

# THE MEDISYS HEALTH NETWORK

*A Designated Age-Friendly Health System*



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# *Our Health Network*

- ▶ **MediSys Health Network is a not-for profit healthcare system located in Queens, New York, comprised of a multitude of entities and resources.**
- ▶ **Our Healthcare Network includes:**
  - ▶ **Jamaica Hospital Medical Center**
  - ▶ **Flushing Hospital Medical Center**
  - ▶ **The Jamaica Hospital Nursing Home**
  - ▶ **10 community-based healthcare centers located throughout Queens County**

# The Community We Serve

- ▶ Our Healthcare Network provides care to an underserved community of limited financial means and resources.
- ▶ The members of our community are from diverse cultural and ethnic groups speaking over 135 different languages.
- ▶ We serve a population of more than 2,300,000, in which:
  - ▶ 50% were born outside of the country
  - ▶ 250,000 are undocumented
  - ▶ 15% - 20% are uninsured
- ▶ 80% of our patients are insured by Medicare and/or Medicaid.

# *Age-Friendly at MediSys*

- ▶ Our goal in joining the IHI Action Community was to improve the care of older adults and promote healthy aging.
- ▶ We committed ourselves to become a designated Age-Friendly Healthcare Network to ensure:
  - ▶ That every older adult gets the best care possible.
  - ▶ Patients experience no healthcare-related harms.
  - ▶ That each patient is satisfied with the care they receive.

- ▶ **To become an Age-Friendly designated network, we:**
  - ▶ **Implemented the 4M's framework throughout our hospitals, community-based centers, and our nursing home.**
  - ▶ **Several teams were created to operationalize the 4M's throughout the entire network.**
  - ▶ **Our goal was to use the 4M's model in the care of as many patients as possible in different settings.**
  - ▶ **Our projects covered both inpatient services and ambulatory care, specifically:**
    - ▶ **MediSys Ambulatory Care**
    - ▶ **JHMC Family Medicine & Emergency Medicine**
    - ▶ **JHMC inpatient medical units**
    - ▶ **FHMC med surgery units**
    - ▶ **The Jamaica Hospital Nursing Home**

# Implementation of 4M's in the Emergency Department

## ▶ “What Matters”

- ▶ By direct questioning of “What Matters” to the Patient, family and care givers, we may uncover other reasons for the ED visit and make appropriate referrals to prevent unnecessary ED visits.
  - ▶ Identification of Seniors at Risk (ISAR) was used to assess what matters to the patient.

## ▶ Mentation

- ▶ The Delirium Triage Screen (DTS) & Brief Confusion Assessment Method (b-CAM) are used to screen for delirium and dementia.

## ▶ Medication

- ▶ Medication reconciliation was achieved by through use of the BEERS Criteria.
- ▶ Best Practice Advisory (BPA) alerts were added to the EHR to alert for high-risk medications and the provider will have the option to keep the medication or use another.

## ▶ Mobility

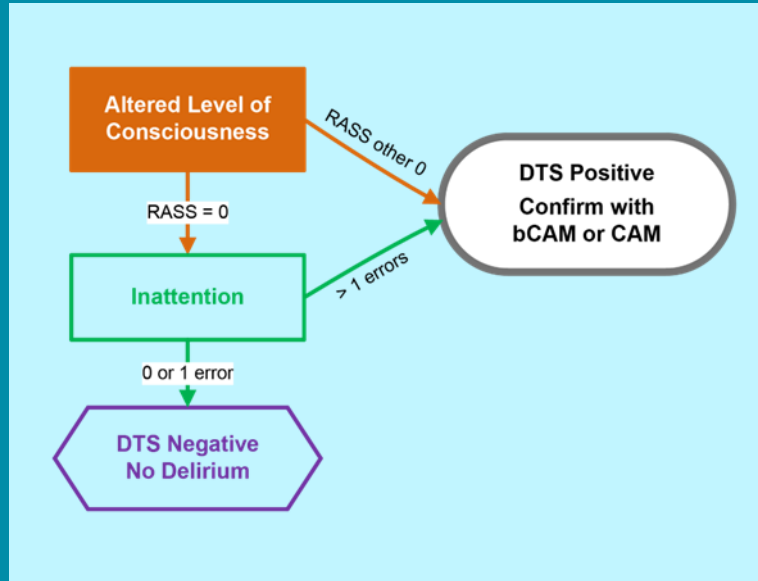
- ▶ Fall risk screening is done using the Hendrick II Falls Risk Assessment, mobility aids including canes and walkers, and social workers and case management are available for consultation to address barriers to safe discharge based on mobility issues.

# The Delirium Triage Screen (DTS) & Brief Confusion Assessment Method (b-CAM)

## Delirium Triage Screen

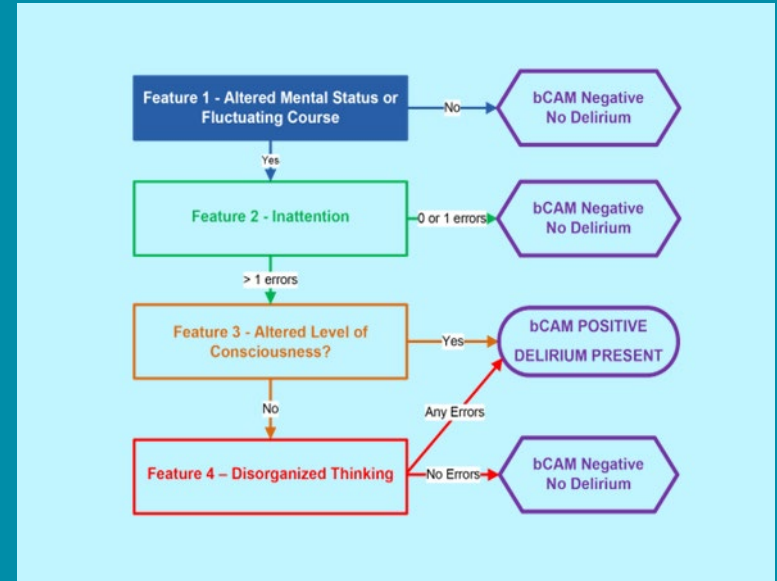
To be done at time of triage

Positive result will be confirmed by b-CAM



## Brief Confusion Assessment Method

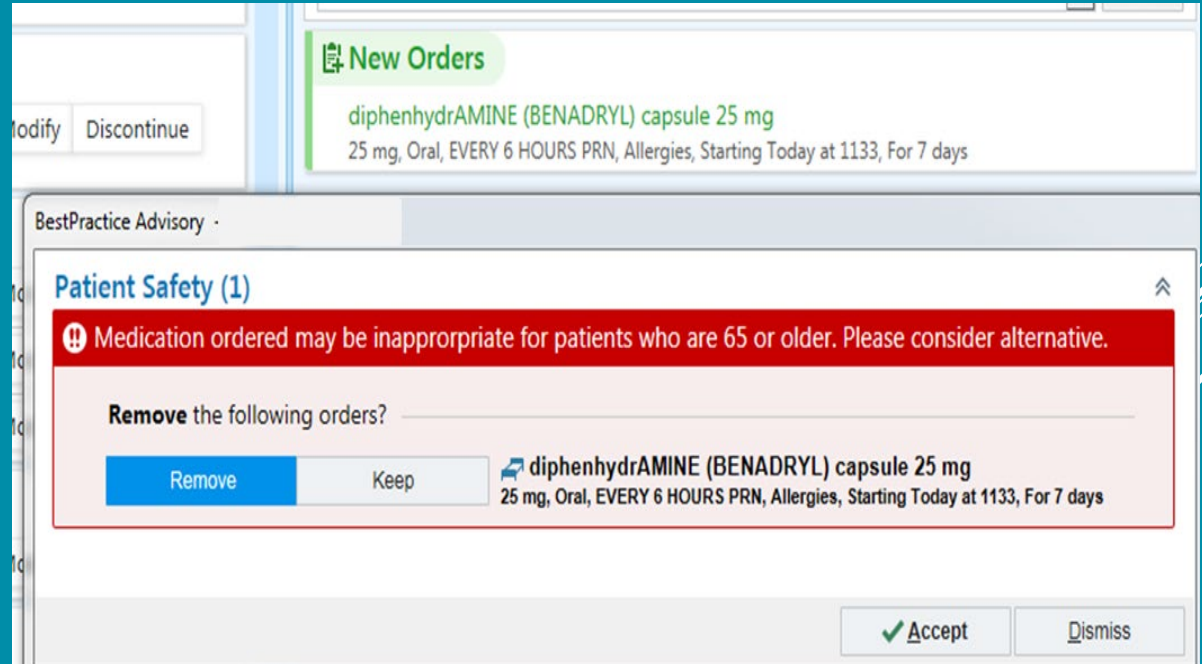
Done to confirm positive DTS



# BEERS Criteria BPA

The following medications will fire a BPA:

- 1<sup>st</sup> Generation Antihistamines
- Antispasmodics
- Peripheral Alpha-1 Blockers
- Antidepressants
- Benzodiazepines
- Skeletal Muscle Relaxants
- Metoclopramide





# Implementation of 4M's- Jamaica & Flushing Hospital Ambulatory Care & Family Medicine

## ▶ “What Matters”

- ▶ Fillable forms were created in the EHR (EPIC) and used throughout our network to ask our patients:
  - ▶ “What else would you like us to know?”
  - ▶ “What concerns you most when you think about your health and healthcare in the future?”

## ▶ Mentation

- ▶ Dementia is assessed using the Mini Cog Test
- ▶ Depression is assessed using the PHQ2/PHQ9

## ▶ Mobility

- ▶ Mobility is assessed using the Timed Up and Go (TUG) Test

## ▶ Medication

- ▶ Like the Emergency Department, the BEERS Criteria is used in the Ambulatory Care setting as well. When a listed medication is entered, a BPA will fire in the EHR and the provider will have the option to keep the medication or use another.

# Mini-Cog & TUG

**Tug, Test.**  
Male, 70 y.o., 07/25/1949  
MRN: 1903688

Primary Resident: None  
PCP: None  
My Sticky Note:

Medisys MRN ...  
Code: Not on file  
CSN: 49963

Pref Language: None

Allergies  
Unknown: No...

**BestPractice Advisory (4)**  
FYI: None  
Pharmacy: None

Primary Insurance: None  
MediSys MyChart: Pending

Luigi G Tullo, MD  
Office Visit on 7/25/2019  
Registries: [Wellness] W...

**Assessments**

Advance Directives  
Physician Review...  
Discussion with P...  
Media Manager  
Scanned Docume...

ASSESSMENTS  
Asthma Assessm...  
Asthma  
Hearing/Vision

CENTOR SCORE  
SCREENING  
CENTOR SCORE  
EBOLA TRAVEL  
ASSESSMENT  
Ebola Risk Level...

DOMESTIC VIOLENCE  
Abuse/Domestic...  
PHQ2-9 Synopsis  
PHQ-2/PHQ-9

AGE FRIENDLY  
Age Friendly

SBIRT  
AUDIT  
DAST

SMOKING CESSATION  
Smoking Cessation

FUNCTIONAL AND  
COGNITIVE SCREENING  
Functional Screen...

FALL RISK  
Falls Risk

STOP-BANG  
QUESTIONNAIRE  
STOP-Bang Ques...

**4 M's**

**What Matters**

What else would you like us to know about you?

What concerns you most when you think about your health and health care in the future?

**MINI-COG DIRECTIONS:**

- 1) Look directly at the patient and say, "Please listen carefully. I am going to say three words that I want you to repeat back to me now and try to remember.
- 2) Select any three words from the list below and say them to the patient. Ask the patient to repeat the three words to ensure that they understood your directions.

<u>VERSION 1</u>	<u>VERSION 2</u>	<u>VERSION 3</u>
Banana	Daughter	Village
Sunrise	Heaven	Kitchen
Chair	Mountain	Baby

**\*\* Allow the patient three (3) tries to repeat the words. If the patient is unable to repeat the words after three(3) attempts, move onto the next step.\*\***

- 3) Provide the patient with a blank piece of paper and ask them to draw the face of a clock. Advise them to put in all the numbers of the clock where they belong.
- 4) When that is completed, ask the patient to, "Set the hands of the clock to read 10 minutes after 11:00 (or 20 minutes after 8:00)."
- 5) Ask the patient to recall the three words you stated in Step 2.

**Mini-Cog Test Outcome**

The patient was able to perform

3 recalled words    1-2 recalled words + normal clock drawing test    1-2 recalled words + abnormal clock drawing test

No recalled words

**(TUG) TIMED UP & GO DIRECTIONS:**

- 1) Mark or identify a line 3 meters (10 feet) away from a standard armchair. (You may use easy-to-see, colored tape.)
- 2) Instruct the patient to wait for you to say "Go" and then instruct them to do the following:
  - a) Stand up from the chair.
  - b) Walk to the line on the floor at their normal pace.
  - c) Turn.
  - d) Walk back to the chair at their normal pace.
  - e) Sit down again.

**\*\* Once the patient is instructed to "Go", begin timing. Timing should not stop until the patient sits back down.\*\***

# 4M's Documentation in EPIC

The screenshot displays the EPIC 'My Note' interface. At the top, there are tabs for 'This Visit', 'Notes (2)', and 'Visit Checklist'. Below this, there are buttons for 'Create Note' (with a dropdown showing '1 Asthma' and '2 Blank') and a 'Show delete' checkbox. The note title is 'My Note' and it is categorized under 'HPI', 'ROS', and 'Physical Exam'. There are also buttons for 'Sensitive', 'Tag', 'Share w/ Patient', and 'Details'. A 'Cosign Required' checkbox is present. A rich text editor toolbar includes icons for bold, italic, link, unlink, insert smart text, and other editing functions.

**Plan:**  
**Age Friendly Assessment:**  
Patient scored 5 on PHQ2.  
Patient scored 10 on PHQ9.  
Based on my patient's PHQ9 score, I collaborated with her to develop management strategies and together we agreed that {AMB PHQ-9 POSITIVE MGMT LIST:210421618} would be best for her follow-up care.

**What matters:**  
What else would you like us to know about you?: I am scared of needles  
What concerns you most when you think about your health and health care in the future?: I don't want to ever be admitted  
Discussed the concerns related to "what matters" and based on her responses, {AMB WHAT MATTERS FOLLOW\_UP:21001}

**Mini-Cog:**  
The patient was able to perform: 1-2 recalled words + normal clock drawing test  
Reviewed the results of the Mini-Cog and {AMB Mini-Cog Follow-up:21002}

**Timed Up & Go (TUG):**  
The patient was able to complete the task in: 12 seconds or greater  
The patient was observed to have the following: Loss of balance, Not using assistive device properly  
Reviewed the results of the TUG and {AMB TUG FOLLOW-UP:21004}

Annotations (yellow boxes) and their connections (red arrows):

- A box containing 'Antidepressant Therapy', 'Referral to Depression Care Manager', and 'Referral to Mental Health' with '\*\*\*' below it is connected by a red arrow to the text '{AMB PHQ-9 POSITIVE MGMT LIST:210421618}'.
- A box containing 'the plan of care has been modified. no changes to the plan of care needed at this time.' is connected by a red arrow to the text '{AMB WHAT MATTERS FOLLOW\_UP:21001}'.
- A box containing 'no follow-up needed at this time. further evaluation needed. initiated referral to Social work. \*\*\*' is connected by a red arrow to the text '{AMB Mini-Cog Follow-up:21002}'.
- A box containing 'no follow-up needed at this time. initiated referral to Physical Therapy. \*\*\*' is connected by a red arrow to the text '{AMB TUG FOLLOW-UP:21004}'.

# Implementation of 4M's in The Jamaica Hospital Nursing Home

## ▶ “What Matters”

- ▶ The Jamaica Hospital Nursing Home uses Person-Centered Care Planning in the long-term care population using the 4M's model.

- ▶ To assess “What Matters” residents are asked three questions:

- ▶ “What matters most about your stay with us?”
- ▶ “Are there any events coming up that you are looking forward to?”
- ▶ “Have you discussed your wishes regarding your medical care and end of life care with your family?”

## ▶ Mentation

- ▶ Residents are assessed for cognition, depression, and dementia utilizing:

- ▶ Brief Interview for Mental Status (BIMS) assessment for short and long-term memory deficits
- ▶ PHQ9 is used to assess for depression
- ▶ MMSE or Mini Mental State Exam is used to assess dementia

# Implementation of 4M's in The Jamaica Hospital Nursing Home

## ▶ Mobility

- ▶ All residents are assessed quarterly and are placed on a Restorative Nursing Program to improve, maintain, or prevent declines in condition.
- ▶ A Nursing Maintenance Program focuses on range of motion, ambulation, positioning, bed mobility or a Skilled Rehab Program.

## ▶ Medication

- ▶ Every 30 days a Drug Regimen Review is performed for all residents by a consultant pharmacist. They will review and check for acceptable clinical indications for use and proper diagnosis.

# Implementation of 4M's in Participating Inpatient Units

- ▶ Participating Units:
  - ▶ Jamaica Hospital Medical Center: 3 South, 4 South, 6 South
  - ▶ Flushing Hospital Medical Center: 1 North, 2 North, 3 North, 4 North, 2 West, 3 West
- ▶ “What Matters”
  - ▶ Powered by the Nursing Department, “What Matters” is part of the hospital admission transfer. Nurses will ask “What Matters to you during your hospital stay?” Individual cultural and spiritual needs are already documented in EPIC under “psychosocial/values/beliefs.”
- ▶ Mentation
  - ▶ Patients are screened for delirium every 12 hours using the Confusion Assessment Model (CAM) short form. If delirium occurs, a plan is put in place.
- ▶ Mobility
  - ▶ All patients are assessed for mobility upon admission. It is observed and documented whether the patient was walking prior to admission. If “yes”, the patient is assessed using the TUG Tool and is placed in a daily walking group. If “no”, the patient is assessed using the KATZ Index of Daily Living and is placed in a Progressive Mobility Group.
- ▶ Medication
  - ▶ All patients aged 65 and over will have their medication reviewed daily by a Resident Physician for high-risk medications. High Risk Medications are defined by the BEERS Criteria.

# Progressive Mobility & Walking Program

## Progress Mobility

Out of Bed for all Meals, Bathing  
& Toileting



## Walking Program

Daily Walks



# Data Analysis

## ▶ Inappropriate Medication Use

- ▶ Since becoming an Age-Friendly Designated Healthcare System, we have noted the following after implementing the BEERS Criteria BPA into our EHR:
  - ▶ In 2019- We saw a 21.45% Reduction in inappropriate medication removal rates
  - ▶ In 2020- We saw a 15.6% Reduction in inappropriate medication removal rates
  - ▶ In 2021- We saw 14.00% Reduction inappropriate medication removal rates
  - ▶ 2022 (Quarter 1)- A 14.10% Reduction inappropriate medication removal rates
- ▶ Further analysis suggests the decline in the removal of inappropriate medication coincides with rises in COVID-19 cases.

## ▶ Ambulatory Care 4M's Assessment

- ▶ As we continue to implement the 4M's assessment throughout our Ambulatory Care Network, our data collection methods continue to change.
  - ▶ Monthly data shows that we consistently administer the 4M's evaluation to 15%-20% of our patients, aged 65 and over.
  - ▶ We have also noted that not all patients are receiving the full evaluation in one visit due to time constraints. As a result, we are modifying our data collection process as the year progresses and anticipate to have a clearer picture of our capture rate at the end of the year.



# Current Practices

- ▶ We continue to perform Age-Friendly evaluations throughout our Ambulatory Care Network on all patients aged 65 and over.
- ▶ Upon chart and reporting review, we noticed that patients who are seen in our clinics frequently have their evaluation split into two or more visits due to complex medical issues and time constraints.
- ▶ Though we have Comprehensive Wellness appointments for all of our patients, we have developed a special 65+ Comprehensive Wellness Appointment which allows the provider more time with the patient. During this visit, the provider:
  - ▶ Administers the Age-Friendly Evaluation
  - ▶ Discusses Advanced Directives with the patient
  - ▶ Reviews the problem list and medication with the patient
  - ▶ Addresses special health education issues with the patient
- ▶ Since the implementation of the Special Comprehensive Wellness appointments for older adults, we have already begun seeing improved engagement with both the patient and provider. We feel that with this new workflow, we will be able to optimally address our patient's needs.

# Next Steps

## ▶ RUSH Institute- 4M's-CGI

- ▶ We are currently working with the RUSH Institute on a 4M's-Care Giver Initiative to help assess the needs of family members who are the primary care givers of their loved one.
- ▶ This program has been implemented in The Jamaica Hospital Nursing Home.
  - ▶ Upon Resident admission, a slightly modified 4M's questionnaire is given to the resident care giver.
- ▶ By participating in this initiative, our goal is to provide support to the care givers of the residents in our Nursing Home. In doing this, we hope to alleviate stress that the families of our residents' face. We feel that by providing support and preparing them for what to expect upon discharge, they will be better equipped to provide care to their loved one at home.

## ▶ Integrative Medicine Approach to Healthcare in Older Adults

- ▶ We are currently working with the Samuels Foundation on a grant funded, Integrative Medicine program for the residents of The Jamaica Hospital Nursing Home.
- ▶ By participating in this program, residents:
  - ▶ Will have the opportunity to enroll in several group integrative medicine group visits over a two-week time period.
  - ▶ The menu of services include Acupuncture, Massage Therapy, Reiki Healing, Mindfulness & Meditation, Music Therapy, Art Therapy, Medication Management, Stroke Prevention, Yoga, Tai Chi, Fall Prevention, Food & Nutrition training, and cooking demonstrations.

*Questions?*

Thank You!