



# **INTERACT VERSION 3.0 *and Beyond***

*Nancy Henry, GNP-BC, PhD  
Florida Atlantic University  
Boca Raton, Florida*

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Transitions of Care  
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# INTERACT 3.0 *and Beyond*

## Acknowledgement

The INTERACT Program and Tools were initially developed by Joseph G. Ouslander, MD and Mary Perloe, MS, GNP at the Georgia Medical Care Foundation with the support of a contract from the Centers for Medicare & Medicaid Services (CMS).

The current version of the INTERACT Program was developed by under the leadership of Dr. Joseph G. Ouslander, M.D. with input from the INTERACT project team and many direct care providers and was supported by The Commonwealth Fund.

# INTERACT 3.0 *and Beyond*

## Disclosures

- No members of the INTERACT Team derive any personal income from the INTERACT program except for compensation for time spent delivering educational programs
- The further development and dissemination of INTERACT is supported by grants from:
  - NINR/NIH
  - Centers for Medicare & Medicaid Services
  - The Commonwealth Fund
  - The Patient Centered Outcomes Research Institute
  - PointClickCare
  - Medline Industries

# INTERACT 3.0 *and Beyond*



This presentation will provide a brief overview of *INTERACT 3.0 and beyond*--its application in skilled nursing homes, including status of a usability pilot testing program in Assisted Living and Home Health care environments

# The INTERACT Program: What is It and Why Does It Matter?



Is a **quality improvement program** designed to improve the care of nursing home residents with acute changes in condition

# The INTERACT Program: What is It and Why Does It Matter?

## Why Does This Matter?



- At the beauty salon

*Hospitalization*

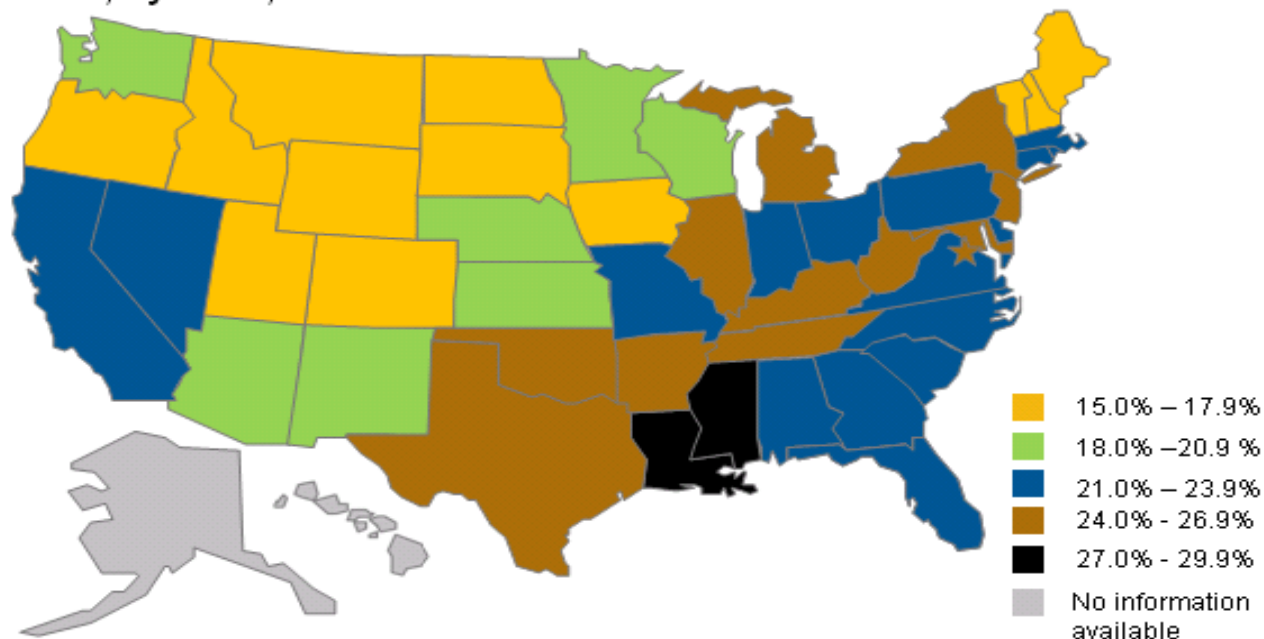


- At risk for complications
  - Delirium
  - Polypharmacy
  - Falls
  - Incontinence and catheter use
  - Hospital acquired infections
  - Immobility, de-conditioning, pressure ulcers

# The INTERACT Program: What is It and Why Does It Matter?

**1 in 4 patients admitted to a SNF are re-admitted to the hospital within 30 days at a cost of \$4.3 billion**

**Figure 3: Frequency of Rehospitalization of Short-Stay Nursing Home Residents, by State, 2006**



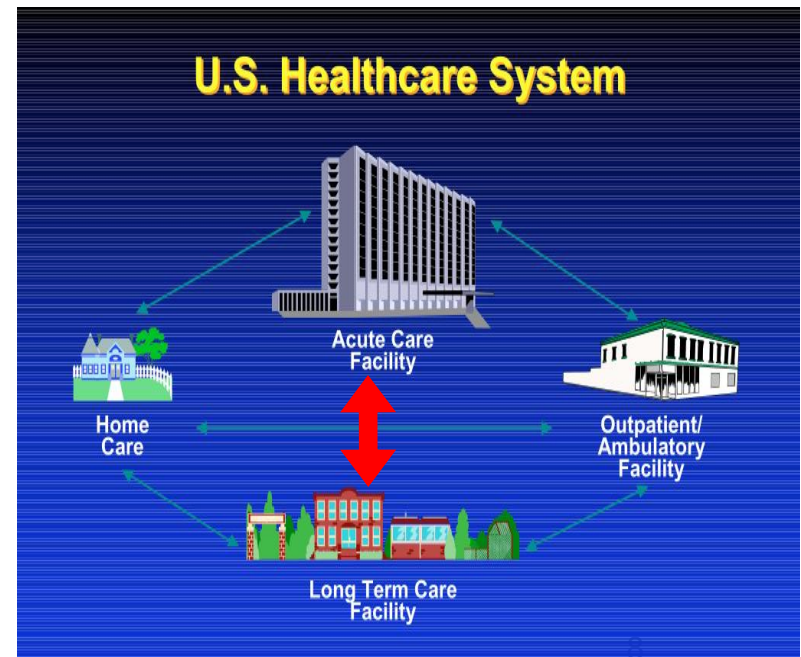
Source: Vincent Mor, et al. (2010) Medicare SNF Rehospitalizations: Implications for Medicare Payment Reform. Health Affairs.

Mor et al. Health Affairs 29: 57-64, 2010

# The INTERACT Program: What is It and Why Does It Matter?

## Some Hospitalizations of NH Residents are Preventable

- Several studies suggest that a substantial percent of hospital transfers, admissions, and readmissions are unnecessary and can be prevented



# The INTERACT Program

## What is it and Why Does it Matter?

- INTERACT is designed to improve the care of residents with acute changes in condition,
  - including evidence and expert-recommended clinical practice tools
  - strategies to implement them, and related educational resources
- Preventing conditions from becoming severe enough to require hospitalization through
  - early identification
  - assessment of changes in resident condition

# The INTERACT Program: What is It and Why Does It Matter?



- Can help your facility safely reduce hospital transfers by:
  1. ***Preventing conditions from becoming severe*** enough to require hospitalization through early identification and assessment of changes in resident condition
  2. ***Managing some conditions in the NH*** without transfer when this is feasible and safe
  3. ***Improving advance care planning*** and the use of palliative care plans when appropriate as an alternative to hospitalization for some residents

# The INTERACT Program: What is It and Why Does It Matter?



- The goal of **INTERACT** is to improve care, not to prevent all hospital transfers
- In fact, **INTERACT** can help with more rapid transfer of residents who need hospital care



# The INTERACT Program: What is It and Why Does It Matter?



- The program and tools were revised based on CMS pilot study, and input from front-line NH staff and national experts
- The revised program and INTERACT 3.0 Tools are available at: <http://interact2.net>



Supported by a grant from the Commonwealth Fund

# The INTERACT Program: What is It and Why Does It Matter?



Quality Improvement Tools

Communication Tools

Decision Support Tools

Advance Care Planning Tools

# INTERACT 3.0 *and Beyond*

## **Assisted Living Version 1.0**



# INTERACT 3.0 *and Beyond*

## Home Health Version 1.0



# INTERACT 3.0 *and Beyond*

## On line Survey

- To obtain feedback of INTERACT Version 3.0 Tools for usability in Assisted Living & Home Health settings
- Goal of 30-40 survey participants for each setting utilizing
  - Internal experts: Brookdale Senior Living (CMS Innovation Grant)
  - External experts: National organizations-NCAL, AALNA, CEAL, ALFA, The Greenhouse Project, AMDA, Leading Age, Pioneer Network, AARP, and Advanced Practice Nurses (APN's), Home Health Leaders and Agencies
- November-December 2012: Surveys were disseminated and feedback compiled
- Jan–May 2013: Revision of INTERACT tools for AL V1.0 & HH V1.0

# INTERACT 3.0 *and Beyond*

- **Response Rate:** (Internal) & (External) Sites: 77.2%
- At least 97% the respondents endorsed the value of the **INTERACT** quality improvement program in the Assisted Living & Home Health setting
- **KEY Message:**
  - *There is strong support for usage of select **INTERACT** TOOLS as a key method for improving the quality of care in AL & HH*
  - *There is strong support for effectively improving management of acute changes of condition that can prevent unnecessary transfers to hospitals*
- **Survey respondents indicate INTERACT program tools can be effectively used if consideration is given to the settings where**
  - *Non-licensed staff are limited in number, or not available*
  - *Unlicensed caregiver personnel dominate the workforce*
  - *Using tools modified in a format that is highly-useful to professional and non-professional—especially families and significant others*

# INTERACT 3.0 *and Beyond*



## INTERACT Home Health Version 1.0 Tools

[ V 1.0 Tool Pilot ]



Form # HC230-CC (08/13)

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Tools	Use	Suggested Formats
<b>Overview Figure</b>		
<b>Overview of INTERACT Program and Tools</b>	All agency staff • Provides a visual depiction of INTERACT in daily practice	• 8.5" x 11" laminated cards • 8.5" x 14" glossy prints for posters
<b>Implementation Guide</b>		
<b>Implementation Guide</b>	INTERACT champion, agency leadership • Provides overview of purpose of each tool and tips on implementation, sustainability and overcoming barriers	• 8.5" x 11" wire bound booklet with glossy cover
<b>Quality Improvement Tools</b>		
<b>Hospitalization Rate Tracking Tool</b>	INTERACT champion, other agency leadership, and members of the agency quality committee • Calculate hospital transfer outcomes ( <i>unplanned admissions, 30-day readmissions, emergency room visits without admission</i> ) using standard definitions, and identify trends	• Paper and pencil Acute Care Transfer Log (8.5" x 11" pads) • Excel template with embedded formulas to calculate and trend rates ( <i>Advancing Excellence also has an Excel-based tracker</i> )
<b>Quality Improvement Tool for Review of Acute Care Transfers</b>	INTERACT champion, other agency leadership, and members of the agency quality committee • Root cause analysis of individual transfers	• 8.5" x 11" pads
<b>Quality Improvement Summary</b>	INTERACT champion, other agency leadership, and members of the agency quality committee • Summarize findings and trends from individual QI Reviews • Trends should guide educational and care improvement efforts	• Excel template that illustrates trends in findings • Paper and pencil worksheet also available (8.5" x 11" pads)
<b>Implementation Checklist</b>	INTERACT Champion and other agency leadership Outside organizations ( <i>hospitals, health systems, ACOs, etc...</i> ) • Summarizes INTERACT Implementation and outcomes	• 8.5" x 11" pads

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# INTERACT 3.0 *and Beyond*



## INTERACT Assisted Living Version 1.0 Tools

[ V 1.0 Tool Pilot ]



Tools	Use	Suggested Formats
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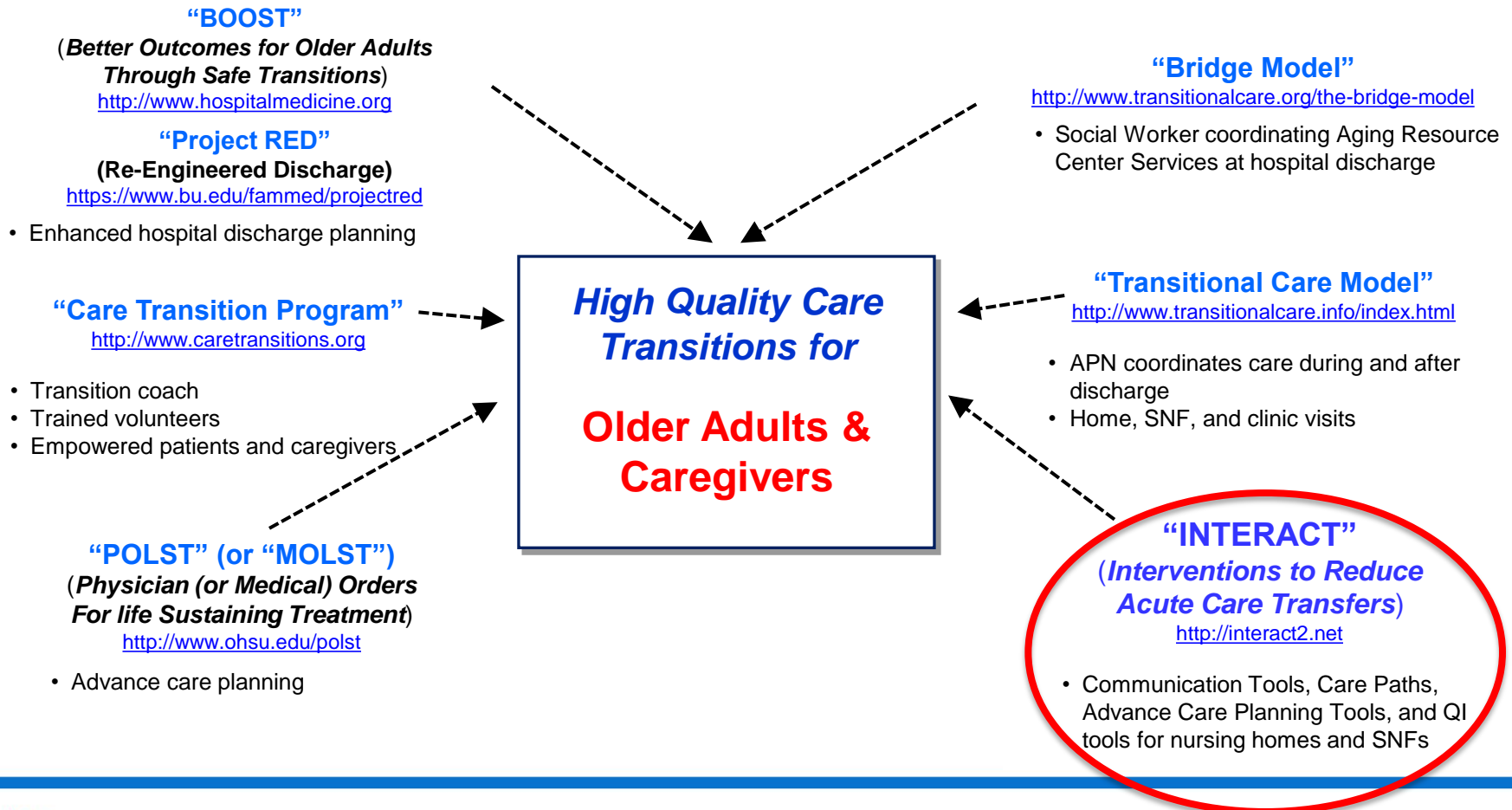
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# INTERACT *and Beyond*

- Providers have become engaged in the *INTERACT* Assisted Living & Home Health usability testing pilot program now underway-- October 2013--January 2014
- Goal is to compile feedback from Brookdale Senior Living (BSL) CMS grant communities & external organizations testing the tools and create final *INTERACT* Assisted Living & Home to be available via *INTERACT* Website in 2014
- *INTERACT 3.0* – implementation in VA Community Living Centers via intervention study “*Reducing Veteran’s Hospitalizations from Community Living Centers*”

# The INTERACT Program: What is It and Why Does It Matter?

## INTERACT is One of Several Evidence-Based Care Transitions Interventions



# Dissemination and Maintaining the Integrity of the INTERACT Quality Improvement Program



## Use of the Program

- The INTERACT Program materials are available on the internet free of charge for clinical use on the internet at <http://interact.fau.edu>
- The INTERACT logo is a registered trademark to FAU
- Documents downloaded from the INTERACT website should not be altered and labeled as "INTERACT"
- The tools have a copyright statement at the bottom of the first page:

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# INTERACT 3.0 *and Beyond*



**Questions?**

**Thank you**