

Project title: From Roadside to Rehabilitation: Improving Outcomes for Older People After Trauma

Team: Prof Kate Laver, Ms Jill Williams, Ms Cath Connolly, Ms Madison Chapman, Prof Craig Whitehead, Dr Martie Botha, Ms Cindy Harrington, Dr Miia Rahja, and Prof Maria Crotty

What is the project about?

Serious injuries in older people are becoming more common, and recovery is often harder because many older adults have other health conditions, less physical reserve, and fewer social supports. This project aimed to better understand what older people experience after a major injury, including how it affects their daily life and wellbeing. Using this knowledge, the team designed and trialled a new rehabilitation pathway for older adults injured in motor vehicle accidents. The study looked at how well the pathway worked for patients and the effect on their function and quality of life as well as the effects on the health service, including hospital stay and readmissions

What did the team do?

We interviewed 15 older adults who were admitted to hospital after being injured in a road accident. After they returned home, we spoke with them about what the injury was like, how it affected their daily life, and what helped or made recovery harder. Using what we learned, along with clinical expertise and existing research, we developed a new support service called the Patient Navigator. After discharge, older adults received up to two phone calls per week for four weeks, offering light, practical support to help them adjust, stay safe, and feel more confident during their recovery at home.

What did the team find?

Interviews revealed that older people described not only physical pain and disability after their injury but also fear, emotional distress, and reduced quality of life. They valued family support yet worried about being a burden. Recovery was shaped by their mindset, their interactions with the health system, and negative societal attitudes about ageing.

Thirty older adults took part in the pilot study. Their quality of life and daily functioning dropped sharply in hospital but returned to pre-injury levels after the Patient Navigator support. Most felt reasonably prepared for discharge and even more comfortable once home. Two-thirds of eligible patients joined the study, and almost all stayed involved. Navigators successfully reached participants in most calls, which lasted about 14 minutes. Some participants needed extra GP or hospital care, often prompted by the navigator. Many reported unmet needs, but overall, they found the service helpful, reassuring, and valuable for feeling supported during recovery.

These findings are useful to health service planners, health service managers, clinicians and the community, particularly older people. Results will be shared at health services conferences, in journal articles and mainstream media. Outcomes of the project clearly articulate the needs of older people admitted to hospital with trauma and demonstrate an effective, light touch method to address population needs.

Please contact Professor Kate Laver for further details: Kate.Laver@flinders.edu.au