

Understanding Geriatric Care Assessment Practices in Home Care: The Geriatric Care Assessment Practices (G-CAP) Survey

Background:

Three levels of geriatric assessment exist in Ontario home care:

- 1) *The System Level*—Community Care Access Centres (CCACs) are mandated to use the interRAI Home Care Assessment (RAI-HC) for allocation of government-funded home care services for long-stay home care clients
- 2) *The Agency Level*—RAI-HC data collected by CCACs are not routinely shared with or used by direct-service home care agencies and each agency has their own intake process
- 3) *The Frontline Level*—Frontline providers from multiple disciplines individually collect the information they need to provide care to geriatric clients and their specific assessment methods are not well-defined or understood

The disconnect between geriatric assessment for service allocation at the system level and care planning at the agency and frontline levels is a barrier to efficient, integrated and person-centred home care.

Purpose of this Research:

The purpose of this research is to explore the geriatric care assessment practices of frontline nurses, occupational therapists (OTs) and physiotherapists (PTs) in Ontario home care to inform the development of a more integrated geriatric care planning approach.

What we did:

- A literature review, environmental scan and expert interviews (N=7) led to the development of the Geriatric Care Assessment Practices (G-CAP) survey—an online, self-report tool that takes approximately 30 minutes to complete and has 33 questions related to the following five areas: 1) Assessment methods; 2) Attitudes toward assessment; 3) Perceptions of the RAI-HC and interRAI Community Health Assessment (RAI-CHA); 4) Interdisciplinary Collaboration; and 5) Demographic information
- The G-CAP survey was pilot tested (N=27) and determined to be reliable and valid for use with nurses, OTs and PTs in Ontario home care
- The G-CAP survey was administered broadly to nurses (N=101), OTs (N=102) and PTs (N=102) representing 12 different frontline home care agencies across Ontario

What we found so far:

- 1) Survey participants use their own clinical observation and interview skills (M= 4.56 on a 5 point scale where 1= Never and 5= Often-Always) far more often than any of the 68 standardized tools for geriatric assessment included in the survey (M= 1.64 on a 5 point scale where 1= Never and 5= Often-Always)
- 2) 48-74% of participants had heard of the RAI-HC or RAI-CHA; however, on average, they never use them for geriatric assessment (M= 1.5 on a 5 point scale where 1= Never and 5= Often-Always)
- 3) Participants agreed they could use client information collected by other health care professionals (M= 4.22 on a 5 point scale where 1= Strongly Disagree and 5= Strongly Agree), but also agreed they

must conduct client assessments themselves in order to provide care (M= 4.22 on a 5 point scale where 1= Strongly Disagree and 5= Strongly Agree)

- 4) Participants were almost neutral as to whether they feel part of an integrated home care team (M=3.41 on a 5 point scale where 1= Strongly Disagree and 5= Strongly Agree)
- 5) Participants rarely share data within (M= 3.71 on a 5 point scale where 1= Never and 5= Often-Always) or outside (M=3.82 on a 5 point scale where 1=Never and 5= Often-Always) their discipline and rarely/ sometimes receive assessment data within (M=3.42 on a 5 point scale where 1=Never and 5= Often-Always) or outside (M=3.47 where 1=Never and 5= Often-Always) their discipline

Why this is important to frontline home care provider agencies:

- Frontline providers neither have access to RAI-HC assessment data, nor do they complete their own RAI-HC assessments
 - Frontline care is guided by clinical judgment and client interviews
- Need to improve frontline provider information-sharing and communication
 - Providers do not necessarily feel part of an integrated team
 - Limited sharing of individual assessment data
- Potential to optimize/ integrate system-level RAI-HC data with frontline provider observations
 - RAI-HC developed to be a comprehensive assessment tool to guide real time care planning and delivery but currently not being used in this capacity
 - Individual provider observations and assessments not used in service allocation

What we are doing next:

Results of this survey will be combined with input from geriatric home care clients and their family caregivers in the development of an implementation framework for a more integrated geriatric care planning approach at the service provider level in Ontario home care. The implementation framework is anticipated to be available in the summer of 2018.

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