



Age-Friendly Health Systems

Geriatrics Workforce Enhancement Program

Coordinating Center

Pre-Conference

May 1, 2019

Portland, Oregon



The John A. Hartford Foundation
Dedicated to Improving the Care of Older Adults



AGS19 ANNUAL SCIENTIFIC MEETING



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The John A. Hartford Foundation

\$585,000,000

**Grants authorized
since 1982 to
improve health care**

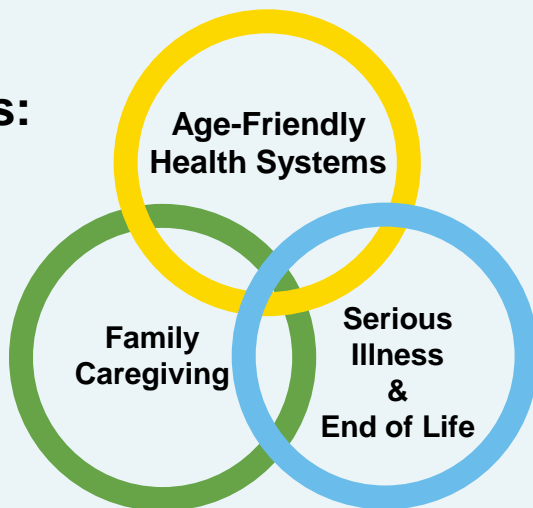
- Building the field of aging experts
- Testing & replicating innovation



The John A. Hartford Foundation

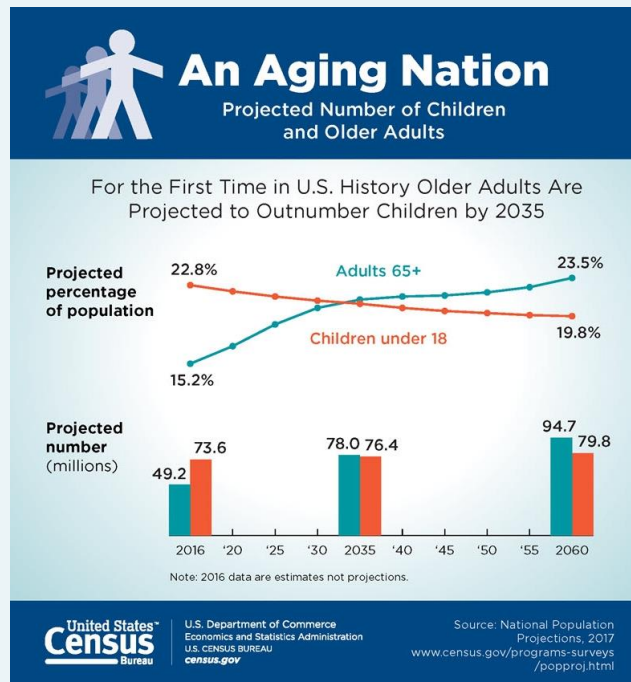
Dedicated to Improving the Care of Older Adults

Priority Areas:



Why Age-Friendly Health Systems?

- Demography
- Complexity
- Disproportionate harm



The Game-Changing Aim

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

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

Our **first** aim is to reach 20% by December 31, 2020: 1000 hospitals and 1000 primary care practices

Partners



The John A. Hartford Foundation
Dedicated to Improving the Care of Older Adults



**Institute for
Healthcare
Improvement**



**American Hospital
Association®**



CHA®
Catholic Health Association
of the United States

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).

Pioneer Health Systems



Evidence-based Practice Changes

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

Research review led to
90 care features
identified

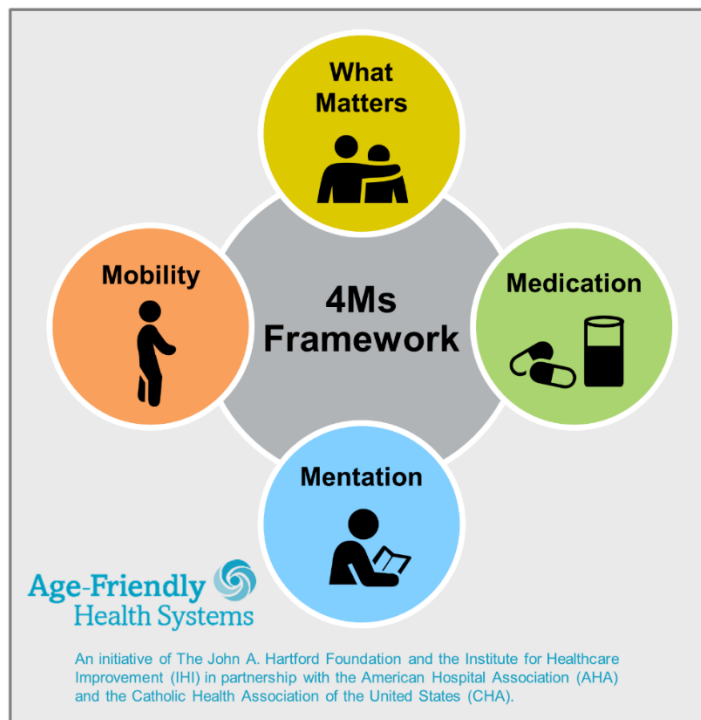
Redundant concepts
removed and **13 discrete
features** found by IHI
team

Expert Meeting led to
the selection of the “vital
few”: **the 4Ms**

The 4Ms Framework

- Builds on very strong evidence
- Represents core health issues that matter to older adults
- Simplifies & reduces implementation and measurement burden while increasing effectiveness
- Components are synergistic and reinforce one another
- Has an impact on key quality and safety outcomes (CMS)

Fulmer T, Mate KS, Berman A. The Age-Friendly Health System imperative. *J Am Geriatr Soc*. 2018 Jan;66(1):22-24. doi: 10.1111/jgs.15076.



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

Gateways to Age-Friendly Care and Support



Institution-based
Care



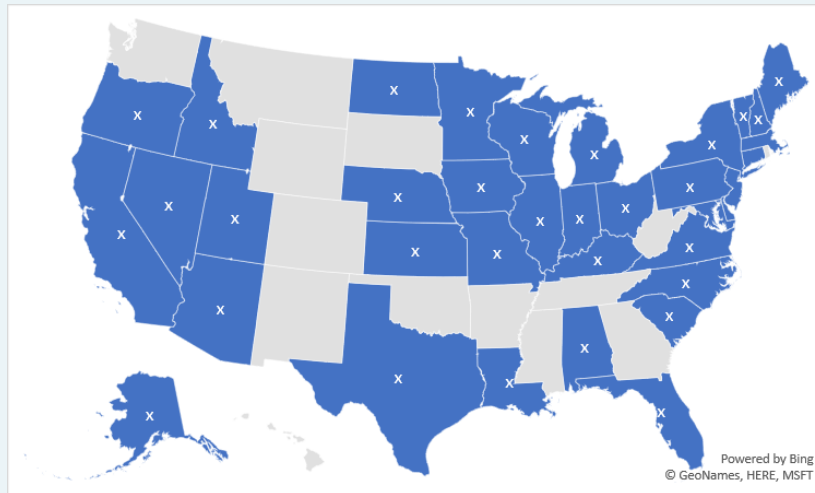
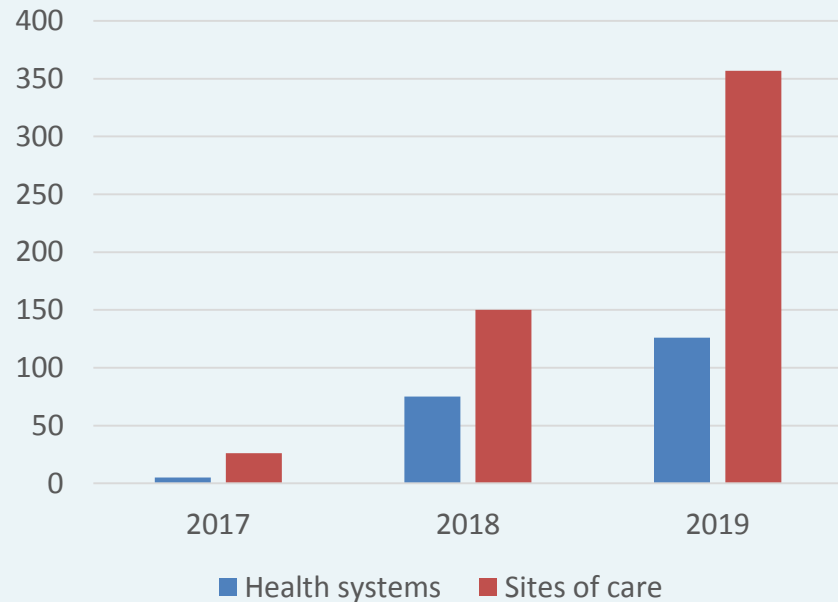
Ambulatory/ Primary
Care



Community-based
Organizations

Age-Friendly on the Rise

Cumulative growth in participation
(as of Feb 2019)



126 systems 357 sites

37 states

Stakeholders Engaging with Our Work



Department of Health



Geriatric Workforce Enhancement Program

Initial Program Objectives:

- Change clinical training environments into integrated geriatrics and primary care delivery systems
- Train providers to assess and address the needs of older adults and families/caregivers at the individual, community and population levels
- Deliver community-based programs to patients, families and caregivers with the knowledge and skills to improve health outcomes and quality of care



Geriatric Workforce Enhancement Program

Program Objectives:

“Transform clinical training environments into integrated geriatrics and primary care systems to become **age-friendly health systems** that incorporate the principles of value-based care and alternative-payment models. The essential elements of age-friendly health systems are:

- What matters to the older adult
- Medication
- Mentation
- Mobility



Geriatrics Workforce Enhancement Program – Age-Friendly Health Systems – Coordinating Center

Objectives:

- Provide Opportunities for collaborative learning among GWEP sites
- Offer content and resources for professional and public education to improve quality of care for older adults
- Provide mentoring and consultation with geriatrics experts
- Engage GWEP sites in advocacy
- Conduct a national evaluation for the GWEP sites



Institute for Healthcare Improvement

Mission

Improve health and health care worldwide

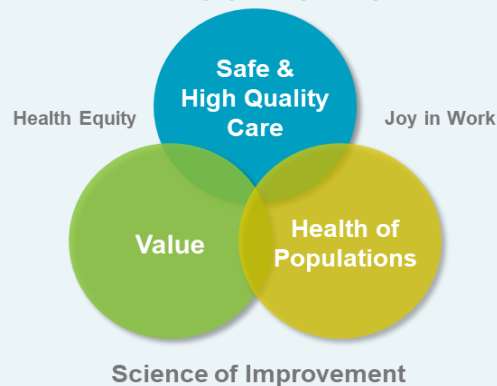
Vision

Everyone has the best care and health possible

Strategic Approach

IHI develops and applies practical improvement methods to improve and sustain performance in health and health systems across the world. We generate optimism, spark and harvest fresh ideas, and strengthen local capabilities.

What We Do



How We Work

- Convene
- Innovate
- Partner for Results



“The First Law of Improvement”

Every system is perfectly designed to
achieve exactly the results it gets.

Dr. Paul Batalden

To get a different result, we must
change the system.

An Age-Friendly Health System...

1. **Defines** how it operationalizes the 4Ms (tools and how fit into the workflow)
2. **Counts** the number of older adults whose care includes the 4Ms (reported by each site)
3. **Shares** the information with the Action Community and IHI to be celebrated on IHI.org



Action Community = Way for Health Systems to Test 4Ms + Measure Impact + Share Learning



Participate in 90 minute interactive webinars

- Monthly content calls focused on 4Ms
- Opportunity to share progress with other teams by brief case study



In-person meeting

- One all team meeting
- Live case visits: Bilateral structured visits to nearby mentor AFHSS



Test how to operationalize 4Ms

- Throughout each month
- Test implementing specific changes in your practice



Share how you operationalize 4Ms and count of older adults reached

- Submit monthly



Topical peer coaching sessions

- Each month join other teams for discussions focused on essential topics e.g. EHR



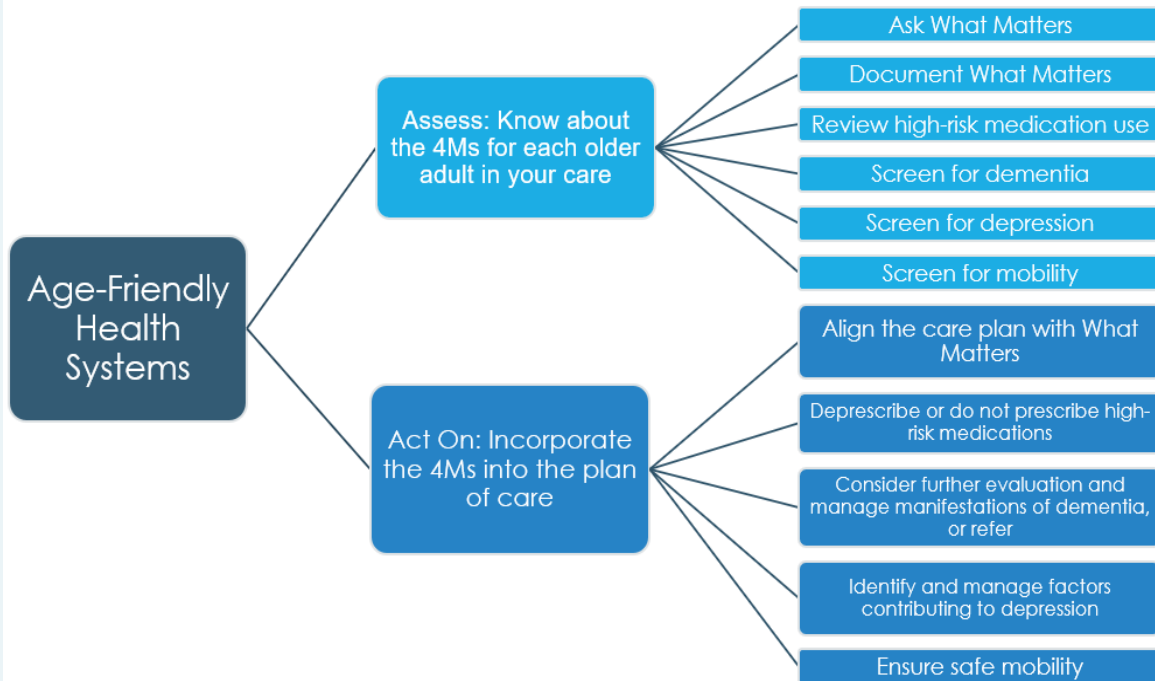
Leadership track to Support System-level scale up

- Monthly leadership calls to build the business case for spread of the 4Ms



Age-Friendly
Health System
Action
Community

4Ms Framework: Ambulatory/Primary Care



Measures of an Age-Friendly Health System

Basic Outcome Measures (Segmented by Age)

- 30-day readmissions
- Emergency department visit rate
- H/CG – CAHPS
- Length of stay

Advanced Outcome Measures (Segmented by Age)

- Delirium
- Goal-concordant care (e.g. by collaboRATE survey)
- Measures segmented by race/ethnicity

Assess: Know About the 4Ms for Each Older Adult in Your Care

12

Key Changes

Ask the older adult What Matters most	<p>This change focuses clinical encounters on complex care needs on What Matters most.</p> <p>If you do not have existing questions to ask, try asking:</p> <ul style="list-style-type: none">• "What is the one thing about your health, in health problem OR the health care team that is most important to you?"• For older adults with advanced or serious illness: "What are your goals if your health situation worsens?"
Document What Matters	<p>Documentation can be on paper or in the electronic health record across settings</p>
Review high-risk medication use	<p>Specifically, look for:</p> <ul style="list-style-type: none">• Benzodiazepines• Opioids• Highly-anticholinergic medications, especially in older adults• All prescription and over-the-counter sedatives• Muscle relaxants• Tricyclic antidepressants• Antipsychotics
Screen for dementia	<p>If you do not have an existing tool, try using the</p>
Screen for depression	<p>If you do not have an existing tool, try using the</p>
Screen for mobility	<p>If you do not have an existing tool, try using the</p>

Age-Friendly Health Systems

Guide to Using the 4Ms in Care of Older Adults: How to Assess and Act on the 4Ms for Care Teams in Hospitals and Primary Care Practices

March 2019



Institute for
Healthcare
Improvement

This content was created especially for:
**Age-Friendly
Health Systems**

An initiative of John A. Hartford Foundation and
Institute for Healthcare Improvement in partnership
with American Hospital Association and
Catholic Health Association of the United States

By the numbers...

- Hundreds of actions being executed to implement age-friendly changes
- 513 members of AFHS list-servs
- AFHS website 26,497 page views from 20,220 unique visitors
- 78 publications
- 20+ keynote speeches including public launch events at AGS, AHA, IHI
- Tens of thousands of patients receiving 4M-guided Age-Friendly care

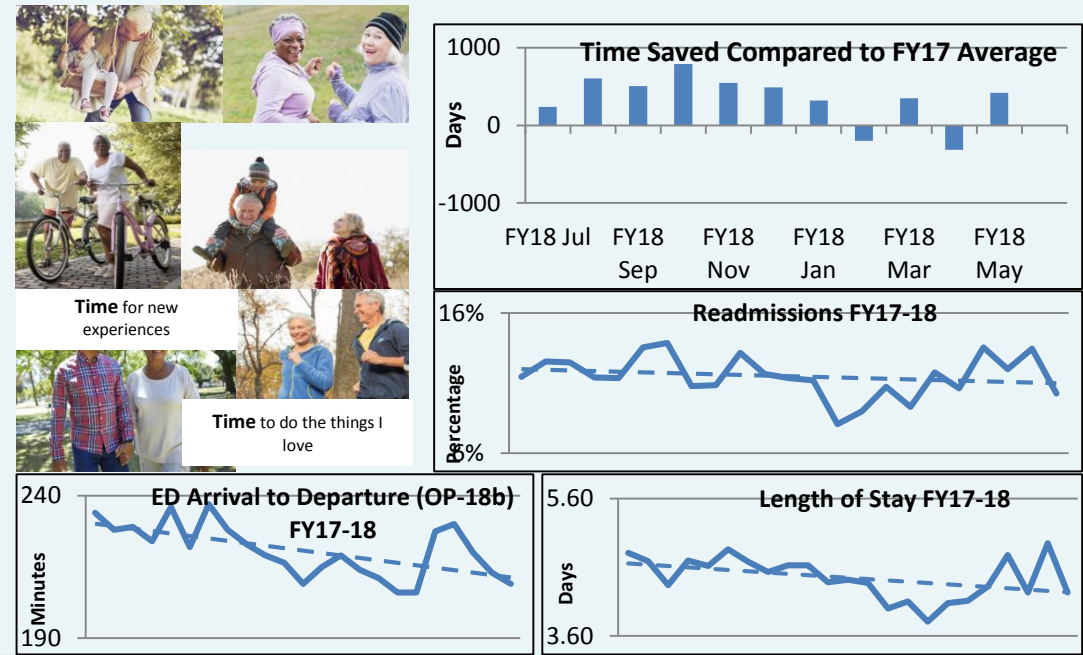
Examples...



	Before Action Community	4 months into Action Community
Advance care plan in place	44% (11 of 25)	94% (32 of 34)
Screened for depression	48% (12 of 25)	73% (25 of 34)
Screened for mobility	84% (21 of 25)	97% (33 of 34)

Examples...

What Matters to Me?



10.23 years
=

**The amount of time AAMC
has given back to patients
(65+) since 2017**

“What Matters”
documented in record
22,263 times since start
of initiative

Business Case Calculator



Making the Business Case for Age-Friendly Health Systems

January 2018

1
2
3
4
5

Scenarios

Scenario Name: No PAC

Find Levels (Target ROI)

1. Start
All Hospital

2. Population & 4M Period

Number of annual admissions
4,000

Amortization period (Years)
4

3. 4M Costs

Per Year

Launch - one time only expenses
\$2,000
\$500

Fixed expenses
\$0

Variable cost per admission
\$300
\$1,200,000

Total annual cost of program
\$1,200,500

5. Case cost from coding & payment for HAC

Revenue per case detected (code modification)
\$1,500

Detection & coding effectiveness (% cases)
0.0%

Results

Total Cost Avoided

\$3,200,000

4M Costs

\$1,200,500

Net Benefit

\$1,999,500

ROI

166.6%

Years Given Back

8.77

Levels

Target ROI

50%

Delirium Effectiveness

20.0%

Delirium Incidence (%)

15.0%

Total Program Cost

\$3,199,891

Simulation Results (ROI)

Max

0.5%

Min

1.6%

Average

1.0%

% Below Target

100.0%

4. Estimates/Values

Delirium

HAPU'S

Other Condition

Incidence (%)

20.0%

2.0%

0.0%

Total cases

800

80

0

4M program effectiveness

40.0%

20.0%

0.0%

Cases avoided

320

16

0

Costs avoided

\$3,200,000

\$0

\$0

Key Metrics

Type of stay

Length of stay

Cost per day

Length of stay

Cost per day

Length of stay

Cost per day

Normal

5.0

\$2,000

5.0

\$2,000

5.0

\$1,500

Extended due to condition

5.0

\$0

0.0

\$0

0.0

\$0

Amb: +\$3.6m in net income; Inpt: 50% ROI in Year 1

Contacts

- **AGS GWEP-Coordinating Center**

<https://www.americangeriatrics.org/programs/geriatrics-workforce-enhancement-program>

- **Age-Friendly Health Systems**

Visit www.ihl.org/AgeFriendly to access resources, including the 4Ms Framework Change Package, or email AFHS@ihl.org to learn about Friends of Age-Friendly Calls

Why it Matters to Me





Thank you

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