

Glossary items

Activity—functioning, disability and health

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>Synonymous names:</i>	Activity
<i>METeOR identifier:</i>	327296
<i>Registration status:</i>	Health, Standard 29/11/2006 Community services, Standard 01/03/2005
<i>Definition:</i>	In the context of health, an activity is the execution of a task or action by an individual.
<i>Context:</i>	<p>'Activities and participation' is one of three components that define the concept 'Disability', along with 'Body functions and structures' and 'Environmental factors'. 'Activities and participation' is also encompassed within the concept 'Functioning'.</p> <p>The concept 'Activity', as defined here and as measured in the metadata item Activity difficulty level code (ICF) N, may be relevant to people and human services not related to disability.</p>

Collection and usage attributes

<i>Comments:</i>	<p>Activity limitations are difficulties an individual has in the execution of an activity.</p> <p>The performance of an activity is what the individual does in his or her current environment. The environment includes all aspects of the physical, social and attitudinal world. Activity limitation varies with the environment and is assessed in relation to a particular environment and in the absence or presence of assistance, including aids and equipment.</p> <p>In time, a related and more generic data element may be developed. In the meantime, the addition of 'functioning, disability and health' to the concept of 'ability' indicates that the current concept is based on the concept and framework developed by World Health Organization to assist in the classification and description of functioning and disability, as contained in the ICF.</p> <p>The ICF recognises two constructs that can be used with 'Activities and Participation': performance and capacity. 'Performance' is what the person does in their usual environment. 'Capacity' describes 'an individual's ability to execute a task or an action in a standardised environment, where a standardised environment may be:</p> <ul style="list-style-type: none">• an actual environment commonly used for assessment in test settings; or• in cases where this is not possible, an assumed environment which can be thought to have a uniform impact' (WHO 2001). <p>The standardised environment has not been generally operationalised. However, the recognition of these two constructs in the ICF underscores the importance of recording the environment in which activities are being performed.</p>
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This glossary item is based on the International Classification of Functioning, Disability and Health (ICF). The ICF was endorsed by the World Health Assembly in 2001 as a reference member of the WHO Family of International Classifications and of the Australian Family of Health and Related Classifications (endorsed by the National Health Information Management Group in 2002).

The ICF provides a framework for the description of human functioning and disability. The components of ICF are defined in relation to a health condition. A health condition is an 'umbrella term for disease (acute or chronic), disorder, injury or trauma' (WHO 2001). A health condition may be recorded, for example, as Episode of care principal diagnosis, code (ICD-10-AM 3rd Ed) ANN{.N[N]} and Episode of care additional diagnosis, code (ICD-10-AM 3rd Ed) ANN{.N[N]}.

Source and reference attributes

Origin:

World Health Organization (WHO) 2001. ICF: International Classification of Functioning, Disability and Health. Geneva: WHO

Australian Institute of Health and Welfare (AIHW) 2003. ICF Australian User Guide Version 1.0. Canberra: AIHW

Reference documents:

Further information on the ICF can be found in the ICF itself and the ICF Australian User Guide (AIHW 2003) and the following websites

- WHO ICF website
<http://www.who.int/classifications/icf/en>
- Australian Collaborating Centre ICF website
<http://www.aihw.gov.au/disability/icf/index.html>

Relational attributes

Related metadata references:

Supersedes [Activity - functioning, disability and health, version 1, DEC, NCSDD, NCSIMG, Superseded 01/03/2005.pdf](#) (17.9 KB)

Metadata items which use this glossary item:

Activities and participation code (ICF 2001) AN[NNN] Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Activity difficulty level code (ICF 2001) N Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Disability Health, Standard 29/11/2006

Community services, Standard 01/03/2005

Housing assistance, Standard 01/03/2005

Extent of environmental factors influence code (ICF 2001) [X]N Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Functioning and Disability DSS Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Address

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327278
<i>Registration status:</i>	Health, Standard 01/03/2005 Community services, Standard 08/05/2006
<i>Definition:</i>	The referential description of a location where an entity is located or can be otherwise reached or found.

Collection and usage attributes

Comments: Following are the attributes are commonly used in the formation of a full address:

- Address line; (address line is a composite data element containing many attributes of the specific location of a full address - see the current version of the Address line metadata item for further description and a list of its components for addresses located in Australia)
- Address type
- Australian state/territory identifier
- Country identifier
- Non-Australian State/province
- Postal delivery point identifier
- Postcode - Australian
- Postcode - international
- Suburb/town/locality

Some attributes of an address, located within Australia, also provide the elements to determine the **Statistical Local Area (SLA)**. This enables:

- comparison of the use of services by persons residing in different geographical areas,
- characterisation of catchment areas and populations for facilities for planning purposes, and
- documentation of provision of services to clients who reside in other states or territories. The address is also a relevant element in the unambiguous identification of a Health Care Client and a Health Care Provider.

Source and reference attributes

<i>Submitting organisation:</i>	Health Data Standards Committee
<i>Reference documents:</i>	AS5017 Health Care Client Identification, 2002, Sydney: Standards Australia AS4846 Health Care Provider Identification, 2004, Sydney: Standards Australia

Relational attributes

Related metadata references:

Supersedes [Address, version 2, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf](#) (15.3 KB)

Metadata items which use this glossary item:

Person (address) – address line, text [X(180)] Health, Standard 04/05/2005

Community services, Standard 30/09/2005

Service provider organisation (address) – address line, text [X(180)] Health, Standard 04/05/2005

Community services, Standard 30/09/2005

Administrative and clerical staff

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327166
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Staff engaged in administrative and clerical duties. Medical staff and nursing staff, diagnostic and health professionals and any domestic staff primarily or partly engaged in administrative and clerical duties are excluded. Civil engineers and computing staff are included in this category.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment (mental health) – recurrent expenditure (total salaries and wages) (financial year), total Australian currency N[N(8)] Health, Standard 08/12/2004
	Establishment – full-time equivalent staff (paid) (administrative and clerical staff) Health, Standard 01/03/2005
	Establishment – full-time equivalent staff (paid) (administrative and clerical staff), average N[NNN{.N}] Health, Standard 01/03/2005
	Establishment – recurrent expenditure (salaries and wages) (administrative and clerical staff) (financial year), total Australian currency N[N(8)] Health, Standard 01/03/2005

Admission

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327206
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	<p>Admission is the process whereby the hospital accepts responsibility for the patient's care and/or treatment. Admission follows a clinical decision based upon specified criteria that a patient requires same-day or overnight care or treatment. An admission may be formal or statistical.</p> <p>Formal admission:</p> <p>The administrative process by which a hospital records the commencement of treatment and/or care and/or accommodation of a patient.</p> <p>Statistical admission:</p> <p>The administrative process by which a hospital records the commencement of a new episode of care, with a new care type, for a patient within one hospital stay.</p>
<i>Context:</i>	Admitted patient care

Collection and usage attributes

<i>Comments:</i>	This treatment and/or care provided to a patient following admission occurs over a period of time and can occur in hospital and/or in the person's home (for hospital-in-the-home patients).
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Source and reference attributes

<i>Submitting organisation:</i>	National Health Data Committee
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Relational attributes

<i>Related metadata references:</i>	Supersedes Admission, version 3, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (14.0 KB)
<i>Metadata items which use this glossary item:</i>	<p>Accommodation type prior to admission code N Health, Standard 01/03/2005</p> <p>Acute hospital and private psychiatric hospital admission labour force status code N Health, Standard 01/03/2005</p> <p>Admission urgency status Health, Standard 01/03/2005</p> <p>Admission urgency status code N Health, Standard 01/03/2005</p> <p>Admitted patient Health, Standard 01/03/2005</p> <p>Admitted patient care NMDS Health, Superseded 07/12/2005</p> <p>Admitted patient care NMDS 2006-2007 Health, Superseded 23/10/2006</p> <p>Admitted patient care NMDS 2007-2008 Health, Superseded 05/02/2008</p> <p>Admitted patient care NMDS 2008-2009 Health, Superseded 04/02/2009</p>

Admitted patient care NMDS 2009-2010 Health, Superseded 22/12/2009

Admitted patient care NMDS 2010-2011 Health, Standard 22/12/2009

Admitted patient hospital stay Health, Standard 01/03/2005

Clinical urgency code N Health, Standard 01/03/2005

Episode of admitted patient care – admission urgency status Health, Standard 01/03/2005

Episode of admitted patient care – admission urgency status, code N Health, Standard 01/03/2005

Episode of admitted patient care – elected accommodation status Health, Superseded 28/11/2006

Episode of admitted patient care – elected accommodation status, code N Health, Superseded 23/10/2006

Episode of admitted patient care – intended length of hospital stay Health, Standard 01/03/2005

Episode of admitted patient care – intended length of hospital stay, code N Health, Standard 01/03/2005

Episode of admitted patient care – patient election status Health, Standard 28/11/2006

Episode of admitted patient care – patient election status, code N Health, Standard 23/10/2006

Episode of care – funding eligibility indicator (Department of Veterans Affairs), code N Health, Standard 01/03/2005

Establishment – specialised service indicator (geriatric assessment unit), yes/no code N Health, Standard 01/03/2005

Health or health related function code NNN Health, Standard 05/12/2007

Non-admitted patient Health, Standard 01/03/2005

Non-admitted patient emergency department service episode – waiting time (to hospital admission) Health, Standard 01/03/2005

Non-admitted patient emergency department service episode – waiting time (to hospital admission), total hours and minutes NNNN Health, Standard 01/03/2005

Nursing diagnosis Health, Standard 01/03/2005

Patient – previous specialised treatment Health, Standard 01/03/2005

Patient – previous specialised treatment, code N Health, Standard 01/03/2005

Person – accommodation type (prior to admission), code N Health, Standard 01/03/2005

Person – labour force status, acute hospital and private psychiatric hospital admission code N Health, Standard 01/03/2005

Person – labour force status, public psychiatric hospital admission code N Health, Standard 01/03/2005

Person – reason for readmission following acute coronary syndrome episode Health, Standard 01/10/2008

Person – reason for readmission following acute coronary syndrome episode Health, Standard 04/06/2004

Person – reason for readmission following acute coronary syndrome episode, code N[N] Health, Standard 01/10/2008

Person – reason for readmission following acute coronary syndrome episode, code N[N] Health, Superseded 01/10/2008

Previous specialised treatment code N Health, Standard 01/03/2005

Public psychiatric hospital admission labour force status code N Health, Standard 01/03/2005

Reason for readmission following acute coronary syndrome episode code N[N] Health, Standard 01/10/2008

Reason for readmission following acute coronary syndrome episode code N[N] Health, Superseded 01/10/2008

Scheduled admission date Health, Standard 01/03/2005

Adoption

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327208
<i>Registration status:</i>	Community services, Standard 01/03/2005 Health, Standard 01/03/2005
<i>Definition:</i>	Adoption is the legal process by which a person legally becomes a child of the adoptive parents and legally ceases to be a child of his/her existing parents.
<i>Context:</i>	Children and family services.

Collection and usage attributes

<i>Comments:</i>	The adoption order severs the legal relationship between the biological parents and the child. A new birth certificate is issued to the child bearing the name(s) of his/her adoptive parent(s) as the natural parent(s) and the new name of the child, where a change has occurred.
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Source and reference attributes

<i>Submitting organisation:</i>	Australian Institute of Health and Welfare (AIHW)
<i>Origin:</i>	Adoptions Australia (AIHW). <i>Data collection standards, tables and counting rules</i> , 1998-99.

Relational attributes

<i>Related metadata references:</i>	Supersedes Adoption, version 2, DEC, NCSDD, NCSIMG, Superseded 01/03/2005.pdf (12.3 KB)
<i>Metadata items which use this glossary item:</i>	Person (name) – family name, text X[X(39)] Health, Superseded 04/05/2005 Community services, Superseded 25/08/2005 Person (name) – family name, text X[X(39)] Health, Standard 04/05/2005 Community services, Standard 25/08/2005 Housing assistance, Standard 20/06/2005

Ambulatory care

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	354366
<i>Registration status:</i>	Health, Standard 05/12/2007
<i>Definition:</i>	Care provided to hospital patients who are not admitted to the hospital, such as patients of emergency departments and outpatient clinics . The term is also used to refer to care provided to patients of community-based (non-hospital) health care services.

Source and reference attributes

<i>Submitting organisation:</i>	Health Expenditure Advisory Committee
<i>Origin:</i>	AIHW 2007. Mental health services in Australia 2004–05. AIHW cat. no. HSE 47. Canberra: AIHW (Mental Health Series no. 9).

Relational attributes

<i>Metadata items which use this glossary item:</i>	Health industry relevant organisation type code NNN Health, Standard 01/04/2009
	Health industry relevant organisation type code NNN Health, Superseded 01/04/2009
	Health or health related function code NNN Health, Standard 05/12/2007

Assistance with activities and participation

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327298
<i>Registration status:</i>	Health, Standard 29/11/2006 Community services, Standard 01/03/2005
<i>Definition:</i>	The help that a person receives or needs from another person, because of their difficulty in performing an activity or in participating in an area of life.
<i>Context:</i>	<p>'Assistance' is an important subset of Environmental factors that may facilitate (or hinder) the activities or participation of people with disability. Assistance is a key policy and service component in the disability and aged care services field in Australia. Further, it is recognised in the ICF as a crucial factor whose presence (or absence) must be noted when recording measures of functioning and disability.</p> <p>Recording measures of assistance needed or provided will provide further information about activity limitations.</p>

Collection and usage attributes

<i>Comments:</i>	<p>The concept can be used to describe aspects of the environment. Depending on which environment is present or being considered, the measure of assistance indicates what assistance is currently received (in the current or usual environment) and what would be needed (in an optimum environment). 'Need' more generally relates to environmental factors (including personal assistance, equipment and environmental modifications) that are present in an optimum environment but not in the person's current environment. That is, changes may be needed to environmental factors in order to improve a person's functioning and reduce their disability. While these ideas apply generally to 'Environmental Factors' and the related metadata item, Extent of environmental factors influence code [X]N, the concept of 'Assistance' focuses solely on the factor of personal assistance.</p> <p>Measures of assistance and need for assistance are under active development in a number of disciplines and service programs. Assistance may be measured in various ways, for instance in relation to duration, frequency and intensity of assistance. Related data elements are therefore likely to emerge in the future.</p> <p>This glossary item is based on the International Classification of Functioning, Disability and Health (ICF). The ICF was endorsed by the World Health Assembly in 2001 as a reference member of the WHO Family of International Classifications and of the Australian Family of Health and Related Classifications (endorsed by the National Health Information Management Group in 2002).</p> <p>The ICF provides a framework for the description of human functioning and disability. The components of ICF are defined in relation to a health condition. A health condition is an 'umbrella</p>
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term for disease (acute or chronic), disorder, injury or trauma' (WHO 2001). A health condition may be recorded, for example, as Episode of care principal diagnosis, code (ICD-10-AM 3rd Ed) ANN{.N[N]} and Episode of care additional diagnosis, code (ICD-10-AM 3rd Ed) ANN{.N[N]}.

Source and reference attributes

Origin:

World Health Organization (WHO) 2001. ICF: International Classification of Functioning, Disability and Health. Geneva: WHO

Australian Institute of Health and Welfare (AIHW) 2003. ICF Australian User Guide Version 1.0. Canberra: AIHW

Reference documents:

Further information on the ICF can be found in the ICF itself and the ICF Australian User Guide (AIHW 2003) and the following websites

- WHO ICF website
<http://www.who.int/classifications/icf/en>
- Australian Collaborating Centre ICF website
<http://www.aihw.gov.au/disability/icf/index.html>

Relational attributes

Related metadata references:

Supersedes [Assistance with activities and participation, version 1, DEC, NCSDD, NCSIMG, Superseded 01/03/2005.pdf](#) (17.4 KB)

Metadata items which use this glossary item:

Activity difficulty level code (ICF 2001) N Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Average for the counting period

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	373642
<i>Registration status:</i>	Health, Standard 03/12/2008
<i>Definition:</i>	The average for the counting period is calculated by summing all the individual counts and dividing it by the number of periods for which a count was taken. For the reporting year, if a count was taken n times, the average is calculated as the SUM (Count1 + Count2 + ...Countn) DIVIDED by n. A reporting year is a financial year. It begins on 1 July and ends on 30 June of the following year.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Available bed – neonatal admitted care (Non-special-care), average number of beds N[NNN.N] Health, Standard 03/12/2008
	Available bed – overnight-stay admitted care, average number of beds N[NNN.N] Health, Standard 03/12/2008
	Available bed – residential mental health care, average number of beds N[NNN.N] Health, Standard 03/12/2008
	Available bed – same-day admitted care, average number of beds N[NNN.N] Health, Standard 03/12/2008

Birthweight

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327212
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	<p>The first weight of the fetus or baby obtained after birth. The World Health Organization further defines the following categories:</p> <ul style="list-style-type: none">• extremely low birthweight: less than 1,000 grams (up to and including 999 grams),• very low birthweight: less than 1,500 grams (up to and including 1,499 grams),• low birthweight: less than 2,500 grams (up to and including 2,499 grams).
<i>Context:</i>	Perinatal

Collection and usage attributes

<i>Comments:</i>	<p>The definitions of low, very low, and extremely low birthweight do not constitute mutually exclusive categories. Below the set limits they are all-inclusive and therefore overlap (i.e. low includes very low and extremely low, while very low includes extremely low).</p> <p>For live births, birthweight should preferably be measured within the first hour of life before significant postnatal weight loss has occurred. While statistical tabulations include 500 gram groupings for birthweight, weights should not be recorded in those groupings. The actual weight should be recorded to the degree of accuracy to which it is measured.</p>
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Source and reference attributes

<i>Submitting organisation:</i>	National Perinatal Data Development Committee
<i>Origin:</i>	International Classification of Diseases and Related Health Problems, 10th Revision, WHO, 1992

Relational attributes

<i>Related metadata references:</i>	Supersedes Birthweight, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005 .pdf (14.0 KB)
<i>Metadata items which use this glossary item:</i>	Birth Health, Standard 01/03/2005
	Birth event – birth plurality, code N Health, Standard 01/03/2005
	Birth order Health, Standard 01/03/2005
	Birth status code N Health, Standard 01/03/2005
	Birth – birth weight, total grams NNNN Health, Standard 01/03/2005
	Female – number of previous pregnancies (spontaneous abortion), total NN Health, Standard 01/03/2005

Female – number of previous pregnancies (stillbirth), total N[N]
Health, Standard 01/03/2005

Pregnancy (last previous) – pregnancy completion date,
DDMMYYYY Health, Standard 01/03/2005

Blood pressure

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327210
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	The pressure exerted by blood against the walls of the blood vessels - i.e. arteries, capillaries or veins.

Source and reference attributes

<i>Submitting organisation:</i>	Cardiovascular Data Working Group
<i>Origin:</i>	Australian Institute of Health and Welfare (AIHW) 2001. Heart, stroke and vascular diseases-Australian facts 2001. Canberra: AIHW. National Heart Foundation of Australia. National Stroke Foundation of Australia.

Relational attributes

<i>Related metadata references:</i>	Supersedes Blood pressure - concept, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005 .pdf (12.3 KB)
<i>Metadata items which use this glossary item:</i>	Adult – body mass index Health, Standard 01/03/2005 Person – blood pressure (diastolic) Health, Standard 01/03/2005 Person – blood pressure (diastolic) (measured), millimetres of mercury NN[N] Health, Standard 01/03/2005 Person – blood pressure (systolic) Health, Standard 01/03/2005 Person – blood pressure (systolic) (measured), millimetres of mercury NN[N] Health, Standard 01/03/2005 Person – hypertension treatment status (antihypertensive medication) Health, Superseded 21/09/2005 Person – hypertension treatment with antihypertensive medication indicator Health, Standard 21/09/2005

Body functions

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327294
<i>Registration status:</i>	Health, Standard 29/11/2006 Community services, Standard 16/10/2006
<i>Definition:</i>	Body functions are the physiological functions of body systems (including psychological functions).

Collection and usage attributes

<i>Guide for use:</i>	<p>Body functions are organised according to body systems. The term 'body' refers to the human organism as a whole and includes mental or psychological functions.</p> <p>Body functions are classified in neutral terms. To indicate that there is a problem with a body function requires the use of the impairment extent code to denote the extent or magnitude of the problem together with the body functions code</p>
<i>Comments:</i>	<p>This glossary item is based on the International Classification of Functioning, Disability and Health (ICF). The ICF was endorsed by the World Health Assembly in 2001 as a reference member of the WHO Family of International Classifications and of the Australian Family of Health and Related Classifications (endorsed by the National Health Information Management Group in 2002).</p> <p>The ICF provides a framework for the description of human functioning and disability. The components of the ICF are defined in relation to a health condition. A health condition is an 'umbrella term for disease (acute or chronic), disorder, injury or trauma' (WHO 2001). A health condition may be recorded, for example, as Episode of care principal diagnosis, code (ICD-10-AM 3rd ed) ANN{.N[N]} and Episode of care additional diagnosis, code (ICD-10-AM 3rd ed) ANN{.N[N]}.</p>

Source and reference attributes

<i>Origin:</i>	<p>World Health Organization (WHO) 2001. ICF: International Classification of Functioning, Disability and Health. Geneva: WHO</p> <p>Australian Institute of Health and Welfare (AIHW) 2003. ICF Australian User Guide Version 1.0. Canberra: AIHW</p>
<i>Reference documents:</i>	<p>Further information on the ICF can be found in the ICF itself and the ICF Australian User Guide (AIHW 2003) and the following websites:</p> <ul style="list-style-type: none">• WHO ICF website http://www.who.int/classifications/icf/en/• Australian Collaborating Centre ICF website http://www.aihw.gov.au/disability/icf/index.html

Relational attributes

*Metadata items which use this
glossary item:*

Body function code (ICF 2001) AN[NNNN] Health, Standard
29/11/2006

Community services, Standard 16/10/2006

Functioning and Disability DSS Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Body structures

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327300
<i>Registration status:</i>	Health, Standard 29/11/2006 Community services, Standard 16/10/2006
<i>Definition:</i>	Body structures are anatomical parts of the body such as organs, limbs and their components.

Collection and usage attributes

Guide for use: Body structures are classified according to body systems. **Impairments of body structure** can involve anomaly, defect, loss and significant deviation. These are identified by use of the impairment extent, impairment location and impairment nature codes.

Comments: This glossary term is based on the International Classification of Functioning, Disability and Health (ICF). The ICF was endorsed by the World Health Assembly in 2001 as a reference member of the WHO Family of International Classifications and of the Australian Family of Health and Related Classifications (endorsed by the National Health Information Management Group in 2002).

The ICF provides a framework for the description of human functioning and disability. The components of ICF are defined in relation to a health condition. A health condition is an 'umbrella term for disease (acute or chronic), disorder, injury or trauma' (WHO 2001). A health condition may be recorded, for example, as Episode of care principal diagnosis, code (ICD-10-AM 3rd ed) ANN{.N[N]} and Episode of care additional diagnosis, code (ICD-10-AM 3rd ed) ANN{.N[N]}.

Source and reference attributes

Origin: World Health Organization (WHO) 2001. International Classification of Functioning, Disability and Health. Geneva: WHO
Australian Institute of Health and Welfare (AIHW) 2003. ICF Australian User Guide Version 1.0. Canberra: AIHW

Reference documents: Further information on the ICF can be found in the ICF itself and the ICF Australian User Guide (AIHW 2003) and the following websites

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<http://www.who.int/classifications/icf/en>
- Australian Collaborating Centre ICF website
<http://www.aihw.gov.au/disability/icf/index.html>

Relational attributes

Metadata items which use this glossary item: Functioning and Disability DSS Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Carer consultant

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327330
<i>Registration status:</i>	Health, Standard 08/12/2004
<i>Definition:</i>	Carer consultants are persons employed (or engaged via contract) on a part-time or full-time paid basis to represent the interests of carers and advocate for their needs.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (carer consultants) Health, Standard 08/12/2004
	Establishment – full-time equivalent staff (paid) (carer consultants), average N[NNN{.N}] Health, Standard 08/12/2004
	Establishment – recurrent expenditure (salaries and wages) (carer consultants) (financial year), total Australian currency N[N(8)] Health, Standard 08/12/2004

Cessation of treatment episode for alcohol and other drugs

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327302
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Cessation of a treatment episode occurs when treatment is completed or discontinued; or there has been a change in the principal drug of concern, the main treatment type, or the treatment delivery setting.
<i>Context:</i>	Alcohol and other drug treatment services

Collection and usage attributes

<i>Guide for use:</i>	<p>A client is identified as ceasing a treatment episode if one or more of the following apply:</p> <ul style="list-style-type: none">• their treatment plan is completed,• they have had no contact with the treatment provider for a period of three months, nor is there a plan in place for further contact,• their principal drug of concern for alcohol and other drugs has changed,• their main treatment type for alcohol and other drugs has changed,• their treatment delivery setting for alcohol and other drugs has changed,• their treatment has ceased for other reasons (e.g. imprisoned, ceased treatment against advice, transferred to another service provider, died, etc.).
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Source and reference attributes

<i>Submitting organisation:</i>	Intergovernmental Committee on Drugs National Minimum Data Set working group
<i>Origin:</i>	

Relational attributes

<i>Related metadata references:</i>	Supersedes Cessation of treatment episode for alcohol and other drugs, version 2, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (13.8 KB)
<i>Metadata items which use this glossary item:</i>	Episode of treatment for alcohol and other drugs – treatment cessation date, DDMMYYYY Health, Standard 01/03/2005

Clinical intervention

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327220
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	An intervention carried out to improve, maintain or assess the health of a person, in a clinical situation.
<i>Context:</i>	Health services: Information about the surgical and non-surgical interventions provides the basis for analysis of health service usage, especially in relation to specialised resources, for example theatres and equipment or human resources.

Collection and usage attributes

<i>Comments:</i>	Clinical interventions include invasive and non-invasive procedures, and cognitive interventions. Invasive: (a) Therapeutic interventions where there is a disruption of the epithelial lining generally, but not exclusively, with an implied closure of an incision (e.g. operations such as cholecystectomy or administration of a chemotherapeutic drug through a vascular access device); (b) Diagnostic interventions where an incision is required and/or a body cavity is entered (e.g. laparoscopy with/without biopsy, bone marrow aspiration). Non-invasive: Therapeutic or diagnostic interventions undertaken without disruption of an epithelial lining (e.g. lithotripsy, hyperbaric oxygenation; allied health interventions such as hydrotherapy; diagnostic interventions not requiring an incision or entry into a body part such as pelvic ultrasound, diagnostic imaging). Cognitive: An intervention which requires cognitive skills such as evaluating, advising, planning (e.g. dietary education, physiotherapy assessment, crisis intervention, bereavement counselling).
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Source and reference attributes

<i>Submitting organisation:</i>	National Health Data Committee.
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Relational attributes

<i>Related metadata references:</i>	Supersedes Clinical intervention, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (13.9 KB)
<i>Metadata items which use this glossary item:</i>	Episode of admitted patient care – procedure Health, Standard 01/03/2005

Clinical review

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327214
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	The examination of a patient by a clinician after the patient has been added to the elective care waiting list. This examination may result in the patient being assigned a different urgency rating from the initial classification. The need for clinical review varies with a patient's condition and is therefore at the discretion of the treating clinician.
<i>Context:</i>	Admitted patient care.

Source and reference attributes

<i>Submitting organisation:</i>	Hospital Access Program Waiting List Working Group National Health Data Committee
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Relational attributes

<i>Related metadata references:</i>	Supersedes Clinical review, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (12.0 KB)
<i>Metadata items which use this glossary item:</i>	Elective care waiting list episode – category reassignment date Health, Standard 01/03/2005 Elective care waiting list episode – category reassignment date, DDMMYYYY Health, Standard 01/03/2005 Elective surgery waiting list episode – clinical urgency, code N Health, Standard 01/03/2005 Elective surgery waiting list episode – patient listing status, readiness for care code N Health, Standard 01/03/2005

Compensable patient

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327420
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	<p>A compensable patient is a person who:</p> <ul style="list-style-type: none">• is entitled to claim damages under Motor Vehicle Third Party insurance or• is entitled to claim damages under worker's compensation or• has an entitlement to claim under public liability or common law damages.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Patient – compensable status, code N Health, Standard 01/03/2005
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Consultant psychiatrist

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327332
<i>Registration status:</i>	Health, Standard 08/12/2004
<i>Definition:</i>	Medical officers who are registered to practice psychiatry under the relevant state or territory Medical Registration Board; or who are fellows of the Royal Australian and New Zealand College of Psychiatrists or registered with Health Insurance Commission as a specialist in Psychiatry.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (consultant psychiatrists and psychiatrists) Health, Standard 08/12/2004
	Establishment – full-time equivalent staff (paid) (consultant psychiatrists and psychiatrists), average N[NNN{.N}] Health, Standard 08/12/2004
	Establishment – recurrent expenditure (salaries and wages) (consultant psychiatrists and psychiatrists) (financial year), total Australian currency N[N(8)] Health, Standard 08/12/2004

Consumer consultant

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327336
<i>Registration status:</i>	Health, Standard 08/12/2004
<i>Definition:</i>	Consumer consultants are persons employed (or engaged via contract) on a part-time or full-time paid basis to represent the interests of consumers and advocate for their needs.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (consumer consultants) Health, Standard 08/12/2004
	Establishment – full-time equivalent staff (paid) (consumer consultants), average N[NNN{.N}] Health, Standard 08/12/2004
	Establishment – recurrent expenditure (salaries and wages) (consumer consultants) (financial year), total Australian currency N[N(8)] Health, Standard 08/12/2004

Diagnosis

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327224
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	A diagnosis is the decision reached, after assessment, of the nature and identity of the disease or condition of a patient or recipient of residential care (resident).
<i>Context:</i>	Health services: Diagnostic information provides the basis for analysis of health service usage, epidemiological studies and monitoring of specific disease entities.

Collection and usage attributes

<i>Comments:</i>	Classification systems which enable the allocation of a code to the diagnostic information: <ul style="list-style-type: none">• International Classification of Diseases, Tenth Revision, Australian Modification (ICD-10-AM),• British Paediatric Association Classification of Diseases,• North America Nursing Diagnosis Association,• International Classification of Primary Care International,• Classification of Impairments, Disabilities and Handicaps,• International Classification of Functioning.
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Source and reference attributes

<i>Submitting organisation:</i>	National Data Standards Committee
<i>Origin:</i>	

Relational attributes

<i>Related metadata references:</i>	Supersedes Diagnosis, version 2, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (14.7 KB)
<i>Metadata items which use this glossary item:</i>	Admitted patient care NMDS Health, Superseded 07/12/2005 Admitted patient care NMDS 2006-2007 Health, Superseded 23/10/2006 Admitted patient care NMDS 2007-2008 Health, Superseded 05/02/2008 Admitted patient care NMDS 2008-2009 Health, Superseded 04/02/2009 Admitted patient care NMDS 2009-2010 Health, Superseded 22/12/2009 Admitted patient care NMDS 2010-2011 Health, Standard 22/12/2009 Person – visual acuity (left eye), code NN Health, Standard 01/03/2005

Person – visual acuity (right eye), code NN Health, Standard
01/03/2005

Diagnostic and health professional

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327164
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Qualified staff (other than qualified medical and nursing staff) engaged in duties of a diagnostic, professional or technical nature (but also including diagnostic and health professionals whose duties are primarily or partly of an administrative nature). This category includes all allied health professionals and laboratory technicians (but excludes civil engineers and computing staff).

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (diagnostic and health professionals) Health, Standard 01/03/2005
	Establishment – full-time equivalent staff (paid) (diagnostic and health professionals), average N[NNN{.N}] Health, Standard 01/03/2005
	Establishment – recurrent expenditure (salaries and wages) (diagnostic and health professionals) (financial year), total Australian currency N[N(8)] Health, Standard 01/03/2005

Disability

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327304
<i>Registration status:</i>	Health, Standard 29/11/2006 Community services, Standard 01/03/2005 Housing assistance, Standard 01/03/2005
<i>Definition:</i>	<p>Disability is the umbrella term for any or all of: an impairment of body structure or function, a limitation in activities, or a restriction in participation.</p> <p>Disability is a multi-dimensional and complex concept and is conceived as a dynamic interaction between health conditions and environmental and personal factors (WHO 2001:6).</p>

Collection and usage attributes

<i>Comments:</i>	<p>Many different 'definitions' of disability are used in Australia, both in administrative data collections and in Acts of Parliament. The consistent identification of disability in national data collections has been recommended in a number of reports, for instance to enable:</p> <ul style="list-style-type: none">• the monitoring of access to generic services by people with disability;• the collection of more consistent data on disability support and related services, including data on service use by different groups;• population data and service data to be related, thereby improving the nation's analytical capacity in relation to the need for and supply of services; and• improved understanding of the relationship between disability, health conditions and other health outcomes. <p>Defining disability makes it possible to determine the number of people who are accessing services, both disability specific and generic, and also those with a disability in the general population with unmet need. Better definition of disability will aid better targeting of resources to those in need.</p> <p>Disability arises from the interaction between health conditions and environmental and personal factors. A health condition may be a disease (acute or chronic), disorder, injury or trauma. Environmental factors make up the physical, social and attitudinal environment in which people live and conduct their lives. Personal factors relate to the individual, such as age, sex and Indigenous status.</p> <p>The concept 'Disability' can be described using a combination of related metadata items as building blocks.</p> <p>The metadata items selected may vary depending on the definition of disability used. For example, in hospital rehabilitation, the focus may be on the impairment and activity</p>
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dimensions and in community-based care the focus may be primarily on participation. Some applications may require a broad scope for inclusion (e.g. discrimination legislation). Data collections relating to services will select combinations of the data elements, which best reflect the eligibility criteria for the service.

This glossary item is based on the International Classification of Functioning, Disability and Health (ICF). The ICF was endorsed by the World Health Assembly in 2001 as a reference member of the WHO Family of International Classifications and of the Australian Family of Health and Related Classifications (endorsed by the National Health Information Management Group in 2002).

The ICF provides a framework for the description of human functioning and disability. The components of ICF are defined in relation to a health condition. A health condition is an 'umbrella term for disease (acute or chronic), disorder, injury or trauma' (WHO 2001). A health condition may be recorded, for example, as Episode of care principal diagnosis, code (ICD-10-AM 3rd Edn) ANN{.N[N]} and Episode of care additional diagnosis, code (ICD-10-AM 3rd Edn) ANN{.N[N]}.

Source and reference attributes

Origin:

World Health Organization (WHO) 2001. ICF: International Classification of Functioning, Disability and Health. Geneva: WHO

Australian Institute of Health and Welfare (AIHW) 2003. ICF Australian User Guide Version 1.0. Canberra: AIHW

Reference documents:

Further information on the ICF can be found in the ICF itself and the ICF Australian User Guide (AIHW 2003) and the following websites

- WHO ICF website
<http://www.who.int/classifications/icf/en>
- Australian Collaborating Centre ICF website
<http://www.aihw.gov.au/disability/icf/index.html>

Relational attributes

Metadata items which use this glossary item:

Activities and participation code (ICF 2001) AN[NNN] Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Activity difficulty level code (ICF 2001) N Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Activity need for assistance code N Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Body function code (ICF 2001) AN[NNNN] Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Body structure code (ICF 2001) AN[NNNN] Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Environmental factor code (ICF 2001) AN[NNN] Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Extent of environmental factors influence code (ICF 2001) [X]N Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Functioning and Disability DSS Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Goal of care code NN Health, Standard 01/03/2005

Impairment extent code (ICF 2001) N Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Impairment location code (ICF 2001) N Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Impairment nature code (ICF 2001) N Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Participation extent code (ICF 2001) N Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Participation satisfaction level code N Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Domestic and other staff

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327168
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Domestic staff are staff engaged in the provision of food and cleaning services including domestic staff primarily engaged in administrative duties such as food services manager. Dieticians are excluded. This category also includes all staff not elsewhere included (primarily maintenance staff, trades people and gardening staff).

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (domestic and other staff) Health, Standard 01/03/2005
	Establishment – full-time equivalent staff (paid) (domestic and other staff), average N[NNN{.N}] Health, Standard 01/03/2005
	Establishment – recurrent expenditure (salaries and wages) (domestic and other staff) (financial year), total Australian currency N[N(8)] Health, Standard 01/03/2005

Elective surgery

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327226
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Elective care where the procedures required by patients are listed in the surgical operations section of the Medicare benefits schedule book, with the exclusion of specific procedures frequently done by non-surgical clinicians.
<i>Context:</i>	Admitted patient care.

Source and reference attributes

<i>Submitting organisation:</i>	Hospital access program waiting list working group
<i>Origin:</i>	The National Health Data Committee.

Relational attributes

<i>Related metadata references:</i>	Supersedes Elective surgery, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (11.7 KB)
<i>Metadata items which use this glossary item:</i>	Coronary artery disease intervention code N Health, Standard 01/03/2005 Elective surgery code NN Health, Standard 01/03/2005

Emergency department

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327158
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	An emergency department provides triage, assessment, care and/or treatment for patients suffering from medical condition/s and/or injury.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Emergency department visit type code N Health, Standard 01/03/2005
	Establishment (public psychiatric or alcohol and drug hospital) – number of group session occasions of service for non-admitted patients (emergency and outpatient), total N[NNNNNN] Health, Standard 01/03/2005
	Establishment (public psychiatric or alcohol and drug hospital) – number of individual session occasions of service for non-admitted patients (emergency and outpatient), total N[NNNNNN] Health, Standard 01/03/2005
	Health or health related function code NNN Health, Standard 05/12/2007
	Health service event – presentation date, DDMMYYYY Health, Standard 01/03/2005
	Health service event – presentation time, hhmm Health, Standard 01/03/2005
	Health service event – service commencement date, DDMMYYYY Health, Superseded 07/12/2005
	Non-admitted patient emergency department service episode Health, Standard 01/03/2005
	Non-admitted patient service event Health, Standard 01/03/2005
	Triage Health, Retired 07/12/2005
	Triage Health, Standard 24/03/2006

Emergency department—public hospital

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327228
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	<p>The dedicated area in a public hospital that is organised and administered to provide emergency care to those in the community who perceive the need for or are in need of acute or urgent care.</p> <p>The emergency department must be part of a hospital and be licensed or otherwise recognised as an emergency department by the appropriate state or territory authority.</p> <p>An emergency department provides triage, assessment, care and/or treatment for patients suffering from medical condition(s) and/or injury.</p>
<i>Context:</i>	Emergency department care.

Collection and usage attributes

<i>Comments:</i>	<p>This glossary term has been defined to support the National Minimum Data Set - Non-admitted patient emergency department care. It is not intended as a definitive statement of the role or purpose of an emergency department.</p> <p>The national definition of an emergency department and the care that is provided in an emergency department is characterised by jurisdictional and local differences. For example, there is no national agreement on the identification and classification of emergency department-related settings such as observation units, short stays units, or the use of 'admitted patient beds' located in an emergency department setting.</p> <p>Emergency department is therefore defined as a concept, and not necessarily as a physical premises, setting or site.</p>
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Source and reference attributes

<i>Submitting organisation:</i>	National reference group for non-admitted patient data development, 2001/02.
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Relational attributes

<i>Related metadata references:</i>	Supersedes Emergency department - public hospital, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (14.1 KB)
<i>Metadata items which use this glossary item:</i>	Health or health related function code NNN Health, Standard 05/12/2007

Enrolled nurse

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327160
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Enrolled nurses are second level nurses who are enrolled in all states except Victoria where they are registered by the state registration board to practise in this capacity. Includes general enrolled nurse and specialist enrolled nurse (e.g. mothercraft nurses in some states).

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (enrolled nurses) Health, Standard 01/03/2005
	Establishment – full-time equivalent staff (paid) (enrolled nurses), average N[NNN{.N}] Health, Standard 01/03/2005
	Establishment – recurrent expenditure (salaries and wages) (enrolled nurses) (financial year), total Australian currency N[N(8)] Health, Standard 01/03/2005

Environmental factors

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327286
<i>Registration status:</i>	Health, Standard 29/11/2006 Community services, Standard 16/10/2006
<i>Definition:</i>	Environmental factors make up the physical, social and attitudinal environment in which people live and conduct their lives.
<i>Context:</i>	Environmental factors are external to the individual and can have a positive or negative influence on a person's participation as a member of society, on performance of activities, or on a person's body function or structure.

Collection and usage attributes

<i>Guide for use:</i>	<p>In the ICF classification scheme Environmental factors are organised to focus on two different levels, individual and societal. Environmental factors interact with the Body structures/Body functions and Activities and participation components.</p> <p>A person's functioning and disability is conceived as the dynamic interaction between health conditions and environmental and personal factors.</p>
<i>Comments:</i>	<p>This glossary item is based on the International Classification of Functioning, Disability and Health (ICF). The ICF was endorsed by the World Health Assembly in 2001 as a reference member of the WHO Family of International Classifications and of the Australian Family of Health and Related Classifications (endorsed by the National Health Information Management Group in 2002).</p> <p>The ICF provides a framework for the description of human functioning and disability. The components of ICF are defined in relation to a health condition. A health condition is an 'umbrella term for disease (acute or chronic), disorder, injury or trauma' (WHO 2001). A health condition may be recorded, for example, as Episode of care principal diagnosis, code (ICD-10-AM 3rd edn) ANN{.N[N]} and Episode of care additional diagnosis, code (ICD-10-AM 3rd edn) ANN{.N[N]}.</p>

Source and reference attributes

<i>Origin:</i>	World Health Organization (WHO) 2001. International Classification of Functioning, Disability and Health. Geneva: WHO
	Australian Institute of Health and Welfare (AIHW) 2003. ICF Australian User Guide Version 1.0. Canberra: AIHW
<i>Reference documents:</i>	Further information on the ICF can be found in the ICF itself and the ICF Australian User Guide (AIHW 2003) and the following websites

- WHO ICF website
<http://www.who.int/classifications/icf/en>
- Australian Collaborating Centre ICF website
<http://www.aihw.gov.au/disability/icf/index.html>

Relational attributes

Metadata items which use this glossary item:

Extent of environmental factors influence code (ICF 2001) [X]N
Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Functioning and Disability DSS Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Person – extent of environmental factor influence, code (ICF 2001)
[X]N Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Episode of acute care

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>Synonymous names:</i>	Acute care episode for admitted patients
<i>METeOR identifier:</i>	327230
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	<p>An episode of acute care for an admitted patient is one in which the principal clinical intent is to do one or more of the following:</p> <ul style="list-style-type: none">• manage labour (obstetric),• cure illness or provide definitive treatment of injury,• perform surgery,• relieve symptoms of illness or injury (excluding palliative care),• reduce severity of illness or injury,• protect against exacerbation and/or complication of an illness and/or injury which could threaten life or normal functions,• perform diagnostic or therapeutic procedures.
<i>Context:</i>	Admitted patient care.

Source and reference attributes

<i>Origin:</i>	National Health Data Committee
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Relational attributes

<i>Related metadata references:</i>	Supersedes Acute care episode for admitted patients, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (12.2 KB)
<i>Metadata items which use this glossary item:</i>	Admitted patient care NMDS Health, Superseded 07/12/2005
	Admitted patient care NMDS 2006-2007 Health, Superseded 23/10/2006
	Admitted patient care NMDS 2007-2008 Health, Superseded 05/02/2008
	Admitted patient care NMDS 2008-2009 Health, Superseded 04/02/2009
	Admitted patient care NMDS 2009-2010 Health, Superseded 22/12/2009
	Admitted patient care NMDS 2010-2011 Health, Standard 22/12/2009

Episode of residential care end

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327194
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	<p>Episode of residential care end is the administrative process by which a residential care service either records:</p> <p>Formal episode of residential care end:</p> <ul style="list-style-type: none">• the formal end of residential care and accommodation of a resident,• the end of residential care and accommodation of a resident who has commenced leave where there is no intention that the resident returns to residential care within seven days, or; <p>Statistical episode of residential care end:</p> <ul style="list-style-type: none">• the end of the reference period.
<i>Context:</i>	Specialised mental health services (Residential mental health care).

Relational attributes

<i>Related metadata references:</i>	Supersedes Episode of residential care end, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (13.0 KB)
<i>Metadata items which use this glossary item:</i>	<p>Episode of residential care – episode end date Health, Standard 01/03/2005</p> <p>Episode of residential care – episode end date, DDMMYYYY Health, Standard 01/03/2005</p> <p>Episode of residential care – episode end mode Health, Standard 01/03/2005</p> <p>Episode of residential care – episode end mode, code N Health, Standard 01/03/2005</p> <p>Mental health establishments NMDS 2005-2006 Health, Superseded 07/12/2005</p> <p>Mental health establishments NMDS 2005-2006 Health, Superseded 21/03/2006</p> <p>Mental health establishments NMDS 2006-2007 Health, Superseded 23/10/2006</p> <p>Mental health establishments NMDS 2007-2008 Health, Superseded 05/02/2008</p> <p>Mental health establishments NMDS 2009-2010 Health, Superseded 02/12/2009</p> <p>Residential mental health care NMDS 2005-2006 Health, Superseded 07/12/2005</p> <p>Residential mental health care NMDS 2006-2007 Health, Superseded 23/10/2006</p>

Residential mental health care NMDS 2007-2008 Health,
Superseded 05/02/2008

Residential mental health care NMDS 2008-2009 Health,
Superseded 04/02/2009

Residential mental health care NMDS 2009-2010 Health,
Superseded 05/01/2010

Residential mental health care NMDS 2010-2011 Health, Standard
05/01/2010

Episode of residential care start

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327192
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	<p>The process whereby the residential care service accepts responsibility for the Resident's residential care and accommodation. Episode of residential care start is the administrative process by which a residential care service records either:</p> <p>Formal episode of residential care start:</p> <ul style="list-style-type: none">• the start of residential care and accommodation of a resident, and,• the unplanned return from leave of a resident (when there had been no intention of returning to overnight residential care within seven days); <p>or Statistical episode of residential care start:</p> <ul style="list-style-type: none">• the start of a reference period for a resident continuing their residential care and accommodation, from the previous reference period.
<i>Context:</i>	Specialised mental health services (Residential mental health care).

Relational attributes

<i>Related metadata references:</i>	Supersedes Episode of residential care start, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (13.3 KB)
<i>Metadata items which use this glossary item:</i>	Episode of residential care – episode start date Health, Standard 01/03/2005
	Episode of residential care – episode start date, DDMMYYYY Health, Standard 01/03/2005
	Episode of residential care – episode start mode Health, Standard 01/03/2005
	Episode of residential care – episode start mode, code N Health, Standard 01/03/2005
	Mental health establishments NMDS 2005-2006 Health, Superseded 07/12/2005
	Mental health establishments NMDS 2005-2006 Health, Superseded 21/03/2006
	Mental health establishments NMDS 2006-2007 Health, Superseded 23/10/2006
	Mental health establishments NMDS 2007-2008 Health, Superseded 05/02/2008
	Mental health establishments NMDS 2009-2010 Health, Superseded 02/12/2009

Residential mental health care NMDS 2005-2006 Health,
Superseded 07/12/2005

Residential mental health care NMDS 2006-2007 Health,
Superseded 23/10/2006

Residential mental health care NMDS 2007-2008 Health,
Superseded 05/02/2008

Residential mental health care NMDS 2008-2009 Health,
Superseded 04/02/2009

Residential mental health care NMDS 2009-2010 Health,
Superseded 05/01/2010

Residential mental health care NMDS 2010-2011 Health, Standard
05/01/2010

Establishment based student nurse

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327186
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Student nurses are persons employed by the establishment currently studying in years one to three of a three year certificate course. This includes any person commencing or undertaking a three year course of training leading to registration as a nurse by the state or territory registration board. This includes full time general student nurse and specialist student nurse, such as mental deficiency nurse, but excludes practising nurses enrolled in post basic training courses.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – recurrent expenditure (salaries and wages) (student nurses) (financial year), total Australian currency N[N(8)] Health, Standard 01/03/2005
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Family

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	351499
<i>Registration status:</i>	Community services, Standard 31/08/2007 Health, Standard 31/08/2007
<i>Definition:</i>	Two or more people related by blood, marriage (registered or de facto), adoption, step or fostering who may or may not live together.

Source and reference attributes

<i>Reference documents:</i>	Australian Bureau of Statistics. Family, household and income unit variables. Cat No. 1286.0. Canberra: ABS. Viewed on 01/03/2007.
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Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – number of group session occasions of service for non-admitted patients Health, Standard 01/03/2005 Informal carer Health, Standard 04/07/2007 Community services, Standard 03/05/2007 Person (name) – family name, text X[X(39)] Health, Superseded 04/05/2005 Community services, Superseded 25/08/2005 Person (name) – family name, text X[X(39)] Health, Standard 04/05/2005 Community services, Standard 25/08/2005 Housing assistance, Standard 20/06/2005 Person (name) – given name Health, Standard 01/03/2005 Community services, Standard 01/03/2005 Housing assistance, Standard 01/08/2005 Person (name) – given name, text [X(40)] Health, Standard 04/05/2005 Community services, Standard 25/08/2005 Housing assistance, Standard 20/06/2005 Person – informal carer existence indicator, code N Health, Standard 04/07/2007 Community services, Standard 29/04/2006 Person (name) – given name, text [X(40)] Health, Standard 04/05/2005 Community services, Standard 25/08/2005 Housing assistance, Standard 20/06/2005
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Metadata items which use this glossary item:

Functioning

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327292
<i>Registration status:</i>	Health, Standard 29/11/2006 Community services, Standard 01/03/2005
<i>Definition:</i>	Functioning is the umbrella term for any or all of: body functions, body structures, activities and participation. Functioning is a multidimensional concept denoting the neutral aspects of the interaction between an individual (with a health condition) and that individual's environmental and personal factors.
<i>Context:</i>	An individual's functioning in a specific domain is an interaction or complex relationship between health conditions and environmental and personal factors. Functioning and disability are dual concepts in a broad framework, with disability focussing on the more negative aspects of this interaction.

Collection and usage attributes

<i>Comments:</i>	<p>This glossary term is based on the International Classification of Functioning, Disability and Health (ICF). The ICF was endorsed by the World Health Assembly in 2001 as a reference member of the WHO Family of International Classifications and of the Australian Family of Health and Related Classifications (endorsed by the National Health Information Management Group in 2002).</p> <p>The ICF provides a framework for the description of human functioning and disability. The components of ICF are defined in relation to a health condition. A health condition is an 'umbrella term for disease (acute or chronic), disorder, injury or trauma' (WHO 2001). A health condition may be recorded, for example, as Episode of care principal diagnosis, code (ICD-10-AM 3rd edn) ANN{.N[N]} and Episode of care additional diagnosis, code (ICD-10-AM 3rd edn) ANN{.N[N]}.</p>
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Source and reference attributes

<i>Origin:</i>	World Health Organization (WHO) 2001. ICF: International Classification of Functioning, Disability and Health Geneva: WHO Australian Institute of Health and Welfare (AIHW) 2003. ICF Australian User Guide Version 1.0. Canberra: AIHW
<i>Reference documents:</i>	Further information on the ICF can be found in the ICF itself and the ICF Australian User Guide (AIHW 2003) and the following websites <ul style="list-style-type: none">• WHO ICF website http://www.who.int/classifications/icf/en• Australian Collaborating Centre ICF website http://www.aihw.gov.au/disability/icf/index.html

Relational attributes

Related metadata references:

Supersedes [Functioning, version 1, DEC, NCSDD, NCSIMG, Superseded 01/03/2005.pdf](#) (15.4 KB)

Metadata items which use this glossary item:

Functioning and Disability DSS Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Geographic indicator

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327306
<i>Registration status:</i>	Health, Standard 01/03/2005 Community services, Standard 01/03/2005
<i>Definition:</i>	<p>A classification scheme that divides an area into mutually exclusive sub-areas based on geographic location.</p> <p>Some geographic indicators are:</p> <ul style="list-style-type: none">• Australian Standard Geographical Classification (ASGC, ABS Cat No. 1216.0),• administrative regions,• electorates,• Accessibility/Remoteness Index of Australia (ARIA),• Rural, Remote and Metropolitan Area Classification (RRMA), and• country.
<i>Context:</i>	To enable the analysis of data on a geographical basis. Facilitates analysis of service provision in relation to demographic and other characteristics of the population of a geographic area.

Collection and usage attributes

<i>Comments:</i>	Person (address) – Australian postcode (Postcode datafile), code [NNNN] is not included in the above listing, as it is, strictly speaking, not a geographic indicator. Sometimes postcodes are used in the analysis of data on a geographical basis, which involves a conversion to Statistical Local Area (an Australian Bureau of Statistics geographical structure). This conversion results in some inaccuracy of information. However, in some data sets Person (address) – Australian postcode (Postcode datafile), code [NNNN]; is the only geographic identifier, therefore the use of other more accurate indicators (for example, conversion from address line to Statistical Local Area) is not always possible.
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Source and reference attributes

<i>Origin:</i>	Australian Institute of Health and Welfare.
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Relational attributes

<i>Related metadata references:</i>	Supersedes Geographic indicator, version 2, DEC, NCSDD, NCSIMG, Superseded 01/03/2005.pdf (14.0 KB)
<i>Metadata items which use this glossary item:</i>	Australian state/territory identifier Health, Standard 01/03/2005 Community services, Standard 01/03/2005 Housing assistance, Standard 22/10/2005

Homeless

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327244
<i>Registration status:</i>	Community services, Standard 01/03/2005 Health, Standard 01/03/2005
<i>Definition:</i>	<p>A person is homeless if he or she does not have access to safe, secure and stable housing. Hence even if a person has a physical home, they would be considered homeless if:</p> <ul style="list-style-type: none">• they were not safe at home,• they had no legal right to continued occupation of their home (security of tenure), or• the home lacked the amenities or resources necessary for living.
<i>Context:</i>	<p>There is considerable concern over the number of homeless people in society and the assistance they require. Collecting information on homeless people is problematic, as the concept of 'homelessness' encompasses elements in addition to whether, someone resides in a dwelling or not.</p>

Source and reference attributes

<i>Submitting organisation:</i>	SAAP National Data Collection Agency Australian Institute of Health and Welfare
<i>Origin:</i>	SAAP (Supported Accommodation Assistance Program) National Data Collection Agency 2001. <i>National Data Collection Data Dictionary</i> . Version 2. Unpublished

Relational attributes

<i>Related metadata references:</i>	Supersedes Homelessness, version 1, DEC, NCSDD, NCSIMG, Superseded 01/03/2005.pdf (13.0 KB)
<i>Metadata items which use this glossary item:</i>	Person (address) – suburb/town/locality name, text [A(50)] Health, Standard 04/05/2005 Community services, Standard 25/08/2005

Hospital boarder

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>Synonymous names:</i>	Boarder
<i>METeOR identifier:</i>	327242
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	A person who is receiving food and/or accommodation but for whom the hospital does not accept responsibility for treatment and/or care.
<i>Context:</i>	Admitted patient care.

Collection and usage attributes

<i>Guide for use:</i>	<p>A boarder thus defined is not admitted to the hospital. However, a hospital may register a boarder.</p> <p>Babies in hospital at age 9 days or less cannot be boarders. They are admitted patients with each day of stay deemed to be either a qualified or unqualified day.</p>
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Source and reference attributes

<i>Submitting organisation:</i>	National Health Data Committee.
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Relational attributes

<i>Related metadata references:</i>	Supersedes Hospital boarder, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (12.1 KB)
<i>Metadata items which use this glossary item:</i>	Admitted patient care NMDS Health, Superseded 07/12/2005
	Admitted patient care NMDS 2006-2007 Health, Superseded 23/10/2006
	Admitted patient care NMDS 2007-2008 Health, Superseded 05/02/2008
	Admitted patient care NMDS 2008-2009 Health, Superseded 04/02/2009
	Admitted patient care NMDS 2009-2010 Health, Superseded 22/12/2009
	Admitted patient care NMDS 2010-2011 Health, Standard 22/12/2009
	Hospital service Health, Standard 01/03/2005

Hospital-in-the-home care

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327308
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Provision of care to hospital admitted patients in their place of residence as a substitute for hospital accommodation. Place of residence may be permanent or temporary.
<i>Context:</i>	Admitted patient care.

Collection and usage attributes

<i>Comments:</i>	<p>The criteria for inclusion as hospital-in-the-home include but are not limited to:</p> <ul style="list-style-type: none">• without hospital in the home care being available patients would be accommodated in the hospital,• the treatment forms all or part of an episode of care for an admitted patient (as defined in the metadata item Admitted patient),• the hospital medical record is maintained for the patient,• there is adequate provision for crisis care. <p>Selection criteria for the assessment of suitable patients include but are not limited to:</p> <ul style="list-style-type: none">• the hospital deems the patient requires health care professionals funded by the hospital to take an active part in their treatment,• the patient does not require continuous 24 hour assessment, treatment or observation,• the patient agrees to this form of treatment,• the patient's place of residence is safe and has carer support available,• the patient's place of residence is accessible for crisis care,• the patient's place of residence has adequate communication facilities and access to transportation.
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Source and reference attributes

<i>Origin:</i>	National Health Data Committee.
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Relational attributes

<i>Related metadata references:</i>	Supersedes Hospital-in-the-home care, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (14.1 KB)
<i>Metadata items which use this glossary item:</i>	Admitted patient Health, Standard 01/03/2005 Admitted patient care NMDS Health, Superseded 07/12/2005 Admitted patient care NMDS 2006-2007 Health, Superseded 23/10/2006

Admitted patient care NMDS 2007-2008 Health, Superseded
05/02/2008

Admitted patient care NMDS 2008-2009 Health, Superseded
04/02/2009

Admitted patient care NMDS 2009-2010 Health, Superseded
22/12/2009

Admitted patient care NMDS 2010-2011 Health, Standard
22/12/2009

Available bed – overnight-stay admitted care, average number of
beds N[NNN.N] Health, Standard 03/12/2008

Episode of admitted patient care Health, Standard 01/03/2005

Episode of admitted patient care – number of days of hospital-in-
the-home care Health, Standard 01/03/2005

Episode of admitted patient care – number of days of hospital-in-
the-home care, total {N[NN]} Health, Standard 01/03/2005

Episode of care (community setting) – first service delivery date,
DDMMYYYY Health, Standard 01/03/2005

Health or health related function code NNN Health, Standard
05/12/2007

Number of days of hospital-in-the-home care Health, Standard
01/03/2005

Occupied bed – hospital in the home care, average number of
beds N[NNN.N] Health, Standard 24/03/2009

Impairment of body structure

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327288
<i>Registration status:</i>	Health, Standard 29/11/2006 Community services, Standard 16/10/2006
<i>Definition:</i>	Impairments of body structure are problems in body structure such as a loss or significant departure from population standards or averages.
<i>Context:</i>	Body structures are classified in ICF in neutral terms. To indicate that there is a problem with a body structure requires the use of the body structures code for the structure affected and the impairment extent code to denote the extent or magnitude of the problem. The impairment nature and impairment location codes can be used to expand the description of a problem with a body structure.

Source and reference attributes

<i>Origin:</i>	World Health Organization (WHO) 2001. International Classification of Functioning, Disability and Health. Geneva: WHO Australian Institute of Health and Welfare (AIHW) 2003. ICF Australian User Guide Version 1.0. Canberra: AIHW
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Comments

This glossary term is based on the International Classification of Functioning, Disability and Health (ICF). The ICF was endorsed by the World Health Assembly in 2001 as a reference member of the WHO Family of International Classifications and of the Australian Family of Health and Related Classifications (endorsed by the National Health Information Management Group in 2002).

The ICF provides a framework for the description of human functioning and disability. The components of ICF are defined in relation to a health condition. A health condition is an 'umbrella term for disease (acute or chronic), disorder, injury or trauma' (WHO 2001). A health condition may be recorded, for example, as Episode of care principal diagnosis, code (ICD-10-AM 3rd edn) ANN{.N[N]} and Episode of care additional diagnosis, code (ICD-10-AM 3rd edn) ANN{.N[N]}.

Further information on the ICF can be found in the ICF itself and the ICF Australian User Guide (AIHW 2003) and the following websites

- WHO ICF website
<http://www.who.int/classifications/icf/en>
- Australian Collaborating Centre ICF website
<http://www.aihw.gov.au/disability/icf/index.html>

Relational attributes

*Metadata items which use this
glossary item:*

Body structures Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Impairment nature code (ICF 2001) N Health, Standard
29/11/2006

Community services, Standard 16/10/2006

Person – body structure, code (ICF 2001) AN[NNNN] Health,
Standard 29/11/2006

Community services, Standard 16/10/2006

Informal carer

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	353420
<i>Registration status:</i>	Health, Standard 04/07/2007 Community services, Standard 03/05/2007
<i>Definition:</i>	An informal carer includes any person, such as a family member, friend or neighbour, who is giving regular, ongoing assistance to another person.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Person – informal carer existence indicator Health, Standard 04/07/2007 Community services, Standard 02/05/2006 Person – informal carer existence indicator, code N Health, Standard 04/07/2007 Community services, Standard 29/04/2006
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Intensive care unit

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327234
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	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.
<i>Context:</i>	Admitted patient care.

Collection and usage attributes

<i>Comments:</i>	<p>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 (ACHS). The five types of ICU are briefly described below:</p> <ul style="list-style-type: none">• 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;
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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.

- 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 and coronary care unit are under development.

Source and reference attributes

Submitting organisation: National Intensive Care Working Group.

Relational attributes

Related metadata references: Supersedes [Intensive care unit, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf](#) (15.9 KB)

Metadata items which use this glossary item:

Episode of admitted patient care – length of stay (special/neonatal intensive care), total days N[NN] Health, Standard 01/03/2005

Establishment – gross capital expenditure (accrual accounting) (major medical equipment) Health, Standard 01/03/2005

Establishment – gross capital expenditure (major medical equipment) Health, Standard 01/03/2005

Establishment – net capital expenditure (accrual accounting) (major medical equipment) Health, Standard 01/03/2005

Health establishment accrual accounting capital expenditure code N Health, Standard 01/03/2005

Leave period

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327156
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Leave period is a temporary absence from hospital, with medical approval for a period no greater than seven consecutive days.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Episode of admitted patient care – number of leave periods Health, Standard 01/03/2005
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Live birth

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327248
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	A live birth is defined by the World Health Organization to be the complete expulsion or extraction from the mother of a baby, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of the voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached. Each product of such a birth is considered live born.
<i>Context:</i>	Perinatal Source document: <i>International Classification of Diseases and Related Health Problems</i> , 10th Revision, Vol 1, World Health Organization, 1992.

Source and reference attributes

<i>Submitting organisation:</i>	National Perinatal Data Development Committee National Perinatal Data Advisory Committee.
<i>Origin:</i>	National Health Data Committee

Relational attributes

<i>Related metadata references:</i>	Supersedes Live birth, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (12.8 KB)
<i>Metadata items which use this glossary item:</i>	Admitted patient care NMDS Health, Superseded 07/12/2005 Admitted patient care NMDS 2006-2007 Health, Superseded 23/10/2006 Admitted patient care NMDS 2007-2008 Health, Superseded 05/02/2008 Admitted patient care NMDS 2008-2009 Health, Superseded 04/02/2009 Admitted patient care NMDS 2009-2010 Health, Superseded 22/12/2009 Admitted patient care NMDS 2010-2011 Health, Standard 22/12/2009 Birth event – birth plurality, code N Health, Standard 01/03/2005 Birth – birth weight, total grams NNNN Health, Standard 01/03/2005 Female – number of previous pregnancies (live birth), total NN Health, Standard 01/03/2005

Neonate

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327284
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	A live birth who is less than 28 days old.
<i>Context:</i>	Perinatal.

Collection and usage attributes

<i>Comments:</i>	The neonatal period is exactly four weeks or 28 completed days, commencing on the date of birth (day 0) and ending on the completion of day 27. For example, a baby born on 1 October remains a neonate until completion of the four weeks on 28 October and is no longer a neonate on 29 October.
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Source and reference attributes

<i>Submitting organisation:</i>	National Perinatal Data Development Committee National Perinatal Data Advisory Committee
<i>Origin:</i>	National Health Data Committee International Classification of Diseases and Related Health Problems, 10th Revision, WHO, 1992

Relational attributes

<i>Related metadata references:</i>	Supersedes Neonate, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (12.1 KB)
<i>Metadata items which use this glossary item:</i>	Admitted patient care NMDS Health, Superseded 07/12/2005 Admitted patient care NMDS 2006-2007 Health, Superseded 23/10/2006 Admitted patient care NMDS 2007-2008 Health, Superseded 05/02/2008 Admitted patient care NMDS 2008-2009 Health, Superseded 04/02/2009 Admitted patient care NMDS 2009-2010 Health, Superseded 22/12/2009 Admitted patient care NMDS 2010-2011 Health, Standard 22/12/2009

Newborn qualification status

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327254
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Qualification status indicates whether the patient day within a newborn episode of care is either qualified or unqualified.
<i>Context:</i>	Admitted patient care: To provide accurate information on care provided in newborn episodes of care through exclusion of unqualified patient days.

Collection and usage attributes

<i>Guide for use:</i>	<p>A newborn qualification status is assigned to each patient day within a newborn episode of care.</p> <p>A newborn patient day is qualified if the infant meets at least one of the following criteria:</p> <ul style="list-style-type: none">• is the second or subsequent live born infant of a multiple birth, whose mother is currently an admitted patient,• is admitted to an intensive care facility in a hospital, being a facility approved by the Commonwealth Minister for the purpose of the provision of special care,• is admitted to, or remains in hospital without its mother. <p>A newborn patient day is unqualified if the infant does not meet any of the above criteria.</p> <p>The day on which a change in qualification status occurs is counted as a day of the new qualification status.</p> <p>If there is more than one qualification status in a single day, the day is counted as a day of the final qualification status for that day.</p>
<i>Comments:</i>	<p>All babies born in hospital are admitted patients.</p> <p>The newborn baby's qualified days are eligible for health insurance benefits purposes and the patient day count under the Australian Health Care Agreements. In this context, newborn qualified days are equivalent to acute days and may be denoted as such.</p> <p>The days when a newborn baby does not meet these criteria are classified as unqualified (if they are nine days old or less) and should not be counted as patient days under the Australian Health Care Agreements and are not eligible for health insurance benefit purposes.</p>

Relational attributes

<i>Related metadata references:</i>	Supersedes Newborn qualification status, version 2, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (15.1 KB)
<i>Metadata items which use this glossary item:</i>	Admitted patient care NMDS Health, Superseded 07/12/2005 Admitted patient care NMDS 2006-2007 Health, Superseded 23/10/2006

Admitted patient care NMDS 2007-2008 Health, Superseded
05/02/2008

Admitted patient care NMDS 2008-2009 Health, Superseded
04/02/2009

Admitted patient care NMDS 2009-2010 Health, Superseded
22/12/2009

Admitted patient care NMDS 2010-2011 Health, Standard
22/12/2009

Date of change to qualification status Health, Standard
01/03/2005

Episode of admitted patient care (newborn) – date of change to
qualification status Health, Standard 01/03/2005

Episode of admitted patient care (newborn) – date of change to
qualification status, DDMMYYYY Health, Standard 01/03/2005

Hospital care type code N[N].N Health, Standard 01/03/2005

Number of qualified days Health, Standard 01/03/2005

Non-financial asset

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327196
<i>Registration status:</i>	Health, Standard 01/03/2005 Housing assistance, Standard 10/02/2006
<i>Definition:</i>	A non-financial asset is an entity functioning as a store of value, over which ownership may be derived over a period of time, and which is not a financial asset.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Gross capital expenditure Health, Standard 01/03/2005 Housing assistance, Standard 10/02/2006
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Occupational Therapist

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327340
<i>Registration status:</i>	Health, Standard 08/12/2004
<i>Definition:</i>	Persons who have completed a course of recognised training and are eligible for membership of the Australian Association of Occupational Therapists.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (occupational therapists) Health, Standard 08/12/2004
	Establishment – full-time equivalent staff (paid) (occupational therapists), average N[NNN{.N}] Health, Standard 08/12/2004
	Establishment – recurrent expenditure (salaries and wages) (occupational therapists) (financial year), total Australian currency N[N(8)] Health, Standard 08/12/2004

Ophthalmologist

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327364
<i>Registration status:</i>	Health, Standard 21/09/2005
<i>Definition:</i>	An ophthalmologist is a physician specialising in diagnosing and prescribing treatment for defects, injuries and diseases of the eye, and who is skilled at delicate eye surgery.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Person – referral to ophthalmologist indicator Health, Standard 21/09/2005
	Person – referral to ophthalmologist indicator (last 12 months), code N Health, Standard 21/09/2005

Organ procurement—posthumous

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327258
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Organ procurement - posthumous is an activity undertaken by hospitals in which human tissue is procured for the purpose of transplantation from a donor who has been declared brain dead.
<i>Context:</i>	Hospital activity.

Collection and usage attributes

<i>Comments:</i>	<p>This activity is not regarded as care or treatment of an admitted patient, but is registered by the hospital. Diagnoses and procedures undertaken during this activity, including mechanical ventilation and tissue procurement, are recorded in accordance with the Australian coding standards.</p> <p>Declarations of brain death are made in accordance with relevant state/territory legislation.</p>
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Relational attributes

<i>Related metadata references:</i>	Supersedes Organ procurement - posthumous, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (12.1 KB)
<i>Metadata items which use this glossary item:</i>	Admitted patient care NMDS Health, Superseded 07/12/2005
	Admitted patient care NMDS 2006-2007 Health, Superseded 23/10/2006
	Admitted patient care NMDS 2007-2008 Health, Superseded 05/02/2008
	Admitted patient care NMDS 2008-2009 Health, Superseded 04/02/2009
	Admitted patient care NMDS 2009-2010 Health, Superseded 22/12/2009
	Admitted patient care NMDS 2010-2011 Health, Standard 22/12/2009
	Hospital service—care type Health, Standard 01/03/2005
	Hospital service—care type, code N[N].N Health, Standard 01/03/2005

Other diagnostic and health professional

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327338
<i>Registration status:</i>	Health, Standard 08/12/2004
<i>Definition:</i>	Includes qualified staff (other than qualified medical or nursing staff) engaged in duties of a diagnostic, professional or technical nature and covers all allied health professionals and laboratory technicians (but excludes civil engineers and computing staff).

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (other diagnostic and health professionals) Health, Standard 08/12/2004
	Establishment – full-time equivalent staff (paid) (other diagnostic and health professionals), average N[NNN{.N}] Health, Standard 08/12/2004
	Establishment – recurrent expenditure (salaries and wages) (other diagnostic and health professionals) (financial year), total Australian currency N[N(8)] Health, Standard 08/12/2004

Other medical officer

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327342
<i>Registration status:</i>	Health, Standard 08/12/2004
<i>Definition:</i>	A person who is a medical officer employed or engaged by the organisation who is not registered as a psychiatrist within the state or territory nor is a formal trainee within the Royal Australian and New Zealand College of Psychiatrists Postgraduate Training Program.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (other medical officers) Health, Standard 08/12/2004
	Establishment – full-time equivalent staff (paid) (other medical officers), average N[NNN{.N}] Health, Standard 08/12/2004
	Establishment – recurrent expenditure (salaries and wages) (other medical officers) (financial year), total Australian currency N[N(8)] Health, Standard 08/12/2004

Other personal care staff

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327162
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	This category includes attendants, assistants or home assistance, home companions, family aides, ward helpers, warders, orderlies, ward assistants and nursing assistants engaged primarily in the provision of personal care to patients or residents, who are not formally qualified or undergoing training in nursing or allied health professions.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (other personal care staff) Health, Standard 01/03/2005
	Establishment – full-time equivalent staff (paid) (other personal care staff), average N[NNN{.N}] Health, Standard 01/03/2005
	Establishment – recurrent expenditure (salaries and wages) (other personal care staff) (financial year), total Australian currency N[N(8)] Health, Standard 01/03/2005

Outpatient clinic service

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	336980
<i>Registration status:</i>	Health, Standard 04/07/2007
<i>Definition:</i>	An examination, consultation, treatment or other service provided in an outpatient setting in a specialty unit or under an organisational arrangement administered by a hospital.
<i>Context:</i>	Non-admitted patient service activity, excluding emergency department. Does not include services provided through community health settings (such as community and child health centre).

Collection and usage attributes

<i>Guide for use:</i>	This glossary item relates to activity of a clinic. See the Outpatient care National Minimum Data Set Scope statement for observations about use of the term 'clinic' in hospitals.
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Source and reference attributes

<i>Submitting organisation:</i>	Non-admitted patient NMDS Development Working Party, 2006
<i>Origin:</i>	NCCH consultants report to Outpatients NMDS Development Working Group, September 2004.

Relational attributes

<i>Related metadata references:</i>	Supersedes Outpatient clinic service Health, Superseded 04/07/2007
<i>Metadata items which use this glossary item:</i>	Health or health related function code NNN Health, Standard 05/12/2007 Outpatient clinic type Health, Standard 04/05/2005

Overnight-stay patient

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327256
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	A patient who, following a clinical decision, receives hospital treatment for a minimum of one night, i.e. who is admitted to and separated from the hospital on different dates.
<i>Context:</i>	Admitted patient care

Collection and usage attributes

<i>Comments:</i>	<p>An overnight-stay patient in one hospital cannot be concurrently an overnight-stay patient in another hospital, unless they are receiving contracted care. If not under a hospital contract, a patient must be separated from one hospital and admitted to the other hospital on each occasion of transfer.</p> <p>An overnight-stay patient of a hospital (originating hospital) who attends another hospital (the destination hospital) on a contracted basis is to be regarded by the originating hospital as an overnight-stay patient, as if the patient had not left for contracted hospital care.</p> <p>Treatment provided to an intended same-day patient who is subsequently classified as an overnight-stay patient is regarded as part of the overnight episode.</p> <p>A non-admitted (emergency/outpatient) service provided to a patient who is subsequently classified as an admitted patient shall be regarded as part of the admitted episode. Any occasion of service should be recorded and identified as part of the admitted patient's episode of care.</p> <p>Patients who leave of their own accord, die or are transferred on their first day in hospital are not overnight-stay patients.</p>
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Source and reference attributes

<i>Origin:</i>	National Health Data Committee.
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Relational attributes

<i>Related metadata references:</i>	Supersedes Overnight-stay patient, version 3, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (14.1 KB)
<i>Metadata items which use this glossary item:</i>	Episode of admitted patient care – length of stay (excluding leave days) Health, Standard 01/03/2005 Establishment – number of patient days, total N[N(7)] Health, Standard 01/03/2005

Palliative care agency

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	356474
<i>Registration status:</i>	Health, Standard 05/12/2007
<i>Definition:</i>	A palliative care agency is an organisation or organisational sub-unit that provides specialist palliative care and receives Australian or state/territory government funding (including Australian Health Care Agreement funding), or does not provide specialist palliative care but receives Australian Health Care Agreement funding to provide care incorporating a palliative approach or palliative care-related services.

Collection and usage attributes

<i>Guide for use:</i>	<p>'Specialist palliative care' services work substantively in the area of palliative care they would usually provide consultative and ongoing care for people with a life-limiting illness and provide support for primary carers and family members, provide multi-disciplinary healthcare and employ healthcare professionals who have qualifications or experience in palliative care.</p> <p>Care may be provided in admitted patient and/or community settings. Community settings include outpatient facilities.</p> <p>A palliative care agency represents the level of an organisation that is responsible for the care provided to clients (i.e. care coordination) regardless of whether the agency provides this care directly or purchases the care on behalf of clients.</p>
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Source and reference attributes

<i>Submitting organisation:</i>	Palliative Care Intergovernmental Forum
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Relational attributes

<i>Metadata items which use this glossary item:</i>	<p>Palliative care performance indicators DSS Health, Standard 05/12/2007</p> <p>Service provider organisation – level of service delivery, palliative care code N Health, Standard 05/12/2007</p> <p>Service provider organisation – service delivery setting, palliative care agency code N Health, Standard 05/12/2007</p>
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Participation—functioning, disability and health

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>Synonymous names:</i>	Participation
<i>METeOR identifier:</i>	327312
<i>Registration status:</i>	Health, Standard 29/11/2006 Community services, Standard 06/06/2005
<i>Definition:</i>	In the context of health, participation is involvement in a life situation.
<i>Context:</i>	<p>Involvement refers to the lived experience of people in the actual context in which they live. This context includes 'Environmental Factors' - all aspects of the physical, social and attitudinal world.</p> <p>The individual's degree of involvement can be reflected by this glossary item when combined with Participation extent code (ICF 2001) X and Participation satisfaction level code X.</p> <p>'Activities and participation' is one of three components that define the concept 'Disability', along with 'Body functions and structures' and 'Environmental factors'. 'Activities and participation' is also encompassed within the concept 'Functioning'.</p> <p>The concept 'Participation', as defined here and as measured in the metadata items Participation extent code (ICF 2001) X and Participation satisfaction level code X, may be relevant to people and human services not related to disability.</p>

Collection and usage attributes

<i>Comments:</i>	<p>Participation restrictions are problems an individual may experience in involvement in life situations.</p> <p>In time, a related and more generic data element may be developed. In the meantime, the addition of 'functioning, disability and health' to the name of this glossary item indicates that the current concept is based on the concept and framework developed by World Health Organization to assist in the classification and description of functioning and disability, as contained in the International Classification of Functioning, Disability and Health (ICF).</p> <p>This glossary item is based on the International Classification of Functioning, Disability and Health (ICF). The ICF was endorsed by the World Health Assembly in 2001 as a reference member of the WHO Family of International Classifications and of the Australian Family of Health and Related Classifications (endorsed by the National Health Information Management Group in 2002).</p> <p>The ICF provides a framework for the description of human functioning and disability. The components of ICF are defined in relation to a health condition. A health condition is an 'umbrella term for disease (acute or chronic), disorder, injury or trauma' (WHO 2001). A health condition may be recorded, for example,</p>
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as Episode of care principal diagnosis, code (ICD-10-AM 3rd edn) ANN{.N[N]} and Episode of care additional diagnosis, code (ICD-10-AM 3rd edn) ANN{.N[N]}.

Source and reference attributes

Origin:

World Health Organization (WHO) 2001. International Classification of Functioning, Disability and Health. Geneva: WHO

Australian Institute of Health and Welfare (AIHW) 2003. ICF Australian User Guide Version 1.0. Canberra: AIHW

Reference documents:

Further information on the ICF can be found in the ICF itself and the ICF Australian User Guide (AIHW 2003) and the following websites

- WHO ICF website
<http://www.who.int/classifications/icf/en>
- Australian Collaborating Centre ICF website
<http://www.aihw.gov.au/disability/icf/index.html>

Relational attributes

Related metadata references:

Supersedes [Participation - functioning, disability and health, version 1, DEC, NCSDD, NCSIMG, Superseded 01/03/2005.pdf](#) (17.2 KB)

Metadata items which use this glossary item:

Activities and participation code (ICF 2001) AN[NNN] Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Extent of environmental factors influence code (ICF 2001) [X]N Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Functioning and Disability DSS Health, Standard 29/11/2006
Community services, Standard 16/10/2006

Participation extent code (ICF 2001) N Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Participation satisfaction level code N Health, Standard 29/11/2006

Community services, Standard 16/10/2006

Psychiatrist

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327334
<i>Registration status:</i>	Health, Standard 08/12/2004
<i>Definition:</i>	Medical officers who are registered to practice psychiatry under the relevant state or territory Medical Registration Board; or who are fellows of the Royal Australian and New Zealand College of Psychiatrists or registered with Health Insurance Commission as a specialist in Psychiatry.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – recurrent expenditure (salaries and wages) (consultant psychiatrists and psychiatrists) (financial year), total Australian currency N[N(8)] Health, Standard 08/12/2004
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Psychiatry registrar or trainee

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327344
<i>Registration status:</i>	Health, Standard 08/12/2004
<i>Definition:</i>	A medical officer who is a formal trainee within the Royal Australian and New Zealand College of Psychiatrists Postgraduate Training Program.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (psychiatry registrars and trainees) Health, Standard 08/12/2004
	Establishment – full-time equivalent staff (paid) (psychiatry registrars and trainees), average N[NNN{.N}] Health, Standard 08/12/2004
	Establishment – recurrent expenditure (salaries and wages) (psychiatry registrars and trainees)(financial year), total Australian currency N[N(8)] Health, Standard 08/12/2004

Psychologist

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327346
<i>Registration status:</i>	Health, Standard 08/12/2004
<i>Definition:</i>	A person who is registered to practice psychology with the relevant state and territory registration board.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (psychologists) Health, Standard 08/12/2004
	Establishment – full-time equivalent staff (paid) (psychologists), average N[NNN{.N}] Health, Standard 08/12/2004
	Establishment – recurrent expenditure (salaries and wages) (psychologists) (financial year), total Australian currency N[N(8)] Health, Standard 08/12/2004

Public health

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>Synonymous names:</i>	Public health
<i>METeOR identifier:</i>	352234
<i>Registration status:</i>	Health, Standard 05/12/2007
<i>Definition:</i>	Organised response by society to protect and promote health, and to prevent illness, injury and disability. The starting point for identifying public health issues, problems and priorities, and for designing and implementing interventions is the population as a whole, or population subgroups (NPHP 1998).
<i>Context:</i>	Public health functions

Collection and usage attributes

<i>Guide for use:</i>	To be used for collecting information on public health expenditure and activities.
<i>Collection methods:</i>	Collected through the National Public Health Expenditure Project and the Government Health Expenditure NMDS.

Source and reference attributes

<i>Submitting organisation:</i>	Australian Institute of Health and Welfare.
<i>Origin:</i>	National Public Health Partnership 1998.
<i>Reference documents:</i>	(NPHP) National Public Health Partnership 1998. Public Health in Australia: the public health landscape: person, society, environment. Melbourne: NPHP.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Health or health related function code NNN Health, Standard 05/12/2007
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Record linkage

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327264
<i>Registration status:</i>	Community services, Standard 01/03/2005 Health, Standard 01/03/2005
<i>Definition:</i>	A process, technique or method that enables the bringing together of two or more records that are believed to belong to the same individual.
<i>Context:</i>	Record linkage may facilitate improved service provision, treatment or case management to individual clients.

Collection and usage attributes

<i>Comments:</i>	<p>Linkage can occur across data systems or within data systems and may be done by using a range of identifiers.</p> <p>For statistical purposes, including planning, research or the measurement of service or program outcomes, record linkage facilitates separating multiple items clustered around individuals from total counts (for example, double counting of clients can be reduced when calculating total numbers of clients across several agencies).</p> <p>The proposed use of a linkage key in the Home and Community Care program (HACC) Minimum Data Set is intended to make it possible to count the number of HACC clients (without counting clients more than once) and the services which they receive. The Commonwealth-State Territory Disability Agreement National Minimum Data Set is using the statistical linkage key based on that for the HACC Minimum Data Set.</p>
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Source and reference attributes

<i>Submitting organisation:</i>	Australian Institute of Health and Welfare
<i>Origin:</i>	Commonwealth Department of Health and Family Services 1998 Home and Community Care (HACC) Data Dictionary Version 1.0 Canberra: DHFS

Relational attributes

<i>Related metadata references:</i>	Supersedes Record linkage, version 2, DEC, NCSDD, NCSIMG, Superseded 01/03/2005.pdf (13.6 KB)
<i>Metadata items which use this glossary item:</i>	Person (name) – family name, text X[X(39)] Health, Superseded 04/05/2005 Community services, Superseded 25/08/2005 Person (name) – given name, text [X(40)] Health, Superseded 04/05/2005 Community services, Superseded 25/08/2005 Person (name) – given name, text [X(40)] Health, Standard 04/05/2005 Community services, Standard 25/08/2005 Housing assistance, Standard 20/06/2005

Registered nurse

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327182
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Registered nurses include persons with at least a three year training certificate and nurses holding post graduate qualifications. Registered nurses must be registered with the state/territory registration board. This is a comprehensive category and includes community mental health, general nurse, intellectual disability nurse, midwife (including pupil midwife), psychiatric nurse, senior nurse, charge nurse (now unit manager), supervisory nurse and nurse educator. This category also includes nurses engaged in administrative duties no matter what the extent of their engagement, for example, directors of nursing and assistant directors of nursing.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (registered nurses) Health, Standard 01/03/2005
	Establishment – full-time equivalent staff (paid) (registered nurses), average N[NNN{.N}] Health, Standard 01/03/2005
	Establishment – recurrent expenditure (salaries and wages) (registered nurses) (financial year), total Australian currency N[N(8)] Health, Standard 01/03/2005
	Non-admitted patient emergency department service episode – triage category, code N Health, Superseded 22/12/2009
	Non-admitted patient emergency department service episode – triage category, code N Health, Standard 22/12/2009

Resident

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327198
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	A person who receives residential care intended to be for a minimum of one night.
<i>Context:</i>	Specialised mental health services (Residential mental health care).

Collection and usage attributes

<i>Comments:</i>	A resident in one residential mental health service cannot be concurrently a resident in another residential mental health service. A resident in a residential mental health service can be concurrently a patient admitted to a hospital.
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Relational attributes

<i>Related metadata references:</i>	Supersedes Resident, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (11.9 KB)
<i>Metadata items which use this glossary item:</i>	Admitted patient mental health care NMDS Health, Superseded 07/12/2005
	Admitted patient mental health care NMDS Health, Superseded 23/10/2006
	Admitted patient mental health care NMDS 2007-2008 Health, Superseded 05/02/2008
	Admitted patient mental health care NMDS 2008-2009 Health, Superseded 04/02/2009
	Admitted patient mental health care NMDS 2009-2010 Health, Superseded 05/01/2010
	Admitted patient mental health care NMDS 2010-2011 Health, Standard 05/01/2010
	Community mental health care NMDS 2005-2006 Health, Superseded 07/12/2005
	Episode of care – mental health legal status, code N Health, Standard 01/03/2005
	Episode of care – number of psychiatric care days Health, Standard 01/03/2005
	Episode of care – number of psychiatric care days, total N[NNNN] Health, Standard 01/03/2005
	Episode of residential care Health, Standard 01/03/2005
	Episode of residential care – episode end date Health, Standard 01/03/2005
	Episode of residential care – episode end date, DDMMYYYY Health, Standard 01/03/2005

Episode of residential care – episode start date Health, Standard 01/03/2005

Episode of residential care – episode start date, DDMMYYYY Health, Standard 01/03/2005

Episode of residential care – number of leave days, total N[NN] Health, Standard 01/03/2005

Episode of residential care – referral destination (mental health care) Health, Standard 01/03/2005

Episode of residential care – referral destination (mental health care), code N Health, Standard 01/03/2005

Establishment – number of available beds for admitted patients/residents Health, Superseded 03/12/2008

Establishment – number of available beds for admitted patients/residents, average N[NNN] Health, Superseded 03/12/2008

Health industry relevant organisation type code NNN Health, Superseded 01/04/2009

Health or health related function code NNN Health, Standard 05/12/2007

Residential mental health care NMDS 2005-2006 Health, Superseded 07/12/2005

Residential mental health care NMDS 2006-2007 Health, Superseded 23/10/2006

Residential mental health care NMDS 2007-2008 Health, Superseded 05/02/2008

Residential mental health care NMDS 2008-2009 Health, Superseded 04/02/2009

Residential mental health care NMDS 2009-2010 Health, Superseded 05/01/2010

Residential mental health care NMDS 2010-2011 Health, Standard 05/01/2010

Residential stay – episode start date Health, Standard 01/03/2005

Residential stay – episode start date, DDMMYYYY Health, Standard 01/03/2005

Residential mental health care service

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	373049
<i>Registration status:</i>	Health, Standard 02/12/2009
<i>Definition:</i>	A residential mental health service is a service that is considered by the state, territory or commonwealth funding authorities as a service that:

- has the workforce capacity to provide specialised mental health services; and
- employs suitably trained mental health staff to provide rehabilitation, treatment or extended care on-site:
 - to consumers residing on an overnight basis;
 - in a domestic-like environment; and
- encourages the consumer to take responsibility for their daily living activities.

These services include those that employ mental health trained staff on-site 24 hours per day and other services with less intensive staffing (but the trained staff must be on site for a minimum of 6 hours a day and at least 50 hours per week).

Suitably trained residential mental health care staff may include:

- individuals with Vocational Education and Training (VET) qualifications in community services, mental health or disability sectors;
- individuals with tertiary qualifications in medicine, social work, psychology, occupational therapy, counselling, nursing or social sciences; and
- individuals with experience in mental health or disability relevant to providing mental health consumers with appropriate services.

Context: Specialised residential mental health services.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Relational attributes

<i>Related metadata references:</i>	Supersedes Residential mental health care service Health, Superseded 02/12/2009
<i>Metadata items which use this glossary item:</i>	Admitted patient mental health care NMDS 2009-2010 Health, Superseded 05/01/2010
	Admitted patient mental health care NMDS 2010-2011 Health, Standard 05/01/2010
	Available bed – residential mental health care Health, Standard 03/12/2008

Available bed – residential mental health care, average number of beds N[NNN.N] Health, Standard 03/12/2008

Episode of care – mental health legal status, code N Health, Standard 01/03/2005

Health or health related function code NNN Health, Standard 05/12/2007

Residential mental health care Health, Standard 03/12/2008

Residential mental health care NMDS 2010-2011 Health, Standard 05/01/2010

Specialised mental health service setting code N Health, Standard 08/12/2004

Revenue (other revenue)

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>Synonymous names:</i>	Other revenue
<i>METeOR identifier:</i>	357543
<i>Registration status:</i>	Health, Standard 05/12/2007
<i>Definition:</i>	<p>All other revenue received by the establishment that is not included under patient revenue or recoveries (but not including revenue payments received from state or territory governments). This would include revenue such as investment income from temporarily surplus funds and income from charities, bequests and accommodation provided to visitors.</p> <p>See text relating to offsetting practices. Gross revenue should be reported (except in relation to payments for inter-hospital transfers of goods and services).</p>

Source and reference attributes

<i>Submitting organisation:</i>	Health Expenditure Advisory Committee
<i>Origin:</i>	Establishment – revenue (other revenue), METeOR Identification 269591, NHIG, Standard 01/03/2005

Relational attributes

<i>Metadata items which use this glossary item:</i>	Organisation – revenue Health, Standard 05/12/2007
	Organisation – revenue, total Australian currency NNNNN.N Health, Standard 05/12/2007

Revenue (patient)

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>Synonymous names:</i>	Patient revenue
<i>METeOR identifier:</i>	357539
<i>Registration status:</i>	Health, Standard 05/12/2007
<i>Definition:</i>	Patient revenue comprises all revenue received by, and due to, an establishment in respect of individual patient liability for accommodation and other establishment charges. All patient revenue is to be grouped together regardless of source of payment (Commonwealth, health fund, insurance company, direct from patient) or status of patient (whether inpatient or non-inpatient, private or compensable). Gross revenue should be reported.

Source and reference attributes

<i>Submitting organisation:</i>	Health Expenditure Advisory Committee
<i>Origin:</i>	Establishment – revenue (patient) METeOR Identifier 269518 NHIG, Standard 01/03/2005

Relational attributes

<i>Metadata items which use this glossary item:</i>	Organisation – revenue Health, Standard 05/12/2007 Organisation – revenue, total Australian currency NNNNN.N Health, Standard 05/12/2007
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Revenue (recoveries)

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	357541
<i>Registration status:</i>	Health, Standard 05/12/2007
<i>Definition:</i>	<p>All revenue received that is in the nature of a recovery of expenditure incurred. This would include:</p> <ul style="list-style-type: none">• income received from the provision of meals and accommodation to members of staff of the hospital (assuming it is possible to separate this from income from the provision of meals and accommodation to visitors);• income received from the use of hospital facilities by salaried medical officers exercising their rights of private practice and by private practitioners treating private patients in hospital; and• other recoveries such as those relating to inter-hospital services where the revenue relates to a range of different costs and cannot be clearly offset against any particular cost.

Generally, gross revenues should be reported but, where inter-hospital payments for transfers of goods and services are made, offsetting practices are acceptable to avoid double counting. Where a range of inter-hospital transfers of goods and services is involved and it is not possible to allocate the offsetting revenue against particular expenditure categories, then it is acceptable to bring that revenue in through recoveries.

Source and reference attributes

<i>Origin:</i>	Establishment – revenue (recoveries) METeOR Identifier 269417, NHIG, Standard 01/03/2005
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Relational attributes

<i>Metadata items which use this glossary item:</i>	Organisation – revenue Health, Standard 05/12/2007 Organisation – revenue, total Australian currency NNNNN.N Health, Standard 05/12/2007
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Salaried medical officer

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327188
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Medical officers employed by the hospital on a full time or part time salaried basis. This excludes visiting medical offices engaged on an honorary, sessional or fee for service basis. This category includes salaried medical officers who are engaged in administrative duties regardless of the extent of that engagement (for example, clinical superintendent and medical superintendent)

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (salaried medical officers) Health, Standard 01/03/2005
	Establishment – full-time equivalent staff (paid) (salaried medical officers), average N[NNN{.N}] Health, Standard 01/03/2005
	Establishment – recurrent expenditure (salaries and wages) (salaried medical officers) (financial year), total Australian currency N[N(8)] Health, Standard 01/03/2005
	Establishment – recurrent expenditure (visiting medical officer payments) Health, Standard 01/03/2005

Same-day patient

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327270
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	<p>A same-day patient is a patient who is admitted and separates on the same date, and who meets one of the following minimum criteria:</p> <ul style="list-style-type: none">• that the patient receive same-day surgical and diagnostic services as specified in bands 1A, 1B, 2, 3, and 4 but excluding uncertified type C Professional Attention Procedures within the Health Insurance Basic Table as defined in s.4 (1) of the <i>National Health Act 1953</i> (Commonwealth),• that the patient receive type C Professional Attention Procedures as specified in the Health Insurance Basic Table as defined in s.4 (1) of the <i>National Health Act 1953</i> (Commonwealth) with accompanying certification from a medical practitioner that an admission was necessary on the grounds of the medical condition of the patient or other special circumstances that relate to the patient.
<i>Context:</i>	Admitted patient care.

Collection and usage attributes

<i>Comments:</i>	<p>Same-day patients may be either intended to be separated on the same day, or intended overnight-stay patients who left of their own accord, died or were transferred on their first day in the hospital.</p> <p>Treatment provided to an intended same-day patient who is subsequently classified as an overnight-stay patient shall be regarded as part of the overnight episode.</p> <p>Non-admitted (emergency or outpatient) services provided to a patient who is subsequently classified as an admitted patient shall be regarded as part of the admitted episode. Any occasion of service should be recorded and identified as part of the admitted patient's episode of care.</p> <p>Data on same-day patients are derived by a review of admission and separation dates.</p>
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Source and reference attributes

<i>Origin:</i>	National Health Data Committee
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Relational attributes

<i>Related metadata references:</i>	Supersedes Same-day patient, version 1, DEC, NHDD, NHIMG, Superseded 01/03/2005 .pdf (14.5 KB)
<i>Metadata items which use this glossary item:</i>	Admitted patient care NMDS Health, Superseded 07/12/2005 Admitted patient care NMDS 2006-2007 Health, Superseded 23/10/2006

Admitted patient care NMDS 2007-2008 Health, Superseded
05/02/2008

Admitted patient care NMDS 2008-2009 Health, Superseded
04/02/2009

Admitted patient care NMDS 2009-2010 Health, Superseded
22/12/2009

Admitted patient care NMDS 2010-2011 Health, Standard
22/12/2009

Admitted patient mental health care NMDS Health, Superseded
07/12/2005

Admitted patient mental health care NMDS Health, Superseded
23/10/2006

Admitted patient mental health care NMDS 2007-2008 Health,
Superseded 05/02/2008

Admitted patient mental health care NMDS 2008-2009 Health,
Superseded 04/02/2009

Admitted patient mental health care NMDS 2009-2010 Health,
Superseded 05/01/2010

Admitted patient mental health care NMDS 2010-2011 Health,
Standard 05/01/2010

Episode of admitted patient care – intended length of hospital
stay Health, Standard 01/03/2005

Episode of admitted patient care – length of stay (excluding leave
days) Health, Standard 01/03/2005

Episode of admitted patient care – length of stay (including leave
days), total N[NN] Health, Standard 04/07/2007

Episode of admitted patient care – length of stay (including leave
days), total N[NN] Health, Superseded 04/07/2007

Episode of admitted patient care – number of leave days, total
N[NN] Health, Standard 01/03/2005

Establishment – number of patient days, total N[N(7)] Health,
Standard 01/03/2005

Separation

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327268
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	<p>Separation is the process by which an episode of care for an admitted patient ceases. A separation may be formal or statistical.</p> <p>Formal separation: The administrative process by which a hospital records the cessation of treatment and/or care and/or accommodation of a patient.</p> <p>Statistical separation: The administrative process by which a hospital records the cessation of an episode of care for a patient within the one hospital stay.</p>
<i>Context:</i>	Admitted patient care.

Collection and usage attributes

<i>Comments:</i>	<p>This treatment and/or care provided to a patient prior to separation occurs over a period of time and can occur in hospital and/or in the person's home (for hospital-in-the-home patients).</p> <p>While this concept is also applicable to non-Admitted patient care and welfare services, different terminology to 'separation' is often used in these other care settings.</p>
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Source and reference attributes

<i>Submitting organisation:</i>	National Health Data Committee
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Relational attributes

<i>Related metadata references:</i>	Supersedes Separation, version 3, DEC, NHDD, NHIMG, Superseded 01/03/2005.pdf (14.4 KB)
<i>Metadata items which use this glossary item:</i>	<p>Admitted patient care NMDS Health, Superseded 07/12/2005</p> <p>Admitted patient care NMDS 2006-2007 Health, Superseded 23/10/2006</p> <p>Admitted patient care NMDS 2007-2008 Health, Superseded 05/02/2008</p> <p>Admitted patient care NMDS 2008-2009 Health, Superseded 04/02/2009</p> <p>Admitted patient care NMDS 2009-2010 Health, Superseded 22/12/2009</p> <p>Admitted patient care NMDS 2010-2011 Health, Standard 22/12/2009</p> <p>Admitted patient hospital stay Health, Standard 01/03/2005</p> <p>Admitted patient mental health care NMDS Health, Superseded 23/10/2006</p>

Admitted patient mental health care NMDS Health, Superseded 07/12/2005

Admitted patient mental health care NMDS 2007-2008 Health, Superseded 05/02/2008

Admitted patient mental health care NMDS 2008-2009 Health, Superseded 04/02/2009

Admitted patient mental health care NMDS 2009-2010 Health, Superseded 05/01/2010

Admitted patient mental health care NMDS 2010-2011 Health, Standard 05/01/2010

Community mental health care NMDS 2005-2006 Health, Superseded 07/12/2005

Episode of admitted patient care Health, Standard 01/03/2005

Episode of admitted patient care – number of leave days Health, Standard 01/03/2005

Episode of admitted patient care – number of leave periods, total N[N] Health, Standard 01/03/2005

Episode of admitted patient care – separation date, DDMMYYYY Health, Standard 01/03/2005

Episode of admitted patient care – separation mode Health, Standard 01/03/2005

Episode of admitted patient care – separation mode, code N Health, Standard 01/03/2005

Episode of care – principal diagnosis, code (ICD-10-AM 3rd edn) ANN{.N[N]} Health, Superseded 28/06/2004

Episode of care – principal diagnosis, code (ICD-10-AM 4th edn) ANN{.N[N]} Health, Superseded 07/12/2005

Episode of care – principal diagnosis, code (ICD-10-AM 5th edn) ANN{.N[N]} Health, Superseded 05/02/2008

Episode of care – principal diagnosis, code (ICD-10-AM 6th edn) ANN{.N[N]} Health, Superseded 22/12/2009

Episode of care – principal diagnosis, code (ICD-10-AM 7th edn) ANN{.N[N]} Health, Standard 22/12/2009

Establishment – number of individual session occasions of service for non-admitted patients (alcohol and drug), total N[NNNNNN] Health, Standard 01/03/2005

Establishment – number of individual session occasions of service for non-admitted patients (community health services), total N[NNNNNN] Health, Standard 01/03/2005

Establishment – number of individual session occasions of service for non-admitted patients (district nursing services), total N[NNNNNN] Health, Standard 01/03/2005

Establishment – number of individual session occasions of service for non-admitted patients (emergency services), total N[NNNNNN] Health, Standard 01/03/2005

Establishment – number of individual session occasions of service for non-admitted patients (endoscopy and related procedures), total N[NNNNNN] Health, Standard 01/03/2005

Establishment – number of individual session occasions of service for non-admitted patients (mental health), total N[NNNNNN] Health, Standard 01/03/2005

Establishment – number of individual session occasions of service for non-admitted patients (other medical/surgical/diagnostic), total N[NNNNNN] Health, Standard 01/03/2005

Establishment – number of individual session occasions of service for non-admitted patients (other outreach services), total N[NNNNNN] Health, Standard 01/03/2005

Establishment – number of individual session occasions of service for non-admitted patients (pathology), total N[NNNNNN] Health, Standard 01/03/2005

Establishment – number of individual session occasions of service for non-admitted patients (pharmacy), total N[NNNNNN] Health, Standard 01/03/2005

Establishment – number of separations Health, Standard 01/03/2005

Establishment – number of separations (financial year), total N[NNNNN] Health, Standard 01/03/2005

Person – congenital malformation Health, Standard 01/03/2005

Person – congenital malformation, code (BPA 1979) ANN.N[N] Health, Standard 01/03/2005

Person – congenital malformation, code (ICD-10-AM 3rd edn) ANN{.N[N]} Health, Superseded 28/06/2004

Person – congenital malformation, code (ICD-10-AM 4th edn) ANN{.N[N]} Health, Superseded 07/12/2005

Person – congenital malformation, code (ICD-10-AM 5th edn) ANN{.N[N]} Health, Superseded 05/02/2008

Person – congenital malformation, code (ICD-10-AM 6th edn) ANN{.N[N]} Health, Superseded 22/12/2009

Person – congenital malformation, code (ICD-10-AM 7th edn) ANN{.N[N]} Health, Standard 22/12/2009

Separation mode Health, Standard 01/03/2005

Separation mode code N Health, Standard 01/03/2005

Severe hypoglycaemia

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327322
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Hypoglycaemia requiring assistance from another party.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Person – severe hypoglycaemia history Health, Superseded 21/09/2005
	Person – severe hypoglycaemia indicator Health, Standard 21/09/2005
	Person – severe hypoglycaemia indicator, code N Health, Standard 21/09/2005

Social Worker

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327348
<i>Registration status:</i>	Health, Standard 08/12/2004
<i>Definition:</i>	Persons who have completed a course of recognised training and are eligible for membership of the Australian Association of Social Workers.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (social workers) Health, Standard 08/12/2004
	Establishment – full-time equivalent staff (paid) (social workers), average N[NNN{.N}] Health, Standard 08/12/2004
	Establishment – recurrent expenditure (salaries and wages) (social workers) (financial year), total Australian currency N[N(8)] Health, Standard 08/12/2004

Student nurse

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327328
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	A person employed by a health establishment who is currently studying in years one to three of a three-year certificate course. This includes any person commencing or undertaking a three-year course of training leading to registration as a nurse by the State or Territory registration board. This includes full-time general student nurse and specialist student nurse, such as mental deficiency nurse, but excludes practising nurses enrolled in post-basic training courses.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (student nurses) Health, Standard 01/03/2005
	Establishment – full-time equivalent staff (paid) (student nurses), average N[NNN{.N}] Health, Standard 01/03/2005

Trainee/pupil nurse

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327190
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	Trainee/pupil nurse includes any person commencing or undertaking a 1-year course of training leading to registration as an enrolled nurse on the state/territory registration board (includes all trainee nurses).

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – full-time equivalent staff (paid) (trainee/pupil nurses) Health, Standard 01/03/2005
	Establishment – full-time equivalent staff (paid) (trainee/pupil nurses), average N[NNN{.N}] Health, Standard 01/03/2005
	Establishment – recurrent expenditure (salaries and wages) (trainee/pupil nurses) (financial year), total Australian currency N[N(8)] Health, Standard 01/03/2005

Triage

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	334003
<i>Registration status:</i>	Health, Standard 24/03/2006
<i>Definition:</i>	Process by which a patient is briefly assessed upon arrival in the emergency department to determine the urgency of their problem and priority for care.
<i>Context:</i>	Emergency department care

Source and reference attributes

<i>Reference documents:</i>	Hospital Demand Management Group, Metropolitan Health and Aged Care Services Division, State Government Department of Human Services, Victoria. http://www.health.vic.gov.au/hdms/triage.htm
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Relational attributes

<i>Metadata items which use this glossary item:</i>	Non-admitted patient emergency department service episode – triage date, DDMMYYYY Health, Standard 07/12/2005 Non-admitted patient emergency department service episode – triage time, hhmm Health, Standard 07/12/2005 Triage category code N Health, Standard 01/03/2005
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Visiting medical officer

Identifying and definitional attributes

<i>Metadata item type:</i>	Glossary Item
<i>METeOR identifier:</i>	327170
<i>Registration status:</i>	Health, Standard 01/03/2005
<i>Definition:</i>	A visiting medical officer is a medical practitioner appointed by the hospital board to provide medical services for hospital (public) patients on an honorary, sessionally paid, or fee for service basis. This category includes the same Australian Standard Classification of Occupations codes as the salaried medical officers category.

Relational attributes

<i>Metadata items which use this glossary item:</i>	Establishment – recurrent expenditure (visiting medical officer payments) Health, Standard 01/03/2005
	Establishment – recurrent expenditure (visiting medical officer payments) (financial year), total Australian currency N[N(8)] Health, Standard 01/03/2005