

PURPOSE / OBJECTIVES

- Assessing patient capacity balances autonomy and patient protection [1].
- Aid to Capacity Evaluation (ACE) is a widely used tool for this purpose [2].
- Shortcomings in physician and provider skills compromise patient care.
- Our study evaluates ACE documentation quality in community settings.

MATERIAL & METHODS

- Retrospective review of patients at UPMC Harrisburg Hospital from April 1, 2022, to June 30, 2022.
- Introduced a scoring system (0-8 points) to assess documentation quality.
- Two physicians independently assessed documentation, with a third expert for discrepancies.
- Descriptive statistics presented categorical variables as percentages.
- Comparison between groups using Fisher's exact test or chi-square test.

RESULTS

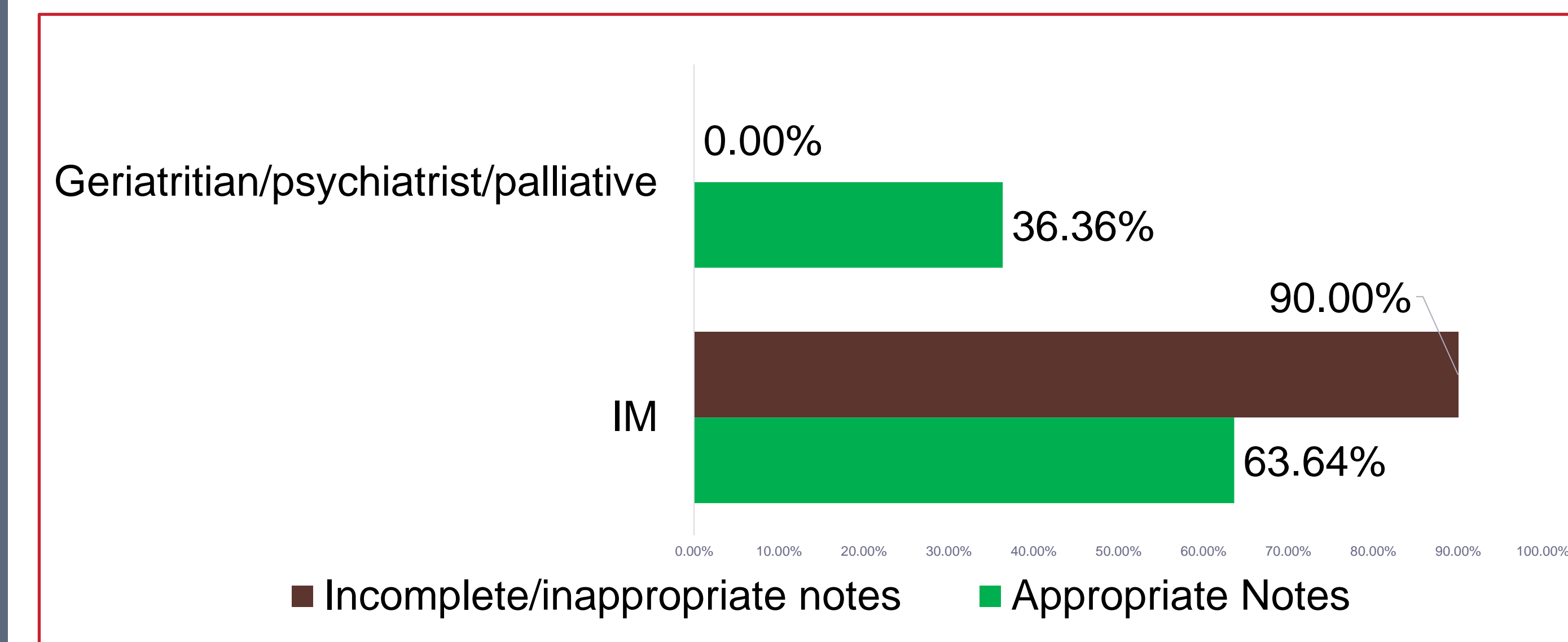
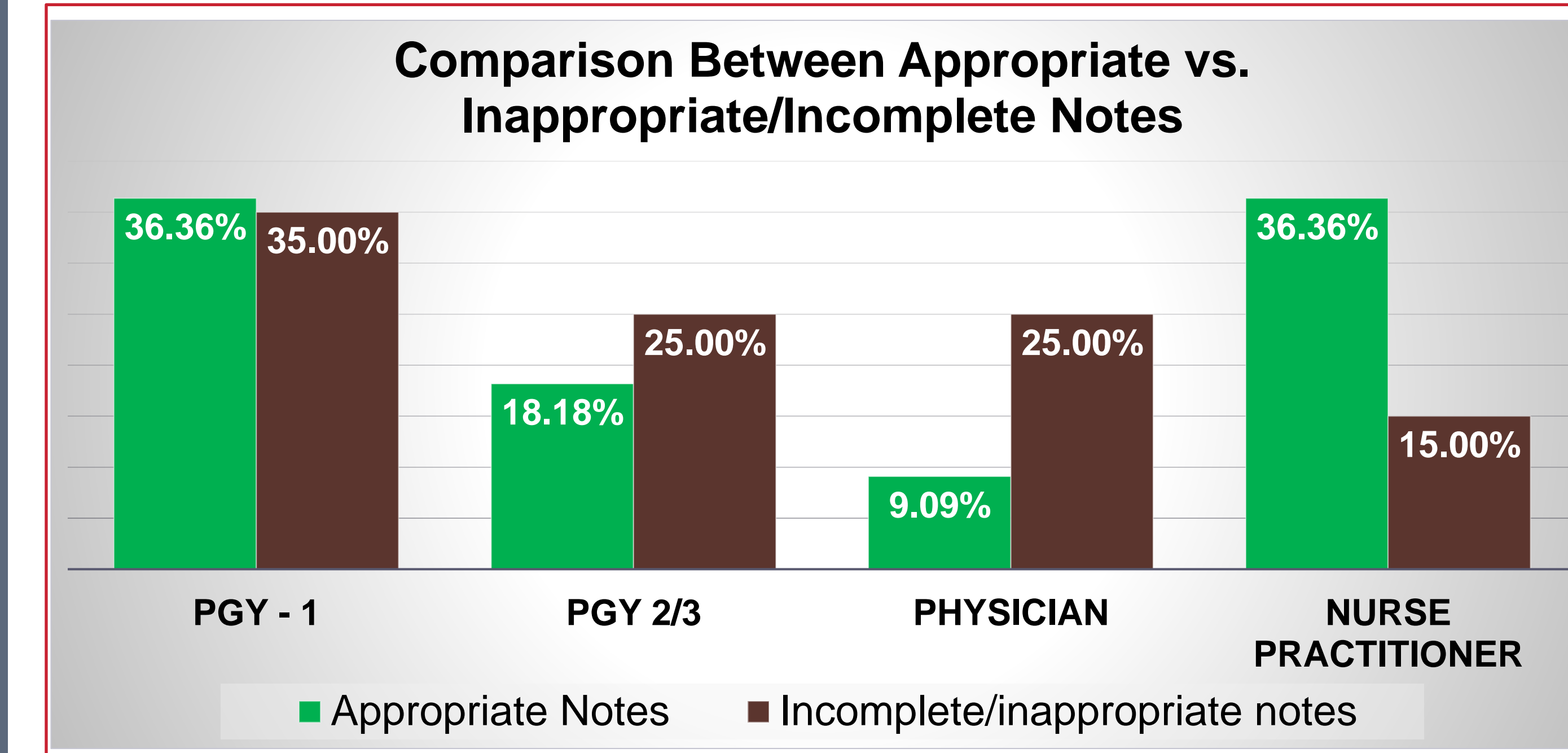
- 31 patients in the study, median age 59.
- 51.61% were males; median hospital stay was 13 days.
- ACE documentations: 36.48% appropriate, 9.68% incomplete, 54.84% inappropriate.
- No significant difference in patient race ($p=0.7540$) and mental status baseline ($p=1.000$) between appropriate and incomplete/inappropriate documentation groups.
- No difference in documentation quality among PGY-1, PGY 2/3 residents, physicians, and nurse practitioners ($p=0.5525$).
- 90% of inappropriate and incomplete documentation by internal medicine (IM) providers, 10% by various specialties, 0% by geriatricians, psychiatrists, and palliative care specialists ($p=0.0105$).

Our study found that only 36.48% of capacity assessments using the ACE tool were appropriate, with most errors by internal medicine specialists. This highlights the need for better education and re-evaluation of documentation practices, despite available tools.

REFERENCES

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RESULTS



SUMMARY / CONCLUSION

- ACE documentation quality is suboptimal.
- Internal medicine specialists contributed to most errors (90%).
- Specialized physicians had error-free ACE documentation.
- A persistent documentation gap exists despite user-friendly tools such as ACE [3].
- Future steps involve education and re-evaluation of providers to address this issue.