

Describing Outcome Scales (RAI-HC)



Outcome Scale	Description	RAI-HC Assessment Items	Score Range
DRS Depression Rating Scale	This scale can be used as a clinical screen for depression. Validated against the Hamilton Depression Rating Scale (HDRS) , the Cornell Scale for Depression in Dementia (CSDD) and the Calgary Depression Scale (CDS) .	Seven Depression Rating Scale items: <ul style="list-style-type: none"> • Feeling of sadness or being depressed (E1a) • Persistent anger (E1b) • Expressions of unrealistic fears (E1c) • Repetitive health complaints (E1d) • Repetitive anxious complaints (E1e) • Sad or worried facial expression (E1f) • Tearfulness (E1g) 	0–14 A score of 3 or more may indicate a potential or actual problem with depression.
CHESS Changes in Health, End-Stage Disease and Signs and Symptoms	This scale detects frailty and health instability and was designed to identify clients at risk of serious decline.	Nine CHESS items: <ul style="list-style-type: none"> • Worsening of decision-making (B2b) • Decline in ADL (H3) • Vomiting (K2e) • Edema (K3d) • Shortness of breath (K3e) • End-stage disease (K8e) • Weight loss (L1a) • Dehydration (L2c) • Leaving food uneaten (L2b) 	0–5 Higher scores indicate higher levels of medical complexity and are associated with adverse outcomes such as mortality, hospitalization, pain, caregiver stress and poor self-rated health.
Pain Scale	This scale summarizes the presence and intensity of pain. Validates well against the Visual Analogue Scale .	Two Pain Scale items: <ul style="list-style-type: none"> • Pain frequency (K4a) • Pain intensity (K4b) 	0–3 Higher scores indicate a more severe pain experience.
ADL* Self-Performance Hierarchy Scale *Activity of Daily Living	This scale reflects the disablement process by grouping ADL performance levels into discrete stages of loss (that is, early loss: personal hygiene; middle loss: toileting and locomotion; late loss: eating).	Four ADL Self-Performance Hierarchy Scale items: <ul style="list-style-type: none"> • Personal hygiene (H2i) • Toilet use (H2h) • Locomotion (H2c) • Eating (H2g) 	0–6 Higher scores indicate greater decline (progressive loss) in ADL performance.
ADL Short Form	This scale provides a measure of the client's ADL self-performance status based on items that reflect stages of loss (early, middle and late loss).	Four ADL Short Form items: <ul style="list-style-type: none"> • Personal hygiene (H2i) • Toilet use (H2h) • Locomotion (H2c) • Eating (H2g) 	0–16 Higher scores indicate more impairment of self-sufficiency in ADL performance.
ADL Long Form	This scale provides a measure of the client's ADL self-performance status. The ADL Long Form is more sensitive to clinical changes than the other ADL scales.	Seven ADL Long Form items: <ul style="list-style-type: none"> • Bed mobility (H2a) • Transfer (H2b) • Locomotion (H2c) • Dressing upper/lower body (H2e/H2f) • Eating (H2g) • Toilet use (H2h) • Personal hygiene (H2i) 	0–28 Higher scores indicate more impairment of self-sufficiency in overall ADL performance.

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IADL* Difficulty Scale *Instrumental Activity of Daily Living	This scale provides a measure of the client's difficulty in or capacity to complete tasks based on items that reflect stages of loss (early, middle and late).	Three IADL Difficulty items: <ul style="list-style-type: none"> • Ordinary housework (H1bB) • Meal preparation (H1aB) • Phone use (H1eB) 	0–6 Higher scores indicate greater difficulty.																								
IADL Involvement Scale	This scale provides a measure of the client's self-performance of all seven IADL tasks.	Seven IADL Involvement items: <ul style="list-style-type: none"> • Meal preparation (H1aA) • Ordinary housework (H1bA) • Managing finances (H1cA) • Managing medications (H1dA) • Phone use (H1eA) • Shopping (H1fA) • Transportation (H1gA) 	0–21 Higher scores indicate greater dependence on others.																								
interRAI PURS Pressure Ulcer Risk Scale	This scale differentiates risk for developing pressure ulcers.	Seven interRAI Pressure Ulcer Risk Scale items: <ul style="list-style-type: none"> • Mobility in bed (H2a) • Locomotion in home (H2c) • Bowel continence (I3) • Shortness of breath (K3e) • Pain frequency (K4a) • Unintended weight loss (L1a) • Prior pressure ulcer (N4) 	0–8 Higher scores indicate a higher relative risk for development of a pressure ulcer.																								
CPS Cognitive Performance Scale	This scale describes the cognitive status of a client. Validated against the Mini-Mental State Examination (MMSE) and the Test for Severe Impairment (TSI) . The chart illustrates how the RAI-HC CPS scores relate to the MMSE scores. <table border="1" data-bbox="415 964 1020 1273"> <thead> <tr> <th>CPS Score</th> <th>Description</th> <th>MMSE Equivalent Average</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>Intact</td> <td>25</td> </tr> <tr> <td>1</td> <td>Borderline intact</td> <td>22</td> </tr> <tr> <td>2</td> <td>Mild impairment</td> <td>19</td> </tr> <tr> <td>3</td> <td>Moderate impairment</td> <td>15</td> </tr> <tr> <td>4</td> <td>Moderate/severe impairment</td> <td>7</td> </tr> <tr> <td>5</td> <td>Severe impairment</td> <td>5</td> </tr> <tr> <td>6</td> <td>Very severe impairment</td> <td>1</td> </tr> </tbody> </table>	CPS Score	Description	MMSE Equivalent Average	0	Intact	25	1	Borderline intact	22	2	Mild impairment	19	3	Moderate impairment	15	4	Moderate/severe impairment	7	5	Severe impairment	5	6	Very severe impairment	1	Four Cognitive Performance Scale items: <ul style="list-style-type: none"> • Short-term memory recall (B1a) • Cognitive skills for daily decision-making (B2a) • Expressive communication—making self understood (C2) • Eating impairment (H2g) 	0–6 Higher scores indicate more severe cognitive impairment.
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