Class of 2026 | **AHA Next Generation Leaders Fellow**



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Situation Analysis

Adults 65 or older account for nearly 34% of patients receiving care in the Stanford Health Care emergency department. Older adults have complex medical, cognitive and social needs, but ED workflows do not consistently incorporate the 4Ms Framework — What Matters, Medication, Mentation and Mobility — or address social determinants of health. This gap limits caregiver engagement and equitable delivery of age-friendly emergency care.

Project Goals

The John A. Hartford Foundation

- Implement an intergenerational age-friendly volunteer advocate program to assess 1,000 older adult patients and address 90% of their identified concerns, improving the patient experience, caregiver engagement and age-friendly care delivery.
- Achieve level 1 Geriatric Emergency Department Accreditation.
- Achieve level 1 Age-Friendly Health Systems "Participant" recognition.

Actions Taken

- Developed an intergenerational age-friendly volunteer program made up of high school students, current health system volunteers, guest navigators, and representatives from the patient and family advisory council.
- Educated volunteers about the 4Ms Framework and age-friendly care principles, communication and active listening, caregiver engagement, and patient advocacy and the escalation process.
- Coordinated volunteer activities including how to conduct "what matters" conversations, identify patient concerns and unmet needs, facilitate social connection and companionship, and connect patients with available resources.

Positive Outcomes

- Transforming the health system's ED into a more equitable, compassionate and age-friendly care environment.
- Developing the next generation of advocates and healthcare leaders and creating lasting benefits for patients, volunteers, caregivers and the communities served.
- Compared to patients under age 60, older adults reported higher overall ED experience ratings (69.7% vs. 51.9%) and were more likely to indicate they did not feel "forgotten" (81.6% vs. 66.7%).
- Increased diet order utilization from 16.17% in fiscal year 2024 to 19.16% in fiscal year 2026, suggesting a reduction in unnecessary NPO (nothing my mouth) practices among older adults following provider education and volunteer advocacy interventions.

For detailed information, visit:
www.aha.org/center/next-generation-leaders-fellowship

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