



# Towards an Age Friendly Hospital

St Luke's General Hospital Carlow-Kilkenny | A case study in practice

Early Guidelines and Recommendations



# Acknowledgements

This resource would not have been possible without considerable input from many of those involved in the St. Luke's Age Friendly hospitals programme and the hospital walkability audits carried out by Beaumont Hospital, Dublin; Our Lady's Hospital, Navan and Letterkenny General Hospital, Donegal.

Age Friendly Ireland would like to thank those representatives who provided insight and expertise that greatly assisted in the development of this resource document, although they may not agree with all of the interpretations and conclusions of this paper. Any errors are those of the author and should not tarnish the reputations of these esteemed persons.



Grúpa Ospidéal  
Oirthear na hÉireann



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## Forewords

**By** working to create the conditions within our hospital which will enable older patients and visitors to enjoy an improved hospital experience the St Luke's Age Friendly Hospital programme is helping to make our hospital a better hospital for people of all ages.

We believe that an Age Friendly Hospital is one in which older people are actively involved in the design of an environment that is friendly and accessible to all. As an Age Friendly Hospital, we are committed to responding to what our community of older people needs. These needs were surfaced when older people were supported to get together with hospital officials as part of the Age Friendly Hospital programme.

In developing our approach, we have recognised that a range of physical, organisational and cultural factors are interconnected. We are finding that age friendliness is good for everybody, because what is essential for older people is generally of benefit to other people as well.

Very often it is the simple things that can make a difference. The introduction of age friendly car parking spaces and user-friendly signage together with the placement of age-friendly seating at relevant points throughout the hospital have been welcomed by all of our patients.

The Age Friendly Hospital initiative prioritised changes relating to access, accessibility and the physical environment. We were at ease in pursuing these issues in the knowledge that the parallel Geriatric Emergency Medicine Service (GEMS) programme was underway and contributing to an enhanced care environment for our older patients. Together these system, service and practice improvement initiatives are helping to build a culture of care and awareness amongst our entire staff across the hospital.

What are we most proud of? The enhanced level of awareness that now has been built up across the hospital. So many of our staff are now much more age aware...age attuned. We don't take things for granted. We ask older people 'what they want' and 'how things work for them.' Having seen how practical so many of the 'asks' are we are more open to change as result of the Age Friendly Hospital programme.

The process did take some effort. Some of the steps were relatively straight forward. Others were that bit more ambitious. Some of the required changes were introduced relatively quickly and with little difficulty while others have been framed as actions for the medium to long term.

Together with Age Friendly Ireland we have

set out our experience of the process so far as part of this document. We see this document as a source of practical guidance for other hospitals who may be interested in formalising a similar age friendly programme approach. The document sets out to guide readers through the key stages that were involved in setting up such a programme at St Luke's.

What we have done so far as part of the St Luke's Age Friendly Hospital programme, and presented as part of this high-level guide, is neither exhaustive nor prescriptive. We recognise that we have still a way to go to delivering a truly Age Friendly Hospital. This is just the start of our age friendly journey.



**Anne Slattery**

General Manager  
St. Luke's General Hospital,  
Carlow-Kilkenny

**Under** the leadership of Jackie Maguire, Chief Executive, Meath County Council, the national Age Friendly Ireland programme, a shared service function of local Government within Meath County Council, coordinates and supports the nation-wide network of 31 Local Authority led, multi-agency Age Friendly Programmes. It continues to support and provide technical guidance to all Programmes. Local governance is anchored in the multi-agency Age-Friendly Alliances, supported by broadly representative Older Peoples' Councils who are actively engaged as co-design partners.

Older people want to remain healthy and independent. In-patient and out-patient hospital services play a key role in supporting older people to stay healthy, living independently within the community and in enjoying a good quality of life.

As people age, they can spend more time attending both in-patient and out-patient hospital services. This means that older people's health and thus their quality of life can depend on how age aware or age attuned our hospital environments are in supporting older people and their carers. The hospital environment can

however be a challenging and at times daunting experience for older people and their families. The way a hospital looks and feels has a big impact on older people's confidence and overall experience of a hospital visit. The design of the environment can make the difference between a pleasant and accessible experience or one that may be stressful, tiring or confusing.

An age friendly hospital can support older people to have easier and, where possible, walkable access in an environment where they feel more confident and comfortable. Family carers experience more support and less stress in such age friendly environments. The opportunity for older people to affect a successful return to the community can be enhanced when relevant hospital and community services are more age aware and closely integrated.

Together, the national Age Friendly Ireland programme and St Luke's General Hospital, Carlow/Kilkenny are committed to capturing key learnings generated through the St Luke's Age Friendly Hospital Programme. We see this document as a call to action to hospitals across the country to collaborate with older people and to work creatively to make our hospital network more age friendly and attuned to the needs of our older adult population.



**Jackie Maguire**

Chief Executive  
Meath County Council

# Introduction

A number of hospitals across the country have taken steps to consider the hospital environment from the older persons perspective. The experience of St Luke's General Hospital Carlow-Kilkenny has provided considerable learnings as it has supported a number of walkability audits and the introduction of a series of practical changes which have made a big difference to the lives of older people attending the hospital. Much of the early focus of the St Luke's Age Friendly Hospital programme has been on the physical and built environment together with a range of access and accessibility related issues. In parallel, the development of the Geriatric Emergency Medicine Service (GEMS) has provided for an interdisciplinary approach to supporting older patients who may present with frailty. Such an approach has been designed to ensure early intervention and avoid functional decline on the part of any such frail older patients while in the hospital. GEMS data collection has demonstrated reduced length of stay, an enhanced level of discharges home together with a range of other improved outcomes for the participating older patients.

By considering both the physical and service environments from the older persons perspective St Luke's is committed to providing enhanced patient centred care for the older members of the community it serves.

The focus of this document is on the Age Friendly Hospitals programme adopted by St. Luke's. Parallel, but clearly critical age friendly initiatives such as the GEMS programme, the **End P J Paralysis Campaign** and the **Patient Passport** are referenced only in summary form as part of this resource. Together, however these initiatives demonstrate the strong age friendly emphasis which St. Luke's has adopted.

In this document, together with examples of some practical actions which hospitals can take you will find guidance as to how one general hospital went about creating a more age friendly environment. Age friendliness, of course, is an evolving process, and won't be achieved all at once. This document in itself does not present an 'A to Z' or definitive listing on how to bring about an age friendly hospital.



# What is this document about?

The St. Luke's Age Friendly Hospital programme, together with a range of complementary and significant older person focused service improvement programmes, is demonstrating that hospitals can become more inclusive and supportive of older people by addressing their expressed concerns across a range of interrelated domain areas. The following themes, among others, were considered as part of the many early stage age friendly and older person focussed initiatives adopted by St. Luke's across recent years.



These and other related themes have led to the identification of practical changes which hospitals can consider to make their environments more age friendly and age aware.

This document highlights:

- ▶ Some actions or steps which hospitals can consider in developing a more age friendly environment.
- ▶ Guidance on the optimum conditions or enabling factors for implementing a successful age friendly hospital programme – with these conditions in place your chances of making your hospital a more age friendly environment are enhanced.

Many of the ideas and actions underpinning the St Luke's Age Friendly Hospital programme approach are clearly underpinned by one principle – the voice of older people as the driving force of age friendly change. Indeed, Deirdre Dunne, a representative of St Luke's Age Friendly Hospital programme, noted;

“ We sought to actively involve older people in shaping the agenda for change within the hospital. This is a key factor which continues to underpin the programmes success. This is a pre-condition for age-friendly success rather than an outcome of it. ”



# Why Now?

Our demographic profile in Ireland is of course changing. Census 2016 counted more than 637,000 people aged 65 years or older, an increase of more than 19% over the previous five years, and now representing 13.4% of the population. By 2026 – only a few short years from now - there will be 1.15 million people in Ireland aged 60 or over, representing almost one out of every four people. The greatest increase will be in the population aged over 85, which is expected to reach 104,000, meaning that this age group will have more than doubled since 2006.

A population with up to 1 in 4 people over the age of 65 years in the very near future will have significant social and economic implications at an individual, family and societal level. The implications for health and housing policy are, in particular, considerable. In Carlow/Kilkenny, which has a total population of approximately 155,000 people, the number of people aged 65 years and older increased by over 4,000 or 20% between 2011 and 2016 and this is forecasted to rise, as are the challenges associated with providing patient centred care to this growing age cohort.

Providing efficient and equitable access for all, managing hospital capacity and supporting

We were seeing higher levels of frailty amongst the older adult population coming through the hospital doors. It was clear that this cohort of our patient base had some specific issues which needed to be addressed.

Dr. Emer Ahern  
Consultant Geriatrician

frail, older people to affect a successful return to independent living were and are challenges very apparent to hospital personnel at St. Luke's.

Older people living with frailty are high users of unscheduled acute care and other health and social care resources. Older people with frailty, who were presenting to the hospital's Acute Floor ahead of being discharged, are at a high risk of re-attendance and admission. Older adults, who are admitted as inpatients, are at a higher risk of adverse outcomes. They are more likely to spend longer in the Emergency Department, to have multiple ward moves and to be harmed by hospital acquired morbidity including de-conditioning, delirium, falls, infections and

2015, with the opening of the new building, saw the hospital almost double in size. We were very proud of the building. Although it was beautiful it was somewhat bland... The Hospitals Patient Partnership Forum had identified a number of issues relating to accessibility and signage for patients, particularly older people, and visitors attending the hospital. The long corridors which involved significant walking distances...up to a mile at time... required us to consider this new environment from the older persons perspective.

Deirdre Dunne  
**General Manager's Office**

pressure ulcers. Such older people will often have protracted lengths of stay, with delays in transfer of care, re-admissions and premature institutionalisation.

The hospital itself has expanded significantly across recent years. 2015/2016 saw the introduction of a significant extension to the Acute Floor incorporating an Emergency Department, Acute Medical Assessment Unit, Hepatology Unit, Oncology Day Ward, Day Services Unit together with a state-of-the-art Library and Education Centre.

Through the adoption of a formal Age Friendly Hospital programme St. Luke's sought to respond to the challenges that lie ahead in a positive way and improve the older person's experience of the hospital now and into the future.

When the proposal was put to us, we saw that it could be a key service improvement programme for the hospital. It would give us the chance to make the physical and care environment better for our older patients. The Age Friendly Hospitals programme gave older people a chance to see changes introduced around the hospital in a relatively short period of time.

Deirdre Dunne  
**General Manager's Office**

# Background Information on St. Lukes

St. Luke's General Hospital Carlow-Kilkenny is situated about one and a half miles from the centre of Kilkenny City. It is a model 3 statutory hospital and is part of the Ireland East Hospital Group. The hospital provides a wide range of health services for over 155,000 people in Carlow-Kilkenny and surrounding counties.

The hospital has **305 beds including 41-day care beds**, and provides Accident and Emergency, Anaesthetic, Medical, Surgery, Paediatric, Obstetrics, Gynaecology, Hepatology, Gerontology, Neurology, Oncology, Acute Psychiatry, Cardiology, Endocrinology, Gastroenterology, Respiratory, Palliative Care and Radiology Services.

Opened in 1941 the hospital was originally designed to serve the county of Kilkenny as a general hospital and to accommodate 130 patients and a staff of 44. The hospital was then under the management of Kilkenny County Council.

Today, the hospital **employs over 1,200 people** and has expanded significantly over the years. In 2001, a Cardiology and ward block was opened. In 2003 a new 45 bed Department of Psychiatry was opened. In 2006, a 5 bedded Acute Ward,

Staff at St. Luke's would have been familiar with the age friendly concept. There had been a lot of age friendly work carried out across the city...the installation of the outdoor gym, the work on pavements and streets, the age friendly business programme. It made sense that we at the hospital would follow a similar approach."

With the backing of the Patient Partnership Forum, hospital management decided to proceed with establishing a Steering Group to commence the hospital's Age Friendly Initiative.

Deirdre Dunne  
**General Manager's Office**



a Stroke Therapies area and a Dexa scanner was commissioned. The new Outpatients Department opened in 2009. The most recent development was the opening of the €21 million extension in 2015/2016 incorporating an Emergency Department, Acute Medical Assessment Unit, Hepatology Unit, Oncology Day Ward, Day Services Unit together with a state-of-the-art Library and Education Centre. The hospital also provides diagnostic Radiological and Pathology

services as well as Physiotherapy, Occupational Therapy, Speech and Language Therapy, Nutrition and Dietetics, Cardiac Diagnostic and Rehabilitation Services, Pulmonary Function Laboratory and Respiratory Services.

More recently, a new Discharge Lounge has been opened adjacent to the main hospital entrance, and the Resuscitation Training Department has relocated to a dedicated space on the hospital campus.

# Connection with Age Friendly Ireland

Since 2009, an Age Friendly programme has been developed in each of the 31 local authority areas following application of a consistent methodology and governance structure which supports cities and counties to be more inclusive of older people by addressing their expressed concerns and interests under the eight defined WHO programme headings. This World Health Organization (WHO) informed programme involves a multi-agency, multi-sectoral approach to age-related planning and service provision.

Within the framework of the WHO's Age Friendly Cities and Communities model, city and county-based stakeholders are making commitments to shared action plans addressing pillars spanning housing, our health services, built environment, transport and employment. Under the leadership of the local authority governance is anchored in the multi-agency Age-Friendly Alliances, supported by broadly representative Older Peoples' Councils actively engaged as co-design partners.

Successful Age Friendly City and County Programmes are working to create the kinds of communities in which older people live autonomous, independent and valued lives.

To date, the local government led Age Friendly County and City programmes across Ireland have implemented real change in imaginative and cost-effective ways. Health and wellbeing is fundamental to the vision. A great deal of the programme focuses on actions and developments in other areas; In creating walkable, attractive and accessible communities and age-friendly spaces, and by introducing actions to address participation and inequality it is intended that people of all ages will be supported to enjoy healthier, more active and connected lives.

An Older People's Council is established as part of each Age Friendly City and County Programme. Through the Council older people can raise issues of importance, identify priority areas of need and inform the decision-making processes of the City or County Age Friendly initiative. The Older People's Council also offers a service user perspective in monitoring the implementation of the Age Friendly Strategies. Councils aim to be representative of the diversity of the local older population, linked with local older people's groups and supportive of the most marginalised.

Established in 2018 as a shared service function of the local government sector Age Friendly Ireland coordinates the national Age Friendly Cities and Counties programme. The national Age Friendly Ireland Office is hosted by Meath County Council on behalf of the local government sector.

The hospital had been on the agenda of the Kilkenny Older People's Council for a while. We knew that a hospital visit can be a daunting and stressful experience for older people and their carers.

We approached the General Manager, Anne Slattery, who engaged with us very positively and together with Deirdre Dunne it was clear that they wanted to bring about change for the older people coming through the hospital doors.

Mary O'Hanlon  
Kilkenny Seniors Forum | Older People's Council



# What can an Age Friendly Hospital Approach Achieve?

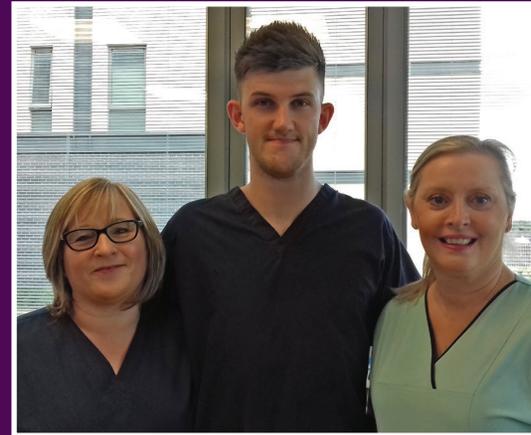
The St. Luke's Age Friendly Hospitals programme has sought to develop a more age friendly environment for the older people and carers who interact with the hospital and its key services.

Recognising that not everything can be achieved at one time promoters of the Age Friendly Hospital programme at St Luke's hope that such an approach will, over time, help to create a hospital in which:

- ▶ Hospital buildings and outdoor spaces are pleasant, clean, accessible and safe for older people, creating a walkable environment and age-friendly spaces.
- ▶ Older people can feel more confident and less stressed in accessing and navigating the hospital environment and dealing with hospital personnel.
- ▶ There are more comfortable spaces for older people to make use of when waiting for care.
- ▶ Available transport services result in cost-effective, more seamless and timely connectivity for everyone attending the hospital.
- ▶ Older people experience excellent service and quality of care.

- ▶ Older people, where appropriate and feasible, are supported to make an effective return to independent living within the local community.
- ▶ There is a real respect for older people and an understanding of the support needs which they may have.
- ▶ Better integration of services and supports across both the hospital and the local community reduces dependency and avoidable duplication and costs.

In exploring the process which was pursued as part of the St. Luke's Age Friendly Hospital programme approach it became clear that all of the actions and changes which programme promoters committed to were linked in some way to these overall objectives. When committing to actions and the introduction of changes the Age Friendly Hospital Steering Group clearly related such actions to these sought-after outcomes.



A number of principles have underpinned the St. Luke's Age Friendly Hospital approach to service improvement. Any changes identified were brought about by:

- ▶ **Involving older people directly** in identifying the change required and any follow-on decision-making which would bring about a solution.
- ▶ **Basing any changes and required actions on the priorities identified** through the various engagement processes facilitated with local older people.
- ▶ **Providing opportunities for older people to respond** to and further inform findings arising from the various consultation processes and to influence the development of actions and solutions which would make a difference.

The principle of co-design is very much at the heart of the approach . . . We wanted to hear directly from older people about their experience of the hospital . . . what they liked, what they didn't, what changes we could usefully make. We keep the Age Friendly Hospital Steering Group and its older person representatives briefed on the progress we are making and any challenges that we experience in introducing agreed changes.

Deirdre Dunne  
General Manager's Office

# Overview of Key Stages Involved in the Development of the St Luke's Age Friendly Hospital Programme

Guided by Age Friendly Ireland, the St. Luke's Age Friendly Hospital initiative has followed the commonly used four stage process which has underpinned age friendly programme approaches across a number of service delivery and physical environments.

## 1 Set-Up

- ▶ Formation of an Age Friendly Hospital Steering Group
- ▶ Involvement of key personnel and decision makers from across relevant hospital departments and services
- ▶ Engagement with the local Age Friendly Alliance
- ▶ Involvement of older people and representatives of older people within the process

## 2 Audit & Consult

- ▶ Conduct of walkability audits
- ▶ Conduct of surveys
- ▶ Conduct of focus groups
- ▶ Collation of key issues and suggestions for action

## 3 Plan

- ▶ Analyse consultation findings
- ▶ Identify domain areas
- ▶ Frame Age Friendly actions

## 4 Act

- ▶ Communicate what has been committed to
- ▶ Begin implementation
- ▶ Review and monitor actions
- ▶ Refresh actions and implementation plan as part of continuous improvement cycle

We were lucky in that we had real leadership at a number of levels. Dr. Emer Ahern (Consultant Geriatrician) had been a well-known champion for older people for many years. The General Manager was very supportive right from the start while Mary O’Hanlon (Kilkenny Older People’s Council) was thought of very highly. Together they put the initiative on a sound footing.

It is very important that a Committee such as this would have direct access to decision makers. Our (Age Friendly Hospital) Committee has four members of the hospitals Executive Management Team... Without them we wouldn’t have been in a position to affect the required level of change.

It became clear very early on that we in the hospital couldn’t do it all on our own. Transport to and from the hospital was lifted out as a key issue by older people in the early stage consultation. We knew then that we would need support from other agencies. By joining the Kilkenny multi agency Age Friendly Alliance and Service Providers Forum I was able to see the bigger picture. Practically, it helped us develop relationships with agencies that could help address key problem areas.

Deirdre Dunne  
**General Manager’s Office**

# Stage 1: Set Up

## Step 1: Connect with your local Age Friendly City or County Alliance

### Securing required leadership for the initiative:

In the case of the St Luke's initiative the initial approach to the hospital was made by the Kilkenny Older People's Council on behalf of the Kilkenny Age Friendly County Programme. Mary O'Hanlon, then Chair of the Older People's Council, met with Anne Slattery, General Manager of the Hospital to explore what might be done to shape a hospital-based age-friendly agenda.

This was described as a "hugely positive exchange" where the proposal to establish an age friendly hospital programme initiative was "warmly received by the General Manager's office."

Looking back on the development of the Age Friendly Hospital initiative this was lifted out as a key success factor; "We had strong backing from the top."

### Engaging with the City or County Age Friendly Alliance:

In parallel to the hospital's formal adoption of the programme linkages were, over time, made with the wider Kilkenny and Carlow Age Friendly County initiatives. These key networks were credited with:

- ▶ connecting the hospital initiative to a wider set of stakeholders who were in a position to make decisions on areas such as transport - which were not within the immediate control of the hospital-based personnel.
- ▶ ensuring that service experience was gathered from across the catchment area where issues relating to access and accessibility could vary significantly depending on one's location and distance from the hospital.

Each county across Ireland has established a multi-agency Age Friendly Alliance. These high-level cross sector groups, often chaired by the local authority chief executives, involve a range of member agencies who commit to forming an overarching strategic partnership to develop and oversee the realisation of the Age Friendly City or

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2 AUDIT & CONSULT

3 PLAN

4 ACT

County Strategy. Actions supporting more accessible health services, independent living on the part of older people and measures to address carer stress will very often be included within many of the city and county-based age friendly strategy documents.

By engaging with the city or county Alliance at an early stage an age friendly hospital initiative will be better placed to:

- ▶ Identify relevant members - in the form of key service providers and policy leads – for the age friendly hospital steering group.
- ▶ Familiarise and, where relevant, align with relevant strategies and plans already in place across the city or county.
- ▶ Identify key issues surfaced previously by older people through local age friendly consultations which may be relevant to the age friendly hospital initiative.
- ▶ Gather multi-agency support for any age friendly actions which may be considered.



## Step 2: Set up an Age Friendly Hospital Steering Committee

Under the aegis of the General Manager's Office at St Luke's General Hospital Carlow-Kilkenny an Age Friendly Hospital Steering Committee was formed. The first meeting of the Steering Committee was held in July 2016.

This Committee included a broad mix of stakeholders from across the hospital – with senior officials representing Nursing, Occupational Therapy, Physiotherapy, Psychiatry, Nursing and Quality, Specialist Geriatric Services, Environmental Services, the Quality Office, Business Management and the General Manager – together with representatives of both the Carlow and Kilkenny Older People's Councils, Disability Federation of Ireland and Age Friendly Ireland. Such a cross section of membership gave the Steering Committee access to a wide range of disciplines and expertise. It also helped to secure a hospital wide level of 'buy-in' and commitment to the Age Friendly initiative.

The mix of subject area specialists and backgrounds was thought to have contributed to the effective working of the Committee. Direct involvement by older people in the Steering

As soon as we agreed to set up the Age Friendly Steering Committee, we made contact with the Age Friendly Ireland office and they gave us great help and support

Deirdre Dunne  
General Manager's Office

Committee also helped to further ensure that the work of the Committee was based on the priorities identified by older people through the various consultative methods employed. This committee structure also provided opportunities for older people to further influence and monitor the development and implementation of the various age-friendly actions which the hospital had committed itself to.

**Getting key decision makers involved:** By inviting in, at an early stage in the process, department heads, senior leaders and officials from across the hospital the age friendly hospital

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A photograph of a hospital corridor with several beds lined up. The beds have white covers and metal frames. There are signs on the wall, including a green exit sign and a blue sign with a wheelchair symbol. The floor is light-colored and reflective.

Why does it work? It helps a lot that the initiative is backed from the top. The General Manager is a member of the Committee and that shows the initiative is taken seriously.

Whenever issues were identified the hospital acted upon them wherever they could. Keeping momentum up was clearly important to the group. We wanted to show all this work leads to something. While resources may be limited for projects which require significant level of investment goodwill, across the hospital, certainly isn't.

Mary O'Hanlon  
**Kilkenny Seniors Forum / Older People's Council**

initiative was in a position to engage effectively with key decision makers as and when problems and challenges were identified by older people.

The common objective shared by members of the Steering Committee was to enhance the hospital experience and make it a more pleasant, accessible and user-friendly environment for older people and their carers. It was agreed that this Steering Committee would be responsible for surfacing the issues that mattered most to older people and framing relevant actions to respond.

The Committee met regularly in order to progress the various strands of consultation and to generate an appropriate level of momentum. Meetings were held in the hospital with consideration given to identifying a space within the hospital that was easily accessible to people with mobility impairments.

The Chair of the Steering Committee was recognised as being key to the successful implementation of the programme. The Chair was credited with;

- ▶ making members feel welcomed and valued for the contribution that they were about to make,



The direct links we established through our Committee membership to both the hospital's Executive Management Team and the Patient Partnership Forum were important in positioning the initiative. This gave us credibility and access to decision makers.

Mary O'Hanlon  
Kilkenny Seniors Forum | Older People's Council

- ▶ facilitating well-structured, solution focused and productive meetings,
- ▶ creating a sense of rapport and positive dynamic amongst a committee whose members were drawn from both the community and an extensive range of hospital-based disciplines and departments.

Experience with other Age Friendly Programme initiatives has shown that a skilled chairperson is critical to the long-term success of the programme.

**Age Friendly Hospital Steering Committee Terms of Reference** The new Steering Committee set out a Terms of Reference which defined the aims and purpose of the group and the roles of the different members. This ensured that all members of the Committee were clear of what was to be expected of such a group.

**Letting people know about the age friendly hospital initiative:** Frequently programme promoters within the St Luke's age friendly hospital initiative described the programme as a "model of continuous improvement." It was not expected that everything would be achieved within a single cycle of implementation.

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The Committee was represented on a number of key hospital-based project teams. That was important on a number of occasions. For example, when we looked to advance the Age Friendly parking spaces, we were able to link with the relevant technical people in the hospital and with support from the County Council - who provided us with a template - we now have two age friendly parking spaces in the plan.

Some of the actions were introduced very quickly while others took time. We wanted people around the table to remain invested in the initiative... so keeping people up to speed with what was working and any areas where we were experiencing implementation related challenges was, we felt, important. Regular meetings and updates helped keep people in the loop.

Deirdre Dunne,  
**General Manager's Office**

By letting people – and particularly older people – know about the consultation findings, the proposed solutions, the likely timelines involved together with any barriers to implementation the St Luke's initiative was well placed to retain a sense of goodwill and commitment among participating older people.



# Stage 2: Audit and Consult

In conducting a number of audits and consultation exercises the St Luke's Age Friendly Hospital initiative sought to explore:

- ▶ How age friendly the hospital was.
- ▶ How the hospital could better meet the needs of older people
- ▶ Solutions for dealing with issues and barriers identified by older people and staff.

Consultation has been at the heart of the St. Luke's Age Friendly Hospital initiative. Ahead of framing any actions or 'solutions' the Steering Committee recognised that it needed to consider how age friendly the hospital was at the outset. It was agreed that the best way of doing this was to engage older people directly, to talk with them and to witness how they experienced the hospital environment.

A number of engagement methodologies were employed by the Age Friendly Hospital Steering Committee at St. Luke's:

## 1. Walkability Audit

A walkability audit involves a group of people - in the case of the St. Luke's Age Friendly Hospital initiative this group was made up of primarily, but not exclusively, older people - taking on specific walking routes within the environment being audited. Group members were asked to note relevant elements of their experience while travelling along the route. In particular, walkability participants were asked to rate what was good and what could be improved along the way.

The St Luke's Committee sought to involve people with a mixture of abilities in walking the pre-planned routes – some who found it easy to walk the distance and others who for various reasons might find it more difficult.

Project leads from across the Steering Committee linked with various community-based groups and organisations to invite participants to support the walkability surveys.

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We wanted the participating group to be as representative of our patient base as possible. The Older People's Councils from both Kilkenny and Carlow together with Disability Federation Ireland were asked to promote the walkability audit amongst their membership bases and extended networks.

Deirdre Dunne,  
**General Manager's Office**

25 people took part in the St. Luke's Age Friendly Hospital walkability audit with participants including older people, members from the travelling community and persons with a physical disability. The walkability audits proved to be an engaging format for connecting with older people.

Five walking routes were chosen, each of a different length. On the day participants were assigned to each of the five routes. Routes started from the car park and participants were tasked

with finding specific destination points within the hospital. Each of the groups were given 45 minutes to complete the assigned task. A number of key elements were involved in the St Luke's walkability exercise:

#### **Getting started**

A briefing session for all walkability participants was held in the hospital's Library and Education Centre in advance of breaking into five separate walking groups.

A walkability coordinator or facilitator was appointed to support each of the walking groups. The role of the coordinator was to plan the route, to trail or follow the participants as they walked the assigned route and finally to record the issues as they were identified by the participants. Photographs were also taken to capture key issues – both good practice and challenges identified by participants along the way.

### Choosing the walkability audit routes

It was agreed that the routes chosen should include key hospital services or features which older people might frequently look to access or visit. Each of the five selected walking routes commenced in the hospital's car park. Among the walking routes selected were 'challenges' to locate:

#### GROUP 1

**Route:** Car Park to Outpatients Department  
(including Diabetic Clinic)

#### GROUP 2

**Route:** Car Park to Acute Medical Assessment Unit

#### GROUP 3

**Route:** Car Park to Maternity Unit

#### GROUP 4

**Route:** Car Park to Paediatric Unit

#### GROUP 5

**Route:** Car Park to Wards to visit a named patient  
(with patient's consent secured in advance of the audit).

It was very striking when the photographs came back and were put up for all to see. It was only then that we as hospital staff connected with all of the issues. We had been walking these corridors repeatedly, but this simple practice brought the issue to life.

Deirdre Dunne,  
General Manager's Office

Administrative and organisational support for the survey was provided through the Hospital's Quality Office.

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### Getting key decision makers involved

As well as involving older people from across Kilkenny and Carlow a range of key hospital personnel participated in the walkability exercises. This ensured that key decision makers saw first-hand the issues that older people face when trying to move through the hospital.

Set up for the event involved a number of further elements:

- ▶ Conduct of a short briefing session in advance of the walks.
- ▶ Provision of refreshments for walk participants.
- ▶ Provision of note paper and pens enabling participants to record issues as they go.

### Conduct of the walkability audits:

- ▶ The participants were split into groups with each group including participants with a range of abilities.
- ▶ The various routes took c. 45 minutes to complete.
- ▶ Each of the five walking groups completed the 'How Walkable is Your Hospital?' survey as developed by Age Friendly Ireland and tested in Beaumont Hospital.
- ▶ The leaders / coordinators assigned to each group recorded issues as highlighted by the participants. Relevant participants comments were also noted as the walking route progressed.

### After the audit walk

On concluding the walks each of the groups, returned to the Library and Education Centre to complete the survey. A spokesperson for each of the walking groups then highlighted key issues identified during each of the walks. All of the surveys were then collected for collation.

A report was compiled to summarise issues identified during the walks. The priority issues for each route, together with relevant comments and suggestions for improvement were captured within this summary.

## A summary of key issues identified through the various engagement sessions with older people:

### General: Walkability within the hospital

- ▶ **Long walking distances involved in travelling to key locations** across the hospital; The width and length of corridors was thought to add to the challenge involved for older people.
- ▶ **Complexity of walking routes** for visitors to key areas within the hospital

The consistent 'look and feel' presented across the different departments was thought to make it difficult for patients and visitors to distinguish one area from another. The absence of colour coded route strips was noted by several walkability participants.

- ▶ **Absence of places to sit** as one progresses along key walking routes.
- ▶ **Absence of comfortable seating** within the Accident and Emergency Department.
- ▶ **Absence of handrails** on both sides of stairs.
- ▶ **Heavy doors** which can be hard to open.

### General: Access to the hospital

- ▶ **Absence of a bus or shuttle link** from the train station to the hospital

### Signage

- ▶ **Overly cluttered signage** featuring numerous destination points.
- ▶ **Complexity of signage featuring unfamiliar acronyms** and a joint presentation of terms in both Irish and English made for a busy and complex presentation.
- ▶ **Signage height and placement** - obstructed by doors and other fixtures and fittings thereby making it difficult to read information presented.
- ▶ **Small size of print** and use of range of different styles and formats across signs posted within the hospital.
- ▶ **Absence of signage** directing visitors from various point within the car park to the main entrance and/or key locations within the hospital.

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Signage for the reception area, volunteers' station, wheelchair access points, lifts, toilets, ATM and the café were identified as being particularly important to hospital visitors.

The display of relevant information for taxi's, bus and train routes (station locations, timetables, prices, telephone numbers etc.) was also prioritised by walkability audit participants.

#### Lifts

- ▶ **Lifts without audible cues** to support those with sight loss.
- ▶ **Lifts without mirrors** to support wheelchair users in manoeuvring safely and more easily.
- ▶ **Absence of signage** to alert lift users to the floor numbers on arrival at each floor.

#### Carpark and outdoor spaces

- ▶ **Long walking distance from car park** to the hospital's front door and no shelter from the rain
- ▶ **Absence of signage directing visitors from the car park** to key locations within the hospital.
- ▶ **Absence of a comfortable, sheltered waiting space** for visitors waiting for accompanying driver to park a car.

- ▶ **Absence of age friendly parking** and wheelchair parking spaces.
- ▶ **Absence of bus shelter.**
- ▶ **Height of kerbs** and footpaths.
- ▶ **Absence of dished kerbs/wheelchair ramps** at key locations.
- ▶ **Absence of indoor ticket payment facility** within the hospital building.

#### Other

- ▶ **Concerns about adequacy of lighting** within certain parts of the building and along outdoor walkways.
- ▶ **Café only open until 6 pm**
- ▶ **Absence of partitions to facilitate private conversations** at check-in and other relevant locations.
- ▶ **Call for more visible security** presence particularly after dark.



Importantly, at the end of this feedback session hospital personnel gave a commitment that the Age Friendly Hospital initiative “would do as much as it could to address the issues highlighted.

### Follow up action

#### Communicating the results:

Following completion of the audit the findings were aggregated by the Steering Committee Chair as part of a single report. This report and the various findings arising from the walkability audit were then presented to the Age Friendly Steering Committee.

As valuable as the findings were arising from the walkability audit the Steering Committee wanted to “drill down further and better understand the issues that had been highlighted by older people” as part of the audit. The Steering Committee subsequently committed to facilitate additional focus groups and survey research.

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## 2. Focus Groups

Two follow up focus group meetings were held with older adults and representatives of older people in order to better understand the transport related needs and challenges involved in travelling from Carlow town and county to the Kilkenny city-based St. Luke's hospital.

Key discussion questions included:

- ▶ What is 'good' about available transport to St. Luke's Hospital?
- ▶ What would improve transport to and from St. Luke's Hospital?
- ▶ What would improve access to and within St. Luke's Hospital?

**For the programme to be meaningful it had to address both Kilkenny and Carlow. This was the community it served and so we had to consider the hospital from the perspective of both areas.**

Mary O'Hanlon  
**Kilkenny Seniors Forum | Older People's Council**

## 3. Survey

A survey was also designed and administered in order to further augment findings generated. As the focus groups had identified 'transport' as a key issue transport related questions were prioritised as part of the survey.

The Steering Committee designed a short questionnaire, and this was administered to older people presenting at the Out-Patients Department within the hospital.

Survey participants included patients and visitors from across Kilkenny (both city and county) and Carlow (both town and county).

Survey findings revealed a high proportion of hospital visitors who were reliant on a lift by either a neighbour, family member or friend.

Travel by taxi was also a frequently cited mode of transport.

The expense involved in taking a taxi from the train station to the hospital was also frequently raised by survey participants. Similarly, the absence of a direct bus from Carlow to St. Luke's was highlighted as a key access related deficit.

# Stage 3: Plan

As the various elements of consultation and engagement were completed findings were presented to the Age Friendly Hospital Steering Committee. This kick started the planning process in respect of what was needed to happen to make the hospital more age friendly.

As part of this process the Steering Committee – with sought after engagement from older person representatives agreed on the prioritisation of issues and the sequence by which they would be dealt with or responded to.

These discussions involved the Steering Committee deciding on what actions to take together with the resources and likely timelines involved in implementing such actions.

This process involved an element of co-design as hospital personnel together with representatives of local older people identified and reached agreement on the relevant solutions to improve the hospitals age friendliness.

Key actions were captured as part of a document agreed by the Steering Committee. Actions were prioritised on the basis of;

- ▶ Alignment with the original project vision / objectives.
- ▶ Potential to impact positively on the experience of older people
- ▶ The degree to which they could be readily implemented.

The findings were received very positively by the Committee. A number of them had participated in the audit so knew there was a real credibility in what was coming through. The photographs offered 'hard evidence'. As a Committee we could see there were things that needed to be done and many of these were very 'doable'. When the findings were presented it reinforced with us that little things really do make a big difference

Deirdre Dunne,  
General Manager's Office

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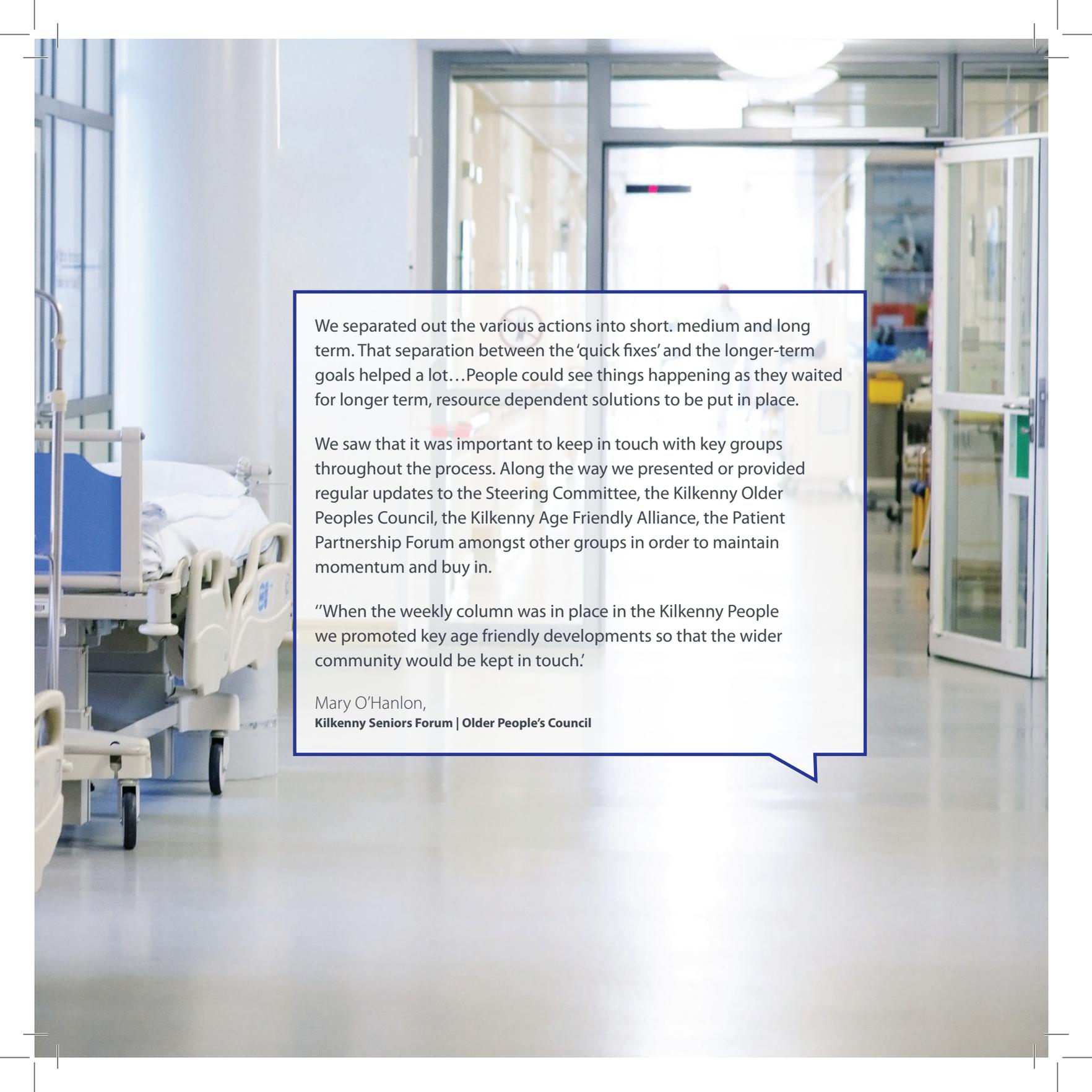
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## Some key learnings and recommendations arising from the Age Friendly Hospital programme

- ▶ **Involve people from across a range of disciplines** to enhance the likelihood that the improvement programme will effect change across a range of domain areas.
- ▶ **Involve older people from a range of locations within the catchment area** as only then will the initiative be in a position to surface key geographical and access related issues.
- ▶ **Be inclusive:** The inclusion of carers, people of different ages, abilities and ethnic backgrounds all informed the process.
- ▶ **Look for a well-placed champion within the hospital** to lead and position the initiative as a programme of importance.
- ▶ **Focus, initially, on the practical 'quick fix solutions'** to build momentum and buy-in. These smaller fixes keep people on board and motivated while waiting or planning for the more resource intensive investments.
- ▶ **Keep going; All the small fixes and simple innovations add up!** Such an incremental approach was credited with building a higher level of awareness across the hospital and an enhanced culture of understanding as to the needs of older people.
- ▶ **Take photographs of the problem areas identified:** A picture paints a thousand words!
- ▶ **Link, early on, with established networks and service providers.** Some of the actions will be within the direct control of the hospital while other solutions will need the support of other agencies and service providers.
- ▶ **Awareness and communications play an important role:** As familiarity with the initiative grew amongst key decision makers, budget holders and other relevant stakeholders 'buy in' and support for the programme and any required changes or investments grew in parallel.
- ▶ **Replicate or customise previously proven age friendly initiatives** to fast track successful implementation.
- ▶ **Pursue changes across both the physical and care environments.**
- ▶ **Keep Steering Committee meetings fresh** and vibrant with the introduction of examples from other relevant fields demonstrating what might be possible.

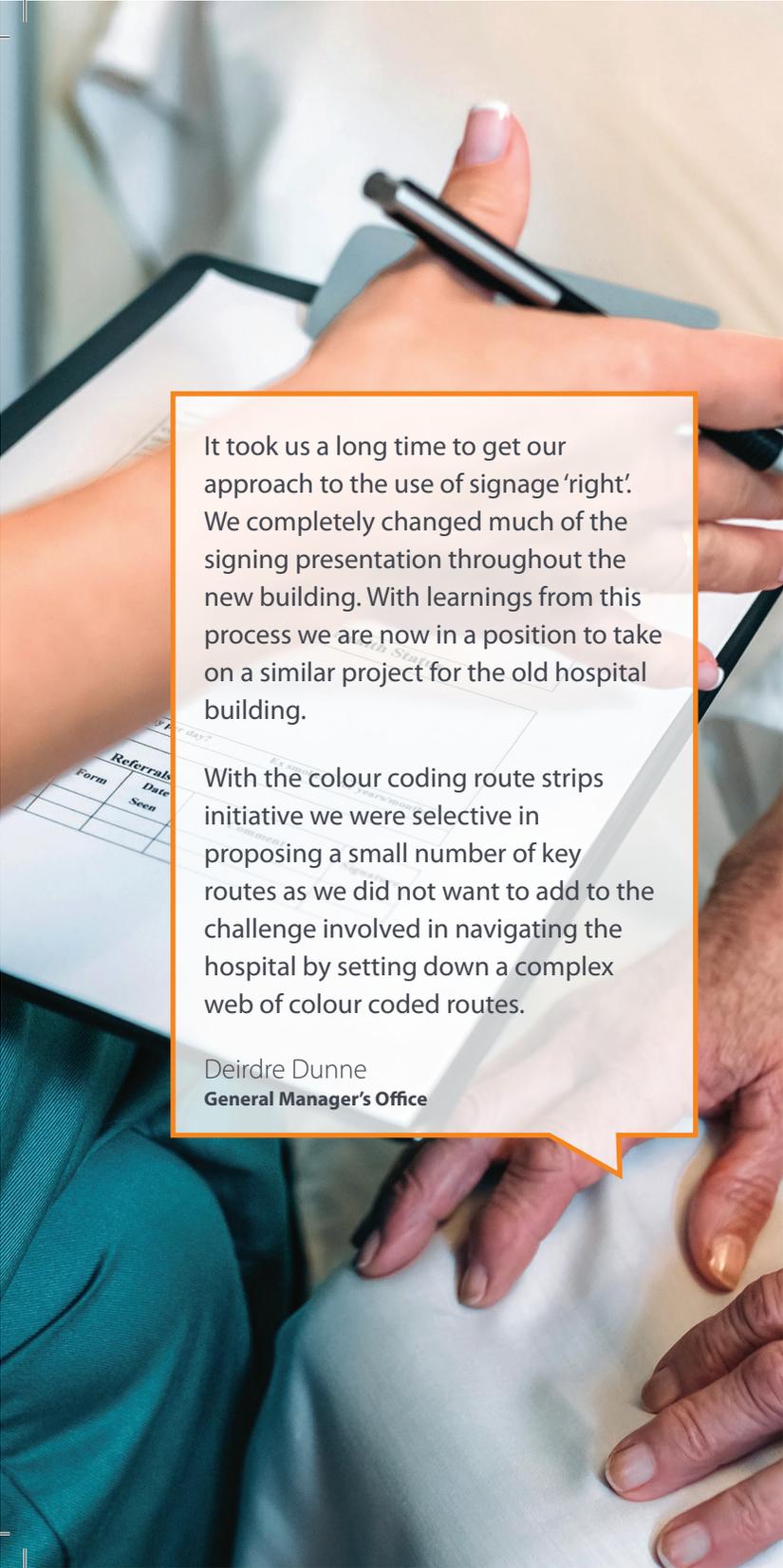


We separated out the various actions into short, medium and long term. That separation between the 'quick fixes' and the longer-term goals helped a lot... People could see things happening as they waited for longer term, resource dependent solutions to be put in place.

We saw that it was important to keep in touch with key groups throughout the process. Along the way we presented or provided regular updates to the Steering Committee, the Kilkenny Older Peoples Council, the Kilkenny Age Friendly Alliance, the Patient Partnership Forum amongst other groups in order to maintain momentum and buy in.

"When the weekly column was in place in the Kilkenny People we promoted key age friendly developments so that the wider community would be kept in touch."

Mary O'Hanlon,  
**Kilkenny Seniors Forum | Older People's Council**



## Stage 4: Act

### Keeping the plan alive through active review, monitoring and communications

Ongoing review and monitoring of actions has been a key and rolling feature of the Age Friendly Hospital Steering Committee meetings.

“We needed to keep the actions alive.”

Where there were blockages, in order to progress, those charged with implementation shared relevant information with the full Committee.

“It was important to keep everyone on board. It’s one thing promoting all of the successes. We needed to let those involved and particularly older people know if there were barriers to progress and what was being done to overcome such barriers. People could easily become disillusioned if they didn’t feel that they were being kept in the loop.”

Momentum, a level of accountability and much needed ‘goodwill’ was sustained by regularly reviewing the actions at Steering Committee meetings.

It took us a long time to get our approach to the use of signage ‘right’. We completely changed much of the signing presentation throughout the new building. With learnings from this process we are now in a position to take on a similar project for the old hospital building.

With the colour coding route strips initiative we were selective in proposing a small number of key routes as we did not want to add to the challenge involved in navigating the hospital by setting down a complex web of colour coded routes.

Deirdre Dunne  
General Manager's Office

## Domain areas actioned as part of the St Luke's Age Friendly Hospital programme

### 1. Physical space and buildings

**Our goal** within the Age Friendly Hospitals programme was: To make both the outdoor spaces connected to the hospital and those hospital buildings most relevant to our older patient base pleasant, clean and accessible thereby creating a walkable, safe and age friendly environment.

#### Why was this focus important?

It can be daunting and confusing for anyone entering a large and unfamiliar hospital environment. This sense can be amplified when one might be ill or frail. An environment that looks well, feels safe and is easy to navigate one's way around can have a big impact on the older persons confidence and sense of well-being. When the hospital environment and the way in which it can be accessed is attractive and well laid out, people of all ages – including older patients and their carers – can enjoy a more comfortable and less distressing hospital experience. A truly Age Friendly Hospital will have created an environment which provides effective access for all.

**Some examples of the early stage actions St Luke's has committed itself to in response to what was heard through the consultation with older people:**

- ▶ Introduction of colour coded directional floor strips to guide patients and visitors to key locations across the hospital.
- ▶ Placement of beam seating to allow patients and visitors to sit and rest as they make their way along key link routes within the hospital.
- ▶ Replacement of hard wooden benches in the Accident and Emergency Department with more age friendly seating in the form of comfortable, well supported armchairs.
- ▶ Conduct of a significant signage revision project to better support patients and visitors in navigating their way around the hospital. To date, this process has involved;
  - ▶ Reducing the number of signs in use throughout the hospital building.
  - ▶ Reducing the number of destination points featured on any one sign.
  - ▶ Introducing some electronic signs displaying symbols rather than text to support more visual and less text heavy presentation.
- ▶ Extension of café opening hours and engagement by the hospital-based coffee shop, the Zen Café, in the Kilkenny Age Friendly Business Recognition Programme.

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## 2. Transport to the hospital

**Our goal** within the Age Friendly Hospitals programme was: To promote accessible and reliable transport services for older people travelling to the hospital.

### Why was this focus important?

Good access to transport makes it easier to engage with key health and hospital-based services. In Ireland, around a third of people living in rural areas have difficulty in accessing 'essential services' because of poor transport services. In urban areas the figure is understood to be between 11 and 15%, which is still too high. Age Friendly Hospitals will promote affordable and more seamless public transport systems which make it easier for older people and their carers to access the hospital and key medical appointments.

### Some examples of the early stage actions St Luke's has committed itself to in response to what was heard through the consultation with older people:

- ▶ Alignment of key hospital appointments with relevant train and bus schedules to facilitate those older patients travelling from longer distances.
- ▶ A new drop off area for taxis and patients/visitors at the new hospital entrance.
- ▶ Introduction of a set down parking space for the community bus within the hospital grounds providing passengers with more easy access to the main entrance.
- ▶ Introduction of two branded age friendly parking spaces.

## St. Luke's General Hospital – Supporting an extensive range of significant Age Friendly Programmes.

Consistently, research reminds us that older people want to age comfortably in the community they belong to and, where possible, their own home. St Luke's is committed to the development of a range of in-hospital systems together with appropriate community linkages which will support older people to make an effective return, where appropriate, to independent living within the community. A number of these initiatives are operating successfully, in parallel, to the Age Friendly Hospital programme.

## Some key age friendly initiatives supported by St. Luke's in parallel to the Age Friendly Hospital Programme

### Parallel initiative 1: Geriatric Emergency Service (GEMS) – Addressing frailty at the front door and across the first 72 hours.

Established in February 2017, GEMS is an interdisciplinary team consisting of Consultant Geriatrician, Clinical Nurse Specialist, Occupational Therapist, Physiotherapist and administrative support.

All patients – 75 years and over – who attend the emergency floor at St. Luke's are screened at triage for frailty. When a patient is screened as being 'GEMS positive' they will then receive a Comprehensive Geriatric Assessment within 72 hours. Comprehensive Geriatric Assessment is recognised as the gold standard for the development and coordination of integrated planning for treatment and long term follow up. Such patients will then take a different pathway through the hospital if found to be frail. All appropriate referrals are generated as part of this front door assessment to ensure early intervention and avoid functional decline while in hospital. A designated in-patient ward area for GEMS patients was opened to support effective delivery of this programme.

There is a constant effort by the multi-disciplinary staff to meet the immediate and precise needs and ensure the condition of such patients does not dis-improve while in hospital and while immobile. This multi-disciplinary team has significantly reduced the re-admission rate for this cohort of patients.

A number of hospital staff have also up skilled to provide Tilda frailty training to healthcare staff within and outside the hospital setting. Such training has played a significant role in shifting the culture around care of frail older patients and indeed equipped all with knowledge on 'what to do next' with a frail older patient.

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In 2018 alone:

- ▶ 5,141 people over the age of 75 presented at St. Luke's.
- ▶ 43% of these were deemed positive for frailty.
- ▶ 66% participated in a Comprehensive Geriatric Assessment. Of this cohort 91% were found to be at risk of polypharmacy, 26% at risk of malnutrition and 29% at risk of delirium.

More recently a 'home GEMS' team has been put in place to augment the work led out by the 'Front Door GEMS' team and to support participating frail, older patients to affect a successful discharge to the community.

### **Parallel initiative 2: The 'End P J Paralysis' Campaign**

Under the auspices of the GEMS programme St Luke's, in 2018 launched its 'End PJ Paralysis' campaign to encourage people to get up and get dressed each day.

Research has shown that most people feel better in their own clothes and, statistically, have shorter lengths of stay in hospital when they get up, get dressed and get moving as soon as possible. Research also shows that patients who stay in their pyjamas or gowns longer than they need are more likely to lose mobility, fitness and muscle strength, making it harder for them to regain independence. Getting dressed is something that we do every day, but for hospital patients, it can mean the difference between going home to live independently or with support.

Significant importance was attached to this simple concept as research has shown how a person aged over 80 can lose 10 per cent of their muscle mass after just 10 days in a hospital bed. Many such patients may be more prone to losing the ability to carry out routine functions like bathing, dressing, getting out of bed and walking due to unnecessary bed rest.

The 'End PJ Paralysis' campaign, led by an in-house occupational therapist, involved hospital staff at St. Luke's helping people to stay independent, maximise wellbeing and improve health outcomes by promoting the patient's normal routine; getting up, getting dressed, keeping mobile. Staff across all wards throughout the hospital now work with patients each day to encourage them to get up and get dressed in their own clothes. Patients are asked to bring their day clothes with them when they are being admitted to the hospital, along with shoes rather than slippers.

Research evidence demonstrates that dressing patients in their own clothes is more dignifying, provides a sense of normality and allows them to be more independent while in hospital. As one staff member suggested "we do everything we can to reduce delays so that our older patients and indeed all of our patients are back home as soon as possible

### Parallel initiative 3: Supporting early and effective discharge

In December 2016 a new Discharge Lounge was opened in order to facilitate effective planned discharges. The Lounge, which is open Monday to Friday, is managed by a Staff Nurse and Health Care Assistant and caters for patients who are medically fit for discharge and are awaiting final discharge letters, pharmacy scripts and/or family members to collect them.

Patients being discharged from hospital go to the Discharge Lounge early each morning where they are cared for until their documentation is completed. Information is provided to each patient on what to expect when they return home. Discharging patients from the ward in this way frees up beds for new patients being admitted to the hospital.

Predicted dates of discharge are documented for each patient on admission to the hospital and are reviewed each day. This allows each member of the multidisciplinary team (medical, nursing, occupational therapists, dietitians, speech and language therapists etc.) to plan their workload, link with Community Services and Primary Care where necessary, and prioritise patients according to their needs and discharge.

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#### Parallel initiative 4: Kare Bear Project

The Kare Bear Project, run in conjunction with Ossory Youth Service and Colaiste Pobail Osrai, involves Transition Year students visiting the hospital each Friday and spending time with older people in both the GEMS Ward and Medical 2. The students, supervised at all times by Youth Leaders from Ossory Youth, sit and chat to older people, play music and accompany older patients on short walks. Feedback from patients and hospital staff has been very positive. The students also provide carol singing in the hospital at Christmas and carry out 'Random Acts of Kindness' across the hospital at other times of the year.

#### Parallel initiative 5: Expansion of the Hospital Volunteer Programme

In addition to the Kare Bear Project, St Luke's General Hospital Carlow-Kilkenny has an extensive Volunteer Programme with four key groups of volunteers:

1. Meet and Greet Volunteers
2. Emergency Department Support Volunteers
3. Children in Hospital Ireland Volunteers
4. Kare Bear Volunteers

As part of the Age Friendly Project, the hospital actively recruited more volunteers. Meet and Greet Volunteers are on duty every day in the hospital to assist patients and visitors. Some supports that they provide include walking people to their required destination, finding a wheelchair for them and bringing them wherever they need to go, sitting with someone while their family member/friend is parking or getting the car, providing a friendly face and a listening ear.

An extensive range of additional age friendly practices have been introduced across St. Luke's including:

- ▶ Protected mealtimes to allow patients appropriate time and space to finish their meals without disturbance.
- ▶ Red napkin initiative to discretely highlight those who may value some assistance while eating.
- ▶ Half portion plates for those who may find larger portion sizes off putting.
- ▶ Mobile library service.
- ▶ Patient passport to provide background information, with consent, about patients who may owing to factors such as dementia, delirium or other communication factors, find visits to the hospital stressful or confusing.

### What's next for the Age Friendly Hospital programme at St. Luke's?

- ▶ Develop closer connections and, where appropriate, joined up programmes of work between the Age Friendly Hospitals initiative and GEMS.
- ▶ Build further awareness amongst all hospital staff so that the change programme is sustained over time.
- ▶ Put in place an Age Friendly bus shelter with the support of the NTA.
- ▶ Establish a new transport service which will take in key city centre locations such as the shopping centre and train station together with a full loop of the hospital grounds enabling older people to embark at the hospitals main entrance.
- ▶ Align out-patient appointments with the times of trains and buses arriving at and departing from the city's train station thereby allowing older people to access the hospital more readily and costly effectively.
- ▶ Facilitate Age Friendly awareness training for all hospital based front line staff.
- ▶ Develop a sensory/dementia specific garden adjacent to the GEMS ward.
- ▶ Conduct evaluation so as to determine the value and real impact of the various actions
- ▶ Continue to work on the actions identified as part of the consultation process – the more medium to long-term actions.

# What underpinned the St. Luke's Age Friendly Hospital programme?

## Older people being central to the programme of work

### Older people

- ▶ **Played a lead role in identifying and prioritising the relevant issues** to be addressed.
- ▶ Shaped and informed the schedule of **actions which responded to the real concerns and issues of older people**, identified through direct contact and consultation.
- ▶ Were **directly involved in monitoring the implementation of actions** committed to by the Age Friendly Hospital Steering Group.

## A shared vision with attainable goals

### The Age Friendly Hospital Programme

- ▶ Was **based on priorities identified through a number of consultative approaches involving older people** from across the hospital catchment area.
- ▶ Provides **opportunities for older people to advise on and further inform the framing of age friendly actions** to be committed to as part of the programmes action plan.
- ▶ Is supported by a plan or set of actions which makes it easy to see if progress has been achieved.

## KEY SUCCESS FACTORS

## The right people with the right attitudes

### The Age Friendly Hospitals Steering Group

- ▶ Involves senior representatives from across relevant hospital departments who have sufficient influence and resources to develop and deliver a set of age friendly actions which will make a difference to the hospital experience enjoyed by older people.
- ▶ Depends on the effective collaboration of hospital-based personnel with local older people.
- ▶ Requires a spirit of engagement that is collaborative rather than confrontational

## Strong leadership

### The Age Friendly Hospital Programme

- ▶ The General Managers office ratifies its adoption and where relevant leads its roll out.
- ▶ Is supported by a commitment to the values and principles set out within the Dublin Declaration on Age Friendly Cities and Communities (2013).
- ▶ Is aligned to the relevant Age Friendly city/county programme with the local Age Friendly Alliance committing to respond to external difficulties or barriers to progress experienced by the Age Friendly Hospital programme.



For further information or if you have any Age Friendly initiatives  
you would like to tell us about, our contact details are;

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