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Designing and implementing measurement suites: screening, assessment, outcomes evaluation and service benchmarking

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Designing and implementing measurement suites: screening, assessment, outcomes evaluation and service benchmarking

Abstract
In recent project work the CHSD, in conjunction with other collaborating centres, has developed measurement suites for screening, assessment, outcomes evaluation and benchmarking for a range of government programs. When information on the costs of services can be linked to reliable estimates of client need, then there is a classification basis that will give more powerful applications of the same routinely collected data. The CHSD has been involved in establishing and operating the Australasian Rehabilitation Outcomes Centre (AROC), the Palliative Care Outcomes Centre (PCOC) has also worked closely with the Australian Mental Health Outcomes and Casemix Collection Network (AMHOCCN), and these initiatives have allowed benchmarking for facilities in ways that control for patient variation. This workshop will focus on the processes that have been undertaken in development of suitable measurement suites for these purposes, discuss the similarities and differences between these initiatives and outline the lessons learnt from these activities. Data interpretation and implications for service improvement will be discussed.

Keywords
implementing, suites, screening, measurement, benchmarking, service, outcomes, designing, assessment, workshop, evaluation

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6. Designing and Implementing Measurement Suites: Screening, Assessment, Outcomes Evaluation and Service Benchmarking

Presenters: Professor Kathy Eagar, Centre for Health Service Development (CHSD), University of Wollongong; Ms Frances Simmonds Australasian Rehabilitation Outcomes Centre, CHSD; Ms Prue Watters, Palliative Care Outcomes Collaboration, CHSD; Mr Nick Marosszeky, CHSD, Ms Janette Green, CHSD.

Target Audience: Those interested in assessing needs and outcomes for a range of health conditions with a particular focus on chronic disease and rehabilitation.

In recent project work the CHSD, in conjunction with other collaborating centres, has developed measurement suites for screening, assessment, outcomes evaluation and benchmarking for a range of government programs. When information on the costs of services can be linked to reliable estimates of client need, then there is a classification basis that will give more powerful applications of the same routinely collected data. The CHSD has been involved in establishing and operating the Australasian Rehabilitation Outcomes Centre (AROC), the Palliative Care Outcomes Centre (PCOC) has also worked closely with the Australian Mental Health Outcomes and Casemix Collection Network (AMHCCN), and these initiatives have allowed benchmarking for facilities in ways that control for patient variation. This workshop will focus on the processes that have been undertaken in development of suitable measurement suites for these purposes, discuss the similarities and differences between these initiatives and outline the lessons learnt from these activities. Data interpretation and implications for service improvement will be discussed.
Kathy Eagar describes a range of recent projects, addresses the different purposes of measurement suites and discusses key issues that have arisen during their development. Nick Marosszeky will discuss issues concerning the selection and development of measures. Janette Green will discuss the analysis and interpretation of the data and how to avoid some common pitfalls. The similarities and differences between these initiatives will be discussed by Prue Watters from PCOC, and Frances Simmonds from AROC.

Kathy Eagar will conclude the session with a discussion of applications for outcome evaluation and benchmarking in developing service networks, promoting information exchange and for service improvement. There will be a discussion on the lessons learnt in the development of measurement suites and on ways of avoiding problems when introducing standardised tools into routine practice.