

Minutes

interRAI Governance Board

Date:	Wednesday 17 April 2019		
Start Time:	10.00 am	Finish Time:	2.00 pm
Method:	Face to Face, Thorndon Room, Front+Centre, 69 Tory Street		

Members: **Catherine Cooney** (Chair) Director of Kowhai Health Associates Limited, **Chris Fleming** (Deputy Chair) CEO Southern DHB – Funder Representative, **Roy Reid** – Treasurer, Chair Age Care Committee, Grey Power – Consumer Representative, **Prof Matthew Parsons** – Professor Medical and Health Services, University of Auckland, Chair Gerontology Nursing, Waikato DHB – Research Representative, **Max Robins** – CEO CHT and Deputy Chair NZACA – ARC Provider Representative, **David Chrisp** – General Manager Access Home Health Ltd – Home Care Representative, **Janice Mueller** – Director, Waipiata Consulting Limited - Health Professional Representative, **Carolyn Cooper** – Director Clinical Operations & Service Improvement & Lead Nurse, Bupa NZ - Nurse Leader Representative, **Dr Michelle Honey** – Senior Lecturer, University of Auckland - Health Informatics Representative, **Stephanie Clare** – Chief Executive Officer, Age Concern NZ - Consumer Representative, **Dr Helen Kenealy** – Geriatric SMO, Counties Manukau Health – Clinician Representative, **Karen Evison** – Director Strategy Planning and Funding, Lakes DHB – Funder Representative, **Dr Nigel Millar** – Chief Medical Officer & Geriatrician Southern DHB – Clinician and interRAI Fellow Representative

By Zoom: Dr Nigel Millar

In Attendance: **Michele McCreddie** – General Manager interRAI Services, TAS, **Terry Huntley** – Software Services Manager (TAS), Margaret Milne Team Leader (TAS) **Karina Kwai** – Manager, Health of Older People, Health System Improvement and Innovation, Ministry of Health, **Dr Phil Wood** – Chief Advisor, Healthy Ageing, Ministry of Health, **Shelley Gilmour** – Secretariat, TAS.

Apologies: Dr Brigette Meehan, Karen Evison

Welcome & Apologies	
The Chair opened the meeting at 9.55 am.	
01	Minutes and Action Register

1.2 Declaration of Interest Register

The Register was noted.

1.3 Confirmation of Minutes

The minutes of the meeting held 19 February 2019 were **confirmed** as a true and correct record.

Moved: J. Mueller
Seconded: R. Reid
CARRIED

1.4 Action Register

- | | |
|----------|---|
| 14-06/18 | MoH to provide an update on interRAI data into IDI at the next Board meeting.
In Progress |
| 02-08/18 | Develop a discussion paper on uses of the Palliative Care assessment in Aged Residential Care. Closed |
| 06-10/18 | Board members to consider topics for discussion for a potential visit to New Zealand by the interRAI Fellows. Open |
| 04-11/18 | TAS to investigate providing a Case mix technical data analysis. Open |
| 01-02/19 | A demonstration of the Self-Assessment Check Up tool is to be arranged with Momentum and shared with the Board. In Progress. |
| 02-02/19 | A meeting with Karen Evison and Stephanie Clare is to be arranged to progress the testing of the tool. Open. |
| 03-02/19 | 30 minutes is to be allocated at the Board meeting in April 2019 to discuss the software review and 2-1 project interdependencies. Closed. |
| 04-02/19 | A list of software enhancements that were considered and prioritised is to be presented to the Board. Closed |
| 05-02/19 | The wording in the assessment and the data access protocol is to be checked in relation to commercial use. Closed |
| 06-02/19 | A link to the on-line education training package is to be sent to the Board. Closed. |

1.4a Update on Canterbury DHB Pilot of interRAI AC (9.3).

Michele McCreddie provided an update on the Canterbury DHB pilot of interRAI AC (9.3) noting that there has not been a great deal of movement since the last Board meeting. A meeting for healthcare professionals was held in Canterbury on 11 March 2019. The meeting provided detailed information on interRAI and the acute tools as an introductory session. Sue Wood has asked about the software license and the process for license approval if the current license was to be used beyond research purposes. Sue was advised that this would need to come back to the interRAI NZ Governance Board for approval. This project is deemed to be a research project and as such it is working with a research license only.

2.1 3 DHB Pilot AC-Rehab interRAI Tool

Michelle McCreddie provided an update and noted that there are now four District Health Boards (DHBs) wishing to pilot the Acute Care (AC) rehabilitation (rehab) tool – Canterbury DHB (CDHB), Southern DHB (SDHB), Waikato DHB (WDHB) and South Canterbury DHB (SCDHB) with Auckland DHB also expressing an interest. The original three DHBs have been creating their own proposals and will present one project plan to the interRAI NZ Governance Board in June 2019. They have formally written to the Accident Compensation Commission (ACC) advising that they are not proceeding with the Functional Independence Measure (FIM) or Australasian Rehabilitation Outcomes (AROC) and ACC are comfortable with that. If used, this could result in a double assessment process.

An update of where each DHB is at in the process was provided:

- WDHB Progressing internal proposal for funding.
- SDHB Focus is on gaining buy-in from clinicians.
- CDHB In discussion on which software to use.
- SCDHB Wishing to join the pilot.

A general discussion ensued regarding the use of Health Round Table instead of AROC with a suggestion to engage with Martin Chadwick, Chief Allied Health Professions Officer, Ministry of Health (MoH) on matters of governance and Allied Health data.

At 10.13 am Andrew Upton (MoH) joined the meeting.

1.4b Update on the next steps regarding the use of the Palliative Care Tool in Aged Residential Care.

Presentations have been made to the Chief Nurses Office, Rhonda Sheriff; Clinical Advisor, New Zealand Aged Care Association (NZACA), Jenny Herring; Care Association New Zealand (CANZ) and the CANZ Executive Group of around 20 people. All have been positive, and the main issue is regarding provision of decision support guidance about when to use the Palliative Care tool rather than the Long-Term Care Facility tool.

1.4c Update on the next Step Regarding the Inclusion of Tenure Items.

The questions have been written and these will be tested with interRAI educators in the first week of May. Brigitte Meehan will be present at an International interRAI meeting in June 2019 and if the testing goes well, she will discuss this at the meeting. The last step in the process will be to test with the older people end users.

1.5 Correspondence – Nil

1.6 Matters Arising- Nil

Keriana Brooking, Deputy Director-General, Health System Improvement and Innovation

At 10.24 am Keriana Brooking joined the meeting.

A round of introductions followed.

At 10.26 am Dr Nigel Millar joined the meeting by zoom.

Keriana Brooking provided an update on the Government's agenda on health.

- There are three broad service areas and two broad system focus areas.
- The three broad service focus areas are Primary and Prevention, Child Well-Being and Mental Health and Addiction (MH&A).
- The two system focus areas are on equity and a strong public health focus.
- Models of care are being examined – What do they look like for the future?
- What business model supports this? Public or private providers.
- What are the enablers? Digital opportunities are one of these.
- Equity is a complex issue. Age, ethnicity and locality and for some, a combination of all three. Some areas of the population do not get the same access and there are issues of unconscious bias and institutional racism.
- Need to consider what equity looks like in the Aged Residential Care (ARC) sector.
- Consider where interRAI could move strategically, there is a potential to be used for Child and Youth services and MH&A.
- The Health System and Disability review will put forward recommendations which may or may not impact on interRAI.
- Consideration for the consumer experience is being looked at particularly around the indigenous population.

A question and answer session ensued.

Dr Nigel Millar raised several points:

- New Zealand has one of the best reputations for implementation and use of interRAI across the world.
- There is a need to improve the supporting Information Technology (IT).
- There is a need for information about older people and to make use of the opportunity the

interRAI dataset represents.

- The current interRAI model could be easily shared with MH&A. In Toronto an interRAI Mental Health screening assessment is used by the Police to make initial triage decisions.

Max Robins commented that slowness of interoperability development has resulted in multiple tools being run in parallel. interRAI is a good example of private/public partnership and shows the speed at which some organisations made decisions.

Matthew Parsons commented that older people do not want multiple assessments and noted the ACC Home Care work that is being done for the over 65s and well as the developments with ACC. to have interRAI used for those people under 65 who require assessment.

Keriana Brooking offered to come back to the interRAI NZ Governance Board after the release of the initial Health System and Disability Review report to further the discussion.

Action items	Person Responsible
01-04/19 Keriana Brooking is to be invited to a future meeting to provide a further update after the release of the Health System and Disability review.	Secretariat

At 11.02 am Keriana Brooking left the meeting.

2.0 Governance

2.3 interRAI Future Direction Update End Q3 2018-19

Dr Phil Wood noted the potential to pick tools out of the interRAI toolbox and seeing if they can be used when considering the right mix of tools to meet service user need.

Chris Fleming requested that Iwi are engaged before the refreshed Māori strategy is finalised.

Michele McCreadie commented that there is a requirement to reframe the strategy with an equity lens.

After discussion it was agreed that the interRAI NZ Governance Board should consider development of a new strategy/Future Direction framework to be developed once the Health System and Disability Review report is released.

The interRAI NZ Governance Board:

1. **Noted** the progress with the implementation of interRAI NZ – Future Direction 2018-2021 as at the end of Q3 2018-19.

3.0 Update from interRAI International

Michele McCreadie provided an update. Initial inquiries have been received from an interRAI Fellow in Brisbane around a conference in Brisbane that he would like to set up as an across Tasman conference. The interRAI NZ Governance Board will be updated if this eventuates.

The next interRAI International World conference is being held in Leuven, Belgium in February 2020. This is only the second ever world conference to be held with the previous one in Toronto in 2016. It was requested that if the Board had any abstracts or items that they wished to put forward to consider them now as the call for abstracts will be in May.

It was suggested that interoperability and the ACC story could be told.

A discussion ensued on the possibility of designing an under 65 tool. If this was to be considered, Brigitte Meehan would need to raise this at the Instrument Design Committee (ISD). This would establish if anyone else was doing any research on this kind of tool or precipitate the work to happen.

Dr Nigel Millar suggested that there may not need to be a requirement to develop a new tool but rather use what already exists.

It was suggested that the under 65's tool should be an agenda item for the next meeting to allow for further discussion.

6.0 Data Analysis and Reporting

6.1 ARC Funding Review

Chris Fleming advised that the ARC Funding Review report had been received by Keriana Brooking and himself as co-sponsors. Feedback has been provided to the Ministry of Health. A brief overview of the report was provided.

2.0 Governance (Continued)

At 11.38 Kit Hoeben, ACC, joined the meeting

2.4 Use of the Contact Assessment for all ACC Funder Home Care Clients

Kit Hoeben presented to the meeting and advised that he is seeking approval from the interRAI NZ Governance Board to go to the next phase. ACC want to develop interRAI as the solution for Integrated Home and Community Support Services (IHCS). One of the key features required to deliver the new model of care is a sound assessment framework. The IHCS casemix model, developed in partnership with the University of Auckland, is not intended to be a stand-alone tool, moreover it should exist as an algorithm within a sound comprehensive needs assessment tool, like interRAI.

Chris Fleming noted the Conflict of Interest for Matthew Parsons on this topic. It was suggested that he could remain in the room for the discussion but will refrain from voting on the recommendations.

Work has already been undertaken to explore the possibility of embedding the ACC specific algorithm questions as well as additional ACC specific items within the interRAI system. The Contact Assessment (CA) and Community Health Assessment (CHA) have been identified as possible assessments. However, both the CA and CHA will require amendments to be made to the assessment.

Chris Fleming observed that there were no District Health Board (DHB) representatives on the Steering Group.

Matthew Parsons suggested that Lisa Gestro (Southern DHB) or Mardi Postill (Canterbury DHB) could be involved.

Michele McCreddie advised that there is a need to get the requirements for the software before costs can be estimated.

The interdependencies with the MoH interRAI software review were noted.

Terry Huntly noted that ACC can only use the current software if the provider changes then more work will be needed.

Andrew Upton noted that a change of software providers is a high risk to ACC

The interRAI NZ Governance Board:

1. **Approved** ACC to proceed towards implementation of the Community Health Assessment and/or Contact Assessment with ACC specific additions to the software for ACC clients requiring home and community support services reaching agreement on:
 - a. The software requirements.
 - b. The training/education requirements.
 - c. A timeframe that is acceptable to the parties
 - d. The work not impacting on TAS' ability to meet MoH outcomes
 - e. An appointment of a DHB representative on the Steering Group-

Moved: R. Reid
Seconded: M. Honey
Carried

At 12.10 pm Kit Hoeben left the meeting which then broke for lunch.

4.0 Update from Ministry of Health

At 12.44 the meeting resumed, and Nigel Millar joined by Zoom.

4.1 interRAI Software Services Review Procurement Plan.

The paper was taken as read.

Karin Kwai called for questions and noted:

- The procurement approach is still in the planning phase.
- The Request for Information (RFI) review and summary panel is just a proposed panel and approach.

- The key theme is interoperability which was a big part of the considerations.
- Evaluation criteria and who will make up the evaluation panel is still being considered.
- Indicative timelines are not fixed.

Chris Fleming commented that he is supportive of the approach and noted that the Director-General of Health (DG) is the ultimate approver. The steering group will make recommendations to the interRAI NZ Governance Board. The Chair should endorse the decision for presentation to the DG.

A general discussion ensued.

The Chair summarised:

- There is general support for Option three.
- There is concern about the composition of the review panel.
- Work is still to be done on the evaluation criteria.
- There are process issues around the steps to be taken through to sign off once the evaluation group has done the criteria.
- MoH will come back with an update to the meeting in June.

Max Robins suggested that the interRAI NZ Governance Board should sign off on the requirements and the evaluation criteria.

The Chair noted discomfort around the make-up of the review panel and suggested that a statement around the process is preferable. Support for the procurement approach as outlined in Option Three was noted but the interRAI NZ Governance Board has several points requiring clarification including the timeline, evaluation, the panel compilation and the final decision-making process.

Michele McCreddie expressed concern over notings in the paper around the TAS software and hosting workplan and apprised the Board that because MoH requested TAS cease work on the proposed developments two enhancements that the Board had previously approved have not been progressed.

The Chair noted that the discussion around the enhancements will take place separately.

The interRAI NZ Governance Board:

1. **Endorsed** Option Three as described in the procurement plan.

Moved: C. Cooney
Seconded: M. Honey
Carried

MoH Update on interRAI data into the Integrated Data Infrastructure (IDI).

Phil Wood provided an update noting that the Department of Statistics wanted to look at the interRAI data as it could require work on their part. It has been established that this is not the case and requests are now being made around security and data transfer. Following this, technical questions will then be asked around the data dictionary. A Memorandum of Understanding will be populated to allow the transfer of data from MoH to Statistics.

Michele McCreddie confirmed that a privacy and security assessment has been done, and this is now with the MoH.

Action items	Person Responsible
02-04/19 MoH to provide an interRAI software review update at the interRAI Governance Board meeting 19 June 2019 which will include addressing the concerns raised regarding the timeline, evaluation, the panel compilation and the final-decision making process.	Karina Kwai

5.0 Operational Reports

5.1 interRAI NZ Risk Register

No further risks were added. A discussion ensued on risk nine 'Canterbury DHB are undertaking a pilot of a new interRAI tool outside of the interRAI software platform. This may lead to issues with interoperability with other tools and care planning software'. The Board agreed that CDHB should not be choosing their software but remain as part of the agreed platform.

Chris Fleming noted that it is time to write to CDHB formally about the Boards concerns.

The interRAI NZ Governance Board:

1. **Noted** the interRAI NZ Governance Board Risk Register as at April 2019.

5.2 Overview interRAI Services Financial Situation to end Q3 2018-19

Michele McCreddie provide an update on interRAI Services financial situation as at the end of March. Finances are on track and the underspend in personnel was explained as being due to the time taken to fill vacancies. Recruitment is underway for two interRAI educator vacancies.

The interRAI NZ Governance Board:

1. **Noted** the overview of the interRAI Services financial situation 2018-19 as at end Q3 2018-19.
2. **Noted** the explanation of financial variances and use of the revenue in advance funding for 2018-19.

5.3 interRAI Services Operational Report

There have been very positive media reports since the last meeting and some good stories because of the Singapore Delegation visit. A presentation was made at the Waitemata DHB Grand Round on 16 April 2019 and a similar presentation will be made at the Canterbury DHB Grand Round on 26 April 2019.

The interRAI NZ Governance Board:

1. **Noted** the interRAI Services Operational Report as at April 2019.

Action items	Person Responsible
03-04/19 A formal letter is to be sent to Canterbury DHB expressing the concerns of the Board around their piloting a tool outside of the interRAI software platform.	Michele McCreddie.

At 1.40 pm Chris Fleming and Nigel Miller left the meeting. Chris Flemings approval for his proxy vote was noted.

7.0 Communications

This was covered in the Operational Report.

8.0 General Business

8.1 Date of Board meeting 23 Oct – clash with NZACA Conference.

The planned interRAI NZ Governance Board meeting clashes with the NZACA conference. Following discussion, it was suggested to move the meeting date to 30 October 2019.

8.2 Customer Survey

Michele McCreddie advised that the annual customer survey is targeted and this year the focus is on home care providers. The Board noted their support to this focussed approach.

The interRAI NZ Governance Board:

1. **Noted** the planning for the interRAI Services 2019 Customer Survey.

Janice Mueller advised the Board on the work on Life Curve being done out of the Bay of Plenty (BOP) DHB. This is an assessment working with older adults on their support needs and this is a potential conflict with interRAI. BOP DHB have also been pushing this across other regions.

The Chair noted that this needs to be added to the Risk Register.

At 1.49 pm Matthew Parsons left the meeting and provided approval for his proxy vote.

Janice Mueller advised that Dr Sarah Mitchell, Executive Director for Allied Health Scientific and Technical at BoP DHB has been leading the programme. It was recommended that Dr Mitchell should be invited to the next interRAI meeting to discuss Life Curve.

A general discussion ensued particularly around the issue of potential duplicate assessments and the work that Dr Mitchell had been doing in Scotland.

Michele McCreddie offered to contact Dr Mitchell to gain an understanding of the work programme.

Action items	Person Responsible
04-04/19 Date of the October 2019 Board meeting is to be moved to 30 October 2019 to avoid the clash with the NZACA Conference	Secretariat
05-04/19 A conversation is required with Dr Mitchell to gain an understanding of the Life Curve work programme.	Michele McCreddie

Meeting Closed: 1.52 pm

Next meeting: 19 June 2019, Front + Centre, 69 Tory Street, Wellington