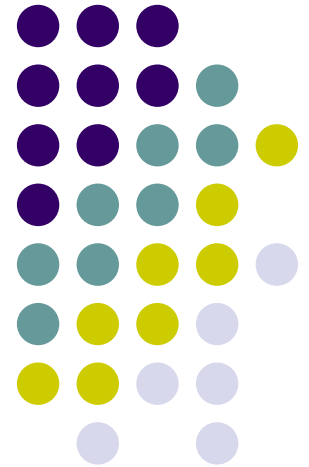


# Unrecognised health needs in elderly users of ACAT

---

Clinical Prof Jan Potter  
Director Acute Geriatrics  
Wollongong Hospital  
SESIAHS, NSW





# Background

- ACAT- Aged Care Assessment Teams
- Specific referral guidelines
- Central intake process & triaging
- 44% present to ED prior to ACAT assessment
- Mean 18.7 days from referral to first intervention for community referrals\*
- Medical issues being missed?

\*Dept Health and Ageing April-June 2007 Report

# CHIME July – Dec 2006



Issue	Jul	Aug	Sep	Oct	Nov	Dec	Total
Daily living issue	131	141	139	97	112	95	715
Environmental issue	4	9	5	10	17	2	47
Access to counselling service	6	3	4	3			16
I51.9 Heart disease, unspecified	2	6	3		2	2	15
M15.0 Primary generalised (osteo)arthrosis	4	2	2	1	3	2	14
Abnormality of gait & mobility		2			5	3	10
I10 Essential (primary) hypertension	2	3	1	1	2	1	10
F03 Unspecified dementia	3		1		2	1	7
E13.9 Other specified diabetes mellitus without complication	2	2	1				5
I64 Stroke, not specified as haemorrhage or infarction	2		1		1		4
G20 Parkinson's disease			1			2	3
Z00.8 Other general examinations			1	1	1		3
D48.9 Neoplasm of uncertain or unknown behaviour, unspecified	2						2
F00.9 Dementia in Alzheimer's disease, unspecified (G30.9+)			1		1		2
F09 Unspecified organic or symptomatic mental disorder		1			1		2
H54.2 Low vision, both eyes			1	1			2
I67.9 Cerebrovascular disease, unspecified				1		1	2
C39.9 Malignant neoplasm of ill-defined sites within the respiratory system	1						1
E14.9 Unspecified diabetes mellitus without complication				1			1
F01.1 Multi-infarct dementia					1		1
H40.9 Glaucoma, unspecified				1			1
I20.0 Unstable angina				1			1
I95.9 Hypotension, unspecified			1				1
J98.9 Respiratory disorder, unspecified							1
M13.99 Arthritis, unspecified, site unspecified		1					1
M48.09 Spinal stenosis, site unspecified		1					1
N19 Unspecified renal failure		1					1
R29.81 Falls							1
Z82.2 Family history of deafness and hearing loss						1	1
<b>Total</b>	<b>159</b>	<b>172</b>	<b>162</b>	<b>120</b>	<b>148</b>	<b>110</b>	<b>871</b>

Multi infarct dementia

1 fall

# Aims



- Does a structured screening process better identify health problems in elderly patients referred to ACAT?
- To what extent are elderly patients with potentially reversible health problems accepting of an outpatient consultation?
- Is a health intervention in these patients associated with reduced ED presentations and admissions?



# Methods

- Usual intake practice
- Client contacted next day (19 working days over 4 weeks)
- Standard question set
  - Activities for daily living
  - Falls
  - Incontinence
  - Medication issue
  - Behavioural issue
- Offer of geriatric clinic appointment



### ACAT Supplementary Screening Trial Data Collection (non GP referrers)

Date of referral to ACAT: \_\_\_\_\_ Date of trial contact: \_\_\_\_\_

Referrer: \_\_\_\_\_ Relationship: \_\_\_\_\_ Contact No: \_\_\_\_\_

Client: \_\_\_\_\_ MRN: \_\_\_\_\_

Cannot contact referrer:  \_\_\_\_\_

#### Assessment:

1. Recent Falls or near falls

2. Change in ability to wash, dress or mobilise

3. Recent change behaviour or cognition

4. Recent change in Continence

5. Recent mix up with medication

Client appropriate for Clinic:

Referrer offered appointment at

Date and time \_\_\_\_\_

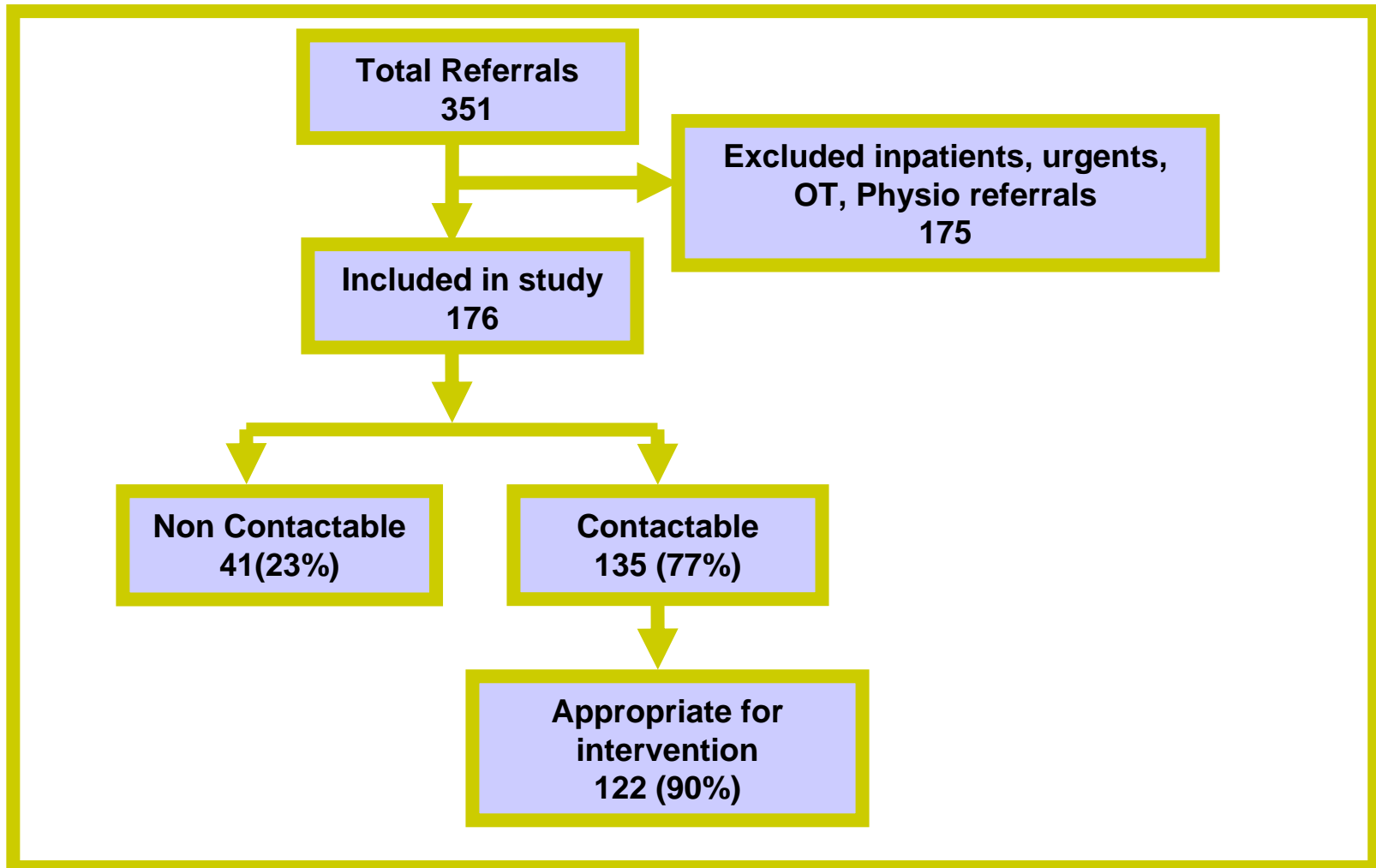
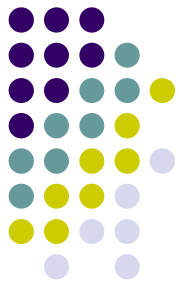
If not accepted , why \_\_\_\_\_

Client contacted to offer appointment:

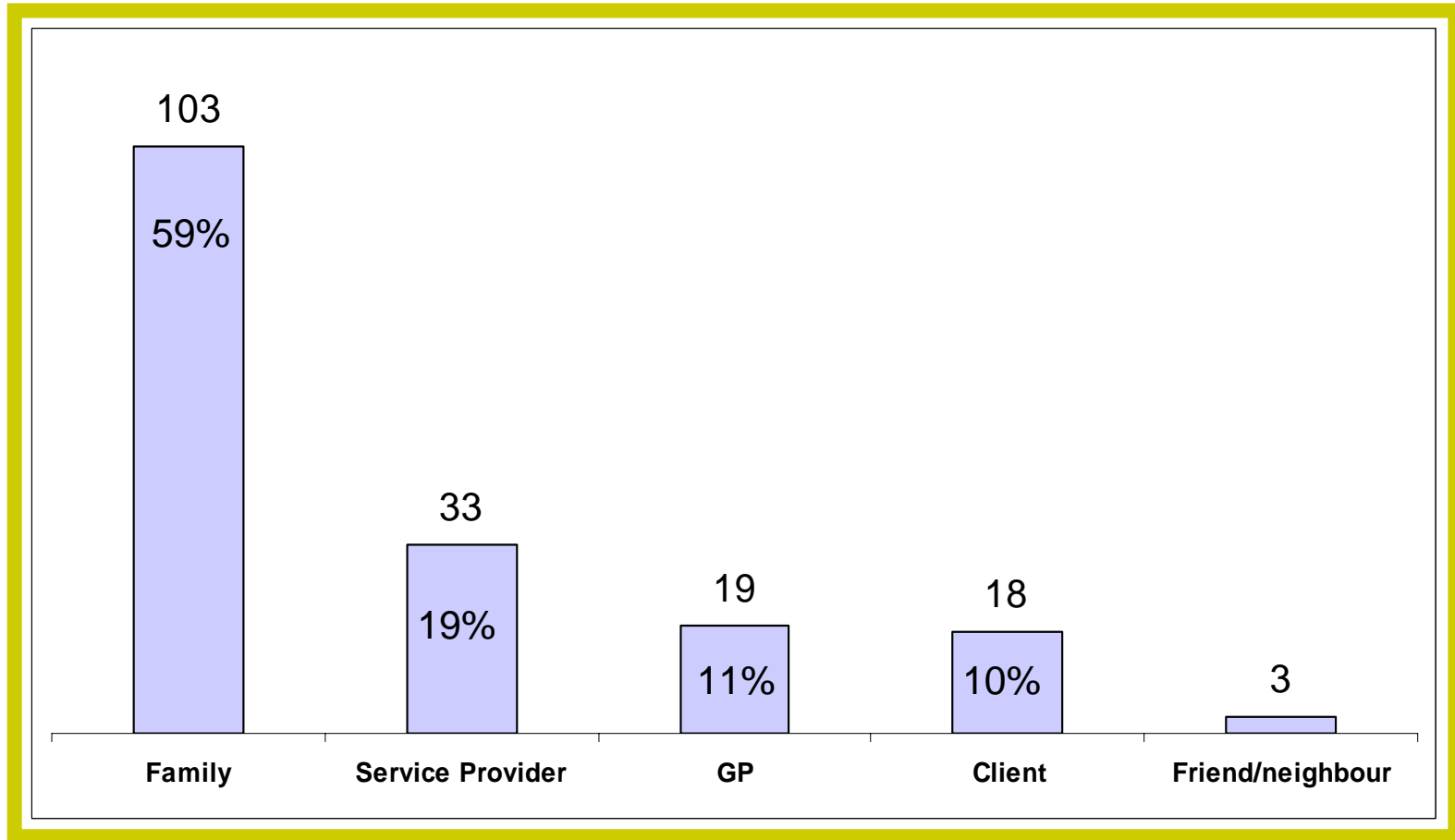
If not accepted , why \_\_\_\_\_

Any comments or notes

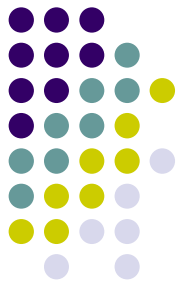
# Results



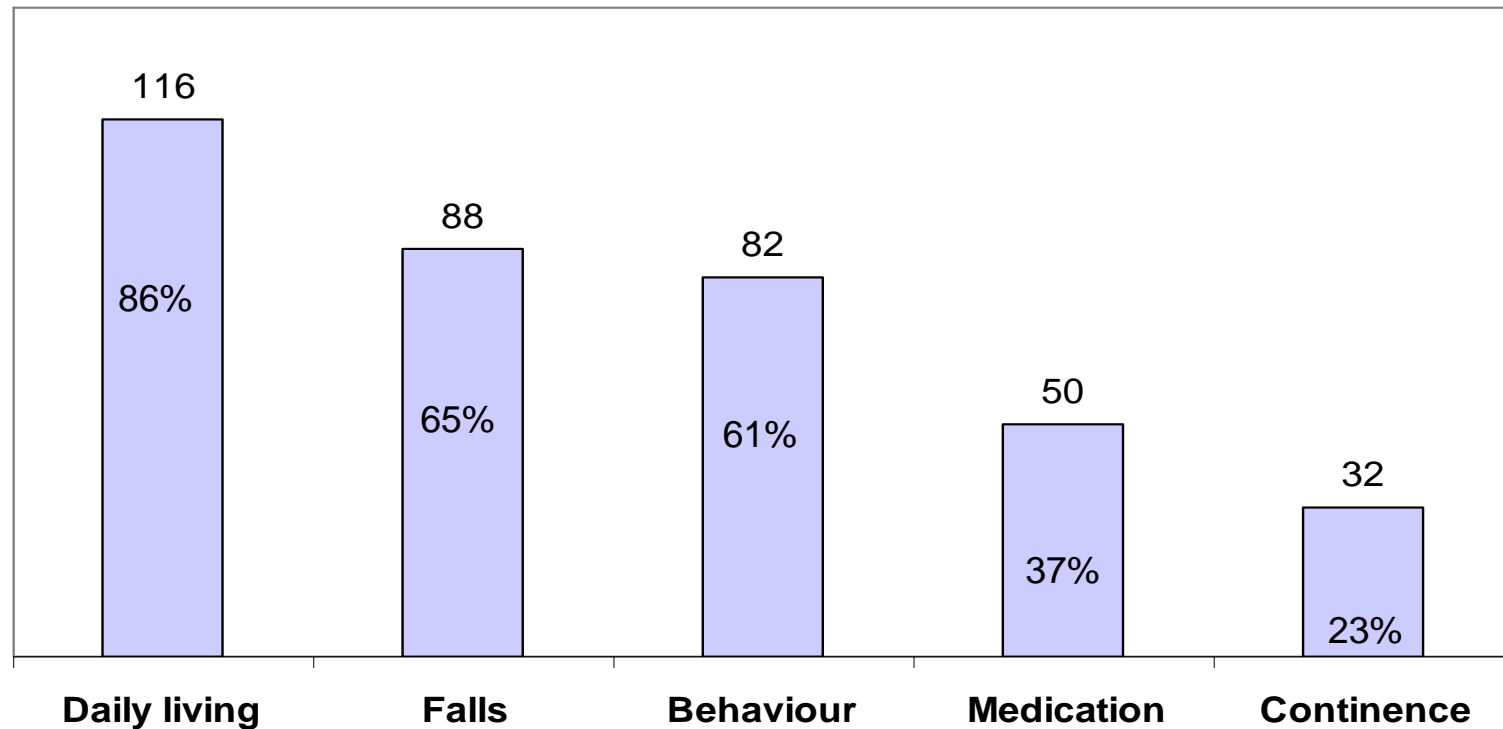
# Source of referrals



# Results



Number (%) of clients with identified issue\*



\* Not mutually exclusive

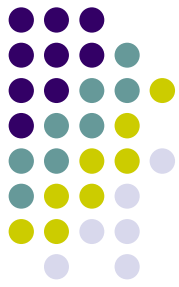
# ACAT identified issue for study period (CHIME)



<b>First Presenting Issue</b>	<b>Total</b>
Abnormality of gait & mobility	1
Daily living issue	208
Type 2 diabetes mellitus with unspec comp	1
Unspec diabetes mellitus w/out complic	1
Environmental issue	28
F03 Unspecified dementia	1
Low vision, both eyes	1
Essential (primary) hypertension	1
Heart disease, unspecified	1
Amputation of limb(s)	1

# Results

- Accepted clinic appt n= 46 (38%)
- Booked into clinic n= 39
- Data sheet completed n= 31



# Clinic outcomes

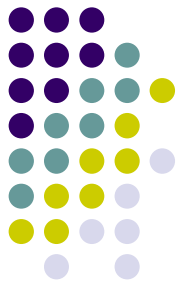


- 13/31 (42%) had medication change
- 12/31 (39%) had further referral made
- 2/39 required an elective admission
- 4/39 had an unplanned admission

# Results



	Clinic Attendees	Non acceptances
<b>Unplanned admission</b>	<b>4/39= 10.3%</b>	<b>18/76= 23.7%</b>
<b>ED presentations</b>	<b>5/39= 12.8%</b>	<b>30/76= 39.5%</b>
Falls issue	27/39= 69%	55/76= 72%
Medication issue	18/39= 46%	28/76= 38%
ADL issue	35/39= 90%	67/76= 88%
Behaviour issue	32/39= 82%	40/76= 53%
Continence issue	10/39= 26%	18/76= 24%



# Follow up

- Clinic non acceptors
  - Geography-distance to clinic
  - Personal choice
- Non-contactables
  - Inpatient admissions
  - ED presentations
  - Deceased

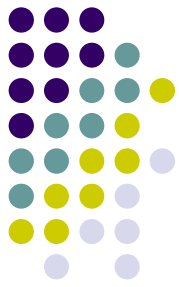
# Analysis interpretation

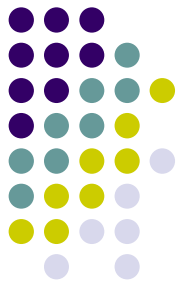


- Low acceptance of health intervention
- Association between health intervention and ED presentation/admission

# Limitations

- Small sample
- No data on covariates
- ? selection bias with clinic attendees





# Conclusions

- There are a high number of potential health related problems in clients referred to ACAT
- Many of these refuse health intervention
- Many accepted and had a benefit by attending
- Further support ACAT by integration with geriatric medical services

# Access and Referral Centre SHN

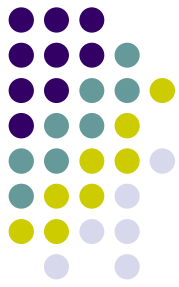




# Access and Referral Centre SHN

1. Client is aware and agreeable to the referral?
2. Requires annual renewal with no change?
3. Requires review of current assessment?
4. Is this a first contact?
5. Does client have a serious illness?
6. Recently discharged from hospital?
7. *Does ACAT have permission to access medical record?*
8. Diagnosis ( from CHIME) \_\_\_\_\_

# Access and Referral Centre SHN



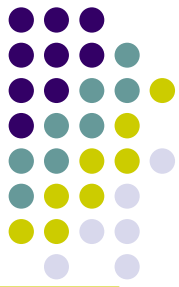
## **A. Daily Living:**

- Has services in place
- Aggressive, threatening or harassing

## **B. Environmental**

- Requires home modification
- Lives in Dept of Housing home
- Carer under stress, ill or unavailable

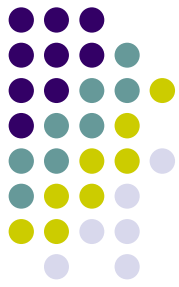
# Access and Referral Centre SHN



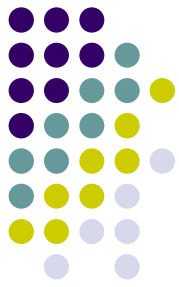
## C. Medical

- Recent falls or near falls
- Recent change in ability to wash, dress or mobilise
- Recent change in behaviour or cognition
- Recent change in continence
- Recent mix up with medication
- *Client has attended geriatrics outpatient clinic*
- *Agrees to be contacted for a specialist clinic appointment*

# Access and Referral Centre SHN



- Monitor
  - Client profiles
  - Clinic uptake
  - Medical management
  - ED presentations
  - Admissions



**Thank You**