

Non-admitted patient emergency department service episode—episode end status, code N

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Non-admitted patient emergency department service episode—episode end status, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Episode end status
Synonymous names:	Departure status
METEOR identifier:	685013
Registration status:	Health , Superseded 19/11/2019
Definition:	The status of the patient at the end of the non-admitted patient emergency department service episode, as represented by a code.
Context:	Emergency department care.

Data element concept attributes

Identifying and definitional attributes

Data element concept:	Non-admitted patient emergency department service episode—episode end status
METEOR identifier:	474149
Registration status:	Health , Superseded 20/10/2021 Independent Hospital Pricing Authority , Standard 31/10/2012 National Health Performance Authority (retired) , Retired 01/07/2016 Tasmanian Health , Standard 08/12/2016
Definition:	The status of the patient at the end of the non-admitted patient emergency department service episode.
Context:	Emergency department care.
Object class:	Non-admitted patient emergency department service episode
Property:	Episode end status

Value domain attributes

Identifying and definitional attributes

Value domain:	Emergency department non-admitted patient service episode end status code N
METEOR identifier:	684951
Registration status:	Health , Superseded 19/11/2019
Definition:	A code set representing the status of a patient at the end of a non-admitted patient emergency department service episode.

Representational attributes

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

Permissible values:	1	Admitted to this hospital (either short stay unit, hospital-in-the-home or non-emergency department hospital ward)
	2	Non-admitted patient emergency department service episode completed - departed without being admitted or referred to another hospital
	3	Non-admitted patient emergency department service episode completed - referred to another hospital for admission
	4	Did not wait to be attended by a health care professional
	5	Left at own risk after being attended by a health care professional but before the non-admitted patient emergency department service episode was completed
	6	Died in emergency department
	7	Dead on arrival
	8	Registered, advised of another health care service, and left the emergency department without being attended by a health care professional

Collection and usage attributes

Guide for use:

CODE 1 Admitted to this hospital (either short stay unit, hospital-in-the-home or non-emergency department hospital ward)

This code excludes patients who died in the emergency department. Such instances should be coded to Code 6.

CODE 2 Non-admitted patient emergency department service episode completed - departed without being admitted or referred to another hospital

This code includes patients who departed under their own care, under police custody, under the care of a residential aged care facility or other carer.

This code excludes those who died in the emergency department as a non-admitted patient. Such instances should be coded to Code 6.

CODE 4 Did not wait to be attended by a health care professional

This code excludes patients who are advised of other health care services that could attend to their condition, and who leave the emergency department with the intention of attending another health care service. These patients should be coded to Code 8.

CODE 6 Died in emergency department

This code should only be used for patients who die while physically located within the emergency department.

CODE 7 Dead on arrival

This code should only be used for patients who are dead on arrival and an emergency department clinician certifies the death of the patient. This includes where the clinician certifies the death outside the emergency department (e.g. in an ambulance outside the emergency department).

Exclusion: When resuscitation or any other clinical care for the patient is attempted, Code 7 should not be used.

Note: Where Code 7 is recorded for a patient, a [Type of visit to emergency department](#) Code 5 (Dead on arrival) should also be recorded.

CODE 8 Registered, advised of another health care service, and left the emergency department without being attended to by a health care professional

Patients should be coded to Code 8 if they meet all of the criteria (that is, they undergo a clerical registration process, are provided with advice about another health care service that could provide assessment and/or treatment of their condition, and leave the emergency department without receiving clinical care). However, patients should only be coded to Code 8 if, at the time of their departure, they provided a reasonable indication that they did intend to seek assistance from another health care service including the service to which they were referred.

They may leave the emergency department immediately after being advised of the other health care service, or may leave after a period of time.

If it is unclear whether the person intended to seek further treatment from another health care service, they should be coded to Code 4.

The health care service to which the patient is referred may include primary care/general practitioner (GP) clinics, other clinics that provide specialised treatment (e.g. for mental health care or drug and alcohol care), or other health services (such as the patient's usual general practitioner). The service may be co-located with the hospital in which the emergency department is located, or may be a separate facility.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Australian Institute of Health and Welfare

Data element attributes

Collection and usage attributes

Guide for use:	When recording the episode end status of a patient, Codes 6 and 7 should first be considered for use. If Codes 6 and 7 are inappropriate, select the most suitable code for the patient from Codes 1-5 and Code 8.
Collection methods:	Some data systems may refer to this data element as 'Departure status'.
Comments:	Code 8 has been included as a permissible value to capture situations where a person may have been diverted from the emergency department to another health care service. Inclusion of this code ensures consistency of reporting, and ensures that these patients are distinguished from patients who did not wait to be attended by a health care professional and for whom it is unknown if they sought any other treatment for their condition.

Source and reference attributes

Submitting organisation:	Independent Hospital Pricing Authority Australian Institute of Health and Welfare
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Relational attributes

Related metadata references:	<p>Supersedes Non-admitted patient emergency department service episode—episode end status, code N Health, Superseded 25/01/2018</p> <p>Has been superseded by Non-admitted patient emergency department service episode—episode end status, code N Health, Superseded 20/10/2021</p> <p>See also Emergency service stay—episode end status, code N Health, Superseded 25/01/2018</p>
Implementation in Data Set Specifications:	<p>Allied health non-admitted patient emergency department NBPDS Health, Standard 12/12/2018</p> <p>Non-admitted patient emergency department care NBEDS 2018-19 Health, Superseded 12/12/2018 Implementation start date: 01/07/2018 Implementation end date: 30/06/2019</p> <p>Non-admitted patient emergency department care NBEDS 2019-20 Health, Retired 19/11/2019 Implementation start date: 01/07/2019 Implementation end date: 30/06/2020</p> <p>Non-admitted patient emergency department care NMDS 2018-19 Health, Superseded 12/12/2018 Implementation start date: 01/07/2018 Implementation end date: 30/06/2019</p> <p>Non-admitted patient emergency department care NMDS 2019-20 Health, Superseded 18/12/2019 Implementation start date: 01/07/2019 Implementation end date: 30/06/2020</p>
Implementation in Indicators:	<p>Used as Numerator Australian Health Performance Framework: PI 2.5.5—Waiting times for emergency department care: proportion seen on time, 2019 Health, Superseded 13/10/2021</p> <p>Australian Health Performance Framework: PI 2.5.5—Waiting times for emergency department care: proportion seen on time, 2019 Health, Superseded 13/10/2021</p> <p>Australian Health Performance Framework: PI 2.5.5—Waiting times for emergency department care: proportion seen on time, 2020 Health, Standard 13/10/2021</p>

[Australian Health Performance Framework: PI 2.5.5–Waiting times for emergency department care: proportion seen on time, 2020](#)

[Health](#), Standard 13/10/2021

[Australian Health Performance Framework: PI 2.5.6–Waiting times for emergency department care: waiting times to commencement of clinical care, 2019](#)

[Health](#), Superseded 13/10/2021

[Australian Health Performance Framework: PI 2.5.6–Waiting times for emergency department care: waiting times to commencement of clinical care, 2019](#)

[Health](#), Superseded 13/10/2021

[Australian Health Performance Framework: PI 2.5.6–Waiting times for emergency department care: waiting times to commencement of clinical care, 2020](#)

[Health](#), Standard 13/10/2021

[Australian Health Performance Framework: PI 2.5.6–Waiting times for emergency department care: waiting times to commencement of clinical care, 2020](#)

[Health](#), Standard 13/10/2021

[National Healthcare Agreement: PI 19–Selected potentially avoidable GP-type presentations to emergency departments, 2020](#)

[Health](#), Standard 13/03/2020

[National Healthcare Agreement: PI 19–Selected potentially avoidable GP-type presentations to emergency departments, 2020](#)

[Health](#), Standard 13/03/2020

[National Healthcare Agreement: PI 19–Selected potentially avoidable GP-type presentations to emergency departments, 2021](#)

[Health](#), Standard 16/09/2020

[National Healthcare Agreement: PI 19–Selected potentially avoidable GP-type presentations to emergency departments, 2021](#)

[Health](#), Standard 16/09/2020

[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: proportion seen on time, 2020](#)

[Health](#), Standard 13/03/2020

[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: proportion seen on time, 2020](#)

[Health](#), Standard 13/03/2020

[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: proportion seen on time, 2021](#)

[Health](#), Standard 16/09/2020

[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: proportion seen on time, 2021](#)

[Health](#), Standard 16/09/2020

Used as Disaggregation

[Australian Health Performance Framework: PI 2.5.7–Waiting times for emergency department care: percentage of patients whose length of emergency department stay is 4 hours or less, 2019](#)

[Health](#), Superseded 13/10/2021

[Australian Health Performance Framework: PI 2.5.7–Waiting times for emergency department care: percentage of patients whose length of emergency department stay is 4 hours or less, 2019](#)

[Health](#), Superseded 13/10/2021

[Australian Health Performance Framework: PI 2.5.7–Waiting times for emergency department care: percentage of patients whose length of emergency department stay is 4 hours or less, 2020](#)

[Health](#), Standard 13/10/2021

[Australian Health Performance Framework: PI 2.5.7–Waiting times for emergency department care: percentage of patients whose length of emergency department stay is 4 hours or less, 2020](#)

[Health](#), Standard 13/10/2021

[Australian Health Performance Framework: PI 2.5.8–Waiting times for emergency department care: time spent in the emergency department, 2019](#)

[Health](#), Superseded 13/10/2021

[Australian Health Performance Framework: PI 2.5.8–Waiting times for emergency department care: time spent in the emergency department, 2019](#)

[Health](#), Superseded 13/10/2021

[Australian Health Performance Framework: PI 2.5.8–Waiting times for emergency department care: time spent in the emergency department, 2020](#)

[Health](#), Standard 13/10/2021

[Australian Health Performance Framework: PI 2.5.8–Waiting times for emergency department care: time spent in the emergency department, 2020](#)

[Health](#), Standard 13/10/2021

Used as Denominator

[Australian Health Performance Framework: PI 2.5.5–Waiting times for emergency department care: proportion seen on time, 2019](#)

[Health](#), Superseded 13/10/2021

[Australian Health Performance Framework: PI 2.5.5–Waiting times for emergency department care: proportion seen on time, 2019](#)

[Health](#), Superseded 13/10/2021

[Australian Health Performance Framework: PI 2.5.5–Waiting times for emergency department care: proportion seen on time, 2020](#)

[Health](#), Standard 13/10/2021

[Australian Health Performance Framework: PI 2.5.5–Waiting times for emergency department care: proportion seen on time, 2020](#)

[Health](#), Standard 13/10/2021

[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: proportion seen on time, 2020](#)

[Health](#), Standard 13/03/2020

[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: proportion seen on time, 2020](#)

[Health](#), Standard 13/03/2020

[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: proportion seen on time, 2021](#)

[Health](#), Standard 16/09/2020

[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: proportion seen on time, 2021](#)

[Health](#), Standard 16/09/2020