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### How HELP Provided the Pathway to become Age-Friendly

Chesley Ferris

*Maine Medical Center*

Anna Pleet

Emily Carter

*Maine Medical Center*

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# How HELP Provided the Pathway to become Age-Friendly

Chesley Ferris MPH<sup>1</sup>, Anna Pleet MD<sup>2</sup>, Emily Carter MD<sup>1</sup>

<sup>1</sup>Maine Medical Center, <sup>2</sup>Marcus Institute for Aging Research, Hebrew SeniorLife



## INTRODUCTION

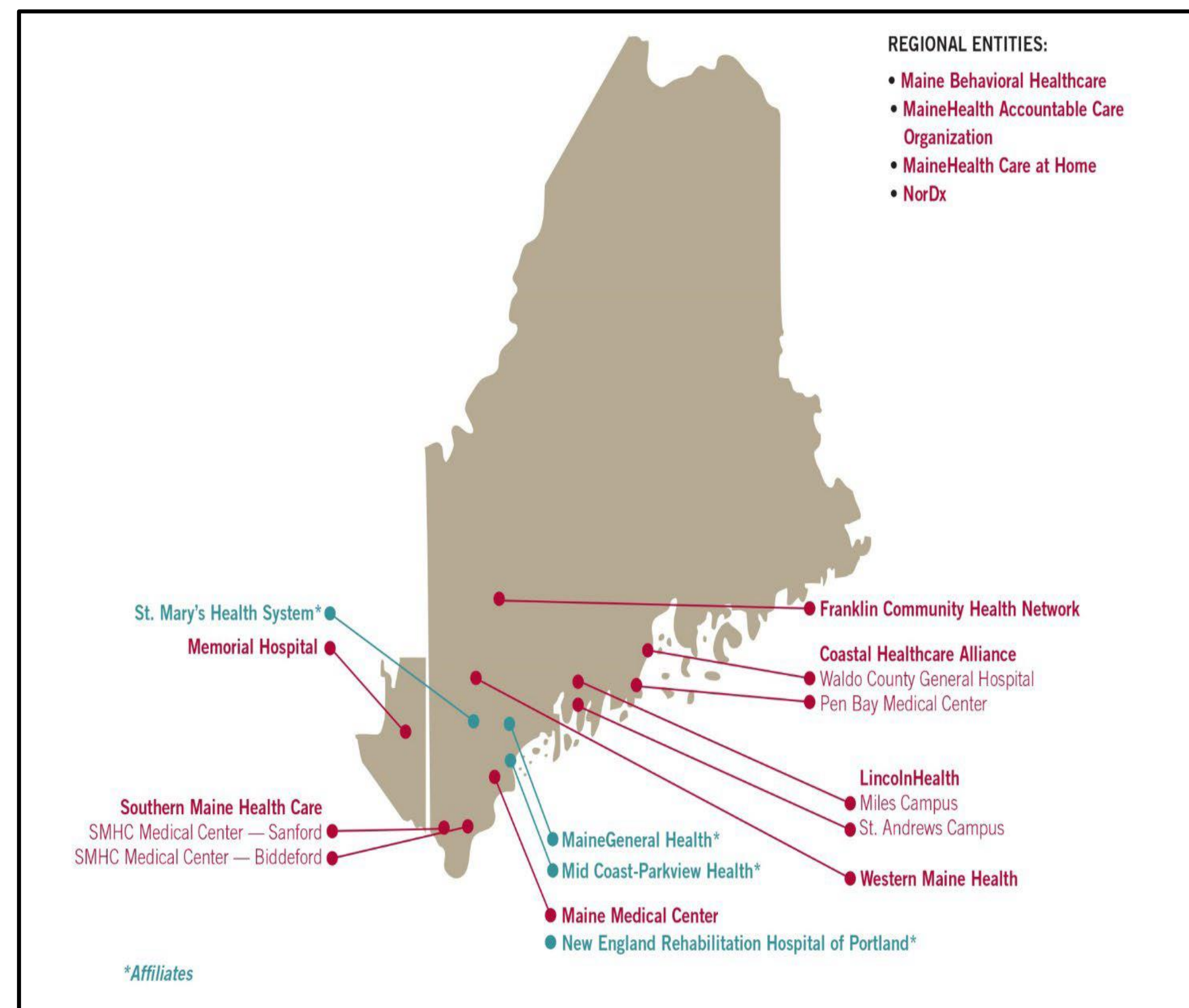
### AGS CoCare®: HELP

- Multicomponent framework that inherently achieves AFHS 4Ms
- Reassessment of HELP was done to incorporate more visibility of “What Matters”

### Maine Medical Center:

- HELP running since 2002: Medical Director, 2 part-time ELNS, 1 full-time ELS + ~40 volunteers covering 3 shifts/day, 7 days/week
- Center of Excellence since 2010
- IHI AFHS Committed to Care Excellence
- When fully-operational (2019)\*: Enrolled 2434 patients (avg. 203 patients/mo.)
- Data – numbers smaller without volunteers, no consistent ELS in past years, getting one soon.

\*Data reflective Pre-COVID



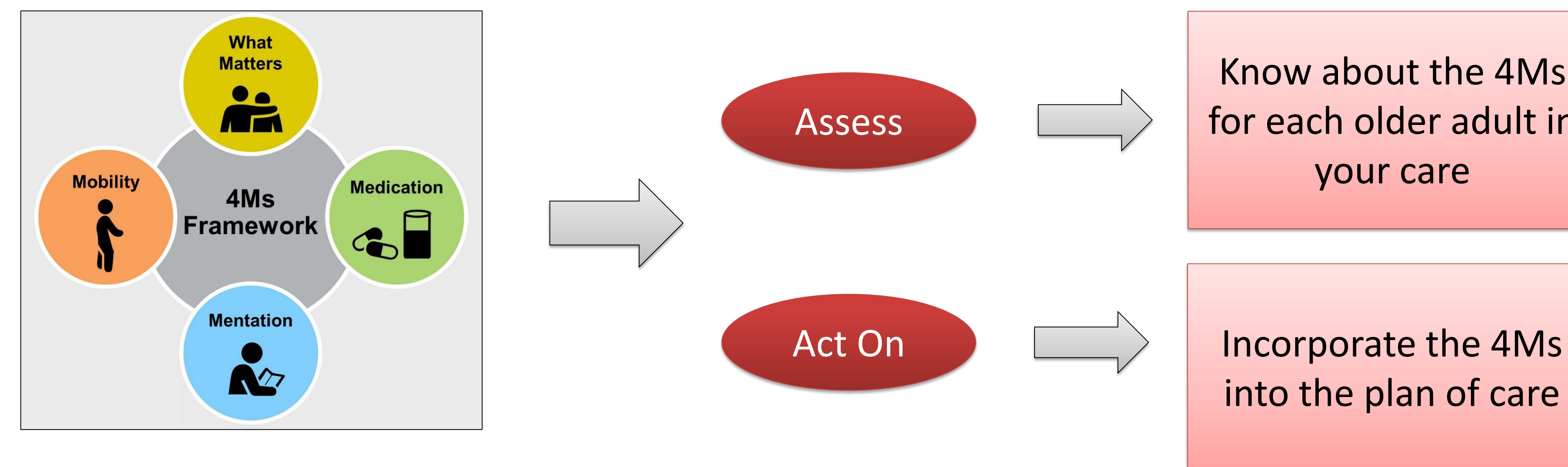
## OBJECTIVES

- Receive Age-Friendly Health Systems designation for AGS CoCare®: HELP
- Update electronic medical record to meet 4M's model
- Incorporate What Matters into HELP assessments and documentation

## METHODS

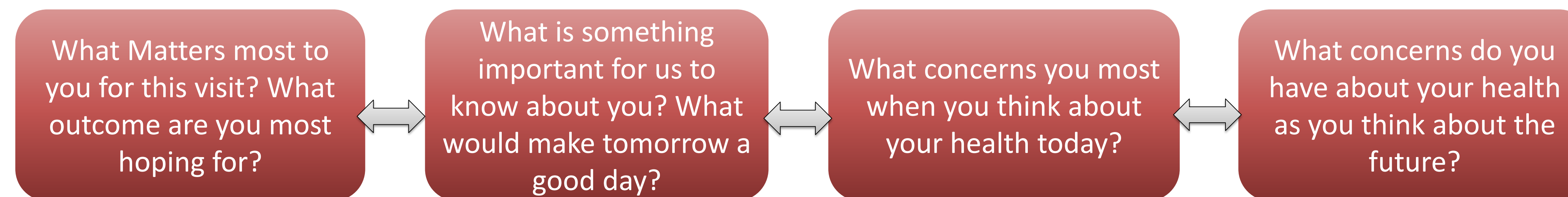
### 2-step approach to Age-Friendly Care: Assess and Act on

- Both steps are supported by documentation and communication across settings and disciplines

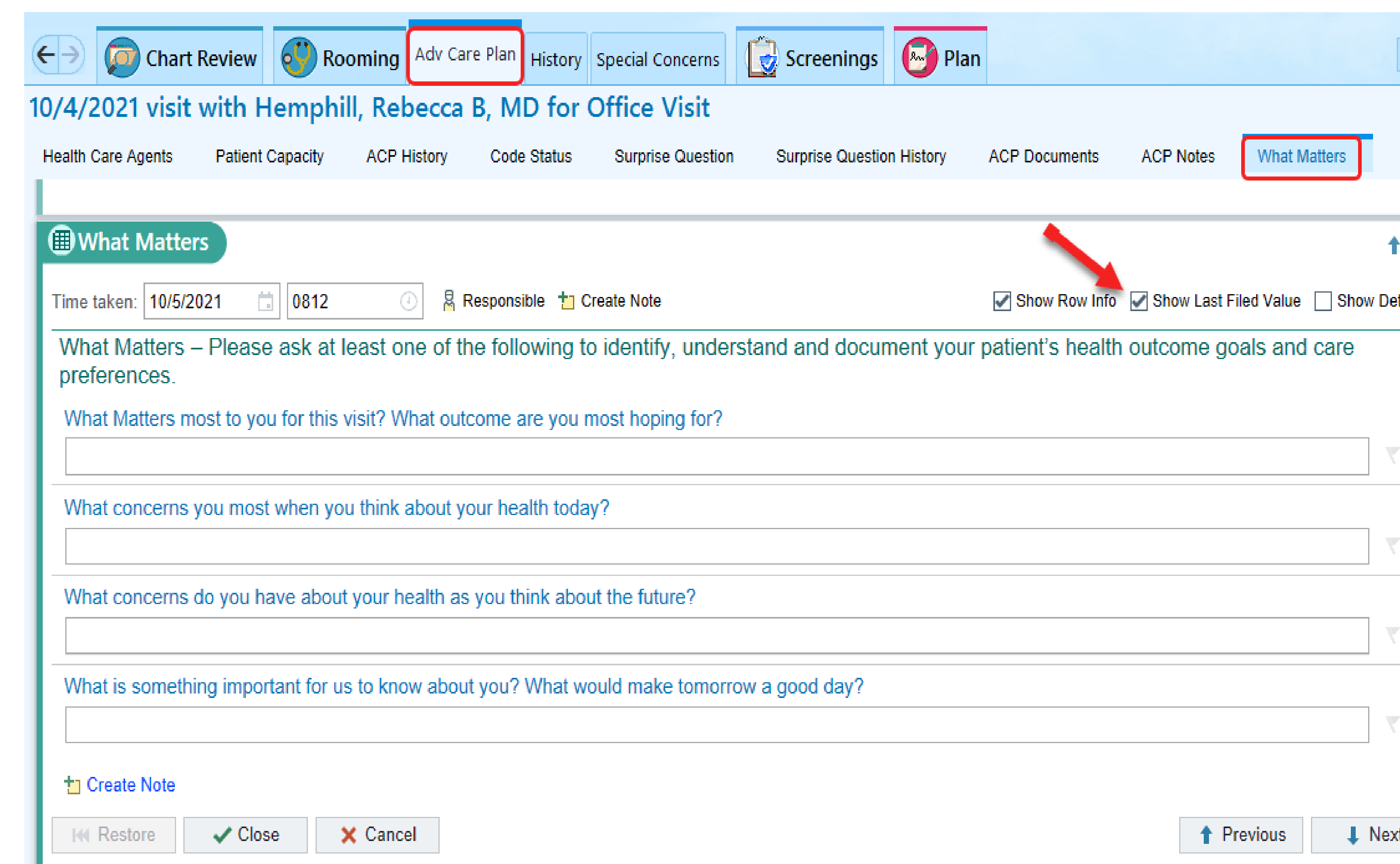


### Built Flowsheet for What Matters: ELS & ELNS note for patients

- 4 specific questions – ask 1-3 of 4 (minimum of 1).
- Built a prompt into electronic medical record (EMR) to support providers asking What Matters (EPIC “Smart Phrases”)
- During time of enrollment, Elder Life Specialist and Elder Life Nurse Specialist ask questions → Captured at least once at the beginning of hospitalization



### Updated EHR to include “What Matters” prompts:



## RESULTS

### Changes made in EMR to reflect 4M's Care:

- Added BMAT and mobility check onto EPIC homepage to aid in daily review of patients' mobility
  - BMAT – Bedside Mobility Assessment Tool
  - Mobility Check - Shows record of nurses ambulating patients every 12 hours
- Included medications to EPIC homepage to aid in daily review
  - Columns added reflecting BEERs, Anticholinergic, and sedating medications
- Incorporated “What Matters” into patients' flowsheets and notes

**86 y.o F:** Patient had experienced delirium during past hospitalization.

**What Mattered:** Being enrolled in AGS CoCare®: HELP – Was hopeful she would not become delirious and enjoyed engaging with volunteers and in activities.

**72 y.o. F:** Patient admitted with shortness of breath.

**What Mattered:** Being able to go on walks with her boyfriend. Had a goal of walking 1 mile to the beach and back.

**76 y.o. F:** Patient located in overflow unit with poor cell phone reception and bedside phone was unavailable.

**What Mattered:** Being able to speak to her spiritual priest over the phone daily during her hospitalization.

## DISCUSSION

In assessing how the 4Ms framework applies to the Hospital Elder Life Program, we were able to target specific ways to deliver more Age-Friendly care to those enrolled in the program.

## RESOURCES

1. Maine Medical Center Geriatric Care  
<https://www.mainehealth.org/Maine-Medical-Center/Services/Geriatric-Care/Inpatient-Services>
2. AGS CoCare®: HELP <https://help.agscocare.org/>
3. Institute for Healthcare Improvement: Age-Friendly Health Systems  
<https://www.ihl.org/Engage/Initiatives/Age-Friendly-Health-Systems/Pages/default.aspx>