What Does It Mean to Be an Age-Friendly Health System?

Institute for Healthcare Improvement

The 4Ms Are Practiced as a Set	Actions in an Age-Friendly Health System Nursing Home*
What Matters Know and align care with each older adult's specific health outcome goals and care preferences, including day-to-day needs as well as end-of-life planning, and across settings of care	• Ask the older adult What Matters (e.g., Health Identification Priorities Quick Guide, What Matters Guide for Getting Started), including their health outcome goals and care preferences, and document it • Align the care plan with What Matters • Document the older adult's preferred support person or caregiver
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	• Review medications and document high-risk medication use (e.g., AGS Beers Criteria, Anticholinergic Burden Calculator) Screen for eight PIM drug classes: ○ Benzodiazepines, anxiolytics ○ Opioids ○ Highly-anticholinergic medications (e.g., diphenhydramine) ○ All prescription and over-the-counter sedatives and sleep medications (hypnotics) ○ Muscle relaxants ○ Tricyclic or other antidepressants ○ Antipsychotics ○ Mood stabilizers • Deprescribe, adjust doses, and avoid high-risk medications
Mentation Prevent, identify, treat, and manage cognitive impairment (dementia or related disorders), depression, and delirium across settings of care	• Screen for delirium on admission, at least every 24 hours, and with change in condition in SNF/post-acute care; on admission, with change in condition, and as needed in long-term care (e.g., CAM is in section C of the MDS) • Screen for dementia (e.g., BIMS is in section C of the MDS) • Screen for depression (e.g., PHQ-9 is in section D of the MDS) • Ensure sufficient oral hydration • Orient to time, place, and situation if/when appropriate • Ensure older adults have their personal adaptive equipment and hearing and vision devices • Prevent sleep interruptions; use nonpharmacological interventions to support sleep • Manage behaviors related to dementia; consider referrals • Manage factors contributing to depression; consider referrals
Mobility Ensure that each older adult moves safely every day in order to maintain function and do What Matters	• Screen for mobility limitations (e.g., Timed Up & Go [TUG], Tinetti Performance Oriented Mobility Assessment [POMA]) • Ensure early, frequent, and safe mobility • Avoid chemical and physical restraints

*Visit ihi.org/agefriendlynh for tools, including the Guide to Using the 4Ms. See ihi.org/agefriendly for more care settings.

Age-Friendly Health Systems

Age-Friendly Health Systems is an initiative of The John A. Hartford Foundation, the Institute for Healthcare Improvement, and the American Hospital Association (AHA).