Northern Territory – Report against Subacute Care Implementation Plan

July 2012-June 2013

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
Establishment of a psycho-geriatric		rananig	
service in the Northern Territory		\$1.374M total	Service has been operational in Alice Springs
			and Darwin since January 2010, including rural
Recruitment completed by December 2009.	Completed March 2010.		and remote consultations.
	Completed January 2010		Uptake of the service has exceeded
Service admission criteria, policies and procedures developed by December 2009.			expectations, including visits to remote communities.
, ,	Commenced January 2010		
Psycho-geriatric service commenced	,		Service continues in this quarter with a high
January 2010			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.

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

Service admission criteria, polices and	Completed: December 2009	assistance also commenced to support the
procedures developed December 2009.		GEM service.
GEM Services commenced January 2010.	Commenced in January 2011.	

National Partnership Agreement Hospita		Workforc	e Reform, S	chedule C Sub	oacute, Grov	vth
State/Territory:						
Period:	2012-13					
	Table 1: Activity by care typ			pe	Ī	
* To calculate growth percentages (Table 2), use Patient days (volumes)				Psycho -		
-	Rehabilitation	Palliative	GEM ¹	geriatric	Totals	
Patient days (volumes)	0.572	2261	Admitted		1.4000	
Hospital based	9573	3361	2056		14990	
Hospital in the Home					0	
Combined Hospital based & HITH					0	
Other (please specify)					0	
Total admitted patient days	9573	3361	2056	0	14990	(a)
or Separations (patients)	П					_
Hospital based					0	
Hospital-in-the-home					0	
Combined Hospital based & HITH					0	
Other (please specify)					0	
Total admitted separations	0	0	0	0	0	
Average length of stay						
Total Bed Day Equivalents					(b)	(b)
Occasions of service (volumes)	l		Non-admitted			_
Centre based	2526	191			2717	
Home based					0	
Combined Centre & Home based		6531		2200	8731	
Other (please specify)					0	
Total occasions of service	2526	6722	0	2200	11448	
Weighted Bed Day Equivalents	632	1,681	0	550	2,862	(c)
Episodes ² (patients)						
Centre based					0	
Home based					0	
Combined Centre & Home based					0	
Other (please specify)					0	
Total episodes	0	0	0	0	0	
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 (2012-13) Occasions of				WBDE Ratios
Growth percentages (2012-13)	Patient days	Separations (BDEs)	service (WBDEs)	Total BDEs	Ratio
Services in baseline year 2007-08	7939		3,288	11227	Rehabilitation 1:4
Services in 2011-12	11768		2,609	14377	Paliative care 1:4
Targeted % increase					GEM 1:4
Services in 2012-13	14990	(b)	2,862	17852	Psychogeriatric 1:4
Service increase in 2012-13 compared to baseline	7051		-426	6625	
% increase in 2012-13 compared to baseline	88.8%		-13.0%	59.0%	
Service increase in 2012-13 compared to 2011-12	3222		253	3475	
% increase in 2012-13 compared to 2011-12	27.38%		9.70%	24.17%	

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

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.

If the admitted bed day cost is 1000 and non-admitted count cost is 250, then WBE = 1.4 (1000/250 = 4)