Birmingham VA Health Care System



Team-based change can start with one driven and dedicated person

Dr. Ella Bowman was driven to fix a problem dangerously threatening the welfare of older adults.

Delirium was the threat she saw from her earliest days in medicine.

She had a goal as the new **Section Chief of Geriatrics** at Birmingham VA.





Dr. Bowman teamed with like-minded Birmingham VA colleagues. First, they set a goal to update the EHR with a newly written delirium standard of practice.

Coding proved a problem, so they created a manual work-around that maintained progress.





They expanded from clinic and in-patient to home-based care.

The team realized scaling to home health was going to be a challenge.

(There were satellite teams around the entire state.)

A discovered resource seemed like a custom-made solution: IHI's Age-Friendly Health Systems movement.



Using the 4Ms, the Birmingham VA Team recognized: It was easier than expected to create change in multiple sites.



of Birmingham VA veterans were receiving agefriendly care.



What's Next

Automated scoring in the EHR that alerts pharmacy of positive delirium screens.



Ella H. Bowman, MD, PhD is the Section Chief of Geriatrics at Birmingham VA Health Care System. She learned about Age-Friendly Health Systems in Feb 2020, the Birmingham VA joined an Action Community in late March, and achieved recognition by IHI as Committed to Care Excellence in Nov 2020.

Advice

Start by looking at what you are doing well against the 4Ms to determine what you need to improve.

Analyze data to recognize patterns.

Invite yourself to decision-making meetings.

Meet one-on-one to accelerate progress.

Always document the patients' own goals and What Matters to them.

Maintain dedication even when meeting schedules and dead ends slow approvals.

Expect staff turnover of your best talent.

Don't let EHR limitations limit you.

Key insight

What Matters should inform everything that we do. The Birmingham VA was doing really well against the 4Ms but recognized that capturing What Matters and veterans' stories and goals gave us an opportunity to improve care.

We are all practicing evidence-based medicine – but through our own lens. When we understand What Matters to a patient, it helps drive decisions and helps us manage their health issues in a way that meets their goals.

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 behind 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), designed Age-Friendly Health Systems to meet this challenge head on.

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.



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).

ihi.org/AgeFriendly

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