

2020 Age-Friendly Health Systems Action Community: An Invitation to Join Us

March – October 2020 Facilitated by IHI

This content was created especially for:



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).

What Are Age-Friendly Health Systems and Why Are They Important?

Three factors that impact the care of older adults in the United States today are occurring simultaneously, and together the factors make a compelling case for health systems to better support the needs of older adults and caregivers:

- *Demography*: The number of adults over the age of 65 is projected to double over the next 25 vears.¹
- Complexity: Approximately 80 percent of older adults have at least one chronic disease, and 77 percent have at least two.² Many of our health systems are ill-equipped to deal with the social complexity many older adults face.³
- 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. One consequence of this is a rate of ED utilization that is four times that of
 younger populations.⁴

Health systems frequently are not prepared for this complexity, and older adults suffer a disproportionate amount of harm while in the care of the health system. To address these challenges, in 2017, 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), set a bold vision to build a social movement so that all care with older adults is age-friendly care, which:

- Follows an essential set of evidence-based practices;
- · Causes no harm; and
- Aligns with What Matters to the older adult and their family caregivers.

Becoming an Age-Friendly Health System entails reliably providing a set of four evidence-based elements of high-quality care, known as the "4Ms," to all older adults in your system. When implemented together, the 4Ms represent a broad shift by health systems to focus on the needs of older adults. This is achieved primarily through redeploying existing health system resources. More information on the framework can be in <u>Guide to Using the 4Ms in the Care of Older Adults</u>.

The 4Ms — What Matters, Medication, Mentation, and Mobility — make care of older adults that can be complex, more manageable. The 4Ms identify the core issues that should drive all care and decision making with the care of older adults. They organize care and focus on the older adult's wellness and strengths rather than solely on disease. The 4Ms are relevant regardless of an older adult's individual disease(s). They apply regardless of the number of functional problems an older adult may have, or that person's cultural, ethnic, or religious background. The 4Ms are a framework, not a program, to guide all care of older adults wherever and whenever they touch your health system's care and services. The intention is to incorporate the 4Ms into existing care, rather than layering them on top, to organize the efficient delivery of effective care.

What Is an Age-Friendly Health Systems Action Community and How Can We Join?

An Action Community is a community of teams from across different health systems who come together to accelerate their own description and adoption of the 4Ms. Guided by expert faculty and an "all teach all learn model," teams participate on monthly webinars, attend an in-person meeting, and test specific changes to improve care for older adults. The Action Community is designed as an on-ramp for hospital-based teams (e.g., emergency departments, intensive care units, general wards, medical-surgical units) and ambulatory care teams (e.g., primary care, specialty care) to test and adopt age-friendly care.

The next Age-Friendly Health Systems Action Community will take place from March 25, 2020 – October 2020.

If you are ready to enroll sites in the Action Community, you can do so here: Enroll Now!

To participate in the Action Community, interested teams will be asked to:

- Identify a clinical care setting and patient population to test the 4Ms;
- Bring together an interdisciplinary team (please consider engaging a diverse team that reflects
 your older adult community, including an older adult on the team, and enlisting an individual
 with prior experience using quality improvement methodology);
- Identify a leader with authority over the selected care setting or population to support the team's activities and progress and participate in the leadership track.

February 24, 2020	Learn More About the Action Community!	<u>Join WebEx</u>
3:00-4:00 PM ET	Join Age-Friendly Health Systems leaders Don Berwick, MD and Leslie Pelton on a Friends of Age- Friendly Quarterly Call to learn more about this opportunity	Password: friends

What Are the Benefits of Participating?

- Improved care for older adults through the organization and delivery of evidence-based care. At the end of the seven-month Action Community, participating organizations will have implemented specific changes of the Age-Friendly Health Systems 4Ms Framework in their unit, clinic, emergency department, or program.
- Recognition by IHI and The John A. Hartford Foundation as Age-Friendly Health
 Systems. By submitting a description of how you are operationalizing the 4Ms in your setting, as
 well as monthly counts of the older adults reached by 4Ms care in your setting, you will be
 recognized and celebrated on IHI's website, in press releases, and in other venues as being an AgeFriendly Health System, Committed to Care Excellence.

All teach all learn model. By participating in the Action Community, you will have the
opportunity to build relationships and learn from expert faculty, as well as peers around the
country that have found innovative solutions to similar challenges and obstacles that you may face.
In addition, you will have opportunities to share your organization's learning and celebrate its
progress with the movement.

What Is the Cost to Participate?

There is no fee to participate in the Age-Friendly Health Systems Action Community. A health system, hospital, or practice in the US can enroll as many sites/teams as it would like to participate.

The cost of participation includes the time your team will allocate to engage in Action Community activities such as participating on monthly webinars, attending an in-person meeting, testing specific changes in their daily work, and asking questions and sharing progress in between program activities. To be recognized as an Age-Friendly Health System, your hospital and practice must submit a description of how they are operationalizing the 4Ms via this <u>survey</u>.

The Age-Friendly Health Systems 4Ms is a framework for the delivery of improved, evidence-based care and it is not a program or model to be layered on top of existing care. Given that, the 4Ms guides how existing resources are used and does not necessarily require new resources. IHI developed The Business Case for Becoming an Age-Friendly Health System to help organizations understand the potential financial benefits of becoming an Age-Friendly Health System.

What Data Submission Is Required to Participate?

To participate in the Action Community and be recognized as an Age-Friendly Health System, you will share with IHI how you plan to put the 4Ms into practice. Completion of this initial step will result in you being recognized as an Age-Friendly Health System-Participant. Once your description of putting the 4Ms into practice is reviewed by IHI for alignment with an Age-Friendly Health System, you will be invited by IHI to share a count of older adults whose care includes the 4Ms each month, for three months. Completion of this step will result in you being recognized as an Age-Friendly Health System-Committed to Care Excellence. All your information will be submitted electronically to IHI. A worksheet version of the Description can be found on page 22 in the Guide to Using the 4Ms in the Care of Older Adults.

During the Action Community, you will learn how to set up a measurement dashboard to study the impact of adopting the 4Ms in your setting. This is an important step in putting the 4Ms into practice and is critical for sustaining and scaling-up your age-friendly efforts. **However, your team will not be required to report this data to IHI.**

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What Happens During an Action Community?

Monthly Team Webinars	_	Team Webinars are 60-minute webinars focused on understanding the steps for testing and implementing Age-Friendly care in your setting and illustrating 4Ms care in action through examples.
	_	Purpose : Teams can describe how the 4Ms will be adapted and implemented in their setting and count the number of older adults whose care includes all 4Ms.
Monthly Topical Peer Coaching Webinars	_	Topical Peer Coaching Webinars provide an opportunity for participants to learn from one another and share ideas, successes, and challenges related to a specific topic or setting (e.g., optimizing the EHR, developing measurement systems, ACE units).
	_	Purpose : Through peer sharing, teams identify specific ideas they can test and ways to address challenges.
Monthly Scale-Up Webinars for Leaders and Sponsors	_	Scale-Up Webinars are designed to support leaders to set-up local conditions for scale-up of Age-Friendly care. Topics will guide you in how to make the case for Age-Friendly care within your organization, including how to make the business case.
	_	These webinars are open to leaders and participants from current and past Action Communities.
	_	Purpose : Leaders have tools and approaches to scale-up the 4Ms.
In-Person Meeting with Action Community Teams	_	All teach all learn approaches to accelerate your 4Ms adoption with health systems from around the country. The In-Person will take place in June in the Boston area, additional details will be provided soon after enrollment in the Action Community.
	_	Purpose : Teams will come together across the Action Community to share learnings and build relationships.
Ongoing Testing of Age- Friendly Interventions	_	Informed by the Monthly Team Webinars and the <u>Guide to Using the</u> <u>4Ms in the Care of Older Adults</u> , participants will test and begin to implement specific key actions in their setting.
Recognition as an Age- Friendly Health System	-	Action Community participants work towards two levels of recognition as an Age-Friendly Health System.
		1. Recognition as an Age-Friendly Health System - Participant : determine how you will practice the 4Ms in your clinical care setting and submit a Description <u>electronically</u> . You will receive feedback from an IHI IA on whether the Description meets the minimum definition of an Age-Friendly Health System. A worksheet version of the Description can be found on page 22 in the <u>Guide to Using the 4Ms in the Care of Older Adults</u> .
		2. Recognition as an Age-Friendly Health System - Committed to Care Excellence : Once your description is approved by IHI, to be recognized as Committed to Care Excellence, count the number of older adults that receive 4Ms care in your setting according to your description. You will be recognized at this level after submitting three months of counts.

Partners

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 Action Community also draws on the expertise of the Advisory Group and experts in the 4Ms, testing and scale-up methodology, and organizational psychology. A full list of advisors can be found on www.ihi.org/AgeFriendly.

Questions?

Please do not hesitate to contact the IHI Age-Friendly Health Systems team by emailing <u>AFHS@IHI.org</u> or KellyAnne Pepin directly at <u>KPepin@ihi.org</u>. We look forward working together to ensure that every older adult always receives age-friendly care.

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References

- ¹ *The State of Aging and Health in America 2013*. Atlanta: Centers for Disease Control and Prevention, US Department of Health and Human Services; 2013. https://www.cdc.gov/aging/pdf/State-Aging-Health-in-America-2013.pdf
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- ³ Abrams M, Milstein A. NAM Workshop Series on High-Need Patients. National Academy of Medicine; October 2016. https://nam.edu/wp-content/uploads/2016/12/Taxonomy-and-care-model-presentation-FINAL.pdf
- ⁴ Institute of Medicine Committee on the Future Health Care Workforce for Older Americans. *Retooling for an Aging America: Building the Health Care Workforce*. Washington, DC: National Academies Press; 2008. 2, Health Status and Health Care Service Utilization. https://www.ncbi.nlm.nih.gov/books/NBK215400/