

Royal College of Emergency Medicine Care of Older People Quality Improvement Project at University Hospital of North Durham

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Abstract

Background: Older adults represent a significant proportion of emergency department (ED) attendances and subsequent hospital admissions. Delirium and falls are among the most common presentations in this cohort. As part of the national Quality Improvement Project (QIP) led by the Royal College of Emergency Medicine (RCEM), this local project aimed to assess and improve care delivered to patients aged 75 and above presenting to the ED.

Aims: To improve the care of older patients in the ED by:

1. Enhancing screening for delirium, frailty, and falls risk.
2. Ensuring appropriate actions are taken based on screening results.
3. Meeting patients' basic care needs while in the ED.

Methods: Prospective data were collected from February to November 2024 (n=158) using national RCEM criteria and uploaded to the RCEM QIP platform. Inclusion criteria included patients aged ≥ 75 with NEWS2 < 4 . Results were benchmarked against national data (n=1997).

Results:

- **Delirium Screening** (using 4AT) was performed in only 4% locally vs 15% nationally.
- **Falls Risk Assessment** was completed in 55.7% locally vs 43.8% nationally.
- **Frailty Screening** using Rockwood scores was completed in 60% locally vs 53% nationally.
- **Delirium Management Plans** were initiated in 33% of relevant cases vs 28.8% nationally.
- **Falls Mitigation** was implemented in 91.9% of at-risk patients vs 32.6% nationally.
- **Comprehensive Geriatric Assessment** (CGA) was initiated in 6.5% locally vs 35.5% nationally.
- **Safety Rounds** were documented in 24% locally vs 31% nationally.

Conclusion: While the ED at UHND performed well in falls risk assessment and mitigation, key areas such as delirium screening and initiation of CGAs require targeted improvement. Teaching sessions and documentation training have been initiated. A second audit cycle is planned to assess the impact of interventions.