Outpatient care NMDS

Short form

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Number of group sessions	
•	
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Outpatient care NMDS

Identifying and definitional attributes

Metadata item type: Data Set Specification

METeOR identifier: 336862

Registration status: NHIG, Standard 04/07/2007

DSS type: National Minimum Data Set (NMDS)

Scope: The scope of this National Minimum Data Set (NMDS) is for services

provided to non-admitted, non-emergency department, patients registered for care by specialist outpatient clinics of public hospitals that are classified as either principal referral and specialist women's and children's hospitals and large hospitals (Peer Group A or B) as reported in the Australian Institute of Health and Welfare's Australian Hospital Statistics publication from the

preceding financial year.

Hospitals use the term 'clinic' to describe various arrangements under which they deliver specialist outpatient services to non-admitted non-emergency department patients. **Outpatient clinic services** should be interpreted as encompassing services provided through specific organisational units staffed to administer and provide a certain range of outpatient care:

- in defined locations;
- at regular or irregular times; and
- where one or more specialist providers deliver care to booked patients.

Generally, in such clinics, a booking system is administered and patient records are maintained to document patient attendances and care provided.

The scope includes all arrangements made to deliver specialist care to non-admitted, non-emergency department patients whose treatment has been funded through the hospital, regardless of the source from which the hospital derives these funds. In particular, Department of Veterans' Affairs, compensable and other patients **funded through the hospital** (including Medicare ineligible patients) are included.

For the purposes of the Outpatient care NMDS, Outreach Services are counted at the specialist clinic where the patient is booked. Outreach services involve travel by the service provider, or services provided by a service provider via ICT (including but not limited to telephone and telehealth consultations). Such services may also be provided in the home, place of work or other non–hospital site.

Within the scope as defined, and subject to specific counting rules, occasions of service to be counted include outreach clinic services, services delivered in a multidisciplinary mode. A separate count of services delivered in group sessions is also collected.

Excluded from scope are:

- Outreach services which are not funded through the hospital and/or which deliver non-clinical care (Activities such as home cleaning, meals on wheels, home maintenance); and
- All Private specialist services delivered under private practice arrangements which are not funded through the hospital, regardless of whether or how these services may be funded by third party arrangements.
- All services covered by NMDS for:
 - ♦ Admitted Patient Care,

- ♦ Admitted patient mental health care,
- ♦ Alcohol and other drug treatment services,
- ♦ Community mental health care,
- ♦ Non-admitted patient emergency department.

Admitted patient services are excluded from scope. However, outpatient services booked for reasons independent of, or distinct from the admitted patient episode are in scope.

Collection and usage attributes

Statistical unit: Occasions of service.

Group sessions.

Collection methods: National reporting arrangements:

State and territory Health authorities provide the data to the Department of Health and Ageing and Australian Institute of Health and Welfare on an annual basis by 31 December each calendar year, for the previous financial

year.

Periods for which data are collected and nationally collated:

Each financial year ending 30 June.

Implementation start date: 01/07/2007

Source and reference attributes

Submitting organisation: Non-admitted patient NMDS Development Working Party, 2006

Relational attributes

Related metadata references: Supersedes Outpatient care NMDS NHIG, Superseded 04/07/2007

Metadata items in this Data Set Specification

Seq No.	Metadata item	Obligation	Max occurs
_	Establishment identifier	Mandatory	1
_	Number of group sessions	Conditional	1
_	Number of occasions of service	Mandatory	1
_	Outpatient clinic type	Mandatory	1

Establishment identifier

Identifying and definitional attributes

Technical name: Establishment—organisation identifier (Australian), NNX[X]NNNNN

METeOR identifier: 269973

Registration status: NHIG, Standard 01/03/2005

Definition: The identifier for the establishment in which episode or event occurred. Each

separately administered health care establishment to have a unique identifier

at the national level.

Data element concept attributes

Identifying and definitional attributes

Data element concept: Establishment—organisation identifier

METeOR identifier: 269415

Registration status:NHIG, Standard 01/03/2005Definition:An identifier for the establishment.

Object class: Establishment

Property: Organisation identifier

Value domain attributes

Identifying and definitional attributes

Value domain: Identifier NNX[X]NNNNN

METeOR identifier: 270569

Registration status: NHIG, Standard 01/03/2005

Definition: A combination of numeric and alphanumeric characters that identify an entity.

Representational attributes

Representation class:IdentifierData type:String

Format: NNX[X]NNNNN

Maximum character length: 9

Data element attributes

Collection and usage attributes

Guide for use: Concatenation of:

Australian state/territory identifier (character position 1);

Sector (character position 2);

Region identifier (character positions 3-4); and

Organisation identifier (state/territory), (character positions 5–9).

Comments: Establishment identifier should be able to distinguish between all health care

establishments nationally.

Source and reference attributes

Origin: National Health Data Committee

Relational attributes

Related metadata references: Supersedes Establishment identifier, version 4, Derived DE, NHDD, NHIMG,

Superseded 01/03/2005

Is formed using Establishment—Australian state/territory identifier, code N

NHIG, Standard 01/03/2005

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Is formed using Establishment—organisation identifier (state/territory), NNNNN NHIG, Standard 01/03/2005

Is formed using Establishment—sector, code N NHIG, Standard 01/03/2005

Is formed using Establishment—region identifier, X[X] NHIG, Standard 01/03/2005

Implementation in Data Set

Specifications:

Admitted patient mental health care NMDS NHIG, Superseded 07/12/2005

Admitted patient mental health care NMDS NHIG, Superseded 23/10/2006

Admitted patient mental health care NMDS 2007–2008 NHIG, Standard 23/10/2006

Admitted patient palliative care NMDS NHIG, Superseded 07/12/2005

Admitted patient palliative care NMDS 2006–2007 NHIG, Superseded 23/10/2006

Admitted patient palliative care NMDS 2007-08 NHIG, Standard 23/10/2006

Alcohol and other drug treatment services NMDS NHIG, Superseded 21/03/2006

Alcohol and other drug treatment services NMDS NHIG, Superseded 23/10/2006

Alcohol and other drug treatment services NMDS 2007–2008 NHIG, Standard 23/10/2006

Community mental health care 2004–2005 NHIG, Superseded 08/12/2004

Community mental health care NMDS 2005–2006 NHIG, Superseded 07/12/2005

Community mental health care NMDS 2006–2007 NHIG, Superseded 23/10/2006

Community mental health care NMDS 2007–2008 NHIG, Standard 23/10/2006

Community mental health establishments NMDS 2004–2005 NHIG, Superseded 08/12/2004

Elective surgery waiting times (census data) NMDS NHIG, Standard 07/12/2005

Elective surgery waiting times (census data) NMDS NHIG, Superseded 07/12/2005

Elective surgery waiting times (removals data) NMDS NHIG, Standard 07/12/2005

Elective surgery waiting times (removals data) NMDS NHIG, Superseded 07/12/2005

Health care client identification NHIG, Superseded 04/05/2005

Health care client identification DSS NHIG, Standard 04/05/2005

Mental health establishments NMDS 2005–2006 NHIG, Superseded

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07/12/2005

Mental health establishments NMDS 2005–2006 NHIG, Superseded 21/03/2006

Mental health establishments NMDS 2006–2007 NHIG, Superseded 23/10/2006

Mental health establishments NMDS 2007–2008 NHIG, Standard 23/10/2006

Non-admitted patient emergency department care NMDS NHIG, Superseded 07/12/2005

Non-admitted patient emergency department care NMDS NHIG, Superseded 24/03/2006

Non-admitted patient emergency department care NMDS NHIG, Superseded 23/10/2006

Non-admitted patient emergency department care NMDS 2007–2008 NHIG, Standard 23/10/2006

Outpatient care NMDS NHIG, Superseded 04/07/2007

Outpatient care NMDS NHIG, Standard 04/07/2007

Perinatal NMDS NHIG, Superseded 07/12/2005

Perinatal NMDS NHIG, Superseded 06/09/2006

Perinatal NMDS 2007-2008 NHIG, Standard 06/09/2006

Public hospital establishments NMDS NHIG, Superseded 21/03/2006

Public hospital establishments NMDS NHIG, Superseded 23/10/2006

Public hospital establishments NMDS 2007–2008 NHIG, Standard 23/10/2006

Residential mental health care NMDS 2005–2006 NHIG, Superseded 07/12/2005

Residential mental health care NMDS 2006–2007 NHIG, Superseded 23/10/2006

Residential mental health care NMDS 2007–2008 NHIG, Standard 23/10/2006

Data set specification specific attributes

Implementation start date: 01/07/2007

Establishment identifier Page 5 of 15

Number of group sessions

Identifying and definitional attributes

Technical name: Establishment—number of group sessions, total N[NNNNN]

Synonymous names: Group occasions of service

METeOR identifier: 336900

Registration status: NHIG, Standard 04/07/2007

Definition: The total number of groups of patients receiving services. Each group is to be

counted once, irrespective of the size of the group of patients or the number of

staff providing services.

Data element concept attributes

Identifying and definitional attributes

Data element concept: Establishment—number of group sessions

METeOR identifier: 336919

Registration status: NHIG, Standard 04/07/2007

Definition: The number of groups of patients receiving services. Each group is to be

counted once, irrespective of the size of the group or the number of staff

providing services.

Context: The resources required to provide services to groups of patients/clients are

different from those required to provide services to an equivalent number of individuals. Hence services to groups of non-admitted patients or clients

should be counted separately from services to individuals.

Object class: Establishment

Property: Number of group sessions

Source and reference attributes

Submitting organisation: Non-admitted patient NMDS Development Working Party, 2006

Value domain attributes

Identifying and definitional attributes

Value domain: Total group sessions N[NNNNN]

METeOR identifier: 270874

Registration status:NHIG, Standard 01/03/2005Definition:Total number of group sessions.

Representational attributes

Representation class:TotalData type:NumberFormat:N[NNNN]

Maximum character length: 6

Unit of measure: Group session

Data element attributes

Collection and usage attributes

Guide for use: A group is defined as two or more patients receiving the same services at the

same time from the same hospital staff at the same clinics.

The following guides for use apply:

• a group session is counted only for two or more patients attending in the capacity of patients in their own right, even if other non-patient persons are present for the service.

• Spouses, parents or carers attending the session are counted for the group session only if they are also participating in the service as a patient.

- A group session is counted for staff attending clinics only if they are attending as a patient in their own right. Staff training and education is excluded.
- A group session may be delivered by more than one provider. A
 group session is counted for two or more patients receiving the same
 services, even if more than one provider delivers that service
 simultaneously.
- Patients attending for treatment at a dialysis or a chemotherapy clinic are receiving individual services. Patients attending education sessions at chemotherapy or dialysis clinics are counted as group sessions, if two or more people are receiving the same services at the same time.

Collection methods: Where a patient receives multidisciplinary care within one booked clinic

appointment as part of a group, one group session shall be recorded, regardless of the number of providers involved. For example, if a group session is jointly delivered by a physiotherapist and an occupational therapist,

one group session is counted for the patients attending that session.

Source and reference attributes

Submitting organisation: Non-admitted patient NMDS Development Working Party, 2006

Relational attributes

Related metadata references: Supersedes Establishment—number of group sessions, total N[NNNNN]

NHIG, Superseded 04/07/2007

Implementation in Data Set

Specifications:

Outpatient care NMDS NHIG, Standard 04/07/2007

Data set specification specific attributes

Implementation start date: 01/07/2007

Number of occasions of service

Identifying and definitional attributes

Technical name: Establishment—number of occasions of service, total N[NNNNNN]

Synonymous names: Individual occasions of service

METeOR identifier: 336947

Registration status: NHIG, Standard 04/07/2007

Definition: The total number of occasions of examination, consultation, treatment or

other service provided to a patient.

Data element concept attributes

Identifying and definitional attributes

Data element concept: Establishment—number of occasions of service

METeOR identifier: 291061

Registration status: NHIG, Standard 04/05/2005

Definition: The number of occasions of examination, consultation, treatment or other

service provided to a patient.

Context: Occasions of service are required as a measure of non-admitted patient

service provision.

Object class: Establishment

Property: Number of occasions of service

Value domain attributes

Identifying and definitional attributes

Value domain: Total occasions of service N[NNNNNN]

METeOR identifier: 270715

Registration status: NHIG, Standard 01/03/2005

Definition: Total number of occasions of service.

Representational attributes

Representation class:TotalData type:NumberFormat:N[NNNNN]

Maximum character length: 7

Unit of measure: Occasion of service

Data element attributes

Collection and usage attributes

Guide for use: The following guides for use apply:

- an occasion of service is counted for each person attending in the capacity of a patient in their own right, even if other non-patient persons are present for the service.
- spouses, parents or carers attending the session are only counted if they are also participating in the service as a patient.
- in the instance of a dependent child presenting to a clinic, the session is counted as a single Occasion of Service provided to the individual child for whom an event history is being recorded. Where parents/carers also attend in the capacity of patients themselves within a booked appointment, and receive the same services at the same time, the child and parent/carer can be counted as a group. In this instance a Group Session count would be recorded.
- An occasion of service is counted for staff attending clinics of public hospitals only if they are attending as patients in their own right.
 Staff education and training is excluded.

 Patients attending for treatment at a dialysis or a chemotherapy clinic are receiving individual services. Patients attending education sessions at chemotherapy or dialysis clinics are counted as group sessions, if two or more people receiving the same services at the same time.

Collection methods:

- Where a patient receives the occasion of service is counted at the clinic of the public hospital where the patient is booked.
- Where a patient receives multidisciplinary care, within one booked clinic appointment by themselves, one occasion of service shall be recorded, regardless of the number of providers involved.
- Where patients have received more than one booked appointment, each appointment will be counted as one occasion of service.
 (Example: three booked appointments with all services provided on a single day will be counted as three occasions of service).
- The occasion of service count should be attributed to the clinic type associated with the booked appointment.
- Services to individual patients should be counted separately from services to groups of patients. An occasion of service is counted only for a service provided to an individual. Group sessions are reported separately under 'Establishment – number of group sessions total N[NNNNN]'.

Source and reference attributes

Submitting organisation: Non-admitted patient NMDS Development Working Party, 2006

Relational attributes

Related metadata references: See also Establishment—outpatient clinic type, code N[N] NHIG, Standard

04/07/2007

Supersedes Establishment—number of occasions of service, total

N[NNNNN] NHIG, Superseded 04/07/2007

Implementation in Data Set

Specifications:

Outpatient care NMDS NHIG, Standard 04/07/2007

Data set specification specific attributes

Implementation start date: 01/07/2007

Outpatient clinic type

Identifying and definitional attributes

Technical name: Establishment—outpatient clinic type, code N[N]

METeOR identifier: 336952

Registration status: NHIG, Standard 04/07/2007

Definition: The organisational unit or organisational arrangement through which a

hospital provides healthcare services in an outpatient setting, as represented

by a code.

Data element concept attributes

Identifying and definitional attributes

Data element concept: Establishment—outpatient clinic type

METeOR identifier: 336955

Registration status: NHIG, Standard 04/07/2007

Definition: The organisational unit or organisational arrangement through which a

hospital provides healthcare services in an outpatient setting.

Context: Outpatient service activity.

Object class: Establishment

Property: Outpatient clinic type

Value domain attributes

Identifying and definitional attributes

Value domain: Outpatient clinic type code N[N]

METeOR identifier: 336973

Registration status: NHIG, Standard 04/07/2007

Definition: The code set representing the organisational unit or organisational

arrangement through which a hospital provides healthcare services in an

outpatient setting.

Representational attributes

Representation class:CodeData type:NumberFormat:N[N]Maximum character length:2

Permissible values:	Value	Meaning
	1	Allied Health
	2	Dental

3 Gynaecology
4 Obstetrics
5 Cardiology
6 Endocrinology
7 Oncology
8 Respiratory
9 Gastroenterology

10 Medical

11 General practice/primary care

12 Paediatric medical

EndoscopyPlastic surgery

15 Urology

16 Orthopaedic surgery

Outpatient clinic type Page 10 of 15

1 /	Ophthamlology
18	Ear, nose and throat
19	Pre-admission and pre-anaesthesia
20	Chemotherapy
21	Dialysis
22	Surgery
23	Paediatric surgery
24	Renal medical

Onbthalmalagy

Collection and usage attributes

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Guide for use:

The rules for allocating (mapping) clinic services to the clinic codes structure is the responsibility of each State and Territory and these rules need to be applied consistently within each State and Territory.

In most cases, reference to the code guide of permissible values will be adequate to map a hospital's clinics to the data domain. If not, general principles for mapping existing clinics to the data domain should take account of (a) the nature of the specialty, (b) patient characteristics, e.g. age, and (c) the field of practice of the service provider.

Where the patient characteristics have determined that a paediatric clinic type is appropriate, then further differentiation between surgical and medical is determined by (a) the nature of the specialty, and (b) the field of practice of the service provider. That is, paediatric medical would include any investigations, treatment(s) or services provided to a child which do not pertain to the surgical care of diseases or injuries.

In paediatric hospitals, the full range of clinic types should be used.

A guide for the permissible values of codes for the outpatient clinic types is as follows:

CODE 1 Allied Health

- Audiology.
- Clinical Pharmacology.
- Neuropsychology.
- Dietetics.
- Occupational therapy.
- Optometry.
- Orthoptics.
- Orthotics.
- Physiotherapy.
- Podiatry.
- Prosthetics.
- Psychology.
- Social work.
- Speech pathology.

Includes clinics specified in mapping list above run solely by these Allied Health (AH) professionals. Example: A speech Pathologist conducting a clinic with booked patients for speech pathology services.

Excludes services provided by AH professionals in clinics classified in codes 2–23. Example: a physiotherapist running a cardiac rehabilitation clinic is classified to the Cardiology Clinic (see code 5).

CODE 2 Dental

• Dental.

Outpatient clinic type

CODE 3 Gynaecology

- Gynaecology.
- Gynaecological oncology (excluding chemotherapy).
- Menopause.
- Assisted reproduction, infertility.
- Family planning.

CODE 4 Obstetrics

- Obstetrics.
- Childbirth education.
- Antenatal.
- Postnatal.

Excludes gestational diabetes (see code 6).

CODE 5 Cardiology

- Cardiac rehabilitation.
- ECG.
- Doppler.
- Cardiac stress test.
- Hypertension.
- Pacemaker.

Excludes cardiac catheterisation (see code 22).

CODE 6 Endocrinology

- Endocrine.
- Gestational diabetes.
- Thyroid.
- Metabolic.
- Diabetes.
- Diabetes education.

CODE 7 Oncology

- Oncology.
- Lymphoedema.
- Radiation oncology.

Excludes chemotherapy (see code 20).

Excludes gynaecological oncology (see code 3).

CODE 8 Respiratory

- Asthma.
- Asthma education.
- Respiratory; excludes tuberculosis (see code 10).
- Cystic Fibrosis.
- Sleep.
- Pulmonary.

CODE 9 Gastroenterology

• Gastroenterology.

Excludes endoscopy (see code 13).

CODE 10 Medical

- Aged care, geriatric, gerontology.
- Allergy.
- Anti-coagulant.
- Clinical Measurement; include with relevant specialty clinic type where clinical measurement services are specific to a specialty (see codes 1–23) e.g. urodynamic analysis is counted with Urology (see code 15).
- Dementia.
- Dermatology.
- Development disability.
- Epilepsy.
- Falls.
- General medicine.
- Genetic.
- Haematology, haemophilia.
- Hepatobiliary.
- Hyperbaric medicine.
- Immunology, HIV.
- Infectious diseases; Communicable diseases; Hep B, C; includes tuberculosis.
- Men's Health.
- Metabolic bone.
- Excludes Nephrology (see code 24); excludes renal (see code 24); excludes dialysis (see code 21).
- Neurology, neurophysiology.
- Occupational medicine.
- Other.
- Pain management
- Palliative.
- Refugee clinic.
- Rehabilitation; excludes cardiac rehabilitation (see code 5).
- Rheumatology.
- Sexual Health.
- Spinal.
- Stoma therapy.
- Transplants (excludes kidney transplants see code 24).
- Wound, Dressing clinic.

CODE 11 General practice/primary care

• General Practice, Primary Care.

Excludes Medicare billable patients; defined specialty general practice clinics only.

CODE 12 Paediatric Medical

- Adolescent health.
- Neonatology.
- Paediatric medicine.

In paediatric hospitals the full range of service types should be used. That is, paediatric medical should be reported as medical and paediatric surgery should be reported as surgery.

CODE 13 Endoscopy

Includes all occasions of service for endoscopy including cystoscopy, gastroscopy, oesophagoscopy, duodenoscopy, colonoscopy, bronchoscopy, laryngoscopy, sigmoidoscopy.

Care must be taken to ensure procedures for admitted patients are excluded from this category.

CODE 14 Plastic surgery

- Craniofacial.
- Melanoma.
- Plastic surgery.

CODE 15 Urology

• Urology.

Includes urodynamic measurement and IVPs.

CODE 16 Orthopaedic surgery

- Fracture.
- Hand.
- Orthopaedics Surgery.
- Other.
- Scoliosis.
- Neck of femur.

CODE 17 Ophthalmology

- Ophthalmology.
- Cataract extraction.
- Lens insertion.

CODE 18 Ear, nose and throat

- Ear, nose and throat.
- Otitis media.
- Oral.

CODE 19 Pre-admission and pre-anaesthesia

- Pre-admission.
- Pre-anaesthesia.

CODE 20 Chemotherapy

Includes all forms of chemotherapy.

CODE 21 Dialysis

Dialysis and includes renal dialysis education. See code 24 for Renal medicine

CODE 22 Surgery

- Cardiac.
- Vascular.
- Cardiac catheterisation.
- Colorectal.
- Upper GI surgery.
- General surgery.
- Neurosurgery.
- Other surgery.
- Thoracic surgery.

CODE 23 Paediatric surgery

In paediatric hospitals the full range of service types should be used. That is, paediatric medical should be reported as medical and paediatric surgery should be reported as surgery.

CODE 24 Renal Medical

- Renal Medicine.
- Nephrology.
- Includes pre and post transplant treatment, support and education.
- Excludes dialysis and renal dialysis education. See code 21

Source and reference attributes

Origin: National Centre for Classification in Health consultant's report to Outpatients National Minimum Data Set Development Working Group, September 2004.

Data element attributes

Collection and usage attributes

Guide for use: Does not include services provided through community health settings (such

as community and child health centres).

Source and reference attributes

Submitting organisation: Non-admitted patient NMDS Development Working Group, 2006

Relational attributes

Related metadata references: See also Establishment—number of occasions of service, total N[NNNNNN]

NHIG, Standard 04/07/2007

Supersedes Establishment—outpatient clinic type, code N[N] NHIG,

Superseded 04/07/2007

Implementation in Data Set

Specifications:

Outpatient care NMDS NHIG, Standard 04/07/2007

Data set specification specific attributes

Implementation start date: 01/07/2007