



Age-Friendly Health Systems

Engaging Nebraska Communities

Age-Friendly Health Systems is an initiative of The John A. Hartford Foundation and the Institute for Healthcare Improvement (IHI) in partnership with the American Hospital Association (AHA) and the Catholic Health Association of the United States (CHA).



Our Time Together Today

- Age-Friendly Overview
- 4Ms framework
- Medication
- Mentation
- Mobility
- What Matters
- Measurement using the 4Ms
- NHA Community Approach
- Recognition



Age-Friendly Health System Partners









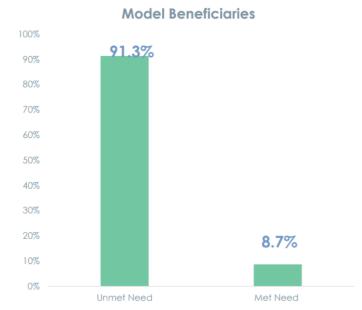
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Evidence-based Care Not Reliably Applied

We have lots of evidence-based geriatric-care models of care that have proven very effective

Yet, most reach only a portion of those who could benefit



IHI Analysis of Model Beneficiaries 2016
Met Need – 8.7%
Unmet Need – 91.3%



Evidence-based Practice Changes

Methods: Reviewed 17 care models with level 1 or 2a evidence of impact for model features

90 care features identified in pre-work

Redundant concepts removed and 13 discrete features found by IHI team

Expert Meeting led to the selection of the "vital few": the 4Ms



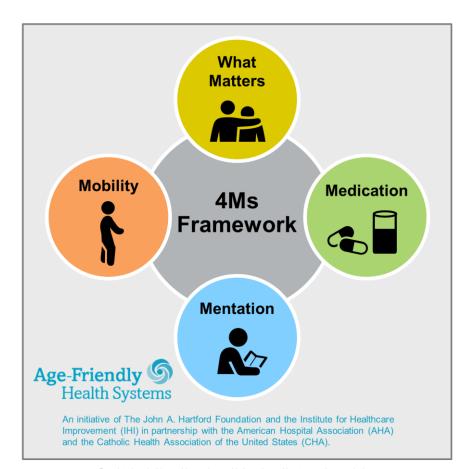
Build a movement so all care with older adults is equitable age-friendly care:

- Guided by an essential set of evidence-based practices (4Ms);
- Causes no harms; and
- Is consistent with What Matters to the older adult and their family.



Why the 4Ms?

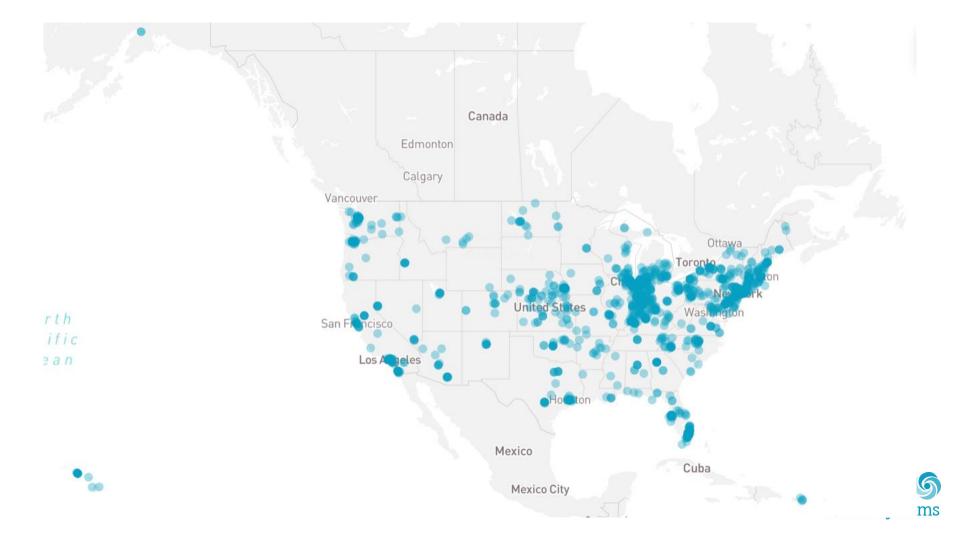
- Represents core health issues for older adults
- Builds on strong evidence base
- Simplifies and reduces implementation and measurement burden on systems while increasing effect
- Components are synergistic and reinforce one another

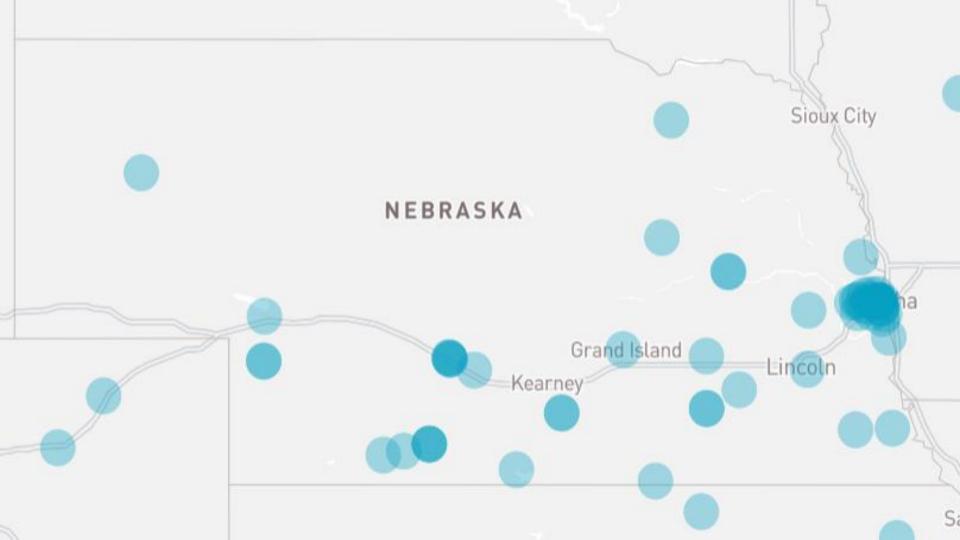


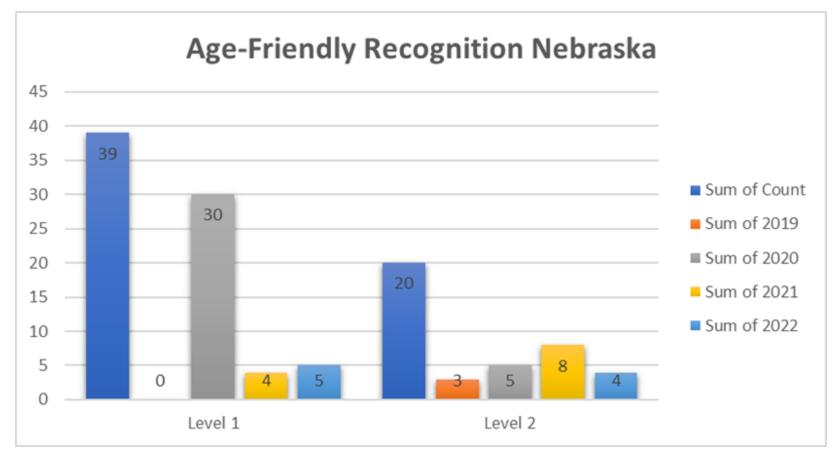














2022 Age-Friendly Nebraska

- Spring Cohort
 - 7 sites recognized as Level 1
 - All are on Track for Level 2!
 - 1 site is pending Level 1

- Fall Cohort
 - Expecting 15+ sites to enroll in Fall Cohort
 - Welcoming sites from Alaska, Kansas, and Iowa
 - Networking, support, because it MATTERS!







Evidence-base

What Matters:

 Asking what matters and developing an integrated systems to address it lowers inpatient utilization (54% dec), ICU stays (80% dec), while increasing hospice use (47.2%) and pt satisfaction (AHRQ 2013)

Medications:

- Older adults suffering an adverse drug event have higher rates of morbidity, hospital admission and costs (Field 2005)
- 1500 hospitals in HEN 2.0 reduced 15,611 adverse drug events saving \$78m across 34 states (HRET 2017)

Mentation:

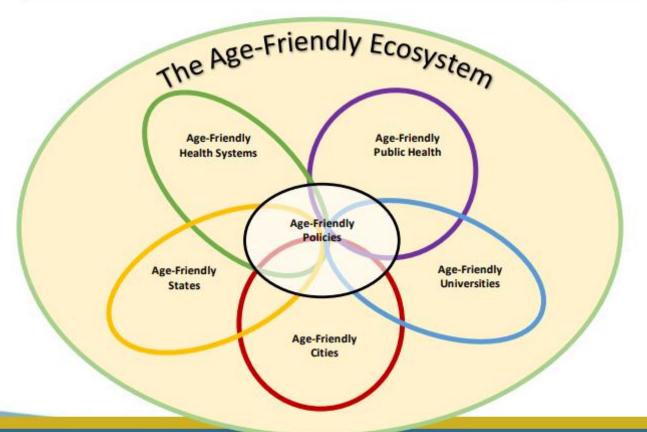
- Depression in ambulatory care doubles cost of care across the board (Unutzer 2009)
- 16:1 ROI on delirium detection and treatment programs (Rubin 2013)

Mobility:

- Older adults who sustain a serious fall-related injury required an additional \$13,316 in hospital operating cost and had an increased LOS of 6.3 days compared to controls (Wong 2011)
- 30+% reduction in direct, indirect, and total hospital costs among patients who receive care to improve mobility (Klein 2015)



Movement toward an Age-Friendly Ecosystem





Measuring the Health of the

Community



- Hospice Length of Stay
- SNF Worsening ADL function rates
- ED Utilization Rate
- ACP Rates
- AWV Rates
- Community Based Needs Assessment Data



Ecosystem Approach

- Police and Fire
- Senior Centers
- Public Health Departments
- Grocery Stores
- Mortuaries
- Churches





Age-Friendly Action Communities



In an Age-Friendly Health Systems Action Community, teams from across different health systems come together to accelerate their work of putting the 4Ms into practice. During the 7-month virtual learning community, your team will test the 4Ms Framework and share learnings.

IHI Age-Friendly Health Systems Action Community

Fall Cohort Registration Opens in August 2022



Engage in an Action Community



Participate in monthly interactive webinars

- •Monthly content calls focused on 4Ms
- •Opportunity to share progress and learnings with other teams



NHA Age-Friendly Coaching and Support of Community Spread

On-site Consultation/Education



Test Age-Friendly interventions

•Test specific changes in your practice using the **Guide to Using the 4Ms in the Care of Older Adults**



Share Description of 4Ms Care

•Submit monthly qualitative feedback on your progress and description of 4Ms Care



Join monthly peer-to-peer topical learning calls

• Join other teams for measurement and testing support in monthly drop-in coaching sessions on various subjects



Leadership track to support system-level scale up

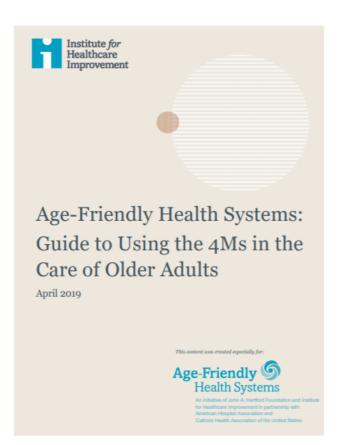
•Leaders join monthly C-suite/Board level calls to set-up local conditions for scale up (hosted by IHI)





Guide to Using the 4Ms in the Care of Older Adults

- Action Community webinars will teach you how to test the 4Ms in your setting
- Access resources to support your journey to become an Age-Friendly Health System on www.ihi.org/AgeFriendly



What's the Work of Each Participating Team

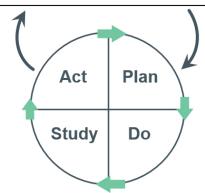
- Know where and how the 4Ms are already in practice and secure leadership support and commitment
- Define what it means to provide care consistent with the 4Ms
- Design/adapt your workflow to deliver care consistent with the 4Ms, including how you will assess, document and act on the 4Ms
- Provide care consistent with the 4Ms
- Study your performance. Measure and share – how reliable is your care? What impact does your care have?
- Improve and sustain care consistent with the 4Ms and share learnings with others

Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?





Description of an Age-Friendly Health System

An Age-Friendly Health System...

- Describes the 4Ms for its hospital and/or practice
 - 1. (e.g. Hospital: How it will screen for delirium every 12 hours; Practice: What tool will it use to screen for depression and how does the screen fit into the AWV flow)
- 2. Counts the number of older adults whose care includes the 4Ms
- 3. Shares the information with the Action Community and IHI to be celebrated





Recognition

- IHI recognizes care locations at two milestones on their Age-Friendly Health System journey:
 - Level 1: An Age-Friendly Health System Participant has completed a 4Ms
 Care Description to outline how it will assess, document, and act on all 4Ms
 at its care setting. At first, their 4Ms Care Description might represent a plan
 that they will test and work towards reliably performing. 4Ms Care
 Description fillable PDF forms for submission can be found here.
 - Level 2: An Age-Friendly Health System Committed to Care Excellence is working towards reliable practice of the 4Ms. They have achieved level 1 and have submitted at least three months of counts of the number of older adults that have received care that included all 4Ms. Counts of older adults reached can be submitted with the bottom portion of the 4Ms Care Description form that was submitted for level 1 recognition.



Questions?

