Mount Sinai and Martha Stewart craft a new vision for healthy aging

The first baby boomers turned 60 last year, jump-starting a phenomenon that will build momentum and challenge health care providers for decades to come. Meanwhile, unprecedented medical advances are extending life expectancy and heightening expectations of health and happiness for that longer lifespan. At the same time, more and more baby boomers are caring for aging parents and thus glimpsing their own futures. These converging trends have created a unique opportunity to challenge the way we think about aging.

Martha Stewart is joining forces with Mount Sinai Medical Center to seize this opportunity. Opened at the end of November, the Martha Stewart Center for Living will provide a new home for Mount Sinai’s outpatient geriatrics services and create a pioneering new model for the practice of medicine.

Two generations, one Center

One generation looking ahead to longer life, the other already coping with that longevity: both demand care and attention. “With the aging of the baby boomer generation, two areas are crying out for innovation in medical

Continued on Page 5
A revolutionary new way to pass the torch

America’s supply of geriatricians is dwindling even as the over-60 population is set to skyrocket over the next decade. But the challenges of caring for the aging go beyond quantity: these “new seniors” will look very different from those of decades past. Rosanne M. Leipzig, MD, PhD, Vice Chair for Education of the Brookdale Department of Geriatrics and Adult Development, explains: “We’ve never had an older generation like this one, or the next one. People didn’t make it to this age, living a third of their lives in retirement.” Mount Sinai is leading the way in crafting creative strategies to transform patient care during and beyond these changing times.

The first and most creative
Mount Sinai teaches more people about geriatrics than any other medical school in the country. Although it hosts one of the country’s top geriatrics fellowship programs, most of Mount Sinai’s “students” of geriatrics are not geriatricians nor do they plan to enter the field. Instead, they are the beneficiaries of Mount Sinai’s innovative “geriatrics for the non-geriatrician” approach.

That revolutionary strategy starts with the medical school. Mount Sinai is one of only a handful of medical schools in the country that require a month-long rotation in geriatric medicine for every student. Geriatrics is infused throughout the medical school experience, from the first year through the last. “from the minute they arrive”, says Dr. Leipzig. The Seniors as Mentors Program matches every incoming student with an older Mount Sinai patient. Special interest groups, research projects, and a month-long clerkship integrated with eight weeks of internal medicine – all welcome students regardless of their specialty plans.

The revolution continues with pioneering programs for practicing physicians, such as a unique “mini-fellowship” program that targets non-geriatricians who teach in residency programs or medical schools. As part of the program, Mount Sinai faculty mentor the participants long after they return to their regular duties at home. With 48 slots, each week-long rotation, or session, draws applicants from all around the country and often cannot accommodate the demand. This tuition-free program is supported by a one-time, six-year grant from the Donald W. Reynolds Foundation that concludes in 2010, and the department is already working on ways to ensure its continuation.

Taking the model national
Dr. Leipzig is working to take this “geriatrics for non-geriatricians” approach to a national level, traveling around the country to advise other medical schools on improving their own programming. “We’re leading the charge to develop graduation competencies in geriatrics for every medical student – what every student must demonstrate when caring for an older adult.” This strategy includes methods for teaching and assessing these competencies, as well as adding relevant questions to the board exams they must pass to be licensed. The big picture entails working with national associations to develop similar competencies for all residencies and fellowship programs and for practicing physicians.

“Whether they plan to become ophthalmologists or orthopedists,” Dr. Leipzig adds, “all of tomorrow’s doctors will work with growing numbers of older patients, and doctors in every specialty need to be prepared.”
Radical change on the horizon
A radical transformation in the face of aging is just over the horizon as baby boomers enter their 60s. The process will subject our health care system to enormous pressures, not just because of this cohort's sheer size but also because its members tend to be vocal and very engaged with their health care.

According to Mount Sinai’s experts, we’re just not ready. “None of us are prepared for the monumental societal burden that awaits us,” says Brent Ridge, MD, MBA, Assistant Clinical Professor of Geriatrics and Adult Development at Mount Sinai Medical School and Vice President for Healthy Living at Martha Stewart Living Omnimedia. “The current supply of geriatricians is dwindling, negative stereotypes of aging abound, and, at the same time, many of us are starting to experience the pressures of providing care for aging parents and other loved ones.”

Collaboration and education
The Martha Stewart Center for Living will serve as a laboratory and change agent for developing, testing, and disseminating sustainable models for practice, business, and education that can be used around the world to change the face of aging.

Innovating and integrating
Another key strategy is to offer holistic or integrative health modalities as an adjunct to traditional geriatric medicine interventions. The Coffey Practice Senior Health Spa has provided a range of complementary and integrative therapies to patients and community members for more than two years, including mindfulness-based stress reduction, tai chi, and yoga.

“The therapies have a somewhat different philosophical basis,” explains Patricia Bloom, MD, Director of Integrative Health for the Martha Stewart Center and Associate Clinical Professor of Geriatrics and Internal Medicine. “The therapist is more of a partner in guiding the patient to utilize internal resources to aid in the healing process. They’re sometimes called holistic therapies, because patients who are living with chronic disease have the potential to be whole.”

The resources of the Martha Stewart Center for Living will allow for the expansion of these services and activities. “We’re actively exploring the possibilities of massage therapy, acupuncture, and traditional Chinese medicine herbal therapies,” says Dr. Bloom.

“We consider integrative and complementary approaches to be part of our medical care,” adds Dr. Chun.
On their first day of medical school, most students are enthusiastic, even exhilarated, full of energy and vision. By the time they graduate four years later, however, the same students are often frustrated, broke, and exhausted, and may have lost touch with the idealism that led them to medical school. Mount Sinai’s innovative Seniors as Mentors program is a model for how medical schools can renew the spirits of students while providing them with a unique educational experience.

The premise is simple yet powerful: within weeks of starting at Mount Sinai School of Medicine, every incoming student is paired with one of the 3,000 patients in Mount Sinai’s outpatient geriatrics program. That relationship continues as the students move forward all the way through their fourth year, constantly evolving to reflect the student’s newly acquired skills as well as the senior mentor’s health-care needs and strengths. While other medical schools offer such programs as electives, Mount Sinai is one of the very few that requires every student to participate.

The program’s goal is not merely to assign physicians to geriatric patients, explains Rainier P. Soriano, MD, Director of Medical Student Education and Co-Director of Seniors as Mentors. In the first year, the seniors are not labeled as “patients” or the students as “doctors”. Instead, the students focus on developing an overview of their mentors’ history, their current interests and concerns, their hopes and fears for the future. “We want to give the students a snapshot of a person who ages well, to show them that there are older adults who lead very happy and healthy lives,” explains Dr. Soriano. The roles gradually shift as the students acquire skills and experience, performing physical examinations, checking blood pressure, assessing home safety and reviewing medication management. They also help their mentors set and achieve behavioral goals, such as increasing exercise. Third-year students share their mentors with incoming students, guiding and encouraging the new students – thereby becoming mentors themselves and sharpening their teamwork skills. “The assignments and activities change each year,” says Dr. Soriano, “sometimes related to their studies and other times to social factors.”

Alexander Millman, a second-year student and president of the Geriatrics Student Interest Group, points out, “The program establishes a longitudinal experience for us. We learn how to build trust and form positive relationships with our mentors – and thus our future patients - over time.”

Bridging an unexpected gap

Last year, the funding for this special program was not renewed.
“With the aging of the baby boomer generation, two areas are crying out for innovation in medical practice,” says Albert L. Siu, MD, Ellen and Howard C. Katz Chairman’s Chair Brookdale Department of Geriatrics and Adult Development, Mount Sinai School of Medicine, Director of the GRECC at the James J. Peters VA Medical Center and an internationally renowned expert in geriatrics.

practice,” says Albert L. Siu, MD, Chair of the Brookdale Department of Geriatrics and Adult Development and an internationally renowned expert in geriatrics. The first is “preventive gerontology” – healthy aging – so that people who are 60 today will be healthy when they turn 80. “We need to do a better job of reaching out to younger people and teaching them behaviors that will serve them well as they age,” Dr. Siu explains.

The second challenge is to improve care for older patients who do have multiple chronic problems and disabilities, says Dr. Siu, “because that will happen.” Our current system makes it very difficult to get good care for that population, he adds, “because it’s fragmented, because communication is poor – and because our financing system does not pay us to take care of people.”

The Martha Stewart Center for Living will support Mount Sinai in taking on both of these challenges – by creating platforms for supporting healthy aging and for improving chronic care. While other health care providers address one or the other, the Center will break new ground in its commitment to this two-pronged approach on a large scale. Dr. Siu adds, “I think that doing one without the other doesn’t rise to the challenge that aging presents to our society.”

Making Mount Sinai connections
Navigating the maze of health care can be frustrating and exhausting, as many of us know from experience. And as we age, we often need different kinds of care, requiring more referrals and interdisciplinary coordination. Located just inside the Klingenste Clinical Center on Madison Avenue, the Martha Stewart Center for Living creates a single point of entry to healthy aging at Mount Sinai, bringing together under one roof the wide-ranging services that drew 11,500 patient visits last year. With its own entrance, the Center provides easy access to patient-centered, versatile space designed by world-renowned architect C.C. Pei. The Center will be not just a clearinghouse, but a centralized source of care: patients can meet right on-site with specialists in rheumatology, cardiology, podiatry, psychiatry, nephrology, and others. When needed, referrals to other disciplines will be closely coordinated. The Center’s staff and volunteers can also direct patients to the Medical Center’s innovative services such as the Visiting Doctors Program.

The Martha Stewart Center will also help integrate another important element of geriatric medicine: the caregiver. “Pediatricians have long understood that patient care must include the family unit,” Dr. Siu points out. “Sometimes we forget about that when we’re taking care of adult patients. But getting a care regimen carried out often depends on the caregiver.”

The Martha Stewart Center for Living at Mount Sinai will bring this innovative approach to life in an unprecedented way. But just as importantly, it will provide a context and a framework for changing the perspectives of medical students, physicians, health care professionals, patients, caregivers, and all of us who look forward to our own healthy aging.

Seniors as Mentors
Continued from Page 4

Reverend Asha Ida Bell, age 70 and a Mount Sinai neighbor, describes her mentoring experience as reminiscent of an old-fashioned form of holistic medicine: “I remember when we had a family doctor who knew all your circumstances: your history, your social situation, the whole person. I was used to house calls.”

Her students have been working with Reverend Bell for two years. “They know my history; they help me decode my lab reports,” she says. “You can actually improve patient compliance by building this kind of relationship,” she adds. “It is so important that patients are valued, that doctors hear you, that you’re respected, that your faith is valued.”

Justin Lipper, a third-year student one of Rev. Bell’s mentees, says, “The Seniors as Mentors program has given me learning experiences that I will remember always.”

“In some ways, Rev. Bell taught me more than a traditional medical school curriculum ever could,” he adds. “I have developed a deeper understanding of what the doctor-patient relationship is truly about.”

“I told my students they lucked out with me,” says Rev. Bell. “You’re either 100% alive or 100% dead, and I am someone who will push until the last breath.”
Collaborative care for families

Palliative care is not just for the terminally ill, but for adults of any age with serious illness – and their families. Patients are matched with palliative care based on need rather than expected outcome – in other words, whether the patient is hoping for a cure, remission, or the best possible quality of life. Distinct from hospice, it is not preparation for dying but medical care focused on relieving pain, managing symptoms of multiple illnesses, spotting and reducing medication side effects, as well as education and advocacy.

The Center to Advance Palliative Care is a national organization dedicated to increasing the availability of quality palliative care services for people facing serious, complex illness. The Center has a comprehensive, easy-to-read website for consumers such as patients, family members, and other caregivers, as well as professionals: GetPalliativeCare.org. The Hertzberg Palliative Care Institute at Mount Sinai also helps patients and family members to make critical decisions that will have long-term effects on the lives of their loved ones – as well as their own. One of its most important tasks is facilitating collaboration on these decisions among patients, family members and care providers.

Growing the team in the Martha Stewart Center

The palliative care team makes sure that all the specialists involved in a patient’s care are on the same wavelength. Team members also provide the primary physicians and specialist with input and information so that they’re aware of all the options for helping patients live as rich and full a life as possible. While the teams at Mount Sinai have always included a physician and a nurse practitioner, in the Martha Stewart Center the palliative care team will be expanded to include disciplines like social work, massage therapy, chaplaincy, and others, based on the needs of the patient.

The professionals who deliver palliative care don’t take over a patient’s medical treatment. “We are entirely a consultative service,” Dr. Meier explains. “We work along with the primary physician, usually with a group of physicians that includes specialists.” It’s not reasonable to expect an individual specialist to be able to juggle all the implications of complex, chronic diseases, she notes. “When you have heart failure, you go to a cardiologist. But you don’t really expect that cardiologist to be able to handle the myriad other medical issues that accompany heart failure, such as fatigue, depression, or pain.” Surprisingly, for example, pain is a common symptom in heart failure – as common as shortness of breath. “Unfortunately, many doctors and nurses were not trained to manage pain,” she points out. The Center to Advance Palliative Care is working to close that education gap, while the Hertzberg Institute strives to provide the services that are needed today for our patients and their families.

“The Martha Stewart Center is focused on helping all people live as well as possible and as long as possible,” adds Dr. Meier, “and palliative care is a crucial contributor to both of those goals.”

Walk in for a Free Flu Shot

If you are a patient in Mount Sinai’s Coffey Geriatrics Practice, we encourage you to receive a free flu shot at The Martha Stewart Center for Living 1440 Madison Avenue at East 99th Street at any time on Tuesday, December 4th, between 9 am and 4 pm. No appointment necessary!
Mr. Pei’s talent and award-winning design sense are already clearly in evidence at Mount Sinai in the soaring, critically acclaimed Guggenheim Pavilion, which he designed in 1981 in collaboration with his father, world-renowned architect I.M. Pei. Among their other medical collaborations, the father-and-son team designed the transformation of the Ronald Reagan UCLA Medical Center from a jumble of buildings and corridors to a well-organized, light-filled place of healing and learning. This year, C.C. Pei was awarded the UCLA Medal – the university’s highest honor, since it does not confer honorary degrees. With his father a previous recipient, the two became the first such duo in the University’s history.

A Center for Living with a strong identity

The Guggenheim Pavilion’s younger sibling, the 7,800-square-foot Martha Stewart Center for Living at Mount Sinai will be housed just around the corner, inside the Klingenstein Clinical Center on Madison Avenue. It will serve as the innovative new home for Mount Sinai’s rapidly growing outpatient geriatrics program, with its 3,000 patients and almost 12,000 visits last year.

The Martha Stewart Center features a dedicated entrance, clearly marked by a canopy. “Mount Sinai and Martha Stewart want the Center to have its own strong identity, and this is an excellent way to do that,” says Mr. Pei. The separate entrance also makes it easier for patients to find the Center, and to meet up with caregivers and family members after their appointments.

It also reflects Mount Sinai’s commitment to providing centralized care and services for its geriatrics patients, and helps both patients and caregivers to sidestep the Medical Center’s hallways. Departing patients can wait in comfort for transportation and companions, in a generously sized waiting area that is well inside the building.

Earth tones and extra privacy

“The real challenge here,” says Mr. Pei, “was to organize the space so that it doesn’t feel like a hospital.” Mr. Pei worked closely with Martha Stewart and with Brent Ridge, MD, MBA, Assistant Clinical Professor of Geriatrics and Adult Development at Mount Sinai Medical School and Vice President for Healthy Living at Martha Stewart Living Omnimedia, to ensure that the design and the décor achieved that goal. The wide central corridor has a vaulted ceiling, framed artwork, and special lighting, as well as earth-toned walls and floors rarely found in traditional hospital settings. To maximize privacy, says Mr. Pei, the windowed waiting rooms are set at a distance from the entrance and check-in desk, while the exam rooms are specially aligned for additional privacy. Exam rooms also provide space for caregivers to join patients and their healthcare providers when requested.

With its multi-disciplinary, multifaceted approach to healthy aging, the Martha Stewart Center for Living includes ample space for non-clinical services and activities. The Coffey Practice will continue developing its integrative medicine programming here, including the Senior Spa, which has welcomed both patients and community members for more than two years. Space is also set aside for meeting with family members and caregivers, training medical students and residents, and supportive services from volunteers and social workers. Although a patient record room was included in the original design, reports Mr. Pei, it will be reassigned – Mount Sinai is well on its way to eliminating paper records.

The Center’s logo features the bonsai tree, product of an age-old Japanese cultivation technique. If carefully tended with basic but precise techniques, these trees can live for more than a hundred years. As they age, they often become more sophisticated, more powerful, and more streamlined – making the bonsai the perfect symbol for the Martha Stewart Center for Living.
The New York Junior League has a long history of supporting worthy New York projects with its extensive, well-established network of highly trained, versatile volunteers. “We advocate, we train, we volunteer, we effect change in the city, we change lives,” says Mari Dubois, the League’s Community Program Vice President. In addition to its focus on seniors at Mount Sinai, the New York Junior League’s ongoing programs around the city work for change in domestic violence, rape counseling, childhood obesity, and a range of public policy issues.

After three years of collaborating with Mount Sinai on providing health awareness and other workshops for geriatrics patients, the League has now awarded Mount Sinai a Volunteer Impact Project (VIP) grant. This innovative program will provide approximately a dozen volunteers to serve as Living Well Guides at the Martha Stewart Center for Living – along with a $25,000 operating budget to support their activities there. The Guides will help ensure the Center lives up to its “high touch” standards, serving as aides to the Center’s staff, welcoming patients on arrival, visiting with waiting patients, and helping patients, caregivers and family members to make the most of the Center’s comprehensive services.

The Living Well Guide care will not end when the patient leaves the Center, under the VIP plan. Guides will also serve as “buddies” to senior patients who request additional outreach, placing weekly phone calls to them. Thus, in addition to guidance and emotional support, volunteers can also provide reminders about appointments, non-medical information, and connections to community resources such as Center classes and workshops. Of course, the Living Well Guides will be carefully screened and closely supervised by Mount Sinai staff. The guides will attend a monthly meeting with the coordinator of Mount Sinai’s volunteer programs and other Mount Sinai staff and faculty, in order to raise concerns, receive feedback, and help to develop the program.

Perhaps the most innovative feature of the League’s contributions to Mount Sinai, however, is its Living Well Trainer Program. This unique program will work closely with the Mount Sinai Department of Volunteer Services to create and implement comprehensive training for all volunteers who work in the Martha Stewart Center for Living. Prospective volunteers will attend the mandatory six-week certificate-training course; League Living Well Trainers will attend additional training before going on to their duties. The curriculum will include a basic Mount Sinai volunteer orientation, including training in HIPAA and other confidentiality, infection control, and the role of the Living Well Guide in the Center.

“The League is committed to excellent training in all our work,” explains Mari. “We feel that it’s a privilege to work in the community, and so it’s in our best interest to make sure that our volunteers are well-prepared.” The League’s volunteers facilitate workshops throughout New York City on a variety of health-related issues: women’s cancer prevention, stress, diabetes, asthma, infant care, safety in the home, heart disease for women, autism, and Alzheimer’s, among many others.

The League’s commitment to the Martha Stewart Center will extend over at least three years, adding programming and services as the collaboration continues. “We’ll keep up our program of senior care day and evening workshops,” says Mari, “as well as workshops that are designed specifically for caregivers. We also hope to launch a Saturday walking club, a book and movie club, and computer training – so our seniors can research their own health information.”

“We have such dedicated volunteers to the senior population,” says Mari. “For many of them, it’s personal: they have parents or grandparents who are aging.”

“They’re so thankful that we are expanding our scope with this population and this community,” she adds. “All our years of volunteering and training, creating our programs, our experience in the community with all the populations we have served – we are ready to provide the training for our seniors, their caregivers, and the volunteers at the Martha Stewart Center for Living.”

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