



HRST
Health Risk Screening Tool

The HRST:
Empowering Staff to
Observe. Decide. Act!

- ▶ PREDICTIVE
- ▶ PROACTIVE
- ▶ PREVENTATIVE

This training is brought to you by:



The Educational and Training Department of **HRST**
Health Risk Screening Tool

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Introductions



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Objectives

- Provide a basic understanding of the Health Risk Screening Tool (HRST)
- Provide a better understanding of how the HRST saves lives and improves quality of life
- Answer common questions

What is the HRST?

A web-based instrument developed to screen for health risks associated with:

- Intellectual/Developmental Disabilities
- Physical Disabilities
- Disabilities Associated with Aging
- Traumatic Brain Injury
- Any Vulnerable Population

The History of the HRST

- Developed in 1992 – federal lawsuit
- Known originally as “Physical Status Review” (PSR)
- Extensively field tested on 6000 individuals
- Used in numerous states
- Web-based version released in 2006

The Importance of Health Risk Screening in the I/DD Community

- Serving those with I/DD in the community is a new endeavor
- Early detection and action saves lives!
- Quality of life is directly related to quality of health
- Those who serve the person most directly often have little to no training on identifying the emergence of health related risk or destabilization
- Major signs of risk can go unappreciated or masked by I/DD attributes, such as an inability to communicate
- Poly-pharmacy dynamics in the community

Polling Question

Have you ever suspected that a community clinician has prescribed/changed a medication because of their struggle to determine root cause?

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 health destabilization.

The tool then responds by producing action steps that empower support staff in the form of special attention and prevention.

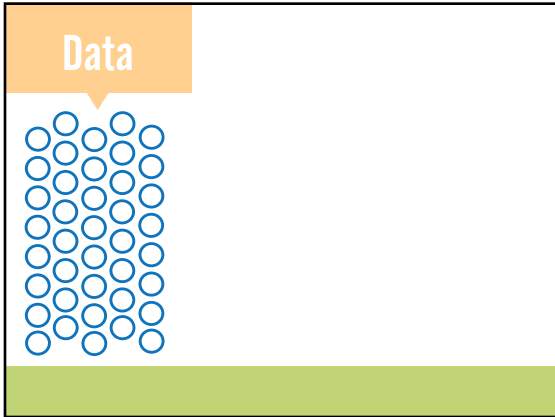
The HRST Health Care Level

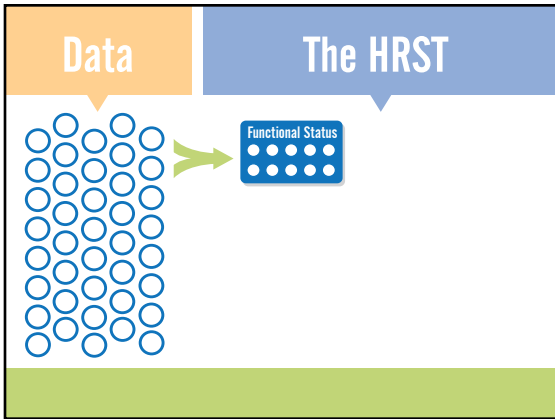
- Level 1: 0 - 12 Points **Low Risk**
- Level 2: 13 - 25 Points **Moderate Risk**
- Level 3: 26 - 38 Points **High Moderate Risk**
- Level 4: 39 - 53 Points **High Risk**
- Level 5: 54 - 68 Points **Highest Risk**
- Level 6: 69 or greater **Highest Risk**

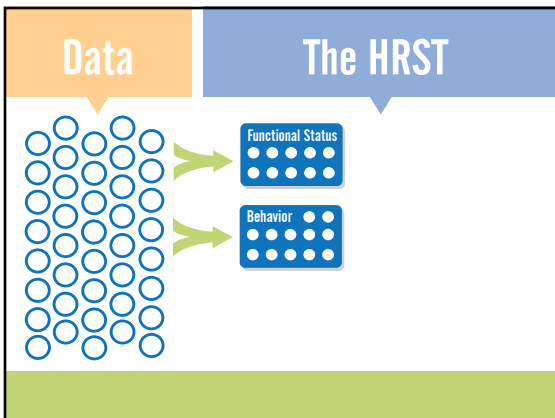
Transforming Data Into Action

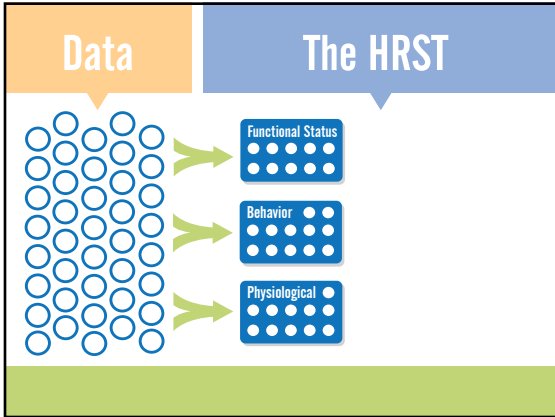
Data

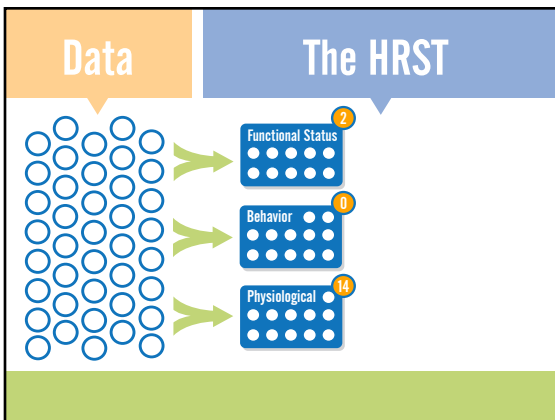
Age Surgery BMI Blood test Check up Case note Type II diabetes Appointment Med
Doctor visit Fall Diagnosis Side effect Med Seizure Incident Check up
Gender Case note Weight Hospitalization Diagnosis Goal ISP Case note Injury
Constipation Side effect Case note Incident Height Psychotropic med Injury Appointment
Progress note Dosage Injury Appointment Blood pressure Meal plan ER visit Blood test Seizure
Med Hospitalization Doctor visit Incident Weight Case note ER visit Side effect

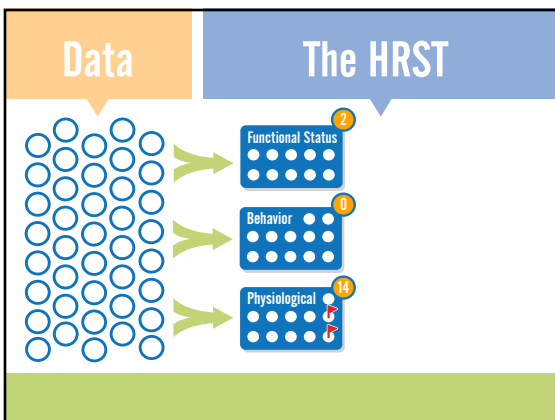


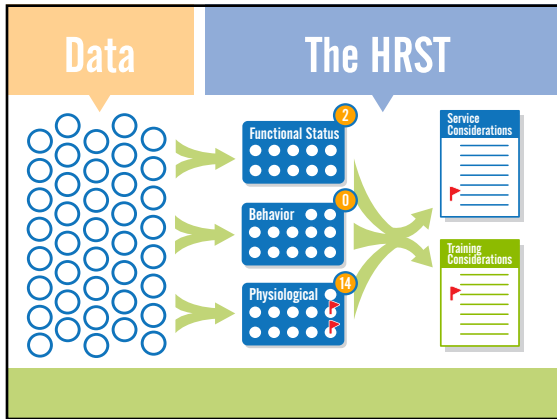


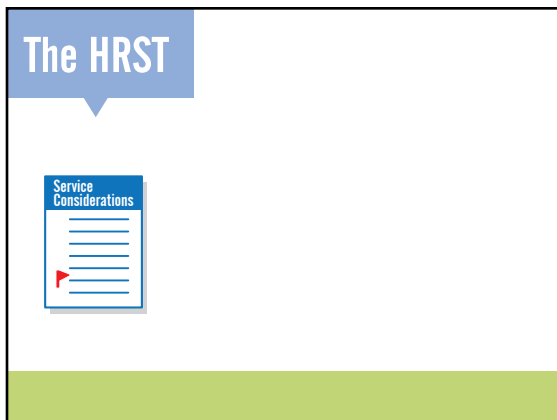


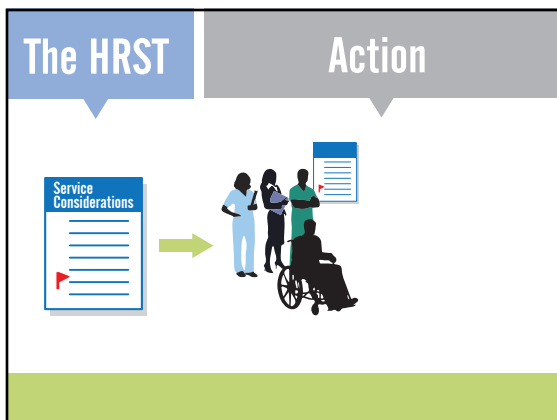


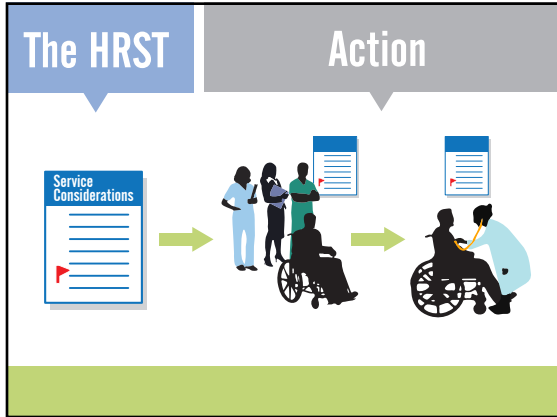


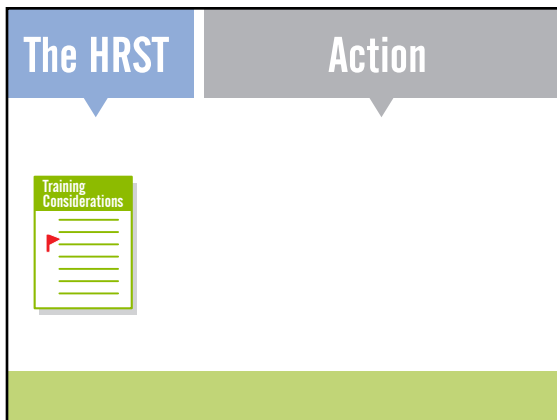


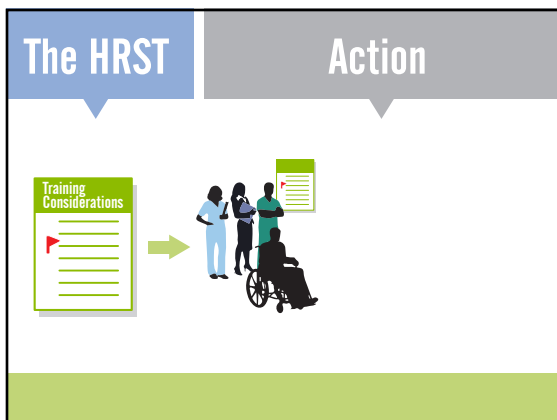


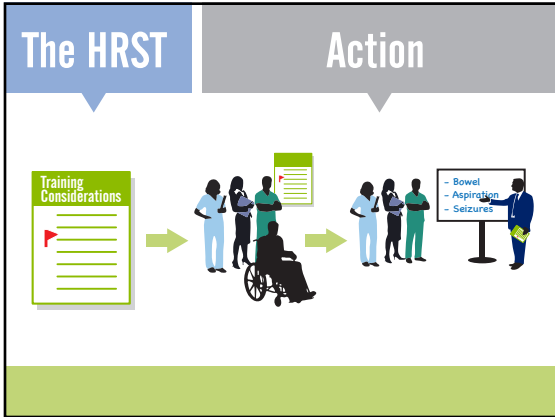


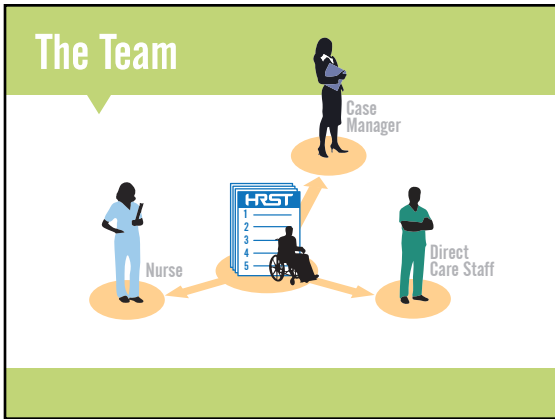


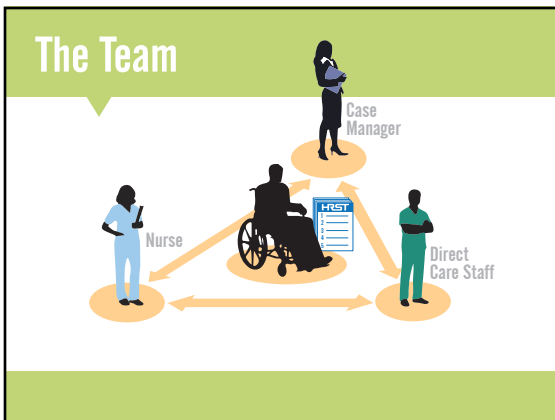












The HRST In Action:
The Service and Training
Considerations

The Power to Act!

Observe:
The screening process reveals areas of risk and destabilization

Decide:
The intensity of the scores allow you to easily decide where attention should be focused and decide how the Considerations should be prioritized

ACT:
Start with the higher prioritized Considerations

Service Consideration Example

- Service Consideration:
 - Nutrition/Clinical Dietician section
 - **Item:** (K) Gastrointestinal
 - **Score:** 4
 - **Consideration:** *Nutritional/clinical dietician assessment to determine which elements of current diet are contributing to GI signs & symptoms*

Training Consideration Example

- Training Consideration:
 - Signs/Symptoms/Emergencies section
 - **Item:** (S) Falls
 - **Score:** 4
 - **Consideration:** *Provide the caregiver with training about recognizing and responding to signs and symptoms of a serious injury arising from a fall*

HRST Outcomes

Why All This is So Important

Polling Question

Have you ever supported someone who died of any of the following?

- Bowel Impaction/Obstruction
- Sepsis
- Aspiration
- GER
- Seizure

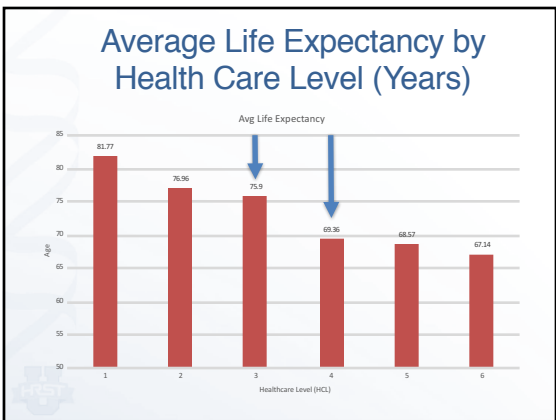
The HRST and Life Expectancy

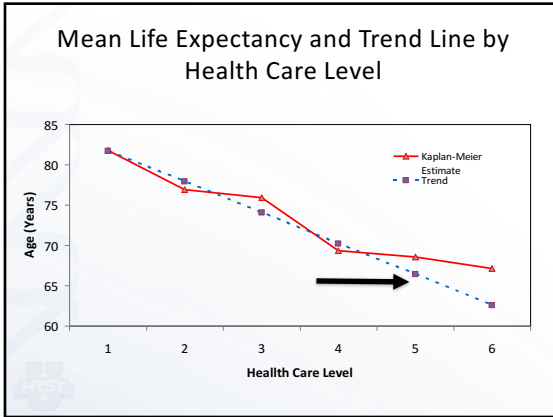
- Two studies completed, independent:
 - One by a large state client
 - The Center for Outcome Analysis
- Study to show correlation between Health Care Level (HCL) and life expectancy
- Focus was on I/DD population, fully screened using the HRST
- Both studies independently support correlation between HRST Health Care Level and mortality dynamics

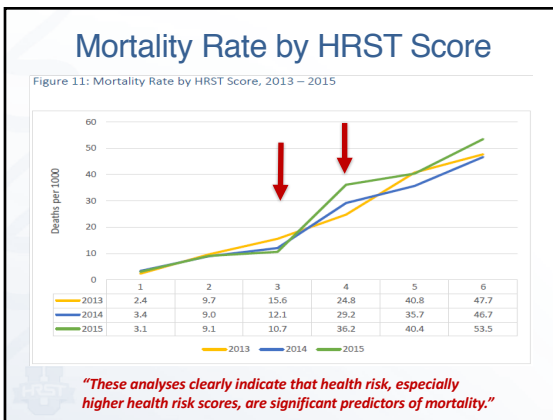
Predictive Validity of a Health Risk Screening Tool Designed for People with Developmental Disabilities, Michael J. Ruchlow, Ph.D., and James W. Cooney, Ph.D., Center for Outcome Analysis, 2014.
2015 Annual Mortality Report, Georgia Department of Behavioral Health and Developmental Disabilities, August 2016.

Average Life Expectancy by Health Care Level (Years)

Health Care Level	Median Age
1	81.77
2	76.96
3	75.90
4	69.36
5	68.57
6	67.14







Odds Ratio (OR) for HRST Scores, 2013 – 2015

HRST	OR 2013	OR 2014	OR 2015
1	1.65	1.61	1.66
2	2.72	2.60	2.77
3	4.48	4.20	4.60
4	7.39	6.77	7.66
5	12.18	10.91	12.74
6	20.09	17.60	21.20

- The odds of dying increase significantly with each one-point increase in HRST score.
- The main finding is that each one-point increase in HRST score has a very strong relationship to the likelihood that death may occur, even at the lowest levels.

Odds Ratio (OR) for 10-Year Age Difference

Age	OR 2013	OR 2014	OR 2015
20	1.07	1.08	1.09
30	1.52	1.61	1.78
40	2.16	2.41	2.81
50	3.06	3.60	4.50
60	4.35	5.37	7.20
70	6.17	8.00	11.52

- The health risk score and age were two main predictors of death.
- With each 10 year increase in age, the odds of dying increase exponentially.

Summary of Findings

- The HRST Health Care Level is prognostic of longevity (as HCL increases, longevity decreases)
- Significant drop in longevity at HCL 4
- Particular attention should be placed on those individuals at a HCL 4 or those with increasing HCL's
- With each HCL increase, the odds of dying increase exponentially EVEN at lower Health Care Levels
- Increases in HCL's should prompt action to avert unnecessary, preventable death
- A two-point increase in HCL significantly increases the likelihood of mortality

*"The HRST has helped immensely in monitoring for unhealthy patterns that might have resulted in detrimental outcomes. **People are alive today because of the HRST.**" -M.W., RN Georgia*

HRST Common Questions

How long does it take to complete an HRST screening?

- For an initial screening, average time takes approximately 30-60 minutes, depending on the complexity of the individual
- Updates often require little time to complete

How often is the HRST Administered?

- At least annually to ensure individual's health is stable
- Reviewed and updated when individual's status changes (ER visits, Hospitalizations, new diagnoses or meds, injuries, etc.)



Questions and Success
Stories

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