

National Non-Admitted Patients Collection (NNPAC)

DATA MART - DATA DICTIONARY

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Introduction

Objectives

The objectives of the Ministry of Health ('the Ministry') Data Dictionaries are to:

- describe the information available within the National Collections
- promote uniformity, availability and consistency across the National Collections
- support the use of nationally agreed protocols and standards wherever possible
- promote national standard definitions and make them available to users.

It is hoped that the greater level of detail along with clear definitions of the business rules around each element will assist with providing and using the data.

Audiences

The target audiences for Data Dictionaries are data providers, software developers, and data users.

Format

All data element definitions in the Data Dictionaries are presented in a format based on the Australian Institute of Health and Welfare National Health Data Dictionary. This dictionary is based on the ISO/IEC Standard 11179 *Specification and Standardization of Data Elements*—the international standard for defining data elements issued by the International Organization for Standardization and the International Electrotechnical Commission.

The format is described in detail in the appendices of this dictionary.

Changes to dictionary format

A more rigorous approach to recording changes in the data elements has been introduced in these dictionaries along with background material on the features of time-series data for each element.

In summary, the changes to the data dictionaries include:

- standardisation of the element names so that, for instance, a healthcare user's NHI number is referred to as NHI number in all collections
- elements are listed alphabetically within each table, and the tables are organised alphabetically
- each table is described
- verification rules, historical information, and data quality information are included
- alternative names for the elements are listed
- information about how the data is collected is given
- related data, and references to source documents and source organisations are included
- an alphabetical index is included
- code tables are included with the element, or a reference given to the Ministry's web site (for large or dynamic code tables).

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National Non-Admitted Patients Collection (NNPAC)

Purpose	<p>The National Non-Admitted Patients Data Mart stores data about non-admitted face-to-face secondary care events, such as outpatient and emergency department visits.</p> <p>The main purposes of the NNPAC Data Mart are to:</p> <ul style="list-style-type: none">- monitor non-admitted patient events- analyse inter-district flows- monitor the impact of policy. <p>Admitted patient events are held in the NMDS collection.</p>
Content	<p>Non-attendances are in scope, and inclusion is mandatory for clinics run by doctors. A non-attendance is where the appointment was not cancelled but the patient either never arrived or left before being seen by the doctor.</p>
Start date	<p>The NNPAC Data Mart was established in 2006 and contains data from July 2005.</p>
Guide for use	<p>All attributes are stored as they were at the time of the transaction, that is, they do not reflect current values, unless explicitly stated, for example, ethnicity, gender and geographic information.</p> <p>The main NNPAC fact tables, Fact NAP Event and Fact NAP Event Item, are not directly visible to end users. Depending on security permissions, end users have access to two views of fact_nap_event:</p> <ul style="list-style-type: none">- Fact NAP Event NI (a non-identifiable view) or- Fact NAP Event ID (an identifiable view).
Contact information	<p>For further information about this collection or to request specific datasets or reports, contact the NZHIS Analytical Services team on</p> <ul style="list-style-type: none">- Phone: (04) 816 2893 Fax: (04) 816 2898,- or e-mail data-enquiries@moh.govt.nz
Collection methods	<p>The NNPAC data is sourced from DHBs' various management systems for non-admitted events.</p> <p>The data will be extracted by DHBs and other providers, transferred using FTP, in the format defined in the NNPAC File Specification document.</p>
Frequency of updates	<p>NNPAC receives monthly extracts from DHBs which are then loaded into the Ministry of Health data mart.</p>
Security of data	<p>The data in the Ministry of Health data warehouse (including NNPAC) is protected with database passwords, Business Object passwords and Virtual Private Database rules and is only available through the secure Health Intranet.</p> <p>Authorised members of the Ministry of Health and District Health Boards have access to the data for analytical purposes, via the Business Objects reporting tool and the secure Health Information Network (HIN). Business Objects contains a subset of the data described in the Data Dictionary.</p>
Privacy issues	<p>The Ministry of Health is required to ensure that the release of information recognises any legislation related to the privacy of health information, in particular the Official Information Act 1982, the Privacy Act 1993 and the Health Information Privacy Code 1994.</p> <p>Information available to the general public is of a statistical and non-identifiable nature. Researchers requiring identifiable data will usually need approval from an Ethics Committee.</p>

National reports and publications

The Ministry of Health releases monthly standard reports for DHBs via the HIN.

Data provision

Customised datasets or summary reports are available on request, either electronically or on paper. Staff from the Analytical Services team can help to define the specifications for a request and are familiar with the strengths and weaknesses of the data. The Analytical Services team also offers a peer review service to ensure that Ministry data is reported appropriately when published by other organisations. There may be charges associated with data extracts.

NNPAC codes dimension table

Table name	dim_nap_codes
Definition	Used to hold multiple NAP flags and codes.
Primary key	dim_nap_codes_key
Business key	attendance_code, event_type, health_provider_type, accident_flag, service_type
Guide for use	Table has one row for every combination of the flags and codes that are in the table.
Relational rules	
Data content	

Accident flag

Definition A flag that denotes whether a person is receiving care or treatment as the result of an accident.

Column name accident_flag

Table name dim_nap_codes

Data type varchar2(64)

Other names

Context

Layout A

Data domain

- Y The health event/treatment is assumed to be or is assessed as the result of an accident
- N The health event/treatment is the result of an illness.
- U Unknown.

Guide for use

Verification rules Must match flag in NMDS for admissions from the Emergency Department with Purchase Unit Codes like 'ED%A'

Collection methods

Related data

Source document

Source organisation

Attendance code

Definition	Attendance code for the Health Care User event.
Column name	attendance_code
Table name	dim_nap_codes
Data type	varchar2(64)
Other names	
Context	
Layout	AAA
Data domain	ATT (attended) DNA (did not attend) DNW (did not wait)
Guide for use	<p>ATT (Attended) An attendance is where the healthcare user is assessed by a registered medical practitioner or nurse practitioner. The healthcare user received treatment, therapy, advice, diagnostic or investigatory procedures.</p> <p>DNA (Did Not Attend) Where general outpatient did not arrive, this is classed as did not attend.</p> <p>DNW (Did Not Wait) Used for ED where the patient did not wait. Also for use where general outpatient arrives but does not wait to receive service.</p>
Verification rules	Mandatory
Collection methods	
Related data	
Source document	
Source organisation	

Event type

Definition Code identifying the type of health event.

Column name event_type

Table name dim_nap_codes

Data type varchar2(64)

Other names

Context

Layout AA

Data domain CR (community referred diagnostic)
ED (emergency department)
OP (outpatient)
PC (presenting complaint) max 1
PT (procedure/treatment) max 15
DG (diagnoses at disposition) max 5

Guide for use As at 1 Jul 2008, the Event Type is determined from the submitted Purchase Unit Code. If the first two characters of the submitted Purchase Unit Code = 'ED', the Event Type is set to 'ED'. In all other cases, the Event Type is set to 'OP'.

From 1st July 2010 the direct reporting of Event type is mandatory as opposed to being derived from the Equivalent Purchase Unit.

'CR' was introduced on 1st July 2010.

PC, PT & DG were introduced on 1 July 2019 for SNOMED classification system and reported in file version 7.0

Verification rules

Collection methods

Related data Equivalent purchase unit

Source document

Source organisation

Health provider type

Definition A code for the registration body of the provider.

Column name health_provider_type

Table name dim_nap_codes

Data type varchar2(64)

Other names Health practitioner type

Context

Layout A

Data domain M (doctor), N (nurse), O (other)

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

NAP codes dimension key

<i>Definition</i>	Generated artificial key for the dim_nap_codes table
<i>Column name</i>	dim_nap_codes_key
<i>Table name</i>	dim_nap_codes
<i>Data type</i>	integer
<i>Other names</i>	
<i>Context</i>	Generated artificial key
<i>Layout</i>	#,##0
<i>Data domain</i>	
<i>Guide for use</i>	
<i>Verification rules</i>	
<i>Collection methods</i>	
<i>Related data</i>	
<i>Source document</i>	
<i>Source organisation</i>	

Service type

Definition	Type of service
Column name	service_type
Table name	dim_nap_codes
Data type	varchar2(64)
Other names	
Context	
Layout	X(8)
Data domain	'First' 'Followup' 'Preadm' 'CRD'
Guide for use	<p>As defined in the Nationwide Service Framework Data Dictionary:</p> <p>FIRST Face-to-face client contact (including telemedicine) by registered medical practitioner or nurse practitioner for first assessment for that client for that condition for that specialty. This includes follow-up of a post-discharge patient who received their inpatient treatment in a different DHB unless seen in an outreach clinic from that service. The client receives treatment, therapy, advice, diagnostic or investigatory procedures at a healthcare facility, is not admitted, does not receive a general anaesthetic, and the specialist's intent is that they will leave that facility within 3 hours from the start of the consultation.</p> <p>FOLLOWUP Subsequent face-to-face client consultation by registered medical practitioner or nurse practitioner for the same condition in the same specialty. This does not include follow-up of a post-discharge patient who received their inpatient treatment in a different DHB unless seen in an outreach clinic from that service. The client receives treatment, therapy, advice, diagnostic or investigatory procedures at a healthcare facility, is not admitted, does not receive a general anaesthetic, and the specialist's intent is that they will leave that facility within 3 hours from the start of the consultation. Service is provided in a ward and/or at a designated outpatient clinic or other suitable setting.</p> <p>PREADM (Pre-admission) Attendance at a clinic where the purpose is to medically/anaesthetically assess prior to an elective procedure.</p> <p>CRD (Community Referred Diagnostic) The Community Referred Diagnostic Event should only be used when the diagnostic is independent of any FSA follow up or treatment procedure and has been ordered by the GP.</p>
Verification rules	Mandatory for all events with a Date of Service on or after 1 July 2010
Collection methods	
Related data	Event type
Source document	
Source organisation	

NNPAC event fact table

Table name	fact_nap_event																										
Definition	Hold details of an individual non-admitted patient event or emergency department event that includes non-attended events.																										
Primary key																											
Business key	client_system_identifier, pms_unique_identifier, extract_system_identifier																										
Guide for use	<p>This table is not directly visible to end users. Depending on security permissions, end users have access to two views of fact_nap_event: Fact NAP Event NI (a non-identifiable view) or Fact NAP Event ID (an identifiable view).</p> <table> <thead> <tr> <th>KEY:</th> <th>LINKED TO:</th> </tr> </thead> <tbody> <tr> <td>Dim Age band key</td> <td>Age Band table (dim_age_band) - Shared Dimension</td> </tr> <tr> <td>Dim Agency key</td> <td>Agency Facility table (dim_agency_facility) - Shared</td> </tr> <tr> <td>Dim Facility key</td> <td>Agency Facility table (dim_agency_facility) - Shared</td> </tr> <tr> <td>Dim HCU identifiable key Shared</td> <td>HCU Identifiable table (dim_hcu_identifiable) - Shared</td> </tr> <tr> <td>Dim health care user key Shared</td> <td>Healthcare User table (dim_healthcare_user) - Shared</td> </tr> <tr> <td>Dim health specialty key Shared</td> <td>Health Specialty table (dim_health_specialty) - Shared</td> </tr> <tr> <td>Dim location key</td> <td>Location table (dim_location) - Shared</td> </tr> <tr> <td>Dim NAP codes key</td> <td>NAP Codes table (dim_nap_codes)</td> </tr> <tr> <td>Dim NAP date of service key</td> <td>Global time table (dim_global_time) - Shared</td> </tr> <tr> <td>Dim NAP time of service key</td> <td>Global time table (dim_global_time) - Shared</td> </tr> <tr> <td>Dim Purchase unit key</td> <td>Purchase Unit table (dim_purchase_unit) - Shared</td> </tr> <tr> <td>Dim Purchaser code key Shared</td> <td>Purchaser Code table (dim_purchaser_code) - Shared</td> </tr> </tbody> </table>	KEY:	LINKED TO:	Dim Age band key	Age Band table (dim_age_band) - Shared Dimension	Dim Agency key	Agency Facility table (dim_agency_facility) - Shared	Dim Facility key	Agency Facility table (dim_agency_facility) - Shared	Dim HCU identifiable key Shared	HCU Identifiable table (dim_hcu_identifiable) - Shared	Dim health care user key Shared	Healthcare User table (dim_healthcare_user) - Shared	Dim health specialty key Shared	Health Specialty table (dim_health_specialty) - Shared	Dim location key	Location table (dim_location) - Shared	Dim NAP codes key	NAP Codes table (dim_nap_codes)	Dim NAP date of service key	Global time table (dim_global_time) - Shared	Dim NAP time of service key	Global time table (dim_global_time) - Shared	Dim Purchase unit key	Purchase Unit table (dim_purchase_unit) - Shared	Dim Purchaser code key Shared	Purchaser Code table (dim_purchaser_code) - Shared
KEY:	LINKED TO:																										
Dim Age band key	Age Band table (dim_age_band) - Shared Dimension																										
Dim Agency key	Agency Facility table (dim_agency_facility) - Shared																										
Dim Facility key	Agency Facility table (dim_agency_facility) - Shared																										
Dim HCU identifiable key Shared	HCU Identifiable table (dim_hcu_identifiable) - Shared																										
Dim health care user key Shared	Healthcare User table (dim_healthcare_user) - Shared																										
Dim health specialty key Shared	Health Specialty table (dim_health_specialty) - Shared																										
Dim location key	Location table (dim_location) - Shared																										
Dim NAP codes key	NAP Codes table (dim_nap_codes)																										
Dim NAP date of service key	Global time table (dim_global_time) - Shared																										
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Dim Purchase unit key	Purchase Unit table (dim_purchase_unit) - Shared																										
Dim Purchaser code key Shared	Purchaser Code table (dim_purchaser_code) - Shared																										
Relational rules	Refer to Guide for Use																										
Data content																											

ACC claim number

Definition	This is a separate field to record the M46/45, ACC45 or AITC claim number for the event.
Column name	acc_claim_number
Table name	fact_nap_event
Data type	varchar2(64)
Other names	
Context	Injury resulting from an accident.
Layout	X(12)
Data domain	
Guide for use	
Verification rules	Optional. Valid only if accident flag = 'Y'
Collection methods	This is a free-text field to allow historical claim numbers, which come in a variety of formats, to be provided. Should match associated NMDS event of patient admitted and treated following Emergency Department NNPAC event.
Related data	Accident flag Principal health service purchaser
Source document	
Source organisation	Accident Compensation Corporation

Accident flag

Definition	A flag that denotes whether a person is receiving care or treatment as the result of an accident.
Column name	accident_flag
Table name	fact_nap_event
Data type	varchar2(64)
Other names	
Context	
Layout	A
Data domain	Y The health event/treatment is assumed to be or is assessed as the result of an accident N The health event/treatment is the result of an illness. U Unknown.
Guide for use	For this to be 'Y', the healthcare user should be admitted as a result of an accident. This would be either an acute case or someone returning for treatment (in which case an ACC Claim Number would be required).
Verification rules	Mandatory field. Must match flag in NMDS dimension for admissions from the Emergency Department with Purchase Unit Codes like 'ED%A'
Collection methods	
Related data	ACC claim number
Source document	
Source organisation	

Affiliation dimension key

<i>Definition</i>	Generated artificial key for the dim_affiliation table.
<i>Column name</i>	dim_affiliation_key
<i>Table name</i>	fact_nap_event
<i>Data type</i>	integer
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	
<i>Data domain</i>	'0' means undefined.
<i>Guide for use</i>	Links NHI submitted to ethnicity and domicile information via the dim_HCU table
<i>Verification rules</i>	Ministry of Health system-generated.
<i>Collection methods</i>	
<i>Related data</i>	
<i>Source document</i>	
<i>Source organisation</i>	

Age at time of visit

<i>Definition</i>	Age at time of visit.
<i>Column name</i>	age_at_visit
<i>Table name</i>	fact_nap_event
<i>Data type</i>	integer
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	NNN
<i>Data domain</i>	
<i>Guide for use</i>	Derived field. Date of Service - Date of birth from dim_HCU
<i>Verification rules</i>	
<i>Collection methods</i>	
<i>Related data</i>	
<i>Source document</i>	
<i>Source organisation</i>	

Age band dimension key

Definition Generated artificial key for the dim_age_band table.

Column name dim_age_band_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use Derived from the person's age at the time of service.

Used to construct reports based on age bands

Verification rules

Collection methods

Related data

Source document

Source organisation

Agency code

Definition	A code that uniquely identifies the agency contracted directly with the Ministry of Health to provide the service
Column name	agency_code
Table name	fact_nap_event
Data type	varchar2(64)
Other names	Health agency code, DHB code
Context	
Layout	XXXX
Data domain	See the Agency code table on the Ministry of Health web site at http://www.health.govt.nz/nz-health-statistics/data-references/code-tables . For further information contact Analytical Services. Contact details are given at the front of this dictionary.
Guide for use	Historically, also known as CHE (Crown Health Enterprise), HHS (Hospitals and Health Services) and AHB (Area Health Board).
Verification rules	Must be a valid code in the code table.
Collection methods	The code table is continually updated by the Ministry of Health as hospitals open and close. See the Ministry of Health web site for the most recent version.
Related data	
Source document	
Source organisation	Ministry of Health

Agency dimension key

Definition Generated artificial key for the dim_agency_facility table based on the funding agency.

Column name dim_agency_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules System generated artificial key

Collection methods

Related data

Source document

Source organisation

Alcohol Involved

Definition

Column name alcohol_involved_flag

Table name fact_nap_event

Data type varchar2(64)

Other names Alcohol Involved Flag

Context In order to better understand the impact of alcohol consumption on emergency department resources, five pilot DHBs submitted a value for emergency department presentations with effect from 1 July 2015. These DHBs were Capital & Coast, Whānganui, Lakes, Southern and Waikato. The collection of information of patients' presentations to emergency departments informed the decision to roll out to all emergency departments nationally from 1 July 2017.

Layout A

Data domain Y—Yes (agreement with the Alcohol Involved question)
N—No (disagreement with the Alcohol Involved question)
U—Not known
S—Secondary (presentation is as a consequence of others' alcohol consumption)

Guide for use The Alcohol Involved field is mandatory with effect from 1 July 2017.

Verification rules

Collection methods

Related data

Source document

Source organisation Emergency Department Advisory Group (EDAG).

Attendance code

Definition	Attendance code for the Health Care User event.
Column name	attendance_code
Table name	fact_nap_event
Data type	varchar2(64)
Other names	
Context	
Layout	AAA
Data domain	ATT (attended) DNA (did not attend) DNW (did not wait)
Guide for use	<p>ATT (Attended) An attendance is where the healthcare user is assessed by a registered medical practitioner or nurse practitioner. The healthcare user received treatment, therapy, advice, diagnostic or investigatory procedures.</p> <p>DNA (Did Not Attend) Where general outpatient did not arrive, this is classed as did not attend.</p> <p>DNW (Did Not Wait) Used for ED where the patient did not wait. Also for use where general outpatient arrives but does not wait to receive service.</p>
Verification rules	Mandatory
Collection methods	
Related data	
Source document	
Source organisation	

Batch number

Definition	A identifier for a group of records that have been processed together.
Column name	batch_number
Table name	fact_nap_event
Data type	integer
Other names	
Context	
Layout	
Data domain	1 to 999999
Guide for use	
Verification rules	
Collection methods	
Related data	
Source document	
Source organisation	

Client system identifier

Definition A unique Identifier for each source system

Column name client_system_identifier

Table name fact_nap_event

Data type varchar2(64)

Other names

Context

Layout

Data domain

Guide for use A unique Identifier for each source system will be defined by the DHB and notified to the Ministry of Health. Thus each DHB may have multiple CSIs. To enable individual records to be identified, this will be combined with the PMS unique ID. This means individual records for an individual DHB can be readily identified when source systems use the same number range.

New client system identifiers need to be registered with the Ministry of Health and must be associated with an extract system identifier

Verification rules

Collection methods

Related data Extract system identifier

Source document

Source organisation

Clinical disposition

<i>Definition</i>	What happens to a patient when they leave the observation unit
<i>Column name</i>	Clinical disposition
<i>Table name</i>	fact_nap_event_item
<i>Data type</i>	varchar2(3)
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	
<i>Data domain</i>	See the Event End Type code table in Appendix E.
<i>Guide for use</i>	Mandatory for ED events with Datetime of service on or after 1 July 2019 in file version v7.0 with an Event_End_Type_Code of OB Records the disposition of the patient at the end of their observation period
<i>Verification rules</i>	Must be a valid code in the Clinical disposition table.
<i>Collection methods</i>	
<i>Related data</i>	Clinical_code_sequence, Date_time_of_disposition Clinical_disposition
<i>Source document</i>	
<i>Source organisation</i>	

Date of birth

<i>Definition</i>	The date of birth of the Health Care User.
<i>Column name</i>	date_of_birth
<i>Table name</i>	fact_nap_event
<i>Data type</i>	date
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	CCYYMMDD
<i>Data domain</i>	
<i>Guide for use</i>	
<i>Verification rules</i>	
<i>Collection methods</i>	
<i>Related data</i>	
<i>Source document</i>	
<i>Source organisation</i>	

Datetime of departure

Definition	The date and time of the physical departure of the patient from ED
Column name	datetime_of_departure
Table name	fact_nap_event
Data type	date
Other names	
Context	
Layout	CCYYMMDDhhmm
Data domain	Valid dates and times
Guide for use	<p>The date and time of the physical departure of the patient from ED to an inpatient ward, or the time at which a patient begins a period of formal observation (whether in ED observation beds, an observation unit, or similar), or the time at which a patient being discharged from the ED to the community physically leaves the ED.</p> <p>The datetime of departure is the time at which the patient is physically moved from ED to an inpatient ward, or the time at which a patient begins a period of formal observation, whether in ED observation beds, an observation unit, or similar. The physical move will follow, or be concurrent with, a formal admission protocol, but it is the patient movement that stops the clock on the emergency event, not associated administrative decisions or tasks.</p> <p>Inpatient wards include short stay units (or units with a similar function). Under certain circumstances, a 'decant' ward designed to deal with surge capacity will qualify as an inpatient ward. Key criteria are that patients should be in beds rather than on trolleys, and be under the care of appropriate clinical staff.</p> <p>A formal observation area generally has dedicated space, dedicated staffing, and fixed capacity (beds). In relation to transfers to an APU; if there is a clinical intervention and supervision by ED staff over and above triage, then the time from presentation to transfer should be counted in reporting against the ED LOS target. Otherwise, it should be excluded.</p> <p>Datetime of departure is the time at which a patient being discharged from the ED to the community physically leaves the ED. If a patient's treatment is finished, and they are waiting in the ED facilities only as a consequence of their personal transport arrangements for pickup, they can be treated as discharged for the purposes of this measure. If the patient goes home then returns to become an inpatient, then the clock stops at the point they leave the ED. If the patient goes home then returns to ED for further care, it is counted as another ED admission.</p> <p>If not supplied this field will be set to 999912312359 (i.e. 31/12/9999 23:59)</p>
Verification rules	<p>Mandatory for ED events with Datetime of service on or after 1 July 2010 and attendance code 'ATT'. If not supplied this field will be set to 999912312359 (i.e. 31/12/9999 23:59)</p> <p>Must be on or after Datetime of Event End</p>
Collection methods	
Related data	

Datetime of disposition

Definition	The date and time of the physical departure of the patient from an ED observation area
Column name	datetime_of_disposition
Table name	fact_nap_event_item
Data type	datetime
Other names	
Context	
Layout	CCYYMMDDhhmm
Data domain	Valid dates and times
Guide for use	<p>The date and time of the physical departure of the patient from ED observation area to an in-patient ward, or the time at which a patient being discharged from the ED observation area to the community physically leaves the ED observation area.</p> <p>A formal observation area generally has dedicated space, dedicated staffing, and fixed capacity (beds)</p> <p>If not supplied this field will be set to 999912312359 (i.e. 31/12/9999 23:59)</p>
Verification rules	Mandatory for events with an event_end_type_code of OB
Collection methods	
Related data	Clinical disposition, Clinical code, Clinical code sequence
Source document	
Source organisation	

Datetime of event end

Definition	The date and time on which the event ended.
Column name	datetime_of_event_end
Table name	fact_nap_event
Data type	date
Other names	
Context	For ED events this field records the change in administrative status. For ED patients who have an NMDS event recorded, this is the datetime the NMDS event is assumed to have commenced. For all other patients this is the same as datetime of departure.
Layout	CCYYMMDDhhmm
Data domain	Valid dates and times
Guide for use	Retired in July 2011. Introduced as date of event end in 2008 to record where an ED event went past midnight. Replaced with datetime of event end in 2010 to be consistent with other datetime field changes. Other datetimes now collected on ED events supercede the need to collect this date. This field recorded a change in a patient's administrative status rather than a change in physical location. It was used as follows: - For all events that had an NMDS event recorded, ED event end datetime was the date time that the NMDS event was assumed to have commenced. This may not have been the same as the datetime of departure from ED. - For all other patients the ED event end datetime was the same as the datetime of departure from ED. After 1 July 2011 this field will automatically be populated with 31/12/9999 23:59
Verification rules	
Collection methods	This was an optional field. From 1 July 2010 to 30 June 2011, if not submitted on an ED event it was populated with the Datetime of Departure. If not submitted on outpatient events it was populated with the date of service and time of 23:59.
Related data	Datetime of Service, Datetime of Departure
Source document	
Source organisation	

Datetime of first contact

Definition	The date and time that the triaged patient's treatment starts by a suitable ED medical professional (could be the same time as the datetime of service if treatment begins immediately).
Column name	datetime_of_first_contact
Table name	fact_nap_event
Data type	date
Other names	
Context	
Layout	CCYYMMDDhhmm
Data domain	Valid dates and times
Guide for use	
Verification rules	Mandatory for ED events with Datetime of Service on or after 1 July 2010 and attendance code of 'ATT'. If not supplied this field will be set to 999912312359 (i.e. 31/12/9999 23:59) Must be on or after Datetime of Service
Collection methods	
Related data	Datetime of Service
Source document	
Source organisation	

Datetime of presentation

<i>Definition</i>	The date and time a patient presents/or is presented physically to the ED department; either the triage nurse or clerical staff, whichever comes first
<i>Column name</i>	datetime_of_presentation
<i>Table name</i>	fact_nap_event
<i>Data type</i>	date
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	CCYYMMDDhhmm
<i>Data domain</i>	Valid date and time.
<i>Guide for use</i>	
<i>Verification rules</i>	Mandatory for ED events with Datetime of service on or after 1 July 2010. If not supplied this field will be set to 999912312359 (i.e. 31/12/9999 23:59)
<i>Collection methods</i>	
<i>Related data</i>	Datetime of service, Datetime of first contact
<i>Source document</i>	
<i>Source organisation</i>	

Datetime of service

<i>Definition</i>	<p>The date and time on which the outpatient event took place for non ED events.</p> <p>For ED events it is the date and time the triage nurse/suitable ED medical professional starts the process of categorising the triage level of the incoming patient.</p>
<i>Column name</i>	datetime_of_service
<i>Table name</i>	fact_nap_event
<i>Data type</i>	date
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	CCYYMMDDhhmm
<i>Data domain</i>	Valid date and time.
<i>Guide for use</i>	<p>The appropriate standard of care is for the first contact with staff in the ED to be with a triage nurse ('triage first'), so this datetime ideally should be the same as 'datetime of presentation.' However, it is understood that patients may present to a receptionist first in some departments, or may wait in a triage queue on some occasions. Hence 'datetime of presentation' and 'datetime of triage' are recorded separately. However, DHBs should endeavour to have 'triage first' and to ensure triage is undertaken immediately upon the patient's arrival.</p> <p>Note the 'datetime of triage' is from the start of triage. It is understood that many EDs record the time the triage nurse 'files' the electronic triage record for the patient and that this is often towards the end of the triage process. DHBs with EDs of this sort should endeavour to have a system which electronically records the start of triage.</p> <p>For outpatient visits the time of service should be the actual service start time if available. If not, then the booked appointment time may be used or a default time of 0000 may be sent. The format for this would be CCYYMMDD0000.</p>
<i>Verification rules</i>	<p>Must be: a valid date; on or before the NNPAC processing date; not more than 20 years before the NNPAC processing date</p> <p>Must be on or before Datetime of First Contact</p>
<i>Collection methods</i>	
<i>Related data</i>	Datetime of Presentation, Datetime of First Contact
<i>Source document</i>	
<i>Source organisation</i>	

Dim funding agency code key***Definition******Column name*** dim_funding_agency_code_key***Table name*** fact_nap_event***Data type*** integer***Other names******Context******Layout******Data domain******Guide for use******Verification rules******Collection methods******Related data******Source document******Source organisation***

Dim purchaser agency key

Definition

Column name dim_purchaser_agency_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Domicile code

Definition	Domicile code retrieved from the patient's NHI record (the NHI address history that relates to the date of service). Used to determine the DHB of domicile only if the sent domicile code is invalid.
Column name	domicile_code
Table name	fact_nap_event
Data type	varchar2(64)
Other names	
Context	
Layout	XXNN
Data domain	See the Domicile code table on the Ministry of Health web site at http://www.health.govt.nz/nz-health-statistics/data-references/code-tables . For further information contact Analytical Services. Contact details are given at the front of this dictionary.
Guide for use	<p>Statistics NZ Health Domicile Code representing a person's usual residential address. Also used for facility addresses.</p> <p>Usual residential address is defined as the address of the dwelling where a person considers himself or herself to usually reside. (Statistics NZ definition of 'usually resident'.) If a person usually lives in a rest home or a hospital, that is considered their usual residential address.</p> <p>This is used as a data quality test to compare with the sent domicile code and is also used for deriving the patient's DHB of domicile.</p>
Verification rules	Includes leading zeroes. Must be a valid code in the Domicile Code table.
Collection methods	
Related data	Sent domicile, IDF DHB source, Dim IDF DHB
Source document	
Source organisation	

Encrypted HCU id

Definition	Encrypted health care user ID
Column name	encrypted_hcu_id
Table name	fact_nap_event
Data type	varchar2(64)
Other names	Encrypted HCU identifier, Encrypted NHI, etc. See other names for the NHI number under Guide for use.
Context	The NHI number uniquely identifies healthcare users, and allows linking between different data collections. It is encrypted to ensure privacy of individual records.

Layout

Data domain

Guide for use

The NHI number is the cornerstone of the Ministry of Health's data collections. It is a unique 7-character identification number assigned to a healthcare user by the National Health Index (NHI) database.

The NHI number is also known as National Health Index, HCU identifier, NHI, HCU, HCU Number, Healthcare User identifier, HCU identification number, NMPI number, Hospital Number, Patient Number.

When duplicate records for a healthcare user are merged, one of their NHI numbers will be deemed to be the master (or primary), and the others become event (or secondary) NHI numbers. This does not affect which NHI numbers are used in local systems.

The NHI number that is sent in by the data provider is encrypted during the loading process. Only this encrypted NHI number is stored.

For the analysis of healthcare information relating to a unique individual, the master NHI number should be used. Please contact Analytical Services for further information on how to obtain the master encrypted NHI number if you are performing your own data extraction.

The Privacy Commissioner considers the NHI number to be personally identifying information (like name and address) so, if it is linked to clinical information, it must be held securely and the healthcare user's privacy protected. The Encrypted NHI number is not considered personally identifying.

The Ministry of Health will return data containing unencrypted NHI numbers to providers who have sent it in. Information available to the general public is of a statistical and non-identifiable nature. Researchers requiring identifiable data will usually need approval from an Ethics Committee.

VALIDATION

The first three characters of an NHI number must be alpha (but not 'I' or 'O'). The 4th to 6th characters must be numeric. The 7th character is a check digit modulus 11.

ENCRYPTION

The NHI number is encrypted using a one-way encryption algorithm. The aim is to provide an encrypted number that can be sent across public (unsecured) networks.

Verification rules

Must be registered on the NHI before use.

There is a verification algorithm which ensures that the NHI number is

in the correct format and is valid.

Collection methods

NHI numbers are often included on patient notes and other patient documentation. New numbers can be allocated by health providers who have direct access to the NHI Register.

Related data**Source document**

<http://www.health.govt.nz/our-work/preventative-health-wellness/immunisation/national-immunisation-register/national-health-index-nhi> for more information on the NHI number

Source organisation

Ministry of Health

Equivalent purchase unit

<i>Definition</i>	Purchase unit indicates which contract the event is funded under.
<i>Column name</i>	equivalent_purchase_unit
<i>Table name</i>	fact_nap_event
<i>Data type</i>	varchar2(64)
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	X(8)
<i>Data domain</i>	
<i>Guide for use</i>	<p>For DNA (Did Not Attend) or DNW (Did Not Wait) is the Purchase Unit that would have allocated had they attended or waited. For ED attendances where only ED service is triage, the purchase unit is ED00002.</p> <p>Purchase Unit Codes are defined by the Nationwide Service Framework Data Dictionary (see the Ministry website at http://www.nsf.health.govt.nz/apps/nsfl.nsf/pagesmh/463?Open). They are updated annually and are subject to change according to financial year. For example 2006/07 financial year data should be compliant with v11 of the NSF Data Dictionary, 2007/08 financial year data should be compliant with v12 of the NSF Data Dictionary and so on.</p>
<i>Verification rules</i>	Purchase unit start and end date validation is based on date of service
<i>Collection methods</i>	
<i>Related data</i>	
<i>Source document</i>	
<i>Source organisation</i>	

Ethnicity code 1

Definition Ethnic affiliation

Column name ethnicity_code_1

Table name fact_nap_event

Data type varchar2(64)

Other names

Context

Layout

Data domain See the Ethnicity code table on the Ministry of Health web site at <http://www.health.govt.nz/nz-health-statistics/data-references/code-tables>. For further information contact Analytical Services. Contact details are given at the front of this dictionary.

Guide for use A social group whose members have one or more of the following four characteristics:

- they share a sense of common origins
- they claim a common and distinctive history and destiny
- they possess one or more dimensions of collective cultural individuality
- they feel a sense of unique collective solidarity.

Verification rules

Collection methods

Related data

Source document

Source organisation

Ethnicity code 2

Definition Ethnic affiliation

Column name ethnicity_code_2

Table name fact_nap_event

Data type varchar2(64)

Other names

Context

Layout

Data domain See the Ethnicity code table on the Ministry of Health web site at <http://www.health.govt.nz/nz-health-statistics/data-references/code-tables>. For further information contact Analytical Services. Contact details are given at the front of this dictionary.

Guide for use Ethnic code represents a social group whose members have one or more of the following four characteristics:

- they share a sense of common origins
- they claim a common and distinctive history and destiny
- they possess one or more dimensions of collective cultural individuality
- they feel a sense of unique collective solidarity.

Verification rules

Collection methods

Related data

Source document

Source organisation

Ethnicity code 3

Definition Ethnic affiliation

Column name ethnicity_code_3

Table name fact_nap_event

Data type varchar2(64)

Other names

Context

Layout

Data domain See the Ethnicity code table on the Ministry of Health web site at <http://www.health.govt.nz/nz-health-statistics/data-references/code-tables>. For further information contact Analytical Services. Contact details are given at the front of this dictionary.

Guide for use A social group whose members have one or more of the following four characteristics:

- they share a sense of common origins
- they claim a common and distinctive history and destiny
- they possess one or more dimensions of collective cultural individuality
- they feel a sense of unique collective solidarity.

Verification rules

Collection methods

Related data

Source document

Source organisation

Event end date submitted

Definition Whether the Event End Date Time was provided in an extract or set to the default during the load process.

Column name end_date_submitted_flag

Table name fact_nap_event

Data type char(1)

Other names

Context

Layout

Data domain 'Y' - the Datetime of Event End was submitted
'N' - the Datetime of Event End date was set to the Date of Service and time of 23:59

Guide for use The default for Event End date was set to the Date of Service and time of 23:59

Verification rules

Collection methods Derived during the NNPAC Load process.

Related data Datetime of event end

Source document

Source organisation

Event end type code

<i>Definition</i>	A code identifying how a healthcare event ended
<i>Column name</i>	event_end_type_code
<i>Table name</i>	fact_nap_event
<i>Data type</i>	varchar2(64)
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	AA
<i>Data domain</i>	See the Event End Type code table in Appendix E.
<i>Guide for use</i>	DW may be used on events that are transferred from ED to an inpatient event.
<i>Verification rules</i>	Mandatory for ED events with Datetime of service on or after 1 July 2010. Must be a valid code in the Event End Type code table. If not supplied, this field is set to 'UN'
<i>Collection methods</i>	
<i>Related data</i>	Datetime of departure
<i>Source document</i>	
<i>Source organisation</i>	

Event type

Definition	Code identifying the type of health event.
Column name	event_type
Table name	fact_nap_event
Data type	varchar2(64)
Other names	
Context	
Layout	AA
Data domain	CR (community referred diagnostic) ED (emergency department) OP (outpatient) PC (presenting complaint) max 1 PT (procedure/treatment) max 15 DG (diagnoses at disposition) max 5
Guide for use	<p>From 1 Jul 2008 to 31 June 2010, the Event Type was determined from the submitted Purchase Unit Code.</p> <p>From 1st July 2010 the direct reporting of Event type is mandatory as opposed to being derived from the Equivalent Purchase Unit.</p> <p>'CR' was introduced on 1st July 2010.</p> <p>PC, PT & DG were introduced on 1 July 2019 for SNOMED classification system and reported in file version 7.0</p>
Verification rules	
Collection methods	
Related data	
Source document	
Source organisation	

Extract system identifier

Definition The identifier of the system the data was extracted from.

Column name extract_system_identifier

Table name fact_nap_event

Data type varchar2(64)

Other names

Context

Layout

Data domain

Guide for use Unique identifiers for each combination of DHB and Extract system are defined by the DHB and notified to the Ministry of Health. Thus each DHB may have multiple ESI. This may not necessarily be the same as the source data system(s). It is recommended that the first three characters define the DHB.

Verification rules

Collection methods

Related data

Source document

Source organisation

Facility code

Definition	A code that uniquely identifies a healthcare facility.
Column name	facility_code
Table name	fact_nap_event
Data type	varchar2(64)
Other names	Health agency facility code, Hospital, HAF code, HAFC.
Context	The location of the event
Layout	X(4)
Data domain	See the Facility code table on the Ministry of Health web site at http://www.health.govt.nz/nz-health-statistics/data-references/code-tables . For further information contact Analytical Services. Contact details are given at the front of this dictionary.
Guide for use	<p>A healthcare facility is a place, which may be a permanent, temporary, or mobile structure that healthcare users attend or are resident in for the primary purpose of receiving healthcare or disability support services. This definition excludes supervised hostels, halfway houses, staff residences, and rest homes where the rest home is the patient's usual place of residence.</p> <p>For purchase units that have events that may occur outside the hospital where a facility code is available in the facility code table then enter it but it must reflect the location of the event. If no facility code is available leave the field blank.</p> <p>Examples: For DOM101-Professional nursing services provided in the community which will occur in the patients home use location code 5 Private Residence and leave facility code blank For S00008 Minor Operations e.g. Skin Lesions provided in GP Practice use location code 12 Primary Care and the facility code of that GP Practice from facility code table</p> <p>Unit record information with Facility codes will not be provided to members of the public without the permission of the agency involved. See the Data Access Policy on the Ministry of Health web site at http://www.health.govt.nz/publication/current-data-access-policy.</p> <p>While a facility code may already exist in the facility code table on the Ministry of Health website, Data Management Services must take specific action to add a valid facility code to the data mart facility table to allow NNPAC events to be loaded with those facilities. DHBs must request facilities to be 'enabled' for use in NNPAC.</p>
Verification rules	<p>Must be a valid facility code</p> <p>Mandatory if location type is a hospital facility</p>
Collection methods	
Related data	Location type
Source document	
Source organisation	

Facility dimension key

Definition Generated artificial key for the dim_agency_facility table based on the service facility.

Column name dim_facility_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Funding agency code

Definition	The agency/DHB of the principal purchaser.
Column name	funding_agency_code
Table name	fact_nap_event
Data type	varchar2(64)
Other names	
Context	
Layout	XXXX
Data domain	For further information contact Analytical Services. Contact details are given at the front of this dictionary.
Guide for use	Funding agency will be reported in the new version of the load file v5.0. Mandatory for events with a purchaser code of 20, 33, 34, 35, 55, A0. Must be a valid Agency Code and must align with the Purchaser Code.
Verification rules	See Section 14.2 of the NMDS File Specification v015.5
Collection methods	
Related data	
Source document	
Source organisation	

Gender

Definition The sex of a person retrieved from the patient's NHI record.

Column name gender

Table name fact_nap_event

Data type varchar2(64)

Other names

Context

Layout A

Data domain M = Male
F = Female
U = Unknown
I = Indeterminate

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Geo dimension key

<i>Definition</i>	Generated artificial key for the dim_geo table.
<i>Column name</i>	dim_geo_key
<i>Table name</i>	fact_nap_event
<i>Data type</i>	integer
<i>Other names</i>	
<i>Context</i>	stage_nap_event.domicile_code=dim_geo.domicile_code
<i>Layout</i>	
<i>Data domain</i>	
<i>Guide for use</i>	'0' means undefined.
<i>Verification rules</i>	Ministry of Health system-generated.
<i>Collection methods</i>	
<i>Related data</i>	
<i>Source document</i>	
<i>Source organisation</i>	

Global time dimension key

<i>Definition</i>	Generated artificial key for the dim_nap_event_end_date table
<i>Column name</i>	dim_nap_event_end_date_key
<i>Table name</i>	fact_nap_event
<i>Data type</i>	integer
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	
<i>Data domain</i>	
<i>Guide for use</i>	Maps to dim_global_time for reports based on calendar year and financial year
<i>Verification rules</i>	
<i>Collection methods</i>	
<i>Related data</i>	
<i>Source document</i>	
<i>Source organisation</i>	

HCU identifiable dimension key

Definition Generated artificial key for the dim_hcu_identifiable table.

Column name dim_hcu_identifiable_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Health care user dimension key

Definition Generated artificial key for the dim_health_care_user table.

Column name dim_health_care_user_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use '0' means undefined.

Verification rules Ministry of Health system-generated.

Collection methods

Related data

Source document

Source organisation

Health provider type

Definition A description of the lead clinician for the event.

Column name health_provider_type

Table name fact_nap_event

Data type varchar2(64)

Other names Health practitioner type

Context

Layout A

Data domain M (doctor)
N (nurse)
O (other)

Guide for use Nurse practitioners are counted as nurses. Midwives are included in 'other'. Where an event is with a multi-disciplinary team, default to the lead clinician.

Verification rules

Collection methods

Related data

Source document

Source organisation

Health specialty code

Definition	A classification describing the specialty or service to which a healthcare user has been assigned, which reflects the nature of the services being provided.
Column name	health_specialty_code
Table name	fact_nap_event
Data type	varchar2(64)
Other names	Health specialty
Context	The health specialty managing a patient's care.
Layout	ANN
Data domain	See the Health Specialty code table on the Ministry of Health web site at http://www.health.govt.nz/nz-health-statistics/data-references/code-tables . For further information or a printed copy of the code table, contact Analytical Services.
Guide for use	<p>Generalist and specialist subspecialty medical and surgical health specialty codes were retired from 1 July 2001.</p> <p>Validation was introduced on 1 July 2007 to reject events with a Date Of Service outside the Health Specialty Codes' start and end date. Events with a Date Of Service before 1 July 2007 that is outside the Health Specialty Code's start and end date will not be rejected.</p>
Verification rules	Must be a valid code in the code table.
Collection methods	
Related data	
Source document	
Source organisation	

Health specialty dimension key

Definition Generated artificial key for the dim_health_specialty table.

Column name dim_health_specialty_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

IDF DHB dimension key

Definition	This is the IDF DHB although it is actually a key to the DHB Reference dimension table. IDF DHB source is used to determine which DHB code to use when getting the dim key for the IDF DHB
Column name	dim_idf_dhb_key
Table name	fact_nap_event
Data type	integer
Other names	
Context	
Layout	
Data domain	
Guide for use	The DHB code to be used is determined as follows: If Sent domicile rating = 'Current', the DHB code (retrieved from dim_geo) is the one that relates to Sent domicile code If Sent domicile rating is not 'Current' and NHI domicile code is present and not overseas or undefined (prefixed with 'BD'), the DHB code (retrieved from dim_geo) is the one that relates to the NHI domicile code. If neither of the above, the DHB code is derived from the Extract system identifier on the input file (ie. the DHB that submitted the file).
Verification rules	
Collection methods	
Related data	Sent domicile code, Sent domicile rating, Domicile code
Source document	
Source organisation	

IDF DHB source

Definition	This is a derived field indicating the source field used to determine the IDF DHB.
Column name	idf_dhb_source
Table name	fact_nap_event
Data type	varchar2(14)
Other names	
Context	
Layout	
Data domain	'Sent domicile' when Sent domicile rating = 'Current' 'NHI domicile' when Sent domicile rating is not 'Current' and NHI domicile code is present and not overseas or undefined (ie. Prefixed with 'BD') 'Submitting DHB' when neither of the above apply
Guide for use	
Verification rules	
Collection methods	
Related data	IDF DHB, Sent domicile rating, Domicile code (NHI)
Source document	
Source organisation	

Location/Activity Setting

Definition Where an event takes place

Column name location

Table name fact_nap_event

Data type integer

Other names Location type
Location code
Activity setting

Context

Layout

Data domain See the Location code table in Appendix E.

Refer to Section 12.10 in the File Specification document for NNPAC for events that occur outside a hospital.

Guide for use

Verification rules

Collection methods From 1 July 2014 to 30 June 2015, Mode of Delivery codes were collected in the Location column. However, with effect from 1 July 2015, Mode of Delivery is collected in a separate field in Version 6.0 of the NNPAC input file to enable the existing Location field to be used purely for the collection of location codes. All prior records wherein the mode of delivery code was collected in the location code field have been updated with a location value of "0—Unknown", and the existing value has been translated to the new mode of delivery code set and added to the mode of delivery column.

Related data Facility code

Source document

Source organisation

Location dimension key

Definition Generated artificial key for the dim_location table.

Column name dim_location_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Mode of Delivery

<i>Definition</i>	Where an event takes place
<i>Column name</i>	mode_of_delivery_code
<i>Table name</i>	fact_nap_event
<i>Data type</i>	varchar2(64)
<i>Other names</i>	
<i>Context</i>	It is important for DHBs to be able to identify how healthcare is delivered to patients enabling trends and costs to be evaluated.
<i>Layout</i>	A
<i>Data domain</i>	See the Mode of Delivery code table in Appendix E. Refer to Section 12.10 in the File Specification document for NNPAC for events that occur outside a hospital.
<i>Guide for use</i>	Please see Appendix E for the guidelines produced by the Common Counting Technical Advisory Group (CCTAG).
<i>Verification rules</i>	
<i>Collection methods</i>	From 1 July 2014 to 30 June 2015, this was collected in the same field as the Location Code. However, with effect from 1 July 2015, Mode of Delivery is collected in a separate field in Version 6.0 of the NNPAC input file to enable the existing location field to be used purely for the collection of location codes. All prior records wherein the mode of delivery code was collected in the location code field have been updated with a location value of "0—Unknown", and the existing value has been translated to the new mode of delivery code set and added to the mode of delivery column.
<i>Related data</i>	
<i>Source document</i>	
<i>Source organisation</i>	

Mode of Delivery dimension key

Definition Generated artificial key for the dim_mode_of_delivery table.

Column name dim_lmode_of_delivery_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

NAP codes dimension key

Definition Generated artificial key for the dim_nap_codes table.

Column name dim_nap_codes_key

Table name fact_nap_event

Data type integer

Other names

Context Generated artificial key

Layout #,##0

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

NAP date of service dimension key

Definition Generated artificial key for the dim_nap_date_of_service table

Column name dim_nap_date_of_servic_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

NAP event end type dimension key

Definition Generated artificial key for the dim_nap_event_end_type table

Column name dim_nap_event_end_type_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

NAP time of service dimension key

Definition Generated artificial key for the dim_nap_time_of_service table

Column name dim_nap_time_of_servic_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

NAP triage level dimension key

Definition Generated artificial key for the dim_nap_triage_level table

Column name dim_nap_triage_level_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

NHI number

<i>Definition</i>	A unique 7-character identification number assigned to a healthcare user by the National Health Index (NHI) database.
<i>Column name</i>	nhi_number
<i>Table name</i>	fact_nap_event
<i>Data type</i>	varchar2(64)
<i>Other names</i>	Health care user id, HCU id
<i>Context</i>	NHI numbers uniquely identify healthcare users, and allow linking between different data collections.
<i>Layout</i>	AAANNNN
<i>Data domain</i>	
<i>Guide for use</i>	<p>The first three characters of an NHI number must be alpha (but not 'I' or 'O'). The 4th to 6th characters must be numeric. The 7th character is a check digit modulus 11.</p> <p>This may not be the master NHI. The master NHI should be used where it is known.</p>
<i>Verification rules</i>	There is a verification algorithm which ensures that the NHI number is in the correct format and is valid.
<i>Collection methods</i>	
<i>Related data</i>	
<i>Source document</i>	
<i>Source organisation</i>	

NMDS unique identifier

Definition	NMDS PMS unique event identifier
Column name	nmds_unique_identifier
Table name	fact_nap_event
Data type	varchar2(64)
Other names	
Context	
Layout	X(14)
Data domain	
Guide for use	<p>The Ministry wants to be able to link NNPAC, NBRS and NMDS events for the same patient using the identifier fields reported in each record.</p> <ul style="list-style-type: none"> - NMDS file spec: PMS unique identifier - NBRS file spec: Client system identifier - NNPAC file spec: NMDS PMS unique <p>Therefore if an ED patient is admitted into a ward then the NNPAC identifier needs to be the same as the NMDS identifier code.</p>
Verification rules	Mandatory for emergency department events with Equivalent purchase unit code like ED%A and Attendance code like A for all events with a Datetime of service > 1 July 2010
Collection methods	Leading and trailing blanks will be trimmed off in the load process.
Related data	
Source document	
Source organisation	

PMS unique identifier

<i>Definition</i>	A unique ID for the event generated by the source system.
<i>Column name</i>	pms_unique_identifier
<i>Table name</i>	fact_nap_event
<i>Data type</i>	varchar2(64)
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	X(14)
<i>Data domain</i>	
<i>Guide for use</i>	Used to trace the source record
<i>Verification rules</i>	
<i>Collection methods</i>	Leading and trailing blanks trimmed during the load
<i>Related data</i>	
<i>Source document</i>	
<i>Source organisation</i>	

Purchase unit dimension key

Definition Generated artificial key for the dim_purchase_unit table.

Column name dim_purchase_unit_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Purchaser code

Definition A code used to describe which organisation (purchaser) purchased the service.

Column name purchaser_code

Table name fact_nap_event

Data type varchar2(64)

Other names Principal purchaser, Health purchaser, Purchaser code, PHP, Purchase code

Context

Layout

Data domain See the Purchaser code table on the Ministry of Health web site at <http://www.health.govt.nz/nz-health-statistics/data-references/code-tables>. For further information contact Analytical Services. Contact details are given at the front of this dictionary.

Guide for use See Appendix H: Guide for Use of Purchaser Code

Verification rules Must be a valid purchaser code. From 1 July 2007 the purchaser code must be active for the Date of Service.

Collection methods

Related data

Source document

Source organisation National Data Policy Group.

Purchaser code dimension key

Definition Generated artificial key for the dim_purchaser_code table.

Column name dim_purchaser_code_key

Table name fact_nap_event

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Sent domicile code

Definition	Domicile code submitted by the DHB.
Column name	sent_domicile_code
Table name	fact_nap_event
Data type	varchar2(64)
Other names	
Context	
Layout	XXNN
Data domain	See the Domicile code table on the Ministry of Health web site at http://www.health.govt.nz/nz-health-statistics/data-references/code-tables . For further information contact Analytical Services. Contact details are given at the front of this dictionary.
Guide for use	<p>The DHB should submit the domicile code from the NHI at the time of the event. If the address of the patient has changed, the new address should be entered into the NHI and the newly generated domicile code should be submitted to NNPAC. Data quality checks are made to ensure that the sent domicile code matches the NHI domicile code.</p> <p>Used to derive the IDF DHB. All codes are accepted but if they are invalid the IDF DHB is derived from the NHI domicile code.</p>
Verification rules	Must be a valid code in the Domicile code table
Collection methods	Includes leading zeroes.
Related data	Domicile code, Sent domicile rating
Source document	
Source organisation	

Sent domicile rating

Definition	This is a derived field that provides a data quality rating of the submitted domicile code. This rating is used when determining the IDF DHB source for the health care user.
Column name	sent_domicile_rating
Table name	fact_nap_event
Data type	varchar2(7)
Other names	
Context	
Layout	
Data domain	'Current' - the submitted domicile code is valid and is current 'Invalid' - the submitted domicile code is invalid (it cannot be found in the dim_geo table). 'Retired' - the submitted domicile code has been retired
Guide for use	
Verification rules	
Collection methods	
Related data	Sent domicile code, IDF DHB source
Source document	
Source organisation	

Sent geo dimension key

<i>Definition</i>	Generated artificial key for the dim_sent_geo table.
<i>Column name</i>	dim_sent_geo_key
<i>Table name</i>	fact_nap_event
<i>Data type</i>	integer
<i>Other names</i>	
<i>Context</i>	stage_nap_event.sent_domicile_code=dim_sent_geo.domicile_code
<i>Layout</i>	
<i>Data domain</i>	
<i>Guide for use</i>	
<i>Verification rules</i>	
<i>Collection methods</i>	
<i>Related data</i>	
<i>Source document</i>	
<i>Source organisation</i>	

Service type

Definition	Type of service
Column name	service_type
Table name	fact_nap_event
Data type	varchar2(64)
Other names	
Context	
Layout	X(8)
Data domain	'First' 'Followup' 'Preadm' 'CRD'
Guide for use	<p>As defined in the Nationwide Service Framework Data Dictionary:</p> <p>FIRST Face-to-face client contact (including telemedicine) by registered medical practitioner or nurse practitioner for first assessment for that client for that condition for that specialty. This includes follow-up of a post-discharge patient who received their inpatient treatment in a different DHB unless seen in an outreach clinic from that service. The client receives treatment, therapy, advice, diagnostic or investigatory procedures at a healthcare facility, is not admitted, does not receive a general anaesthetic, and the specialist's intent is that they will leave that facility within 3 hours from the start of the consultation.</p> <p>FOLLOWUP Subsequent face-to-face client consultation by registered medical practitioner or nurse practitioner for the same condition in the same specialty. This does not include follow-up of a post-discharge patient who received their inpatient treatment in a different DHB unless seen in an outreach clinic from that service. The client receives treatment, therapy, advice, diagnostic or investigatory procedures at a healthcare facility, is not admitted, does not receive a general anaesthetic, and the specialist's intent is that they will leave that facility within 3 hours from the start of the consultation. Service is provided in a ward and/or at a designated outpatient clinic or other suitable setting.</p> <p>PREADM (Pre-admission) Attendance at a clinic where the purpose is to medically/anaesthetically assess prior to an elective procedure.</p> <p>CRD (Community Referred Diagnostic) The Community Referred Diagnostic Event should only be used when the diagnostic is independent of any FSA follow up or treatment procedure and has been ordered by the GP.</p>
Verification rules	Mandatory for all events with a Date of Service on or after 1 July 2010
Collection methods	
Related data	Event type
Source document	
Source organisation	

Submitting DHB dimension key

Definition	Generated artificial key for the dim_submitting_dhb table
Column name	dim_submitting_dhb_key
Table name	fact_nap_event
Data type	integer
Other names	
Context	
Layout	
Data domain	
Guide for use	
Verification rules	
Collection methods	
Related data	
Source document	
Source organisation	

Triage level

<i>Definition</i>	Scale of assessment of clinical urgency
<i>Column name</i>	triage_level
<i>Table name</i>	fact_nap_event
<i>Data type</i>	integer
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	N
<i>Data domain</i>	See the Triage Level code table in Appendix E.
<i>Guide for use</i>	
<i>Verification rules</i>	Mandatory for ED events with Datetime of service on or after 1 July 2010 and attendance code 'ATT' If not supplied, this field is set to zero
<i>Collection methods</i>	
<i>Related data</i>	
<i>Source document</i>	Australasian Triage scale
<i>Source organisation</i>	Australasian College for Emergency Medicine

Volume

Definition Volume of purchase units

Column name volume

Table name fact_nap_event

Data type number

Other names

Context

Layout NNNNN.NNN (floating point)

Data domain

Guide for use Volume is dependent on the Unit of Measure of the purchase unit. If the IDF Unit of measure is 'Event' the volume should be 1. If the IDF Unit of measure is client the volume should be 0. If the IDF Unit of Measure is 'Volume' then the volume will reflect an amount relevant to the unit of measure. E.g. Community Radiology is purchased by relative value units (RVU) and the volume of RVU, which can be a fraction, should be recorded. All DNAs and DNWs should have a volume of 0. All purchase units with a purchase unit type = P preadmission should have a volume of 0.

Note: This is defined as a number not an integer and will accept decimal places if required (valid volumes include, for example, 0, 0.25, 1, 5.5, 200).

Verification rules

Collection methods

Related data Purchase unit code, Unit of measure and IDF unit of measure, Attendance code, Purchase unit type

Source document

Source organisation

NNPAC event item fact table

Table name	fact_nap_event_item											
Definition	Hold details of an individual emergency department clinical code event											
Primary key												
Business key	client_system_identifier, pms_unique_identifier, NHI											
Guide for use	<p>This table is not directly visible to end users. Depending on security permissions, end users have access to two views of fact_nap_event: Fact NAP Event Item NI (a non-identifiable view) or Fact NAP Event Item ID (an identifiable view).</p> <table> <thead> <tr> <th>KEY:</th> <th>LINKED TO:</th> </tr> </thead> <tbody> <tr> <td>Dim HCU identifiable key Shared</td> <td>HCU Identifiable table (dim_hcu_identifiable) -</td> </tr> <tr> <td>Dim health care user key Shared</td> <td>Healthcare User table (dim_healthcare_user) -</td> </tr> <tr> <td>–</td> <td></td> </tr> <tr> <td>Dim ED snomed code key (dim_ed_snomed_code) - Shared</td> <td>ED snomed code table</td> </tr> </tbody> </table>		KEY:	LINKED TO:	Dim HCU identifiable key Shared	HCU Identifiable table (dim_hcu_identifiable) -	Dim health care user key Shared	Healthcare User table (dim_healthcare_user) -	–		Dim ED snomed code key (dim_ed_snomed_code) - Shared	ED snomed code table
KEY:	LINKED TO:											
Dim HCU identifiable key Shared	HCU Identifiable table (dim_hcu_identifiable) -											
Dim health care user key Shared	Healthcare User table (dim_healthcare_user) -											
–												
Dim ED snomed code key (dim_ed_snomed_code) - Shared	ED snomed code table											

Relational rules

Data content

Agency Code

Definition	A code that uniquely identifies the agency contracted directly with the Ministry of Health to provide the service
Column name	agency_code
Table name	fact_nap_event
Data type	varchar2(64)
Other names	Health agency code, DHB code
Context	
Layout	XXXX
Data domain	See the Agency code table on the Ministry of Health web site at http://www.health.govt.nz/nz-health-statistics/data-references/code-tables . For further information contact Analytical Services. Contact details are given at the front of this dictionary.
Guide for use	Historically, also known as CHE (Crown Health Enterprise), HHS (Hospitals and Health Services) and AHB (Area Health Board).
Verification rules	Must be a valid code in the code table.
Collection methods	The code table is continually updated by the Ministry of Health as hospitals open and close. See the Ministry of Health web site for the most recent version.
Related data	
Source document	
Source organisation	Ministry of Health

Clinical Code Sequence

Definition	Sequential number to identify each event item
Column name	Clinical_code_sequence
Table name	fact_nap_event_item
Data type	varchar2(2)
Other names	
Context	
Layout	
Data domain	
Guide for use	Used to sequentially uniquely identify each event_item in the record_type
Verification rules	Must be in the range 01 – 21 including leading zeros. Mandatory were the record_type is event_item and file version is V7.0
Collection methods	
Related data	Clinical_code_sequence, Date_time_of_disposition Clinical_disposition
Source document	
Source organisation	

Datetime of disposition

<i>Definition</i>	The date and time of the physical departure of the patient from an ED observation area
<i>Column name</i>	datetime_of_disposition
<i>Table name</i>	fact_nap_event_item
<i>Data type</i>	datetime
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	CCYYMMDDhhmm
<i>Data domain</i>	Valid dates and times
<i>Guide for use</i>	<p>The date and time of the physical departure of the patient from ED observation area to an in-patient ward, or the time at which a patient being discharged from the ED observation area to the community physically leaves the ED observation area.</p> <p>A formal observation area generally has dedicated space, dedicated staffing, and fixed capacity (beds)</p> <p>If not supplied this field will be set to 999912312359 (i.e. 31/12/9999 23:59)</p>
<i>Verification rules</i>	Mandatory for events with an event_end_type_code of OB
<i>Collection methods</i>	
<i>Related data</i>	Clinical disposition, Clinical code, Clinical code sequence
<i>Source document</i>	
<i>Source organisation</i>	

Datetime of service

<i>Definition</i>	<p>The date and time on which the outpatient event took place for non ED events.</p> <p>For ED events it is the date and time the triage nurse/suitable ED medical professional starts the process of categorising the triage level of the incoming patient.</p>
<i>Column name</i>	datetime_of_service
<i>Table name</i>	f fact_nap_event_item
<i>Data type</i>	date
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	CCYYMMDDhhmm
<i>Data domain</i>	Valid date and time.
<i>Guide for use</i>	<p>The appropriate standard of care is for the first contact with staff in the ED to be with a triage nurse ('triage first'), so this datetime ideally should be the same as 'datetime of presentation.' However, it is understood that patients may present to a receptionist first in some departments, or may wait in a triage queue on some occasions. Hence 'datetime of presentation' and 'datetime of triage' are recorded separately. However, DHBs should endeavour to have 'triage first' and to ensure triage is undertaken immediately upon the patient's arrival.</p> <p>Note the 'datetime of triage' is from the start of triage. It is understood that many EDs record the time the triage nurse 'files' the electronic triage record for the patient and that this is often towards the end of the triage process. DHBs with EDs of this sort should endeavour to have a system which electronically records the start of triage.</p> <p>For outpatient visits the time of service should be the actual service start time if available. If not, then the booked appointment time may be used or a default time of 0000 may be sent. The format for this would be CCYYMMDD0000.</p>
<i>Verification rules</i>	<p>Must be: a valid date; on or before the NNPAC processing date; not more than 20 years before the NNPAC processing date</p> <p>Must be on or before Datetime of First Contact</p>
<i>Collection methods</i>	
<i>Related data</i>	Datetime of Presentation, Datetime of First Contact
<i>Source document</i>	
<i>Source organisation</i>	

Dim agency key

<i>Definition</i>	Generated artificial key for the dim_agency_facility table based on the funding agency.
<i>Column name</i>	dim_agency_key
<i>Table name</i>	fact_nap_event_item
<i>Data type</i>	integer
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	
<i>Data domain</i>	
<i>Guide for use</i>	
<i>Verification rules</i>	
<i>Collection methods</i>	
<i>Related data</i>	Linked to dim_agency_facility
<i>Source document</i>	
<i>Source organisation</i>	

Dim clinical code key

<i>Definition</i>	SNOWMED code key, dimension view based on dim_sno_preferd_GB_description.
<i>Column name</i>	dim_clinical_code_key
<i>Table name</i>	fact_nap_event_item
<i>Data type</i>	integer
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	
<i>Data domain</i>	
<i>Guide for use</i>	
<i>Verification rules</i>	
<i>Collection methods</i>	
<i>Related data</i>	Linked to dim_nap_clinical_code
<i>Source document</i>	
<i>Source organisation</i>	

Dim HCU identifiable key***Definition******Column name*** dim_HCU_identifiable_key***Table name*** fact_nap_event_item***Data type*** integer***Other names******Context******Layout******Data domain******Guide for use******Verification rules******Collection methods******Related data*** Linked to dim_hcu***Source document******Source organisation***

Dim health care user key

Definition Generated artificial key for the dim_health_care_user table.

Column name dim_health_care_user_key

Table name fact_nap_event_item

Data type integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data dim_health_care_user

Source document

Source organisation

Dim NAP batch key

Definition

Column name Dim_NAP_batch_key

Table name fact_nap_event_item

Data type Number(38)

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data dim_nap_batch

Source document

Source organisation

Dim nap clinical disposition key

<i>Definition</i>	link to dim_clinical_disp_code dimension, clinical disposition code key
<i>Column name</i>	dim_nap_clinical_disposition_key
<i>Table name</i>	fact_nap_event_item
<i>Data type</i>	Integer
<i>Other names</i>	
<i>Context</i>	
<i>Layout</i>	
<i>Data domain</i>	
<i>Guide for use</i>	
<i>Verification rules</i>	
<i>Collection methods</i>	
<i>Related data</i>	link to dim_clinical_disp_code dimension, clinical disposition code key
<i>Source document</i>	
<i>Source organisation</i>	

Dim nap date of service key

Definition	link to dim_nap_date_of_service
Column name	dim_nap_date_of_service_key
Table name	fact_nap_event_item
Data type	Integer
Other names	
Context	
Layout	
Data domain	
Guide for use	
Verification rules	
Collection methods	
Related data	dim_nap_date_of_service
Source document	
Source organisation	

Dim nap event item type key

Definition	event item type code
Column name	dim_nap_event_item_type_key
Table name	fact_nap_event_item
Data type	Integer
Other names	
Context	
Layout	
Data domain	
Guide for use	
Verification rules	
Collection methods	
Related data	dim_nap_event_item_type
Source document	
Source organisation	

Dim nap event keys key

Definition	Key used to link up parent record fact_nap_event and child record in fact_nap_event_item; contains unique event identifier defined as combination (client_system_identifier, pms_unique_identifier)
Column name	dim_nap_event_keys_key
Table name	fact_nap_event_item
Data type	Integer
Other names	
Context	
Layout	
Data domain	
Guide for use	
Verification rules	
Collection methods	
Related data	dim_nap_event_keys
Source document	
Source organisation	

Dim nap time of service key

Definition	The same as for the parent record in fact_nap_event
Column name	dim_nap_time_of_service_key
Table name	fact_nap_event_item
Data type	Integer
Other names	
Context	
Layout	
Data domain	
Guide for use	
Verification rules	
Collection methods	
Related data	dim_nap_time_of_service
Source document	
Source organisation	

DSS update time

Definition

Column name Ddd_update_time

Table name fact_nap_event_item

Data type Date

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data dim_nap_time_of_service

Source document

Source organisation

Extract system identifier

Definition

Column name Extract_system_edentifier

Table name fact_nap_event_item

Data type Varchar2(64)

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

NNPAC dim nap clinical code

Table name dim_nap_clinical_code

Definition Dimension view based on dim_sno_preferd_GB_description

Primary key

Business key client_system_identifier, pms_unique_identifier, NHI

Guide for use Dimension view based on dim_sno_preferd_GB_description

Relational rules

Data content

Acceptability ID

Definition

Column name Acceptability_id
Table name dim_nap_clinical_code

Data type Number (18)

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source-organisation

Active

Definition

Column name acitive

Table name dim_nap_clinical_code

Data type Number (1)

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Concept ID**Definition****Column name** dim_concept_id**Table name** dim_nap_clinical_code**Data type** Number (18)**Other names****Context****Layout****Data domain****Guide for use****Verification rules****Collection methods****Related data****Source document****Source-organisation**

Definition status ID**Definition**

Column name Definition_status_id
Table name dim_nap_clinical_code

Data type Number (18)

Other names**Context****Layout****Data domain****Guide for use****Verification rules****Collection methods****Related data****Source document****Source organisation**

Dim clinical code key

Definition

Column name dim_clinical_code_key

Table name dim_nap_clinical_code

Data type Integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

DSS update time

Definition

Column name Dss_update_time

Table name dim_nap_clinical_code

Data type Date

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

DWH load date***Definition******Column name*** Dwh_load_date***Table name*** dim_nap_clinical_code***Data type*** Date***Other names******Context******Layout******Data domain******Guide for use******Verification rules******Collection methods******Related data******Source document******Source organisation***

Effective time

Definition

Column name Effective_time

Table name dim_nap_clinical_code

Data type date

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

FSN description active***Definition******Column name*** Fsn_description_active***Table name*** dim_nap_clinical_code***Data type*** Number (1)***Other names******Context******Layout******Data domain******Guide for use******Verification rules******Collection methods******Related data******Source document******Source organisation***

FSN description ID

Definition

Column name fsn_description_id
Table name dim_nap_clinical_code

Data type Number (18)

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

FSN effective time

Definition

Column name fsn_effective_time

Table name dim_nap_clinical_code

Data type Date

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

FSN entire case significant flg***Definition******Column name*** fsn_entire_case_significant_flg***Table name*** dim_nap_clinical_code***Data type*** Number (1)***Other names******Context******Layout******Data domain******Guide for use******Verification rules******Collection methods******Related data******Source document******Source organisation***

Fully specified name***Definition***

Column name fully_specified_name
Table name dim_nap_clinical_code

Data type Varchr2 (255)

Other names***Context******Layout******Data domain******Guide for use******Verification rules******Collection methods******Related data******Source document******Source organisation***

Module ID**Definition**

Column name module_id
Table name dim_nap_clinical_code

Data type Number (18))

Other names**Context****Layout****Data domain****Guide for use****Verification rules****Collection methods****Related data****Source document****Source organisation**

Preferred term**Definition****Column name** Preferred_term**Table name** dim_nap_clinical_code**Data type** Varchr2 (255)**Other names****Context****Layout****Data domain****Guide for use****Verification rules****Collection methods****Related data****Source document****Source organisation**

Prf entire case significant flg***Definition******Column name*** Prf_entire_case_significan_flg***Table name*** dim_nap_clinical_code***Data type*** Number (1)***Other names******Context******Layout******Data domain******Guide for use******Verification rules******Collection methods******Related data******Source document******Source organisation***

Prf term description active***Definition******Column name*** Prf_term_description_active***Table name*** dim_nap_clinical_code***Data type*** Number (1)***Other names******Context******Layout******Data domain******Guide for use******Verification rules******Collection methods******Related data******Source document******Source organisation***

Prf term description ID***Definition******Column name*** Prf_term_description_id***Table name*** dim_nap_clinical_code***Data type*** Number (18)***Other names******Context******Layout******Data domain******Guide for use******Verification rules******Collection methods******Related data******Source document******Source organisation***

Prf term effective time

Definition

Column name Prf_term_effective_time

Table name dim_nap_clinical_code

Data type Date

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Refset ID

Definition

Column name refset_id
Table name dim_nap_clinical_code

Data type Number (18)

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

NNPAC dim nap clinical disp code

Table name dim_nap_clinical_disp_code

Definition

Primary key

Business key

Guide for use

Relational rules

Data content

Clinical desposition code

Definition

Column name Clinical_disposeition_code

Table name dim_nap_clinical_disp_code

Data type Varchar (5)

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Description

Definition

Column name description

Table name dim_nap_clinical_disp_code

Data type Varchar (64)

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Dim nap clinical disp key

Definition

Column name Dim_nap_clinical_disp_key

Table name dim_nap_clinical_disp_code

Data type Integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

DSS update time

Definition

Column name Dss_update_time

Table name dim_nap_clinical_disp_code

Data type Date

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

NNPAC dim nap event item type

Table name dim_nap_event_item_type

Definition

Primary key

Business key

Guide for use

Relational rules

Data content

Description

Definition

Column name description

Table name dim_nap_event_item_type

Data type Varchar2 (64)

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Dim nap event item type key

Definition

Column name Dim_nap_event_item_type_key

Table name dim_nap_event_item_type

Data type Integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

DSS update time

Definition

Column name Dss_update_time

Table name dim_nap_event_item_type

Data type Date

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Event type

Definition

Column name Event_type

Table name dim_nap_event_item_type

Data type Varchar2 (64)

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

NNPAC dim nap event keys

Table name dim_nap_event_item_keys

Definition

Primary key

Business key

Guide for use

Relational rules

Data content

Client system identifier

Definition

Column name Client_system_idedntifier

Table name dim_nap_event_item_type

Data type Varchar2 (64)

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

Dim nap event keys key

Definition

Column name Dim_nap_event_keys_key

Table name dim_nap_event_item_type

Data type Integer

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

DSS update time

Definition

Column name Dss_update_time

Table name dim_nap_event_item_type

Data type Date

Other names

Context

Layout

Data domain

Guide for use

Verification rules

Collection methods

Related data

Source document

Source organisation

PMS unique identifier***Definition***

Column name pms_unique_identifier
Table name dim_nap_event_item_type

Data type Varchar2 (64)

Other names***Context******Layout******Data domain******Guide for use******Verification rules******Collection methods******Related data******Source document******Source organisation***

Appendix A: Logical to Physical Table Mapping

The following list shows the mapping of the logical, or business, table name to the actual physical table name.

<i>Logical (Business) Table Name</i>	<i>Physical Table Name</i>
NNPAC codes dimension table	dim_nap_codes
dim_nap_puc_perday_scd	dim_nap_puc_perday_scd
Triage level dimension table	dim_nap_triage_level
NNPAC event fact table	fact_nap_event
NNPAC event item fact table	fact_nap_event_item
NNPAC event snapshot fact table	fact_nap_event_snapshot

Appendix B: List of Shared Dimensions

Dimension tables are the descriptive or lookup-type tables that link to fact tables. This data mart has a number of shared Dimension tables. The definitions for these dimensions are held in a separate data dictionary called "SHARED Dimensions". The table below lists the shared dimensions within this data mart.

<i>Dimension Table</i>	<i>Description</i>
<i>Affiliation table (dim_affiliation)</i>	This table is a matrix of gender and ethnicity code combination. Each row denotes the gender and ethnicity combination applicable to a person at the time of a transaction, i.e. it does not change over time.
<i>Age Band table (dim_age_band)</i>	This dimension table contains a record for each age from 0 to 115 years. The ages are also grouped into 5 and 10 year age bands, the GMS age bands and the PHO CBF Bands
<i>Agency Facility table (dim_agency_facility)</i>	This table stores detail of organisations, institutions or groups of institutions that contract directly with the principal health service purchaser to deliver healthcare services to the community. An agency may have a number of facilities (eg, hospital)
<i>Clinical disposition table (dim_clinical_disposition)</i>	This reference table contains the discharge codes for patients leaving the observation unit.
<i>ED_snomed_code table (dim_ed_snomed_code)</i>	This reference table contains the SNOMED ED reference set codes.
<i>Geo table (dim_geo)</i>	This reference table contains a geographical breakdown of New Zealand at the level of Domicile Code . Each row of the table describes a single Domicile Code, and locates it within broader geographical definitions eg DHB.
<i>Global Time table (dim_global_time)</i>	This table contains a record for every day between 1900 and 2050, with descriptive attributes for each day.
<i>HCU Identifiable table (dim_hcu_identifiable)</i>	This dimension table holds identifiable details of Health Care Users e.g.name, address, ethnicity, date of birth, NHI.
<i>Health Care User table (dim_health_care_user)</i>	This reference table contains information about all people who have received healthcare directly from healthcare providers.
<i>Health Specialty table (dim_health_specialty)</i>	A classification describing the specialty or service to which a healthcare user has been assigned, which reflects the nature of the services being provided.
<i>Location table (dim_location)</i>	This table holds details of the location of the facility where the outpatient event took place.
<i>Purchase Unit table (dim_purchase_unit)</i>	The purchase unit (PU) indicates what contract the event is funded under. PUs are in fact a classification system. PUs are a means of quantifying (volume) and valuing (price) a service.
<i>Purchaser Code table (dim_purchaser_code)</i>	This table holds values that define the organisation or body that purchased the healthcare service provided.

Appendix C: List of Views

The table views used in this datamart are shown below.

View Name	Description
<i>Dim IDF DHB table (dim_idf_dhb)</i>	A view of shared DIM DHB Reference dimension table that contains a list of DHB codes and names.
<i>Dim NAP Affiliation table (dim_nap_affiliation)</i>	A view of the shared Affiliation table that holds combinations of all possible ethnic codes and gender.
<i>Dim NAP Date of Service table (dim_nap_date_of_service)</i>	A view of the shared Dim Global Time dimension table.
<i>dim_nap_ed_event_end_type (dim_nap_ed_event_end_type)</i>	View of dim_event_end_type containing only the valid values valid for ED event End.
<i>Dim NAP Event End Date table (dim_nap_event_end_date)</i>	A view of the shared Dim Global Time dimension table.
<i>Dim NAP Funding Agency table (dim_nap_funding_agency)</i>	A view of the dim_agency_facility table. Funding Agency would be the purchaser of the Health Care User event.
<i>Dim NAP Service Facility table (dim_nap_service_facility)</i>	A view of the dim_agency_facility table that shows those facilities where outpatient or accident and emergency events take place.
<i>Dim NAP Time of Service table (dim_nap_time_of_service)</i>	A view of the shared Dim Global Time dimension table.
<i>Dim Sent Geo table (dim_sent_geo)</i>	A view of the shared Dim Geo dimension table.
<i>Dim Submitting DHB table (dim_submitting_dhb)</i>	A view of shared DIM DHB Reference dimension table that contains a list of DHB codes and names.
<i>Fact NAP Event id table (fact_nap_event_id)</i>	A view of the Fact NAP Event table (fact_nap_event) that has an identifiable HCU ID / NHI number. The Fact NAP Event table (fact_nap_event), is not directly visible to end users.
<i>Fact NAP Event ni table (fact_nap_event_ni)</i>	A view of the Fact NAP Event table (fact_nap_event) that has neither encrypted or unencrypted HCU ID / NHI number. The Fact NAP Event table (fact_nap_event), is not directly visible to end users.

Appendix D: Data Dictionary Template

Introduction This appendix explains how data element attributes are organised in the data dictionary template.

Order of elements Within the dictionary, elements are organised by table, and then alphabetically.

An alphabetical index at the back of the data dictionary is provided to assist the user in finding specific elements.

Template

Administrative status The operational status (e.g. CURRENT, SUPERSEDED) of the data element. No SUPERSEDED data elements will be included in the Dictionaries.

Reference ID A code that uniquely identifies the data element. If the data element is used in more than one collection, it should retain its Reference ID wherever it appears.

Version number A version number for each data element. A new version number is allocated to a data element/concept when changes have been made to one or more of the following attributes of the definition:

- name
- definition
- data domain e.g. adding a new value to the field.

Elements with frequently updated code tables, such as the Facility code table, will not be assigned a new version for changes to data domain.

Version date The date the new version number was assigned.

Identifying and defining attributes

Name A single or multi-word designation assigned to a data element. This appears in the heading for each unique data definition in the Dictionaries. Previous names for the data element are included in the Guide for Use section.

Data element type DATA ELEMENT—a unit of data for which the definition, identification, representation and permissible values are specified by means of a set of attributes.

DERIVED DATA ELEMENT—a data element whose values are derived by calculation from the values of other data elements.

COMPOSITE DATA ELEMENT—a data element whose values represent a grouping of the values of other data elements in a specified order.

Definition A statement that expresses the essential nature of a data element and its differentiation from all other data elements.

Context (optional) A designation or description of the application environment or discipline in which a name is applied or from which it originates. This attribute may also include the justification for collecting the items and uses of the information.

Relational and representational attributes

Data type	The type of field in which a data element is held. For example, character, integer, or numeric.
Field size	The maximum number of storage units (of the corresponding data type) to represent the data element value. Field size does not generally include characters used to mark logical separations of values e.g. commas, hyphens or slashes.
Layout	The representational layout of characters in data element values expressed by a character string representation. For example: <ul style="list-style-type: none"> - 'CCYYMMDD' for calendar date - 'N' for a one-digit numeric field - 'A' for a one-character field - 'X' for a field that can hold either a character or a digit, and - '\$\$\$,\$\$\$,\$\$\$' for data elements about expenditure.
Data domain	The permissible values for the data element. The set of values can be listed or specified by referring to a code table or code tables, for example, ICD-10-AM 8th Edition.
Guide for use (optional)	Additional comments or advice on the interpretation or application of the data element (this attribute has no direct counterpart in the ISO/IEC Standard 11179 but has been included to assist in clarification of issues relating to the classification of data elements). Includes historical information, advice regarding data quality, and alternative names for this data element.
Verification rules (optional)	The rules and/or instructions applied for validating and/or verifying elements, in addition to the formal edits.
Collection methods – Guide for providers (optional)	Comments and advice concerning the capture of data for the particular data element, including guidelines on the design of questions for use in collecting information, and treatment of 'not stated' or non-response (this attribute is not specified in the ISO/IEC Standard 11179 but has been added to cover important issues about the actual collection of data).
Related data (optional)	A reference between the data element and any related data element in the Dictionary, including the type of this relationship. Examples include: 'has been superseded by the data element...', 'is calculated using the data element...', and 'supplements the data element...'.
Administrative attributes	
Source document (optional)	The document from which definitional or representational attributes originate.
Source organisation (if available)	The organisation responsible for the source document and/or the development of the data definition (this attribute is not specified in the ISO/IEC Standard 11179 but has been added for completeness). The source organisation is not necessarily the organisation responsible for the ongoing development/maintenance of the data element definition. An example of a source organisation is the National Data Policy Group (NDPG).

Appendix E: Code Table Index

Code table	Location
Admission Type code table	See the Ministry of Health web site.
Agency Type code table	See the Ministry of Health web site.
Domicile code table	See the Ministry of Health web site.
Ethnic Group code table	See the Ministry of Health web site.
Event End Type code table	See below.
Facility Type code table	See the Ministry of Health web site.
Health Specialty code table	See the Ministry of Health web site.
Location code table	See below.
Principal Health Service Purchaser code table	See the Ministry of Health web site. See Appendix H: Guide For Use of NNPAC Purchaser Codes.
Purchase Unit list	http://www.health.govt.nz/nz-health-statistics/data-references/code-tables/national-non-admitted-patient-collection-code-tables/purchase-unit-code-table
Triage Level code table	See below.

Code tables on website

For code tables on the Ministry of Health web site go to <http://www.health.govt.nz/nz-health-statistics/data-references/code-tables>.

For further information or a printed copy of the code table, contact the Publications Officer. Contact details are listed at the front of this dictionary.

Clinical Disposition table

Disposition Code	Disposition Code
ODI	Discharge
OAD	Admit
OTO	Divert
ODD	Dies while in observation
ONW	Did not wait
OTR	Transfer to another healthcare facility
OSW	Self discharge from observation with indemnity signed
OSD	Self discharge from observation without indemnity signed

Event End Type code table

Event End Type	Event End Description
DW	Discharge to other service within same facility
EA	Discharge from ED acute to specialist facility (neonates & burns only)
ED	Dies while still in Emergency department acute facility
EI	Self discharge from an ED acute facility with indemnity signed
ER	Routine discharge from an Emergency department acute facility
ES	Self discharge from an ED acute facility without indemnity
ET	Discharge from ED acute facility to another healthcare facility
OB	Discharge from ED acute facility to an observation facility

Location code table

Location code	Location description
1	Public Hospital - A DHB-owned and operated general hospital facility (includes day hospitals and the surgical bus)
2	Private Hospitals - Non DHB owned general hospital facility
3	Psychiatric Hospitals - Dedicated psychiatric hospital
5	Private Residence - A private dwelling includes independent retirement village units and supported independent living units
6	Other
10	Residential Care - Residential care facilities including rest homes and residential care hospitals for under and over 65
11	Marae
12	Primary Care - PHO or GP owned/operated facilities (includes special Medical Area GP facilities)

Mode of Delivery code table

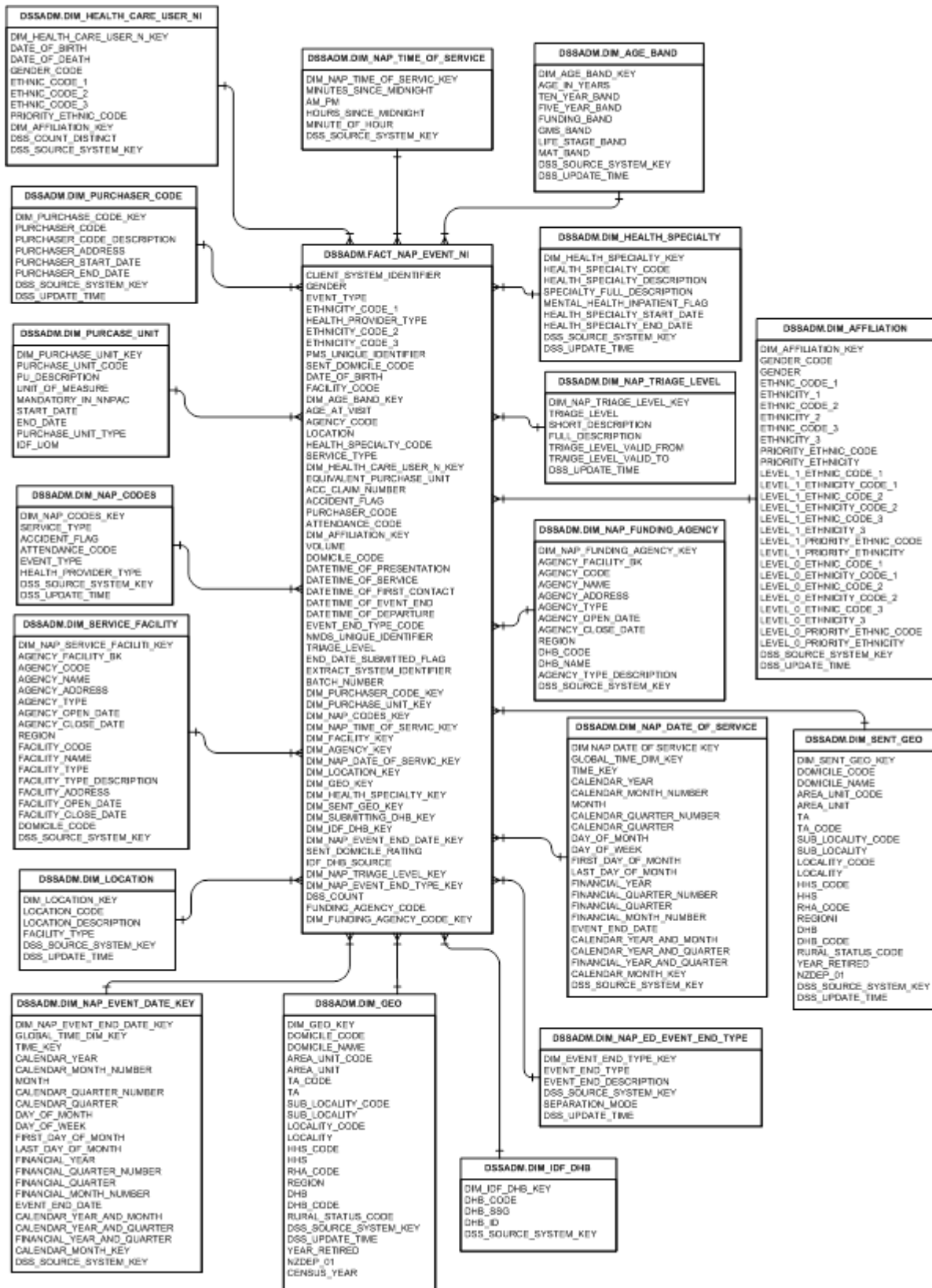
1	In Person (1 patient to 1 clinician)	Individual face to face at the same location. Where tests are performed the mode of delivery is face to face
2	In Person (1 patient to many clinicians)	Multi disciplinary meeting with patient present at the same location and time
3	In Person (1 clinician to many patients)	Group of patients being seen by one or more clinicians at the same location and time
4	Remote patient monitoring	monitoring of patient's biometric health information communicated from a remote patient medical device
5	Telephone	Voice only contact between patient and clinician using telephone
6	Videoconference	Communication via technology enabling remote visual and audio contact between patient and clinician(s)
7	Non-contact (virtual)	An event where decisions about patient health care are made without the patient being present.

*Where tests are performed the mode of delivery is face to face - *because at some point the patient was there* - e.g. bloods were taken etc.

Triage Level code table

Triage Level	Short Description	Full Description	Valid From	Valid To
1	Immediately life-threatening	Immediately life-threatening	1/01/1900	31/12/9999
2	Imminently life-threatening	Imminently life-threatening, or important time-critical	1/01/1900	31/12/9999
3	Potentially life-threatening	Potentially life-threatening, potential adverse outcomes from delay > 30 min, or severe discomfort or distress	1/01/1900	31/12/9999
4	Potentially serious	Potentially serious, or potential adverse outcomes from delay > 60 min, or significant complexity or severity, or discomfort or distress	1/01/1900	31/12/9999
5	Less urgent	Less urgent, or dealing with administrative issues only	1/01/1900	31/12/9999

Appendix F: NNPAC Data Model



Appendix G: Collection of Ethnicity Data

Introduction	This appendix contains information about collecting and coding ethnic group code data. To help with correct allocations of ethnicities, it includes a detailed list of ethnicities and their corresponding codes.
Points to remember	<ul style="list-style-type: none">• Ethnicity is self-identified and can change over time.• MOH can record up to three ethnic group codes for a healthcare user.• An algorithm is used to automatically prioritise ethnic group codes if more than one is reported.• If a person chooses not to specify their ethnicity, it should be recorded using a residual code such as '94' (Don't Know), '95' (Refused to Answer) or '99' (Not specified), not as '61' (Other).• The NHI database should be updated if a healthcare user provides a more specific or different specific ethnicity than that already held for that person.
About ethnicity	<p>The term 'ethnic group' is defined as 'a group of people who have culture, language, history or traditions in common.' Ethnicity is not the same as race, ancestry, or country of birth.</p> <p>Because ethnicity is self-identified, it can change over time. This is why MOH collects ethnicity data whenever information is collected for different datasets, rather than relying on the National Health Index (which does not include historical data).</p> <p>Collecting ethnicity data has always been problematic because of the reluctance of some data providers to collect the information, the unwillingness of some healthcare users to label themselves, and the confusion between ethnicity, nationality, citizenship, and race.</p>
Purpose	Information about ethnicity is used extensively in planning and resourcing health services, developing and monitoring health policies, and measuring health outcomes.
Collection of data	<p>It is very important that the ethnicity data from the health sector is collected in the same way as the data in the Census because rates of hospitalisation are calculated by comparing the two datasets (to determine proportions of the population). The 2001 Census question is provided below as a guide.</p> <p>Important: For MOH collections, up to three ethnic group codes can be collected for a healthcare user. Providers should make sure that healthcare users are aware of this. MOH stores all reported ethnic group codes, and also prioritises them based on a Statistics NZ algorithm.</p>

Which ethnic group do you belong to?
Mark the space or spaces that apply to you.

New Zealand European

Māori

Samoan

Cook Island Māori

Tongan

Niuean

Chinese

Indian

other (such as DUTCH, JAPANESE, TOKELAUAN). Please state:

Coding data

Use the Classification of Ethnicity table below to code the healthcare user's ethnic group.

If they have ticked one or more specific ethnicities, or if they have ticked 'other' and written in an ethnicity, look on the table to find the code.

If they have written an invalid ethnicity, such as 'Kiwi' or 'Mainlander', which does not map to any item on the code table, or if they have ticked 'other' but not stated an ethnicity, you can:

- discuss this with them and encourage them to choose a valid ethnic group
- ignore it if one or more other ethnicities are provided, or
- code as '99' (Not specified).

If they write 'New Zealander', this can be coded as '11' (New Zealand European)

If they have written 'pakeha', this can be coded as '11' (New Zealand European).

'Not Specified' and 'Other'

If a person chooses not to answer the ethnicity question, record their ethnicity response with an appropriate residual code such as '95' (Refused to Answer) or '99' (Not specified).

Important: The code '61' (Other) applied to only 0.037% of the New Zealand population in the 2006 census. It is limited to about 5 ethnic groups (such as Inuit/Eskimos, North, Central or South American Indians, Seychelles Islanders, and Mauritians). It must not be used as a generic 'other' code.

Recording ethnicity as 'Other' or 'Not specified' skews statistics on rates of hospitalisation and this affects health policy. Where possible, encourage healthcare users to choose a valid ethnic group.

Prioritisation of ethnicity

Many National Data Collections include Prioritised ethnicity. This is the most highly prioritised ethnicity where multiple ethnicity responses have been recorded for the healthcare user (either submitted with the health event/service or extracted from the NHI as part of the data load process). Prioritisation is determined according to a Statistics NZ Algorithm and prioritising ethnic codes simplifies analysis.

Each of the ethnic group codes is prioritised using the mappings in the table below.

ethnic_code	ethnic_code_description	priority
10	European not further defined	21
11	New Zealand European / Pakeha	22
12	Other European	20
21	Māori	1
30	Pacific Peoples not further defined	9
31	Samoan	7
32	Cook Island Māori	6
33	Tongan	5
34	Niuean	4
35	Tokelauan	2
36	Fijian	3
37	Other Pacific Peoples	8
40	Asian not further defined	14
41	Southeast Asian	10
42	Chinese	12
43	Indian	11
44	Other Asian	13
51	Middle Eastern	17
52	Latin American / Hispanic	15
53	African (or cultural group of African origin)	16
54	<i>Other</i>	19
61	<i>Other Ethnicity</i>	18
94	<i>Don't Know</i>	94
95	<i>Refused to Answer</i>	95
97	<i>Response Unidentifiable</i>	97
99	Not stated	99

Detailed code table The codes used to report ethnicity to MOH are taken from the Statistics NZ Statistical Standard for Ethnicity 2005. This classification is a very detailed 5-digit code: only the first two digits (shown in the table below) are reported to MOH.

Use this table to code healthcare user's self-identified ethnicities.

MOH Ethnicity code	Country of Ethnicity Affiliation
37	Admiralty Islander
44	Afghani
53	African American
53	African nec
53	African nfd
12	Afrikaner
32	Aitutaki Islander

MOH Ethnicity code	Country of Ethnicity Affiliation
12	Albanian
51	Algerian
12	American (US)
51	Arab
52	Argentinian
12	Armenian
44	Asian nec

MOH Ethnicity code	Country of Ethnicity Affiliation
40	Asian nfd
51	Assyrian
32	Atiu Islander
37	Austral Islander
12	Australian
37	Australian Aboriginal
12	Austrian
37	Banaban
44	Bangladeshi
37	Belau/Palau Islander
12	Belgian
12	Belorussian
43	Bengali
37	Bismark Archipelagoan
52	Bolivian
12	Bosnian
37	Bougainvillean
52	Brazilian
12	British nec
12	British nfd
12	Bulgarian
12	Burgher
41	Burmese
12	Byelorussian
41	Cambodian
42	Cambodian Chinese
12	Canadian
37	Caroline Islander
12	Celtic nfd
61	Central American Indian
37	Chamorro
12	Channel Islander
52	Chilean
42	Chinese nec
42	Chinese nfd
52	Colombian
32	Cook Island Māori nfd
12	Cornish
12	Corsican
52	Costa Rican
52	Creole (Latin America)
53	Creole (US)
12	Croat/Croatian
12	Cypriot nfd
12	Czech
12	Dalmatian
12	Danish
12	Dutch/Netherlands
37	Easter Islander
52	Ecuadorian
51	Egyptian

MOH Ethnicity code	Country of Ethnicity Affiliation
12	English
53	Eritrean
12	Estonian
53	Ethiopian
44	Eurasian
10	European nfd
12	Falkland Islander/Kelper
36	Fijian (except Fiji Indian/ Indo-Fijian)
43	Fijian Indian/Indo-Fijian
41	Filipino
12	Finnish
12	Flemish
12	French
12	Gaelic
37	Gambier Islander
12	German
53	Ghanian
12	Greek (incl Greek Cypriot)
12	Greenlander
37	Guadalcanalian
37	Guam Islander/Chamorro
52	Guatemalan
43	Gujarati
52	Guyanese
37	Hawaiian
52	Honduran
42	Hong Kong Chinese
12	Hungarian
12	Icelander
37	I-Kiribati/Gilbertese
43	Indian nec
43	Indian nfd
41	Indonesian (incl Javanese/ Sundanese/Sumatran)
61	Inuit/Eskimo
51	Iranian/Persian
51	Iraqi
12	Irish
51	Israeli/Jewish/Hebrew
12	Italian
53	Jamaican
44	Japanese
51	Jordanian
42	Kampuchean Chinese
37	Kanaka/Kanak
53	Kenyan
41	Khmer/Kampuchean/ Cambodian
44	Korean
51	Kurd
41	Lao/Laotian

MOH Ethnicity code	Country of Ethnicity Affiliation
52	Latin American/Hispanic nec
52	Latin American/Hispanic nfd
12	Latvian
51	Lebanese
51	Libyan
12	Lithuanian
12	Macedonian
37	Malaitian
41	Malay/Malayan
42	Malaysian Chinese
12	Maltese
52	Malvinian (Spanish-speaking Falkland Islander)
32	Mangaia Islander
32	Manihiki Islander
37	Manus Islander
12	Manx
37	Marianas Islander
37	Marquesas Islander
37	Marshall Islander
32	Mauke Islander
61	Mauritian
52	Mexican
51	Middle Eastern nec
51	Middle Eastern nfd
32	Mitiaro Islander
51	Moroccan
37	Nauru Islander
44	Nepalese
37	New Britain Islander
12	New Caledonian
37	New Georgian
37	New Irelander
11	New Zealander
11	New Zealand European
21	New Zealand Māori
52	Nicaraguan
53	Nigerian
34	Niuean
61	North American Indian
12	Norwegian
99	Not Specified
37	Ocean Islander/Banaban
51	Omani
12	Orkney Islander
53	Other African nec
44	Other Asian nec
12	Other European
61	Other nec
61	Other nfd
41	Other Southeast Asian nec

MOH Ethnicity code	Country of Ethnicity Affiliation
37	Pacific Peoples nec
30	Pacific Peoples nfd
44	Pakistani
51	Palestinian
32	Palmerston Islander
52	Panamanian
37	Papuan/New Guinean/Irian Jayan
52	Paraguayan
32	Penrhyn Islander
52	Peruvian
37	Phoenix Islander
37	Pitcairn Islander
12	Polish
12	Portuguese
52	Puerto Rican
32	Pukapuka Islander
43	Punjabi
32	Rakahanga Islander
32	Rarotongan
12	Romanian/Rumanian
12	Romany/Gypsy
37	Rotuman/Rotuman Islander
12	Russian
31	Samoan
37	Santa Cruz Islander
12	Sardinian
12	Scottish (Scots)
12	Serb/Serbian
61	Seychelles Islander
12	Shetland Islander
43	Sikh
42	Singaporean Chinese
44	Sinhalese
12	Slavic/Slav
12	Slovak
12	Slovene/Slovenian
37	Society Islander (including Tahitian)
37	Solomon Islander
53	Somali
61	South African coloured
12	South African nec
61	South American Indian
12	South Slav (formerly Yugoslav groups) nfd
12	South Slav (formerly Yugoslav) nec
41	Southeast Asian nfd
12	Spanish
44	Sri Lankan nec
44	Sri Lankan nfd

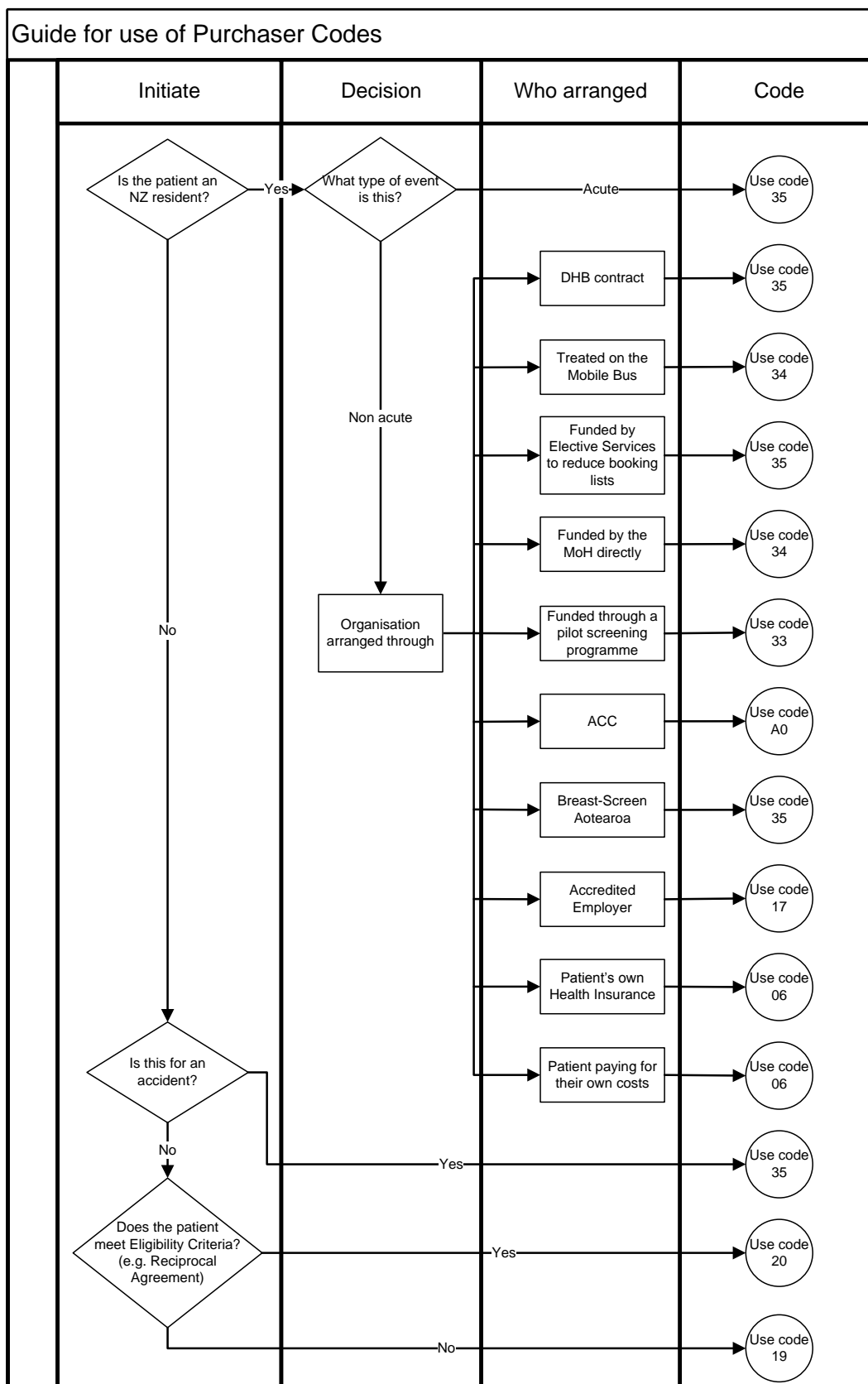
MOH Ethnicity code	Country of Ethnicity Affiliation
44	Sri Lankan Tamil
12	Swedish
12	Swiss
51	Syrian
42	Taiwanese Chinese
37	Tahitian (including Society Islander)
43	Tamil
41	Thai/Tai/Siamese
44	Tibetan
35	Tokelauan
33	Tongan
37	Torres Strait Islander/Thursday Islander
37	Tuamotu Islander
51	Tunisian
51	Turkish (incl Turkish Cypriot)
37	Tuvalu Islander/Ellice

MOH Ethnicity code	Country of Ethnicity Affiliation
	Islander
53	Ugandan
12	Ukrainian
52	Uruguayan
37	Vanuatu Islander/New Hebridean
52	Venezuelan
41	Vietnamese
42	Vietnamese Chinese
37	Wake Islander
37	Wallis Islander
12	Welsh
53	West Indian/Caribbean
37	Yap Islander
51	Yemeni
12	Zimbabwean

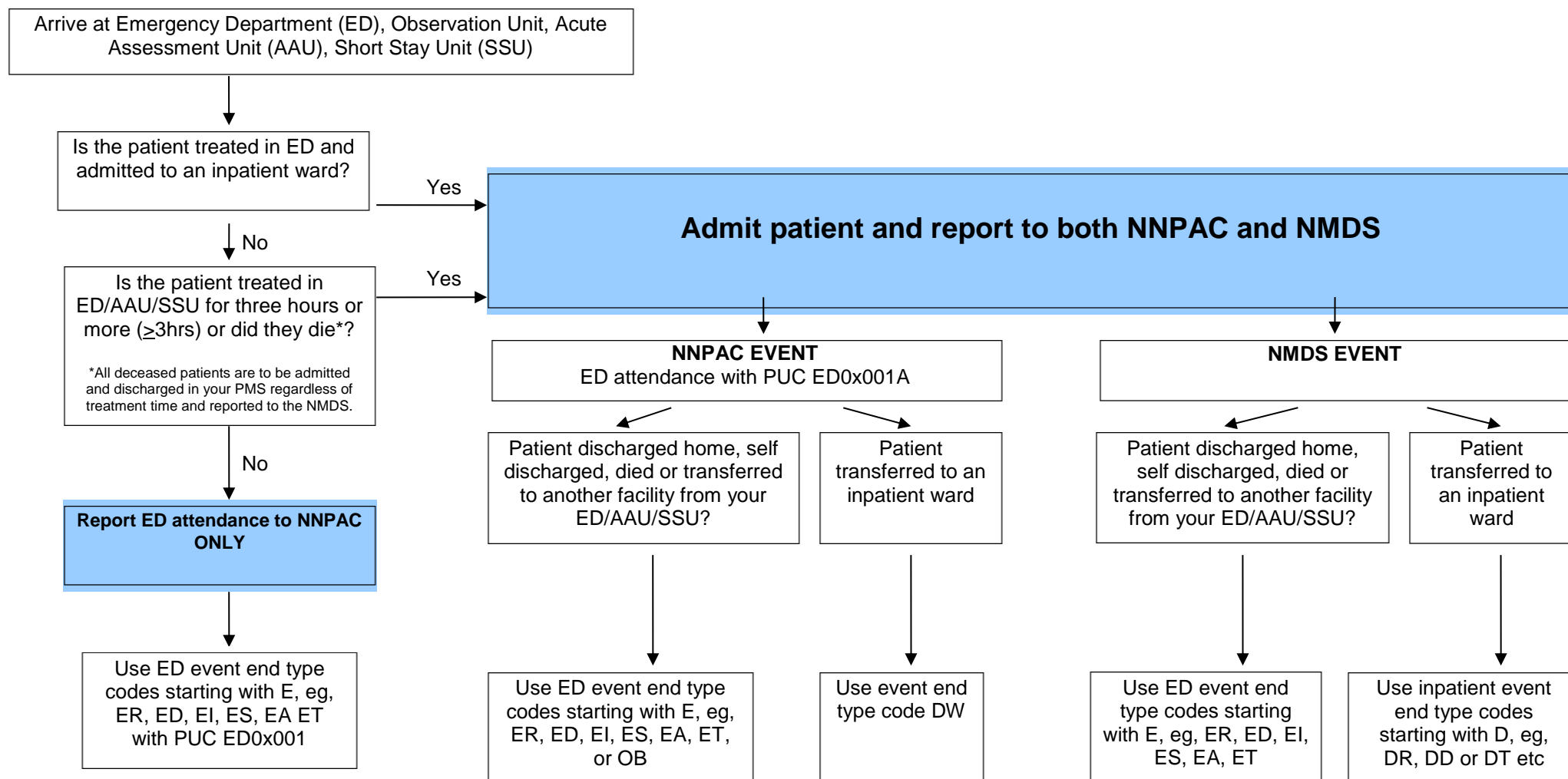
nfd = Not further defined

nec = Not elsewhere classified

Appendix H: Guide for use of NNPAC Purchaser Codes

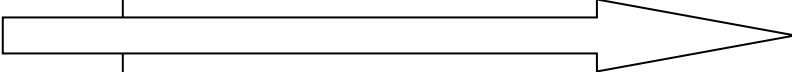


Appendix I: Guide for Use of Emergency Department (ED) Event End Type Codes



PUC = Purchaser Unit Code
 NNPAC = National Non Admitted Patient Collection
 NMDS = National Minimum Dataset

***Please note:** when calculating the three hours, exclude waiting time in the waiting room, exclude triage and use only the duration of assessment/treatment. If part of the assessment/treatment includes observation, then this time contributes to the three hours. 'Assessment/treatment' is clinical assessment, treatment, therapy, advice, diagnostic or investigatory procedures from a nurse or doctor or other health professional.

Emergency Department (ED) Attendance	Emergency Department Short Stay (ED) Acute Assessment Unit (AAU) Short Stay Unit (SSU)	Hospital Inpatient Ward
<i>NNPAC reporting</i>	<i>NMDS reporting</i>	<i>NMDS reporting</i>
<p>Patient arrives in ED via ambulance at 09.10am. Patient is stabilised and transferred (discharged) to another healthcare facility from ED at 10.27am</p> <p>ED attendance reported to NNPAC Purchase unit (ED0x001) Event end type = ET</p>		
<p>Patient presents to ED reception 01/03/2011 at 15.53pm. Triageed at 16.12pm returned to waiting room Patient taken through to ED 16.53pm. Assessment/treatment began at 16.48pm. Patient treated and discharged home 18.23pm</p> <p>ED attendance reported to NNPAC Purchase unit (ED0x001) Event end type = ER</p>		
<p>Patient presents to ED reception 01/03/2011 at 10.32am. Triageed at 10.56am returned to waiting room Patient was not willing to wait, therefore left at 12.32pm without being seen and did not want to sign indemnity</p> <p>ED attendance reported to NNPAC Purchase unit (ED00002) Event end type = ES</p>		
<p>Patient presents to ED reception 01/03/2011 at 22.53pm Triageed at 22.55pm and taken through to ED Assessment/treatment began at 23.02pm Patient stabilised, reviewed and requires diagnostic tests After review of results decision is to admit patient to inpatient ward Patient transferred to inpatient ward 02/03/2011 at 01.14am</p> <p>ED attendance reported to NNPAC Purchase unit (ED0x001A) Event end type = DW</p>		<p>Patient transferred to inpatient ward from ED Patient discharged home 06/03/2011 at 13.32pm Report hospital inpatient event to the NMDS Event start datetime will be 01/03/2011 23.02pm Event end datetime will be 06/03/2011 13.32pm Event end type DR</p>

Emergency Department (ED) Attendance

Emergency Department Short Stay (ED) Acute Assessment Unit (AAU) Short Stay Unit (SSU)

Hospital Inpatient Ward

NNPAC reporting

NMDS reporting

NMDS reporting

<p>Patient presents to ED reception 01/03/2011 at 13.53pm Triage at 14.02pm returned to waiting room Patient taken through to ED Assessment/treatment began at 14.48pm Patient reviewed, requires tests and observation/treatment Patient still present in ED at 18.10pm awaiting results and review</p> <p>ED attendance reported to NNPAC for counting purposes only Purchase unit (ED0x001A) Event end type = ER</p>	<p>Patient meets 3 hour admission rule – admit patient as an ED short stay event Event start datetime will be 01/03/2011 14.48pm</p> <p>ED clinician reviewed results and cleared patient for discharge at 18.37pm. Discharged home from ED 18.53pm Event end datetime will be 01/03/2011 18.53pm, event end type will be ER</p> <p>Report ED short stay event to the NMDS</p>	
<p>Patient presents to ED reception at 01/03/2011 at 13.53pm Triage at 14.02pm returned to waiting room Patient taken through to ED Assessment/treatment began at 14.48pm Patient reviewed, requires tests and observation/treatment Patient still present in ED at 18.10pm awaiting results and review</p> <p>ED attendance reported to NNPAC for counting purposes only Purchase unit (ED0x001A) Event end type = DW</p>	<p>Patient meets 3 hour admission rule – admit patient as an ED short stay event Event start datetime will be 01/03/2011 14.48pm</p> <p>ED clinician reviewed results at 18.28pm and patient not improving, decision made to admit patient to hospital inpatient ward</p> <p>Patient transferred to inpatient ward - internal transfer only (no discharge)</p>	<p>Patient transferred to inpatient ward from ED Patient discharged home from inpatient ward 04/03/2011 at 11.10am Report hospital inpatient event to the NMDS Event start datetime will be 01/03/2011 14.48pm Event end datetime will be 04/03/2011 11.10am Event end type DR</p>

*Note: the event start date/time of admission will be from the commencement of assessment/treatment in ED (NNPAC = datetime of first contact).

EMERGENCY DEPARTMENT SCENARIOS	NNPAC REPORTING	NNPAC EVENT END TYPE [ED attendance]	NMDS REPORTING	NMDS EVENT END TYPE [ED/AAU/SSU short stay event]
Patient in ED receives treatment <3hrs discharged home	Yes	ER	No	N/A - ED attendance only
Patient in ED/AAU/SSU receives treatment ≥3hrs discharged home	Yes - only for counting purposes – PUC ED0x001A	ER	Yes – short stay event	ER
Patient in ED receives treatment <3hrs self discharges without indemnity signed	Yes	ES	No	N/A - ED attendance only
Patient in ED/AAU/SSU receives treatment ≥3hrs self discharges without indemnity signed	Yes - only for counting purposes – PUC ED0x001A	ES	Yes – short stay event	ES
Patient in ED receives treatment <3hrs self discharges with indemnity signed	Yes	EI	No	N/A - ED attendance only
Patient in ED/AAU/SSU receives treatment ≥3hrs self discharges with indemnity signed	Yes - only for counting purposes – PUC ED0x001A	EI	Yes – short stay event	EI
Patient in ED receives treatment <3hrs and dies	Yes - only for counting purposes – PUC ED0x001A	ED	Yes	ED
Patient in ED/AAU/SSU receives treatment ≥3hrs and dies	Yes - only for counting purposes – PUC ED0x001A	ED	Yes	ED
Patient in ED receives treatment <3hrs transferred (discharged) to another facility	Yes	ET	No	N/A - ED attendance only
Patient in ED/AAU/SSU receives treatment ≥3hrs transferred (discharged) to another facility	Yes - only for counting purposes – PUC ED0x001A	ET	Yes – short stay event	ET
Neonatal or burns patient in ED/AAU/SSU receives treatment <3hrs transferred (discharged) to another facility	Yes	EA	No	N/A - ED attendance only
Neonatal or burns patient ED/AAU/SSU receives treatment ≥3hrs transferred (discharged) to another facility	Yes - only for counting purposes – PUC ED0x001A	EA	Yes – short stay event	EA
Patient in ED receives treatment <3hrs admitted to inpatient ward or straight to operating theatre	Yes - only for counting purposes – PUC ED0x001A	DW	Yes Inpatient event	N/A - admit as inpatient
Patient in ED/AAU/SSU receives treatment ≥3hrs admitted to inpatient ward or straight to operating theatre	Yes - only for counting purposes – PUC ED0x001A	DW	Yes Inpatient event	N/A - admit as inpatient

EMERGENCY DEPARTMENT SCENARIOS	NNPAC REPORTING	NNPAC EVENT END TYPE [ED attendance]	NMDS REPORTING	NMDS EVENT END TYPE [ED/AAU/SSU short stay event]
Patient in ED receives treatment <3hrs admitted to geriatric AT&R inpatient ward	Yes - only for counting purposes – PUC ED0x001A	DW	Yes Inpatient event	N/A - admit as inpatient
Patient in ED/AAU/SSU receives treatment ≥3hrs admitted to geriatric AT&R inpatient ward with 'D' health specialty code (*see Note 1 below)	Yes - only for counting purposes – PUC ED0x001A	DW	Yes – short stay event [see Note 1]	DW
Patient in ED/AAU/SSU receives treatment ≥3hrs admitted to geriatric AT&R inpatient ward with a medical/surgical health specialty code	Yes - only for counting purposes – PUC ED0x001A	DW	Yes Inpatient event	N/A - admit as inpatient
Patient transfers from smaller hospital to ED at your bigger hospital, receives treatment <3hrs and is then admitted to inpatient ward or straight to operating theatre	Yes - only for counting purposes – PUC ED0x001A	DW	Yes Inpatient event	N/A - admit as inpatient
Patient transfers from smaller hospital to ED/AAU/SSU at your bigger hospital, receives treatment ≥3hrs and is then admitted to inpatient ward or straight to operating theatre	Yes - only for counting purposes – PUC ED0x001A	DW	Yes Inpatient event	N/A - admit as inpatient
Patient transfers from smaller hospital to ED at your bigger hospital, receives treatment <3hrs and is then transferred (discharged) back to smaller hospital	Yes	ET	No	N/A - ED attendance only
Patient transfers from smaller hospital to ED/AAU/SSU at your bigger hospital, receives treatment ≥3hrs and is then transferred (discharged) back to smaller hospital	Yes - only for counting purposes – PUC ED0x001A	ET	Yes – short stay event	ET
Mental health patient in ED receives treatment for an acute condition (eg, self harm) <3hrs transferred (discharged) to inpatient psychiatric unit (within same facility)	Yes	DW	No	N/A - ED attendance only
Mental health patient in ED/AAU/SSU receives treatment for an acute condition (eg, self harm) ≥3hrs transferred (discharged) to inpatient psychiatric unit (within same facility)	Yes - only for counting purposes – PUC ED0x001A	DW	Yes – short stay event	DW
Mental health patient in ED receives treatment for an acute condition (eg, self harm) <3hrs transferred (discharged) to inpatient psychiatric unit (another facility)	Yes	ET	No	N/A -ED attendance only
Mental health patient in ED/AAU/SSU receives treatment for an acute condition (eg, self harm) ≥3hrs transferred (discharged) to inpatient psychiatric unit (another facility)	Yes - only for counting purposes – PUC ED0x001A	ET	Yes – short stay event	ET
Mental health inpatient sustains an in hospital injury/accident/self harm etc transferred to ED receives treatment <3hrs then transferred back to inpatient psychiatric unit	Yes	DW	No	N/A - ED attendance only

EMERGENCY DEPARTMENT SCENARIOS	NNPAC REPORTING	NNPAC EVENT END TYPE [ED attendance]	NMDS REPORTING	NMDS EVENT END TYPE [ED/AAU/SSU short stay event]
Mental health inpatient sustains an in hospital injury/accident/self harm etc transferred to ED/AAU/SSU receives treatment \geq 3hrs then transferred back to inpatient psychiatric unit	Yes - only for counting purposes – PUC ED0x001A	DW	Yes – short stay event	DW [Note 2]
Home hospital inpatient transferred to ED receives treatment <3hrs and is then transferred (discharged) back to home hospital services	Yes	ET	No	N/A - ED attendance only
Home hospital inpatient transferred to ED/AAU/SSU receives treatment \geq 3hrs and is then transferred (discharged) back to home hospital services	Yes - only for counting purposes – PUC ED0x001A	ET	Yes – short stay event	ET

Short stay patients discharged from ED/AAU/SSU must have an 'E' event end type code reported to NNPAC and NMDS. The 'E' event end type code should be the same in both NNPAC and NMDS.

Where patients are admitted to an inpatient ward from ED/AAU/SSU the NNPAC event end type code will always be DW *Discharged to other service within same facility*.

Note 1:

'Patient in ED/AAU/SSU receives treatment \geq 3hrs admitted to Geriatric AT&R inpatient ward with 'D' health specialty code'. Older persons who present to ED with an acute condition who are admitted as an acute inpatient to a geriatric AT&R (older persons) inpatient ward with a 'D' health specialty code is not common practice. However where this does occur the reporting requirements are that a separate ED short stay event is to be reported with an event end type of DW *Discharged to other service within same facility*.

Note 2:

For existing inpatients who are transferred from mental health or geriatric AT&R services to ED/AAU/SSU and meet the three (\geq 3) hour criteria who are then transfer back to these services, must have an ED/AAU/SSU short stay event reported to the NMDS with the health specialty code of **M05 Emergency Medicine**.

