Investigator Spotlight

Real World Data Scholars Program

NIA IMPACT COLLABORATORY
TRANSFORMING DEMENTIA CARE

Taylor Bucy, PhD, MPH
Assistant Professor
University of Kansas School of Medicine

"This award will provide me with the opportunity to validate measures of emergency department utilization using large real-world data and examine contextual drivers of care disruptions and discontinuity."

Dr. Bucy is a health services researcher and assistant professor in the Department of Population Health at the University of Kansas School of Medicine. Through an organizational studies lens, her research examines the role of long-term and post-acute care within the broader healthcare delivery system and seeks to identify areas for meaningful organizational improvement in the structures and processes that facilitate the delivery of high-quality, high-value care to older adults during periods of transition. She has previously leveraged large-scale administrative data and complex survey data to evaluate organizational attributes that drive long-term and post-acute care placement decisions and predict high-quality stays. Her research aims to improve the organization and delivery of care for older adults with complex medical and social needs along the care continuum.

Validating a Measure of Emergency Department Use Leveraging Long-Term Care EHR Data

Approximately 16% of older adults will visit an emergency department (ED) within 14 days of nursing home (NH) admission, and one in three within the first month, potentially delaying recovery and increasing the risk of medication errors or delays, falls, delirium, and death. Accurate and reliable approaches to identifying ED transfers in real-time are essential for isolating contextual drivers of discontinuity; however, existing data fields in the Minimum Data Set (MDS) provide only limited approximations of resident absence. This project will derive and validate a measure of ED utilization using the Long-Term Care (LTC) Data Cooperative EHR data. This award will provide Dr. Bucy with the necessary training and experience using EHR data linked to Medicare data to: (1) Validate a measure of ED utilization against an established Medicare standard, and (2) Characterize variation in ED use (frequency, duration) by time since hospital discharge, short versus long-stay NH status, and proximity to clinical events. This project will establish the validity of a systematic approach to identifying patterns of ED utilization in NHs using real-world EHR data. These findings will inform future research aimed at developing and testing targeted interventions to strengthen initial discharge practices and prevent unnecessary cycling of patients back to the ED. This work will provide a foundation and key preliminary evidence for future research aimed at identifying opportunities for targeted interventions to improve and strengthen care processes within and across organizations.