interRAI CA: What's Different?

interRAI Contact Assessment

The interRAI assessment instruments are a rich source of information to support clinical and organizational decision-making. Because these clinical assessments share core assessment items and use standardized language, the information remains meaningful across health care sectors and promotes continuity of care.

The interRAI Contact Assessment (interRAI CA) © is part of the new suite of interRAI assessment instruments. It is a modular assessment instrument that provides information to support the home care intake and referral process. This job aid provides experienced assessors with information on some of the similarities and differences between the interRAI CA and its earlier version.

Benefits of the new suite

Development of a new interRAI suite of assessment instruments was driven by the continuous use of the assessments at the point of care, along with ongoing rigorous research by interRAI. The suite of interRAI assessment instruments offers opportunities to improve care through a number of enhancements.

interRAI CA enhancements

- Consistent, simplified terms, definitions and coding options are easier to understand and use.
- Some outcome scales have been revised and 1 new one developed (i.e., Self-reported Mood Scale).
- Expanded response sets provide greater accuracy (e.g., IADL capacity).
- Important areas that affect a person's quality of life have been redesigned to improve consistency in assessing, such as activities of daily living (ADLs).
- Some items have been removed, such as Falls, which has been replaced by 3 separate elements:
 - Falls in Last 30 Days
 - Falls in Last 31-90 Days
 - Falls in Last 91–180 Days
- The Screening Level Assessment for Emergency Department has been removed.





interRAI CA: What's different?

Section A. Identification Information

Item		What's different	Item description
A2b.	SEX/GENDER IDENTITY — Gender Identity	New	Captures the person's gender identity, which may be the same as or different from birth-assigned sex.
A2c.	SEX/GENDER IDENTITY — Person self-identifies gender as:	New	Optional completion if the person responded "Other" to A2b (Gender Identity). Record the person's verbatim response in an open text box.
A4.	MARITAL STATUS	New	Describes the current marital status of the person.
A8a.	INDIGENOUS IDENTITY — First Nations	New	To document self-identification as a First Nations Indigenous person.
A8b.	INDIGENOUS IDENTITY — Métis	New	To document self-identification as a Métis Indigenous person.
A8a.	INDIGENOUS IDENTITY — Inuit	New	To document self-identification as an Inuit Indigenous person.
A12.	LOCATION OF ASSESSMENT	Similar	To identify the setting in which the interRAI CA assessment will be completed. Response set has been modified.

Section B. Intake and Initial History

Item		What's different	Item description
B2a. to B2e. REFERRAL DETAILS		Similar	To identify whether treatments have been ordered, and to determine whether the referral indicates a request to initiate or continue rehabilitation or palliative services. Time frames in the response set have been modified.
В4.	EXPECTED RESIDENTIAL/ LIVING STATUS DURING SERVICE PROVISION	Similar	To document the type of residence the person is expected to be living in when receiving services from the home care agency (whether or not it is different from normal residence). Response set has been modified.



Section C. Preliminary Screener

Item		What's different	Item description
C1.	COGNITIVE SKILLS FOR DAILY DECISION MAKING	Similar	To record the person's actual performance in making everyday decisions about the tasks or activities of daily living. Expanded response set.
C2a. to	o C2e. ADL SELF-PERFORMANCE	Similar	To provide a brief screen of the person's functioning related to everyday activities during the last 24 hours. Expanded response set.
C2b.	ADL SELF-PERFORMANCE — Bath Transfer	New	How the person transfers in and out of bath or shower.
C5a	SELF-REPORTED MOOD: Little interest or pleasure in things you normally enjoy?	New	Verbal reports of the person's subjective evaluation of mood state (over the last 3 days).
C5b.	SELF-REPORTED MOOD: Anxious, restless or uneasy?	New	Verbal reports of the person's subjective evaluation of mood state (over the last 3 days).
C5c.	SELF-REPORTED MOOD: Sad, depressed or hopeless?	New	Verbal reports of the person's subjective evaluation of mood state (over the last 3 days).

Section D. Clinical Evaluation

Item		What's different	Item description
D3a. to D3f. IADL CAPACITY		Similar	Instrumental activities of daily living (IADLs) are higher-level activities that are required for independent living in the community.
			Expanded response set.
D3e.	IADL CAPACITY — Shopping	New	How the person performs in-store shopping for food and household items (e.g., selecting items, paying money).
D3f.	IADL CAPACITY — Transportation	New	How the person travels by paid transportation (e.g., navigating bus system, paying taxi fare) or drives themselves (including getting out of house, into and out of vehicles).
D5.	DISEASE DIAGNOSES D5a. Alzheimer's disease D5b. Dementia other than Alzheimer's disease D5c. Stroke D5d. Coronary heart disease D5e. Chronic obstructive pulmonary disease D5f. Congestive heart failure D5g. Cancer D5h. Diabetes	New	To document the presence of diseases or infections relevant to the person's current ADL status, cognitive status, mood or behaviour status, medical treatments, monitoring or risk of death.



Item	What's different	Item description
D6a. FALLS — Last 30 days	New	Captures the number of falls in the last 30 days.
D6b. FALLS — 31–90 days	New	Captures the number of falls between 31 and 90 days ago.
D6c. FALLS — 91–180 days	New	Captures the number of falls between 91 and 180 days ago.
D7d. PROBLEM FREQUENCY — Vomiting	New	Regurgitation of stomach contents, regardless of etiology.
D14a. to D14e. TREATMENTS	Similar	To document treatments that the person received in the last 3 days or is scheduled to receive. Expanded response set.
D14d. TREATMENTS — Ventilator or respirator	New	Mechanical device designed to provide adequate ventilation in persons who are, or may become, unable to support their own respiration.
D17. SURGERY IN LAST 90 DAYS	Similar	To determine whether the person had surgery. Includes any type of surgery done on an inpatient or outpatient basis within the last 90 days.
D20. DEGREE OF LONELINESS	New	Expanded response set. The person states or otherwise indicates that they feel length.
D21. FINANCES	New	The person states or otherwise indicates that they feel lonely. Because of insufficient funds during the last 30 days, the person made trade-offs among purchasing any of the following: adequate food, shelter, clothing, prescribed medications, sufficient home heat or cooling, and necessary health care.

Section E. Summary

Item	What's different	Item description
E2. EXPECTED LENGTH OF SERVICE	Similar	The length of time the person is expected to be on service. Expanded response set.
E3. ASSESSMENT URGENCY	Similar	The assessor's professional estimate of how urgently a comprehensive, in-home assessment is required. Modified response set.
E4a. to E4i. URGENCY OF NEEDED SERVICES	Similar	The assessor's estimate of how urgently services (e.g., nursing, physiotherapy, social work, dietetics, occupational therapy, homemaking) need to be initiated. Modified response set.
E5. CLIENT GROUP	Similar	To document the assessor's determination of the person's client group, based on health status and service goals. Modified response set.
E6. PRIMARY MODE OF ASSESSMENT	New	To document the mode of assessment used to complete the Contact Assessment.
E7a. to E7h. SOURCES OF INFORMATION USED TO COMPLETE THE INTERRAL CA	Similar	To document the sources of information used during the completion of the interRAI CA. Modified response set.



interRAI CA: What's removed

HCRS	-CA item	What's different	Item description
A5a.	PROVINCE OR TERRITORY OF USUAL LIVING ARRANGEMENT	Removed item	To record the province or territory and postal code of the person's usual living arrangement.
A10b	FACILITY NUMBER	Removed item	To record the health facility in which the assessment takes place, if the assessment takes place in a hospital, emergency department or residential care facility.
A10c.	ASSESSMENT MODULE	Removed item	To document the assessment module that will be completed: 1. Community or Hospital Intake 2. Emergency Department Screen
B2ad.	TREATMENTS ORDERED TO BE INITIATED — Oxygen therapy	Removed item	Includes continuous or intermittent oxygen via mask, cannula, etc. Includes home oxygen.
D3.	SELF-REPORTED MOOD	Removed item	To record the person's self-reported mood over the last 3 days.
D7.	FALLS	Removed item	To determine whether the person has a history of falling, which is an important factor in assessing the person's risk of future falls or injuries.
E2.	Home Care Services Required for This Person	Removed item	To document the assessor's decision about the need for home care services.
E4.	REQUIRES SHORT-TERM SERVICES	Removed item	To document the person's need for short-term services.
E6g.	URGENCY OF NEEDED SERVICES — Placement services	Removed item	Placement services determine eligibility for admission to long-term care facilities or short-stay beds (e.g., respite), facilitate appropriate placement and support the person and their family with the admission process.
E8a. t	o E8c. TYPE OF COMMUNICATION TAKE	Removed items	To document the type(s) of communication used to complete the Community or Hospital Intake Contact Assessment.
E9.	SOURCES OF INFORMATION USED TO COMPLETE THE INTERRAI CA	Removed items	To document the sources of information used during the completion of the interRAI CA.
	g. Staff at physician's officeh. Other home care program —e.g., a different jurisdiction		
	i. Community support agency (specify)j. Hospital		

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