



**Department  
of Health**

# **Age Friendly Health Systems**

**June 20, 2018**

# 2018 Governor's State of the State

“To support the State’s commitment in creating age friendly communities, the State will set a goal of making fifty-percent of all health systems age friendly within the next five years, which will include the establishment of age-friendly Emergency Rooms that will be better equipped to provide care to aging New Yorkers with cognitive and other physical disabilities.”



# Why Age Friendly?

New Yorkers are continuing to age

- 2.9 million New Yorkers over the age of 65 (14% of the total population)
- Of those 2.9 million, 421,000 New Yorkers over the age of 85<sup>1</sup>

But why does that matter?

- When seniors interact with health systems they tend to have 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<sup>2</sup>

<sup>1</sup> <https://aging.ny.gov/ReportsAndData/2015CountyDataBooks/01NYS.pdf>

<sup>2</sup> <https://khn.org/news/elderly-hospital-patients-arrive-sick-often-leave-disabled/>



# Why Age Friendly?

NYS is committed to making sure older New Yorkers have a better experience in their healthcare interactions

- 2017 AARP and WHO designation as the first Age Friendly State in the Country

# Age Friendly Health System Initiative

John A. Hartford Foundation  
and Institute for Healthcare  
Improvement (IHI)



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

# Age-Friendly Health Systems

## June 20, 2018

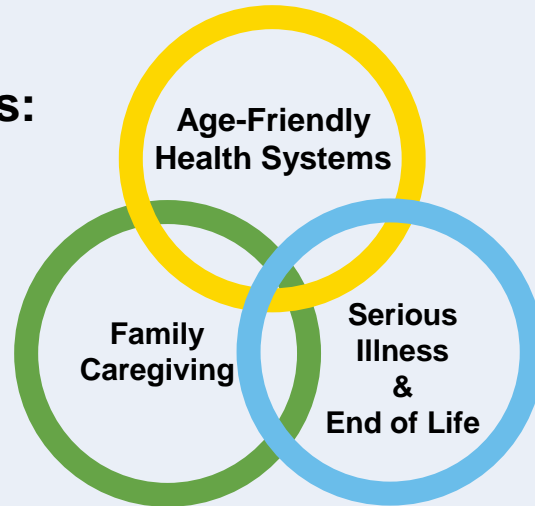
**Terry Fulmer, PhD, RN, FAAN**  
**President**  
**The John A. Hartford Foundation**

# 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:**



# Dedicated to Improving the Care of Older Adults

**\$565,000,000**

**Amount invested in  
Aging and Health  
since 1982**

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

Photo by Julie Turkewitz



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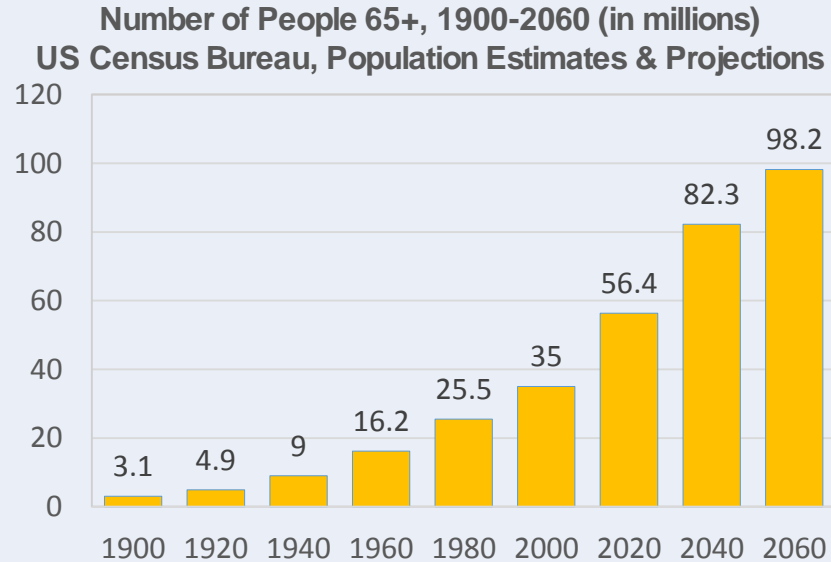


# The Aging Population: Success and...

**10,000 people turn 65 every day**

**Older adults contribute to society in vital ways.**

**Yet we aren't always valued as we get older.**



**Priority Area:**

**Age-Friendly  
Health Systems**

**Few hospitals and health systems meet the needs of older adults.**

**Evidence-based, age-friendly approaches to better care exist.**

- **Focusing on what matters to older adults receiving care**
- **Improving health outcomes and reducing harm**
- **Achieving lower costs and better value**



# Age-Friendly Health Systems:

**Reliably provide a set specific, evidence-based geriatric best practice interventions**

**Achieved by:**

- **Better health outcomes for older adults**
- **Reduced waste associated with low-quality services**
- **Increased utilization of cost-effective services for older adults**
- **Improved reputation and market share**



# Age-Friendly Health Systems led by IHI

## Goals:

- 1) **Define essential elements of high quality care for health systems**
- 2) **Build on Foundation's geriatrics models and expertise**
- 3) **"4M's" are indicators of broader shift by health systems to focus on older adults:**
  - **What Matters**
  - **Medication**
  - **Mobility**
  - **Mentation (e.g. cognitive status, confusion)**
- 4) **Reach 20% of health systems by 2020 (~ 1000 hospitals)**



# The Issues and Gaps (1)

## Older adults:

- **Routinely receive unwanted care and treatment**
- **Routinely do not receive necessary and evidenced care**
- **Are needlessly harmed by inappropriate medications**
- Have functional decline when we don't encourage mobility
- **Experience avoidable delirium and cognitive decline**
- **Disproportionately experience needless harms and death**



# The Issues and Gaps (2)

- **Geriatrics models of care proven very effective**
- **Yet models reach only portion who could benefit**
- **Models difficult to disseminate and scale**
- **Models difficult to reproduce in community hospitals with less resources**
- **Few models work across care settings**
- **Various models co-exist and confuse**



# Evidence



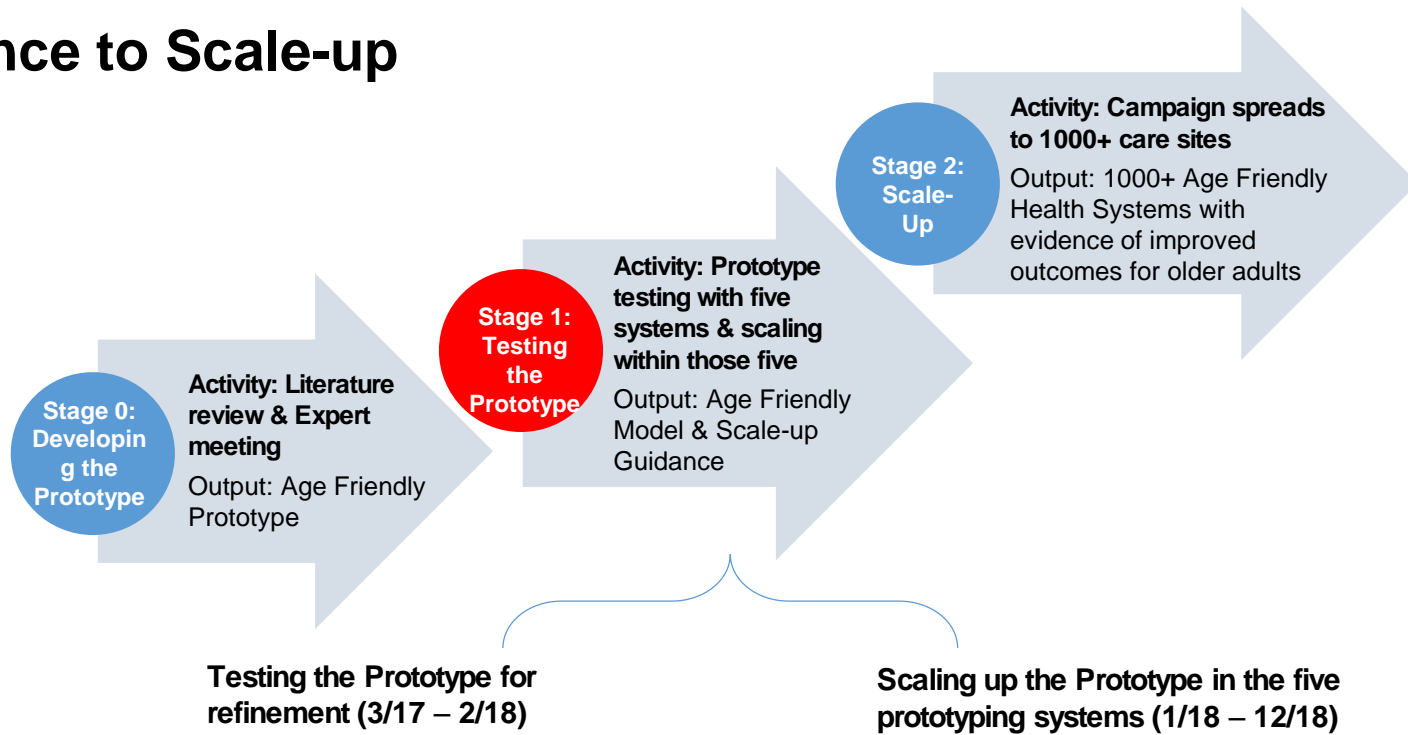
- **What Matters:**
  - Asking what matters lowers inpatient utilization (↓ 54%), ICU stays (↓ 80%), increases hospice use (↑ 47.2%) patient satisfaction (AHRQ 2013)
- **Medications:**
  - Older adults suffering adverse drug event have higher rates of morbidity, hospital admission and costs (Field 2005)
  - 1500 hospitals in CMS HEN 2.0 reduced 15,611 adverse drug events saving \$78m across 34 states (HRET 2017)
- **Mentation:**
  - Depression in ambulatory care doubles cost of care (Unutzer 2009)
  - 16:1 ROI on delirium detection and treatment programs (Rubin 2013)
- **Mobility:**
  - Older adults who sustain a serious fall-related injury required an additional \$13,316 in hospital operating cost and increased LOS of 6.3 days (Wong 2011)
  - 30+% reduction in direct, indirect, and total hospital costs among patients who received care to improve mobility (Klein 2015)

# The Partnership: Five Health Systems





# Sequence to Scale-up



1. Test the model in the five health systems – cover all 4Ms and all settings
2. Measure the interventions
3. Update the Age-Friendly model

## To Date:

- **More than 50,000 patients have received “age-friendly” health care.**
- **5 health systems with 26 sites in 7 states have been transforming care, with more than 60 active tests on the 4Ms.**
- **There’s been a groundswell of interest -- more than 250 individuals have joined the “Friends of Age-Friendly” group.**



# Examples of what has been implemented

- **Ann Arundel**
  - **Established age-friendly champions throughout the system.**
  - **Improved the cultural mindset of physicians, nurses and care managers in making older patients' needs a priority, reducing patient length of stay by 26 hours on average.**
- **Ascension**
  - **Aligned the age-friendly framework and interventions with the health system's integrated scorecard goals.**
- **Kaiser Permanente**
  - **Tracked continuous improvements within the KP Woodland Hills ACE unit.**
  - **Developed and used patient-facing medication lists, including nutrition and hydration instructions in the palliative care clinic.**
- **Providence St. Joseph Health**
  - **Increased the visibility of senior needs within the organization by engaging strategic resources and augmenting staff to advance the vision.**



# Interested in joining the Age-Friendly Health Systems? **Register to join the Age-Friendly Action Community by August 1<sup>st</sup>.**

Interested teams will be asked to:

- **Submit a letter of interest**
- **Select a clinical care setting and patient population**
- **Form a disciplinary team Identify a leader**
- **Participate in Action Community activities**



# Action Community: September 2018-March 2019



Participate in 90 minute interactive webinars

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



Test Age-Friendly interventions

- Test implementing specific changes in your practice



Submit data on a standard set of Age-Friendly measures (brief)

- Submit a data dashboard on a standard set of process and outcome measures



Option to join two drop-in coaching sessions

- Join other teams for measurement and testing support.

Leadership Track to Support Scale-Up



# June – August 2018

## Teams

- Enroll in the Action Community **by August 1<sup>st</sup>** – e-mail [AFHS@IHI.org](mailto:AFHS@IHI.org)
- Complete IHI online improvement training
- Participate in orientation webinar – Next webinar is June 26<sup>th</sup>
- Complete process-walk to observe delivery of care in action
- Check feasibility of data collection and establish data capture process
- Meet with three older adults and ask them “What Matters?” most to them

## Leaders

- Participate in one orientation webinar





Thank you

[terry.fulmer@johnahartford.org](mailto:terry.fulmer@johnahartford.org)

[www.johnahartford.org](http://www.johnahartford.org)



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# NYS Tentative Plan to Reach our Goal

## Year 1

- Educate and inform health systems on what it means to be an Age Friendly Health System
- Establish and convene champions workgroup

## Year 2-3

- Establish guidance of how health systems can become age friendly
- Continue to support systems through policy and other incentives
- Begin an evaluation process for successes/implementation of age friendly initiatives

## Year 4-5

- Continue monitoring, offer support, spread the movement



# What support will be offered for the first year?

- Continue to partner with John A. Hartford Foundation and Institute for Healthcare Improvement (IHI) to make sure NYS Health systems have necessary information on Age Friendly Health System Initiatives
- Additional webinars on other age friendly programs that health systems can implement
- Establish a NYS Age Friendly listserv

# Age Friendly Health System Champions

Establish a network of Age Friendly Health System Champions

- Provide input to DOH on establishing age friendly health systems
  - Work with DOH to create a best practice document to be disseminated to other systems

# What can you do?

- Evaluate your system with the 4Ms
- Join Action Communities [AFHS@ihi.org](mailto:AFHS@ihi.org)
- Join our listserv
  - E-mail [ALTCteam@health.ny.gov](mailto:ALTCteam@health.ny.gov) to join listserv
- Look into existing models and programs
- Stay tuned for webinars on topics such as NICHE and Geriatric ED Accreditation
- Reach out to ALTC team at [ALTCteam@health.ny.gov](mailto:ALTCteam@health.ny.gov) if you are interested in becoming a champion

# Questions?

# Resources

- Slides will be sent around and can be accessed in the hand out section
- [ALTCteam@health.ny.gov](mailto:ALTCteam@health.ny.gov)
- <https://www.johnahartford.org/grants-strategy/current-strategies/age-friendly-hospitals>
- <http://www.ihl.org/Engage/Initiatives/Age-Friendly-Health-Systems/Pages/default.aspx>
- The Age-Friendly Health Systems Action Community document can be accessed in the handout section and will be sent around
- To join the Action Community by August 1<sup>st</sup>, e-mail: [AFHS@IHI.org](mailto:AFHS@IHI.org)
  - The next meeting is on June 26, 2018 from 8am-9am
  - Use this link to register:  
<https://zoom.us/meeting/register/686e22938b590f374ac87b605f06faf5>

