

Age-Friendly Health Systems



Phelps Hospital
Northwell Health®

WHY IS THIS SO IMPORTANT?

- ❑ When seniors interact with health systems, they tend to have a negative impact on their health.
- ❑ One third of patients over 70 and half of patients over 85 leave hospitals more disabled than when they arrive.



How Is This Accomplished?

The Institute for Healthcare Improvement

Age-Friendly Health System Initiative

The 4Ms Model: A specific set of evidence-based geriatric best practices

What Matters Most, Medication, Mentation and Mobility

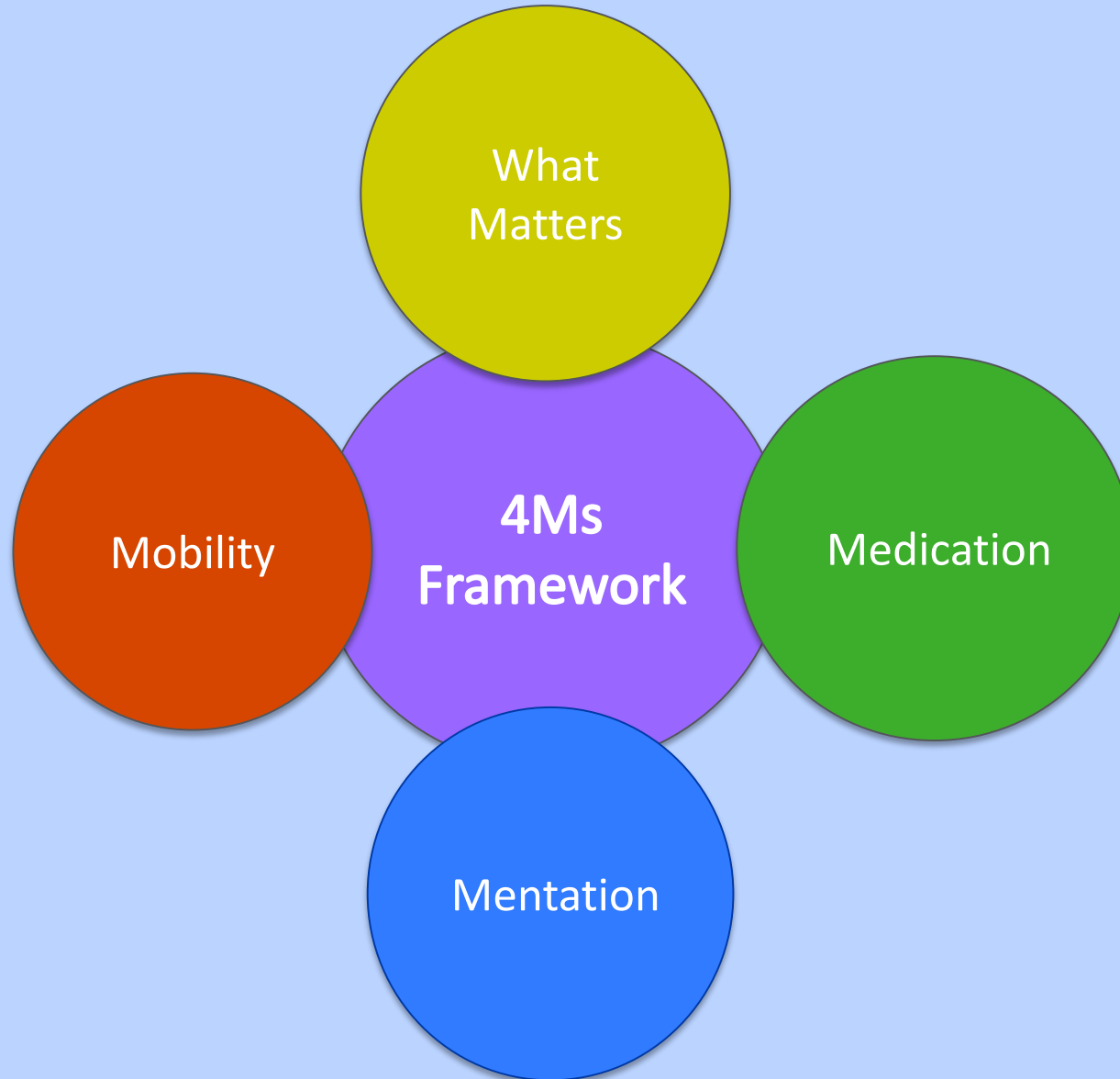
Evidence-Based 4Ms Framework

The 4Ms framework drives all care and decision making for adults 65+ in the inpatient and ambulatory setting.

Principles of an Age-Friendly Health System

- ❑ The 4Ms are not intended to simply add additional work. It's a framework to develop efficient and effective delivery of care.
- ❑ Age-Friendly Health Systems are designed to close the gap between evidence-based care and reliability providing that care to adults 65+ at every interaction within every care setting.

Evidence-Based 4Ms Framework



Evidence-Based 4Ms Framework

- ☐ **What Matters:** align care with each older adult's specific healthcare goals and care preferences
- ☐ **Medication:** Identify potentially harmful medications - not to interfere with What Matters, Mentation and Mobility
- ☐ **Mentation:** prevent, identify, treat and manage dementia, depression and delirium
- ☐ **Mobility:** the daily ability to move safely to maintain function and do What Matters

While You Are Here, What Matters Most To You?

Defined as knowing and aligning care with each older adult's specific health outcome goals and care preferences including, but not limited to, end-of-life-care.



Screening Tools: Mentation

in the Hospital and Post-Acute and Long-Term Care

☐ UB-2

☐ CAM

☐ 3D-CAM

☐ CAM-ICU

☐ bCAM

☐ Nu-DESC

☐ Other

Delirium prevention and management protocols:

- ☐ Ensure sufficient oral hydration
- ☐ Orient older adult to time, place, and situation on every nursing shift
- ☐ Ensure that older adult has their personal adaptive equipment
- ☐ Prevent sleep interruptions; use non-pharmacological interventions to support sleep
- ☐ Avoid high-risk medications

Screening Tools: Mobility

in the Hospital and Post-Acute and Long-Term Care

- ☐ Timed Up & Go (TUG)2
- ☐ Get Up & Go
- ☐ JH-HLM
- ☐ POMA
- ☐ Refer to physical therapy
- ☐ Other: Shift Mobility and Gait Assessment

- ☐ Physical therapy intervention
(balance, gait, strength, gait training, exercise program)
- ☐ Ambulate 3 times a day
- ☐ Out of bed or leave room for meals
- ☐ Avoid restraints
- ☐ Remove catheters and other tethering devices
- ☐ Avoid high-risk medications
- ☐ Other

Screening Tools: Medication (Providers)

Modified Beers Criteria for Adults 65+: *De-prescribe or Lower the Dosage*

- ☐ Benzodiazepines
- ☐ Opioids
- ☐ Highly-anticholinergic medications (e.g., diphenhydramine)
- ☐ All prescription and OTC sedatives and sleep medications
- ☐ Muscle relaxants
- ☐ Tricyclic antidepressants
- ☐ Antipsychotics

Supporting Actions

- ☐ Use the 4 Ms to organize care and focus on the older adult, wellness, and their strengths rather than solely on disease or lack of functionality
- ☐ Integrate the 4Ms into existing workflows
- ☐ Document the 4Ms in the medical record
- ☐ Make the 4Ms visible across the care team and settings

Supporting Actions

- ☐ Have an interdisciplinary care team review the 4Ms in daily huddles/rounds
- ☐ Educate older adults, caregivers, and the community about the 4Ms
- ☐ Link the 4Ms to community resources and supports to achieve improved health outcomes

Level I

Age-Friendly Health System Recognition

Hospital achieved August 2020 ; Senior Health recently submitted an application

Level II

Age-Friendly Health System: Committed to Care Excellence

Pilot study with 3 months of data achieving 95 percent compliance of the 4Ms

Pilot Study

Three months of data achieving 95 percent compliance

3 North starting February 1, 2021

The three months of data do not have to be consecutive months

Use of the 4Ms paper form

Minimal changes to Meditech are projected to go live in May, 2021

**On Admission**

| Question | Answer/response |
|--|---|
| What Matters Most (age >=65 years) | |
| Pt over 65 & willing/able to answer what matters questions | <input type="radio"/> Yes <input type="radio"/> No, unable to answer <input type="radio"/> No, declines to answer |
| What Matters Responses provided by | <input type="checkbox"/> Patient <input type="checkbox"/> Family <input type="checkbox"/> Other |
| While you are here, what matters most to you? | <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Advance Directives <input type="checkbox"/> Cultural Concerns <input type="checkbox"/> Financial concern <input type="checkbox"/> Housing concern <input type="checkbox"/> Medical condition <input type="checkbox"/> Medication concern <input type="checkbox"/> Mobility concern <input type="checkbox"/> Nutritional concern </div> <div> <input type="checkbox"/> Pain Management <input type="checkbox"/> Respiratory concern <input type="checkbox"/> Social concern <input type="checkbox"/> Family communication <input type="checkbox"/> Community Communication <input type="checkbox"/> Other: <input type="text"/> <input type="text"/> </div> </div> |
| What Matters Most Comment | |
| RN Name, Date and Time: | |

Daily Assessment (Medications are handled by Pharmacy)

| | | | |
|--|--|----------|--|
| Day 1: | | | |
| CAM Assessment done | <input type="radio"/> Yes <input type="radio"/> No | Comment: | |
| Mobility Assessment done | <input type="radio"/> Yes <input type="radio"/> No | Comment: | |
| Patient's What Matters Most response from admission reviewed (Done at Shift Report). | <input type="radio"/> Yes <input type="radio"/> No | Comment: | |
| 4Ms Reviewed during Interdisciplinary Rounds (Minimum of RN and MD). | <input type="radio"/> Yes <input type="radio"/> No | Comment: | |
| RN Name, Date and Time: | | | |
| Day 2: | | | |
| CAM Assessment done | <input type="radio"/> Yes <input type="radio"/> No | Comment: | |
| Mobility Assessment done | <input type="radio"/> Yes <input type="radio"/> No | Comment: | |
| Patient's What Matters Most response from admission reviewed (Done at Shift Report). | <input type="radio"/> Yes <input type="radio"/> No | Comment: | |
| 4Ms Reviewed during Interdisciplinary Rounds (Minimum of RN and MD). | <input type="radio"/> Yes <input type="radio"/> No | Comment: | |
| RN Name, Date and Time: | | | |

Meditech Data Collection



A ***What Matters Most*** section will be added to the nursing history and database interview for access during the admission interview.

An ***I Did It*** bubble will be added to the interdisciplinary intervention to attest that patients' 4Ms were discussed during interdisciplinary rounds.

The ***I Pass the Baton*** tool will also be used as a shift-to-shift method of 4Ms communication.

Two follow up questions on What Matters Most on the discharge intervention.

Staff Education

January: A unit specific education tool on the 4Ms form will be introduced to 3 North.

April: iLearn module rolled out to entire hospital.

May: 4Ms goes live in Meditech.

[Access iLearn](#)

The 4Ms Evidence-Based Model

A Paradigm Shift
in How We Care
for the Older Adult



Thank You

