



Office of the Information
and Privacy Commissioner

410, 9925 – 109 Street
Edmonton, Alberta
Canada, T5K 2J8
Tel: (780) 422-6860
Toll Free within Alberta: 310-0000
Fax: (780) 422-5682
Web: www.oipc.ab.ca
Email: generalinfo@oipc.ab.ca

Privacy Impact Assessment (PIA) Summary

Public Body or Custodian: Shepherd's Care Foundation

Project Title: Implementation of RAI MDS 2.0 (RAI MDS 2.0) Continuing Care information System Project

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OIPC TRAX File: H3455

Project Summary:

InterRAI MDS Privacy Impact Assessment

The Continuing Care Systems Project (CCSP) is a province-wide initiative to implement a standardized approach to the assessment, care planning, and reporting in the continuing care sector. It was recognized that an integrated system is required to support facility-based and community-based services and to provide effective and efficient use of continuing care resources. Alberta Health and Wellness mandated implementation of the InterRAI MDS 2.0 in all continuing care centres in Alberta.

RAI 2.0 (Resident Assessment Instrument) provides a comprehensive interdisciplinary tool for assessing and evaluating the needs, strengths, and preferences of continuing care residents. RAI includes:

- minimum data set (MDS) – a set of questions and observations designed to gather the minimum amount of information regarding each resident's cognitive, behavior, functional, and medical status, necessary for a comprehensive resident assessment
- resident assessment protocols (RAPS) – structured, problem-oriented frameworks for organizing information and examining additional clinically relevant information about a resident. RAPS are produced from groups of items within the MDS to support the care team in developing individualized clinical care plans for residents

- quality indicators (QIs)
- outcome measurement scales – status of the client/resident as measured by standardized scales built into the MDS
- resource utilization groups (RUGS) - a classification system that groups residents based on their clinical condition, extent of service required, and functional status; can be used to support a case-mix funding system and replaces the Alberta Resident Classification System (ARCS).

CCSP provides the following benefits:

- Improved, standardized, assessment and care planning to support more consistent matching of client/resident needs with resources.
- Timely, comprehensive information available to support quality improvement and client/resident safety initiatives.
- Replacement of the ARCS with a methodology that is more responsive to clinical needs and resources, and is built into day-to-day assessment and care planning.
- Accurate, timely, comparative data to assist with continuing care policy development, program planning and evaluation (regional and provincial).
- Improved use of acute care and continuing care resources.
- Facilitation of a more integrated health delivery system.

For additional information on this project contact:

Ms. Paula Hall, Acting Chief Operating Officer

Phone: 403 770-3246