



## **HSS** Registered

## **Clinical Coder**

**Health Salaried Officers Agreement: Level G4/5** 

**Position Number: 104435** 

Clinical Coding Department / Corporate Services & Contract Management Royal Perth Bentley Group/ East Metropolitan Health Service

## **Reporting Relationships**

Area Manager Clinical Coding Award Level: HSO G8 Position Number: 602785

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Team Leader Clinical Coding
Award Level: HSO G6
Position Numbers: 603104-603104-603107

**This Position** 

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Also reporting to this supervisor:

- Clinical Coder, HSO G4/5 13.35 FTE
- Clinical Coding Clerk, HSO G2, 2.0 FTE

## **Key Responsibilities**

Nil

Abstract, code and group all inpatient episodes of care using the coding and grouping software.

## **Brief Summary of Duties (in order of importance)**

#### General

- 1.1 Abstracts and assigns complete and accurate diagnostic and procedure codes for all inpatient episodes of care; in accordance with The International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), The Australian Classification of Health Interventions (ACHI), Australian Coding Standards and Department of Health (DoH) Guidelines.
- 1.2 Accesses and abstracts data for the above purposes from a variety of intra-Hospital computer databases to provide maximum data accuracy.
- 1.3 Monitors the application of Admission Readmission Transfer & Discharge (ARDT) Policy. Notifies incorrect practices to the Team Leader for appropriate action when required. Resolution of DoH Edits as per DoH guidelines.
- 1.4 Ensures the accurate transfer of data and Diagnostic Related Group (DRG) onto the electronic patient master index, via the patient administration system within reporting guidelines.
- 1.5 Generates clinical coding queries with clinical and other Hospital staff to ensure accurate completion of discharge summaries.
- 1.6 Maintains a professional standard and undertakes continuing education and professional development as a Clinical Coder, including knowledge of casemix/ABF, hospital data requirements and hospital policies and procedures.
- 1.7 Provides advice on the importance of quality documentation and its impact on coding and casemix/Activity Based Funding (ABF) outcomes, as required.
- 1.8 Assists in the provision of support and mentoring of inexperienced Clinical Coders.
- 1.9 Facilitates and participates in quality improvement activities within the Clinical Coding Service.
- 1.10 Assists clinical and other health professional staff with requests for clinical audits and research activities, involving access to coded clinical information and Diagnosis Related Groups (DRGs).

#### 2. EMHS Governance, Safety and Quality Requirements

- 2.1 Participates in the maintenance of a safe work environment.
- 2.2 Participates in an annual performance development review.
- 2.3 Supports the delivery of safe patient care and the consumers' experience including participation in continuous quality improvement activities in accordance with the requirements of the National Safety and Quality Health Service Standards and other recognised health standards.
- 2.4 Completes mandatory training (including safety and quality training) as relevant to role.
- 2.5 Performs duties in accordance with Government, WA Health, East Metropolitan Health Service and Departmental / Program specific policies and procedures.
- 2.6 Abides by the WA Health Code of Conduct, Occupational Safety and Health legislation, the Disability Services Act and the Equal Opportunity Act.

#### 3. Undertakes other duties as directed

## **Work Related Requirements**

#### **Essential Selection Criteria**

- Possession of a HIMAA (Health Information Management Association of Australia)
   Introductory Course or equivalent, or equivalent competency gained through experience in clinical coding.
- 2. Comprehensive working knowledge of ICD-10-AM, ACHI and the Australian Coding Standards including medical terminology, human anatomy and disease processes.
- 3. Demonstrated ability to work autonomously and within a team environment.
- 4. Well developed written and verbal communication and interpersonal skills.
- 5. Demonstrated organisational skills and ability to prioritise allocated workload to meet deadlines.
- 6. Effective analytical and reasoning skills.

#### **Desirable Selection Criteria**

- 1. Demonstrated ability to code moderate to complex in-patient episodes of diverse specialty within a large hospital.
- 2. Well developed skills with demonstrated ability to use the coding and grouping software as the primary coding tool.
- 3. Working knowledge of casemix and Diagnosis Related Groups (DRGs).
- 4. Experience in computerised patient administration systems and Windows based applications.
- 5. Current knowledge and commitment to Equal Opportunity in all aspects of employment and service delivery.

# COMPETENCY REQUIREMENTS ARE TO BE MET FOR PROGRESSION FROM LEVEL G4 TO LEVEL G5

- 1. Possession of a HIMAA Introductory Course (or equivalent), or equivalent competency gained through experience in clinical coding.
- 2. Comprehensive experience as a Clinical Coder, including a minimum of 12 months recent experience as a Clinical Coder at a tertiary hospital level.
- 3. Demonstrated capacity and preparedness to carry out the full range of coding specialties in a tertiary hospital including complex coding tasks.
- 4. Ability to provide clinical coding expertise and advice to assist the development of less experienced Clinical Coders.

### **Appointment Prerequisites**

Appointment is subject to:

- Completion of 100 Point Identification Check.
- Successful Criminal Record Screening Clearance.
- Successful Pre-Employment Integrity Check.
- Successful Pre-Employment Health Assessment.

# Certification

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