

Healthcare-associated infections NBEDS 2025—

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Healthcare-associated infections NBEDS 2025—

Identifying and definitional attributes

Metadata item type:	Data Set Specification
METEOR identifier:	792055
Registration status:	Health , Recorded 26/04/2024
DSS type:	Data Set Specification (DSS)
Scope:	<p>The purpose of the Healthcare-associated infections National best endeavours data set (HAI NBEDS) is to support national monitoring of healthcare-associated infections (HAIs), including Staphylococcus aureus bloodstream infection (SABSI), in public hospitals.</p>

HAIs are infections acquired as a direct or indirect result of health care.

HAIs are infections acquired in healthcare facilities ('nosocomial' infections) and infections that occur as a result of healthcare interventions ('iatrogenic' infections), and which may manifest after people leave the healthcare facility (NHMRC 2010).

The scope for this NBEDS is all public hospitals, including those hospitals defined as public psychiatric hospitals in the Local Hospital Networks/Public hospital establishments national minimum data set (LHN/PHE NMDS.) All types of public hospitals are included, both those focusing on acute care, and those focusing on non-acute or subacute care, including psychiatric, rehabilitation and palliative care.

Collection and usage attributes

Statistical unit:	Hospital establishment
Guide for use:	<p>The following terminology is used in this NBEDS:</p> <ul style="list-style-type: none">• A case refers to a patient episode.• Surveillance arrangements refer to the particular arrangements in place in a hospital to identify potential HAIs, and to further determine whether a particular potential HAI is healthcare-associated. Surveillance arrangements are typically undertaken by infection control staff in collaboration with clinicians.
Collection methods:	<p>Data are collected at each hospital from patient administrative and HAI surveillance systems.</p> <p><i>National reporting requirements</i></p> <p>State and territory health authorities provide the data to the Australian Institute of Health and Welfare for national collation, on an annual basis.</p> <p><i>Periods for which data are collected and nationally collated</i></p> <p>Financial years ending 30 June each year.</p>
Implementation start date:	01/07/2025

Comments:	<p>This NBEDS currently only covers the collection of healthcare-associated patient episodes of SABS I.</p> <p>Almost all patient episodes of SABS I will be diagnosed when the patient is an admitted patient. However, the intention is that cases are reported whether they were associated with admitted patient care or non-admitted patient care in public hospitals.</p> <p>The total number of healthcare-associated <i>Staphylococcus aureus</i> bloodstream infection patient episodes attributed to a hospital can be derived by adding the number of healthcare-associated Methicillin-resistant <i>Staphylococcus aureus</i> (MRSA) bloodstream infection patient episodes and the number of healthcare-associated Methicillin-sensitive <i>Staphylococcus aureus</i> (MSSA) bloodstream infection patient episodes.</p> <p><i>Glossary items</i></p> <p>Glossary terms that are relevant to this National best endeavours data set include:</p> <p>Episode of healthcare-associated <i>Staphylococcus aureus</i> bloodstream infection</p> <p>Geographic indicator</p> <p>Hospital boarder</p> <p>Newborn qualification status</p> <p>Organ procurement—posthumous</p> <p>Overnight-stay patient</p> <p>Same-day patient</p>
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Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
Reference documents:	<p>NHMRC (National Health and Medical Research Council) 2010. Australian Guidelines for the Prevention and Control of Infection in Healthcare. Canberra: NHMRC.</p> <p>ACSQHC (Australian Commission on Safety and Quality in Health Care) 2021. Implementation Guide for the Surveillance of <i>Staphylococcus aureus</i> bloodstream infection. Sydney: ACSQHC, viewed 10 February 2022 https://www.safetyandquality.gov.au/publications-and-resources/resource-library/implementation-guide-surveillance-staphylococcus-aureus-bloodstream-infection</p>

Relational attributes

Related metadata references:	<p>Supersedes Healthcare-associated infections NBEDS 2021—Health, Standard 10/06/2022</p> <p>See also Surveillance of healthcare associated infection: <i>Staphylococcus aureus</i> bloodstream infection NBPDS Health, Recorded 26/04/2024</p> <p>See also Surveillance of healthcare associated infection: <i>Staphylococcus aureus</i> bloodstream infection NBPDS Health, Standard 09/12/2022</p>
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Metadata items in this Data Set Specification

Seq No.	Metadata item	Obligation	Max occurs
1	Establishment—Australian state/territory identifier, code N	Mandatory	1

Seq No.	Metadata item	Obligation	Max occurs
2	Establishment—organisation identifier (Australian), NNX[X]NNNNN	Conditional	1
Conditional obligation:			
This data element is reported conditionally with the element Establishment—organisation identifier (Australian), NNX[X]NNNNN[NNNN] .			
Establishment—organisation identifier (Australian), NNX[X]NNNNN is to be reported for organisations with identifiers up to 9 characters in length.			
Establishment—organisation identifier (Australian), NNX[X]NNNNN[NNNN] is to be reported for organisations with identifiers of between 10 and 13 characters in length.			
Data must be reported for at least one of the two elements.			
Data may be reported for both elements (i.e. where the ID to be reported has changed.)			
3	Establishment—organisation identifier (Australian), NNX[X]NNNNN[NNNN]	Conditional	1
Conditional obligation:			
Where this data element is reported, it is reported conditionally with the element Establishment—organisation identifier (Australian), NNX[X]NNNNN .			
Establishment—organisation identifier (Australian), NNX[X]NNNNN is to be reported for organisations with identifiers up to 9 characters in length.			
Establishment—organisation identifier (Australian), NNX[X]NNNNN[NNNN] is to be reported for organisations with identifiers of between 10 and 13 characters in length.			
Data must be reported for at least one of the two elements.			
Data may be reported for both elements (i.e. where the ID to be reported has changed.)			
4	Hospital—hospital name, text XXX[X(97)]	Mandatory	1
5	Establishment—Staphylococcus aureus bloodstream infection surveillance indicator, yes/no code N	Mandatory	1
6	Establishment—number of patient days, total N[N(7)]	Mandatory	1
DSS specific information:			
Patient days for unqualified newborns , hospital boarders , and posthumous organ procurement are excluded.			
7	Establishment—number of hospital patient days under Staphylococcus aureus bloodstream infection surveillance, total days N[NNNNN]	Conditional	1
Conditional obligation:			
Reporting of this data element is conditional on a CODE 1 'Yes' response to the Establishment—Staphylococcus aureus bloodstream infection surveillance indicator, yes/no code N data element.			

Seq No.	Metadata item	Obligation	Max occurs
8	Establishment—number of healthcare-associated Methicillin-resistant Staphylococcus aureus (MRSA) bloodstream infection patient episodes, total episodes N[NNNN]	Conditional	1
Conditional obligation:			
Reporting of this data element is conditional on a CODE 1 'Yes' response to the Establishment—Staphylococcus aureus bloodstream infection surveillance indicator, yes/no code N data element.			
9	Establishment—number of healthcare-associated Methicillin-sensitive Staphylococcus aureus (MSSA) bloodstream infection patient episodes, total episodes N[NNNN]	Conditional	1
Conditional obligation:			
Reporting of this data element is conditional on a CODE 1 'Yes' response to the Establishment—Staphylococcus aureus bloodstream infection surveillance indicator, yes/no code N data element.			