Episode of admitted patient care—type of maintenance care provided, code N

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Episode of admitted patient care—type of maintenance care provided, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Type of maintenance care
METEOR identifier:	462104
Registration status:	Independent Hospital Pricing Authority, Superseded 11/10/2012
Definition:	The nature of the maintenance care provided to an admitted patient during an episode of care, as represented by a code.
Data Element Concept:	Episode of admitted patient care—type of maintenance care provided
Value Domain:	Type of maintenance care provided code N

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N	
Maximum character length:	1	
	Value	**Meaning**
Permissible values:	1	Convalescent
	2	Respite
	3	Nursing home type
	5	Other
	8	Unknown
Supplementary values:	9	Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 1 Convalescent

Following assessment and/or treatment the patient does not require further complex assessment or stabilisation but continues to require care over an indefinite period. Under normal circumstances the patient would be discharged but due to factors in the home environment such as access issues or lack of available community services the patient is unable to be discharged. Examples may include:

- Patients awaiting the completion of home modifications essential for discharge
- Patients awaiting the provision of specialised equipment essential for discharge
- Patients waiting for rehousing
- Patients waiting for supported accommodation such as hostel or group home bed
- Patients for whom community services are essential for discharge but are not yet available

CODE 2 Respite

An episode where the primary reason for admission is the short-term unavailability of the patient's usual care. Examples may include:

- Admission due to carer illness or fatigue
- Planned respite due carer unavailability
- Short term closure of care facility
- Short term unavailability of community services

CODE 3 Nursing home type

The patient does not have a current acute care certificate and is awaiting placement in a residential aged care facility.

CODE 5 Other

Any other reason the patient may require a maintenance episode other than those already stated.

CODE 8 Unknown

It is not known what type of maintenance care the patient is receiving.

CODE 9 Not stated/inadequately described

The type of maintenance care has not been reported.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Origin: Eagar K. et al (1997) The Australian National Sub-acute and Non-acute Patient Classification (AN-SNAP): Report of the National Sub-acute and Non-acute Casemix Classification Study. Centre for Health Service Development, University of Wollongong.

Data element attributes

Collection and usage attributes

Guide for use:

This data element is required to be recorded for all maintenance care type episodes when reporting to the Admitted subacute and non-acute ABF DSS.

The type of maintenance care should be recorded at the start of the episode of care.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Reference documents: Eagar K. et al (1997) The Australian National Sub-acute and Non-acute Patient Classification (AN-SNAP): Report of the National Sub-acute and Non-acute Casemix Classification Study. Centre for Health Service Development, University of Wollongong.

Relational attributes

Related metadata references: Has been superseded by Episode of admitted patient care—type of maintenance care provided, code N[N]
Health, Standard 11/04/2014
Independent Hospital Pricing Authority, Standard 11/10/2012

Implementation in Data Set Specifications: Admitted sub-acute and non-acute care activity based funding DSS 2012-2013
Independent Hospital Pricing Authority, Superseded 11/10/2012
Implementation start date: 01/07/2012
Implementation end date: 30/06/2013
Conditional obligation: Only required to be reported for episodes of care for patients with a care type of maintenance care.