

**QUINTE HEALTH CARE (Belleville)
PROVIDENCE CARE
COMMUNITY CARE ACCESS CENTRE
COMMUNITY SUPPORT SERVICES NETWORK
SOUTH EAST LOCAL HEALTH INTEGRATION NETWORK**

MEDIA RELEASE – January 24

Frail elderly seniors matched with home support right in the Emergency Department

Program aims to provide necessary home supports when frail elderly leave the hospital

BELLEVILLE – Frail elderly individuals who go to the Emergency Department with a medical problem will have a better chance of addressing any situations at home that contributed to their health condition, thanks to an innovative program starting at Quinte Health Care, Belleville site.

The EASIER + program uses a simple questionnaire to assess high-risk elderly persons in the Emergency Department. Those who are found to need home care support are referred to a geriatric case manager -- a health care professional who is trained to match individuals with home nursing care, social supports, and home care services, while referring patients to other community support services.

“Most of the time, a frail elderly person’s trip to the emergency room results from a significant medical condition,” says John Puxty, MB, ChB, FRCP(C), who developed EASIER + for the South East region. “Up to 40% are repeat visits. But it’s not enough to treat the medical condition and send the person home without putting in place home support and communicating with the family physician.” Problems such as difficulties taking medication, risk of falls, or poor nutrition can be identified and avoided if home supports are put into place, adds Dr. Puxty, who is Chief of Staff at Providence Care.

“That is why Providence Care is engaged in training the Community Care Access Centre and Community Support Services staff to help the frail elderly connect with community supports and specialist services,” Dr. Puxty says.

Accessing home support when it’s needed

Assigning a case manager to the frail elderly person right in the Emergency Department means not only that patient assessment is streamlined, but the patient gets any help needed at home as quickly as possible, adds Bruce Laughton, President and CEO of Quinte Health Care. “One benefit of this program is that some patients will spend less time in the Emergency Department than they would otherwise. In other cases, EASIER + will mean that we can avoid unnecessary hospitalization altogether.” 2

All patients in the Hospital have faster access to the care that is right for them when unnecessary hospitalizations are avoided, he adds. Quinte Health Care is partnering with Community Care Access Centre and Community Support Services in the program, which is also due to roll out at Kingston General Hospital later this winter.

It makes good sense for a case manager to assess a frail elderly person for any necessary home support right in the Emergency Department, according to David Marshall, Executive Director of the South East Community Care Access Centre (CCAC). “As hospitals here have utilization pressures, it makes sense for one of our case managers to assess people for home supports right in the Emergency Department. This way, we ensure that we’re caring for people in the most efficient and timely way possible, while serving people in their home whenever possible.”

The Community Care for Seniors agencies that assist seniors to live at home also welcome EASIER +, says Debbie MacDonald Moynes, Chair of the Community Support Services Network in the South East. “This project means that the frail elderly person and their caregivers know that home supports will be lined up for them as soon as they are discharged from hospital. The sooner they are matched with necessary community supports and home care, the sooner they feel safe and confident about returning home.”

Seniors in the South East

The fact that the South East region has one of the highest percentages of people aged 75 or over in the province means that health care providers have a special opportunity for innovation and leadership in caring for the elderly, says Paul Huras, CEO of the South East Local Health Integration Network.

“This kind of partnership among health care providers is a great example of what the word ‘integration’ means in the LHIN name,” he adds. “Sometimes we find solutions through working smarter. In this case, we see greater value for our existing health care resources by fine-tuning the access to care. It’s better for the hospital and the system as a whole, but most important, it’s best for the frail elderly person who is returning home.”

###

For information or interviews:

Jenn Goodwin
Providence Care
[John Puxty, M.D.]
Kingston
613 548-5567 #2668
613 329-0829

Susan Rowe
Quinte Health Care
[Bruce Laughton]
Belleville
613 967-7400 #2331

Polly Thompson
SE Local Health Integration Network
[Paul Huras]
Belleville
613 967-0196 #221

Joël Côté
Community Care Access Centre
[David Marshall]
Kingston
613 544-8200 #4258

Debbie MacDonald Moynes
Community Support Services Network
Picton
613 476-7493

FACTS & STATS* about EASIER+

EASIER+ is part of the province's Patient Flow Initiative, announced February 16, 2007, to improve patient flow from hospitals to the community.

EASIER+ is starting at Quinte Health Care (Belleville site) in January 2008, and is projected to roll out at Kingston General Hospital in the late winter.

* 70,000+ people – or 15.7% of population - aged over 65 in the South East region (2004)

* This is higher than the provincial average of 12.8%

* The proportion of those aged over 75 years is also greater than the provincial average

* Over the next decade the number of people 75+ years is projected to increase faster than any other age group

* Individuals over 65 years accounted for 21% of visits to Kingston General Hospital, but 49% of all admissions from the Emergency Department (ED) [1998-1999]

* This includes individuals aged 75+ years who represented 11% of Emergency Department visits, but 28% of admissions

* Many elderly persons have several chronic conditions; these may include cognitive changes

* Nearly 5% of elderly patients had 5 or more non-scheduled repeat visits to the Emergency Department

* Frail elderly individuals who attend the ED are at significant risk for admission to the hospital within one month, and frequent repeat visits to the ED

* Risk factors that predict a poor outcome include hearing loss and vision loss, use of several medications, dependency for the activities of daily living, sudden change in function, and diagnosis of several diseases

Did you know that of the patients served by SE Community Care Access Centre ...

* 64% are over 65 years

* 43% of those are aged 75-84

* 30% of this group are aged over 85 years

Did you know that the 33 Community Support Services in the South East region ...

* Represent 9,074 volunteers

* Donate 500,000 hours of service each year

* Donate volunteer work valued at \$11.5 M each year

* *From latest available data*
