

Predictors of short-term hospitalisation and emergency department presentations for people undergoing aged care eligibility assessment

BACKGROUND

186,000

ACATs are done nationally each year ~16,000* in South Australia alone



Using integrated aged care and health care data from the Registry of Senior Australians (ROSA), we examined how often older people experience hospitalisation and ED presentation after an initial ACAT and what the risk factors are.

STUDY COHORT

22,130

South Australians with ACATs between 2013–2016

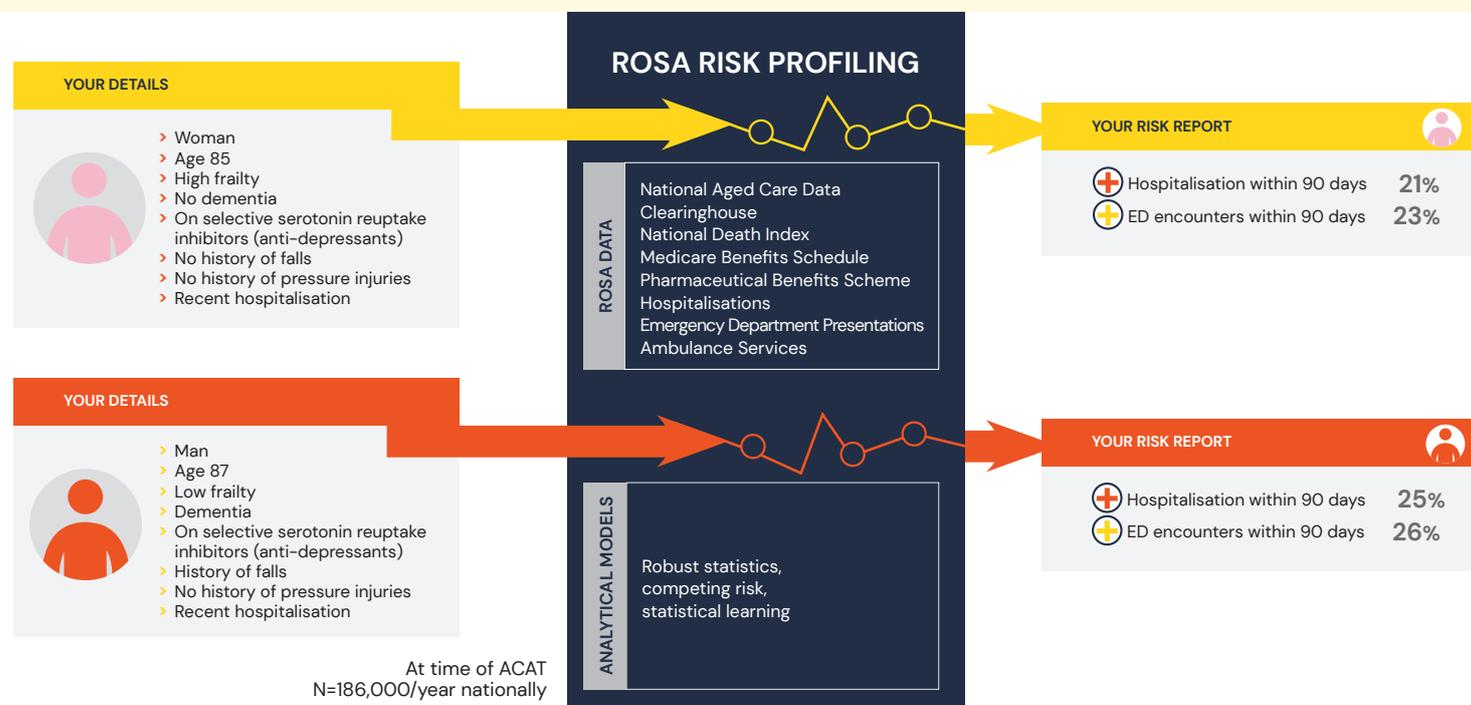
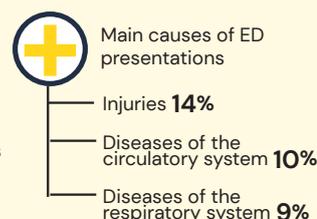
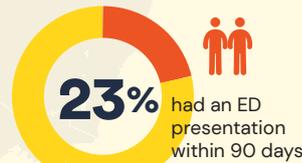
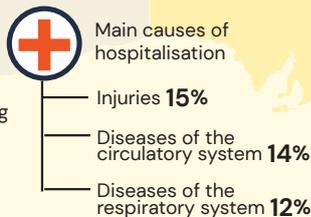
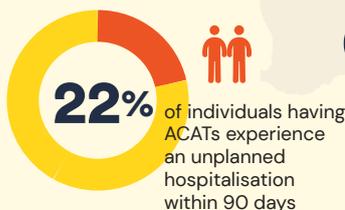
Mean age **83**



60% women

22% had dementia

IDENTIFYING PEOPLE AT RISK



25 factors are associated with these events (14 common to both, 6 for hospitalisation only, and 5 for ED only)

THE MAIN FACTORS ARE:	HOSPITALISATION	ED PRESENTATION
Recent hospitalisations	↑	↑
Recent ED presentations	↑	↑
Men vs women	↑	↑
Major city vs regional and remote areas	↓	↑
Number of medications	↑	↑
Increasing frailty	↑	↑
Increasing socio-economic disadvantage	↑	↑
Loop diuretic medication	↑	↑
Aged care eligibility assessment in hospital (short term effect)	↓	↓
Inhaled anticholinergic medication in women	↑	↑

↑ increased risk ↓ decreased risk

Inacio et al, Predictors of short-term hospitalization and emergency department presentations in aged care. J Am Geriatr Soc. 2021 doi: 10.1111/jgs.17317.

* ACAT – an aged care eligibility assessment conducted by an Aged Care Assessment Team member.

CONCLUSIONS

Several factors contribute to individuals' risk of

Hospitalisation and ED encounters

and these factors help us identify people and prioritise them for assistance to avoid requiring hospital-based care.

Several predictors of hospitalisation and ED presentation are identified at the time of aged care eligibility assessment.

This is an actionable period for targeting at-risk individuals to reduce hospitalisations.

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