Service provider organisation—partner organisation type, palliative care code N[N]  Exported from METEOR (AIHW's Metadata Online Registry)		

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# Service provider organisation—partner organisation type, palliative care code N[N]

# Identifying and definitional attributes

Metadata item type: Data Element

**Short name:** Partner organisation type

METEOR identifier: 290715

**Registration status:** <u>Health</u>, Retired 02/12/2015

**Definition:** The type of organisation with which a palliative care service provider organisation

has formal working partnership(s) in place, as represented by a code.

Data Element Concept: Service provider organisation—partner organisation type

Value Domain: Palliative care partner organisation type code N[N]

## Value domain attributes

# Representational attributes

Representation class: Code

Data type: Number

Format: N[N]

Maximum character length: 2

Maximum character length:	2	
	Value	Meaning
Permissible values:	1	Palliative care services
	2	Hospitals
	3	Community nursing agencies
	4	Residential aged care facilities
	5	Allied health services
	6	Aboriginal health services
	7	Medical practices
	8	Integrated health centres
	9	Universities/research centres
	10	Volunteer support services
	99	Other

## Data element attributes

Collection and usage attributes

#### Guide for use:

A formal working partnership involves arrangements between a service provider organisation and other service providers and organisations, aimed at providing integrated and seamless care, so that clients are able to move smoothly between services and service settings.

A formal working partnership is a verbal or written agreement between two or more parties. It specifies the roles and responsibilities of each party, including the expected outcomes of the agreement.

Key elements of a formal working partnership are that it is organised, routine, collaborative, and systematic. It excludes ad hoc arrangements. Examples of formal working partnerships include the existence of: written service agreements; formal liaison; referral and discharge planning processes; formal and routine consultation; protocols; partnership working groups; memoranda of understanding with other providers; and case conferencing.

Where partnerships exist for case conferencing purposes, record all partners involved.

CODE 1 Palliative care services

Includes services whose substantive work is with patients who have a life-limiting illness. These palliative care services may provide services in the community and/or in admitted patient settings (including hospices).

CODE 2 Hospitals

Includes emergency departments. Excludes hospices/designated palliative care units in a hospital, and other palliative care agencies as defined under Code 1. Also excludes hospital-based allied health services and individual medical practitioners.

CODE 7 Medical practices

Includes practices of general practitioners and individual specialist physicians such as specialists in palliative care, oncologists, urologists and neurologists.

CODE 8 Integrated health centres

Includes multipurpose centres, aged care centres and specialist care centres such as cancer centres.

CODE 9 Universities/research centres

Includes universities that may undertake research and development projects.

CODE 99 Other

Includes organisations based in the community such as schools, clubs, workplaces, organisations that provide respite care or pastoral care and 'Meals on wheels'.

**Collection methods:** More than one code can be recorded.

#### Source and reference attributes

Submitting organisation: Palliative Care Intergovernmental Forum

Relational attributes

**Specifications:** 

Implementation in Data Set Palliative care performance indicators DSS

Health, Retired 02/12/2015

Conditional obligation: Recorded when the data element Service provider organisation—working partnerships indicator, yes/no code N is 'yes' (code 1).