

Allied Health Consistent Terminology Data Standards Working Group

Terms of Reference

Background and need

The Federal Department of Health and Aged Care have funded the CSIRO to build a National Terminology Data Set to help critical healthcare information flow between healthcare providers, consumers and their care teams. CSIRO call this program of work 'Sparked'.

You can learn more about the Sparked program via these links:

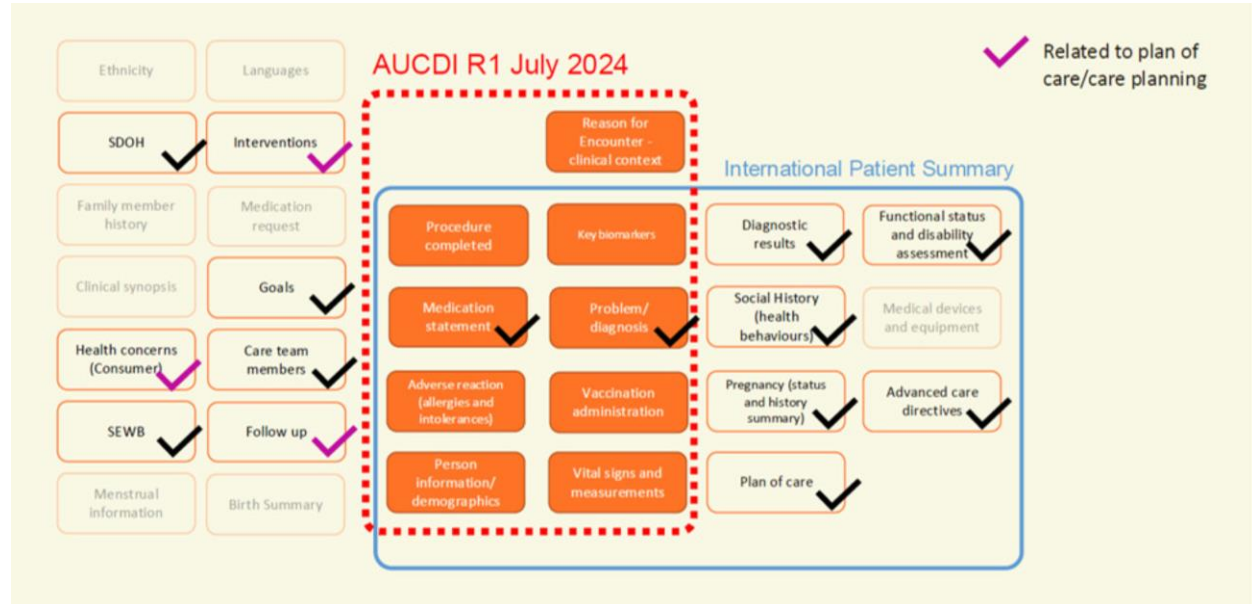
- <https://sparked.csiro.au/index.php/get-involved-with-sparked/>
- <https://www.csiro.au/en/about/corporate-governance/ensuring-our-impact/impact-case-studies/future-industries/clinical-terminology-tools>
- <https://www.csiro.au/en/research/health-medical/clinical-terminology-for-australian-healthcare>

Why do Allied Health need to participate in the Sparked program of work?

- Data is currently stored in silo's and doesn't get easily or efficiently shared between healthcare professionals, consumers and their broader care network.
- Consumers need all of their care team to know their whole story for optimal health care treatment, care plan implementation and outcomes.
- Health professionals need to collect consumer health information using the same language (consistent terminology) for software systems to send and receive information, ensure everyone interprets the words used as intended and to enable reliable reporting that can inform research and policy development.
- Sparked are building the national standards for all healthcare providers at once, not by sector but by 'data group' (see below graphic for data groups)



- This means that if allied health don't say now what terms we need included, the national standards will be built without the inclusion of terms we need to use to communicate with other health professionals, consumers and their care teams.



Sparked program priority data groups for development. Orange boxes = Phase 1 already developed. Ticked boxes represent those under consideration for development in phase 2.

- Some areas of clinical practice such as medicines, pathology and diagnostic imaging, have standards already in place which can inform the development of these National standards. However, typically the information allied health need to share is not yet structured within data sets in a similar manner. Therefore, there is extra work to be done to enable our sector to participate in this program of work.
- Once information is collected at the allied health professional level consistently and within software systems that enable sharing of that information with others, this will facilitate benefits such as:
 - More efficient reporting of information as required to funding bodies, referrers, consumers and their care teams to assist with treatment plan implementation
 - Enable the implementation of collaboratively developed care plans across multi-disciplinary teams
 - Enable allied health information to be shared efficiently with systems such as My Health Record where appropriate to do so
 - Enable systems such as the planned Health Information Exchange (HIE) to identify important information and share it to the appropriate audiences



- Enable organisations such as AIHW to collate data at a national level to inform policy planning, funding models and report outcomes of care
- Enable individual businesses to collate data and review the effectiveness of practice among certain client groups, by practitioner, identify quality improvement opportunities and improved business models
- Enable increased levels of higher quality research to occur.

Purpose

The purpose of the allied health consistent terminology data standards working group (CTDSWG) is to ensure the inclusion of allied health relevant clinical and service terminology within all digital tools being facilitated by the Department of Health and Aged Care and the Australian Digital Health Agency (the Agency).

This includes but is not limited to:

- The National Terminology Data Set being created by the Sparked program
- Provider Connect Australia™ (PCA™).

Objectives

- Ensure each AHPA member association has at least one representative who understands the work occurring related to the creation of National standard terminology data sets and the opportunities available to contribute to this.
- To ensure informed participation of a representative from AHPA member organisations into any relevant standards work occurring, whether it be the representative themselves or another delegate identified.
- To ensure informed allied health representation and participation within the Sparked programs Clinical Design Group and Clinical Focus Group meetings.
- Provide allied health related input and feedback to the sparked program deliverables.
- Identify clinical terminology gaps for allied health professionals to record and share critical information within the data groups addressed during the Sparked program R1 phase of work (see orange box data groups in above graphic).
- Identify the potential problems which can be solved for allied health professional practice by addressing data groups within the R2 phase of work in the context of Chronic Disease Management / shared care planning and prioritise which data groups to develop first.



- Ensure PCA™ and subsequently the National Health Services Directory include all the service types allied health professions provide. This objective will enable consumers to choose the most appropriate health professional for their needs and the Agency to collect statistics related to allied health organisations.

Governance and Reporting

- AHPA Digital Health Program manager will facilitate and chair all working group meetings.
- AHPA will report as required regarding the output of the work to the Australian Digital Health Agency (the Agency) and CSIRO.
- AHPA will be supported by the Agency and CSIRO Sparked program to conduct and inform this work.
- AHPA will provide broad updates re the progress of this CTDSWG and the associated work to:
 - AHPA Digital Health Working Group representatives
 - member associations more generally via the Member Collaborative Forum
 - AHPA CEO and board.
- Group members are responsible for reporting back to their member association contact relevant aspects to ensure the association remains informed and engaged with this work and can prioritise tasks as required. Associations and their representatives need to determine any specific arrangements and requirements to ensure this occurs.

Meetings

CTDSWG meetings will be:

- Online via Microsoft Teams
- Will utilise the platform Miro for collaborative note taking and to conduct any required work between meetings
- A maximum of 1.5 hours in length
- Meeting packs requiring prior reading will be provided 5 working days prior to the scheduled meeting for review.

Allowance has been made for up to four meetings:

- December 2024
- February 2025
- April 2025
- May 2025.



Standing membership

Allied Health Professional Group members:

- One representative from each AHPA member organisation. This can be a shared position between members of the one association provided communication between the representatives occurs between meetings to ensure each representative has up to date knowledge when attending (see appendix 1 for member organisations eligible for funded participation).
- Allied health professional group members are:
 - Currently practicing clinicians and/or highly involved in the day to day running of a clinical practice
 - Using a commercially available clinical information / practice management system
 - Interested in progressing digital products into practice
 - Share consumer information with other healthcare professionals, consumers and their care team for the purposes of improving care outcomes
 - Clinical work is predominantly focused on consumers requiring chronic disease management
 - A current member of the association they represent
 - A well-respected clinician with strong collegial networks they can leverage to inform project work.

Member Responsibilities

AHPA

- Set meeting dates post confirmation of group members to maximise availability
- Assist CSIRO with pre-reading material development as required, collate and provide meeting packs
- Host and run online CTDSWG meetings including agenda provision, in meeting facilitation and note taking in collaboration with CSIRO subject matter expert content delivery
- Administration and co-ordination of the group including distribution of funds as per established invoicing arrangements, support with travel and workshop attendance arrangements
- Ensure deliverables agreed with the Agency and CSIRO are met via coordination of this CTDSWG
- Conduct all required governance and reporting to CSIRO and the Agency.



- Support Agency with 'how to' training for service type mapping exercise if required
- Facilitate inclusion of appropriate terms within Snomed
- Review and identify suitable datasets for mapping within Sparked work program

CSIRO

- Prepare group member pre-reading material as required
- Deliver subject matter content into working group meetings as per project plan
- Facilitate face to face workshop
- Provide mapping training support post workshop as required

Agency

- Guide, inform and feedback re-work conducted as appropriate
- Map service type terms against Snomed and identify options for inclusion to NHSD and gaps which need addressing
- Submit service type gap items to CSIRO for Snomed inclusion processing
- Agency to ensure publication of service type terms within national health service directory and PCA for use by allied health professionals and organisations
- Agency to include service types within statistical data collection and reporting to inform allied health program of work.

Allied Health Professional Group members

A summary of required tasks, their regularity, length, location and any applicable funding to assist participation is provided at Appendix 2.

- Review pre-reading information to ensure informed and focused knowledge sharing during all meetings
- Attend all CTDSWG meetings
- Members will be asked to work with fellow colleagues and their association between meetings to identify, collate and provide relevant information as required
- Attend one x 2-day face to face workshop (location to be confirmed) to participate in 'Snap-to-Snomed' terminology mapping training
- Share and promote relevant work via networks as appropriate
- Assist professional association to create and provide service type lists as required
- It is not essential but highly desirable that members participate in or identify a colleague who can participate in the Sparked Clinical Design Group (CDG). Information regarding the CDG which is facilitated by Sparked can be found [here](#). Regular online and occasional face to face meetings occur for participants of this group



- 3 members of the group at a minimum must attend the CDG face to face events; representatives can change dependent upon topic, timing and location
- It is not essential but highly desirable that group members participate in the CSIRO Clinical Focus Group once established, this work will have a chronic disease management focus; some group members must participate however funding can only be provided for 3 nominees.

Confidentiality and transparency

Members and attendees acknowledge their responsibility to maintain confidentiality of any information shared that is not in the public domain. Any such information will be made clear to the group at the time of discussion and/or sharing.

Appendix 1: AHPA member organisations eligible for funding to assist Special Interest Working Group meetings

Audiology Australia
Australasian Association and Register of Practicing Nutritionists
Australasian Society of Genetic Counsellors
Australasian Sonographers Association
Australian Association of Psychologists Inc*
Australian Association of Social Workers*
Australian Chiropractors Association
Australian Diabetes Educators Association
Australian Music Therapy Association
Australian Orthotic Prosthetic Association
Australian Physiotherapy Association*
Australian Podiatry Association
Australian Psychological Society*
Australian Society of Medical Imaging and Radiation Therapy
Australian Society of Rehabilitation Counsellors
Australian, New Zealand and Asian Creative Arts Therapies Association
Chiropractic Australia
Dietitians Australia
Exercise and sports science Australia
Occupational Therapy Australia*
Optometry Australia
Orthoptics Australia
Osteopathy Australia
Pedorthic Association of Australia
Psychotherapy and Counselling Federation of Australia
Speech Pathology Australia*
Massage and Myotherapy Australia
Australian Hand Therapy Association

*Please note that as is consistent with AHPA processes for all working groups, funding support will only be provided to individuals who are not participating as part of a paid staffing role within the association.

Appendix 2: Funded participation summary

Required Task	Location	Regularity	Time	Funding available
Special interest working group meeting	Online	As noted above	1.5 hours each	Time attendance @ \$200 per hour (max 4 meetings)
Collate information to inform workshops	N/A	As required – iteratively for mapping an option	As required	Association to assist with connections and input
Mapping training and conduct plus data models workshop	Face to face event: location TBC	One off – expected early March 2025	2 full days	Daily attendance fee @ \$750 (max) Travel & accommodation if required
Mapping task for completion (if not completed during above)	Independently with online support if required	Initial large task then to occur iteratively over time as required	Estimated initial 1 day extra maximum	If required an extra fee of 1 day maximum @ \$750 (max) can be allocated to six organisations identified as likely having relatively larger data sets
List of service types	N/A	One off	Minimal	Association to support, NB already complete for some associations

Required Task	Location	Regularity	Time	Funding available
Attend Clinical Design Group	Face to face (F2F)	F2F - bimonthly	F2F – day events (3 reps from CTDSWG)	For 3 CTDSWG nominees only F2F event = attendance @ \$750 (max) day rate plus travel & accommodation if required
	Online	Online – monthly	Online 1-1.5 hours	3 people only Sitting fee @200 \$5,400 (max 6 meetings)
Attend Clinical Focus Group – CDM focus	Online	Fortnightly then monthly – start TBD	2 hours each	3 people only Sitting fee @200 per hour (max 8 meetings)



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Advocating on behalf of Australia's allied health professions to create fairer and more equitable health, aged care and disability systems