Memorandum on External Recommendations for Standardized Assessment in the United States

March 11, 2013

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The team acknowledges guidance on this document from Lisa R. Shugarman, PhD, The SCAN Foundation.

"Supported by a grant from The SCAN Foundation, dedicated to creating a society in which seniors receive medical treatment and human services that are integrated in the setting most appropriate to their needs. For more information, please visit www.TheSCANFoundation.org."

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Motivation for Reviewing External Recommendations for Standardized Assessment

Standardized assessment of each person's need for services has been identified as a fundamental tool for bringing more coherence across a too often fragmented Long-term Services and Supports (LTSS) system. Standardized assessment is compelling for several reasons. First and foremost standardized assessment can facilitate consistent and reliable identification of the individual's met and unmet need for home- and community-based services (HCBS). At the level of the individual, a standardized assessment will also simplify access to various programs and supports and has been identified as an important building block for decreasing fragmentation and improving services provided to those with long-term care needs.[1,2, 3] At the program and provider level, uniformity could enhance information exchange and flow across providers, counties and programs and enhance efficiency through data sharing. At the state level, a common set of assessment items across agencies and programs offers the potential to better understand the population requesting LTSS, to compare who uses which services, to ensure resources are equitably distributed and to improve planning across programs. Finally, a standardized assessment could contribute to better monitoring of quality and health outcomes by providing information about baseline and follow-up need. As a result, standardized assessment offers the potential to improve consumer care and coordination as well as program planning, delivery and evaluation.

Recognizing this potential, the California Legislative Welfare and Institutions Code Section 14186.36, as established by Senate Bill 1036, Chapter 45, Statutes of 2012 (SB 1036) "require(s) the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging, to establish a stakeholder workgroup, as prescribed, to develop a universal assessment process, including a universal assessment tool, to be used for home- and community- based services, as defined, including IHSS". LTSS programs whose intake process would be affected by this mandate include the

Multipurpose Senior Services Program (MSSP), Community-Based Adult Services (CBAS), and In-Home Supportive Services (IHSS).

This legislative mandate has the potential to assist in transforming the CA LTSS system into one that organizes care around individual need rather than existing program structures. The standardized assessment's ability to effectively improve needs assessment will be dictated by clear definition of its purposes and selection of topics that efficiently meet those purposes for the target population.

In this memorandum, we identify and compare existing gold-standard recommendations for the content of standardized assessment. The goal is to provide a framework for comparing the content of various instruments at later project phases. This memorandum was developed by the University of California Los Angeles Borun Center (UCLA Borun Center) and partners at the University of California, San Francisco (UCSF) and the University of Southern California (USC). This team is supporting The SCAN Foundation under a grant awarded in January 2013 to conduct an analysis of promising practices that will serve as options for decision makers to consider in their efforts to develop a Universal Assessment Instrument for California's home- and community-based services (HCBS) that would support a more integrated delivery system.

Approach to Identifying and Comparing Recommendations for Standardized Assessment

Summary: We conducted an environmental scan to identify recommendations from key provider groups, professional societies, and national programs. During this search we identified those sets of recommendations that are focused on improving the identification of an individual's needs for long term services and supports as a step toward better care planning and resource allocation decisions. From these sets we abstracted information about the recommended domains and topics for a standardized assessment. Drafts of the abstracted topics were presented to a HCBS UAI Advisory Group from state programs to obtain input on organization and to advance discussion on the potential scope and length of the Standardized Assessment.

Selection of external standards: We first examined the California legislation that authorized a universal assessment in order to identify intent, references to external models, and key terms for searching. We then searched in PubMed, Google's web search engine and The New York Academy of Medicine's Grey Literature Report, using as search terms variations and synonyms for "home- and community-based services assessment standards of care." These keywords included: health, home care, home care assessment, home and community based assessment, home care patient assessment standards of care, external standards of assessment, HCBS assessment, long term care assessment, uniform assessment, and universal assessment and case management assessment standards. This search identified candidate news articles, peer-reviewed literature, grey literature, manuals, and policy briefs. We searched the references from these to identify any additional guidelines or recommendations made by professional organizations or national consensus process. We excluded proprietary instruments that were not in the public domain. We also asked content experts to identify key entities who might have an interest in developing core sets of assessment items.

We retained non-copyrighted instruments and guidelines from recognized entities whose objective was to provide assessment standards. This process yielded five assessment standards or guidelines: the Balancing Incentive Program Manual (BIP)(2011), the Case Management Society of America, Standards of Practice for Case Management (CMSA) (2010), the National Association of Social Workers, Standards for Social Work Practice (NASW) (2005), the American Medical Association and American Academy of Home Care Physicians, Medical Management of the Home Care Patient, Guidelines for Physicians (2007) (AMA/AAHCP), Program of All-Inclusive Care for the Elderly Manual (PACE) (2011).

The instruments selected represent the variety we determined necessary to portray an overarching external standard of assessment. Although PACE is considered a service delivery body, it is unique as a partnership between an organization, the State, and the Federal government. For our purposes, it serves

as a representation of two different government levels of thinking as well as the service provider level of thinking. Additionally, its manual was designed by recognized entities—the Department of Health and Human Services (DHHS) and the Center for Medicare & Medicaid Services (CMS). While the Balancing Incentive Program (established as a provision in the Affordable Care Act) is not an option for California, it exhibits minimal topics that states would be expected to include to satisfy the requirement for basic assessment in the program. Its recommendations are not meant to provide a comprehensive needs assessment. This is contrasted with the NASW's health care standards for assessment that provides a holistic view of assessment, while the AMA/AAHCP collaboration places more emphasis on comprehensive medical assessment while addressing many core topics for LTSS.

Abstraction of the Recommendations

We next reviewed each set of guidelines or recommendations. We focused on abstracting information about assessment elements at the level of domains (general areas) and topics (more specific areas). For this cross comparison, which is meant to allow an understanding of potential scope of a standardized assessment, we did not abstract specific items used to measure a topic.

Explanation of Table

The table below displays external standards in columns, and assessment domains and their component alphabetized topics in rows. Assessment domains are highlighted in blue and topics are grouped within these domains. Assessment domains and topics endorsed by each standard are indicated by check marks within columns. In some cases standards broadly defined recommended assessment areas without elaborating underlying topics. In those instances check marks are placed at the level of the domain, indicating a general prioritization of that subject area. Because the different organizations did not employ identical language, grouping approaches or labels, the development of this table required some interpretation of topic clusters.

For six domains, the majority of candidate topics were included in more than one set of recommendations. These domains include: background and demographic information, financial assessment, basic activities of daily living, instrumental activities of daily living, cognitive/emotional/behavioral, goals and preferences. Four domains had a majority of topics that were included in recommendations by a single organization: health, environmental assessment, caregiver assessment, and "other".

Discussion

Existing national recommendations for standardized assessment varied in scope. This variation in scope is expected based on the described intent of each instrument. Arguably, those assessment items included in more than one recommendation could be seen as potentially core to assessment. If reliable, valid and feasible assessment items can be identified for these topics, then these should be given extra consideration for inclusion into a standardized assessment. For those topics recommended by only one organization, stakeholders may want to consider these as prompts to ask about the potential utility of including these for appropriately identifying need and for program-level care planning for persons requesting long-term services and supports.

[1] Transforming California's System of Care for Older Adults and People with Disabilities: A look at the State's Administrative and Fiscal Organization, SCAN Policy Brief No 5, May 2011. www.theSCANFoundation.org.

[2] Kassner, E, et al. A Balancing Act: State Long-term Care Reform, AARP Public Policy Institute July 2008.

[3] Lind, A and Gore, S Center for Health Care Strategies. From the Beneficiary Perspective: Core Elements to Guide Integrated Care for Dual Eligibles" The Commonwealth Fund. December 2010

Assessment Domains Included in External Standards

	BIP [1]	CMSA [2]	NASW [3]	AMA & AAHCP [4]	PACE [5]
Background Information					
Communication	X			X	
Cultural History and Influences		X	X	X	
Education		X	X	X	
Formal Services and Providers		X	X		
Health Insurance		X	X	X	X
Health Literacy		X		X	
Informal Support Systems		X	X	X	X
Language Issues		X			X
Legal Representatives/Documents		X		X	X
Others Living in the Home		X	X		X
Primary Caregiver		X		X	
Primary Health Care Provider		X		X	
Residential Status		X			
Spiritual Support		X	X		
Financial Assessment					
Employment History	X	X	X		
Income/Assets/Other Private Resources			X	X	
Out-of-Pocket Expenses and Impact				X	
Program Eligibility		X		X	
Health					
Abuse or Neglect (potential for or history of)		X			
Allergies/Adverse Drug Events				X	
Assistive Devices or Adaptations		X		X	X
Continence				X	
Dental Status				X	X
Fluid Intake				X	
Gait & Balance Assessment/Falls				X	
Genetic History of Family Health			X		
Hearing				X	
Medical History, Active Diagnoses	X	X	X	X	X
Medications				X	X
Medication adherence				X	
Understanding of medications				X	
Nutritional Status/Weight Change		X		X	X
Pain		X			
Physical Exam				X	
Special Treatments				X	X
Swallowing				X	
Vision				X	

[1] Balancing Incentive Program Implementation Manual, 2011
[2] Case Management Society of America, Standards of Practice for Case Management, 2010.
[3] National Association of Social Workers, Standards for Social Work Practice, 2005
[4] American Medical Association and American Academy of Home Care Physicians, Medical Management of the Home Care Patient, Guidelines for Physicians, 2007
[5] Program of All-Inclusive Care for the Elderly Manual, 2011

Assessment Domains Included in External Standards

	BIP [1]	CMSA [2]	NASW [3]	AMA & AAHCP [4]	PACE [5]
Functional Assessment		X	X		
Activities of Daily Living (ADLs)					
Ambulating				X	
Bathing	X			X	X
Bed Mobility	X				
Dressing	X			X	X
Eating	X			X	X
Hygiene	X				X
Mobility (in/out of home)	X				X
Oral Care					X
Toilet Use	X			X	X
Transferring	X			X	
Instrumental Activities of Daily Living (IADLs)					
Equipment/Supply Management					X
Managing Finances	X			X	
Managing Medications	X			X	X
Meal Preparation	X			X	X
Ordinary Housekeeping	X			X	X
Shopping	X			X	X
Telephone Use	X			X	X
Transportation	X	X		X	X
Cognitive/Social/Emotional/Behavioral					
Alcohol or Other Substance Use		X	X	X	
Behavioral Symptoms	X	X	X	X	X
Cognitive Functioning	X	X	X	X	X
Judgment/decision-making capacity	X			X	
Memory	X				
Mood and Affect		X	X	X	
Other Psychiatric		X	X		
Readiness to Change		X			
Recent Change in Cognition/Delirium				X	
Sexual Functioning/Body Image			X		
Social Participation/Isolation		X	X	X	X
Suicide Risk		X	X		
Goals and Preferences					
Advance Care Planning		X		X	
Care Goals, Expectations, Preferences				X	X
Health Goals, Expectations, Preferences		X			X
Personal Values or Beliefs			X		
Transitional/Discharge Plan		X			
Environmental Assessment (Home, Community)		X	X		X
Adequate Space				X	
Communication with Emerg. Svcs. and Utilities				X	
Community Resources				X	
Emergency Preparedness				X	

Assessment Domains Included in External Standards

	BIP [1]	CMSA [2]	NASW [3]	AMA & AAHCP [4]	PACE [5]
Housing Accessibility				X	X
Housing Stability				X	
Neighborhood Safety				X	
Safety In-Home				X	
Telephone Access				X	
Transportation Access		X		X	
Caregiver Assessment					
Availability to Provide Care		X		X	
Emotional Competence/Stability		X		X	
History of Abusive Behaviors				X	
Hours/Tasks				X	
Physical Capacity		X		X	
Stress or Need for Respite				X	
Willingness/ Ability to Implement Care Plan				X	
Willingness/Ability to Work with Care Team				X	
Other					
Family Dynamics		X	X	X	
Learning and Technology Capabilities		X			
Recreational/Leisure Pursuits		X			
Self-Care Capability/Client Strengths		X			X
Stage in Life Cycle & Related Developmental Issues			X		