



interRAI CA (IRRS): Decision-Support Algorithms and Outcome Scales

Outcome scale	Description	interRAI CA assessment items	Score range
Self-Reliance Index	The Self-Reliance Index is a descriptive indicator that identifies the presence of activity of daily living (ADL) and/or cognitive impairments. The screening differentiates those who are self-reliant in all 5 ADLs and cognition from those who are impaired in 1 or more of those areas.	<ul style="list-style-type: none">• Cognitive Skills for Daily Decision Making (C1)• ADL Self-Performance (C2):<ul style="list-style-type: none">– Bathing (C2a)– Bath transfer (C2b)– Personal hygiene (C2c)– Dressing lower body (C2d)– Locomotion (C2e)	0 — Self-reliant 1 — Impaired
Assessment Urgency Algorithm	The Assessment Urgency Algorithm is a 6-point scale used to prioritize the need and urgency for a comprehensive follow-up assessment (e.g., interRAI HC).	<ul style="list-style-type: none">• ADL Self-Performance: Personal hygiene (C2c)• Dyspnea (C3)• Self-Reported Health (C4)• Self-Reported Mood: Sad, depressed or hopeless (C5c)• Conditions/diseases make cognitive, ADL, mood or behaviour patterns unstable (C6a)• Family or close friends report feeling overwhelmed (D19b)	1 to 6 A higher score indicates a more urgent need for a follow-up assessment
Service Urgency Algorithm	The Service Urgency Algorithm is a 4-point scale used to identify persons who may be in urgent need of services (e.g., IV medication, wound care).	<ul style="list-style-type: none">• ADL Self-Performance: Personal hygiene (C2c)• Pain frequency (D8a)• Treatments: IV therapy (D14b)• Treatments: Wound care (D14e)• Time Since Last Hospital Stay (D15)• Emergency Department Visit (D16)	1 to 4 A higher score indicates a more urgent need for services



Job Aid

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Rehabilitation Algorithm	The Rehabilitation Algorithm is a 5-point scale that is used to identify persons who may be candidates for rehabilitation services, specifically physiotherapy and occupational therapy.	<ul style="list-style-type: none"> • Referral to initiate or continue palliative services (B2c) • ADL Self-Performance: Locomotion (C2e) • IADL Capacity (D3): <ul style="list-style-type: none"> – Meal preparation (D3a) – Ordinary housework (D3b) – Manage medications (D3c) – Stairs (D3d) • Change in ADL Status (D4) 	1 to 5 A higher score indicates greater suitability for rehabilitation services
Personal Support Algorithm	The Personal Support Algorithm is a 6-point decision-support tool that can be used to prioritize access to personal support services and to inform the amount of personal support services provided.	<ul style="list-style-type: none"> • Cognitive Skills for Daily Decision Making (C1) • ADL Self-Performance (C2): <ul style="list-style-type: none"> – Bathing (C2a) – Bath transfer (C2b) – Personal hygiene (C2c) – Dressing lower body (C2d) – Locomotion (C2e) • Instability of Conditions (C6): <ul style="list-style-type: none"> – Conditions/diseases make cognitive, ADL, mood or behaviour patterns unstable (C6a) – Experiencing an acute episode or a flare-up (C6b) • Ability to Understand Others (D2) • IADL Capacity (D3): <ul style="list-style-type: none"> – Meal preparation (D3a) – Ordinary housework (D3b) – Managing medications (D3c) – Stairs (D3d) • Informal Helper Status (D19): <ul style="list-style-type: none"> – Primary informal helper expresses feelings of distress, anger or depression (D19a) – Family or close friends report feeling overwhelmed (D19b) 	1 to 6 A higher score indicates greater need for personal support



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Changes in Health, End-Stage Disease and Signs and Symptoms (CHESS)	The Changes in Health, End-stage Disease, and Signs and Symptoms (CHESS) scale detects frailty and health instability and was designed to identify persons at risk of serious decline.	<ul style="list-style-type: none"> • Referral to initiate or continue palliative services (B2c) • Dyspnea (C3) • Change in Decision Making (D1) • Change in ADL Status (D4) • Peripheral edema (D7c) • Vomiting (D7d) • Noticeable decrease in amount of food/fluids consumed (D10a) • Weight loss (D10b) 	0 to 5 Higher scores are associated with adverse outcomes
Self-reported Mood Scale	The Self-reported Mood Scale is a self-reported measure of psychological well-being based on the frequency of indicators of dysphoria, anhedonia and anxiety.	<ul style="list-style-type: none"> • Self-Reported Mood (C5): <ul style="list-style-type: none"> – Little interest or pleasure (C5a) – Anxious, restless or uneasy (C5b) – Sad, depressed or hopeless (C5c) 	0 to 9 Higher scores indicate poorer self-reported mood
Pain Scale	The Pain Scale helps determine the frequency and intensity of pain. This scale validates well against the Visual Analogue Scale.	<ul style="list-style-type: none"> • Frequency with which person complains or shows evidence of pain (D8a) • Intensity of highest level of pain present (D8b) 	0 to 4 Higher scores indicate more severe pain

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