Western Australian Clinical Coding Advisory Group

Purpose
The purpose of the Western Australian Clinical Coding Advisory Group (WACCAG) is to act in an advisory capacity to the Western Australian Clinical Coding Authority (WACCA) to assist in its decision making.

Scope
- Review and endorse decisions for resolution of ICD-10-AM/ACHI/ACS coding queries. This includes queries referred from the Department of Health Clinical Information Audit Program.
- Provide advice on interpretation of Australian Coding Standards and other publications produced by the Australian Consortium for Classification Development (ACCD).
- Promote future development of Australian classification systems by identifying any new diseases and procedures and preparing public submissions to the ACCD for ICD-10-AM and ACHI changes.
- Review and provide feedback on national proposals issued by the ACCD.
- Consult with clinicians in specialist areas where necessary.
- Review and provide feedback on de-identified findings from the Department of Health Clinical Information Audit Program.

Membership
The group will consist of a cross-section of Western Australian clinical coders. Selection of group members will be made by the WACCA. Non-Department of Health members will be selected via an expression of interest process every 12 months. The group will consist of between 12-20 members. Health services are encouraged to have nomination of at least one member from their service.

Expression of interest criteria
All non-Department of Health/Royal Street clinical coders who wish to be a member of the WACCAG are required to submit an expression of interest. The WACCA seeks clinical coders who have a genuine interest and commitment to participate in coding query decision making. Nomination is not limited to those clinical coders working in senior coding positions and membership of the WACCAG may be beneficial to a clinical coder’s professional development.

Nominees should:
- Where required, obtain approval from their manager before applying.
- Possess at least two years current clinical coding experience.
• Currently be employed in a position where clinical coding related duties are a significant component of their workload.
• Provide a letter expressing why they would like to be a member of the WACCAG.
• Provide a curriculum vitae or a brief outline of their coding experience and qualifications.

Meetings
Three-hour face to face meetings, with video conferencing availability, are to be held at approximately eight weekly intervals at the Department of Health. Ad-hoc meetings may be called if required, with a minimum of one week prior notice. Meetings may be held via e-mail.

Member responsibilities:
• Review the WACCAG coding queries before meetings and prepare feedback to share at meetings.
• Review national proposals issued by the ACCD and provide feedback.
• Attend all the WACCAG meetings. Where a member is unable to attend a meeting, they are to provide comments on the proposed documents in the specified timeframe. No proxy is to be sent if a member is unable to attend. Attendance of meetings will be monitored.
• Communicate respectfully to enable optimal productivity of the group.

Meeting Chairperson and Note-taker
• The Principal Coding Consultant will chair the meetings to ensure the group functions effectively and remains in scope.
• A Senior Coding Consultant will be Acting Chairperson when the Principal Coding Consultant is unavailable.
• A Senior Coding Consultant will be Note-taker.

WACCA’s role
The WACCA is responsible for organising meetings including venue, preparing and distributing documents related to the meeting, and taking discussion notes. Documents are to be provided to members at least one week prior to the meeting. Document preparation includes:
• Thorough interrogation of ICD-10-AM/ACHI/ACS
• Review of ACCD Coding Rules
• Review of WA Coding Rules
• Clinical advice
• Review of other Classifications

The coding queries endorsed at the meeting will be published as WA Coding Rules on the WACCA website. Notification of publication of new WA Coding Rules will be circulated to all WA coders registered on the Department of Health email distribution list via email.

The WACCA will carefully consider all feedback and advice provided by the WACCAG. However, where consensus cannot be reached, the WACCA will make a final decision. In some instances this may require publication of an interim WA Coding Rule while the query is escalated to the ACCD.