

# Age-Friendly Health Systems and the 4Ms in the Nursing Home: Frequently Asked Questions



## What are the benefits of Age-Friendly Health Systems (AFHS) recognition for nursing homes?

- **Improved care of residents and patients:** This is the most important benefit of AFHS work. When nursing homes implement the 4Ms Framework, they work toward all residents reliably receiving equitable, evidence-based, person-centered care.
- **Opportunities to align with valued community partners:** The Centers for Medicare and Medicaid Services (CMS) now requires hospitals to attest that they provide 4Ms care through the [Age-Friendly Hospital Measure](#) as part of quality reporting. As more hospitals become recognized as Age-Friendly Health Systems, nursing homes have a vital role to play as examples of how to do the work well, and also as aligned referral partners. Skilled home health agencies can also be recognized. Age-friendly care across the continuum improves transitions of care.
- **Recognition by IHI:** As part of recognition of your site's commitment to improving resident care, you will receive a toolkit to help celebrate your efforts within your organization and community. The kit includes a badge that you can use in email signatures, slide decks, banners, etc. It also includes templates and best practices for communicating your achievement via press releases and on social media. IHI will list the name of your care location on the [AFHS Recognized Sites](#) page.
- **Team building and staff satisfaction:** Nursing homes report that AFHS provides a positive, unifying focus for teams. Each Interdisciplinary Team (IDT) member is crucial to the process of caring for a resident.
- **Reduced meeting times:** Nursing homes that integrate the 4Ms into stand-up meetings have decreased meeting time, leading to more time for care. Read about one site in [this blog post](#).
- **Improved outcomes:** A nursing home using the 4Ms [published outcomes](#) including reduced emergency department utilization and rehospitalization, and increased discharge to the community.

## How can a nursing home join the AFHS Movement?

There are several ways to get involved. For more information, see the [Join the Movement page](#).

- **Join an Action Community:** An Action Community is a 7-month journey to recognition that provides a structure for learning with and from other health systems and expert faculty. It includes webinars, case studies, and connection with expert faculty to learn about the 4Ms and quality improvement. Action Communities enable teams to accelerate reliable practice of the 4Ms in an active community of learners and testers. [Find out when the next Action Community begins](#).

- **Use the Do-It-Yourself (DIY) pathway:** Popular with nursing homes, this approach is for sites that are able to adopt the 4Ms without the intensive support of an Action Community. IHI offers this pathway for motivated sites that want to move toward recognition right away. The [IHI Nursing Home page](#) and [Online Community](#) provide the necessary resources. Support is available; email IHI staff at [afhs@ihi.org](mailto:afhs@ihi.org)
- **Recognize multiple facilities:** For organizations that wish to roll out AFHS to many nursing homes, IHI is available to help create a plan for success. This could include a combination of DIY steps and IHI supported calls. Reach out to [ameier@ihi.org](mailto:ameier@ihi.org) to learn more.

## How long does it take to complete the work for Level 1 Recognition?

Level 1 (Participant) Recognition is awarded when a nursing home submits a [4Ms Care Description](#) that aligns with the evidence base for assessing and acting on all 4Ms. The Care Description is a **plan** of how the nursing home will provide 4Ms care. All components may not be happening at the time of submission. The amount of time it takes to complete the plan varies, but it can be done in as little as a few days. The most important step is a gap analysis to understand what 4Ms care is already happening and what needs to be put into place to satisfy all requirements. After the Care Description is submitted to IHI at [afhs@ihi.org](mailto:afhs@ihi.org), recognition decisions take up to 3 weeks.

## How long does it take for IHI to respond to a submitted Care Description?

It takes up to 3 weeks for IHI to respond. Two responses are possible, recognition or a request for clarifying information. If your site is recognized, you will receive confirmation along with a toolkit of materials to help celebrate and advertise your work. If your site needs to send clarifying information, IHI staff will work with you to help bring your Care Description in alignment with the 4Ms evidence base.

## How can I get support from IHI?

You can reach an IHI staff member by emailing your question to [afhs@ihi.org](mailto:afhs@ihi.org). We usually respond within 5 business days. We can support you via email, a phone call, or a scheduled meeting.

## How do nursing homes get started with AFHS?

Start with resources on the IHI [Recognition Webpage](#) and [Nursing Home page](#). These include:

- Written and video case studies on the Nursing Home page – examples of nursing homes that have implemented the 4Ms.
- The IHI [AFHS Open School course](#) is free and appropriate for all staff. To access:
  - [Register for an IHI account](#) and then use your credentials to log in at [education.ihi.org](http://education.ihi.org)
  - Click “Browse Catalog” and search for PFC 203
  - Click “Enroll”
- The [AFHS Online Course with Coaching](#) is a new, in-depth course that teaches the elements of the 4Ms Framework, and how to implement age-friendly care learnings in different types of care settings. This is a fee-based option.
- A [short video](#) explains the recognition process.
- The [Nursing Home Workbook](#) (companion to the [Guide to Care of Older Adults in Nursing Homes](#) for leaders) is appropriate for teams.

- The [Nursing Home Care Description](#) is the key to Level 1 (Participant) Recognition. This is the plan for how your nursing home will provide 4Ms Care. There is no one best way to provide 4Ms care – lots of approaches can work!

## How can I get my team to buy in?

A good approach is often to share evidence. What does the organization's data tell the team about the current quality of care that older adults receive? What is going well, and what could be better? Implementing a system that is more consistent, reliable, equitable, and structured can build on the age-friendly care that staff already provide to reach more older adults, more of the time. Describe how age-friendly practices can align and improve workflows. Refer to the response to the first question in this FAQ for links to data and outcomes that support 4Ms implementation in nursing homes.

## How can I get caregivers/families and residents involved?

One-pagers or other materials that are written in plain language can help to engage older adults and care partners or family members. Penn State University offers a [nursing home specific 4Ms form](#) written with patients and families in mind. [My Health Checklist](#) from AFHS helps older adults think through all aspects of their health and prioritize their top questions about what matters most to them. When a site is recognized as a Level 1 Participant, they will receive a toolkit with ideas to involve care partners and the community. Also, speaking directly with residents is key to effective age-friendly care and understanding what matters to them.

## How can I assess What Matters to residents with dementia?

If a person has a diagnosis of dementia or mild cognitive impairment, they can often still communicate with the health care team about what matters to them. What matters to someone often has a psycho-emotional component and individuals living with dementia can still share how they feel. A great resource for understanding what matters early on and as the disease progresses is The Conversation Project's [Guide for Caregivers of People with Alzheimer's or Other Forms of Dementia](#) – take a look!

## How can I assess and act on Mobility for residents who primarily use a wheelchair or are not able to get out of bed?

Mobility is much more than fall prevention (although fall prevention is an important part of Mobility). If someone is not ambulatory, they may still benefit from upper body strengthening, positioning, and balance exercises. Many physical therapy (PT) and occupational therapy (OT) professionals have tools and equipment that they use when working with non-ambulatory residents. Ask your PT or OT department heads for their insights.