

Minutes of Meeting

Date: Friday 27th June 2014

Time: 1.00pm - 2.00pm NZST 11.00am - 12.00pm EST 10.30-11.30am CST

Connection: Telephone conferencing call 1800 200 232 (Australia);

0800 170 223 (New Zealand)Access Code Guest: **(819656#)**Access Code Host: **(859889#)**

Alert: Please note if you can't join in when you ring it means the Chair has not joined up

as yet; the host needs to 'unlock the door' so just hang up and try in a another

minute.

Delegates:

Health Service	Delegate Name(s)	Apologies/absent
Alfred Health (Vic)	Jim Sayer (JS)	Ibolya Nyulasi (IN)
Austin Health (Vic)	Joanne Sweeney (JoS)	Leonie Pearce (LP) Jill Feltham (JF)
Barwon Health-Geelong (Vic)		Roy Hoevenaars (RH) Debbie Schulz (DS)
Capital and Coast DHB (NZ)	Steve Whittaker (SW)	Catherine Epps (CE)
Flinders Medical Centre (SA)	Adam Govier (AG)	
Lyell McEwin Hospital (SA)		Sandra Parr (SP)
Melbourne Health (VIC)	Colin Steel (CS)	Stella Kravstov (SK)
Monash Health (Vic)	Raisa Shaikh (RS)	
Nepean Hospital (NSW)		David O'Connor (DC)
Princess Alexandra Hospital (QLD)	Wendy McCallum (WM) Cherie Hearn (CH) Julie-Anne Ross (JAR)	Julie Connell (JC)
Royal Adelaide Hospital (SA)	Ellen Mills (EM)	Margot Masters (MM)
Royal Hobart Hospital (TAS)	Annegret Ludwig (AL) Wendy Rowell (WR) Gudrun Barratt- Peacock(GBK)	Anne Mullavey (AM)
Western Health (Vic)		Kathryn Pierce (KP)
The Health Roundtable	Wojciech Korczynski (WK)	Pieter Walker (PW)

ITEM	DISCUSSION	ACTION	BY WHOM
1.1 Attendance/Apologies	See page 1. JC currently on extended leave. The group asked PAH to pass on the Committees thanks for her past input and knowledge.		ЕМ
1.2 Minutes 23rd May 2014	Passed.	EM reminded to send minutes separately as embedded document unable to be accessed by some.	EM
2. The Health Roundtable			
2.1 General Update	WK reported re:theme for AH HRT meeting 2014. Surveying the group at 2013 meeting revealed: 31% wanted information on costs, KPIs and standards; (50% of AH HRT members are also members of the HRT Costing group so some links could be made here) 24% staff benchmarks/grades. AAHBC members also suggested: ICU services Weekend Services/7 day services Workforce mix/Scope of practice/alternate practice for AHA e-Health/medical records Suggestions for speaker for annual AH meeting included Steve Boden re: e-medical record NSW;	Theme: ICU reports, expanding scope of practice and e-health. JS to contact Kathy Phelps re willingness to speak at AH HRT meeting.	JS S
	Kathy Phelps Chief AHA Dept Health Vic re scope of practice/workforce.		
3. Standing Items			
3.1 Budget /Finance Report	Report attached		JoS

4. Projects			
4.1 Clinical Care Ratios Project	CH reported the writeup is progressing and the data has been checked by statistician.	Ongoing	CH/AG
4.2 Data Audit	Data audit to be extended by a further week. Tasmania considering broad rollout of data audit in 2015 (like Qld Health). Discussion re Austin Health and Monash Health not participating in data audit: • Austin not collecting data in this format (meant to be short term) • Monash only collecting IPA and therefore felt the audit was not relevant for clinicians. Currently Terms Of Reference state members are willing to participate in annual data audit. This was to ensure sites are continually working towards improving data quality so that benchmarking is more reliable. Nationally there is a move to e-health records which may affect activity data collection and currently is affecting the support of existing feeder systems. The Committee needs to consider the TOR and data audit in current climate.	TOR and data audit discussion at face to face meeting prior to HRT AH meeting in Qld.	EM, JS
4.3 Allied Health models of care	Deferred		AG, EM, JC, JS
4.4 AAHBC Website	There is further information to be uploaded. Membership forms could be done through the website this year.	JAR to continue to add info to website and advise when membership forms able to be completed online.	JAR

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4.5 New Zealand Data Group	SW reported a second meeting has been held focussing on running a National Audit to determine what and how data is currently collected across sites.		SW
5. AAHBC Membership			
5.1 Membership Form	See 4.4 above		
6. National Allied Health E- Health Collaborative			
6.1 Face to Face meeting 26 th June	EM and JS attended. Main focus was to discuss National Minimum Data Set document and aim towards National agreement. JS reported that all of AAHBC membership already functioning beyond this level. Purpose of the National MDS is for audits, costing and benchmarking. Concerns raised at AH taking a different approach to Nursing and Medical however also acknowledge useful for making workforce decisions. There needs to be some minimum expectations on minimum use of data.		EM, JS
7. Other business arising 7.1 Benchmarking – AAHBC members	CH, JAR and WM reported on behalf of PAH the model has excellent potential and is very user friendly. It is a great workforce planning tool. EM and AG agree. Need to progress mapping and testing of assumptions with possible inclusion of statistician. Some sites still unable to access as it requires MS Acess. Some sites yet to see benchmarking model as it does not include their data (11/12)	JS to liaise directly with sites to assist with accessing model. JS to forward model to all AAHBC sites. JS to develop set of questions requiring response from membership re what is required to progress.	JS
8. Any Other Business	Face to Face meeting raised by PAH as HRT	PAH to provide suggestions at next meeting.	CH, JAR, WM

Next Meeting	July 25 , 2014	
	site visit and agenda.	
	meeting in Qld. Initial discussions re venue, +/-	