

Reigniting Age Friendly Health System at Cabrini 4M's Framework using Safer Care Victoria Guide

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Background

It's predicted Australia's aging population will burden the healthcare system managing the complex and chronic health conditions of older people, individuals aged 65 years and older. It was identified that a framework of core essential elements for care of an older person, that could be delivered consistently was required to improve and ensure safe patient outcomes, i.e., fall and delirium prevention. Safer Care Victoria (SCV) guide "Creating Age friendly health systems in Victoria, using the 4M's framework in the care of the older person" incorporates four evidence-based elements, What matters, Mind, Medications and Mobility to organise and guide best practice care of the older person within a quality improvement methodology. A champion familiar with the framework and the development of a "team" to continue and implement changes to embed the 4M's framework was reignited. One North, Brighton acute medical ward started to test against the guide, to improve patient outcomes and patient experience.

Aim

To identify and test a framework of core essential elements for care of an older person that could be delivered consistently to improve and ensure safe patient care.

Method

Formation of a team who worked through the SCV guide to identify outcome measures to track changes and progress in the implementation of an Age Friendly Health System. The team consisted of an Executive sponsor, Care setting leader and clinical champions in education, quality management, dementia care and fall prevention. The team sought advice from other clinical experts as progress through the guide continued i.e., Geriatrician, Physiotherapist, Patient Experience Manager.

To understand about the older person admitted to the organisation and understand the 4M's that are in practice, information was collected from data bases Riskman, QlikView and local ward data collection to support and prompt a round table discussion of current practice compared to the key actions of the 4M's framework.

A staff survey was developed and distributed electronically, staff voluntarily and anonymously responded, to assess staff knowledge and understanding of what an Age Friendly Health System was and to identify barriers and challenges in caring for older people.

An aim was set by Dec 2023 that ward One North would deliver Age Friendly care by increasing the percentage of older patients that receive 4Ms care (as a set) to 80%. To achieve this 80% or more of older patients will be assessed and acted upon (where indicated) for:

- What matters
- Delirium, depression and cognitive impairment (Mind)
- Mobility
- Potentially inappropriate Medications and polypharmacy

The quality improvement methodology to test Age Friendly Care was Plan, Do, Study, Act cycles. Improvements were to incorporate the 4M's into existing care

References

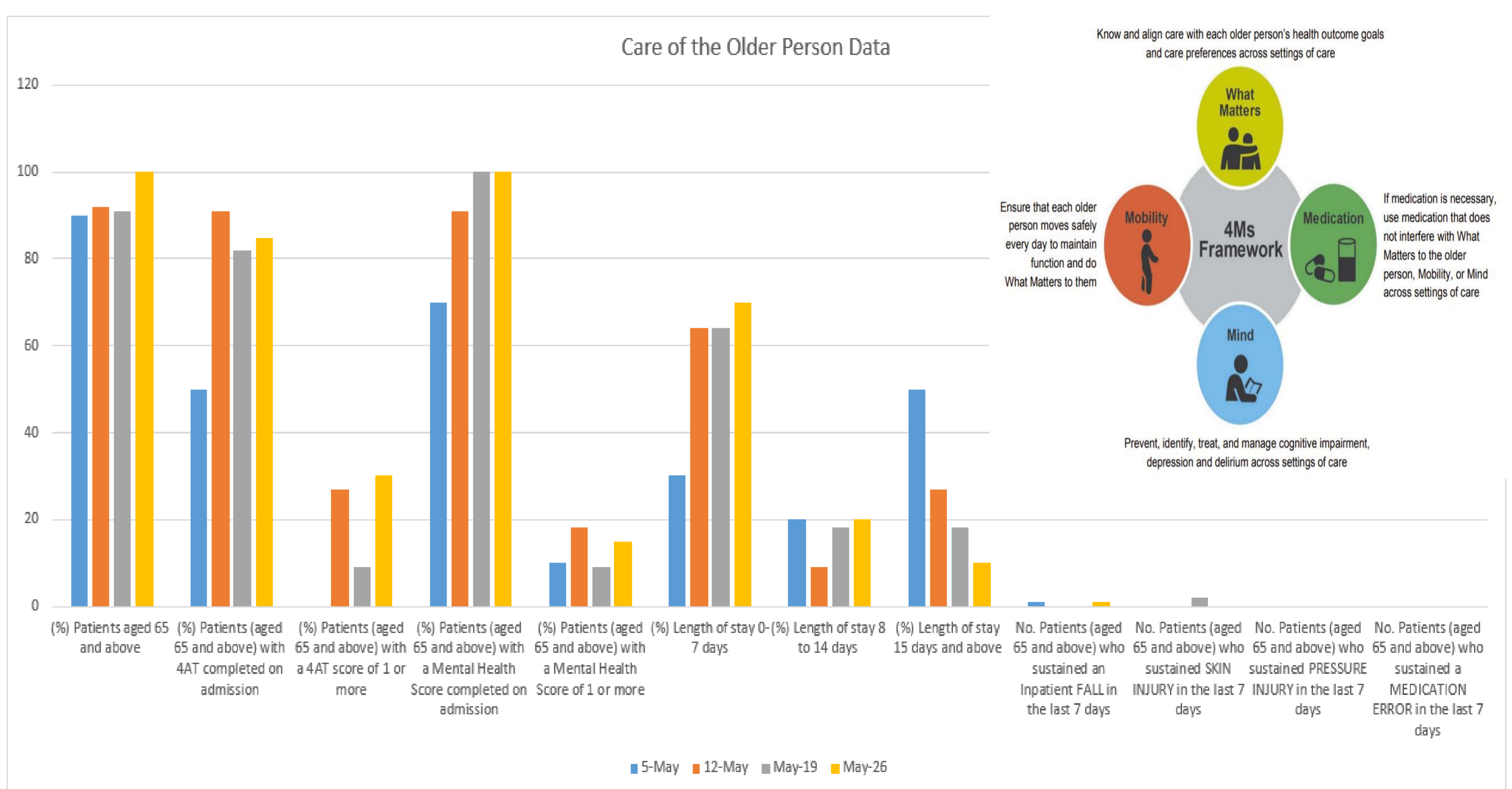
Safer Care Victoria (SCV) and Institute for Healthcare Improvement (IHI). 2022, "Creating Age-Friendly Health Systems in Victoria, Guide to using the 4Ms in the care of older people

Results

The staff survey provided insight of staff knowledge and understanding of an Age Friendly Health system and barriers and challenges in caring for older people.

- "Patients are bundled into 1 category and treated the same no matter their age. Health system not set up to take into consideration age. A lot of paperwork not necessarily achieving what we would like."
- "Connecting with the patient is essential. Time is needed as they often have issues with hearing, mobility and cognition. Nursing ratios do not reflect the reality of caring for older people who require time."
- "... there is not many education programs or information for nurses caring for the elderly in the hospital. In-services or education program will be helpful to get ideas to look after older patients."

90 % of patients admitted to One North were over the age of 65 years. Focusing on the element "Mind", monitoring for delirium, 90 % of patients aged 65+ years had a Delirium screen on admission an improvement from 50% prior to the implementation of an improved Delirium screening process. A flowchart diagram assisted to educate staff of the changed process for delirium screening and monitoring.



Conclusion

The 4M's provides a proven evidence-based framework that has been shown to improve patient experience and patient outcomes by reducing harm. The framework can guide the care for all older persons who are admitted as inpatients and can be delivered as part of existing care to ensure a consistent and efficient delivery of care focusing on the core needs of an older person. Reigniting and testing the Age Friendly framework on one ward has highlighted the opportunity to expand and test the framework in other areas. Clinical governance support and development of an education plan about the framework and each of its elements, ageism and age positive language will assist in implementation and testing in other areas. Challenges have included organisation change, change of patient case mix and change in team members. Recognising the framework addresses the core care needs of older people not the disease, One North are committed to meet the set aim to deliver Age Friendly Care by increasing the percentage of older patients that receive 4Ms care (as a set) to 80%. An age friendly health system can improve patient experience and outcomes.