July 2010 – June 2011

Summary of Progress

WA can report a successful year of progress against the Subacute Care Implementation Plan: Projects that commenced in 2009-2010 continued with consolidation and expansion, new projects planned to commence in 2010-2011 were implemented and planning and consultation for those projects due to commence in 2011-2012 took place over the period February – June 2011.

Important milestones in 2010-2011 have been the establishment of the secondary hospital dedicated Stroke Rehabilitation Services at Osborne Park Hospital (OPH) and an outreach Parkinson’s Disease Visiting Service across the South Metropolitan Area Health Service. The OPH Stroke Service has received national recognition with two staff member awards from the Australian and New Zealand Stroke Society.

The establishment of an Integrated Rehabilitation Service based at Bunbury Regional Hospital was of major importance for the South-West Area Health Service and commenced in March 2011. A permanent geriatrician has been recruited to the region; a 10 bed rehabilitation unit has been established as well as the commencement of a Day Therapy program. A “hub and spoke” model has been adopted, with three outlier regional sites also commencing a dedicated rehabilitation service for patients that have returned from Bunbury Regional Hospital. In addition, the geriatrician service has established strong links with local GPs as visits to regional towns are formalised. This integrated program has provided a strong platform for further expansion under Schedule E.

A Psycho-geriatric Visiting service to rural and remote regions of WA also commenced in July 2011, similar to the Visiting Geriatrician service to all regional centres of WA. This is the first time that a dedicated specialist psycho-geriatrician service of this kind has occurred in rural and remote regions, raising the profile of the care needs of the patient group and allowing for further expansion under Schedule E.

Notable achievements have also occurred in the area of data collection processes and the quality of subacute care data. With funding allocated to the employment of staff dedicated to the improvement of subacute care data collection, there has been a greater awareness and understanding of the importance of accurate data collection across the WA Department of Health and personnel involved in the delivery of subacute care services.

Timely implementation of the WA Subacute Care Plan has served to strengthen the credibility of the reform process for subacute care services. The gradual expansion of subacute services across the state in the second year of the operation of the WA Subacute Care Plan has provided a strong platform for service expansion in Schedule E.

Where projects were delayed (GEM South Metropolitan Area Health Service; the Statewide Training and Development Unit, Kalgoorlie Regional Hospital Integrated Rehabilitation Service), planning is well underway for these programs to commence in 2011-2012. Financial savings from delayed start dates have been re-allocated to further expand services that are performing well and/or to diversify existing services (for example North Metropolitan Area Health Service Parkinson’s Disease Outreach Program, Day Therapy Unit expansion).

<table>
<thead>
<tr>
<th>Key deliverables</th>
<th>Progress and timing</th>
<th>Allocation of NPA funding</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## REHABILITATION

### DAY THERAPY SERVICES
- Increase in service delivery levels at metropolitan Day Therapy sites:
  - Full service commencement 2010-2011
  - $4,719,000 total
  - Recurrent funding
  - $1,242,466 in 2010-11

- Increase in service delivery levels at regional sites:
  - Full service commencement 2010-2011 at specified sites
  - $2,261,000 total
  - Recurrent funding
  - $679,943 in 2010-11

2010-2011 project deliverables completed.

Metropolitan services occurring at Armadale, Bentley, Fremantle – Moss Street, Joondalup, Osborne Park Hospital, Mercy Day Therapy, Sir Charles Gairdner, Swan Districts and Rockingham.

Regional services occurring at Geraldton, Northam, Albany and Bunbury.

### REHABILITATION IN THE HOME (RITH)
- Increase in service delivery levels
  - Full service commencement 2010-2011
  - $3,155,000 total
  - Recurrent funding
  - $1,019,416 in 2010-11

2010-2011 project deliverables completed:

Expansion of existing rehabilitation in the home (RITH) services in the North Metropolitan Region linked to Osborne Park and Joondalup Hospital sites and in the South Metropolitan Region linked to the Armadale, Bentley, Peel and Rockingham Hospital sites.

### COMMUNITY REHABILITATION (WA COUNTRY HEALTH SERVICES)
- Commencement of home-based service delivery in regional locations
  - Full service commencement 2010-2011
  - $984,000 total
  - Recurrent funding
  - $316,500 in 2010-11

2010-2011 project deliverables completed:

Home-based rehabilitation services commenced at Geraldton, Albany.
### COMMUNITY PHYSIOTHERAPY SERVICES

- Increase in existing community based physiotherapy services in the North and South Metropolitan Regions
- Increase in community based physiotherapy services at Northam

<table>
<thead>
<tr>
<th>Services building in 2010-2011 for metropolitan region</th>
<th>$3,059,000 total</th>
<th>Recurrent funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full service at Northam hospital 2010-2011</td>
<td>$208,000 total</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Recurrent funding</td>
<td></td>
</tr>
<tr>
<td></td>
<td>$56,000 in 2010-11</td>
<td></td>
</tr>
</tbody>
</table>

2010-2011 project deliverables completed:

### AMPUTEE SPECIALIST REHABILITATION SERVICES

- Specialist medical rehabilitation services for amputee patients with the integration of an allied health multi-disciplinary team to service North and South Metro Regions

<table>
<thead>
<tr>
<th>Full service commencement 2010-2011</th>
<th>$681,000 total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Recurrent funding</td>
</tr>
<tr>
<td></td>
<td>$226,402 in 2010-11</td>
</tr>
</tbody>
</table>

2010-2011 project deliverables completed:

- The multidisciplinary outreach service is provided by the Statewide Rehabilitation Centre (Shenton Park) and delivered at outpatient clinics at Fremantle and Sir Charles Gairdner Hospitals.

### DEDICATED PARKINSON DISEASE AMBULATORY CARE OUTREACH REHABILITATION SERVICES – SOUTH METROPOLITAN REGION

- Regional ‘hub and spoke’ model with a multi-disciplinary rehab focus for people with Parkinson’s disease at Day Therapy Units.

<table>
<thead>
<tr>
<th>Full service commencement 2010-2011</th>
<th>$3,776,000 total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Recurrent funding</td>
</tr>
<tr>
<td></td>
<td>$1,200,000 in 2010-11</td>
</tr>
</tbody>
</table>

2010-2011 project deliverables completed:

- Allied health and clinical experts from a central Day Therapy Unit (Moss Street Centre for clinical expertise and training) consult at satellite units on a rotating basis.
<table>
<thead>
<tr>
<th>Project Name</th>
<th>Commencement Date</th>
<th>Total Funding</th>
<th>Recurrent Funding</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dedicated Parkinson Disease Ambulatory Care Outreach Rehabilitation Services - North Metropolitan Region</td>
<td>Half year commencement 2010-2011</td>
<td>$642,000</td>
<td>$217,000 in 2010-2011</td>
<td>Expansion of 2010-2011 project deliverables for Parkinson’s Disease Rehabilitation programs. A full multi-disciplinary team including medical specialist input established at Swan Districts Hospital to service north-eastern metropolitan catchment area. Service operates with the Day Therapy Unit program. Linked to Osborne Park Hospital centre for clinical expertise and training. Outreach nursing service for central north metropolitan region to complement existing Osborne Park Hospital Centre of Excellence for Parkinson’s Disease.</td>
</tr>
<tr>
<td>Secondary Stroke Unit in North Metropolitan Region</td>
<td>Full service commencement 2010-2011</td>
<td>$3,834,000</td>
<td>$1,001,384 in 2010-2011</td>
<td>2010-2011 project deliverables completed: North Metropolitan Area Health Secondary Stroke unit at Osborne Park Hospital with Early Supported Discharge and Outpatient service. The dedicated inpatient unit is 10 beds.</td>
</tr>
<tr>
<td>Mid-West Rehabilitation Inpatient - Geraldton</td>
<td>Full service commencement 2010-2011</td>
<td>$327,000</td>
<td>$105,000 in 2010-2011</td>
<td>2010-2011 project deliverables completed: Additional Allied health resources to service inpatient rehabilitation needs at Geraldton Hospital.</td>
</tr>
<tr>
<td>Great Southern Inpatient Rehabilitation - Albany</td>
<td>Full service commencement 2010-2011</td>
<td>$328,000</td>
<td>$105,500 in 2010-2011</td>
<td>2010-2011 project deliverables completed: Additional allied health resources to service inpatient rehabilitation needs at Albany Hospital.</td>
</tr>
</tbody>
</table>
**SOUTH WEST INTEGRATED REHABILITATION SERVICE**

- Inpatient rehabilitation and restorative service servicing South-West region of WA

<table>
<thead>
<tr>
<th></th>
<th>Full service commencement March 2011</th>
<th>2010-2011 project deliverables completed, albeit with delayed commencement.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Based around a 10-bed inpatient unit at Bunbury Regional Hospital, integrated with the Day Therapy Unit and linked to regional sites. A Geriatrician provides consultancy and liaison services throughout the South West Health region.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$4,456,000 total&lt;br&gt;- Recurrent funding&lt;br&gt;- $800,00 (half year effect) in 2010-11</td>
</tr>
</tbody>
</table>

**2010-2011 - Planning and Consultation for new REHABILITATION projects set for commencement 2011-2012**

**SECONDARY STROKE SERVICES IN SOUTH METROPOLITAN AREA HEALTH SERVICE - BENTLEY HOSPITAL**

<table>
<thead>
<tr>
<th></th>
<th>Planning and consultation from February - June 2011 Service commencement planned for October 2011</th>
<th>Planning and consultation from February - June 2011 Service commencement planned for October 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$2,506,000 total&lt;br&gt;- Recurrent funding</td>
<td>Inpatient and outpatient services dedicated to stroke rehabilitation will be provided at this South Metropolitan secondary hospital site, meeting objectives of rehabilitation care provision ‘closer to home’ and taking pressure of acute hospital services.</td>
</tr>
</tbody>
</table>

**NEUROSCIENCE SPECIALIST - SOUTH METROPOLITAN AREA HEALTH SERVICE - BENTLEY HOSPITAL**

<table>
<thead>
<tr>
<th></th>
<th>Planning and consultation from February - June 2011 Service commencement planned for October 2011</th>
<th>This position will provide the specialised medical consultation for the stroke unit at Bentley Hospital as well as provide expertise and clinician availability for Parkinson’s Disease programs.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$357,000 total&lt;br&gt;- Recurrent funding</td>
<td></td>
</tr>
</tbody>
</table>

**INTEGRATED REHABILITATION SERVICE - KALGOORLIE**

<table>
<thead>
<tr>
<th></th>
<th>Planning and consultation – February - November 2011 with service commencement planned for January 2012</th>
<th>Planning considerations relating to the viability of a service model in a rural and remote region have contributed to delays in the establishment of the service.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$482,000 total&lt;br&gt;- Recurrent funding</td>
<td>A dedicated Inpatient and Day Therapy Unit service will commence based on a multi-disciplinary approach to rehabilitation. A specialist rehabilitation visiting service will be purchased from a metropolitan tertiary teaching hospital to provide assistance for medical governance of the program.</td>
</tr>
</tbody>
</table>

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## GERIATRIC EVALUATION AND MANAGEMENT

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Commencement</th>
<th>Funding Details</th>
<th>Project Deliverables</th>
</tr>
</thead>
<tbody>
<tr>
<td>GERIATRIC EVALUATION AND MANAGEMENT SERVICE – SOUTH-WEST REGION OF WA</td>
<td>March 2011</td>
<td>$989,000 total, Recurrent funding, $300,000 in 2010-11</td>
<td>2010-2011 project deliverables completed, albeit with late start of March 2011, due to need for international recruitment of geriatrician.</td>
</tr>
<tr>
<td>GEM SERVICES AT DAY THERAPY SITES IN THE METROPOLITAN REGION</td>
<td>Full service commencement 2010-2011</td>
<td>Nil allocation, within existing Department of Geriatric Medicine resources</td>
<td>2010-2011 project deliverables completed, Best practice initiative/ State-wide Reform Program underway to promote consistent assessment practices, equity of access to a uniform suite of services across WA. Data collection processes improved.</td>
</tr>
<tr>
<td>GERIATRICIAN CLINICAL SUPPORT SERVICE</td>
<td>Full service commencement 2010-2011</td>
<td>$1,365,000 total, Recurrent funding, $346,500 in 2010-11</td>
<td>2010-2011 project deliverables completed, Visiting Geriatrician Service support across WA Country Health Services to provide a specialist geriatric consultation and liaison service. Sites visited include Bunbury, Collie, Busselton, Harvey, Bridgetown, Narrogin, Albany, Kalgoorlie, Esperance, Northam, Merredin, Moora, Geraldton, Port Hedland, Broome, Kununurra.</td>
</tr>
<tr>
<td>VISITING GERIATRICIAN CONSULTATION AND LIAISON SERVICE TO ALL RURAL AND REMOTE REGIONS</td>
<td>Full service commencement 2010-2011</td>
<td>$1,062,000 total, Recurrent funding, $343,500 in 2010-11</td>
<td>2010-2011 project deliverables completed, Clinical support in WA Country Health Services region that provides support for the Visiting Geriatrician Service and implementation of care recommendations post consultant geriatrician visit. Sites are as listed in preceding paragraph for Visiting Geriatrician services.</td>
</tr>
</tbody>
</table>

2010-2011 - Planning and Consultation for new GEM projects set for commencement in 2011-2012
| NORTH METROPOLITAN AREA HEALTH SERVICE – DEDICATED GEM UNIT | Planning and consultation from Nov 2010-June 2011 Commencement planned August 2011 | - $1,122,000 total  - Recurrent funding  - $550,000 indicative 2011-12 | A 14-bed Unit at Sir Charles Gairdner Hospital will commence in August 2011, providing the only dedicated GEM Unit for the North Metropolitan region. |
| SOUTH METROPOLITAN AREA HEALTH SERVICE – DEDICATED GEM UNIT | Planning and consultation from Jan 2011 - July 2011 Commencement planned September 2011 | - $898,000 total  - Recurrent funding  - $425,200 indicative 2011-12 | A 10-bed GEM Unit will commence at Fremantle Hospital in September 2011. The project has been delayed from a planned July start due to the need for some internal ward reconfigurations to accommodate the unit and some minor delays in recruitment. |

| PSYCHO-GERIATRIC CARE |

| CO-LOCATION OF DEDICATED IN-PATIENT PARKINSON DISEASE REHABILITATION SERVICES WITH PSYCHOGERIATRIC CARE SERVICES – SOUTH METROPOLITAN REGION | As reported in the 2009-2010 Annual Report, this project was redefined and reconfigured to become the Parkinson’s Disease outreach rehabilitation service for the South Metropolitan Area Health Service region. | N/A | N/A |
| VISITING PSYCHO-GERIATRICIAN CONSULTATION AND LIAISON SERVICE - RURAL AND REMOTE REGIONS | Full service commencement 2010-2011 | - $899,000 total | Recurrent funding | - $288,000 in 2010-11 | 2010-2011 project deliverables completed |
|———|———|———|———|———|———|
| | | | | | The first 6 months of operation was a pilot phase, with full commencement beginning in January 2011. Visiting Psycho-geriatricians conduct clinics at Albany, Bunbury, Broome, Geraldton, Kalgoorlie, Esperance, Kununurra, Port Hedland, Carnarvon, Northam, Narrogin, Merredin. |

| SENIOR OLDER ADULT MENTAL HEALTH SUPPORT SERVICE – RURAL AND REMOTE REGIONS | Partial commencement 2010 - 2011 | - $1,293,000 total | Recurrent funding | - $494,000 in 2010-11 | 2010-2011 project deliverables completed |
|———|———|———|———|———|———|
| | | | | | Older adult mental health professionals in rural and remote regions provide support for the Visiting Psycho-geriatrician Service and for local specialist mental health services, by implementing the care plans and recommendations established by the medical consultants. Sites are as listed in the preceding paragraph for Visiting Psycho-geriatrician service. |

| PALLIATIVE CARE |
|———|

| PALLIATIVE CARE TRAINING REGISTRARS POSITIONS | Full service commencement in 2010-2011 | - $660,000 total | Recurrent funding | - $217,360 in 2010-11 | 2010-2011 project deliverables completed |
|———|———|———|———|———|———|
| Two community-based palliative care medical registrar training positions to service the North and South Metropolitan Regions | | | | | |

| PALLIATIVE CARE TRAINING FOR RESIDENTIAL AGED CARE | Full service commencement in 2010-2011 | - $567,000 total | Recurrent funding | - $128,973 in 2010-11 | 2010-2011 project deliverables completed |
|———|———|———|———|———|———|
| Evidence Based Training Package | | | | | Pilot training has occurred at selected RACFs. The training evaluation indicates that the program is likely to influence change in practice regarding palliative care. Advance care health directives will be included as they relate to WA. |

Advanced bookings for RACF participation in the
The program is now scheduled for 2011-2012.

### WORKFORCE TRAINING AND DEVELOPMENT

- **Clinical Training and Workforce Development Unit**
  - Establishment of a Training and Development Unit remains in progress.
  - $2,318,000 total
  - Recurrent funding
  - $234,295 in 2010-11

The model and architecture of the unit was agreed in 2010-2011 (similar to the Victorian Geriatric Medicine Training Program, but with an interdisciplinary component). Delays are occurring because of administrative issues around recruitment processes.

A pilot skills development/exchange program has been undertaken at selected rural hospital sites, indicating positive outcomes and a need to expand this component of services provided by the Training Unit.

### DATA COLLECTION AND REPORTING

### SUBACUTE CARE REPORTING AND IMPROVEMENTS IN DATA COLLECTION

- Across life of COAG NPA funding
  - $825,000 total
  - Recurrent funding
  - $200,000 in 2010-11

WA has participated in national meetings to achieve national consistency in subacute care measurement.

Improvement in statewide collection of subacute care activity with dedicated funding for additional positions at WA Health central data collection and repository unit.

Improvements in data collection have contributed to a revision in baseline methodology for 2007-2008 and revised activity for 2009-2010 and 2010-2011.

Development and implementation of data collection
Contact Officer:  *Gail Milner, A/Executive Director, Innovation and Health System Reform Division*

Phone: *(08) 92222231*
Subacute care annual service activity and growth report

REVISED 2012

State/Territory: Western Australia
Period: 2010-11

* To calculate growth percentages (Table 2), use EITHER Patient days (volumes) OR Separations (patients)

### Table 1: Activity by care type

<table>
<thead>
<tr>
<th>Care Type</th>
<th>Rehabilitation</th>
<th>Palliative</th>
<th>GEM&lt;sup&gt;1&lt;/sup&gt;</th>
<th>Psycho-geriatric</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Patient days (volumes)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hospital based</td>
<td>151,352</td>
<td>22,836</td>
<td>6,268</td>
<td>38,854</td>
<td>219,310</td>
</tr>
<tr>
<td>Hospital in the Home</td>
<td>31,888</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>31,888</td>
</tr>
<tr>
<td>Combined Hospital based &amp; HITH</td>
<td>183,240</td>
<td>22,836</td>
<td>6,268</td>
<td>38,854</td>
<td>251,198</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total admitted patient days</strong></td>
<td>183,240</td>
<td>22,836</td>
<td>6,268</td>
<td>38,854</td>
<td>251,198</td>
</tr>
<tr>
<td><strong>or Separations (patients)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hospital based</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hospital in the Home</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Combined Hospital based &amp; HITH</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (please specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total admitted separations</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Average length of stay</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Bed Day Equivalents</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(b)</td>
</tr>
</tbody>
</table>

### Occasions of service (volumes)

<table>
<thead>
<tr>
<th>Care Type</th>
<th>Centre based</th>
<th>Home based</th>
<th>Combined Centre &amp; Home based</th>
<th>Other (please specify)</th>
<th>Total occasions of service</th>
<th>Weighted Bed Day Equivalents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital based</td>
<td>521,422</td>
<td>UTD</td>
<td>NA</td>
<td>NA</td>
<td>521,422</td>
<td>260,711</td>
</tr>
<tr>
<td>Home based</td>
<td>UTD</td>
<td>75,359</td>
<td>NA</td>
<td>NA</td>
<td>77,199</td>
<td>38,600</td>
</tr>
<tr>
<td>Combined Centre &amp; Home based</td>
<td>521,422</td>
<td>75,359</td>
<td>NA</td>
<td>1,840</td>
<td>521,422</td>
<td>36,060</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>NA</td>
<td>1,308</td>
<td>NA</td>
<td>NA</td>
<td>1,308</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Total occasions of service</strong></td>
<td>521,422</td>
<td>77,199</td>
<td>1,308</td>
<td>1,308</td>
<td>688,391</td>
<td>88,462</td>
</tr>
<tr>
<td><strong>Weighted Bed Day Equivalents</strong></td>
<td>260,711</td>
<td>38,600</td>
<td>654</td>
<td>44,231</td>
<td>344,196</td>
<td>668,243</td>
</tr>
</tbody>
</table>

### Episodes<sup>2</sup> (patients)

<table>
<thead>
<tr>
<th>Care Type</th>
<th>Centre based</th>
<th>Home based</th>
<th>Combined Centre &amp; Home based</th>
<th>Other (please specify)</th>
<th>Total episodes</th>
<th>Total group sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital based</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,305</td>
</tr>
<tr>
<td>Home based</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>Combined Centre &amp; Home based</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>50</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5,122</td>
</tr>
<tr>
<td><strong>Total episodes</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6,477</td>
</tr>
</tbody>
</table>

<sup>1</sup> Geriatric Evaluation and Management

<sup>2</sup> Episode data is for information only, and not a factor for calculating growth in service delivery.
### Table 2: Growth percentages (2010-11)

<table>
<thead>
<tr>
<th>Growth percentages (2010-11)</th>
<th>Patient days</th>
<th>Separation occasions (BDEs)</th>
<th>Occasions of service (WBDEs)</th>
<th>Total BDEs</th>
<th>Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline</td>
<td>227,046</td>
<td>284,452</td>
<td>511,498</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Targeted % increase</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1:2</td>
</tr>
<tr>
<td>Services in 2010-11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Increase in 2010-11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% increase</td>
<td>1.0%</td>
<td>8.2%</td>
<td>4.8%</td>
<td></td>
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<tr>
<td></td>
<td>251,198</td>
<td>(b)</td>
<td>344,196</td>
<td>595,394</td>
<td></td>
</tr>
<tr>
<td></td>
<td>24,152</td>
<td></td>
<td>59,744</td>
<td>83,896</td>
<td></td>
</tr>
<tr>
<td></td>
<td>10.6%</td>
<td></td>
<td>21.0%</td>
<td>16.4%</td>
<td></td>
</tr>
</tbody>
</table>

| WBDE Ratios                  |              |                             |                            |            |       |
|                              | Rehabilitation | Paliative care | GEM | Psychogeriatric |
|                              | 1:2           |                | 1:2 |                |

### Definitions

**Subacute care**
Rehabilitation, palliative care, geriatric evaluation and management and psychogeriatric care, as defined in the most recent version of the National Health Data Dictionary.

**Admitted Care**
Patient days – the total number of days for all patients who were admitted for an episode of care and who separated during a specified reference period (METeOR 270045).

Separation – the process by which an episode of care for an admitted patient ceases. A separation may be formal or statistical (METeOR 327268).

Hospital-in-the-home (HITH) – provision of care to hospital admitted patients in their place of residence as a substitute for hospital accommodation. Place of residence may be permanent or temporary (METeOR 327308).

Hospital based – admitted subacute care services provided in acute, non-acute and subacute hospitals or same-day establishments or through Hospital-in-the-home (HITH) care.

**Non-admitted Care**
Occasions of service (OOS) – the number of occasions of examination, consultation, treatment or other service provided to a patient (METeOR 291061)

Group sessions – care or assistance simultaneously being provided to more than one person (METeOR 294406), either as an occasion of service or episode.

Centre based – subacute care services provided in non-admitted settings including hospital outpatient clinics and hospital outreach and hospital-auspiced community health facilities.

Home based – subacute care services provided to non-admitted patients in their place of residence through a hospital outpatient, hospital outreach or hospital-auspiced community health program.

**Episode of care** - A period of health care with a defined start and end date (METeOR 268978).

**Weighted Bed Day Equivalents (WBE)**
The WBE is the ratio of the admitted bed day cost to the non-admitted count cost.

Example:
If the admitted bed day cost is $1000 and non-admitted count cost is $250, then WBE = 1:4 ($1000/$250 = 4)
1. The revised 2010/11 activity reflects improvements in both the data processing techniques and Subacute Care counting method. The output will differ to those provided in the WA Implementation Plan and previous NPA HHWR submissions. This renders all previous 2010/11 estimates obsolete.

2. All counts were prepared using the latest data available.

3. UTD - unable to determine.

4. NA - not applicable.

5. Admitted data also includes public patients at private hospitals under contractual arrangements.

6. Admitted data were sourced from the WA Health Hospital Morbidity Data Collection (Coded Data Extract).

7. It was not possible to source all Non-admitted Rehabilitation data from unit records (i.e. patient-level data). Aggregated count data has also been used, which cannot be validated through comparison with unit records. Therefore, this data may be subject to change.

8. The methods used for revised 2010/11 reporting are consistent with those used to produce the revised (in 2012) baseline counts.

9. In WA, mental health services are provided under three programme streams: Child and Adolescent Mental Health Services, Adult and Older Adults. For 2010/11, Subacute Non-admitted Psychogeriatric statistics (activity), only those occasions of service that were provided as part of an Older Adults programme stream were counted. To ensure consistency, it therefore excluded occasions of services provided to people aged 65 years in the Adult programme stream.

10. Currently, the distinction between group and individual occasions of Rehabilitation service (Non-admitted) is impossible to determine with confidence. These data were counted as individual occasions of service.

11. The Non-admitted count of activity excludes public patients seen at private hospitals under contractual arrangements.

12. Due to improvements and introduction of the Non-admitted Patient Data Set Specification, the count of Non-admitted Rehabilitation activity (cell B24) represents 'service events' rather than 'occasions of service' where possible.

13. The Non-admitted count of activity excludes public patients treated at private hospitals under contractual arrangements.

14. Changes to Clinic Type assignment in WA Country Health Services in late 2012 has resulted in a significant increase in Non-admitted counts for Centre-based Rehabilitation. This prompted the current revision for baseline, 2009/10 and 2010/11.