

Selecting an interRAI Assessment Type

Which assessment and when to use it

General guidelines and policy

interRAI offers a suite of assessment instruments supporting continuity of care. The following are guidelines for the use of interRAI assessments.

- Ensure that you are currently competent to complete the assessment type selected.
- To access funded support services for older people the person must be a New Zealand citizen, be 65 years of age or older, (55 years of age or older for Māori) or deemed close in age and interest. An interRAI assessment is required to demonstrate the need for funded community services or entry to funded residential care.
- Home Care Assessment (HC) and Contact Assessment (CA) are mandated for use across New Zealand. In some districts, community care provision is based on a Case mix devised from both the CA and HC interRAI assessment outputs.
- The Contact Assessment (CA) is designed for use where a person is known to have non-complex needs or to screen for complexity. It does not provide sufficient information for planning long term care where complex needs exist. It is therefore unsuitable for the allocation of respite or entry to residential care, or end-of-life care needs.
- The Long-Term Care Facilities Assessment (LTCF) is mandated for informing care planning in aged residential care (ARC) facilities.
- Other assessments such as the Community Health Assessment (CHA) and Palliative Care Assessment (PC) have been adopted for use in some regions but not nationally and are currently not mandated.
- The Acute Care (AC) Assessment is mandated for use in the acute hospital setting for all Accident Compensation Corporation (ACC) Non-Acute Rehabilitation Pathway (NAR) clients who are to be managed with the ACC Case Mix. Some hospitals also adopt this for other patient groups. The AC is not currently accepted as an assessment for entry to residential care.
- An interRAI assessment may also be appropriate for other individuals depending on the model of care. This may include, for example, people under 65 years of age who have a Long-term Support – Chronic Health Condition diagnosis, people who qualify for disability funding, privately funded individuals, or ACC clients. Te Whatu Ora - Health New Zealand, may use interRAI assessments for wider purposes.

- Population data derived from interRAI assessments is most useful to organisations for planning, research, and resourcing when the appropriate assessment type has been completed for the individual being assessed.
- Maintaining assessment information within the interRAI software is preferable for the person's journey across the health sector. If you are unable to determine the best course of action from reading this document, please contact interRAI Services and ask for advice from our team. interrai@tas.health.nz or phone 0800108044 option 3.
- Further information is available on the following sites:

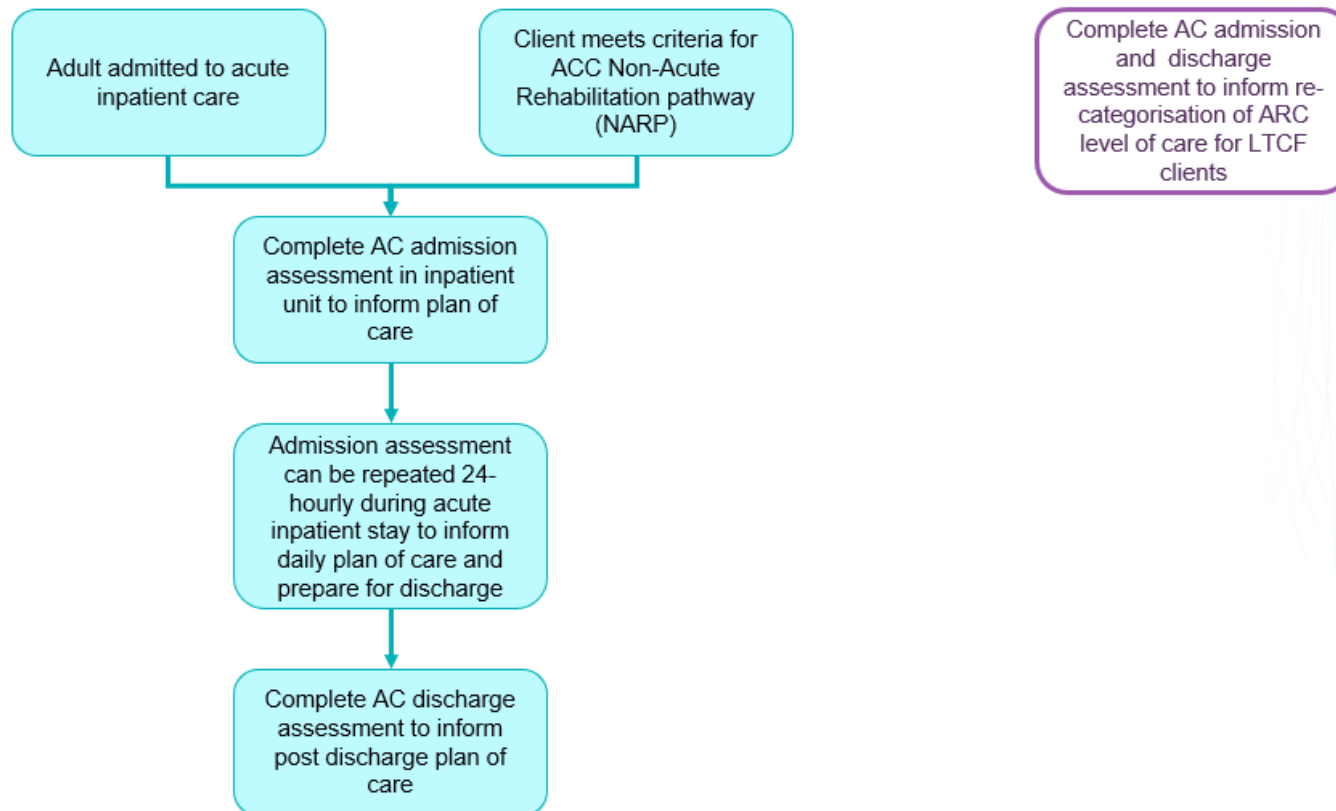
<https://www.interrai.co.nz/assets/Documents/Sequencing-interRAI-Community-Assessments-April-2023.pdf>

For more information, please contact interRAI Services:

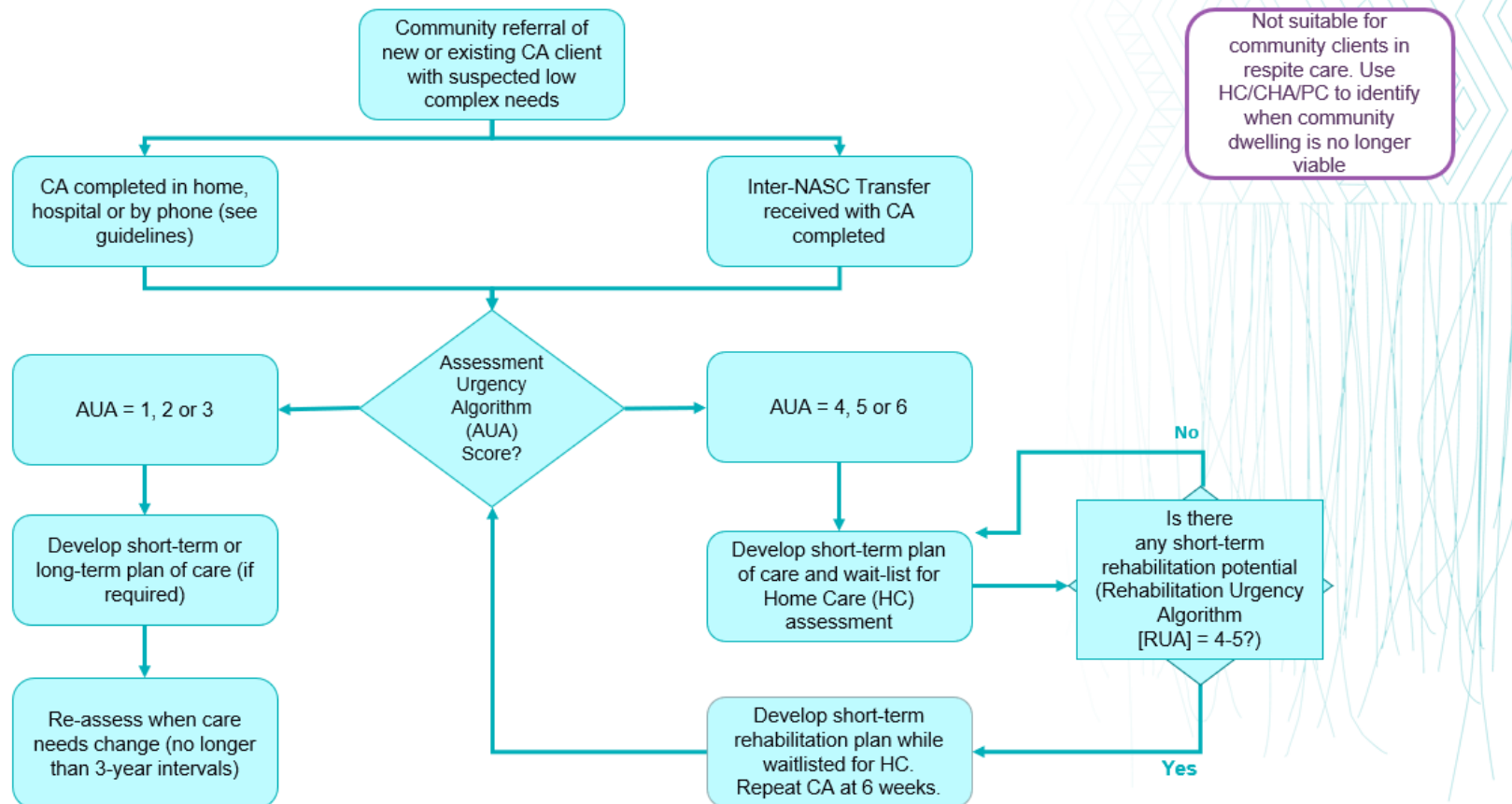
Email: interrai@tas.health.nz **Phone:** 0800 10 80 44 option 3 **Web:** www.interrai.co.nz

Select the appropriate assessment from the scenarios provided below.

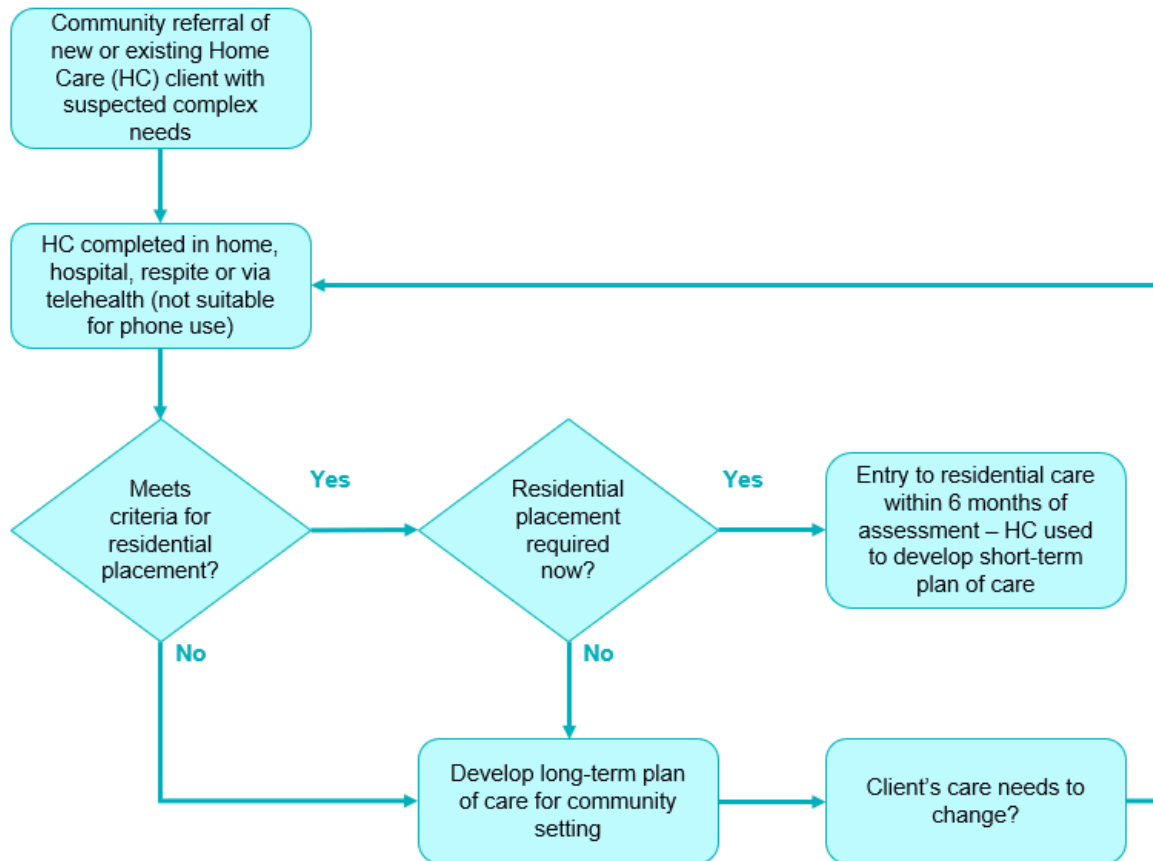
interRAI Acute Care Assessment (AC)



interRAI Contact Assessment (CA)



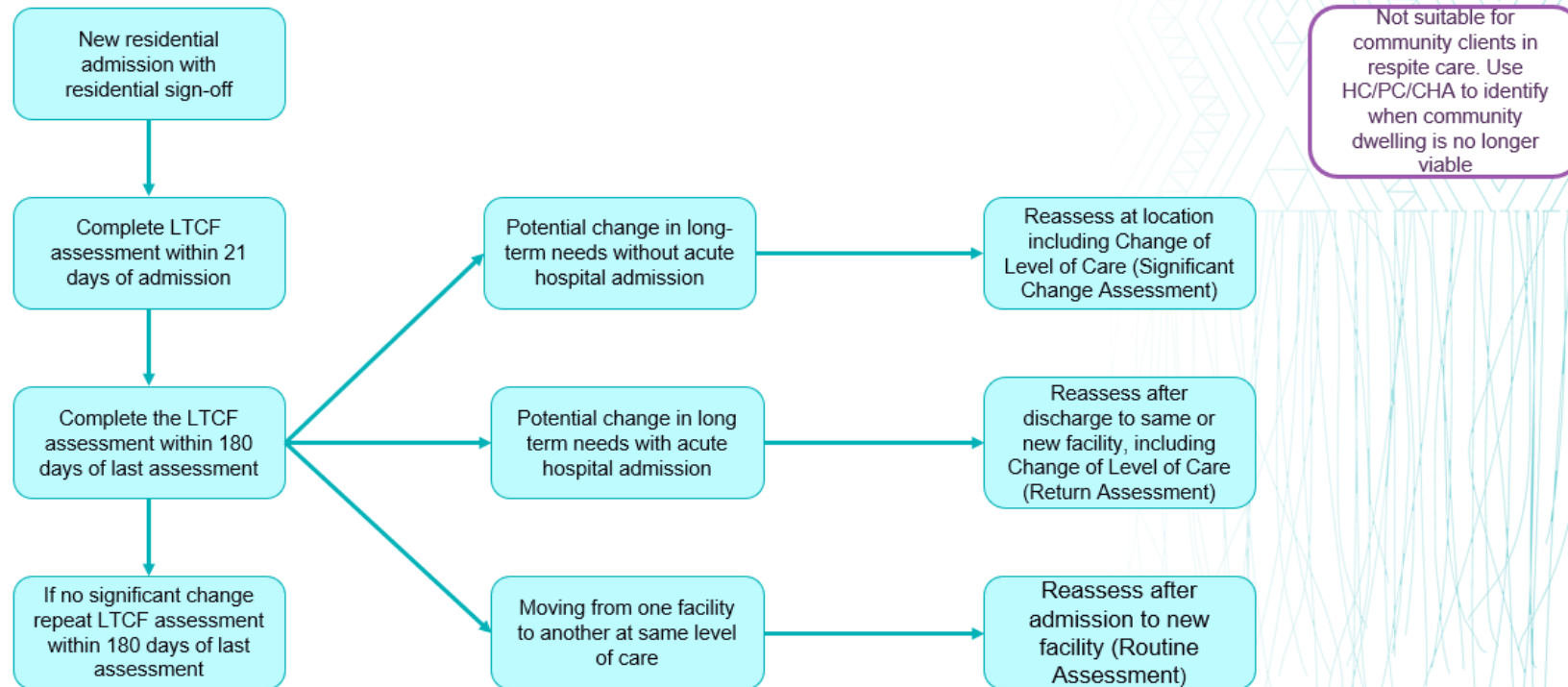
interRAI Home Care Assessment (HC)



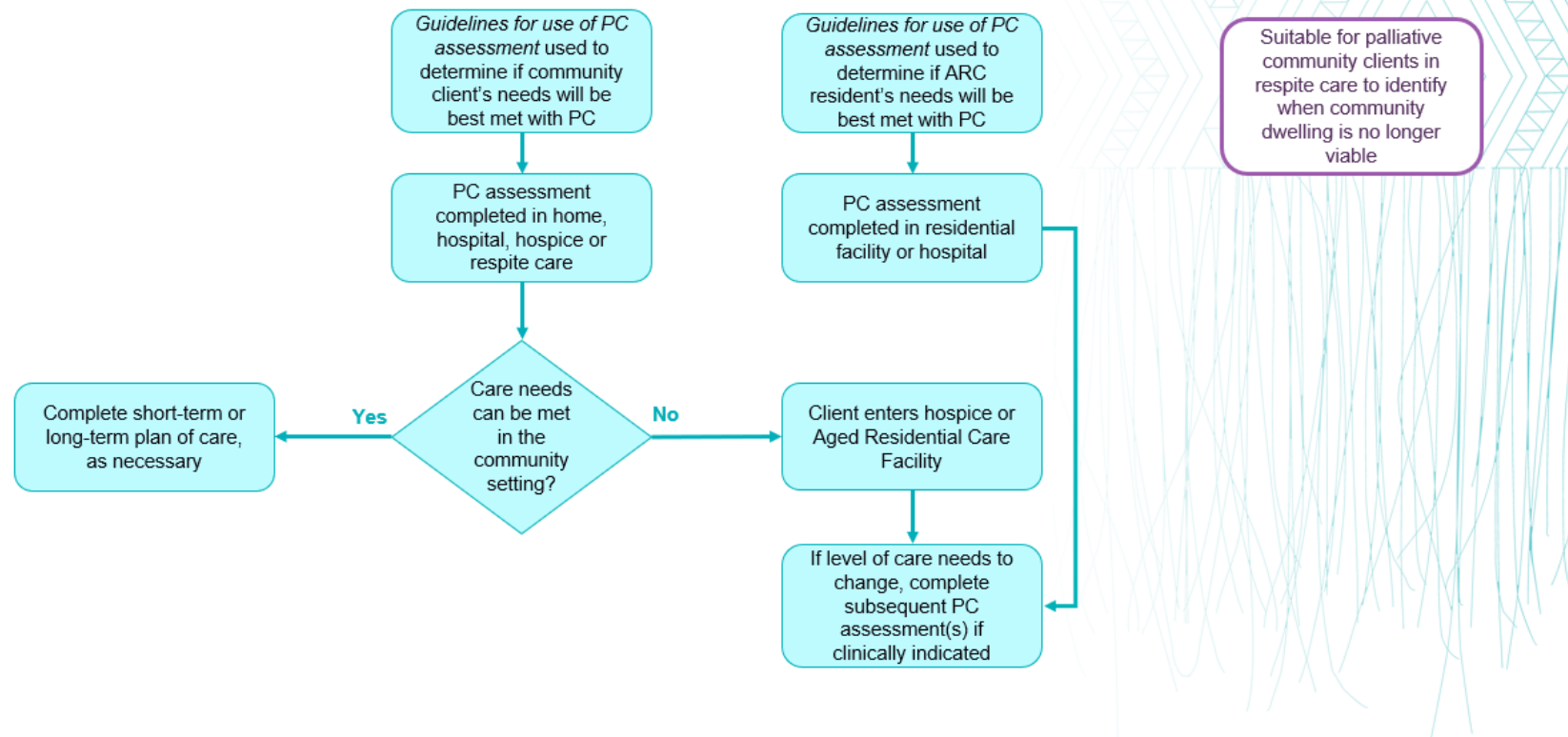
Suitable for community clients in respite care to identify when community dwelling is no longer viable

Re-assess when referral received or change in care needs indicated (no longer than 3-year intervals)

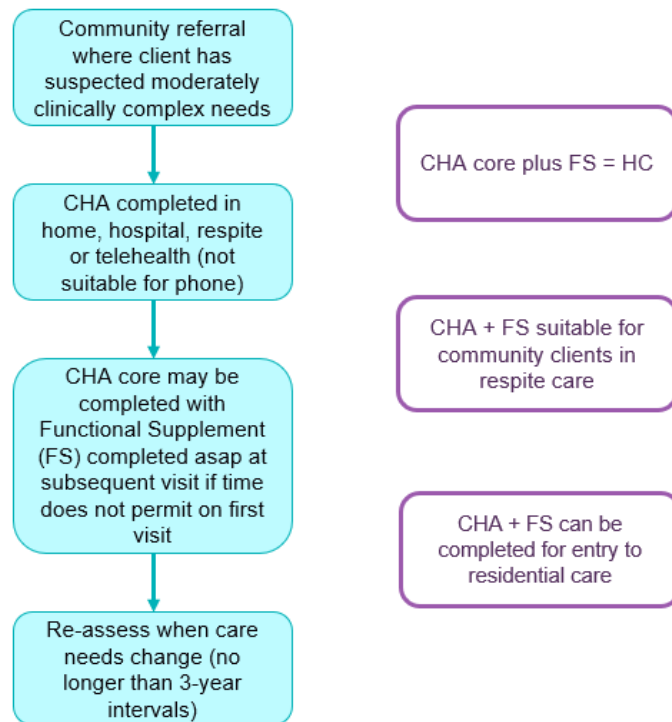
interRAI Long Term Care Facilities Assessment (LTCF)



interRAI Palliative Care Assessment (PC)



interRAI Community Health Assessment (CHA)



interRAI CHA plus Mental Care Health Supplement (CHA +MH)

