in my career development. It enabled me to develop research skills and to generate findings which were vital for securing additional funding. It connected me with other researchers (both as mentors and colleagues), and these relationships have been highly productive.*

*The award enabled me to secure a 4-year NIMH-funded Beeson Career Development Award [the preeminent award in aging research] with a focus on geriatrics. The opportunity to learn about messaging and dealing with the media [in a JAHF-sponsored seminar on communications and messaging] has proved extremely valuable for my efforts to disseminate my findings and to promote geriatrics education. The award was a key factor in being able to secure an academic position.*

Dr. Thielke's work has helped to break down stereotypes that older adults and their health care providers commonly hold about pain and old age; among them, the notions that pain is a natural part of getting older, that pain gets worse once it is present, that people who tough it out become accustomed to pain, and that pain medications are highly addictive. These stereotypes interfere with the choice of treatment and the care that older adults receive. The real evidence in fact encourages optimism about pain outcomes and highlights the benefits of appropriate treatment. Getting this message out to providers is crucial, as it enables them in turn to do a better job with giving real and useful information about the prognosis of pain to older patients, information that they want but rarely receive.



The program offered funding for two years as well as the following additional benefits and opportunities:

- An annual networking event during the AGS Annual Scientific Meeting, which brought together Scholars and their mentors as well as program alumni. This event provided the Scholars with an opportunity to build relationships that will sustain them throughout their careers.
- Quarterly conference calls with each cohort. These calls encouraged networking and collaborative work and provided a forum for Scholars to share advice on the common challenges they encounter at this stage of their careers.
- A combination of other events to enhance skills, foster networking, and share research and information on funding opportunities, such as a Webinar on becoming an effective advocate and participation in the Hartford Interdisciplinary Scholars Communications conference, in which Scholars learn to frame the impact of their work for lay audiences and cultivate a broader audience for their work.

The program was administered by the American Geriatric Society's Foundation for Health in Aging with Dr. Eric A. Coleman, MD, MPH, from the University of Colorado as the program's director. Dr. Coleman is especially suited for this position as he is an alumnus of the Health Outcomes award program when it was under the sponsorship of Pfizer Corporation. Dr. Coleman, a noted health care service innovator, also directs the John A. Hartford Foundation's Practice Change Fellows program, which aims at building leadership capacity across physicians, nurses, and social workers with front-line operations responsibility for geriatric programs and services.

## OVERALL ASSESSMENT

Five cohorts of Scholars were selected over the period from 2005 to 2009. In total, the program supported 20 Scholars, all of whom continue to pursue careers in geriatric health outcomes research.

- To date, 13 of the 20 (65 percent) have received the prestigious Beeson Career Development Award, a major milestone in aging research.
- In addition, all of the 20 (100 percent) have been successful in securing additional federal and/or private funding.
- Moreover, the Scholars are advancing in tenure-track professorial positions. At this early stage, four of the 20 (20 percent) have already been promoted in rank to the Associate level.

To gauge the program's impact on future productivity, we compared the publication rates of awardees before, during, and after the start of the program using data from peer-reviewed journals made available through PubMed. The analysis showed that the vast majority (90 percent) raised their productivity during the program. Moreover, one year after starting the program, Scholars produced, on average, an additional three publications over two years, a rate that, if sustained, can lead to a tenured faculty position.



## Enhanced opportunities for collaboration and networking

Holly Holmes, MD, is an Assistant Professor of Medicine at the University of Texas MD Anderson Cancer Center in the Department of General Internal Medicine. Dr. Holmes' research interest centers on optimal prescribing for frail older adults with multiple comorbidities. The Hartford Outcomes Award allowed her to study the use of medications for comorbidities in patients with cancer enrolling in hospice care.

According to Dr. Holmes, a 2008 awardee,

*The Hartford Award established me as a credible researcher. I was a new faculty member in general internal medicine, and received the award a few months after joining here at MD Anderson. As the only geriatrician here, the award really put me on the map both for my research and my clinical work.*

As with other Scholars, Dr. Holmes cited the communications workshop as well as the opportunities for networking as the most prized features of the program:

*The networking was surprisingly helpful, [and] I thought the communications workshop was the most valuable thing I have ever attended, in terms of optional professional development and training. At the communications workshop, I was able to make some very important contacts with people who do work similar to mine. We then coauthored a paper together...*

When asked if the program strengthened her subsequent grant applications, Dr. Holmes agreed and added that,

*Many of the study section members on the NIA are aware of the value and importance of the Hartford Outcomes Award. They place value on an investigator as someone who may be worth a risk if they have had a Hartford.*

The Hartford Outcomes Award has also enabled Dr. Holmes to enhance her scientific training and pursue her efforts to integrate geriatrics in education and research:

*As a result of the time and support from the Hartford, I have completed coursework for my MS in Epidemiology and am preparing my thesis. This has been a major undertaking of which I am proud. I have begun to train all of the hematology oncology fellows (there are 12 to 14 each year, for a total of about 30) in geriatrics, so that they can apply the principles of geriatrics to their oncology care.*

In Dr. Holmes' view, the program fills a critical void in the career development of aspiring geriatrics junior faculty:

*This is a program that I think must continue to be supported. There are so many talented geriatricians who have not had the opportunity to have solid research training, but who have original and important ideas that need to be tested. This program provides an essential jump start – without which I am afraid many geriatrics junior faculty would simply have too many time pressures to succeed in a research environment. I am incredibly grateful for the opportunities this award provided.*

All in all, their achievements have been exceptional. Specifically:

- In total, these Scholars have secured approximately \$15.5 million in additional funding.
- Collectively, they have published over 251 peer-reviewed journal articles, written 26 literature reviews, contributed 29 book chapters, and delivered nearly 300 presentations.
- They have received other significant awards, promotions, and recognition.
- An overwhelming majority of the Scholars have received media coverage, including print, radio, and television.

In personal testimonials, all 20 report that the Hartford Outcomes Award was instrumental in elevating their professional profile and research careers. Mara Schonberg, MD, describes its impact this way:

*[The award] was essential for providing me with funding before I received a K23 award from the NIH. It was necessary for my career development from fellow to independent investigator. I may have been stalled in my progress without this funding. In addition, the award allowed me to connect with experts and investigators outside my institution at a time that was critical to my career development.*

Timothy Girard, MD, shares that view:

*The program was a crucial resource at the beginning of my career as a faculty member at Vanderbilt. This program put me in the position to receive additional funding, including a K23 from the NIA, and to carry out the research project that is now serving to launch other projects.*

## IMPACT AND LEADERSHIP

The vast majority of Scholars is working actively to integrate geriatrics in education and research. Daniel Matlock, MD, a 2009 awardee, believes that,

*there will never be enough geriatricians to care for the future elderly. Thus, I'm trying to establish myself as a respected researcher in cardiovascular disease while simultaneously infusing geriatric principles into the specialty literature.*

The same deep sense of commitment to the field of geriatrics is shared by Supriya Mohile, MD, who was selected in 2007 and writes that,

*I am the only geriatric oncologist in the region and spend a significant amount of time teaching and educating peers.*

For Heather Whitson, MD, a 2008 Scholar, the award has enabled her to incorporate geriatrics on multiple fronts through her work in the Department of Medicine and in the Department of Ophthalmology. She continues to lecture annually to the ophthalmology residents as well as working with them during their low vision rehabilitation rotation. She teaches them primarily about the impact of comorbidity in managing older ophthalmology patients and about how to perform a functional assessment for visually impaired seniors. In the Department of Medicine, she works with students, interns, residents, and fellows and integrates geriatrics in all her teaching activities. She also serves as the attending-of-record on general medicine teaching wards at the Durham VA. She serves on the curriculum committee for capstone courses and teaches geriatrics topics during her annual lecture. In addition, for ten weeks a year, Dr. Whitson attends on the geriatrics consult service, which provides additional opportunities to teach fellows and house staff about areas of content expertise within geriatrics, such as delirium, falls, and polypharmacy.

In addition to this success, many of the other Scholars have already begun to use their expertise to provide leadership on a national stage. For example, Vineet Arora, MD, a 2006 awardee, has been named to the editorial board of AHRQ's Patient Safety Network. Aanand Naik, MD, who was also selected in 2006, has begun a national social media campaign through his blog, Empowering Patients, which draws together clinicians, researchers, and advocates for adults with multiple chronic illnesses.

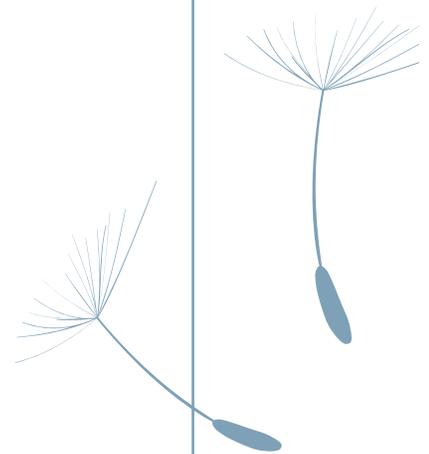
## ENSURING A PATH FOR FUTURE SCHOLARS

In responding to the complex and multi-layered challenge of developing faculty in academic geriatric medicine, the Hartford Outcomes Award has surpassed expectations. The number of successful Scholars who have gone on to achieve greater recognition and prominence is a remarkable achievement.

The program has proven the importance of supporting and nourishing young scholars who are working at the forefront of health outcomes research in aging. Through their work, these Scholars are actively pursuing the knowledge that our nation needs to transform how health care is practiced, delivered, and distributed so that older adults can be better served.

As we celebrate the success of the Hartford Outcomes Award and the achievements of its Scholars, we should also pause to reflect on the broader national challenge that faces older adults today and in the years to come. According to the Institute of Medicine's 2008 report *Retooling for an Aging America*,

*Just 7,128 physicians are certified geriatricians, or one geriatrician for every 2,546 older Americans. By 2030, assuming current rates of growth and attrition, one estimate shows that this number will increase to only 7,750 (one for every 4,254 older Americans), far short of the total predicted need of 36,000.*





## An Impact Beyond Education and Research

Brie Williams, MD, MS, Associate Professor of Medicine in the Division of Geriatrics at the University of California, San Francisco (UCSF), is a clinician-researcher who is a national leader in assessing and improving the health and healthcare of older adults in the criminal justice system. Dr. Williams completed her medical school training and a Master of Science in Community Medicine at the Mount Sinai School of Medicine. After her internal medicine residency in the joint UCSF – San Francisco General Hospital primary care program, Dr. Williams became a Clinician Educator in the UCSF Division of General Internal Medicine where she discovered that she wanted to pursue a career in geriatrics. She returned to training to complete the UCSF Geriatrics Clinical and Research Fellowships. In her clinical work, Dr. Williams serves as the Medical Director of the San Francisco VA Geriatrics Clinic and as an attending on the VA's ACE Unit and on its palliative care consult service. Dr. Williams' research program focuses on the intersection between geriatric medicine and the legal system. Specifically, she applies the principles of geriatrics research to address the emerging public health crisis of the aging criminal justice population, to expose policy, law makers, and other professions to the discipline of geriatrics, and to teach non-geriatrics healthcare providers how to optimize the care of older adults. Dr. Williams has worked as a healthcare consultant to prisons and jails across the country. Her research has been funded by the Hartford Foundation, the Brookdale Foundation, the National Institute on Aging, and the Jacob and Valeria Langeloth Foundation.

The Hartford Outcomes Award was Dr. Williams' first grant and the first career development award that she received. According to Dr. Williams,

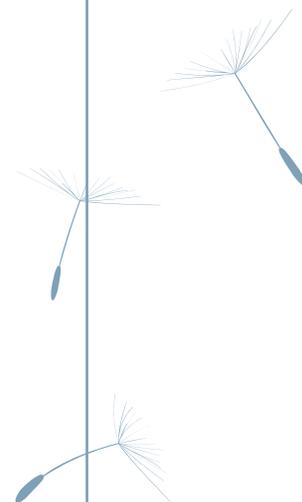
*The Hartford Outcomes Award shaped my entire career and came at a pivotal moment. From a career standpoint, there were certainly "safer" alternatives to my area of research that I could have chosen. But little had been done in the area, my mentors recognized how passionate I was about the topic, and they encouraged me to apply for the Hartford Outcomes Award.*

*As much as it was a gamble for me and my mentors to pursue this line of research, it was a gamble for the John A. Hartford Foundation to fund it. The Hartford Outcomes Award gave me both the funding and the legitimacy that I needed to get my first research faculty appointment and to be a strong candidate for future grants and awards. Simply put, it kick-started my career and when I look back on my career, I believe I will always view it as the most important award that I received.*

*Today, thanks to the network of contacts and level of support I received from the John A. Hartford Foundation, I am working to develop a model comprehensive geriatric care program in the San Francisco County jail system. I am interviewing and working with police, nurses, attorneys, and service providers to older adults in jail, and am enrolling 200 older adult inmates to get their perspective on their health care.*

Geriatricians are indeed a rare and very special breed. For the nation to add to their numbers requires that appropriate capacity in education and research exist.

With the long lead time involved in developing the academic careers of young physician-scientists, there is a clear need to sustain the early support for professional development that the program provides. By nurturing these Scholars over the past several years, the Hartford Outcomes Award has helped to create a national network of geriatric health outcomes researchers. It has also paved the way for future champions to build on a track record of success in this area. Collectively, the work of these Scholars offers the potential for better-informed policy and a better-designed health care system capable of meeting the needs of older Americans. With support from new partners that promise can be sustained and realized.



## BIBLIOGRAPHY

AHRQ. (June 2006). *Research in Action #19: The High Concentration of US Health Care Expenditures*.

CBO. (May 2005). *High Cost Medicare Beneficiaries*. Washington, DC: Congressional Budget Office.

IOM. (2008). *Retooling for an Aging America*. Washington, DC: Institute of Medicine.

Krumholz, H. (2011). Real-world Imperative of Outcomes Research. *JAMA*, 754-5.

Lee, S., & Walter, L. (2011). Quality Indicators for Older Adults - Preventing Unintended Harms. *JAMA*, 1481-2.

Vincent, G., & Velkoff, V. (2010). *The next four decades, the older population in the US: 2010 to 2050*. Washington, DC: US Census Bureau.

Washington, A., & Lipstein, S. (2011). The Patient-Centered Outcomes Research Institute-Promoting Better Information, Decisions, and Health. *NEJM*, e31(1-3).

Zulman, D., et al. (2011). Examining the Evidence: A Systematic Review of the Inclusion and Analysis of Older Adults in Randomized Controlled Trials. *JGIM*, 783-90.

# THE HARTFORD GERIATRICS HEALTH OUTCOMES SCHOLARS AWARD WINNERS

## 2009 Cohort

### Jane Givens, MD, MSCE

#### “Experiences of Family Members of Nursing Home Patients with Advanced Dementia”

Jane L. Givens, MD, MSCE, is an Assistant Professor of Medicine in the Division of Gerontology at Harvard Medical School and Assistant Scientist at Hebrew Senior Life’s Institute for Aging Research. She completed a geriatrics fellowship at Boston Medical Center and a physician-scientist fellowship in the Division of General Internal Medicine at the University of Pennsylvania, where she received a Master of Science degree in Clinical Epidemiology.

### Daniel Matlock, MD

#### “Measuring the Quality of the Decision to Receive an Implantable Cardioverter-Defibrillator”

Dan Matlock, MD, is an Assistant Professor in the Division of General Internal Medicine at the University of Colorado Denver. He completed his internship and residency at the University of Colorado Denver. Clinically, he is a geriatrician working in outpatient general medicine and inpatient palliative care.

---

## 2008 Cohort

### Sarah D. Berry, MD, MPH

#### “Medications as Acute Precipitants of Falls in the Nursing Home Setting”

Sarah D. Berry, MD, MPH, is an Assistant Professor of Medicine in the Division of Gerontology at Harvard Medical School and Hebrew SeniorLife. She finished an Internal Medicine residency at the University of Utah, and a geriatrics fellowship at Beth Israel Deaconess Medical Center in Boston, MA. After her clinical fellowship she received a Master of Public Health through Harvard University, and pursued research training as a fellow at Beth Israel Deaconess Medical Center/ Hebrew Rehabilitation Center.

### Holly M. Holmes, MD

#### “Utility of Medications for Patients with Cancer in Hospice Care”

Holly M. Holmes, MD, is an Assistant Professor of Medicine at the University of Texas MD Anderson Cancer Center in the Department of General Internal Medicine, Ambulatory Treatment, and Emergency Care. She completed her clinical training in internal medicine and geriatrics at the University of Chicago, as well as research training in the University of Chicago’s Clinical Research Training Program.

### Sei J. Lee, MD, MAS

#### “Glycemic Control and Health Outcomes in Frail, Dependent Elders”

Sei J. Lee, MD, MAS, is an Assistant Professor of Medicine in the Division of Geriatrics at the San Francisco VA Medical Center and the University of California, San

Francisco. He completed his clinical training in internal medicine and geriatrics at UCSF, along with research training focusing on healthcare quality improvement through the VA Quality Scholars Fellowship.

### Stephen Thielke, MD, MSPH, MA

#### “The Effects of Pain on Health and Quality of Life in Older Adults”

Stephen Thielke, MD, MSPH, MA, is an Assistant Professor in the University of Washington Department of Psychiatry and Behavioral Sciences. He completed his residency in Psychiatry and a fellowship in Geriatric Psychiatry at the University of Washington and serves as the Associate Director for Education at the GRECC of the Seattle Puget Sound Veterans Administration.

### Alexia Torke, MD, MS

#### “A Prospective Observational Study of Surrogate Decision Making for Hospitalized Older Adults”

Alexia Torke, MD, MS, is an Assistant Professor of Medicine in the Department of General Medicine and Geriatrics, Research Scientist with the Indiana University Center for Aging Research and the Regenstrief Institute, and Associate Director of the Fairbanks Fellowship in Medical Ethics. She completed her residency in Primary Care-Internal Medicine at Emory University and was a clinician-educator at Emory for five years. Dr. Torke then completed a fellowship in primary care health services research and ethics at the University of Chicago, where she also received a Master of Science for Clinical Professionals.

## 2007 Cohort

### Timothy D. Girard, MD, MSCI

“Delirium as a Predictor of Cognitive Impairment in Older ICU Patients”

Tim Girard, MD, MSCI, is an Assistant Professor in Medicine in the Division of Allergy, Pulmonary, and Critical Care Medicine and the Center for Health Services Research at Vanderbilt University. He recently completed a pulmonary and critical care fellowship and the Master of Science in Clinical Investigation Program at Vanderbilt, and he is now continuing a program of aging research as a member of Vanderbilt’s ICU Delirium and Cognitive Impairment Study Group.

### Supriya Gupta Mohile, MD, MS

“Patterns of Care and Outcomes of Vulnerable Elders with Cancer”

Supriya Gupta Mohile, MD, MS, is currently an Assistant Professor of Medicine in the Hematology/Oncology Unit and Epidemiology at the University of Rochester. Her training included a fellowship in both Geriatrics and Oncology and a Master of Health Services Outcomes Research at the University of Chicago. She is a board-certified geriatrician and oncologist with clinical expertise in treating patients with genitourinary and gastrointestinal cancers.

### Heather E. Whitson, MD

“Adding Insult to Insult: Functional Consequences of Comorbid Cognitive Impairment in Elders with Macular Disease”

Heather E. Whitson, MD, is an Assistant Professor of Medicine in the Division of Geriatrics at Duke University Medical Center. She completed clinical training in internal medicine and geriatrics at Duke University Medical Center, and as a VA Special Fellow in Advanced Geriatrics at the Durham VA Medical Center. She is currently pursuing a Master of Health Sciences degree in Duke’s Clinical Research Training Program.

### Brie Williams, MD, MS

“The Health, Functional Status and Health Outcomes of Older Adults in Prison and After Release”

Brie Williams, MD, MS, is an Associate Professor of Medicine in the Division of Geriatrics at the University of California, San Francisco (UCSF). She completed a geriatrics fellowship at UCSF, received her MD and MS in Community Medicine from the Mount Sinai School of Medicine, was an internal medicine resident at UCSF, and was a Clinician Educator in the Division of General Internal Medicine at UCSF before returning for geriatrics training.

## 2006 Cohort

### Vineet Arora, MD, MA

“Measuring the Quality of Care for Hospitalized Vulnerable Elders”

Vineet Arora, MD, MA, is an Associate Professor of Medicine in the Section of General Internal Medicine at the University of Chicago. She completed a fellowship in hospital medicine and a Master of Public Policy from the Irving B. Harris School of Public Policy at the University of Chicago. She is the recipient of the Milton W. Hamolsky Award from the Society of General Internal Medicine and a Research Abstract Award from the Association of Program Directors of Internal Medicine.

### S. Nicole Hastings, MD, MHS

“Incidence and Predictors of Adverse Outcomes in Older Adults Discharged from the Emergency Department”

S. Nicole (Nicki) Hastings, MD, MHS, is an Assistant Professor at Duke University Medical Center in the division of Geriatrics. She trained in internal medicine at

Stanford University Medical Center and completed her geriatrics fellowship at Duke University and the Durham VA Medical Center, supported by a VA Special Fellowship in Advanced Geriatrics. She completed a Master of Health Sciences in Clinical Research through the Duke Clinical Research Training Program.

### Aanand D. Naik, MD

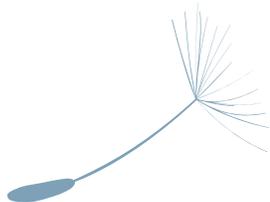
“Goal-Setting for Older Adults with Multiple Morbid Conditions”

Aanand D. Naik, MD, is an assistant professor of health services research and geriatrics at Baylor College of Medicine and the Houston Center for Quality of Care and Utilization Studies at the Michael E. DeBakey VA Medical Center. He completed his clinical training in Internal Medicine and Geriatrics at UT Southwestern Medical School in Dallas and research training at the Robert Wood Johnson Clinical Scholars Program at Yale University.

## Mara Schonberg, MD, MPH

### “Breast Cancer Screening Characteristics and Outcomes Among Oldest-old Women”

Mara Schonberg, MD, MPH, is an Assistant Professor of Medicine at Beth Israel Deaconess Medical Center and Harvard Medical School. She completed her residency at the University of Chicago Hospitals and a fellowship in General Medicine at Beth Israel Deaconess Medical Center as well as a Master of Public Health degree from the Harvard School of Public Health.



## Kaycee Sink, MD, MAS

### “Balancing Risks and Benefits of Pharmacotherapy in Older Adults: Cognitive and Functional Outcomes Associated with Anticholinergic Use”

Kaycee Sink, MD, MAS, is an Associate Professor of Medicine in the section on Gerontology and Geriatric Medicine at Wake Forest University School of Medicine in Winston-Salem, N.C., where she also serves as the director of the Kulynych Memory Assessment Clinic. She completed all of her clinical training (medical school, residency, fellowship in geriatric medicine) as well as a two-year postdoctoral fellowship and master’s degree in clinical research at the University of California, San Francisco.

---

## 2005 Cohort

### Lillian Chiang Min, MD, MSHS

#### “Does Better Overall Quality of Care of Older Ambulatory Care Patients Result in Decreased Mortality and Functional Decline?”

Lillian Min, MD, MSHS, is an Assistant Professor of Geriatric Medicine at the University of Michigan. She completed her geriatrics fellowship at UCLA, supported by a Bureau of Health Professions Geriatric Faculty Training fellowship. During her fellowship, she obtained a Master of Health Services Research at the UCLA School of Public Health and conducted research with the Assessing the Care of Vulnerable Elders (ACOVE) study at RAND in Santa Monica, California.

### Margaret Fang, MD, MPH

#### “Use and Outcomes of Warfarin for Older Adults with Atrial Fibrillation”

Margaret C. Fang, MD, MPH, is an Associate Professor of Medicine in the University of California, San Francisco Division of General Medicine Hospitalist Group. She completed a general medicine research fellowship at the Massachusetts General Hospital and an MPH at the Harvard School of Public Health.

### Nathan Goldstein, MD

#### “Decision Making in Older Patients with Implantable Defibrillators”

Nathan Goldstein, MD, is an Assistant Professor of Geriatrics and Palliative Care at the Mount Sinai School of Medicine. He completed training in internal medicine at Mount Sinai Medical Center, followed by health services research training in the Robert Wood Johnson Clinical Scholars Program at the Yale University School of Medicine and a clinical geriatrics fellowship in the Brookdale Department of Geriatrics and Adult Development at Mount Sinai.

### Lisa Walke, MD

#### “Barriers to and Facilitators of Strategies to Alleviate Symptoms in Older Adults with Chronic Obstructive Pulmonary Disease”

Lisa Walke, MD, is an Associate Professor of Medicine at Yale School of Medicine. She received her MD from Mount Sinai School of Medicine and completed residency in internal medicine at Montefiore Medical Center. Her fellowship in geriatric medicine and clinical epidemiology at Yale was supported by the Hartford/American Federation for Aging Research Academic Geriatric Fellowship.



THE JOHN A. HARTFORD FOUNDATION

55 EAST 59TH STREET 16TH FLOOR

NEW YORK, NY 10022-1713

[www.jhartfound.org](http://www.jhartfound.org)