

**Specification for Revisions to the
Elective Surgery Information System
(ESIS)**

For 1 July 2003

February 2003

**Metropolitan Health and Aged Care Division
Health Data Standards & Systems**



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Executive Summary

This document contains details of the revisions to the Elective Surgery Information System (ESIS) for 1 July 2003. The revisions are summarised below:

New Concept Definitions

- Waiting List episode
- Procedure

Amended Data Items

- Date of Procedure
- Insurance Declaration
- Reason for Removal
- Principal Prescribed Procedure
- Transfer Destination

Introduction

From 1 July 2003, changes to the ESIS data collection are necessary to assist planning and policy development by the Department of Human Services, to ensure that Victoria continues to meet its national reporting obligations and to improve system performance.

The Department has taken into account the comments made by hospitals and software suppliers on the document: *Proposals for Revisions to the Elective Surgery Information System (ESIS) for 1 July 2003* and where possible, suggestions have been accommodated.

Hospitals are required to alter their externally supplied or in-house waiting list systems for 1 July 2003, to meet the ESIS specification as detailed in this document.

Any questions on this specification may be directed to the HDSS Help Desk:

Telephone	(03) 9616 8141
Fax	9616 7629
Email	PRS2.Help-Desk@dhs.vic.gov.au

Distribution and components of this document

This document has been distributed to ESIS hospitals, software suppliers and a range of industry associations and is also accessible on the Health Data Standards & Systems (HDSS) website at hdss.health.vic.gov.au. It outlines new and amended ESIS definitions and data items.

ESIS hospitals are required to arrange for their software to be modified in accordance with the revised specifications.

A separate document will be released in March 2003 outlining new and amended edits.

The changes noted in this document and the edits document will be incorporated into the *ESIS Manual*, Version 6.0 1 July 2003, planned for release in May 2002.

Until the Version 6.0 Manual is released, software suppliers and hospitals are advised to work from:

- This document
- *ESIS Manual*, Version 5.0, 1 July 2002
- Amendments notified in HDSS Bulletins throughout the 2002 – 2003 financial year.

Format

Revisions are denoted as follows:

- New values in code sets and significantly revised definitions/edits are enclosed in a dotted border.
- Additions to existing text are underlined, whilst deletions are ~~struck through~~.
- The text is divided into the categories of 'Specification' and 'Administration' as presented in the *ESIS Manual*, Version 5.0, 1 July 2002

Abbreviations

ACAES	Advisory Committee on Access to Elective Surgery
DHS	Department of Human Services
DOSA	Day of Surgery Admission
ESAS	Elective Surgery Access Service
ESIS	Elective Surgery Information System
HDSS	Health Data Standards and Systems
PPP	Principal Prescribed Procedure
VAED	Victorian Admitted Episode Database
VEMD	Victorian Emergency Minimum Dataset

Reference Files

The HDSS web site provides reference files for 2002—2003:

<http://hdss.health.vic.gov.au/globalref/index.htm>

Postcode File: Postcode and Locality

Hospital Code Table

These files may be updated as required throughout the year. Updates will be notified via an HDSS *Bulletin*. ESIS will be edited against the new file.

Please refer to the HDSS website (above) for the latest version.

Principal Prescribed Procedure

An expanded list of codes for *Principal Prescribed Procedure* for use from 1 July 2003 will be distributed to hospitals and software suppliers in March 2003.

This file will also be available on the HDSS website.

Test Transmissions

The Department of Human Services recognises that software suppliers can experience difficulties making the 1 July revisions to their programs and that distributing untested programs to clients is unsatisfactory. It can also be difficult for hospitals to resolve problems caused by using untested software. DHS will therefore be making a test submission facility available to software suppliers and encourages all suppliers to test new programs before using them to send live data to ESIS.

After making the necessary programming changes to meet the revised requirements, each software supplier can send a reasonable number of tests, without charge.

Each test can be made by sending (as per usual) to: esis.esis@dhs.vic.gov.au

The transmission must contain a control report file and data file. However, you should clearly mark this email as 'TEST DATA'.

This will be processed by the Department and returned to you within 3 working days.

Staff at the Department will, if requested, assist in identifying problems. However, there is no approval process for testing 1 July updates. Once the supplier and/or the hospital are satisfied that the new software meets the specifications as defined by the Department, live transmissions can commence.

New Concept & Derived Item Definitions

Waiting list episode

Definition

A patient who is required to wait for elective surgical care.

Guide for use

In the majority of cases, the patient will wait for a single procedure.

Where the patient waits for multiple procedures, this is considered to be a single waiting list episode when:

- All the procedures are intended to treat the same clinical condition.
- The patient undergoes multiples of the same type of procedure eg. Excision/destruction of multiple lesions
- All procedures are performed in the same operative episode

When a patient requires more than one procedure to treat more than one clinical condition and the procedures are performed in separate operative episodes, then this will be a separate waiting list episode.

Refer: Section 3 – Data Definitions *Principal Prescribed Procedure*.

Procedure

Definition

A clinical intervention that:

- Is surgical in nature; and/or
- Carries a procedural risk; and/or
- Carries an anaesthetic risk; and/or
- Requires specialised training; and/or
- Requires special facilities or equipment only available in an acute care setting.

Amended Data Items

Date of Procedure

Revision Summary To remove the date requirement for reporting *Date of Procedure*.

Specification

Definition The date of the first 'procedure' performed during a planned admission, the procedure being either:

- the procedure the patient was waiting for (as assigned in ESIS)

or

- a related procedure that results in the patient being removed from the waiting list.

Datatype Numeric **Form** Date

Field size 8 **Layout** DDMMCCYY

Reported for Patients **removed from the waiting list** where the *Reason for Removal* is:

W *Admitted to this hospital for awaited procedure as a planned admission*

Recorded when The patient is removed from the waiting list.

Reporting guide If no procedure has been performed by the Census Date, the field **must** remain blank.

Note that Day of Surgery Admission (DOSA) rates are derived from Reason for Removal code W Admitted to this hospital for awaited procedure as a planned admission, Removal date, Planned Length of Stay code 2 Intended Overnight and Date of Procedure.

To be counted as DOSA, the Removal Date must equal the Date of Procedure and both must be reported in the month the patient was removed.

Thus if a record with Reason for Removal code W and Planned Length of Stay code 2 has a blank Date of Procedure, the episode will not be counted as a DOSA.

Edits As per ESIS Manual Version 5.0

Related items *Planned Length of Stay, Reason for Removal, Removal Date.*

Administration

Purpose **To** enable calculation of DOSA rates, introduced in 2001-2002 as a key indicator of hospital performance.

Principal data users DHS.

Collection start July 2002 **Version** 1 (Effective 01.07.2002)

Definition source DHS **Code set source** DHS

Insurance Declaration

Revision Summary To amend the requirement for reporting this data item

Specification

Definition The patient's declared insurance election on admission

Datatype Alpha/numeric **Form** Code

Field size One **Layout** A

Reported for Mandatory for all patients with a reported Reason for Removal of:
W *Admitted to this hospital for awaited procedure as a planned admission*
:
X *This hospital/health service arranged admission at another hospital under contract*
S *Treatment for awaited procedure arranged by ESAS*

Recorded when The Insurance Declaration can be entered at any time during the waiting period.

Code set	Code	Descriptor
	M	Public
	P	Private
	V	Department of Veterans Affairs
	W	Victorian WorkCover Authority
	T	Traffic Accident Commission
	A	Armed Services
	S	Seamen
	C	Common Law Recoveries
	O	Other Compensable
	X	Ineligible

Reporting guide If the patient elects to change their insurance status whilst an admitted patient, this field should not be amended to reflect that change.

For prisoners, report X Ineligible.

The *Removal Date* must also be reported with the *Reason for Removal* and *Insurance Declaration* are reported.

Edits As per ESIS Manual Version 5.0

Related items *Reason for Removal, Removal Date*

Administration

Purpose Analysis of utilisation and health care financing.

Principal data users DHS

Collection start	July 1997	Version	1	(Effective 01.07.1997)
			2	(Effective 01.07.1999)
			3	(Effective 01.07.2003)

Definition source	DHS	Code set source	DHS
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Reason for Removal

Revision Summary To introduce a Reason for Removal code to identify those patients whose treatment at another hospital was arranged by the Elective Surgery Access Service (ESAS).

Specification

Definition The reason why a patient is removed from the waiting list.

Datatype Alpha/Numeric **Form** Code

Field size One **Layout** A

Reported for Patients removed from the waiting list.

Code set **Code** **Descriptor**

Treated elsewhere?	B	Treated elsewhere for awaited procedure at a public facility, not arranged by this hospital
	I	Treated elsewhere for awaited procedure at a private facility, not arranged by this hospital
	U	Treated elsewhere for awaited procedure - unknown where public or private facility, not arranged by this hospital
	X	This hospital/health service arranged admission at another hospital under contract
	<u>S</u>	<u>Treatment for awaited procedure arranged by ESAS</u>

Reporting guide Report the appropriate reason why the patient's waiting episode has been removed from the waiting list.

That is, because they have been:

- Admitted to this hospital for their awaited procedure,
- Treated elsewhere for the awaited procedure,
- Transferred to the waiting list of another public hospital, or
- Cancelled from this hospital's waiting list,
- Treatment for awaited procedure arranged by Elective Surgery Access Service (ESAS).

When the patient is removed from the waiting list, the *Removal Date* must also be reported.

B, I, U—Treated elsewhere for the awaited procedure, not arranged by this hospital

Patient whose awaited procedure has been performed at another facility.

Includes:

- (a) Patient has initiated treatment at another hospital (including a private hospital)
- (b) Patient admitted through the Emergency Department of another hospital for the awaited procedure.

Determine, wherever possible, whether the patient was treated at a private or public facility. If this cannot be determined, report code U *Unknown facility*.

Where ESIS data are reported at health service level, these codes are used in instances where a patient is admitted through the Emergency Department of any ESIS reporting campus within the health service, this code indicates the actual treatment campus.

If a patient was treated in a private hospital where a contract has not been negotiated between this hospital and the private hospital, remove the patient from the Waiting List with *Reason for Removal* code I *Treated elsewhere for awaited procedure at a private facility, not arranged by this hospital*.

For codes B, I or U, do not report a *Destination* code

X—This hospital/health service arranged admission at a hospital under contract

This hospital/health service arranged for the patient to be treated at a hospital under contract (or similar arrangement) but the responsibility for the patient's waiting episode remains with the ESIS hospital/health service reporting this episode.

This patient should remain on the waiting list until admitted.

Although this is not a transfer of reporting responsibility, report a *Destination* code to indicate the hospital where the patient receives treatment under contract. Refer to *Destination*

Excludes: Where the patient initiates treatment at another hospital, report *Reason for Removal* code B, I or U *Treated elsewhere for the awaited procedure, not arranged by this hospital*.

S – Treatment for awaited procedure arranged by ESAS

The patient’s treatment at another hospital has been arranged by ESAS.

The responsibility for the patient’s waiting episode remains with the ESIS hospital/health service reporting this episode.

The patient must remain on the waiting list until admitted.

Report a *Destination* code to indicate the hospital where the patient receives treatment as arranged by ESAS.

Edits

As per ESIS Manual Version 5.0

Related items

Insurance Declaration, Medicare Number, Medicare Suffix, Readiness Status, Removal Date, Scheduled Admission Date, Total Not Ready for Care Days, Total Not Ready for Care Days Following Last Urgency Reassignment, Total Not Ready for Care Days Following Last Clinical Urgency Increase, Total Waiting Time for Admitted Patients, Total Waiting Time for Patients Remaining on the Waiting List, Destination.

Administration

Purpose

Used to monitor waiting list management.

Principal data users

DHS, AIHW and the Commonwealth Department of Health and Aged Care.

Collection start

July 1997

Version

1 (Effective 01.07.2001)

2 (Effective 01.07.2003)

Definition source

DHS

Code set source

DHS

Principal Prescribed Procedure

Revision Summary Amend the reporting guide to include all patients waiting for a surgical or non-surgical procedure.

Specification

Definition The procedure for which the patient has been placed on the waiting list.

Datatype Alpha/numeric **Form** Code

Field size Three **Layout** NNN, left justified

Reported for All waiting list episodes.

Recorded when The patient is first registered on the waiting list. (See also Reporting Guide below for circumstances when PPP can be changed.)

Code set *Principal Prescribed Procedures* are listed in various sequences:

- In Numerical Order—Appendix A,
- By Surgical Specialty—Appendix B
- In Alphabetical Order—Appendix C

Reporting guide The *Principal Prescribed Procedure* is the procedure prescribed by the treating clinician, to treat (that is, cure, alleviate or control) the patient's condition.

Select the code that gives the best match to the description of the procedure, even if that code is listed in Appendix B *PPP (Surgical Specialty)* under a different specialty to the code assigned for the treating clinician.

Reporting guide (continued) Whilst full details of the procedure undergone by the patient will not be known until after the surgery, the clinician should provide an explanation of the proposed nature of the procedure to be performed. This information provides the basis for the *Principal Prescribed Procedure* code assignment.

When the surgeon indicates that the patient will undergo more than one procedure during the same operative episode, assign the most resource intensive procedure as *Principal Prescribed Procedure*.

Changes to *Principal Prescribed Procedure* codes within a single episode

The *Principal Prescribed Procedure* can be changed within an episode of waiting in the following circumstances:

- When the new *Principal Prescribed Procedure* code will treat exactly the same condition in the patient, as was intended when the patient was placed on the waiting list.
- When a data input error has occurred, and a change to the *Principal Prescribed Procedure* code is simply a correction of that error.

If the patient requires a new procedure for the treatment of a different condition, a new waiting episode must be started.

Reporting guide ***(continued)***

Multiple procedures

A patient may be waiting for **separate** admissions for a number of procedures. In this event, the patient will be reported a number of times under the same *Patient Identifier* but different *Unique Key*, *Waiting Number* and *Principal Prescribed Procedure*

The patient may be waiting for unrelated procedures e.g. a hip replacement and release of carpal tunnel. The unique sequential number field *Waiting Number* allows recording of more than one waiting episode per patient. For example, a patient requiring the same procedure at different times, such as cataract repair on the left eye then the right eye, will have two ESIS records each with a different *Waiting Number* (and different *Unique Key*).

This number of records submitted each month is therefore likely to exceed the actual number of patients waiting.

Valid PPPs for Repeated Episodes

An alphabetic list of procedures that can be repeated for the same patient (i.e. a patient can be on the waiting list for these procedures more than once without a warning or rejection occurring) is located on the last page of Appendix C.

Edits

As per ESIS Manual Version 5.0

Related items

Patient Identifier, Surgical Specialty, Unique Key, Waiting Number.

Administration

<i>Purpose</i>	Used to analyse waiting time statistics by procedure, useful to patients and referring doctors. In addition, waiting time data by procedure assists in planning and resource allocation, audit and performance monitoring.		
<i>Principal data users</i>	DHS, AIHW and the Commonwealth Department of Health and Aged Care.		
<i>Collection start</i>	July 1997	<i>Version</i>	1 (Effective 01.07.1997)
			2 (Effective 01.07.1999)
<i>Definition source</i>	DHS	<i>Code set source</i>	DHS

Destination

Revision Summary Amend field name from *Transfer Destination* to *Destination*

Specification

Definition Identification of the public hospital (ie, hospital campus, not the health service) that is accepting responsibility for the patient's waiting episode or the hospital where the patient is receiving treatment under contract (or similar arrangement).

Reported for Each patient removed from the waiting list with a *Reason for Removal* of:

T—*Transfer of waiting episode to another ESIS hospital*

N—*Transfer of waiting episode to a non-ESIS (public) hospital*

X—*This hospital/health service arranged admission at a hospital under contract*

S – *Treatment for awaited procedure arranged by ESAS*

Recorded when The patient is removed from the waiting list of this hospital because the patient is transferred to another hospital waiting list or is receiving treatment under contract (or similar arrangement) at another hospital.

The patient receives treatment at another hospital campus, where treatment is arranged by Elective Surgery Access Service (ESAS).

Code set Refer to Appendix F *Campus/Health Service Codes for ESIS reporting* but note that codes representing health services are *not* valid.

Reporting guide **Patients who are treated under contract (or similar arrangement) at another hospital (public or private)**

A patient treated under a contract (or similar arrangement) at another hospital (public or private), arranged by this hospital, is **not** considered to be a transfer, because the reporting responsibility for the patient's waiting episode remains with the contracting hospital. However, in order to identify where the patient is to **or has** received treatment, report the *Destination* code for that hospital campus.

Remove the patient from the waiting list with *Reason for Removal* code X *This hospital/health service arranged admission at a hospital under contract*.

Patients who initiate treatment in a private hospital

A patient who elects to be treated in a private hospital, not arranged by this hospital, is **not** considered to be a transfer. Instead, remove the patient from the waiting list with *Reason for Removal* code I *Treated elsewhere for the awaited procedure at a private facility*. *No Destination* code **is required**.

Patients treated at another hospital, arranged by (ESAS)

A patient treated at another hospital, arranged by ESAS, is not considered to be a transfer, because the responsibility for the patient's waiting episode remains with the original hospital. However, in order to identify where the patient is to receive treatment, report the *Destination* code for the treating hospital campus. Remove the patient from the waiting list with *Reason for Removal* code S *Treatment for awaited procedure arranged by Elective Surgery Access Service*

When a *Destination* is reported, also report *Reason for Removal* and *Removal Date*.

Edits As per ESIS Manual Version 5.0

Related items *Campus/Health Service Code, Reason for Removal, Removal Date*

Administration

Purpose Used to analysis of service delivery patterns

Principal data users DHS

Collection start	July 1999	Version	1	(Effective 01.07.1999)
			2	(Effective 01.07.2000)
			3	(Effective 01.07.2001)
			4	(Effective 01.07.2003)

Definition source	DHS	Code set source	DHS
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