I can’t believe it’s the end of March already – 2009 is galloping by!!

Even January, which is usually a nice quiet month and allows us to draw breath and catch up on all those jobs you mean to do during the year but never seem to get time to do, was busy this year. Of note;

♦ AROC was successful in tendering to be a pilot site for the testing of the Australian Commission on Safety and Quality in Health Care’s draft Operating Principles and Technical Standards for Australian Clinical Registries. The actual evaluation of AROC against these principles and standards took up a large part of December and January, and pleasingly AROC came up looking OK. There are things we have learnt and will implement in the future, but by and large AROC met most of the principles and standards. Excitingly, the funding for this project will allow AROC to undertake site specific data quality audits and dataset and data collection training (more of that later in this edition), something we have wanted to do for some time, but have been limited by resources.

♦ Also very excitingly, AROC has finally been able to move ahead and recruit a developer to help us upgrade our IT systems. At this stage we are hoping to be able to launch our new system by the end of the year.

♦ The AROC Scientific and Clinical Advisory Group has signed off on the concept of AROC beginning to collect other forms of data as well as the core datasets we collect (inpatient (Aus), inpatient (NZ), and ambulatory) which are collected against all rehabilitation episodes. Through the impairment specific benchmarking workshops, AROC in association with providers, have developed a Brain Injury adjunct dataset and a Spinal Cord Injury adjunct dataset, to be collected only for these specific types of rehabilitation episodes. Unfortunately these datasets will be collected into an Excel database (provided by AROC), but only until our new IT system is ready. We expect other adjunct datasets will come on line as the various specialist groups meet and determine what is appropriate for them.

♦ Qld Health has finished building the AROC inpatient dataset into their patient management system, and at the end of March all Qld public rehabilitation units began collecting data. AROC undertook a training roadshow through Qld (from Cairns, down to the Gold Coast), working with the units to help them understand the dataset and set up the appro-


***The team at AROC would like to announce its newest member; Congratulations Tara, IT’S A BOY!!***
**Benchmarking News**

**Review of Impairment 2.13: Other Non-traumatic brain dysfunction**

AROC is hoping that you might be able to help us out!!

Following on from the brain injury benchmarking workshop held last September, we are conducting a review of impairment 2.13. In order to be able to improve our reporting against all of these episodes AROC would like to know exactly what sort of conditions are being coded to the 2.13 impairment code. It may be appropriate that we create some new codes under Non-Traumatic Brain Dysfunction. However, we cannot do this unless we know what is currently being coded to *Other Non-Traumatic Brain Dysfunction code 2.13*.

AROC will be sending all brain injury providers an e-mail with an excel workbook detailing each episode your facility coded as 2.13 during 2008. Please look out for it! We would be very grateful if you could review each of these episodes and tell us a few things about the impairment that was treated:

- confirm the impairment code 2.13 is correct. If not, please tell us what the correct impairment code is
- where 2.13 is correct, please indicate the aetiological diagnosis of the episode

We appreciate that we are asking for a retrospective review and that this constitutes extra work … but we would very much appreciate your help. This additional data will enable AROC to potentially develop further sub-groupings against which relevant outcome targets may be appropriate.

**Could those of you who receive this request please supply the addition fields and return workbooks to AROC by Friday 1 May 2009.** If you have a queries or require assistance with this, please feel free to contact us on aroc@uow.edu.au or 02 4221 4411.

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**Ambulatory Benchmarking Initiative**

The latest version of SnapShot, which includes the Ambulatory Clinical Dataset, is finally finding its way to facilities involved in the ambulatory benchmarking initiative. For those services that have begun manual data collection this brings them a step closer to producing a data submission that will lead to eventual benchmarking.

Congratulations to the non SnapShot users and their HIM / IT teams for their persistence in implementing the dataset within their own software systems, to date all these sites have either begun or are close to beginning data entry. AROC plans to be able to accept data submissions via the AOS by mid to late April.

Following on from the training sessions held late last year, there were a number of services whose staff were unable to attend, and AROC is in the process of planning some more training around the dataset items for those that missed out or new services interested in collecting the ambulatory data set. To assist in the planning it would be appreciated if anyone interested in attending a training session could contact AROC.

Services interested in finding out more about this initiative should contact Jodie at AROC on 02 4221 4687 or jodieTM@uow.edu.au.

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**Clinical Registries: Data Audits**

Following the release of the 2008 Benchmarking reports, and as part of the Clinical Registries Project, AROC are reviewing the Quality of Data Reported scores for all members. This information will be used to select up to 50 facilities identified as having data quality issues to undertake a random audit of previously submitted records, focussing on data accuracy and completeness. AROC plan to visit facilities, review results of the audit with them, provide dataset training, review and where appropriate enhance the data collection process. The audit is expected to occur during May and June, selected facilities will be contacted throughout April to make suitable arrangements. For further information please contact either Monique or Jodie.
AROC in New Zealand

Data collection in New Zealand commenced on January 1.

Initially there have been some “teething” issues and this has affected some unit’s progress in implementing data collection. Thank you for your feedback, it has been great for AROC to be involved in this process and to help unit’s resolve the challenges they’ve encountered.

AROC has received data from a number of sites who have successfully installed and begun data entry into the SNAPshot software. For those units collecting the data items where SNAPshot is yet to be installed, please contact AROC to discuss your needs and how we can assist in getting your data to us.

Now is also the time to ensure your unit has applied for an AROC Online Service (AOS) login and password, which allows you to send us the data you have been recording. AOS applications can be downloaded from the AROC website http:\chsd.uow.edu.au/aroc

…..FIM™ FAQs

Q Why is a shower chair/shower stool/bath seat etc considered an assistive device for transfers and not scored down in bathing, if a shower rail when used to wash/rinse/dry self is scored a 6 in both transfer and bathing items?

The item bathing refers to the patient’s ability to wash, rinse and dry his body from the neck down. It does not matter if he/ she does this in bed, sitting by the sink or standing in the shower. Using the shower chair is seen as an assistive device to get in and out of a shower (transfers) and should be addressed under the item Bath/ Shower Transfers.

Q Orthotics!!!! HELP!!! How do you score TEDs (anti-embolic stocking) application?

Firstly, lets consider the three scores that may be appropriate in the scoring of a prosthesis or orthosis in upper and lower body dressing, as TED stockings are an orthosis. This information is available on page 20 of the new manual.

Level 7 = The patient applies a prosthesis/orthosis independently but does not require it as an assistive device in order to complete dressing.

Level 6 = The patient applies the prosthesis/orthosis independently which is also required as an assistive device in order to complete dressing.

Level 5 = The helper applies the prosthesis/orthosis (regardless of the type of prosthesis/orthosis or the effort required as this is a uniformly applied score).

As TED stockings are an orthosis that can not be used in order to assist with dressing, the possible scores are level 7 if the patient applies independently, or level 5 if the helper applies the stockings (the score of 5 is the most commonly applied score on admission in the inpatient setting as it is common for a helper to apply TED stockings for a patient). The patient would only be able to score a 6 for lower body dressing if they required an assistive device, needed more time or there was a safety issue ie if a sock applicator was used to apply the TED stockings.
SNAPshot’s ACHS Clinical Indicator Report

SNAPshot and ACHS rehabilitation medicine clinical indicators
This is a reminder to all rehab facilities that the latest ACHS rehabilitation medicine clinical indicators are now available at the press of a button.
AROC in conjunction with ACHS and SNAPshot have organised a Clinical Indicator report in SNAPshot which is available in version 3.82(i).
To get your clinical indicators go the reporting screen (Shift key + F8), then select report 28. You will need to specify the from and to dates before pressing the generate report button (refer diagram).

IMPORTANT NOTE: If you are still using 3.82(e) then you need to upgrade your SNAPshot version. The 3.82(i) executable file that you will need to run your ACHS rehabilitation medicine clinical indicators reports is available from: http://chsd.uow.edu.au/aroc/snapshotupdate.html --- Please follow the instructions on this page to download your file and save to your SNAPshot folder. Should you experience any problems please contact AROC.

PLEASE NOTE: 3.82(i) is only for members using SNAPshot 3.82(a-e) - if you are still using an earlier version of SNAPshot (eg. 3.7) you will need to upgrade to version 3.82 FIRST.
Data Submission — Data due dates

The table below indicates the data collection periods and data submission timelines associated with the AROC inpatient dataset. Please note that we are approaching another data submission deadline, episodes ending up to March 2009 need to be submitted before April 30 2009.

<table>
<thead>
<tr>
<th>Episodes ending up to</th>
<th>Submission month</th>
<th>Dataset Version</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 2009</td>
<td>end of April 2009</td>
<td>Version 3</td>
</tr>
<tr>
<td>June 2009</td>
<td>end of July 2009**</td>
<td>Version 3</td>
</tr>
<tr>
<td>September 2009</td>
<td>end of October 2008</td>
<td>Version 3</td>
</tr>
<tr>
<td>December 2009</td>
<td>end of January 2009**</td>
<td>Version 3</td>
</tr>
</tbody>
</table>

** AROC reports to be generated for your facility based on this data - please resubmit after corrections

AROC Workshops— Workshops for 2009

AROC hosted workshops for this year are shown in the table below. If you would like to register interest in attending a workshop some time in the future please let us know and we will add you to list.

A gentle reminder – when you register interest in a workshop please give us the quickest way we can contact you and please respond, even if its to say you can’t attend. Also, it takes quite a lot of organising to put together a workshop, which is why we have a registration cut off date prior to the workshop. We do accept late entries where we can – but please understand it can cause a lot of inconvenience. Where possible please be timely in your requests.

<table>
<thead>
<tr>
<th>Upcoming AROC Hosted FIM Workshops</th>
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<tbody>
<tr>
<td>State</td>
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<td>NSW</td>
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SNAPshot Short Cuts

<table>
<thead>
<tr>
<th>Key</th>
<th>Action</th>
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<tbody>
<tr>
<td>Arrows</td>
<td>Move</td>
</tr>
<tr>
<td>Enter/Tab</td>
<td>Save field, move right or down</td>
</tr>
<tr>
<td>Shift + Tab</td>
<td>Save field, move left or up</td>
</tr>
<tr>
<td>Alt + down arrow</td>
<td>Display drop down list</td>
</tr>
<tr>
<td>Ctrl + A</td>
<td>Add a new record</td>
</tr>
</tbody>
</table>

In order to minimise the amount of time you use your ‘mouse’ in the data entry process SNAPshot has been designed with a number of keyboard shortcuts. Try using these shortcuts to help speed up data entry.
AROC—In the Spotlight

Data Matters needs some interesting and relevant pictures for us to include in our newsletters – if you have any we could use please let us know. Also, we would like to start including a short profile of an AROC member facility in each of our newsletters – if you are interested in being profiled, again please let us know … or if you have anything newsworthy that you would like to announce to the rehabilitation sector, let us know … staff movements, key achievements, etc.

Data Collection Form

If anyone has changed the AROC v3 Data Collection Proforma to SNAPshot data entry order and is happy for us to make that available to other facilities please forward us an electronic copy.

AROC would like to wish all its members a safe and Happy Easter break.

AROC will be closed Good Friday and will reopen Tuesday 14/04/09

AROC National Manager:
Frances Simmonds

AROC Clinical Director:
Ass/Professor J E (Ben) Marosszeky

AROC Data Manager:
Tara Stevermuer

AROC team

AROC Research Fellow:
Janet Law

AROC Research Fellow:
Monique Berger

AROC Associate Research Fellow:
Jodie Tazelaar-Molinia

AROC FIM Training Manager & Admin Support:
Julie de Clouet