



# Northern Territory Aboriginal Health

Key Performance Indicator Information System



Australian Government  
Department of Health and Ageing



Northern Territory  
Government

## NT AHKPI Frequently Asked Questions FAQs

### What is a client?

The NT AHKPI only collects data on clients from your Patient Information System (PIRS). Therefore a 'client' is a person who has visited the health clinic and has received health care at your clinic. *(in some DHF clinics this is recorded in the interim database)*

For some NT AHKPIs, clients are counted and used in the denominator of the indicator. Some people refer to these clients as 'unique clients' as each client is only counted once. For instance NT AHKPI 1.8 we need to know the number of unique clients who have diabetes coded in their electronic health record and these are clients that live in your health service area and are recognised as a resident client who attends your health clinic.

**A client will be a regular client or visitor (please refer to the definition of a regular and visitor client)**

### What is a client contact?

When someone receives health care from a health professional at your clinic it is called a 'client contact' this client's health care needs to be coded in their electronic health record of this person to be counted as a client.

- **Single client contact:** If a client receives health care from one health professional at a health clinic on one day it is one client contact.
- **More than one contact:** If a client receives health care from **more than one** health professional on one day it is more than one client contact. For example if a client saw 3 different health professionals on one day it would equal 3 client contacts (1 doctor, 1 nurse, 1 Aboriginal health worker). Each time the client has to be coded by that health professional in the client's electronic record to be counted.

When we count client contacts we are counting all contacts made in the PIRS data base for your health clinic during the reporting period, so long as they meet the other criteria e.g. they are resident and they live in your clinic's health service area.

### What is an episode of care?

Each time a client sees a health professional at the health clinic it is called an episode. If a client sees more than one health professional on the same day it is called one episode.

Single client contact	One episode
More than one contact in one day e.g. sees the doctor, nurse and AHW (3 contacts)	One episode

The PIRS is smart and can count all episodes of care recorded in the client's electronic file. All client episodes are counted for the reporting period so long as they meet the other criteria e.g. they are resident and they live in your clinic's health service area.

## **What do we mean by Health Service Area (HSA)?**

All localities that are serviced by your health clinic/ service combined together is your health service area (HSA). Your PIRS will be set up to group the localities determined by you so information of your clients that live in these localities are grouped together.

Grouping localities into a HSA is used more by larger health services, therefore smaller services might just have a locality where the clinic is situated. A HSA is also used to determine who you provide health service to and the people that live in this HSA are the people you would be funded to provide primary health care to as they are your resident clients.

## **How is data reported for the KPI's?**

Data is reported or counted from the health clinic's PIRS via a number of 'queries'? A query is written in SQL (structured query language) a computer language which extracts data from the computer database and arranges the information in a useful way to provide us with a result.

## **Why do we get different results between the NT AHKPI data and other data sources like Healthy for Life (H4L) and the OATSIH Service Report (OSR)?**

Even though the definition of the key performance indicator might seem to be the same, there are differences in the query structure and counting rules which determines how the data is extracted from the PIRS data base.

NT AHKPI, H4L and OSR, all have different reasons why they count the information the way they do, they all have different strategies and reporting requirements. Therefore it is important to understand that nationally reported data against the same KPI may provide different results and cannot be compared to the NT AHKPI result.

For instance the OSR query counts data from:

- Health care provided through all sources of funding (e.g. OATSIH, State Government, etc)
- Transport only if it involves direct provision of health care/information by your staff
- Outreach (e.g. episodes at outstation visits, park clinics, satellite clinics, etc)
- Episodes of health care delivered over the phone
- Visitors/transients episodes of health care

It doesn't include:

- Residential care
- Administration contacts with clients (e.g. receptionist making appointments for clients)
- Groups (e.g. antenatal classes, men's groups etc)
- For family/relationship counselling, only count people who have their own file./record

NT AHKPI counts data, only from those encounter places that have the DHF code against it, and recognises regular clients who live in the clinic's nominated health service area. The NT AHKPIs count people living in the HSA e.g.

- 1a and 1b (contacts and episodes) a patient must be not fictitious at the date of the service and living in the specified locality group (or HSA) at the date of the service.
- 1.12 (pap smears) a patient must be current at the end of the reporting period and living in the specified locality group at the end of the reporting period.

Healthy for Life queries do not use health service areas and count the client on their client status; e.g. current (regular), transient (visitor).

All these differences can cause the data to be slightly different, even though it seems to be the same definition for the KPI.