



interRAI Home Care (IRRS): Coding Guidelines for Completing the Assessment in Hospital, Residential Care Facility or Other Setting

Background

interRAI developed the interRAI Home Care © (interRAI HC) assessment to assess persons in home and community settings. Some jurisdictions across Canada also use the interRAI HC to assess persons in hospital settings to inform discharge-planning decisions, particularly for placement in residential care facilities. However, certain sections of the assessment are difficult to code for people in hospital settings, so Canadian stakeholders, the Canadian Institute for Health Information (CIHI) and interRAI identified the need for coding standards related to the use of the interRAI HC in hospital settings.

The table below highlights some assessment items that are mandatory or conditional, based on the location where the assessment is being completed. It also includes items that may require information from other sources or use of clinical judgment to accurately code.

Assessment items and instructions

Element ID	Element name	Assessment instructions
A10a	Location of Assessment — Type of location	Mandatory to complete. This item distinguishes between those persons assessed in home and community settings from those assessed in facility settings (e.g., hospital, residential care facility).
A10b	Location of Assessment — Facility admission date	Conditional to complete. If the location of assessment is a hospital, residential care facility or other (A10a = 2, 3 or 4), then A10b must be completed. Review the clinical record to obtain the date on which the person was admitted to the facility (e.g., hospital).
A13	Residential/Living Status at Time of Assessment	Mandatory to complete. Code based on where the person was living prior to hospital admission.
A14a	Living arrangement — Lives	Mandatory to complete. Code based on the person's living arrangement prior to hospital admission.
A14b	Living arrangement — As compared to 90 days ago (or since last assessment), person now lives with someone new	Mandatory to complete. Code based on whether the person's living situation has changed when compared with 90 days prior to hospital admission (e.g., the person moved in with another person, someone else moved in with the person, the person's spouse died in the 90 days prior to hospital admission).



Job Aid

Element ID	Element name	Assessment instructions
A14c	Living arrangement — Person or relative feels that the person would be better off living elsewhere	Mandatory to complete. Code based on how the person or relative now feels about the person returning to the living arrangement they were in prior to hospital admission.
A15	Time Since Last Hospital Stay	Mandatory to complete. Code 5 (now in hospital) if the person is admitted as an inpatient in a hospital setting.
F4	Length of Time Alone During the Day	Conditional to complete. If the location of assessment is a hospital, residential care facility or other (A10a = 2, 3 or 4), then F4 must be blank.
G1	IADL Self-Performance	Conditional to complete. If the location of assessment is a hospital, residential care facility or other (A10a = 2, 3 or 4), then G1a–h (meal preparation, ordinary housework, managing finances, managing medications, phone use, stairs, shopping, transportation) must be blank.
G1	IADL Capacity	Mandatory. Code using information from the person or other sources (e.g., conversation with family or social worker, other clinical notes). Use clinical judgment.
G4b	Activity Level — Number of days went out of the house or building in which he/she resides	Conditional to complete. If the location of assessment is a hospital, residential care facility or other (A10a = 2, 3 or 4), then G4b must be blank.
M3	Adherence With Prescribed Medications	Conditional to complete. If the location of assessment is a hospital, residential care facility or other (A10a = 2, 3 or 4), then M3 must be blank.
N3	Formal Care — Days and total minutes	Conditional to complete. If the location of assessment is a hospital, residential care facility or other (A10a = 2, 3 or 4), then N3a–d (home health aide, home nurse, homemaking services, meals) must be blank.
N4c	Physician Visit	Conditional to complete. If the location of assessment is a hospital, residential care facility or other (A10a = 2, 3 or 4), then N4c must be blank.
P1c	IADL help	Mandatory to complete. Code based on the situation prior to admission. Use clinical judgment.
P1d	ADL help	Mandatory to complete. Code based on the situation prior to admission. Use clinical judgment.
P3	Hours of Informal Care and Active Monitoring	Conditional to complete. If the location of assessment is a hospital, residential care facility or other (A10a = 2, 3 or 4), then P3 must be blank.
Q1	Home Environment	Mandatory to complete. Code using information from the person or other sources (e.g., conversation with family or social worker, other clinical notes). If unsure, code 0 (no). Use clinical judgment.



Other information

The following outputs are not generated when the interRAI HC is completed in a hospital, residential care facility or other setting (A10a = 2, 3 or 4):

- Caregiver Risk Evaluation (CaRE) Algorithm
- Vulnerable Persons at Risk (VPR) Scale
- Prevention Clinical Assessment Protocol (CAP)

Questions?

Please use the eQuery application available at cihi.ca to search for answers to frequently asked questions and/or to submit questions about the interRAI HC. You may also email specializedcare@cihi.ca with your question; a team member will respond within 72 hours.



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