






## Annual Report 2022/23



**Te Whatu Ora**  
Health New Zealand

## interRAI is:

-  The primary assessment instrument for older people receiving support to live at home or in aged residential care in New Zealand.
-  Comprehensive and standardised.
-  Internationally-validated best practice.

## In New Zealand:

**1,184,895** completed assessments in the interRAI data warehouse.

**67,461\*** assessments completed in aged residential care facilities in 2022/23.

**36,109\*** Home Care assessments in 2022/23.



**4,774\*** competent assessors.

**668\*** aged residential care facilities.

**19** Te Whatu Ora Districts.

**6** assessment instruments.


\* As at June 2023

-  Developed by experts from over 35 countries.
-  Delivered by interRAI Services, part of Te Whatu Ora.
-  Governed by the interRAI Leadership Advisory Board.

## Better assessment, better care, better outcomes

### How interRAI works

Throughout Aotearoa New Zealand, health professionals use interRAI assessments to understand and create care plans for the health needs of vulnerable people.



interRAI data from all assessments is aggregated to provide information at provider, regional and national level.

**Check out the interRAI data visualisation at [www.interRAI.co.nz/data](http://www.interRAI.co.nz/data)**

### Assessment instruments in New Zealand:



Home Care assessment



Contact Assessment



Community Health Assessment



Palliative Care assessment



Long Term Care Facilities assessment



Acute Care assessment

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# Why interRAI

interRAI is an international collaborative organization that develops and maintains comprehensive assessment systems for individuals receiving health and social care services. The term 'interRAI' stands for "International Resident Assessment Instrument."

interRAI assessment systems build a picture of a person's health and wellbeing. These assessments cover a wide range of domains, including physical health, mental health, social support, activities of daily living, and quality of life. The information gathered through interRAI assessments is used to support clinical decision making, care planning, and quality improvement in healthcare settings.

In New Zealand, six assessments are used nationally. These are:

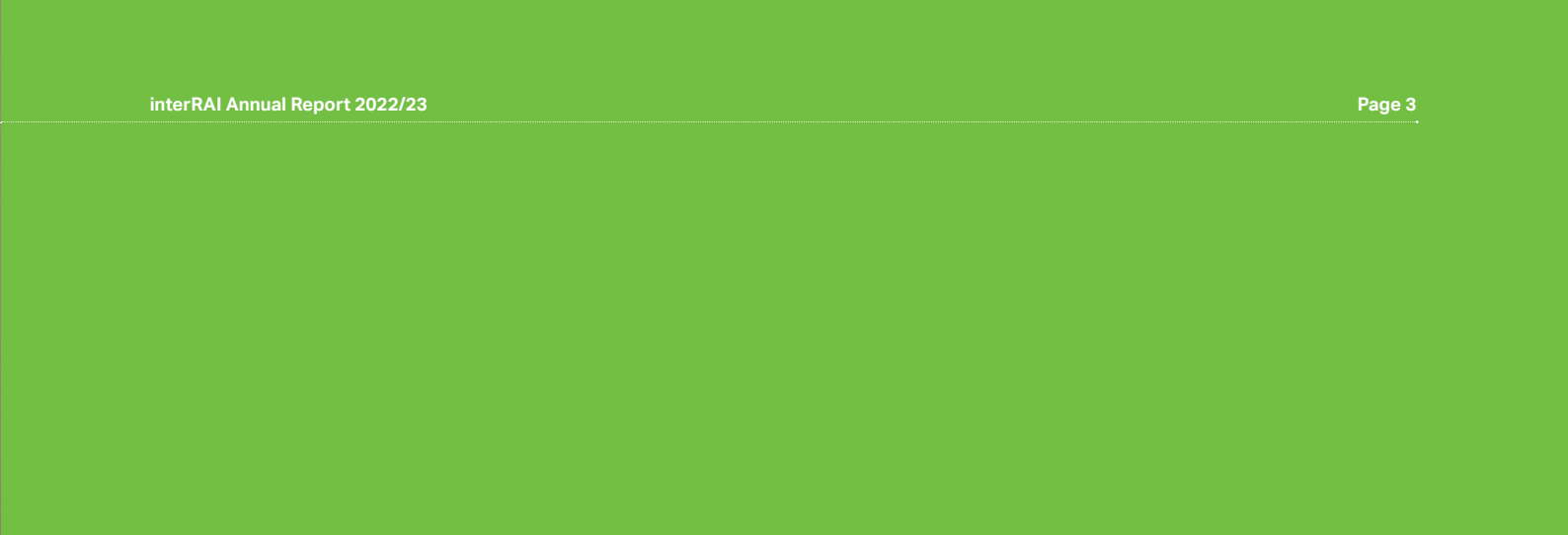
<b>Contact Assessment</b> 	<b>Home Care assessment</b> 	<b>Community Health Assessment</b> 
<b>Long Term Care Facilities assessment</b> 	<b>Palliative Care Assessment</b> 	<b>Acute Care assessment</b> 

Pilot programmes are underway for two further assessments. These are:

<b>Community Mental Health assessment</b> 	<b>Check-up Self-Report assessment</b> 
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Read more about the pilot programmes on page 9.

The assessments allow for consistent data collection across care settings. The information collected is anonymised and added to our national data warehouse. This provides a rich and detailed dataset that is used in health research and policy making.



interRAI Team Days 2023

interRAI Educators are the people who train hundreds of interRAI assessors each year.





# Where we've come from, where we're going

**interRAI assessments were first piloted in New Zealand in 2004. By 2008, the success of the pilot programmes supported a national rollout of the assessments, and implementation began.**

By 2012, all District Health Boards were using interRAI assessments for older people who needed home and community support services.

By 2015, all aged residential care facilities were using interRAI assessments to support the care of their residents. At this time, the interRAI Services business unit was created within Central Region's Technical Advisory Service, a DHB-owned shared services organisation which is now part of Te Whatu Ora.

A service design review process was initiated in 2020 to ensure future-proofing of interRAI Services. The resulting report made a range of recommendations for improvement, and the interRAI Services team immediately set to work putting the recommendations into practice.

Key among the recommendations was the development of a culturally appropriate assessment model. In 2022, a national engagement process with interRAI consumers and providers yielded a new model for culturally appropriate assessment. The implementation of this model is now underway.

In July 2022, Central Region's Technical Advisory Services (TAS) became part of the new national health agency, Te Whatu Ora – Health New Zealand. The interRAI Services business unit became part of the Service Improvement and Innovation group.

interRAI Services is now looking forward to new initiatives as part of Te Whatu Ora – working together with colleagues across the motu to deliver better assessment, better care and better outcomes through clinical assessment for New Zealanders.



Working with colleagues across the motu to deliver high quality clinical assessment



# Who we are and how we work

The interRAI Services business unit is part of Te Whatu Ora – Health New Zealand, and sits within the Service Improvement and Innovation group.

## The interRAI Leadership Advisory Board

The work of interRAI Services is steered by the interRAI Leadership Advisory Board. The board is one part of the interRAI governance ecosystem, together with the interRAI Network. The iLAB has a specific focus on responsiveness to Māori, service performance and demand, clinical excellence, technology, and data governance.

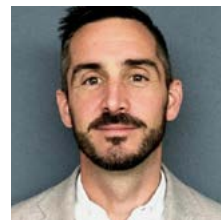
### iLAB members:



**Dr Nigel Miller**  
(Chair)



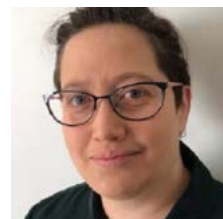
**Catherine Cooney**



**Dr Eamon Merrick**



**Karen Evison**  
(Ngai Tahu)



**Kahli Elvin**  
(Ngāti Ranginui)



**Prof Ngaire Kerse**

The iLAB regularly reports on their progress to Te Whatu Ora Chief Executive, Fepulea'i Margie Apa; and Te Aka Whai Ora – Māori Health Authority, Chief Executive, Riana Manuel.

## The interRAI Network

The interRAI Network is made up of key stakeholder groups, subject matter experts and consumer representatives. These include the Nursing Leadership Group for Older Persons, Kaupapa Māori health service providers, consumer representatives, Tumu Whakarae National Māori Strategic Reference Group, the ARC Steering Group and the interRAI Research Network.

## The interRAI Research Network

With research interest in interRAI data ever-growing, a motivated group of academics, clinicians and interRAI staff have formed the interRAI Research Network. Led by Professor Gary Cheung and supported by staff from interRAI Services, the network is a place to incubate and nurture new ideas, to allow members to hear presentations on colleagues' research, to team up, and to alert others to funding opportunities. All of this links to a central idea – to conduct research to improve the life, health and wellbeing of older people in New Zealand.

This group is busy and active. See some of their recent research outputs on pages 18 and 19.

### interRAI Research Network members

#### University of Auckland

- Dr Kebede Beyene
- Kartika Bhaskaran
- Dr Amy Chan
- Assoc Prof Gary Cheung (Chair)
- Dr Sarah Cullum
- Joyce Guo
- Dr Joanna Hikaka
- Prof Ngaire Kerse
- Dr Sue MacDonell
- Dr Etuini Ma'u
- Dr Leah Palapar
- Dr Kathy Peri
- Cristian Andres Gonzalez Prieto
- Dr Claudia Rivera Rodriguez
- Dr Brigid Ryan
- Dr Ryan Sandiego
- Dr Ruth Teh
- Edith To
- Dr Zhenqiang Wu

#### Auckland University of Technology

- Assoc Prof Matthew Carroll

#### Massey University

- Prof Fiona Alpass
- Dr Karen Mumme
- Dr Rosie Gibson
- Dr Anja Roemer
- Prof Carol Wham

#### University of Otago

- Rebecca Abey-Nesbit
- Assoc Prof Yoram Barak
- Ulrich Bergler

- Will Bowman
- Sarah Colhoun
- Fraser Harrold
- Assoc Prof Hamish Jamieson
- Dr Francesc March de Ribot
- Pauline Norris
- Dr Xaviour Walker
- Prof Debra Waters

#### University of Technology Sydney

- Dr Eamon Merrick

#### Te Whatu Ora - Health New Zealand

- Dr Jackie Broadbent
- Dr Katherine Bloomfield
- Raenna Chan
- Iona Collins
- Karen Goymour
- Costa Karavais
- Timothy Russell
- Kevin Sharkey
- Gabrielle Stent
- Jason Theobald
- Lucy Weston-Taylor

#### Private sector

- Irihapeti Bullmore
- Sangeeta Dey
- Roy Hoerara
- Prof Heather McLeod
- Dr Joanna MacFarlane
- Dr Kathleen Potter

#### interRAI Fellows

- Dr Brigitte Meehan
- Dr Nigel Millar



# Our achievements this year

In 2022/23, we have continued our progress towards meeting the recommendations made in the Service Design Report published in 2020. The report's recommendations are arranged into three key areas of focus, or horizons, incorporating ten specific recommendations. Three recommendations, 1, 2 and 7a, have been chosen as highest priority for this process.

Additionally, interRAI Services staff have been building connections and exploring the opportunities afforded by being part of the new national health organisation, Te Whatu Ora.

	Horizon 1: Mature Commercial Model	Horizon 2: Optimise Current Assessment Model	Horizon 3: Extend Assessment Capabilities
Commercial Construct	1 Mature Service Management & Commercial Construct		7 Review Commercial Model
Outcomes & Benefits			
Governance, Roles & Responsibilities			
Delivery & Commercials	2 Revise Governance & Decision Making		
Efficiency & Effectiveness – Assessment	7 <sup>a</sup> Build Culturally Appropriate Assessment Model	3 Improve Consumer Access to Assessment	
		4 Improve Education & Support	7 <sup>b</sup> Build National Assessment Platform
Efficiency & Effectiveness – Data & Insights		5 Improve Data Service Confidence & Maturity	8 Extend Data Services
Technology Solutions		6 Address Key Technology Impediments	9 Optimise Technology Support

## Horizon 1: Mature commercial model

### Build Culturally Appropriate Assessment Model

The development of a Culturally Appropriate Assessment Model aligns with recommendation 7a, build culturally appropriate assessment model. In March 2023, we released the report, Developing a Culturally Appropriate Assessment Model. Working in collaboration with Francis Health (now part of Deloitte), we engaged across the motu with health providers, assessors, and most importantly kuia and kaumatua, to build and test the new model.

The next phase of this important work, the implementation process, is now underway.

## Horizon 2: Optimise current assessment model

### Improve consumer access to assessment

The national implementation of the interRAI Acute Care assessment, being used in hospitals in conjunction with ACC, continues at pace.

The Acute Care assessment is a brief assessment used in inpatient settings for patients on ACC's Non-Acute Rehabilitation (NAR) pathway.

Assessors from across the motu are training with us to prepare to deliver this assessment nationally. The target for implementation for all Districts is December 2023, and we are working closely with ACC and Te Whatu Ora colleagues to ensure we succeed in meeting this target.

### Plan, develop and introduce new assessment tools

#### Community Mental Health pilot

A pilot programme to assess the viability of a new assessment type, the Community Mental Health (CMH) Assessment, has begun this year.

interRAI Services staff are collaborating with mental health Needs Assessment Coordination Services (NASCs) in three Te Whatu Ora Districts. NASC Staff from Waitaha Canterbury, Hauora A Toi Bay of Plenty and Te Matau a Māui Hawke's Bay report back to the CMH Steering Group each month on their progress in training assessors and delivering the assessments to health consumers in their Districts.

This pilot has been under pressure because of staff availability in the Districts. National workforce shortages mean it is a challenge for NASC staff to prioritise contributing to the pilot alongside 'keeping the lights on' in their day-to-day work. Nonetheless, Districts are committed to making sure the pilot succeeds and see real value in testing the assessment for use.

#### Check-Up Self-Report assessment pilot

Working with a kaupapa Māori health provider in Rotorua, Korowai Aroha, we are conducting a pilot of the Check-Up Self-Report assessment (CU-SR).

A new-to-New Zealand interRAI assessment, the Check-Up Self-Assessment is targeted to koeke (older Māori) in the Lakes area (previously known as the Lakes District Health Board). It empowers people and communities to take charge of their own health, and become active participants in the assessment and referral process. The pilot seeks to determine whether the CU-SR can effectively identify unmet needs and enable earlier intervention for koeke not known to NASC services.

A research study to evaluate the effectiveness of the pilot is being prepared with the aid of interRAI Research Network member Dr Joanna Hikaka. This study is scheduled for completion in July 2024.

## Horizon 3: Extend assessment capabilities

### Improve education and support

#### *interRAI Learning & Development*

Our learning system, interRAI Learning & Development, continues to be refined and optimised to support both assessors and interRAI Services staff. Now established as our 'hub' for both online learning and as an assessor knowledge base, iL&D is a space for assessors to learn, upskill, take examinations and refer to reference materials. The system supports assessors at all stages of their interRAI assessor journey.

The flexibility of iL&D's underlying software system allows for improvements to administrative processes. The interRAI administration team have been using the system to their advantage to automate and streamline processes. This saves time for our staff, and for assessors themselves, improving the overall education experience.

#### Address key technology impediments

The interRAI software platform, Momentum, is scheduled to move to a Platform as a Service (PaaS) delivery model in July 2023. This major change will move Momentum's host site from our previous provider, Canterbury District's IT service, to our software vendor, Civica. It will also bring our software helpdesk in house. A new support analyst has been recruited to fulfil this function and provide a 'no wrong window', seamless support service to Momentum users.

In addition to delivering improved security and an enhanced user experience, the PaaS model makes interRAI data ready to integrate with the National Data Platform being developed by Te Whatu Ora.

## International collaboration

In February 2023, interRAI Services welcomed international colleagues from the Instrument and Systems Development (ISD) committee, a subset of the international interRAI consortium.

ISD members spent time making connections with local interRAI stakeholders, talking with interRAI Services staff, members of our research network, and held a masterclass for interRAI educators.

Members were very interested in the Culturally Appropriate Assessment Model, and will watch the implementation with interest and a view to replicating the process in their home countries.



Members of the Instrument and Systems Development committee visited interRAI New Zealand



# Our data offerings for the health sector

## interRAI offers a comprehensive data set because:



**Every resident** in aged residential care and every person receiving publicly funded home support services **in New Zealand, receives interRAI assessments**



**All interRAI assessments** in New Zealand are completed on a single national software platform, and **feed into a single data warehouse**



Our dedicated data and analysis team **conduct quarterly reviews** on data quality, and **report annually on their findings**



After comprehensive training is complete, **interRAI Services staff monitor and support assessor competency** with annual evaluations and quality reviews of completed assessments.

interRAI data powers an ever-growing body of academic research. An overview of anonymised data is made publicly available on our website, using our interactive data visualisation. The visualisation allows users a customised view of interRAI data according to user needs. Users may filter data nationally, regionally, by assessment type and by selected demographic types. It also includes embedded definitions for diseases, outcome scales and clinical assessment protocols (CAPs).

Organisations and individuals regularly contact our data and analysis team to make more specific interRAI assessment data requests. Additionally, regular data reporting is provided for Districts, aged residential care facilities, and home care providers across the motu. These reports, including benchmarking and quality indicators, form the basis for service improvements across the sector.

**See the data visualisation in action at [interRAI.co.nz/data](https://interRAI.co.nz/data)**



interRAI data powers an ever-growing body of academic research.



# Who gets assessed?

Each year we take a data snapshot of how interRAI assessments are being used in New Zealand, with a particular focus on equity. Interrogating our assessment data in this way helps us to better understand the overall population of people who are assessed, and how interRAI assessments are being used across the country.

## Characteristics of older people based on assessments

As has been the case since interRAI Services began to produce this demographic data, females continue to be assessed in higher numbers than males – except for the Palliative Care assessment type. In 2022/23 for the first time, more Palliative Care assessments were completed for males than females. The difference was slight, with 2% more assessments for males (51%) than females (49%).

It is also worth noting that the number of assessments completed for males belonging to the group Pacific Peoples and males of ethnicities grouped as “Other” was greater than the number of assessments completed for females belonging to Pacific Peoples and females of ethnicities grouped as “Other”, respectively.

Table 1: Proportion of assessments completed in 2022/23 by ethnicity and gender

Gender	Ethnicity	Assessment type			
		Contact Assessment	Home Care	Long Term Care Facilities	Palliative Care
Female	Māori	3.54%	5.06%	3.02%	4.38%
	Other	56.25%	46.62%	57.51%	42.31%
	Asian	3.67%	3.58%	2.47%	1.62%
	Pacific peoples	1.15%	2.73%	1.27%	0.69%
Total		64.61%	57.99%	64.27%	49.00%
Male	Māori	2.06%	3.66%	2.23%	3.92%
	Other	30.75%	33.99%	31.02%	45.08%
	Asian	1.93%	2.50%	1.51%	1.00%
	Pacific peoples	0.65%	1.87%	0.96%	1.00%
Total		35.39%	42.01%	35.73%	51.00%

## Numbers of assessments completed

In total, more interRAI assessments were completed in 2022/23 than in 2021/22.

Fewer Contact Assessments were completed in 2022/23 than in 2021/22. The number of Contact Assessments completed peaked in 2019/20 as a result of COVID-19, and has decreased each year since this peak. The number of Contact Assessments completed in 2022/23 is significantly lower than numbers of Contact Assessments completed in any year before the pandemic.

By contrast, there were more Home Care assessments completed in 2022/23 than in 2021/22. The total number of Home Care assessments completed is now similar to the number completed before the pandemic.

We see a decrease in the number of Long Term Care Facilities and Palliative Care assessments being completed in 2022/23 when compared to 2021/22. This year’s figures are similar to those seen before the pandemic began.

Figure 1: Number of assessments by year





Assessments completed by ethnicity and age

These graphs show the age distributions of those assessed by ethnicity group. The ages used are the age of the person on the date of assessment. For example, Contact Assessments completed on people in the Other ethnicity group. 1% of the assessments were completed on those under 50 years of age, 2% on those aged 50-59, 7% on those aged 60-69, 26% on those aged 70-79, 48% on those aged 80-89 and 16% on those aged 90 or older.

Across all assessment types, the greatest number of assessments were completed on those in the Other ethnicity group. The majority of these assessments were completed on people of European and New Zealand-European ethnicity, with smaller numbers completed on those of Middle Eastern, African and South American ethnicities.

interRAI assessments completed on people in the Māori and Pacific Peoples groups, had an age distribution that was younger than the age distribution of assessments completed on people in the Asian and Other ethnicity groups. This is shown in the median age at assessment of assessments completed on Māori and Pacific Peoples.

Across all assessment types, Māori is the ethnicity group with the youngest median age.

The age distribution of interRAI assessments completed on people from the Asian and Other ethnicity groups are similar across all assessment types.

The age distribution of interRAI assessments completed on people from the Māori and Pacific Peoples groups are similar across all assessment types, apart from Palliative Care. This assessment type shows a significantly higher proportion of assessments completed on Pacific Peoples aged 70-79 and a lower proportion completed on those aged 60-69, compared to those completed on Māori.

Of all assessment types, Home Care assessment data shows the highest proportion of assessments completed on people who are not in the Other ethnicity group, with 19% of the assessments completed on people in the Pacific Peoples, Māori and Asian groups. This is compared to 13% of Contact Assessment assessments, 11% of Long Term Care Facility assessments, and 13% of Palliative Care assessments.

Figure 2: Assessments completed by ethnicity and age, 2022/23

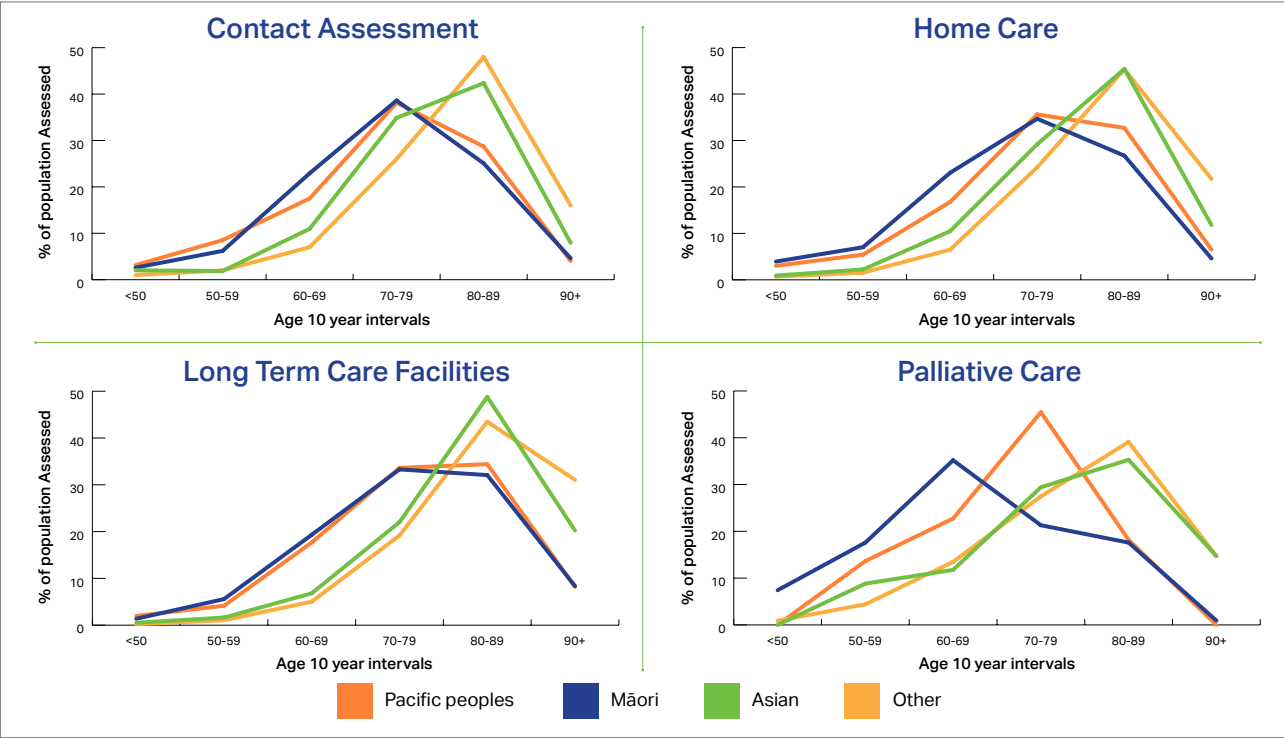


Figure 3: Median age of people assessed, by ethnicity 202/23

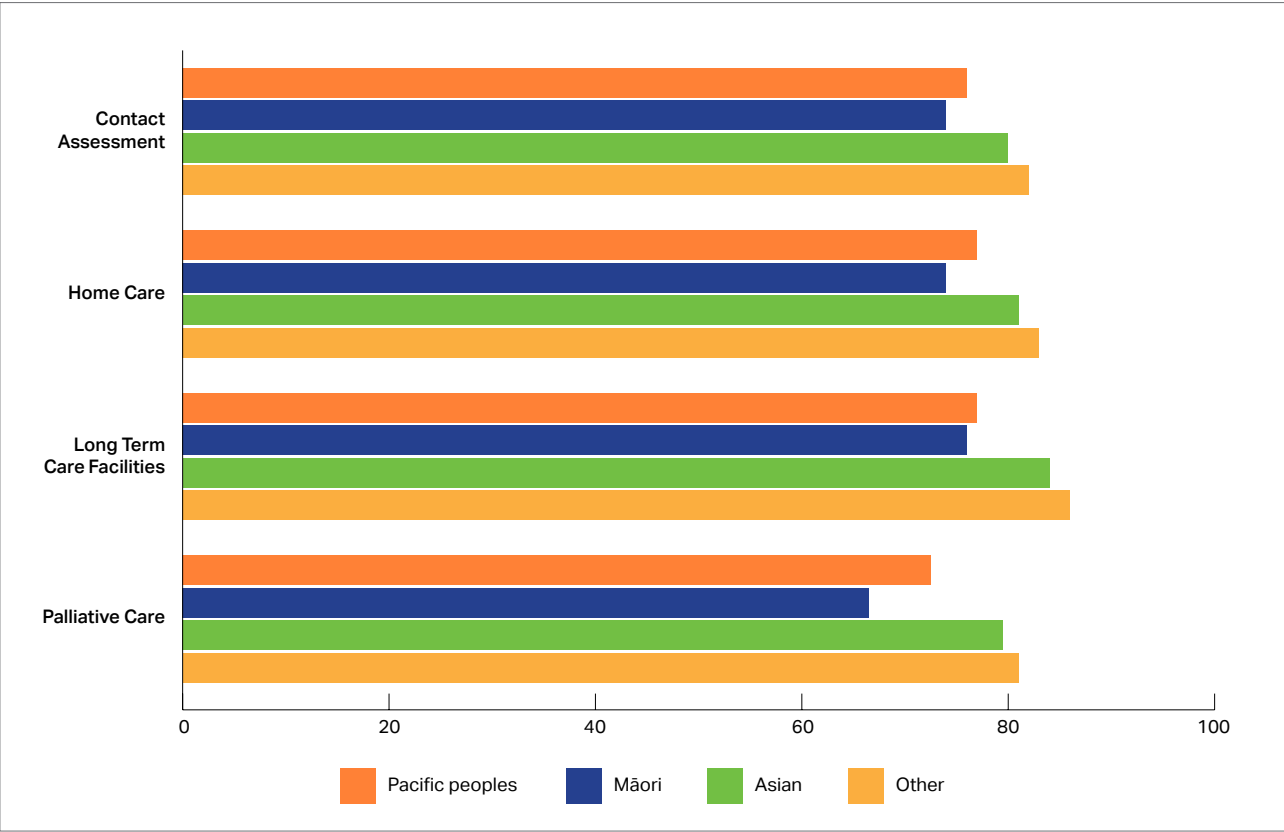
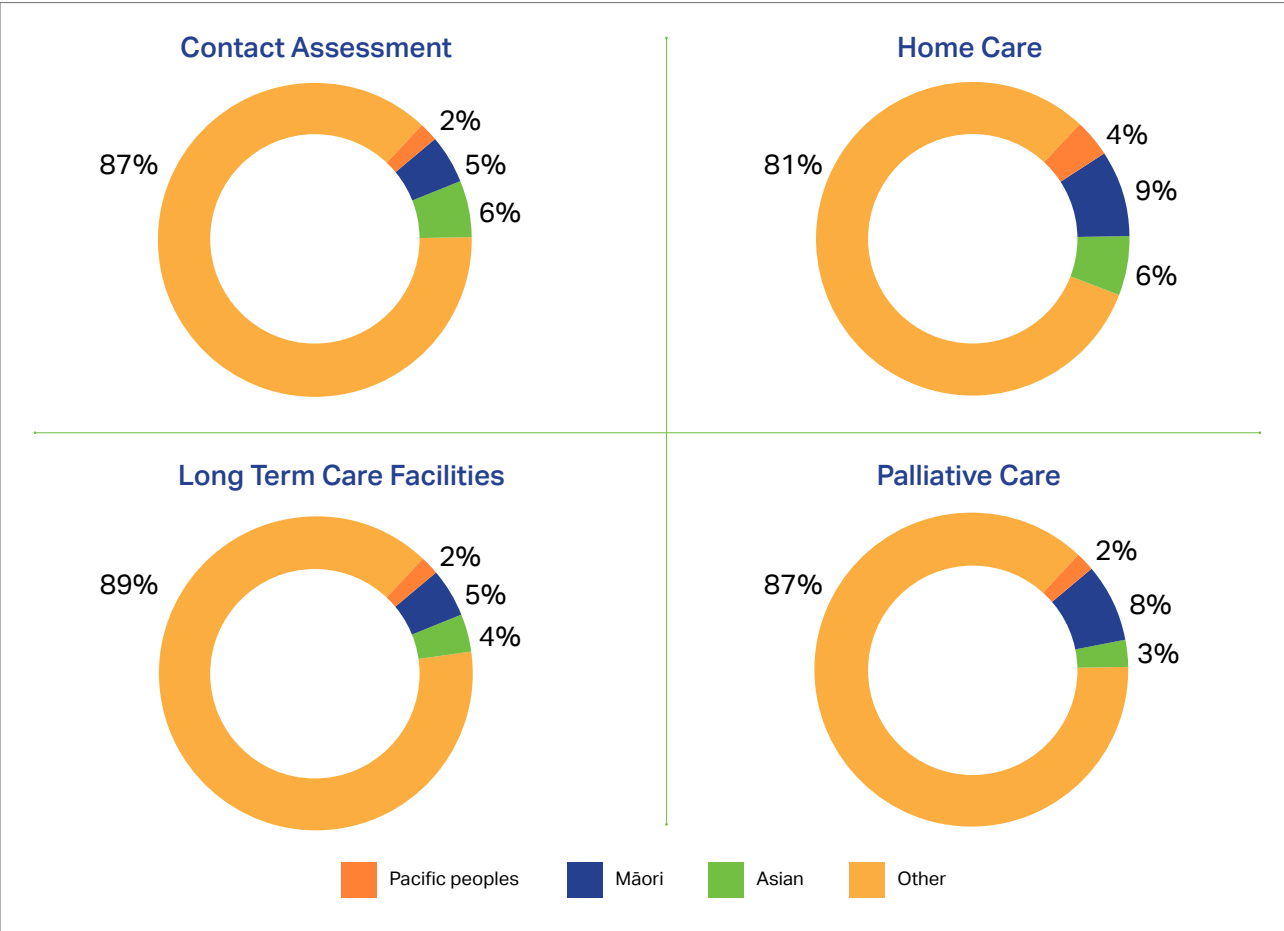
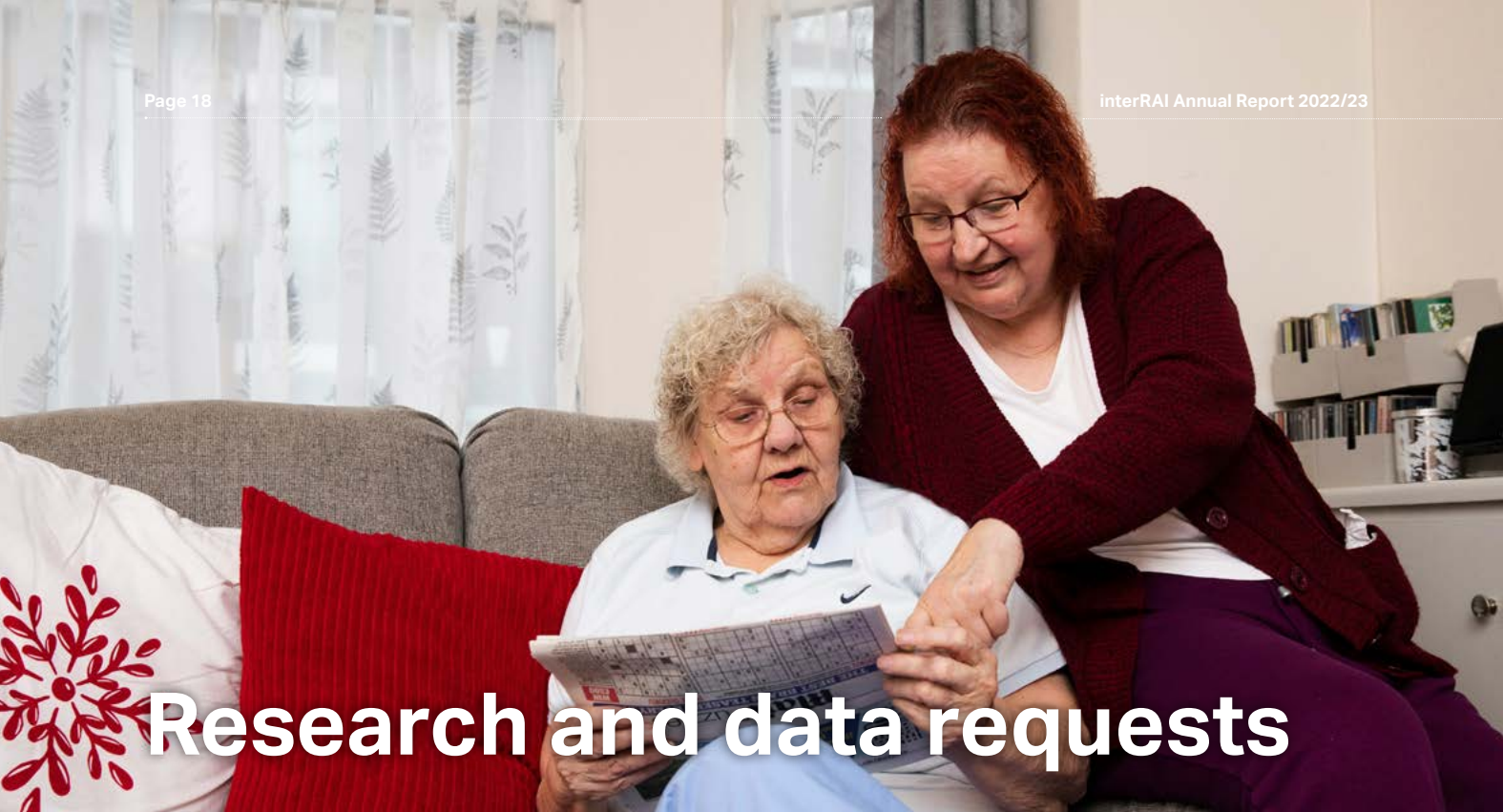


Figure 4: Ethnicity breakdown for interRAI assessments by type (%) 2022/23





## Research and data requests

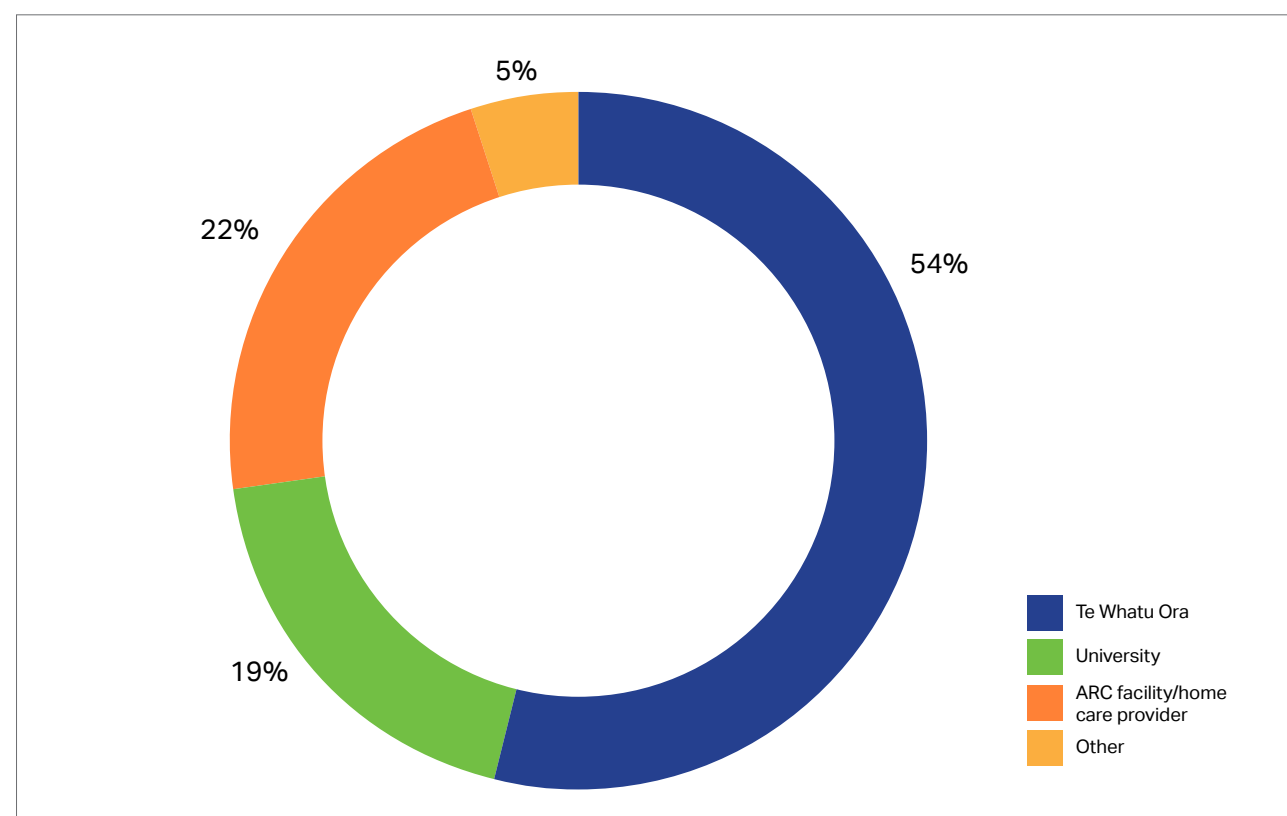
### Interest in interRAI data continues to grow

interRAI continues to be an attractive source of data and insights for academic research, and for decision making across the health sector.

A greater proportion of total requests have come from within Te Whatu Ora in 2022/23 compared to in 2021/22. This likely reflects the movement of functions from other agencies into Te Whatu Ora.

There was also a greater proportion of requests from universities, showing the continued interest in interRAI data for research.

**Figure 5: interRAI data requests by requestor type (%) 2022/23**



## Research published by members of the interRAI Research Committee in 2022/23

Abey-Nesbit, R., Jamieson, H., Bergler, U., Kerse, N., Pickering, J. W., & Teh, R. (2023). Chronic health conditions and mortality among older adults with complex care needs in Aotearoa New Zealand. *BMC Geriatrics*, 23(1). <https://doi.org/10.1186/s12877-023-03961-8>

Burholt, V., Peri, K., Awatere, S., Balmer, D., Cheung, G., Daltrey, J., Fearn, J., Gibson, R., Kerse, N., Lawrence, A. M., Moeke-Maxwell, T., Munro, E., Orton, Y., Pillai, A., Riki, A., & Williams, L. A. (2023). Improving continence management for people with dementia in the community in Aotearoa, New Zealand: Protocol for a mixed methods study. *PLOS ONE*, 18(7), e0288613. <https://doi.org/10.1371/journal.pone.0288613>

Hikaka, J., Abey-Nesbit, R., McIntosh, B., Schluter, P. J., Nishtala, P. S., Scrase, R., & Jamieson, H. A. (2023). Utility of Big Data to Explore Medication Adherence in Māori and Non-Māori Community-Dwelling Older Adults with Heart Failure in Aotearoa New Zealand: A Cross-sectional Study. *Drugs & Aging*. <https://doi.org/10.1007/s40266-023-01044-2>

Merrick, E., Shannon, K., Neville, S., Bail, K., Vorster, A., & Fry, M. (2023). A cross-sectional description of the health characteristics of cognitively impaired older adults. *Australasian Journal on Ageing*, 42(1), 241-245. <https://doi.org/10.1111/ajag.13152>

Mentzel, C., Glue, P., Greco, P., & Barak, Y. (2023). Analysing Realistic effects of modifiable risk factors for dementia in a large National Dataset. *Archives of Gerontology and Geriatrics*, 105, 104852. <https://doi.org/10.1016/j.archger.2022.104852>

Mentzel, C., Taube, C., Glue, P., & Barak, Y. (2023). Older adults with schizophrenia and dementia: Analysis of a national dataset. *Australasian Journal on Ageing*. <https://doi.org/10.1111/ajag.13187>

Nishtala, P. S., Pickering, J. W., Bergler, U., Mangin, D., Hilmer, S. N., & Jamieson, H. A. (2023). Post hoc analyses of a randomized controlled trial for the effect of pharmacist deprescribing intervention on the anticholinergic burden in frail Community-Dwelling older adults. *Journal of the American Medical Directors Association*. <https://doi.org/10.1016/j.jamda.2023.05.014>

Pickering, J. W., Scrase, R., Troughton, R. W., & Jamieson, H. A. (2022). Evaluation of the added value of Brain Natriuretic Peptide to a validated mortality risk-prediction model in older people using a standardised international clinical assessment tool. *PLOS ONE*, 17(11), e0277850. <https://doi.org/10.1371/journal.pone.0277850>



# interRAI Services Management Team

## Te Whatu Ora



**Margaret Milne**  
Group Manager  
interRAI Services



**Sally Aydon**  
Manager interRAI  
Education and  
Support Services



**Gabrielle Stent**  
Principal Advisor  
interRAI Services



**Warwick Long**  
Manager  
interRAI Software  
Services

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