



Acronyms, terms and statutory obligations

...glossary

Acronym	Definition
AMI	Acute Myocardial Infarction
ARDRG	Australian Refined Diagnosis Related Groups
ATS	Australasian Triage Scale
CaSS	Clinical and Statewide Services
CATI	Computer Assisted Telephone Survey
CCU	Coronary Care Unit
CFM	Casemix Funding Model
DNA	Deoxyribonucleic acids
DRG	Diagnosis Related Group
ESCO	Energy Service Company
FRMS	Fatigue Risk Management System
GEMS	Government Energy Management Strategy
GP	General Practitioner
HEAPS	Human Error and Patient Safety
HITH	Hospital in the Home program
HIV	Human Immuno-deficiency Virus
HREC	Human Research Ethics Committees
ICU	Intensive Care Unit
NCIDD	National Criminal Investigation DNA Database
NFM	New Funding Model
NHCDC	National Hospital Cost Data Collection
NHMRC	National Health and Medical Research Council
PICU	Paediatric Intensive Care Unit
QHAPDC	Queensland Hospital Admitted Patient Data Collection
RAM	Resource Allocation Model
RCA	Root Cause Analysis
SCN	Special Care Nurseries
TPCH	The Prince Charles Hospital
VLAD	Variable Life Adjusted Display
VMO	Visiting Medical Officer



Term	Definition
Accountability	Responsibility by an individual officer for performance within delegations and legislation.
Acute Myocardial Infarct (AMI)	Death of the cells of an area of the heart muscle as a result of oxygen deprivation. Commonly referred to as a heart attack.
Adverse event	An incident in which harm resulted to a person receiving health care.
Allied health professional	Those professional health care providers who are not physicians or nursing professionals.
Ancillary services	Services that assist in delivering medical care
Appropriate	Care, intervention or action that is considered to be appropriate to the patient's particular needs, requests and prognosis. Appropriate care or treatment should be based on established and accepted standards, such as evidence-based clinical guidelines.
Australian Refined Diagnosis Related Groups (AR-DRG)	Patient classification scheme which provides a means of relating the number and type of patient treated in a hospital to the resource required by the hospital.
Benchmarking	The ongoing, systematic process to search for and introduce best practice into an organisation. Benchmarking is generally used to compare an organisation or service with similar leading organisations or services to provide a catalyst to improve performance.
Cardiac	Pertaining to the heart
Clinician	A physician or other qualified person who is involved in the treatment and observation of living patients, as distinguished from one engaged in research.
Clinical indicator	A measure of the clinical management and outcome of care; a method of monitoring patient/client care and services which attempts to "flag" problem areas, evaluate trends and so direct attention to issues requiring further review.
Clinical pathways	A standardised, evidence-based multidisciplinary management plan, which identifies an appropriate sequence of clinical interventions, timeframes, milestones and expected outcomes for a homogenous patient group.
Complication	A disease or injury that develops during the treatment of a pre-existing disorder. The complication frequently alters the prognosis.
Consumer	People who use or are potential users of health services including their family and carers or are representatives of organisations of consumers.
Criteria	The measurable key components of a standard.
Diagnosis	The process of categorising a patient or deciding the nature of the disease based on the patient's characteristics, symptoms, signs and signals.
Effective	Care, intervention or action that achieves a desired result in an appropriate timeframe.
Efficient	Achieving desired results with most cost effective use of resources.
Elective surgery	Surgery that, in the opinion of the treating clinician, is necessary and admission for which can be delayed for at least 24 hours.
Error	The failure to complete an action as intended, or the wrong use of a wrong plan to achieve an aim; errors may occur by doing the wrong thing (commission) or by failing to do the right thing (omission).

Term	Definition
Harm	Death, disease, injury, suffering, and/or disability experienced by a person.
Immunoassay	Immunoassay is a biochemical test that measures the concentration of a substance in a biological liquid, typically serum or urine, using the reaction of an antibody or antibodies to its antigen.
Incident	An event or circumstances which could have, or did lead to unintended and/or unnecessary harm to a person, and/or a complaint, loss or damage.
Indicators	Statistics or other units of information which reflect, directly or indirectly, the performance of the healthcare system in maintaining or increasing the well-being of its target population.
Median	The midpoint of a range of numbers that are arranged in order of value.
Microbiology	Microbiology is the study of micro-organisms which are unicellular or cell-cluster microscopic organisms.
Mortality rate	The ratio of total number of deaths to the total number of the population.
Monitor	To check, supervise, observe critically, or record the progress of an activity, action or system on a regular basis in order to identify change.
Neonatal	Newborn baby who is four weeks old or younger.
Outcome	A measure of the extent to which a service has achieved its goals or objectives, and as defined, met the needs of its beneficiaries. Or The impact of care provided to a patient.
Paediatric	The branch of medicine dealing with the child and its development and care
Performance	Describes how the output of a process conforms to requirements and expectations and suggests how well an individual, process or team is operating.
PRIME	Database for the recording of consumer complaints.
Procedure	<p>A statement about how something will be done and by whom within a government agency (i.e. Queensland Health). Procedural policies concern internal operations, often in the form of departmental manuals, operating standards and technical operations. In Queensland Health this includes administrative and clinical procedures.</p> <p>A set of documented instructions conveying the approved and recommended steps for a particular acts; or sequence of acts; a clinical procedure.</p> <ul style="list-style-type: none"> - A clinical intervention that: - is surgical in nature; and/or - carries a procedural risk; and/or - carries an anaesthetic risk; and/or - requires specialised training; and/or - requires special facilities or equipment only available in an acute care setting.
Protocol	A documented code of procedure or behaviour in a particular situation.
Queensland Hospital Admitted Patient Data Collection (QHAPDC)	The QHAPDC collects demographic and diagnostic information on all admitted patients discharged from both public and private hospitals and private day surgeries in Queensland
Risk adjustment	A statistical procedure that “adjusts” for the association between one or more risk factors and a performance measure.



Term	Definition
Root cause analysis	A systematic process whereby the factors which contributed to an incident are identified.
Safety	A state in which risk has been reduced to an acceptable level.
Separations	A separation is the process by which an admitted patient completes an episode of care
Standard	Sets out agreed specifications and/or procedures designed to ensure that a material, product, method or service is fit for the purpose and consistently performs the way in which it was intended.
Sustainable	A health system that provides infrastructure such as workforce, facilities and equipment, and is innovative and responsive to emerging needs.
Translational health services	Translational health services attempt to more directly connect basic research to patient care.
Triage	Establishing priorities of patient care for urgent treatment while allocating scarce resources.
Variable life adjusted display (VLAD)	A tool for monitoring clinical outcomes which is designed to flag issues for further investigation.
Virology	Considered part of microbiology or pathology, it is the study of biological viruses and virus-like agents.

Statutory obligations

In publishing this report, Queensland Health recognises its obligations to inform the Queensland public on the performance of the organisation. Specifically, the *Health Services Act 1991* was amended in October 2005 (Part 4A) to include the requirement for an annual Public Hospitals Performance Report. Matters to be included in this report and required of the Act are referenced below.

Health Services Act 1991 Part 4A sections		Pages
Key indicators	Clinical performance	33-43
	Efficiency	47-49
	Patient satisfaction	21-24
	System integration and change	24, 44-45
Information about surgery	Patients on elective surgery waiting lists	14-17
	Patients on surgical outpatient waiting lists	14-17
	Patients who received elective surgery	14-17
	Patients who attended a surgical outpatient appointment	14-17
Information relating to Mater Misericordiae Public Hospitals		15-19, 21-23, 27, 35-36, 38, 40, 51.