



Supported by:

Note: Coloured numbers correspond with the sfCare Framework domains.

- 10 Structures, spaces, equipment, and furnishings provide an environment that minimizes the vulnerabilities of older adults and promotes safety, comfort, functional independence and well-being.
 - 9 An approach is in place to support care providers and the older adult/caregivers in challenging ethical situations.
 - 8 A system is in place to measure the experience and outcomes of older adults and make improvements based on the results.
 - 7 The care plan, goals, and expected results of care are developed in collaboration with all members of the care team and the older adult/caregivers and aligned with the older adult's preferences.
 - 6 The older adult/caregivers are provided with information to let them know what to expect in their care, help them make decisions, and better self-manage their conditions.
 - 5 Interprofessional assessment and care is guided by evidence-informed practice to optimize the physical, psychological, functional, and social abilities of older adults.
 - 4 Care delivery partners from all sectors have been identified, and collaborative processes exist to ensure information sharing and seamless transitions for older adults across the healthcare continuum.
 - 3 Education and/or training is provided to all staff on senior friendly topics.
 - 2 Guiding documents (such as policies, standards, procedures, guidelines, care pathways etc.) reflect senior friendly values and principles; promote older adult's health, autonomy, dignity and participation in care; and ensure that an older adult will not be denied access to care or the opportunity to participate in research based solely on their age.
 - 1 Commitments to the sfCare Framework are included in the organization's strategic plan, operating plan, and/or corporate goals and objectives.
- These recommendations are comprehensive, action-based statements, which create the foundation for the sfCare Self-Assessment Tool and the Implementation Resources in the sfCare Getting Started Toolkit.

10 Recommendations

The Senior Friendly Care Framework



The goal of senior friendly care is to achieve the best possible health outcomes for older adults. The sfCare Framework provides the foundation for achieving this goal through guiding principles and defining statements that are intended to foster improvements in care across the system and inspire greater collaboration between older adults and their caregivers, care providers, and organizations.

7 Guiding Principles

- 1 Resilience, independence, and quality of life
- 2 Compassion and respect
- 3 Informed and empowered older persons and families
- 4 Person- and relationship-centred partnerships
- 5 Safety and security
- 6 Timely, equitable, and affordable
- 7 Evidence-informed

5 Domains



31 Defining Statements across the Domains

31 Defining Statements across the Domains

Organizational Support



1. Senior friendly care is an organizational priority
2. At least one leader in the organization is responsible for senior friendly care
3. There is organizational commitment to recruit and develop human resources with the knowledge, skills, and attitude needed to care for older adults
4. The values and principles of senior friendly care are evident in all relevant organizational policies and procedures
5. The organization has a senior friendly policy that values and promotes older adults' health, dignity and participation in care
6. The organization demonstrates commitment to all domains of the Senior Friendly Care Framework - organizational support, processes of care, emotional and behavioural environment, ethics in clinical care and research, and the physical environment
7. The organization collaborates with system partners to meet the needs of older adults
8. The organization implements standards and monitors indicators relevant to the care of older adults

Processes of Care



9. Assessment is holistic and identifies opportunities to optimize the physical, psychological, functional, and social abilities of older adults
10. Care addresses the physical, psychological, functional, and social needs of older adults
11. Care is guided by evidence-informed practice
12. An interprofessional model of care is preferred especially when older adults are frail
13. Care is integrated and provides continuity especially during transitions
14. Goals of care may include recovery from illness, maintenance of functional ability and preservation of the highest quality of life as defined by the individual
15. Older adults are partners with the care team
16. Care is flexible and aligned with an individual's preferences
17. Communications and clinical and administrative processes are adapted to meet the needs of older adults
18. Older adults are provided information in a way that makes it easy to understand so that they can make informed decisions

Emotional & Behavioural Environment



19. The care provided is free of ageism and respectful of the unique needs of older adults
20. Care providers are able to identify and address issues of elder abuse and older adults' safety
21. The care of older adults is planned and delivered in alignment with their personal goals
22. Care providers demonstrate competency providing care to an older population with diversity in all its many forms
23. Care providers respect each individuals' breadth of lived experience, relationships, unique values, preferences and capabilities
24. Care is provided in a way that enables the older adult to feel confident in their care providers
25. Care is compassionate and sensitive to the needs of older adults
26. Family and other caregivers are valued and supported as care partners
27. Social connections are recognized as an important contributor to the health and wellbeing of older adults

Ethics in Clinical Care and Research



28. Autonomy, choice and dignity of older adults are protected in care processes and research
29. Care is delivered in a way that protects the rights of older adults especially those who are vulnerable
30. An older adult will not be denied access to care or the opportunity to participate in research based solely on their age

Physical Environment



31. The structures, spaces, equipment, and furnishings provide an environment that minimizes the vulnerabilities of older adults and promotes safety, comfort, functional independence, and well-being