

Age-Friendly Health Systems Overview

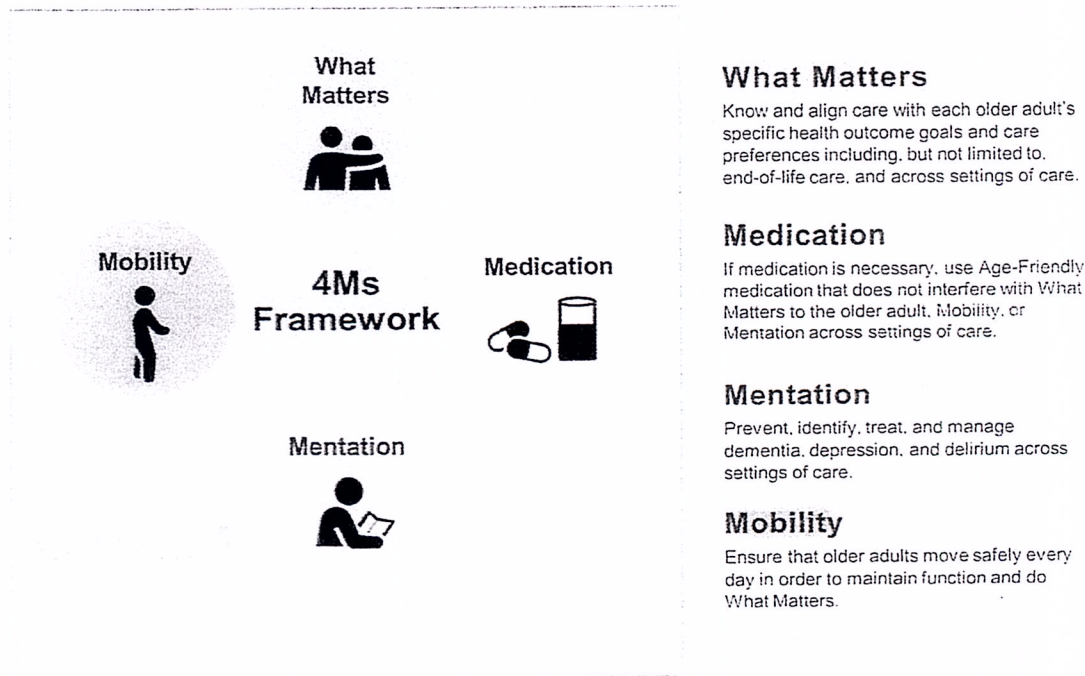
The United States is aging. The number of older adults, individuals ages 65 years and older, is growing rapidly. As we age, care often becomes more complex. Health systems frequently are not prepared for this complexity, and older adults suffer a disproportionate amount of harm while in the care of the 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 (see Figure 1).

Figure 1. 4Ms Framework of an Age-Friendly Health System



What Does it Mean to be Age-Friendly?

What Matters Most to Older Adults	The 4Ms in an Age-Friendly Health System <i>Acute Care</i>
<p>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</p> <p>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</p> <p>Mentation Prevent, identify, treat, and manage delirium across settings of care</p> <p>Mobility Ensure that each older adult moves safely every day to maintain function and do What Matters</p>	<ul style="list-style-type: none"> • Ask the older adult What Matters most, document it, and share What Matters across the care team • Align the care plan with What Matters most • Review for high-risk medication use and document it • Deprescribe or avoid high-risk medications, and document and communicate changes • Screen for delirium at least every 12 hours and document results • Ensure sufficient oral hydration • Orient to time, place, and situation • Ensure older adults have their personal adaptive equipment • Support non-pharmacological sleep • Screen for mobility limitations and document the results • Ensure early, frequent, and safe mobility

What Matters Most to Older Adults	The 4Ms in an Age-Friendly Health System <i>Primary Care</i>
<p>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</p> <p>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</p> <p>Mentation Prevent, identify, treat, and manage delirium across settings of care</p> <p>Mobility Ensure that each older adult moves safely every day to maintain function and do What Matters</p>	<ul style="list-style-type: none"> • Ask the older adult What Matters most, document it, and share What Matters across the care team • Align the care plan with What Matters most • Review for high-risk medication use and document it • Deprescribe or avoid high-risk medications, and document and communicate changes • Screen for dementia/cognitive impairment and document the results • Screen for depression and document the results • Consider further evaluation and manage manifestations of dementia, educate older adults and caregivers, and/or refer out • Identify and manage factors contributing to depression and/or refer out • Screen for mobility limitations and document the results • Ensure early, frequent, and safe mobility

Table 5. Age-Friendly Health Systems Summary of Key Actions

	Assess	Act On
	Know about the 4Ms for each older adult in your care	Incorporate the 4Ms into the plan of care
Hospital	Key Actions (to occur at least daily):	
	<ul style="list-style-type: none"> • Ask the older adult What Matters • Document What Matters • Review for high-risk medication use • Screen for delirium at least every 12 hours • Screen for mobility limitations 	<ul style="list-style-type: none"> • Align the care plan with What Matters • Deprescribe or do not prescribe high-risk medications • Ensure sufficient oral hydration • Orient older adults to time, place, and situation • Ensure older adults have their personal adaptive equipment • Prevent sleep interruptions; use non-pharmacological interventions to support sleep • Ensure early, frequent, and safe mobility
Ambulatory	Key Actions (to occur at least annually or on change in condition):	
	<ul style="list-style-type: none"> • Ask the older adult What Matters • Document What Matters • Review for high-risk medication use • Screen for dementia • Screen for depression • Screen for mobility limitations 	<ul style="list-style-type: none"> • Align the care plan with What Matters • Deprescribe or do not prescribe high-risk medications • Consider further evaluation and manage manifestations of dementia, or refer • Identify and manage factors contributing to depression • Ensure safe mobility

Supporting Actions:

- Use the 4Ms to organize care and focus on the older adult, wellness, and their strengths rather than solely on disease or on lack of functionality.
- Integrate the 4Ms into care or existing workflows.
- Identify what activities you can stop doing to reallocate resources for the 4Ms and when the 4Ms are reliably in practice.
- Document all 4Ms and consider grouping the 4Ms together in the medical record.
- Make the 4Ms visible across the care team and settings.
- Have an interdisciplinary care team that reviews the 4Ms in daily huddles and/or rounds.
- Educate older adults, caregivers, and the community about the 4Ms.
- Link the 4Ms to community resources and supports to achieve improved health outcomes.