Foire aux questions sur les services à domicile

Les questions suivantes sur la codification clinique sont fréquemment posées au personnel de l'ICIS. Les réponses présentées sur la page des ressources à l'intention des évaluateurs servent de référence rapide. Les évaluateurs peuvent ainsi remplir plus facilement les sections des évaluations interRAI conformément aux normes de codification (objectif, définition et processus) présentées dans les manuels de l'utilisateur d'interRAI, ce qui accroît l'exactitude et la qualité des données.

Les questions ci-dessous, soumises en anglais, ainsi que les réponses connexes figurent dans l'outil d'interrogation en ligne de l'ICIS, tout comme celles portant sur la codification clinique et d'autres sujets connexes (soumission de données, analyses et rapports). Ces questions et réponses sont en anglais seulement dans l'outil d'interrogation en ligne.

FAQ sur les services à domicile

Numéro de question	Instrument d'évaluation	Section et élément	Question	Réponse
70324	RAI-HC	**J1** (Diseases)	How is Section J1 (Diseases) coded if the client's disease is being treated or monitored only by his/her physician?	All health care professionals involved in the treatment or monitoring of a client's disease should be considered when coding Section J1 (Diseases). When the client is being treated or monitored only by his/her physician for the specific disease, that item should be coded 2. A code of 1 is used only if the disease is present but is not subject to focused treatment or monitoring by a health care professional.
66617	RAI-HC	**Q1** (Number of Medications) **Q2d** (Receipt of Hypnotic or Analgesic) **Q5** (List of All Medications)	Where is the use of cannabis oil captured in the RAI-HC assessment?	Cannabis oil is captured in sections Q1 (Number of Medications), Q2d (Receipt of Hypnotic or Analgesic) and Q5 (List of All Medications), regardless of whether it has been prescribed or not. In Section Q2 (Receipt of Psychotropic Medications), all medications are captured according to their classification versus the purpose of taking the medication. For example, taking cannabis oil as an appetite stimulant or to prevent nausea and vomiting due to chemotherapy would be captured as an analgesic.

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60524	RAI-HC	**Q1** (Number of Medications) **Q2d** (Receipt of Hypnotic or Analgesic) Section **Q5** (List of All Medications)	If marijuana is prescribed for medicinal use or is being used without a prescription, should it be captured as an analgesic medication in sections Q1 (Number of Medications), Q2d (Receipt of Hypnotic or Analgesic) and Section Q5 (List of All Medications) of the RAI-HC?	CIHI classifies medications according to the World Health Organization's Anatomical Therapeutic Chemical (ATC) classification system. The ATC classification for cannabinoids is N02BG10 Cannabinoids. Marijuana, as a cannabinoid, would therefore be captured in Section Q1 (Number of Medications), Section Q2d (Receipt of Hypnotic or Analgesic) and Section Q5 (List of All Medications), regardless of whether it has been prescribed or not. **This change in coding practice is effective October 8, 2015.**
52297	RAI-HC	**Q2d** (Hypnotic or Analgesic)	If a person takes ASA 81 mg once daily, is it captured as an analgesic in Section Q2d (Hypnotic or Analgesic)?	interRAI has recommended the following change in coding practice to align with the World Health Organization (WHO) standards for classification of medications: acetylsalicylic acid (Entrophen, ASA, Novasen, Bufferin, Aspirin) when given once a day as an antithrombotic agent, regardless of dose, it is considered to be an antithrombotic agent and should not be captured as an analgesic in Section Q2d (Hypnotic or Analgesic). Acetylsalicylic acid, when given in multiple doses per day, regardless of dose, is considered an analgesic and should be captured as such in Section Q2d. Note that if acetylsalicylic acid is given once a day as an analgesic, regardless of dose, it should be captured as an analgesic in Section Q2d. **This change in coding practice is effective as of April 1, 2015.**
52062	RAI-HC	**K4** (Pain)	If a person complains of pain and is given a PRN analgesic with good effect, should we capture the pain in K4?	Yes. If the person identifies that he or she is experiencing pain of any kind, you will capture it in K4 (Pain), even if the analgesic is effective. It is important to capture any and all pain to ensure that appropriate pain relief interventions are included in the person's care plan.
48731	RAI-HC	**CC4** (Time Since Last Hospital Stay)	Should CC4 (Time Since Last Hospital Stay) be coded based on the date in CC1 (Date Case Opened) or is it based on the date in A1 (Assessment Reference Date)?	Section CC4 should use the assessment reference date as its anchor. For example, you would count persons as "presently in hospital" only if that was true on the day the assessment was being completed.

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Numéro de question	Instrument d'évaluation	Section et élément	Question	Réponse
45702	RAI-HC	**H2a** (Mobility in Bed) or **H2b** (Transfer)	If a person in bed requires assistance to move his/her legs to a sitting position on the side of a bed, where in the ADL Self-Performance sections is that type of assistance captured?	interRAI has recommended the following change in coding practice for sections H2a (Mobility in Bed) and H2b (Transfer): Lifting the legs in and out of bed to/from a sitting position is not a subtask associated with bed mobility or transfer. This task is not captured in the ADL Self-Performance section of the interRAI instruments. **This change in coding practice is effective as of May 11, 2018.**
44316	RAI-HC	**Q5c** (Route of Administration)	How is Section Q5c (Form) coded for eye drops, ear drops and transdermal applications such as Transderm Nitro? How is Section Q5c coded for creams such as hydrocortisone cream or Canesten Cream?	Eye drops, ear drops and transdermal applications such as Transderm Nitro should be coded 10 (Other). Topical (code 7) pertains to a particular area of the skin affecting only the area to which it is applied (e.g., hydrocortisone cream, Canesten Cream); ear drops, eye drops and transdermal applications enter the body through the eye/ear/skin. You will note that on page 145 of the *RAI-Home Care (RAI-HC) User's Manual, Canadian Version, September 2010*, it indicates that a code of 7 includes eye drops and ointments. When the User's Manual is revised, that statement will be changed.