

Transitional Care Placement in Older Adult Psychiatry: Community Care for Older People on Discharge

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Introduction

- The Transitional Care Program (TCP) helps older people at the end of their hospital stay organize for longer term care arrangements if unable to return to their home environment on discharge
- This program was established with the aim of minimizing the number of older people experiencing inappropriate, extended lengths of stay in hospital or being prematurely admitted to residential care
- Risk factors for older adult nursing home placement in the medical setting have included increasing age, living alone, low baseline ADL independence, LOS and decline in ADL independence during hospitalization
- In Australia there is limited literature on the factors associated with transfer to nursing homes on discharge from inpatient older adult psychiatric units.

Methods

- Patients discharged over a 3 year period from the Rockingham General Hospital Older Adult Inpatient Psychiatric Unit were analysed.
- Of all patients discharged over this period 30 were discharged to TCP after their admission.
- These patients were matched with a random sample of 30 patients that were discharged home via Excel Randomisation function.
- Variables regarding each of these patients were collected

Aims

- This audit aimed to review patients discharged to TCP to analyse factors which may allow for early identification of patients for transfer.



Results

Key Findings

Diagnosis

Of patients that were discharged from the Older Adult Unit, almost all (80%) that were discharge to TCP had a diagnosis of dementia, with the other 20% diagnosed with depressive and schizoaffective disorder. This was in opposition to the patients who returned home with only 6% of patients returning home with a diagnosis of Dementia.

Length of Stay

On average patients who were discharge to TCP stayed longer with these patients staying on average of 65 days when compared to patients who had returned home with an average of 45 days.

Cognitive Function

Patients transferred to TCP scored worse on cognitive testing with 85% demonstrating moderate and below cognitive scores. This compared with those who returned home which were identified 47% to have moderate or below cognitive scores.

Cognitive Testing	TCP	Returned Home
Unable to complete	5	0
Not Completed	16	13
MMSE>24	2	5
MMSE<24	3	4
MOCA>24	0	3
MOCA<24	4	4

Fall During Admission

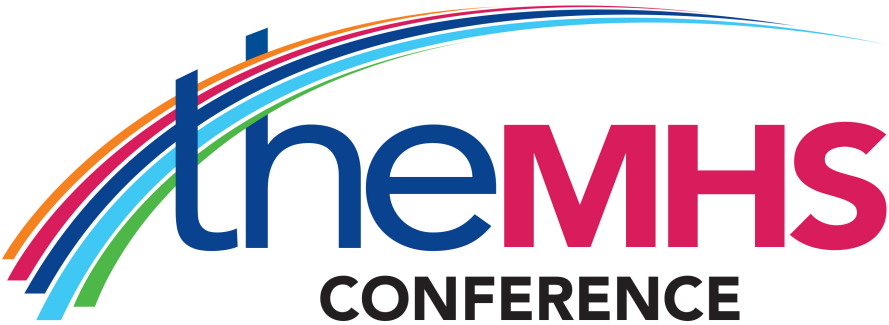
When identifying falls during admission, of all patients who were discharged to TCP, 33% of patients (10/30) had a fall, in comparison patients who went home 10% had a fall (3/30).

Aggression During Admission

When reviewing patients who expressed aggression, of patients who were discharged to TCP 43% (13/30) expressed documented aggression towards nursing staff, opposed to patients who went home where just 3% (1/30) expressed aggression, of which did not require a 1:1 special to contain risk of aggression. Of these patients 61% (8/13) required a 1:1 special for aggressive behaviour.

Conclusion

- This audit has identified a range of factors which are found at a increased rate in the TCP population, including a diagnosis of Dementia, prolonged length of stay, poor cognitive scoring, falls during admission and aggression during admission.
- Identifying older adult patients who are likely to be discharged into TCP may allow for early planning and organisation to best care for this group of patients.



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