

Activity based funding: Emergency service care NBEDS 2017-18

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Activity based funding: Emergency service care NBEDS 2017-18

Identifying and definitional attributes

Metadata item type:	Data Set Specification
METEOR identifier:	638083
Registration status:	HealthI , Superseded 25/01/2018
DSS type:	Data Set Specification (DSS)
Scope:	The scope of the Activity based funding: Emergency service care National Best Endeavours Data Set (NBEDS) is emergency services provided in activity based funded hospitals which do not meet all of the following criteria:

- Purposely designated and equipped area with designated assessment; treatment and resuscitation areas.
- Ability to provide resuscitation, stabilisation and initial management of all emergencies.
- Availability of medical staff available in the hospital 24 hours a day.
- Designated emergency department nursing staff 24 hours a day, 7 days a week, and a designated emergency department nursing unit manager.

The care provided to patients in emergency services is, in most instances, recognised as being provided to non-admitted patients. Patients being treated in emergency services may subsequently become admitted. All patients remain in-scope for this collection until they are recorded as having physically departed the emergency service, regardless of whether they have been admitted. For this reason there is an overlap in the scope of this NBEDS and the Admitted patient care National Minimum Data Set (APC NMDS).

The scope also includes services where patients did not wait to be attended by a health care professional and those dead on arrival. Patients with Department of Veterans' Affairs or compensable funding source are also included in the scope of the collection.

Excluded from the scope are:

- Care provided to patients in General Practitioner (GP) co-located units. However, patient presentations that result in a referral to a GP co-located unit after registration, but before commencement of clinical care, are in scope.

Collection and usage attributes

Statistical unit:	Emergency service stay
Collection methods:	National reporting arrangements

State and territory health authorities provide the data to the Independent Hospital Pricing Authority (IHPA) for national collection, on a six monthly basis as required under national health reform arrangements.

Periods for which data are collected and nationally collated

Financial years ending 30 June each year.

Six-monthly data collection commencing 1 July each year.

Implementation start date:	01/07/2017
Implementation end date:	30/06/2018

Comments:

Scope links with other metadata sets

Episodes of care for admitted patients are reported through the Admitted patient care NMDS.

Mental health care provided in emergency services is in scope for the Activity based funding: Emergency service care NBEDS.

Glossary items

Glossary terms that are relevant to this NBEDS are included here.

[Activity based funding](#)

[Admission](#)

[Compensable patient](#)

[Emergency service](#)

[Registered nurse](#)

[Triage](#)

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority
Australian Institute of Health and Welfare

Relational attributes

Related metadata references: Supersedes [Activity based funding: Emergency service care NBEDS 2016-17 Health!](#), Superseded 05/10/2016
Has been superseded by [Activity based funding: Emergency service care NBEDS 2018-19 Health!](#), Superseded 17/10/2018

Metadata items in this Data Set Specification

Seq No.	Metadata item	Obligation	Max occurs
-	Emergency service stay—episode end status, code N	Mandatory	1
-	Emergency service stay—triage category, code N	Mandatory	1
-	Emergency service stay—type of visit to emergency service, code N	Mandatory	1
-	Episode of care—funding eligibility indicator (Department of Veterans' Affairs), code N	Mandatory	1
-	Establishment—organisation identifier (Australian), NNX[X]NNNNN	Mandatory	1
-	Patient—compensable status, code N	Mandatory	1