# Biographies



**Jo Rasmussen** is the **Senior Leader of Insights and Analytics** at Bendigo Community Health Service. A role centered on data and lived experience integration.

Jo has focused on improving data collection and integrity within the AOD team, using her 30 plus years of experience in numerous data roles.



**Lisa Walklate** is a Registered Nurse with 24 years' experience of working in the Alcohol and Other Drug (AOD) sector. Currently **Senior Leader AOD Wellbeing Services** at Bendigo Community Health Service.

Lisa also has experience in teaching in AOD and community services.

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# Where we started

- Staff disinterested in data. Not seeing it as part of their role.

- Limited trust in data, especially VADC.

- Entered data into the system but had limited understanding on where it went and how it was used.

- Vague and inconsistent expectations and limited knowledge of targets.
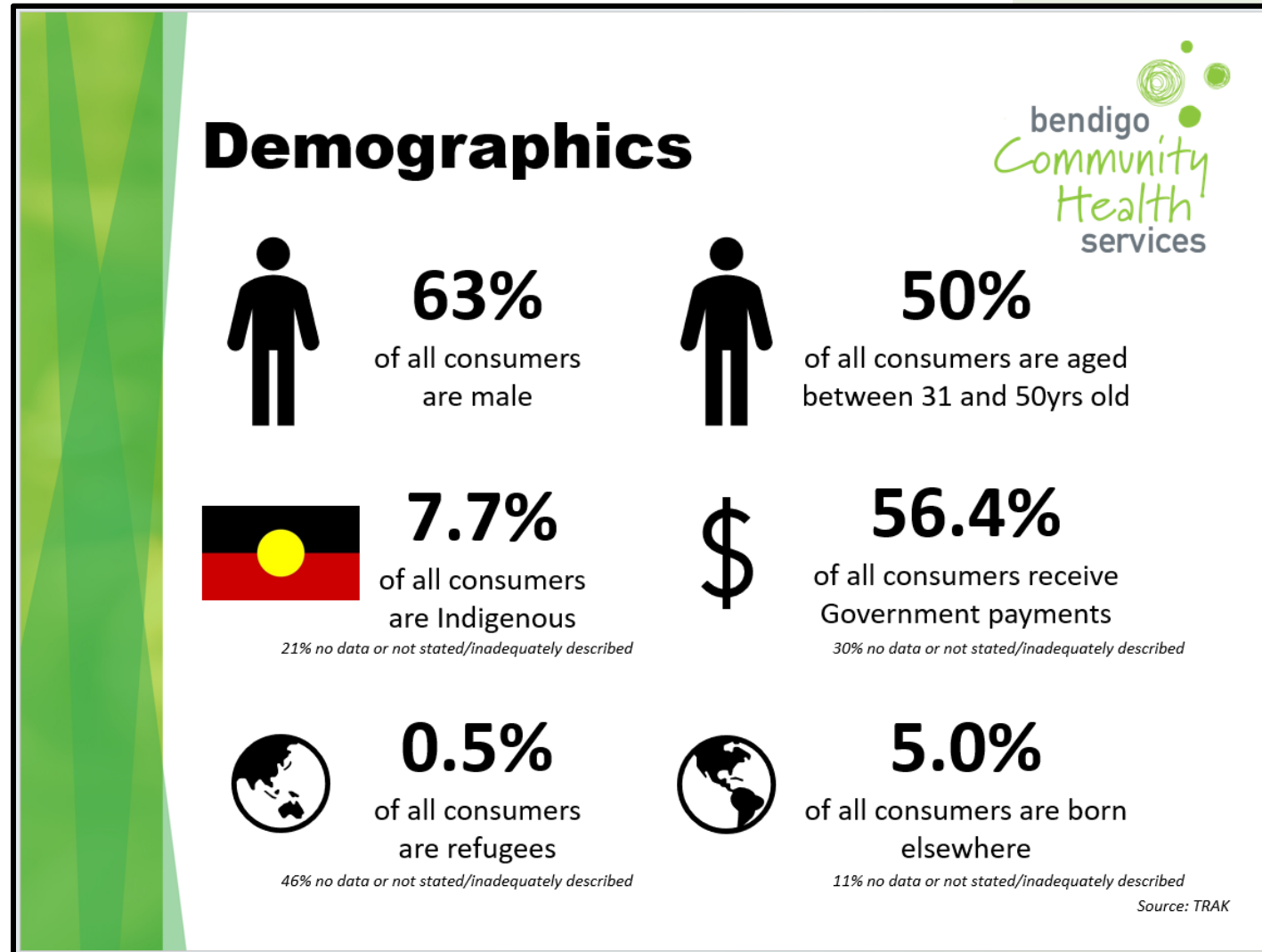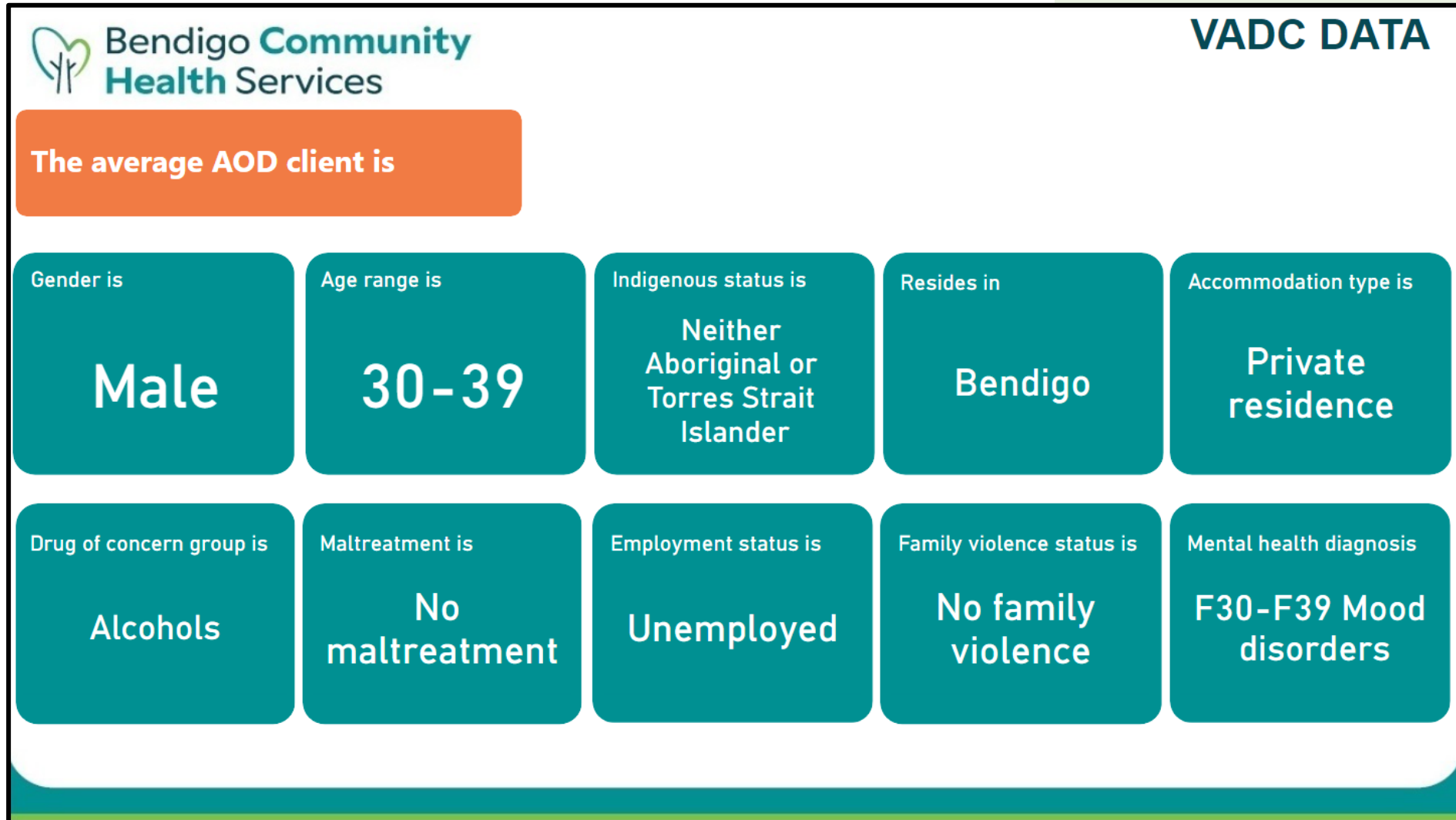
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# Stage 1 – Staff engagement



**Aim** – was to get staff engaged with VADC data and demonstrate how data can be used for multiple purposes
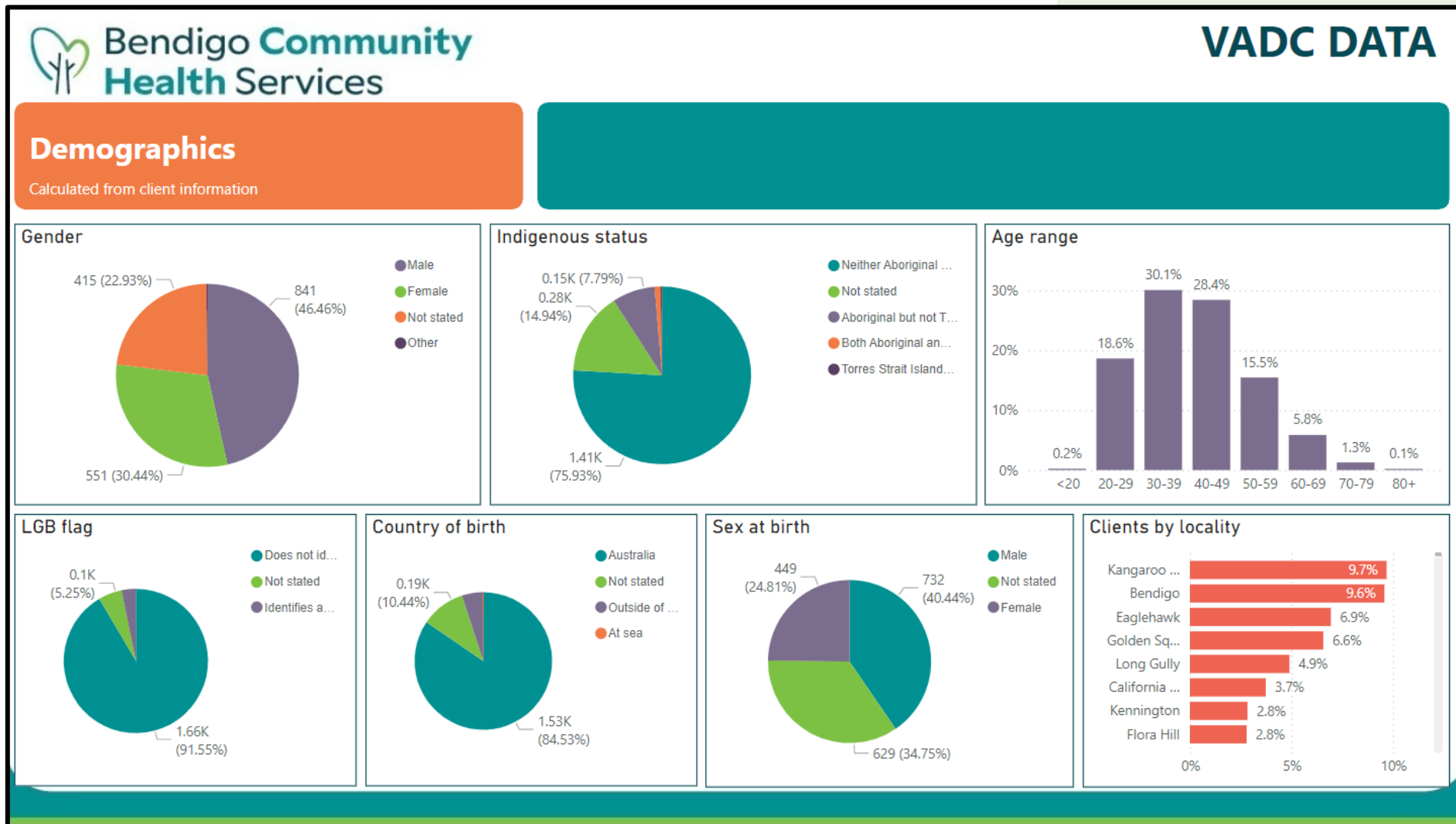
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# Stage 1 – Staff engagement

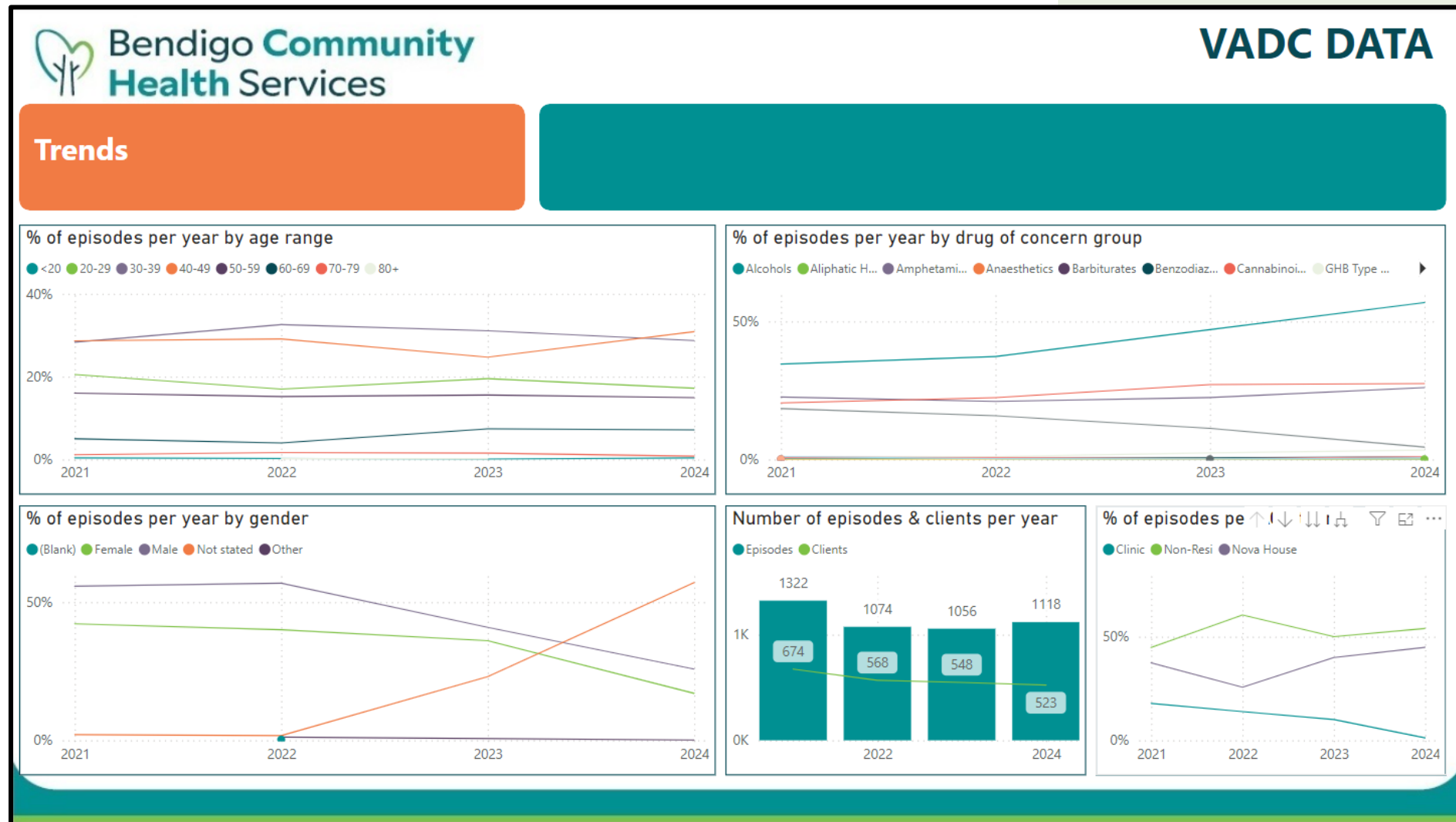# Stage 1 – Staff engagement

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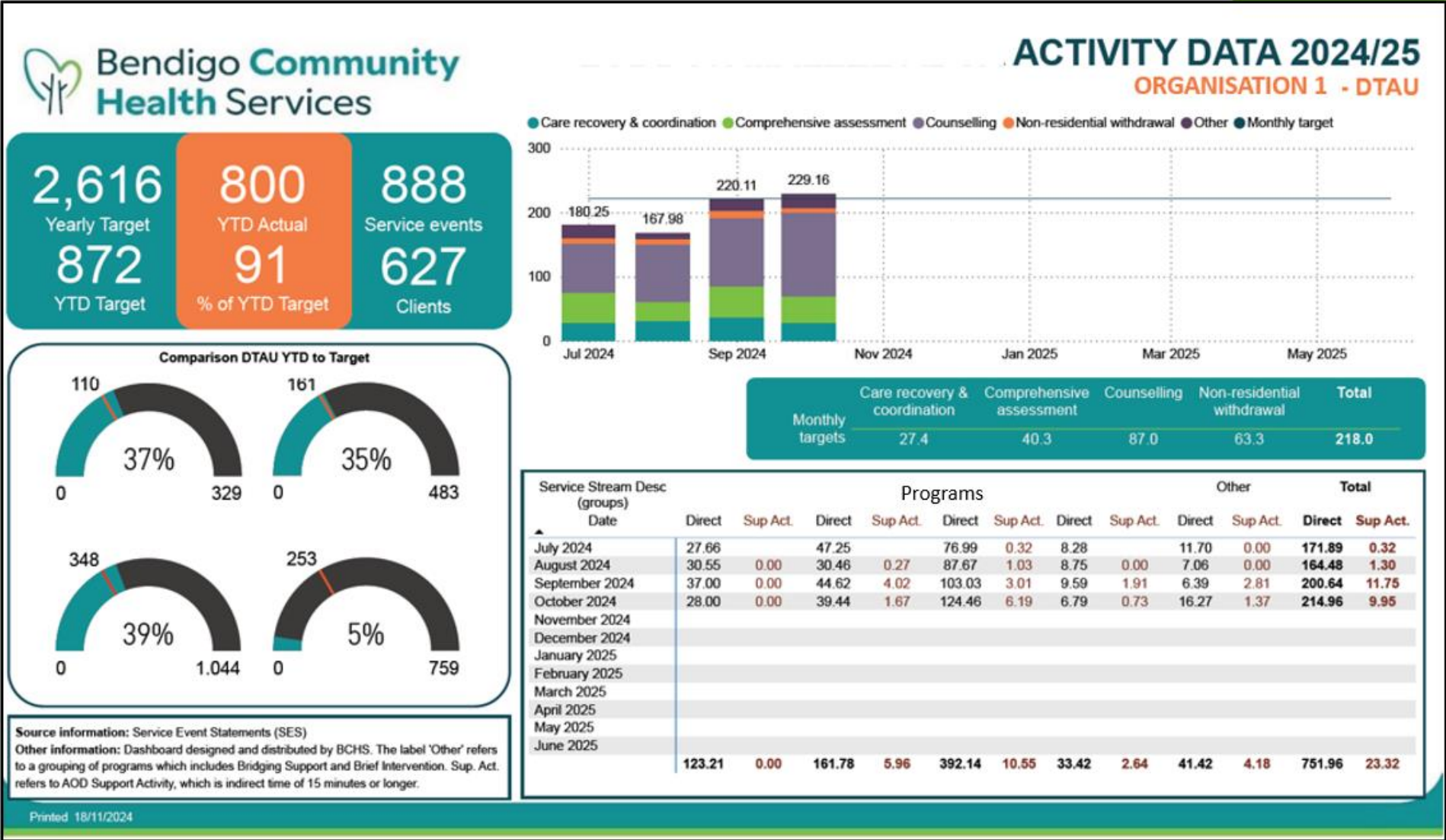# Stage 1 – Staff engagement

# Stage 2 – Performance

**Aim** – Was to educate the staff on our targets, how they were calculated and share how we were performing.

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# Dashboard – Organisational performance

**Organisation progress**

**YTD progress per program stream**

## Bendigo Community Health Services

| 2,616 Yearly Target | 800 YTD Actual | 888 Service events |
| 872 YTD Target | 91 % of YTD Target | 627 Clients |

### Comparison DTAU YTD to Target

110 — 37% — 0 — 329

161 — 35% — 0 — 483

348 — 39% — 0 — 1,044

253 — 5% — 0 — 759

Source information: Service Event Statements (SES)
Other information: Dashboard designed and distributed by BCHS. The label 'Other' refers to a grouping of programs which includes Bridging Support and Brief Intervention. Sup. Act. refers to AOD Support Activity, which is indirect time of 15 minutes or longer.

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## ACTIVITY DATA 2024/25
### ORGANISATION 1 - DTAU

Legend: ● Care recovery & coordination ● Comprehensive assessment ● Counselling ● Non-residential withdrawal ● Other ● Monthly target

Chart values: 180.25 (Jul 2024), 167.98, 220.11 (Sep 2024), 229.16

**Total monthly activity DTAU's**

**Monthly program targets**

| Monthly targets | Care recovery & coordination | Comprehensive assessment | Counselling | Non-residential withdrawal | Total |
|---|---|---|---|---|---|
| | 27.4 | 40.3 | 87.0 | 63.3 | 218.0 |

| Service Stream Desc (groups) | Programs | | | | | | | | Other | | Total | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Date | Direct | Sup Act. | Direct | Sup Act. | Direct | Sup Act. | Direct | Sup Act. | Direct | Sup Act. | Direct | Sup Act. |
| July 2024 | 27.66 | | 47.25 | | 76.99 | 0.32 | 8.28 | | 11.70 | 0.00 | 171.89 | 0.32 |
| August 2024 | 30.55 | 0.00 | 30.46 | 0.27 | 87.67 | 1.03 | 8.75 | 0.00 | 7.06 | 0.00 | 164.48 | 1.30 |
| September 2024 | 37.00 | 0.00 | 44.62 | 4.02 | 103.03 | 3.01 | 9.59 | 1.91 | 6.39 | 2.81 | 200.64 | 11.75 |
| October 2024 | 28.00 | 0.00 | 39.44 | 1.67 | 124.46 | 6.19 | 6.79 | 0.73 | 16.27 | 1.37 | 214.96 | 9.95 |
| November 2024 | | | | | | | | | | | | |
| December 2024 | | | | | | | | | | | | |
| January 2025 | | | | | | | | | | | | |
| February 2025 | | | | | | | | | | | | |
| March 2025 | | | | | | | | | | | | |
| April 2025 | | | | | | | | | | | | |
| May 2025 | | | | | | | | | | | | |
| June 2025 | | | | | | | | | | | | |
| | 123.21 | 0.00 | 161.78 | 5.96 | 392.14 | 10.55 | 33.42 | 2.64 | 41.42 | 4.18 | 751.96 | 23.32 |

**DTAU's across each program**

**Uses the Service Event Statement (SES) as the source**

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# Other performance activities

Educations sessions on DTAU's, targets and data entry guide

Importance of specific fields used in weighting DTAU calculations, such as Indigenous and forensic status. This led to a greater understanding of the importance of completing client registration forms.





TRAK DATA ENTRY GUIDE FOR AOD PROGRAMS
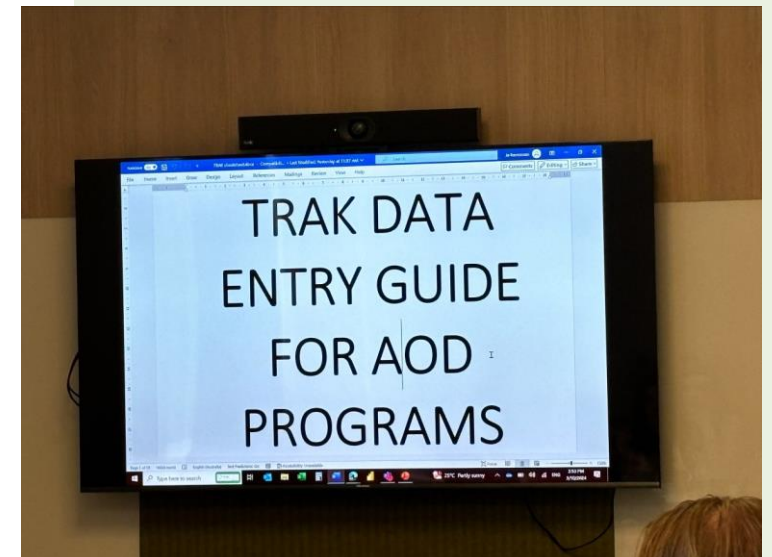
# Stage 3 – Tools

**Aim** – The development and implementation of a range of tools to support staff and increase program activity.

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# Tool 1 - Caseload management tool

Staff details are added here to calculate total number of hours available

Amount of client hrs based on FTE and month

Total number of planned hours based on clients added below

Colours indicate intensity of service required

## AOD staff monthly caseload management tool

| Staff member | Jo Rasmussen | |
| --- | --- | --- |
| EFT | 1.0 | |
| Program | Counselling | |
| Month | January | |
| Leave/public holidays | 0 | days |

| Client rankings | | Monthly hrs |
| --- | --- | --- |
| Red | Intensive; requires intensive support | 4 |
| Orange | High: requires more than average | 3 |
| Green | Average: requires the average amount of support | 2 |

| Total client hours available | 115 | hrs | based on 5 hrs client work a day (calculated using EFT and minus public holidays/leave) |
| --- | --- | --- | --- |

| Total client hrs assigned | 24 |
| --- | --- |
| Total client hrs remaining | 91 |

| Client Initials & UR | Ranking | Hrs | Comments |
| --- | --- | --- | --- |
| JR 12345 | Red | 4 | Past client. Booked in for 19/1/2025 |
| LW 98765 | Green | 2 | Proceeding well wih counselling. Planned discharge in a fortnight |
| SS 54321 | Orange | 3 | Requesting fortnightly - (alcohol). Naltrexone. No current use - relapse prevention |
| HB 24879 | Green | 2 | Fortnightly. Std counselling. [Alc] - no current use. Requested relapse prevention |
| DC 78945 | Red | 4 | 2 x phone calls and 1 x text |
| BW 25563 | Orange | 3 | Needs referral to Western and Westside Lodge |
| WW 48795 | Green | 2 | Comp Ax booked for 19/1/2025 onsite |
| TE 65978 | Green | 2 | F - New referrral pending appointment |
| HR 89745 | Green | 2 | requesting peer support |
| | Blank | 0 | |
| | Blank | 0 | |
| | Blank | 0 | |
| | Blank | 0 | |
| | Blank | 0 | |

**Note**: All details are fictitious
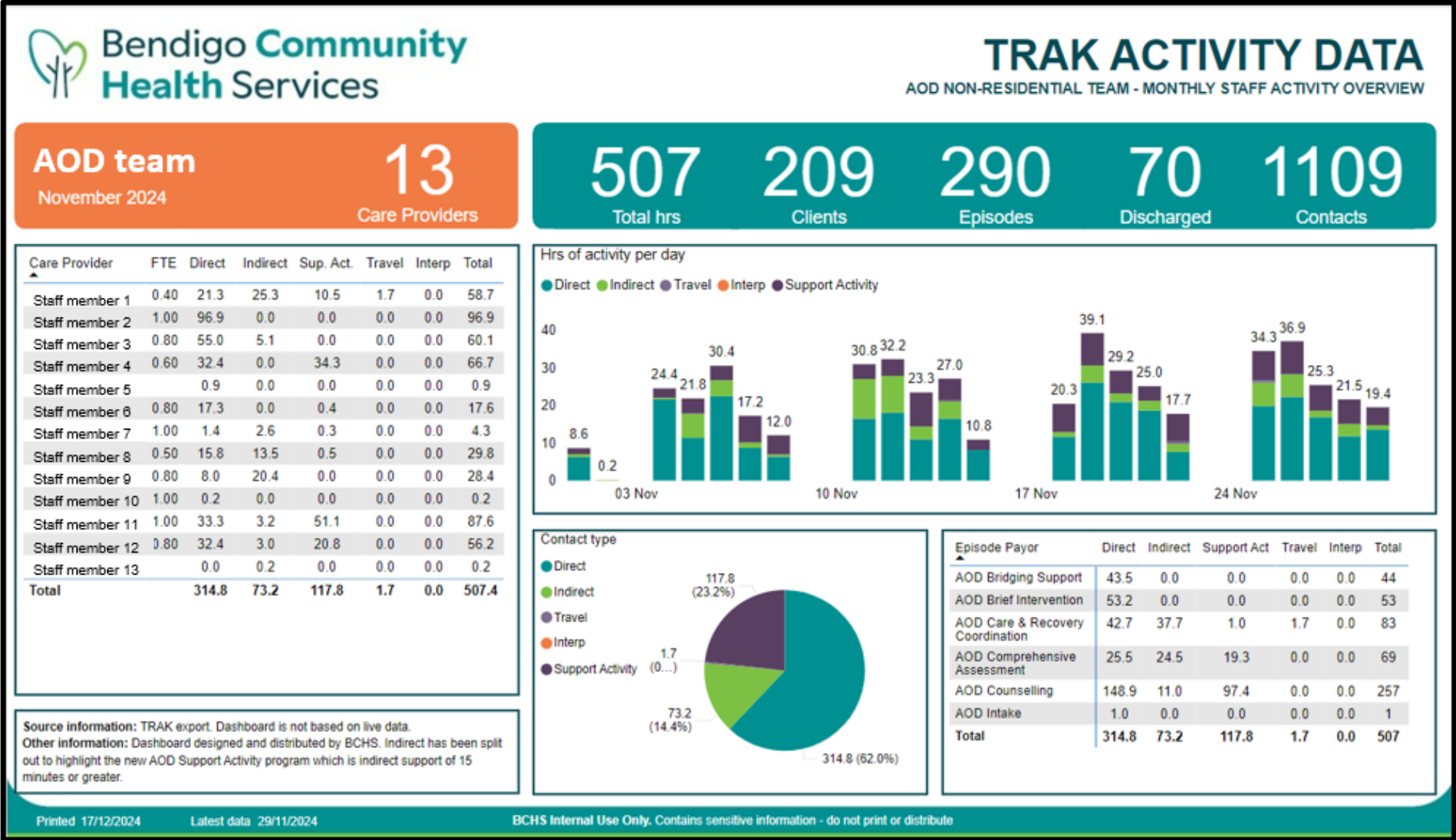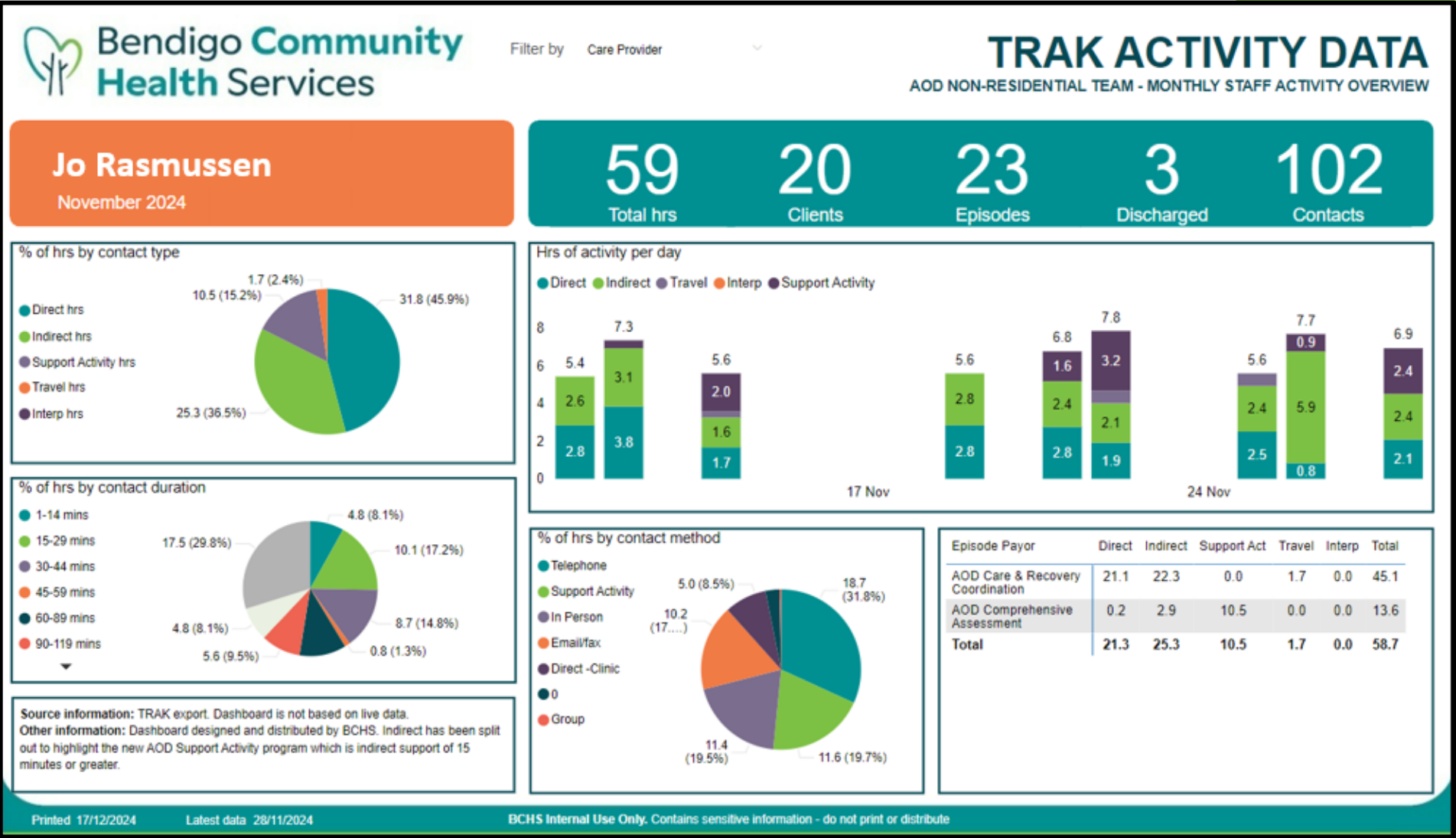
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# Tool 2 – Activity dashboard (team)

# Tool 2 – Activity dashboard (individual staff)



This page is for one staff member

Overview of contact type

Overview of contact duration

Total monthly activity

Total hours per day

Hours across each program

Hours by contact type i.e. in person, telephone etc

# Supervision



Both the caseload management tool and activity dashboard are utilised in monthly supervision sessions with staff.

The caseload management tool allows the Senior Leader to monitor client complexity to ensure no one is overloaded with complex clients, which helps prevent burnout.

The activity dashboard facilitates discussion on why there is differences in hours planned versus actual. For example, if clients didn't turn up to sessions, what can we do to reduce disengagement.

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# Outcomes

**48% increase in hours a month**

**18% increase in clients a month**

**53% increase in contacts a month**

**Increase in data literacy & quality**

**Waitlist reduced to one page**

Was consistently two pages

**Increase in room utilization**

At Wanyanimbik Wayawan

**Staff satisfaction increased**

100% of staff surveyed indicated the tool was useful and that they had improved knowledge and understanding of data

**One staff member resignation**

September 2024 to September 2023

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# Staff feedback

Gives me a visual of my current workload and helps me see achievements when tracking my discharges.

More accountable, feeling more in control of my workload.

Everyone is encouraged to take responsibility for maintaining high data integrity and accountability

Being data-aware keeps me accountable for meeting performance targets and ensures I'm tracking client progress in a measurable way.

Feeling more empowered and confident in the processes.

It helps track client progress, tasks, and deadlines, reducing the chance of missing important steps.

A more organised approach leads to better care and client satisfaction.

A data entry guide is essential to knowing how to enter data accurately and thanks so much Jo for developing it.

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# Key learnings



Didn't start out expecting this work to change the team culture.

Management engagement and knowledge with the process is crucial.

You need to close the data loop. Show data back to staff.

Requires investment in data analysis, education and developing resources.

Regular supervision and clinical reviews using the tools, creates an equitable workload and consistent expectations across the team. It also helps in being transparent.

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# Thank You

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