



interRAI™
New Zealand

Annual Report 2023/24



Health New Zealand
Te Whatu Ora



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:

- 1,327,555** completed assessments in the interRAI data warehouse.
- 80,324*** assessments completed in aged residential care facilities in 2023/24.
- 36,843*** Home Care Assessments in 2023/24.
- 3,721*** competent assessors.
- 685*** aged residential care facilities.
- 6** assessment instruments.

* As at June 2024

- Developed by experts from over 40 countries.
- Delivered by interRAI Services, part of Health New Zealand 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

Assessment instruments in New Zealand:

- Home Care Assessment
- Contact Assessment
- Community Health Assessment
- Palliative Care Assessment
- Long Term Care Facilities Assessment
- Acute Care Assessment

Chair's foreword



On behalf of the interRAI Leadership Advisory Board, I would like to thank the dedicated team at interRAI Services for their continued success in delivering the education, software and support needed to provide better health outcomes for vulnerable New Zealanders.

It is exciting to see the continuous growth in the use of interRAI assessments in Aotearoa New Zealand. The data gathered from assessments is used in a multitude of ways but it is important that we keep in sharp focus the primary purpose of assessment: to advise and to support the health of vulnerable people. Although there is extensive discussion about the challenges posed by an ageing population and how it can impact our economy, healthcare and support systems, we must first work to ensure older people have access to the most appropriate care to meet their social and clinical needs. To achieve this, care plans should be personalised based on the needs of each individual, as is the principle of the interRAI assessment.

Over the past year, there has been a strong focus on improving equity in both access to and the process of assessment. The Check-Up Self Report (CU-SR) assessment and the Culturally Appropriate Assessment Model (CAAM) are two projects currently in pilot which aim to better the assessment process for kaumātua.

interRAI Services provides a nationally consistent training and education process so that no matter where you are in the country, your assessment will be completed to the same standard and will serve as an important information pillar for our new unified health system. Many groups within Health New Zealand Te Whatu Ora are using interRAI assessment data to plan strategically for a health system that is safe, effective, and efficient for everyone.

Significant progress has been made over the past year to enhance the systems that manage this data. This includes implementing a modern cloud-based assessment platform and planning for the integration of this data into the new National Data Platform, which will facilitate comprehensive analysis alongside other health information. Tight security and strict processes to maintain privacy are a critical part of this.

Thanks to the contribution of many people, the standard assessment process we have in Aotearoa New Zealand for older people is robust and equipped for the future. I want to thank the many people involved, not least those older people and their families who have willingly taken part in our pilots and the many assessors who have championed the use of assessments. Ageing is part of our future, and it is heartening to know that our healthcare system is anchored by its excellence in assessment and supported by valuable innovations in research derived from high quality interRAI data.

Dr Nigel Millar
Chair – interRAI Leadership Advisory Board

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interRAI is New Zealand's primary assessment for vulnerable people in the community and in aged residential care. interRAI assessments inform clinical decision-making, care planning and resource funding and allocation.

Why interRAI

interRAI is the trademark name for the suite of meticulously researched clinical assessments that build a picture of a person's health and wellbeing needs.

interRAI assessments cover a wide range of domains, including physical health, cognitive function, mental health, social support, activities of daily living, environmental factors, carer stress, 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.

The interRAI international consortium develops, maintains and reviews assessment instruments using rigorous research standards. They license member countries to use interRAI assessments. The consortium has developed assessment instruments for children, youth and adults, across a broad range of healthcare settings. interRAI Services, a business unit within Health New Zealand Te Whatu Ora is licensed to provide six assessments for use in New Zealand.

Contact Assessment 	Home Care Assessment 	Community Health Assessment 
Long Term Care Facilities Assessment 	Palliative Care Assessment 	Acute Care Assessment 

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

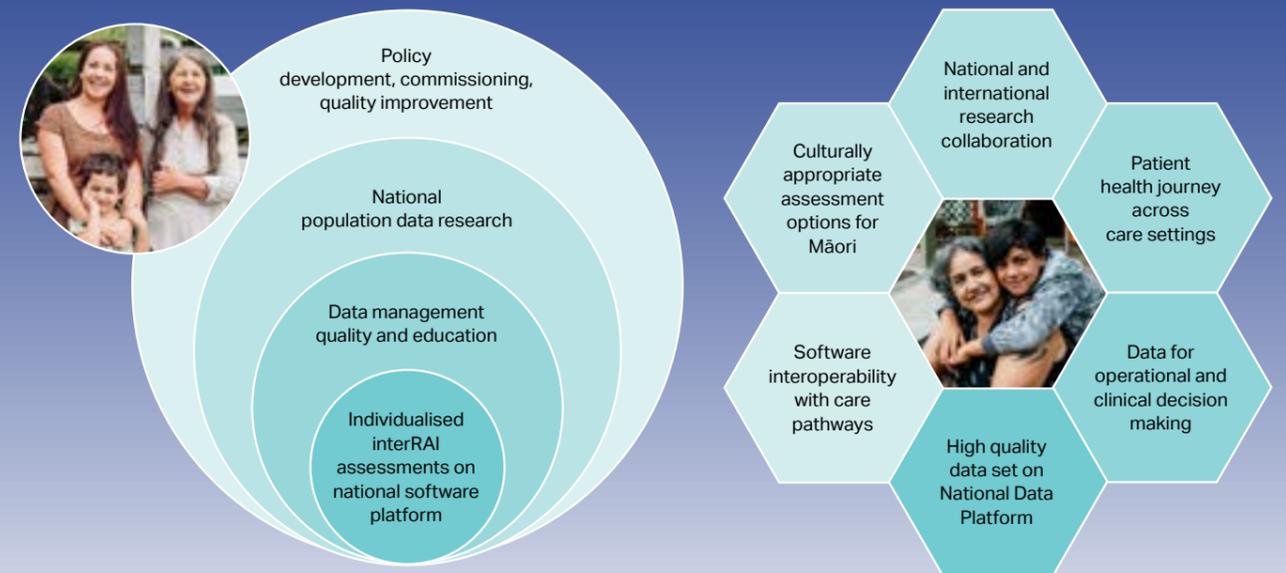
Community Mental Health Assessment 	Check-up Self-Report Assessment 
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interRAI is New Zealand's primary assessment for vulnerable people living in the community, and in aged residential care. The assessments allow for consistent data collection across care settings. The information collected is anonymised and added to the national data warehouse. This provides a rich and detailed dataset that is used in health research and policy making.



interRAI member countries and users

interRAI International is a not-for-profit organisation consisting of a collaborative network of clinicians and researchers from over 40 countries.



Better assessment, Better care, Better outcomes



Governance

The interRAI Services business unit is part of Health New Zealand and sits within the Planning, Funding and Outcomes directorate.

The interRAI Leadership Advisory Board

The interRAI Leadership Advisory Board (iLAB) advises and makes decisions about the strategic direction of interRAI Services. The board is one part of the interRAI advisory ecosystem, together with the interRAI Network. The iLAB has a specific focus on responsiveness to Māori health equity, service performance and demand, clinical excellence, technology, and data governance.

iLAB members:



Dr Nigel Millar
(Chair)



Catherine Cooney



Dr Eamon Merrick



Karen Evison
(Ngai Tahu)

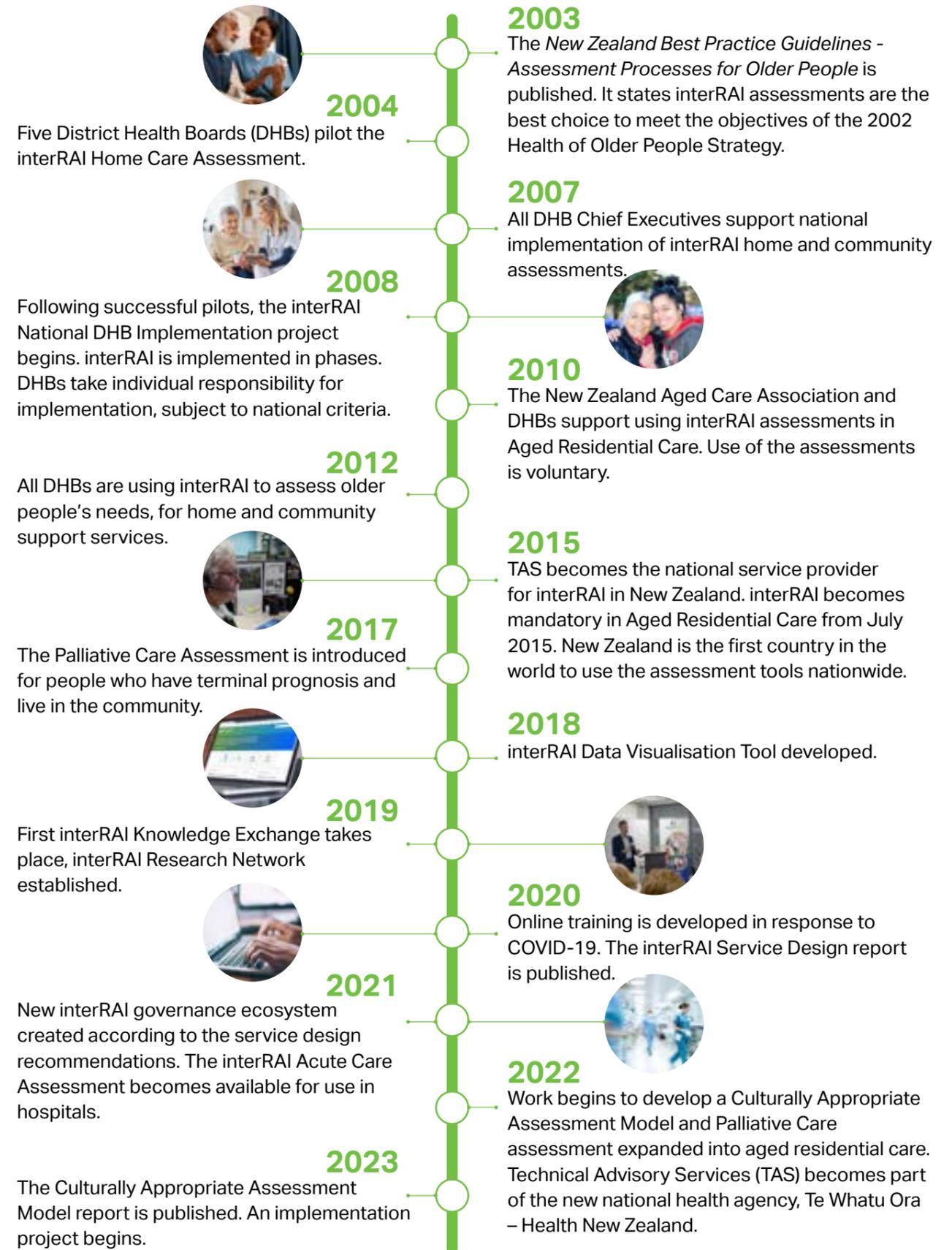


Kahli Elvin
(Ngāti Ranginui)



Professor Ngaire Kerse

interRAI Timeline



2023/24 year in review

1,520

new assessors

131,661

assessments completed

Check-Up Self-Report Assessment Tool Pilot

A pilot is currently in progress to determine the usefulness of the interRAI Check-Up Self-Report to improve health outcomes for kaumātua and kuia in the Lakes area.

The specific aim of the pilot project is to facilitate access for kaumātua and kuia to health services at the right time, and ahead of a health crisis. The project received ethics approval in December 2023 and is registered with the Australia New Zealand Clinical Trials Registry (ANZCTR). interRAI Research Network member Dr Joanna Hikaka is working closely with Korowai Aroha paeārahi, interRAI educators, and the Needs Assessment Service Coordination (NASC) team to evaluate the effectiveness of the Check-Up Self-Report assessment tool.

This is the first interRAI assessment tool to be piloted in New Zealand where the person completes the assessment themselves with the guidance, if necessary, of non-clinical personnel. There is an opportunity to reach a wider cohort of people, perhaps not well known to health services and reduce referral times for those in need. This tool could positively influence the health journey for people in primary health services. The project group looks forward to concluding the pilot with Dr Hikaka's findings in late 2024.

Addition of Tenure to the interRAI Home Care Assessment

Understanding the housing tenure of older people, particularly those in rented dwellings, helps clinicians understand impacts to health and social wellbeing. With a strong belief that such issues must be considered in the development of care plans, interRAI New Zealand has incorporated housing tenure into the interRAI Home Care Assessment. Tenants and people living in rented dwellings have higher health risks, higher probabilities of social isolation and less ability to make home modifications for their health. Some supports and home modifications are more difficult to access when a patient does not own their own home. The addition of two new tenure-associated items reflects New Zealand's unique rental sector and interRAI New Zealand's commitment to ensuring assessments are fit for purpose. This addition will also result in new data points and an opportunity to gain a stronger understanding of how tenancy affects older people in New Zealand.

Culturally Appropriate Assessment Model (CAAM)

In March 2023, interRAI Services released *Developing a Culturally Appropriate Assessment Model*, a report in by Francis Health (now part of Deloitte). As part of this, they engaged with health providers, assessors, and most importantly kuia and kaumātua, to develop a new model. Using the recommendations from the report, interRAI Services formed an internal project group and developed a training package with external and subject matter expert input. The project steering group, members of whom include the Senior Advisor Whānau Voice, Te Aka Whai Ora staff, regional Needs Assessment Service Coordination (NASC) managers, the Chief Executive of Needs Assessment Coordination Association (NASCA) and interRAI staff, had input into the development of the survey/feedback forms for both participants and NASC assessors. The pilot phase is currently underway with participation from five districts.

Knowledge Exchange

interRAI New Zealand, in conjunction with the interRAI Research Network, held the 4th Annual Knowledge Exchange on 15 March 2024. The theme for this year was *Using interRAI data to Inform Health and Social Policy*. Researchers, clinicians, project working groups and NASCA were just some of the presenters who showcased the broad use of interRAI data.

Almost 200 people attended the event both in person and online to learn, ask questions and share insights into the important working being done both in New Zealand and internationally to improve health outcomes using interRAI data. Attendees included people in clinical management, needs assessors, aged residential care providers, researchers, policy advisors, data scientists and regulatory bodies such as the Health and Disability Commission (HDC) and New Zealand Aged Care Association (NZACA).

International Collaboration: knowledge sharing

As the global ageing population continues to grow, there is more demand on acute hospital care and the need for enhanced information sharing and communication across health sectors.

In the spirit of interRAI's core principles of knowledge sharing, this year interRAI Services has continued to expand its international network. New Zealand has distinguished itself as the first country globally to mandate the use of interRAI assessment tools nationwide, all within a single national software platform. Both interRAI Services' education programme and data offerings are robust and highly regarded.

In December 2023, the Australian Institute of Health and Welfare (AIHW) and the Canadian Institute for Health Information (CIHI) hosted a symposium in Canberra, inviting senior leaders and experts from Australia, New Zealand and Canada. The event fostered valuable discussions, addressing the growing need for improved health data management and best practice in the context of an aging population

Participants from interRAI New Zealand included Dr. Nigel Millar, interRAI Fellow and Chair of the interRAI Leadership Advisory Board, Dr. Brigette Meehan, interRAI Fellow, Margaret Milne, Group Manager, interRAI NZ and Gabrielle Stent, Principal Advisor, interRAI NZ.

This past year, interRAI had the privilege of hosting delegations from Australia and Singapore, both countries interested in learning more about how interRAI operates in New Zealand. In March, representatives from Singapore Agency for Integrated Care (AIC) joined interRAI NZ in Wellington. Their trip included visits to an aged residential care facility, NASC offices at Capital, Coast and Hutt Valley and workshops focusing on interRAI assessor education, assessment software and data analysis.

In April, interRAI welcomed researchers from the University of Queensland who were interested in using our experiences in New Zealand to inform a cost benefit analysis of mandated interRAI assessments in aged residential care (ARC) facilities in Australia. As interRAI New Zealand's global network of colleagues continues to grow, we value the opportunities for shared learning and productive dialogue.



Ms. Swanie Budiman, Manager; Ms. Lai Zin Ee, Senior Assistant Director; Ms. Kan Hong Qing, Assistant Director; Ms. Suvian Toh, Assistant Director from AIC in Wellington earlier this year.



Mariana Foxcroft (interRAI), Hariata Vercoe (CEO, Korowai Aroha), Sheryl Iraia (paeārahi, Korowai Aroha), Katrina Lamb (interRAI), Luisa De Seymour (interRAI) and Para Mātenga (paeārahi, Korowai Aroha).



GM Margaret Milne with 2024 Emerging interRAI Researcher Julie Daltry



Principal Advisor Gabrielle Stent speaking at the AIHW Symposium in Canberra

Optimising interRAI data: Inputs and Outcomes

Inputs for Data

Every person living in aged residential care, and every person who receives publicly funded home support services in New Zealand, must have an interRAI assessment. The primary aim of interRAI is to improve health outcomes by understanding a person’s needs and potential response to intervention. Although interRAI was not designed to be a research tool, the mandatory collection of interRAI data nationally has created a researchable dataset that is almost unparalleled in the world. To date, 1,327,555 assessments are stored in the interRAI data warehouse.

Digital Infrastructure

Software interoperability means all assessment information is recorded electronically in our interRAI assessment software and automatically sent to the national data warehouse. Data is securely encrypted and coded using NHI (National Health Index) numbers.

Ethics and Data Integrity

As part of every interRAI assessment, patients are asked to consent to their data being used for research. About 93% of people assessed provide consent. (Schluter P. J., 2016). interRAI Data Access Protocols set out seven Guiding Principles: Ownership, Kaitiaki/Guardianship, Privacy, Security, Confidentiality, Linking with other datasets and information about a breach of these Protocols.

Access to the data is provided through a Third-Party Data Request process that requires final approval by interRAI Services.

Education and Competency

All assessors must be health professionals who have assessment as part of their practicing certificate and have completed assessment-specific, competency-based interRAI training. They must complete annual exams and are encouraged to attend refresher classes. Their clinical judgement, combined with the methodology embedded in the assessment, ensures the assessment data is accurate, and the outputs accurately support individualised care planning as well as service, national and international benchmarking.

Quality Assurance Process

All users, including administrators, read only access and analysts, must complete education provided by interRAI Services that supports the use of the software and the responsibilities of accessing medical records. Access is limited by role and each role has specific functionality embedded. User access audits and regular competency checks are routinely undertaken to maintain data integrity.



Outcomes for Data

The anonymised, aggregated data forms a unique and powerful resource for research and policy. It informs health decisions across Health New Zealand and is in demand nationally and internationally in academic settings.

Analysing this large New Zealand-based dataset allows the early identification of people who are at elevated risk of adverse outcomes. The information obtained may be used to optimise and better target standard service delivery, allow regional comparisons and support better service delivery to individuals, their whānau, and wider society.

Data Visualisation Tool

In 2018 interRAI Services created the data visualisation tool, a Power BI dashboard which provides a free and accessible way to view interRAI data from the mandated assessments. The interactive nature of the tool means users are in control of the information and can select the level of detail they desire. The audience for the tool is a mix of policy makers, care providers, districts, researchers, and anyone interested in the health of older people.

Researchers

interRAI data provides clinical researchers with a unique opportunity to leverage routinely collected health information to gain deep insights into the medical and psychosocial needs of the populations assessed. This comprehensive understanding can guide the development of innovative strategies to address these needs and enhance the overall health outcomes for those within the interRAI system.

This year has also seen interRAI data play an integral part of the Aged Care Review conducted by Sapere Group for the Ageing Well Commissioning Team at Health New Zealand, where big data sets have been utilised to inform recommendations.

An abstract titled 'Using interRAI Assessments for Research' was published this year in the Journal of American Medical Directors Association (JAMDA) by New Zealand researchers and interRAI staff.

National Data Platform

Health New Zealand has developed a National Data Platform (NDP) to connect the health system’s multiple datasets into one common national platform. Work is underway to include interRAI data in the NDP. The NDP gives researchers and policy makers the opportunity to look at interRAI data alongside other datasets to promote more holistic, comprehensive understandings of health needs and healthcare in New Zealand.

Stakeholders

Health New Zealand receive quarterly reports for cross-district and national level comparisons. This data can be used to monitor compliance, understand resourcing and development of care pathways and reduce admission to ED and aged residential care.

Service providers such as ARC facilities and Home Care providers receive regular reports which benchmark their data against others. These metrics support continuous improvement because they allow for better resource planning, help identify areas for improvement and track the impact of any changes implemented.

Home and Community Service Providers (HCSS) are also becoming increasingly interested in interRAI data and how it can inform their knowledge of their population groups.

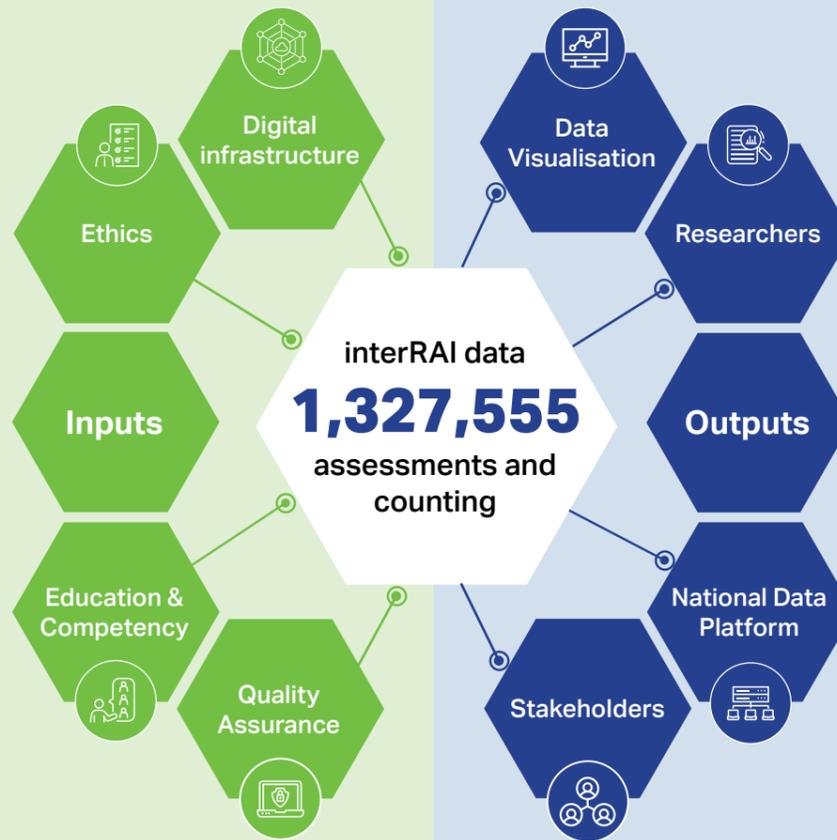
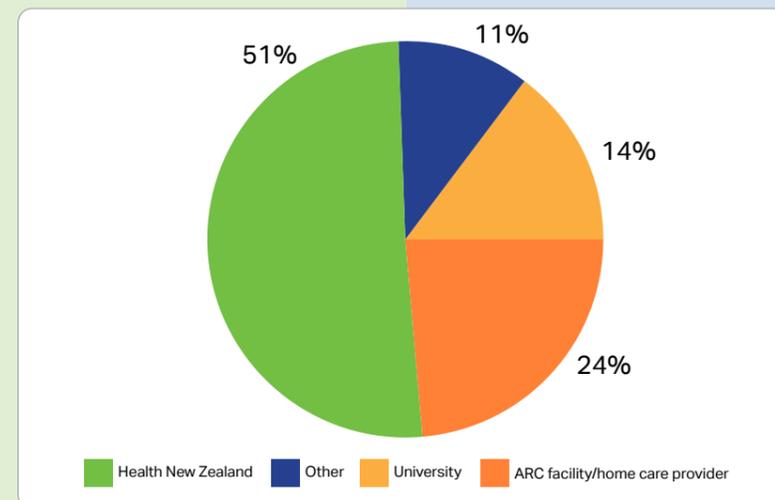


Figure 1: interRAI data requests by requestor type (%) 2023/24





interRAI Assessments in 2023/24

Each year interRAI Services takes a data snapshot of how interRAI assessments are being used in New Zealand, with a particular focus on equity. Analysing interRAI 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. This is just a sampling of the rich data that is gathered each year. For more, see interrai.co.nz/data

Data Quality

interRAI Services undertake a range of activities to ensure data quality. These include:

- Distance Learning Education
- Annual Methodology exams
- Skills Booster sessions for competent assessors
- Assessment Quality Reviews based on the Data Consistency Report
- Annual Data Quality Report

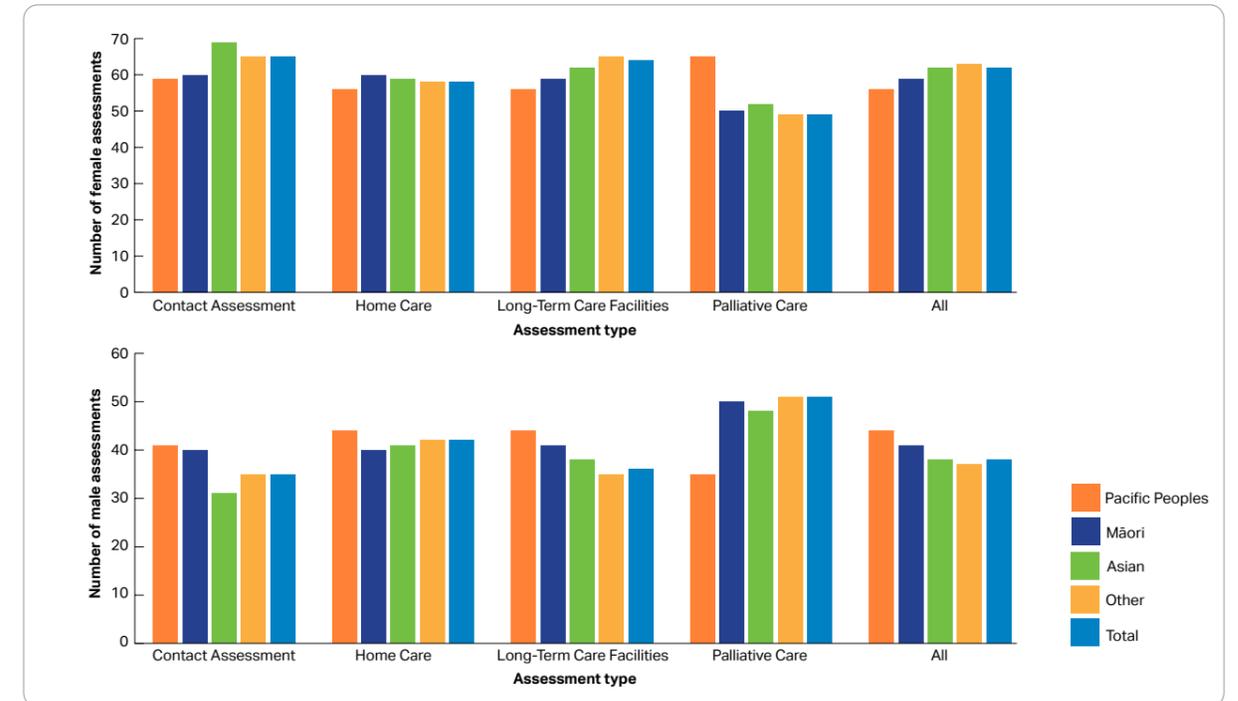
Characteristics of older people based on interRAI assessments 2023/24

Consistent with previous years, females continue to be assessed in higher numbers than males for all assessment types, with the exception of the Palliative Care assessment where the margin between females and males assessed narrows significantly.

Māori and Pacific men make up a larger proportion of assessments completed compared to the overall male rate. Among Asian and other ethnicities including New Zealand-European, the male and female proportion is similar to the overall rate.



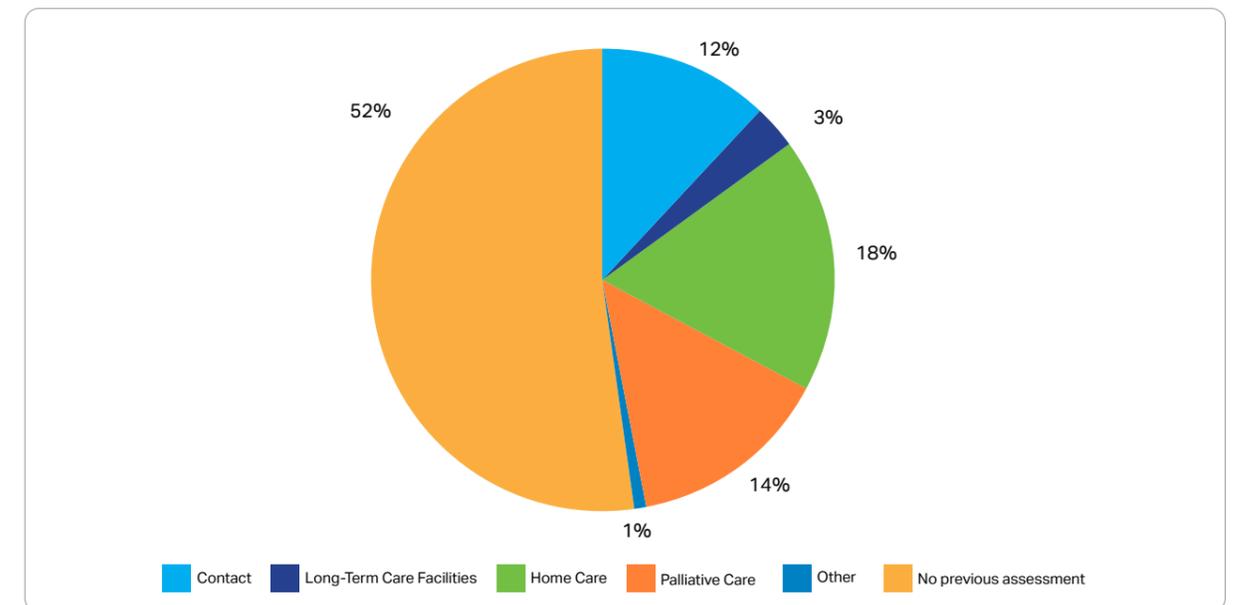
Figure 2: Proportion of assessments completed in 2023/24 by ethnicity and gender



Numbers of assessments completed

In total, more interRAI assessments were completed in 2023/24 than in 2022/23. We continue to see a steady increase in the number of Palliative Care (PC) assessments being completed since they were first introduced in 2015. The number of Contact Assessments (CA) being completed has experienced a downward trend since 2019/20. This same trend continues this year.

Figure 3: Percentage of PC assessments completed after a previous interRAI assessment



Palliative Care assessments, while not mandatory, can be used across both community and aged care settings. They provide a focus on symptom management, quality of daily life and end of life care planning. They are able to be utilised for entry to residential care and for changes of level of care funding requirements. Figure 3 shows that more than half the Palliative Care assessments completed are on people who have not had a previous assessment and are therefore previously not known to healthcare services.

Figure 4: Number of assessments by year

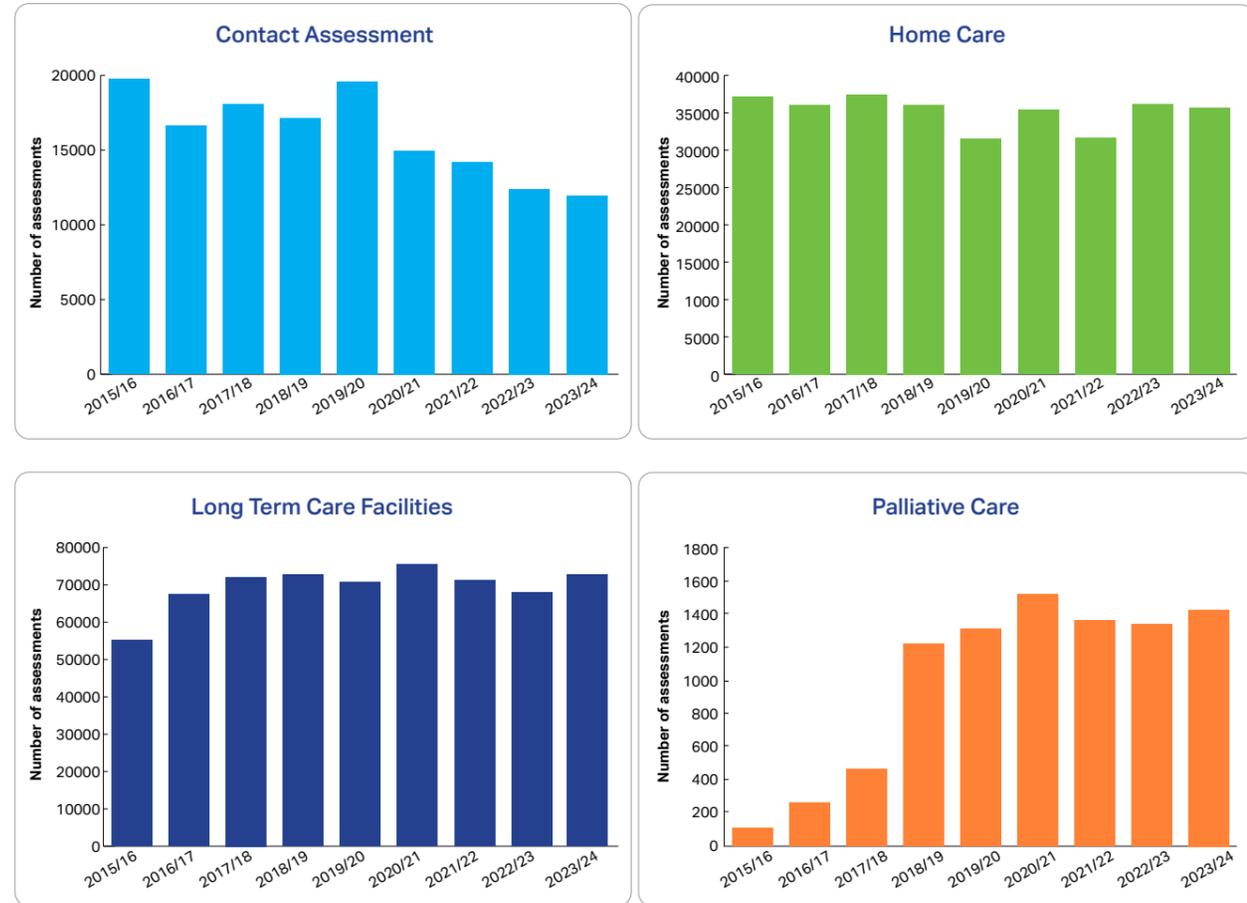
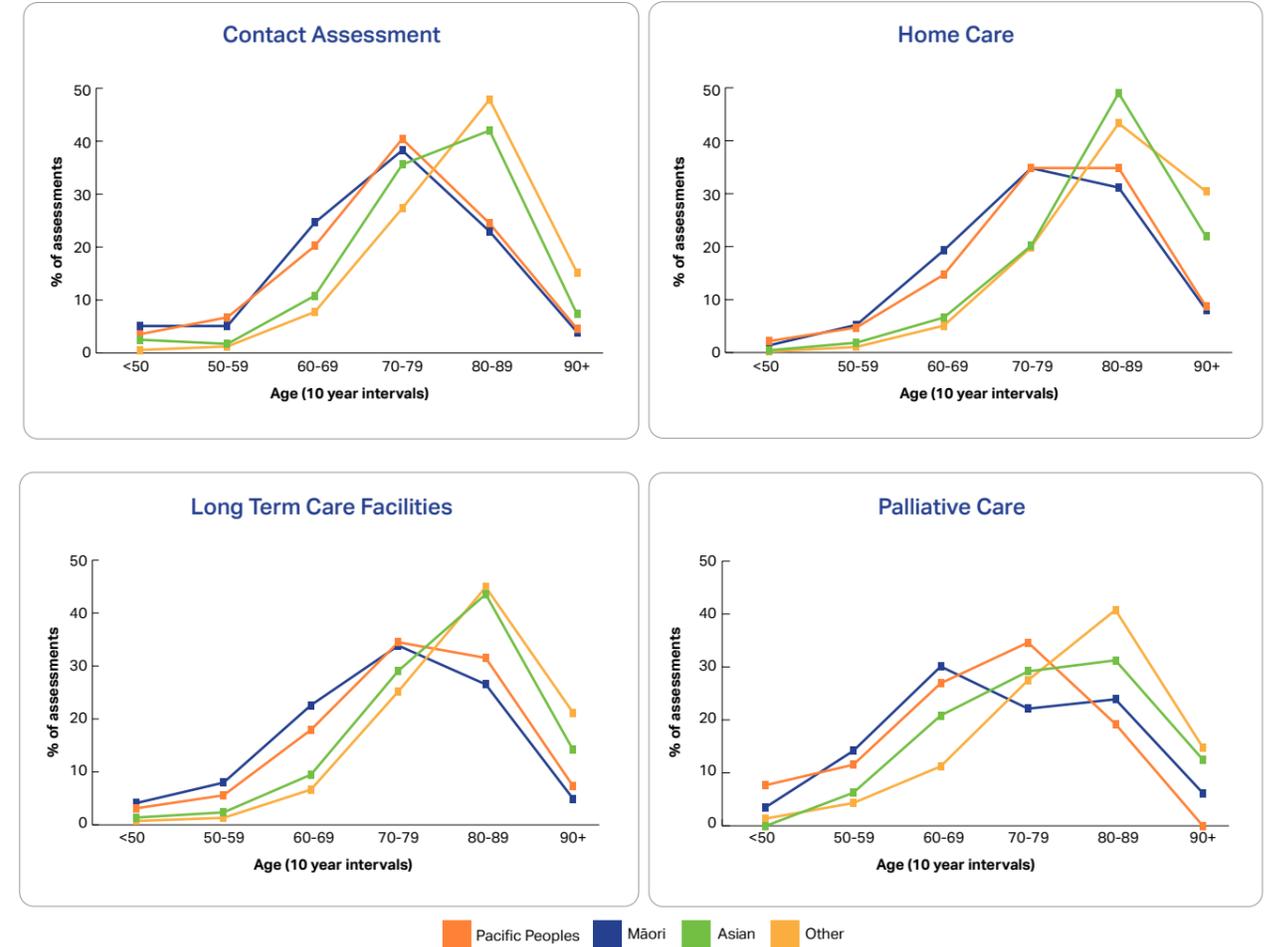


Figure 5: Assessments completed by ethnicity and age, 2023/24



The majority of assessments are completed on people at retirement age, with earlier age groups represented due to long term chronic conditions e.g. chronic obstructive pulmonary disease, heart disease and early onset diseases e.g. dementia, Parkinson's. interRAI assessments completed on people in the Māori and Pacific Peoples groups had a younger age distribution than that of assessments completed on people in the Asian and Other ethnicity groups. Figure 5 demonstrates that Māori consistently require assessment at a higher percentage from an earlier age than other cohorts and particularly compared to other ethnicities.

The Māori and Pacific Peoples ethnicity groups have a lower median age in all assessment types. Though both groups follow a similar pattern, Māori represent a significantly lower median age across all categories. The Other ethnicity group contributes to the highest median age of people assessed across all assessment types. This group includes predominantly people of European and New Zealand-European ethnicity, with a small proportion of those of Middle Eastern, African and South American ethnicities.

Figure 6: Median age of people assessed, by ethnicity 2023/24

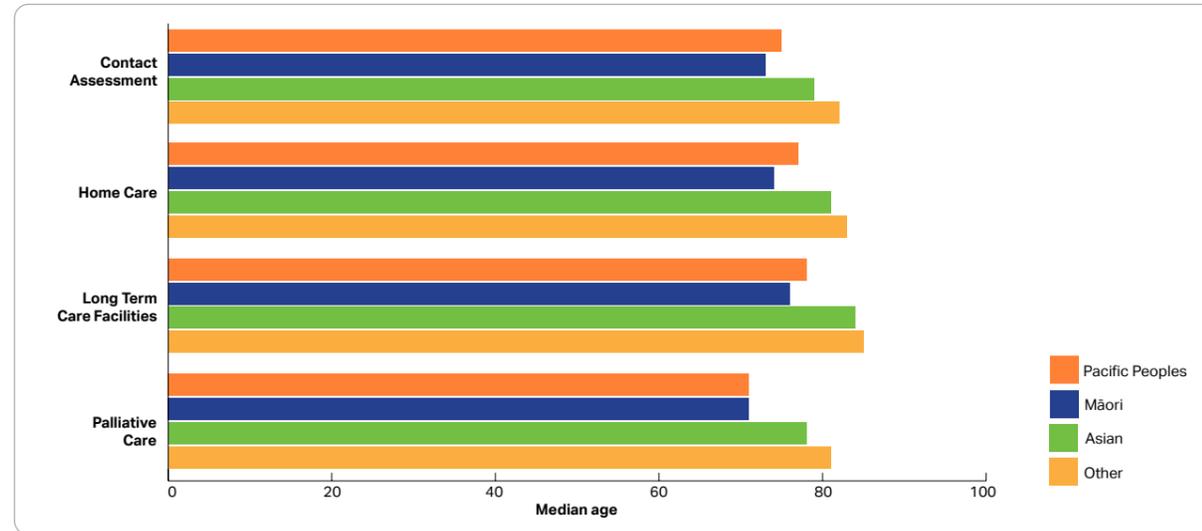
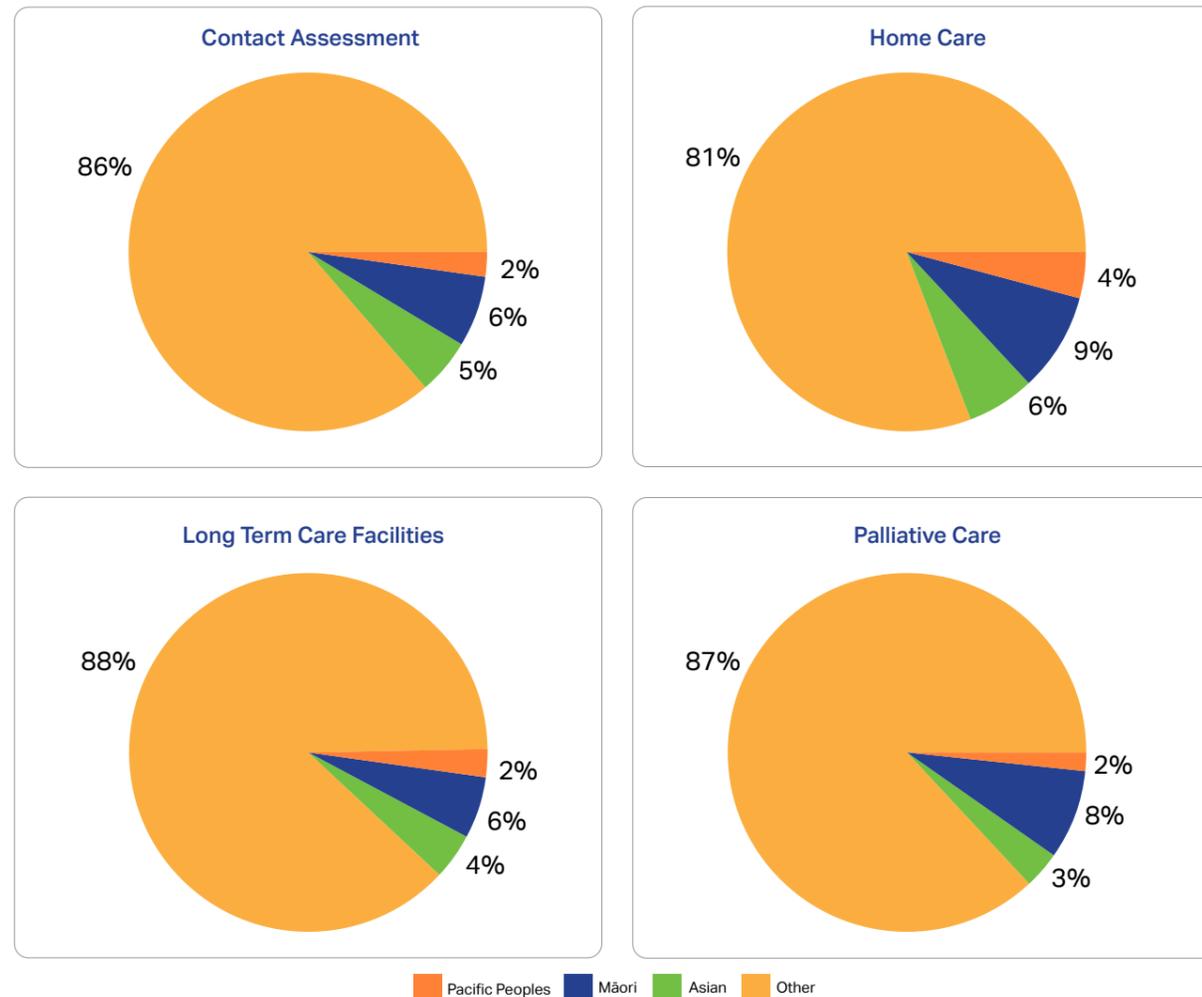
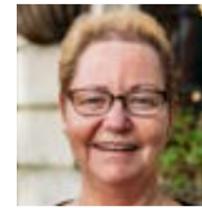


Figure 6 demonstrates the higher percentage of other ethnicities seen in the interRAI data. Efforts to remove barriers to assessment continue, through pilots such as the Check-Up Self-Report and CAAM, to ensure equity of access across New Zealand.

Figure 7: Ethnicity breakdown for interRAI assessments by type (%) 2023/24



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