



The **Australasian Allied Health Benchmarking Consortium (AAHBC)** is a network of Allied Health representatives from tertiary, teaching hospitals across Australia and New Zealand. The main purpose of AAHBC is to develop and maintain a standardised approach to benchmarking of allied health activity as well as evaluating processes and outcomes.

The group was established in 1997 to ensure consistency of allied health data collection for benchmarking across a network of collaborative teaching hospitals in Australia. Originally named NAHBC (National Allied Health Benchmarking Consortium), the group has now expanded to include tertiary hospitals from New Zealand.

AAHBC is involved in project work that enhances and validates benchmarking processes. Membership also provides input into health related issues of broad, national significance as appropriate. AAHBC utilises Health Round Table data collection and reporting to assist the development of relevant benchmarking projects and subsequent action plans.

## **Terms of Reference**

### AAHBC purpose

- To maintain a network of collaborative teaching hospitals.
- To develop and maintain a standardized approach to benchmarking.
- To develop a model which links benchmarks, inputs, process and eventually outcomes.
- To establish validated benchmarks for Allied Health business.

### Membership criteria (validated annually in March)

- Tertiary, teaching hospitals.
- Use of Health Activity Hierarchy (formerly Allied Health Classification System).
- Accurate recording, storage and electronic transfer of Allied Health activity data.
- Compliance with annual data audit.
- Agreement for each site to participate in one project annually.

#### Current membership

- Austin Health (Vic)\*
- Barwon Health-Geelong (Vic)
- Bayside Health-Alfred (Vic)
- Capital and Coast DHB (NZ)
- Flinders Medical Centre (SA)
- Lyell McEwin Hospital (SA)
- Melbourne Health (VIC)
- Nepean Hospital (NSW)
- Princess Alexandra Hospital (QLD)
- Royal Adelaide Hospital (SA)
- Royal Hobart Hospital (TAS)
- Monash Health (Vic)
- Western Health (Vic)

#### Data analysis

- Annual – based on data collected for a 12 month period – 1 July to 30 June.

#### Meeting frequency

- Monthly teleconference.
- Minimum one annual face to face technical and planning workshop.

#### Chair

- Rotates between current members on a bi-annual basis.
- Annual membership fee is waived for the site represented by the Chair.

#### Membership cost

- Annual cost of membership covers meeting expenses, project costs and additional reporting requirements. This cost is reviewed annually in March.

\* denotes non-membership to HRT-AHBC