

Northern Territory – Report against NPA HHWR Schedule C- Subacute Care Implementation Plan

July 2011–June 2012

Summary of Progress

All initiatives under Schedule C of the National Partnership Agreement on Hospital and Health Workforce Reform are fully implemented.

Key deliverables	Progress and timing	Allocation of NPA funding	Comments
<p>Establishment of a psycho-geriatric service in the Northern Territory</p> <p>Recruitment completed by December 2009.</p> <p>Service admission criteria, policies and procedures developed by December 2009.</p> <p>Psycho-geriatric service commenced January 2010</p>	<p>Completed March 2010.</p> <p>Completed January 2010</p> <p>Commenced January 2010</p>	<p>\$1.374M total</p>	<p>Service has been operational in Alice Springs and Darwin since January 2010, including rural and remote consultations.</p> <p>Uptake of the service has exceeded expectations, including visits to remote communities.</p> <p>Service continues in this quarter with a high level of demand. To enable sustainability of ongoing service it is evident that a second position in both regions is required to cover leave provisions and continuation of service and also assist in management of these very complex clients.</p>

<p>Enhanced program for outpatient rehabilitation either in the home or as an outpatient for Alice Springs Hospital</p> <p>Recruitment completed August 2009</p> <p>Purchase of equipment August 2009</p> <p>Referral to HITH Service, polices and procedures, revised August 2009</p> <p>Service commenced September 2009</p>	<p>Completed. June 2010</p> <p>Completed. June 2010</p> <p>Completed : December 2009</p> <p>Commenced: January 2010.</p>	<p>\$855,000 total</p>	<p>Recruitment was successful with a Physiotherapist and an Occupational Therapist currently delivering the outpatient and HITH rehabilitation services.</p> <p>Recruitment for an Aboriginal Health Worker was unsuccessful and this was converted to a therapy assistant who has been recruited and who assists with the co-ordination of the programs and in their delivery.</p>
<p>Establishing a Step-down Unit at the Royal Darwin Hospital.</p> <p>Complete scope of works August 2009.</p> <p>Request for tender September 2009.</p> <p>Building works commenced Dec 2009.</p> <p>Step Down unit opened July 2010</p>	<p>Completed. December 2009.</p> <p>Completed. January 2010</p> <p>Completed. March 2010</p> <p>Achieved. Opened July 2010</p>	<p>\$1.221M Total</p>	<p>Renovations were completed and the step-down unit became operational on 5th July 2010.</p> <p>Activity has been high ever since it opened and the model is successful for service delivery within RDH.</p>
<p>Establish a Geriatric Evaluation and Management Service at Royal Darwin Hospital</p> <p>Recruitment December 2009.</p>	<p>Recruitment completed January 2011.</p>	<p>\$331,000 Total</p>	<p>Funding allocated to 0.5 FTE Medical Registrar has been utilised for a resident medical officer 1.0 FTE to support the GEM Service.</p>

<p>Service admission criteria, polices and procedures developed December 2009.</p> <p>GEM Services commenced January 2010.</p>	<p>Completed: December 2009</p> <p>Commenced in January 2011.</p>		<p>Some Allied Health and Administrative assistance also commenced to support the GEM service.</p>
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National Partnership Agreement Hospital and Health Workforce Reform, Schedule C Subacute, Growth

State/Territory:

Period:

Table 1: Activity by care type

* To calculate growth percentages (Table 2), use Patient days (volumes)

	Rehabilitation	Palliative	GEM ¹	Psycho - geriatric	Totals
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Patient days (volumes)

<i>Admitted</i>					
Hospital based	7493	3263	1012		
Hospital in the Home					
Combined Hospital based & HITH					
Other (please specify)					
<i>Total admitted patient days</i>	7493	3263	1012		11768

or Separations (patients)

Hospital based					
Hospital-in-the-home					
Combined Hospital based & HITH					
Other (please specify)					
<i>Total admitted separations</i>					
Average length of stay					
<i>Total Bed Day Equivalents</i>					(b)

Occurrences of service (volumes)

<i>Non-admitted</i>					
Centre based	1624	158			
Home based					
Combined Centre & Home based		6103		2086	
Other (please specify)					
<i>Total occasions of service</i>	1,624	6,261		2,086	9971
<i>Weighted Bed Day Equivalents</i>					2493

Episodes² (patients)

Centre based					
Home based					
Combined Centre & Home based					
Other (please specify)					
<i>Total episodes</i>					
Total group sessions					

¹ Geriatric Evaluation and Management

² Episode data is for information only, and not a factor for calculating growth in service delivery.

Table 2: Growth percentages (2011-12)

Growth percentages (2011-12)	Patient days	Separations (BDEs)	Occurrences of service		WBDE Ratios	
			(WBDEs)	Total BDEs		Ratio
Services in baseline year 2007-08	7939		3288	11227	Rehabilitation	1:4
Services in 2010-11	13618		2,389	16007	Palliative care	1:4
Targeted % increase					GEM	1:4
Services in 2011-12	11768	(b)	2493	14261	Psychogeriatric	1:4
Service increase in 2011-12 compared to baseline	3829		-795	3034		
% increase in 2011-12 compared to baseline	41.40%		-24.20%	27%		
Service increase in 2011-12 compared to 2010-11	-1850		104	-1746		
% increase in 2011-12 compared to 2010-11	-13.00%		4.40%	-10.90%		

A combination of reconfigured service and decreased capacity has led to reduced service delivery in 2011-12 compared to 2010-11. However service growth still shows considerable increase (27%) from

Definitions

Subacute care

Rehabilitation, palliative care, geriatric evaluation and management and psychogeriatric care, as defined in the most recent version

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

Occurrences of service (OOS) – the number of occurrences 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)