Emergency service stay—clinical care commencement time, hhmm

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Emergency service stay—clinical care commencement time, hhmm

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Emergency service clinical care commencement time
METEOR identifier:	745748
Registration status:	Health!, Standard 20/10/2021
Definition:	The time at which **emergency service** clinical care commences, expressed as hhmm.
Context:	Emergency service care.
Data Element Concept:	Emergency service stay—clinical care commencement time
Value Domain:	Time hhmm

Value domain attributes

Representational attributes

Representation class:	Time
Data type:	Date/Time
Format:	hhmm
Maximum character length:	4

Source and reference attributes

Reference documents:	Standards Australia 2019. *Date and time -- Representations for information interchange* AS ISO 8061-1:2019 and 8061-2:2019, Standards Australia, NSW

Data element attributes

Collection and usage attributes

Guide for use:	Emergency service clinical care can be commenced by a doctor, nurse, mental health practitioner or other health professional, when investigation, care and/or treatment is provided in accordance with an established clinical pathway defined by the emergency service. Placement of a patient in a cubicle and observations taken to monitor a patient pending a clinical decision regarding commencement of a clinical pathway, do not constitute commencement.

Patients with an Emergency service stay—episode end status, code N of 'Did not wait to be attended by a healthcare professional' or 'Registered, advised of another health care service, and left the emergency service without being attended by a health care professional' should not have a clinical care commencement time, because they left before investigation, care and/or treatment was commenced by a health professional in accordance with an established clinical pathway defined by the emergency service.

The following examples illustrate the commencement of emergency service clinical care.

Example 1

- A patient presents at the emergency service with mild asthma. At **triage**, the patient is categorised as category three and returns to the waiting area.

- The patient has a more severe asthma attack in the waiting area, is re-triaged to category two and shown to a cubicle where standard observations are taken.
- A nurse comes to the cubicle and commences treatment based on an acknowledged clinical pathway of the emergency service. At this point: **emergency service clinical care has commenced**.

Example 2

- A patient presents at the emergency service in an agitated, delusional state. At triage, the patient is categorised as category two and placed in a cubicle and the mental health practitioner notified.
- Observations are taken and nursing staff continue to observe the patient.
- The mental health practitioner arrives, assesses the patient and develops a management plan. At this point: **emergency service clinical care has commenced**.

Example 3

- A patient presents at the emergency service with an ankle injury from football. At triage, the patient is categorised as category four and moved to the 'fast track area'.
- The physiotherapist attends, examines the patient, makes an assessment (including diagnostic imaging requirements) and determines a treatment plan. At this point: **emergency service clinical care has commenced**.

Example 4

- A patient presents at the emergency service with a sore arm, following a fall, with limited arm movement possible.
- The patient is categorised as category three at triage and placed in a cubicle.
- A nurse provides analgesia and assesses the patient, including ordering diagnostic imaging. At this point: **emergency service clinical care has commenced**.

Example 5

- A patient presents at the emergency service feeling vague and having been generally unwell for a day or two. The patient has a slight cough. At triage, the patient is categorised as category three.
- The patient is placed in a cubicle where standard observations are taken. Respiration is 26 bpm, BP is 90/60 and the patient is hypoxic. The patient is given oxygen, and the treating clinician attends and provides instruction regarding patient care. At this point: **emergency service clinical care has commenced**.

Example 6

- A patient presents at the emergency service with chest pain. Triage category two is allocated. The patient is placed in a cubicle and a nurse gives oxygen and Anginine, takes blood samples and conducts an ECG. The ECG is reviewed. At this point: **emergency service clinical care has commenced**.
- A doctor subsequently arrives and the patient is transferred to the catheter lab after examination.

Example 7

- The emergency service is notified by ambulance that a patient is being transported having severe behavioural problems.
- The patient is taken to an appropriate cubicle and restrained.
- A clinician administers sedation and requests the attendance of a mental health practitioner. At this point: **emergency service clinical care has commenced**.

Collection methods:	Collected in conjunction with [Emergency service stay—clinical care commencement date, DDMMYYYY](#).

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Relational attributes

Related metadata references:

Is used in the formation of [Emergency service stay—waiting time, total minutes NNNNN](#)
        [Health!](#), Standard 20/10/2021

See also [Emergency service stay—clinical care commencement date, DDMMYYYY](#)
        [Health!](#), Standard 20/10/2021

Implementation in Data Set Specifications:

[Emergency service care NBEDS 2022–23](#)
        [Health!](#), Standard 20/10/2021
Implementation start date: 01/07/2022
Implementation end date: 30/06/2023
Conditional obligation:

This data item is only required to be reported if the value for [Emergency service stay—episode end status, code N](#) is recorded as:

- Code 1 - Admitted to this hospital (either short stay unit, hospital-in-the-home or non-emergency service hospital ward);
- Code 2 - Non-admitted patient emergency service episode completed - departed without being admitted or referred to another hospital;
- Code 3 - Non-admitted patient emergency service episode completed - referred to another hospital for admission;
- Code 5 - Left at own risk after being attended by a health care professional but before the non-admitted patient emergency service episode was completed;
- Code 6 - Died in emergency service.