








Our Health Systems: Are They Age-Friendly?

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Disclosure








- I have no actual or potential conflict of interest in relation to this program/presentation.

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Objectives

- Provide an overview of the 4Ms Framework: What Matters, Medications, Mentation, Mobility and its importance in enhancing care for older adults.
- Discuss the principles and benefits of Age-Friendly Health Systems (AFHS) and how they align with patient-centered care while ethically maintaining respect of the rights and dignity of the patient.
- Describe practical strategies and case examples for implementing the 4Ms in healthcare settings, emphasizing integration into existing workflows.
- Cite how to foster discussion on interdisciplinary collaboration and patient/family engagement strategies to support the successful adoption of the 4Ms and Age-Friendly Health Systems (AFHS) principles.

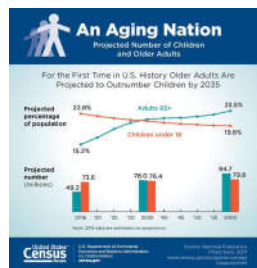
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Factors Impacting the Care of Older Adults

Demography: the # of older adults is projected to double over the next 25 years.

Complexity: Approximately 80 percent of older adults have at least one chronic disease, and 77 percent have at least two.

Disproportionate Harm: Older adults have higher rates of health care utilization as compared to other age groups and experience higher rates of health care-related harm, delay, and discoordination.



The State of Aging and Health in America 2013. Atlanta: Centers for Disease Control and Prevention, US Department of Health and Human Services; 2013.
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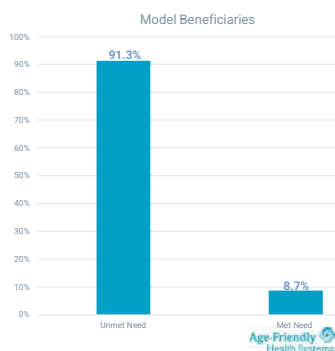
Age-Friendly Health Systems

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

- Difficult to disseminate and scale
- Difficult to reproduce in settings with less resources
- May not translate across care settings



Age-Friendly: Evidence Based-Practices Changes

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

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

Today: More than 300 published articles evaluating aspects of the 4Ms Framework

Visit: www.ihl.org/Orange/Initiatives/Age-Friendly-Health-System/Pages/In-the-News.aspx

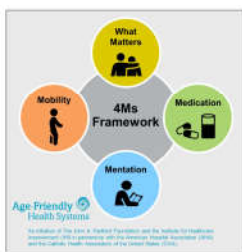
Age-Friendly Health Systems

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

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



The 4Ms of Age-Friendly Care



What Matters
Know and align care with each older adult's specific health, culture, goals and care preferences including, but not limited to, end-of-life care, and across settings of care.

Medication
When medication is necessary, use Age-Friendly medication that does not interfere with What Matters to the older adult. Monitor for medication across settings of care.

Mentation
Prevent, identify, treat, and manage dementia, depression, and delirium across settings of care.

Mobility
Ensure that older adults move safely every day to order to maintain function and life. What Matters.



J Aging Health. 2021 Feb 8388264321991638. doi: 10.1177/0898264321991638. Online ahead of print.

Evidence for the 4Ms: Interactions and Outcomes across the Care Continuum

Karlan Male¹, Terry Palmer², Leslie Peltum³, Amy Berman⁴, Alice Bonner⁵, Wendy Huang⁶, Jinglian Zhang⁷

Abstracts • expand

PMID: 33551233 DOI: 10.1177/0898264321991638

Free article

Abstract

Objectives: An expert panel reviewed and summarized the literature related to the evidence for the 4Ms: what matters, medication, mentation, and mobility in supporting care for older adults. **Methods:** In 2017, geriatric experts and health system executives collaborated with the Institute for Healthcare Improvement (IHI) to develop the 4Ms framework. Through a strategic search of the IHI database and recent literature, evidence was compiled in support of the framework's positive clinical outcomes. **Results:** Asking what matters from the outset of care planning improved both psychological and physiological health outcomes. Using screening protocols such as the Beers' criteria initiated overprescribing. Medication strategies added to prevention and treatment. Fall risk and physical function assessment with early goals and safe environments allowed for safe mobility. **Discussion:** Through a framework that reduces cognitive load of providers and improves the reliability of evidence-based care for older adults, all clinicians and healthcare workers can engage in age-friendly care. **Keywords:** goal-directed care, quality, safety.



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



Age-Friendly Health System



What Does "Age-Friendly Healthcare" Mean to You?



Image Credit: Shutterstock

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What Does "Age-Friendly Healthcare" Mean to You?

all ages treated equally
grow old together
goal aligned care
flexibility
patient centered
love
kind
safe
balance
responsibility
collaboration
equity
caring
wellness
personalized
care
honoring autonomy
social movement
knowledge
dignity
life
care
personalized
person centered care
community
justice
finally
joy
innovation
evidence
advocacy
respect
movement
awareness

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One Barrier: Ageism



Image credit: Maine Council on Aging



Impacts of Ageism in Healthcare

- Treating Aging as a Disease
- Lack of Knowledge of normal aging and overlooking or mistreating reversible health conditions, such as:
 - Pain
 - Cognitive Impairment
 - Depression and Anxiety
 - Social Isolation and Loneliness
- Overtreatment



Presentation of Ageism in Healthcare

- Making assumptions based on age alone
- Polypharmacy
- Undertreatment
- Life-sustaining treatment more frequently withheld for older people regardless of preference or prognosis
- Failure to listen to older person - or using Elderspeak



What do we see?

MEDICAL VIEW



REALITY



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Benefits of AFHS and Patient-Centered Care



Respect and Dignity: Ethical care that honors the rights and individuality of older adults.

Patient-Centered Approach: Focus on what matters to the individual, including cultural and personal values.

Health System Goals: AFHS helps achieve better quality care while maintaining efficiency and cost-effectiveness.



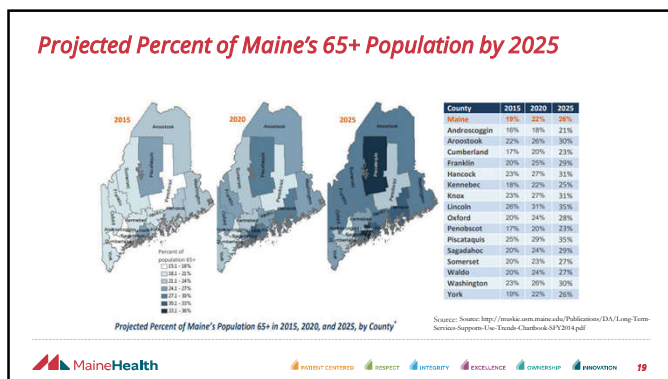
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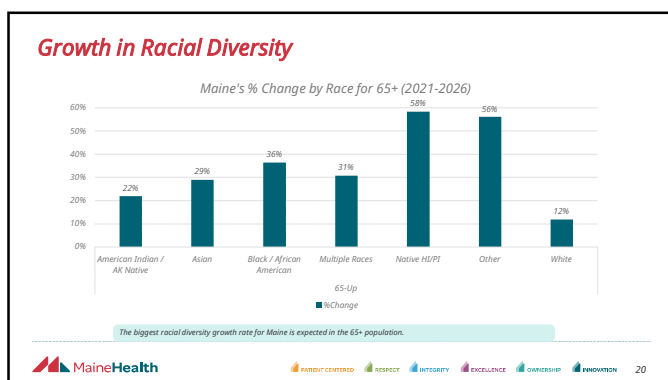
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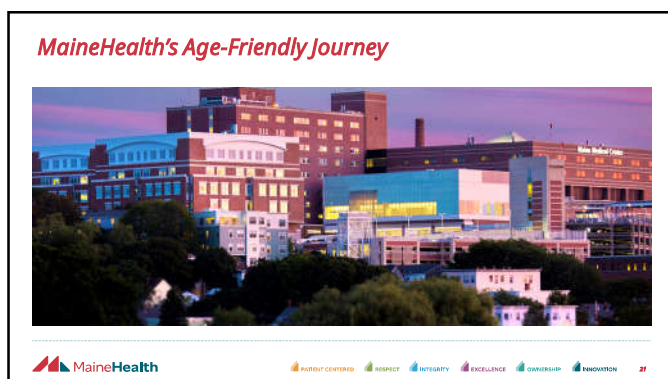
MaineHealth's Age-Friendly Journey

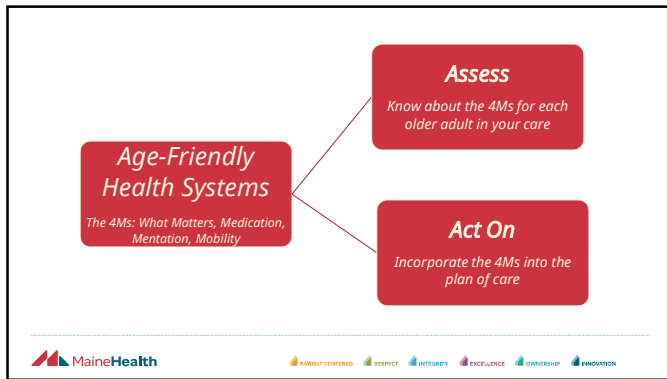


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Advancing and Spreading Age-Friendly Health Systems (2017-Present)

Where we started	Initial Spread	Continued Spread	Where we are going
<ul style="list-style-type: none"> MMC Hospital Elder Life Program (HELP) Geriatric Assessment Clinic 	<ul style="list-style-type: none"> MMC 4 inpatient units MMC Emergency Dept. MMC Urgent Care Plus 1 Post-Acute Facility 1 Primary Care Practice 	<ul style="list-style-type: none"> SMHC HELP Annual Wellness Visit template structured around the 4Ms AFHS dashboard for Primary Care 10 MaineHealth Primary Care Practices earned level 2 recognition 	<ul style="list-style-type: none"> Refinement of What Matters tool embedded in Epic (available across all settings) Use toolkit/dashboard to spread AFHS to other MH hospitals Use AFHS primary care dashboard to spread to all primary care practices Encourage AFHS adoption to Senior Living Collaborative Members

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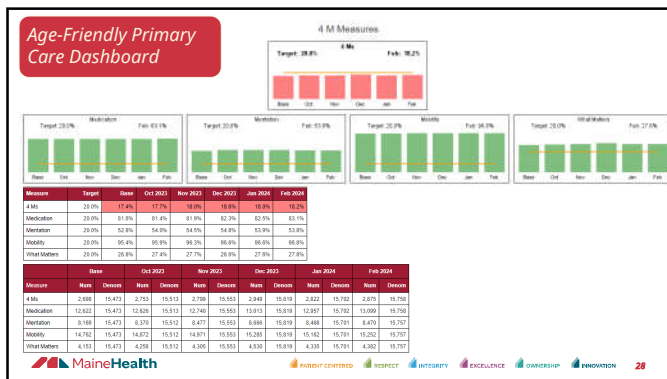
Scaling AFHS to Different Care Sites and Sectors

Inpatient Care

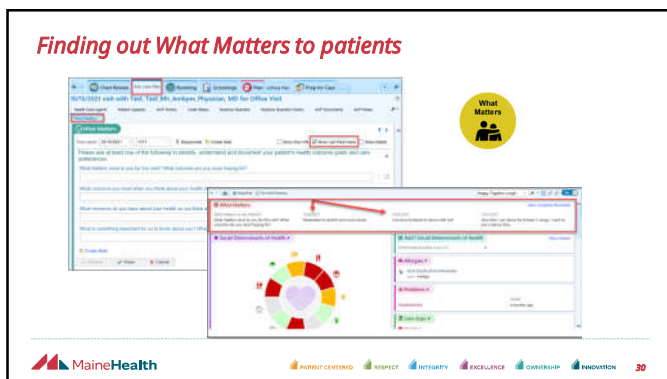
Outpatient/Ambulatory Care

Long-Term Care

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Doorknob Moment



Image credit: Shutterstock



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What Matters: What would make tomorrow a better day?



activities of daily living
coordination of hospital care
religion/spirituality
independence
quality of life
back to normal life
reassurance
information
being cared for
good care
treatment
diagnosis
fatigue
joy
hospital facilities
getting better
general health
getting home
diagnostics
stability
anxiety
nausea
having things done quickly
work
approach
coordination of hospital care
symptom relief
other
family/friends
possessions
familiarity/home situation

Type your answers into the chat



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Reflection




How do you determine "what Matters" to each of your patients?

How do you communicate this with each staff member who needs to know this information?



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Integrating the 4Ms into Workflows



Current Workflows: Identifying areas for improvement.

Embedding the 4Ms: Aligning with existing clinical pathways, using checklists.

Team Collaboration: Involving the whole care team, from nurses to pharmacists.

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Fostering Interdisciplinary Collaboration




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Engaging Patients and Families

Engagement Strategies:

- Shared decision-making (using What Matters as a guide)
- Family involvement in care planning
- Engaging families via:
 - Surveys,
 - family meetings,
 - patient advocacy



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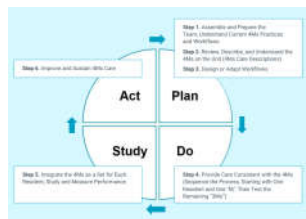
Overcoming Barriers to Adoption

Challenges:

- Resistance to change, lack of training, workflow integration.

Solutions:

- Ongoing education for staff and sharing of impact stories
- Incorporating the 4Ms into care checklists.
- Leadership support.



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MaineHealth: Age-Friendly Sites



- MaineHealth Maine Medical Center - Portland - Geriatric Center
- MaineHealth Maine Medical Center - Portland - Hospital Elder Life Program
- MaineHealth Maine Medical Center - Portland
- MaineHealth Primary Care - Internal Medicine - Cape Elizabeth
- MaineHealth Primary Care - Internal Medicine & Family Medicine - Falmouth
- MaineHealth Primary Care - Internal Medicine & Family Medicine - Scarborough
- MaineHealth Primary Care - Medicine & Family Medicine - Westbrook
- MaineHealth Primary Care - Internal Medicine & Pediatrics - Windham
- MaineHealth Primary Care - Standish
- MaineHealth Primary Care - Family Medicine - Peaks Island
- MaineHealth Primary Care - Family Medicine - Portland
- MaineHealth Primary Care - Internal Medicine & Pediatrics - Portland
- MaineHealth Maine Medical Center - Biddeford - Hospital Elder Life Program
- MaineHealth Primary Care - Medicine & Family Medicine - Sanford
- Mid Coast Senior Health Center
- Saint Joseph's Rehabilitation and Residence

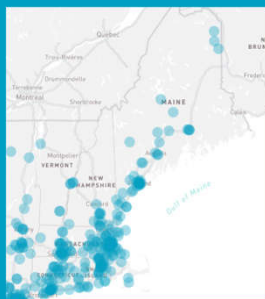


List current as of June 2024

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Interactive Map of Recognized Age-Friendly Health Systems

View an interactive map of recognized Age-Friendly Health Systems sites at [IHI](#).



Two Levels of Recognition from IHI



4508

Hospitals, practices, convenient care clinics, and nursing homes have described how they are putting the 4Ms into practices



2287*

Hospitals, practices, convenient care clinics, and nursing homes have shared the count of older adults reached with 4Ms care for at least three months

*Age-Friendly Health System-Participants count is inclusive of hospitals and practices that went on to be recognized as Age-Friendly Health Systems Committed to Care Excellence
Updated as of October 1, 2024



More than 3,750,000
older adults have been
reached with 4Ms care.

As of June 2024



On-Ramps to Join the Movement

Action Communities for teams to learn about and practice the 4Ms with the support of expert faculty and a community of peers. Action Communities are facilitated by IHI, AHA, and other movement partners.


DIY Pathway for teams to learn about and test the 4Ms on their own using Age-Friendly Health Systems resources.










ihi.org/AgeFriendly



Questions?
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