

Enhancing Leadership at Ward Level: AHFIRM

Allied Health Flow and
Interdisciplinary Referral
Management Program
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I would like to acknowledge my colleagues who assisted on this project:
Prue Deckert, Jacqui Boland and Janelle Reyes.

The Question: Can we improve inpatient referral quality and timeliness?

In 2017

- 43% of AH inpatient referrals were inadequate for prioritisation
- 2.3 EFT was spent on inadequate referral management
- 6% of inpatient AH referrals rejected
- Had a ward rep program that was poorly defined

The trial: AHFIRM

3 Pillars of AHFIRM

Access & Flow

- Proactive referral management
- Releasing staff to care
- Individualized ward approach to referral education



Interdisciplinary Communication

- Single point of contact for Allied Health
- Consistent communication between medical, nursing and community staff groups
- Facilitate handovers for meetings



Team-based Leadership

- Increased awareness of ward based KPIs
- Leadership in ward based quality and research
- Allied Health influence and advocacy



Outcomes

Increase in confidence leading across disciplines

Increase in confidence in ability to guide Allied Health referrals for the ward

Increase in communication plan development

Opportunities

AHFIRM role in Daily Operating Systems (DOS) roll out

Alignment with management stream of the Victorian Allied Health Careers Pathways Blueprint