

# Information for Researchers to Support Ethics and Funding Applications

## interRAI Research Network

April 2025

After an evidence-based review in 2003 the Ministry of Health chose the interRAI Home Care Assessment as the 'best practice' process for determining home and community support needs for older people in New Zealand. interRAI offer a suite of tools and, in New Zealand, an interRAI assessment is a requirement for publicly funded aged care support services either in the community or aged residential care (ARC). The choice of interRAI assessment instrument depends on the level of need of the individual and whether the person lives in the community or in ARC. An interRAI assessment is undertaken as a conversation, where the assessor codes responses into software and algorithms provide decision-support clinical assessment protocols and outcome measures to inform a person's care plan and determine change over time. The interRAI Long Term Care Facility Assessment is used in ARC where the assessment is usually undertaken by a nurse working in the facility. The assessment, which includes over two hundred compulsory fields, is comprehensive and covers health, behavioural and psychosocial domains as well as many items directly focused on social engagement. Over 70,000 assessments are completed annually in New Zealand in this sector alone.

The interRAI was developed by a multidisciplinary collaborative network of academics and clinicians in over thirty countries. interRAI is the name of the not-for-profit fellowship as well as the name of the assessment instruments. Companion interRAI assessments such as the Acute Care and Palliative Care assessment instruments are now being used across the sector. All assessment information is recorded electronically and stored in the national data warehouse without requiring any further effort from the assessor or the person assessed. All data is coded using a national unique identifier (called National Health Index number or NHI) and is stored using encryption for data security.

New Zealand is the first country in the world to implement a universal standardized comprehensive geriatric assessment for all older people who are being considered for access to publicly funded community services or residential care. The primary aim of interRAI is to improve health outcomes by understanding the person's needs and potential response to intervention. It is designed to improve quality of care through supporting communication and reducing variability of assessment. Although interRAI was not designed to be a research tool, the mandatory collection of interRAI data has created a researchable dataset that is almost unparalleled in the world. To date, over a million assessments are in the database. The large data size allows for stratified analyses of different variables including ethnicity. Ethnic groupings include Māori, Pacific peoples (categorized as Samoan, Tongan, Niuean, Tokelauan, Fijian or other Pacific peoples) and Asian.

New Zealand's financial investment in the development and implementation of interRAI is significant. The interRAI infrastructure is managed by interRAI Services (also known as interRAI New Zealand) through Health New Zealand/Te Whatu Ora and includes a national training service, data and analytics service and a national software service. Operational management sits with the Group Manager interRAI Services in Health New Zealand/Te Whatu Ora. Governance oversight also sits within Health NZ/Te Whatu ora and is aligned with relevant policies and practice. Governance is responsible for ensuring New Zealand meets the requirements of the license held between interRAI and the Director General. This includes ensuring the integrity of the assessment use in New Zealand and participating in international research efforts through annual sharing of aggregated and anonymized data. The same aggregated and anonymized data set is also available in Statistics New Zealand's Integrated Data Infrastructure (IDI).

Day to day responsibility for the interRAI data in the data warehouse and data reporting sits with Data and Digital team within the Performance, Funding and Outcomes Directorate, of Health New Zealand/Te Whatu Ora. All assessments include a question about consent and approximately 93%<sup>1</sup> of people who have been assessed provide consent for their data to be used for research. interRAI Data Access Protocols ([www.interrai.org](http://www.interrai.org)) set out seven Guiding Principles: Ownership, Kaitiaki/Guardianship, Privacy, Security, Confidentiality, Linking with other datasets and information about a breach of these Protocols. A Māori data sovereignty plan will be developed consistent with Health New Zealand/Te Whatu Ora policy and guidance. In the meantime, researchers are responsible for developing their own data sovereignty and management processes in the context of their own projects. The information set out in the interRAI data Access Protocols Data may assist researchers when developing a Data Management Plan required as part of their study protocol and ethics application. Access to the data is provided through a Third-Party Data Request process ([www.interrai.co.nz](http://www.interrai.co.nz)) that requires final approval by interRAI Services.

There are over six thousand trained interRAI assessors currently in New Zealand. To produce high quality data, a stringent Quality Assurance programme has been established. All assessors are health professionals who undergo a competency based interRAI training programme. Their work is subject to continuous monitoring and there are regular online updates and competency audits and annual exams to be completed.

All persons eligible to access assessment information in the software must complete a User Access Agreement which must also be approved by their manager before a user account is created. All users, including administrators, read only access and analysts, must complete education provided by interRAI Services that includes appropriate use of the software and the responsibilities of accessing medical records. Access is limited by role and each role has specific functionality embedded. Clinical roles have the most access and widest functionality, whereas administration roles are limited to demographic functionality only. Access audits and regular competency checks are undertaken, with users who do not meet current competency requirements, or are not a regular user, having their access adjusted or removed. No user account is ever deleted off the system. For users who no longer require access their account is deactivated thus retaining full user access audit records.

Use of the data could contribute to national quality improvement throughout the country. There are multiple benefits for the many older people, with approximately 80,608 New Zealanders (2023/2024 year) having an interRAI assessment. 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. Better outcomes provide economic benefits for New Zealand from cost savings in a health system that is facing the multiple challenges of a rapidly growing, ageing population. There are also opportunities to use the NZ interRAI data for international collaborative research with other countries that use interRAI assessments.

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<sup>1</sup> Schluter, P. J., Ahuriri-Driscoll, A., Anderson, T. J., Beere, P., Brown, J., Dalrymple-Alford, J., ... & Jamieson, H. A. (2016). Comprehensive clinical assessment of home-based older persons within New Zealand: an epidemiological profile of a national cross-section. Australian and New Zealand journal of public health, 40(4), 349-355.