

HRST Orientation for Support Coordinators

Disclaimer:

This presentation is designed to be an orientation of the HRST for Support Coordinators. It gives general information about the HRST and how it is used in GA. It is designed to be a training tool for SC agencies. It does not cover specific policies and processes of any given SC agency or the State of Georgia.

Please contact your employer for more specific information about internal HRST related processes or procedures practiced by your agency.

Purpose of this Presentation:

- ▶ Demonstrate the web-based application
- ▶ Give an overall history of the HRST and its history in Georgia
- ▶ What is the HRST?
- ▶ How is scoring derived?
- ▶ Understanding HRST results and how to use them in team meetings
- ▶ HRST and ISP development

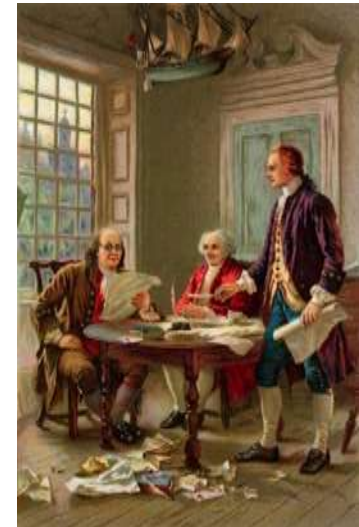
Before we go further:

Let me take you into the HRST program so that you have an idea of what the HRST is and looks like as we move through the upcoming slides.

HISTORY OF THE HRST

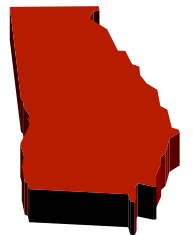
History of the HRST

- ▶ Developed in 1992 – federal lawsuit
 - State of Oklahoma
 - Homeward Bound class
- ▶ Known originally as “Physical Status Review” (PSR)
- ▶ Extensively field tested
 - 6,000+ individuals
- ▶ Used in numerous states
 - Paper and web-based formats



History of the HRST in Georgia:

- ▶ Introduced in the paper format in 1996
 - Limited use by some Regions or agencies
 - Originally completed by the Support Coordinator. Later became the responsibility of the Provider.
- ▶ Introduced in the web-based format in 2006
 - Used state-wide with all individuals receiving wavier services
 - Ga migrated to the newest version of the online application on March 1, 2014



The Health Risk Screening Tool

What is the HRST?

HRST stands for Health Risk Screening Tool

It is a web-based instrument developed to screen for health risks associated with:

- Developmental Disabilities
- Physical Disabilities
- Disabilities Associated with Aging
- Other vulnerable populations

The HRST is a SCREENING Instrument

- Should not be confused with a more in-depth assessment process
- Can be used to determine what types of further assessment or evaluation might be required
- Developed for use by non-licensed staff, such as case managers, program staff, direct care staff with nursing oversight when necessary

How does the HRST work?

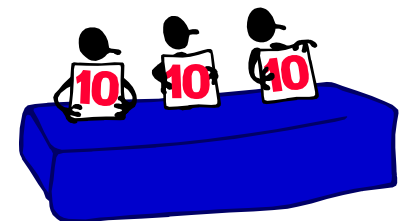
The HRST is a simple 22 item scale designed to find out which individuals are at most risk of illness, and then to take action in the form of special attention and prevention

Diagnosis and Medication Tracking

- ▶ HRST allows for Diagnosis entry and management
- ▶ HRST allows for Medication entry and management

How is the HRST Scored?

- 22 rating areas–106 data points
- Each item has 5 scoring descriptors ranging from 0–4
- “0” indicates no involvement– “4” indicates intense involvement involving significant health risk
- Each point on continuum is designated a numerical score
- As points go up Health Care Level rises



How is a score assigned?

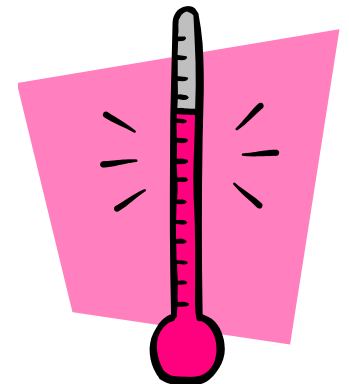
- ▶ Using the wizard questions
 - Questions are answered in a way that eliminates possible choices until a final score is determined
- ▶ Certain medications and medication changes affect scores
 - Psychotropic and Anti-Epileptic meds
 - Changes in dosages of these meds

All information is tabulated to arrive at the final score which relates to a specific Health Care Level

Determining Risk Level:

Numerical totals of Rating Items are assigned HEALTH CARE LEVELS associated with DEGREES OF HEALTH RISK:

- Level 1: 0 – 12 Points
- Level 2: 13 – 25 Points **Low Risk**
- Level 3: 26 – 38 Points
- Level 4: 39 – 53 Points **Moderate Risk**
- Level 5: 54 – 68 Points
- Level 6: 69 or greater **High Risk**



HRST Categories:

- ▶ I. Functional Status
 - Activities of daily living
- ▶ II. Behavioral
 - Behaviors and treatments
- ▶ III. Physiological
 - Measurable health events
- ▶ IV. Safety
 - Injuries and falls
- ▶ V. Frequency of Service
 - What kind/how much



What Does the HRST Produce?

- ▶ Quantifiable Health Care Level that equates to health risk*
- ▶ Service Considerations which point to other professional services that may need to be accessed (i.e. Neurologist, Dentist, etc.)*
- ▶ Training Considerations which point to particular training that may be needed by people who support the person*
- ▶ Reports that track numerous aspects related to the person*



HRST's Benefits:

- Detects health destabilization early
- Determines range of clinical supports, services and surveillance needs
- Quantifies level of health risk based on objective criteria
- Develops health baseline on individuals and groups
- Provides real-time accessibility and reporting

HRST's Outcomes:

- Reduces morbidity and preventable deaths
- Helps meet health and safety requirements
- Enables less restrictive settings and transition planning
- Assists with budgeting and cost containment
- Helps ensure continuity of care
- Promotes Individualized Service Planning (ISP) development and implementation

THE HRST IN GEORGIA

**current information taken from Health Risk Screening Tool (HRST) GA policy 02-803, last revision date 8/16/12*

**for full policy content and requirements, please review the policy referenced above. The presentation does not encapsulate the complete policy.*

Uses of the HRST in GA:

- ▶ Currently used in the planning and development of the Individual Service Plan (ISP)
- ▶ Currently used in conjunction with other criteria for the awarding of Exceptional Rates
- ▶ Currently used to detect destabilization and changes in historical or current health status
- ▶ Currently used in the transitioning of individuals from state hospitals into community settings

Who Completes the HRST in Georgia:

- ▶ Initial HRST is completed for each person approved to receive community developmental disability services by regional Intake/Evaluation staff (I&E)
- ▶ Annual/Ongoing updates are completed by provider of responsibility as indicated in the ISP
- ▶ Individuals who Participant Direct services have annual/ongoing HRST completed by regional I&E staff
- ▶ State Operated Hospital Staff completes the HRST for each person transitioning from State Hospitals to community settings.

Required HRST Training in GA:

- ▶ All HRST raters must complete the HRST online rater training prior to having access to the HRST or completing ratings
- ▶ RN's, who will be completing RN Reviews, must complete the online training as well as attend a one day live clinical training
- ▶ Support Coordination agencies offer the training you are watching to all new and existing staff
- ▶ Though SC's are not required to complete the Online Rater Training they can request to do so by emailing support@hrstonline.com

A Closer Look at the HRST Service and Training Considerations



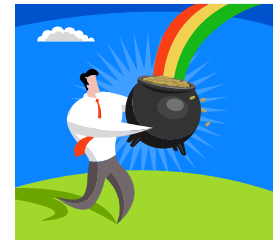
How do we find them?

- ▶ Start from the individual's record
- ▶ Make sure scoring has been completed and a Health Care Level assigned
- ▶ Go to the navigation bar at the top of the page
- ▶ Select in the following order:
 - Reports >
 - Documents >
 - Considerations >
 - Evaluations and Services *OR* Training



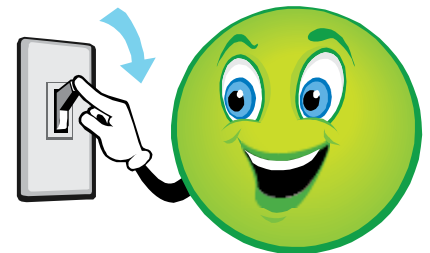
Where do they come from?

- ▶ Generated by the individual Item scores
 - Scores given in each area may result in considerations in many different areas
- ▶ May or may not be appropriate
 - Many different scenarios may lead to the same item score
 - Support team reviews all considerations to determine how to respond



What trips the switch?

- ▶ Scores of 3 or 4 always result in considerations
 - *Due to the potentially critical nature of the issue*
- ▶ Scores of 1 or 2 also lead to considerations in some areas
 - *In areas where ANY incident could be harmful*
- ▶ Scores of 0 may lead to considerations, depending upon the Item
 - *In areas where it pays to be cautious*



Why are they important?

- ▶ Allow caregiver to be informed and responsive to the individual's needs
- ▶ Enhance service delivery
- ▶ Assists in the development of health and safety sections of yearly individual plans
- ▶ Points out training and service needs that are less than obvious

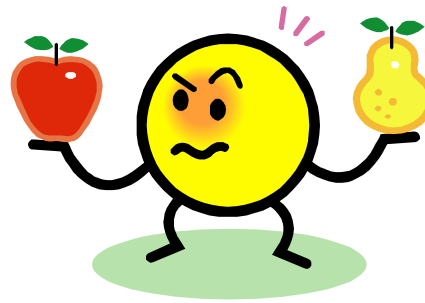
Helps avoid preventable deaths!!

When are the Considerations Implemented?

- ▶ Whenever an initial HRST is completed
- ▶ Whenever there is a change in scoring
- ▶ If there are any changes at the time of the annual review

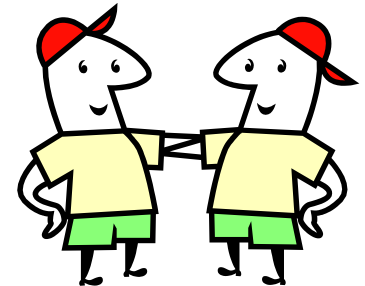


What is the difference?



Differences Between the Two:

- ▶ Each set of Considerations address separate and distinct providers of service to the individual
- ▶ Evaluation and Service Considerations point to visits to outside professionals
- ▶ Training Considerations are for enhancing information and skills for those who directly support the individual on a daily basis



Taking a Closer Look at the Evaluations and Services Considerations:

- ▶ These considerations describe assessments and professional interventions that may be needed to support the individual based on their identified issues



Examples of Evaluations and Services Considerations:

▶ Medical:

- “Evaluation of potential for bone fragility related to anti-epileptic drug (AED) use”

▶ Medical Specialty:

- “Dermatology/wound care specialist consult for issues with skin integrity, if applicable”

▶ Nutritional/clinical dietician:

- “Nutritional/clinical dietician consult to tailor diet plan to meet the demands of identified nutritional issues”



Taking a Closer Look at the Training Considerations:

- ▶ Training Considerations are for enhancing information and skills for those who directly support the individual on a daily basis



Training:

- ▶ Prompts instruction of caregivers in general knowledge about identified issues
 - Health Care Protocols
- ▶ Gives SPECIFIC information about the person as it relates to their identified issues
 - Individual Specific Training
- ▶ Give "action steps" for support teams to implement and monitor to minimize risk
 - Behavioral Interventions, etc.



How to PDF and Print:

- ▶ Begin in either Considerations screen for the individual
- ▶ Locate the PDF icon at the bottom left hand side of the screen
- ▶ Choose “Current Section” or “All Sections”
- ▶ Once document is open follow your usual printing procedures



Working With the HRST Considerations



Best practices for discussion in a team meeting

Step 1: Eliminating Unnecessary Considerations

- ▶ Review each Consideration
- ▶ Determine which do NOT apply to the individual. Ask questions like:
 - Does it cover a problem that they do not have?
 - Does it mention a treatment they don't receive?
- ▶ Document the reason the Consideration does not apply
 - The method of documentation is specific to the client

Step 2: Working With What's Left

- ▶ You should be left with Considerations that apply to the person on some degree
- ▶ It's time to triage
 - What are the MOST critical Considerations
 - What are the moderately critical Considerations
 - What are the least critical Considerations

It can be a juggling act!

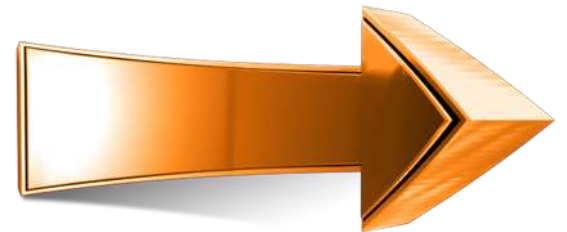


Questions to Ask in Step 2:

- ▶ Is this a problem that was previously identified?
- ▶ Is the issue already being supported appropriately?
- ▶ Has there been a recent dramatic change?
- ▶ Does this issue need immediate attention?
- ▶ Can this wait for a few days/weeks/months?
- ▶ Are there simple things that can be implemented that will likely have a positive effect? (i.e. *tracking log, increased monitoring, etc.*)

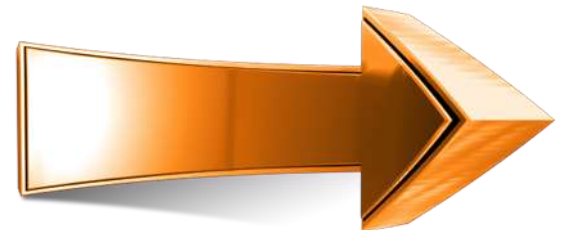
Step 3: Taking Action

- ▶ Assign roles and responsibilities
- ▶ Assign a time frame for each task
- ▶ Monitor for progress or regression
- ▶ Document, document, document



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The Support Coordinator/CM, the HRST, and monthly visits: What to look for...

- ▶ Providers are tasked with keeping the HRST updated throughout the year as needed
- ▶ When completing visits look for some of the following and always ask if the HRST has been updated:
 - *Changes in the persons appearance, weight, behavior, bruises or skin discoloration, falls, injuries, increase in seizures, unusual bowel routine, changes in meds, days missed at center, daily routine changed due to health issues, hospital admissions or ER visits, or any other changes to the persons health that is unusual or out of character for the person*

The HRST and the Yearly Support Plan



Using the HRST to build Action Plans and Set Goals

What is meaningful to the person: Hope, Dreams, and Desires

Person Centered Planning



What Support are needed for the person: Medical, Behavioral, Intensity

HRST, Supports Intensity Scale, Other assessments



Individualized Plan



Weaving in the HRST

The HRST has information about the person that can be applicable to many parts of the yearly plan, such as:

- ▶ Health/Safety Sections
- ▶ Physiological/Medical Sections
- ▶ Behavioral Sections
- ▶ Risk Sections/Protocols
- ▶ **Action Plans (Goals/Objectives)**



Building Action Plans

Goals or Action Plans found in annual service documents, usually consist of the following:

- ▶ Goals are Person Centered or have Individual “buy in”
- ▶ Goals are specific to an activity
- ▶ Goals have objectives that lead to the success of the goal itself
- ▶ Goals have time frames
- ▶ Goals are measurable

Example of Goals Based on the HRST

Scenario: Johnny's HRST identifies that he has a diagnosis of Diabetes. Item N. Skin Integrity rated a "3" as well as item P. Nutrition, which rated a "3". Although Johnny loves sweets, the team has determined that Johnny must eat better to avert more serious issues from his Diabetes. The team wants to support Johnny in making better food choices. Johnny understands and agrees this is important and wants to work on this in the upcoming year.

Example of Goals Based on the HRST (continued)

Goal: Johnny will make better food choices to control his Diabetes.

Objective A. Johnny will attend a nutrition class once a week to help him learn which foods he can eat without raising his blood sugar.

Objective B. Johnny will create his menu each week with staff help that is comprised mainly of foods that support his Diabetes.

Example of Goals Based on the HRST

Scenario: Sally has a Diagnosis of Depression noted on her HRST. She takes a psychotropic medication to assist (non-TD causing). When depressed she will engage in skin picking. She rated a “2” on item F: Self Abuse. The team wants to stave off this rating from getting higher due to the fact that she has a lowered immune system and know that more significant breaks in the skin can lead to more acute illnesses. The team also wants to avert adding another medication recommended by the doctor that is known to cause TD. Sally wants to work on better ways of dealing with her depression.

Example of Goals Based on the HRST (continued)

Goal: Sally will work to better control the significance of her depressive episodes.

Objective A. Sally will identify and engage in activities that help raise her spirits weekly.

Objective B. Sally will identify and tell staff feelings that often precursor her depressive episodes so that she can talk about them with staff or people she trusts.

Objective C. Sally will alert staff when she feels the urge to pick at her skin allowing for redirection from staff.

Using Reports in the HRST

2 Methods to get a New Last Update date

(found on the Scoring Summary)

1. If the person has not had **any** rating changes since the last update the provider will need to add a comment to **at least one** of the Rating items.
 - These comments need to be comments that are of value to the rating item and provide more information about the person in relation to that item.
 - NOTE that the State will be monitoring for abuse of this.
2. Update the appropriate Rating item(s) by re-answering the questions to arrive at a score and inputting a note in the comment section regarding the scoring change

HRST Rating Update Reports

The HRST can tell you each time the HRST Rating section was updated, meaning scores were changed OR comments were added.

Providers can pull this report to show the HRST was updated in compliance with the 90 day mark, even if the HRST has been updated again since the 90 day mark.

Here is how to access this report:

1. Log into the HRST app and choose an individual by clicking on the name in the Consumer list
2. Click on REPORTS from the menu bar
3. Click SPREADSHEETS
4. Click the grey arrow next to the folder named “Change Over Time”
5. Choose the report named “Rating Scoring History or Rating Notes History”
6. Click “Generate Report”

Using other Reports in the app:

- ▶ The HRST has an extensive Reporting module
- ▶ I want highlight the following reports:
 - HCL Change Over Time

Getting HELP:

Accessing Support and the GA HRST Knowledge Base



Why Accessing Support & the Knowledge Base Are Important

- ▶ Helps ensure you get the most out of the online application
- ▶ Helps ensure that you are rating accurately
- ▶ Helps you learn and grow



What Types of Support Do We Offer?

- ▶ Technical Support
- ▶ Clinical Support
- ▶ Supplemental information via the Knowledge Base
 - About the HRST
 - About processes related to GEORGIA



Ways To Access Support

▶ E-mail

- support@hrstonline.com for Technical issues/questions
- clinassist@hrstonline.com for Clinical issues/questions

▶ Via the Support Site

- Link on login screen (Contact Support)
- Via the HELP menu within the application

Allow me to demonstrate

Steps to Submitting A Ticket

- 1 Click on “Contact Support” from login screen OR from within the application using Help on the menu bar
- 1 Click on “Submit A Ticket”
- 1 Choose “Technical” or “Clinical”
- 1 Fill out the form accurately and with detail
- 1 Click “Submit”

Let Me Walk You Through It



Accessing Support: Best Practices

- Always be as detailed as possible
- Include a good phone number (in case we have to call you)
- Ensure that your email address is correct if submitting a ticket
- The support site will respond acknowledging receipt of your ticket, *if email provided in ticket was correct.*
- Expect that we may have to ask you some questions to help eliminate possibilities



Getting the Most of Your Knowledge Base



What Is the HRST Knowledge Base?

- ▶ Resource for the User
- ▶ Contains documents, tutorials, and supplemental information to the HRST
- ▶ Client specific
- ▶ Promotes Continuing Education



Steps to Access the Knowledge Base:

- 1 Click on “Contact Support” from login screen OR from within the application using “Help” on the menu bar
- 1 Click on “Knowledge Base”
- 1 ENJOY!

Let's Give It A Run Through



What If I Forget My Password?

- ▶ For GA users whose accounts are ACTIVE, your CIS username and password serves as your HRST username and password. We encourage users to primarily access the CIS helpdesk at support@cishelpdesk.com for password issues.

To Retrieve your Password use one of the following methods:

1. Click *Forgot Your Password* from the login screen of the HRST application. This will generate an email to you with instructions on how to access CIS support.
1. Email CIS support directly at support@cishelpdesk.com



User Login

User ID

Password

[Forgot your password?](#)

[Contact support](#)

