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THEME: Realizing Benefits Beyond Institutions

Applying Computer Generated Outcomes to Support Clinical Judgement in Assisted Living

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Abstract

In British Columbia the interRAI home care assessment instrument (RAI-HC) is used for case managed clients in Home and Community Care, including Assisted Living. Although case managers (CMs) are using the RAI-HC for assessments, they do not rely on the computer generated RAI-HC outcomes scores to support clinical decision-making for eligibility for Assisted Living (AL). Instead, they rely on decisional aids based on experience and consensus rather than ones empirically driven, which in turn raises concern about their reliability and validity as well as being time consuming. This study explored the feasibility of using outcome scores as a decision support tool for Assisted Living.

The operational definitions from the AL legislation identify the variables that would best determine who would be suitable candidates and these were matched to the outcome measures allowing a decision support tool to be developed. Case managers used the decision tool over a trial period when assessing potential AL clients. Participating CMs attended a focus group to explore perceptions regarding the appropriateness of the tool for clinical decision-making. The draft decision support tool was well accepted by CMs who felt the tool was appropriate for the AL population. The presentation will explore these and other findings regarding the clinical relevancy of the RAI-HC as a decision support tool for AL clients, as well as the framework for matching outcome measures to support other clinical decisions.

ABOUT THE AUTHOR

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Mary is the Regional Clinical Leader for Home and Community Care in Northern Health. Part of her responsibility is to promote the "full-fledged" use of the RAI-HC and the RAI-MDS 2.0 instruments into clinical practice. Her belief is that the RAI instruments must be clinically relevant to the front line clinician. Mary was the interRAI Clinical Coordinator for the RAI-MDS 2.0 implementation in Northern Health. Mary is the current chair of the B.C. Provincial RAI Clinical Working Group.