

Why the interRAI Suite of Assessment Systems is Suitable for Australia



A recent webinar hosted by Aged Care Industry Information Technology Council (ACIITC) announced findings from a soon to be published report: *A survey and evaluation of comprehensive geriatric assessment systems (CGAs) for residential and community aged care*¹, presented by the University of Queensland Centre for Health Services Research (CHSR). The study identified two strong contenders internationally which were both interRAI systems: The interRAI LTCF (Long Term Care Facility) and interRAI HC (Home Care).

What makes interRAI stand out above the rest?

The CHRS research team along with an expert industry reference group identified a number of criteria against which each of the CGA tools were evaluated.

The interRAI LTCF and interRAI HC systems equally scored the highest followed closely by their “cousin” MDS 3.0 RAI which is only available in the USA under a restricted licence agreement with interRAI.

Here’s why interRAI systems really stand out from the crowd:

Suitability: interRAI assessments and systems are universally applicable.

Reliability: tried and tested over 30 years.

Validity: scientifically validated – over 1000 publications.

Uptake: deployed in over 35 countries.

Organisational Support: local and global resources available to support implementation.

Ongoing Development: collaborative ongoing product development.

Software Support: technical implementation support resources.

Not-for-profit: royalties and licence fees are reinvested into research & development.

Training Support: extensive training materials and experience local training instructors.

¹ ACIITC Forum, 24 Aug 2023, <https://youtu.be/CFwGL8Rsnfl?si=6jllxDA3K0kEDwH&t=558>

The interRAI suite

The interRAI suite of assessment systems is designed in consideration of the setting or circumstance of each assessment, and the most prominent issues that the individuals who are undergoing assessment are likely to have. Each interRAI assessment system contains a set of identical ‘core’ observations, that refer to important issues such as cognitive function, activities of daily living and continence. As such, key measures such as mobility and frailty (for example) are embedded in multiple interRAI systems, including ALL systems that pertain to aged and community care.

Intake: The interRAI Check-up (CU), Self-report version, is of manageable size, that would provide a comprehensive understanding of the person’s likely needs, in advance of formal assessment.

Eligibility Assessment: The interRAI Check-up (CU) provides sufficient information for many persons that are likely to require support from the Commonwealth Home Support Programme.

For persons that require more intensive assistance, including those receiving services through the Home Packages Programme, the interRAI Home Care (HC) is a more suitable assessment. It provides an in-depth assessment of the person’s needs, regardless of whether the ultimate program offered is community care or residential care. The majority of observations in the interRAI CU are also contained within the interRAI HC.

Therefore, a process of commencing an assessment using the interRAI CU could be amplified to the interRAI HC if the person’s requirements appear to be substantial.

Admission to Care: The interRAI CU and interRAI HC are designed to support assessment, care planning and monitoring within a community care program. They are well suited to the Australian environment. Since they would be identical to the eligibility assessment, the ACAT assessment could be incorporated into a software solution that refers directly to their baseline condition.

The interRAI Long-Term Care Facility (LTCF) is designed for residential care of persons with complex care requirements. It would be administered at entry, and repeated at regular intervals to ensure that care is adjusted as needs changed, typically at 3 month intervals. There is considerable overlap of content between the interRAI HC and interRAI LTCF, very useful to compare these populations, and simplifying training across the aged care program.

Casemix Classification: Since the interRAI LTCF contains detailed information that corresponds to the information contained in the AN-ACC data set, it is likely that the AN-ACC classifications could be accurately calculated from the interRAI LTCF data set. This would require mapping of the relevant interRAI data items and scales to the AN-ACC equivalents. If this is achieved, a large volume of data duplication would be eliminated.

Quality Indicator Reporting: The majority of the Australian mandatory Quality Indicator (QI) panel can be calculated from the interRAI LTCF data set. If this assessment is kept up to date (with 3 monthly reviews), the relevant QIs can be automatically calculated, with minimal data burden.

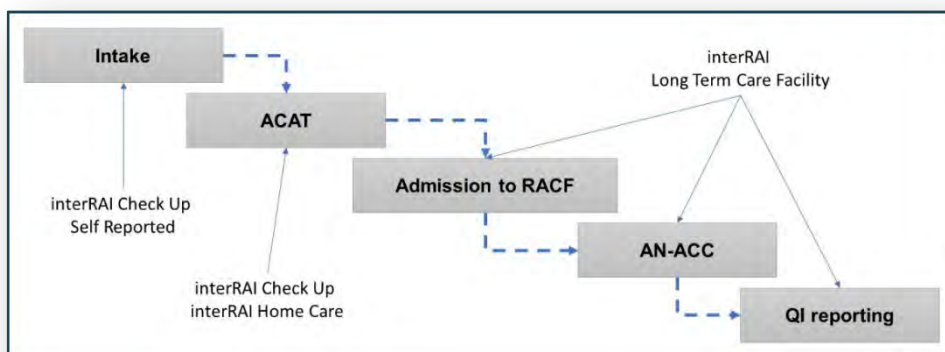


Figure 1: Potential schema for application of the interRAI Suite in Australian aged care*¹



Recommendations

interRAI Australia recommends introduction of the:

- interRAI Self-Reported CU as a self-assessment solution for the MyAgedCare consumer portal
- interRAI CU (low complexity) and interRAI HC (high complexity) systems for the aged and community care programme eligibility (ACAT) assessment
- interRAI CU and interRAI HC for the Home Support Programme and Home Packages Programmes respectively and
- interRAI LTCF as the core assessment framework and Minimum Data Set for Residential Aged Care.

These systems extensively share common data elements, and derivative scales. The interRAI CU is effectively an abbreviated version of the interRAI HC. The interRAI LTCF shares over 50% of its data elements with the interRAI HC.

For example, in each assessment the need for assistance in walking - is described in precisely the same manner, enabling direct comparison of performance across settings, and ease of training, interpretation and communication for clinicians and other stakeholders.

Conclusion

In the current aged care program, important clinical concepts are unnecessarily recorded in multiple different formats. By adopting the interRAI Suite of Assessment Systems across the aged and community care program, recording of these phenomena could be standardised, enabling direct comparison across settings and across the person's journey, and significant reduction in data burden.

The interRAI Suite of Assessment Systems, if applied to the Australian aged care system, would solve the broader data inefficiency problem along with numerous other benefits.

To generate a system-wide consistent observation, the interRAI items and the systems in which they are embedded need to be given immediate consideration by key policy makers.

For further information regarding the design of interRAI systems, and how they may be applied in the Australian aged care program visit:

<https://interrai-au.org>