



**MHA**  
Keystone Center

*A Certified Patient Safety Organization*

Leading Healthcare

## **MHA Keystone Center Age-Friendly Health Systems Action Community**

**Age-Friendly**   
Health Systems

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## In the next 20 minutes....

Who we are → MHA Keystone Center

Why Age-Friendly Health Systems

What is an Age-Friendly Health System

How we support health systems to become Age-Friendly → MHA Keystone Center Action Community

How you can support this national movement

# MHA Keystone Center

## **Our Mission**

Supporting healthcare providers to achieve excellence in the outcomes desired by the people they serve.

## **Our Vision**

Achieving the highest quality healthcare outcomes that meet individual values.

## **Our Values**

Excellence | Innovation | Compassion | Teamwork

## MHA Keystone Center History, 17 Years of Safe Care

- 2003: Received State of Michigan grant for improving care for stroke patients
- 2004 – 2006: Agency for Healthcare Research and Quality grant for the ICU project
- 2006: Launched hospital-associated infection (HAI) collaborative (BCBSM donation): Hand Hygiene and Catheter-associated Urinary Tract Infection (CAUTI)
- 2007 – 2016: Keystone Surgery, Emergency Department, Obstetrics, Sepsis, and Organ Donation (BCBSM donation)
- 2008 – 2016: National collaborative projects on Central-line-associated Bloodstream Infections (CLABSI), CAUTI, surgery and ventilator-associated pneumonia (47 states, Puerto Rico and D.C.)
- 2009: Launched one of the first federally certified Patient Safety Organizations (PSO)
- 2012 – 2016: Hospital Engagement Network (2 states in HEN 2.0)
- 2015 – 2018: High Reliability Organization workgroups
- 2016 – present: Great Lakes Partners for Patients (GLPP) Hospital Improvement Innovation Network (HIIN) (3 states)
- 2018: Superior Health Quality Alliance launches, MHA Keystone Center a founding member
- 2019 – present: Superior Health Quality Alliance awarded Medicare Quality Improvement Organization contract

# Why Age-Friendly Health Systems?

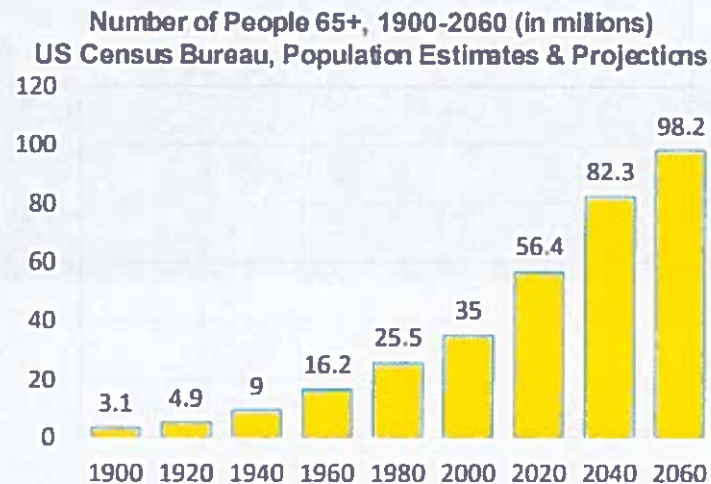
# Why Age-Friendly Health Systems?

## 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.**

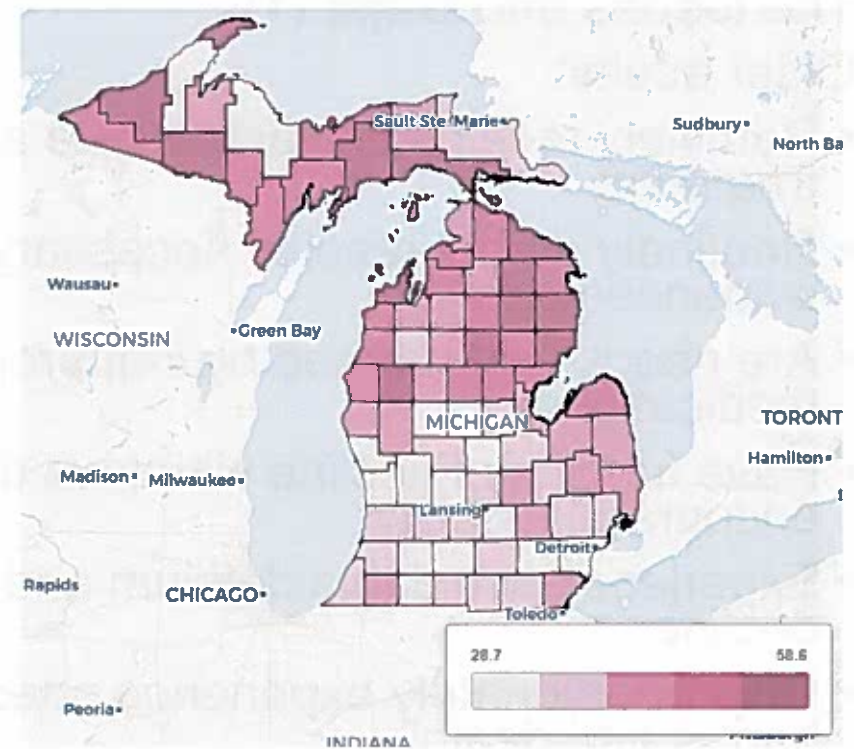


**The John A. Hartford Foundation**  
Dedicated to Improving the Care of Older Adults

**Age-Friendly**  
Health Systems

# Why Age-Friendly Health Systems?

According to 2016 U.S. Census Bureau data, more than **23% of Michigan residents are now 60 or older** — and life expectancy has increased by seven years since the 1960s. At the same time, roughly **80% of older adults have at least one chronic disease, and 77% have at least two.** [As reported by Bridge Magazine, Michigan has the highest concentration of older residents in the country.](#) These changes in age and health, along with the challenges of social and home support dynamics for older residents, make developing age-friendly care settings and processes vital for the well-being of Michigan's aging patients.

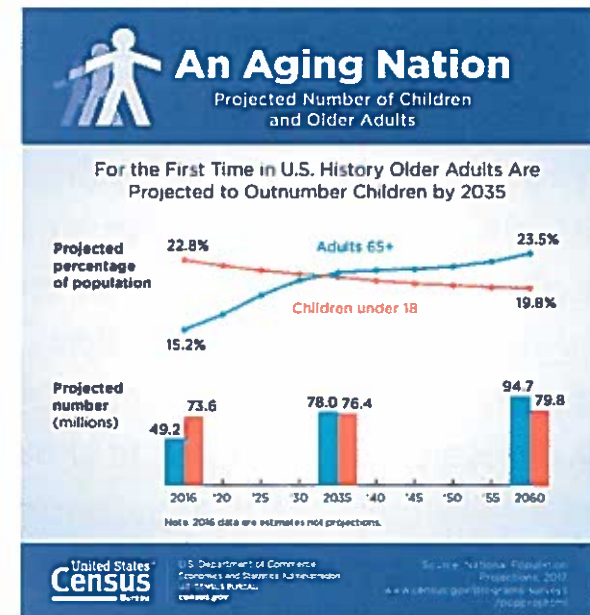


# Why Age-Friendly Health Systems?

## 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





# Why Age-Friendly Health Systems?

## Gov. Whitmer commits to making Michigan an Age-Friendly State

Gov. Gretchen Whitmer announced Oct. 7 that Michigan has joined the AARP Network of Age-Friendly States and the World Health Organization Global Network of Age-Friendly Cities and Communities. The action is intended to help the state prepare for dramatic and imminent demographic changes and ensure that Michigan communities can take steps to accommodate all ages.

The state's application was accepted by AARP and the World Health Organization and certification was awarded. **Michigan becomes the 5th state to join the network.**

Source: AARP

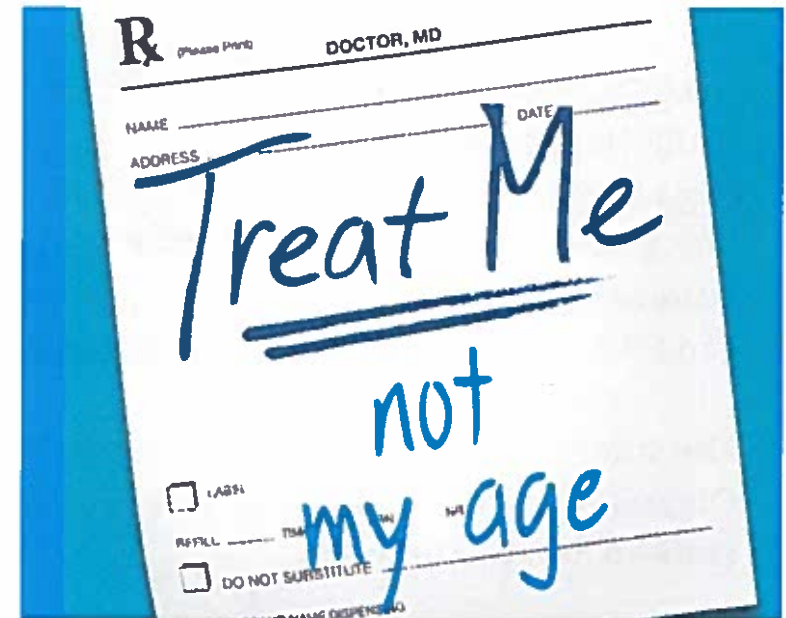


# Age-Friendly = Zero Tolerance for Ageism

Widespread misunderstanding about the aging process, lack of information about how older people contribute to society, led to pervasive ageism.

Ageism is alive and well in our attitudes, behaviors, programs, and policies; and it affects employment, health care practices, psychological well-being, family dynamics, and more...

Research by the FrameWorks Institute found that the public believes aging is synonymous with decline and dependency, and that the aging process is a battle to be fought.



# What is the Age-Friendly Health Systems Initiative?

# Age-Friendly Health Systems

## Age-Friendly Health Systems

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)

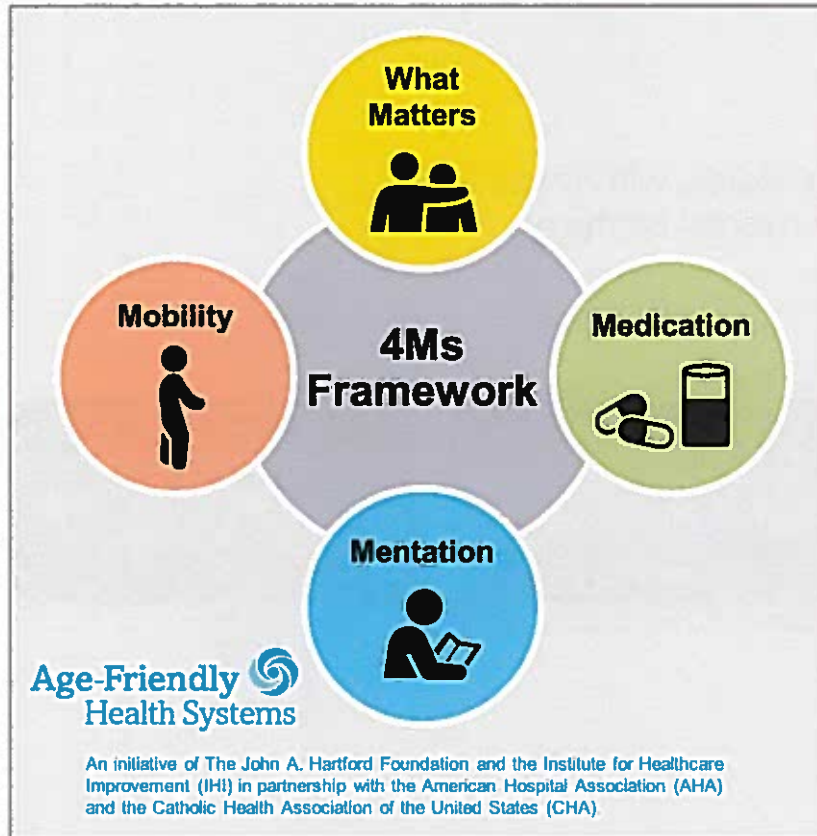
Age-Friendly Health Systems is an initiative of [The John A. Hartford Foundation](#) and the [Institute for Healthcare Improvement \(IHI\)](#), in partnership with the [American Hospital Association](#) and the [Catholic Health Association of the United States \(CHA\)](#). These core partners have been working on the Age-Friendly Health Systems Initiative over the past few years.



The John A. Hartford  
Foundation



# 4Ms: Core of an Age-Friendly Health System



For related work, this graphic may be used in its entirety without requesting permission.  
Graphic files and guidance at [ihi.org/AgeFriendly](http://ihi.org/AgeFriendly)

## 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.

## 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.

## Mentation

Prevent, identify, treat, and manage dementia, depression, and delirium across settings of care.

## Mobility

Ensure that older adults move safely every day in order to maintain function and do What Matters.

# Evidence-based Practice Changes

Methods: Reviewed 17 care models with level 1 or 2a evidence of impact for model features

90 care features  
identified in pre-work

Redundant concepts  
removed and 13 discrete  
features found by IHI  
team

Expert Meeting led to  
the selection of the "vital  
few": the 4Ms

# 4Ms: Evidence-base

- **What Matters:**

- Asking what matters and developing an integrated systems to address it **lowers inpatient utilization (54% dec.), ICU stays (80% dec.)**, while increasing hospice use (47.2%) and pt satisfaction (AHRQ 2013)

- **Medications:**

- Older adults suffering an adverse drug event have higher rates of morbidity, hospital admission and costs (Field 2005)
- 1500 hospitals in 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 across the board (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 had an increased LOS of 6.3 days compared to controls (Wong 2011)
- **30+% reduction in direct, indirect, and total hospital costs** among patients who receive care to improve mobility (Klein 2015)

# Why Age-Friendly Health Systems Model



## 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



# Why Age-Friendly Health Systems Model

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 Initiative Goal

Build a social movement so ***all care*** with older adults is ***age-friendly care***:

- Guided by an essential set of evidence-based practices (4Ms);
- Causes no harms; and
- Is consistent with *What Matters* to the older adult and their family.

AFI first aim is to reach 20% of US Hospitals and Medical Practices by  
2020

# Age-Friendly = Better Care

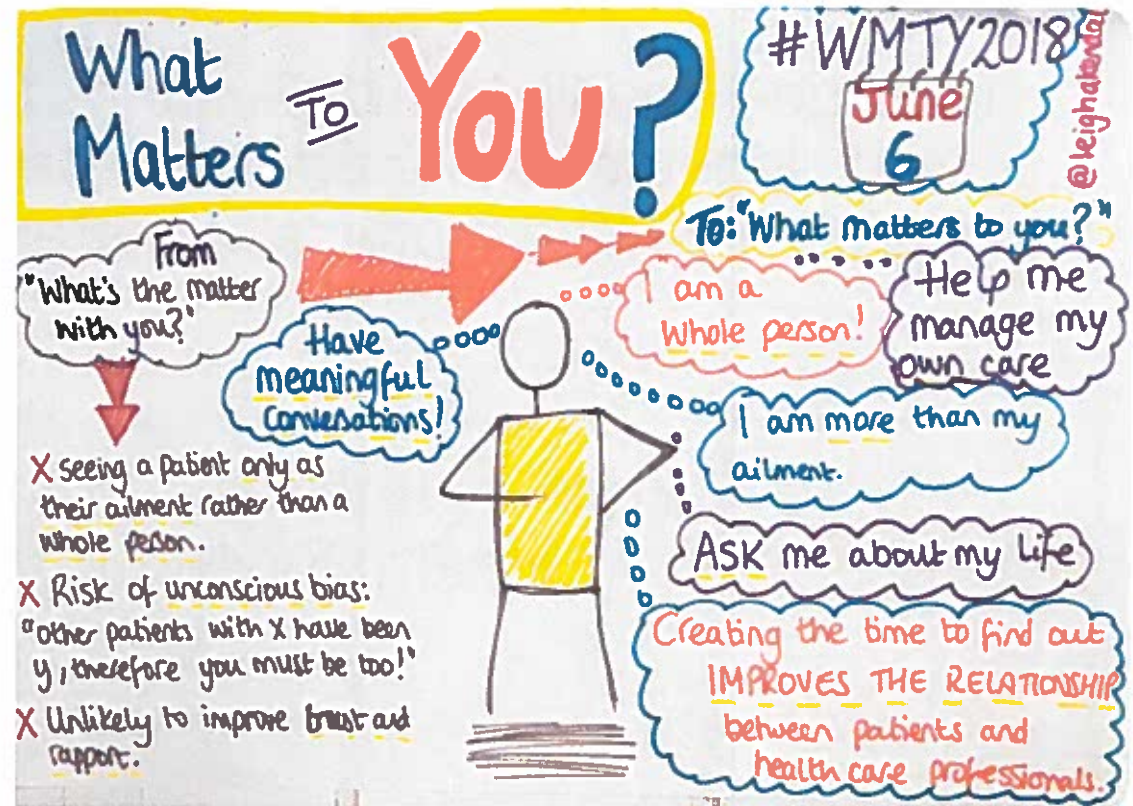
The Age-Friendly Health Systems initiative is an opportunity to build, together, more **effective health systems** that reliably deliver on the promise of **better care for older adults!**



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 = What Matters Most to Older Adults

Asking **'What matters to you?'** instead of **'What's the matter with you?'** changes the conversation to a meaningful, empowering, engaging partnership that takes into account what's important to the patient!



# MHA Keystone Center Age-Friendly Health Systems Action Community



The MHA Keystone Center  
Age-Friendly Health Systems  
Action Community:  
An Invitation to Join Us

October 2019 – April 2020

This content was created especially for:  
**Age-Friendly  
Health Systems**  
An initiative of John A. Hartford Foundation and  
Institute for Healthcare Improvement in partnership  
with American Hospital Association and  
Catholic Health Association of the United States

In Oct. 2019, the MHA Keystone Center launched the Age-Friendly Health Systems Action Community to bring attention to the 65-years-and-older population.

Funded by the **Michigan Health Endowment Fund** and offered to MHA members free of charge.

**MICHIGAN HEALTH  
ENDOWMENT FUND**

# Making Health Systems Across MI More Age-Friendly

The seven month pilot, supports both inpatient and outpatient settings, in successfully implementing the 4Ms framework

- Access to Experts
- Resources & Tools
- Monthly Learning Activities
- Collaboration Across the Continuum

## Action Community Activities



# Michigan Age-Friendly Action Community

# All teach, all learn





# Action Community Faculty



Arlene Stoller MS, RN-BC, ACNS-BC, GCNS, CDP

**4M – What Matters**



Jason Hecht, PharmD, BCPS, BCCCP

**4M - Medication**



Michelle Moccia DNP, ANP-BC, CCRN, GS-C

**4M - Mentation**



Pat Posa RN, BSN, MSA, FAAN:

**4M - Mobility**

# Thank You - Patient Advisors

## Person & Family Centered Care:

Collaborating and Partnering  
with Patient & Family Advisors



## Mark E. Janke

Patient Advisor - Bronson Healthcare  
Consumer Representative – MHA  
Keystone Center Board of Directors

## Marjorie Mitchell

Executive Director, Michigan Universal  
Health Care Access Network (MICHUHCAN)  
Consumer Representative – MHA Keystone  
Center Board of Directors

## Cohort 1 Participants Committed to Age-Friendly Care

- Baraga County Memorial Hospital
- Baraga County Physician Group
- Bronson LakeView Hospital
- East Rapids Medical Center
- Eaton Rapids Medical Center Hospital
- Elara Caring Home Care
- Hills & Dales General Hospital
- Hurley Medical Center
- McLaren Caro Region
- ProMedica Bixby Hospital
- ProMedica Herrick
- Sparrow Carson Hospital
- Sparrow Clinton Hospital
- Sparrow Hospital Main
- Sparrow Ionia Hospital
- Sparrow Medical Group St. Johns
- TONE Home Health
- Vanguard Eldercare Medical Group

# Goal of All Participating Organizations

**Reach Age-Friendly Health System Committed to Care Excellence**  
recognition for being an exemplar in the movement based on Implementation of the 4Ms Framework.



**How can you support this  
national movement?**



Organizations interested in learning how to get engaged in the Age-Friendly Health Systems Action Community – contact [keystone@mha.org](mailto:keystone@mha.org)

**“The largest room in the world is  
the room for improvement”**

Author Unknown



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