How-To:
Use Te Puna Risk Stratification Tool to identify patients for Hauora Wellness Plans

Tū Ora
COMPASS HEALTH

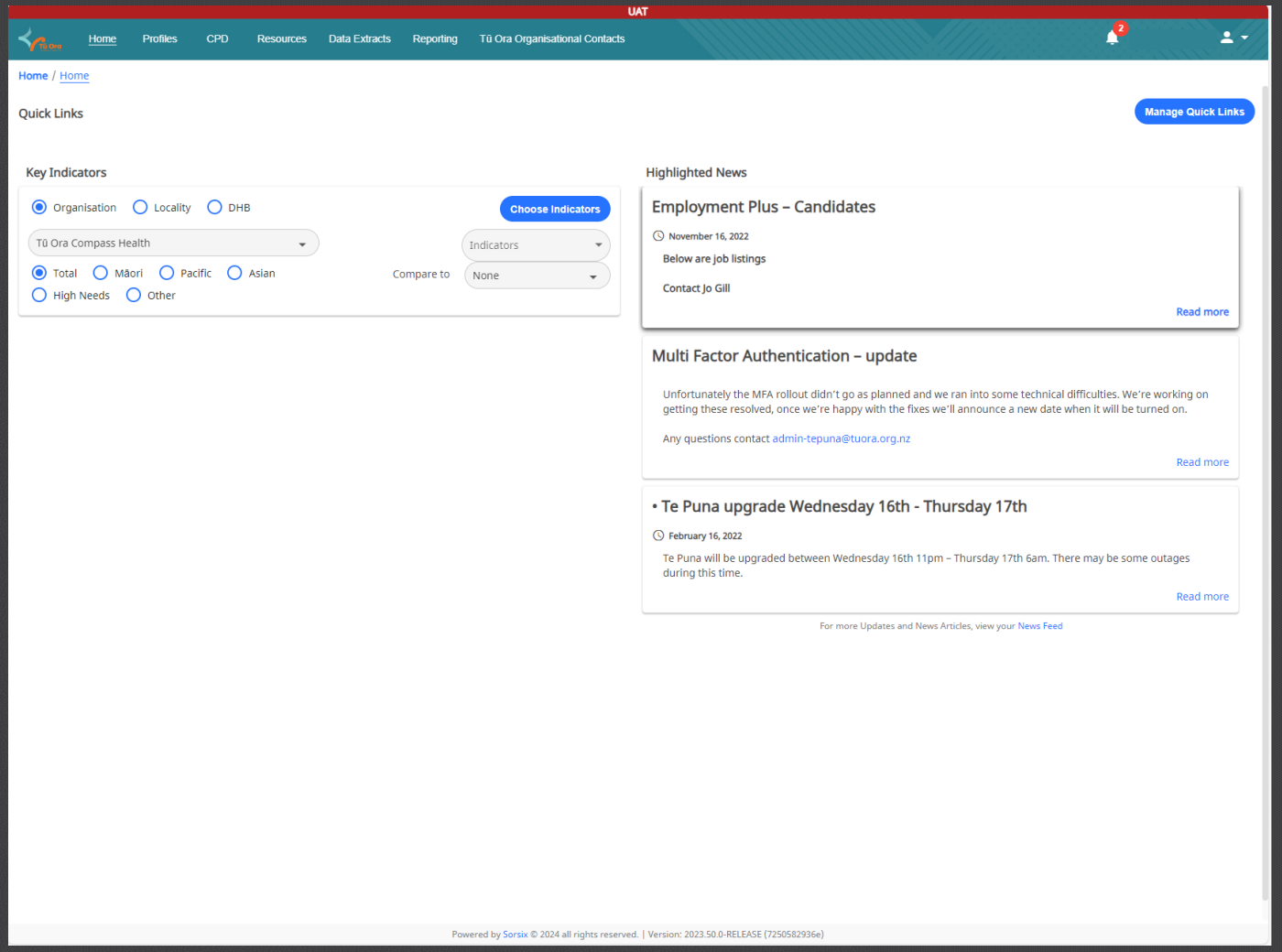
Risk Stratification Tool

The Risk Stratification Tool is a report based on an algorithm that predicts and reports the predicted risk of a person to be hospitalised in the next 6 months.

The tool is used for:

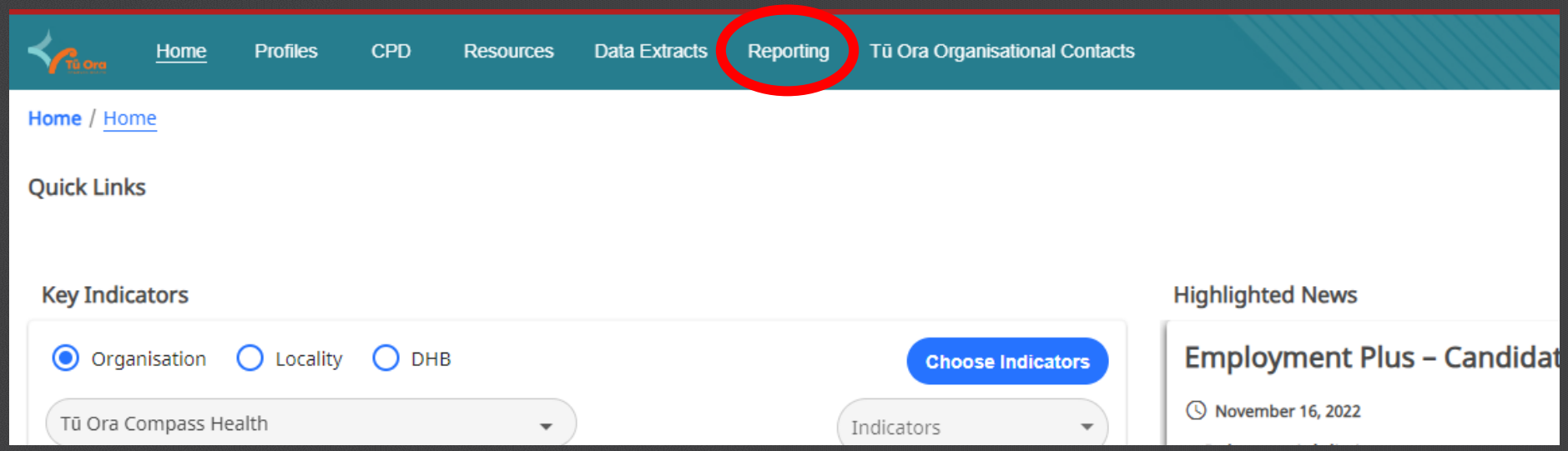
- Targeted approaches for patients with complex needs.
- Bringing patients for discussion at multi-disciplinary team meetings with general practice and community services.
- Condition specific approach for clinics or group appointments.
- A targeted approach for high users of secondary care.
- Winter Wellness Initiatives.

1. Open Te Puna



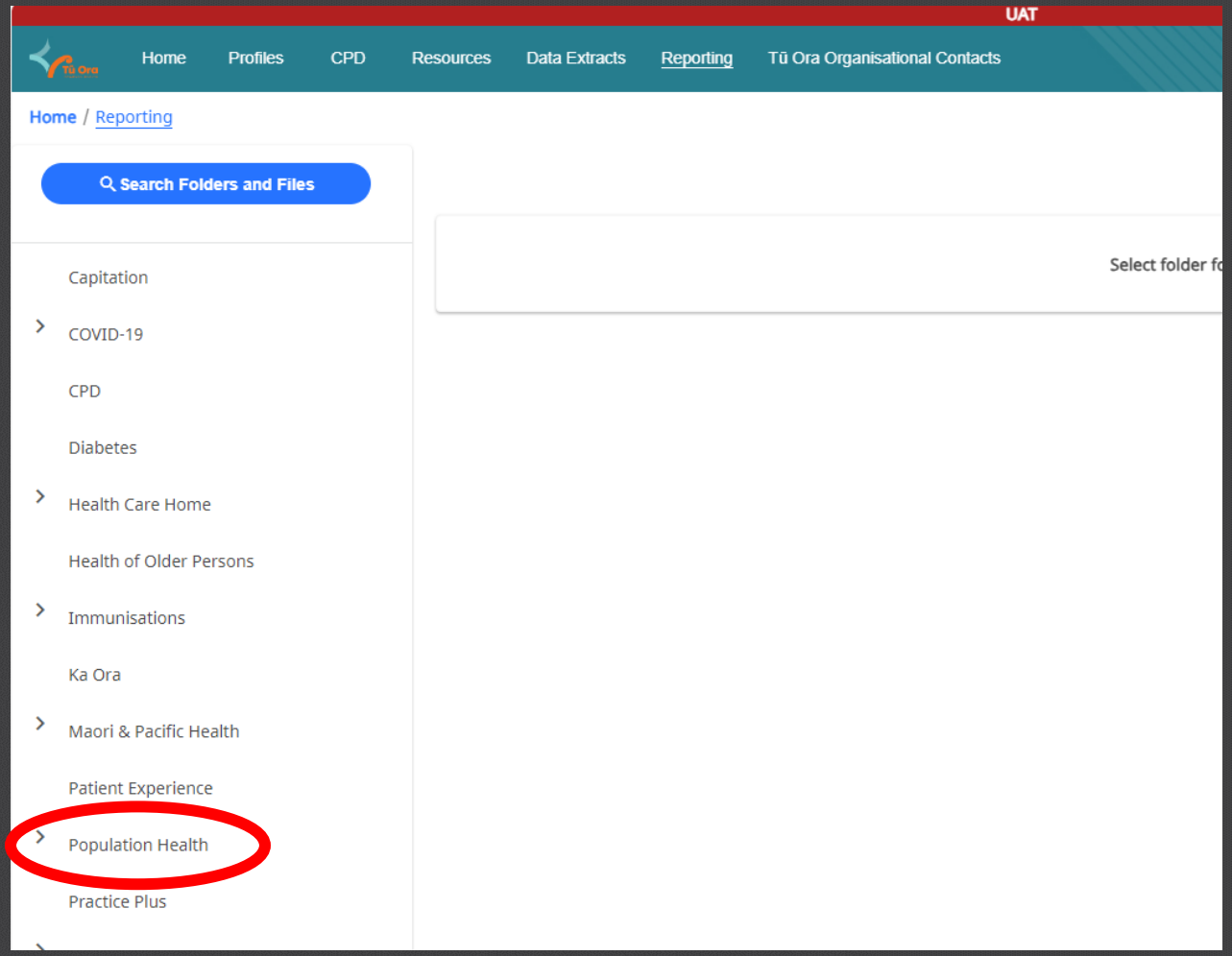
2. Go to reporting

- Select reporting on the top right



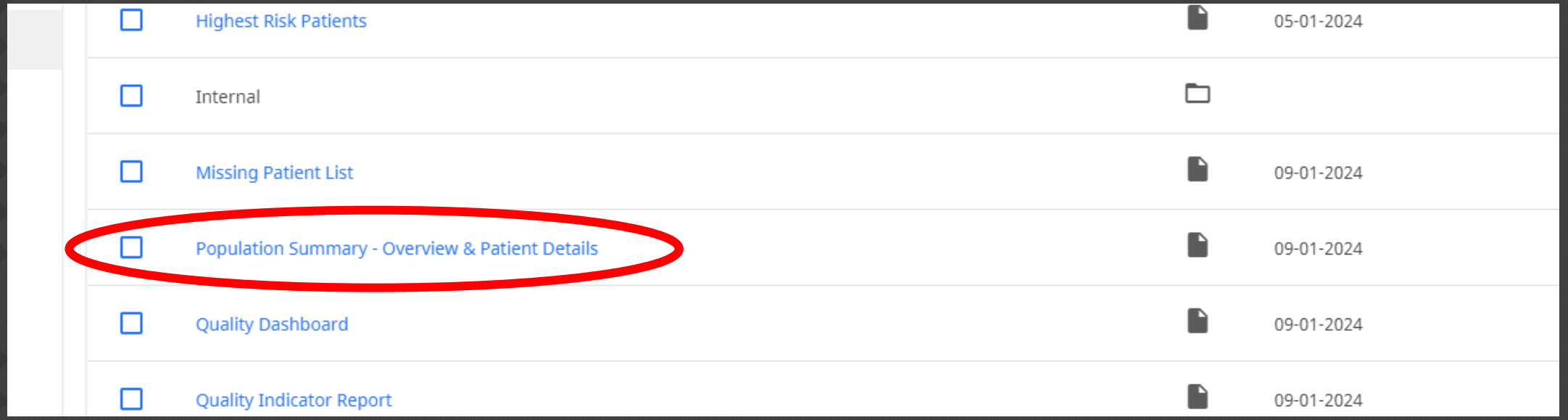
3. Population Health

- Click on the population health folder



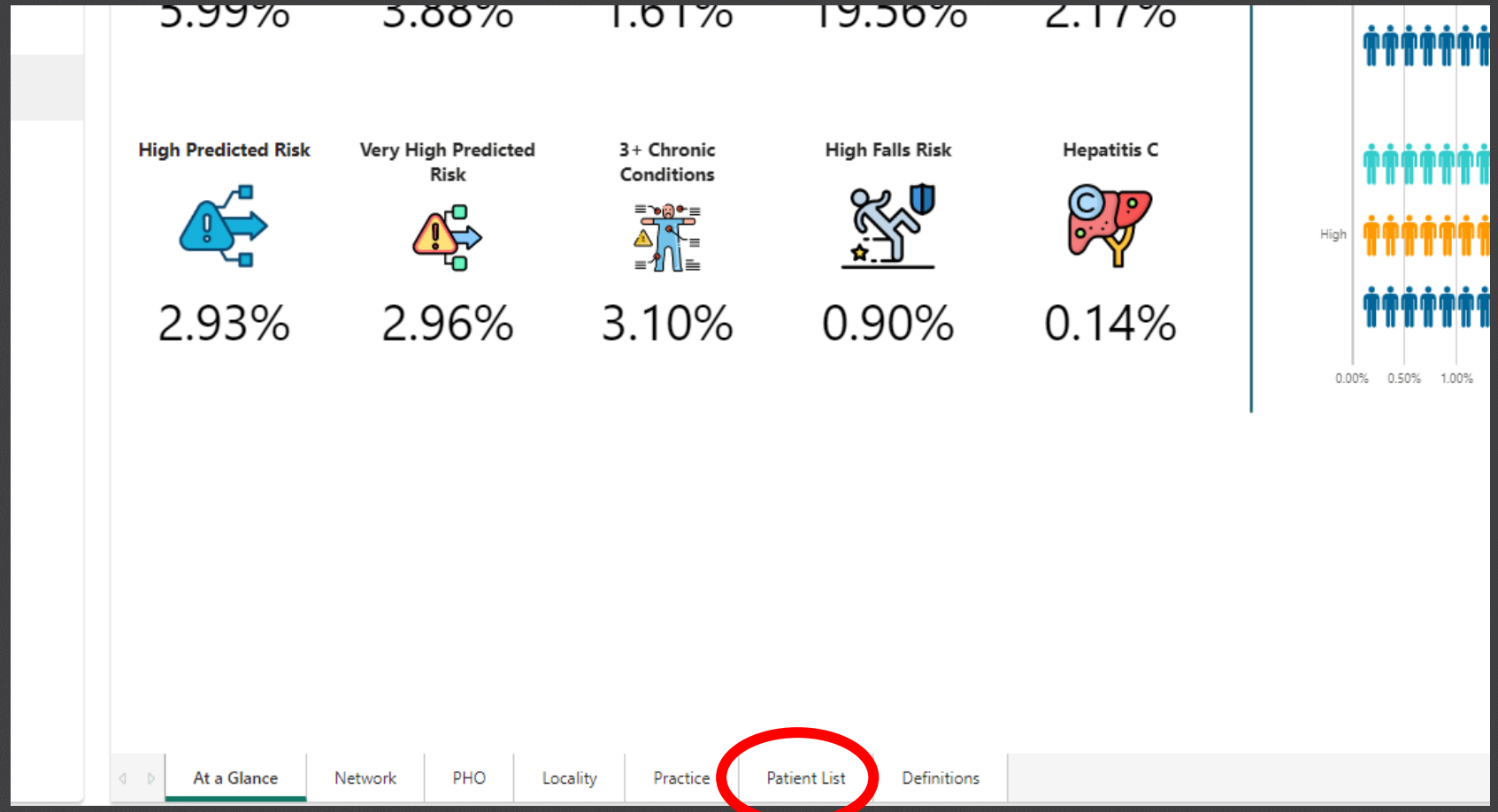
4. Population Summary

- Click on “Population Summary – Overview & Patient Details



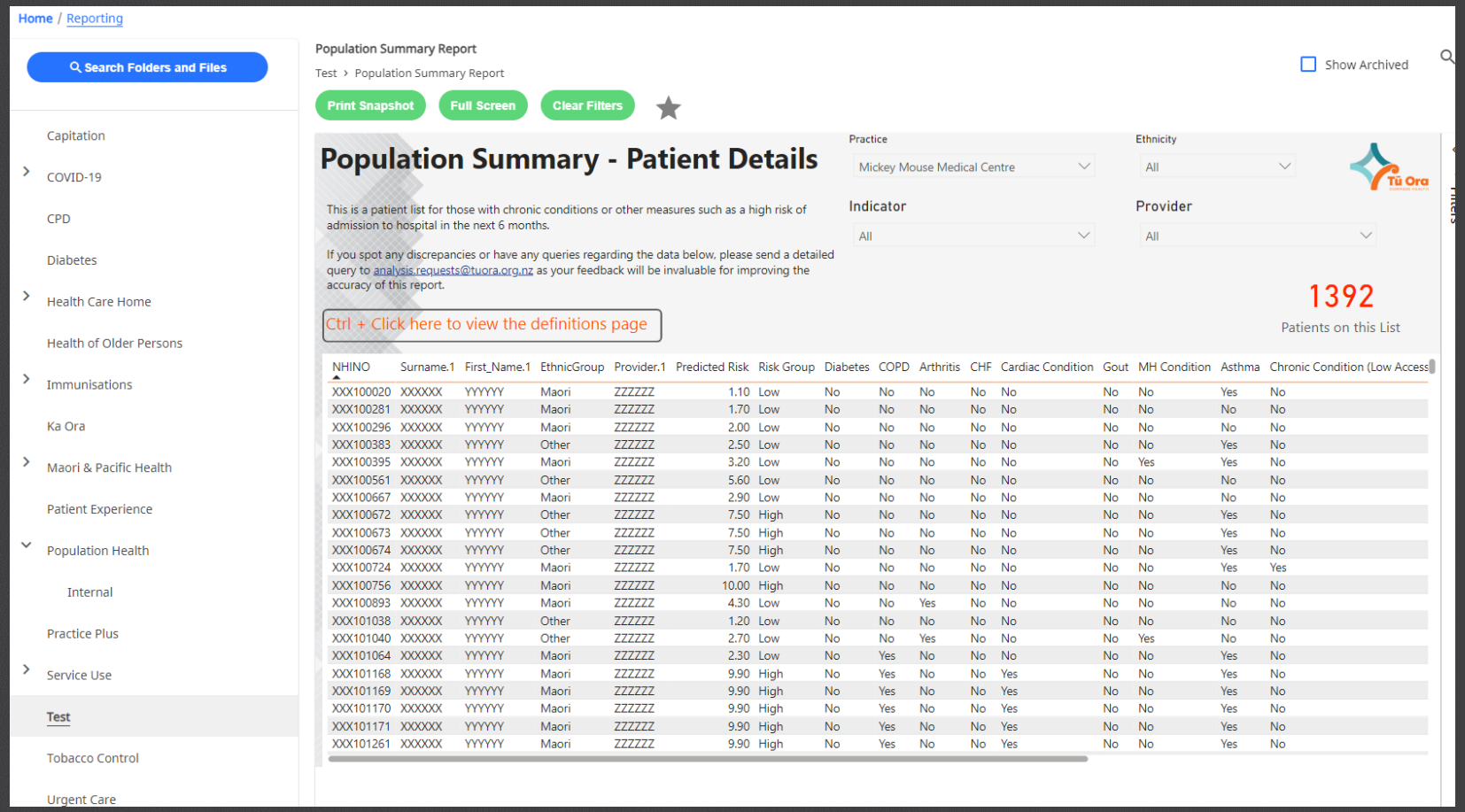
5. Patient List

- Click on “Patient list” in the bar down the bottom



6. Population Summary Page

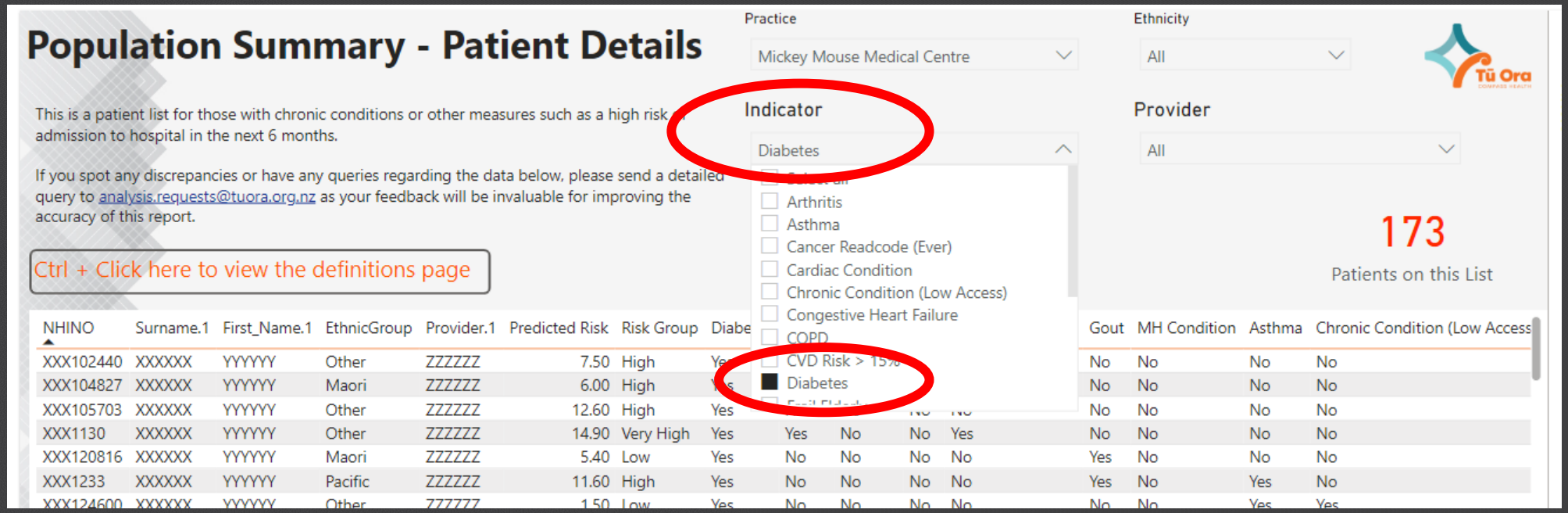
- From this page, you can filter by Indicator, Ethnicity, and Provider, as well as access the definitions page.



NHINO	Surname.1	First_Name.1	EthnicGroup	Provider.1	Predicted Risk	Risk Group	Diabetes	COPD	Arthritis	CHF	Cardiac Condition	Gout	MH Condition	Asthma	Chronic Condition (Low Access
XXX100020	XXXXXX	YYYYYY	Maori	ZZZZZZ	1.10	Low	No	No	No	No	No	No	No	Yes	No
XXX100281	XXXXXX	YYYYYY	Maori	ZZZZZZ	1.70	Low	No	No	No	No	No	No	No	No	No
XXX100296	XXXXXX	YYYYYY	Maori	ZZZZZZ	2.00	Low	No	No	No	No	No	No	No	No	No
XXX100383	XXXXXX	YYYYYY	Other	ZZZZZZ	2.50	Low	No	No	No	No	No	No	No	Yes	No
XXX100395	XXXXXX	YYYYYY	Maori	ZZZZZZ	3.20	Low	No	No	No	No	No	No	Yes	Yes	No
XXX100561	XXXXXX	YYYYYY	Other	ZZZZZZ	5.60	Low	No	No	No	No	No	No	No	No	No
XXX100667	XXXXXX	YYYYYY	Maori	ZZZZZZ	2.90	Low	No	No	No	No	No	No	No	No	No
XXX100672	XXXXXX	YYYYYY	Other	ZZZZZZ	7.50	High	No	No	No	No	No	No	No	Yes	No
XXX100673	XXXXXX	YYYYYY	Other	ZZZZZZ	7.50	High	No	No	No	No	No	No	No	Yes	No
XXX100674	XXXXXX	YYYYYY	Other	ZZZZZZ	7.50	High	No	No	No	No	No	No	No	Yes	No
XXX100724	XXXXXX	YYYYYY	Maori	ZZZZZZ	1.70	Low	No	No	No	No	No	No	No	Yes	Yes
XXX100756	XXXXXX	YYYYYY	Maori	ZZZZZZ	10.00	High	No	No	No	No	No	No	No	No	No
XXX100893	XXXXXX	YYYYYY	Maori	ZZZZZZ	4.30	Low	No	No	Yes	No	No	No	No	No	No
XXX101038	XXXXXX	YYYYYY	Other	ZZZZZZ	1.20	Low	No	No	No	No	No	No	No	No	No
XXX101040	XXXXXX	YYYYYY	Other	ZZZZZZ	2.70	Low	No	No	Yes	No	No	No	Yes	No	No
XXX101064	XXXXXX	YYYYYY	Maori	ZZZZZZ	2.30	Low	No	Yes	No	No	No	No	No	Yes	No
XXX101168	XXXXXX	YYYYYY	Maori	ZZZZZZ	9.90	High	No	Yes	No	No	Yes	No	No	Yes	No
XXX101169	XXXXXX	YYYYYY	Maori	ZZZZZZ	9.90	High	No	Yes	No	No	Yes	No	No	Yes	No
XXX101170	XXXXXX	YYYYYY	Maori	ZZZZZZ	9.90	High	No	Yes	No	No	Yes	No	No	Yes	No
XXX101171	XXXXXX	YYYYYY	Maori	ZZZZZZ	9.90	High	No	Yes	No	No	Yes	No	No	Yes	No
XXX101261	XXXXXX	YYYYYY	Maori	ZZZZZZ	9.90	High	No	Yes	No	No	Yes	No	No	Yes	No

7. Filter by Indicator

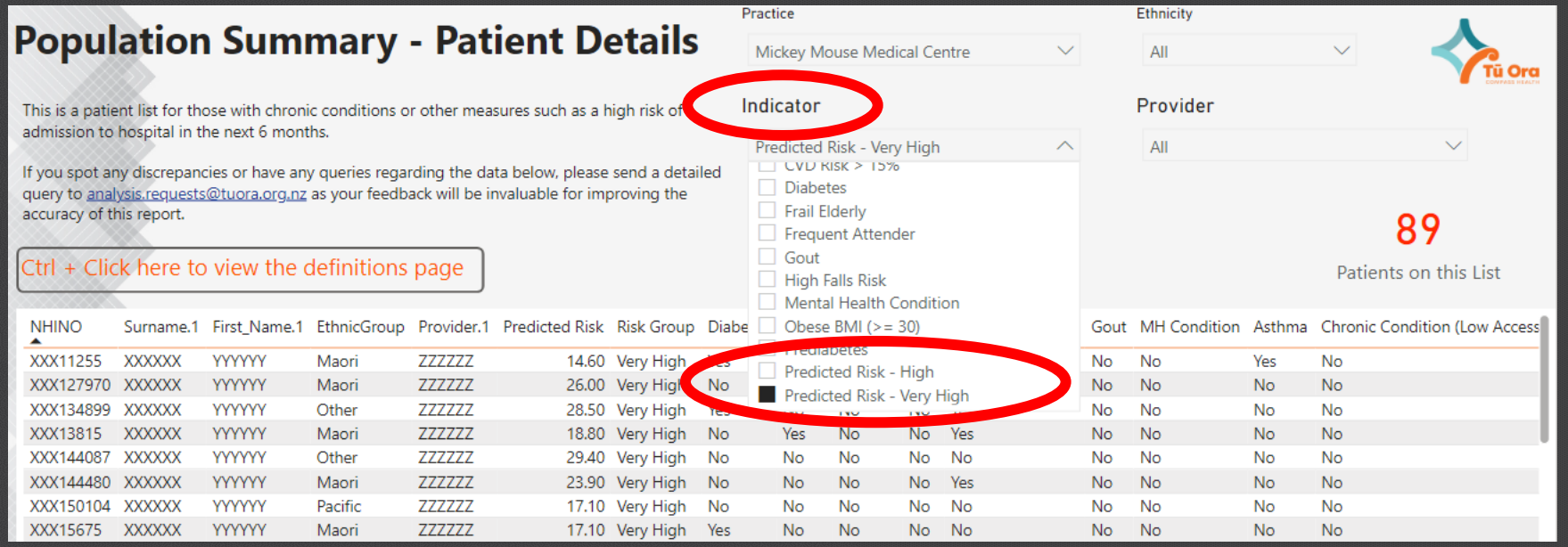
- Click the indicator drop down and select the condition which you are looking for



- Please refer to the Winter Wellness Business Rules for further information about which indicators to select for this initiative.

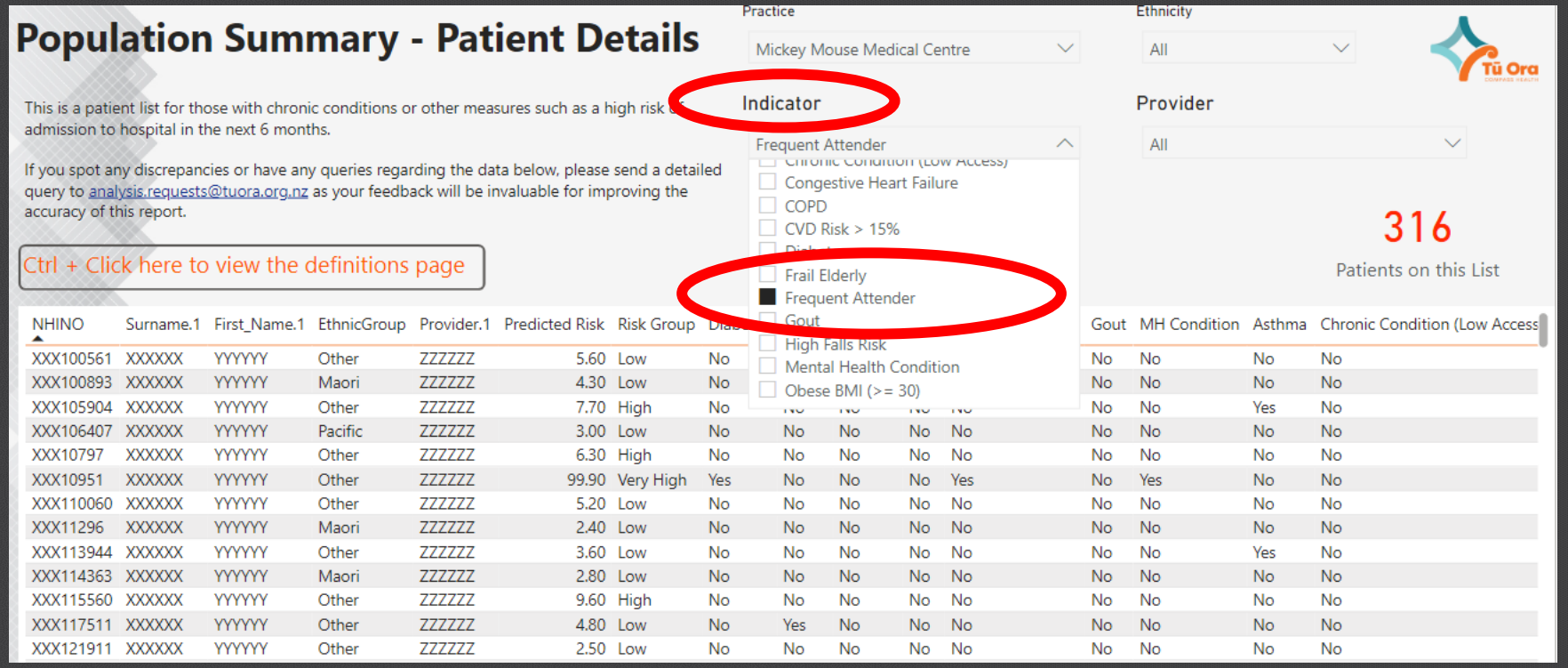
8. Filter by Risk

- Using the indicator drop down tool, you can filter by risk group
- High risk
- Very high risk



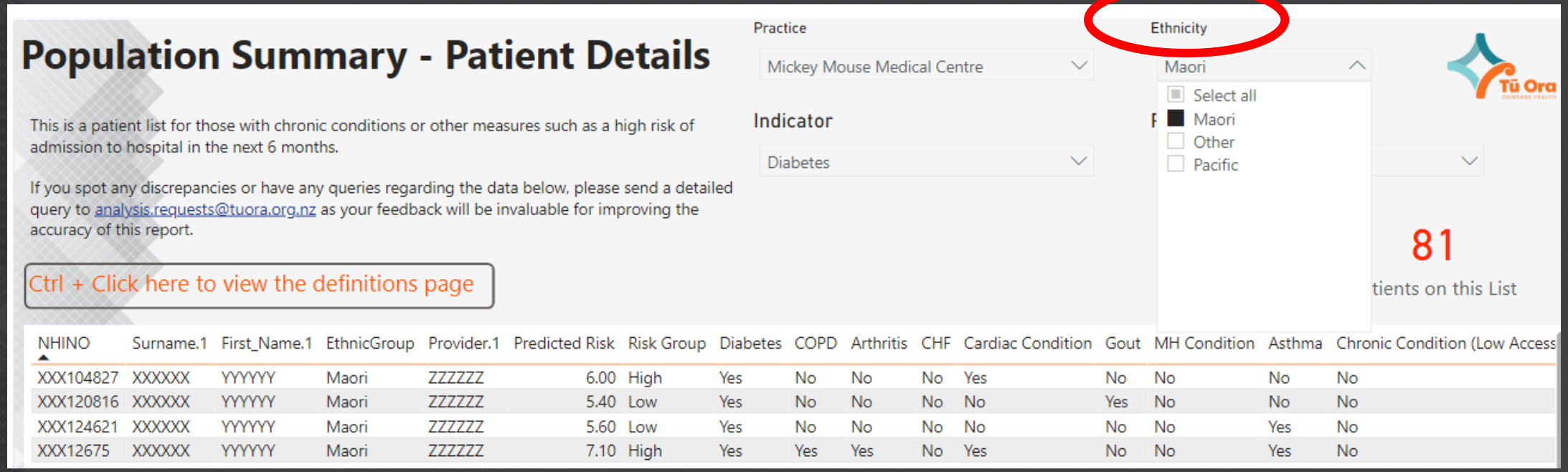
9. Filter by attendance

- Using the indicator drop down tool, you can filter to show frequent attenders.
- These are patients who have had 4 or more ED attendances in the last 12 months.



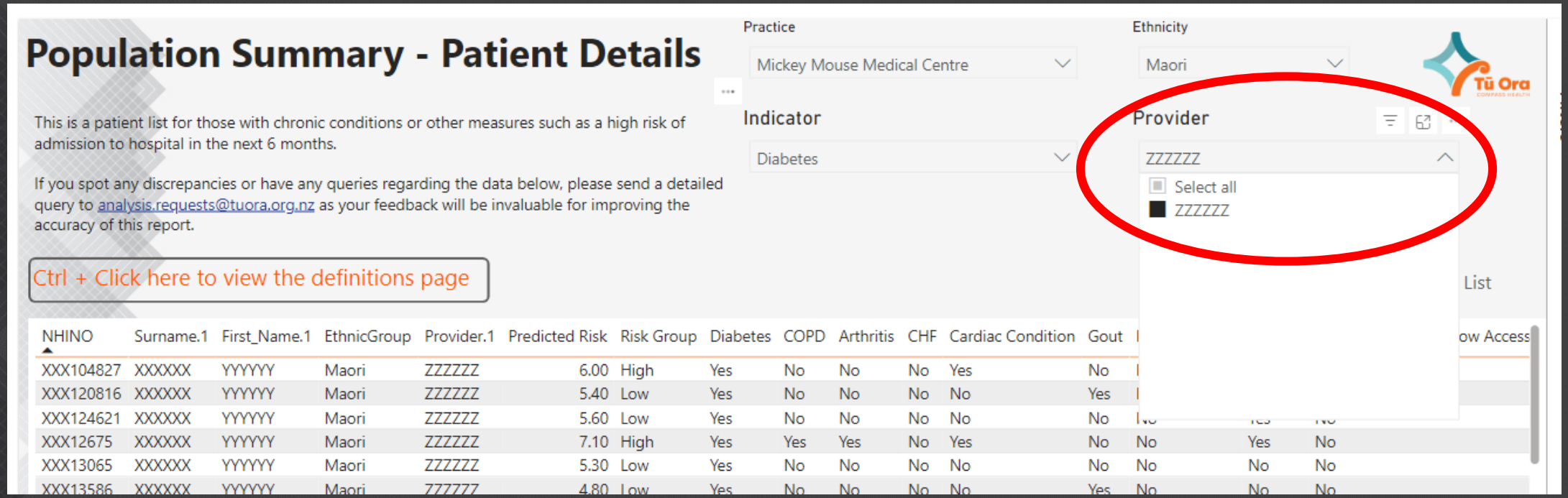
10. Filter by Ethnicity

- Click the Ethnicity Indicator drop down and select the ethnicity you are looking for.



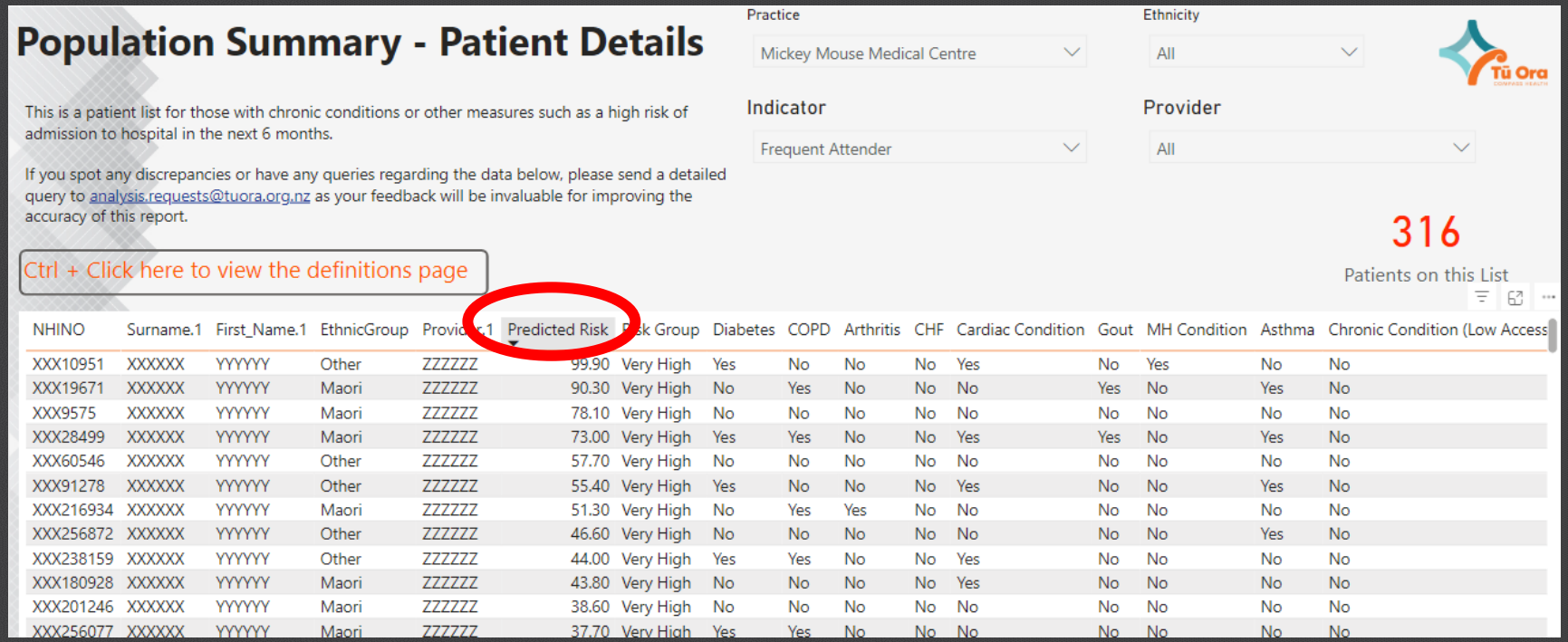
11. Filter by Provider

- Click the provider drop down and select the provider



12. Reorganise List

- You can re-sort the list to show you a different ordering
- To do this, click on the desired group heading and it will cycle through the options.
- Notice how in this screenshot, the risk is now sorted from high to low.



Population Summary - Patient Details

Practice: Mickey Mouse Medical Centre

Ethnicity: All

Indicator: Frequent Attender

Provider: All

This is a patient list for those with chronic conditions or other measures such as a high risk of admission to hospital in the next 6 months.

If you spot any discrepancies or have any queries regarding the data below, please send a detailed query to analysis.requests@tuora.org.nz as your feedback will be invaluable for improving the accuracy of this report.

Ctrl + Click here to view the definitions page

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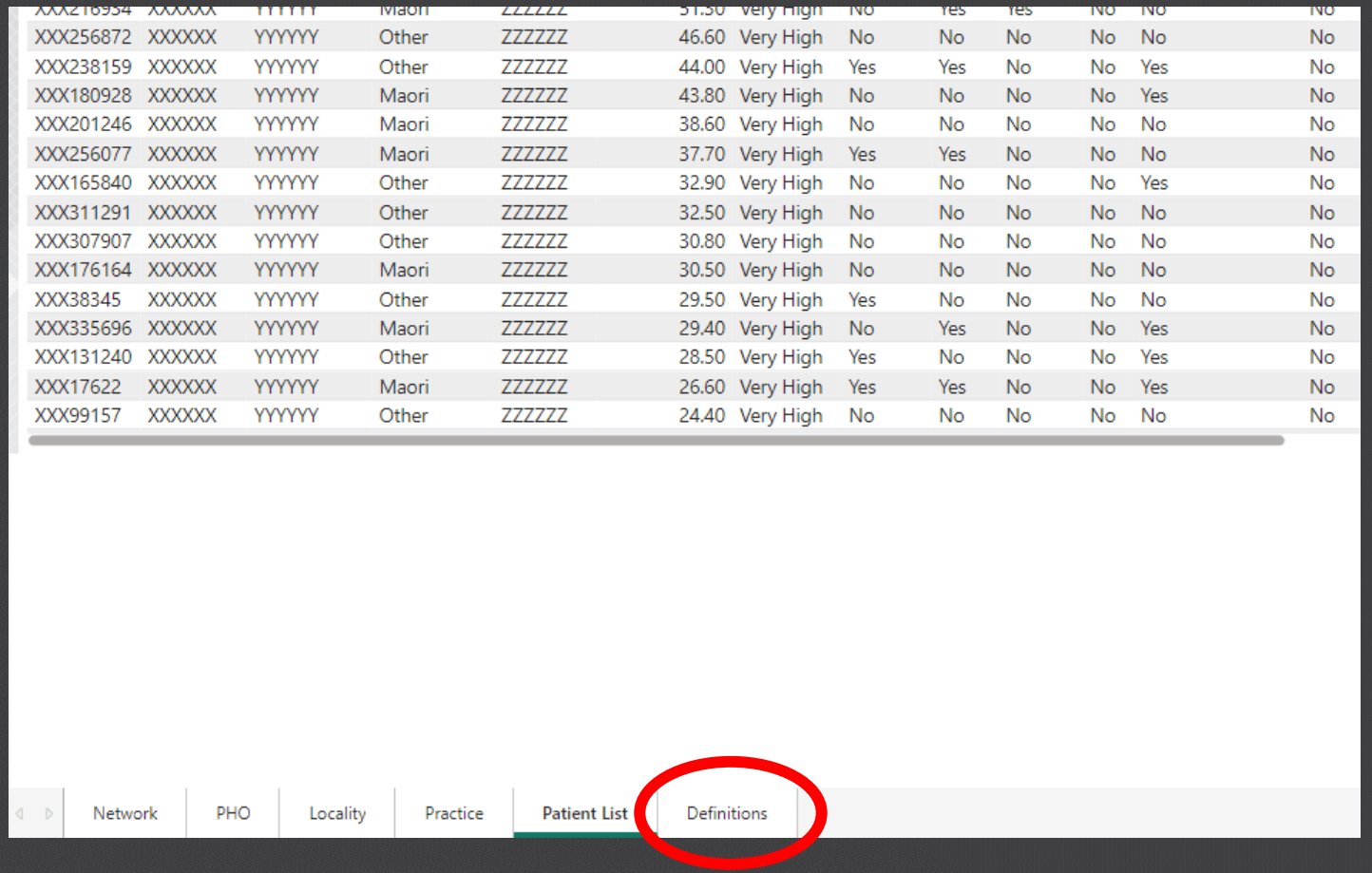
Patients on this List

NHINO	Surname.1	First_Name.1	EthnicGroup	Provi...e.1	Predicted Risk	Risk Group	Diabetes	COPD	Arthritis	CHF	Cardiac Condition	Gout	MH Condition	Asthma	Chronic Condition (Low Access
XXX10951	XXXXXX	YYYYYY	Other	ZZZZZZ	99.90	Very High	Yes	No	No	No	Yes	No	Yes	No	No
XXX19671	XXXXXX	YYYYYY	Maori	ZZZZZZ	90.30	Very High	No	Yes	No	No	No	Yes	No	Yes	No
XXX9575	XXXXXX	YYYYYY	Maori	ZZZZZZ	78.10	Very High	No	No	No	No	No	No	No	No	No
XXX28499	XXXXXX	YYYYYY	Maori	ZZZZZZ	73.00	Very High	Yes	Yes	No	No	Yes	Yes	No	Yes	No
XXX60546	XXXXXX	YYYYYY	Other	ZZZZZZ	57.70	Very High	No	No	No	No	No	No	No	No	No
XXX91278	XXXXXX	YYYYYY	Other	ZZZZZZ	55.40	Very High	Yes	No	No	No	Yes	No	No	Yes	No
XXX216934	XXXXXX	YYYYYY	Maori	ZZZZZZ	51.30	Very High	No	Yes	Yes	No	No	No	No	No	No
XXX256872	XXXXXX	YYYYYY	Other	ZZZZZZ	46.60	Very High	No	No	No	No	No	No	No	Yes	No
XXX238159	XXXXXX	YYYYYY	Other	ZZZZZZ	44.00	Very High	Yes	Yes	No	No	Yes	No	No	No	No
XXX180928	XXXXXX	YYYYYY	Maori	ZZZZZZ	43.80	Very High	No	No	No	No	Yes	No	No	No	No
XXX201246	XXXXXX	YYYYYY	Maori	ZZZZZZ	38.60	Very High	No	No	No	No	No	No	No	No	No
XXX256077	XXXXXX	YYYYYY	Maori	ZZZZZZ	37.70	Very High	Yes	Yes	No	No	No	No	No	No	No

13. View the definitions page

- Click on the “definitions” tab at the bottom of the page



14. Definitions page

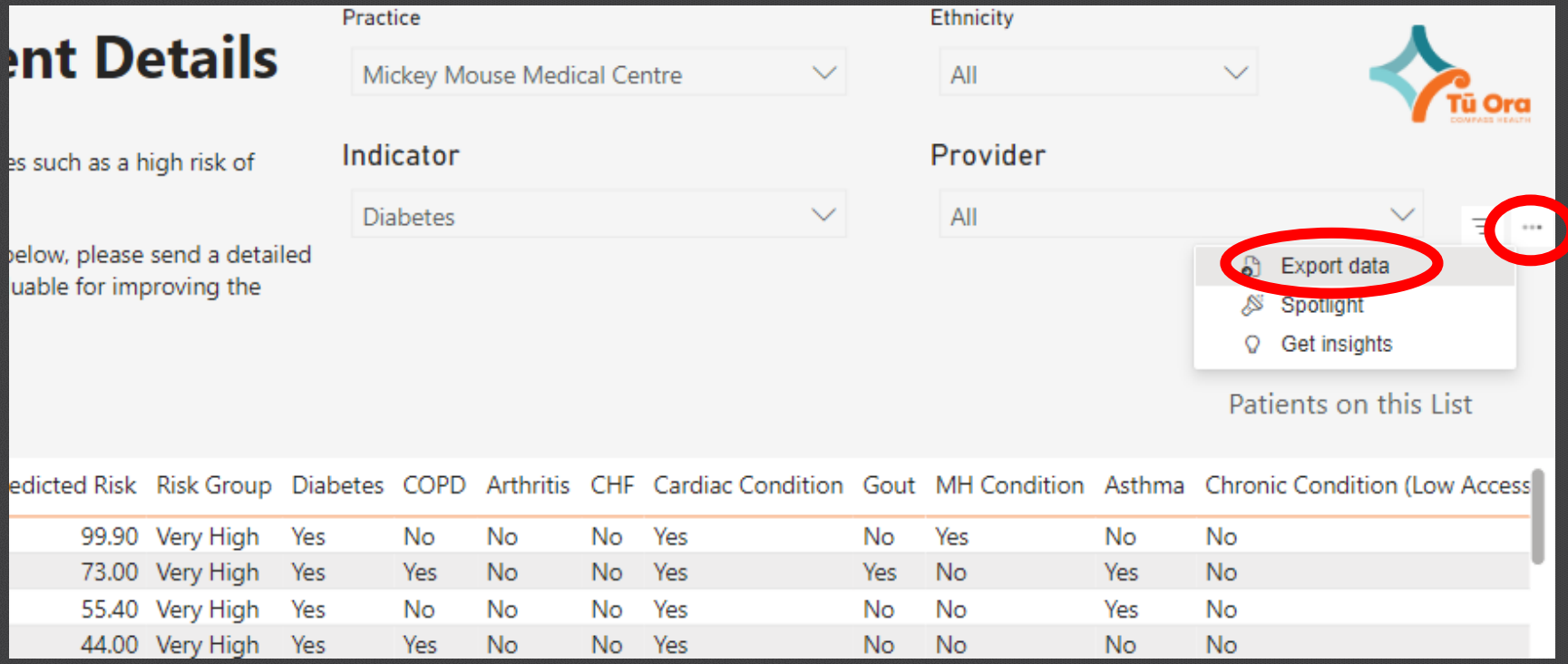
- This page contains short descriptions of the indicators

Definitions Page for Indicators

Indicator	Definition
Arthritis	Read coded for either rheumatoid arthritis or osteoarthritis (N0
Asthma	Read coded for Astham (H33 root).
Cancer Readcode (Ever)	Read coded with any history of malignant neoplasms (B.. root, s
Cardiac Condition	Read coded for cardiac conditions (792,G1,G3,G6,G540/G5411,C
Chronic Condition (Low Access)	Has any of the read codes for Diabetes/COPD/Arthritis/Congest has had less than 3 unique consult dates in the past 12 months.
Congestive Heart Failure	Read coded for Congestive Heart Failure (G58 root).
COPD	Read coded for chronic obstructive pulmonary disease (H3 root
CVD Risk > 15%	Latest CVD Risk value is greater than 15%.
Diabetes	Read coded with a C10 root.
Frail Elderly	Patient has been classified as "Frail Elderly".
Frequent Attender	More than 12 unique consult dates in the previous 12 months.
Gout	Read coded for Gout (C34 root).
High Falls Risk	Aged 50 or older, and have had a hospital presentation for con
Mental Health Condition	Read coded for various different mental health conditions withi
Predicted Risk	An algorithm for predicting the risk of hospital admission for pa High), the next 5% (High), then the remaining 93% (Low).
Renal	Read coded for Chronic Kidney Disease (K05 root).

15. Exporting patient list

- To export this data, move your mouse to the upper right of the page and click on the ". . ." as shown in the screenshot below.
- This will export all data, irrespective of filters
- Click on "export data" and choose the format desired



edicted Risk	Risk Group	Diabetes	COPD	Arthritis	CHF	Cardiac Condition	Gout	MH Condition	Asthma	Chronic Condition (Low Access
99.90	Very High	Yes	No	No	No	Yes	No	Yes	No	No
73.00	Very High	Yes	Yes	No	No	Yes	Yes	No	Yes	No
55.40	Very High	Yes	No	No	No	Yes	No	No	Yes	No
44.00	Very High	Yes	Yes	No	No	Yes	No	No	No	No

For further support

Contact practice@tuora.org.nz if further support is required.