

The PACE-IT Project

Partnerships in Aged-Care Emergency services using Interactive Telehealth

Issued: 3rd September 2019

What is PACE-IT?

PACE-IT is an innovative project that uses Telehealth to enhance the current Aged Care Emergency (ACE) care model. It links RACF staff and residents of residential aged-care facilities (RACFs) with the ACE/AgedCare Service in Emergency Teams (ASET) Nurse in the Emergency Department (ED).

The PACE-IT project aims to improve the ACE service outcomes for RACF residents by reducing avoidable presentations to the ED, reducing hospital admissions and ensuring appropriate care is delivered to residents by the right person in the right place, and in a timely manner.

Why is PACE-IT important?

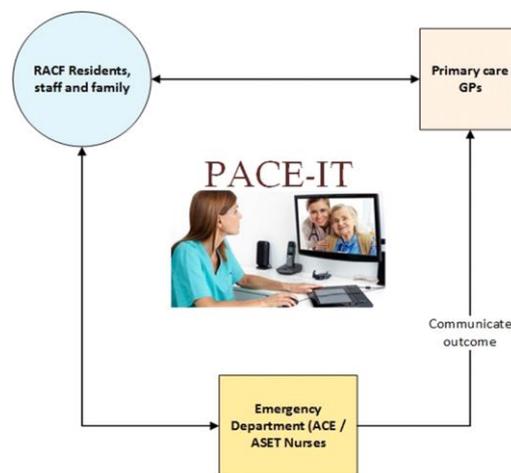
Nationally, 201,000 people live in residential aged care¹ and 75% require an emergency transfer to ED.² Research highlights the ongoing unnecessary transfer of aged care facility residents to ED, with as many as 44% of transfers to ED considered unnecessary.³

Elderly residents who present to EDs are more likely to be readmitted to a hospital, have longer hospital stays, face major risks and harmful consequences and can be exposed to hospital acquired complications. Telehealth has been shown to be acceptable to staff and families, by reducing the disruption and distress associated with unnecessary transfer to hospital for residents and carers.

The potential outcomes include the reduction of unnecessary RACF resident presentations to ED, reducing the likelihood of hospital admission. In addition, partnerships and decision making between ED and RACF staff will be strengthened resulting in improved bidirectional communication and increased skill and confidence of RACF staff.

References:

1. Australian Institute of Health and Welfare (AIHW). 2016-17 Report on the Operation of the Aged Care Act 1997. 2017.
2. Dwyer R, Gabbe B, Stoelwinder J, Lowthian J. A systematic review of outcomes following emergency transfer to hospital for residents of aged care facilities. *Age and Ageing*. 2014;43(6):759-66.
3. Stokoe A, Hullick C, Higgins I, Hewitt J, Armitage D, O'Dea I. Caring for acutely unwell older residents in residential aged care facilities: perspective of staff and general practitioners. *Australasian Journal of Aqinq*. 2016;35(2):27-132.



Telehealth consultation process

How will we do it?

This project is funded through a Ministry of Health Translational Research Grant Scheme and will be implemented in 16 RACFs partnered with 4 EDs in Hunter New England and Western NSW Local Health Districts. Implementation of the PACE-IT intervention will be staged over a period of 8 months from February 2020 to October 2020 with implementation in two RACFs per month.

If successful this project will provide strong evidence to expand this intervention more broadly and inform state-wide implementation strategies.

Project Timeline:

1. The project team will be visiting the participating EDs and RACFs to provide information to staff about the project during **Sept 2019**.
2. Implementation/advisory groups will be organised requiring representation from each site in **Sept 2019**.
3. Staff education, training and implementation of visual telehealth assisted consultation will commence from **Feb 2020**.
4. RACF staff surveys will be collected after each telehealth consultation.
5. RACF, ACE nurse, resident and carer focus group interviews will be conducted approximately **3 months** post implementation.
6. Ongoing support will be provided and regular face to face meetings with champions will be organised.
7. Feedback on the study findings will be provided in early **2021**.