

Guideline for completing community-based interRAI assessments via video link or telephone

(Home Care, Community Health Assessment, Contact Assessment)

Purpose

This guideline describes how clinician-administered community-based interRAI assessments may be completed when face-to-face assessments are unable to be completed. Examples include safety concerns of the assessor or person because of weather events, earthquake and/or the person's isolation requirements.

Home and community support services help people remain at home and may reduce the risk of hospitalisation or admission to other institutional settings. The interRAI assessment is person-centred, so conducting the assessment face-to-face is best practice. The level of detail required to accurately complete the assessment is easier to achieve if the person is visited in their home environment. However, if there are circumstances described above, regular practices may need to be adjusted to prioritise the completion of the assessment to support service provision. In circumstances such as a pandemic, completing an interRAI Contact or Home Care assessment through live video stream may reduce the risk of contagion for the person and their assessor, as well providing business continuity for assessors who may be in self-isolation yet able to work.

The interRAI Contact Assessment may be used over the telephone at any time in usual circumstances. International studies confirming the validity and reliability of the assessment included completion by telephone. A telephone protocol for the Contact Assessment has been in place for assessors since 2012. Telephone assessments are useful to understand the complexity of the client's condition and the need for more in-depth assessment such as an interRAI Home Care assessment.

People who should not be assessed by telephone:

- Persons with hearing, visual, speech, language or cognitive difficulties.
- Persons with English as a second language who do not have access to an interpreter.

If these issues become evident on initial contact, the assessment should be terminated, and arrangements made to visit face-to-face.

Completing the interRAI Home Care Assessment

Contact the person or their family member/whānau/carer to prepare for the assessment:

- Check whether a mobile device capable of sharing live video between the person and the assessor is available. Preferably this will be a tablet or laptop.
- Check whether the person/family/whānau/carer is comfortable with this technology or whether they can obtain the support they may need from someone they trust.
- Practice with the person/family/whānau/carer to see if the device can be positioned to allow both close ups and views of the whole person, to see the person in motion, and to observe the environment.
- Request that the person/family/whānau/carer send photos of the environment if the device is not mobile.
- Identify a support person who can hold the device and liaise with the assessor if the person cannot manipulate the device adequately themselves. Ideally this is the family

member/whānau/carer accompanying the person being assessed (and who is alert to appropriate precautions against infection if circumstances require this).

- Ask the person/family/whānau/carer to have available
 - the person's medications
 - the person's height and weight (where possible safely)
 - documentation that is routinely collected for the assessment, such as EPOA documents, health appointment documents etc.
- Review the person's previous assessment (if this is not their first assessment) to highlight any issues that may require specific clinical observation or discussion.
- If not already required to assist, offer the opportunity for the person to have family/whānau/carer involvement in the assessment. If that is not possible, arrange for a follow-up call with the family/whānau/carer at another time, with the person's permission.
- A family member/whānau/carer must be present if the person has any known cognitive or communication problems. If the family member/whānau/carer is in the home, check that they will be available to participate while the person is assessed.
- The Home Care assessment cannot be completed by telephone as it requires a degree of investigation, through oral and visual information that isn't possible to acquire via the telephone.

During the Home Care assessment

- Assess the person through structured conversation, in the same way as a face-to-face assessment.
- Obtain information from family member/whānau/carer and others (such as the general practitioner) in the same way as a face-to-face assessment.
- Use the mobile device to enable observations that are fundamental to the assessment.
- During the assessment, use the relevant sections of the assessment to explore:
 - a) cognitive, psychological or functional losses that might occur due to isolation or adverse consequences of isolation.
 - b) any issues related to access to medications and food.
 - c) in the case of pandemic or clinical isolation consider symptoms of infection that require urgent response. This may include investigation as to how long symptoms have been present, especially sore throat or persistent cough.
- Ask the family member/whānau/carer for input to provide any supplementary information that is not demonstrated readily through the device.
- Do not rely on auto-population methods to carry over clinical observations from a previous assessment. Because video link is being utilised in emergency circumstances, it is important that your assessment is sensitive to changes in physical or mental health, cognition, function, and other clinical signs.
- If you notice substantial changes in the person's health and well-being based on the new assessment (e.g., change in cognitive function or significant low mood), ensure that other

health care partners are aware of the change. These are the priorities for care planning before attending to other triggered CAPs.

General

1. The assessment may take longer than normal because all the usual cues from being face-to-face with the person will not be available. However, this and preparation time are offset by not needing to travel.
2. Depending on your workplace policy, this may be an opportunity to check whether the family member/whānau/carer who also is present at the assessment has any problems related to the emergency that require urgent support.
3. Height and weight items that are not available through pre-assessment preparation may be deferred to the next assessment.
4. Record that the assessment was conducted via video link and who was present/provided information.

Completing the Contact Assessment by phone

Good practice, as well as the expectations of the Code of Health and Disability Consumers' Rights, requires that the person must be clearly advised that an assessment or reassessment is planned, what is involved and provide consent to proceed. Ideally, this is arranged with the older person by a telephone call to confirm an appointment, allowing the person time to arrange another person to be present if preferred. The assessor needs to complete this step before conducting a telephone Contact Assessment to ensure the person is suitably ready to participate.

The assessment should be conducted like a conversation and be finished within 20-30 minutes. It is reasonable for the assessor to ask some clarifying questions to elicit the required information, but additional assessment items are not required. The assessor should ask the person for the name and contact details of a family or whānau member that the assessor could also contact to discuss the assessment, if required and the person gives their permission. Discussing potential service plans or preferences with the person is reasonable, provided this is completed within the 30-minute time frame and does not pre-empt the analysis of assessment results. Allow time for the person to ask the assessor questions as well.

Contact Assessments can only be undertaken by a competent interRAI Contact Assessment assessor, or those currently in interRAI Contact Assessment training.

Record that the assessment was conducted by telephone, who was present/provided information.