

Review of Admission Policy

Process for consultation

During 2009-10, the Department of Health (the department) will be undertaking a review of the Hospital Admission Policy, with a focus on the Criteria for Admission for Types B, C, and E. During the review, the department will consult with health services regarding the potential impact of the changes and to ensure that any proposed changes are simple, logical, and equitable. A decision regarding changes to the Hospital Admission Policy will be made in early 2010, with the aim of introducing any new criteria from 1 July 2010.

An overview of the process for consultation with health services is provided below.

Criteria for Admission - Type B

Current definition	Proposed definition
<ul style="list-style-type: none">• Receive a procedure listed as a Type B procedure in the Commonwealth Day Only Procedure Manual; or• Receive a general, regional or intravenous anaesthetic.	Development of a new list of same day procedures which would be accepted for admission

Under the proposed change, the department will develop a list of same day procedures, using Australian Classification of Health Interventions codes, that can be admitted as a Type B admission.

The proposed list of type B procedures is currently available on the HDSS website:

<http://www.health.vic.gov.au/hdss/vaed/admissions%20policy/index.htm>.

The department will undertake an analysis of VAED data from the first quarter 2009-10 to identify where the proposed changes would differ from each health services' current admission practices for Type B admissions. The department will only provide this data to nominated health service contacts, however contacts may choose to distribute this information within their health service as required.

Due to current issues with the submission of VAED data, the department's analysis will not be provided to health services until end November / early December 2009.

Criteria for Admission - Type E

Current definition	Proposed definition
Continuous active management for at least four hours (at least half hourly observations of vital or neurological signs)	Extended treatment where it is intend that there is four hours of: <ul style="list-style-type: none">• half hourly observations; OR• continuous monitoring such as ECG, EEG; OR• continuous IV therapy of any sort.

Under the proposed change, the department is seeking to draft a new definition for Type E admissions which enhance the clarity and consistency of its interpretation.

The department is currently seeking to determine whether it is possible to undertake an analysis of VAED and VEMD data to identify whether the proposed changes would differ from health services' current admission practices for Type E admissions (in particular, the ability to identify procedures that are currently treated on a non-admitted basis that would consequently be admitted under the proposed definition). If such an analysis is possible, data will be provided to health service contacts alongside the Type B data analysis in November/December 2009. In the meantime, health services are encouraged to provide feedback on the possible impact on their health service of the proposed definition.

In order to ensure any new definition for Type E is consistent with current clinical practice within the emergency department, the department will be organising a forum with emergency department clinicians to seek their views on the proposed changes.

The forum with emergency department clinicians will be held end October/early November. Further advice on the forum will be provided to emergency department clinicians and health service contacts in the coming weeks. Health service contacts may wish to liaise with relevant emergency department staff to determine their interest in this process and discuss their health services' views on the proposed definition.

Criteria for Admission - Type C

There are currently no proposed changes to the definition of Type C admissions, however the department will seek to ensure better compliance with the requirement that these types of procedures "are not normally accepted for admission".

The department will contact health services with significant numbers of Type C admissions in the coming weeks to determine what types of patients are being admitted under the Type C criteria and the reasons for these admissions.

Feedback

Health services are encouraged to provide feedback as required on any aspect of the review.

The department has sought the nomination of health service contacts to act as a single point of contact within their organisation for admission policy review issues. Contacts are asked to ensure that they consult with relevant staff across their health service when considering issues and potential impacts, and that all interested staff are provided with an opportunity for comment or input into the process.

All emailed feedback and comments from health services (including the department's position on the feedback received where relevant) will be placed on the HDSS website, unless identified as confidential by health services. This process will allow each health service to consider issues raised by other health services.

With regards to the proposed Type B list, any additions to the list that are agreed to by the department will be clearly marked and a revised list will be published on the HDSS website with a marker to indicate the updated status of the list. Contact officers will be emailed to alert them to changes to the list.

Any further comments or queries regarding the review can be direct to:

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