## **Community Needs Driven Research Network**

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## **RAI Research**

The Resident Assessment Instrument (RAI) was often talked about across the province. The topic most frequently came up in Edmonton and Calgary. Questions arising from the RAI assessments were frequently related to many of the other issues raised throughout the consultation process. Participants stated the need for more research to assess the impact of using the RAI instrument in care planning and client outcomes.

Participants felt that the RAI was a useful tool in general, but not enough to

provide an accurate picture of the client and his/ her needs. Also, the short and long-term processes and complex needs of the client are not easily captured with the RAI. In addition, participants said that using the RAI with certain populations, such as clients with mental health issues, is not appropriate as it does not capture the complexity of client needs.





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This project was funded by: Alberta Innovates Health Solutions The limitations of the RAI for capturing the complexity extends to the use of the RAI Home care instrument in supported living, where participants feel is not appropriate for the specific context. For this reason, some facilities will use the RAI but also choose to complement it with their own tools in order to get a clearer picture of their client's needs.

## What did front-line staff say?

· "Because RAI doesn't capture the complex range of behaviours, my program is actually the result from that funding so, but I know speaking to our other secure dementia units who also are dealing with some pretty complex behaviours. RAI is not capturing it for funding purposes."



· "I find it interesting that the RAI instrument has a mental health module and has a home care module but... some of the questions that are in those modules are not in the long term care module, alt-

hough they would be appropriate, given some of the challenges of the day to day."

- · "... maybe this is the foundation but what additional assessments are added on that becomes sort of the standard to say 'when you have this kind of a population, you can add this elements and get a broader, you know, more complex, comprehensive assessment to help you with those populations.' So RAI plus? What could the plus be to help pull out the additional information for care plan?"
- · "I think is recognizing that the RAI gives minimum data. Like it seems like a lot of assessment but is still minimum. So what's the next step?"
- · "... we have sort of a mixed model where some sites have RNs and some have LPNs that do RAI assessments, is there a difference in the outcome? Is it related to the training the individuals get when they first start that whole assessment piece or is it related to the basic education that they receive as part of their degree?"

## What research needs to be done?

Research is needed in order to identify the missing aspects of the assessment and to create a standardized tool, as RAI effects funding. The effect that funding has makes the RAI instrument a very important part of the continuing care system and participants feel more research needs to be done in regard to this part of care assessment and provision. The required competencies of the clinician using the RAI need to be identified as well to ensure reliability of the RAI assessment. Research is needed that looks at the inter-rater reliability and outcome differences when the assessment is done by an RN or an LPN.