



AHA Team Training

Transforming Care Through Age-Friendly Health Systems

July 14, 2021

Sponsored by:



Rules of Engagement

- **Audio for the webinar can be accessed in two ways:**
 - Through the phone (*Please mute your computer speakers)
 - Or through your computer
- **All hyperlinks on the screen are active if you click on them**
- **Q&A session will be held at the end of the presentation**
 - Written questions are encouraged throughout the presentation
 - To submit a question, type it into the Chat Area and send it at any time during the presentation

Upcoming Team Training Events

Webinars

August 25, 2021 | 12:00 – 1:00 PM CT

Bonus webinar coming soon! [Join our mailing list for updates.](#)

Online Community Platform

[Join Mighty Network](#) to access exclusive content and connect with your peers to share stories, tools, and content.

New: Advancing Care Conference

This brand-new interactive conference experience, that will use cutting-edge design thinking exercises, equip attendees with custom strategies and an actionable plan to tackle their challenges. Conference registration will opening soon! We hope to see you there. Registration is now open! [Click here to register.](#) [Click here to view our website for more information.](#)





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Care with Purpose

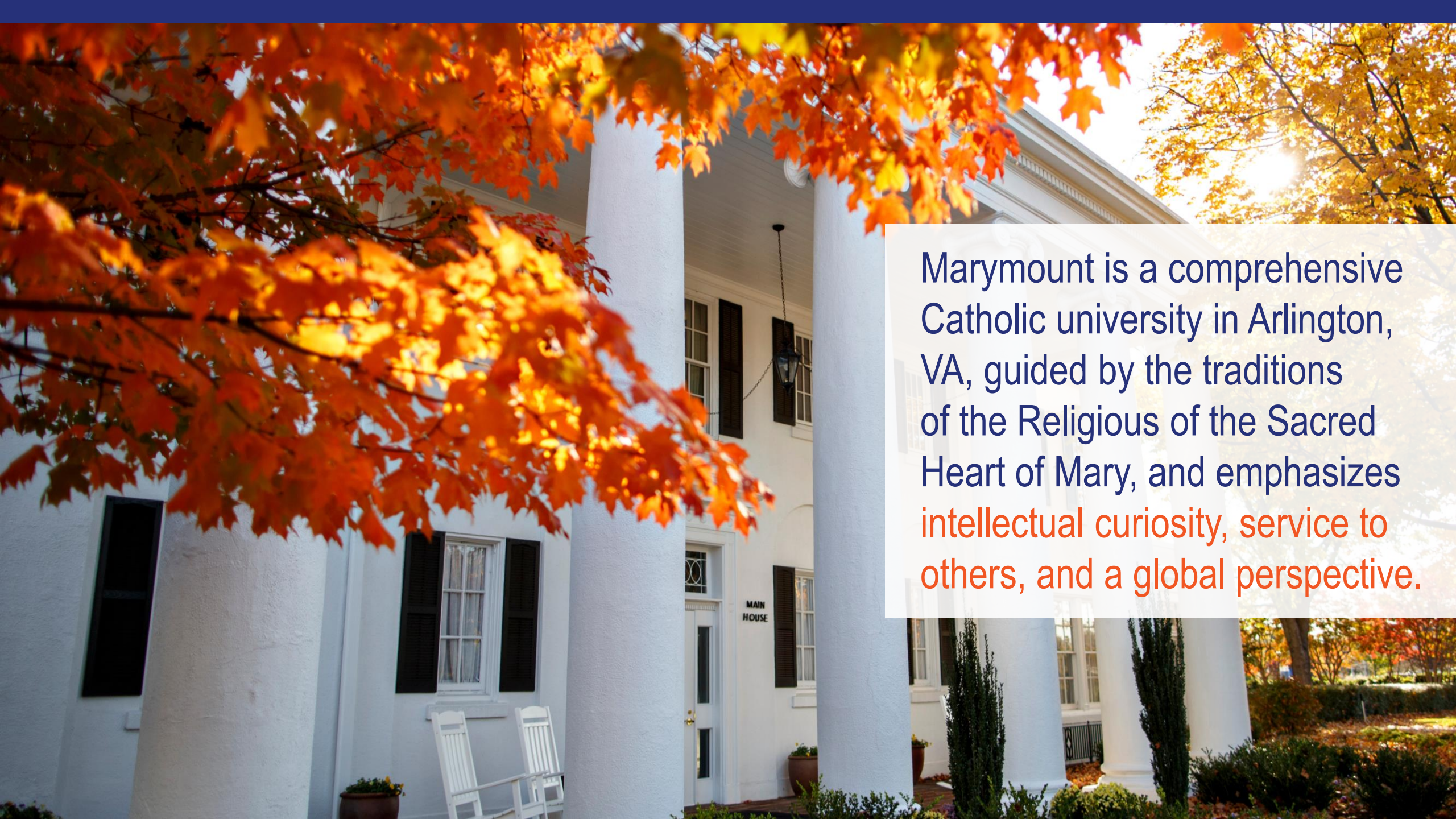
Introduction:

Maureen Moriarty, DNP, ANP-BC,
FAHS, FAANP

Dr. Moriarty is the Director for the
Malek School of Nursing
Professions

As an adult nurse practitioner, she
maintains a practice caring for
headache patients.





Marymount is a comprehensive Catholic university in Arlington, VA, guided by the traditions of the Religious of the Sacred Heart of Mary, and emphasizes intellectual curiosity, service to others, and a global perspective.



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- ❖ Family Nurse Practitioner – Post-Master's Certificate ([PMC-FNP](#))
- ❖ Accelerated Bachelor of Science in Nursing ([ABSN](#))

Today's Presenters



Marie Cleary-Fishman, MS, MBA
Vice President, Clinical Quality,
American Hospital Association



Magdalena Bednarczyk, M.D.
Medical Director
Rush Center for Excellence in Aging
Section Chief, Geriatric Medicine
Rush University Medical Center



Mosmi Surati, M.D. MPH
Unit Medical Director, 9N
Assistant Professor of Internal Medicine
Rush University Medical Center



Transforming Care Through Age-Friendly Health Systems

AHA Action Community: An Invitation to Join Us

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).

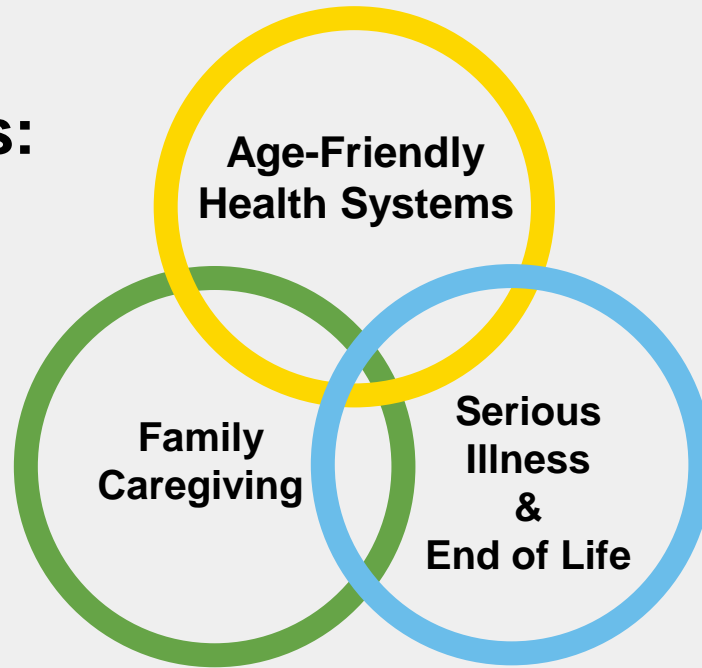


The John A. Hartford Foundation

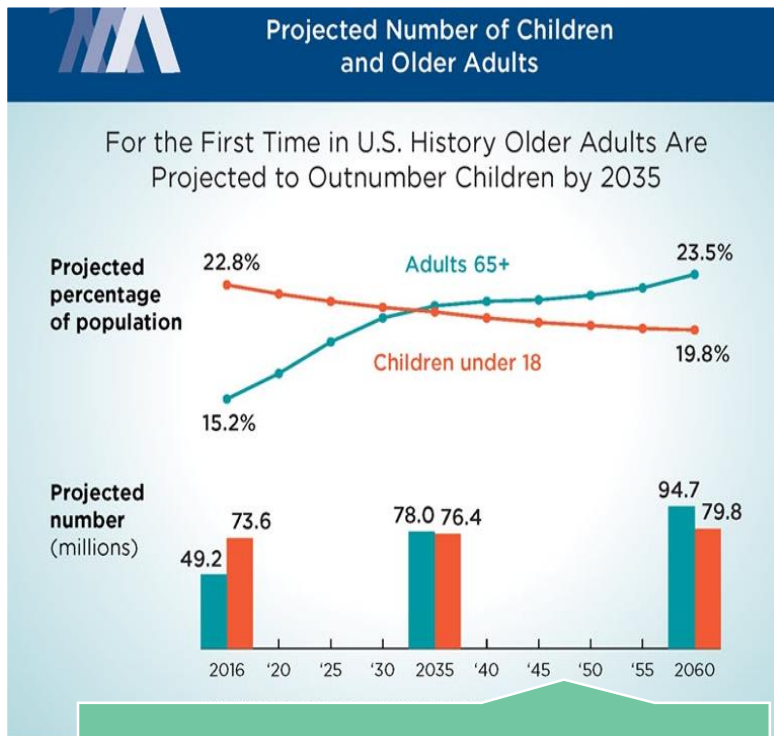
A private philanthropy based in New York, established by family owners of the A&P grocery chain in 1929.

Dedicated to Improving the Care of Older Adults

Priority Areas:



Why Age-Friendly Health Systems?



Demography

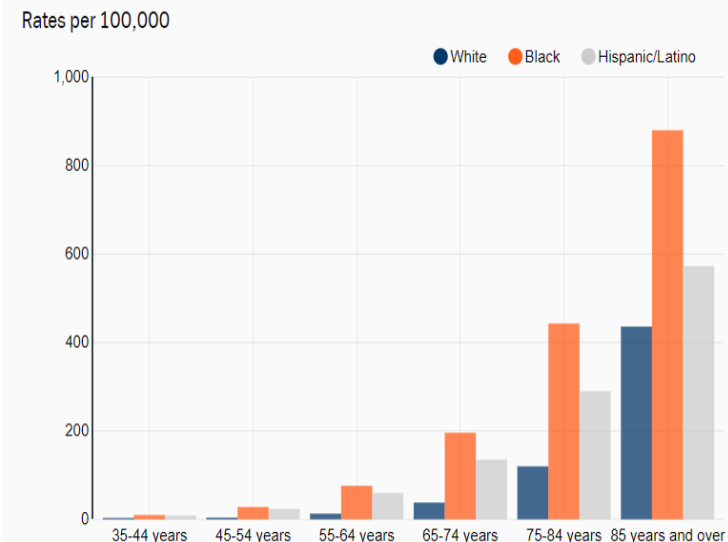
Fast Facts: Adults Age 65 and Older

- 80%** Have 1 chronic condition
- 77%** Have 2 chronic conditions
- 75%** Will require long-term care
- 40%** Will require care in skilled nursing facility

Source: Fact Sheet: Healthy Aging. National Council on Aging. (2016). Accessed at www.ncoa.org/resources/fact-sheet-healthy-aging/; U.S. Department of Health and Human Services. (2018). National Clearinghouse for Long-Term Care Information. Accessed at www.hhs.gov/ncsl/

Complexity

Figure 1. COVID-19 death rates by age and race



Source: CDC data from 2/1/20-6/6/20 and 2018

Census I

Disproportionate Harm

What is Our Goal?

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

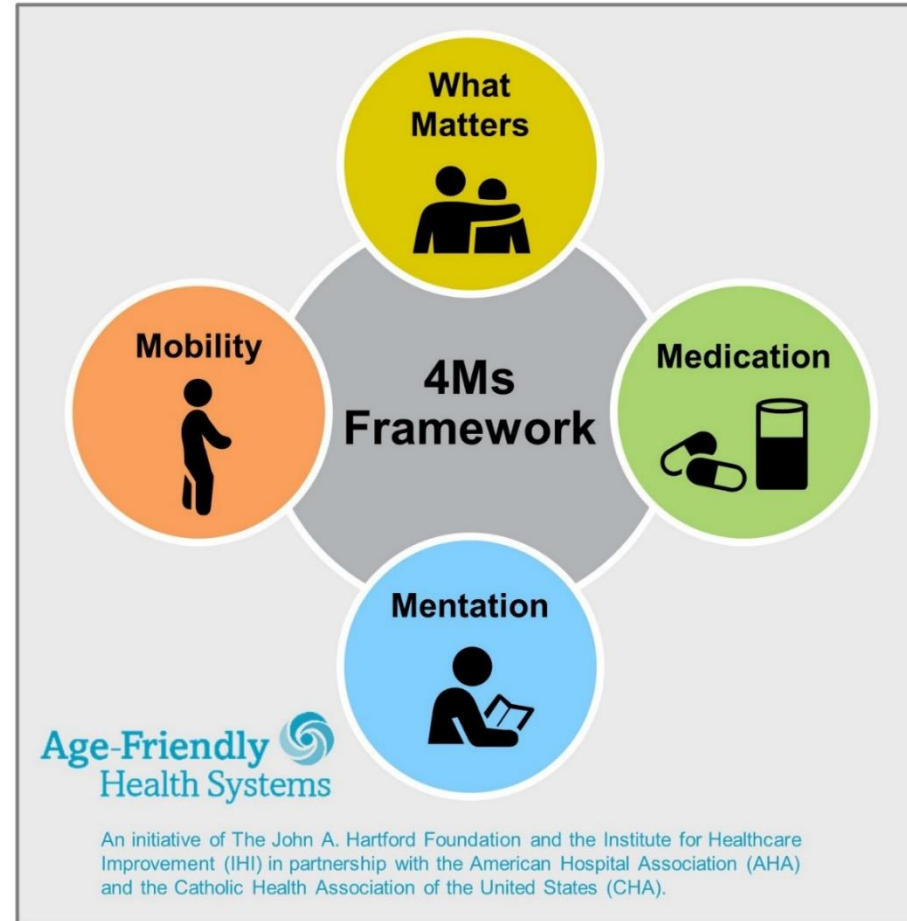
- Guided by an essential set of evidence-based practices (4Ms);
- Causes no harms; and
- Is consistent with What Matters to the older adult and their family.

Specific Aims:

- ✓ By 12/31/20: Reach older adults in 1000 hospitals and practices recognized as Age-Friendly Health Systems
- By 6/30/23: Reach older adults in 2500 hospitals and practices, and 100 post acute communities recognized as Age-Friendly Health Systems

What is an Age-Friendly Health System?

- 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



What Matters

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

Medication

If medication is necessary, use Age-Friendly medication that does not interfere with What Matters to the older adult, Mobility, or Mentation 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 in order to maintain function and do What Matters.

For related work, this graphic may be used in its entirety without requesting permission.
Graphic files and guidance at ihi.org/AgeFriendly

Age-Friendly Health System Pioneers

Age-Friendly
Health Systems

Pioneer

Anne Arundel
Medical Center

ASCENSION

KAISER PERMANENTE®

Providence
St. Joseph Health

Trinity Health



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.




Engage in the AHA Action Community




- 


Participate in monthly interactive webinars

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


In-person meeting

 - One in-person or virtual meeting (TBD)
- 


Test Age-Friendly interventions

 - Test specific changes in your practice
- 

Share data on a standard set of Age-Friendly measures

 - Submit an electronic submission to IHI on a standard set of processes to identify opportunities for improvement
- 

Join monthly topical coaching sessions

 - Join other teams for measurement and testing support in monthly coaching sessions
- 

Leadership track to support system-level scale up

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

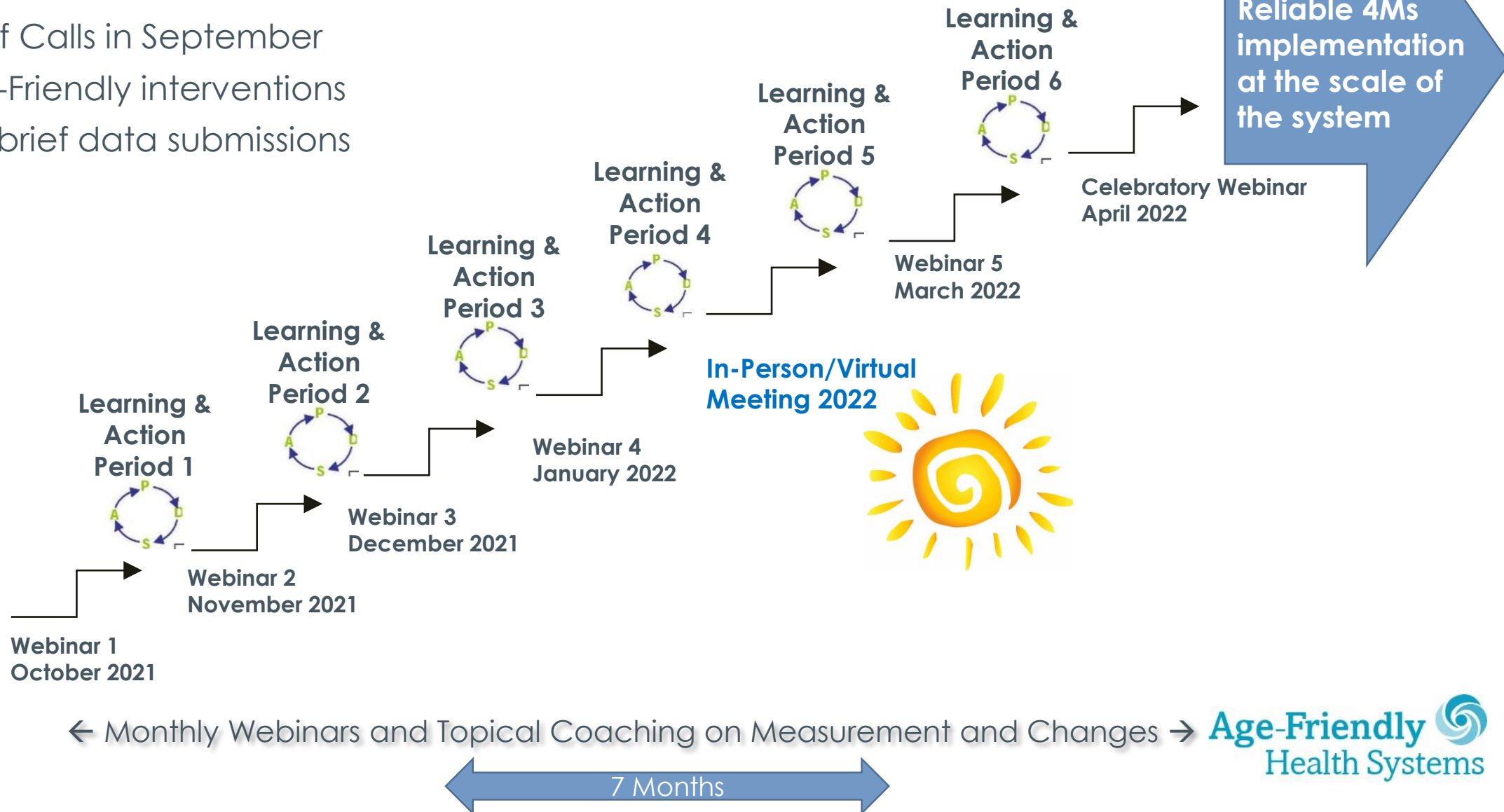


Age-Friendly
Health System
Action
Community

AHA Action Community Activities

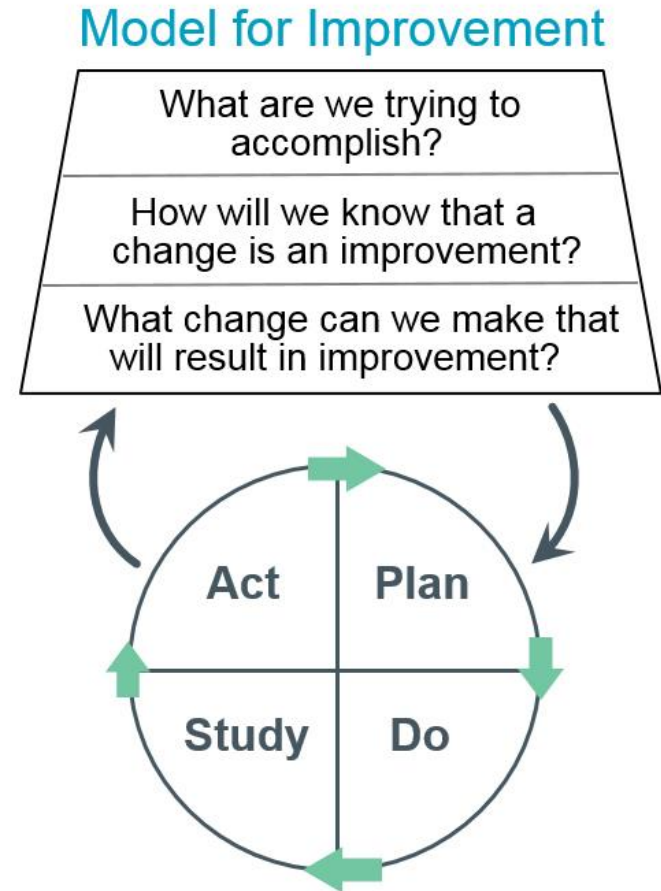


- 2 Kick Off Calls in September
- Test Age-Friendly interventions
- Monthly brief data submissions



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



Age-Friendly Health System Recognition

An Age-Friendly Health System...

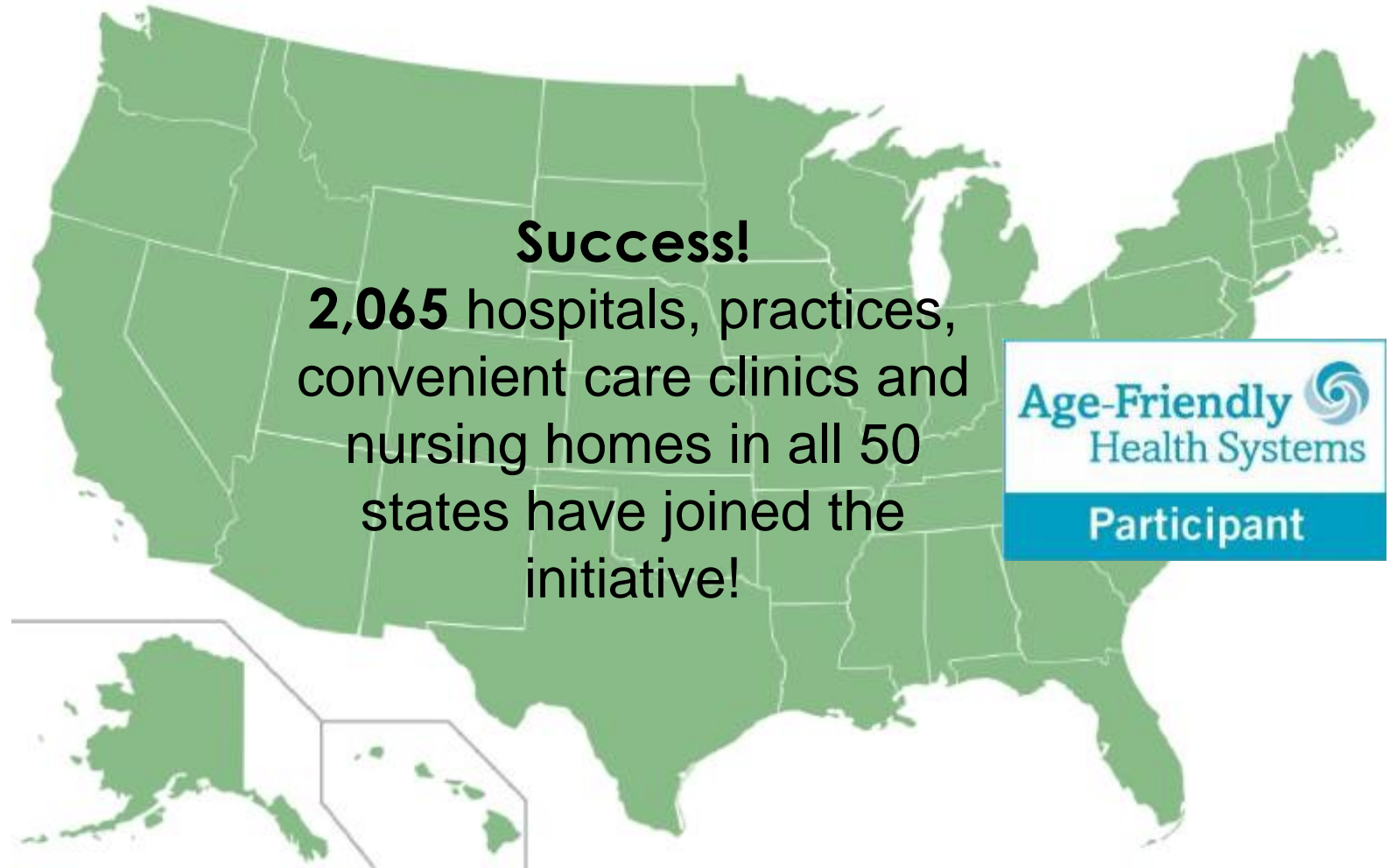
- **Defines** the 4Ms for its hospital and/or practice
- **Counts** the number of 65+ people whose care includes the 4Ms (reported by each site)
- **Scales** the work and **celebrates** recognition nationally



A Goal Met and a Growing Movement!

Our Goal: **Spread to 1,000 sites by end of 2020**

470



As of April 2021



Connecting Age-Friendly Measures with Value

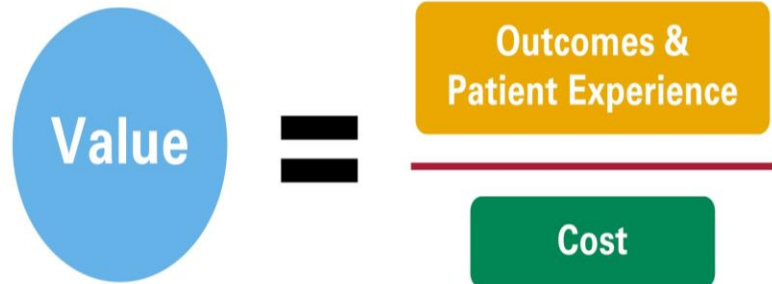








Figure 3: Age-Friendly Measures Contribute to Value

Age-Friendly Measures			The Value Equation
Basic Outcome Measures	Hospital Setting	Ambulatory/ Primary Care Setting	Components
30-day readmission			Patient outcomes, cost
ED utilization			Patient outcomes, cost
Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey	HCAHPS	CGCAHPS	Patient experience, patient outcomes
Length of stay			Patient outcomes, cost
Advanced Measures	Hospital Setting	Ambulatory/ Primary Care Setting	Components
Delirium			Patient outcomes, cost
CollaboRATE (or similar tool to measure goal-concordant care)			Patient outcomes, patient experience

Improve Outcomes- Case Examples

Cedars-Sinai Medical Center

- Length of stay in the hospital was cut **11%**, down to four-and-a-half days.
- Program saved **\$330,000 in direct costs** its first year, when it served 153 patients.
- Annual savings of about **\$1 million** are projected.

Hartford Hospital

- Actions for Delirium Assessment Prevention and Treatment (ADAPT) program
 - Reduced delirium attributable days
 - Decrease in length of stay from **16** to **10.6** days
 - Average of **\$6.5 million** in savings annually from 2012-2019

Join AHA Action Community 2021-2022

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 - Starts Mid-September with 2 Kick off Calls
 - Starting October
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- **Email ahaactioncommunity@aha.org with any questions.**

Enroll Today!



Fall 2021 Age-Friendly Health Systems Action Community:
An Invitation to Join Us

September 2021 – April 2022

Facilitated by AHA

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Age-Friendly Health Systems

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Putting the 4Ms into Practice: Rush University Medical Center

Magdalena Bednarczyk, M.D., Medical Director

Rush Center for Excellence in Aging Section Chief, Geriatric Medicine, Rush University
Medical Center

Surati Mosmi, M.D, Unit Medical Director, 9N

Assistant Professor of Internal Medicine

Rush University Medical Center

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RUSH **Center for Excellence in Aging**

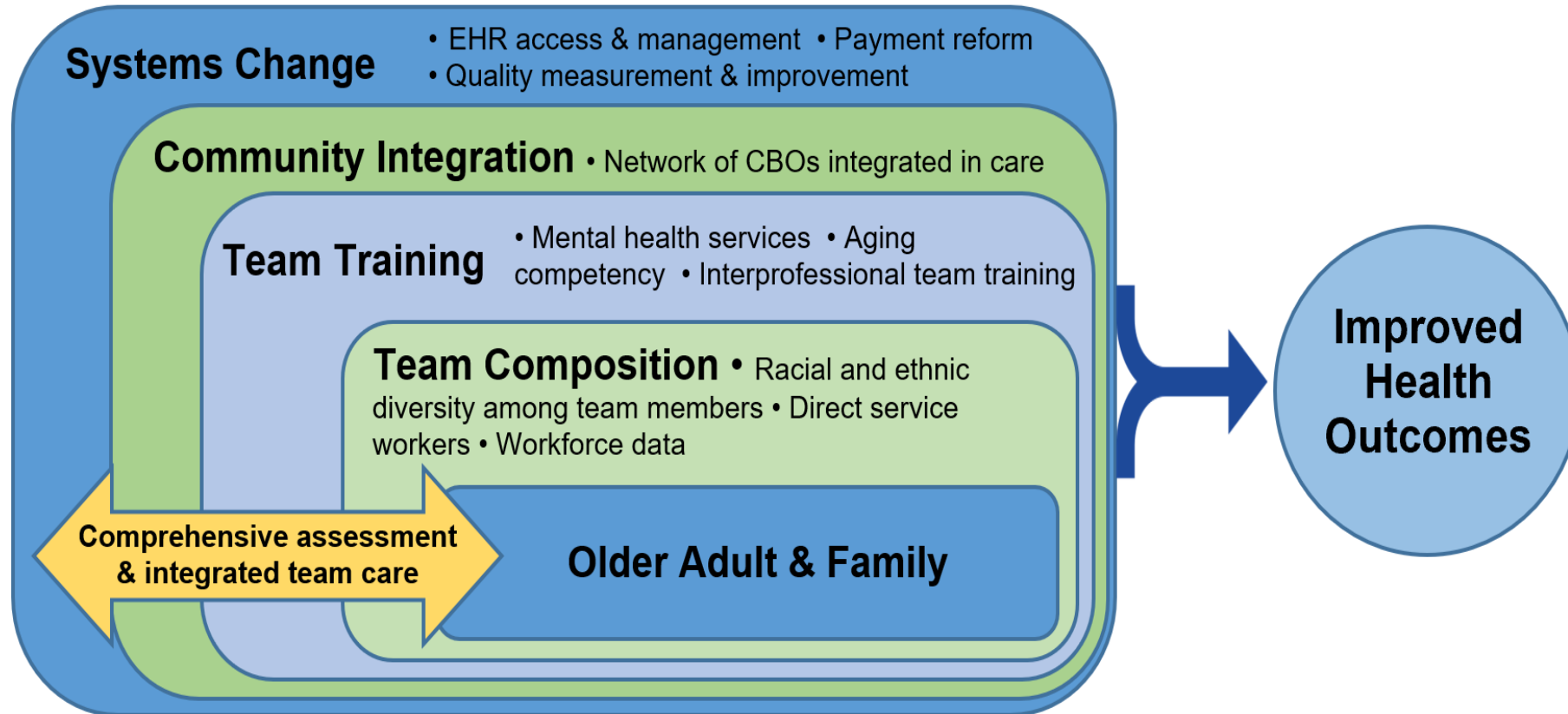
Vision: *Rush will be the unparalleled destination for older adult and family health and wellbeing.*

Bridging the hospital, university, health system,
community and nation

Cores

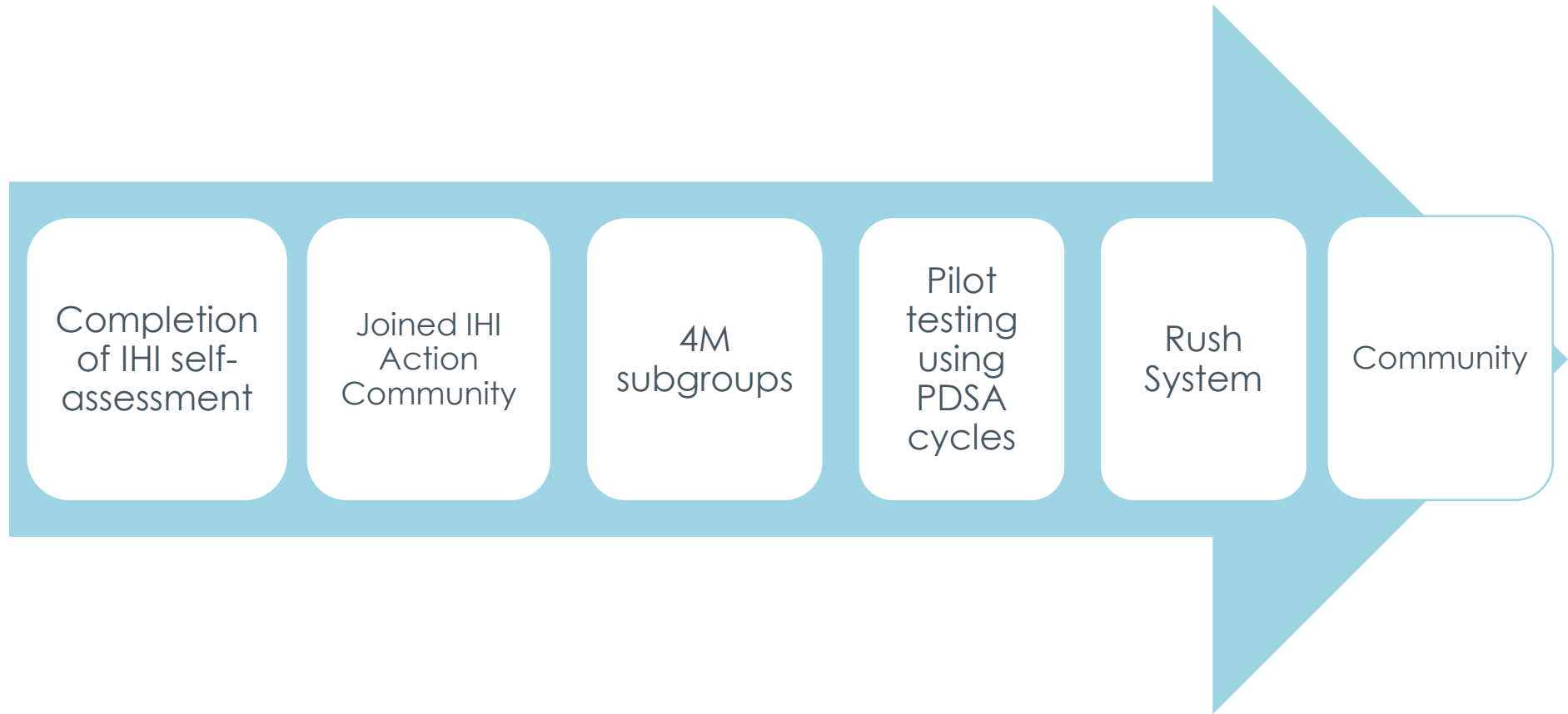
- Research
- Older Adult and Family Care
- Education
- Community Health Equity
- Health Policy

Age-Friendly Health Communities

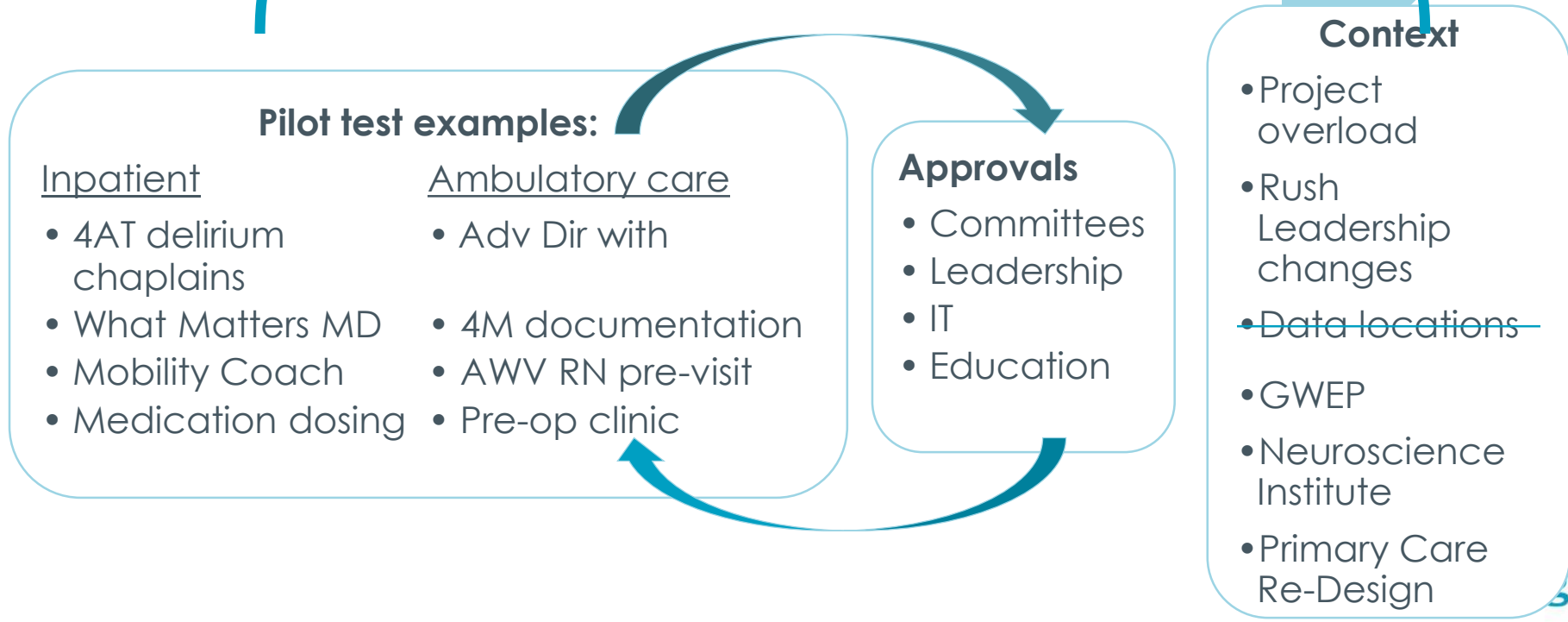
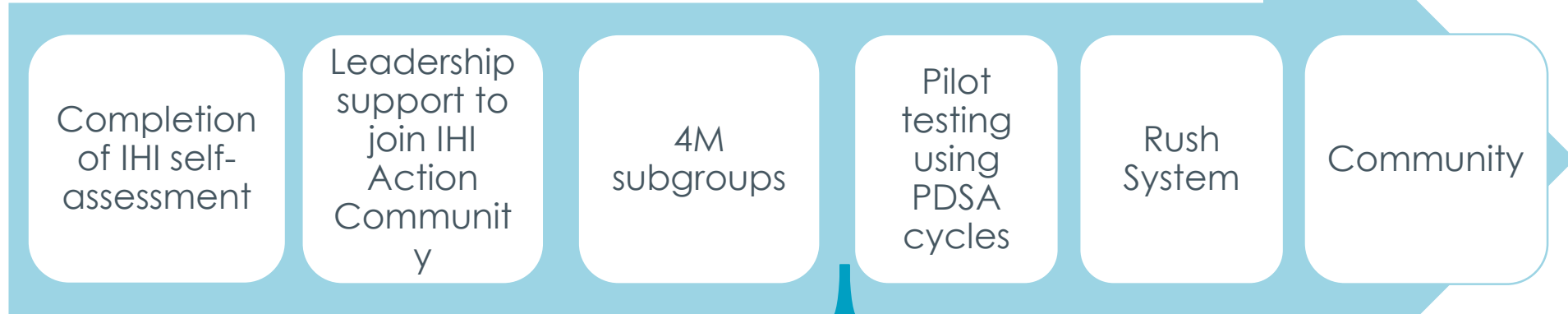


Golden, R.L., Emery-Tiburcio, E.E., Post, S., Ewald, B., & Newman, M. (2019). Connecting social, clinical, and home care services for persons with serious illness in the community. *Journal of the American Geriatrics Society*, 67, S412-S418. doi:10.1111/jgs.15900

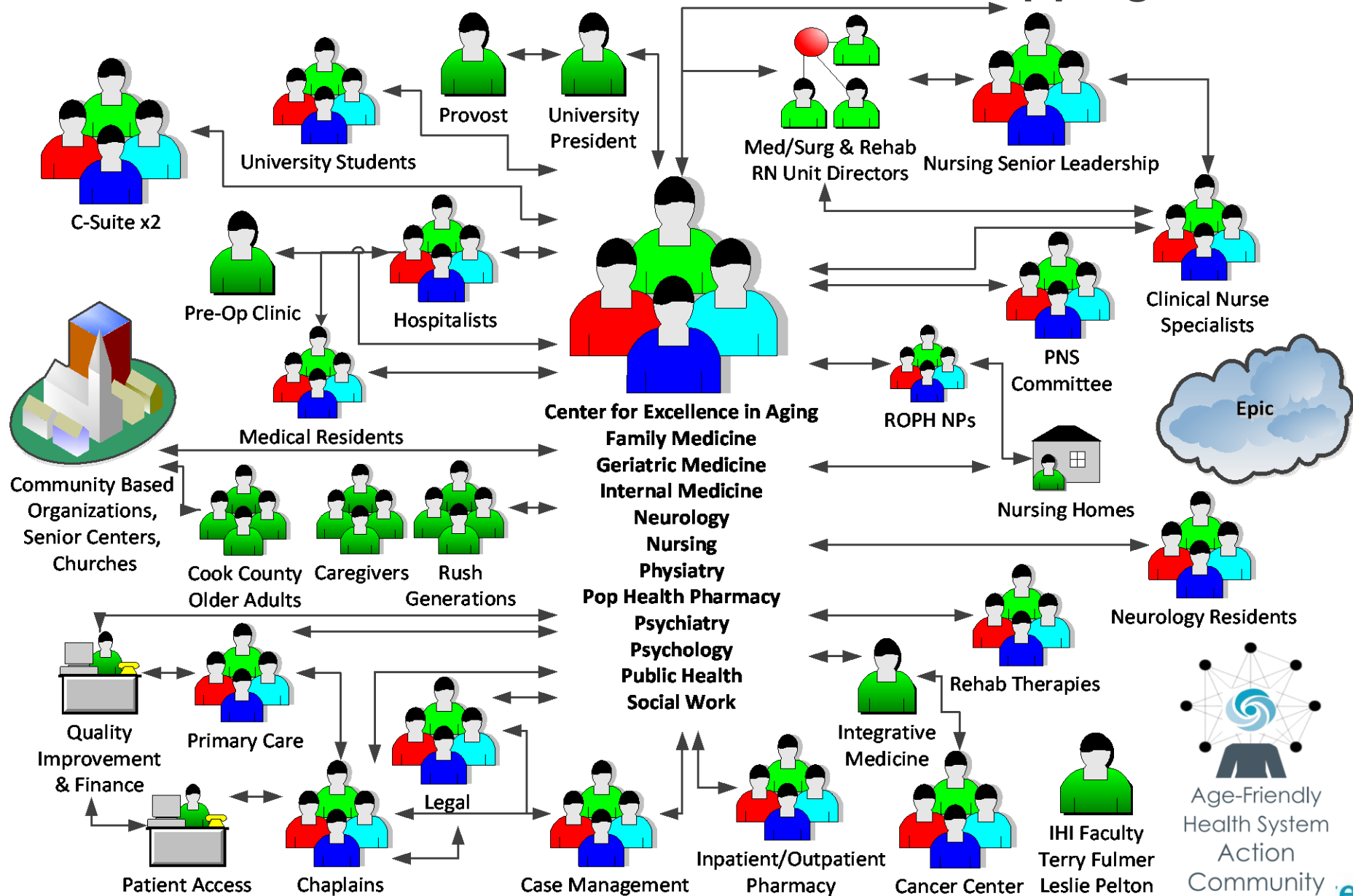
Age-Friendly Implementation



Age-Friendly Implementation



Diffusion of Innovation: AFHS Network Mapping



What Matters Initiatives

Inpatient

- What Matters on nursing rounds/boards

Inpatient/ Outpatient

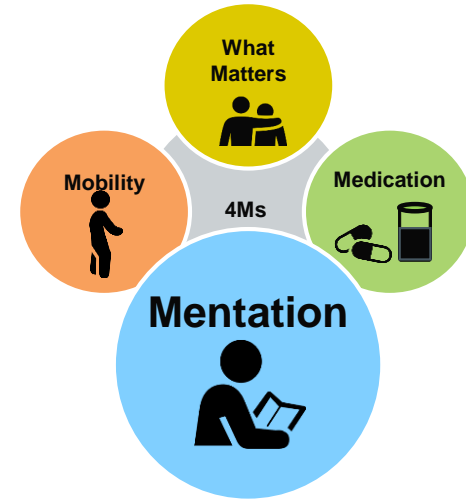
- What Matters events
- Advance Directives
 - Updating materials
 - Chaplain pilot in primary care
 - Pre-op clinic
- Caregiver Initiative
 - Identify ready, willing, and able
 - Teach-back clinic
 - Support

Community

- Schaalman Senior Voices



Mentation Initiatives



Delirium

Assess: 4AT; CAM-ICU

Act On:

- Provider order sets
- Dot phrases
- Resident education

Depression

Assess: PHQ-2 → PHQ-9 / GDS

Act On: Collaborative Care Team

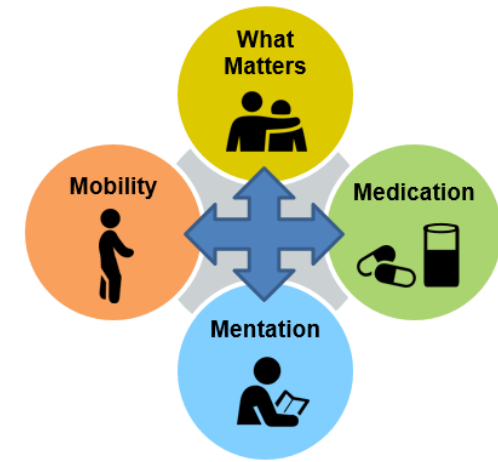
Dementia

Assess: Screening, Annual Wellness Visit

Act On:

- Caregiver education and support
- Dementia Friends
- Dementia Friendly Communities

Annual Wellness Visit 4Ms



Rush University Senior Care

- Ongoing AWW by NP

Rush Primary Care + Quality Improvement

- RN completes HRA via phone
- Physician completes cognitive screen and care planning in person
- Hired 2 RNs targeting 1500-2000 visits in first 12 months

Redesigning Template

- Human Factors Design expert reconfiguring Epic template
- Re-designing 4M after-visit summary as educational tool

Additional Value



Workforce

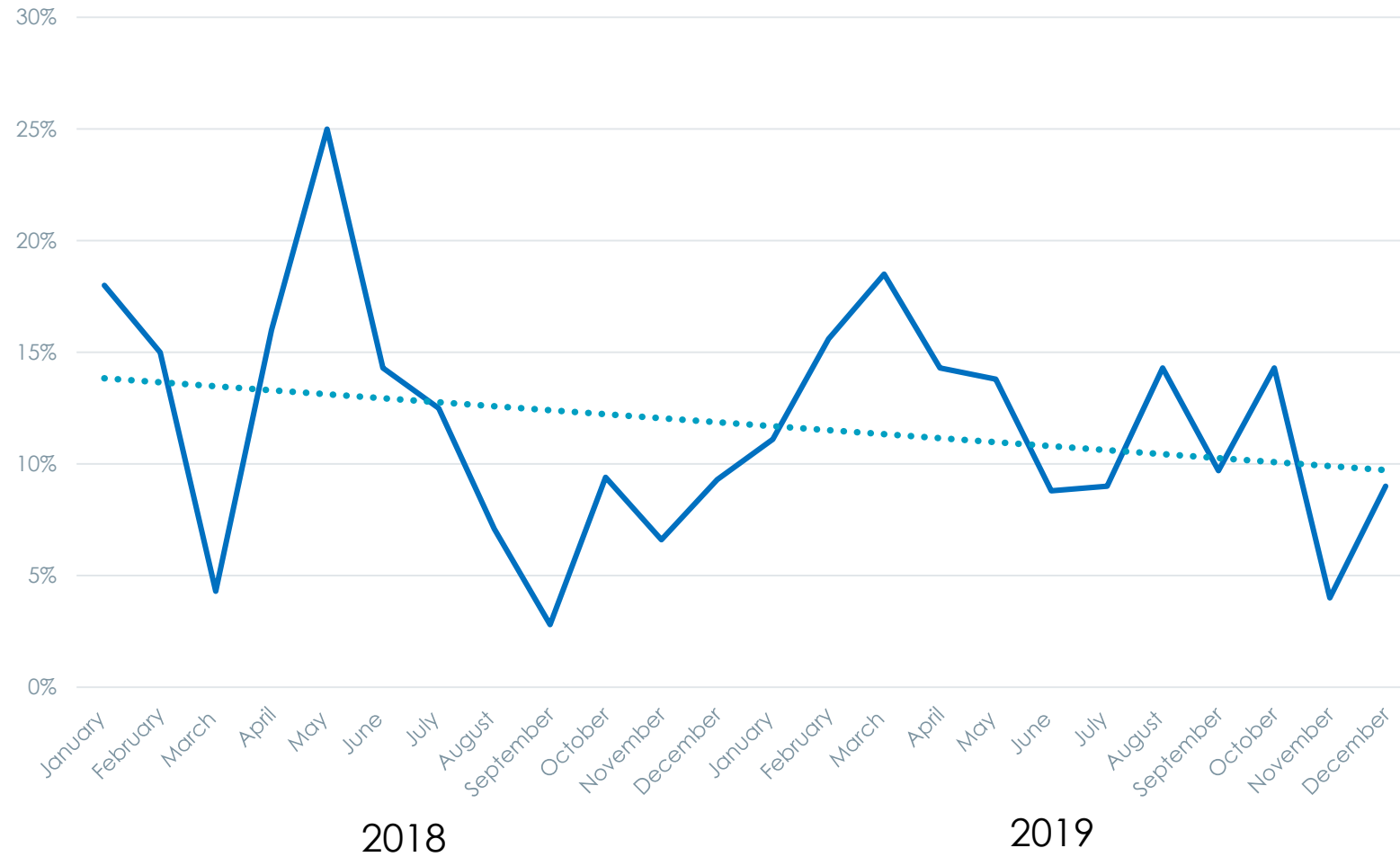
- Joy in talking about What Matters
- Mobility tech
- Increasing interest in geriatrics
- Creating connections
- Making a difference

External Measures

- Vizient
- U.S. News and World Report

Transitions of Care

30-day Nursing Home Readmissions
Rush Geriatric Medicine SNF team



Reflections for Continued Engagement

Major challenges

- Large, complex system
- Data accessibility and analysis
- Leadership changes
- Project overload

Major enablers

- Center for Excellence in Aging
- 4M subgroups, member spread
- Diffusion of innovation
- DNP projects
- Existing What Matters initiatives
- CEO and nursing leadership support



Age-Friendly
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Reflections for Continued Engagement

Wish we had known

- Map of how Rush and Epic operate for system change
- Process for getting data from disparate sources

Wish we had done differently

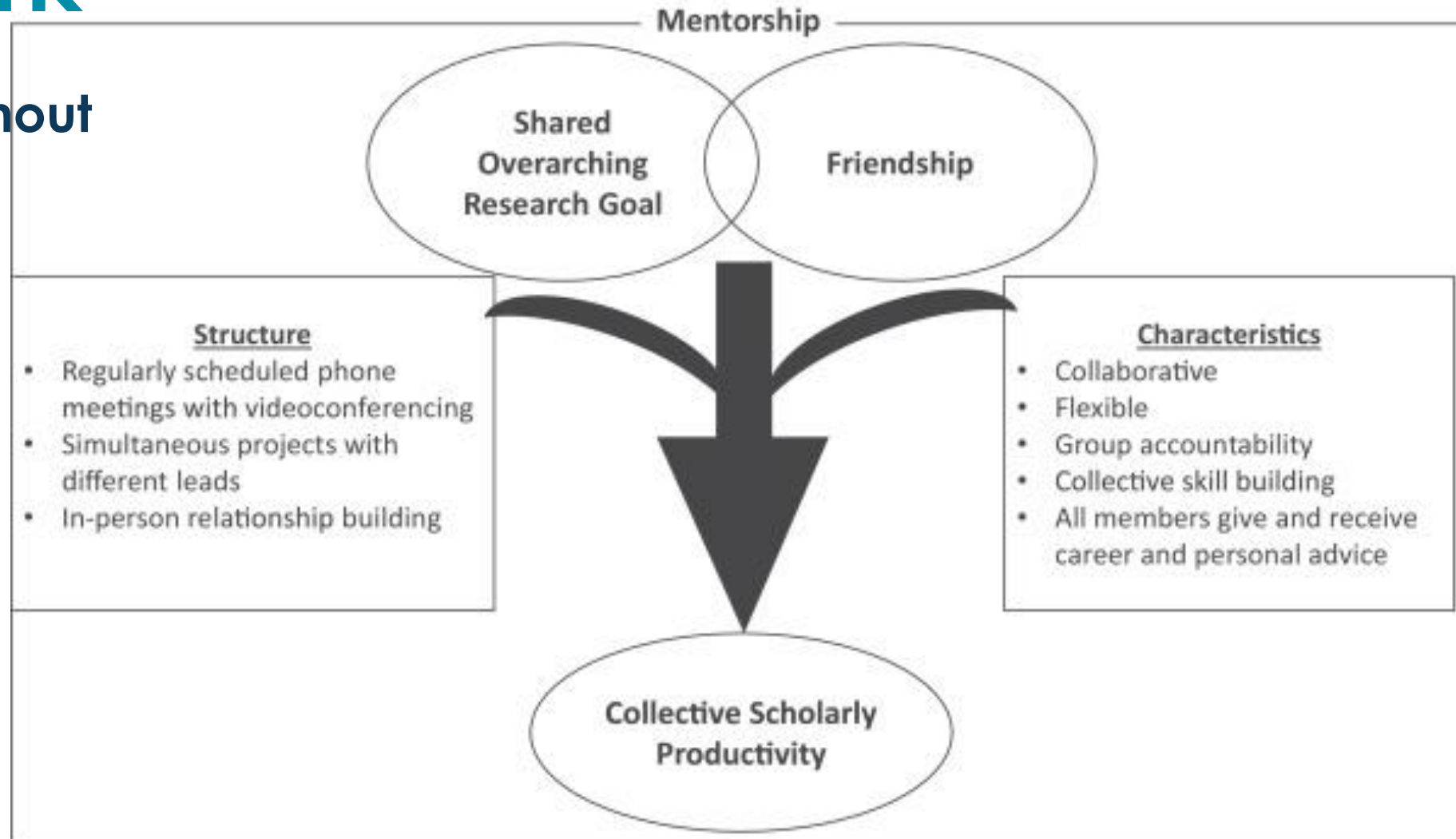
- Announced AFHS to all Rush staff at outset
- More education and focus groups earlier
- Engaged Marketing earlier
- Connected with other areas in hospital doing 4M work earlier

Glad we did the way we did it

- Engage key disciplines and executive leadership from start
- Grassroots engagement
- Shared design and leadership

Joy in work

- Decreased burnout
- Mentorship
- Networking
- Professional Development
- Academic Promotion



Recommendations and Words of Advice for Other Hospitals

- Participate in an Action Community
- Dedicated staff person to track processes, outcomes, and rationale for each decision made
- Physician and nursing leader champions
- Each member bring a new member to the team
- Learn from your own experience

AHA Case Studies

Learn what other organizations are doing around the nation to spread and sustain this work

Members in ACTION

BECOMING AN AGE-FRIENDLY HEALTH SYSTEM

MEMBERS IN ACTION CASE STUDY Kent Hospital, a member of Care New England

Overview

In February 2019, Kent Hospital, part of Care New England, opened an Adult Care for Elders (ACE) unit to test and implement the Age-Friendly Health Systems 4Ms Framework. The unit focused on documenting what matters to the patient and implementing delirium screening and prevention plan on all patients. Since opening, the unit has seen a reduction in both length of stay and falls with injury, along with an increase in patient and staff satisfaction.

The mission of Care New England (CNE) is to be "your partner in health" and create a community of healthier people in the areas served by the health system's hospitals and partners. The 749-bed health system includes five hospitals, a medical group, and a wellness center.

Additionally, the Integra Community Care Network is an accountable care organization (ACO) formed



by CNE, South County Health and Primary Care Physicians Corporation, an independent practice association. CNE realized to do true population meet the needs of its older adults Hospital in Warwick, R.I., where it is highest. Since 2014, the health leadership teams have supported service and clinical to senior older continue. At the work line in a need was p. Hospital statist that more than 30% of hospital ad patients over the age of 65, and of were over 85. CNE's participation Health Systems initiative focused Care for Elders (ACE) unit at Kent.

Members in ACTION

BUILDING AN AGE-FRIENDLY HEALTH SYSTEM AND COMMUNITY ALIGNMENT WITH STRATEGIC PRIORITIES

MEMBERS IN ACTION CASE STUDY Rush University Medical Center | Chicago, IL

Overview

Since its launch in 2017, the Rush Center for Excellence in Aging (CEA) has pursued its mission to improve the health and well-being of older adults, families and communities, aligning with the Rush University System for Health's (RUSH) strategic priorities. RUSH's mission is to improve the health of individuals and diverse communities through the integration of outstanding patient care, education, research and community partnerships.

After learning about the Age-Friendly Health Systems initiative, the CEA completed the Institute for Healthcare Improvement's (IHI) self-assessment tool to find current programs and practices involving the 4Ms across the health system. The Age-Friendly Health Systems initiative is an evidence-based approach that focuses on the 4Ms framework — what matters, medications, mentation and mobility. Although the CEA discovered pockets of excellence and identified health care teams addressing some or all of the 4Ms, none were applied consistently or broadly. There were large opportunities to improve and scale up these practices, aligning with ongoing health system priorities for quality improvement and cost savings.

Recognizing the synergy of the Age-Friendly Health Systems initiative with RUSH's strategic plans and the



priorities of the CEA, health system begin implementation and move lives of older adult patients, their in the process, RUSH employees

Approach

Shortly after conducting a self-assessment, the CEA participated in the first Age-Friendly Action Community, hosted by IHI through March 2018, and brought RUSH to begin the journey. RUSH is the second action community in valuing skills that informed their

RUSH staff approach practicing 4 ways:

Members in ACTION

HEALTHY TOGETHER CARE PARTNERSHIP EMBEDS AGE-FRIENDLY CARE INTO PRACTICE

MEMBERS IN ACTION CASE STUDY Banner Health System | Tucson, Arizona

Overview

Banner Health created its Healthy Together Care Partnership program in 2013 to provide patient-centered care to high-risk and vulnerable older adult patients. Six years later, the HTCP team joined the American Hospital Association's Age-Friendly Health Systems Action Community. That is when the Healthy Together Care Partnership, or HTCP, began its journey of embedding age-friendly care into practice. As a result, patient and provider satisfaction scores for patients who receive age-friendly care have increased, and costs have decreased. Promising outcomes related to emergency utilization also have been reported. The team is now working to spread its model for adopting age-friendly approaches throughout the health system.

Modeled on home-based primary care, HTCP serves Banner Health's adult, dual-eligible Medicaid and Medicare populations by providing evidence-based, high-touch, multidisciplinary care. This care includes in-home comprehensive health assessments, comprehensive medication management assessments, and short-term community-based case management.

Approach

Based in Tucson, HTCP has a case manager, nurse practitioner, behavioral health specialist, population health specialist, and each case manager assigns participants varies, the average of care based on their needs.

- no enrollment;
- care coordination that includes interventions;
- low level of care in which more than four brief interventions;
- medium level of care that includes provider visits; or
- high level of care in which

Nebraska. "Making health care the mission and way of

Value Initiative

Members in Action: Redesigning the Delivery System

Cedars-Sinai Medical Center – Los Angeles, Calif.

Age-friendly Health Care Improves Value for Older Adults with Fractures

The AHA's Members in Action series highlights how hospitals and health systems are implementing new value-based strategies to improve health care affordability. This includes work to redesign the delivery system, manage risk and new payment models, improve quality and outcomes, and implement operational solutions.

Overview

Cedars-Sinai Medical Center (CSMC) serves more than 1 million people each year, many of whom are older adults. Nearly 47% of all CSMC's discharges are adults over the age of 65, and the medical system cares for more patients over the age of 80 than any other academic tertiary health care system in the country.

CSMC is focusing on improving mobility for inpatient geriatric fracture patients to help them regain the quality of life important to them by minimizing potential complications and optimizing patient care outcomes. In July 2018, CSMC launched the Geriatric Fracture Program (GFP) to prioritize the care needs of patients age 65 and over who are admitted to the hospital with a bone fracture. The program was developed following well-known and accepted protocols by a multidisciplinary team, including physicians and nurses from orthopedics and geriatrics, pharmacists, case managers, and physical and occupational therapists that work with the department of geriatrics to provide wraparound care for these patients.

CSMC started with a quality improvement pilot program for the first year to provide standardized treatment for geriatric fracture patients. Developing the GFP involved recruiting an interprofessional care team; providing geriatric training to non-geriatricians; defining goals, scope and communication; and implementing a process for collecting project data daily and regular reporting. CSMC also standardized geriatric-centered preoperative assessments and inpatient interventions for the GFP. Following a process-improvement period, the blueprint for the GFP was shared with additional medical practice groups to expand the program.

To improve care for this population, CSMC is implementing age-friendly health care, which integrates the *Age-Friendly Health Systems Initiative's* 4Ms Framework into the care assessments and interventions:

Kent Hospital

Rush University Health System

Banner Healthy Together Care Partnership

TVI-Cedars-Sinai Medical Center

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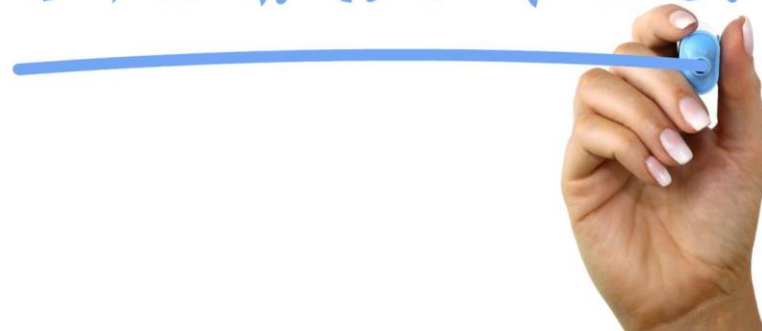
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THANK YOU





Questions? Stay in Touch!

www.aha.org/teamtraining

Email: teamtraining@aha.org • Phone: (312) 422-2609

