

Center for Excellence in Aging and Lifelong Health

Center for Excellence in Aging and Lifelong Health (CEALH)

15 years of caring for the community through service to older adults.

2002-2017 ACCOMPLISHMENTS WITH SPECIAL FEATURES HIGHLIGHTING 2016







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Get Involved, Support Us

"As we age we will control our destiny in a place of our choosing."

That mantra guides us here at the Riverside Center for Excellence in Aging and Lifelong Health (CEALH).

Today, our community faces challenges in more significant ways than anyone could have imagined. The population of adults 65 and older is greater now than ever before. In the United States alone, more than 32 million individuals are 65 or older. By the time all the baby boomers reach 65, there will be more than 80 million Americans in that cohort.

The reality is that aging is complex. It can be a harsh and confusing path to navigate when we realize one day that we, and our loved ones around us, have aged. In the absence of someone to help, that path might even seem impossible to control.

But imagine if at least this Virginia community – residents, medical professionals, community groups – realized that services and resources are available right here at CEALH.

Imagine if everyone with an aging loved one knew they could access a Geriatric Assessment Clinic and get a baseline understanding of where they are in the aging process.

Imagine if family and professional caregivers all knew they could access training on how to care for themselves to best care for others. Imagine driving assessments that help keep older adults safe on the roads, or continuous research that gets fed in real time to the very medical professionals caring for older adults and their families each day.

Those services are available, and more, right here at CEALH. We've spotlighted much of that work here, in CEALH's first report, highlighting our work in 2016 and are celebrating the evolution of the Center since its founding in 2002.

Our Founding Fathers held a vision that we would indeed be a model community that offered by example how a region honors and serves older adults and their caregivers. CEALH is leading the way here in this region, and indeed across the state, as we advocate for aging with grace, dignity, independence, choice and control of our lives. This is our mission and vision and we will not stop until this is a reality in our community.

Richard Jackson

C. Richard Ladron MRA CSA Expositive Director

G. Richard Jackson, MPA, CSA, Executive Director, CEALH

A History of Excellence

Center for Excellence in Aging founded by the following agencies:

- The Crossroads Group
- The College of William & Mary
- Eastern State Hospital
- Eastern Virginia Medical School

Riverside, through the Senior Services Coalition, provides the region with a master aging plan for the community, known as CAPOA (Community Action Plan on Aging – 2010-2020).

CEALH earns
Commonwealth Council
on Aging Best Practices
Award for its caregiver
programing.

2002

- The Peninsula Agency on Aging
- Riverside Health System
- Sentara Healthcare
- Virginia Commonwealth University Medical Center

2007

Riverside Health System becomes the major benefactor for the Center for Excellence in Aging.

2010



2012

Riverside fully integrates the Center within the health system and renames it CEALH – the Center for Excellence in Aging and Lifelong Health. 2013





By the Numbers (2016 in Review)

A Community Served in 2016

278 Geriatric Assessment
Clinic Patients (147 New
Patients, 131 Follow-Up
Appointments)

191 Jane D. McKinney

Driving Rehabilitation

Program Evaluations

836 Health Care
Professionals Educated
in Mental Health and
Aging Topics

60 Family Members

Counseled in

F.A.M.I.L.I.E.S. Program

for Dementia Caregivers

859 New Clients Served By Senior Care Navigation

Remote Patient

Monitoring Patients

Operation Family
Caregiver Coached
Caregivers of Veterans

250 Nursing Facility
Professionals Trained in
Dementia Care Via
Microlearning Program

Family Members and
Professional Caregivers
Served by "Caring For You,
Caring For Me"



Graduates of Stanford
University Chronic and
Diabetes SelfManagement Workshops

78 ChooseHome Members

962 GoldenClub
Members Served

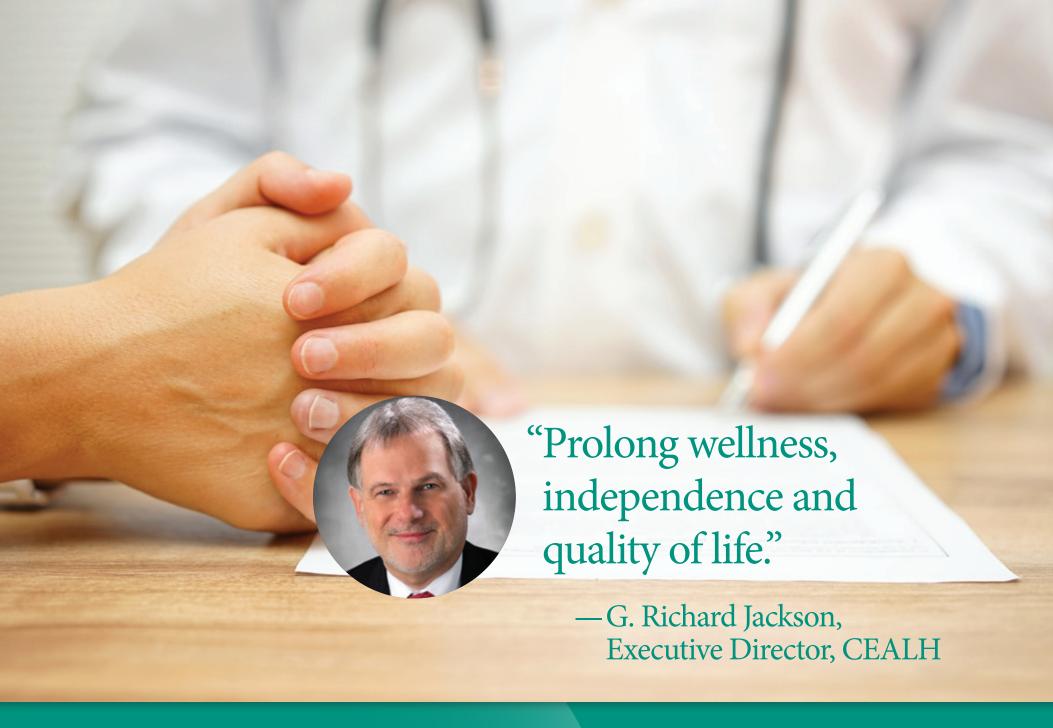


Community 60 **Presentations** ... including invitation from former First Lady Rosalynn Carter to CEALH's Christine Jensen, PhD to present at the Military Caregiver Summit in Atlanta (July 2016); and invitation from John A. Hartford Foundation's Age-Friendly Health Care Organization's expert meeting in

Cambridge, Massachusetts

to Kyle Allen, D.O.





A Culture Shift: Helping Identify 'What Matters to You' Through the Cornerstones of CEALH

CEALH executes on its core mission through the following four cornerstones of service.

Innovation & Business Development through health services research to gather the seed capital to create new care models and put them into operation to benefit older adults across the community.

- Remote Home Monitoring Program
- Microlearning Program
- Silver Saddles Program
- Vitalize 360 Research and Pilot
- Chronic Disease Self Management Program
- Double Duty Caregivers Pilot
- Veterans Behavioral Health Outreach

Community Partnerships & Collaborations to engage older adults and their caregivers where they are, in their homes and in the community.

- Caring for You, Caring for Me
- Operation Family Caregiver
- F.A.M.I.L.I.E.S. Counseling Program for Caregivers of Persons with Dementia
- Coalition for Chronic Condition Awareness, Resources and Education (CARE)

Business Innovation to find key methods to help older adults age in a place of their choosing, to age well at home.

- ChooseHome
- Telemedicine

Clinical Services to obtain a full physical, emotional and spiritual view of older adults.

- Geriatric Assessment Clinic
- Driver Rehabilitation and Evaluation Program



Change the conversation with older adults to 'what matters to you' instead of 'what's the matter with you?'



Innovation & Business Development Spotlight

In 2013, CEALH received \$188,128 in grant revenue to support its various mission areas, from its caregiver courses to research programs evaluating how care for older adults is best delivered across the community and in regional hospitals.

By 2016, that grant revenue increased to \$636,054.

"What's really telling about our growth in the grant space is that years ago we were chasing grants, researching where they were, how to best apply and how to best position CEALH to be a recipient," said Christine Jensen, PhD, CEALH's Director of Health Services Research. "Today, we still research which grants to apply for, but more and more organizations are approaching us, asking us to apply for their grants because they want CEALH to be involved in their research, in their programming."

Grants not only help fund the operation of CEALH, Jensen said, but each grant also offers CEALH an opportunity to further its mission to integrate interdisciplinary aging research with clinical capabilities to develop innovative programming.

"It's a blend of research and community programming and approaching issues in new ways, which is where innovation comes in," Jensen said. "We never do these projects in isolation. It's always a collaborative effort with community groups – the local community, residents, state agencies, national organizations and more – because we're better together."

Among others, some key, innovative grant programs ongoing at CEALH include:

- Remote Home Monitoring Program helps reach older adult patients in rural regions more easily.
- Microlearning Program for professional caregivers of older adults uses technology (in mini computer-based courses) to teach them about the complexity of geriatric conditions and how each can manifest in the lives of their patients.
- Silver Saddles Program brings older adults with dementia into an equestrian therapeutic riding program. Early research not only indicates that therapeutic riding helps older adults with mood improvements, but it also provides enhanced quality of life in the moment.
- Vitalize 360, an innovative wellness coaching program that encourages physicians and other health care workers who care for older adults to put the patient's wishes at the center of their treatment plans. This program changes the conversation for physicians from asking patients "what's the matter with you" and instead starting a conversation with "what matters to you?"
- Chronic Disease Self Management Program, a Stanford-based program that brings classes to

- the community to learn effective methods to better manage their chronic conditions that present barriers to everyday life.
- Double Duty Caregivers Pilot Program to bring support and care solutions to professional caregivers (nurses, doctors, health care workers) in the health system who are also engaged in spousal or parent care.
- F.A.M.I.L.I.E.S., a free, evidence-based counseling program for caregivers of loved ones with dementia and their family members. The program was featured in 2016 in a PBS documentary, entitled "Alzheimer's: The Caregiver's Perspective."
- Operation Family Caregiver, a free evidencebased coaching program for caregivers of post-9/11 veterans.



"There are only four kinds of people in the world.

Those who have been caregivers.

Those who are currently caregivers.

Those who will be caregivers, and those who will need a caregiver."

Rosalynn Carter

Grant Spotlight:

2016 Marks CEALH's Receipt of the Largest Single Grant in its 15-Year History

Pastoral Care Education Benefiting Older Adults on the Middle Peninsula and Northern Neck

In many convalescent centers and nursing

homes, chaplains come by to visit residents, lead a Bible study or perform communion. While that time is valuable, overall, says Rev. Karen Jones, older adults in those settings have long been an underserved community when it comes to receiving true pastoral care.

"There's not always a pastor available to come in and go room to room, to sit and work with people individually and develop relationships," said Jones, a retired educator from Tidewater Virginia who was ordained in 2015. "But now there is a program that allows us to do that, that teaches us to do that."

Thanks to a three-year, \$333,000 grant from the Robert B. Lantz Foundation to CEALH, in conjunction with the Riverside Regional Medical Center Pastoral Care Department, Jones became a member of the 2016 inaugural class of student chaplains providing spiritual care to older adults through a Clinical Pastoral Education Program on the Northern Neck and Middle Peninsula of Virginia. Riverside received the grant - the largest awarded by the Foundation in its nearly seven-year history - in August 2016 and the first extended program

class started in September 2016.

The Robert B. Lantz Foundation was established in 2010 from the legacy of its founder, Rev. Robert B. Lantz. Lantz was a Lutheran minister, pastoral counselor and an Association of Clinical Pastoral Education Supervisor. He received his certificate in Patient Counseling from the Medical College of Virginia in

1964, which he called the richest educational experience of his life, forming the foundation of his professional career. It was his hope to provide educational opportunities and support to clergy and medical professionals on the Northern Neck.

"My husband and I started coming to this area in 1971 and fell in love with it," said Katherine Lantz, President of the Robert B. Lantz Foundation and also his widow. "When he thought about wanting to do something for the people in this area, this was his vision."

The Robert B. Lantz Foundation awards grants on an annual basis to support the people of the Northern Neck in areas of pastoral education, counseling training for clergy and health care professionals and programs that support mental wellness.

"In a community like this where there are a disparity of available resources for counseling and crisis intervention, clergy are on the front line. They always have been," said Mark Cooper, Chairman of the Board of Directors for the Robert B. Lantz Foundation. "The need for continuing education for clergy, just like for any board certified physician, is important."





"Most people don't grow up. Most people age. They find parking spaces, honor their credit cards, get married, have children, and call that maturity. What that is, is aging."

— Maya Angelou

Community Partnerships & Collaborations Spotlight

"Caring for You, Caring for Me"

5,000

Caregivers Impacted Since 2009

Christine Jensen, PhD calls it the ripple effect.

By the numbers, Jensen, CEALH's Director of Health Services Research. can tell you that in 2016, 25 people – family members and professional caregivers alike - sat around a table during the signature "Caring for You, Caring for Me" program.

The award-winning program consists of five weekly caregiving

education seminars designed to address needs of those engaged in caring for older adults. The signature program of the Rosalynn Carter Institute for Caregiving, "Caring For You" is

designed for family members, professional caregivers and volunteer caregivers of older adults. Supported by grant funding and a small fee paid by the participants, the cost of the entire program is \$45 and includes refreshments, educational materials, and community resources.

> "But we know the impact the program brings goes well beyond the number of people sitting around the table," Jensen said.

In the very first class of "Caring for You, Caring for Me" in 2009, there were 16 people enrolled six family member caregivers, nine professional caregivers and one volunteer caregiver.

The impact of those 16, though, actually totals nearly 200.

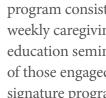
"That ripple effect comes from those professionals who were in that class who take it back to other people they work with," Jensen said. "Also, we know that volunteers are not just touching one person, but likely several at any given time. And with family members, it used to be that we thought you train one family member and one family member benefits. We now know that one-third of all caregivers provide care to more than one relative."

Since 2009, when the program first arrived at CEALH, Jensen calculates that it has impacted more than 5,000 people in the community through the ripple effect.

"The impact has been lasting," Jensen said. "Caregivers who graduated from the program years ago are still in touch with their classmates and with us here at CEALH."

As a result, the Caregiver Commons online resource was added to the CEALH website in 2016 to help foster those continued connections.

This program has received a Best Practices Award from both the Southern Gerontological Society (2012) and the Commonwealth Council on Aging (2013).





"A few conclusions become clear when we understand this: that our most cruel failure in how we treat the sick and the aged is the failure to recognize that they have priorities beyond merely being safe and living longer; that the chance to shape one's story is essential to sustaining meaning in life; that we have the opportunity to refashion our institutions, our culture, and our conversations in ways that transform the possibilities for the last chapters of everyone's lives."

Atul Gawande, Being Mortal:Illness, Medicine and WhatMatters in the End

Why the Need for Aging and Caregiving Expertise?

17.9 Billion Hours

Family caregivers provide **17.9 billion hours** of unpaid care nationwide.

Value: \$217.7 billion

Nearly 60 percent of caregivers for persons with dementia rate the emotional stress of caregiving as high or very high, with 40 percent of caregivers suffering from depression.

In 2014, caregivers logged \$9.7 billion in additional health care costs of their own.

Patients living with dementia have higher costs of care, and costs are expected to increase by 85 percent by 2030, making



dementia the most expensive disease in our society. Without caring for caregivers, who provide largely free support to their families and loved ones, that increase could be even more significant.





To care for others as we would care for those we love - to enhance their well-being and improve their health.

Riverside Care Difference



Business Innovation Spotlight

Choosing Home With ChooseHome

78 Members Enrolled in 2016

Mick and Nancy McAuliffe know a thing or two about making a house a home. Actually, they know about 22 things about it.

Originally from Kansas, Mick made his career in the U.S. Air Force, retiring in 1994 as a brigadier general. During his 30 years in uniform, he and wife of 55 years (high school sweethearts who married in college), Nancy, moved 22 times.

They racked up more moving boxes than they could count, but loved it all the same. They saw the world, raised their two children and made great friends and memories along the way.

But when it came time to pick their forever home, their retirement home, Nancy had her heart set on Williamsburg. And even though both remain active in their 70s, when it came time to think about how they wanted to live as they aged, Mick had his mind set on ChooseHome.

What is ChooseHome?

No parent wants to become a burden on their children as they age, having them log hours navigating long term care services or spending thousands of dollars helping access the health care they need.

That's what residents in Williamsburg, Gloucester and on the Peninsula said repeatedly during a series of focus groups Riverside Health System hosted in 2014.

By 2015 Riverside Health System became the first active provider in Virginia of what's officially called Community-Based Continuing Care (CBCC) with its launch of ChooseHome, an innovative business solution for the community.

ChooseHome, serving older adults throughout Williamsburg, Gloucester, York County and Newport News, provides services and benefits to independent older adults who wish to remain in their homes, but want to have access to a safety net of continuing care services and control over the cost of long-term care.

ChooseHome, which began taking reservations for the program in 2013 before fully launching all the services on June 1, 2015, is offered to

residents 60 and older and brings clients the individualized support they need to remain living in their own home safely and comfortably for as long as possible, possibly for life.

The program is not a house calls program where a physician visits residents in their home, which Riverside does offer in select regions, but is one that helps older adults track and coordinate their medical care through the work of Personal Services Coordinators. Those coordinators develop care plans for the participants in the program.

Because this program includes elements of retirement community living and helps residents stay in their own home, it is still licensed through the Virginia Bureau of Insurance and provides priority access to a Continuing Care Retirement Community should the participant require a higher level of care in the future, such as assisted living or 24-hour nursing care.

Choosing ChooseHome

Mick and Nancy were among the first members to join ChooseHome.

As a Board member at Patriots Colony at Williamsburg who also serves on the Admissions Committee, Mick said he watched time and time again as families agonized over what to do after a devastating event in their lives that required utilizing nursing home or similar levels of long term care.

Mick wanted to have a plan.

"We love our home and want to age in place," Mick said.

That was number one.

But if something were to change their ability to do that, Mick wanted to make "darn sure" he and Nancy knew what they would do and had access to long-term care facilities if and when they needed them.

"It's the old adage that you can't buy fire insurance once your house is on fire," Mick said. "We both realize how fragile life is and that we have to prepare ourselves."

The ChooseHome Personal Services Coordinators

- Charles Martino
- Susan Lewton
- Hannah Barton



"You may not control life's circumstances, but getting to be the author of your life means getting to control what you do with them."

Atul Gawande,
 Being Mortal: Illness,
 Medicine and What
 Matters in the End



Clinical Services, Geriatric Assessments

Geriatric Assessment Clinic

278 Geriatric Assessment Clinic Patient Visits Completed in 2016

Maya Angelou once said that most people don't grow up. They age.

"They find parking spaces, honor their credit cards, get married, have children and call that maturity. What that is, is aging."

But how do members of the community know how well they, or their loved ones, are aging each year and with every new stage of older adulthood?

Assessments and clinics. Specifically the CEALH Geriatric Assessment Clinics.

The Geriatric Assessment Clinic offers comprehensive health screening and medical tests for older adults, which includes an annual wellness assessment typically covered by Medicare and other major health insurance companies. Referrals are required from a primary care physician.

In the world of complex care, we have a list of things we call geriatric syndromes. There isn't an A plus B equals C situation for many older adults. It's generally A plus G plus H plus E equals 27. That's how complex it can be.

Dementia, as an example, is a geriatric syndrome. Though there is typically a cause for the dementia, it starts to impact every one of the domains.

Same thing goes for incontinence, balance and fall risks, depression and so much more.

At the Geriatric Assessment Clinic, patients more effectively uncover more detail about what's happening with their bodies from a trained geriatrician, of which there are few in the nation.

"Patients come to the Geriatric Assessment Clinic and we uncover what they need to do in the next year to remain living the life they choose, doing what matters to them," said G. Richard Jackson, CEALH's Executive Director. "Then they go to their primary care physician to have those things followed up on."

The geriatric assessment itself may take several hours to complete and take place over the course of two to three visits to CEALH.

The length of the assessments is related to the depth of them. Each assessment includes an evaluation conducted by a team that includes a geriatrician, nurse, counselor and physical therapist. Together they focus on memory loss, incontinence, fall risks, depression and medication issues.

Some patients are referred for additional lab work, to include MRIs or CT scans, or to a neuropsychologist who helps to determine

strengths and weaknesses in thinking and memory.

Once completed the team not only provides the results of the assessment to the patient's primary care physician, but also gives a list of recommended strategies individualized to the assessment results and relevant referrals to community resources for continued support.

Why They Come

The most common complaint cited for patients in the Geriatric Assessment Clinic is memory loss.

Roughly one-third of the referrals to the Geriatric Assessment Clinic comes from patients already experiencing memory loss, one-third from patients fearful of memory loss down the road and one-third from family members of older adults experiencing memory loss.

Half of the physicians who refer to CEALH's Geriatric Assessment Clinic are Riverside Health System physicians. The other half are independent physicians or from other health systems in the region – showcasing how fully integrated CEALH remains in the community.

"Our ultimate goal, after all, is not a good death but a good life to the very end."

— Atul Gawande, Being Mortal: Illness, Medicine and What Matters in the End

Clinical Services, Driver Rehabilitation

Jane D. McKinney Driver Rehabilitation **Program**

191 Driving Evaluations Completed

Currently, the entire nation faces the age wave of 10,000 adults turning 65 each day.

And as adults age, certain physical declines begin to occur naturally. Vision and memory become blurry. Upper body strength declines. Our ability to react to activity happening right in front of us slows

"Unfortunately, each of these physical changes that happen quite naturally also can impact our ability to still safely operate a car," said G. Richard Jackson, Executive Director for CEALH. "At the same time, there's probably nothing more important for older adults to remain independent in our community than to operate a motor vehicle."

In Washington, DC or other more urban areas, mass transit is so common and accessible that an older adult can age and still retain that portion of their independence. But in Williamsburg, Hampton Roads and the Middle Peninsula, that's not always the case.

"Older adults driving is at the same time a very sensitive and very critical issue," Jackson said.

That's where CEALH's Jane D. McKinney Driver Rehabilitation Program comes in.

The Driver Rehabilitation Program, named for a generous donor who believed in the program and the mission to keep the community and its aging population safe on the roads, specializes in helping individuals become safe and capable following injury or illness, as well as evaluating those experiencing a change in abilities as a result of the natural aging process.

CEALH's program is among a small group of specialized programs in Virginia that provides this service.

Family members, primary care physicians, law enforcement and community advocates refer patients to the program, which costs \$350 per evaluation (a sliding scale pricing structure is available to those who qualify).

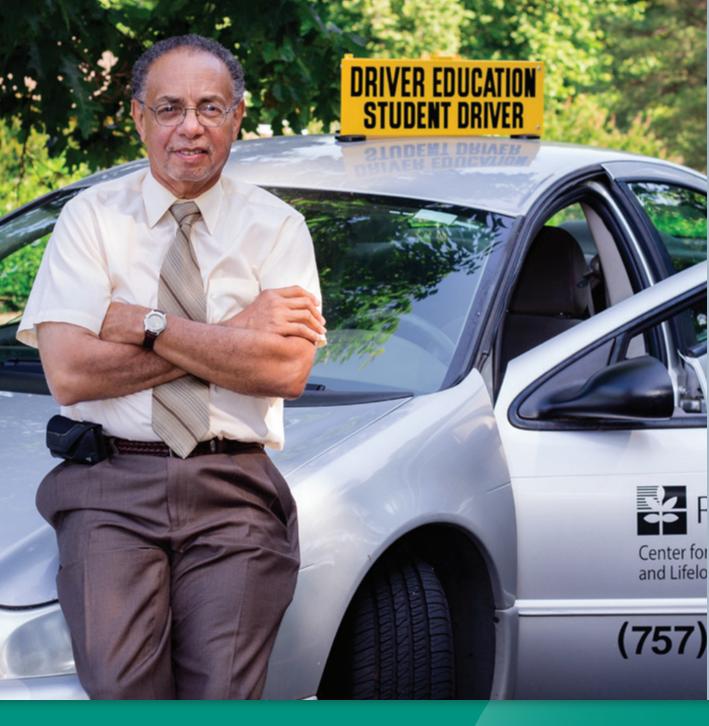
The program takes about 90 minutes to complete with a Certified Driver Rehabilitation Specialist. It includes collecting data from family, physicians and then undergoing a series of tests to evaluate memory, vision, upper body strength and reaction time.

Many of the tests are done on pen and paper, but each client is also evaluated behind the wheel and on the road.

The series of tests are critical to a true evaluation on someone's ability to drive, Jackson said.

"Even the DMV is not good at evaluating this," Jackson said. "If you go into the DMV to renew your license as an older adult, they will do an eye exam and send you on your way. But there is so much more to it. Our driving and rehabilitation program is comprehensive."

Roughly half of the drivers who complete the CEALH evaluation receive a recommendation to amend their driving, including not to drive at night, on the interstate, or more than 10 miles from home. The other half learn they are no longer able to safely remain behind the wheel.



"We've been wrong about what our job is in medicine. We think our job is to ensure health and survival. But really it is larger than that. It is to enable well-being."

Atul Gawande,
 Being Mortal: Illness,
 Medicine and What
 Matters in the End

About Us

The Riverside Center for Excellence in Aging and Lifelong Health (CEALH), originally The Center for Excellence in Aging and Geriatric Health, was incorporated in 2002 under the guidance of The Crossroads Group. This group was a collaboration between community and government organizations that had identified a gap in the conversion of research into application for the older adult population.

A number of organizations conducted aging-related research and health systems across the country focused on providing geriatric and palliative care with a limited level of clinical or health services research, but a hybrid of the two models was rare. The Crossroads Group solicited like-minded institutions in the Williamsburg area to combine their resources in the development of a center that would foster both academic and clinical research in a way that would allow for direct application to the older adult population.

This founding group included:

- The Crossroads Group
- The College of William & Mary
- Eastern State Hospital

- Eastern Virginia Medical School
- The Peninsula Agency on Aging
- Riverside Health System
- Sentara Healthcare
- Virginia Commonwealth University Medical Center

In 2007, Riverside Health System established an endowment at CEALH which gave the Center financial stability in challenging economic times.

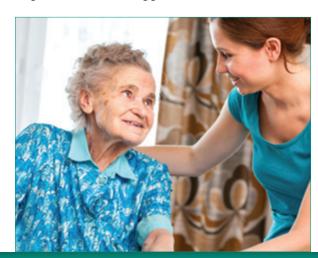
In 2012, Riverside Health System merged CEALH into its Lifelong Health and Aging Related Services division to allow for CEALH's mission to be applied at even greater levels.

Today, CEALH continues its nonprofit work to fulfill its mission to improve the quality of life for older adults by integrating academic, clinical and health services research with the capabilities of local service providers to develop and implement innovative community-based and health care system initiatives that can be replicated and sustained by Riverside Health System.

Riverside CEALH places special focus on applied research for operationally sustainable programming to meet the needs of the most vulnerable members of our community, a critical

element of population health management.
Riverside's vision is to lead the development of model communities that will promote the wellbeing and independence of older adults through translational research and widespread application. This amplifies Riverside's commitment to Research and Discovery across the entire health system and community partners.

As outlined in this report, Riverside continues to focus on identifying areas of need within the populations it serves, developing pilot programs and working across the health system and with community partners to implement the pilots on a broad scale. CEALH's ability to bring community partners together with the common goal of improving health care for older adults is critical as the baby-boom age wave continues to grow and accompanying public policy is put in place to improve the nation's approach to health care.





G. Richard Jackson, MPA, CSA, Executive Director CEALH



John Vaughter, CDRS **Driving Rehabilitation** Specialist



Hoskote Nagrag, M.D. Medical Director



Mary Martha Stewart, MA, Director of Culture Change



Christine Jensen, PhD Director of Health Services Research



Kathy Fletcher, RN, DNP, NP-BC, FAAN, Senior Research Associate



Kim Weitzenhofer, MPH, LNHA, CSA, Director of Community Relations



Denise Butler, MA, CSA Geriatric Assessment Coordinator

Iessica Hewitt Business Strategy and Analytics

Danielle Hernandez Office Manager





Support Us

At Riverside, it's our mission to care for others as we would care for those we love - putting our patients at the center of everything we do. When it comes to health and happiness, we believe there is no such thing as "good enough," and we strive to give our communities the best health care possible. The Riverside Foundation is a steward for this mission to provide a higher standard of care. Through your support, and our health, educational and community programs - including those available for older adults and their families at CEALH - we can transform the definition of care.

Together, we can achieve the remarkable.

Help Raise the Standard.

Your generosity fuels our mission to provide a higher standard of health care. For more information about how you can make a difference, call the Riverside Foundation at 757-234-8740 or visit us (and give) online at www.riversideonline.com/foundation.

With your support, we believe we can transform health care. The Riverside Foundation partners with the communities we serve so that we can continue to promote wellness as leaders in remarkable care. Together, we can realize a higher standard. Together, we can care for others as we would care for those we love.

Address:

Riverside Foundation

Denbigh Professional Park 608 Denbigh Boulevard, Suite 700 Newport News, VA 23608

Phone Number(s): Phone: (757) 234-8740 Fax: (757) 369-1862







Riverside's mission is to care for others as we would care for those we love.

Riverside Center for Excellence in Aging and Lifelong Health 460 McLaws Circle, Suite 110, Williamsburg, VA 23185 (757) 220-4751 | (757) 220-4756 (Fax)

Riverside CEALH is a not-for-profit organization whose vision is to integrate interdisciplinary aging research with clinical capabilities to develop innovative programming that can be applied and sustained by Riverside Health System, the community, and other providers of aging-related services to improve care and better meet the needs of a growing older adult population.



Center for Excellence in Aging and Lifelong Health

www.excellenceinaging.org

Riverside is a 501c(3) tax exempt, non-profit organization dedicated to improving health and wellness.