Reducing Hospitalizations in Assisted Living:

7 KEY STEPS FOR PROVIDERS

Guardian® Pharmacy Services

Overview

As the senior care landscape continues to evolve, reducing hospitalization rates in assisted living (AL) is more important than ever. During the first year of stay, an AL resident's risk of hospitalization ranges from 25% to 61%[1,2]. Not only costly and highly traumatic for residents, hospitalizations also place considerable operational and financial burdens upon the community.

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For providers, there is a silver lining. By placing greater emphasis on preventative health, early illness recognition, and optimal medication management, residents and communities can realize the multi-faceted benefits of low hospitalization rates.

In this guide, providers will discover strategies they can implement, with the tools they have, to reduce preventable hospitalizations, improve resident outcomes, and position their community for future success.

Preventable Hospitalizations and the Impact on AL Residents

Preventable hospitalizations, defined as hospital admissions that could have been avoided with better treatment of acute conditions or management of chronic conditions, disproportionately occur in older adults and cost approximately $25 billion in annual U.S. healthcare spending[3].

AL residents experience twice as many hospitalizations and deaths as their independent living counterparts during the first year of stay, and nearly 39% of those discharged from the hospital are readmitted within 90 days[2].

Those at greatest risk for hospitalization are residents with higher levels of debility, falls, and multiple chronic medical conditions. The most common health conditions associated with preventable admissions include heart failure, bacterial pneumonia, urinary tract infection, and chronic obstructive pulmonary disease (COPD)[3]. Falls, polypharmacy, medication errors, facility size, and nursing staff also play an important part in emergency department (ED) visits and hospitalizations[1].

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Seven Steps to Prevent Hospitalizations

Community leadership plays a crucial role in reducing hospitalizations. Following these seven steps will help lower resident hospitalization rates.

1 Embrace a fresh perspective

Among AL residents, 22% of hospitalizations may be avoidable by providing timely and adequate onsite treatment[4]. However, upon the first sign of a problem, AL communities – which may not have onsite clinical staff – often send residents to the ED.

Recognizing hospitalizations are often preventable and substantially impact residents and the community's bottom line, operators and staff should shift from a reactive mindset to proactive healthcare.

Consider this: with each hospital transfer, AL communities shoulder various cost-related implications and operational challenges, including higher labor costs associated with the discharge and readmission process and census instability.

Today, providers have added incentives to reduce their hospitalization rates as the industry shifts away from the traditional fee-for-service model. Value-based care opportunities between payors and AL communities are quickly emerging with significant financial benefits based on the value and outcomes communities deliver.

By adopting a preventative health approach, proactively identifying residents at risk, and empowering staff to recognize and report signs of an illness or decline early, providers can curtail unnecessary hospitalizations and keep residents in their community longer.

How a Long-Term Care Pharmacy Can Help

Senior care pharmacists are key members of the AL healthcare team and a vital resource for providers. Their insights enhance preventative care initiatives and support the development of community-centric strategies that help improve clinical outcomes and reduce hospitalization rates.

2 Bring the community together

To truly "move the needle" on hospitalization rates, community leaders, staff, residents, and families must be aligned and develop a collaborative path forward.

Initiatives should begin with a commitment from community leadership and foster buy-in from all stakeholders. Community staff at all levels should feel they're part of the solution and be encouraged to share ideas and insights into essential questions such as:

- What is the most common reason for hospitalizations among our residents?
- What is our biggest obstacle in reducing hospitalizations?
- What resources are needed to overcome this obstacle?

To ensure long-term success and sustained staff engagement, provide comprehensive training and ongoing support.

How a Long-Term Care Pharmacy Can Help

As part of onsite consulting services, pharmacists can identify main drivers of hospitalizations in the community and propose strategies that target at-risk residents early. They play a critical role in education, empowering caregivers to be the best first line of defense in preventing hospitalizations and teaching them the benefits of doing so.

How a Long-Term Care Pharmacy Can Help

LTC pharmacies can share analytics with valuable insights into high-risk health conditions and medication use trends (i.e., antibiotics, antipsychotics, opioids.) Their pharmacists can engage with prescribers and, when consulted, can help with community-wide and resident-centric strategies to avert hospitalizations.

3 Dig into the data

The data available to AL providers from their electronic health record (EHR) and long-term care (LTC) pharmacy partner is crucial for reducing hospitalizations and improving resident outcomes. With data, community leaders gain insights into the health conditions and medications increasing hospitalization risk. For example, residents with conditions such as diabetes, heart failure, COPD, prior hospital admissions or a falls history are at higher risk for an unplanned hospitalization. The use of specific medication classes also places residents at greater risk. Leadership and clinical teams can harness data to preempt incidents that trigger hospital transfers, such as medication changes, infections, and falls and use this data to develop tailored intervention strategies at community and resident levels.

4 Put the community's eyes and ears to work

Standardized assessment tools like INTERACT® (Interventions to Reduce Acute Care Transfers) have a proven track record of reducing acute care transfers from skilled communities. These tools also work well in AL settings since they detect early changes in a resident's health status, prompting staff to intervene before the condition worsens.

Given the staffing differences between skilled nursing and AL, embracing a standardized tool requires educating AL staff, residents, and families about what to watch for and when to report concerns.

Examples of this strategy in action include:

How a Long-Term Care Pharmacy Can Help

When their expertise is fully leveraged, experienced consultant pharmacists can assist communities in the implementation and execution of programs aimed at reducing hospitalizations. They can also assist in monitoring at-risk residents and educating staff on best practices.

RESIDENT CONDITION	**Resident receiving insulin to manage diabetes**	**Resident with heart failure**	**Resident receiving blood thinner for heart condition**
WHAT TO WATCH FOR	Signs of low blood sugar, such as sweating, shaking, confusion or slurred speech	Signs of worsening condition, such as lower leg swelling, weight gain, or increased shortness of breath	Signs of bleeding, such as sudden drop in blood pressure, dark urine, or bleeding from gums
WHEN TO REPORT CONCERNS	**Notify the nurse immediately**	**Contact the physician immediately**	**Contact the physician immediately**

The goal is to foster a "see something, say something" culture, where everyone is alert to changes, flags concerns immediately and is confident concerns will be heard. For a standardized assessment tool to work in the AL setting, it's vital that community staff is receptive to the observations of others and understands what to report to the physician and when.

How a Long-Term Care Pharmacy Can Help

Pharmacists are a trusted source for vaccine information that separates fact from fiction for residents and staff. They can provide educational materials and the latest guidance from the Centers for Disease Control and Prevention and the Advisory Committee on Immunization Practices.

5 Boost vaccination rates

Maintaining high vaccination rates among residents and staff have consistently proven effective in decreasing hospitalization rates. For older adults, flu vaccines can reduce flu-associated hospitalizations by about 40%[5]. It's essential to ensure that residents remain up-to-date with all recommended immunizations, including influenza, pneumococcal, COVID-19, and shingles vaccines. To improve vaccination rates among residents and staff, include additional awareness and educational initiatives for staff and residents highlighting the advantages of vaccination.

6 Optimize medication regimens

Polypharmacy and potentially inappropriate medications, such as those outlined in the Beers Criteria®, have been linked to increased all-cause hospitalization.

How a Long-Term Care Pharmacy Can Help

Experts in managing complex medication regimens, pharmacists can proactively identify medication-related issues, establish appropriate monitoring parameters and spearhead deprescribing initiatives aimed at reducing risk for ADEs.

With falls a leading cause of preventable hospitalizations in older adults, addressing modifiable risks like polypharmacy and falls-related medications are critical. Effective fall prevention strategies include discontinuing unnecessary or inappropriate medications and interventions targeting specific medication classes, such as antipsychotics and anti-anxiety medications. Adverse drug events (ADEs) frequently lead to ED visits and hospital admissions, yet many ADEs are preventable. That's why it's imperative for AL staff to identify high-risk medications (e.g., blood thinners like warfarin and anti-diabetic agents including sulfonylureas and insulin) and implement proactive monitoring techniques to avert ADEs that might lead to a hospitalization.

7 Focus on transitions in care

Seamless care transitions into AL from home, skilled nursing, or acute care play an important role in averting hospitalizations or ED visits due to ADEs or worsening acute or chronic conditions. Central to an effective care transition is a thorough medication reconciliation, often known as a "Med Rec," which research shows can significantly reduce hospitalizations and readmissions. This process involves comparing a resident's medication lists from various sources to establish the correct regimen.

How a Long-Term Care Pharmacy Can Help

Pharmacists routinely perform med recs and are available 24/7 to answer medication-related questions for staff. LTC pharmacies also maintain current medication lists and seamlessly integrate with the community's EHR, giving their pharmacists a complete view of a resident's medication history.

Involve the resident or their representative in the med rec process and ask for the resident's home medication list. During the med rec, look for discrepancies, duplicate orders, doses that don't match the resident's needs, and any unnecessary medications. Be sure to clarify lab orders for high-risk medications such as warfarin and antibiotics.

Conclusion

By embracing a proactive approach to resident well-being, AL providers can improve resident outcomes, reduce hospitalizations, and establish a foundation for preventative healthcare. This keeps residents in their community longer, leading to better quality of life and enhances the community's operational and financial performance. As AL models continue the transition from hospitality to healthcare, operators will have new opportunities to showcase their ability to deliver outcomes-based care that adds value. Partnering with an experienced LTC pharmacy is vital to managing the increasingly complex healthcare needs of AL residents as providers navigate this evolving landscape.

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[5] Centers for Disease Control and Prevention. (2023, February 8). Vaccine effectiveness: How well do flu vaccines work?. Centers for Disease Control and Prevention. https://www.cdc.gov/flu/vaccines-work/vaccineeffect.htm.

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