Non-admitted patient service event—care type, subacute (derived) code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Care type, derived subacute
Synonymous names:	Care type
METEOR identifier:	512105
Registration status:	• Health, Superseded 07/03/2014
Definition:	A descriptor of the overall nature of subacute care delivered during a non-admitted patient service event, derived from other service characteristics, as represented by a code.
Data Element Concept:	Non-admitted patient service event—care type

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N
Maximum character length:	1

Permissible values:

Value	Meaning
1	Rehabilitation care
2	Palliative care
3	Geriatric evaluation and management (GEM)
4	Psychogeriatric care
8	Other care

Collection and usage attributes

Guide for use:	CODE 1 Rehabilitation care
	Rehabilitation care is care in which the primary clinical purpose or treatment goal is improvement in the functioning of a patient with an impairment, activity limitation or

participation restriction due to a health condition. The patient will be capable of actively participating.

Rehabilitation care is always:

- delivered under the management of or informed by a clinician with specialised expertise in rehabilitation, and
- evidenced by an individualised multidisciplinary management plan, which is documented in the patient's medical record, that includes negotiated goals within specified time frames and formal assessment of functional ability.

CODE 2   Palliative care

Palliative care is care in which the primary clinical purpose or treatment goal is optimisation of the quality of life of a patient with an active and advanced life-limiting illness. The patient will have complex physical, psychosocial and/or spiritual needs.

Palliative care is always:

- delivered under the management of or informed by a clinician with specialised expertise in palliative care, and
- evidenced by an individualised multidisciplinary assessment and management plan, which is documented in the patient's medical record, that covers the physical, psychological, emotional, social and spiritual needs of the patient and negotiated goals.

CODE 3   Geriatric evaluation and management (GEM)

Geriatric evaluation and management is care in which the primary clinical purpose or treatment goal is improvement in the functioning of a patient with multi-dimensional needs associated with medical conditions related to ageing, such as tendency to fall, incontinence, reduced mobility and cognitive impairment. The patient may also have complex psychosocial problems.

Geriatric evaluation and management is always:

- delivered under the management of or informed by a clinician with specialised expertise in geriatric evaluation and management, and
- evidenced by an individualised multidisciplinary management plan, which is documented in the patient's medical record that covers the physical, psychological, emotional and social needs of the patient and includes negotiated goals within indicative time frames and formal assessment of functional ability.

CODE 4   Psychogeriatric care

Psychogeriatric care is care in which the primary clinical purpose or treatment goal is improvement in the functional status, behaviour and/or quality of life for an older patient with significant psychiatric or behavioural disturbance, caused by mental illness, an age-related organic brain impairment or a physical condition.

Psychogeriatric care is always:

- delivered under the management of or informed by a clinician with specialised expertise in psychogeriatric care, and
- evidenced by an individualised multidisciplinary management plan, which is documented in the patient's medical record, that covers the physical, psychological, emotional and social needs of the patient and includes negotiated goals within indicative time frames and formal assessment of functional ability.

Psychogeriatric care is not applicable if the primary focus of care is acute symptom control.

CODE 8   Other care

Any care provided that does not fall within the categories above. e.g. maintenance care, and acute care.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Data element attributes

Collection and usage attributes

Guide for use: Subacute care is specialised multidisciplinary care in which the primary need for care is optimisation of the patient's functioning and quality of life. A person's functioning may relate to their whole body or a body part, the whole person, or the whole person in a social context, and to impairment of a body function or structure, activity limitation and/or participation restriction.

Subacute care comprises the defined care types of rehabilitation, palliative care, geriatric evaluation and management (GEM) and psychogeriatric care.

A multidisciplinary management plan comprises a series of documented and agreed initiatives or treatments (specifying program goals, actions and timeframes) which has been established through multidisciplinary consultation and consultation with the patient and/or carers.

Palliative care episodes can include grief and bereavement support for the family and carers of the patient where it is documented in the patient's medical record.

Collection methods: Classification depends on an assessment of the overall nature of care provided, based on other service event characteristics collected at the jurisdiction level such as clinic type, provider type and/or referral details. The method used to derive the care type should be submitted with the dataset.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Relational attributes

Related metadata references: Supersedes [Non-admitted patient service event—care type, subacute (derived) code N](#)

- [Health](#), Superseded 02/05/2013
- [Independent Hospital Pricing Authority](#), Standard 01/11/2012

Has been superseded by [Non-admitted patient service event—care type, (derived) code N](#)

- [Health](#), Superseded 13/11/2014

See also [Appointment—care type, code AAA](#)

- [WA Health](#), Standard 19/03/2015

See also [Appointment—care type, code AAA](#)

- [WA Health](#), Standard 24/04/2015

Implementation in Data Set Specifications:

[Non-admitted patient DSS 2013-14 Health](#), Superseded 07/03/2014

Implementation start date: 01/07/2013

Implementation end date: 30/06/2014