Minutes
interRAI Governance Board

Date: Wednesday 11 April 2018
Start Time: 9.30am Finish Time: 2.00pm
Method: Face to Face, Thorndon Room, Front+Centre, 69 Tory Street

Members: Catherine Cooney (Chair) Director of Kowhai Health Associates Limited, Roy Reid – Treasurer, Chair Age Care Committee, Grey Power – Consumer 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

In Attendance: Michele McCreadie – General Manager interRAI Services, TAS, Dr Brigette Meehan – Manager interRAI National Services, TAS, Terry Huntley – interRAI Software Services Manager, TAS, Uli Trute, interRAI Senior Communications and Engagement Advisor, Warwick Long – Quality Monitoring and Performance Advisor, TAS, Bob McNeill – Contractor – TAS, Karina Kwai – Manager, Health of Older People, National Services Purchasing, Ministry of Health, Dr Phil Wood – Chief Advisor, Healthy Ageing, Ministry of Health, Shelley Gilmour – Secretariat, TAS.

Apologies: Chris Fleming (Deputy Chair) CEO Southern DHB – Funder Representative, Matthew Parsons – Professor Medical and Health Sciences, University of Auckland, Chair Gerontology Nursing, Waikato DHB – Research Representative, Max Robins – CEO CHT and Deputy Chair NZACA – ARC Provider Representative,

Welcome & Introduction of new Board members

The Chair opened the meeting at 9.33 am. Apologies were received from Matthew Parsons, Chris Fleming and Max Robins who will join the meeting at 12.00 midday. Apologies for lateness from Dr Helen Kenealy, Dr Michelle Honey and Janice Mueller (due flight delay).

Introductions were made around the table.

The Chair noted the following Conflicts of Interest:
Item 2.3 interRAI Fellows and the interRAI Governance Board
Dr Meehan and Dr Millar advised that they would leave the meeting for the duration of the discussion.

Item 5.1 ARC Funding Review – update;
Chris Fleming and Max Robbins
The Chair advised that a report authored by the New Zealand Aged Care Association (NZACA) titled Caring For Our Older Kiwis 2018 would be tabled at the meeting and discussion would be held upon the arrival of Chris Fleming and Max Robins. The Chair noted the strict embargo provisions until 6.00 pm 11 April 2018 (the time of the Report launch). Conflicts of interest were noted for Max Robins, Roy Reid and Carolyn Cooper in relation to this document.

9.39 am Uli Trute joined the meeting

01 Minutes and Action Register

1.2 Declaration of Interest Register
The Interest Register still requires updating for new Board members. The secretariat will update this following the meeting.

1.3 Confirmation of Minutes
The minutes of the meeting held 8 February 2018 were confirmed as a true and correct record.

Moved: C Cooney
Seconded: D. Chrisp
CARRIED

3.3 Action Register

02-04/17 ACC and partner DHB Pilot. Verbal update on agenda at item 1.6. Open

01-06/17 Canterbury DHB Proposal to pilot AC 9.3. Verbal update on agenda at item 1.6. Open

05-06/17 interRAI NZ Further Direction. Karina Kwai to provide additional wording and undertook to contact Michele McCreadie to progress. Closed

01-10/17 Joint Communications with Nursing Profession. Michele McCreadie to contact newly appointed Nurse Leader Representative (Carolyn Cooper) to discuss. Open

04-10/17 Requests to add additional questions into interRAI Home Care Assessment. The development of criteria/principles to respond to requests for additional assessment questions will be presented at the April 2018 meeting. Open

10-10/17 Board members only section to be developed on the website to contain relevant Board material. On the agenda at item 2.1. Open

01-12/17 Engagement with DHBs. On the agenda at item 1.6. Open

02-12/17 Digital Health Strategy to be circulated to Board members. Closed

03-12/17 Contact details to Ministry. Closed
04-12/17  interRAI Palliative Care Assessment in Aged Residential Care draft response to DM of WesleyCare, Christchurch. **Closed**

05-12/17  interRAI Quality Indicators update. On agenda at item 4.1. **Open**

06-12/17  Mental Health Assessment Tool. Facilitate a meeting between MoH and Mental Health team and clinicians to discuss interRAI development in Canada. **Closed**

07-12/17  Subscription to Informer. **Closed**

08-12/17  Informatics Strategy. On the agenda at item 3.1. **Open**

29-01/18 interRAI Fellows Policy – board attendance. Draft policy to be developed for discussion at the next meeting. **Open**

01-02/18 Induction – new Board members offered opportunity for further induction material/information. **Closed**

02-02/18 Management to explore potential for Connex as a mechanism for online Board material. **Closed**

03-02/18 Seek feedback on draft presented to February meeting from Dr Nigel Millar, new Board Members and Neil Gyde, MoH. **Closed**

04-02/18 Circulate link to the independent project review report relating to the introduction of interRAI in ARC to new Board members. **Closed**

05-02/18 MoH to provide critical dates of contract renewal process to inform Board strategy decisions. **Open**

06-02/18 interRAI Quality Indicators- OIA – seek advice from Health legal to determine levels of confidentiality (particularly group and facility level). **Closed**

07-02/18 Risk Register – Amendments to be made following discussion at February meeting. **Closed**

### Action items

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<tr>
<th>Action items</th>
<th>Person Responsible</th>
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<tr>
<td><strong>01-04/18 Joint Communications with Nursing Profession</strong></td>
<td>Michele McCreadie</td>
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<tr>
<td>Prior to the June interRAI Governance Board meeting, a telco is to be arranged between Michele McCreadie, Carolyn Cooper, Cathy Cooney and a representative from the Chief Nurses Office to discuss opportunities for the development of joint communications with the nursing profession.</td>
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9.47 am Roy Reid joined the meeting.

1.5 **Correspondence**

Nil
### 1.6 Matters arising

ACC and partner DHB pilot of Post-Acute Care and Rehabilitation Assessment Tool

Michele McCreadie advised that the Accident Compensation Commission (ACC) presented to the DHB General Managers Planning & Funding (GM P&F) in March 2018 and advised they are looking to introduce interRAI as the primary assessment tool in their non-acute rehabilitation (NAR) pathway. interRAI had also been considered where homecare and support services are funded by ACC. GMs P&F requested ACC to develop a business case for presentation at a future meeting. DHBs were asked to nominate three DHBs who may be interested in piloting the post-acute rehabilitation tool for the NAR pathway. The ACC business case will be presented to the interRAI board upon completion.

Canterbury DHB Pilot of interRAI Acute Care

Michele McCreadie advised this is a Canterbury DHB initiative to introduce interRAI into acute care. A steering group has been set up and interRAI are engaged. Work has started on introducing interRAI AC(9.3) into Patient Track which is the system CDHB use for vital signs recording, however, there are some difficulties in getting the software to be compatible. interRAI Services are assisting where possible but the primary responsibility sits with CDHB. interRAI Services are also working with CDHB on their education and support programme. This will also provide useful learning as it could have benefits to other parts of interRAI education and support.

Dr Meehan noted that interRAI are gaining experience in developing on-line education products which have clear benefits for users.

### 2.0 Governance

#### 2.1 Update on Board virtual collaboration and discussion space

The paper informed the interRAI New Zealand Governance Board about progress with the planned virtual collaboration space on Connex.

Uli Trute confirmed that $1400.00 is the total price for the Connex training and not a per person cost.

Michele McCreadie noted that this moves the board into an electronic space assisting with storage and archiving.

Karen Evison noted that it would be useful to allow Executive Assistants access to Connex in order to access the papers.

The interRAI NZ Governance Board:

1. **Noted** the progress made with the virtual collaboration space.
2. **Accepts** that this is a good solution to a request that was made by the Board.
3. **Agreed** to bring their devices to the next meeting for application installation and training.

Moved: C Cooney  
Seconded: R Reid  
CARRIED
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<td>02-04/18</td>
<td>Connex training to be provided to Board members at the next meeting.</td>
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<td>03-04/18</td>
<td>Board papers to be emailed and uploaded to Connex for the June board meeting.</td>
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10.04 am Uli Trute departed the meeting.

10.04 Warwick Long joined the meeting.

2.2 Governance Process for adding questions to interRAI assessments
The purpose of the paper was to seek Board approval to the governance framework for adding an item to an interRAI assessment in New Zealand.

Michele McCreadie outlined the background to the paper. Currently no process exists for vetting requests for additional items to be added or for existing items to be modified.

10.07 am Janice Mueller joined the meeting.

The Chair commented that the logic in the paper was clear and it was useful to apply the framework already approved for new tools.

Dr Meehan confirmed that she was a member of the international Instrument and Systems Development Committee (ISD) and provided an outline of the work that the committee carries out which ensures that assessments are continually refined and that research is robust. It was noted that requests for new questions to be added to the tool arise frequently.

Dr Millar confirmed that requests for questions to be removed are received more frequently than requests to add.

The Board discussed issues of redundancy of information and the methodology behind the proposals to add and remove questions.

Dr Meehan advised that many questions fall short of the criteria for requests for additional items as the information is readily available elsewhere.

Michele McCreadie advised that interRAI would assist requestors with their business cases however they would not complete them on their behalf.

The Board held a general discussion on the process to be used if people want additional questions added to an interRAI assessment.

10.25 Dr Helen Kenealy joined the meeting.
Dr Michelle Honey joined the meeting.

Karina Kwai suggested that a review date should be built into the process.

The Chair noted that rather than affix a date, the review should be built into Governance Board meetings as the first trial goes through. No time frame for this is known at this point in time. An update at each Board meeting should be provided.

The interRAI Governance Board:

1. **Approved** the attached governance framework for adding an item to an interRAI assessment in New Zealand.

2. **Noted** that once approved the governance framework will be published on the interRAI NZ website.

    Moved: K Evison  
    Seconded: D Chrisp  
    CARRIED

Roy Reid spoke to the ‘Life when Renting’ issue noting its importance particularly given that the number of people aged between 50 and 65 who do not own a home is higher than it was a few years ago.

Dr Millar noted that it was an important question and understood why people wanted it included in the assessment tool but questioned whether it assisted with planning the care of the person. Caution should be taken about acting as a data collection agency as the data doesn’t exist elsewhere. Dr Millar stated that this was not the best use of an assessor’s time however if this does make a material difference to a client’s quality of care then it is important to know.

General discussion was held to discuss the merits of the collection of the data particularly given that this is clearly a national problem due to New Zealand’s specific laws around tenure and the complexity of questions that this presents.

Janice Mueller noted that this could be particularly useful to gain funding and support for home modifications.

Dr Meehan stated that it was worth noting that at previous ISD meetings where approval of the item is given as a country specific item, then the New Zealand form would include the item but there is no mandatory requirement on any other country to include it.

The Chair stated that depending on Board support, approval is given that the Governance framework can be used by the Life when Renting team to work through the process and to consider what information is required.

The interRAI Board:

1. **Noted** the initiation phase by the ‘Life when Renting’ team.
2. **Agreed** that the ‘Life when Renting’ team are provided with the approved governance framework and assisted to work through the process.

   Moved: K Evison  
   Seconded: Dr Millar  
   CARRIED

### 2.3 interRAI Fellows and the interRAI Governance Board

Dr Millar provided the Board with the background to the relationship between the interRAI Fellows and the interRAI Governance Board. In particular the successful connection with the international interRAI community and the investment in ideas for aged care.

Dr Meehan noted that interRAI is a dynamic assessment system with global research continually modifying and shaping the tools. The connection to the international interRAI community is valuable to all members. It is also not uncommon to share New Zealand experiences internationally.

**10.45 am Dr Millar and Dr Meehan left the meeting.**

The Chair noted the background to the reshape of the interRAI Governance Board noting that when the new Board was reconstituted there was no longer an interRAI Fellows on the Governance Board. This resulted in non-compliance with the Board Terms of Reference (TOR).

Michele McCreadie noted that although Dr Hamish Jamieson is listed as an interRAI Associate Fellow due to personal and professional conflicts he has been unable to attend any of the international meetings and is therefore not an Associate Fellow at this time.

The Chair clarified that Dr Millar is attending today’s meeting as an interRAI Fellow and not an interRAI Governance Board member and that this is currently a transition period while the Board considers a sustainable long term process.

Janice Mueller noted that if it was agreed that an interRAI Fellow is a Board member then consideration needs to be given to the selection process and whether it was a process for the interRAI Governance Board or for the interRAI Fellows.

The Chair noted that one method to comply with the TOR could be to increase the number of Board members from twelve to thirteen and change the TOR process through the Director General, Ministry of Health. It is anticipated that more interRAI Fellows will be appointed over time.

The Chair noted that further thinking was required before a decision could be taken on this matter and the paper would be revisited at the next meeting noting the requirement to consider Janice Mueller’s comment on process.

**10.57 am Dr Millar and Dr Meehan rejoined the meeting.**

### 2.4 Progress with the recommendations for ‘Lessons Learned from the introduction of Comprehensive Clinical Assessment (interRAI) in Aged Residential Care (2011-2015) – a post project review’
Michele McCreadie noted that many of the recommendations are now closed and that a number of Integrating interRAI workshops had been held in conjunction with the New Zealand Aged Care Association and a roadmap had been published as a result of these meetings.

Michele McCreadie noted that the next report that will be presented to the Board will be in October and will include a summary progress ‘end report’ outlining what had been actioned.

The interRAI Board:

1. **Noted** the progress made to date in response to the recommendations of ‘Lessons Learned from the introduction of Comprehensive Clinical Assessment (interRAI) in Aged Residential Care (2011-2015) – a post project review.

2. **Noted** a final progress report will be provided at the October 2018 meeting.

### 3.0 Software Services

**11.02 am Bob McNeil (Contractor) and Terry Huntley (TAS) joined the meeting.**

#### 3.1 interRAI NZ Informatics Strategy

The purpose of the paper was to seek the Board’s approval for the interRAI NZ Informatics Strategy.

The Chair noted that the previous board held a workshop at the end of 2017 to inform the strategy and this initiative was also discussed at the first meeting with the new Board. The strong linkages with the New Zealand Health Strategy and Digital Strategy were also important.

Michele McCreadie noted that the Ministry of Health Information Technology team had provided feedback and had added ‘Meet IT and Data Standards’ to the Strategic Objectives 3, 5, 7 and 9.

Dr Millar stated that the strategy needed to include a primary purpose and a secondary use statement in the document including noting that health providers are using it for their purposes, health care funders for planning assessment of performance and quality and researchers to the benefit older people.

Dr Millar noted the requirement to strategically consider data collection as the current practice is to collect data where it already exists in other systems. As those systems become electronic the re-collection becomes redundant and adds additional work that is not required.

Dr Millar suggested that an addition to the Strategic objectives 3, 5, 7 and 9 to include another bullet point ‘Over time duplication of data will be replaced by interoperability with established data sets’.

Carolyn Cooper suggested that an additional sentence under the Principle of Resource Efficiency may be more appropriate.

The Chair noted that Michele McCreadie will establish where the addition sits best and that the Board was comfortable to proceed with the amendments.

The interRAI Governance Board:
1. **Approved** the interRAI Informatics Strategy

2. **Noted** that the strategy will be published on the interRAI NZ website

3. **Noted** that the Board decision re interRAI interoperability confirmed at the February 2018 meeting will be published at the same time.

   Moved: R Reid  
   Seconded: M McCreadie  
   CARRIED

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<tr>
<td>04-04/18</td>
<td>Include a Primary Purpose into the Strategy</td>
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<tr>
<td>05-04/18</td>
<td>Include a secondary use including health providers using it for their purposes, health care funders for planning assessment of performance, and quality and researchers to the benefit of older people.</td>
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<tr>
<td>06-04/18</td>
<td>Add comment 'Over time duplication of data will be replaced by interoperability with established data sets' to either the strategic objectives bullet points or to the Resource Efficiency Principle</td>
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### 3.2 Business Case for interRAI 2-1 Host sites (Kotahi) project

The purpose of the paper was to seek approval from the Board to establish a project to create a single interRAI software host site.

Michele McCreadie noted that currently interRAI has two host sites, one in Canterbury DHB and one in Taranaki DHB and it is proposed to change this to a single site model.

Michele McCreadie noted that the business case does not contain a Net Present Value (NPV) as there is a lack of understanding of the current service level agreements (SLA) with the two host sites about the services they deliver, and where the costs sit. As a result it cannot be established exactly what the savings will be by moving from two host sites to one. Additionally, if the expected savings (if known) were published, this would affect the procurement process as the costs would already be public knowledge.

Karina Kwai noted her appreciation for the upfront comments on the NPV and felt that it would be helpful to have further information in the business case about the current annual financial commitment alongside the case for change.

Karina Kwai requested that the current spend is also added to the document.

Michele McCreadie advised that approximately $953k per annum is linked to the two SLAs.
Karen Evison stated that it was not evident from the business case that there were going to be any savings and although this is the assumption it also raised the potential that it could cost more with the additional staff and infrastructure that may be required.

Michele McCreadie reiterated the earlier issue about the lack of available information regarding the current SLAs however the estimate is that moving from two servers to one may create a 25% saving. She also noted that this is not a merger but a completely new service, new provider and new contract.

General discussion was held on the process to move from two servers to one including the possibility of data double up, the employer footprint specifically the current Government employment considerations and the tender process.

Michele McCreadie noted that the proposal is to enter into a closed tender with the current providers and in the event neither are interested then a new procurement process will occur.

Karina Kwai and Michele McCreadie confirmed that neither the MoH nor TAS are interested in tendering should both current providers decline the tender process.

The Chair noted that a closed tender process has been recommended, the inclusion of the $953k per annum current annual spend is to be stated in the document, noting the comment around the difficulty of specifying the NPV, and that Option two is the preferred approach.

The interRAI Governance Board:

1. **Approved** the business case to establish a project to create a single interRAI software host site.

2. **Noted** that once the project is established status reports will be provided for the Board at each meeting.

3. **Noted** that Option two is the recommended preferred approach.

4. **Noted** that $953k per annum is the current expenditure over the two sites.

   
   
   Moved: Dr Kenealy
   
   Seconded: Janie Mueller
   
   CARRIED

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<td>07-04/18</td>
<td>Additional information on the current state is to be added to the business case alongside the case for change</td>
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<tr>
<td>08-04/18</td>
<td>Information on the current expenditure is to be added to the business case.</td>
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*11.29 am Terry Huntley and Bob McNeill left the meeting.*

*11.29 am Meeting broke for morning tea*
11.49 am Meeting resumed

4.0 Education and Support

4.1 interRAI Quality Indicators – next steps

The Chair noted the comprehensiveness of the report and attached education programme.

Dr Meehan advised that the Board members will receive the national report at the next Board meeting.

Dr Meehan commented that the interRAI Quality Indicators are provided to facilities to enable them to understand their service. They currently do not have this information – information is provided on their residents but not their service. This report is intended to give them practical step by step help. In April, the reports issued to large providers will be for every facility in their group. The suggestion is that the large providers then speak with each of their facility managers to obtain feedback on the usefulness of the report which will continue to inform the process.

Carolyn Cooper expressed concern about facilities being grouped when they are completely different in the services they offer, therefore care needs to be taken around the interpretation of the data by someone outside of that facility.

Dr Meehan clarified that no person outside of the facility will see the combined data but only the national average. As an example, no one will be able to see the BUPA data, only BUPA.

General discussion followed regarding the compilation of the data sets and how this would be interpreted.

The interRAI Governance Board:

1. **Noted** the update on the interRAI Quality Indicators Report.

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<tr>
<td>09-04/18 At the June interRAI Governance Board meeting, the Board is to receive a report by level of care that includes current national data as well as the previous quarter’s national data and the range of values for all DHBs.</td>
<td>Michele McCreadie</td>
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Additional Agenda Item – NZACA Report – Caring for Older Kiwis

11.58 Chris Fleming, Max Robins and Uli Trute joined the meeting

The Chair noted the addition of the agenda item due to the upcoming launch of the report which draws on interRAI data and has been produced by the New Zealand Aged Care Association (NZ ACA).

The Chair noted that given that the report and its findings draws on interRAI data it is disappointing that the interRAI Board was not made aware of it before it was due to be released.
Chris Fleming advised he became aware of the report late in the afternoon of 10 April 2018 and noted that the report contained interRAI data and acknowledged the work of interRAI Board members. Media will be interested in the document and media interviews are planned.

Chris Fleming noted that from his DHB Lead CEO perspective, and not as an interRAI Board member, he will communicate with DHB Chief Executives acknowledging the existence of the report before it is published.

Michele McCreadie confirmed that data was provided through the data access protocol but there was no indication of what the report would say and interRAI Services had no input into the document.

Max Robins noted his conflict of interest in this matter and noted that the decision was made by the NZACA Board that the information in the report would be kept confidential until the release date. Concern was expressed regarding the apparent variability between DHBs re the threshold for deciding whether someone is suitable for residential care and the thresholds for moving between different care levels.

Dr Millar commented that it was good to read about improvements and the positive news however the report focused on the benefits of residential care and did not reflect the need for individual choice. Additionally, the conclusions drawn about Home Care are not necessarily accurate due to the varying length of time between assessments.

Dr Millar noted a key positive of this report was the value of the interRAI data.

Michele McCreadie noted that key messages would be prepared for the media from the interRAI perspective.

The Chair suggested that any written statements by the Board are released under her name but any clinical commentary should be addressed by Dr Millar.

Karina Kwai noted that the Ministry and the Ministers office also needed to be kept in the loop.

### 5.0 Update from interRAI International

#### 5.1 ARC Funding

Chris Fleming advised that the Funding Review is underway.

Michele McCreadie noted that the first review report was tabled at the General Managers Planning and Funding meeting earlier in the week. interRAI Services have responded to a data access protocol request for a large amount of interRAI data from Ernst and Young. Two investment logic workshops have been held and work is underway on future design principles.

12.21 pm Karina Kwai left the meeting

Dr Millar advised that he has been approached by Ernst and Young advising of a project reference group and extending to him an invitation to be part of it. The suggestion was made that Brant Fries could be invited to be engaged or contracted noting that he is a mathematician and the President of interRAI International and therefore eminently qualified.
General discussion was held regarding data analysis.

Michele McCreadie noted that the timeline states December 2018 for the final report.

### 5.2 Overview of requests for interRAI data for research purposes

Michele McCreadie confirmed that an increasing number of requests were received from researchers through the access protocol.

The Chair noted the table showing requests for interRAI data.

Dr Millar noted that much more can be done and suggested that a collaboration meeting could be facilitated to present some of the data.

Michele McCreadie noted that the protocol states that before research is published, researchers are asked to advise interRAI what the topic and content of the paper is however this is not enforceable. Where possible interRAI research papers will be provided to the Board. The numbers of requests is steadily increasing.

Dr Meehan suggested it would be useful to produce an article for the Informer noting that some research institutions may not be aware that this data exists.

Dr Millar suggested that he could also provide an article for the Informer as researchers in the international community may be asking common questions to which data is already available.

The interRAI Governance Board:

1. **Noted** the overview of requests for interRAI data for research purposes 1 January 2017 to 3 April 2018.

2. **Agreed** the Board should be promoting interRAI data more widely among research institutions.

### 6.0 Update from interRAI International

Dr Meehan noted that a research study from Belgium found that chewing difficulty was associated with activities of daily living, cognitive and depression status. Additional research was completed with other countries and now New Zealand is going to be part of this international study. This is a very important topic and the data was readily available.

12.37 pm meeting broke for lunch and group and individual photos. Phil Wood left the meeting.

1.10 pm Stephanie Clare left the meeting.
1.15 pm meeting resumed

7.0 Operations Reports

7.1 interRAI NZ Risk Register

The Board discussed the current risk register and requested the following changes:

- Close Risk # ten
- Refresh risk # five - How interRAI data is interpreted and conclusions drawn

The interRAI Governance Board;

1. **Noted** the interRAI Governance Board Risk Register as at April 2018.

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<td>10-04/18 Close Risk # ten</td>
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<tr>
<td>11-04/18 Refresh risk # five  – How interRAI data is interpreted and conclusions drawn</td>
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7.2 Overview interRAI Services Financial Situation to end February 2018

The Board received the paper.

Michele McCreadie noted that interRAI was in a good position with finances to date and are now starting to use revenue in advance on new projects. Discussion has been held with Karina Kwai and no additional funding is being sought, the emphasis is on retaining current funding.

The interRAI Governance Board:

1. **Noted** the overview of the interRAI Services financial situation 2017/18 as at the end of February 2018.
2. **Noted** the explanation of financial variances and use of the revenue in advance funding for 2017/18.

7.3 Operational Report Q3

Communications and Media

Dr Hamish Jamieson’s National Challenge-related research into loneliness using interRAI assessment data was published in the Australasian Journal on Aging.

Michele McCreadie advised that she is presenting at the Age Concern conference in the week commencing 16 April 2018. The theme this year is Age Concerns Everyone. Age Concern have specifically asked to present on the wellbeing and the social wellbeing measures that interRAI have. A hand out was given to the board which will also be given to the conference and spoken to in depth.
Michele McCreadie noted that an article has been published on the InSite website by a nurse who had completed the interRAI training and commented how difficult it was. The article was not widely read and a decision was made not to respond to it.

**Software Services**
Michele McCreadie noted that the May 2018 interRAI software upgrade is going well. The technical proof of concept has been completed with ‘conporto health’ which is part of ‘Patients First’. The project needs to be planned to ensure that this allows for a planned introduction of interRAI to primary care.

**Data Analysis and Reporting**
Michele McCreadie advised that the interRAI data visualisation on the interRAI website has received 2108 hits to date.

The interRAI Governance Board:
1. **Noted** the interRAI Services Operational Report Q3.
2. **Noted** the Data Request trend information provided.
3. **Noted** that the Q3 Outcome Measures report was not available at the time of writing. The information will be provided at the next meeting.

**8.0 Update from the Ministry of Health**
Michele McCreadie spoke to the update in particular to the Memorandum of Understanding and annual reporting.
Michele McCreadie to contact Treasury to advise that key measures of information regarding Wellbeing are available through interRAI.

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<td>Advise Treasury that key measures of information regarding Wellbeing are available through interRAI</td>
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**8.0 Communications**
The Chair noted the new streamlined and modern communication styles in the Age Concern handout and how user-friendly it is to read.

**9.0 General Business**
Dr Millar enquired if there had been an update on interRAI and mental health as the Ministry had earlier indicated interest but nothing had been heard back. The reason for raising this is due to the
current mental health inquiry and whether the interRAI Governance Board should contact Ron Patterson (Chair of Mental Health review) directly.

Michele McCreadie offered to write to Ron Patterson (for information to Rod Dunham, DHB Lead CEO) to offer the opportunity to set up engagement to appraise the mental health inquiry about the interRAI tool and the benefits of standardising of care, wellbeing and social issues.

<table>
<thead>
<tr>
<th>Action items</th>
<th>Person Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>13--2/18 Letter to be written to Ron Patterson (for information to Rod Dunham) to request a meeting to appraise the mental health inquiry about the interRAI tool and the benefits of standardising of care, wellbeing and social issues.</td>
<td>Michele McCreadie</td>
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</tbody>
</table>

**BOARD ONLY TIME**

The Chair noted that due to the lack of Board members present as a result of other conflicting commitments, Board only time would not occur at this meeting.

General discussion was held on front footing and profiling the future of interRAI at a symposium as an opportunity for researchers to present and perhaps link this to an international interRAI symposium.

Janice Mueller suggested that this presented some further opportunities to examine how the symposiums can be run to attract the largest number of attendees. Suggestions included a roadshow type event.

The Chair noted the support for a symposium and asked for this to be discussed further at the next board meeting.

**Meeting Closed: 1.41 pm**

**Next meeting: 6 June 2018, Front & Centre, 69 Tory Street, Wellington**