Suggest completion by:
June 1st

Test Level 2

Applicant Information

My Information

Full Name
Hartman, Amber

Position

Phone
⚠ This field is required

Phone Type ⌄

Email
⚠ This field is required

ED Site Information

ED Site Name
⚠ This field is required

Country
United States ⌄

Address

Address 2

City

State ⌄

Zip

Phone

CEO or President Name

Save & Continue

Level 1 Checklist

| Applicant Information |
| Program Information |
| Staffing |
| Education |
| Policies and Procedures Components |
| Policies and Procedures |
| Quality Improvement |
| Outcomes Measures |
| Equipment and Supplies |
| Physical Environment |
| Sign and Submit |

Suggest completion by: June 1st.

GEDA Level 1

Program Information

According to local or state classifications, what is your hospital considered?

○ Urban non-teaching
○ Urban teaching
○ Rural
○ Unsure

What is your ED's bed size?

○ 0-5
○ 6-10
○ 11-15
○ 16-29
○ 30-50
○ 50+

Most recent annual ED census?

ED census

What percentage of patient presentations are >65?

Percentage

Why you are interested in GEDA accreditation?

○ Administrative mandate
○ Improved point of care
○ ED Director/Staff initiative
○ Other

Save & Continue

Level 1 Checklist

Applicant Information	✔

Program Information

Staffing

Education

Policies and Procedures Components

Policies and Procedures

Quality Improvement

Outcomes Measures

Equipment and Supplies

Physical Environment

Sign and Submit

Suggest completion by: June 1st.

GEDA Level 1

Staffing

Please tell us about the members of your geriatric team.

Physician Champion/Medical Director or equivalent with evidence of focused education for geriatric EM, whose responsibilities should include the majority (ideally all) of the following in their job description:

- Geriatric EM educational leader/coordinator for EM providers across multiple disciplines
- Oversee geriatric ED operations including:
  - Implementation and regular assessment of protocol and policy guidelines of geriatric-specific initiatives
  - Coordination/guidance of geriatric ED staff workflow
  - Coordination of interdisciplinary team workflow in the geriatric ED
- Quality improvement team leader overseeing adherence to geriatric-specific protocols
- Develop and oversee outcome measures documentation including process and outcome metric
- Coordinator for maintenance of geriatric ED environment (i.e., specific equipment and supplies)
- Liaison between hospital leadership and the geriatric ED
- Quality assurance team leader for geriatric patient case reviews/complaints
- Coordinator of geriatric EM research initiatives (if applicable)

Physician Name

Physician Role/Title

Please upload a job description and describe geriatric responsibilities within the geriatric ED including aspects of that individual's geriatric emergency roles in implementation of relevant protocols, quality improvement, quality assurance, outcome assessments, and coordination with hospital leadership.

Upload a job description ⬆

Does the Physician Champion/Medical Director provide geriatric education for the ED staff?

○ Yes ○ No

How many hours per week is dedicated to GED operations?

○ <5
○ 5-10
○ 11-15
○ 16-20
○ >20

List at least 1 nurse case managers or transitional care nurses or equivalent: totaling 56 hours/week of coverage in ED.

Nurse Name

Nurse Geriatric Role/Title

Hours of coverage per month in the geriatric ED

Upload a job description and describe geriatric responsibilities within the ED. ⬆

+ Add More

4 members of an interdisciplinary team should be available to the ED

Physiotherapy

Name

Geriatric Role/Title

How they are incorporated into the ED workflow, availability, and off-hours protocol?

0 / 1200 character max

Occupational Therapy

Name

Geriatric Role/Title

Level 1 Checklist

Applicant Information	✓
Program Information	✓
Staffing	
Education	
Policies and Procedures Components	
Policies and Procedures	
Quality Improvement	
Outcomes Measures	
Equipment and Supplies	
Physical Environment	
Sign and Submit	

How they are incorporated into the ED workflow, availability, and off-hours protocol?

[text box]

0 / 1200 character max

Social Work

Name

Geriatric Role/Title

How they are incorporated into the ED workflow, availability, and off-hours protocol?

[text box]

0 / 1200 character max

Medication Management

Name

Geriatric Role/Title

How they are incorporated into the ED workflow, availability, and off-hours protocol?

[text box]

0 / 1200 character max

List 1 hospital/health system level executive/administrative sponsor supervising & supporting the geriatric ED program.

Name

Geriatric Role/Title

What is the level of support?

☐ IT support

☐ Data support

☐ Liaison/communications with upper management

☐ Link to quality improvement

☐ Assistance with support staff/personnel

☐ Other

How are they involved with developing and supporting the GEDA, as well as being incorporated into the ED work flow?

[text box]

0 / 1200 character max

List 1 patient advisor or patient council member

Think of this role as a patient advocate. She/he is invited to meetings and gives valuable insight on the patient perspective. She/he could have been a patient in the ED and gives feedback on how patients may interpret processes and what modifications the ED should strive to make that would give your patients the best experience. She/he balances the dialogue by giving the group a patient perception.

perception.

Name

How are they incorporated into the geriatric ED development, quality assessment, and protocol evaluations?

0 / 1200 character max

Save & Continue

Suggest completion by:
July 1st.

GEDA Level 1

Education

A physician champion / medical director is required for all levels of Geriatric ED. This physician champion / medical director must demonstrate focused training in geriatric emergency medicine that provides added expertise in the emergency care of older adults and added ability to teach other physicians and advanced practice providers how to improve this care.

This training requirement must be demonstrated through coursework:

1. focused on geriatric specific syndromes and concepts (e.g., atypical presentation of disease, changes with age, transitions of care) relevant to emergency medicine,
2. focused on clinical issues nearly exclusive to geriatric ED patients (e.g., end of life care, dementia, delirium, systems of care for older adults), or
3. discussing issues common to all ED patients but focused on the unique factors found in older adults (e.g., trauma in older adults, cardiac arrest care for the geriatric patient).

Training in common emergency medicine conditions (e.g., stroke) that happen to affect older adults does not qualify for this requirement. Qualifying training courses may be in person, web-based (e.g., Geri-EM.com) or equivalent provided through or led by an authoritative resource. *Reading a book or credit for a topic search in UpToDate (or similar) does not qualify for this training requirement unless CME is earned for this activity.*

- For physician champions/ medical directors applying to lead Level 1 Geriatric EDs, eight (8) hours of education are required for the initial certification and for each renewal.

These educational requirements may be demonstrated through appropriate geriatricfocused CME with completion certificates (please be ready to share these certificates and which of the above mentioned geriatric content this includes.) Alternatively, applicants may submit other coursework that they believe should fulfill this requirement for review by the GEDA Board of Governors. The Board of Governors are under no obligation to accept this other coursework.

Please upload evidence of focused geriatric education completion (e.g. certificates of completion, CME credits, etc.) Describe geriatric courses taken including when taken, content and duration.

Upload evidence of focused geriatric education completion ⬆

Do you educate nurse case managers or transitional care nurses or equivalent, totaling 56 hours/week of coverage in ED, with examples of the following?

- Atypical presentations of disease
- Trauma including falls
- Cognitive and behavioral disorders
- Emergency intervention modifications
- Medication Management/polypharmacy
- Transitions of care
- Effect of comorbid conditions/polymorbidity
- End-of-life care

○ Yes ○ No

Do you educate your nursing personnel about the domains of geriatric EM using GENE, NICHE, or a similar course?

○ Yes ○ No

How is the education delivered and how are best practices incorporated into the geriatric ED workflow?

0 / 1200 character max

Save & Continue

Level 1 Checklist

Applicant Information ✓

Program Information ✓

Staffing ✓

Education

Policies and Procedures Components

Policies and Procedures

Quality Improvement

Outcomes Measures

Equipment and Supplies

Physical Environment

Sign and Submit

Suggest completion by:
July 1st.

GEDA Level 1

Policies and Procedures Components

For level 1 accreditation, at least 20 of the following components should be part of the EDs policies or procedures. Please select the 20 that are applicable to your ED.

In the next section, you will be prompted to upload evidence of the item, protocol, or policy for each component that you select in this section.

> You have selected
>
> **0 components out of 20 required**

- [ ] A guideline to define criteria for access to Geriatric Emergency Department Care from ED triage
- [ ] Standardized delirium screening protocol (examples: DTS; CAM; 4AT, other) with appropriate follow-up
- [ ] Standardized dementia screening protocol (Ottawa 3DY; Mini Cog; SIS; Short Blessed Test; other) with appropriate follow-up
- [ ] Protocol for standardized assessment of function and functional decline (ISAR; AUA; interRAI Screener; other) with appropriate follow-up
- [ ] Protocol for standardized fall assessment protocol (including mobility assessment, e.g. TUG or other) with appropriate follow-up
- [ ] Protocol for identification of elder abuse with appropriate follow-up
- [ ] Protocol for medication reconciliation in conjunction with a pharmacist
- [ ] Protocol to minimize the use of potentially inappropriate medications (Beers' list, or other hospital specific strategy, access to an ED- based pharmacist)
- [ ] Protocol for pain control in elder patients
- [ ] Protocol for accessing palliative care consultation in the ED
- [ ] Protocol for Geriatric Psychiatry consultation in the ED
- [ ] Development and implementation of at least three order sets for common geriatric ED presentations developed with particular attention to geriatric appropriate medications and dosing and management plans (e.g. delirium, hip fracture, sepsis, stroke, ACS)
- [ ] Protocol to standardize and minimize urinary catheter use
- [ ] Protocol to minimize NPO designation and to promote access to appropriate food & drink
- [ ] Protocol to promote mobility
- [ ] Protocol to guide the use of volunteer engagement
- [ ] A standardized discharge protocol for patients discharged home that addresses age-specific communication needs (large font, lay person's language, clear follow-up plan, evidence of patient communication)
- [ ] Protocol for PCP notification
- [ ] Protocol to address transitions of care to residential care
- [ ] Protocol to minimize use of physical restraints including use of trained companions/sitters
- [ ] Standardized access to geriatric specific follow-up clinics: comprehensive geriatric assessment clinic, falls clinic, memory clinic, other
- [ ] A protocol for post-discharge follow-up (e.g. phone, telemedicine, other)
- [ ] Access to transportation services for return to residence
- [ ] A pathway program providing easy access to short- or long-term rehabilitation services, including inpatient
- [ ] Access to an outreach program providing home assessment of function and safety
- [ ] Access to and an active relationship with community paramedicine follow-up services
- [ ] An outreach program to residential care homes to enhance quality of care and of ED transfers

Save & Continue

Level 1 Checklist

Applicant Information	✓
Program Information	✓
Staffing	✓
Education	✓
Policies and Procedures Components	
Policies and Procedures	
Quality Improvement	
Outcomes Measures	
Equipment and Supplies	
Physical Environment	
Sign and Submit	

Emergency Physicians® | ACEP/Geriatric Emergency Department Accreditation

Hi Amber ▾

Half the guidelines/SOPs (10): suggest completion by August 1st.

Drafts of all SOPs/guidelines (20): suggest completion by Septemeber 1st.

GEDA Level 1

Policies and Procedures

In the previous step, you selected the following components as part of your EDs policies and procedures.

Please upload evidence of the policy or procedure indicating where it is most relevant to the geriatric ED (i.e., highlight relevant sections, identify page numbers) and provide a brief description of how it is implemented in the geriatric ED.

We are looking for protocols that specifically address the emergency care needs of older adults. These protocols or procedures should describe the process through which this care improvement activity takes place for older patients while in the ED and how it is tracked with regards to adherence and care. (i.e., Who does the process, on whom the process is done, and how the process is triggered, etc.)

Sites submitting hospitalwide policies / protocols / procedures should provide detailed explanation for how these are applied to older adults and address ED specific issues.

Examples
- A hospital screen for cognitive impairment in older ED adults at risk for delirium with the Delirium Triage Screen followed by the Brief Confusion Assessment Method in all ED patients 65+ years of age at triage. This is a geriatric specific protocol done on ED patients.
- A hospital restraints protocol should provide additional information about how restraints are used during ED care of older adults and how this is different from protocols with younger patients;
- Urinary catheter policies should have a component describing how the policy is applied tracked with regards to implementation for older patients in the ED.
- A falls policy describing how patients that presented for a fall or at risk of a fall are screened for falls risk and measures are taken to reduce fall risk: for example: home assessment, physical therapy followup, etc. (Please note that if a Falls policy is chosen, it cannot be focused only on preventing inhospital falls. It should to strive to identify older adults presenting to the ED with falls, as well as demonstrate a process that strives to reduce future risk of falling after ED or hospital discharge).

You have uploaded

0 evidence out of 20 required

Policies and Procedures Component	Upload Evidence
A guideline to define criteria for access to Geriatric Emergency Department Care from ED triage	⬆
Standardized delirium screening protocol	⬆
Standardized dementia screening protocol	⬆
Protocol for standardized assessment of function and functional decline	⬆
Protocol for standardized fall assessment protocol	⬆
Protocol for identification of elder abuse with appropriate follow-up	⬆
Protocol for medication reconciliation in conjunction with a pharmacist	⬆
Protocol to minimize the use of potentially inappropriate medications	⬆
Protocol for pain control in elder patients	⬆
Protocol for accessing palliative care consultation in the ED	⬆
Protocol for Geriatric Psychiatry consultation in the ED	⬆
Development and implementation of at least three order sets for common geriatric ED presentations developed with particular attention to geriatric - appropriate medications and dosing and management plans (e.g. delirium, hip fracture, sepsis, stroke, ACS)	⬆
Protocol to standardize and minimize urinary catheter use	⬆
Protocol to minimize NPO designation and to promote access to appropriate food & drink	⬆
Protocol to promote mobility	⬆
Protocol to guide the use of volunteer engagement	⬆
Protocol to standardized discharge protocol for patients discharged home that addresses age specific communication needs (large font, lay person's language, clear follow-up plan, evidence of patient communication)	⬆
Protocol for PCP notification	⬆
Protocol to address transitions of care to residential care	⬆
Protocol to minimize use of physical restraints including use of trained companions/sitters	⬆

Save & Continue

Level 1 Checklist

Applicant Information	✓
Program Information	✓
Staffing	✓
Education	✓
Policies and Procedures Components	✓
Policies and Procedures	
Quality Improvement	
Outcomes Measures	
Equipment and Supplies	
Physical Environment	
Sign and Submit	

QI Process schedule consultation with team: suggest completion by September 1st.

Test Level 2

Quality Improvement

Only 10 uploads are required.

For level 2 accreditation, there should be evidence of efforts to ensure effective and appropriate utilization (with integration into EHR when applicable and possible) of above policies and guidelines with adherence to the 10 components chosen in *"Policies guidelines and procedures"*. The list below contains the ones you chose.

The uploaded evidence should include a description of when, how, how often, and by whom the policy/procedure is utilized, reviewed, and measured in the geriatric ED.

> You have uploaded
>
> **0 evidence out of 10 required**

Policies and Procedures Component	Upload Evidence
A guideline to define criteria for access to Geriatric Emergency Department Care from ED triage	⬆
Standardized delirium screening protocol (examples: DTS; CAM; 4AT, other) with appropriate follow up	⬆
Standardized dementia screening protocol (Ottawa 3DY; Mini Cog; SIS; Short Blessed Test; other) with appropriate follow-up	⬆
Protocol for standardized assessment of function and functional decline (ISAR; AUA; interRAI Screener; other) with appropriate follow-up	⬆
Protocol for standardized fall assessment protocol (including mobility assessment, e.g. TUG or other) with appropriate follow-up	⬆
Protocol for identification of elder abuse with appropriate follow-up	⬆
Protocol for medication reconciliation in conjunction with a pharmacist	⬆
Protocol to minimize the use of potentially inappropriate medications (Beers' list, or other hospital specific strategy, access to an ED based pharmacist)	⬆
Protocol for pain control in elder patients	⬆
Protocol for accessing palliative care consultation in the ED	⬆

Save & Continue

Level 2 Checklist

Applicant Information	✓
Program Information	✓
Staffing	✓
Education	✓
Policies and Procedures Components	✓
Policies and Procedures	✓
Quality Improvement	
Outcomes Measures	
Equipment and Supplies	
Physical Environment	
Sign and Submit	

Policies has been saved

Suggest completion by: October 1st.

GEDA Level 1

Outcomes Measures

Please provide evidence that you can track at least 5 of the following metrics. You will need to upload or enter evidence of tracking(e.g.screenshots dashboard examples.)

The uploaded evidence should include a description of how often and by whom the outcome is measured/tracked.

You have selected

0 metrics out of 5 required

- [ ] Percentage of eligible patients who receive the designated intervention
- [ ] Number of patients screening positively for applicable intervention(s)
- [ ] Designation of a referral pathway for positively screened patients
- [ ] Percentage of eligible positively screened patients who are referred as designated
- [ ] Percentage of eligible positively screened patients who complete the referral
- [ ] Outcomes of all completed referrals for positively screened patients
- [ ] Number of older adults admitted to the hospital including the primary admitting diagnosis and chief complaint
- [ ] Number of older adults discharged to home, SNF, NH including the primary ED diagnosis and chief complaint
- [ ] Number of older adults with repeat ED visits and the percentage of all elder visits this represents
- [ ] Number of older adults with repeat ED admissions and the percentage of all elder visits this represents
- [ ] Number of older adults staying >8 hours in the ED and the percentage of all elder visits this represents

In general, how are outcomes reassessed for quality improvement? How often do you / will you review results, what kind of modifications may be considered if procedures / policies are not accomplishing desired goals?

0 / 1200 character max

Save & Continue

Level 1 Checklist

Applicant Information	✓
Program Information	✓
Staffing	✓
Education	✓
Policies and Procedures Components	✓
Policies and Procedures	✓
Quality Improvement	✓
Outcomes Measures	
Equipment and Supplies	
Physical Environment	
Sign and Submit	

GEDA Level 1

Outcomes Measures

Please provide evidence that you can track at least 5 of the following metrics. You will need to upload or enter evidence of tracking(e.g.screenshots dashboard examples.)

The uploaded evidence should include a description of how often and by whom the outcome is measured/tracked.

You have selected

0 metrics out of 5 required

- [ ] Percentage of eligible patients who receive the designated intervention
- [ ] Number of patients screening positively for applicable intervention(s)
- [ ] Designation of a referral pathway for positively screened patients
- [ ] Percentage of eligible positively screened patients who are referred as designated
- [ ] Percentage of eligible positively screened patients who complete the referral
- [ ] Outcomes of all completed referrals for positively screened patients
- [ ] Number of older adults admitted to the hospital including the primary admitting diagnosis and chief complaint
- [ ] Number of older adults discharged to home, SNF, NH including the primary ED diagnosis and chief complaint
- [ ] Number of older adults with repeat ED visits and the percentage of all elder visits this represents
- [ ] Number of older adults with repeat ED admissions and the percentage of all elder visits this represents
- [ ] Number of older adults staying >8 hours in the ED and the percentage of all elder visits this represents

In general, how are outcomes reassessed for quality improvement? How often do you / will you review results, what kind of modifications may be considered if procedures / policies are not accomplishing desired goals?

0 / 1200 character max

Save & Continue

Level 1 Checklist

Applicant Information	✓
Program Information	✓
Staffing	✓
Education	✓
Policies and Procedures Components	✓
Policies and Procedures	✓
Quality Improvement	✓
Outcomes Measures	
Equipment and Supplies	
Physical Environment	
Sign and Submit	

American College of Emergency Physicians®

ACEP / Geriatric
Emergency Department Accreditation

My Applications

Hi Amber

American College of
Emergency Physicians®

ACEP Geriatric
Emergency Department Accreditation

Suggest completion by:
October 1st.

GEDA Level 1

Equipment and Supplies

Do you have in-department access to the following equipment and supplies in your ED? You are required to have all of these.

Four-point walkers

○ Yes ○ No

Four-point canes

○ Yes ○ No

The following are best practices, and while not mandatory, we anticipate that many of these will be present in a Level 1 facility. Please check the items available in your ED.

☐ Non-slip socks

☐ Pressure-ulcer reducing mattresses and pillows

☐ Blanket warmer

☐ Hearing assist devices

☐ Bedside commodes

☐ Condom catheters

☐ Low beds

☐ Reclinable arm chairs

Save & Continue

Level 1 Checklist

Applicant Information	✓
Program Information	✓
Staffing	✓
Education	✓
Policies and Procedures Components	✓
Policies and Procedures	✓
Quality Improvement	✓
Outcomes Measures	✓
Equipment and Supplies	
Physical Environment	
Sign and Submit	

Suggest completion by: October 1st.

GEDA Level 1

Physical Environment

Does your ED have the following required amenities for use in the ED during all hours?

◉ Yes ◯ No

At least two chairs per patient bed

Upload policy/protocol documents, photos, and descriptions ⬆

A large-face analog clock in each patient room

Upload policy/protocol documents, photos, and descriptions ⬆

Easy access to food and drink during all hours

Upload policy/protocol documents, photos, and descriptions ⬆

Please upload policy/protocol documents, photos, and descriptions of the equipment/food available and how obtained (example, free access in 24/7 kitchen preferred over vending machines).

Upload policy/protocol documents, photos, and descriptions ⬆

The following are best practices, and while not mandatory, we anticipate that many of these will be present in a Level 1 facility. Please check the items available in your ED.

☐ Enhanced lighting (e.g. natural light, artificial skylight or window, etc.)
☐ Efforts at noise reduction (separate enclosed rooms)
☐ Non-slip floors
☐ Adequate hand rails
☐ High-quality signage and wayfinding
☐ Wheel-chair accessible toilets
☐ Availability of raised toilet seats

Save & Continue

Level 1 Checklist

Applicant Information	✓
Program Information	✓
Staffing	✓
Education	✓
Policies and Procedures Components	✓
Policies and Procedures	✓
Quality Improvement	✓
Outcomes Measures	✓
Equipment and Supplies	✓
Physical Environment	
Sign and Submit	

Finalize process for submission by: December 1st. Early submission is acceptable.

GEDA Level 1

Sign and Submit

I agree to work with the site reviewer to arrange the upcoming site visit and pay for all associated costs incurred due to the site visit, (i.e. airfare, hotel.)

By signing this form, I attest that the information in this application is true and correct to the best of my knowledge.

Full Name
_____

If you need a invoice to begin your purchase order process, please download from the link below.

| ACEP Geriatric Emergency Department Accreditation Level 1 Invoice | ⬇ |

Once you have your PO number, please return to the checkout page and enter your PO number to complete your transaction.

Checkout

Level 1 Checklist

Applicant Information	✓
Program Information	✓
Staffing	✓
Education	✓
Policies and Procedures Components	✓
Policies and Procedures	✓
Quality Improvement	✓
Outcomes Measures	✓
Equipment and Supplies	✓
Physical Environment	✓
Sign and Submit	