

An NHMRC Partnership Project (GNT1151923)
Led by AusHSI and ACHLR, QUT

RATIONALE

Australia's healthcare system operates in a challenging climate with an older population more likely than previously to be hospitalised and to experience an increasingly institutionalised and medicalised end-of-life phase. Clinicians providing end-of-life care are often tasked with preparing patients and families for a transition to less active treatment. This can be challenging with a number of barriers identified in providing an alternate care pathway. As a result, care may incorporate procedures or treatments that provide little, if any, benefit to the patient at the end of their life.

The InterACT study will trial a prospective feedback loop intervention in three acute hospitals that aims to promote appropriate care and treatment decisions and pathways for older patient populations at the end of life. By providing clinicians with feedback on the risk profile of their older patients, the study proposes to increase clinician capacity to promote better end-of-life care for older patients.

STUDY ACTIVITIES

- Prospective patient record review using the CrISTAL (Criteria for Screening and Triaging to Appropriate alternative care) and SPICT (Supportive and Palliative Care Indictors Tool) tools
- Data linkage of hospital admission and costs, medical emergency response, and patient death data
- Process evaluation to assess implementation, mechanisms of impact, and contextual barriers and enablers of the feedback loop intervention
- Timing: February 2020 – September 2021

STUDY SITES

Gold Coast University Hospital
(4 clinical teams)

Royal Brisbane and Women's Hospital
(7 clinical teams)

The Prince Charles Hospital
(3 clinical teams)

PROGRESS

- Hospital 1 & 2 are in the 'intervention exposure' phase: each clinical teams are receiving twice weekly information about the risk profile of their older patients, and implementing a pre-determined clinical response to that information
- Hospital 3 is in the 'intervention establishment phase', moving into the 'intervention exposure phase' in mid February.



CONTACTS

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