

Non-admitted patient service event—multiple health-care provider indicator, yes/no/not stated/inadequately described code N

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Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Multiple health care provider indicator
Synonymous names:	Multiple health care provider flag
METEOR identifier:	652542
Registration status:	Health , Superseded 25/01/2018
Definition:	An indicator of whether a non-admitted patient service event was delivered by multiple health-care providers, as represented by a code.
Data Element Concept:	Non-admitted patient service event—multiple health-care provider indicator
Value Domain:	Yes/no/not stated/inadequately described code N

Value domain attributes

Representational attributes

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

	Value	Meaning
Permissible values:	1	Yes
	2	No
Supplementary values:	97	Not applicable
	98	Unknown/unable to be determined
	99	Not stated/inadequately described

Collection and usage attributes

Guide for use:	CODE 97	Not applicable
	CODE 98	Unknown/unable to be determined
	CODE 99	Not stated/inadequately described
	This code is not for use in primary data collections.	

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:

CODE 1 Yes

This code is used to indicate that direct care has been provided by multiple health-care providers.

CODE 2 No

This code is used to indicate that direct care has not been provided by multiple health-care providers.

CODE 9 Not stated/inadequately described

This code is used when there is insufficient information to determine whether direct care has been provided by multiple health-care providers.

The Non-admitted patient (NAP) data set is intended to capture instances of healthcare provision from the point of view of the patient. This may be for assessment, examination, consultation, treatment and/or education.

One service event is recorded for each interaction, regardless of the number of healthcare providers present.

Events broken in time:

The period of interaction can be broken but still regarded as one service event if it was intended to be unbroken in time. This covers those circumstances in which treatment during a service event is temporarily interrupted for unexpected reasons, for example, a healthcare provider is called to assess another patient who requires more urgent care. Where a healthcare provider is unable to complete the interaction, it is considered to be a service event only if the definition of service event (above) is met.

Setting:

Service events can occur in an outpatient clinic or other setting.

Mode:

Service events delivered via Information and Communication Technology (ICT) (including but not limited to telephone and where the patient is participating via a video link) are included if:

- they are a substitute for a face-to-face service event, and
- the definition of a service event (above) is met.

Accompanied patients:

If a patient is accompanied by a carer/relative, or the carer/relative acts on behalf of the patient with or without the patient present (e.g. the mother of a two-year-old patient, or the carer for an incapacitated patient), only the patient's service event is recorded unless the carer/relative interaction meets the definition of a service event (above).

Note: carer refers to an informal carer only.

Service events delivered in groups:

Care provided to two or more patients by the same service provider(s) at the same time can also be referred to as a group session.

One service event is recorded for each patient who attends a group session regardless of the number of healthcare providers present, where the definition of a service event (above) is met.

Service requests:

A service event is the result of a service request (including formal referral and self-referral or attendance at a walk-in clinic).

Activities which do not meet the definition of a service event include:

- Work-related services provided in clinics for staff.
- Non-attendances for a booked outpatient or booked outpatient services that did not go ahead.

Collection methods:

The definition of the term 'multiple health care provider' can vary depending on the context and/or collection in which the term is being applied. This information should be specified via the 'DSS-specific attributes' field in, relation to this data element at the National Best Endeavours Data Set (NBEDS) or National Minimum Data Set (NMDS) level.

For example, in the context of reporting non-admitted activity data for activity based funding, 'multiple health care provider' means three or more health care providers who deliver care either individually or jointly within a non-admitted patient service event. The health care providers may be of the same profession (medical, nursing or allied health). However, they must each have a different speciality so that the care provided by each provider is unique and meets the definition of a non-admitted patient service event.

In practice, this should be interpreted as meaning that the patient can separately identify the unique care provided by each healthcare provider. For example:

- A patient attends a pain management clinic for assessment. At the assessment there is a doctor specialising in chronic diseases, a doctor specialising in pain management, a nurse specialising in pain management and an occupational therapist. As each provider will provide unique clinical content to the assessment, this is counted as multiple health care providers.
- A patient attends a rehabilitation clinic and sees a physiotherapist, an occupational therapist and then a nurse, all individually. This would be counted as multiple health care providers.
- A patient attends a hydrotherapy clinic, sees a physiotherapist who provides a plan, and then completes the plan with a physiotherapist aid. This would not be counted as multiple health care providers.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Relational attributes

Related metadata references:

Supersedes [Non-admitted patient service event—multiple health care provider indicator, yes/no/not stated/inadequately described code N](#)
Health, Superseded 05/10/2016

Has been superseded by [Non-admitted patient service event—multiple health-care provider indicator, yes/no/not stated/inadequately described code N](#)
Health, Superseded 05/02/2021

See also [Appointment—multiple health care provider indicator, \(derived\) yes/no/not stated/inadequately described code N](#)
WA Health, Standard 01/06/2017

Implementation in Data Set Specifications: [Non-admitted patient care hospital aggregate NMDS 2017-18](#)

[Health](#), Superseded 25/01/2018

Implementation start date: 01/07/2017

Implementation end date: 30/06/2018

DSS specific information:

For the purposes of reporting non-admitted activity data for activity based funding, 'multiple health care providers' is defined as three or more health care providers who deliver care either individually or jointly within a non-admitted patient service event.

[Non-admitted patient care Local Hospital Network aggregate NBEDS 2017-18](#)

[Health](#), Superseded 25/01/2018

Implementation start date: 01/07/2017

Implementation end date: 30/06/2018

DSS specific information:

For the purposes of reporting non-admitted activity data for activity based funding, 'multiple health care providers' is defined as three or more health care providers who deliver care either individually or jointly within a non-admitted patient service event.

[Non-admitted patient NBEDS 2017-18](#)

[Health](#), Superseded 25/01/2018

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