

Research Brief

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KEY FINDINGS

Rates of ED use among AL residents were significantly higher after Hurricane Irma in 2017 than in 2016:

- Injury-related visits were 12.5% higher at 30 days, but there was no significant difference between injury-related rates at 90 days.
- Other medical visits were 12% higher at 30 days, and 7.7% higher at 90 days.

Heart failure was a primary ED diagnosis among AL residents after Hurricane Irma in 2017, but not in 2016: The top ten ED diagnoses were similar from 2016 to 2017 (e.g., UTI, sepsis, etc.), with the exception of heart-failure related diagnoses, which were in the top ten only in 2017.

PRACTICE AND POLICY IMPLICATIONS

Policymakers, AL communities, and community health providers should pay more attention to AL residents after disasters. Specifically, providers should prioritize a return to normalcy as soon as possible to minimize injury and stress-related morbidities, and policymakers should ensure existing mandates support AL communities with limited resources.

Even more, this study supports previous research that non-injury related ED visits among older adults after disasters may be related to exacerbated chronic health conditions, such as heart failure, and/or discontinuities in care, though additional research is needed. Stakeholders should collaborate on innovative solutions to ensure continuity of care after disasters, which could minimize preventable morbidities.



ORIGINAL ARTICLE

Hua, C.L., Thomas, K.S., Peterson, L.J., Hyer, k., & Dosa, D.M. (2020). Emergency Department Use Among Assisted Living Residents after Hurricane Irma. *The Journal of Post-acute and Long-term Care Medicine*, 22(4), 918-922. doi: 10.1016/j.jamda.2020.10.010

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