
Establishment sector

Admin. status: CURRENT 1/07/2001

Identifying and definitional attributes

Knowledgebase ID: 000379 Version number: 3

Data element type: DATA ELEMENT

Definition: A section of the health care industry.

Context: Public hospital establishments: and Admitted patient care:.

Relational and representational attributes

Datatype: Numeric Field size: Min. 1 Max. 1 Layout: N

Data domain:
1 Public
2 Private

Related data:
relates to Hospital, version 1
is a composite part of Establishment identifier, version 3
supersedes Establishment sector, version 2

Administrative attributes

National minimum data sets:

Admitted patient care	from 1/07/2000 to
Admitted patient mental health care	from 1/07/2000 to
Elective surgery waiting times	from 1/07/2001 to
Perinatal	from 1/07/1997 to
Public hospital establishments	from 1/07/2000 to

Type and sector of employment establishment

Admin. status: CURRENT 1/07/1995

Identifying and definitional attributes

Knowledgebase ID: 000166 Version number: 1

Data element type: DATA ELEMENT

Definition: For each health profession, type of employment establishment is a self reporting, condensed industry of employment classification that can be cross-referenced to the Australian and New Zealand Standard Industrial Classification.

Sector of employment establishment is government (public) or non-government (private), according to whether or not the employer is a Commonwealth, State or local government agency.

Context: Health labour force: to analyse distribution of service providers by setting (defined by industry of employer and sector), cross-classified with main type of work and/or specialty area.

Relational and representational attributes

Datatype: Numeric Field size: Min. 2 Max. 2 Layout: NN

Data domain:

01	Private medical practitioner rooms/surgery (including 24-hour medical clinics)
02	Other public non-residential health care facility (e.g. Aboriginal health service, ambulatory centre, outpatient clinic, day surgery centre, medical centre, community health centre)
03	Other private non-residential health care (e.g. Aboriginal health service, ambulatory centre, outpatient clinic, day surgery centre, medical centre, community health centre)
04	Hospital – acute care* (including psychiatric or specialist hospital) hospital (public)
05	Hospital – acute care (including psychiatric or specialist hospital) hospital (private)
06	Residential health care (e.g. residential aged care service, hospice, physical disabilities residential centre) facility (public)
07	Residential health care (e.g. residential aged care service, hospice, physical disabilities residential centre) facility (private)
08	Tertiary education institution (public)
09	Tertiary education institution (private)
10	Defence forces
11	Government department or agency (e.g. laboratory, research organisation etc.)
12	Private industry/private enterprise (e.g. insurance, pathology, bank)
13	Other (specified) Public
14	Other (specified) Private
99	Unknown/ inadequately described/not stated

Guide for use:

Establishments are coded into self reporting groupings in the public and private sectors. This can be seen below in the code list for medical practitioners.

Minor variations in ordering of sequence and disaggregation of the principal categories will be profession-specific as appropriate; where a more detailed set of codes is used, the essential criterion is that there should not be an overlap of the detailed codes across the Australian and New Zealand Standard Industrial Classification category definitions.

Note:

Public psychiatric hospitals are non-acute care facilities, whereas private psychiatric hospitals are acute care facilities. To minimise the possibility of respondent confusion and mis-reporting, public psychiatric hospitals are included in the grouping for acute care public hospitals.

Day surgery centres, outpatient clinics and medical centres approved as hospitals under the Health Insurance Act 1973 (Cwlth) have emerged as a new category for investigation. These will be included in a review of the National Health Labour Force Collection questions and coding frames.

Administrative attributes

Source organisation: National Health Labour Force Data Working Group

National minimum data sets:

Health labourforce

from 1/07/1989 to

Hospital

Admin. status: CURRENT 1/07/1994

Identifying and definitional attributes

Knowledgebase ID: 000064 Version number: 1

Data element type: DATA ELEMENT CONCEPT

Definition: A health care facility established under Commonwealth, State or Territory legislation as a hospital or a free-standing day procedure unit and authorised to provide treatment and/or care to patients.

Context: Admitted patient care:
Admitted patient palliative care:
Admitted patient mental health care:
Public hospital establishments:

Relational and representational attributes

Related data: relates to Establishment sector, version 3

Administrative attributes

Source organisation: National Health Data Committee

Comments: A hospital thus defined may be located at one physical site or may be a multi campus hospital. A multi campus hospital treats movements of patients between sites as ward transfers.

For the purposes of these definitions, the term hospital includes satellite units managed and staffed by the hospital.

This definition includes, but is not limited to, hospitals as recognised under Australian Health Care Agreements.

Residential aged care services as approved under the National Health Act 1953 (Cwlth) or equivalent State legislation are excluded from this definition.

This definition includes entities with multipurpose facilities (e.g. those which contain both recognised and non-recognised components).

Intensive care unit

Admin. status: CURRENT 1/07/1996

Identifying and definitional attributes

Knowledgebase ID: 000078 Version number: 1

Data element type: DATA ELEMENT CONCEPT

Definition: An intensive care unit (ICU) is a designated ward of a hospital which is specially staffed and equipped to provide observation, care and treatment to patients with actual or potential life-threatening illnesses, injuries or complications, from which recovery is possible. The ICU provides special expertise and facilities for the support of vital functions and utilises the skills of medical, nursing and other staff trained and experienced in the management of these problems.

Context: Admitted patient care:

Administrative attributes

Source organisation: National Intensive Care Working Group

Comments: There are five different types and levels of ICU defined according to three main criteria: the nature of the facility, the care process and the clinical standards and staffing requirements. All levels and types of ICU must be separate and self-contained facilities in hospitals and, for clinical standards and staffing requirements, substantially conform to relevant guidelines of the Australian Council on Healthcare Standards. The five types of ICU are briefly described below:

Adult intensive care unit, level 3: must be capable of providing complex, multisystem life support for an indefinite period; be a tertiary referral centre for patients in need of intensive care services and have extensive backup laboratory and clinical service facilities to support the tertiary referral role. It must be capable of providing mechanical ventilation, extracorporeal renal support services and invasive cardiovascular monitoring for an indefinite period; or care of a similar nature.

Adult intensive care unit, level 2: must be capable of providing complex, multisystem life support and be capable of providing mechanical ventilation, extracorporeal renal support services and invasive cardiovascular monitoring for a period of at least several days, or for longer periods in remote areas or care of a similar nature (see ACHS guidelines)

Adult intensive care unit, level 1: must be capable of providing basic multisystem life support usually for less than a 24 hour period. It must be capable of providing mechanical ventilation and simple invasive cardiovascular monitoring for a period of at least several hours; or care of a similar nature.

Paediatric intensive care unit: must be capable of providing complex, multisystem life support for an indefinite period; be a tertiary referral centre for children needing intensive care and have extensive backup laboratory and clinical service facilities to support this tertiary role. It must be capable of providing mechanical ventilation, extracorporeal renal support services and invasive cardiovascular monitoring for an indefinite period to infants and children less than 16 years of age; or care of a similar nature.

Comments (continued): Neonatal intensive care unit, level 3: must be capable of providing complex, multisystem life support for an indefinite period. It must be capable of providing mechanical ventilation and invasive cardiovascular monitoring; or care of a similar nature.

Definitions for high-dependency unit, coronary care unit are under development.

Treatment delivery setting for alcohol and other drugs

Admin. status: CURRENT 1/07/2001

Identifying and definitional attributes

Knowledgebase ID: 000646 Version number: 1

Data element type: DATA ELEMENT

Definition: The setting in which the main treatment is provided.

Context: Alcohol and other drug treatment services: Required to identify the settings in which treatment is occurring, allowing for trends in treatment patterns to be monitored.

Relational and representational attributes

Datatype: Numeric Field size: Min. 1 Max. 1 Layout: N

Data domain:

1	Non-residential treatment facility
2	Residential treatment facility
3	Home
4	Outreach setting
8	Other

Guide for use: Code 1 refers to any non-residential centre that provides alcohol and other drug treatment services, including hospital outpatient services and community health centres.

Code 2 refers to community-based settings in which clients reside either temporarily or long-term in a facility, that is not their home or usual place of residence, to receive alcohol and other drug treatment. This does not include ambulatory situations.

Code 3 refers to the client's own home or usual place of residence.

Code 4 refers to an outreach environment, excluding a client's home or usual place of residence, where treatment is provided. An outreach environment may be any public or private location that is not covered by codes 1–3. Mobile/outreach alcohol and other drug treatment service providers would usually provide treatment within this setting.

Verification rules: Only one code to be selected.

Related data: Related to the data element, Main treatment type for alcohol and other drugs, version 1.

Administrative attributes

Source organisation: Intergovernmental Committee on Drugs NMDS-WG

National minimum data sets:

Alcohol and other drug treatment services from 1/07/2001

Actual place of birth

Admin. status: CURRENT 1/07/1996

Identifying and definitional attributes

Knowledgebase ID: 000003 Version number: 1

Data element type: DATA ELEMENT

Definition: The actual place where the birth occurred.

Context: Perinatal: used to analyse the risk factors and outcomes by place of birth. While most deliveries occur within hospitals an increasing number of births now occur in other settings. It is important to monitor the births occurring outside hospitals and to ascertain whether or not the actual place of delivery was planned.

Relational and representational attributes

Datatype: Numeric Field size: Min. 1 Max. 1 Layout: N

Data domain:

1	Hospital, excluding birth centre
2	Birth centre, attached to hospital
3	Birth centre, free standing
4	Home
8	Other
9	Not stated

Guide for use: This is to be recorded for each baby the woman delivers from this pregnancy.
4 Home – should be reserved for those births that occur at the home intended
8 Other – use when birth occurs at a home other than that intended
– may also include a community health centre or be used for babies ‘born before arrival’

Related data: is a qualifier of Intended place of birth, version 1

Administrative attributes

Source organisation: National Perinatal Data Development Committee

National minimum data sets:

Perinatal from 1/07/2000 to

Comments: The development of a definition of a birth centre is currently under consideration by the Commonwealth in conjunction with the States and Territories.

Location immediately prior to admission to residential aged care

Admin. status: CURRENT 1/07/1989

Identifying and definitional attributes

Knowledgebase ID: 000084 Version number: 1

Data element type: DATA ELEMENT

Definition: Source from which the patient was transferred/referred to the hospital.

Context: Residential aged care service statistics: to assist in analyses of intersectoral patient flow and health care planning.

Relational and representational attributes

Datatype: Numeric Field size: Min. 1 Max. 1 Layout: N

Data domain:

1	Home (usual residence)
2	Home of relative (but not usual residence)
3	Hostel
4	Other residence
5	Acute hospital
6	Other hospital
7	Residential aged care service (check on transfers)
8	Other location
9	Unknown

Administrative attributes

Source organisation: National Health Data Committee

Place of occurrence of external cause of injury

Admin. status: CURRENT 1/07/2000

Identifying and definitional attributes

Knowledgebase ID: 000384 Version number: 5

Data element type: DATA ELEMENT

Definition: The place where the external cause of injury, poisoning or adverse effect occurred.

Context: Enables categorisation of injury and poisoning according to factors important for injury control. Necessary for defining and monitoring injury control targets, injury costing and identifying cases for in-depth research.

Relational and representational attributes

Datatype: Numeric Field size: Min. 1 Max. 2 Layout: NN

Data domain:

- 0 Home
- 1 Residential institution
- 2 School, other institution and public administrative area
- 21 School
- 22 Health service area
- 23 Building used by general public or public group
- 3 Sports and athletics area
- 4 Street and highway
- 5 Trade and service area
- 6 Industrial and construction area
- 7 Farm
- 8 Other specified places
- 9 Unspecified place

Guide for use: Admitted patients: Use the appropriate codes as fourth and fifth characters to Y92 when using the ICD-10-AM (2nd edition). Used with all ICD-10-AM external cause codes V01–Y89 and assigned according to the Australian Coding Standards.

Non-admitted patients: to be used for injury surveillance purposes for non-admitted patients when it is not possible to use ICD-10-AM codes. Select the code which best characterises the type of place where the person was situated when the injury occurred on the basis of the information available at the time it is recorded. If two or more categories are judged to be equally appropriate, select the one that comes first in the code list.

Verification rules: Admitted patients: to be used with ICD-10-AM (2nd edition) external cause codes V01–Y89.

Related data:

- supersedes previous data element Place of Occurrence of External Cause of Injury – admitted patient, version 4
- supersedes previous data element Place of Occurrence of External Cause of Injury – non-admitted patient, version 3
- used in conjunction with External Cause – admitted patient, version 4
- used in conjunction with External Cause – non-admitted patient, version 4

Administrative attributes

Source organisation: National Health Data Committee and National Centre for Classification in Health.

National minimum data sets:

Admitted patient care from 1/07/2000 to

Injury surveillance from 1/07/2000 to

State/Territory of birth

Admin. status: CURRENT 1/07/1996

Identifying and definitional attributes

Knowledgebase ID: 000155 Version number: 1

Data element type: DATA ELEMENT

Definition: The State/Territory in which the birth occurred.

Context: Perinatal: to enable analyses by State/Territory of delivery.

Relational and representational attributes

Datatype: Numeric Field size: Min. 1 Max. 1 Layout: N

Data domain:

0	Not applicable (includes resident overseas, no fixed address)
1	New South Wales
2	Victoria
3	Queensland
4	South Australia
5	Western Australia
6	Tasmania
7	Northern Territory
8	Australian Capital Territory
9	External Australian territories (Cocos (Keeling) Islands, Christmas Island and Jervis Bay Territory)

Administrative attributes

Source organisation: National Perinatal Data Development Committee

National minimum data sets:

Perinatal from 1/07/1997 to