INPLASY PROTOCOL

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Support: Not applicable.

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Conflicts of interest: None declared.

Outcomes of Complex Discharge Planning in Older Adults with Complex Needs: A Scoping Review Protocol

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Review question / Objective: The proposed scoping review will address the following question: 1. What discharge initiatives or pathways are in place for older adults with complex discharge needs that encompasses all 9 domains of outcome assessment? 2. Are there follow-up studies that assess the impact or provide outcome evaluation of CDP initiatives or pathways?

Condition being studied: Whilst existing literature discusses initiatives and interventions around discharge processes aimed at resolving complex needs, few have reported outcome measures to assess the efficacy of proposed interventions. With the advancement in age, there is an anticipated increase in associated multi-morbidity levels. This gives rise to poor outcomes if complex needs are unaddressed. Outcome measures such as those focusing on patient centred factors, economic factors, medication, carer outcomes, community services link in, readmission, and follow up remain underexplored. Our scoping review seeks to summarise outcomes of complex discharge planning in the older adult population and identify gaps for future research considerations.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 20 May 2022 and was last updated on 20 May 2022 (registration number INPLASY202250127).

INTRODUCTION

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encompasses all 9 domains of outcome assessment? 2. Are there follow-up studies that assess the impact or provide outcome evaluation of CDP initiatives or pathways?

Rationale: This scoping review aims to explore various outcomes associated with

complex discharge planning initiatives and pathways. At present there is a paucity of literature assessing all 9 domains of outcome assessment detailed in our review and streamlining of complex discharge plan processes to provide better outcomes for the older adult population. Further research is needed on follow-up studies post complex discharge planning pathways or interventions to evaluate their true effectiveness or value.

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METHODS

Search strategy: The proposed scoping review will be conducted using the five-stage framework proposed by Arksey and O'Malley and the Preferred Reporting Items for Systematic Reviews and Meta-Analysis extension for Scoping Reviews (PRISMA-ScR) used to guide the reporting.

Participant or population: The scoping review will consider all articles which focus on the older adult population, the acute hospital setting, complex discharge planning, publications within the 20-year window to avoid potential inclusion of older and less relevant articles relative to the current healthcare system.

Intervention: Not applicable.

Comparator: Not applicable.

Study designs to be included: The scoping review will consider all study designs including quantitative and qualitative methods: cohort based studies, observational studies, case studies, RCTs, quasi - experimental trials, population based study, prospective non RCTs with blinded outcome evaluation, comparative process evaluation, predictability and prognostication analysis and study protocols. The full-text article will be assessed if no abstract was available. Likewise, the abstract will be reviewed if the full-text article was not available.

Eligibility criteria: Participants: The scoping review will consider all studies that include persons aged 65 years and older in the acute hospital setting. Concepts: This review will consider the concept of complex discharge planning, what discharge initiatives or pathways are currently in place and how their implementation affects outcomes for frail elder patients with complex discharge needs. Context: Care received in the acute hospital setting and community will be considered. Only studies published in English with open access, between 2001 and 2021 included.

Information sources: A literature search will be implemented across key electronic databases including MEDLINE (EBSCO interface), MEDLINE (Ovid interface), CINAHL (Complete interface) CINAHL (EBSCOHost interface), EMBASE (Ovid interface), Web of Science, and Scopus for relevant articles.

Main outcome(s): This scoping review explored various outcomes from CDP initiatives and pathways. Overall, 27 articles met our inclusion criteria after an exhaustive search of the literature. Although CDP processes were evaluated through the majority of articles in this scoping review, there were no specific follow-up studies post every intervention to assess their true effectiveness. From our review, we constructed 9 key patient outcomes expected following CDP. The

most common outcomes examined in our review were functional level and reducing LOS, with consequential effect on readmission.

Additional outcome(s): Not applicable.

Data management: A database search using the agreed search strategy will be conducted by two reviewers. To determine eligibility, reviewers will go through all articles by examining their titles and abstracts. Articles suitable for further review will be independently explored for full text or abstract by the reviewers. In the event of disagreement on article selection, a consensus will be achieved through nominal group technique. Standardised data extraction forms will be updated throughout the data collection process to allow for accurate documentation of 1. article title, author information, year and country of publication, 2. study aims, design, methods, and reported impact, 3. outcome measures, relevant to the scoping review.

Quality assessment / Risk of bias analysis: Not applicable.

Strategy of data synthesis: Data collected and analysed from the scoping review will be represented in figure and table format.

Subgroup analysis: Not applicable.

Sensitivity analysis: Not applicable.

Language: English.

Country(ies) involved: Ireland.

Other relevant information: Protocol registration for complex discharge planning process - 9 domains of outcome assessment formulated by authors.

Keywords: complex discharge planning; delayed discharge; discharge outcomes; elders outcomes; integrated care; older adults.

Dissemination plans: Data analysed from the scoping review will be published in a peer reviewed open access journal and presented at the relevant scientific conferences.

Contributions of each author:

Author 1 - Puteri Maisarah Rameli - The author contributed to the conceptualisation, development of the protocol and verified the search methodology. The author also participated in the collection, extraction of data for accuracy and detail. Furthermore, the author selected studies based on the set inclusion criteria, provided critical review and analysis, participated in revision and approval.

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