Available bed—overnight-stay mental health hospital-in-the-home care

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# Available bed—overnight-stay mental health hospital-in-the-home care

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| Identifying and definitional attributes | |
| Metadata item type: | Data Element Concept |
| METEOR identifier: | 646855 |
| Registration status: | [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 25/01/2018 |
| Definition: | A bed-equivalent where the necessary human and financial resources are provided to deliver mental health care to patients in [**hospital-in-the-home-care**](https://meteor-uat.aihw.gov.au/content/327308). |

## Object Class attributes

### Identifying and definitional attributes

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| Object class: | [Available bed](https://meteor-uat.aihw.gov.au/content/373634) |
| METEOR identifier: | 373634 |
| Registration status: | [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 03/12/2008 |
| Definition: | A suitably located and equipped bed chair, trolley or cot where the necessary financial and human resources are provided for admitted patient care. |
| Specialisation of: | [Organisation](https://meteor-uat.aihw.gov.au/content/281131) |
| Collection and usage attributes | |
| Comments: | This item supports a number of metadata items developed during 2007-08 to replace Establishment – number of available beds for admitted patients, average. The new definitions improve on the counting rules, the definition of availability and provide for the separate reporting of overnight-stay beds, same-day beds, hospital-in-the-home beds and neonatal cots (non-special-care).  During the development phase, it became clear that there are a multitude of bed descriptors, other than 'available', in use. In order to provide clarity in relation to 'available beds' other known terms are defined below:   * Active beds – alternative term for 'available beds'. * Approved beds – the maximum number of beds that the hospital is authorised to have. This may exceed the number of physical beds. * Base beds - alternative term for 'available beds'. * Bed alternatives (QLD) – this term is used to describe furniture, other than beds in overnight wards, such as trolleys, chairs and cots, which provide accommodation for admitted patients – e.g. chairs/trolleys accommodating chemotherapy and dialysis patients. * Bed Equivalents (NSW) – a method of equating same day beds to overnight beds – not necessary if counting overnight and same day beds separately. * Capacity – term which can be used in conjunction with either available or physical beds, but more often the latter – to indicate the maximum number of beds that could be made available, given the appropriate level of funds and nursing and auxiliary staff. * Designated beds – term used to describe beds set aside for specialist care, e.g. mental health. * Flex beds – see 'surge/flex beds' below. * Funded beds – may equate to 'available beds' unless the necessary human resources cannot be provided (e.g. due to a strike or nursing shortage). * Licensed beds – this is an alternative term for 'approved beds', more commonly used for private hospitals where the maximum number of beds is often specified as part of the registration process. * Medi-hotel bed – this term is used for beds in a non-ward residential service maintained and/or paid for by the hospital, as a substitute for traditional hospital ward accommodation. Residents may be accommodated in a medi-hotel overnight and be admitted as same-day patients or receive non-admitted patient services during the day. They may be accommodated in the medi-hotel before, during or after a multi-day admitted episode. Unlike hospital-in-the-home, however, no clinical services are provided in the medi-hotel and a significant decline in medical condition would always necessitate return from the medi-hotel to the hospital's Emergency Department or other ward. Thus residents are not reported as admitted while in the medi-hotel (unless they are on leave) and the medi-hotel beds are not counted as available for admitted patients. * Occupied/Unoccupied beds – categorisation of available beds – a bed is occupied if there is a patient physically in the bed or the bed is being retained for a patient (e.g. the patient is receiving treatment or is on leave). Beds may be available but not occupied, e.g. an 8 bed ward may be fully staffed, but only 7 beds are occupied. Also if a patient has left a bed to receive a different care type and will not be returning within 24 hours, the bed is not occupied. * Occupancy Rate – calculated by dividing total bed days in a period by the product of the available beds and the days in the period – e.g. if in a non-leap year patients accumulated 33,000 bed days in a hospital with 100 overnight-stay beds, the occupancy rate = 33,000/(365\*100) = 90.4%. N.B. Occupancy rates calculated for same-day beds could exceed 100%. * Open beds - alternative term for 'available beds'. * Operational beds - alternative term for 'available beds'. * Physical beds – the maximum number of beds that could be made available, given the appropriate level of funds and nursing and auxiliary staff. * Seasonal beds – describes the movement in the number of available beds due to seasonal factors. * Staffed beds – may equate to 'available beds' or may be lower depending on demand. * Surge/flex beds (NSW) or Flex beds (SA) – the increase in the number of available beds that could be made by making arrangements for additional nursing and auxiliary staff, In other words, the number of surge/flex beds is the difference between the number of physical beds and the number of available beds. * Swing beds – beds that can alternate between different types of care. Depending on the context, swing beds can be thought of as a sub-category of physical beds or available beds. * Virtual bed – this term is used to denote a nominal location which the patient is held against in the hospital’s patient administration system. This is because in the patient administration system each admitted patient needs to be held against a bed whether or not they are in a physical bed. For example, if a neonate is sharing a bed with the mother (e.g. in a birth centre) a cot may not be set up. Hospital-in-the-home (HITH) patients may also be held in a virtual bed. |

## Property attributes

### Identifying and definitional attributes

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| Property: | [Overnight-stay mental health hospital-in-the-home care](https://meteor-uat.aihw.gov.au/content/648351) |
| METEOR identifier: | 648351 |
| Registration status: | [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 25/01/2018 |
| Definition: | The delivery of mental health care to hospital admitted patients in their place of residence as a substitute for hospital accommodation. Place of residence may be permanent or temporary. |
| Property group: | [Service provision event](https://meteor-uat.aihw.gov.au/content/274661) |
| Source and reference attributes | |
| Submitting organisation: | Mental Health Information Strategy Standing Committee |

## Data element concept attributes

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| Source and reference attributes | |
| Submitting organisation: | Mental Health Information Strategy Standing Committee |

### Relational attributes

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| Data Elements implementing this Data Element Concept: | [Available bed—overnight stay mental health hospital-in-the-home care, average number of beds N[NNN.N]](https://meteor-uat.aihw.gov.au/content/646853)  [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 25/01/2018 |