

COHERENCE BETWEEN SERVICES AND VISITS

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VITAE Suite helps create coherence between allocated services and service providers.



THE CITY OF COPENHAGEN NEEDS ASSESSMENT SERVICE

The City of Copenhagen is the biggest municipality in Denmark in terms of number of residents, totalling 501,285 residents which correspond to 9.3% of Denmark's population.

The City of Copenhagen employs some 120 needs assessment officers; two-thirds of these are nurses, the rest are occupational therapists and physiotherapists, assistants, or other.

The number of assessment visits in the third quarter of 2008 reached 4,659.

The City of Copenhagen started the introduction of the care solution in 2002 within home care with the objective of expanding the solution to include nursing homes, private providers, assistive technology, rehabilitation and health centres in the future.

The municipality's care system is based on CSC Scandihealth's care solution, VITAE Suite.

The City of Copenhagen introduced the VITAE Suite in the assessment service with a view to obtaining homogeneous service levels and facilities for systematic follow-up and controlling. Another goal was to achieve more effective workflows.

SERVICE PROVIDER COHERENCE

According to Tirsia Breinholdt, who is a Consultant, Registered Nurse and Master of Adult Education, one of the great strengths of VITAE Suite is the service provider coherence.

- It used to be difficult to form an overview of the coherence between services and visits. The functional assessment was made in a separate system without any relation to the service provider part, that is, the Home Care Service. The Home Care Service had to use huge spreadsheets in order to get an overview of services and visits. Here VITAE Suite has contributed significantly towards creating coherence. For example, you can send services to VITAE Care Planning and subsequently view the client's plan.

- Besides, the ability to compile statistics on our activities and the client's functional assessments is a great advantage. Also, we

are able to compare city districts, but that would mean teaching the users of VITAE Suite some data discipline! In addition, with VITAE Suite you have access to the client's care records anywhere, anytime, concludes Tirsia Breinholdt.

INCREASING CLIENT INVOLVEMENT

Assessment officers usually bring a portable PC with the VITAE Care Mobile Record when making a needs assessment visit to the client. VITAE Care Mobile Record contains a copy of the client's care record. During the visit the assessment officer updates the relevant worksheets, and back at the office the updated information is uploaded to the VITAE Care Record.

- Bringing the VITAE Care Mobile Record with you when you visit the client is a great experience, explains Tirsia Breinholdt.

The City of Copenhagen has spent the last couple of years carrying out one of the most extensive digitalisation projects in Denmark. The City's care system is pivotal for enhanced control, planning, and follow-up within care. The system supports co-operation and communication between the City's care workers and contributes towards creating coherence and continuity within care.

In 2006, the City of Copenhagen's Health and Home Care Service received the Digitalisation Award for "Good Digital Management" for the project that was characterised as "a real trailblazer which may serve as an inspiration to others", and as "systematic project work with focus on enhancing control via digitalisation".

When we show the client the information on the screen, it reduces their sense of alienation. In addition, it simplifies the examination of the parties involved and increases client involvement.

KNOWLEDGE SHARING

Using VITAE Suite makes it easy to share information about the clients with your colleagues, says Tirsia. You can always see what your colleagues have written in the VITAE Care Record, and that is an advantage when making an assessment of the client.

The assessment officers receive information about VITAE Suite at regular intervals: The assessment officers who are super users meet regularly, we send guidelines via e-mail, and we have a web site with a section for the assessment officers. In addition, the tip of the week is e-mailed to the assessment officers.

THE FUTURE

As regards the near future, Tirsia Breinholdt reports that process support of the assessment practice is being developed together with CSC Scandihealth.

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THE ASSESSMENT OFFICER'S TASKS

Before help for e.g. cleaning and personal care is assigned to the client, the client's functional ability and need for help are assessed. The client will typically get a visit from an assessment officer who will be forming a general impression of the client's everyday life and functional ability. Visits can also be carried out in connection with discharge from hospital.

Tirsia Breinholdt explains how the assessment of a client is usually carried out:

For the assessment visit in the client's home the assessment officer will typically bring her VITAE Care Mobile Record which is a copy of the VITAE Care Record on a portable PC. In addition, the assessment officer will bring various documents about quality standards and service levels in the municipality in order to inform the client about his/her options. Assessment officers have a duty to provide counselling and must ensure that the client is informed about his or her right to, say, housing subsidies, medical assistance, drug reimbursement, and assistive devices.

In the client's home one or two relatives will typically be present during the visit, and in some cases the home care service. It is up to the client to decide whether they want any relatives to be present during the visit.

The visit can be initiated by the client or the home care service. It is important that the assessment officer ensures that the client agrees to the visit and knows the purpose of the visit.

The assessment officer now addresses the things she is there to assess, for example need for cleaning. She also inquires about the client's general condition in order to get the full picture of the client's functional ability and may take a tour around the home to see how layout of the home affects the client's ability to cope independently, for example if the client is mobility impaired.

The assessment officer uses the worksheet Functional Assessment in the VITAE Care Record in support of the assessment.

The City of Copenhagen uses the Danish Common Language I standard which is a national tool for assessing the client's functional ability. The demographic information worksheet in the VITAE Care Record will also be updated in connection with the needs assessment visit.

The visit typically ends by the assessment officer telling the client what decision to expect.

Back at the office the assessment officer transfers the VITAE Care Mobile Record to the VITAE Care Record and then writes the summary along with the professional assessment. In connection with the decision, the assessment of other parties may be required – for example therapists or specialist doctors.

Furthermore, the assessment officer participates in internal meetings and communicates with various cooperating partners. An assessment officer's field of work may for example consist in processing notifications from the provider (home care service). The notifications may for example request a change of services on behalf of the client.

– The concept of the client as a customer is evolving and is more widespread today, says Tirsia Breinholdt. Maybe that's the effect of the increasing privatisation of home care and the introduction of the Danish management model that separates service ordering from service delivery. In parallel with this it is important that the assessment officer views the entire assessment process as case management and takes a more targeted approach to the client's application.

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CSC Scandihealth A/S

CSC Scandihealth develops and supplies electronic health records and solutions for hospital information, clinical quality, care, health insurance, and student administration. We put our health professional knowledge and competence to work in support of the development of an integrated healthcare community. We have supplied healthcare IT to Danish hospitals since 1972. We have created an unrivalled product range, a unique pool of know-how about the healthcare sector, and in-depth knowledge of the world of our customers. Our employees are primarily working with the development and supply of healthcare IT. The knowledge and expertise of our employees encompass technology as well as healthcare, a combination that provides us with a sound basis for further development and delivery of healthcare IT solutions that allow our customers more time to concentrate on their own core services. CSC Scandihealth is owned by CSC and is CSC's Nordic competence centre for healthcare solutions.