

**Proposals for Revisions
to PRS/2 and the
Victorian Admitted Episodes Dataset (VAED)**

February 2001

**Acute Health Division
Department of Human Services**

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Executive Summary

This document contains details of the proposed revisions to the Victorian Admitted Episodes Dataset (VAED) for 1 July 2001. These proposed revisions are summarized below.

1. Proposed new data item

- Date of First Procedure

2. Proposed changes to values within data item 'Accommodation Type':

The introduction of four new values for reporting accommodation in:

- Registered Medical Assessment and Planning Units
- Registered Short Stay Observation Units
- Neonatal Intensive Care Units and Special Care Nurseries
- Other nursery and infant accommodation

The deletion of a single 'Accommodation Type' value:

- '5' *Newborn accommodation*

This document details the above proposals and describes the consultation process that will assist in the development and possible introduction of these revisions to PRS/2 and the VAED.

Introduction

The VAED Proposals Consultation Process

Each year the Department of Human Services (DHS) reviews the data elements and format of PRS/2 and the Victorian Admitted Episodes Dataset. This review seeks to ensure that the admitted patient collection supports the Department's national reporting obligations, and assists DHS planning and policy development.

This document is being distributed to all Victorian hospitals, to patient management system suppliers known to have Victorian clients, and to a range of industry bodies. It outlines *proposals* for changes to PRS/2 and the VAED, as at the time of its release in February 2001. This should not be regarded as a complete list of changes to be made for 2001–2002. Items in this publication cannot be guaranteed to change or to change in the form suggested here; nor does the absence of an item from this publication indicate it will not change from 1 July 2001. Confirmed changes will be published in the document '*Specification for Revisions to PRS/2 and the VAED for 1 July 2001*' which will be published in March/April this year.

There are two proposals for changes to the VAED outlined in this document. It is expected that release of these proposals will stimulate discussion within the health industry. **Feedback is sought on these proposals.** Hospitals and software suppliers should review this document and assess the feasibility of the proposals. All are invited to provide written feedback to the Department by completing the proforma provided with this document, and forwarding it to the Department as indicated, **no later than Tuesday 27 February 2001.**

There will be a **summary presentation** of these proposals during the **HDSS Forum** to be conducted in the **Ella Latham Lecture Theatre, Royal Children's Hospital, from 10:00am on Friday 2 March 2001.** Responses to feedback received from hospitals and software suppliers during the feedback period will be addressed at this forum. If you have any questions or comments, it is important to notify these prior to the forum, as question time will be available at the forum only if time permits.

Constructive suggestions are welcomed, both for dealing with the proposed changes identified in this document, and of other alterations to PRS/2 and the VAED, to improve their utility for hospitals.

Orientation to this Document

As this document provides 'proposals' for revisions, there are a few features that require explanation:

- New values and definitions relating to existing items appear in boxes

- The text is divided into the categories of 'Specification' and 'Administration'.

Specification — details the reporting requirements for the item.

Administration — provides additional information including the purpose of the collection of the data item and the source of the code set and definitions.

- Further information such as the background to each proposal is provided.

Abbreviations

DHS	Department of Human Services
DOSA	Day of Surgery Admission
HDSS	Health Data Standards and Systems
HITH	Hospital in the Home
MAPU	Medical Assessment and Planning Unit
NICU	Neonatal Intensive Care Unit
SOU	Short Stay Observation Unit
SCN	Special Care Nursery
PRS/2	Patient Reporting System, Version 2
VAED	Victorian Admitted Episodes Dataset

Proposed Revisions

Date of First Procedure

It is proposed to Collect the date upon which the first procedure reported for the episode was performed.

Proposed by Peter Lewis
Patient Management Taskforce (Acute Health, DHS)
Phone 9616 8196

Implementation Date 1 July 2001

Specification

Definition The date on which the first reported procedure was performed. (The first procedure reported is that which is reported in the first Procedure Code field in the Diagnosis Record).

Datatype Numeric **Form** Date

Field Size 8 **Layout** DDMMCCYY

Location Diagnosis record

Reported by All public hospitals

Reported for All elective admissions from the Booking/Waiting List with a procedure reported in the first *Procedure Code* field. That is all patients with an Admission Source of 'L – *Booking/Waiting List*'.

Reported when A Separation Date is reported in the Episode Record.

Code Set A valid date, which is on or after the Admission Date, and before the Separation Date.

Reporting Guide Report the date on which the first procedure reported in the Diagnosis Record was performed.
If no Procedure Code is reported, or the Admission Source is not 'L', the Date of First Procedure should be null.

- New edits required**
- Date of First Procedure must be equal to or greater than Admission Date, and less than or equal to Separation Date. (Reject if invalid date).
 - If Admission Source equals L and First Procedure Code is not null, reject if Date of First Procedure is null.
 - If Admission Source equals L and First Procedure Code is null, reject if Date of First Procedure is not null.
 - If Admission Source does not equal L reject if Date of First Procedure is not null.

Related Items Procedure Codes, Admission Source

Administration

Purpose To enable the consistent collection of comparative information on 'Day of Surgery Admission' (DOSA) rates for elective surgery admissions.

Principal Data Users Acute Health Division, DHS

Collection Start Proposed 1 July 2001

Definition Source DHS

Implication of this change If this proposal is accepted, a PRS/2 Systems requirement will necessitate the changing of the PRS/2 record types. Record types will change from E2 to E3 (Episode Record) X2 and Y2 to X3 and Y3 (Diagnosis Record) etc. This will apply to all PRS/2 record types.

Background The Patient Management Taskforce has identified that Day of Surgery Admission rates are an indicator of how organisations manage their elective surgical admissions. The day of surgery admission rates vary within and across organisations, and also vary within specialties associated with those organisations.

Accommodation Type (a)

Accommodation Type on Separation (b)

It is proposed to	<p>Modify the code set for data item <i>Accommodation Type</i> (and therefore <i>Accommodation Type on Separation</i>) to collect data on:</p> <ul style="list-style-type: none">• Infants admitted to Neonatal Intensive Care Units (NICU) and Special Care Nurseries (SCN), as well as those admitted to other nurseries or cared for at the mother's bedside (that is, rooming in). These new codes replace code '5' Newborn accommodation type. <p>Proposed by:</p> <p>The Neonatal Data and Information Sub-Committee Chaired by Dr Andrew Ramsden, Director Newborn Services, Monash Medical Centre. Contact: Nette Lowe, DHS Project Officer, phone 9616 7670</p> <ul style="list-style-type: none">• Patients admitted to Registered Short Stay Observation Units (SOU) and Medical Assessment and Planning Units (MAPU). <p>Proposed by:</p> <p>Sue Daly, DHS Project Officer, 9616 8347</p>
Implementation Date	1 July 2001

Specification

Definition	(a) The accommodation type or types occupied by the patient during their admission, including changes to this item during the episode. (b) The accommodation occupied by the patient on their last (counted) patient day.
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Datatype	Alphanumeric	Form	Code
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Field size	1	Layout	N
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Location	<ul style="list-style-type: none">• Status Segments of the Episode Record.• Episode Record.
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Reported by	All Victorian hospitals (public and private).
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Reported for	All admitted patient episodes of care.
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Reported when

- The Episode record is reported. Any changes in Accommodation Type are reported in new Status Segments.
- Once the Separation Date is reported in the Episode record.

Code set

Code Descriptor

4 Hospital in the home (HITH)

S Short Stay Observation Unit accommodation

M Medical Assessment and Planning Unit accommodation

6 Emergency department accommodation

A Nursery accommodation: NICU/SCN

N Other nursery accommodation or mothers bedside (rooming in)

3 Same Day accommodation

2 Overnight accommodation: single room

1 Overnight accommodation: shared room

Reporting guide

For data items (a) and (b), select the first appropriate category:

4 Hospital in the Home (HITH)

Accommodation outside the hospital under the Hospital in the Home program, if the public hospital's Health Service Agreement specifies the hospital is participating in this program. HITH services can only be provided to public, DVA, TAC and Work Cover patients. Refer to: Section 4 'Hospital in the Home Program: Participating Hospitals'.

S Short stay observation unit accommodation

Accommodation within a Registered Short Stay Observation Unit, whether this facility is in, adjacent to or remote from the Emergency Department.

Includes: General and specific Short Stay Observation Units, for example chest pain units.

Excludes: Short stay facilities designated specifically for elective surgical, radiological procedures and excludes Medical Assessment and Planning Unit admissions.

A list of hospitals with registered Short Stay Observation Units will be provided in the PRS/2 Manual.

M *Medical Assessment and Planning Unit accommodation*

Accommodation within a Registered Medical Assessment and Planning Unit (MAPU). These units concentrate admissions for general medical conditions in one geographical area to streamline the care planning processes. Patients' planned length of stay in the Medical Assessment and Planning Unit may be up to 48 hours prior to transfer to another ward or discharge (where appropriate).

Excludes: Patients admitted to a registered Short Stay Observation Unit.

A list of hospitals with registered Medical Assessment and Planning Units will be provided in the PRS/2 Manual.

6 *Emergency department accommodation*

Patient accommodation is being provided in the emergency department.

A *Nursery accommodation: NICU/SCN only*

Accommodation provided to any infant, regardless of age at admission, in a facility approved by the Commonwealth Minister for the purpose of provision of neonatal intensive or special care.

See PRS/2 Manual *Neonatal Intensive Care Units and Special Care Nurseries: Approved*, Section 4.

N *Other nursery accommodation or mother's bedside (rooming in)*

Accommodation provided to any infant, regardless of age at admission, in a postnatal ward, either in a nursery that is not an approved NICU or SCN or by its mother's bedside (that is 'rooming in').

For infants in paediatric wards, report code 1, 2 or 3 as appropriate.

3 *Same Day accommodation*

Same day bed or other accommodation such as a renal dialysis chair, regardless of whether this is in a single or shared room.

2 Overnight accommodation: single room

Sole occupation of a room intended for the overnight accommodation of a single patient but only when the patient has requested single accommodation.

Includes: Where the patient has requested single accommodation and occupies a room intended for single occupancy but her newborn is rooming-in.

Excludes:

- Where the patient is the only person occupying a room intended for shared occupancy, such as the isolation of a patient for -medical reasons, or where there is no available shared room (report code 1).
- Where the patient occupies a single room but has not requested single accommodation (report code 1).

1 Overnight accommodation: shared room

Occupation of a room intended for the overnight accommodation of more than one patient.

Includes:

- Where the patient is the only person occupying a room intended for shared occupancy.
- Where the patient and her rooming-in newborn are the only people occupying a room intended for occupancy by more than one adult patient.
- Where the patient has not requested single accommodation but occupies a single room because of a clinical decision.

New Edits required Neonate/Infant Accommodation Types

- Reject all unqualified newborns with Accommodation Type NICU/SCN.
- Warn on all qualified newborns with
 - Accommodation Type N, and
 - Admission Source Y 'Birth Episode', and
 - Not a multiple birth (Z38.3-Z38.8), and
 - No recorded maternal illness/incapacity to care (Z02.8 *Other examinations for administrative purposes* or P01.6 *Fetus and newborn affected by maternal death*)
- Reject all episodes with Accommodation Type 'NICU/SCN' in hospitals without approved NICU/SCN.
- Warn if Accommodation Type equals A or N and age at admission is greater than three months.

MAPU/SOU

- Warn if length of stay in MAPU or SOU is greater than 48 hours.
- Reject all episodes with Accommodation Type MAPU in hospitals without a registered MAPU.
- Reject all episodes with Accommodation Type SOU in hospitals without a registered SOU.

Existing Edits requiring revision

(a)

- 084 Invalid Accommodation Type
- 094 Invalid combination of Account Class, Accommodation Type, Care Type and Medicare Suffix

117 Separation Accommodation Type is not in a Status Segment

240 Accommodation Type is Newborn but Age is not Appropriate

(b)

106 Invalid Separation Accommodation Type

108 Separation Date is present but Separation Data field(s) are missing

117 Separation Accommodation Type is not in a Status Segment

