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NSW Clinical Coding Leadership Group

Purpose

The NSW Clinical Coding Leadership Group (CCLG) leads, coordinates and develops the State-wide network of clinical coding professionals in the New South Wales health system. The CCLG's principal aim is to improve the quality of clinical coding in both the public and private health sectors of NSW. CCLG is also actively involved in clinical coding workforce development activities and provides relevant policy advice to the NSW Ministry of Health on matters pertaining to clinical coding and its various uses in the health system.

Principal Functions

The principal functions of CCLG include:

- Developing and maintaining an active 'clinical coding community of practice' across NSW.
- Communicating to key stakeholder groups accurate and relevant information about the role and process of clinical coding in the health system.
- Contributing to the strategic development of, and support for, the NSW implementation of clinical coding standards and related frameworks and guidelines.
- Provision of advice on current coding requirements/policy directives and associated business rules as well as relevant Patient Administration System and Electronic Medical Record system capabilities.
- Facilitation of an understanding of Activity Based Funding and the direct links between documentation, coding, National Weighted Activity Units (NWAUs), separations and cost weights.
- Advising the Ministry of Health, Local Health Districts (LHD), Specialty Health Networks (SHN) and other relevant parties on issues and strategies, which impact on the quality of clinical coding data in New South Wales.
- Active involvement in the national development of ICD-10-AM/ACHI/ACS, such as via the International Classification of Diseases (ICD) Technical Group (ITG), with review of proposals and provision state-wide collective comment.
- Providing and publishing advice and information on ICD-10-AM/ACHI/ACS coding for NSW hospitals.
- Receiving and reviewing ICD-10-AM/ACHI/ACS coding queries from Clinical Coders in NSW with provision of advice in alignment with the national coding advisory body.
- Ongoing review and maintenance of advice provided by CCLG for ICD-10-AM/ACHI/ACS coding queries to ensure currency and ongoing alignment with coding standards and classification requirements.
- Facilitation of open communication between LHD, SHN and the Ministry of Health.

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- Provision of recommendation to the NSW Ministry of Health via the Director, System Information and Analytics (SIA) Branch on developments, enhancements and modifications to products which will facilitate:
 - compliance with statutory data requirements
 - ongoing and improved data quality
 - supportive and efficient business processes.
- Enabling networking opportunities for Coding Managers and act as a resource and advisory body to all facilities who are required to submit coded data as part of the Admitted Patient Data Collection.
- Championing the development and strengthening of the clinical coding workforce in NSW.
- Reviewing and the development of recommendations on issues which impact the Clinical Coder workforce and their education in NSW.

Governance

CCLG shall report to the Director, SIA Branch for other matters within the scope of the CCLG.

Chair / Secretariat

- The CCLG meetings shall be chaired by the Clinical Information Specialist, SIA Branch or a nominated SIA Branch substitute.
- The Chair will provide secretariat support for CCLG.

The CCLG Chair is to provide:

- leadership
- convene and chair meetings
- actively engage all members
- call for agenda papers ten business days prior to meeting dates
- distribute agendas, minutes and resources.

Membership

The CCLG shall be comprised of:

- NSW Ministry of Health, Clinical Information Specialist
- NSW Ministry of Health, ABF Taskforce representative
- Cancer Institute NSW Representative
- Each public LHD and SHN may have a maximum of three (3) representatives. Representatives from each LHD and SHN include:
 - Central Coast LHD
 - Far West LHD

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- Hunter New England LHD
- Illawarra Shoalhaven LHD
- Justice Health / Forensic Mental Health Network
- Mid North Coast LHD
- Murrumbidgee LHD
- Nepean Blue Mountains LHD
- Northern NSW LHD
- Northern Sydney LHD
- South Eastern Sydney LHD
- South Western Sydney LHD
- Southern NSW LHD
- St Vincent's Health Network
- Sydney Children's Hospitals Network
- Sydney LHD
- Western NSW LHD
- Western Sydney LHD
- The private hospital sector may have a maximum of two (2) representatives. Representatives will serve for a term of two years, with rotation.

Other stakeholders may attend meetings by invitation only at the discretion of the Chair. Other stakeholders may include but are not limited to:

- Health Information Management Association of Australia
- Clinical Coders' Society of Australia.

Members:

- Require approval from their LHD/SHN to attend and accept membership on CCLG.
- Are expected to attend meetings (in person or remotely) or send a delegate.
- May nominate a delegate to attend in their absence, providing the delegate has a similar level of experience/expertise.
- Are expected to contribute to discussion at meetings where possible.
- Only will receive agendas, minutes and correspondence from the CCLG. Agendas, minutes and correspondence are considered 'committee-in-confidence' and are not to be shared with non-members.
- Are responsible for providing coding query decisions and guidelines to all clinical coders who are paid or contracted to code within their organisation.
- Shall maintain confidentiality in regard to the discussions relating to coding queries submitted to CCLG for consideration.

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Resignation of a Member:

- On the resignation of a CCLG member, their nominating organisation will be requested to propose a replacement.
- If a Delegate resigns their position in the LHD their role on the Committee will also discontinue unless continuity is agreed by the Committee.

Meetings

- Meetings will be held every month, excluding January (but may occur more or less frequently if necessary) via face-to-face or videoconferencing (i.e. Teams).
- Coding queries will be received up until seven business days prior to a scheduled meeting.
- Coding queries shall be submitted on the NSW Health ICD-10-AM query request form and to be accompanied by appropriate supporting information, such as de-identified excerpts from the medical record, electronic patient information system and technical explanatory information.
- The agenda and monthly coding queries will be circulated to members at least five working days prior to the scheduled meeting.
- Minutes will be taken by the Secretariat at each meeting and will be distributed to members within three weeks after the meeting.
- Coding queries must be ratified in meeting by the majority of CCLG members.
- Unresolved or urgent coding queries can be ratified out of session.
- Members who can't attend meetings may either write up their query response in full or send a delegate.

Confidentiality

Members of CCLG may receive information that is regarded as 'committee-in-confidence', clinically confidential and/or have privacy implications. Members and delegates acknowledge their responsibility to maintain confidentiality of all information that is not in the public domain.

Conflict of Interest

CCLG members shall avoid conflicts of interest. Members shall take proactive steps to mitigate conflicts of interest in order to maintain confidence in the CCLG. Members are encouraged to seek guidance from the Chair when they become aware they may have a conflict between their responsibilities as a CCLG member and another interest.

All CCLG members have the duty to advise of any conflict of interest with response to all matters before the group. Members should decline to participate in the disposal of a matter where a real or apparent conflict is present.

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If a CCLG member has a conflict of interest on any matter and is present at a meeting at which the matter is the subject of consideration, the member:

- Should, prior to any consideration of the matter at the meeting, disclose the interest and the general nature thereof;
- Should not take part in the discussion of any question in respect to the matter; and
- Should not attempt in any way whether before, during or after the meeting to influence the discussion of the matter.