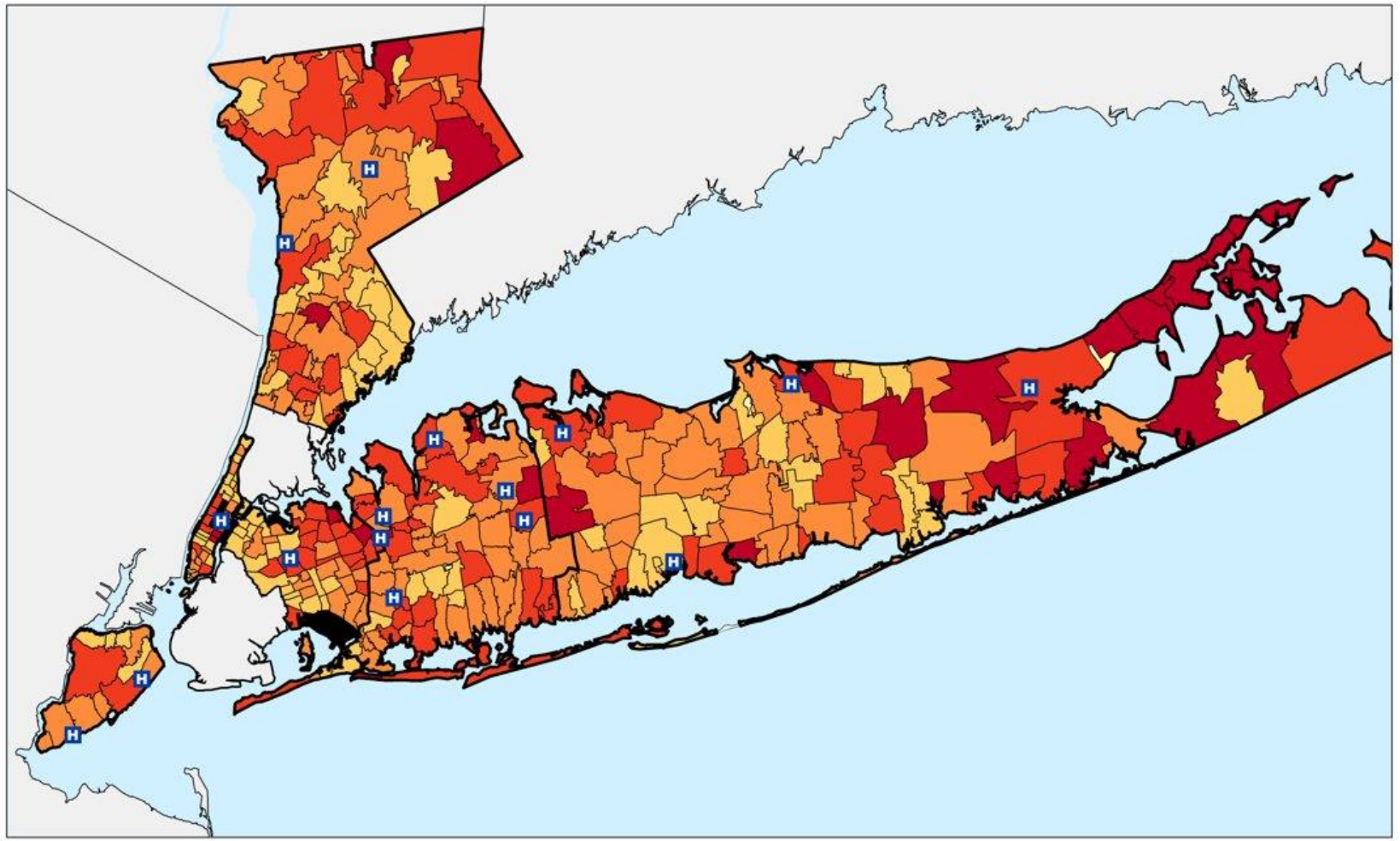
HANYS DEEP DIVE AFHS SCALE & SPREAD

Susan Kwiatek, RN, MBA, DNP, NE-BC
VP, Aging & Supportive Care

March 24th, 2025

65+ DEMOGRAPHICS



PERCENT OF POPULATION 65+

- 21.4% - 42.2%
- 15.8 – 21.4%
- 12.5% - 15.8%
- 5.3% - 12.5%
- 0% - 5.3%

Source: 2017-2021 American Community Survey 5-Year Estimates (accessed 2/22/23) Table: S0101; Prepared by the Office of Strategic Planning/sv

STRONG COLLABORATIVE CULTURE - PARTNERS/STAKEHOLDERS

Advanced Illness Collaborative

Geriatrics & Palliative Medicine

System Nurse Executive

Nurse Executives

Pharmacy

Department of Medicine

Hospital Leadership

Krasnoff Quality Management Institute

Critical Care Service Line

Information Technology

Falls Committee

Nursing Education

Continuing Care

Emergency Medicine Service Line

OUR AGE-FRIENDLY HEALTH SYSTEM JOURNEY

2014-2018

- Advanced Illness Collaborative Launched
- GoCCEP™ Education Program
- Palliative Care Leadership Center™
- Goals of Care Document Added to EMR

2019- 2020

- AFHS Administrative Team hired
- Advanced Illness **& Aging** Collaborative (all 4ms)
- Local hospital 4ms champions identified, and all sites encouraged to Join IHI AFHS Initiative
- GEDA bronze accreditation achieved across **all EDs**
- Falls Committee – AMPAC Pilot
- Safer Prescribing in Older Adults Committee PIMs

2021-2022

- 1st AFHS PICG Kick-off
- Standardized Evidence-based Assessments and integrated into EMR
- **4ms Dashboards** Launched
- Northwell achieve IHI Recognition for **64** Ambulatory Practices, **18** Hospitals
- Glen Cove achieves GEDA **gold** accreditation

2023-2024

- 1st Outcome Data demonstrates benefit
- Monthly Collaborative of Hospital 4Ms Champions
- Present AFHS to Northwell Board of Trustees Committee on Quality
- IHI Expert Panel System-wide Spread National Collaborative (1 of 30)
- IHI 4ms for Home Health Care Prototyping Network
- National Committee for Quality Assurance Participant
- The Aging Revolution book & Aging Summit hosted

2025

- **Northwell Aging Institute**
- IHI Age-Friendly Research Network
- Leaders Engaged on Alzheimer's Disease (LEAD) Collaborative
- HANYS GEDA Action Community

Acronyms: AFHS (Age Friendly Health System), AMPAC (), PIMs (), EBM ()

STEPWISE PROCESS TO AN AGE-FRIENDLY HEALTH SYSTEM

STEP 1: ASSESSMENT

STEP 2: RECOGNITION

STEP 3: STRATEGIC PLAN

STEP 4: PRACTICE STANDARDIZATION/COLLABORATION

STEP 5: METRICS

STEP 6: CHOOSE PILOT HOSPITALS

STEP 7: DASHBOARDS

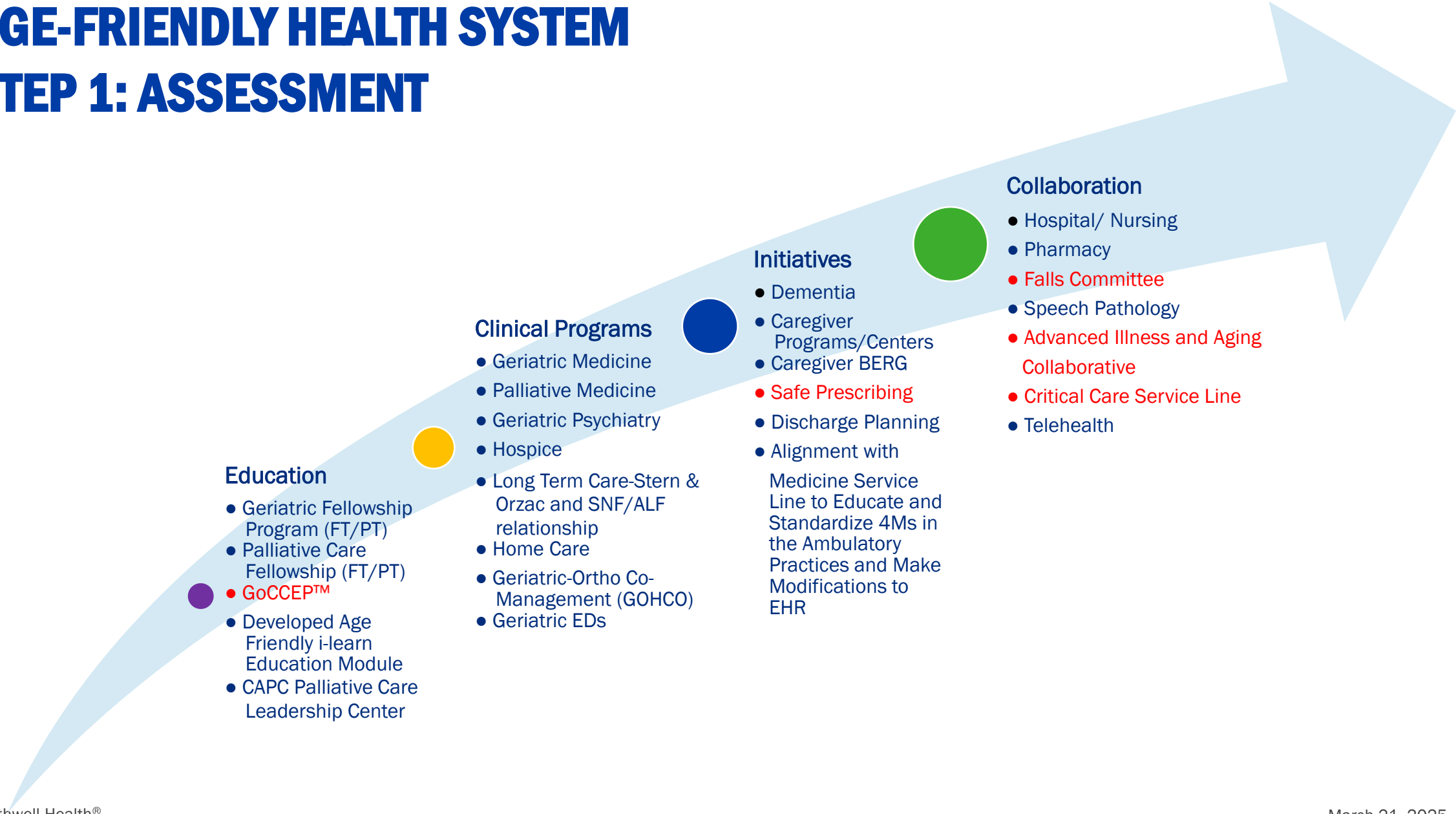
INVENTORY OF NORTHWELL AGING AND ADVANCED ILLNESS SERVICES

		FHH	LIJVS	LIJMC	NSUH	GC	HH	PV / SY	SSUH	Mather	PBMC	LHH	SIUH	PMH	NWH
Inpatient	Geriatric Inpatient Consultation	-	-	✓	✓	✓	✓	-	-	-	-	✓	✓	✓	-
	Palliative Inpatient Consultation	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Inpatient Palliative Care Unit	-	-	-	✓	-	-	-	-	-	-	-	-	-	-
	Geriatric ED Accreditation (GEDA)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Acute Care for Elderly (ACE) Unit	-	-	✓	✓	✓	-	-	-	-	-	-	-	-	-
	Geriatric Orthopedic Hospitalist Co-Management (GOHCo)	✓	✓	✓	-	-	✓	-	-	-	-	-	-	-	-
	Geriatric Surgical Verification	-	-	-	-	*	*	-	-	-	-	-	-	-	-
	Joint Commission Advanced Palliative Care Certification	-	-	✓	✓	-	✓	-	-	-	✓	✓	-	-	-
	Hospital-Based Hospice Beds	✓	✓	✓	✓	✓	✓	✓	✓	-	-	-	-	✓	✓
	Geriatric Psychiatry - Inpatient	-	-	✓	✓	✓	-	✓	-	-	-	✓	-	✓	-
	Hospital Elder Life Program (HELP)	-	-	-	✓	-	-	-	-	-	-	-	-	-	-
	NICHE Designation	-	✓	✓	✓*	✓	-	-	-	-	-	✓	-	✓	-
	Magnet Hospital	-	-	✓	✓	✓	✓	-	-	✓	-	-	✓	-	✓
	U.S. News and World Report 2024	29	29	29	14	HP	31	HP	HP	HP	-	23	HP	-	HP
	Advanced Practice Nurses – Geriatrics / Palliative	✓	-	✓	✓	✓	✓	-	✓	✓	✓	✓	✓	-	-
Outpatient	Geriatric Outpatient Consultation	-	-	✓	✓	✓	-	-	-	-	-	✓	✓	✓	-
	Palliative Outpatient Consultation	✓	-	✓	✓	-	-	-	-	-	✓	✓	-	✓	-
	Geriatric Psychiatry - Outpatient	-	-	✓	✓	✓	-	-	-	-	-	-	✓	-	-
Community Based	Home-based Primary Care	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	-
	Caregiver Program/ Center	-	-	-	✓	✓	✓	-	-	-	✓	-	-	-	✓
	Bereavement Groups/Support for Patients with Advanced Illness	✓	-	✓	✓	✓	-	-	✓	-	-	✓	✓	✓	✓

Inventory of Northwell Aging and Advanced Illness Services

		FHH	LIJVS	LIJMC	NSUH	GC	HH	PV / SY	SS	Mather	PBMC	LHH	SIUH	PMH	NWH
Post Acute	Assisted Living Facility Program	-	✓	✓	✓	-	-	-	-	-	-	✓	-	-	-
	Skilled Nursing Facility	-	✓	-	✓	-	-	-	-	-	-	-	-	✓	-
	Hospice	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Home Care	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Telehealth	TeleEMS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	E-SNF Relationships*	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Education/Research	Geriatric Medicine Fellowship	-	-	✓	✓	-	-	-	-	-	-	-	✓	-	-
	Hospice and Palliative Care Fellowship	-	-	✓	✓	-	-	-	-	-	-	✓	-	-	-
	Collaborative for Aging and Advanced Illness Research and Education (CAARE)	-	-	✓	✓	-	-	-	-	-	-	-	-	-	-
	Older Adult COVID database	-	-	✓	✓	-	-	-	-	-	-	-	-	-	-
	Palliative Care Leadership Center (CAPC)	-	-	✓	✓	-	-	-	-	-	-	-	-	-	-
	GoCCEP™ (Goals of Care Conversation Project)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Advanced Illness and Aging Collaborative	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Age-Friendly i-Learn Education Module	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

AGE-FRIENDLY HEALTH SYSTEM
STEP 1: ASSESSMENT



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STEP 7: DASHBOARDS

Where are we with 4Ms spread in our System

Age-Friendly Participant

LIJ Valley Stream
Northern Westchester Hospital
South Shore University Hospital
Staten Island University Hospital
Zucker Hillside Hospital
Orzac Center for Rehabilitation

Committed to Care Excellence

Forest Hills Hospital
Glen Cove Hospital
Mather Hospital
Plainview Hospital
Syosset Hospital
Phelps Memorial Hospital
Peconic Bay Medical Center
North Shore University Hospital
Long Island Jewish Medical Center
Huntington Hospital
Lenox Hill Hospital
Stern Family Center for Rehabilitation
North Shore Home Care - Westbury
North Shore Home Care - Staten Island
North Shore Home Care - Lake Success
North Shore Home Care - Tarrytown
North Shore Home Care - New York
Peconic Bay Home Health Services

PARTICIPANT RECOGNITION FOR 64 AMBULATORY PRACTICES

Northwell Health Primary Care Practice Sites		
10 Medical Plaza, Suite 303, Glen Cove	362 N. Broadway, 2nd Floor (Sleepy Hollow)	500 W. Main Street, Suite 204, Babylon
100 Manetto Hill Road, Suite 312, Plainview	200 S. Broadway, Ste 2-5 (Tarrytown)	522 Old Country Road, Plainview
1001 Franklin Avenue, Suite 106, Garden City	205 S. Ocean Avenue, Patchogue	560 Northern Blvd., Suite 203, Great Neck
101 St. Andrews Lane, Glen Cove	211-16 Union Tpke., Bayside	6144 Route 25A, Wading River
410 Lakeville Rd New Hyde Park	2119 Merrick Road, Merrick	70 Glen Cove Road, Suite 601, Roslyn Heights
1085 Park Avenue, Suite 1N, New York City	22 West 15th Street, 1st Floor, New York City	70 N. Country Road, Port Jefferson
110 East 59th Street, Suite 10C, New York City	225 Community Drive, Suite 130, Great Neck	70 W. Main Street, Oyster Bay
1019 Fort Salonga Road, Northport	23-25 31st Street, 3rd Floor, Astoria	733 Sunrise Hwy., 3rd Floor, Lynbrook
115-06 Beach Channel Drive, Rockaway Park	242 Mason Avenue, Staten Island	733 Sunrise Hwy., 1st Floor, Lynbrook
1165 Northern Blvd., Suite 300, Manhasset	25 Central Park Road, Plainview	777 Larkfield Road, Commack
120 New York Avenue, Suite 7W, Huntington	250 E. Main Street, 2nd Floor, Bay Shore	850 Fulton Street, Suite 2, Farmingdale
121 W. 20th Street, New York City	256-11 Union Tpke., Glen Oaks	865 Northern Blvd., Suite 102, Great Neck
122 E. 76th Street, Suite 1A/1C, New York City	260 Main Street, Islip	9 Brooksite Drive, Smithtown
1272 E. Main Street, Riverhead	291 Sunrise Hwy., Lindenhurst	927 Park Avenue, New York City
152 Islip Avenue, Islip	300 Franklin Avenue, Valley Stream	95-25 Queens Blvd., 3rd Floor, Rego Park
1575 Hillside Avenue, Suite 102, New Hyde Park	3001 Expressway Drive North, Suite 102, Islandia	755 N. Broadway, Suite 417 (Phelps)
175 E. Main Street, Suite 104, Huntington	321 Crossways Park Drive, Woodbury	440 South Riverside Avenue (Croton)
178 E. 85th Street, 2nd Floor, New York City	36-29 Bell Blvd., Suite 201, Bayside	11 Ashford Avenue, 2nd Floor (Dobbs Ferry)
1872 Bellmore Ave., Bellmmore	369 E. Main Street, East Islip	20 Beacon Hill Drive (Dobbs Ferry)
200 Howells Road, Bay Shore	375 Seguine Avenue	100 S. Highland Avenue (Ossining)
2001 Marcus Avenue, Suite S160, New Hyde Park	480 Forest Avenue, Locust Valley	
2001 Marcus Avenue, Suite N204, New Hyde Park	487 Lake Avenue, St. James	

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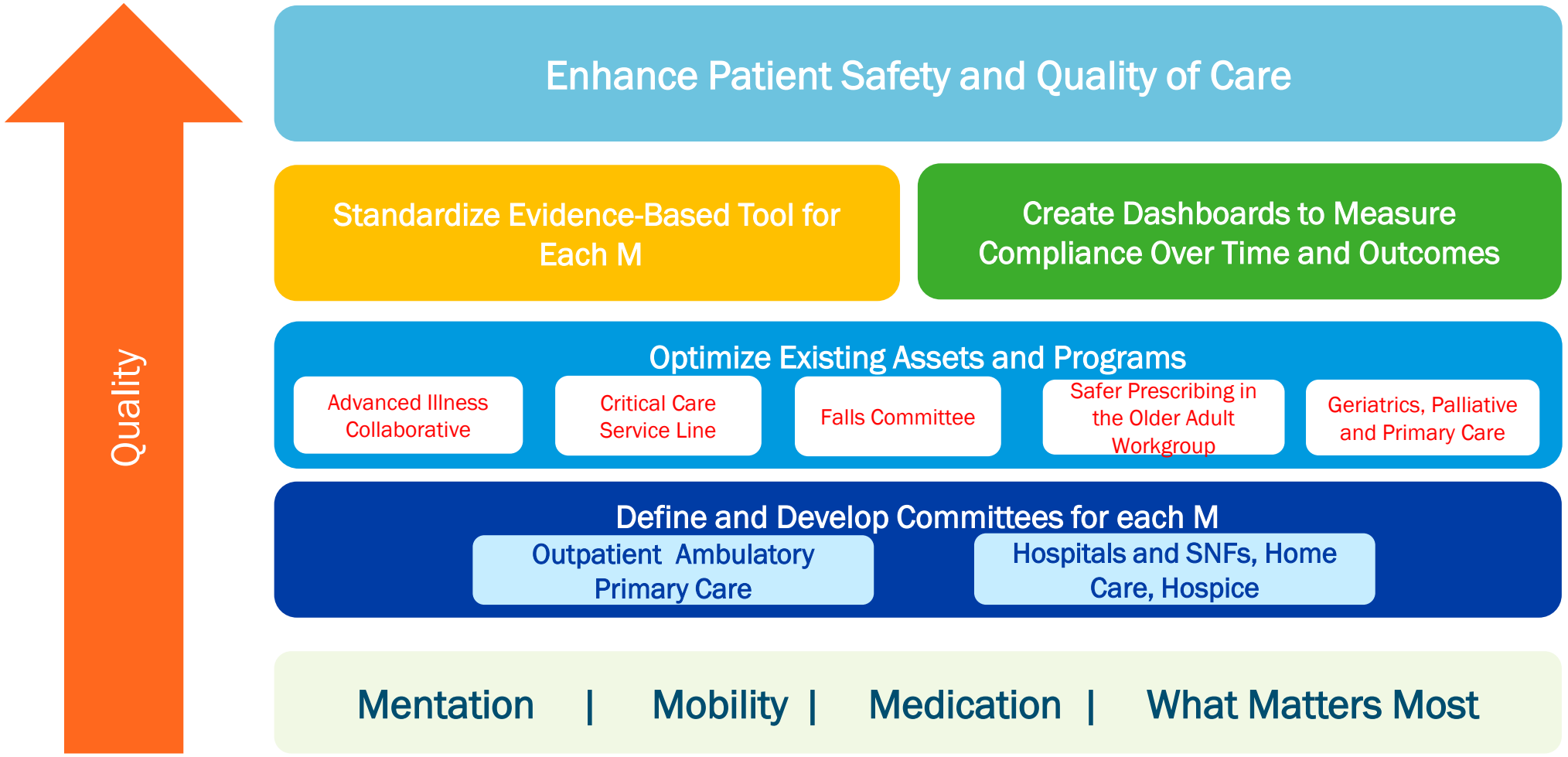
STEP 3: STRATEGIC PLAN
AGE-FRIENDLY HEALTH SYSTEM – INTEGRATED



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WHAT MATTERS MOST (ADVANCED ILLNESS COLLABORATIVE)

Northwell QI initiative to improve the care of individuals with advanced illness (2014).

Goals:

- Identify patients with advance illness
- Engage patients / families in Goals of Care conversations (GOC)
- Align care with patients needs, values and circumstances
- Educate providers and clinicians on how to conduct a Goals of Care conversation
- Incorporated What Matters Most into the GOC conversations education and documentation (2019)
- The committee then became the Advanced Illness and Aging Collaborative

WHAT MATTERS MOST

GoCCEP™ education uses a blended learning, multimodal educational methodology in a safe learning environment, using simulation as a reflective educational tool consisting of:

Required pre-work (1 hour total)

- Two online modules available in iLearn (45 minutes)
- Pre readings (15 minutes)

Virtual Session (3 hours on Zoom)

- Instructor lead didactic review and Q&A
- Two GoCCEP™ instructor lead standardized patient encounters with feedback sessions ~ including a patient encounter and distraught family member encounter
- Culminating with a group debrief

MOBILITY- (FALL COMMITTEE/AM-PAC 6 CLICKS PILOT)

Fall Risk Assessment

+

AM-PAC 6 CLICKS

a) Basic Mobility Assessment

b) Daily Activity Assessment

→

Pilot Study
4 Units, 3 Hospitals

- User Engagement (Survey Results)
- Mobility Score (Minimize Deconditioning)
- Falls
- Improve Discharge Disposition insight and recommendations
- Workforce Injuries

Adoption AM-PAC 6 Clicks

MENTATION- (CRITICAL CARE SERVICE LINE)

Critical Care service line = The ABCDEF bundle.

The ABCDEF bundle is an evidenced-based bundle of care to optimize care and outcomes for patients in critical care.

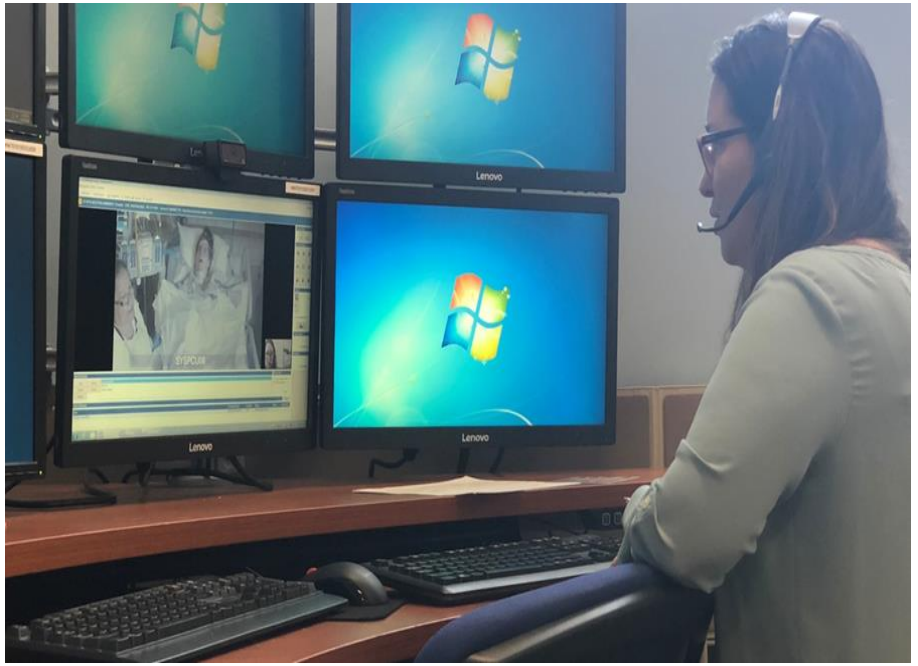
A - Assess, prevent and manage pain
B - Spontaneous awakening and spontaneous breathing trials
C - Choice of analgesia, sedation

D - Assess, prevent and manage delirium

E - Early mobilization and exercise
F - Family engagement and empowerment

CAM-ICU assessment utilized in all critical care units
Collaborated with Critical Care service line
b-CAM identified as the assessment of choice in non-critical care areas
Presented to:

- The Senior VP & Nurse Executive
- The System Nurse Executive Council
- The System Nurse Education Council



MEDICATION - SAFE PRESCRIBING IN OLDER ADULTS WORKGROUP (PHARMACY)

01

Clinical Content Expertise

02

Clinical Decision Support

03

Reporting and Surveillance

LED BY SENIOR DIRECTOR PHARMACY SERVICES, PHARMD

SAFER PRESCRIBING IN THE OLDER ADULT WORKGROUP

Long-acting Benzodiazepines

Consider potentially harmful effects of long-acting benzodiazepines

1. Diazepam
2. Midazolam
3. Temazepam
4. Alprazolam
5. ChlordiazePOXIDE
6. CloBazam
7. Clonazepam
8. Lorazepam

Long-acting Opioids

Consider potentially harmful effects of extended-release opioid

1. **Fentanyl Patch**
2. Morphine Extended Release (ER)
3. Oxycodone Extended Release (ER)

Tricyclic Antidepressants

Consider potentially harmful effects of tricyclic antidepressants

1. Amitriptyline Hydrocholoride
2. Imipramine Hydrochloride
3. Nortriptyline Hydrochloride

Anticholinergics

Consider potentially harmful effects of sleep aids, particularly

1. Diphenhydramine

Hypnotics

Consider potentially harmful effects of hypnotics

1. Zaleplon
2. Zolpidem

SURVEILLANCE REPORT

USAGE OF POTENTIALLY HARMFUL MEDICATIONS

Northwell Health
Healthcare Analytics

OCIO- *Clinical Analytics*

Safe Rx for Patients 65 y/o and Older

Facility: NSUH

Unit: More than 10 units selected

Medication: More than 10 units selected

Comorbidity: More than 10 units selected

Description: Report monitors currently admitted Safe Rx Patients Over 65 and the latest admit order.

Total Patients: 143

See Legend for more information

Patient Full Name	MRN	Date of Birth	Age	Location	Med Ord Name	Order Entry Date	Generic Name	Dose Form	Route	Frequency	Ordering Provider Name	Diagnosis Name	Comorbidity Name
			66	NSUH 3 DSU	oxycodone 5 mG/acetaminophen 325 mG	3/3/2021 4:00:41 PM	acetaminophen-oxycodone	Tablet	Oral	every 4 hours	Dr. smith	Non-ST elevation myocardial infarction (NSTEMI)	Acute myocardial infarction, Fluid and electrolyte disorders, Other ear and sense organ di Other nervous system disorders, Other non-traumatic joint disorders, Peripheral and vis atherosclerosis, Residual codes; unclassified, Respiratory failure; insufficiency; arrest (
					oxyCODONE IR	3/3/2021 9:42:17 AM	oxyCODONE	Tablet	Oral	every 8 hours	Dr. smith	Non-ST elevation myocardial infarction (NSTEMI)	Acute myocardial infarction, Fluid and electrolyte disorders, Other ear and sense organ di Other nervous system disorders, Other non-traumatic joint disorders, Peripheral and vis atherosclerosis, Residual codes; unclassified, Respiratory failure; insufficiency; arrest (
					diphenhydrAMINE	3/9/2021 3:46:58 PM	diphenhydrAMINE		Oral	every 6 hours	Dr. smith	Non-ST elevation myocardial infarction (NSTEMI)	Acute myocardial infarction, Fluid and electrolyte disorders, Other ear and sense organ di Other nervous system disorders, Other non-traumatic joint disorders, Peripheral and vis atherosclerosis, Residual codes; unclassified, Respiratory failure; insufficiency; arrest (
			67	NSUH 2 Monti	belladonna 16.2 mG/opium 30 mg Suppository	3/9/2021 1:38:06 PM	belladonna-opium	Suppository	Rectal	every 8 hours	Dr. smith	Benign prostatic hyperplasia with lower urinary tract symptoms	Asthma, Blindness and vision defects, Hyperplasia of prostate
					morphine - Injectable	3/9/2021 1:38:06 PM	morphine	Solution	IV Push	every 3 hours	Dr. smith	Benign prostatic hyperplasia with lower urinary tract symptoms	Asthma, Blindness and vision defects, Hyperplasia of prostate
					oxycodone 5 mG/acetaminophen 325 mG	3/9/2021 1:38:06 PM	acetaminophen-oxycodone	Tablet	Oral	every 4 hours	Dr. smith	Benign prostatic hyperplasia with lower urinary tract symptoms	Asthma, Blindness and vision defects, Hyperplasia of prostate
										every 6 hours	Dr. smith	Benign prostatic hyperplasia with lower urinary tract symptoms	Asthma, Blindness and vision defects, Hyperplasia of prostate
					diazepam Tablet	3/9/2021 4:02:09 PM	diazePAM	Tablet	Oral	every 6 hours	Dr. smith	Benign prostatic hyperplasia with lower urinary tract symptoms	Asthma, Blindness and vision defects, Hyperplasia of prostate

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STANDARDIZATION 4M ASSESSMENTS

- **What Matters Most** – Advanced Illness and Aging Collaborative
  - Goals of Care Conversations - WMM
- **Mentation** – Critical Care Service Line
  - Critical Care – CAM-ICU
  - Non-Critical Care – b-CAM
- **Mobility** – Falls Committee
  - Nursing Admission Assessment and Daily Flowsheet – AMPAC 6 Clicks
- **Medication** – Safer Prescribing in the Older Adult Workgroup
  - Identified potentially harmful medications
  - Medication Surveillance Report
  - Clinical Decision Support Pathway

Age-Friendly Health Systems

Choose metrics that impact patient care and help make the business case for an Age-Friendly Health System

- Compliance with evidence based-assessments over time
- Length of Stay (LOS)
- Readmissions
- Discharge disposition
- Change in mobility scores

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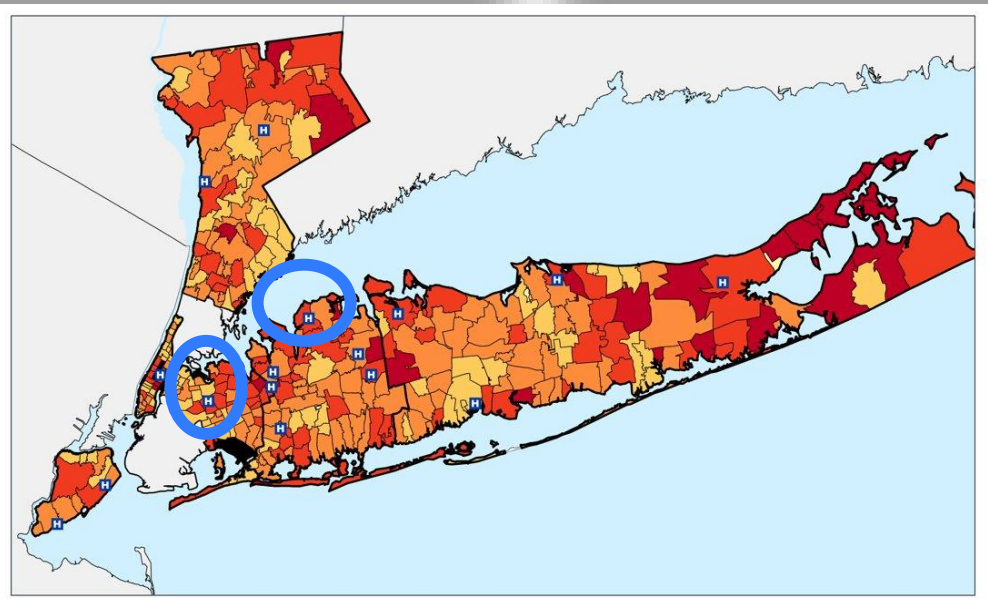
STEP 6: IDENTIFY AGE-FRIENDLY PILOT HOSPITALS

- Health Care Organization Leadership Support
- Local Leadership Support
- Demographics
- Diverse population



- Strong Ties to the Community
- Geriatrics and Palliative Physicians/ACPs

GLEN COVE HOSPITAL CENTER OF EXCELLENCE AFHS PICG

Steering Committee
Executive Director, Medical Director, Director of Geriatric Medicine, Nurse Executive, Associate Executive Director Quality Management

What Matters Most
Goals of Care Conversation

Lead
Palliative Care Team, Medicine

Champions
Hospitalists, ACPs, Quality

Medications
Assess for High-Risk Medications

Lead
PharmD

Champions
Pharmacists, Medicine, ACP

Mobility
AM-PAC 6 Clicks Assessment and APOC

Lead
Director of Physical Therapy

Champions
PT & OT, Nurses & Nursing Assistants

Mentation
Delirium Assessment, CAM-ICU & b-CAM

Lead
Nursing Director

Champions
Nurses, Case Managers, Hospitalists

Emergency Medicine
GEDA Level 1

Lead
Emergency Medicine Physician and Nurse Director ED

Champions
ED physicians, ED nurses, ED SW

NICHE
All Inpatient Units

Lead
Nurse Managers/ Nurse Educator

Champions
Nurses
Nursing Assistants
Nurse Educators

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DASHBOARDS OVERVIEW - ALL HOSPITALS

Overview | WhatMattersMost - GOC | Mobility-AMPAC | Mentation-Delirium

Northwell Health

The 4Ms Dashboard

Facility: All Facilities

All Facilities : YTD 65+ Inpatients

Data updated on 7/7/2024

What Matters Most

27%

have a **Goal of Care Note** written during their stay.

(**16,265** of **59,880** Acute Inpatients w/ age 65+)

Mentation

30%

Delirium Screen compliance during Non-Critical Care stays.

(**18,008** of **59,392** visits age 65+)

54%

Delirium Screen compliance during Critical Care stays.

(**4,540** of **8,397** visits age 65+)

Mobility

85%

AMPAC Screen compliance during Non-Critical Care stays.

(**50,836** of **59,507** visits age 65+)

85%

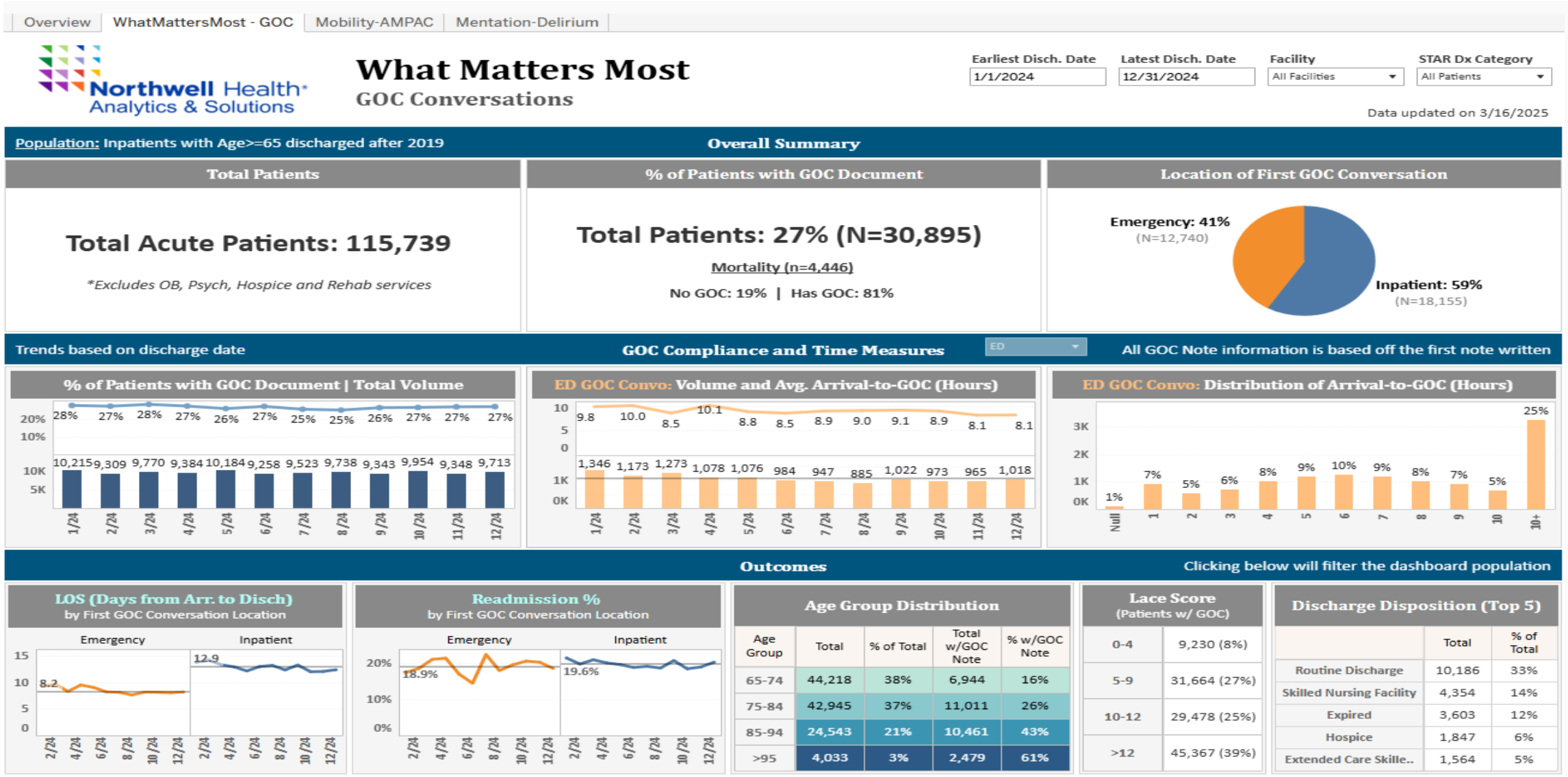
AMPAC Screen compliance during Critical Care stays.

(**7,187** of **8,411** visits age 65+)

Medication

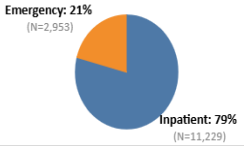
(TBD)

DASHBOARDS GOALS OF CARE CONVERSATIONS– ALL HOSPITALS

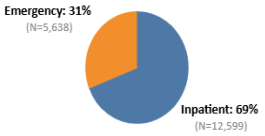


GOAL OF CARE CONVERSATIONS

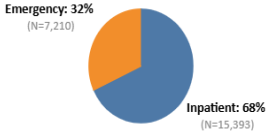
Jan 1st – Dec 31st, 2020

Total Patients	% of Patients with GOC Document	Location of First GOC Conversation
Total Acute Patients: 96,378 *Excludes OB, Psych, Hospice and Rehab services	Total Patients: 15% (N=14,182) Mortality (n=6,369) No GOC: 49% | Has GOC: 51%	

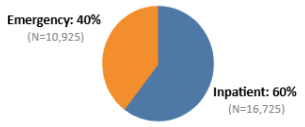
Jan 1st – Dec 31st, 2021

Total Patients	% of Patients with GOC Document	Location of First GOC Conversation
Total Acute Patients: 107,652 *Excludes OB, Psych, Hospice and Rehab services	Total Patients: 17% (N=18,237) Mortality (n=5,649) No GOC: 35% | Has GOC: 65%	

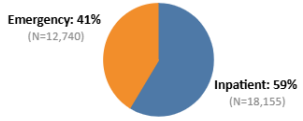
Jan 1st – Dec 31st, 2022

Total Patients	% of Patients with GOC Document	Location of First GOC Conversation
Total Acute Patients: 109,766 *Excludes OB, Psych, Hospice and Rehab services	Total Patients: 21% (N=22,603) Mortality (n=4,973) No GOC: 28% | Has GOC: 72%	

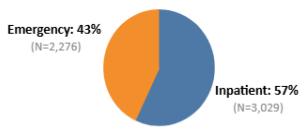
Jan 1st – Dec 31st, 2023

Total Patients	% of Patients with GOC Document	Location of First GOC Conversation
Total Acute Patients: 111,751 *Excludes OB, Psych, Hospice and Rehab services	Total Patients: 25% (N=27,650) Mortality (n=4,388) No GOC: 24% | Has GOC: 76%	

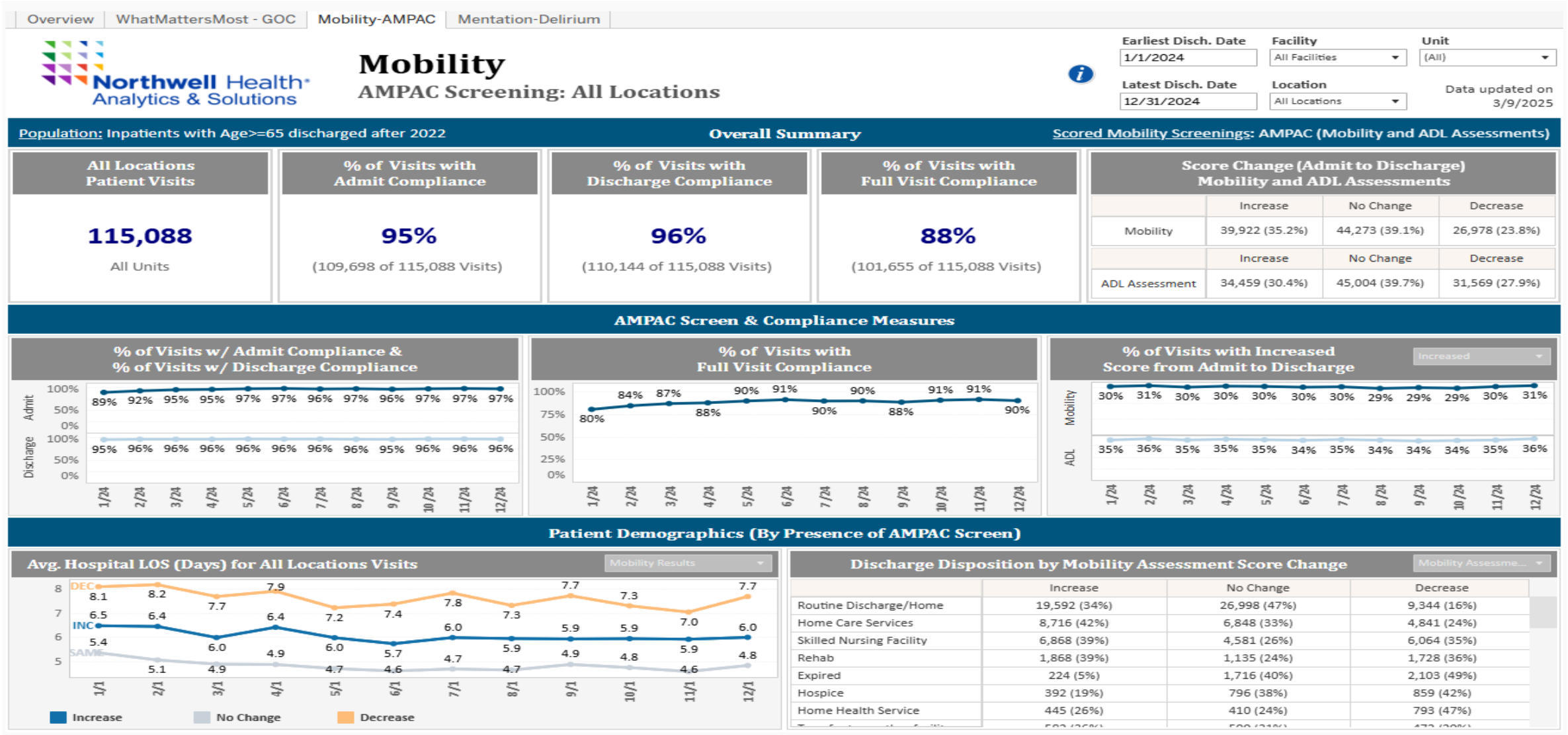
Jan 1st – Dec 31st,2024

Total Patients	% of Patients with GOC Document	Location of First GOC Conversation
Total Acute Patients: 115,738 *Excludes OB, Psych, Hospice and Rehab services	Total Patients: 27% (N=30,895) Mortality (n=4,446) No GOC: 19% | Has GOC: 81%	

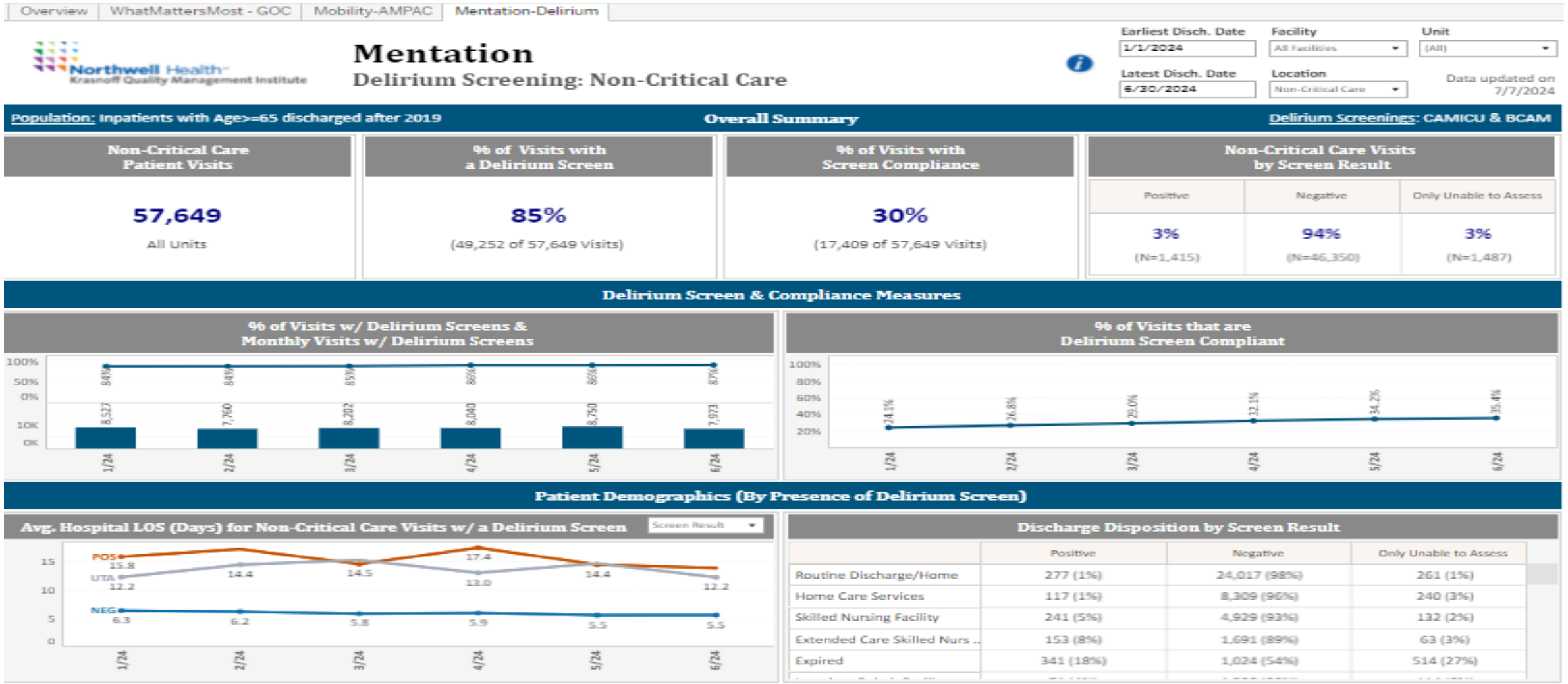
YTD 2025

Total Patients	% of Patients with GOC Document	Location of First GOC Conversation
Total Acute Patients: 18,499 *Excludes OB, Psych, Hospice and Rehab services	Total Patients: 29% (N=5,305) Mortality (n=890) No GOC: 17% | Has GOC: 83%	

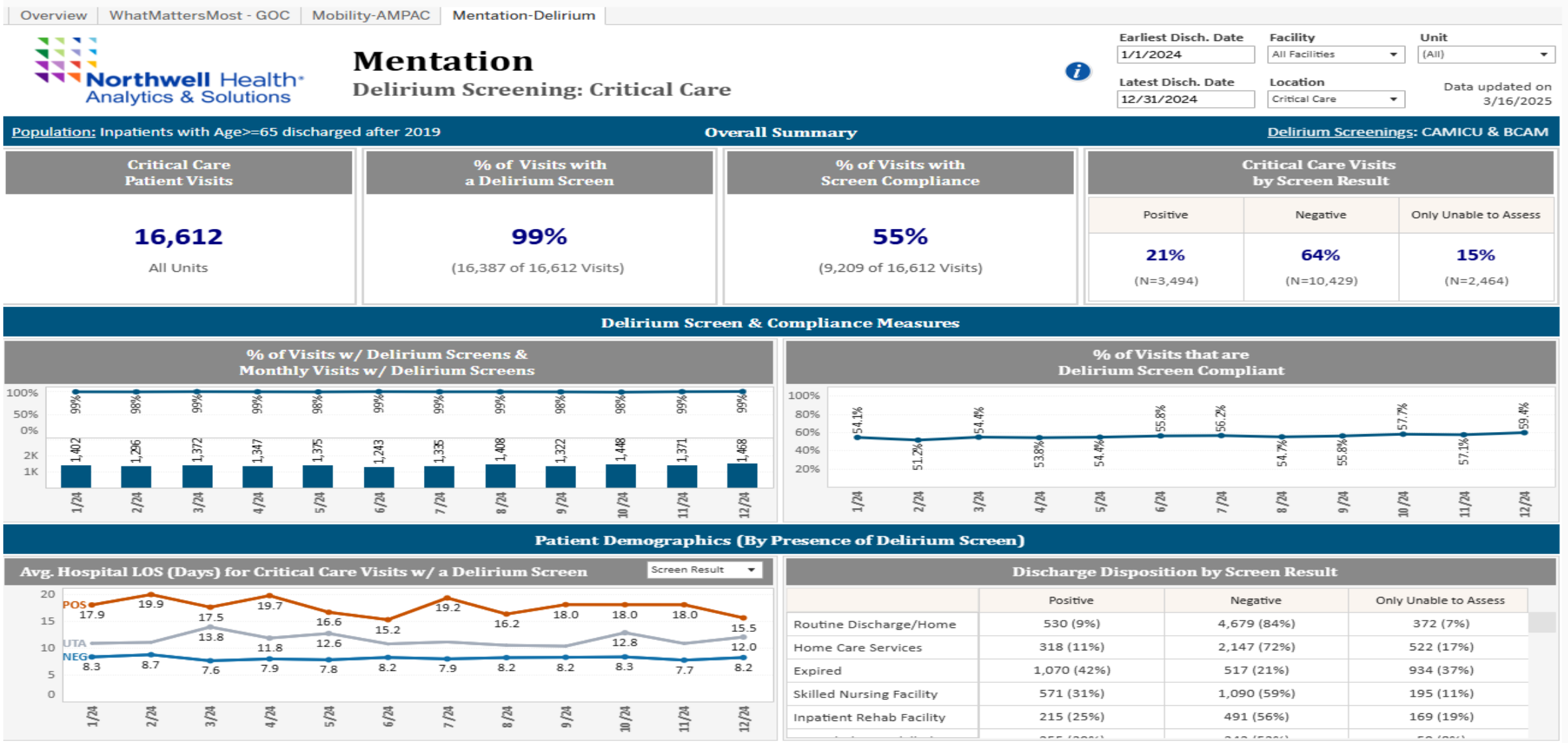
DASHBOARDS MOBILITY - ALL HOSPITALS



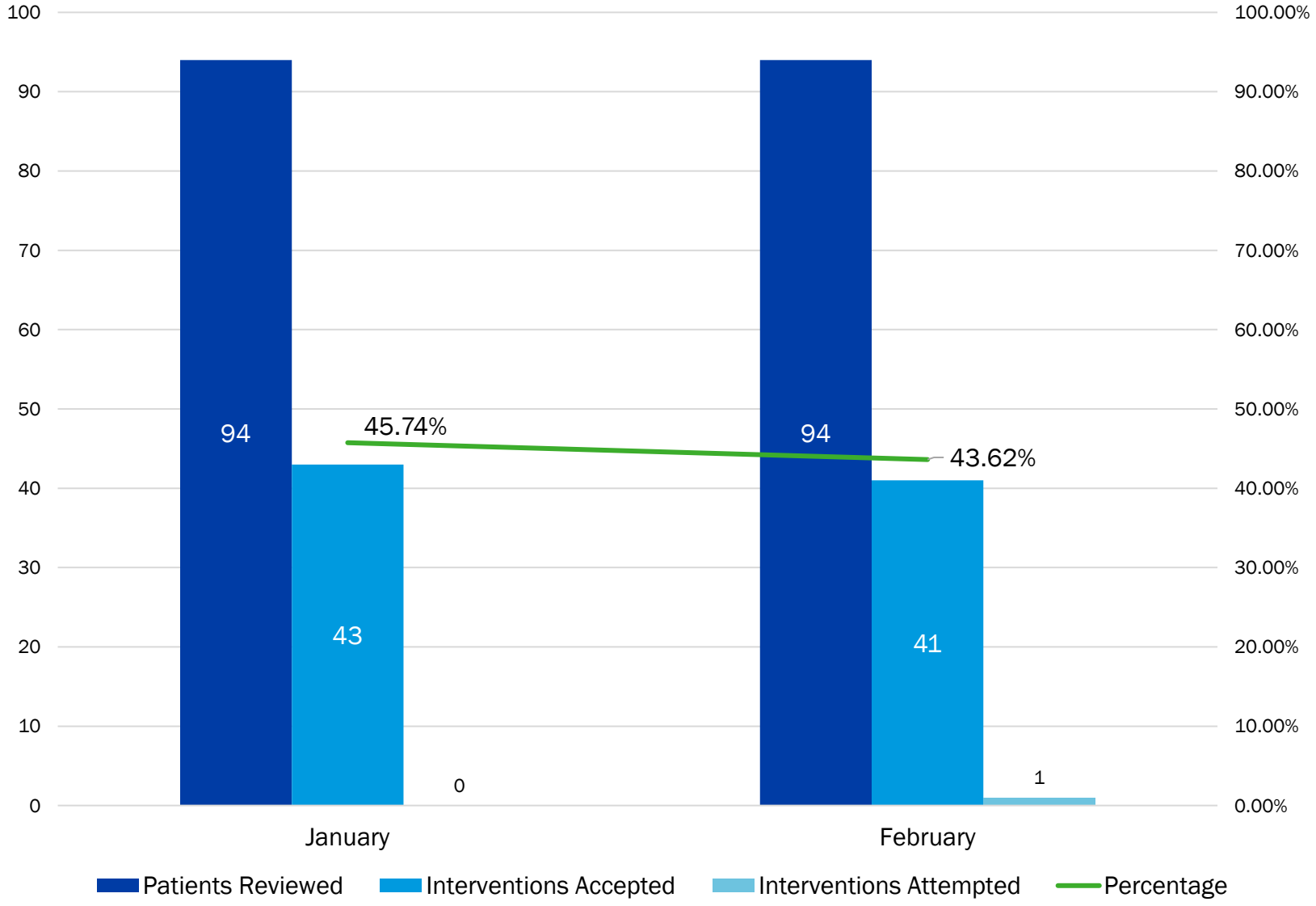
DASHBOARDS MENTATION NON-CRITICAL CARE – ALL HOSPITALS



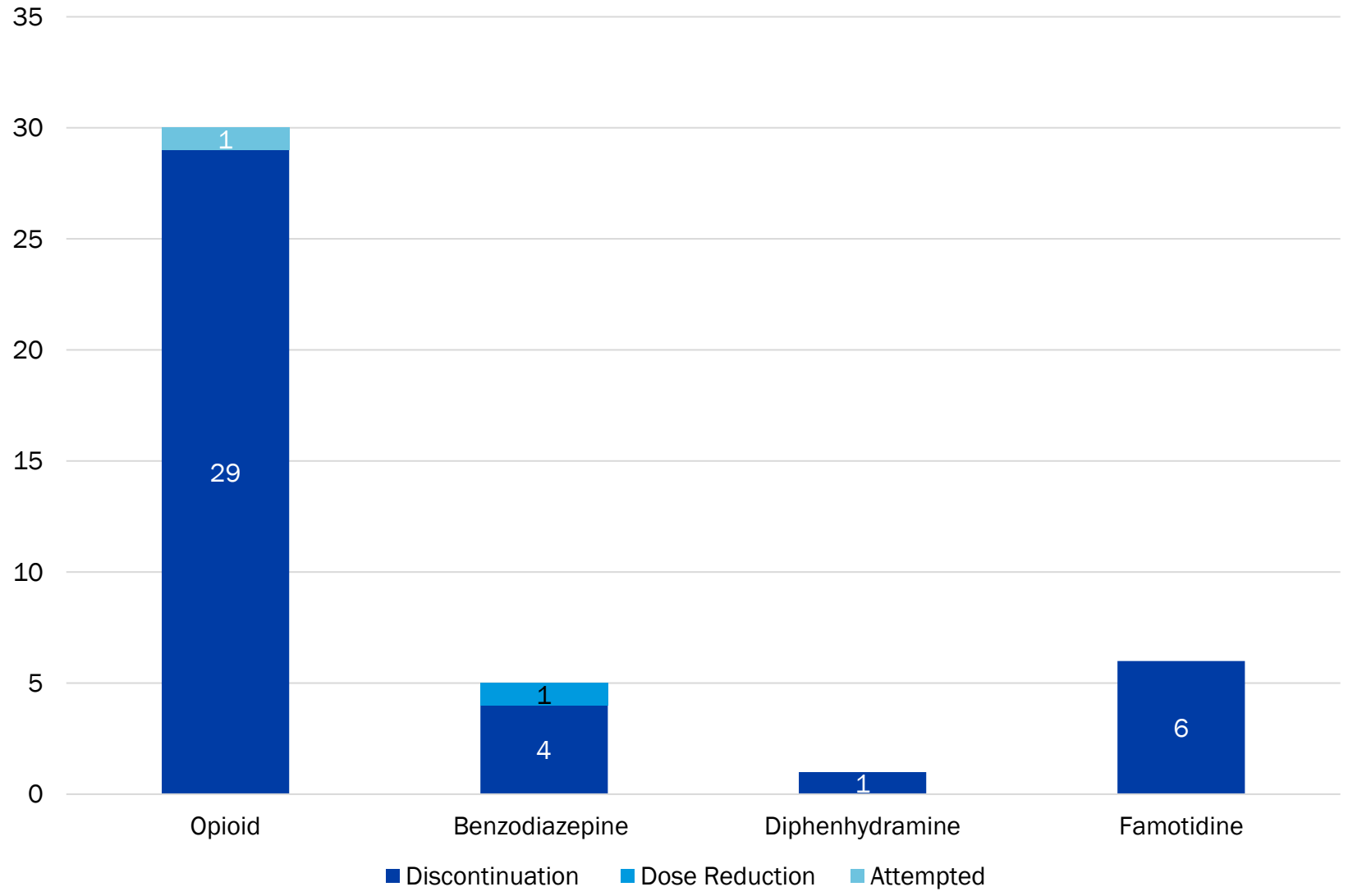
DASHBOARDS MENTATION CRITICAL CARE– ALL HOSPITALS



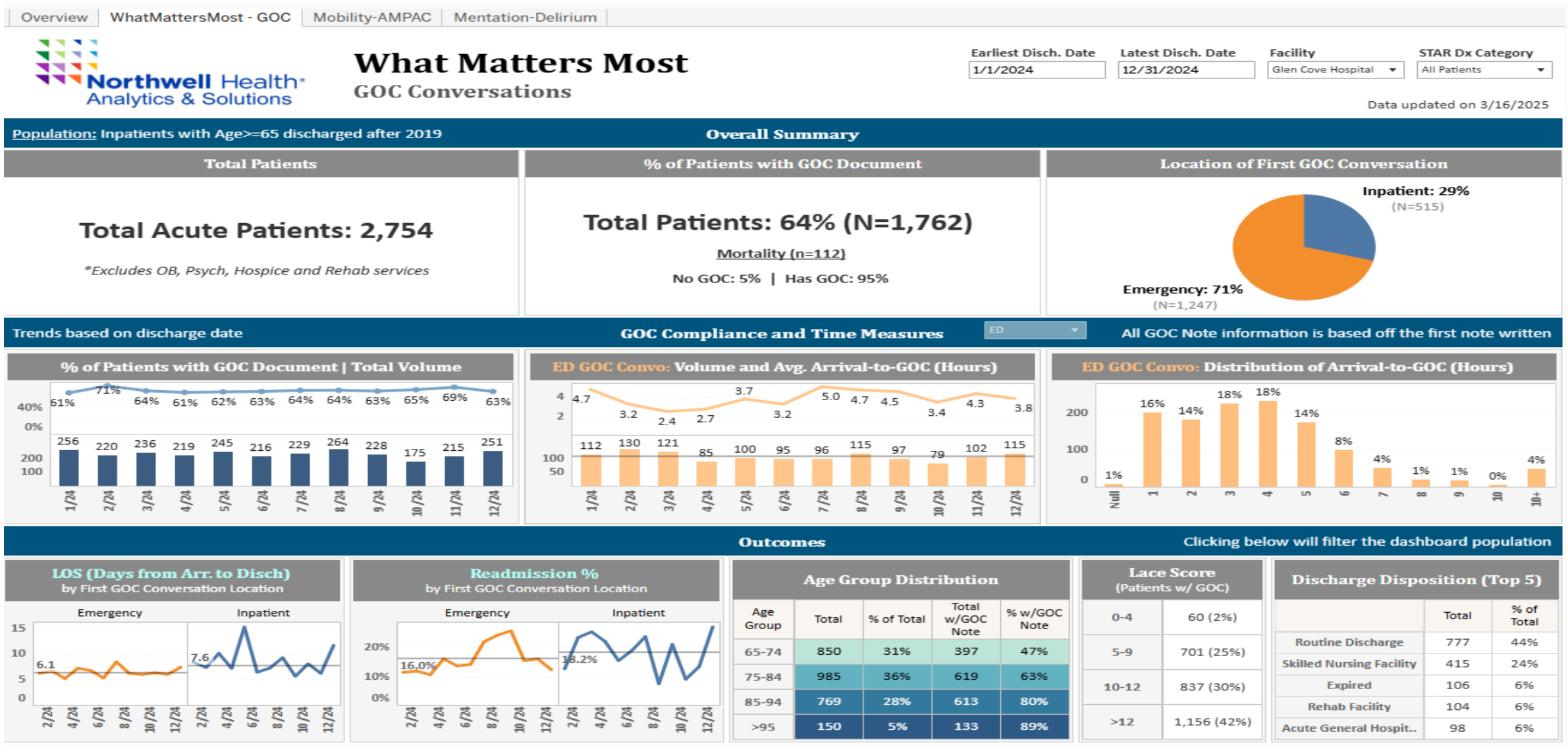
2025 YTD Total Interventions



February 2025 - Interventions by Drug Class



GOALS OF CARE CONVERSATIONS – PILOT HOSPITAL



MENTATION NON-CRITICAL CARE – PILOT HOSPITAL

Overview | WhatMattersMost - GOC | Mobility-AMPAC | Mentation-Delirium

Northwell Health Analytics & Solutions

Mentation
Delirium Screening: Non-Critical Care

Earliest Disch. Date: 1/1/2024 | Facility: Glen Cove Hospital | Unit: (All)
Latest Disch. Date: 12/31/2024 | Location: Non-Critical Care
Data updated on 3/16/2025

Population: Inpatients with Age>=65 discharged after 2019

Overall Summary

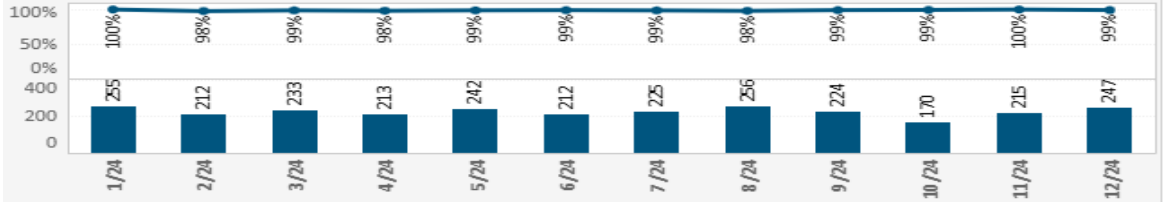
Delirium Screenings: CAMICU & BCAM

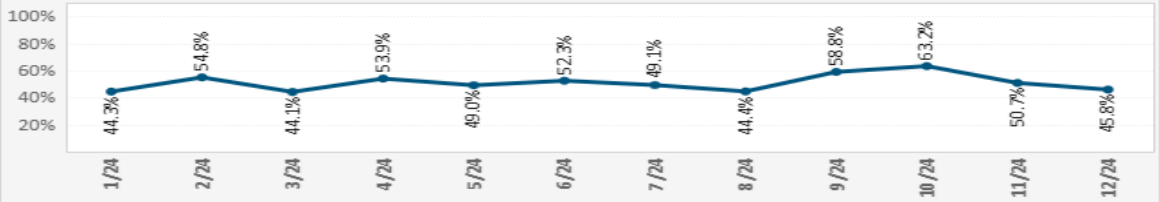
Non-Critical Care Patient Visits	% of Visits with a Delirium Screen	% of Visits with Screen Compliance
2,734	99%	50%
All Units	(2,704 of 2,734 Visits)	(1,377 of 2,734 Visits)

Non-Critical Care Visits by Screen Result

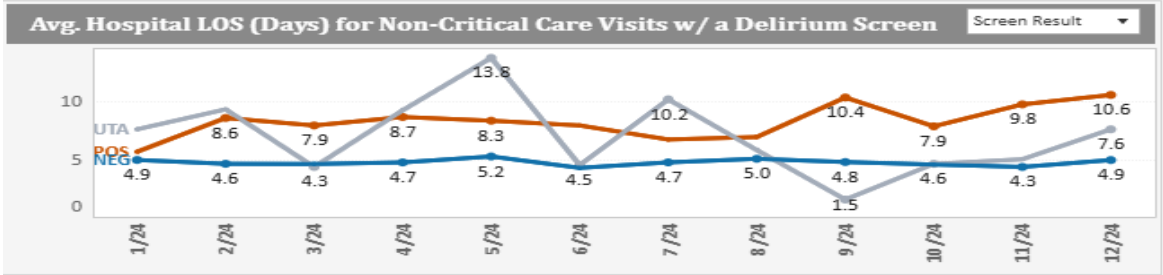
Positive	Negative	Only Unable to Assess
9% (N=251)	88% (N=2,386)	2% (N=67)

Delirium Screen & Compliance Measures





Patient Demographics (By Presence of Delirium Screen)



Discharge Disposition by Screen Result

	Positive	Negative	Only Unable to Assess
Routine Discharge/Home	61 (4%)	1,305 (95%)	9 (1%)
Skilled Nursing Facility	79 (14%)	453 (83%)	17 (3%)
Rehab	11 (7%)	143 (92%)	2 (1%)
Acute General Hospital	14 (9%)	136 (88%)	5 (3%)
Expired	34 (33%)	47 (45%)	23 (22%)

MENTATION NON – CRITICAL CARE PILOT HOSPITAL

Overview | WhatMattersMost - GOC | Mobility-AMPAC | Mentation-Delirium

Northwell Health Analytics & Solutions

Mentation
Delirium Screening: Critical Care

Earliest Disch. Date: 1/1/2024 | Facility: Glen Cove Hospital | Unit: GC CCU1
Latest Disch. Date: 12/31/2024 | Location: Critical Care
Data updated on 3/16/2025

Population: Inpatients with Age>=65 discharged after 2019

Overall Summary

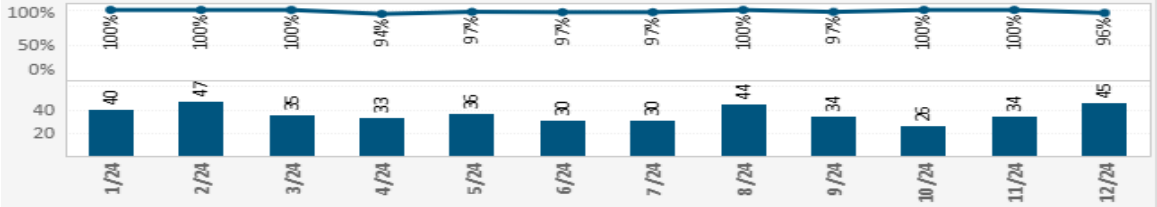
Delirium Screenings: CAMICU & BCAM

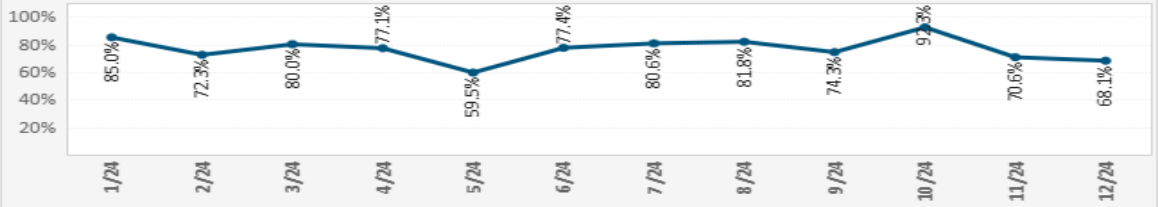
Critical Care Patient Visits	% of Visits with a Delirium Screen	% of Visits with Screen Compliance
442	98%	76%
GC CCU1	(434 of 442 Visits)	(336 of 442 Visits)

Critical Care Visits by Screen Result

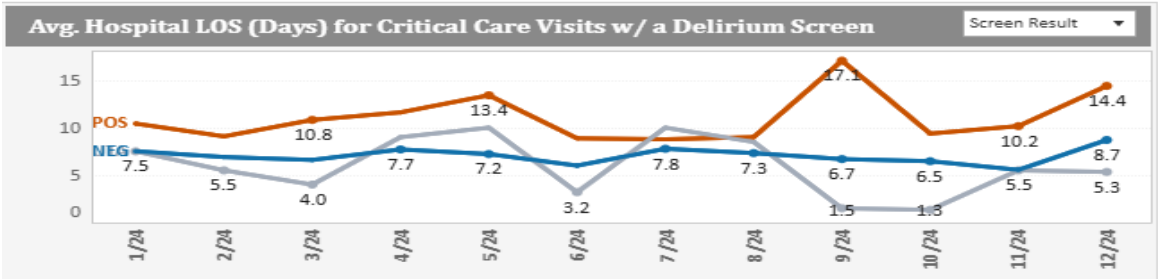
Positive	Negative	Only Unable to Assess
32% (N=137)	61% (N=263)	8% (N=34)

Delirium Screen & Compliance Measures





Patient Demographics (By Presence of Delirium Screen)



Discharge Disposition by Screen Result

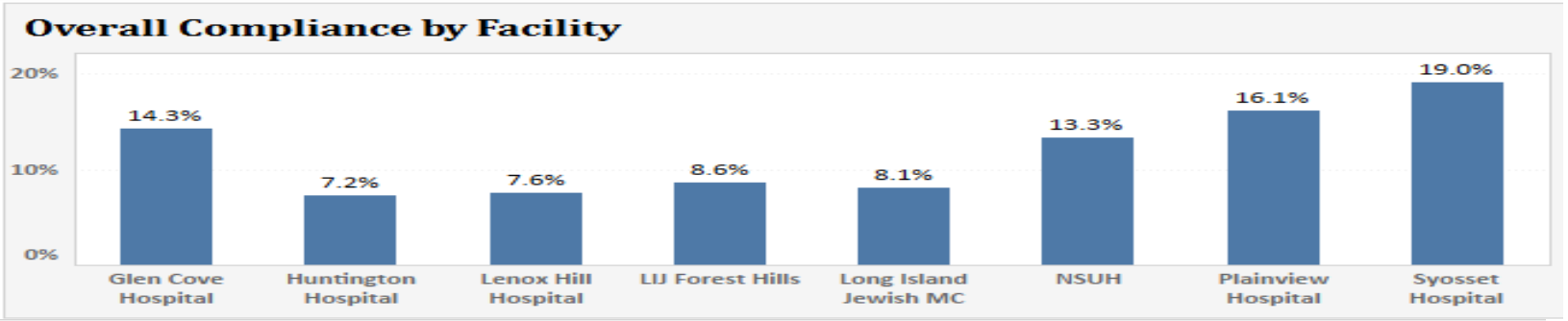
	Positive	Negative	Only Unable to Assess
Routine Discharge/Home	25 (21%)	90 (76%)	4 (3%)
Skilled Nursing Facility	33 (30%)	68 (62%)	8 (7%)
Expired	38 (49%)	20 (26%)	19 (25%)
Acute General Hospital	13 (29%)	29 (64%)	3 (7%)
Rehab	5 (25%)	15 (75%)	

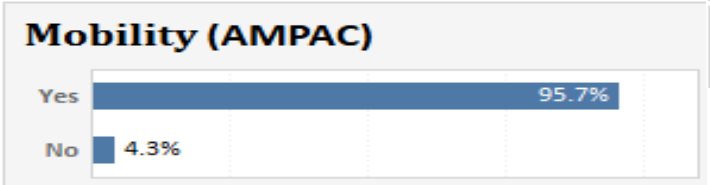
ALL 4Ms DASHBOARD

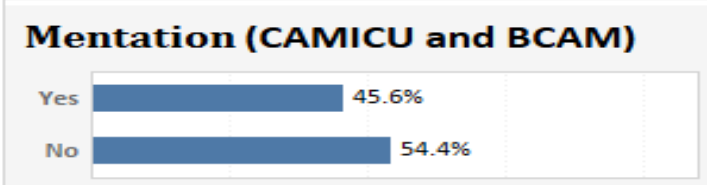
Overall Compliance

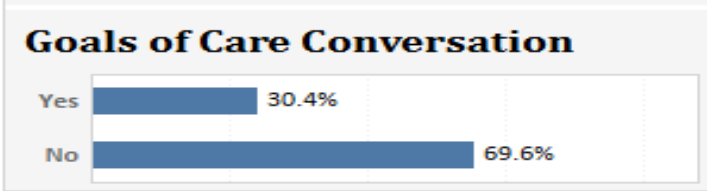
10.9%

All M Compliance: 134 Patients
Admitted Patients Over 65: 1,227





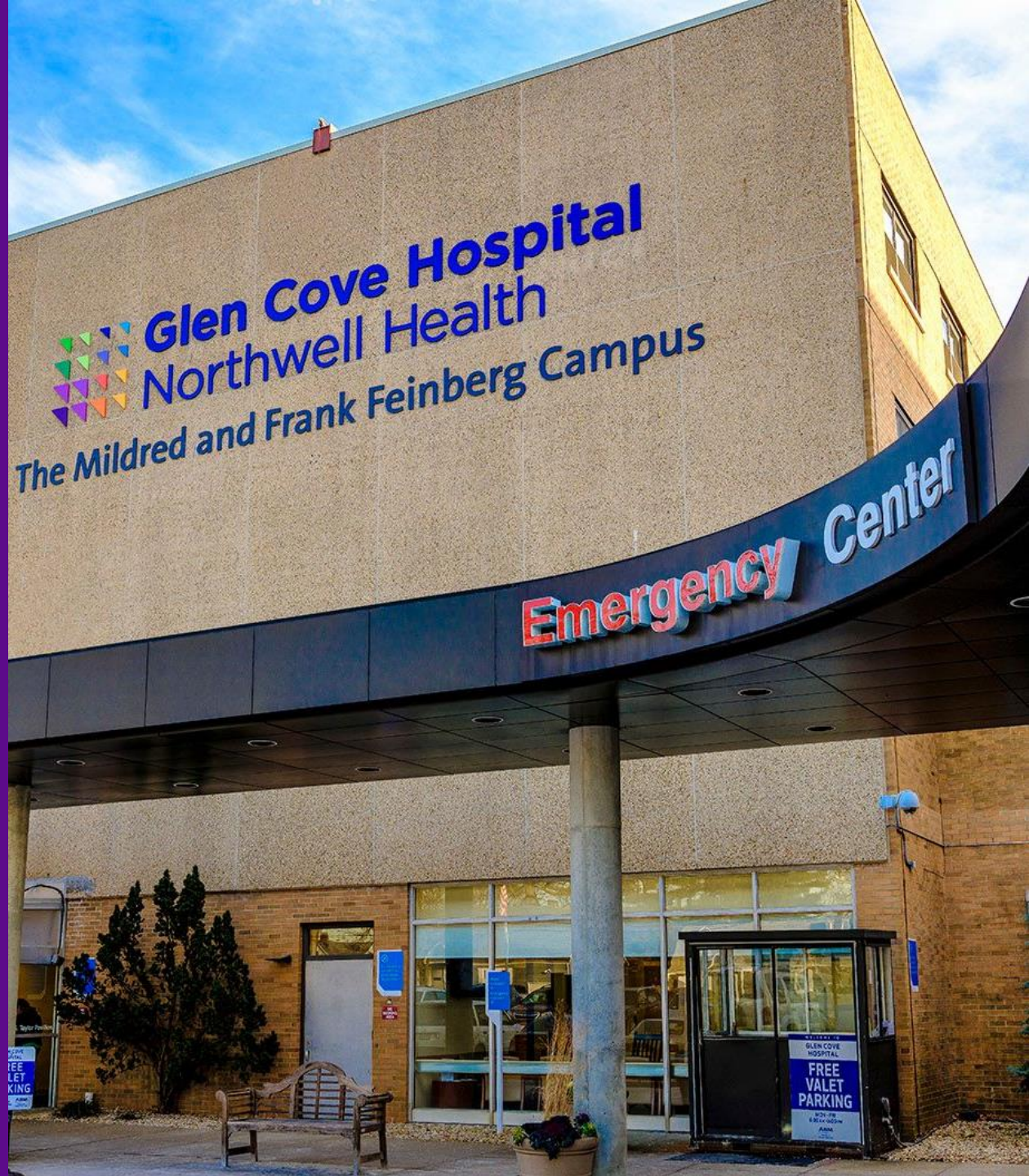




Patient List

Encounternumber	MRN1	Facilityname	Admitdtm	Mobility	Mentation	Medication	GOC Note

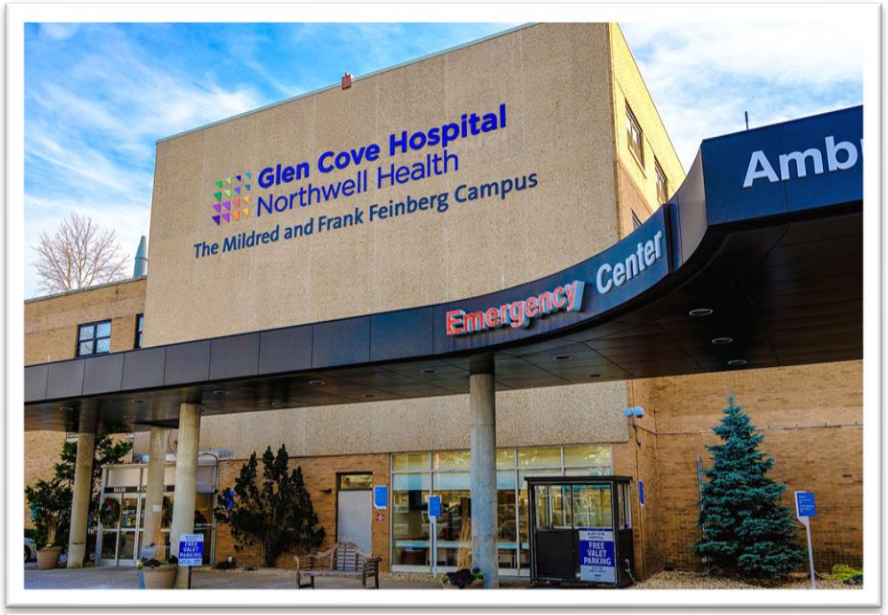
Age-Friendly Health System in Practice: Glen Cove Hospital



GLEN COVE HOSPITAL

Glen Cove Hospital is an acute care community hospital that provides ***patient-centered care*** while maintaining a focus on the ***highest quality*** of clinical outcomes. Our core values of caring, excellence, innovation, and integrity serve as the foundation for the mission and vision, to improve the health and quality of life for the people and communities we serve by providing ***world-class service and patient-centered care.***

- 216 licensed beds
  - Available Beds: 151
    - 58 Acute
    - 93 Rehab
- Over 5,458 patients discharged in 2022
- Over 19,900 Emergency Department visits
- 1,107 employees
  - 252 nurses
  - 343 affiliated physicians
  - 90 employed physicians



PILOT SITE ACCOMPLISHMENTS

Glen Cove Hospital AFHS became the model to replicate

- Integrating the 4M Model into IDR
- Monthly Age Friendly PICG – sustainability and accountability

Since this work began in 2019 Glen Cove Hospital achieved:

- IHI Age Friendly Health System Committed Care to Excellence recognition
- NICHE
- Magnet designation
- ACEP Geriatric ED Level 1 accreditation
- Move from a 2 to a CMS 5 Star Rating ★★★★★
- High Performing rank in USNWR Report for Geriatric Care

GLEN COVE HOSPITAL CENTER OF EXCELLENCE AFHS PICG

Steering Committee

Executive Director, Medical Director, Director of Geriatric Medicine, Nurse Executive, Associate Executive Director Quality Management

What Matters Most Goals of Care Conversation	Medications Assess for High- Risk Medications	Mobility AM-PAC 6 Clicks Assessment and APOC	Mentation Delirium Assessment, CAM-ICU & b-CAM	Emergency Medicine GEDA Level 1	NICHE All Inpatient Units	Geriatric Surgical Verification
Lead Palliative Care Team, Medicine	Lead PharmD	Lead Director of Physical Therapy	Lead Nursing Director	Lead Emergency Medicine Physician and Nurse Director ED	Lead Nurse Managers/ Nurse Educator	Lead Dir of Geriatric Medicine/Dir Surgery
Champions Hospitalists, ACPs, Quality	Champions Pharmacists, Medicine, ACP	Champions PT & OT, Nurses & Nursing Assistants	Champions Nurses, Case Managers, Hospitalists	Champions ED physicians, ED nurses, ED SW	Champions Nurses Nursing Assistants Nurse Educators	Champions Nurse Manager Nurse Educator

IMPACT ON QUALITY

Safety

- Pressure Injuries
- Falls with hip fracture

Readmission

- Excess Days in Acute Care after Hospitalization for Heart Failure
- Excess Days in Acute Care after Hospitalization for Pneumonia (PN)
- Excess Days in Acute Care after Hospitalization for Acute Myocardial Infarction

Patient Experience

- Communication About Medicines
- Discharge Information
- Care Transitions
- Quietness of Hospital Environment

Northwell Health

OPERATIONAL EFFICIENCY & LOS

Length of Stay for Patients with Goals of Care Conversation in ED compared to after transition to IP.
There is an impact on LOS when early goals of care conversations occur in the Emergency Department.

LOS Analysis Top 3 DRGs by Location of GOC Jan-Dec 2024					
DRG	**Description**	**N (Number of Patients with ED Conversations)**	**LOS Inpatient Conversation**	**LOS ED Conversation**	**Savings**
177	Respiratory Infections and Inflammation **With MCC**	501	9.4	8.5	135,270.00
177,178,179	Respiratory Infections & Inflammation **With and without CC/MCC**	574	9	8.4	103,320.00
DRG	**Description**	**N (Number of Patients with ED Conversations)**	**LOS Inpatient Conversation**	**LOS ED Conversation**	**Savings**
291	Heart Failure & Shock **With MCC**	814	9.5	8.5	244,200.00
291,292,293	Heart Failure & Shock **With and without CC/MCC**	830	9.5	8.5	249,000.00
DRG	**Description**	**N (Number of Patients with ED Conversations)**	**LOS Inpatient Conversation**	**LOS ED Conversation**	**Savings**
871	Septicemia or Severe Sepsis w/o MV>96 h **With MCC**	2268	11.4	9.6	1,224,720.00
871,872	Septicemia or Severe Sepsis w/o MV>96 h **With and without CC/MCC**	2440	11.2	9.3	1,390,800.00

15 Hospitals

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MODELS OF GERIATRIC CARE, QUALITY IMPROVEMENT, AND PROGRAM DISSEMINATION

Journal of the American Geriatrics Society

Transforming health care: A large health organizations' journey to become an age-friendly health system (AFHS) and beyond

Maria Torroella Carney MD[1,2] | Susan Kwiatek RN[2] | Edith A. Burns MD[1,2]

[1]Geriatrics and Palliative Medicine, Zucker School of Medicine at Hofstra Northwell, Hempstead, New York, USA
[2]Geriatrics and Palliative Medicine, Northwell Health, Manhasset, New York, USA

Correspondence
Edith A. Burns, MD, Institute for Health Systems Science, 600 Community Dr., Suite 403, Manhasset, NY 11030, USA.
Email: eburns4@northwell.edu

Abstract

Background: In 2017, the John A. Hartford Foundation partnered with the Institute for Health Care Improvement, American Hospital Association, and Catholic Health Care Organization to define the 4Ms framework to improve quality of care and health outcomes for older adults. The senior leadership of one of the largest integrated healthcare organizations (HCO) in the country recognized the relevance of these recommendations to the aging demographic of the United States. The health system provides care to over 2,000,000 unique patients annually, about 20% of whom are aged ≥65. We describe how commitment to becoming an Age-Friendly Health System (AFHS) has taken this HCO beyond the targets set by the initiative.

Methods: Steps guiding evolution of the AFHS model of care are as follows: Initiation, assessment, planning, implementation, sustainability. An AFHS leadership team including geriatrics and quality improvement expertise oversees the initiative. Plan-Do-Study-Act cycles are utilized at multiple stages to develop structures for data collection and reporting outcomes.

Results: Initiation and assessment stages identified key champions and existing efforts and programs that were leveraged to implement 4Ms best practices. Working committees with relevant expertise for each M selected evidence-based quality measures and designed/adapted training materials. The EHR is used to integrate quality measures and gather outcome data to inform changes in care. Dashboards capturing quality measures for each M have been implemented and pilot-tested at a community-based hospital and these processes are being adapted and disseminated to other settings. Leadership and stakeholders convene regularly to review lessons learned and next steps.

Conclusions: On the health system level, partnering with quality management leaders has led to development of processes that feed into organizational level data used to track longitudinal improvements in patient outcomes. Outcome data in each of the 4M domains are presented. Learning points are shared to help others take a systems-approach to age-friendly change.

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THANK YOU