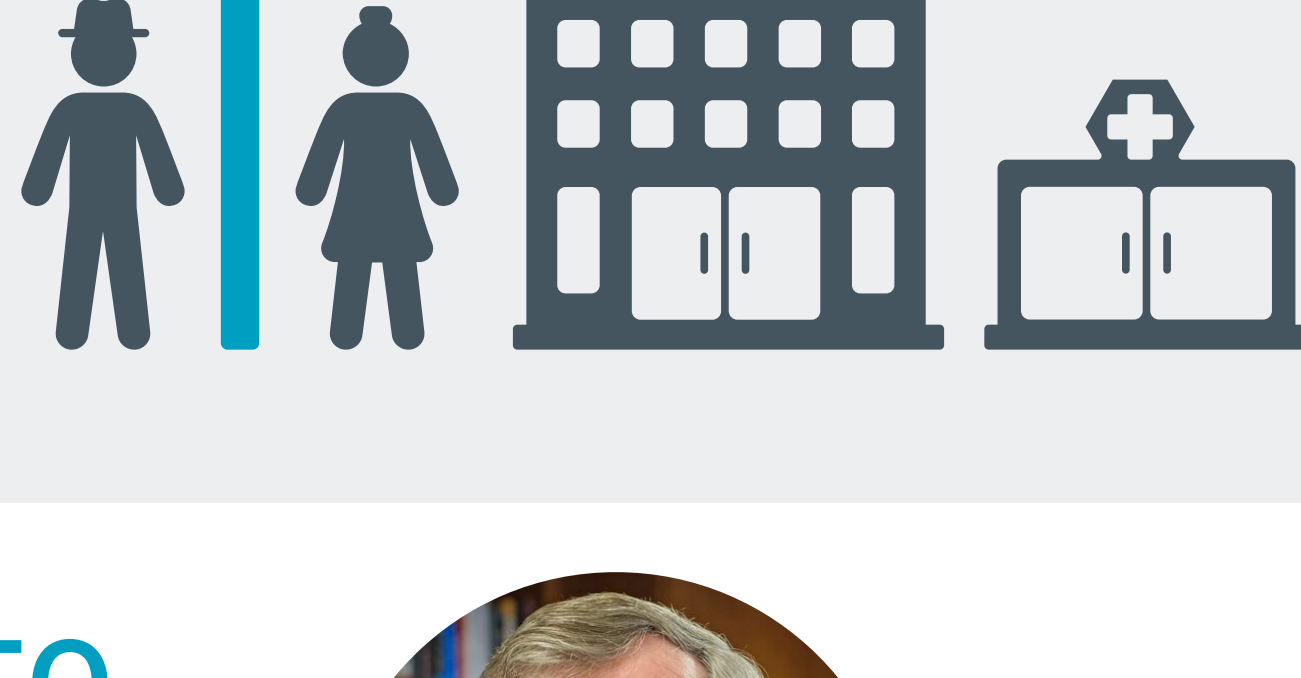


Unlocking and elevating age-friendly practices for an entire system.

Patients 65+ are on the rise in Northwell Health's 23 hospitals and 830+ ambulatory sites.



President and CEO Michael Dowling sets a plan in motion.



A new designated position is created

VP Aging and Supportive Care
Division of Geriatrics and Palliative Medicine

And partnered with the

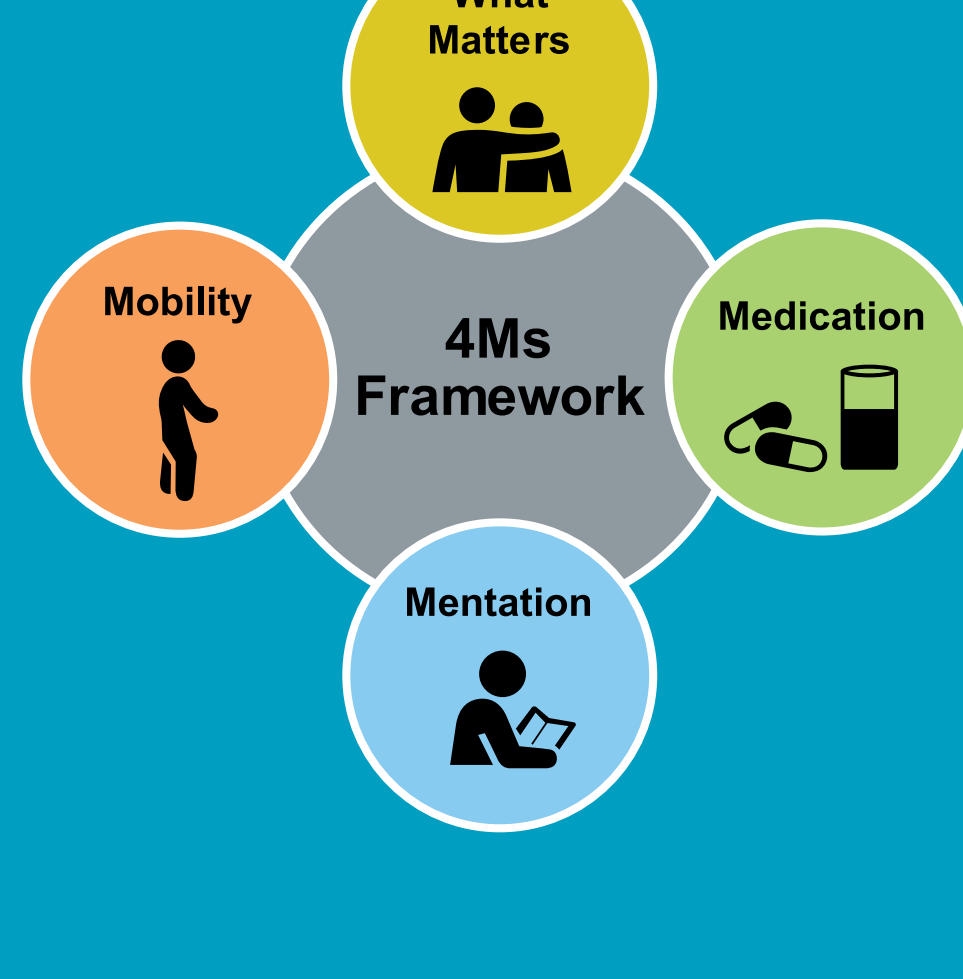
Program Director
Department of Clinical Transformation



Together, they collaborate with Geriatrics and Palliative Medicine to identify practices to adapt for age-friendly care across the healthcare organization.

They aim for the gold standard.

Age-Friendly Health Systems
4Ms Framework



They find solutions throughout the system to achieve the 4Ms.

What Matters

Northwell expanded the scope of goals of care conversations, an initiative of their Advanced Illness Collaborative, to include all patients 65+.

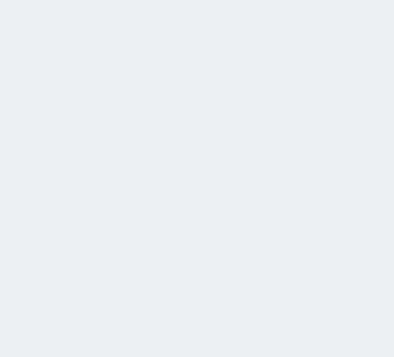
- Developed a training program: Goals of Care Conversation Education available to all in and outpatient care team members.
- Trained over 900 team members, via in-person workshop and virtual platform.
- Encouraged hospitalists, emergency department physicians, and other specialists to conduct "What Matters" most conversations with patients.
- Goals of care notes in EHR increased month-over-month, and year-over-year.
- The readmission rate was reduced by 4% for patients who had goals of care conversations.
- Patients who had goals of care conversations in the Emergency department were more likely to have a shorter length of stay.



Medication

The Safe Medication Prescribing Committee collaborated with the age-friendly team to align their work with the focus on safe prescribing in adults age 65+.

- Analyzed system-wide medication use in patients 65+.
- Identified potentially harmful medications specific to usage and adverse events in Northwell Health's acute care hospitals.
- Launched a daily surveillance report of all patients 65+ on identified, potentially harmful medications.
- Interdisciplinary teams utilize the surveillance report on daily rounds to evaluate the appropriateness and patient response to the medication. The teams intervene as appropriate.
- A clinical decision support pathway is in development. The pathway offers medication alternatives and safe dosage recommendations to support safe prescribing in older adults.



Mentation

The CAM-ICU was an existing best practice for delirium assessment in critical care across all Northwell sites.

- The b-CAM was the evidence-based tool adopted for delirium assessment outside of critical care.
- The b-CAM provides continuity across care settings for delirium assessment.
- Both the b-CAM and the CAM-ICU have logic embedded into the EHR that stops the assessment once delirium is ruled in or ruled out.
- A training program was established for all bedside clinicians and for new employees to support the adoption and implementation of the tool.



Mobility

Northwell adopted the Physical Therapy Department's recommendation to use an evidence-based mobility assessment.

- Conducted a pilot study (4 units across 3 hospitals) with an evidenced-based mobility assessment and a revised fall-risk assessment to develop individualized mobility plans.
- The mobility plan is based on mobility score and objective fall risk factors specific to the patient.
- Nurse Executive Council reviewed the results of the pilot and approved the use of the recommended mobility assessment as the systemwide standard for the acute care hospitals.
- The mobility assessment was added to the EHR.
- Online education was launched for bedside clinicians and new employees.
- There were no falls on 2 of the 4 pilot units and no workforce injuries on any of the pilot units throughout the duration of the study.



Northwell's efforts led to 15 acute care hospitals and 64 primary care ambulatory sites becoming recognized by IHI as Age-Friendly Health System participants and 9 of the 15 hospitals have moved to the Committed to Care Excellence recognition level.

Northwell is working on site-level data collection which will roll up into system-level data. This will facilitate the ability to manage age-friendly care across their system with efficient and standardized data collection to be used for process monitoring and improvement. The goal is to provide evidence-based quality care with improved outcomes for older adults and have all sites recognized at the Committed to Care Excellence level.

Advice

The best way to build an Age-Friendly Health Systems portfolio is to identify existing programs and enhance them to align with the 4Ms.

Take stock of programs, pick out best practices, and lend support and resources to those initiatives.

Involve site-level leaders as champions to support age-friendly practices.

Establish site-level age-friendly committees with a champion and team for each of the 4Ms.

Link this initiative to positive clinical impacts and show how its outcomes such as decreasing drug events, increasing mobility, decreasing falls, length-of-stay and re-admissions contribute to hospital level and organization-wide goals.

Roll out is important but enduring education is essential such as new employee orientation.

The discovery that Northwell's 64 primary care sites already had standardized care practices across sites allowed for rapid implementation of 4Ms care and recognition as a group.

Key Insights

When you have a large, quality-focused organization such as Northwell Health, assume you have pockets of best practices, find them, and spread them throughout the organization.

When you have an organization as big as Northwell Health, you should find best practices, drive consensus, speak the same language, and provide seamless transitions of care.

And lastly, remember to give credit and thanks to each practice site for their contribution and commitment to improving the care and outcomes for the older adult.

About Age-Friendly Health Systems

According to the US Census Bureau, the US population aged 65+ years is expected to nearly double over the next 30 years, from 43.1 million in 2012 to an estimated 83.7 million in 2050. These demographic advances, however extraordinary, have left our health systems struggling as they struggle to reliably provide evidence-based practice to every older adult at every care interaction.

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).

Age-Friendly Health Systems aim to: Follow an essential set of evidence-based practices; Cause no harm; and Align with What Matters to the older adult and their family caregivers.

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ihi.org/AgeFriendly