

Using the interRAI HC Detection of Indicators and Vulnerabilities for Emergency Room Trips (DIVERT) Scale as a Decision-Support Tool



What is DIVERT?

The Detection of Indicators and Vulnerabilities for Emergency Room Trips (DIVERT) Scale is a decision-support tool that identifies a person's likelihood of future unplanned emergency department (ED) visits.

How does it work?

The DIVERT assigns 1 of 6 risk levels to each home care person based on information from the interRAI HC assessment. The level assigned is determined using a range of criteria. A person may fall into a given risk level via a number of pathways that represent different combinations of these criteria.

What are the criteria used to calculate the DIVERT score?

- Physical Function Improvement Potential — Care professional (G5b)
- Change in ADL Status as compared to 90 days ago (G6)
- Urinary collection device (H2)
- Falls Frequency (J1a or J1b ≥ 1)
- Diseases: Stroke/CVA (I1j) / Coronary heart disease (I1k) / Chronic obstructive pulmonary disease (I1l) / Congestive heart failure (I1m) / Pneumonia (I1r) / Urinary tract infection in last 30 days (I1s) / Diabetes mellitus (I1u)
- Weight loss of 5% or more in last 30 days, or 10% or more in last 180 days (K2a)
- Decrease in amount of food or fluid usually consumed (K2e)
- Skin ulcer other than pressure ulcer (L3)
- Oxygen therapy (N2e)
- ED/Hospital use (N4a, N4b)
- Depression Rating Scale
- Cardio-Respiratory Conditions CAP

What are the benefits?

Clinical

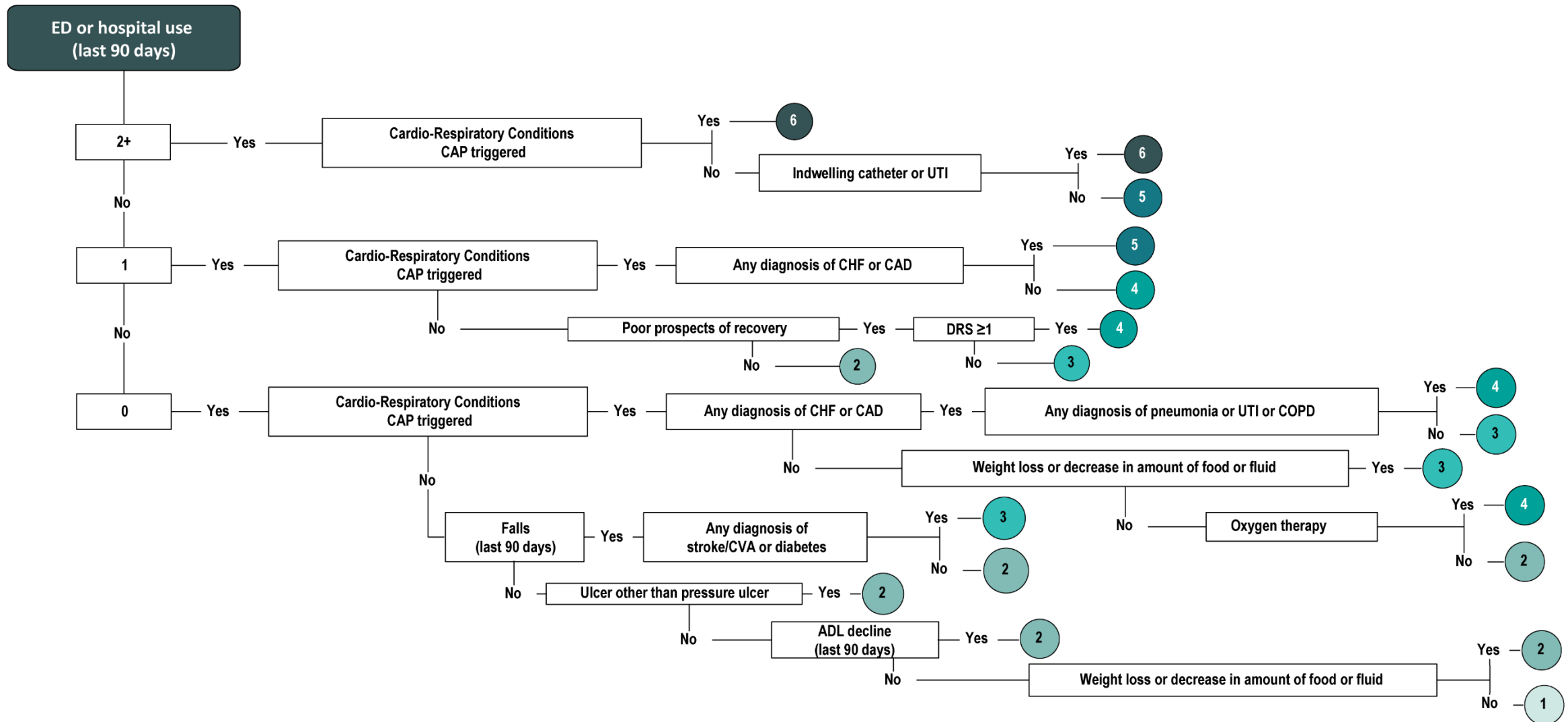
- Identifies those at risk for an ED visit
- Can assist with the development of plans of care based on the DIVERT score
- Guides monitoring frequency and intensity

Organizational

- Promotes consistent decisions among home care staff
- Supports evidence-informed resource allocation



DIVERT decision tree



Source

Adapted from Costa AP, et al. [Derivation and validation of the detection of indicators and vulnerabilities for emergency room trips scale for classifying the risk of emergency department use in frail community-dwelling older adults.](#) *Journal of the American Geriatrics Society.* April 2015.