

ED 2 HOME

**Background:** Like many hospitals, NRGH faces high volumes of visits to the Emergency Department (ED) by seniors with mental and physical health care needs. Evidence supports that most elderly patients have better health outcomes if they can manage at home with appropriate community and primary care supports in place, rather than being admitted as an inpatient.

**Goal**: The community team, ED team, and "ED2HOME" physicians are partnering to proactively identify and assess 70+ year old patients to go home safely, directly from the ED at NRGH. Patients are to be discharged safely with rapid (often same-day) community services in the home, with coordinated appointments with family physicians, and with team communication to ensure that appropriate follow up is in place to meet the client's ongoing needs.

**Mission Statement:** The ED to HOME initiative in Nanaimo is committed to delivering safe, efficient, and wellcoordinated care for seniors aged 70+ in alignment with the philosophy of Home is Best. We aim to increase the ability for seniors to have access to timely and quality health care services coordinated with primary care in the comfort of their own home instead of in the hospital.

# WHO'S INVOLVED?

This work will be led by a partnering of the following:

- ED Team: Manager, CNLs, RNs, SW, Physicians
- **Community Team**: Clinical Nurse Leader, ED2HOME Physician, Manager, RNs, OT, SW, Pharmacists
- Primary Care: GPs, NPs
- Other: Liaison team, Palliative Care, Pharmacy, Mental Health, Patient Representative

#### Sponsors are:

Damian Lange - Director, Clinical Operations, NRGH Shelley McKenzie - Director, Nanaimo Community Jonathan Schmid – Director, Patient Access/Flow Dr. Derek Poteryko – Medical Director, Nanaimo Community Suzanne Fox - Executive Director, Geo 2 Drew Digney - Executive Medical Director, Geo 2

# **RESULTS**

The ED2HOME program started March 1<sup>st</sup>. Results: 46 clients were successfully sent home as of April 30th! Thank you to all staff involved in this collaborative effort!

# WHY DO THIS?

- Provides opportunity for frail seniors to regain strength and independence in comfort of own home
- Reduces the health risks and outcomes of our senior population associated with an unnecessary admission
- Aligns with the Home is Best strategy
- Appropriate utilization of inpatient beds at NRGH
- Integrated team approach engaging GPs in community

### OUTCOMES TO EXPECT.....

- Improved client experience
- Reduced unnecessary admissions
- Reduced ALC conversion rate
- Reduced LOS rate
- Reduced occupancy rate
- Reduced ED Revisit rate
- Increased ED Discharge rate
- Improved community response time

## Who is Supporting This?

Laura Cross – Geography 2, Change Leader Email: <u>Laura.cross@viha.ca</u> Cell#: 250-816-3599