Care trajectory in homes care users across mortality-risk profiles: an observational study.

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Objectives

RESPECT is a prognostic tool, developed using linked population-based data, to predict 6-month mortality in community-dwelling older adults. RESPECT is implemented and openly accessible as a web-based tool on Project-BigLife.ca, where over 700,000 calculations have been performed to date. Our objective was to describe healthcare utilization patterns among home care (HC) users across mortality risk profiles generated from RESPECT to inform care planning for older persons who have varying mortality risks and levels of care needs as they decline.

Approach

We conducted a retrospective cohort study examining healthcare use among HC users in Ontario, Canada, who received at least one interRAI HC assessment between April 2018 and September 2019. Using linked health administrative data at the individual level, we examined the use of acute care (hospitalizations and emergency department (ED) visits), long-term care (LTC), and palliative home care within 6-months of each assessment and prognostication using RESPECT. Mortality risk profiles from RESPECT were created based on the median survival.

Results

The cohort comprised 247,377 community-dwelling older adults; 14.3% died within 6-months of an assessment. Among decedents, half (51.51%) of HC users with a predicted median survival of less than 3-months received at least one palliative care home visit; 39.17%, 34.82% and 13.84% visited the ED, were hospitalized, or were admitted to LTC, respectively. The proportion of assessments that received at least one palliative HC visit declined to 43.11% and 30.28% of assessments with a median survival between 3- and 6-months and those between 6-months and 12-months, respectively. The proportion of assessments with an acute care use increases with increasing median survival.

Conclusion

A considerable proportion of people at the end-of-life do not receive any palliative home care and continued to be institutionalized. This may be indication that the reduced life expectancies and palliative care needs of many older adults are not being recognized, thus demonstrating the value of prognostic models like RESPECT to inform care planning for individuals in their final years of life.