Minutes
interRAI Governance Board

Date: Wednesday 6 June 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, Dr 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, Waipuata 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, Terry Huntley – interRAI Software Services Manager, TAS, Uli Trute, interRAI Senior Communications and Engagement Advisor, 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, Prof Matthew Parsons, Dr Nigel Miller, Carolyn Cooper, Dr Michelle Honey, Dr Brigette Meehan

Welcome & Apologies

The Chair opened the meeting at 10.00 am. Apologies were received from Chris Fleming, Prof Matthew Parsons, Dr Nigel Miller, Carolyn Cooper, Dr Michelle Honey and Dr Brigette Meehan.
## Minutes and Action Register

### 1.2 Declaration of Interest Register
Now fully populated.

### 1.3 Confirmation of Minutes
The minutes of the meeting held 11 April 2018 were confirmed as a true and correct record.

Moved: C Cooney  
Seconded: D. Chrisp  
**CARRIED**

### 1.4 Action Register

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
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<tbody>
<tr>
<td>02-04/17</td>
<td>ACC and partner DHB Pilot. Verbal update on agenda at item 1.6. <strong>Open</strong></td>
</tr>
<tr>
<td>29-01/18</td>
<td>interRAI Fellows Policy – board attendance. Draft policy to be developed for discussion at the next meeting. <strong>Closed</strong></td>
</tr>
<tr>
<td>05-02/18</td>
<td>MoH to provide critical dates of contract renewal process to inform Board strategy decisions. <strong>Open</strong></td>
</tr>
<tr>
<td>01-04/18</td>
<td><strong>Joint Communications with Nursing Profession</strong> – 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. <strong>Closed</strong></td>
</tr>
<tr>
<td>02-04/18</td>
<td>Connex training to be provided to Board members at the next meeting. <strong>Closed</strong></td>
</tr>
<tr>
<td>03-04/18</td>
<td>Board papers to be emailed and uploaded to Connex for the June Board meeting. <strong>Closed</strong></td>
</tr>
<tr>
<td>04-04/18</td>
<td><strong>InterRAI Informatics Strategy</strong>. Include a Primary Purpose into the Strategy. <strong>Closed</strong></td>
</tr>
<tr>
<td>05-04/18</td>
<td><strong>interRAI Informatics Strategy</strong>. Include a secondary use including health providers using it for their purposes, health care funders for planning assessment of performance and quality and researchers for the benefit of older people. <strong>Closed</strong></td>
</tr>
<tr>
<td>06-04/18</td>
<td><strong>InterRAI Informatics Strategy</strong>. 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>
</tr>
<tr>
<td>07-04/18</td>
<td><strong>Business case for interRAI 2-1 Host Sites</strong>. Additional information on the current state is to be added to the business case. <strong>Closed</strong></td>
</tr>
<tr>
<td>08-04/18</td>
<td><strong>Business case for interRAI 2-1 Host Sites</strong>. Information on the current expenditure is to be added to the business case. <strong>Closed</strong></td>
</tr>
<tr>
<td>09-04/18</td>
<td><strong>interRAI Quality Indicators</strong>. At the June interRAI Governance Board meeting, the board is to receive a report by level of care that includes current national data as</td>
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well as the previous quarter’s national data and the range of values for all DHBs.

Agenda item 06/18

10-04/18 interRAI Risk Register. Close risk # ten. Agenda item 06/18.

11-04/18 interRAI Risk Register. Refresh risk # five – How interRAI data is interpreted and conclusions drawn. Agenda item 06/18

12-04/18 MoH MOU and Annual Reporting. Advise Treasury that key measures of information regarding Wellbeing are available through interRAI. Closed.

13-04/18 Mental Health Review. Letter to be written to Ron Patterson (for information Ron Dunham) to offer to set up engagement to appraise the mental health review about interRAI in particular in the benefits of standardising of care, wellbeing and social issues. Closed.

1.5 Correspondence

1.5a The letter to the Mental Health and Addiction Inquiry was noted.

1.5b Board correspondence- Michele McCreadie advised that she is happy to provide suggested responses to queries that are sent directly to Board members

1.6 Matters arising

Joint Communications with Nursing Profession

A Joint teleconference was held between Michele McCreadie, Carolyn Cooper, Cathy Cooney and a representative from the Chief Nurses Office (CNO) Kathy Glasgow, to discuss potential areas that would be appropriate for joint communications. A face to face has been arranged with the CNO, Michele McCreadie and Carolyn Cooper alongside the next Board meeting in August.

The Chair noted that this was a worthwhile discussion in terms of connecting with the nurse’s network. This has previously been noted as an area of concern by the Board members and this action is seen as a practical solution.

Accident Compensation Commission and Canterbury DHB Pilot

Michele McCreadie met with the Accident Compensation Commission (ACC) and is now in the process of revising and recosting the interRAI Services proposal for a pilot of the Post-Acute Care Rehabilitation (PAC-R) interRAI assessment. The ACC business case is planned for presentation to General Managers Planning and Funding (GM P&F) at their meeting in July. ACC also asked about the use of interRAI when a person is being funded by ACC in community care. ACC are also asking if they can introduce an interRAI tool for those over 65 funded in community care (non-acute) predominantly introducing a level of self-assessment. This is a conversation only at this stage.

Karina Kwai advised that the Ministry of Health (MoH) had been contacted by ACC who requested MoH to add this pilot to the current MoU and continue to take the lead funder role.
2.0 Governance

2.1 Amendment to the interRAI NZ Governance Board Terms of Reference

At the 11 April 2018 meeting, the Board suggested that the Terms of Reference should be amended to ensure effective inclusion and contribution from interRAI Fellows. Following discussion:

The interRAI NZ Governance Board:

1. **Approved** the proposed amendment to the interRAI Governance Board Terms of Reference.

   Moved: C Cooney
   Seconded: M Robins
   CARRIED

2.2 interRAI NZ Future Direction 2018-2021 – a refresh of the three year strategic direction

The Chair noted that the strategy is revisited annually to ensure it is still fit for purpose and to consider any new initiatives.

Max Robins noted that as interRAI becomes more and more embedded the sorts of questions that are being asked may change. Looking at it from a management perspective, the question should be asked how the data be can used and what type of training and understanding is held. Noting the data on the pain scale and on the patient scale, how can these be used to make a difference.

Michele McCreadie noted that interRAI are working hard with the Health Quality and Safety Commission (HQSC) to provide links to their best practice guides and their case studies. This will ensure that interRAI does not duplicate their work. Since the quality indicators have been produced, three aged care providers, BUPA, Ryman and Ultimate Care Group, have requested that interRAI join their quality assurance meetings and assist with embedding interRAI.

Phil Wood queried whether it was possible to use the system as a real time tool and not just a snapshot in time and whether this is something that the Governance Board can change or if this is determined by the International tools.

Michele McCreadie advised that interRAI does have the ability to change. Projects are planned to change the ease of access to the dashboard to make the information more ‘real life’.

Max Robins noted that it would be useful to have additional tools to enable pain to be monitored.

Michele McCreadie confirmed that there are modules in the interRAI software which could be made more available. Currently only a couple of modules are available to users in NZ and the modules available could be broadened.

Karen Evison suggested that there should be an equity statement in the document to reflect the deliberate drive for equity in some of the initiatives.
Following general discussion, the interRAI Governance Board:

1. **Commented** and provided additional input into the refreshed interRAI NZ – Future Direction 2018-2021.

2. **Noted** the progress made in 2017-2018.

### Action items

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<th>Action items</th>
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<tr>
<td>01-06/18</td>
<td>Michele McCreadie</td>
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| 1.01-06/18    | Include more information in the strategy Better Assessment, Better Care and Better Outcomes at 12 and 36 month timeline (People Powered and Smart System). |
| 1.02-06/18    | Reflect that additional modules and tools are available in the strategy People Powered and Smart System. |
| 1.03-06/18    | Include equity statements in the strategic document |

### 3.0 Software Services

**10.32 am Terry Huntley (TAS) joined the meeting.**

3.1 **Kotahi interRAI 2-1 Host Sites Project.**

At the 11 April 2018 meeting, the Board approved the business case to establish a project to create a single interRAI software Host site. The Kotahi interRAI 2-1 Host sites project has been successfully established and is underway with the initiation, discovery and procurement processes.

Michele McCreadie updated the Board on progress and emphasised the importance of this project for interRAI. Since assuming responsibility for software services it has become obvious that running two software sites is an enormous burden as everything needs to be negotiated twice. Technically this is a not a complex issue to resolve and could be done relatively quickly however fitting into the schedule of the two host sites, giving them six months’ notice (as contractually obliged) and having a host site that is ready are the likely delays.

Michele McCreadie advised that planning has been completed at a high level, a milestone chart has been initiated, amended costings have been provided and a meeting has been held with the MoH to garner additional advice on the procurement of the service. Following on from that, a closed Request for Proposal (RFP) will be called for. One host site has stated they wish to bid however there has been no response from the other so far. A Business Analyst is now in place and is working on the detailed design, processes and systems required to get the procurement process under way.

Terry Huntley advised that he was at one of the Host sites the previous week looking at the procurement process. If only one site wishes to bid we will still need to go through the procurement process. If a single bid does not meet the requirements then it would need to go through an open tender process.
The Chair advised that it was appropriate to call the tabled document a Project Charter. Karina Kwai queried the communication strategy as it was unclear from the Charter what the key messages are.

Michele McCreadie advised that this has not been considered at this stage however if the Board wishes a communication strategy can be presented at next meeting.

The interRAI Governance Board:

1. **Approved** the Kotahi interRAI 2-1 Host sites Project Charter.

2. **Noted** the progress to date.

3. **Noted** that the communication strategy would be brought back to the board at the August 2018 meeting.

Moved: D Chrisp  
Seconded: K Evison  
CARRIED

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<tr>
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<tbody>
<tr>
<td>04-06/18 Kotahi Communication Strategy. To be presented to the Board at the 08/18 meeting.</td>
<td>Michele McCreadie</td>
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At 10.43 am Terry Huntley left the meeting.

4.0 **Education and Support**

4.1 **Project Update – interRAI Quality Indicators**

At 10.45 am Jason Theobald (TAS) joined the meeting.

The Chair noted the significant progress made to date.

Max Robins noted that the variance appears less with the large District Health Boards (DHBs) and queried whether there was a risk of lack of confidence in the data being presented in the current format.

Michele McCreadie noted the large number of Indicators and the large amount of information provided. The decision was made to provide large amounts of information and the Board could then feedback what was useful and what they wanted to see in future. It was acknowledged that the documents are not easily read and they could be more visually appealing however, this is the best that can be done at this point in time with the current software. Once feedback is received the look and feel will be revisited. Phase two is being planned which will include risk adjustment of the data.

Karen Evison suggested that it would be useful to include a report at the national level on the variances between Māori verses non-Māori.
The Chair noted that this was a cornerstone document for the future and to maximize the potential of this information. The full information should be available on Connex with the national picture provided with the agenda and papers.

General discussion was held on the information provided and it was noted that the ability to see trends across DHBs would be useful. A communication strategy was considered critical. The graph system was not familiar and comment was made that the document may not be used in the current format. It was queried why certain questions were asked.

Michele McCreadie agreed that there was no planning yet to make these publically accessible to consumers and noted that there was more work to be done to make this more useful to the providers of the service.

Roy Reid commented that it was good to see these as this is something that they have been waiting on for some time. There is the ability to see where some areas are providing better care than others.

Michele McCreaddie summarised:
- A large proportion of the reports will be produced but put into Connex to allow Board members to pick and choose which ones they wish to analyse.
- A report at the national level on the variances between Māori verses non-Māori will be provided.
- An analysis will be provided to show where the largest variations are.

The interRAI Governance Board:

1. **Noted** the update on the interRAI Quality Indicators Project including receipt of the first national report for the Board
2. **Noted** that future reports will include a National data set which will include a report at the national level on the variances between Māori verses non-Māori.

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<tbody>
<tr>
<td>05-06/18 Quality Indicators are to be uploaded to Connex when they are produced.</td>
<td>Michele McCreaddie</td>
</tr>
<tr>
<td>06-06/18 Quality Indicators to include a national picture which will include a report at the national level on the variances between Māori verses non-Māori.</td>
<td>Michele McCreaddie</td>
</tr>
<tr>
<td>07-06/18 Quality Indicators are to provide an analysis of where the largest variations are</td>
<td>Michele McCreaddie</td>
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At 11.20 am the meeting broke for morning tea.
11.40 am the meeting resumed.
**Additional Discussion – Quality Indicators**

The Chair queried how information on the indicators can or cannot be used.

Michele McCreadie confirmed that the indicators are only published on Connex and therefore individual DHBs and Aged Residential Care (ARC) providers can only see themselves however interRAI Board members can see all data sets. There is no existing agreement around the sharing of information with ARC providers and this is unlikely to happen. In respect to DHB information there has been no agreement from the Health of Older People (HOP) portfolio managers around information sharing.

Karen Evison advised that she would speak to the GMs P&F about the potential to share DHB level information at their next meeting and report back to the next interRAI Board meeting.

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<tr>
<td>08-06/18 The potential to share DHB level information among GM P&amp;F to be discussed at the next GMs Governance Board meeting with the outcome to be reported back to the next interRAI Board meeting.</td>
<td>Karen Evison</td>
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**5.0 ARC Funding Review update**

**5.1 ARC Funding**

Michele McCreadie provided a background to the paper noting that at the last Board meeting a paper was presented by Ernst and Young (EY) which focused on the analysis of the current funding model. EY also presented possible funding models for the future and discussed some of the features of international models in particular Australia and Canada.

Michele McCreadie noted the details presented on the interRAI Resource Utilisation Group (RUG) classification system. This is the third iteration of the resource utilisation classification groups.

Michele McCreadie confirmed the timeline for completion is December 2018.

The interRAI Governance Board:

1. **Noted** the ARC Funding Review stakeholder update.

**6.0 Update from interRAI International**

Michele McCreadie provided an update from interRAI international noting that a meeting was held the previous week in Edinburgh which Dr Meehan attended. As part of this, interRAI International was presenting for NHS Scotland as they have expressed an interest in using interRAI as an assessment tool. This is the first time interest has been expressed by the NHS in interRAI.
Michele McCreadie advised that the meeting discussed a new assessment called a ‘check-up assessment’ and falls between the contact and the home care assessment. It is expected to have an element of self-reporting and may apply itself in Primary Care. It is a mid-range assessment rather than a full assessment. This relates to the conversation that interRAI has started with ACC and this is potentially the type of assessment they are seeking in home care. They are particularly keen on the self-assessment programme.

Karen Evison provided a summary of Healthcare Home which, upon a successful pilot, has become a national collaborative model. This will provide transformative change in practices to mitigate the risk of growing demand, a shrinking workforce and models of care that are not necessarily giving outcomes to the population that is required. A national framework is available on their website at www.healthcarehome.co.nz. It also provides new roles such as healthcare assistance to take over the roles of nurses in practice to free them up for nursing consult time. It appears to be reducing acute demand pressures.

7.0 Operations Reports

7.1 interRAI NZ Risk Register
The Chair queried whether any update was available at risk # nine regarding any new policy direction from the coalition government.

Karina Kwai note that there appears to be low interest in this area.

Roy Reid advised that they met with the Minister of Health and the Associate Minister of Health and asked when the new policy was going to be introduced. Advice was given that this is not part of the coalition agreement however assurance was given that they will not lose sight of it.

The interRAI Governance Board;
1. Noted the interRAI Governance Board Risk Register as at June 2018.

7.2 Overview interRAI Services Financial Situation to end April 2018
The Board received the paper.

Michele McCreadie noted that the financial situation was positive and the variances are primarily due to hiring new staff and the time it takes to onboard them from the time the vacancy was created. There is an increase in demand for interRAI training from the Auckland area due to the high turnover of nurses.

The interRAI Governance Board:
1. Noted the overview of the interRAI Services financial situation 2017/18 as at the end of April 2018.
2. Noted the explanation of financial variances and use of the revenue in advance funding for 2017/18.
3. Noted how revenue in advance has been spent for 2017/18.
4. Noted the priorities that have been tagged for 2018/19.
7.3 Operational Report
At 12.10 pm Terry Huntley (TAS) joined the meeting

Communications and Media
Michele McCreadie talked to media items of note:

- On 11 April 2018, the NZ Aged Care (NZACA) associated released their report ‘Caring for our older Kiwis – The Right Place, at the Right Time’.
- Grey Power released a media statement this week regarding the NZACA report.

The following topics were reported on:

1. Website Statistics. These continue to be very good and a great deal of effort has been expended to keep the information relevant.
2. interRAI Informer is performing very well. The data visualisation site is also going well
3. Customer Survey is focusing on NASC services and the survey was circulated to all Home Care assessment teams in May 2018. It is anticipated that the survey will highlight what can be done as well as what is being done well. Over 80 responses were received on the first day from the 700 surveys that were sent.

4. Conferences
   - Age Concerns Everyone (ACE) interRAI had a trade stand at the ACE conference and was well received. The presentation was focused on social and wellbeing measures.
   - Canadian interRAI Conference interRAI NZ attended and presented on refreshing the Māori strategy and the introduction of the palliative care assessment. At the same conference Ulrich Bergler, one of Dr Hamish Jamieson’s research students, presented work from the National Science Challenge project where interRAI and PHARMAC data was linked to look at medication side effects in older people. The presentation won a conference Innovation Award.

The Chair requested that this presentation is distributed to Board members.

Data Analysis and Reporting
Michele McCreadie reported that a standard suite of interRAI reports for Home Care providers was published 5 February 2018. A webinar providing support for Home Care providers to understand these has been published on the interRAI website. This is a six monthly publication and although only 13 or 14 Home Care providers have received the report to date, it is expected to grow over time.

Michele McCreadie advised that interRAI data has been provided to the MoH for a micro-simulation of the NZ health system including disease incidence, progression and costs for use in cost-effectiveness analysis. This allows data to be used to simulate what is expected to be seen in the future and therefore how to scenario plan for it. This is the first example of interRAI data being used as part of a micro-simulation.
The Chair advised that it would be good to see an example of this at a future board meeting.

**Education and Support**

Michele McCreadie advised at the end of Quarter three, 64% of the estimated population of Registered Nurses in ARC were competent to undertake interRAI assessments which is below the target of 70%. This is due to:

- A sharp increase in the number of requests post-Christmas with training completed for 313 more Registered Nurses (RNs) than planned.
- Three educator vacancies which have now been filled,
- The estimated population of 5000 RNs is too high as not all RNs in ARC are required to achieve competency.

At the end of Quarter three, 100% of the estimated population of Home Care assessors were competent to undertake interRAI assessments which is over the target of 90%. This is due to:

- The increase in requests for training.
- The estimated population of 600 assessors may be too low. An estimated increase of 100 has occurred since the target was agreed.

**Changes to the medication section of the interRAI assessment**

interRAI international has agreed that the medication sections of the Long Term Care Facilities (LTCF) assessment and Home Care assessment will move from being mandatory to ‘country specific’. interRAI Services have been working to develop new guidance for New Zealand assessors. A paper proposing changes to reduce the time taken by assessors to complete this section is planned for presentation to the August Board meeting.

**Software Services**

Michele McCreadie advised that the interRAI self-password re-set is planned for introduction in September 2018. The interRAI host services Service Level Agreement’s for 2018/19 have been extended to cover the period up to the move from two host services to one and renegotiated to reflect the expected reduction in service desk calls.

The software update originally planned for May has been deferred to June to enable more time for preparation and testing and to ensure a seamless experience through the upgrade.

Terry Huntley advised that there have been problems and while the intent from the host sites is good, they are experiencing resourcing problems (people) which is the reason the upgrade has been postponed again. It is important that this is done correctly but it also acknowledged that resources will be scarce. The process to reset priorities will need to be examined in the coming weeks.

General discussion was held on whether this influenced the thinking around a single provider.

The Chair noted that from a customer point of view who is paying for a product and service, consideration should be given to meeting milestones around an issue that was scheduled. These
should be investigated and if any further delays are experienced then contract clauses can be invoked.

The Chair advised that Judith Davey, a previous member of the interRAI Board has received the New Zealand Order of Merit (NZOM) in the Queen’s birthday honours list. A letter will be sent from the Board congratulating her on the achievement.

**interRAI Symposium**

Michele McCreadie called for input into how this may be run. If the Board wishes this to proceed then planning will need to commence.

The Chair noted that this should go back on the agenda for later in the year but if anyone is aware of any activities happening either in NZ or Australia then to let Michele McCreadie know in the interim.

The interRAI Governance Board:

1. **Noted** the interRAI Services Operational Report Q3.

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<tr>
<th>Action items</th>
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<tbody>
<tr>
<td>09-06/18 Distribute Ulrich Bergler’s research paper which was presented at the interRAI Canadian conference to Board members</td>
<td>Secretariat</td>
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<tr>
<td>10-06/18 Investigate feasibility of the interRAI Board viewing the micro-simulation presentation at a future meeting</td>
<td>Michele McCreadie</td>
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<tr>
<td>11-06/18 Paper on reducing time to complete LTCF and Home Care assessment sections is to be presented to the August Board meeting</td>
<td>Michele McCreadie</td>
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<tr>
<td>12-06/18 Letter to be written to Judith Davey congratulating her on the award of the NZOM</td>
<td>Michele McCreadie/Secretariat</td>
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<tr>
<td>13-06/18 interRAI to investigate the software services contract and if any further delays are experienced then invoke contract clauses</td>
<td>Michele McCreadie</td>
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At 1.50 pm Terry Huntley left the meeting

**8.0 Update from the Ministry of Health**

Karina Kwai advised that Michele McCreadie and the team from interRAI met with the MoH data team to explore integrating interRAI data into the Integrated Data Infrastructure (IDI). A useful conversation was held on the process and considerations identified how this could proceed.

Michele McCreadie update the Board on what has occurred to date. In 2015 the Board had a presentation from Dr Jackie Fawcett (MoH) and whether interRAI data could be integrated into IDI. This is a Statistics NZ held data infrastructure. No decision was made and no action was taken at the time and the issue has now resurfaced.

Phil Wood noted the general enthusiasm but there is a requirement to understand the process as IDI is extensive and specific and all obligations must be fulfilled before data will be released. Once
is the data is released, it is easy for researchers to automatically link data to the National Health Index.

Karina Kwai confirmed that a paper would be produced at some stage for Board approval and the MoH would provide an update at the next meeting.

Karina Kwai advised the Board that the new MoH Director General is Dr Ashley Bloomfield commencing 11 June 18.

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<td>14-06/18 MoH to provide update on interRAI data into IDI at the next Board meeting.</td>
<td>Karina Kwai</td>
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8.0 Communications

Michele McCreadie advised that the new Informer will be published at the end of July and will include the presentations as noted in the Operations Report.

9.0 General Business

No general business to discuss.

BOARD ONLY TIME

Meeting Closed: 12.55pm
Next meeting: 8 August 2018, Front & Centre, 69 Tory Street, Wellington