

# ESCAPE85

## Establishing System Change for Admissions of People 85+

### INFORMATION FOR CASE STUDY SITES

Funded by the National Institute for Health Research Service Delivery and Organisation  
Jan 2012 to Dec 2013

#### **The Study**

Unplanned admissions in those aged 85+ account for 10% of all unplanned admissions and are likely to rise. Older people admitted to hospital have longer stays; are prone to complications; and have more difficulty returning home. The impact of initiatives to reduce emergency admissions are dependent on the system of care in which they take place. By comparing areas with differing rates of admissions, this research will identify what systems policies and procedures make a difference.

The aims of the study are to:

- Investigate systems associated with increases/decreases in unplanned admission rates in those aged 85+
- Develop recommendations based on best practice to inform providers and commissioners
- Identify the challenges of starting to implement recommendations

#### **Case Study Work**

Six English case study sites will be chosen based on their rates of unplanned admissions for people over 85. Three of the sites will have decreasing or low admission rates and three will have increasing or high rates. Work in each site will take place over a period of 6 months. The work is not intensive and will not place great demand on the organisations involved. At the end of the study (Dec 2013) a report will be produced containing recommendations for system change to improve emergency admission rates of people 85+.

#### **Assistance Required in Case Study Sites**

##### **1. Liaison person (1 per organisation)**

A liaison person is required in each site to be a point of contact for the researchers; advise on local issues; help identify relevant documents; assist with identification of and sending invitation letters to interviewees.

##### **2. Collection of documentation**

The team will require assistance to identify and obtain any relevant documentation on unplanned admissions for people 85+ (policies, interventions, procedures, internal evaluations)

##### **3. Local data**

The researchers will require access to local data on unplanned admissions and use of alternative services.

#### **4. Interviews and focus groups with staff**

In each case study site the research team will be carrying out interviews and focus groups with 50-60 health and social care professionals:

Round 1: 10 interviews with commissioners and managers of health and social care, clinicians and lead care providers involved in unplanned admissions of older people.

Round 2: 10-15 Interviews/focus groups with care providers including clinicians and nurses in ED and AMU, managers of intermediate, integrated care and re-ablement provision, GP's and social care providers.

The team require staff to be identified and letters of invitation to be sent out. The letters and information sheets will be provided. Researchers will contact staff to arrange interviews/focus groups. The team may need assistance with booking rooms and refreshments for interviews/focus groups. Interviews and focus groups will take 1-2 hours. We will need permission from managers to release staff from their duties to take part in an interview or focus group.

#### **List of Potential Interviewees from Health and Social Care**

Strategic policy makers for unplanned admissions / older peoples services

Commissioners and managers involved in unplanned admissions and initiatives to reduce them

Clinicians and lead care providers in the acute and community sectors

Medical and nursing staff in ED and AMU, Hospital social workers

Intermediate / re-ablement / integrated care providers; GP's and social care providers

#### **Questions to be asked in interviews and focus groups**

What are the systems, policies and procedures in the area which effect unplanned admissions and how have they changed in recent years.

What is the history, context, process affecting unplanned admissions. Successes and challenges.

#### **5. Focus group with local PPI group**

Assistance getting in touch with local PPI groups would be appreciated. One PPI focus group will take place in each Case study site.

#### **Drawbacks and benefits**

The only drawback to taking part is staff time – approximately 1-2 hours for each participant. Possible benefits are recommendations to improve systems of emergency care for people 85+.

#### **The Research Team**

The research is being carried out by an experienced team of academics, clinicians and researchers at the University of Leicester, the University of Loughborough, Warwick University and, University Hospitals of Leicester NHS Trust.

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