

Improving the assessment of people with care needs – the RAI system

[Coordination of care, care pathways]

Stephanie Carretero, Polibienestar Research Institute | Universitat de València (Spain)



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Health systems and long-term care for older people in Europe. Modelling the interfaces and links between prevention, rehabilitation, quality of services and informal care

Introduction

<u>Objectives</u>: To improve continuity of care between different settings such as hospitals for the chronically ill, nursing homes and hospital at home services, using the RAI.

<u>Key issues addressed</u>: Place people in appropriate settings, predict future pathways, and improve the quality and efficiency of the LTC system

Current status:

PILOT PROJECT TERMINATED	PILOT PROJECT ONGOING	PROJECT TERMINATED	PROJECT ONGOING	IMPLEMENTED PRACTICE RESTRICTED AREAS	WIDELY SPREAD PRACTICE ROLLED OUT



Why was this project developed/implemented?

- Lack of individualised and integrated plans for older people in need of LTC ...
 - no coordination among health and care systems (different assessments), reulting in
 - poor quality of care and more costs for the system



Main features of the example (description)

- Research projects funded by national and regional governments, developed mainly in Valencian Community and Murcia Region (Spain)
- Methods applied in Hospitals for the chronically ill, nursing homes and 'hospital-at-home' services
 - RAI system: standarised assessment of patients and grouping according to their degree of care needs.
 - RUG III: allocation of patients to care according to their needs.
 - Michigan Choice algorithm: best health or social care option.
 - Clinical assessment protocols: identification of problems for individual planning care.

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Main features of the example (description)

2 phases of the project:

- Phase 1: Implementation of the RAI system and creation of the institutional web database
 - Training of professionals in the use of RAI: assessment, care planning, leadership and management, quality improvement and SPSS (database)
 - Pilot in social and health centre for the use of RAI
 - Data gathered in SV NURSING HOME/HOME CARE.NET, through a platform: www.e-valoras.com
- Phase 2: Analysis of data to define and validate care pathways, individual care plans and calculate costs



Costs of the example

- Cost: 70,000 € per year for software licenses, training material, adaptation to the context, maintenance of the service and technical protocols
- No human resources cost included



What are/were the effects?

- Possibility of implementation of the RAI system in Spanish hospitals for the chronically ill, nursing homes, and hospital at home services
- Improvement of the resource allocation of people with LTC needs.
- Definition of efficient and effective health and social care pathways



What are/were the effects?

- Better coordination of health and social care services
- In the long term: higher cost-efficiency of the systems
- Improvements in planning of the provision and costs of social and health care services



Strengths and limitations

Strenghts:

- Support of the Spanish Dependency Law (LTC legislation)
- Simplification of the coordination of health and social care resources and better care itineraries (costs savings, quality of life and efficiency)

Weakness:

- How to motivate professionals in the use of RAI?
- Economic investment in the whole system?

Threats:

- Current economic situation
- Problems in the implementation of the Dependency Law (economic)



Conclusions

- **For practice**: RAI is a powerful tool for the optimization of care; needs the involvement and motivation of care professionals.
- **For policy-makers**: Increase investment in such integrated and coordinated care, return of investments at long term.
- For research: research on efficiency (economic impact) and motivation of care professionals.



Questions:

- Is the example relevant for your country and why (not)?
- What is crucial for its implementation?