

Poster abstract

Case-finding for disabilities with PRISMA-7 in emergency rooms: evolution in Sherbrooke, Québec

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Abstract

Introduction: The PRISMA-7 tool [1] has been introduced in two emergency rooms (ERs) in Sherbrooke to identify older people with significant disabilities. The seven yes/no questions had been included in the triage instrument for people aged 75 years and over. The positive cases were directed to the single entry point of the local health and social services centre, which then conducted assessment and eventually provided home care. The study's objective was to monitor the rate of PRISMA-7 use in ERs since its implementation (4 years ago).

Results: During the first year of implementation, the rate of PRISMA-7 use gradually increased up to 50–60%, then remained stable during the second and third years. This plateau can be accounted for, in part, by the scarcity of resources for assessing and delivering home-care services. The rate of PRISMA-7 use fell to 40% during the fourth year, which coincided with renovation of an ER. A 50% objective is in place.

Discussion: The rate of case-finding appears logical with the services actually available for assessing functional autonomy and the corresponding home services required. In terms of the population-health approach for supporting functional autonomy, it highlights the challenges in reaching the population level. As suggested by Young and Turnock [2], some managers consider publishing community-care waiting lists to increase attention and, consequently, priority in the health system.

Keywords

implementation of case-finding, disability, older people, emergency room

References

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