

Lessons learned from the introduction of Comprehensive Clinical Assessment (interRAI) in Aged Residential Care (2011 -2015)

Response to independent review report

February 2017

Context

This document outlines the response from interRAI, to the independent review of the implementation of Comprehensive Clinical Assessment (interRAI) in Aged Residential Care (2011-2015).

On behalf of the interRAI New Zealand Governance Board (the Board), interRAI Services commissioned independent company Evaluation Consult to undertake the review in June 2016.

The review Terms of Reference were approved by the Board and the review progressed according to the timetable established. A first draft report was presented to the Board on 21 October 2016 and a final report on 2 December 2016. This document is a response to the report and its recommendations.

Intended benefits of interRAI

The main benefits of interRAI are described below:

- interRAI is internationally recognised and uses evidence based practice
- interRAI is comprehensive – interRAI provides a comprehensive picture of an individual's clinical and functional status and highlights opportunities to facilitate improvement, slow rate of decline or alleviate symptoms
- interRAI supports clinical decision making whilst still valuing the clinical decisions of assessors
- interRAI supports improved care planning – interRAI gathers all the information to support development of an individualised care plan.
- interRAI enables all those caring for an individual to share the same language and be able to access accurate, up to date information that follows the person
- interRAI information is collected once and can be used many times in different settings
- interRAI data provides valuable information for policy-making, service planning and decision making

Purpose of the review

The Board sought a review of the Comprehensive Clinical Assessment (interRAI) in Aged Residential Care (2011-2015) project to assess if the project met its intended objectives. The Board also wanted to understand the project enablers and barriers and gather learnings for future projects.

The reviewers studied a range of documentation, undertook a survey of Aged Residential Care (ARC) providers and interviewed key stakeholders directly involved in delivering the project. This included ARC facility and senior management teams, ARC provider representative groups and DHB staff in Needs Assessment and Service Coordination services.

Response to general comments

Scope of the review

The Terms of Reference for the review were agreed by the Board in April 2016.

The reviewers conducted 10 key informant interviews, a survey of all ARC facilities with responses received from 297, 18 interviews with aged care providers, mostly in Auckland, Wellington and Christchurch with some interviews of providers in more remote areas carried out over the phone and four interviews with DHB Needs Assessment Service Coordination (NASC) Managers.

As agreed in the Terms of Reference residents of ARC facilities were not within the scope of the review, the primary focus of the review was to determine the impact of the introduction of interRAI on the ARC sector. Those interviewed and surveyed included a number of interRAI assessors (primarily Registered Nurses in ARC). The review therefore provides a comprehensive overview of the ARC sector's experience of the implementation of interRAI.

Project challenges

The project faced considerable challenges the main ones being to introduce and implement a software-based assessment programme in a sector which prior to the project was largely paper-based and had a very low level of technology capability (up to 90% of facilities were not using email as a form of communication before the project) and secondly, to educate and support an assessor workforce, a significant number of whom had little or no experience with technology and use of a computer on a regular basis.

Realising the benefits

interRAI Services are working with ARC representative groups to design a series of workshops to help ARC facilities embed interRAI into their individual systems and processes and realise the full benefits. A 'road map' providing an example of best practice will be developed to guide ARC facilities.

Response to issues raised

Expectations of the sector

Some providers state the interRAI suite has not produced the results they had expected, including the benefits of using interRAI assessment, use of the data collected, time taken to complete assessments and the financial cost to the sector.

interRAI response

Further work will take place over the next year to improve sector understanding of the benefits of the interRAI approach and tools to help stakeholders understand how they can use interRAI to improve health outcomes.

Many ARC providers did not understand or see the value of interRAI and had not seen the data that was being produced.

interRAI response

The first interRAI Data Analysis Annual Report 2014-15 was published in April 2016 and a second report for 2015-16 will be published in March 2017. Development of an ARC suite of interRAI reports is underway and the first set of reports are due to be published in February 2017. These reports can be utilised by both DHBs and ARC facilities to inform service development. Facility Managers are also encouraged to attend Facility Manager training, delivered by interRAI Services, to help develop their understanding of the data and how to use it.

interRAI software

The review raised some issues about the software on which interRAI is based.

Some facilities said the language in the software could be improved to make it more suited to use in New Zealand.

interRAI response

A review of the language in the Long Term Care Facilities tool to make it appropriate for use in New Zealand was undertaken prior to introduction. interRAI Services are happy to receive comment from assessors about the language used in the tool and will address any changes required as part of the annual software upgrades.

The Momentum Healthware care plan was considered too long for practical use by facilities.

interRAI response

Facilities are not required to use the Momentum Healthware care plan. Facilities should have an appropriate care planning tool informed by the outcomes in an individual's interRAI LTCF assessment.

Some users said the interRAI assessment did not provide enough detailed information 'nuance' to inform the care plan, so users were carrying out additional assessments, creating duplication of process.

interRAI response

interRAI education and support will continue to help assessors to get the most out of the interRAI assessment and avoid duplication where possible. Assessors can participate in a skills booster workshop to make sure they are utilising the tool to full capacity. This support is provided at no charge to ARC.

There were concerns about the lack of interoperability between the interRAI assessment and other systems facilities use, such as other care plan software.

interRAI response

Advice, help and support to enable interoperability of interRAI with care planning and other systems is provided by the interRAI Software Service

Use of the LTCF tool

A number of comments referred to the 'time taken' to complete an interRAI assessment, however the report does not clarify how much of this was the time taken to complete the actual assessment, or whether it was the processes leading up to and after the assessment itself.

The reviewers also noted that there were a number of instances of duplication of assessment information, with facilities continuing to use another assessment alongside the LTCF tool.

Some users were double handling the information by taking notes during the assessment first, then entering the information into the assessment later.

interRAI response

The education and support team will consider how it can help assessors and facility managers to reduce duplication and inefficient activities that slow down the assessment process. This may include facility site visits to review local processes and put in place changes that work for the individual facility. A series of workshops to help ARC facilities embed interRAI into their individual systems and processes is planned.

A 'road map' providing an example of best practice, may also be useful to guide ARC facilities.

Education and support

From the report it is clear that some ARC providers view use of the interRAI assessment as simply a compliance and audit exercise, rather than considering it a core part of their assessment and care planning processes.

Providers also responded that the initial competency programme needed to cater better to adult learning principles and acknowledge other demands on assessor time.

interRAI response

As part of the internal quality improvement programme, interRAI Services will review education and support for assessors and consider how and where the programme can be improved and cater better for the needs of adult learners.

interRAI education and support does recognise that there are demands on trainees to carry out other tasks during training, initial competency can be achieved over either an intensive two-week block, or over the course of up to 8 weeks.

Costs

A number of ARC providers indicated that the cost of back-filling roles for those undertaking competency training and the time assessors had to take away from the floor to do assessments, had significant financial implications.

The turnover of interRAI trained staff was also an issue, along with additional equipment and technical costs in accommodating interRAI.

Providers also made suggestions about how to make interRAI use more sustainable in future. These included:

- interRAI training as part of the undergraduate nursing training programme
- training all nurses in ARCs
- improved interoperability between interRAI and other systems

interRAI response

interRAI services acknowledge the demand for interRAI initial competency training has been greater than anticipated and in some areas has exceeded supply. It is expected that as a greater percentage of the ARC sector workforce become competent in use of the interRAI assessment the demand will plateau and we will be more able to meet the needs of the sector. Additional interRAI educators dedicated to LTCF competency training have been recruited to help address the demand over the next year.

Turnover of nursing staff in the aged care sector is high but there is no evidence to suggest it has increased since interRAI was introduced.

The cost of 'back filling' to cover registered nurses time away from the floor is not as issue interRAI can address, however it is important to note nurses have always been required to undertake assessment and the costs to a facility will be less if duplication of effort is reduced.

interRAI competency training is unlikely to become part of the undergraduate nursing programme, developing specific assessment skills is seen as a Post Graduate activity and trainees require access to ARC residents to be able to complete the programme.

Training is available for all ARC nurses including Enrolled Nurses.

Response to specific recommendations

Strategic and operational recommendations

Implementation and communication

Recommendation

- I. A communication strategy is put in place that includes collaborative consultation process with all stakeholders for new projects piloting other interRAI assessment tools. (Strategic)

interRAI response

A stakeholder engagement and communications strategy has been developed for interRAI to be implemented in the coming year. This includes work to improve ARC sector knowledge and understanding of the benefits of interRAI assessment: what is collected; how to use it; the added value of interRAI data to improve service delivery; and enhanced engagement with key stakeholders to build and maintain support for interRAI.

Any further interRAI projects will include a dedicated engagement and communications strategy and a focus on clinical change management.

Recommendation

- II. Evaluation and adaptive management incorporated from the planning phase for new projects/pilots and not just at the end of the pilot or project. (Strategic)

interRAI response

Future interRAI projects will follow project methodology, which includes evaluation throughout the project not just at the end, to ensure the project is progressing towards its objectives and enable stakeholder's feedback to inform outcomes as the project progresses.

Recommendation

- III. A simple ongoing evaluative ('track as you go') process is established for the LTCF clinical assessment tool so that progress and issues can be tracked and resolved as required. This process also enables the people using the tool to give feedback and have a voice. (Operational)

interRAI response

A number of changes have been made to the assessment as part of the annual upgrades. An interRAI methodology group is established and the interRAI Software User Group has recently been reformed and now includes ARC sector representatives. The sector is kept informed of changes via the interRAI Informer e newsletter.

Recommendation

- IV. interRAI Services communicate how the data collected now from the LTCF clinical assessment tool can benefit the sector. (Operational)

interRAI response

Development of an ARC suite of interRAI reports is underway and the first set of reports are due to be published in February 2017. The reports have been developed in partnership with a group of ARC representatives. The reports aim to be simple and easy to understand and provide comparative information for an individual or group of facilities across the DHB, regional or national picture. These reports can be utilised by both DHBs and ARC facilities to inform service development. Facility Managers are also encouraged to attend Facility Manager training, delivered by interRAI Services, which helps develop their understanding of the data and how to use it.

Training

Recommendation

- V. Investigate a more sustainable interRAI LTCF clinical assessment tool training model in New Zealand. (Strategic)

interRAI response

As part of business as usual quality improvement, interRAI Services will review education and support and consider where processes and delivery could be enhanced. interRAI Services may, as part of this

review, compare the education and support programme for interRAI with other similar programmes to ensure we are using the model that follows best practice and provides the best learning and development experience for interRAI users.

Recommendation

- VI. Review training feedback mechanisms to collect and utilise both information about the LTCF clinical assessment tool and the training process itself (Operational)

interRAI response

A feedback tool to evaluate interRAI education and support programmes from a user's perspective is in place. Trainee feedback is incorporated into future education and support programme to ensure we meet best practice and provide the best learning and development experience for interRAI users.

Efficiency

Recommendation

- VII. Decide upon a preferred process model for the interRAI LTCF clinical assessment tool (Strategic)

interRAI response

interRAI Services are working with ARC representative groups to design a series of workshops to help ARC facilities embed interRAI into their individual systems and processes and realise the full benefits. A 'road map' providing an example of best practice will be developed to guide ARC facilities.

Recommendation

- VIII. Work with DHBs to improve consistency with NASC processes. (Strategic)

interRAI response

A review of NASC guidelines is planned as part of a Ministry of Health programme of work on Community and Aged Care. interRAI Services will increase their focus on quality reviews of interRAI assessments to help improve the quality of reassessments provided as part of a request for change in level of care.

Recommendation

- IX. Demonstrate efficient application of the LTCF clinical assessment tool (Operational)

interRAI response

As per recommendation (i) above

Recommendation

- X. Investigating the feasibility of allowing bidirectional information flows between the LTCF clinical assessment tool and the number of resident management and care plan options available. (Operational)

interRAI response

interRAI interoperability with other systems in ARC has been increasing steadily since initial implementation and processes are now well established. Decisions about further investment in the flow of interRAI information sit with the interRAI NZ Governance Board.