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Standardized Comprehensive Measure to Guide Older Adult Discharge in Acute Care

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Standardized Comprehensive Measure to Guide Older Adult Discharge in Acute Care

Katlyn Agren & Madison Hirsch

Background:

- In the acute care setting, occupational therapists play an important role in providing recommendations for discharge. Striving for appropriate and safe discharge is critical in avoiding hospital readmission, reducing safety risks, and promoting optimal functioning in older adults.
- 3.3 million adults are readmitted into the hospital within 30 days after discharge in the U.S., costing \$41.3 billion annually (LaPointe, 2019).
- The average patient stay in the acute care setting is 5.5 days in the United States, putting occupational therapists in a time crunch to evaluate, treat, and prepare patients for discharge (OECD, 2017).

1 Ask: Research Question

Is there an all-inclusive standardized objective measure to guide occupational therapists in providing appropriate and safe discharge recommendations for older adults in the acute care setting?

2a Acquire: Search Terms

Databases: ProQuest, PubMed, ClinicalKey, Scopus, Taylor and Francis Journals, Cochrane Library

Search Terms: occupational therapy, acute care, discharge, discharge recommendations, safe discharge, assessments, standardized assessments, objective measures, evaluation, adults, older adults, geriatrics, elderly

2b Acquire: Selected Articles

Crennan & MacRae, (2010): Ethnographic study with a mixed-methods design to discover the analysis and clinical reasoning skills used by individual occupational therapists in discharge planning for older adults in the acute care setting.

Holm & Mu, (2012): Qualitative study with a phenomenological design. Experienced therapists were interviewed to determine the key factors that are considered when making discharge recommendations for elderly patients in the acute care setting.

3a Appraise: Study Quality

Crennan & MacRae, (2010): Level VI. n=10; Data was comprised from a questionnaire and subjective interviews. The in-depth one-on-one interviews were with therapists working at an acute care hospital. The clinical experience of the therapists ranged from 6 months to 16 years overall and 6 months to 7 years in an acute care hospital. Data was integrated and coded into themes for evaluation. Participants were obtained through convenience sampling and worked in various units throughout the hospital. Limitations include the small sample size, a sample derived from one hospital, one-time interviews, low level of evidence, and no peer evaluation of data.

Holm & Mu, (2012): Level VI. n=7; Participants from acute care hospitals were recruited through a convenience and comprehensive sampling strategy. Participants were required to have 8 years of experience as an OT and 5 working in acute care. Interviews were 60 minutes long, semi-structured, and included a case study and 10 open-ended questions that focused on the discharge planning process in the acute care setting for elderly clients. Data analysis was conducted through a three-step process of describing, comparing, and relating data by the investigator. Peer examination was used to increase credibility of data. Limitations include the small sample size, a sample that included therapists from hospitals with similar demographics, one-time interviews, and low level of evidence.



3b Appraise: Study Results

(ADVANCE Staff, 2008)

Crennan & MacRae, (2010): Evaluation of the data showed the number one assessment method used was non-standardized functional observations. Discharge assessment overall included the use of observational skills, clinical reasoning, and standardized assessments for specific skills as needed.

Holm & Mu, (2012): Five themes emerged from interviews with experienced occupational therapists in the acute care setting regarding their perceptions of discharge planning with elderly patients. These included looking at the total picture, prioritizing client-centered collaborations, emphasizing cognitive functioning, enhancing occupational engagement, and framing assumptions about elderly discharge planning. Discharge recommendations were made primarily through non-formal occupational performance assessment.

4 Apply: Conclusions for Practice

Occupational therapists play a key role in the discharge planning process within the acute care setting. To further evaluate this process, future research is needed that is more comprehensive and larger in scale to determine current discharge assessment and recommendation practices by occupational therapists in acute care hospitals. The results from the two studies show that there is not an all-inclusive standardized discharge assessment being used by the occupational therapists with older adults in acute care. It would be beneficial to develop a reliable and valid objective assessment that guides therapists to make appropriate and safe discharge decisions in a timely manner for older adults in the acute care setting.

References:

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Further research and development is needed to create a comprehensive and efficient occupational therapy standardized assessment for the discharge planning of older adults in the acute care setting.

