

# Promoting Safe Care Transitions

## Admissions, Discharges & Transfers

Ellen Flaherty, Ph.D, APRN, AGSF

Director, Dartmouth Centers for Health & Aging

**AHRQ ECHO National Nursing  
Home COVID-19 Action Network**



# Today's Speakers



Ellen Flaherty  
Director, Dartmouth  
Centers for Health & Aging

# Objectives

- Describe safe nursing home admission process during COVID-19
- Describe safe nursing home discharge process during COVID019
- Identify models that support reducing avoidable facility transfers

# Pre-Admissions & Readmissions

## Screening (to determine cohort)

**Clinical Indicators/Symptoms:** Fever of 99F or >, cough, runny nose, sore throat, nasal congestion, aches, shortness of breath, tachycardia, O2 sat < by 3% or greater since last taken, new onset of confusion, new onset of GI issues and general malaise

**History of Exposure:** Has the resident come in contact with a person with confirmed COVID-19 in the past 14 days?

# Cohorting

Cohorting is an important part of admitting and re-admitting a resident to prevent or minimize risk of exposure and spread of infection within the facility.

## Sources of information:



# Cohorting Admissions or Readmissions

## 3 Types of “Units”

1. COVID Positive
2. Admission/Observation Unit
3. General/Standard COVID free Unit

# Cohorting Admissions & Readmissions (Post Screening)

## 3 Categories of Residents

1. Positive COVID → COVID unit
2. Positive COVID Indicators on Screening (must be tested) → AOU
3. No COVID Indicators or negative test < 72 hours → AOU

# Admission Observation Unit

- Private rooms if available (cohort based on exposure & risk)
- Dedicated Staff required to use “full COVID” PPE
- 10 – 14 days: may or may not have test requirement before discharge into general care



# COVID Unit

- Private rooms if available (cohort based on exposure & risk)
- Dedicated Staff required to use “full COVID” PPE
- Move to general unit 7 days after first symptoms or positive test

# Discharges

- Usual discharge instructions with explicit COVID infection and immunization status
- Any re-admission would require 14 day AOU stay regardless of the length of time since discharge

# Transfers

## Key Elements of Safe Transfers

- Pre-acute event goals of care
- During the event interprofessional (nursing, medicine, patient & family or surrogate communication is essential
- Warm hand-off to receiving institution
- Transfer documentation that includes standard elements including COVID-19 history and COVID-19 vaccination status

# Reducing Nursing Home Transfers

- BOOST (Hospital Based)
- ProjectRED (Hospital Based)
- INTERACT (Nursing Home Based)
- OPTIMISTIC (Nursing Home Based)
- RAFT (Nursing Home Based)

# INTERACT (Nursing Home Based)

INTERACT<sup>®</sup> (Interventions to Reduce Acute Care Transfers)

Quality improvement program that focuses on:

- Management of acute change in resident condition
- Uses clinical and educational tools and strategies

Tools and guidance available at:

<https://pathway-interact.com/>

# OPTIMISTIC (Nursing Home Based)

OPTIMISTIC (Optimizing Patient Transfers, Impacting Medical Quality and Improving Symptoms: Transforming Institutional Care)

- Ongoing CMS project focusing on avoiding unnecessary hospitalizations
- Project staff are embedded into each facility to extend clinical resources by mentoring nursing staff, implementing evidence-based tools to improve care and communication, and leading efforts in advance care planning

<https://www.optimistic-care.org/>

# RAFT (Nursing Home Based)

## RAFT (Reducing Avoidable Facility Transfers)

Quality Improvement model focusing on:

- Eliciting goals of care pre-acute event (“What Matters Most”)
- Acute event management by trained on-call clinicians
- Post transfer de-brief

[https://www.jamda.com/article/S1525-8610\(19\)30297-X/fulltext](https://www.jamda.com/article/S1525-8610(19)30297-X/fulltext)

# Summary

## SAFE TRANSITIONS

- Pre-admission screening
- Cohorting
- Avoid transfers

Goals of Care conversations/POLSTS/MOLSTS/COLSTS pre-event

- Communication with warm hand-off is key for safe discharges & transfers



**AHRQ ECHO National Nursing  
Home COVID-19 Action Network**

