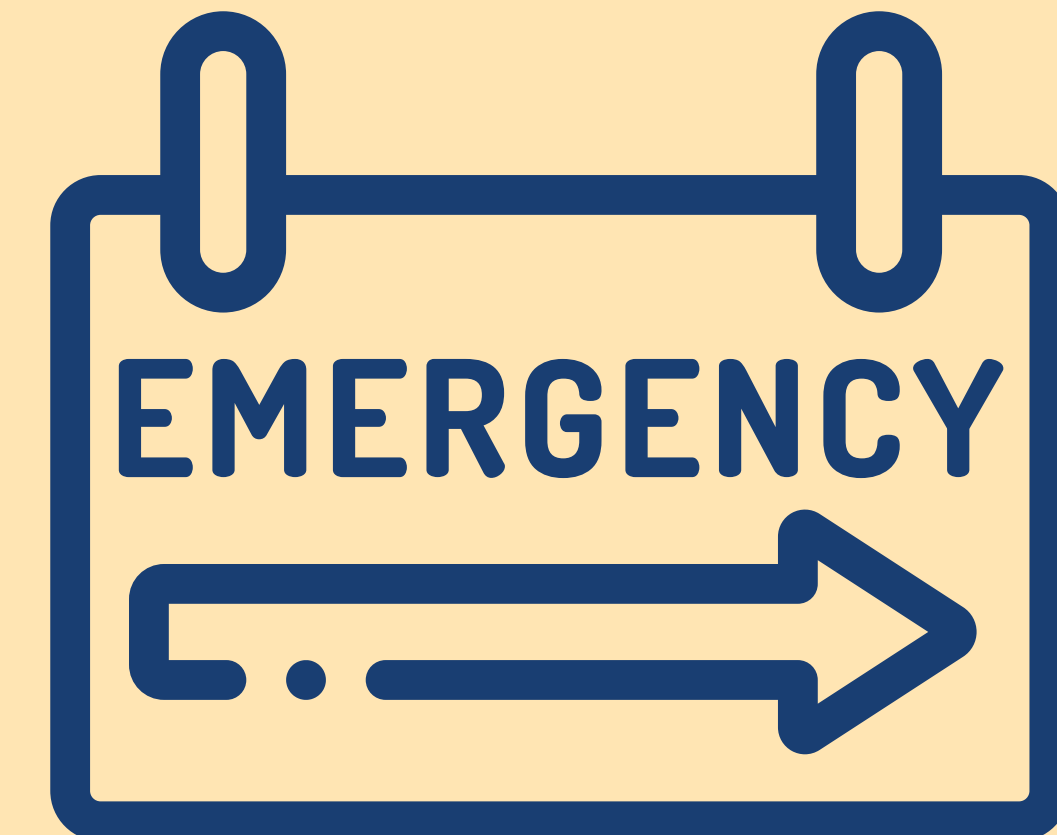


Reducing transfer of care home patients to the Emergency Department

Aim: Review existing research to explore how decisions to transfer care home residents to hospital are made and identify factors associated with likelihood of transfer.

The problem

A high number of care home residents aged over 65 are transferred to hospital emergency departments (ED). An **estimated 40% of emergency admissions for care home residents may be for avoidable conditions**. There is also lots of variability between care homes, with residents of some care homes being 8 times more likely to be transferred to the ED than others. **Identifying factors which predict hospitalisation of residents and understanding how transfer decisions are made could help explain variation and develop effective interventions to reduce unnecessary transfers.**



What our ARC is doing to help solve this

Two systematic reviews were conducted simultaneously looking for:

1. Qualitative evidence presented in existing systematic reviews regarding decisions to transfer residents to the ED.
2. Quantitative factors found to affect the likelihood of transfer of residents.

These reviews highlighted the complexity of decision making when transferring residents and the challenges in managing appropriate referrals to the ED. Decision making appeared less dependent on the nature of the acute deterioration of the resident and more on communication with family members, robustness of advanced planning, perceptions of the facility to be able to provide safe care and access to community services. We also identified multiple factors associated with transfer of care home residents to the ED, including: polypharmacy, care home quality rating, specific condition (COPD/Heart Failure), presence of specialist dementia units, age, presence of advanced directives and urinary catheters.

How this will impact future care and our health services

The findings will help to develop future interventions to reduce avoidable hospitalisations of residents and enable the use of routine data to compare different care homes.

