RESIDENT ASSESSMENT INSTRUMENT (RAI): AN OVERVIEW

By federal law, all nursing home residents are to have an interdisciplinary, individualized assessment upon admission to the nursing home, and at a minimum, re-assessed quarterly or if there is a significant change. This assessment is referred to as the **Resident Assessment Instrument [RAI]** and consists of three components:

1) Minimum Data Set (MDS)
2) Care Area Assessment Process, and
3) RAI Utilization Guidelines

The three components of the RAI can be found in the RAI manual. This link provides access:

https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAIManual.html

The utilization of the three components of the RAI provides information about a resident's functional status, strengths, weaknesses, and preferences, as well as offering guidance on further assessments once problems have been identified.

The MDS has 450 items (certainly not minimum!). The MDS addresses clinical and functional aspects of the resident such as physical functioning, cognition, sensory, oral health, nutrition, skin, elimination, mobility, clinical conditions or diseases, etc. The MDS only indicates *if* the resident has a problem/issue- it does not determine the cause of the problem. Therefore, there are **Care Area Assessment** resources that are available to help nurses do further assessments specific to the identified problem (e.g. delirium, dehydration). The RAI process drives the care plan that is developed for the resident.

The MDS is an excellent teaching tool to use with students in the nursing home setting.

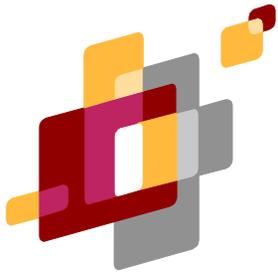Review the *Quick and Easy **Using the RAI as a Teaching Tool in Nursing Homes.***

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USING THE RESIDENT ASSESSMENT INSTRUMENT (RAI) AS A TEACHING TOOL IN NURSING HOMES

Learning Objectives:

Using knowledge about the RAI as a valuable teaching/learning tool the students will be able to:

1. Learn about evidence-based clinical, functional, cognitive and psychosocial assessments for nursing home residents.
2. Apply assessment findings to address clinical, functional, cognitive and psychosocial needs of nursing home residents.

Student Preparation:

1. Review the Minimum Data Set (MDS) and at least one Care Assessment Area.
2. Read the first chapter of the RAI Training Manual.
   The RAI manual, which includes the MDS and the care assessment area can be found at this link:
   https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAIManual.html

Student Activities:

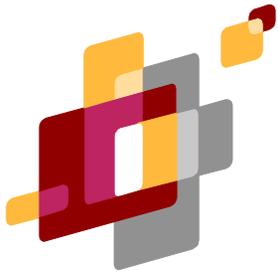**(see next page for a variety of learning activities)**

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Student Activities:

1. Assess and differentiate dementia, delirium and depression
   a. Assign each student to conduct an assessment of one resident using the following assessment tools from the MDS 3.0: *Brief Interview for Mental Status (BIMS)* [dementia]; *Confusion Assessment Method (CAM)* [delirium], and *Patient Health Questionnaire (PHQ-9)* (depression).
   b. Have the students present their findings to each other and discuss the prevalence of the three conditions in the group of residents they assessed, as well as the prevalence of a resident having one or more of the conditions.
   c. Engage in a discussion about how the three conditions are differentiated by assessment and presentation.
2. Assess Functional Status
   a. Have students complete the items in section G on the MDS 3.0 (functional status).
   b. Using their findings, have them provide directions to a nursing assistant about how to meet the resident's needs for transferring, bathing, eating, toileting, mobility, and personal hygiene.
3. Fall Risk
   a. Have the students identify all the items on the MDS 3.0 that would be relevant to identifying a resident at risk for a fall.
   b. Then have them review the Care Assessment Area for **falls** to determine if they identified all the relevant items.
   c. Have each student review the MDS 3.0 for their resident to determine if risk for falls is identified.
   d. Finally have them evaluate if the care plan adequately addresses the resident's risk for falls.
4. Preferences and Choices
   a. Have each student review MDS Section F (Preferences for Customary Routines and Activities) for one resident.
   b. Based on the preferences that were noted by the resident to be important, have the student determine to what extent those preferences are attended to for the resident.

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