



RAI-MDS the Critical Link to Quality Care in Complex Continuing Care (CCC)

Bruyère Continuing Care, Ottawa - June 2009

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Clinical Outcomes

RAI Data **LINKS TO** Improved Patient Care

RAI-MDS Identifying Patients with Specific Care Needs

- Outcome Depression Rating Scale** (Score > 3) **Links to** Restorative Stroke patients with DRS score >3 receive intervention
- Quality Indicator (QI) Report** (Behavior that affects others) **Results in** Assessment by behavior management team

Tailoring Care to Individual Patient Needs

- QI Report** (Prevalence of Falls) **Sent to** Physiotherapy & Occupational Therapy implement preventative measures
- QI Report** (Prevalence of Dehydration) **Link to** Nursing & Dietary encourage and monitor fluid intake output

RAI-MDS Assessments Directing Quality Care

- CIHI Data Quality Audit Report**
 - Patients with ulcers and no skin monitoring
 - Patients with ulcers and no monitoring of acute medical condition
 - Patients with ulcers not receiving ulcer care
 - Continent patients using continence products
 - Incontinent patients with no skin monitoring
- Focused Remediation**

RAI Terminology Used in

- Documentation, assessment forms and future electronic health record e.g. ADL scores in Care Plan
- ROM and voluntary movement terminology in physiotherapy charting
- Communication with Ministry of Health & Long Term Care
- Discussions with Peer facilities for benchmarking

Program Development

RAI Data **LINKS TO** Decision Making

RAI -MDS RUGs Groupings Linked to: Admission Criteria

- Rehabilitation needs → Restorative & Neuro-Sciences Care Stream
- Extensive Special Care needs → Specialized Complex Care Stream
- Special Care needs e.g pressure ulcers → Restorative Wound Care Stream
- Complex Care Needs → Supportive Care Stream

RAI: One of the Metrics in the Clinical Process

- Reassessment of Care Needs for**
 - Patient care requirements
 - Care providers skill mix requirement
 - RUGs growing rules
- Discharge Planning**
 - No identified need for
 - Special Extensive Care
 - Special Care
 - Rehabilitation Care
 - Clinically Complex care
 - No emergency room visits/hospital stays in past 90 days (RAI P5,6)
 - No change in medical orders in past 90 days (RAI O2)

RAI-MDS: One of the Metrics in the Development of Care Streams

RUG Category Analyses				
Care Stream	RUG Category	Special Staffing Needs	Technology Equipment	Care Goals
Restorative Neurology/Wound	RMA/RMB/RMC	OT/PT/SLP	Therapy Equipment	Physical Functioning/Discharge
Specialized Complex	SE1/SE2/SE3	RN/RPN/Therapy (specialized training)	IV/Vent/Suctioning/Trach Care/Dialysis	Clinical Stabilization
Supportive	SSA/SSB/SSC	RN/RPN/PCA/Rehab Assistants	Dressings/O2/Tube Feedings/O2	Maintain Function/Prevent Complications

Staff Resource Utilization

- RUGs Groupings**
 - Rehabilitation → SLP/OT/PT
 - Extensive Special Care → RN & RPN with collaboration
 - Special Care → RN/RPN
 - Clinically Complex → RPN
- Rehabilitation Assistant Pilot Project** → Enhanced OT/PT resources based on demonstrated clinical benefits

Technology/Equipment Utilization

- Number of patients with pressure ulcers → Specialized mattress & pressure mapping device
- Number of diabetic patients → Glucometers
- Increased Medical Complexity → Vital spot / BPAP / Ventilator machines

CQI & Research

RAI Data **LINKS TO** Care Initiatives

Utilization of RAI in CQI Projects

- Quality Indicators**
 - Increased number of patients with indwelling catheters (H3d) → Requirement for CQI initiative
 - Large number of patients that do not attend activities outside of room (bedfast-G6) → Requirement for Therapeutic Recreation Services to meet individual needs

Evaluation of CQI Initiatives

- Link from QI Report**
 - Dehydration (J1c) → Hydration therapy
 - Indwelling catheters (H3d) → Improving continence care
 - Weight loss (J1a,K3a) → Weekly weight monitoring & therapeutic interventions
 - Demographic information → Patient satisfaction Survey

Supporting Research Initiatives

- Identify potential patients for:**
 - Improving Continence Care In Complex Continuing Care (IC5) Collaborative
 - Modifying food texture project to address weight loss
 - Using the Nouse® Perceptual visual interface
- Participate in related external research projects**
 - CAN-Strive

Bruyère Continuing Care



- Saint-Vincent Hospital** - 336 Continuing Complex Care beds
- Élisabeth Bruyère Hospital** - 90 Rehabilitation beds - 36 Palliative Care beds
- Élisabeth Bruyère Residence** - 71 Long Term Care beds
- Saint-Louis Residence** - 198 Long Term Care beds

