

# Health Information Services - Proposal Overview

**Directorate Quality Strategy and Improvement** 

Central Coast Local Health District

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# PROPOSAL OVERVIEW

The **Health Information Service** (HIS) is responsible for providing valuable and timely health information services across the District, more specifically:

- **Document Imaging:** scanning of all paper health records generated in ED, inpatient, community and outpatient settings
- Release of Information: HIS releases discharge summaries, results, radiological reports, operations reports for ongoing care
- Medico Legal: this stream is responsible for releasing information under subpoena; to the police, coroner, ombudsman, HCCC. Medico Legal also complete secure org scanning for highly sensitive sexual assault health records
- Data Quality: this stream is responsible for identifying, investigating and resolving duplicate medical record numbers (MRNs). This stream also completes day to day administration of transcribed letters for Gosford and Wyong outpatient clinics
- **Clinical Coding:** this stream is responsible for the timely and accurate application of ICD-10-AM coding to all inpatient episodes of care. This stream includes Clinical Coding Auditors, and Educators.
- Clinical Documentation Specialist: this position is responsible for the concurrent review of health records to ensure patient and episode complexity is captured in the health record and captured in clinical coding, so the district is financial re-imbursed correctly.

This business case proposes a structure and operating hours to best align the team capabilities and future functions considering:

# The impacts of changing technology on efficient and effective future operations

- Ensuring staff are supported through better aligned work types, contemporary ways of working,
- improved succession planning and career pathways
- Ensuring financially sustainable and efficient services

Further detail is provided below

#### **FUTURE OPPORTUNITY**

The below details four key opportunities that this proposal seeks to address. These opportunities have been identified through feedback sessions with HIS Managers, HIS Supervisors, and HIS Teams Leaders, and a review of work management KPI's and data.

## **OPPORTUNITY A - HIS Document Imaging Operational Hours and Staffing Levels**

In 2015 Health Information Services (HIS) at both Gosford and Wyong transitioned to Document Imaging (DI), operational hours at both sites are currently 7am-9pm, 7 days per week. The structure, hours of operations and positions in HIS have not been reviewed since prior to the implementation of DI.

HIS Management has embedded workflows, targets and KPIs which has resulted in HIS Gosford and Wyong achieving 'a day in a day' scanning. These efficiencies have resulted in a need for review of the current operational hours at both sites and an opportunity for a reduction in operational hours which would not impact service delivery or KPIs.

It is proposed that the savings made from the DI Operating Hours and staffing levels (a) review will fund the proposals in (b) to (d) below.

#### **OPPORTUNITY B - HIS CDS and Data Quality Team**

Health Information Services has evolved over the last 8 years to move from paper health record management to complex eMR data quality and inclusion of Clinical Documentation Improvement. Positions in the team that are responsible for documentation and record quality do not have a clear reporting structure with which to share knowledge and skill sets.

There is an opportunity to formally include a stream in HIS which would have responsibility for Clinical Documentation Improvement, SNAP, Functional Independence Measure (FIM), and Data Quality. This stream can support the District with Activity Based Management (ABM) advice and application, and represent the Quality, Strategy & Improvement Directorate in education sessions, meetings with clinicians, and presentations on ABM and clinical documentation improvement.

A proposed new position of District Health Records Quality Manager would be responsible for further developing the CCLHD Clinical Documentation Specialist (CDS) program aligning with Organisation strategies including collaborating with the District Coding Manager on targeted audits, quality checks and areas of opportunity. The portfolio would also include partnering with peer organisations to compare average NWAU; NWAU review; and underperforming DRGs.

#### **OPPORTUNITY C - HIS Medico Legal Position Review**

The HIS Medico Legal Team (ML) has not had a review since 2015. With the introduction of the eMR and more complex Clinical Information Systems these roles have grown in complexity - from what was simple photocopying and release of a health record to now having to navigate and extrapolate from complex information systems.

There is an opportunity for the HIS Administration Officers – Medico Legal (currently graded as an AO3), and the HIS Medico Legal Supervisor position (currently graded as an AO6) to have new position descriptions that better reflect the future of work and it is anticipated that this will see an increase in grade.

#### **OPPORTUNITY D - Clinical Coding Auditor Additional Role**

A greater focus on Hospital Acquired Complications (HAC), and Clinical Documentation Integrity (CDI) within the LHD has greatly increased auditing requirements within the Clinical Coding Team. These audits are time consuming and, at this time, not being resourced given current budgeted Auditor/Educator FTE. There is also no clear succession plan to auditing, with a Senior Coder as an AO5 and an Auditor/Educators graded at a HSM2 which poses risk for attrition, retention of knowledge and job satisfaction.

There is an opportunity to add a HSM 1- 1.0 FTE Clinical Coding Auditor (ABM and Quality) to the team to assist in the required auditing. This will increase auditing knowledge and provide more career opportunities within the clinical coding discipline.

The MRA award scale is also not fit for purpose given that it does not cater for tertiary qualified or highly experienced clinical coders Following the lead of other LHD we are proposing to convert our current MRA7 coding roles to HSM1. This is a cost neutral exercise that will provide greater flexibility for recruitment in the future.

#### **CURRENT AND PROPOSED STRUCTURE**

A copy of the Current Organisational Chart (**Attachment 1**) and proposed future Organisational Chart (**Attachment 2**) are provided to assist in illustrating the proposed changes which respond to the identified opportunities.

#### Proposal for OPPORTUNITY A - HIS Document Imaging Operational Hours and Staffing Levels

To develop an understanding of the opportunity to review operational hours, feedback sessions were undertaken with HIS Managers, HIS Supervisors, and HIS Teams Leaders to discuss potential concerns, opportunities, and issues with reducing operational hours and the impact on staffing and service delivery. There was overwhelming support for the proposed reduction in operational hours and no staff concerns were raised with throughput, workflows, or resources.

Change to existing operational hours across HIS service:

- Current operational hours at both Gosford and Wyong are 7am 9pm, 7 days per week (including public holidays)
- Proposed change to operational hours at both Gosford and Wyong is 7am 7pm, 6 days per week (including public holidays), service closed on a Sunday

Overall, this will result in a reduction in AO2 HIS Admin establishment from 36.79 FTE to 30.3 FTE. With current vacancies this will **not impact any existing staff.** 

The preferred option is designed to better support the current HIS operations and continue to support HIS and the Organisation into the future. The proposed additional AO3 Data Quality positions, and the proposed introduction of AO4 positions (via proposed regrading of AO3 positions) in Medico Legal will give AO2 HIS staff a career progression within the department. The establishment of the Quality stream in HIS will support expansion of clinical documentation improvement, SNAP and FIM functions, and provide an opportunity for HIS to support activity-based management functions, training, and clinical documentation education across the district.

The proposed change to operational hours is a result of a service review conducted after 6 years of document imaging being implemented in CCLHD. Continuous improvement and gaining efficiencies over that time has resulted in both document imaging departments consistently meeting throughput requirements to achieve 'a day in a day' scanning. This means that paper health records collected for discharged patients are processed the next day, outpatient and community health records are processed within 48 hours of receipt.

HIS also receives requests for discharge summaries, results, operation reports etc from GPs, patients, and speciality rooms. The current operational hours were designed to support this function, however following review the impact on calls between 7pm-9pm would be minimal, and any urgent requests received on a Sunday could be re-directed to ED administration staff to complete. The ongoing electronic medical record (eMR) enhancements have resulted in a decline in the completion of paper health record forms, with most clinical information available via eMR, HealtheNet and My Health Record.

#### Proposal for OPPORTUNITY B - HIS CDS and Data Quality Team

There will be a new stream in the HIS structure to focus on health records quality:

Health Records Quality Manager (HSM3) 1.0 FTE, positions reporting to this Manager:

- Clinical Documentation Specialist (HSM2) 3.0 FTE (currently 1.0 FTE and under District Health Information Manager)
- SNAP Co-ordinator (HSM2) 0.6 FTE (move to HIS. Currently in 251948 cost centre)
- Data Manager Trauma (HSM1) 0.4 FTE (new position however cost neutral as FTE reduction to current HSM1 HIS Deputy Manager)
- HIS Admin Officer Data Quality (AO3) 5.0 FTE (currently 3.0 FTE and under Manager HIS Gosford). 1.0 FTE to sit in Wyong HIS cost centre.

Existing positions that will have an operational move or name change:

- HIS Coding Support Officer (AO3) 1.0 FTE to remain in Clinical Coding cost centre, 1.0 FTE to be moved to HIS Gosford cost centre
- Deputy Manager (HSM1) 1.0 FTE reduction in FTE from current 1.4FTE. Name change to Health Information Officer Health Records & Research
- Deputy Manager (HSM1) 0.4 FTE to be changed to Trauma Data Manager, PD to be updated.
   Current incumbent already completing these duties.

#### Proposal for OPPORTUNITY C - HIS Medico Legal Position Regrades

Proposed new position descriptions and potential increase in grade in proposed structure:

- HIS Medico Legal Clerk (AO3) 5.0 FTE review for possible regrade
- Medico Legal Supervisor (AO6) 1.0 FTE review for possible regrade, and rename position to Health Information Officer – Medico Legal/Release of Information

#### Proposal for OPPORTUNITY D - Clinical Coding Auditor Additional Role

New position in Coding cost centre:

Clinical Coding Auditor (ABM & Quality) (HSM1) – 1.0 FTE. This position would provide Clinical Coders
a pathway to senior auditing and educating positions. The position would have a focus on HACs,
NWAU, and optimising DRGs

#### **Proposed Overall Establishment Change**

```
Current Rostered HIS FTE

HSM 4 - 1.0 FTE

HSM 3 - 2.0 FTE

HSM 2 - 5.0 FTE

HSM 1 - 3.4 FTE

A06 - 2.0 FTE

A05 / MRA - 8.8 FTE (Coding)

A04 - 19.1. FTE

A03 - 13 FTE

A02 - 36.79 FTE

Total = 91.09 FTE
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Proposed Rostered HIS FTE

HSM 4 - 1.0 FTE

HSM 3 - 3.0 FTE

HSM 2 - 7.6 FTE

HSM 1 - 7 FTE

A06 - 2.0 FTE

A05 - 5.4 FTE (Coding)

A04 - 24.1 FTE

A03 -9.0 FTE

A02 - 30.1 FTE

Total = 89.2 FTE
```

#### POTENTIAL IMPACTS ON HIS WORKFORCE

Following grading of roles, some staff will benefit financially from the proposed new roles as direct appointment to a higher grade - Position descriptions have been drafted to reflect the proposed changes and support consultation - grading will occur as the proposal progresses. Financial impact has been assessed on the assumption that grading outcomes will align to the level of the proposed roles.

Staff currently work on a rotating roster including Sundays- some staff will be impacted financially with the Sunday closure. Staff finishing at 7pm will still be entitled to the shift penalty/allowance they currently receive.

New positions that have been identified will be recruited according to CCLHD recruitment policy and procedure and staff will be able to apply for roles that they are interested in.

A consultation plan has been developed to ensure staff and unions are provided opportunity to be actively engaged in the consultation process for these proposed changes.

Staff will be provided coaching, support, competency assessments and performance reviews throughout implementation of any changes to ensure they are supported in this change management process. have a safe space to seek support.

#### MANAGING THE IMPACT OF PROPOSED CHANGES ON OTHER DISTRICT SERVICES

#### **HIS Document Imaging Operational Hours**

Any urgent requests for release of information received after 7pm, or on a Sunday to be re-directed to ED administration staff to complete (this currently occurs for urgent requests received after 9pm and is expected to have minimal to no impact). Consultation, training, and support would be undertaken if the reduction in operational hours is approved. The ongoing electronic medical record (eMR) enhancements have resulted in a decline in the completion of paper health record forms, with most clinical information available via eMR, HealtheNet and My Health Record.

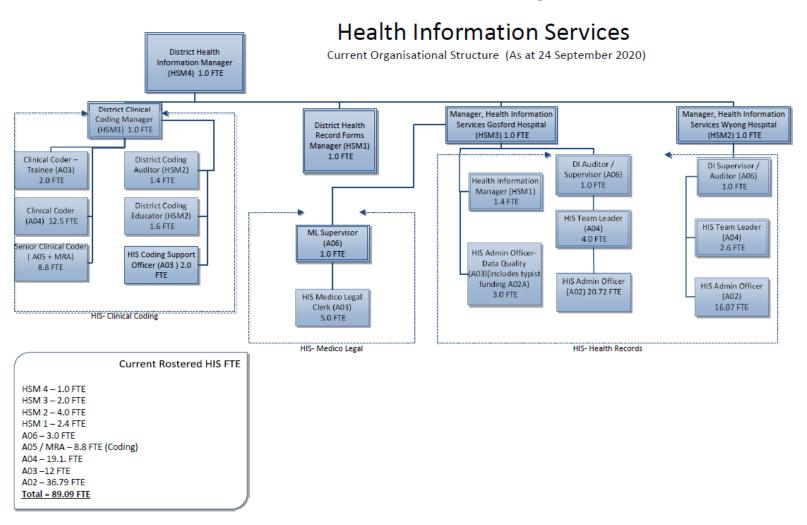
HIS will work with ICT Comms to update the message on the phone to direct callers to utilise eMR, HealtheNet, and My Health Record in the first instance. Callers would have the option of being transferred to ED administration for any urgent requests.

#### HIGH LEVEL IMPLEMENTATION PLAN

Action	Timeline
Consultation with unions +/- USCC	2 weeks
Final approval post consultation	2 weeks
Position creation and selection/ direct appointment	4 weeks
Impacted employee management line changes(direct appointments as soon as possible however changes will occur as advertised positions become filled)	3 months
Change evaluation (Assessed against KPI delivery and staff feedback)	12 months



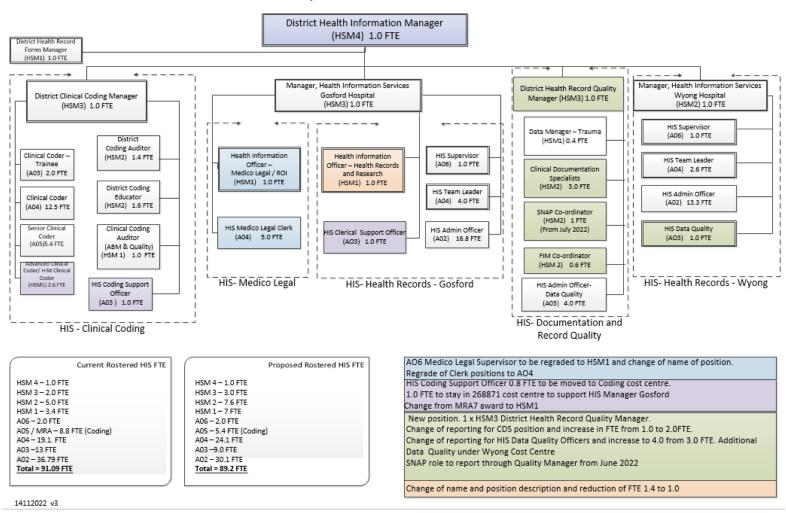
## **Attachment 1 – Current Organisational Structure**



# **Attachment 2 – Proposed Organisational Structure**

# **Health Information Services**

**Proposed Structure 2022** 



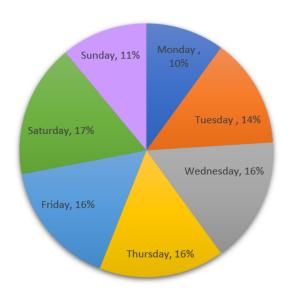
Restructure Proposal summary version 1.0 (20/02/2023) - Prepared By: Kirsty Toms and Kara Pollard Trim No: D23/14975

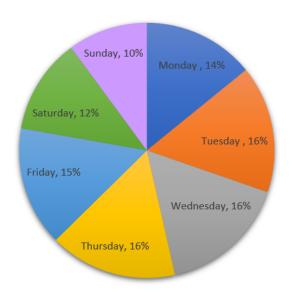


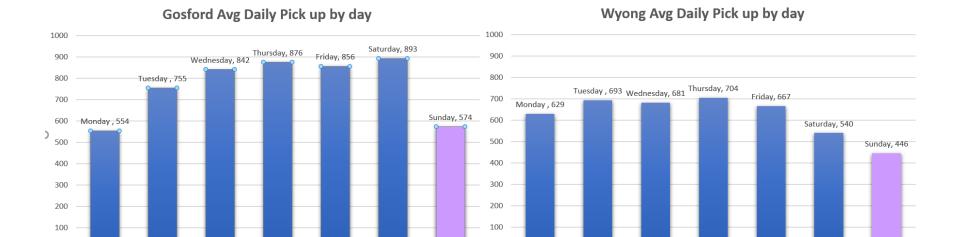
# **Attachment 3 – Current Document Imaging Workload**

Gosford Avg % Daily Pick up by day

Wyong Avg Daily % Pick up by day







Sunday

Monday

Wednesday

Thursday

Friday

Saturday

Sunday

Wednesday

Thursday

Friday

# Attachment 4 – Calls received per hour (6-month average)

