

Age-Friendly Health System Process Walk Through

There are two key drivers to age-friendly care – knowing about the 4Ms for each older adult in your care (“assess”) and incorporating the 4Ms into the plan of care (“act on”). The aim in an Age-Friendly Health System is to reliably assess and act on the 4Ms with all older adults. Just about all systems are integrating some of the 4Ms into care, some of the time, with some older adults, in some place in their system. The work now is to understand where that is happening and build on that good work.

How do you already assess and act on each of the 4Ms in your setting? One way to learn is to spend time in your unit, your practice, your hospital and observe the care. As you do, note your observations to the questions below as you learn more about how the 4Ms are already in practice in your system.

- What are current activities and services related to each of the 4Ms? What processes, tools, and resources to support the 4Ms do we already have in place here or elsewhere in the system?
- Where is the prompt or documentation available in the electronic health record or elsewhere for all clinicians and the care team? Is there a place to see the 4Ms (individually or together) across team members? Across settings?
- What internal or community-based resources do you commonly refer to and for which of the 4Ms? Which of the 4Ms do you need additional internal and/or community-based resources?
- Do these appear to be having a positive impact on the older adult and/or caregiver? Do you have a way to hear about the older adults’ experience?
- Do these appear to be having a positive impact on the providers and staff?
- Which languages do the older adults and their family caregivers speak? Read?
- Do the health literacy levels, language skills, and cultural preferences of your patients match the assets of your team and the resources provided by your health system?
- What experience do your team members have with the 4Ms? What assets do you already have on the team? What challenges have they faced? How have they overcome them?
- What works well?
- What could be improved?

4Ms	Specifically, look for how do we...	Current Practice and Observations
<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, and across settings of care</p>	<ul style="list-style-type: none"> • Ask the older adult What Matters most and document it • Align the care plan with What Matters most 	
<p>Medication: If medication is necessary, use Age-Friendly medications that do not interfere with What Matters to the older adult, Mobility, or Mentation across settings of care</p>	<ul style="list-style-type: none"> • Review high-risk medications and document them • Avoid, dose adjust, or deprescribe high-risk medications, and document and communicate changes 	
<p>Mentation: Prevent, identify, treat, and manage</p>	<p><u>Hospital:</u></p>	

4Ms	Specifically, look for how do we...	Current Practice and Observations
<p>dementia, depression, and delirium across care settings of care</p>	<ul style="list-style-type: none"> • Screen for delirium at least every 12 hours and document the results • Ensure sufficient oral hydration • Orient to time, place, and situation • Ensure adults have their personal sensory adaptive equipment • Support non-pharmacological sleep <p><u>Ambulatory</u></p> <ul style="list-style-type: none"> • Screen for dementia/ cognitive impairment • Screen for depression • Consider further evaluation and manage manifestations of dementia, educate older adults and caregivers, and/or refer out • Identify and manage factors contributing to depression 	
<p>Mobility: Ensure that each older adult moves safely every day to maintain function</p>	<ul style="list-style-type: none"> • Screen for mobility and document the results • Ensure early and safe mobility 	

4Ms	Specifically, look for how do we...	Current Practice and Observations
and do What Matters		

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