Enhancing Leadership at Ward Level: AHFIRM

Allied Health Flow and Interdisciplinary Referral Management Program

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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