
Central Community Support Services Network

Capacity Building Initiative

Inter RAI CHA pilot

April 30, 2009

A key goal of the Capacity Building Initiative (CBI) is to identify a common assessment tool that will further develop the practice of assessment and care planning within the community support sector and support integration within the continuum of care.

To address this goal, CBI chose to pilot the interRAI Community Health Assessment (CHA). Four agencies selected through an expression of interest were chosen to pilot the assessment tool from January to March 2009 targeting clients in supportive housing and day programs only.

Training of the assessment tool was implemented through a partnership with the Ontario Community Support Association and the University of Waterloo, while system training was facilitated by Campana over a three-day period. A total of 30 staff and managers were trained. Overall training feedback was that the technical training for completion of assessments was sufficient however; the technical support was not responsive to meet needs of users. Most of the assistance came from CBI staff.

Results of reaching target for completed Inter RAI CHA assessments

The overall combined target of completed assessments was 490. This target was exceeded with 561 assessments being completed.

Knowledge Transfer-Information Sharing

The CCAC uses the RAI HC assessment tool which is comprised of similar client information. Therefore, duplication and over assessing clients for those client's receiving CCAC services is a concern. Sharing of the RAI HC with agencies by the CCAC and the Inter RAI CHA by agencies to the CCAC on a routine basis is necessary to avoid this from happening.

Overall Success

Clients assessed described the assessment process as more comprehensive and actually led to referrals and linkages to other supports and services that may have not been picked up until much later. The tool was especially successful in the Supportive Housing Environment.

The use of the assessment tool will ensure that all clients, particularly in Supportive Housing, are fairly assessed for services. This will be extremely beneficial when determining how to distribute hours for care.

Caregiver coping was well addressed in the instrument assisting in ensuring it was addressed in the care plan.

Assessment assisted in prompting of scheduling appointments such as doctors and eye exams.

Agency results

Agency	Day Program Active Clients	Day Program Target	Supportive Housing Active Clients	Supportive Housing Target	Total Target	Total Complete
ESS	116	55	186	89	144	188
VC	91	48	128	64	112	110
CHATS	88	88	48	48	136	82
SCWSS	48	48	50	50	98	161
TOTALS	343	239	388	251	490	561

Tracking time: The overall average time it took for assessments to be completed for all agencies was 120.6 minutes including direct and indirect time. This is comparative to previous assessment practice.

Risk: Sharing of Information - The CCAC has reservations on the lack of Case Management experience by the Inter RAI CHA assessors.

Resolution: Central CCAC is interested in outlining a process that will assist in avoiding over assessment for clients in the CSS Network. The reservation above will be addressed by collaborating on a training strategy with the Central CCAC to provide Outcomes and Care Plan training for all Inter RAI CHA assessors.

Concern: Expansion Costs

Recommendation: Ongoing wireless and technology costs - CBI to source possible group rates to maintain costs of wireless connectivity as well as possible purchase of high quantities of wireless cards to secure a lower rate. This will be the case for laptops as well.
Training Costs - CBI to pursue a joint training with the Central CCAC, as well as further cost-benefit analysis of having a part time trainer/facilitator contracted by CBI.

Concern: Target to reassess clients within six months after initial assessment is not reasonable within agency resources

Recommendation: University of Waterloo best practice is to assess all clients within six months unless there is a change in status; for example recent hospitalization resulting in complex care needs, client requiring LTC placement, or a change of status. Cost analysis to be presented to Central LHIN to identify CSS budget pressure.

Concern:	Campana/University of Waterloo Training insufficient
Recommendation:	<ol style="list-style-type: none"> 1. Small group, interactive format lead by a facilitator with extensive clinical experience 2. Combine the assessment tool and the technology training so that users are able to practice using the assessment before going out in the community 3. A separate training on using the CAPS and MapLe Scores for care planning is required so that Central CCAC requirements to share information are met. 4. Develop a competency test to determine if training needs have been met 5. CBI to work with Campana to develop a user guide. 6. CBI to develop an accessible, online FAQ guide to assist in resolving user and technical issues 7. Separate training for managers to learn functions of Management Reports and extracting data <p>Currently CBI is working with Central CCAC to develop a training program that is facilitated and implemented by a Central CCAC trainer. The target date to establish this training program is October 2009. Details are being finalized and approved.</p>

Risk:	Use of technology
Resolution:	<p>System consistency an issue when in the field, as loss of connection results in loss of information. Campana and CBI IT Project Manager testing for stability. User knowledge of computers and comfort level in use of technology is of higher priority when recruiting assessors.</p> <p>CBI to explore with Central CCAC to implement competency training for both assessment tool and technology.</p>

Management Reports:

The benefits in developing user friendly management reports:

- Consistent caseload profiling
- Better information for service planning
- Ability to benchmark within and among service providers
- Improved productivity
- Improved clinical information
- Electronic information sharing
- Clinical decision support
- Improved reliability & consistency
- Reduced paperwork
- Ability to allocate resources among services and clients
- Service quality monitoring

Campana has developed general statistics for managers to use in future planning and monitoring quality. Managers will require access and training in running and using the reports. This training will be provided by CBI in August of 2009.

In conclusion, ease and practicality of the Inter RAI CHA assessment tool allows for an integrated system within Central CSS Network agencies, reducing duplication, while improving documentation and increasing care quality. Overall, managers felt that the assessment tool allowed for interpreting observations and organizing the information. The instrument provides a best practice standard for planning care and monitoring client progress.

Definitions and Acronyms

interRAI - is a collaborative network of researchers in over 30 countries committed to improving health care for persons who are elderly, frail, or disabled. Their goal is to promote evidence-based clinical practice and policy decisions through the collection and interpretation of high quality data about the characteristics and outcomes of persons served across a variety of health and social services settings.

interRAI CHA - The interRAI Community Health Assessment (CHA) was developed in response to user requests for a modular instrument that could efficiently assess the well elderly individual and identify those persons who merit further assessment in order to prevent or stabilize early functional or health decline. The CHA contains a brief basic assessment + three supplements: functional supplement, assisted living, and mental health.

Pilot Agencies

1. Etobicoke Services for Seniors (ESS)
2. Villa Colombo (VC)
3. CHATS
4. St. Clair West Services for Seniors (early adopter) (SCWSS)

Inter RAI CHA Expenses

Item	Actual Expenditure
Training	\$11,060
Back Fill	\$13,700
Pilot Support Package	\$20,000

*Note: Goldcare Training costs are included in database project.