Episode of admitted patient care—palliative care phase, code N

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Episode of admitted patient care—palliative care phase, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Palliative care phase
METEOR identifier:	681029
Registration status:	<u>Independent Hospital Pricing Authority</u> , Standard 01/01/2018 <u>Health!</u> , Standard 25/01/2018 <u>Tasmanian Health</u> , Standard 19/05/2020
Definition:	The patient's stage of illness or situation within the episode of care in terms of the recognised palliative care phase , as represented by a code.
Data Element Concept:	Episode of admitted patient care—palliative care phase
Value Domain:	Palliative care phase code N

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	Ν	
Maximum character length:	1	
	Value	Meaning
Permissible values:	1	Stable
	2	Unstable
	3	Deteriorating
	4	Terminal
Supplementary values:	9	Not stated/inadequately described

Collection and usage attributes

Guide for use:

The palliative care phase is the stage of the palliative care patient's illness.

CODE 1 Stable

Patient problems and symptoms are adequately controlled by an established plan of care and:

- further interventions to maintain symptom control and quality of life have been planned and
- family/carer situation is relatively stable and no new issues are apparent.

CODE 2 Unstable

An urgent change in the plan of emergency treatment is required because:

- the patient experiences a new problem that was not anticipated in the existing plan of care, and/or
- the patient experiences a rapid increase in the severity of a current problem; and/or
- the family/ carers circumstances change suddenly impacting on patient care.

CODE 3 Deteriorating

The care plan is addressing anticipated needs but requires periodic review because:

- the patient's overall functional status is declining and
- the patient experiences a gradual worsening of an existing problemand/or
- the patient experiences a new but anticipated problem and/or
- the family/carers experience gradual worsening distress that impacts on the patient care.

CODE 4 Terminal

Death is likely within days.

CODE 9 Not stated/inadequately described

The phase of the illness has not been reported.

Palliative care phases are not sequential and a patient may move back and forth between phases.

Source and reference attributes

Origin: Palliative Care Outcomes Collaboration 2014. Palliative care outcomes collaboration: Clinical manual. Wollongong: University of Wollongong.

Data element attributes

Collection and usage attributes

Guide for use:	The bereavement phase of palliative care must not be recorded when reporting this data element.
Collection methods:	The type of phase is to be recorded at the start of the episode of admitted patient palliative care and for every subsequent change in phase thereafter during the same admitted patient episode.
	The palliative care provider reviews the patient daily (or at each visit) and records phase changes if and when they occur during the episode.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Green J, Gordon R, Kobel C, Blanchard M and Eagar K. 2015. AN-SNAP V4 User Manual. Independent Hospital Pricing Authority, Sydney. Viewed 23 August 2017, <u>https://www.ihpa.gov.au/sites/g/files/net636/f/Documents/an-</u> <u>snap_classification_version_4_user_manual.pdf</u>

Relational attributes

Related metadata references:	Supersedes Episode of admitted patient care—palliative care phase, code N Independent Hospital Pricing Authority, Standard 03/11/2016
Implementation in Data Set Specifications:	Admitted subacute and non-acute hospital care NBEDS 2018-19 Health!, Superseded 17/10/2018 Implementation start date: 01/07/2018 Implementation end date: 30/06/2019 Conditional obligation:
	Only required to be reported for episodes of admitted patient care with <u>Hospital</u> <u>service—care type, code N[N]</u> recorded as Code 3, Palliative care.
	DSS specific information:
	For episodes of admitted patient care with <u>Hospital service—care type, code N[N]</u> recorded as Code 3, Palliative care, the palliative care phase must be reported for each <u>palliative care phase</u> if the episode of admitted patient care had more than one phase.
	Admitted subacute and non-acute hospital care NBEDS 2019-20 Health!, Superseded 18/12/2019 Implementation start date: 01/07/2019 Implementation end date: 30/06/2020 Conditional obligation:
	Only required to be reported for episodes of admitted patient care with <u>Hospital</u> <u>service—care type, code N[N]</u> recorded as Code 3, Palliative care.
	DSS specific information:
	For episodes of admitted patient care with <u>Hospital service—care type, code N[N]</u> recorded as Code 3, Palliative care, the palliative care phase must be reported for each <u>palliative care phase</u> if the episode of admitted patient care had more than one phase.
	Admitted subacute and non-acute hospital care NBEDS 2020–21 Health!, Superseded 05/02/2021 Implementation start date: 01/07/2020 Implementation end date: 30/06/2021 Conditional obligation:
	Only required to be reported for episodes of admitted patient care with <u>Hospital</u> <u>service—care type, code N[N]</u> recorded as:
	Code 3, Palliative care.
	DSS specific information:
	The palliative care phase must be reported for each palliative care phase if the episode of admitted patient care had more than one phase for episodes of admitted patient care with <u>Hospital service—care type, code N[N]</u> recorded as Code 3, Palliative care.
	Admitted subacute and non-acute hospital care NBEDS 2021–22 Health!, Superseded 20/10/2021 Implementation start date: 01/07/2021 Implementation end date: 30/06/2022 Conditional obligation:

Only required to be reported for episodes of admitted patient care with <u>Hospital</u> <u>service—care type, code N[N]</u> recorded as:

• Code 3, Palliative care.

DSS specific information:

The palliative care phase must be reported for each <u>palliative care phase</u> if the episode of admitted patient care had more than one phase for episodes of admitted patient care with <u>Hospital service—care type, code N[N]</u> recorded as Code 3, Palliative care.

Admitted subacute and non-acute hospital care NBEDS 2022-23

<u>Health!</u>, Standard 20/10/2021 Implementation start date: 01/07/2022 Implementation end date: 30/06/2023 Conditional obligation:

Only required to be reported for episodes of admitted patient care with <u>Hospital</u> <u>service—care type, code N[N]</u> recorded as:

• Code 3, Palliative care.

DSS specific information:

The palliative care phase must be reported for each <u>palliative care phase</u> if the episode of admitted patient care had more than one phase for episodes of admitted patient care with <u>Hospital service—care type, code N[N]</u> recorded as Code 3, Palliative care.

Tasmanian Subacute/Non-acute Data Set - 2020 Tasmanian Health, Standard 15/06/2020 Implementation start date: 01/07/2020 Implementation end date: 30/06/2021 Conditional obligation:

Required when the Care Type is Palliative Care