Tasmanian hospital care type code X[XXXX]

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Tasmanian hospital care type code X[XXXX]

Identifying and definitional attributes

Metadata item type:	Value Domain
METEOR identifier:	714947
Registration status:	Tasmanian Health, Standard 12/04/2019
Definition:	A code set representing the overall nature of a service provided by a Tasmanian hospital.

Representational attributes

Representation class:	Code
Data type:	Number
Format:	X[XXXX]
Maximum character length:	5

	Value	Meaning
Permissible values:	1	Nursing home type
	4	Acute incl qual newborn
	8	Palliative care
	9	Geriatric evaluation and management
	BOR	Boarder
	NEO	Neonate (unqualified)
	ORG	Organ procurement (posthumous)
	OTH	Other
	PSY	Psychogeriatric
	REHAB	Rehabilitation
	RES	Respite
	SOC	Social
	MHC	Mental health care
	OM	Other maintenance
Supplementary values:	NSP	Not specified

Collection and usage attributes

Guide for use:

Persons with mental illness may receive any one of the care types (except newborn and organ procurement). Classification depends on the principal clinical intent of the care received.

Admitted care can be one of the following:

CODE 1 Nursing home type

Patients whose care needs could have been adequately met by placement in a nursing home facility, but for whom a bed in such a facility is not available.

CODE 4 Acute incl qual newborn

Acute care is care in which the clinical intent or treatment goal is to:

- manage labour (obstetric)

- cure illness or provide definitive treatment of injury
- perform surgery
- relieve symptoms of illness or injury (excluding palliative care)
- reduce severity of an illness or injury
- protect against exacerbation and/or complication of an illness and/or injury which could threaten life or normal function
- perform diagnostic or therapeutic procedures.

A newborn can be allocated an care type of Acute incl qual newborn if the newborn is nine days old or less and meets at least one of the following criteria:

- the newborn is the second or subsequent live born infant of a multiple birth; or
- the newborn is admitted to a special care facility in a hospital, being a facility approved by the Australian Government Health Minister for the purpose of the provision of special care (i.e. a 'special care nursery'): or
- the newborn is in hospital without its mother.

CODE 8 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.

Palliative care excludes care which meets the definition of mental health care.

CODE 9 Geriatric evaluation and management

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, and or
- undergoing assessment by ACAT.

Geriatric evaluation and management excludes care which meets the definition of mental health care.

CODE BOR Boarder

- Admission for a person (usually a carer or relative) accompanying the patient.
- Hospital boarder is a person who is receiving food and/or accommodation but for whom the hospital does not accept responsibility for treatment and/or care.
- As boarders receive no formal care or treatment they are therefore not considered admitted patients. However, boarders are within the scope of the Tasmanian activity based funding model and are required for costing purposes as hospital resources are allotted to their supervision. Therefore hospitals are required to register and record (‘admitted’) such persons on the hospital Patient Admission System. Hotel services such as meals and a bed/chair must be provided.

CODE NEO Neonate (unqualified)

To be used when the patient is born in hospital or is nine days old or less and doesn't meet at least one to be considered an admission as an Acute incl qual newborn care type at the time of admission and do not require clinical care. Neonate admission type continues until the care type changes or the patient is separated. The following points should be noted:

- Patients who turn 10 days of age and do not require clinical care are separated and, if they remain in the hospital, are designated as boarders.
- Patients who turn 10 days of age and require clinical care continue in a neonate episode of care until separated.
- Patients aged less than 10 days and not admitted at birth (eg transferred from another hospital) are either boarders or admitted with an acute care type.
- Patients aged greater than 9 days not previously admitted (eg transferred from another hospital) are either boarders or admitted with an acute care type.
- A neonate is qualified when it meets at least one of the criteria detailed in newborn qualification status.

CODE ORG Organ procurement (posthumous)

- Organ procurement - posthumous is the procurement of human tissue for the purpose of transplantation from a donor who has been declared brain dead.
- Diagnoses and procedures undertaken during this activity, including mechanical ventilation and tissue procurement, should be recorded in accordance with the relevant ICD-10-AM Australian Coding Standards. These patients are not admitted to the hospital but are registered by the hospital on the Patient Admission System.

CODE OTH Other

Other admitted patient care is care where the principal clinical intent does not meet the criteria for any of the above but should not be used except for persons accepted to the Transition Care Program.

A patient can only enter a Transitional Care Program immediately on discharge from their Acute or Subacute episode of care. Can ca be delivered in either a residential or community setting.

CODE PSY Psychogeriatric

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.

Psychogeriatric care excludes care which meets the definition of mental health care.

CODE REHAB Rehabilitation

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.

Rehabilitation care excludes care which meets the definition of mental health care.

CODE RES Respite

Respite is care in which the primary clinical purpose or treatment goal is support for a patient with impairment, activity limitation or participation restriction due to a health condition. Respite care is planned and booked and the sole reason for admission is the care normally provided in the persons usual residence by a relative or guardian is not available in the short term.

Examples may include:

- Planned respite due to carer unavailability.
- Short term closure of care facility.
- Short term unavailability of community services.

CODE SOC Social

These are patients who would not normally require hospitalisation, but due to factors in the home environment have been admitted as an interim measure. Includes unplanned respite.

Examples may include:

- Admission due to carer illness or fatigue.
- The carer becoming unavailable at short notice.
- Urgent closure of care facility.

CODE MHC Mental health Care

Mental health care is care in which the primary clinical purpose or treatment goal is improvement in the symptoms and/or psychosocial, environmental and physical functioning related to a patient's mental disorder. Mental health care:

- is delivered under the management of, or regularly informed by, a clinician with specialised expertise in mental health;
- is evidenced by an individualised formal mental health assessment and the implementation of a documented mental health plan; and
- may include significant psychosocial components, including family and carer support.

CODE OM Other maintenance

Other maintenance is care in which the primary clinical purpose or treatment goal, following assessment or treatment, the patient does not require further complex assessment or stablilisation and is to maintain the patient's lower level care while waiting other services.

Other maintenance exludes care which meets the definition of mental health care.

CODE NSP Not specified

Not to be used.

Comments: Hospital boarder, Organ procurement (posthumous) and Unqualified newborn days (and separations consisting entirely of unqualified newborn days) are not to be counted under the National Health Care Reform Agreements Health Insurance Act 1973 and Australian Health Care Agreements, and they are ineligible for health insurance benefit purposes.

Relational attributes

Related metadata references:	Supersedes Tasmanian hospital care type code X[XXXX] Tasmanian Health, Superseded 12/04/2019
Data elements implementing this value domain:	Hospital service—care type, Tasmanian code X[XXXX] Tasmanian Health, Standard 12/04/2019