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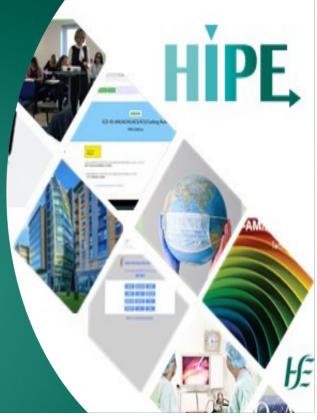


Working with national clinical audits to improve clinical documentation for coding

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Hospital In-Patient Enquiry (HIPE)

- · Activity data for admitted inpatient and daycases in Ireland
- Clinical coding using ICD-10-AM/ACHI/ACS 12th edition
- Approx 320 HIPE coders and managers 55 Hospitals
- 2023 1.8 million discharges
- Healthcare Pricing Office (HPO) manages HIPE system training, data quality, coverage, software
- Challenges in clinical documentation and coverage
- · HPO liaises with HIPE data users and stakeholders
 - Engaging on documentation issues and coding challenges
 - National Office of Clinical Audit (NOCA)





HEALTHCARE

Pricing Office



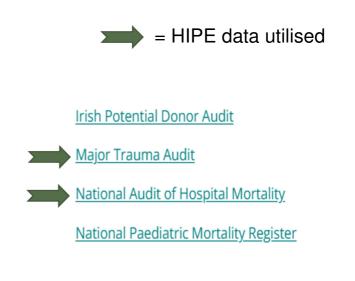


HE data utilised in NOCA Clinical Audits

NOCA manages a suite of national clinical audits. Each audit focuses on a unique area of healthcare such as hip fracture, major trauma, hospital mortality, ICU care and joint replacements.

Irish Heart Attack Audit
Irish Hip Fracture Database
Irish National Audit of Stroke
Irish National ICU Audit

Irish National Orthopaedic Register



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IHAA 188.03

ALIT

H_{Σ} Improving clinical documentation

- · Each Audit is clinically led and audit manager
 - · Clinical lead in each hospital
- · HPO staff sit on audit governance groups and report writing groups
- HPO provide software through the HIPE system for additional data collection for audits
- · HPO provide classification expertise to audits
- · Signals and changes in audit data
- Clinical understanding of documentation issues affecting HIPE coding
- HPO conduct additional reviews of HIPE data as required where a query arises
- · Audit Managers provide training for HIPE staff at HPO

Portal > Data Entry 991 > Test Patient Store Close Rev	iew LOS=30 Allocated=30
MRN 8888888 Sex 1 Male	🖌 Adm Time 👘 Dis Time
Adm Date 01 / 01 / 2021 Adm Type 1 Elective	▼ Elective Adm Type 1 Planned Admission ▼
Dis Date 31 /01 /2021 Adm Source 1 Home	•
DOB 01 /01 /1960 Dis Code 04 Non emergency transfer to	▼ Dest Hosp 0102 Naas General Hospit ▼
Admin Hospital Diags Procs Other Optional	Previous HIPE Data Ward Transfer File
ANP HipFracture Admission Stroke Info	Load Data
. Date of trauma causing hip fracture	dd mm y
1A. Time of trauma causing hip fracture	hhmm
2. Type of trauma	👻 Help
. Date of arrival at first presenting hospital	dd mm y
3A. Time of arrival at first presenting hospital	hhmm
Admission via ED in operating hospital	👻 Help
5. Type of ward admitted to in operating hospital	
7. Type of ward admitted to in operating hospital	•

Improving Clinical Documentation: Collaboration with clinical audits at <u>hospital level</u>

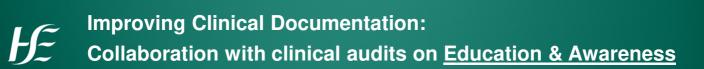
- · Audit Co-Ordinators at hospital level link with coding team
- · Engage directly with on coding queries and documentation issues
- Greater understanding of coding requirements clear documentation and specificity
- e.g. Stroke audit co-ordinators link in with HIPE departments on numbers and types of strokes.
- · Differences discussed and accounted for
- · Support for coding teams in coding strokes and complexities
- HIPE staff inform audit co-ordinators of issues on the ground relating to documentation
- NOCA national leads can link directly in with local co-ordinators and provide training



https://d7g406zpx7bgk.cloudfront.net/ 9df2826fcb/irish_national_audit_of_str oke_summary_report_2022_final.pdf

H Improving Clinical Documentation: Collaboration with clinical audits at <u>national level</u>

- · HPO collaborates with audit managers at national level for clinical audits
- · Address queries or questions relating to HIPE data
- · HPO can review data and perform chart based reviews if appropriate
- These may identify documentation issues that can be addressed through the clinical audit process
- · HPO can feedback on issues arising locally with audit co-ordinators
- · Identification of training opportunities for HIPE staff
- · Examples:
 - · Reviews of coding of palliative care
 - Understanding of coding guidance e.g. principal diagnosis definition
 - Understanding of issues related to potential areas for clinical audit Abdominal aortic aneurysms (AAA)



- Where appropriate published audit report raise any issues related to clinical documentation and the impact on coding.
- · NOCA staff present at HPO training for coders
- Information and expertise provided to HPO on coding and documentation issues
- Reviews have identified issues and raised awareness and understanding e.g.
 - Documentation of STEMIs and NSTEMIs
 - Documentation of palliative care particularly non specialist end of life care
 - Coding of Principal diagnosis and sequencing of codes e.g. heart failure
 - Variation due to local instructions Coronary artery disease identified for patient transferred after an acute MI
- HPO liaise with Audit Managers and Clinical Leads on such areas





Conclusion

- Link with data users at national and hospital level
- Understanding of variation in data and signals in clinical audit
- Role of HIPE coding and importance of documentation
- Clinical input through national audit leads and clinical audit staff at hospital level
- · Issues may require chart review by HPO quality assurance for data users
- · Where issues identified HPO and NOCA work together to address
- Encouraging local networks between coding teams/audit coordinators/clinicians
- Increased awareness amongst clinicians of importance of coding and clarity of documentation



HE Finally

HIPE data directly linked to patient care and safety.

Thank you to HPO team, NOCA team and HIPE coding community

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