AGE FRIENDLY

CREATING AGE-FRIENDLY HEALTH SYSTEMS

LESLIE PELTON, MPA, KEDAR MATE, MD, TERRY FULMER, PHD, RN, FAAN, AND AMY BERMAN, RN, LHD, FAAN

hat does it mean to be an age-friendly health system? What practices and priorities will close the gap between what we know works best for older adult patients and what is actually available to them? Three large Catholic health care systems — Trinity Health, based in Livonia, Michigan; St. Louis-based Ascension; and Providence St. Joseph Health, headquartered in Renton, Washington — are partnering with the Anne Arundel Medical Center in Annapolis, Maryland, and Kaiser Permanente, based in Oakland, California — to explore the dynamics of age-friendly care and testing a prototype of more age-friendly care for health systems around the country.

"Creating Age-Friendly Health Systems" is an initiative sponsored by New York City-based The John A. Hartford Foundation, the leading national funder dedicated to improving the care of older adults, and led by the not-for-profit Institute for Healthcare Improvement, based in Cambridge, Massachusetts. Their goal is to develop a model of care for seniors that by 2020 would be ready to implement in 20 percent of U.S. hospitals and health systems across the continuum of care.

Developing the prototype has focused attention on what the initiative refers to as the 4Ms: what Matters; Medication; Mentation (mental activity) and Mobility. These are essential elements for an optimal level of care that needs to be customized to each older patient and setting of care.

The five participating health systems are committed to identifying evidence-based practices across the 4Ms that can be delivered reliably every day, for every older adult, at every place an older adult engages with health care.

"Our goal is the best care for every single older adult who presents for care in the emergency room, at the clinic appointment or in the nursing home for rehabilitation, in other words, across the continuum of care," said Terry Fulmer, PhD, RN, president and CEO of The John A. Hartford Foundation in New York City. "There is a deep body of research available to guide us on the care of older adults. The John A. Hartford Foundation has supported much of that research and the continued understanding of the needs of older adults. What I see in Creating Age-Friendly Health Systems is how driven our health systems are to deliver great care and how difficult it is to understand, synthesize and put the evidence into practice. Even more important is providing care shaped by what is important to each older adult and their family. Our teams are learning how to do just that."

The participating health systems share two challenges: research is not easily transferrable to the frontline realities of delivering care; and evidence-based care does not always match what matters to older adult patients and their families.

"The unique clinical demands, personal preferences and physical comforts of older adults are one of society's greatest — and growing — needs," said Antonio G. Beltran, MBA, vice president for safety net, community benefit ministry, at Trinity Health. "Trinity Health is a leader in providing quality emergency medical care for seniors, so we have known for some time that implementing fundamental changes in our culture, physical environment and operations can lead to better outcomes. Implementing more best practices deeper into our services for this population is the natural next step."

The participating health systems are implementing the age-friendly 4Ms in their facilities, measuring the results and creating recommendations for other health systems to follow.

For example, Glacier Hills Care and Rehabilita-

tion Center, one of Trinity Health's senior living communities, is measuring and monitoring the mobility — one of the 4Ms — of residents in independent living. Upon joining the community, the older adult meets with a trained clinician for a "sit-to-stand" assessment that counts how many times the senior can move from sitting in a chair to standing up within one minute. After that, the "sit-to-stand" is repeated on a regular basis, which helps Glacier Hills know what support an older adult needs to safely keep moving and whether there has been any change over time. Assessment may lead to a referral to physical therapy or to the Wellness Center.

Trinity Glacier Hills also counted how many of its short-term rehabilitation patients were asked the "What matters?" question, and then they counted how many of those older adults reported that their answer to "What matters?" was integrated into their care.

"By knowing 'what matters' for each of our residents," said Cheryl Huckins, MD, of Ann Arbor's Glacier Hills Senior Living Community, which is part of Trinity Health Senior Communities, "our recommendations are tailored to help them meet their goal. If they want to avoid further loss of function and need for a higher level of support, our suggestions will be different than if the focus is on symptom management. It may be 'keeping lower back pain in check' or being able to 'travel to see children' that is most important and motivating to our patients."

The next step for the five health systems participating in this early phase of the work is to reach every older adult within their own system with the 4M elements of improved care. Based on their experience, the Institute for Healthcare Improvement is building tools to support other systems with the implementation of age-friendly practices.

"We are teaching our teams how to measure evidence of impact so they know which of the age-friendly practices they are testing are actually making an improvement across the 4Ms," said Kedar Mate, MD, chief innovation officer for IHI.

"Measuring impact is how we tell what changes make a difference with older adults," Mate said.

The teams try their age-friendly ideas at first with just one or two patients.

"As the teams identify practices that make a measurable impact on older adults, we work with them to reach exponentially more and more older adults with those improvements," Mate said. "And we measure the impact all along the way. Is it being provided every day for every older adult? Our teams are finding the intervention that can be reliably implemented and make a difference."

This is what is unique about Creating Age-Friendly Health Systems. Our teams are identifying the age-friendly care that is both evidence-based and possible to make part of older adults' care every day. Over the next few issues of *Health Progress*, this column will provide more details on what the five participating health systems are learning across the 4Ms.

LESLIE PELTON is director, age-friendly initiative, the Institute for Healthcare Improvement, Cambridge, Massachusetts.

KEDAR MATE is chief innovation and education officer, Institute for Healthcare Improvement, Cambridge, Massachusetts.

TERRY FULMER is president and CEO of The John A. Hartford Foundation, New York.

AMY BERMAN is senior program officer, The John A. Hartford Foundation, New York.

NOTE

As the age-friendly strategies are being tested in the five participating systems or hospitals, others can follow updates on the Institute for Healthcare Improvement's website, ihi.org/Engage/Initiatives/Age-Friendly-Health-Systems. Organizations are invited to use a tool on the website to assess how age-friendly their health system is.

To receive notice when the initiative is expanded, or to join a quarterly call to review progress of the Age-Friendly Health Systems initiative and receive tips on getting ready, contact kmitchell@ihi.org.

HEALTH PROGRESS

Reprinted from *Health Progress*, January - February 2018 Copyright © 2018 by The Catholic Health Association of the United States