

Establishing a National Framework for Geriatric Home Care Practice



champ-program.org

COLLABORATION FOR HOME CARE ADVANCES IN MANAGEMENT AND PRACTICE



This presentation was delivered by Penny H. Feldman, Vice President of Research and Evaluation, and Annette M. Totten, Director of the Geriatric Framework Project, at the National Association for Home Care 2007 Annual Meeting in Denver, CO

CHAMP Activities are possible with generous support from The Atlantic Philanthropies and The John A. Hartford Foundation

Center for Home Care Policy & Research

Establishing A National Framework For Geriatric Home Care Practice



Visiting Nurse Service Of New York®

1250 BROADWAY ≈ NEW YORK, NY 10001-3701 ≈ (212) 609-5780

www.vnsny.org/research

Session Faculty



- Penny Hollander Feldman, PhD
 - VP for Research and Evaluation
 - Director, Center for Home Care Policy & Research
- Annette M. Totten, PhD
 - Director, Geriatric Framework Project
- Project Contact
 - geriatric.framework@vnsny.org
 - www.vnsny.org/geriatrics
 - Dhara Naik, MPH
 - 212-609-6329



Session Objectives

- Describe critical gaps
- Discuss the process of consensus building
- Identify operational, training and payment issues that affect the “business case”

Geriatric Framework Project

- Goal: To build a framework for practice guidelines that will shape the provision of home care and recognize the integral role of caregivers.
- Specific objectives:
 - Information gathering
 - National consensus
 - Awareness and buy-in
- Funded by John A. Hartford Foundation

Project Organization and Activities

- Advisory Groups
 - National Advisory Council
 - 3 Regional Advisory Committees
- Information Gathering Activities
 - Environmental Scan
 - Focus Groups
 - Interviews
 - White papers



Potential Outcomes

- Foundation for industry-wide standards & guidelines
- Strategies for geriatric practice improvement
- Endorsement by industry organizations
- Collaboration with National Association for Home Care & Hospice

Preliminary Work

- National Stakeholder Meeting January 2007
 - Purpose: Understand the current state of geriatric practice in home care
 - Participants
 - Home health agencies
 - National associations
 - Quality improvement organizations
 - Accrediting organizations
 - Foundations



Discussion

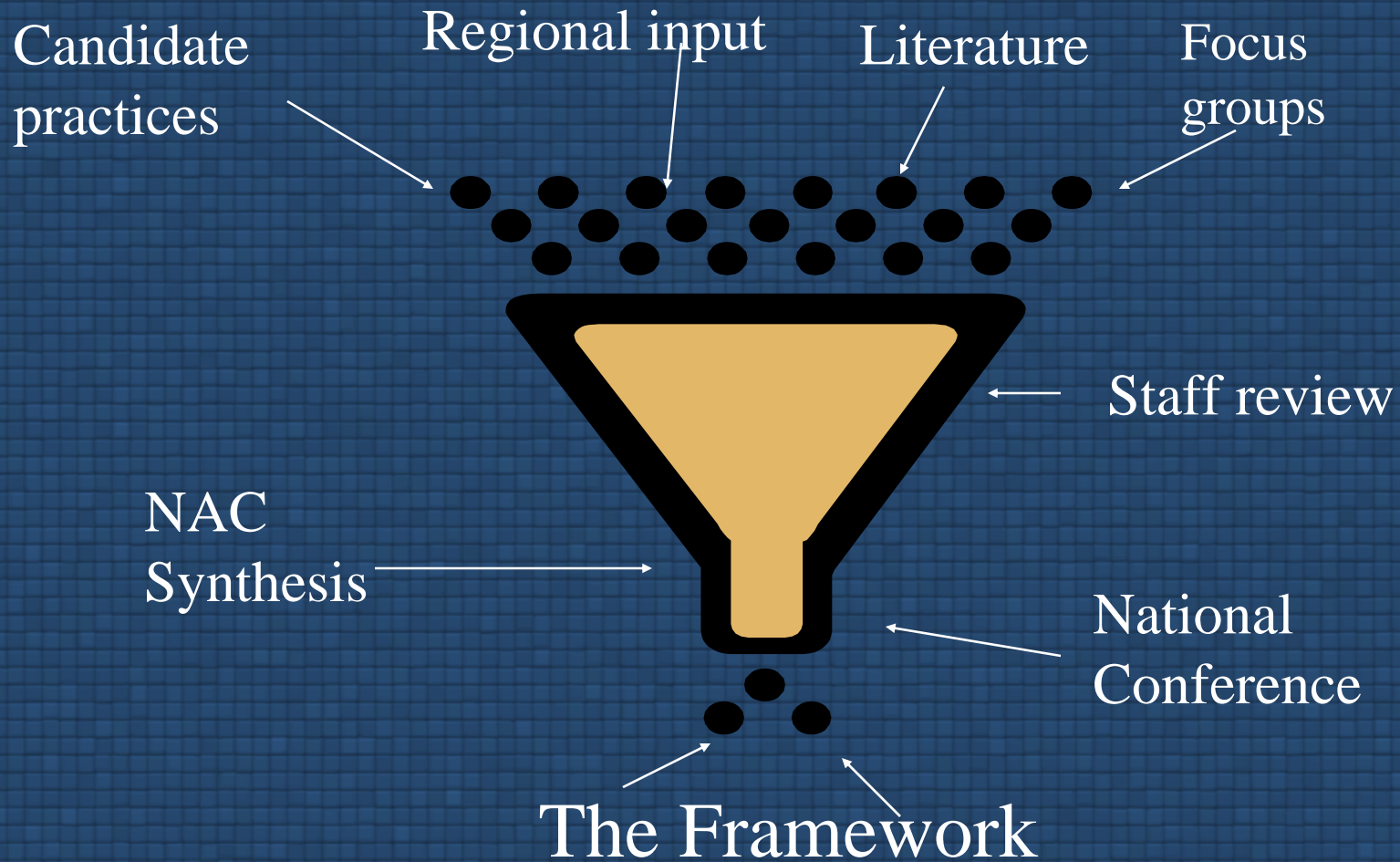
- Split into groups
- Introductions
- From the vantage point of your organization:
What are the main issues in geriatric home care practice today?
 - What are the areas of strength?
 - What are the gaps or weaknesses?
 - List 3 strengths and 3 weaknesses

Nominal Group Process

Definition

- A method for structuring group decision-making
 - Highly structured
 - Steps may involve several methods of ranking
- Healthcare Context:
 - Reference: Moore, Carl. *Group Techniques for Idea Building* (Applied Social Research Methods Series, Vol 9, published by Sage, 1987)

Project Components: Framework



Why use Nominal Group Process?

- Quantitative information lacking
- Information needs to be distilled
- Many types of information to be synthesized
- No single authority
- Ultimate aims:
 - Identify goals and objectives
 - Array possible alternatives
 - Establish priorities
 - Gain buy in and widespread support
 - Implement findings

Advantages & Disadvantages of Consensus Methods

Examples of Consensus Processes...

Summary of Advantages and Disadvantages

- Disadvantages
 - hard to reproduce or replicate
 - subject to undue influence
 - dependent on organizer/staff
 - May not have sufficient evidence base
- Advantages
 - Flexible
 - Inclusive
 - Allow incorporation of all types of prior research
 - Multiple types of data are acceptable
 - Incorporates experts

What is a Framework?

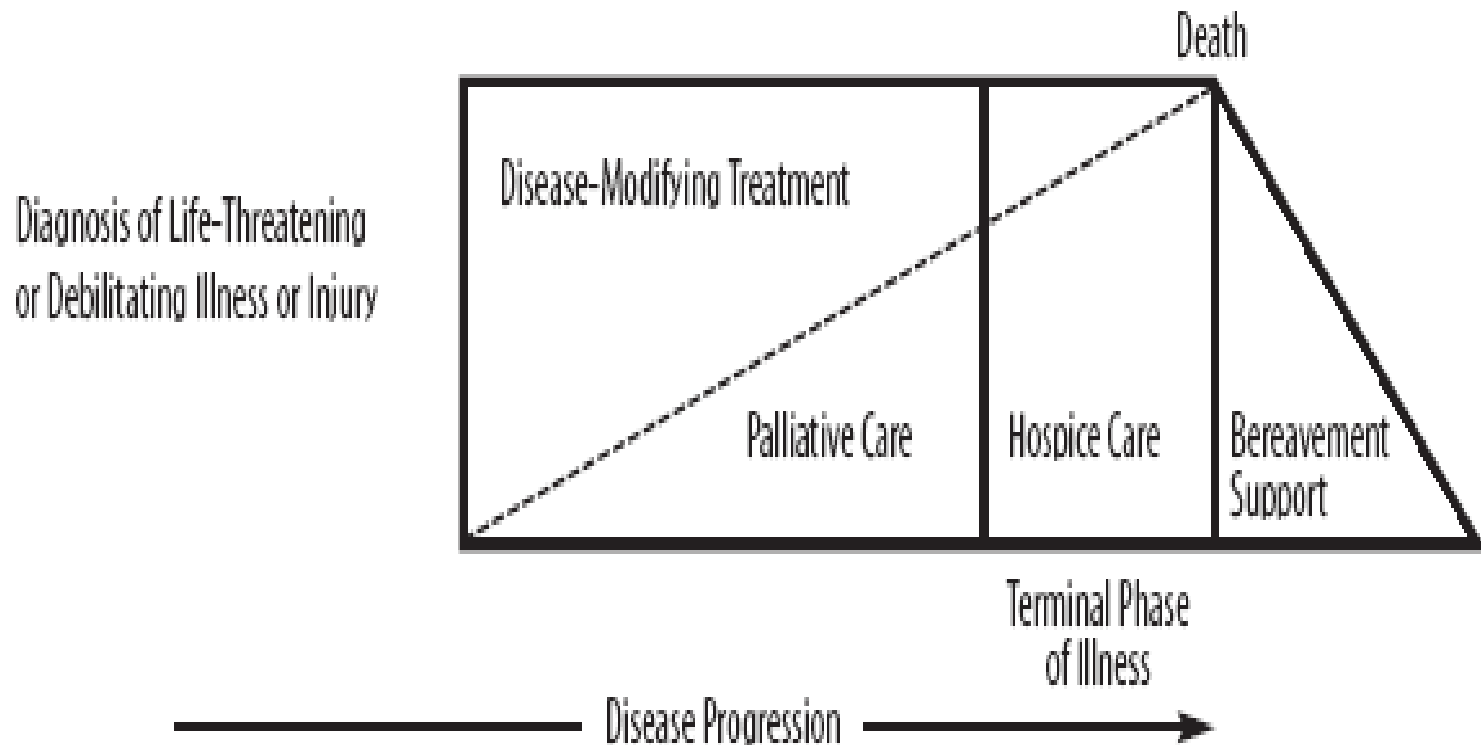


- Dictionary Definition
- Simply a way to organize
 - Information
 - Presentations
 - Tasks
 - Future work
 - Goals and objectives

Applicable Frameworks

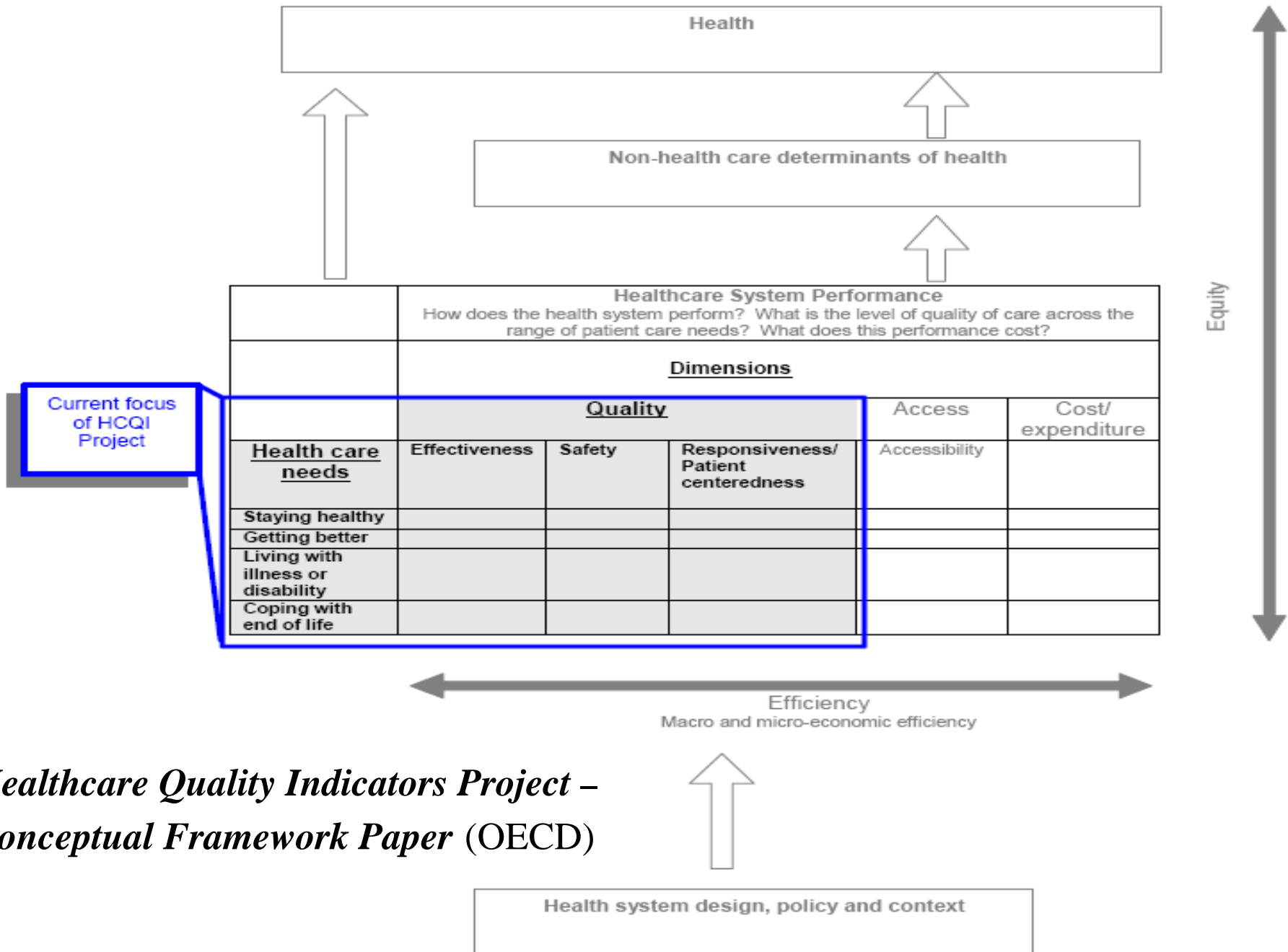
- Organisation for Economic Co-operation and Development (OECD)
- NQF (National Quality Forum) criteria for quality measures
- National Consensus Project for Quality Palliative Care (NQF)
- National Voluntary Consensus Standards for Home Health Care (NQF)

Figure 1 – Continuum of Care



A National Framework and Preferred Practices for Palliative and Hospice Care Quality (NQF)

Figure 1. Proposed conceptual framework for HCQI Project



***Healthcare Quality Indicators Project –
Conceptual Framework Paper (OECD)***

Purpose of Framework for Geriatric Home Care Project

- Organize search for practices
- Structure the presentation of findings
- Group recommendations
- Define future work

Definition for Geriatric Framework Project

- Supporting Structure
- Multi-component framework
 - #1 Scope parameters
 - #2 Classification scheme
 - #3 Evaluation criteria

Framework Component #1: Scope Parameters

- **What is in and what is out**
 - Relevant to geriatric home care
 - Difference between geriatric home care and standard care
 - Open source
 - Not a proprietary device or protocol
 - Fully developed
 - Can be experimental/demonstration
 - More than a general concept or idea

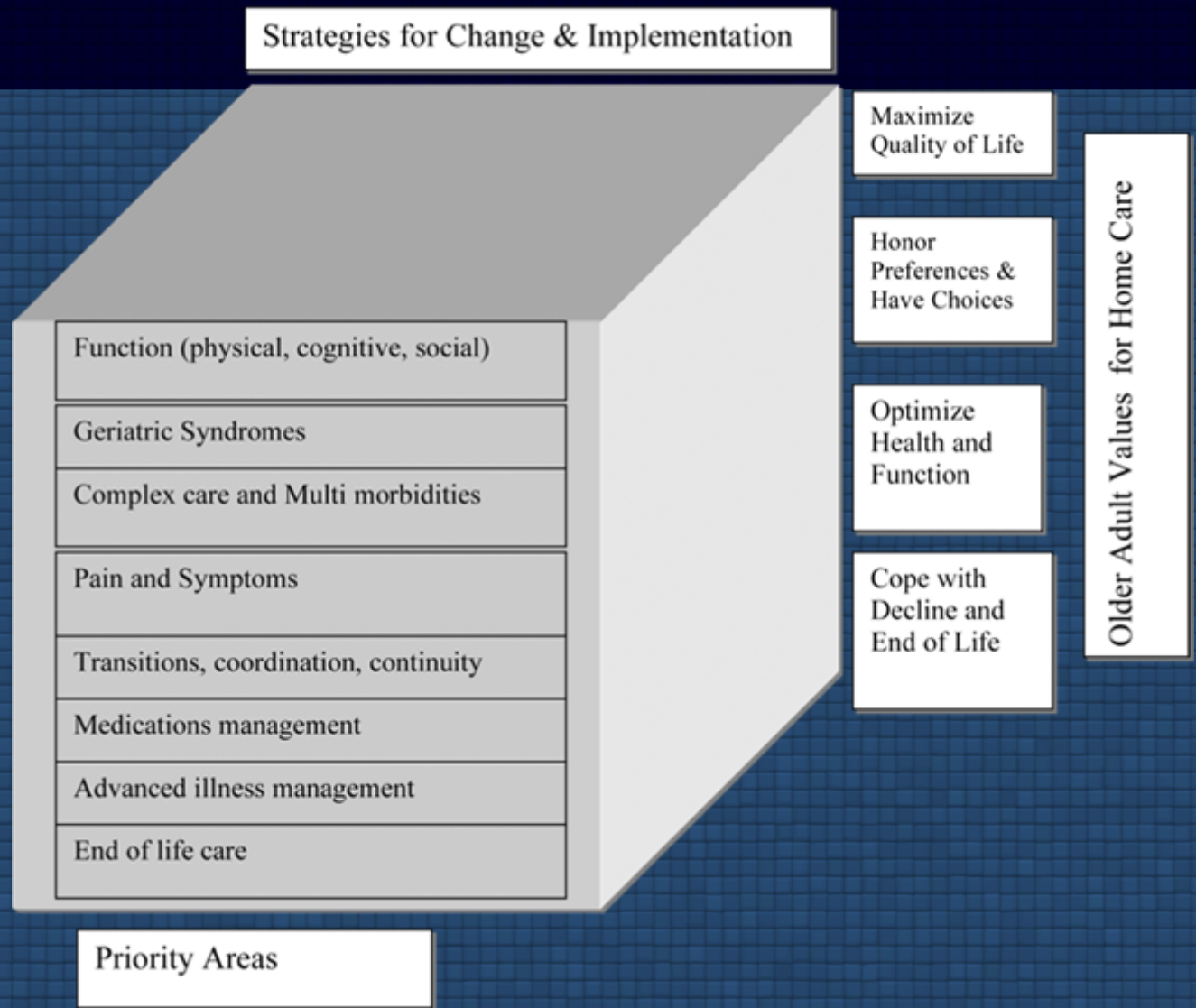
Defining Geriatric Home Care

Any health or social services provided to older persons in their home regardless of payment source that are designed to address the health conditions, risks or goals that are associated with advanced age.



Framework Component #2: Classification Scheme

- How do we divide up or categorize what is in?
- This can take different forms
 - List (1 dimension)
 - Table/cube/matrix (2 or more dimensions)



Activity: Selecting and Ranking Priority Areas

- Preliminary set of domains as part of Classification Scheme
- Steps
 - Identify areas
 - Revise list
 - Use 'dots' to prioritize
 - Summarize and re order list



Framework Component #3

Evaluation Criteria

- Purpose
 - Select from among practices and models
 - Already meet screening criteria
 - Fall within priority areas
 - Prioritize future action
 - Tailor recommendations

Proposed Evaluation Criteria

- Leverage
 - Address a significant, substantial problem
 - Improvement is necessary
- Scientific merit
 - Level of evidence
- Feasibility
 - Applicable to home care
 - Burden is not unreasonable

Next Steps: From 'Framework' to Improvement

- Considering implementation issues
- Making the business case
- Five key factors
 - Operations
 - Training
 - Payment
 - Regulation
 - Competitive marketplace



Business Case

- How to best business case for excellence in geriatric home care?
 - A structured proposal for change
 - Justified in terms of costs and benefits
- What is the value proposition for a home care agency?

Operational Factors

- What would be the most important aspect of operations that would have to be affected to make a compelling argument for geriatric best practice?
- What operational factors will affect the feasibility and sustainability of geriatric best practices?

Training

- How will training issues affect the feasibility/sustainability of geriatric best practice?

Payment

- What would make geriatric home care rewarding under the current payment system
- What changes in payment might make it more rewarding?

Regulation

- What would make geriatric home care rewarding under the current regulatory system?
- What changes in regulation might make it more rewarding?

The Home Care Market

- How could agencies' market position benefit from improvements in geriatric home care?
- What would be necessary to make a compelling market case?

Wrap-up

- **Work in Progress**
 - **Consensus/Convergence**
 - Information
 - Evidence
 - Buy-in
 - **Diffusion**
 - Implementation
 - Value

Future progress

— www.vnsny.org/geriatrics

