

Non-admitted patient service event—care type, subacute (derived) code N

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Non-admitted patient service event—care type, subacute (derived) code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Care type, derived subacute
Synonymous names:	Care type
METEOR identifier:	400649
Registration status:	Independent Hospital Pricing Authority, Standard 01/11/2012 Health! , Superseded 02/05/2013
Definition:	A descriptor of the overall nature of subacute care delivered during a non-admitted patient service event, derived from other service characteristics, as represented by a code.
Data Element Concept:	Non-admitted patient service event—care type
Value Domain:	Subacute care type code N

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N
Maximum character length:	1

	Value	Meaning
Permissible values:	1	Rehabilitation care
	2	Palliative care
	3	Geriatric evaluation and management
	4	Psychogeriatric care
	8	Other care

Collection and usage attributes

Guide for use:

Subacute care is defined as rehabilitation, palliative care, geriatric evaluation and management, and psychogeriatric care.

CODE 1 Rehabilitation care

Rehabilitation care is care in which the clinical intent or treatment goal is to improve the functional status of a patient with an impairment, disability or handicap. It is usually evidenced by a interdisciplinary rehabilitation plan comprising negotiated goals and indicative time frames which are evaluated by a periodic assessment using a recognised functional assessment measure.

CODE 2 Palliative care

Palliative care is care in which the clinical intent or treatment goal is primarily quality of life for a patient with an active, progressive disease with little or no prospect of cure. It is usually evidenced by an interdisciplinary assessment and/or management of the physical, psychological, emotional and spiritual needs of the patient; and the provision of grief and bereavement support for the patient and their carers/family.

CODE 3 Geriatric evaluation and management (GEM)

Geriatric evaluation and management is care in which the clinical intent or treatment goal is to maximise the health status and/or optimise the living arrangements for a patient with multi-dimensional medical conditions associated with disabilities and psychosocial problems, who is usually (but not always) an older patient. This may also include younger adults with clinical conditions generally associated with old age. This care is usually evidenced by interdisciplinary management and regular assessments against a management plan that is working towards negotiated goals within indicative time frames.

CODE 4 Psychogeriatric care

Psychogeriatric care is care in which the clinical intent or treatment goal is improvement in health, modification of symptoms and enhancement in function, behaviour and/or quality of life for a patient with an age-related organic brain impairment with significant behavioural or late onset psychiatric disturbance or a physical condition accompanied by severe psychiatric or behavioural disturbance. The care is usually evidenced by interdisciplinary management and regular assessments against a management plan that is working towards negotiated goals within indicative time frames.

CODE 8 Other care

Any care provided that does not fall within the categories above. e.g. maintenance care, and acute care.

NOTE: Interdisciplinary care is care provided by a multidisciplinary team.

Data element attributes**Collection and usage attributes**

Guide for use:

In addition to the definitions within the value domain, further clarifying information is provided below.

Rehabilitation care includes care provided:

- in a designated rehabilitation unit (i.e. a dedicated unit that receives identified funding for rehabilitation care and/or primarily delivers rehabilitation care); or
- according to a designated rehabilitation program (i.e. care is delivered by a specialised team of staff who are dedicated to rehabilitation care); or
- under the principal clinical management of a rehabilitation physician or related healthcare worker; or
- where the care requested is rehabilitation care.

Palliative care includes care provided:

- in a designated palliative care unit (i.e. a dedicated unit that receives identified funding for palliative care and/or primarily delivers palliative care); or
- according to a designated palliative care program (i.e. care is delivered by a specialised team of staff who are dedicated to palliative care); or
- under the principal clinical management of a palliative care physician or related healthcare worker; or
- where the care requested is palliative care.

Geriatric evaluation and management (GEM) includes care provided:

- in a geriatric evaluation and management unit (i.e. a dedicated unit that receives identified funding for GEM and/or primarily delivers GEM); or
- in a designated geriatric evaluation and management program (i.e. care is delivered by a specialised team of staff who are dedicated to GEM); or
- under the principal clinical management of a geriatric evaluation and management physician or related healthcare worker; or
- where the care requested is geriatric evaluation and management.

Psychogeriatric care includes care provided:

- in a psychogeriatric care unit (i.e. a dedicated unit that receives identified funding for psychogeriatric care and/or primarily delivers psychogeriatric care); or
- in a designated psychogeriatric care program (i.e. care is delivered by a specialised team of staff who are dedicated to psychogeriatric care); or
- under the principal clinical management of a psychogeriatric physician or related healthcare worker; or
- where the care requested is psychogeriatric care.

Collection methods:

Classification depends on an assessment of the overall nature of care provided, based on other service event characteristics collected at the jurisdiction level such as clinic type, provider type and/or referral details. The method used to derive the care type should be submitted with the dataset.

Relational attributes**Related metadata references:**

Has been superseded by [Non-admitted patient service event—care type, subacute \(derived\) code N](#)

[Health!](#), Superseded 07/03/2014

See also [Appointment—care type, code AAA](#)
[WA Health](#), Standard 24/04/2015

See also [Appointment—care type, code AAA](#)
[WA Health](#), Standard 19/03/2015

Implementation in Data Set Specifications:

[Activity based funding: Non-admitted patient care DSS 2013-2014](#)

[Independent Hospital Pricing Authority](#), Superseded 01/03/2013

Implementation start date: 01/07/2013

Implementation end date: 30/06/2014

[Non-admitted patient activity based funding DSS 2012-2013](#)

[Independent Hospital Pricing Authority](#), Superseded 30/10/2012

Implementation start date: 01/07/2012

Implementation end date: 30/06/2013

[Non-admitted patient DSS 2011-12](#)

[Health!](#), Superseded 07/12/2011

Implementation start date: 01/07/2011

Implementation end date: 30/06/2012

[Non-admitted patient DSS 2012-13](#)

[Health!](#), Superseded 02/05/2013

Implementation start date: 01/07/2012

Implementation end date: 30/06/2013