Treatment mode - in-patients

Identifying and Definitional Attributes

Data Dictionary: NHDD

Knowledgebase ID: 000214   Version number: 1

Metadata type: DATA ELEMENT

Registration Authority: NHIMG   Admin status: SUPERSEDED

Effective date: 30-JUN-94

Definition: Treatment mode is the method or manner in which care is provided within an establishment. For admitted patients, treatment mode is categorised on the basis of the length of stay.

A patient is a person for whom the hospital accepts responsibility for treatment and/or care.

Context: Institutional health care: the resource implications vary according to length of stay, for example, same-day patients often have a lower total cost but a higher daily cost than other admitted patients. Same-day patients are likely to become an increasingly important component of hospital services.

Relational and Representational Attributes

Datatype: Numeric

Representational form: CODE

Representation layout: AN.N.N

Minimum Size: 4

Maximum Size: 6

Data Domain:

A7.1	Acute, public psychiatric and alcohol and drug hospitals - Same-day patients
A7.2	Acute hospitals - Overnight-stay patients
A7.2.1	Public psychiatric hospitals and alcohol and drug hospitals - Short-stay patients
A7.2.2	Public psychiatric hospitals and alcohol and drug hospitals - Long-stay patients

Guide For Use: A same-day patient is a patient who is admitted and discharged on the same date.

An in-patient is a patient who is admitted and stays a minimum of one night in the hospital.

Short-stay in-patients are in-patients who have a length of stay of 35 days or less.

Long-stay in-patients are in-patients who have a length of stay of over 35 days.

Related metadata: has been superseded by Treatment mode version 2

Administrative Attributes

Source Document:

Source Organisation: National minimum data set working parties

Comments: The In-patient/Non-in-patient Working Party was responsible for the initial definitions of in-patient, non-in-patient and community/outreach patient/client. This working party adopted the approach that admission was largely a medical decision and, as a result, a more specific statistical definition than given above was not possible.

There was disagreement on the definition of same-day in-patient. The In-patient/Non-in-patient Working Party recommended that same-day care be defined as care provided to all in-patients who are admitted and separated on the same day. The Morbidity Working Party, however, recommended that care should be classed as same-day where the intention was to provide care on a same-day basis. As deaths and transfers to other institutions, which result in separation on the day of admission, are unlikely to represent episodes of intended same-day care, the Morbidity Working Party recommended that these episodes be excluded from the same-day category. Each working party was informed of the other's recommendation.

As the definition of in-patient and non-in-patient categories was within the terms of reference of the In-patient/Non-in-patient Working Party, it was decided that same-day care be defined as care provided to all in-patients who are admitted and separated on the same day.

The Morbidity Working Party considered that the majority of care was short-stay in acute hospitals and there was little benefit in collecting the short and long-stay categories separately. For nursing homes, the majority of care is long-term. In psychiatric hospitals it is likely that significant amounts of both short and long-term care are provided. Hence it is reasonable that different establishment

types collect treatment mode categories in different levels of detail.

Data Element Links

Information Model Entities linked to this Data Element

NHIM   Exit / leave from service event

Data Agreements which include this Data Element

NMDS - Admitted patient care   From 01-Jul-89 to 30-Jun-94

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