

Queensland Coding Committee

8th May 2008

Minutes of the One Hundred and Ninety First Meeting

1.1 Attendees

Corrie Martin (Chair)	Statistical Standards
Laura Cleator (Secretariat)	Statistical Standards
Lisette Ramsden	Statistical Standards
Stephanie Ferdinands	Statistical Standards
Dr David Quigley	Medmin Pty Ltd
Kellie Marshall	Mater Health Services
Kirsten Hinze	Gold Coast Hospital
Tracey Matthies	Sunshine Coast and Cooloola Health Service District
Ruth Curnow	Rockhampton Hospital
Kym Wimberley	Gympie Hospital
Lucinda Ruddell	Nambour Hospital
Tanya Wingham	Northern Area Health Service
Lenore Berry	Northern Area Health Service

Guests

Erin Geary

2. Apologies

Belinda Lai	Toowoomba Health Service District – Proxy
Meegan Snell	3M Representative
Lucy Kennedy	Logan Hospital
Ann Stewart	The Wesley Hospital
Kirstine Sketcher-Baker	QMSU Data Management and Analysis team
Julie Turtle	Statistical Standards
Robert Rule	Human Resource Branch
John DiGregorio	Princess Alexandra Hospital
Jenny Nicol	Queensland University of Technology
Sophia Ovchinnikoff	Clinical Information Strategy, Info Investment Branch
Wendy Adams	Clinical Information Strategy, Info Investment Branch
Derelle Pratt	Royal Brisbane & Women's Hospital

3. Confirmation of Minutes of the Previous Meeting

April 2008 QCC meeting confirmed as true and correct with one small change, move R. Curnow from absent to attendee. K. Hinze and K. Marshall

Discussed coding queries from Feb and March Meetings

April Query IDs discussed:

- Query ID: 0408-02 – Partial classical caesarean conversion – discussion still continues

Action:

- Amend attendees list in the March 2008 Minutes - set R. Curnow as an attendee
- Query ID 0408-02 to be confirmed out of session

Welcome new QCC members Lenore Berry from the Northern Area Health Service and Laura Cleator from Statistical Standards.

Thank you to Caloundra Health Service for hosting QCC meeting

4. Quality Hour Discussion Forum

Pilot results of the Most Resource Intensive Condition Indicator and the Other Co-Morbidity of Interest Indicator. This item was presented by Kirsten Hinze, Tracey Matthies and Kym Wimberley.

It was noted that the draft report had not been distributed to all QCC members. An email is to be drafted and the document attached and sent via email to all QCC members as soon as possible.

T. Matthies presented the background details and K. Hinze presented the findings of the report. The productivity section of the report generated a lot of discussion especially the projected FTE required in relation to the indicators. K. Hinze informed that this needs to be adjusted as the Gold Coast Hospital trial occurred during Casemix deadline period and comparison was made on average in March. K. Hinze will re-calculate and provide the amended report to C. Martin.

K. Hinze discussed that the complexity of the admission played a significant part in the increase time in allocation the MRIC. C. Martin reinforced that if two conditions meet the definition, the first condition reported in the admission would be the MRIC, similar to ACS 0001. Dr David Quigley wanted to know how you measure resources by the chart. The name and definition of the MRIC indicator was not well liked and made the coders nervous. C. Martin mentioned that MRIC could be referred to as "main diagnosis", however, this concept already had a definition that was somewhat different to what we were collecting. C. Martin informed members regarding the Canadian system and how it can calculate an alternate DRG. K. Hinze agreed that this definition would make it easier for the coders to understand but the name and/or definition needs to be modified to

make it easier for coders. C. Martin said she will speak to DSAC regarding the MRIC name and will ask QCC members to suggest ideas on what the best name for the MRIC indicator would be. L. Berry suggested Most Care Intensive Condition instead of MRIC.

K. Hinze informed that the OCOI contributed significantly to the projected FTE. It was mentioned that a number of the coders would find a code fitting the OCOI definition and then look up the sheet to find it was not listed. T. Matthies and K. Hinze both believe that the list is not necessary and time consuming. K. Wimberley likes the OCOI list as it is something definite to go by. C. Martin explained that the reason for this indicator was for analysis purposes as the QHAPDC should not be used for frequency analysis because it is episodic. The OCOI would allow frequency analysis to occur on conditions that are prevalent and are part of the National Health Priority Areas. K. Hinze raised this issue with OCOI about current condition versus history with the example depression and medication versus history of depression. Other questions were raised regarding cancer codes and trying to find morphology codes of OCOI. C. Martin informed that it is not really necessary to find morphology codes as there are no coding edits that will be applied to the collection of the OCOI and will send out the HBCIS details regarding cancer codes. T. Wingham and K. Hinze did not agree with changing the coding standards for the OCOI indicator in relation to cancer coding.

T. Matthies mentioned that coders want to know why they are doing these indicators. C. Martin said that all coders attending the NCCH workshop will listen to a presentation on the CPoA, MRIC and OCOI indicators. K. Marshall asked about Mater's involvement in relation to the indicators. C. Martin will speak to S. Martyn regarding this issue and will let K. Marshall know. Dr D. Quigley asked about who approves the Australian Coding Standards and if they are trialled at a hospital before changed. C. Martin informed that the Statistical Information Management Committee (SIMC) reviewed the changes and updates to each edition and ratified the editions implementation..

C. Martin notified members at this stage the MRIC and OCOI could be opt in only. QCC members reiterated that if a hospital chooses to opt in, ideally there would be additional arrangements with Casemix Funding and Analysis to help with deadline.

Action:

- Forward draft report to QCC members via email
- K. Hinze to amend draft report and provide amended report to C. Martin
- Provide Dr D. Quigley with OCOI and MRIC data definitions
- C. Martin to send out HBCIS details regarding cancer codes
- C. Martin to speak to S. Martyn and to find out if Mater will be involved with the indicators

- C. Martin to try and organise meeting with the Casemix group to see what can be done about those hospitals that opt in

5. Business Arising from Minutes of the Previous Meeting

5.1 HBCIS Update – E. Skubis

No HBCIS update this month as E. Skubis was unable to attend.

5.2 CSAC Update – C. Martin

No CSAC update this month

5.3 PICQ Update – C. Martin

No PICQ update this month

5.4 Clinical Coder Workforce Project – R. Rule

No Clinical Coder Workforce Project update this month as R. Rule was unable to attend.

However, this item was discussed by QCC members in attendance as members are unsure of current progress/status of this project. Members were informed by T. Matthies that R. Rule visited and spoke to Caloundra, Nambour and Gympie coding and HIM staff about this project. The staff were advised that a meeting with a GEMS expert would be arranged but have heard nothing yet.

QCC members are concerned about the outcome of this project and would like to organise a meeting with R. Rule and selected QCC representatives regarding the project.

Action:

- C. Martin to organise a meeting with R. Rule and QCC representatives regarding the Clinical Coder Workforce Project.

6 Other Business

6.1 Terms of Reference (TOR)

The TOR was provided to all QCC members prior to the meeting. No comments were made in regards to the TOR.

6.2 New Data Elements for Implementation

C. Martin is presenting the new data elements at the Queensland NCCH workshops. To date, presentations have been conducted at the Toowoomba and the first Brisbane NCCH Workshop. Future presentations will be conducted at Townsville, Rockhampton and at the second and third Brisbane NCCH workshop.

6.3 Code Sequencing (external and morphology codes)

Committee members raised concerns regarding the current Queensland Health method of code sequencing, in particular coding rehabilitation episodes.

C. Martin is planning on talking with D. Bahr about this agenda item and to see if he could present at the next QCC meeting. If this is unable to occur, K. Hinze is more than happy to meet with D. Bahr regarding this issue.

Action:

- C. Martin to talk to D. Bahr, asking if he could present at the June QCC meeting.
- OR
- C. Martin to organise meeting between D. Bahr and K. Hinze

6.5 Local Coding Rules

No Local Coding Rules update this month as J. Turtle was unable to attend.

6.6 Diabetes (and Oncology) Forms

A Diabetes Mellitus coding abstraction summary form was provided to all QCC members prior to the meeting. C. Martin informed members at meeting that E. Skubis is keen for a similar form to be added to HBCIS. Kym and Kirsten informed the Committee that they did not like the form and believe that it would be incorrectly completed.

- Discussion regarding the DSAC data element – Contract Hospitals.

7 CAEU Update

L. Ramsden informed the Committee that she had finished conducting the Ipswich audit and J. Turtle was near to completion at Logan. The next places that will be audited are Nambour by Lisette and Townsville by Julie.

K. Hinze raised the issue of outstanding audit reports and would like to know when this audit reports will become available.

Action:

- C. Martin to follow up the outstanding audit reports for the Gold Coast Hospital and the Prince Charles Hospital.

8 Codefinder Update

L. Cleator informed the Committee that the April bug list has been sent to all Codefinder contacts.

9 Correspondence

9.1 Incoming

- 9.1.1 QCC queries
0508-01 – Early Labour
0508-02 – LRTI and other conditions
0308-08 – Leaking Gastrostomy Tube

9.1.2 NCCH Response to QCC queries

L. Cleator informed the Committee that Q2437 – *Revision to ACS 2104 Rehabilitation* and Q2104 – *Indexing request for follow-up* have been deleted from the NCCH coding queries and relocated to minor enhancements for 7th edition. The Committee was told about the NCCH amendment to a previous decision in relation to Q2357 – *dropped lens/dropped nucleus*.

Action:

- L. Cleator to send query Q2437, Q2104, Q2357 and Q2357 (amended) to QCC members via email

9.1.3 Correspondence to the Committee
Nil

9.2 Outgoing

9.2.1 QCC Queries to the NCCH
Nil

9.2.2 QCC Grouper Anomalies to DoHA
Nil

9.2.3 Correspondence from the Committee
Nil

10 Next Meeting

Next QCC meeting is on 12th June 2008. This meeting will be held at QHB.

11 Closure of Meeting

Meeting ended at 12:00 pm.