



# Allied Health Improvement Group

24 & 25 Oct 2013 Sydney

Meeting code HRT1316

## Why Participate?

- ◆ **Understand how your Allied Health activity compares with your peers**
- ◆ **Identify innovative Allied Health strategies that contribute to organisational priorities**
- ◆ **Share issues and innovations with your colleagues**
- ◆ **Develop practical action plans to improve your service over the next year**



Select Optional Activity B2 on your subscription agreement and return by email or fax.



**\$A5,000 per Member Facility (plus GST).** Individual delegate venue fees are billed separately.

**Earlybird discount** of 2% if subscription and payment is made by 15 December 2012.



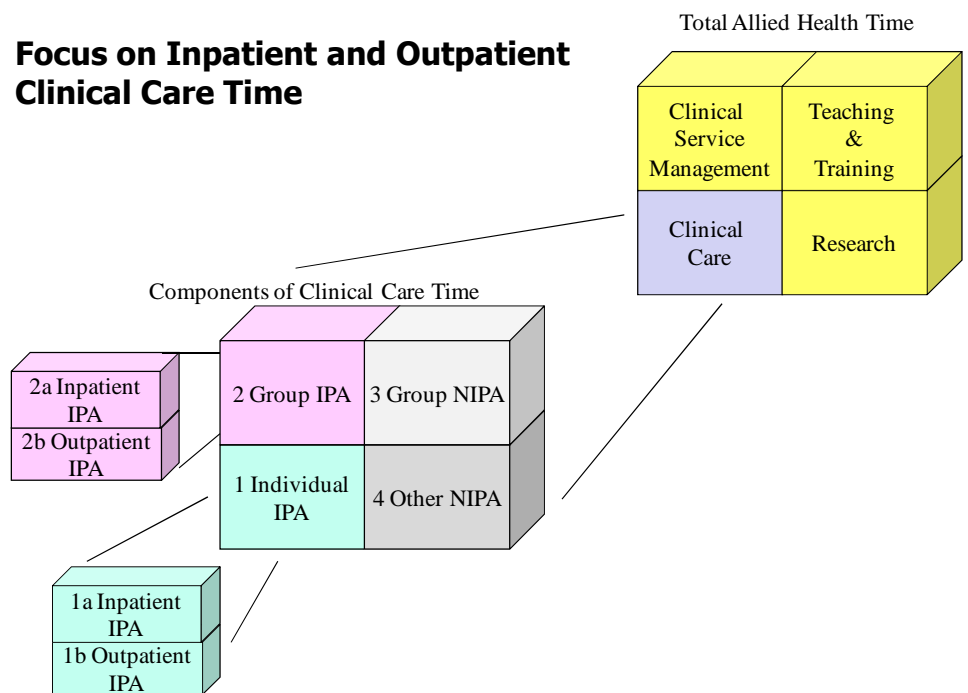
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The **Allied Health Improvement Group**, in partnership with the National Allied Health Benchmarking Consortium (NAHBC) has been collecting and comparing Allied Health activity data for over 12 years. The data is used to drive change and innovation in staffing and delivery of patient care. In 2013 we will explore how Allied Health services can support ED access targets

## Focus on Inpatient and Outpatient Clinical Care Time



## Drilling Down to Comparisons of Allied Health Time by DRG

Family	Description	Your Episode Count	Percent Episode with Any Allied Health Activity	Median Allied Health Minutes per Episode			Median LOS when Allied Involved	Median Inpat Time per Day	PHYSIO	
				Pre-Time	Inpat Time	Post-Time			%	Min
A06	TRACHEOSTOMY OR VENTILATION>95	102	10%		942		19.6	42.1606	100%	395
B03	SPINAL PROCEDURES	2	50%		685		21.5	31.1364		
B04	EXTRACRANIAL VASCULAR PROCS	47	4%		275		8.1	31.3333		
B05	CARPAL TUNNEL RELEASE	59	2%		40		0.3	40		
B06	CBL PSY,MUS DYSY,NEUPHTY PR	9	22%		335		15.1	18.1667		
B60	ESTAB PARA/QUAD+/-OR PROCS	14	7%		25		1.8	12.5		
B63	DMNTIA&CHRNIC DISTURB CRBRL FN	67	13%		255		14.0	28.3333	56%	40
B64	DELIRIUM	123	14%		215		6.7	29.3519	59%	120
B66	NERVOUS SYSTEM NEOPLASM	59	10%		190		6.7	22.2222		



# Allied Health Improvement Group 2013

## What do you need to do?

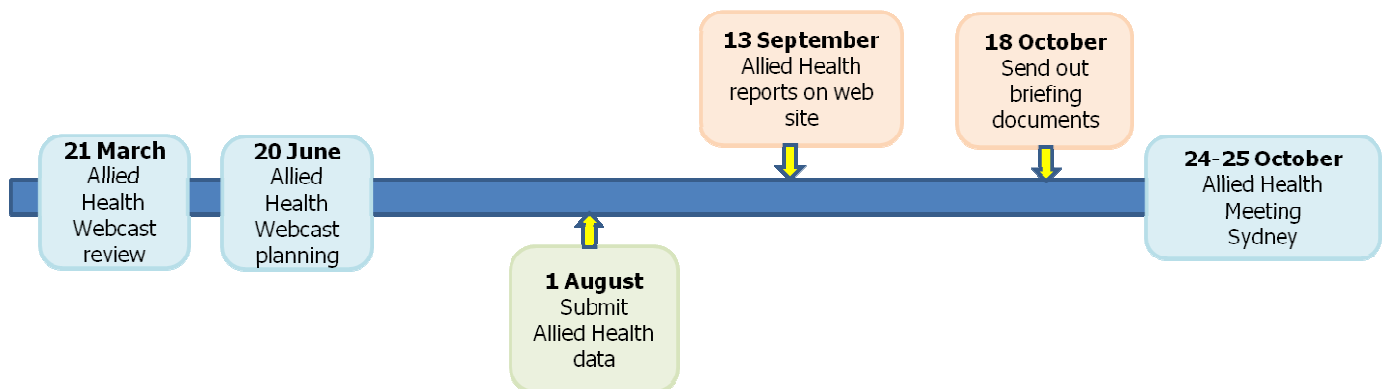
- ◆ Designate a liaison representative as a key contact for this group.
- ◆ Provide detailed activity data from your Allied Health system.
- ◆ Disseminate and use the Allied Health data and reports at your health service to identify differences in practice, and contact other participants to identify innovations in patient care.
- ◆ Identify an improvement project based on the data, and share your results with other organisations at the annual meeting.
- ◆ Organise a delegation and attend the annual meeting—up to 4 delegates.

## What does The Health Roundtable do?

- ◆ Collect and process your annual Allied Health data.
- ◆ Merge Allied Health data with inpatient episode data to provide a suite of comparative reports.
- ◆ Convene and facilitate webcasts to plan the annual meeting and address issues relating to the next submission cycle.
- ◆ Facilitate the annual meeting to identify innovative practices and encourage action to improve the patient journey.

Allied Health Data Specifications	
Field	Description
Hosp	Hospital Code
URNumber	Patient unit record number (not episode number), or [G=Group, M=Management, T=Teaching/Training, R=Research]
Student	S=Student, P=Trained
Category	CC=ClinicalCare, CSM=Management, TT=Teaching/Training, R=Research
IPA	I=IPA, N=NIPA
Inpatient	IPA [I = Inpatient, O = Outpatient] NIPA [X]
Group	I = Individual, G = Group, X = Unknown/Other
DateOS	Date of Service (dd/mm/yyyy)
Department	SW = Social Work, DI= Dietetics, PH=Physio, OT=Occ. Therapy, AU=Audiology, PO=Prosthesis, SP=Speech, PD=Podiatry, Other/unknown [please supply local code and department name where possible for other departments]
StaffID	Unique alphanumeric code to identify each staff member providing service
TimeSpent	Number of Minutes spent in consultation (per patient in groups)

## 2013 Timeline Allied Health Improvement Group



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The **Health Roundtable** helps health executives learn how to achieve *best practice* in their organisations. We collect and analyse operational and clinical data of our member organisations to search for *innovations in patient care*. We promote *collaboration and networking* amongst health executives and staff through our roundtable meetings, workshops, and other activities.