METHODIST

Improving Surgical Care for Older Adults: American College of Surgeons (ACS) Geriatric Surgery Verification (GSV) Program Overview

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Disclosures

- The content presented reflects the presenter’s professional expertise and experience.
- No financial conflicts of interest to disclose.
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- All AI-assisted content, visuals, and references were reviewed by the presenter for accuracy, relevance, and appropriateness.
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Learning Outcomes

- Describe the purpose and goals of the American College of Surgeons (ACS) Geriatric Surgery Verification (GSV) program.
- Recognize how the GSV Program aligns with the Age-Friendly Health System 4Ms Framework to improve the care of older surgical patients.
- Identify how GSV standards support quality improvement initiatives and complement CMS quality measures related to patient safety, care transitions, and outcomes for older adults.

What is the Geriatric Surgery Verification (GSV) Program ?

- **The Geriatric Surgery Verification Program** is a national program from the American Colleges of Surgeons (ACS) that establishes standards for hospitals providing surgical care to patients ≥ 65 years old.
- Key Focus Areas:
  - Preoperative assessment
  - Medication review
  - Delirium prevention
  - Mobility and functional support
  - Postoperative care planning
- The program emphasizes a holistic approach to surgical care for older adults.

(American College of Surgeons [ACS], 2019)

The Evolution of Geriatric Surgery Verification (GSV)

From Collaboration to National Quality Improvement

GSV was developed through **evidence, interdisciplinary expertise, patient and family input,** and **real-world hospital testing** to improve outcomes that matter to older surgical patients.

2012
Building the Evidence

- ACS and the American Geriatrics Society publish best-practice guidance for the preoperative assessment of older surgical patients.

ACS AMERICAN COLLEGE OF SURGEONS | AGS Geriatrics Healthcare Professionals

2016
Coalition for Quality in Geriatric Surgery

- ACS, with support from The John A. Hartford Foundation, launches a four-year national initiative to improve surgical care for older adults.

The John A. Hartford Foundation

50+ Stakeholder Organizations

- Patients and families, geriatrics, nursing, pharmacy, surgical and medical specialties, advocacy organizations, and other experts contribute to development of the standards.

2016–2019
Standards Development & Testing

- Evidence review → 308 preliminary standards
- Expert review → 92 alpha standards
- Hospital pilot testing → 33 beta standards
- Implementation pilot in 8 hospitals → 30 required GSV standards

July 2019
GSV Program Launches

- The ACS Geriatric Surgery Verification Program officially launches as a national hospital verification and quality improvement program.

ACS GSV Geriatric Surgery Verification Program

2021–2024
Evaluation & Expansion

- ACS and The John A. Hartford Foundation begin Phase II to evaluate implementation, expand GSV to diverse hospital settings, and strengthen areas such as palliative care.

2024–Present
Age-Friendly Expansion

- ACS receives additional support from The John A. Hartford Foundation to expand GSV through an Age-Friendly pathway.
- Educational resources aligned with the Age-Friendly Health Systems 4Ms Framework.
- Standards aligned with the CMS Age Friendly Hospital Measure.

4Ms

What Matters | Medication | Mentation | Mobility

Our Goal: Not simply helping older adults survive surgery—but helping them recover with their cognition, function, independence, and what matters most to them preserved.

GSV Framework + 4Ms Patient-Centered Care + Interdisciplinary Team = Better Outcomes for Older Surgical Patients

(American College of Surgeons [ACS], n.d.-a, n.d.-b)

Note. Image generated with ChatGPT (OpenAI, 2026). Content adapted from American College of Surgeons (n.d.-a, n.d.-b).

Why Geriatric Surgical Care Matters

Older adults bring unique considerations to surgical care.

INCREASING SURGICAL POPULATION

Older adults represent a growing proportion of patients undergoing surgical procedures.

GREATER CLINICAL COMPLEXITY

Frailty, multimorbidity, polypharmacy, cognitive impairment, and functional limitations can influence surgical risk and recovery.

OUTCOMES EXTEND BEYOND SURVIVAL

For older adults, successful surgical care also means preserving cognition, mobility, function, independence, and quality of life.

OPPORTUNITY FOR STANDARDIZATION

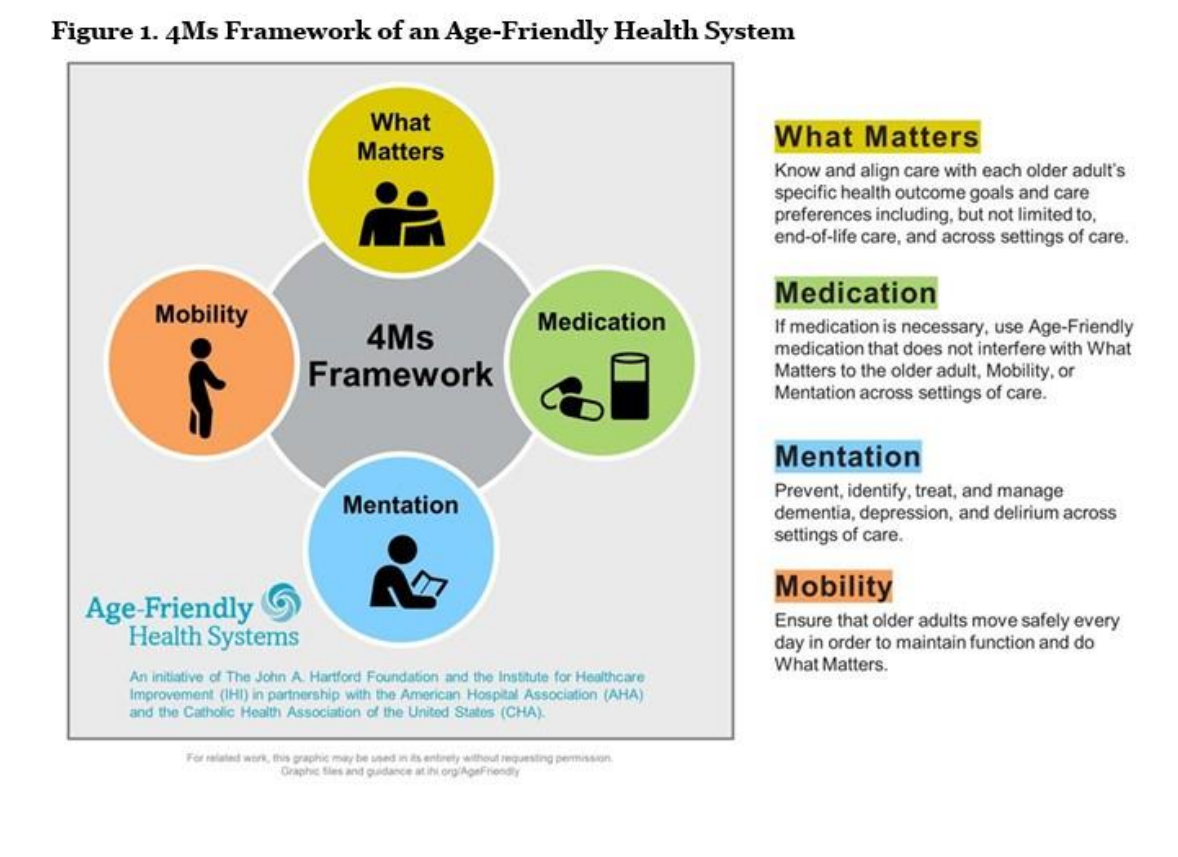
Evidence-based geriatric surgical practices can help prevent complications, improve care transitions, and align treatment with what matters most to the patient.

THE GOAL | *Move beyond "Did the patient survive surgery?" to "Did the patient recover in a way that preserves what matters most to them?"*

Note. Image generated with ChatGPT (OpenAI, 2026).

American College of Surgeons (ACS) Geriatric Surgery Verification (GSV) Program

Alignment with the 4 M's Framework of an Age Friendly Health System



- Standards requirement:
- Geriatric Surgery Verification Director
- Geriatric Surgery Verification Coordinator
- Geriatric Surgery Nurse Champions
- Quality/Process Improvement Program

(ACS, 2019; Institute for Healthcare Improvement [IHI], n.d.)

GSV: A Comprehensive Surgical Care Framework

One Framework. One Surgical Journey. One Goal.

PREOPERATIVE ASSESSMENT

- Goals and treatment preferences
- Cognition, function, mobility, and frailty
- Medication review
- Risk identification and optimization

PERIOPERATIVE CARE

- Age-friendly care processes
- Delirium prevention and recognition
- Medication management
- Mobility and functional preservation

POSTOPERATIVE CARE

- Prevention and management of complications
- Pain and medication management
- Nutrition and mobility
- Cognitive and functional reassessment

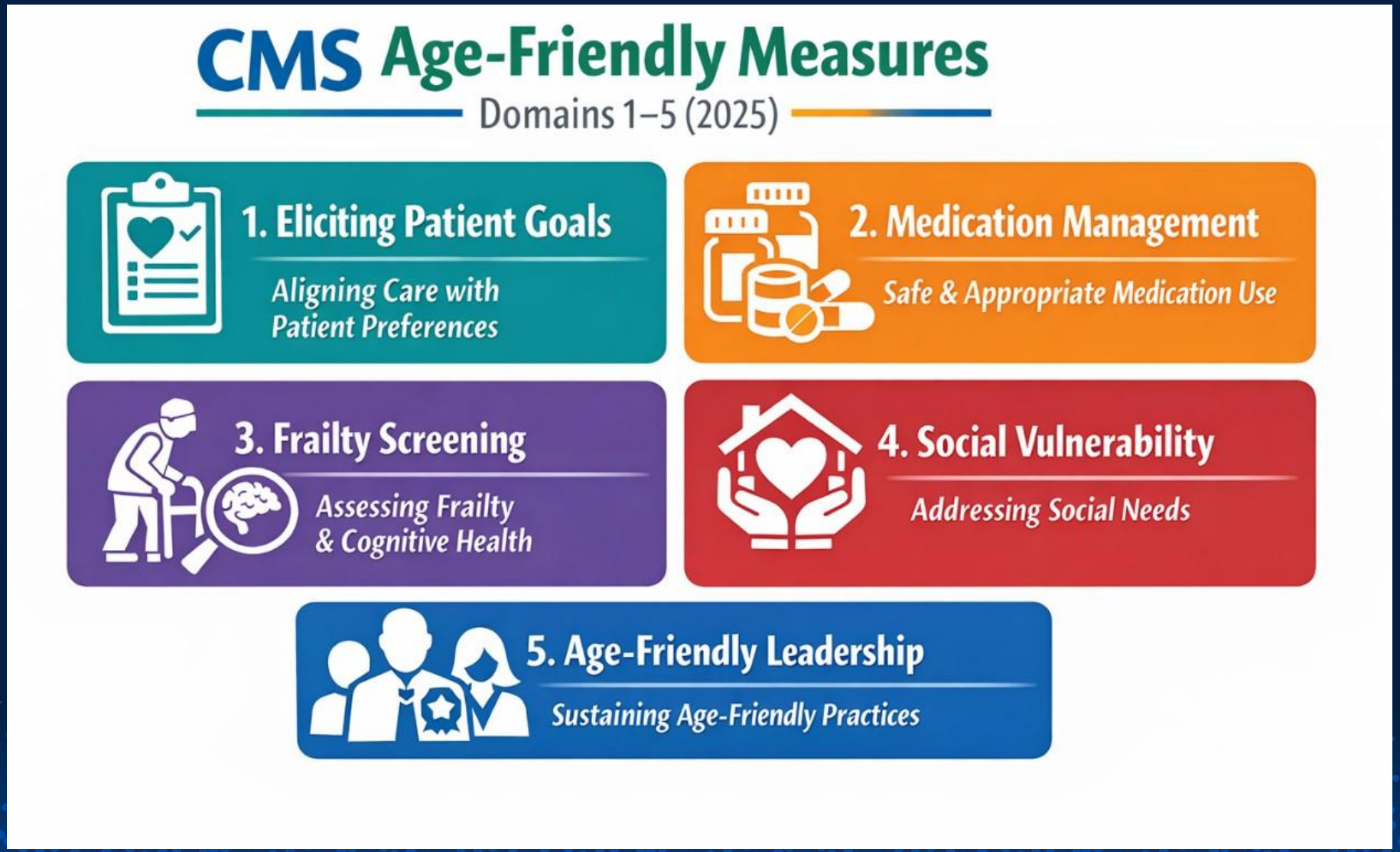
TRANSITION & RECOVERY

- Patient and caregiver education
- Discharge and transition planning
- Communication across care settings
- Follow-up and recovery needs

Deliver reliable, patient-centered surgical care that addresses the unique needs of older adults.

Note. Image generated with ChatGPT (OpenAI, 2026). Content informed by American College of Surgeons GSV standards (2019).

Why is this important to Methodist Hospital?



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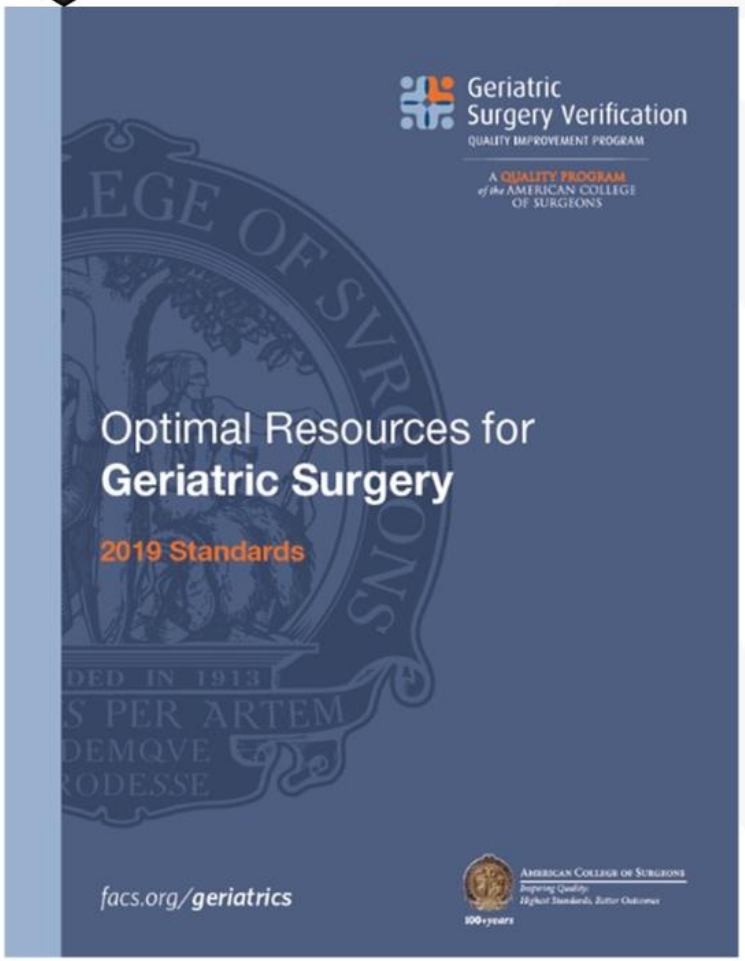

Age Friendly- New GSV Level

- 6 Standards
- Helps attest to new CMS Age Friendly Hospital Measure

Level 2-Focused Excellence

- 30 GSV Program Standards in one or more surgical specialties
- Must reach between 25-49% of the hospital's total population of eligible surgical patients aged 75 years or older

Level 1-Comprehensive Excellence

- 30 GSV Program standards in one or more surgical specialties
- Must reach 50% or more of the hospital's total population of eligible surgical patients aged 75 years or older

Note. American College of Surgeons. (2019). *Optimal resources for geriatric surgery*. American College of Surgeons. Geriatric Surgery Verification | ACS

Initial Age-Friendly Level

Per ACS framework, the Initial Age-Friendly level includes six core standards focused on foundational infrastructure:

1. Age-Friendly Care Leadership
2. Treatment and Overall Health Goals
3. Geriatric Vulnerability Screens
4. Management Plan for Patients with Positive Geriatric Vulnerability Screens
5. Age-Friendly Specific Postoperative Protocol
6. Data Review

(ACS, 2019)

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(OpenAI, 2026)

Every Team Member Has a Role:

What This Means for Our Teams

"GSV is not one person's responsibility, it requires an interdisciplinary approach to reliable, age-friendly surgical care."

Recognize	Prevent	Know	Plan
Recognize Risk Early • Identify changes in cognition, mobility, function, and clinical status • Communicate concerns across the care team	**Prevent What We Can** • Promote mobility and functional preservation • Reduce delirium risk • Support safe medication practices	**Know What Matters** • Incorporate patient goals, values, and preferences • Engage patients and caregivers throughout the surgical journey	**Plan for Recovery** • Begin transition planning early • Communicate needs across disciplines and care settings

Improving Surgical Care for Older Adults

Three Things to Remember

1 GSV PROVIDES THE FRAMEWORK

Standardized, evidence-based processes address the unique needs of surgical patients age 65 and older.

2 THE 4Ms KEEP THE PATIENT AT THE CENTER

WHAT MATTERS
Know and align care with what matters most to the patient.

MEDICATION
Review and optimize medications.

MENTATION
Prevent, identify, and manage delirium and cognitive changes.

MOBILITY
Promote and preserve mobility and function.

3 QUALITY DEPENDS ON ALL OF US

Every discipline contributes to preventing complications, preserving function, supporting safe transitions, and improving outcomes.

INTERDISCIPLINARY TEAM

OUR GOAL: Not simply helping older adults survive surgery—but helping them recover with their cognition, function, independence, and what matters most to them preserved.

GSV FRAMEWORK + 4Ms PATIENT-CENTERED CARE + INTERDISCIPLINARY TEAM = BETTER OUTCOMES FOR OLDER SURGICAL PATIENTS

Right Care. Right Person. Right Time. Every Time.

Note. Image generated with ChatGPT (OpenAI, 2026). Content informed by the American College of Surgeons Geriatric Surgery Verification Program and the Age-Friendly Health Systems 4Ms Framework (ACS, 2019; IHI, n.d.).

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Thank you!

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