Medical indemnity claim—additional incident or allegation type, health-care code NN[N]

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# Medical indemnity claim—additional incident or allegation type, health-care code NN[N]

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| Identifying and definitional attributes | |
| Metadata item type: | Data Element |
| Short name: | Additional incident or allegation type |
| METEOR identifier: | 329728 |
| Registration status: | [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 07/12/2011 |
| Definition: | The high level category describing the type of health-care incident that was of importance in giving rise to a medical indemnity claim, as alleged or documented as part of a medical indemnity claim, in addition to the primary incident or allegation type, as represented by a code. |
| Data Element Concept: | [Medical indemnity claim—additional incident or allegation type](https://meteor.aihw.gov.au/content/440146) |
| Value Domain: | [Health-care incident or allegation type code NN[N]](https://meteor.aihw.gov.au/content/329586) |

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| Value domain attributes | | |
| Representational attributes | | |
| Representation class: | Code | |
| Data type: | Number | |
| Format: | NN[N] | |
| Maximum character length: | 3 | |
|  | **Value** | **Meaning** |
| Permissible values: | 10 | Diagnosis |
|  | 20 | Medication-related: type and dosage |
|  | 21 | Medication-related: method of administration |
|  | 22 | Medication-related: other or not further defined |
|  | 30 | Anaesthetic |
|  | 40 | Blood or blood product-related (includes blood transfusions) |
|  | 50 | Procedure—failure to perform |
|  | 51 | Procedure—wrong procedure |
|  | 52 | Procedure—wrong body site |
|  | 53 | Procedure—post-operative complications |
|  | 54 | Procedure—failure of procedure |
|  | 56 | Procedure—post-operative infection |
|  | 57 | Procedure—intra-operative complications |
|  | 59 | Procedure—other or not further defined |
|  | 60 | Treatment—delayed |
|  | 61 | Treatment—not provided |
|  | 62 | Treatment—complications |
|  | 63 | Treatment—failure of treatment |
|  | 64 | Treatment—other or not further defined |
|  | 70 | Consent (includes failure to warn) |
|  | 80 | Infection control (includes instrument sterilisation) |
|  | 90 | Device failure (includes problems with implanted devices) |
|  | 100 | Other general duty of care issues |
|  | 888 | Other |
| Supplementary values: | 999 | Not stated/inadequately described |

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| Collection and usage attributes | |
| Guide for use: | CODE 10   Diagnosis  'Diagnosis' includes missed, delayed or incorrect diagnosis.  'Medication-related' is defined to cover the use of drugs and other medicines in the delivery of health services, including immunisations; excludes 'anaesthetic' and 'blood or blood product-related'.  CODE 20   Medication-related: type and dosage  'Medication-related: type and dosage' includes issues related to type of medication or its dosage.  CODE 21  Medication-related: method of administration  'Medication-related: method of administration' includes issues related to method of administration of medication.  CODE 22  Medication-related: other or not further defined  'Medication-related: other or not further defined' includes any medication-related issues other than type, dosage or method of administration. Examples include medication not provided and a patient's reaction to a correctly prescribed and administered medication.  CODE 30  Anaesthetic  'Anaesthetic' includes all issues related to epidural, anaesthetic substances, equipment, monitoring or resuscitation and patient awareness.  ‘Procedure’ is defined as an invasive clinical intervention, where there is an incision and/or the body cavity is entered; procedures may be therapeutic or diagnostic. A vaginal delivery is also considered a procedure for the purposes of this metadata item.  CODE 51  Procedure—wrong procedure  'Procedure—wrong procedure' includes unnecessary procedures, for example, removal of a healthy appendix.  CODE 53  Procedure—post-operative complications  'Procedure—post-operative complications' includes incidents involving unintentionally retained objects following a procedure.  CODE 56  Procedure—post-operative infection  'Procedure—post-operative infection' includes wound infection due to a procedure; excludes hospital-acquired infections, for example, post-operative sepsis, needlestick injuries and claims involving failure to properly sterilise equipment.  CODE 57  Procedure—intra-operative complications  'Procedure—intra-operative complications' includes complications that arise during the course of a procedure, for example unintended perforations of adjacent organs.  CODE 59  Procedure—other or not further defined  'Procedure—other or not further defined' includes alleged negligent procedure (where no further information is available).  'Treatment' refers to health-care acts other than 'medication-related', 'anaesthetic', 'blood or blood product-related (includes blood transfusions)' or 'procedure'. Examples of treatment include applying a dressing to a wound, setting a broken bone, physiotherapy services and psychiatric counselling for mental health patients.  CODE 61  Treatment—not provided  'Treatment—not provided' includes, for example, where an ambulance is called to attend but does not arrive, where a patient's condition deteriorates after the patient elects to leave or is turned away from a medical facility, or where a patient is not provided with the diet required by the patient's condition.  CODE 62  Treatment—complications  'Treatment—complications' includes, for example, developing ulcers under a plaster or dressing or a bone fractured during physiotherapy treatment, or where the failure to clean a wound sustained from an injury results in infection.  CODE 63  Treatment—failure of treatment  'Treatment—failure of treatment' includes incorrectly setting a broken bone.  CODE 64   Treatment—other or not further defined  'Treatment—other or not further defined' includes any incident or allegation of treatment as defined here, which does not fall under the treatment subcategories listed above.  CODE 70  Consent (includes failure to warn)  'Consent (includes failure to warn)' includes no valid consent and failure to warn, cessation or continuation of treatment without consent or against patient’s stated wishes, and disposing of a fetus without the consent of the parents.  CODE 80  Infection control (includes instrument sterilisation)  'Infection control (includes instrument sterilisation)' includes hospital-acquired infections, for example, post-operative sepsis, needlestick injuries and claims involving failure to properly sterilise equipment, but excluding post-operative infection.  CODE 90  Device failure (includes problems with implanted devices)  'Device failure (includes problems with implanted devices)' includes device failure during insertion and the insertion procedure is consequently aborted. Excludes problems due to the surgical implantation procedure.  CODE 100  Other general duty of care issues  'Other general duty of care issues' includes falls, administrative errors, for example, placing a ‘nil by mouth’ sign on the bed of the wrong patient, and patient monitoring and follow-up issues.  CODE 888  Other  'Other' includes medico-legal reports, disciplinary enquiries and other legal issues, breach of confidentiality, record keeping or loss of documents, and harassment and discrimination.  CODE 999  Not stated/inadequately described  'Not stated/inadequately described' should be used when the information is not currently available. |
| Comments: | The definition of 'Procedure' used in the Medical indemnity data set specification was agreed to by the MIDWG during the data development phase of the MINC. This definition is narrower than the definition of 'Procedure' used in the National Health Data Dictionary METeOR identifier 391349. |

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| Source and reference attributes | |
| Submitting organisation: | Australian Institute of Health and Welfare |
| Steward: | [Australian Institute of Health and Welfare](https://meteor.aihw.gov.au/content/246013) |
| Reference documents: | National Centre for Classification in Health (NCCH) 2010. The Australian Classification of Health Interventions (ACHI) – Seventh Edition - Tabular list of interventions and Alphabetic index of interventions. Sydney: NCCH, Faculty of Health Sciences, The University of Sydney |

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| Data element attributes | |
| Collection and usage attributes | |
| Guide for use: | This data element should be used in conjunction with the data element: *Health-care incident—primary incident or allegation type, health-care code NN[N]* to enable the identification of all medical indemnity claims involving a certain type of incident or allegation.  Up to three codes may be selected.  The Code 999 'Not stated/inadequately described' is not a valid code for this data element as it is valid only for the data element: *Health-care incident—primary incident or allegation type, health-care code NN[N].* |
| Comments: | The coding categories for this data element have been developed with reference to a range of classifications currently in use, among which there is a high degree of commonality in terms of the categories identified. At the time of developing this data element a list of 46 categories of 'clinical incident category alleged in claim' was used in New South Wales to record this information. This list was also adopted for use in Tasmania. In Western Australia eight broad 'incident type' categories were used to collect this information on clincial incident notification forms. Two studies of the epidemiology of adverse events (one Australian and one from the United States of America) used similar, broad categories of the nature of adverse events to analyse data (Thomas et al. 2000; Wilson et al. 1995).  There is concordance between the Australian Prudential Regulation Authority (2006) National Claims and Policies Database claims data item 15 'Cause of loss' and the Medical Indemnity National Collection data item (AIHW 2011). |
| Source and reference attributes | |
| Submitting organisation: | Australian Institute of Health and Welfare |
| Steward: | [Australian Institute of Health and Welfare](https://meteor.aihw.gov.au/content/246013) |
| Reference documents: | AIHW (Australian Institute of Health and Welfare) 2011. Public and private sector medical indemnity claims in Australia 2008-09. Safety and quality of health care series no. 10. Cat. no. HSE 112. Canberra: AIHW  APRA (Australian Prudential Regulation Authority) 2006. Data Specifications National Claims and Policies Database document number 3.1. Canberra: APRA  Thomas EJ, Studdert DM, Burstin HR, Orav EJ, Zeena T, Williams EJ et al. 2000. Incidence and types of adverse events and negligent care in Utah and Colorado. Medical Care 38: 261–71  Wilson RM, Runciman WB, Gibberd RW, Harrison BT, Newby L & Hamilton JD 1995. The quality in Australian health care study. Medical Journal of Australia 163: 458–471 |
| Relational attributes | |
| Related metadata references: | See also [Medical indemnity claim—primary incident or allegation type, health-care code NN[N]](https://meteor.aihw.gov.au/content/329724)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 07/12/2011 |
| Implementation in Data Set Specifications: | [Medical indemnity DSS 2012-14](https://meteor.aihw.gov.au/content/329638)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 21/11/2013  ***Implementation start date:*** 01/07/2012 ***Implementation end date:*** 30/06/2014 ***Conditional obligation:*** Conditional on more than one health-care incident or allegation type being involved in a medical indemnity claim.  [Medical indemnity NBPDS 2014-](https://meteor.aihw.gov.au/content/531844)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 21/11/2013  ***Implementation start date:*** 01/07/2014 ***Conditional obligation:***  Conditional on more than one health-care incident or allegation type being involved in a medical indemnity claim. |