Non-admitted patient care Local Hospital Network aggregate NBEDS 2017-18

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Non-admitted patient care Local Hospital Network aggregate NBEDS 2017-18

Identifying and definitional attributes

Metadata item type: Data Set Specification

METEOR identifier: 649576

Registration status: Health!, Superseded 25/01/2018

DSS type: Data Set Specification (DSS)

Scope: The scope of the Non-admitted patient care Local Hospital

Network aggregate National Best Endeavours Data Set (NBEDS) is non-admitted

patient service events involving non-admitted patients provided by:

Local Hospital Networks

 other public hospital services that are managed by a state or territory health authority and are included in the *General list of in-scope public hospital* services, which have been developed under the *National Health Reform* Agreement (2011).

This also includes all in-scope services contracted by a public hospital, Local Hospital Network or jurisdiction regardless of the physical location of the contracting public hospital, Local Hospital Network or jurisdiction, or the location where the services are delivered. The NBEDS is intended to capture instances of service provision from the point of view of the patient.

The NBEDS scope includes:

All arrangements made to deliver non-admitted patient service events (not covered by the national minimum data sets listed below) to non-admitted patients:

- irrespective of location (includes on-campus and off-campus),
- whose treatment has been funded through the state or territory health authority, Local Hospital Network or hospital, regardless of the source from which the entity derives these funds. In particular, Department of Veterans' Affairs, compensable and other patients funded through the hospital (including Medicare ineligible patients) are included; and
- · regardless of setting or mode.

Excluded from the NBEDS scope are:

All services covered by:

- · the Admitted patient care NMDS;
- the Non-admitted patient emergency department care NMDS, e.g. all non-admitted services provided to admitted patients are excluded;
- The Community mental health care NMDS; and
- service events which deliver non-clinical care, e.g. activities such as home cleaning, meals on wheels or home maintenance.

For the purpose of this NBEDS, a non-admitted service is a specialty unit or organisational arrangement under which a state or territory health authority, Local Hospital Network or public hospital provides non-admitted services.

Local Hospital Networks are defined as those entities recognised as such by the relevant state or territory health authority.

Collection and usage attributes

Statistical unit: Non-admitted patient service event

Guide for use:

A non-admitted patient service event is defined as an interaction between one or more health care provider(s) with one non-admitted patient, which must contain therapeutic/clinical content and result in a dated entry in the patient's medical record.

Counting rules:

- 1. All non-admitted services that meet the criteria of a non-admitted patient service event should be counted, and be counted only once regardless of the number of health care providers present. The multiple health care provider indicator can be used to identify service events with three or more health care providers.
- 2. Patients can be counted as having multiple non-admitted patient service events in one day, provided that every visit meets each of the criteria in the definition of a non-admitted patient service event.
- 3. Patient education services can be counted as non-admitted patient service events, provided that they meet the criteria included in the definition of a non-admitted patient service event.
- 4. Each patient attending a group session is counted as a non-admitted patient service event, providing that the session included the provision of therapeutic/clinical advice for each patient and that this was recorded using a dated entry in each patient's medical record. A data element identifying a group session is included in the NMDS to record this type of service event.
- 5. Telephone and other telehealth consultations can be counted as service events if they substitute for a face to face consultation, provided that they meet all the criteria included in the definition of a non-admitted patient service event. A telephone consultation is only counted as one non-admitted patient service event, irrespective of the number of health professionals or locations participating in the consultation. A telehealth consultation has service events counted at the location of the healthcare provider and the location of the patient.
- 6. Services provided to inpatients (including services provided by staff working in non-admitted services who visit admitted patients in wards, or other types of consultation and liaison services involving inpatients) are not counted as non-admitted patient service events.
- 7. Travel by a health professional is not counted as a non-admitted patient service event.
- 8. All non-admitted services that meet the criteria in the definition of non-admitted patient service events must be counted, irrespective of funding source (including Medicare Benefits Schedule) for the non-admitted service.
- 9. For activity based funding purposes, diagnostic services are not counted as non-admitted patient service events; these are an integral part of the requesting clinic's non-admitted patient service event.
- 10. Renal dialysis, total parenteral nutrition, home enteral nutrition and home ventilation performed by the patient in their own home without the presence of a health care provider may be counted as a non-admitted patient service event, provided there is documentation of the procedures in the patient's medical record. For activity based funding purposes, all non-admitted patient sessions performed per month are to be bundled and counted as one non-admitted patient service event per patient per calendar month regardless of the number of sessions.

Implementation start date:

01/07/2017

Implementation end date:

30/06/2018

Comments:

Interaction with the Non-admitted patient care hospital aggregate NMDS 2016-17.

The Non-admitted patient care hospital aggregate NMDS and Non-admitted patient care Local Hospital Network aggregate NBEDS work together to collect data on the public hospital system. The two data set specifications collect the same non-admitted activity data items, but at different levels of the system:

Hierarchical level	Data collected through:
Public hospital	Non-admitted patient care hospital aggregate NMDS
Local Hospital Network	Non-admitted patient care Local Hospital Network aggregate NBEDS
State or territory health authority	Non-admitted patient care Local Hospital Network aggregate NBEDS

It is intended that once the Non-admitted patient care Local Hospital Network aggregate NBEDS is established, the two collections will be merged into a single NMDS.

In the Non-admitted patient care Local Hospital Network aggregate NBEDS and the Non-admitted patient care hospital aggregate NMDS, the term 'establishment' is used to refer to entities reporting at each of the hierarchical levels (that is, public hospital, Local Hospital Network and state or territory health authority). Thus, for the purposes of this NBEDS, the term 'establishment' refers to a Local Hospital Network or a state or territory health authority unless specifically identified differently.

The principle should be applied that no activity is to be double-counted or included in both the Non-admitted patient care Local Hospital Network aggregate NBEDS and the Non-admitted patient care hospital aggregate NMDS.

Glossary items

Glossary terms that are relevant to this data set specification are included here.

Local Hospital Network

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Independent Hospital Pricing Authority 2015. Tier 2 Non-Admitted Services Reference documents:

Compendium. Independent Hospital Pricing Authority, Sydney. Viewed 24 August

2016, https://www.ihpa.gov.au/publications/tier-2-non-admitted-services-

compendium-2016-17

Independent Hospital Pricing Authority 2015. Tier 2 Non-Admitted Services Definitions Manual. Independent Hospital Pricing Authority, Sydney. Viewed 24 August 2016, https://www.ihpa.gov.au/publications/tier-2-non-admitted-services-

definitions-manual-2016-17

Relational attributes

Related metadata references:

Supersedes Non-admitted patient care Local Hospital Network aggregate NBEDS 2016-17

Health!, Superseded 05/10/2016

Has been superseded by Non-admitted patient care Local Hospital Network aggregate NBEDS 2018-19

Health!, Superseded 12/12/2018

See also Local Hospital Networks/Public hospital establishments NMDS 2017–18
Health!, Superseded 25/01/2018

See also Non-admitted patient care hospital aggregate NMDS 2017-18 Health!, Superseded 25/01/2018

See also Non-admitted patient NBEDS 2017-18
Health!, Superseded 25/01/2018

Metadata items in this Data Set Specification

Seq No.	Metadata item	Obligation	Max occurs
-	Episode of care—source of funding, patient funding source code NN	Mandatory	1
-	Establishment—Local Hospital Network identifier, code NNN	Mandatory	1
-	Establishment—number of group session non-admitted patient service events, total service events N[NNNNNN]	Mandatory	1
-	Establishment—number of individual session non-admitted patient service events, total service events N[NNNNN]	Mandatory	1
-	Establishment—organisation identifier (Australian), NNX[X]NNNNN	Mandatory	1
-	Non-admitted patient service event—multiple health-care provider indicator, yes/no/not stated/inadequately described code N	Mandatory	1
	DSS specific information:		
	For the purposes of reporting non-admitted activity data for activity based funding, 'multiple health care providers' is defined as three or more health care providers who deliver care either individually or jointly within a non-admitted patient service event.		

Non-admitted patient service event—non-admitted service type, code (Tier 2 v4.1)

NN.NN

Mandatory 1