

2016/2017 Summer Studentship Project Application Form

Send to: Research Office, University of Otago Christchurch, PO Box 4345, Christchurch, by 5pm on **4 July 2016**

Supervisor Information (First named supervisor will be the contact):

First Supervisor's Name and Title: Dr Claire Heppenstall

Department - UOC &/or CDHB (if applicable): Medicine (Health care of the elderly) UOC

First Supervisors Phone: 027 349 4703

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First Supervisors Mailing Address: claire.heppenstall@otago.ac.nz

Co-Supervisors Name and Title(s):

Research Category (Choose one category only – to be used for judging the students' presentations):

Clinical

Laboratory

Community

Project Title (20 words MAXIMUM):

An evaluation of factors involved in early unplanned readmissions of frail older people to hospital

Project Description:

Introduction: The CDHB Community Rehabilitation, Enablement and Support Team (CREST) service was introduced in 2011 with the goal of keeping frail older people as independent as possible in their own homes. Older people undergo multidisciplinary assessment and rehabilitation in their own homes using an individualized goal-directed ladder. However the service has not previously been formally evaluated, and so is currently undergoing a detailed evaluation. A cohort of 232 older people has been recruited to date, with data collected on function in daily activities, frailty, cognition, medical conditions and medications.

Early unplanned hospital readmissions are a significant issue in this group. They are associated with poorer outcomes including functional decline, worse quality of life, and discharge to Aged Residential Care. Initial data from the CREST evaluation project has found a 28.1% readmission rate within the first 6 weeks (Heppenstall et al, 2016, unpublished data). Likewise another New Zealand study in Auckland found high readmission and emergency department attendance rates (1). This raises the question of why these unplanned readmissions are occurring which this project seeks to address.

Aim: To determine reasons for early readmission to hospital in a cohort of frail older adults who have recently undergone a hospital admission.

Possible impact (in lay terms): Readmissions to hospital are seen as a negative outcome for both individuals and the health service. This project will assess reasons for readmissions in a group of frail older people. These findings have the potential to guide development of services such as CREST for these people.

Method:

This study will be a retrospective cohort study. It will use the existing cohort and access electronic medical records to ascertain which participants have had a further early readmission. Discharge summaries will be assessed and readmissions classified as:

1. Acute medical or surgical diagnosis requiring inpatient care.
2. Exacerbation of existing chronic medical condition
3. Readmission with same condition which was treated during index admission
4. "Geriatric" syndrome such as falls, decreased mobility or delirium with or without underlying medical condition
5. Functional disability or decline, unable to manage activities of daily living at home, with or without underlying medical condition

For each group other variables including function, frailty and cognitive scores will be compared to assess differences between groups readmitted. Statistics will be descriptive.

Student Prerequisites (eg. Medical Student) if applicable:

None