GEDA changes taking place on January 1, 2023, with the Geriatric Emergency Department Accreditation Criteria.

The following policy and procedures changes are:
- Changing to required:
    1. Urinary catheter minimization
    2. NPO status minimization
    3. Physical restraint use

GEDA believes that these three polices/procedures/protocols all represent standard care and will become baseline for all Geriatric EDs.

The number of additional required care policies / protocols below will go into effect in January of 2023:

- ➢ **Level 3 (Bronze) One (1)** care process chosen from the GEDA criteria plus Urinary catheter minimization, NPO status minimization, Physical restraint use—
    for a total of 4 care processes.

- ➢ **Level 2 (Silver) Seven (7)** care process chosen from the GEDA criteria plus Urinary catheter minimization, NPO status minimization, Physical restraint use—
    for a total of 10 care processes.

- ➢ **Level 1 (Gold) Seventeen (17)** care process chosen from the GEDA criteria plus Urinary catheter minimization, NPO status minimization, Physical restraint use— for a total of 20 care processes.

- Addition to the current list of GEDA care processes listed in the GEDA criteria:
    1. Depression screening / assessment
    2. Social isolation assessment
    3. Alcohol / substance use screening / assessment
    4. Nutritional status screening / assessment

We believe that protocols / policies within each of these domains have the potential to improve Geriatric ED care. We acknowledge, of course, that none were included in the original Geriatric ED Guidelines, and none has evidence of improved patient outcomes when implemented in the ED. With these additions, the revised list of potential policies / protocols would include 28 options.

- Addition of the option for a site to submit a unique, novel, innovative care policy / protocol not from the list to count towards the requirement. We have developed a description of this option and the criteria by which submissions will be evaluated.

- - o The applicant should describe how this policy / protocol not from the list is consistent with the conditions of the other policies / protocols listed here. The policy / protocol must:
      - Be specific to care of older people in the emergency department
      - Include a strategy for assessing implementation
      - Indicate metrics to measure successful implementation

Additionally, the applicant should explain the rationale for selecting this process and how it improves care of older people in the emergency department.

- We recognize that creating and receiving approval for an official hospital/institutional policy may be time-consuming and burdensome. While some Geriatric EDs may choose this approach to demonstrate compliance with these requirements, that is not expected. A written guideline describing the approach that is specific to the care of older adults in the applying ED from leadership is also sufficient. Notably, though, simply affirming that a policy or guideline exists without providing further evidence or detail is not sufficient.
- We do not want the QA requirement associated with each optional and required policy / protocol to be overly burdensome, but we want to ensure that the team is reviewing compliance with it and has a strategy to address issues that arise. Therefore, as part of the QA requirement for each optional and required policy / protocol, applicants must describe:
    - o How compliance with the policy / protocol is evaluated (including method, timeframe, current goal)
    - o Specific strategy(ies) to address compliance issues

Please let the GEDA team know if you have any questions.

Best Regards,

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