Golden Circle Health: Unlocking Nurse-Led Innovations for Thriving Seniors in St. Mary's County

Founded by Janine Horne, MSN, Ed, RN, AHN-BC
Founder, Zen Well Studio

Nurse-Led • Data-Driven • Heart-Centered

Zen Well Studio is an award-winning, registered nurse-led holistic health and wellness practice located in Waldorf, Maryland dedicated to empowering individuals and organizations to thrive, body, mind, and spirit.

Founded by Janine Horne, MSN, Ed, RN, AHN-BC, the studio blends clinical expertise with time-tested healing modalities to deliver personalized programs for corporate teams, senior communities, and private clients.

Services include:

- Mind-Body Practices: Guided meditation, sound healing, Reiki, and yoga tailored to each client's needs.
- Therapeutic Infusions: IV hydration and nutrient injections designed to optimize energy, immunity, and recovery.
- Consulting & Coaching: Holistic health audits, wellness coaching, and the Zen Well Teach Incubator, equipping practitioners to launch their own nurse-led wellness enterprises.
- Community & Corporate Partnerships: Evidence-based programs addressing chronic disease management, stress reduction, and resilience—implemented through schools, senior living centers, and government agencies.

As a certified Black-owned and MBE-certified business, Zen Well Studio combines compassionate care with strategic insight, forging transformative partnerships that foster lasting wellness and organizational wellbeing. Whether guiding executives through stress-management workshops or supporting seniors in mindful movement, the studio's mission remains the same: to nurture holistic vitality, one client at a time.

NURSE-LED | DATA-DRIVEN | HEART-CENTERED

Janine Horne,
MSN-Ed, RN, AHN-BC

Zen Well Studio™

NMSDC Minority Business Enterprise (MBE) CERTIFIED

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Learning Objectives

- Describe a nurse-led, holistic approach that improves older-adult outcomes in chronic disease, falls, and quality of life.
- Translate evidence into a practical on-site service model for senior living & community settings.
- Leave with a 90-day starter plan, metrics, and partnership roles to replicate in St. Mary's.

The Golden Circle: WHY → HOW → WHAT

WHY (Purpose)	Older adults deserve more than fragmented care; they deserve belonging, agency, and evidence-based support that respects their lived experience.
HOW (Principles	Nurse-led coordination, equity-centered communication, and evidence-based movement + lifestyle medicine, measured with simple, transparent metrics.
WHAT (Programs)	On-site functional fitness & balance training, fall-risk screening, mindfulness & stress reduction, nutrition & diabetes-risk counseling, vitals checks, and referral pathways.

- ~15% of St. Mary's residents are age 65+. Aging population continues to grow.

St. Mary's Snapshot: The Need

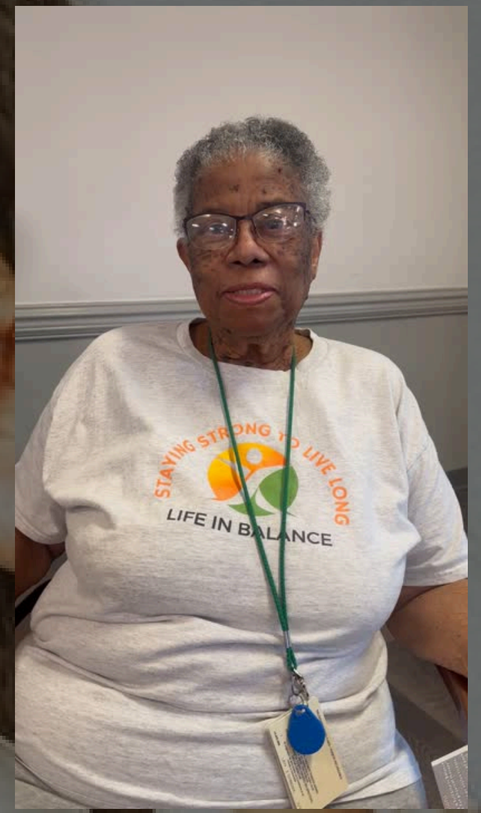
Falls and chronic conditions (hypertension, diabetes) drive avoidable ED visits, hospitalizations, and functional decline.

Trusted, on-site prevention & self-management supports are critical — especially where transportation and health literacy are barriers.

What Seniors Tell Us

Voice of resident themes:

"I want to feel steady on my feet."
"I don't want to be a burden."
"I'm overwhelmed by meds & numbers."
"I want programs that are for us, not just at us."



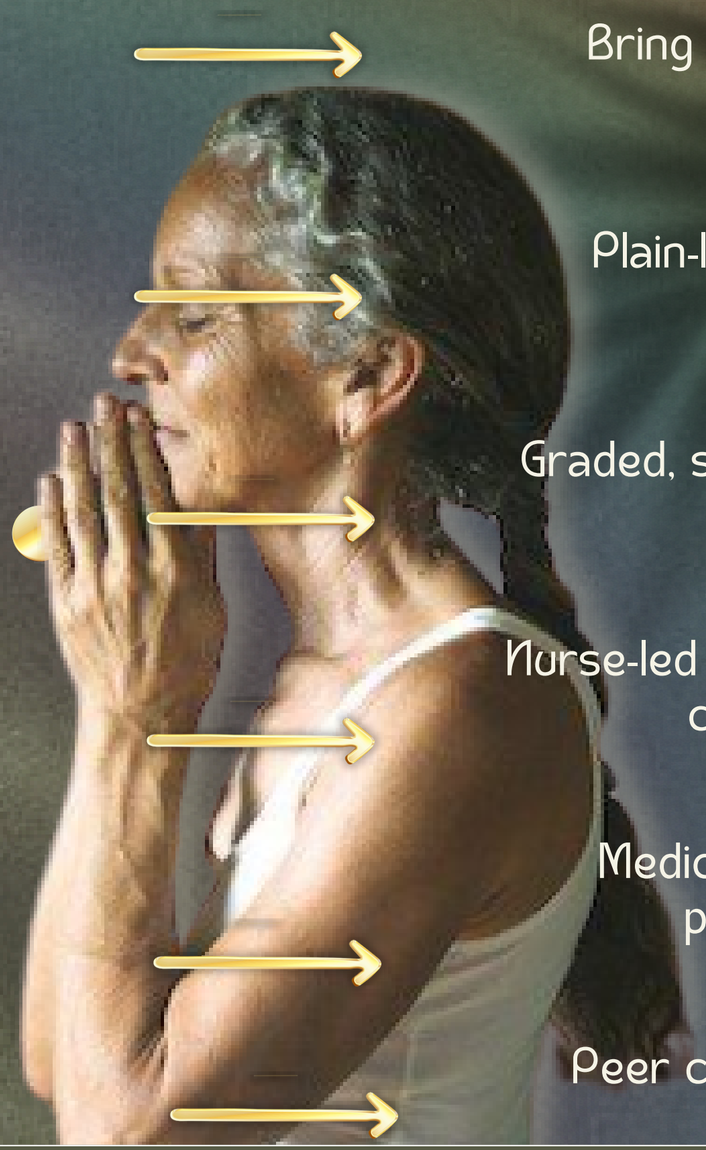
What our Cedar Cane survey says (selected resident voice):

"Stretches, balance exercises... Excellent trainer."

"I really like that he works a lot on balance... very good, beneficial program."
"It helps a lot to have an exercise schedule to stick to... balance exercises help me the most."
"Use lots of stretches and muscles... could use more arm exercises."
"Since 1 hr is a long time, it helps to break up class with some games (cornhole)... would like some memory games."
"We would benefit from an additional session... later in the day might increase participation."

Barriers We Design Around

Transportation & access	Bring services on-site; align with community transit when possible.
Health literacy	Plain-language, visual tools, teach-back, bilingual materials.
Fear of falling	Graded, success-oriented balance progressions; safety checks each session.
Trust gaps	Nurse-led continuity & warm handoffs to primary care and community programs.
Polypharmacy	Medication literacy hours; partner pharmacist/PCP consults.
Social isolation	Peer cohorts & community rituals (celebrate milestones; buddy systems).



HOW: Evidence-Based Pillars

Multicomponent functional fitness	(balance, gait, strength, mobility).
Fall-risk screening	(history, gait/balance, home hazards) with prevent-plan & referrals.
Cardiometabolic risk reduction	(nutrition, movement minutes, weight maintenance).
Stress, sleep & self-regulation	(guided meditation & sound healing)
Medication & vitals literacy	(BP, glucose, medication review prompts, PCP follow-ups)..
Equity-centered communication	(plain language, person-first, culturally responsive).
Measurement & rapid-cycle improvement	(simple dashboards, feedback loops).

The Movement Core

Design:

Chair-to-stand strength progressions (quads/glutes).
Narrow-base to tandem stance; perturbation & head-turn drills; cueing for ankle/hip strategies.
Gait tasks (obstacle, dual-task); step-over & reach; ankle mobility & calf strength.

Frequency: 2–3×/week; 30–45-minute sessions; RPE-guided.

Safety: Pre-class check-in; BP/HR red-flags; space & tripping hazard sweep; hydration.

Micro-metric examples:

30-second chair stand reps

4-stage balance hold time

4-meter gait speed

Fall-Prevention Workflow

Screen → Assess → Intervene

- Screen: Single fall question + fear of falling + 4-stage balance.
- Assess: Medication review prompts; vision/footwear; orthostatic vitals; home hazard checklist.
- Intervene: Multicomponent exercise; med optimization via PCP/pharmacy; OT/PT referral; home safety education; assistive devices; follow-up cadence.

Documentation: SOAP-lite note; incident log; same-day PCP referral note template.

Cifestyle focus: movement minutes, fiber & hydration, balanced plates, sodium awareness, label reading, mindful snacking.

Diabetes prevention/management: referral pathways to CDC-recognized programs; weekly weigh-ins if indicated; supportive micro-goals.

Culinary demos: microgreens integration; easy one-pot meals; budget-friendly swaps.

Cardiometabolic Risk & Nutrition

Stress, Sleep & Self-Regulation

- Guided meditation & breathwork to lower sympathetic arousal; 5-minute “calm drills.”
- Sound healing sessions (gentle vibrational support) to support relaxation and sleep hygiene routines.
- Home practice cards (3–5 minute routines) with large-print visuals.

Equity-Centered Communication

Person-first, non-stigmatizing language; avoid jargon; use large print/high contrast.

Teach-back & pictorial tools; culturally responsive examples/recipes.

Accessibility: chairs with arms, amplification, captions, translation options.

Measurement That Matters

Our standardized assessment battery (Cedar Lane):

Safety & access: Low-impact, scalable moves; chairs, rails, water station; pre-class screening.

What we track: Inputs (sessions, participation, safety); Process (% screened, referrals closed, ≥150 min/wk); Outcomes (↑ chair stands, ↑ gait speed, ↑ tandem stance, ↑ confidence/satisfaction; ↓ falls & ED visits).

Core metrics (3–6 mo): Chair Stand, Gait Speed/TUG, Static Balance, 2-Minute Step, ABC confidence, NPS.

Equity lens: Break out by language, age bands, mobility aids; close gaps with targeted changes.

WHAT: Cedar Cane Senior Civing

Setting: Independent senior living community in Ceonardtown, MD; on-site, nurse-led programming.

On-site program goals:

Improve steadiness/confidence; build BP/glucose & medication literacy; increase social connection; reduce stress & improve sleep.

Safety & access: Cow-impact, scalable moves; chairs, rails, water station; pre-class screening.

Example weekly cadence (customizable):

Weekly cadence (example): Mon Functional Fitness (45m); Wed Meditation + Vitals (30m + 30m); Fri Strength & Mobility + Ask-a-Nurse (45m + 30m).

Cedar Cane: Early Signals & Stories

Satisfaction: Predominantly 5/5; residents value balance + stretching and social connection.

Engagement drivers: Structured schedule; light games (e.g., cornhole) boost participation.

Program tweaks from feedback: Add more arm/leg sets; brief memory/dual-task drills; pilot later or extra weekly session.

Trust, Safety & Dignity

Nurse presence builds continuity & psychological safety.

Consent & privacy (minimum necessary info; no forced sharing).

Transparent red-flags (when we pause a session, when we refer).

Celebrate micro-wins (first unassisted sit-to-stand; consistent attendance; sleep improvements).

Implementation Playbook

90-Day Plan: Wks 1–2 Site ready + partners → Wks 3–4 Enroll + baselines → Wks 5–12 Run 2–3 sessions/wk + vitals & monthly feedback.

Roles: RN lead; wellness instructor; aide/volunteer; light data support.

Partners: Health Dept, MedStar St. Mary's, senior housing, pharmacists, DPP, faith/community.

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Policy, Billing & Sustainability

Align with county chronic disease priorities (falls, diabetes, HTN, healthy eating/active living).

Funding braid: local grants; hospital community-benefit; payer pilots (wellness/SDOH); employer/community sponsorship; resident council mini-grants.

Data value: share de-identified outcomes; integrate with partner dashboards; co-publish briefs.

Roles & Commitments

What partners do:

- Provide space & scheduling, help with resident outreach, coordinate referrals and interpretation, and join monthly quality huddles.

What Zen Well Studio provides:

- Nurse-led program delivery, safety protocols, measurement, resident-friendly materials, warm handoffs, and quarterly outcomes summaries.

Equity lens: remove barriers (transport, language, cost) wherever possible.

Call-to-Action

If you manage a site:
Pilot a 12-week cohort with us this fall.

If you're clinical/public health:
Establish bi-directional referrals & share your DPP/fall-prevention resources.

If you're a funder:
Sponsor a building-based pilot; we'll deliver outcomes monthly.

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THANK YOU!

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