

Allison Mays

Public Policy Project: Development of a Universal Assessment Tool for California Home and Community-Based Services.

Description: The California Senate Bill 1036 (Chapter 45 – Committee on Budget and Fiscal Review Statutes— 2012) stated that a “universal assessment process for long term services and supports (LTSS) be developed and tested.” The legislation intends to help facilitate care planning and data sharing and improve coordination of care. The initial targeted programs are the three Medi-Cal home and community-based (HCB) services included in the Coordinated Care Initiative: In-Home Supportive Services (IHSS), Multipurpose Senior Services (MSSP), and Community-Based Adults Services (CBAS). A “Design Team” led by Dr. Debra Saliba has been working with a Stakeholder Work-Group consisting of representatives from the state of California, various state agencies, consumer groups and non-profit foundations to develop the assessment tool. Initial steps were to set goals for the purpose of the tool. The current work focuses on the development of individual items for the tool.

Role: As a member of the design team for the Universal Assessment Tool I traveled to Sacramento to participate in the Working Group Subcommittee Retreat on September 18-19, 2014. I attended the health sub-committee sessions. The work of the subcommittee was to review the items relating to health care to determine if they should be included in the final universal assessment tool. The potential items included items from the existing tools used by IHSS, MSSP, and CBAS as well as items from other states and entities. Each item was graded by the committee members in four categories: 1) Relevance to Care Planning; 2) Collection feasibility; 3) Clinical Expertise required to administer the item; and 4) Should the item be considered a Core Question for the assessment tool? Additionally we reviewed the transcriptions from the subcommittee discussions and written comments submitted by committee members. Since the conclusion of the meeting, the design team has met frequently to review the input received at the retreat regarding the individual items. I have continued to participate in the meetings related to the health sub-committee. During these meetings the design team determines which items should be included in the initial draft of the Universal Assessment Tool after reviewing the item scores and subcommittee comments. This process involves synthesizing the feedback from the subcommittee along with additional research regarding existing medical guidelines to ensure that each item provides useful and evidence-based information.

Implementation: Next steps for the project include finalizing the items selected to be in the Universal Assessment Tool and presenting these items to the Stakeholder Group for review.

Findings/Conclusions: Health care reform measures inspired by the Affordable Care Act and initiated by legislative bodies require an unprecedented level of collaboration between governmental agencies, non-profits, consumer groups and academic medicine. Thus, designing a Universal Assessment Tool for California Home and Community Based Services with the ultimate goal of delivering a person-centered, streamlined, accurate assessment requires the skillful coordination of input from stakeholder groups and health experts to put into action legislation outlined by the State of California.