## **Emergency service care NBEDS 2021-22**

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## **Emergency service care NBEDS 2021-22**

## Identifying and definitional attributes

Metadata item type:	Data Set Specification		
METEOR identifier:	727323		
Registration status:	Health, Superseded 20/10/2021		
DSS type:	Data Set Specification (DSS)		
Scope:	The scope of the Emergency service care national best endeavours data set (ESC NBEDS) is emergency services provided in <u>activity based funded</u> hospitals which do not meet all of the following criteria:		
	<ul> <li>purposely designated and equipped area with designated assessment, treatment and resuscitation areas</li> <li>ability to provide resuscitation, stabilisation and initial management of all emergencies</li> <li>availability of medical staff in the hospital 24 hours a day</li> <li>designated emergency department nursing staff 24 hours a day, 7 days a week, and a designated emergency department nursing unit manager.</li> </ul>		
	The care provided to patients in emergency services is, in most instances, recognised as being provided to non-admitted patients. Patients being treated in emergency services may subsequently become admitted. All patients remain inscope for this collection until they are recorded as having physically departed the emergency service, regardless of whether they have been admitted. For this reason there is an overlap in the scope of this data set specification and the Admitted patient care national minimum data set (APC NMDS).		
	The scope also includes services where patients did not wait to be attended by a health-care professional; those dead on arrival; mental health-care provided in emergency services and patients with a Department of Veterans' Affairs or compensable funding source. The scope excludes care provided to patients in General Practitioner (GP) co-located units. However, patient presentations that result in a referral to a GP co-located unit after registration, but before commencement of clinical care, are in scope.		
Collection and usage attributes			

Statistical unit:	Emergency service stay
Collection methods:	National reporting arrangements;
	State and territory health authorities provide the data to the Independent Hospital Pricing Authority (IHPA) for national collection, on a six-monthly basis as required under national health reform arrangements.
	Periods for which data are collected and nationally collated.
	Financial years ending 30 June each year;
	Six-monthly data collection commencing 1 July each year.
Implementation start date:	01/07/2021
Implementation end date:	30/06/2022

Comments:	Scope links with other metadata sets			
	Episodes of care for admitted patients are reported through the APC NMDS.			
	Glossary items			
	Glossary terms that are relevant to this NBEDS include:			
	Activity based funding			
	Admission			
	Compensable patient			
	Emergency service			
	Registered nurse			
	<u>Triage</u>			
Source and reference attributes				
Submitting organisation:	Independent Hospital Pricing Authority			
<b>Relational attributes</b>				
Related metadata references:	Supersedes Emergency service care NBEDS 2020-21 Health, Superseded 05/02/2021			
	Has been superseded by <u>Emergency service care aggregate NBEDS 2022–23</u> <u>Health</u> , Superseded 20/12/2022			
	Has been superseded by <u>Emergency service care NBEDS 2022–23</u> <u>Health</u> , Superseded 07/02/2023			
	See also <u>Non-admitted patient emergency department care NMDS 2021–22</u> <u>Health</u> , Superseded 20/10/2021			
Metadata items in this Data Set Specification				

Seq No.	Metadata item	Obligation	Max occurs
-	Emergency service stay—episode end status, code N	Mandatory	1
-	Emergency service stay—Principal Diagnosis (ICD-10-AM 11th edition) Short List code ANN{.N[N]}	Optional	1
-	Emergency service stay-transport mode (arrival), code N	Optional	1
-	Emergency service stay-triage category, code N	Conditional	1
	Conditional obligation: This data item is required to be reported if the value for Emergency service stay <u>—type of visit to emergency service, code N</u> is recorded as: • Code 1 - Emergency presentation • Code 2 - Return visit, planned • Code 3 - Pre-arranged admission		
-	Emergency service stay-type of visit to emergency service, code N	Mandatory	1
-	Episode of care—Department of Veterans' Affairs funding indicator, yes/no code N	Mandatory	1
-	Establishment—organisation identifier (Australian), NNX[X]NNNNN	Mandatory	1
-	Patient—compensable status, code N	Mandatory	1