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## *Quality Improvement Initiatives for the Care of Geriatric Patients in the Emergency Department*

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The American College of Emergency Physicians (ACEP) recognizes that the care of geriatric patients provides both unique challenges and opportunities for improvement in outcomes and patient experience. ACEP supports the continued development of quality improvement initiatives for the care of geriatric patients in the emergency department.

Some general categories and potential indicators of quality in the care of elderly patients, as outlined in the *Geriatric Emergency Department Guidelines*,<sup>1</sup> include, but are not limited to the following:

- Clinical
  - Optimal patient outcomes
  - Pain management
  - Geriatric-focused screening tools
  - Integration of geriatric psychiatry
- Operational
  - Admission/readmission rates
  - ICU admission rates
  - Use of observation units
  - Length of stay in acute care setting
- Safety
  - Falls
  - Iatrogenic complications
  - Medication appropriateness, interactions, errors (including polypharmacy)
- Care management
  - Transitions of care
  - Discharge planning
  - Outpatient follow-up
  - Home health services, hospice, and palliative medicine
  - Caregiver (ie, family, power of attorney) support
- Structural
  - Emergency department staffing and expertise
  - Physical environment

<sup>1</sup> [\*Geriatric Emergency Department Guidelines\*](#); Joint Statement by the American College of Emergency Physicians, American Geriatric Society, Emergency Nurses Association, and Society for Academic Emergency Medicine, 2013.