RCSI HOSPITAL GROUP
GRÚPA OSPIDÉAL RCSI

3rd Annual Quality & Patient Safety Conference
Improving the Healthcare Journey for Patients & Staff

TITLE

Assessing effectiveness of an Outreach Visit Pathway direct from ED for patients seen by the Frailty Intervention Therapy Team (FITT) and requiring further follow up in their own environment

SUBMITTED BY

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ABSTRACT

INTRODUCTION

Falls are a leading cause of presentation to the Emergency Department for older adults. They often are at high risk of admission which can lead to other complications of frailty such as development of delirium or deconditioning. The risks of admission were further complicated in the past year due to COVID and its adverse outcomes on our older frail population which further highlighted the need to manage their needs at home where possible.

These above changes have led to FITT reviewing our practice and the scope of our outreach service.

METHODOLOGY

FITT therapists identified appropriate patients over 75 from the ED to complete outreach visits.

AIM

The aim of the project was to identify appropriate FITT patients to provide an Outreach visit from ED within 72 hours of discharge pending needs.

CHANGE IMPLEMENTED

Appropriate patients from the ED had an outreach visit for :

- Recurrent falls with potential environmental causes
- Unresolved delirium/advanced dementia with ongoing therapy needs/one off visits for education
- Assessment for therapy equipment
- Safe moving & handling techniques to family/carers

MEASUREMENT

- Readmission rate at 7 & 30 days post discharge from ED
- Onward referrals

RESULTS

- Over 10 months, August 2020-June 2021 34 outreach visits completed.
- Average CFS: 6
- Reasons for:
  - 12 for safety checks
  - 15 equipment provision/fitting
  - 6 mobility reviews
- Onward referrals:
  - 22 (PCCC OT, Physio, PHN & day hospital & ICT)
- Represent within 7 days = 0
- Represent within 30 day = 14 (41%)

VALUE

The provision of an outreach services allowed a swift therapy review in the patient's own home onwards referrals as indicated. Often these patients were likely to be admitted however the outreach provided a safety net to facilitate direct discharge from the ED with no representations within the first 7 days.

SUSTAINMENT

This has now become a key role of FITT & an SOP has been drafted to provide ongoing input.

ADDITIONAL INFORMATION

This has been presented at the IAEM & IGS national conferences.