Medical service innovation in residential aged-care – an evaluation of the HealthCube ICT-enabled comprehensive medical assessment service

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The challenge of an ageing population

- The challenge of an ageing population (Productivity Commission, 2008)
- “Problematic” and “disjunctional” healthcare interface (Kendig, 2001)
- Community concern about the difficulties obtaining GP services (AMA, 2008)
Comprehensive Medical Assessments

- Potential of aged-care assessments to improve quality of healthcare (Byles, 2000)
- Poor CMA uptake and major barriers (Walther, 2007)
- Significant ICT potential but poor evidence base (Jimison, 2008)
The HealthCube CMA service

An e-health initiative in aged care aimed at improving the detail, accuracy and availability of information provided by CMAs.
Aim of the study

Examine how residents and their families, Facility staff and HealthCube staff view the experience of participating in the HealthCube CMA service
Objectives

1. What are the major benefits
2. Potential future benefits
3. What enhancements are required
4. The consequences of the service
5. A performance framework to measure benefits - eg quality of care, satisfaction and quality of life and benefits to RACF
Methods

• Research evidence investigation
• Qualitative study generating rich contextual data taking into account different perspectives
• 15 Interviews
• HealthCube staff (2 GPs, 4 others)
• RACF staff (4 nurses, 3 managers)
• 2 friends/family of residents
Prevailing perceptions

• RACF experience of CMA completion, prior to HealthCube service is that they were conducted in a “limited way” or “not at all”

• Conflicting and variable understanding of the importance, value and significance of CMAs
Improved CMA utilisation

• Increase in the completion of CMAs
• Substantial increase in CMA coverage
• Up-to-date resident information that is accessible to care providers
“…CMAs are giving us a better understanding of the person’s actual current condition and current care needs, and that data can then be fed into the care plans and help us to best manage the resident” (Care Facility participant)
Impact on the quality of residential care

- 5-10% of residents reported to have previously unidentified or unresolved health issues
- Including: previously undetected breast cancer, poly-pharmacy and a range of important quality of life issues
- Contribution of the service to the promotion of clinical governance standards and accountability
“One lady used to like reading but she doesn’t read as much now because she can’t see properly and she hasn’t had her eyes tested for years.” (HealthCube participant)
“In most of the CMAs that I’ve done, for the majority, I think I would be making some recommendations at the end of the CMA for the aged-care facility to follow-up some issues.” (HealthCube participant)
Enhanced care provision

- Important additional information
- Improvement in the accuracy and reliability of data
- Building block for interoperable system development
ICT-enabled improvement

- Improvements in the accuracy, completeness and timeliness of data
- Potential to improve the transferability of data that can greatly improve the coordination of care
- Significant population health potential
Evaluation framework

- **Assessment**: CMA identifies care issues
- **Care processes**: What is being done to enhance the provision of care?
- **Outcomes**: What is the outcome of the care process?
Garling Report 2008

“The need for a centralized medical record for the treatment of elderly patients is self-evident: they commonly have multiple medical conditions, require multiple admissions to hospital, require numerous investigations, as well as regular attendances at a general practitioner, community health and specialists, all of who are treating the same person and all of who require access to medical records.”

Recommendations

1. Clear procedures and protocols
2. Enhanced ICT capacity and utility
3. Quantification of the health, quality of life and economic benefits
Thank you

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