

DSC Notice: DSCN (2006) 14 (W) English DSCN Equivalent: n/a Initiating Welsh Reference: WHC (2006) 009 Date of Issue: 7th Dec 2006

Subject: To introduce the Critical Care Minimum Dataset

WIGSB Welsh Information Governance and Standards Board

Implementation date: 1st April 2007

DATASET CHANGE CONTROL PROCEDURE

Summary of change:

To introduce the standards and definitions for information relating to the new Critical Care minimum dataset.

Change Proposal Reference No: WIGSB 20061115/01

Welsh Information Governance and Standards Board (WIGSB), is responsible for approving information standards.

Please address enquiries about Dataset change proposals to the Data Standards and Information Quality Team, HSW, Brunel House, 2 Fitzalan Road, Cardiff CF24 0HA Tel: 029 20502539 or E-mail <u>Data.Standards@hsw.wales.nhs.uk</u>

Dataset Change Notices are available via the Intranet Service HOWIS <u>http://howis.wales.nhs.uk/</u> or by contacting the above address.

Draft DSCN numbering format = (year of draft) 2-alphacharacter sequence (W).

Upon receiving approval for the change by WISGB, the draft DSCN number will be reformatted to: **DSCN number format** = *year of issue / sequence number*, (W)

In addition,

Change Proposal Reference No. format = year/month/day/sequence number (relates to when WIGSB approved change)

DSCN Distribution List

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Document Control

Version:	Issued on:	Owner	Details:
0.1	30/10/06	JE	Initial draft for review
0.2	02/11/06	JE	Amendments following comments from CG
0.3	24/11/06	JE	Add further definition to data items associated with discharge
1.0	07/12/06	JE	Issued following formal approval by WIGSB

DATASET CHANGE NOTICE (2006) 14 (W)

Reference:	WISGSB 20061115/01
Subject:	Critical Care Minimum Dataset
Reason for Change:	To enable the monitoring of the Designed for Life: Quality Requirements for Adult Critical Care in Wales
Effective Date:	1 st April 2007

Background:

The formation of the All Wales Critical Care Development Group (AWCCDG) in 2001 has resulted in the production of a set of Quality Requirements for Critical Care services in Wales, as detailed in WHC (2006) 009 Designed for Life: Quality Requirements for Adult Critical Care in Wales.

A baseline review was performed against the agreed Standards in 2003, which highlighted deficits in most areas. One such area was the lack of consistency in data collection on activity, patients' dependency and outcomes.

The lack of high quality data held centrally will jeopardise progress in Wales and handicap both commissioning and improvements in Adult Critical Care services, including the development of sound Assembly policy based upon reliable information. Furthermore the three managed Critical Care Networks in Wales, which are currently being established, will require a range of Critical Care information to support their operational work.

To enable the monitoring and reporting of Critical Care information, approval has been given to establish a monthly information flow of Critical Care data from Trusts to a National Critical Care database. These monthly submissions will be processed and controlled through the NHS Wales Data Switching Service.

The format and layout of the Critical Care minimum dataset (mds) is detailed in Appendix A.

To ensure the integrity of the database, there are 5 data items which, when combined, will make up the load criteria. These data items will ensure that individual records will be identified and processed correctly.

There is a further 19 key data items within the Critical Care mds for which Validation at Source (VAS) checks will be created and implemented within the NHS Wales Data Switching Service. These key data items have been identified as information required for future analysis and reporting of Critical Care.

(The AWCCDG has recently been reformed and is now known as the Critical Care Advisory Group.)

Scope of DSCN:

This DSCN will cover the definitions and standards to be followed for the data items which make up the Critical Care mds: -

Record ID (L) Provider Code (L) NHS Number (V) Case Record Number (L) Critical Care Local Identifier (L) Postcode (V) Sex (V) Birth Date (V) Treatment Function Code (V) Site Code of Treatment (V) Critical Care Start Date (L) Patients Name Patients Usual Address Code of GP Practice (V) Ethnic Group Hospital Provider Spell Number (V) Administrative Category Critical Care Start Time Critical Care Unit Function (V) Unit Bed Configuration (V) Critical Care Admission Source (V) Critical Care Source Location (V) Critical Care Admission Type (V) Advanced Respiratory Support Days **Basic Respiratory Support Days** Advanced Cardiovascular Support Days **Basic Cardiovascular Support Days Renal Support Days** Neurological Support Days Gastro-intestinal Support Days Dermatological Support Days Liver Support Days Organ Support Maximum Critical Care Level 2 Days (V) Critical Care Level 3 Days (V) Critical Care Discharge Status (V) Critical Care Discharge Destination (V) Critical Care Discharge Location (V) Critical Care Discharge Ready Date (V) Critical Care Discharge Ready Time Critical Care Discharge Date (V) Critical Care Discharge Time

(L) = Load checks(V) = VASDS8EB9~1

Impact for Trusts:

Trusts are mandated to submit the Critical Care minimum data set to Health Solutions Wales on a monthly basis via the NHS Wales Data Switching Service.

Changes:

Changes to the NHS Wales Data Dictionary are to be found in the Appendix B.

Appendix A: Critical Care Minimum Dataset

Rating	VAS/Load	Dataset Data Element	Format/length
1=mandatory	Checks		
2=optional			
1	\checkmark	Record Id	an1
		CONTRACT DETAILS	
1	\checkmark	Provider Code	an5
		PATIENT DETAILS	
1	\checkmark	NHS Number	an10
1	\checkmark	Case Record Number	an10
1	1	Critical Care Local Identifier	an8
2		Patient's name	an70 or structured name with 2 an35 elements
2		Patient's Usual Address	an175 (5 lines each an35)
1	1	Postcode of Usual Address	an8
1	√	Sex	n1
1	1	Date of Birth	ccyymmdd
1	1	Code of GP Practice (Registered GMP)	an6
1		Ethnic Group	an2
		CRITICAL CARE PERIOD DETAILS	
1	1	Hospital Provider Spell Number	an12
1		Administrative Category	n2
1	1	Treatment Function Code	n3
1	1	Site Code (of Treatment)	an5
1	1	Critical Care Start Date	ccyymmdd
1		Critical Care Start Time	hh.mm.ss
1	1	Critical Care Unit Function	an2
1	1	Unit Bed Configuration	an2
1	1	Critical Care Admission Source	an2
1	1	Critical Care Source Location	an2
1	1	Critical Care Admission Type	an2
1		Advanced Respiratory Support Days	n3
1		Basic Respiratory Support Days	n3
1		Advanced Cardiovascular Support Days	n3
1		Basic Cardiovascular Support Days	n3
1		Renal Support Days	n3
1		Neurological Support Days	n3
1		Gastro-Intestinal Support Days	n3
1		Dermatological Support Days	n3

1		Liver Support Days	n3
1		Organ Support Maximum	n2
1	1	Critical Care Level 2 Days	n3
1	1	Critical Care Level 3 Days	n3
1	1	Critical Care Discharge Status	an2
1	1	Critical Care Discharge Destination	n2
1	1	Critical Care Discharge Location	an2
1	1	Critical Care Discharge Ready Date	ccyymmdd
1		Critical Care Discharge Ready Time	hh.mm.ss
1	1	Critical Care Discharge Date	ccyymmdd
1		Critical Care Discharge Time	hh.mm.ss

An additional data item to collect a Unique Pathway Identifier may be added to this data set in future. This is currently being reviewed as part of the Referral to Treatment work being conducted by the Delivery and Support Unit. Further guidance will be provided in due course.

Appendix B: Changes to the NHS Wales Data Dictionary

Changes to the NHS Wales Data Dictionary are detailed below, with new text being highlighted in **blue** and deletions are shown with a **strikethrough.** The shaded text identifies text which has been copied from the NHS Wales Data Dictionary.

A. Under the sub-section 'Scope':-

This version of the Dictionary contains definitions pertaining to:

Admitted Patient Care Data Set 99 (APC ds99) Elective Admission List Minimum Data Set (EAL mds) Outpatient Minimum Data Set (OP mds) Critical Care Minimum Data Set (CC mds)

B. New section to be added to the chapter 'Data Items & Terms (Grouped by Data Set):

Critical Care Minimum Data Set

Background and format

THE CRITICAL CARE MINIMUM DATA SET (CC MDS) IMPLEMENTED APRIL 2007

Introduction

The formation of the All Wales Critical Care Development Group (AWCCDG) in 2001 has resulted in the production of a set of Quality Requirements for Critical Care services in Wales, as detailed in WHC (2006) 009 Designed for Life: Quality Requirements for Adult Critical Care in Wales.

A baseline review was performed against the agreed Standards in 2003, which highlighted deficits in most areas. One such area was the lack of consistency in data collection on activity, patients' dependency and outcomes.

The Critical Care Minimum Data Set (CC mds) has been chosen to align with the standards set in England and incorporates some additional requirements needed in Wales.

The flow of Critical Care mds in NHS Wales became mandatory from April 2007.

Implementation

The data items in the mds have been accorded a mandatory (1) or optional (2) status. All mandatory items were implemented from April 2007.

Sequence of data items

The following chart is an exemplar, with data items listed in logical groups. The sequence of data items shown is for reference only.

Format/length of data items

Standards for format and length of several data items in this mds have been changed to conform with the Common Administrative Data Set (CADS) and ISO 5218 conventions. These include personal details such as name, address, sex and all dates. Local standards for the recording of dates and sex can be used as long as the data is mapped to national standards before exporting.

Dates and Date Status

Increase of date fields from 6 to 8 and use of the ISO format (ccyymmdd) was implemented on 1st November 1997.

Notes on Mandatory/Optional status

Data items within the mds have a mandatory or optional status. A data item marked as mandatory (1) means that it must be included in the mds; a data item marked as optional (2) means that the data item need only be included if both parties agree to its exchange.

CC mds

Layout of Critical Care Minimum Data Set: -

Rating 1=mandatory	Dataset Data Element	Format/length
2=optional		
<u>1</u>	Record Id	an1
	CONTRACT DETAILS	
1	Organisation Code (code of Provider)	an5
	PATIENT DETAILS	
1	NHS Number	an10
1	Case Record Number	an10
1	Critical Care Local Identifier	an8
2	Patient's name	an70 or structured name with 2 an35 elements
2	Patient's Usual Address	an175 (5 lines each an35)
1	Postcode of Usual Address	an8
1	Sex	<mark>n1</mark>
1	Date of Birth	<mark>ccyymmdd</mark>
1	Code of GP Practice (Registered GMP)	an6
1	Ethnic Group	an2
	CRITICAL CARE PERIOD DETAILS	
1	Hospital Provider Spell Number	an12
1	Administrative Category	<mark>N2</mark>
1	Treatment Function Code	<mark>n3</mark>
1	Site Code (of Treatment)	<mark>an5</mark>
1	Critical Care Start Date	ccyymmdd
1	Critical Care Start Time	hh.mm.ss
1	Critical Care Unit Function	an2
1	Unit Bed Configuration	an2
1	Critical Care Admission Source	an2
1	Critical Care Source Location	an2
1	Critical Care Admission Type	an2
1	Advanced Respiratory Support Days	n3
1	Basic Respiratory Support Days	n3
1	Advanced Cardiovascular Support Days	n3
1	Basic Cardiovascular Support Days	n3
1	Renal Support Days	n3
1	Neurological Support Days	n3
<u> </u>	Gastro-Intestinal Support Days	n3
1	Dermatological Support Days	n3

1	Liver Support Days	n3
1	Organ Support Maximum	<mark>n2</mark>
1	Critical Care Level 2 Days	<mark>n3</mark>
1	Critical Care Level 3 Days	<mark>n3</mark>
1	Critical Care Discharge Status	an2
1	Critical Care Discharge Destination	<mark>n2</mark>
1	Critical Care Discharge Location	an2
1	Critical Care Discharge Ready Date	ccyymmdd
1	Critical Care Discharge Ready Time	hh.mm.ss
1	Critical Care Discharge Date	<mark>ccyymmdd</mark>
1	Critical Care Discharge Time	hh.mm.ss

C. New Definitions to be added to the chapter 'Terms':

c.1 Critical Care Period

 A period of time within a hospital provider spell during which a patient receives care in a designated adult critical care bed. The purpose of the CCMDS is to capture data relating to the Critical Care Period.

Outreach activity and resuscitation conducted outside designated critical care areas should not be recorded as a Critical Care Period. Also excluded from this is care provided on general wards. A new Critical Care Period starts when the patient is admitted to a critical care location regardless of the critical care level. Repeated admissions to the same unit (including repeated admissions within the same calendar day), transfers to a different critical care location and transfers from a non-standard location to a critical care unit within the same Hospital Provider Spell trigger a new Critical Care Period. A change of consultant or brief transfers for investigation or treatment do not end the Critical Care Period.

A Critical Care Period ends when the patient is discharged from the critical care location or dies.

C.2 Organ System Supported

The type of organ system supported within a <u>CRITICAL CARE PERIOD</u>. This may not necessarily be support for a failing organ. Basic respiratory support is likely to occur simultaneously with advanced respiratory support. If they are both required on the same day, only advanced respiratory support should be recorded. Basic cardiovascular support is likely to occur simultaneously with advanced cardiovascular support. If they are both required on the same day, only advanced respiratory support should be recorded. Basic cardiovascular support is likely to occur simultaneously with advanced cardiovascular support. If they are both required on the same day, only advanced cardiovascular support should be recorded.

Basic Respiratory Support

Indicated by one or more of the following:

- More than 50% oxygen delivered by face mask.
- Close observation due to the potential for acute deterioration to the point of needing advanced respiratory support (eg severely compromised airway or deteriorating respiratory muscle function).
- Physiotherapy or suction to clear secretions at least two hourly, whether via tracheostomy, minitracheostomy, or in the absence of an artificial airway.
- Patients recently extubated after a prolonged period of intubation and mechanical ventilation, (e.g. more than 24 hours of tracheal intubation).
- Mask CPAP or non-invasive ventilation.
- Patients who are intubated to protect the airway but needing no ventilatory support and who are otherwise stable.

Advanced Respiratory Support

Indicated by:

Invasive mechanical ventilatory support (excluding mask (CPAP) or non-invasive methods e.g. mask ventilation but including BIPAP or CPAP applied via a tracheal tube). Extracorporeal respiratory support

Basic Cardiovascular Support

Indicated by one or more of the following:

- Treatment of circulatory instability due to hypovolaemia from any cause
- Use of a CVP line for basic monitoring or central venous access to deliver therapeutic agents.
- Use of an arterial line for basic monitoring of arterial pressure or sampling of arterial blood.
- Single intravenous vasoactive drug used to support arterial pressure, cardiac output or organ perfusion.
- Intravenous drugs to control cardiac arrhythmias.
- Non-invasive measurement of cardiac output (e.g. echocardiography, thoracic impedance)

Advanced Cardiovascular Support

Indicated by one or more of the following:

- Multiple intravenous vasoactive and/or rhythm controlling drugs used to support arterial pressure, cardiac output or organ perfusion (eg inotropes, amiodarone, nitrates).
- Patients resuscitated after cardiac arrest where intensive therapy is considered clinically appropriate.
- Observation of cardiac output and derived indices (e.g. pulmonary artery catheter, lithium dilution, pulse contour analyses, oesophageal doppler).
- Intra aortic balloon pumping.
- Insertion of a temporary cardiac pacemaker (criteria valid for each day of connection to a functioning external pacemaker unit).
- Placement of a gastrointestinal tonometer

Renal Support

Indicated by:

Acute renal replacement therapy (e.g. haemodialysis, haemofiltration etc.)

Neurological Support

Indicated by one or more of the following:

- Central nervous system depression sufficient to prejudice the airway and protective reflexes, excepting that caused by therapeutic sedation prescribed to facilitate mechanical ventilation.
- Invasive neurological monitoring e.g. ICP, jugular bulb sampling.
- Severely agitated or epileptic patients requiring constant nursing attention and/or heavy sedation.

Gastrotintestinal Support

Indicated by:

Feeding with parenteral or enteral nutrition.

Dermatological Support

Indicated by one or more of the following:

- Patients with major skin rashes, exfoliation or burns (eg greater than 30% body surface area affected).
- Use of multiple trauma dressings (eg multiple limb or limb and head dressings).
- Use of complex dressings (e.g. open abdomen or large skin area greater than 30% body surface area).

Liver Support

Indicated by:

Extracorporeal liver replacement device (e.g.. MARS as manufactured by Teraklin, Rostock, Germany), bioartificial liver or charcoal haemoperfusion.

D. Changes to existing data items in the chapter 'Data Items':

The following change will be made to the definitions of data items already present in the NHS Wales Data Dictionary:-

(APC ds99/ EAL mds/ OP mds/<mark>CC mds</mark>)

Data items for which definitions and standards are already present in the dictionary are:-

Record ID Provider Code NHS Number Case Record Number Postcode Sex Birth Date Treatment Function Code Site Code of Treatment Patients Name Patients Name Patients Usual Address Code of GP Practice Ethnic Group Hospital Provider Spell Number Administrative Category

E. New data items introduced into the NHS Wales Data Dictionary in the chapter 'Data Items':

The following new data items will be added: -

Advanced Cardiovascular Support Days

(CC mds)

The total number of days that the patient received advanced cardiovascular support during a Critical Care Period.

To be completed when patient has been discharged from the Critical Care Unit or has died.

Format: 3 digit numeric

Value	Meaning
000	000
001-997	No. of days of Advanced Cardiovascular Support
998	998 or more days of Advanced Cardiovascular Support
999	Occurred but day count not known

Advanced Respiratory Support Days

(CC mds)

The total number of days that the patient received advanced respiratory support during a Critical Care Period.

To be completed when patient has been discharged from the Critical Care Unit or has died.

Format: 3 digit numeric	
Value	Meaning
000	000
001-997	No. of days of Advanced Respiratory Support
998	998 or more days of Advanced Respiratory Support
<mark>999</mark>	Occurred but day count not known

Basic Cardiovascular Support Days

(CC mds)

The total number of days that the patient received basic cardiovascular support during a Critical Care Period.

To be completed when patient has been discharged from the Critical Care Unit or has died.

Format: 3 digit numeric	
Value	Meaning
000	000
001-997	No. of days of Basic Cardiovascular Support
<mark>998</mark>	998 or more days of Basic Cardiovascular Support
999	Occurred but day count not known

Basic Respiratory Support Days

(CC mds)

The total number of days that the patient received basic respiratory support during a Critical Care Period.

To be completed when patient has been discharged from the Critical Care Unit or has died.

Format: 3 digit numeric

Value Meaning

000 000

001-997 No. of days of Basic Respiratory Support

998 or more days of Basic Respiratory Support

999 Occurred but day count not known

Critical Care Admission Source

(CC mds)

The primary organisation type that the patient has been admitted from prior to the start of the Critical Care Period.

Value	Meaning
01	Same NHS hospital site
<mark>03</mark>	Independent Hospital Provider in the UK

<mark>04</mark>	Non-hospital source within the UK (e.g. home)
<mark>05</mark>	Non UK source such as repatriation, military personnel or foreign national
<mark>51</mark>	Other NHS hospital site (same Trust)
<mark>52</mark>	Other NHS hospital site (different NHS Trust)

Critical Care Admission Type

(CC mds)

An indication of whether a Critical Care Period was initiated as a result of a non-emergency treatment plan, for example, for elective major surgery. This relates only to the period of critical care and not to the nature of the hospital admission. For example, a planned hospital admission may unexpectedly require an emergency ICU admission, in which case the classification will be '01'

Value	Meaning
01	Unplanned local admission. All emergency or urgent patients referred to the unit only as a result of an unexpected acute illness occurring within the hospital or local area.
02	Unplanned transfer in. All emergency or urgent patients referred to the unit as a result of an unexpected acute illness occurring outside the hospital local area.
03	Planned transfer in (tertiary referral). A pre-arranged admission to the unit after treatment or initial stabilisation at another hospital but requiring specialist or higher-level care that cannot be provided at the source hospital.
04	Planned local surgical admission. A pre-arranged surgical admission to the unit, acceptance by the unit must have occurred prior to the start of the surgical procedure and the procedure will usually have been of an elective or scheduled nature. For example, following a major procedure, for a high risk medical condition associated with any level of surgery, admitted prior to elective surgery for optimization, admitted for monitoring of pain control eg epidurals, or obstetric surgical cases admitted on a planned basis.
<mark>05</mark>	Planned local medical admission. Booked medical admission, for example, planned investigation or high risk medical treatment.

Repatriation. The patient is returning to the unit from another hospital after being transferred there for either medical or non-medical reasons.

Critical Care Discharge Date

(CC mds)

The end date of a Critical Care Period. This occurs either when the patient dies or when the patient is transferred from the critical care unit. When the patient is transferred from a temporary area to a critical care unit or from one critical care unit to another, even within the same NHS Trust, this will be the end of the current Critical Care Period and the start of a new one.

Format: ccyymmdd

Critical Care Discharge Destination

(CC mds)

The primary organisation type that the patient has been discharged to at the end of the Critical Care Period.

Must be completed when the Critical Care Discharge Date is recorded.

Format: 2 digit numeric

Value	Meaning
01	Same NHS hospital site
<mark>03</mark>	Independent Hospital Provider in the UK
<mark>04</mark>	Non-hospital destination within the UK (e.g. home as coded in Location)
05	Non United Kingdom destination (e.g. repatriation)
06	No discharge destination, patient died in unit
<mark>51</mark>	Other NHS hospital site (same Trust)
<mark>52</mark>	Other NHS hospital site (different NHS Trust)

06

Critical Care Discharge Location

(CC mds)

The principal location that the patient is discharged to at the end of the Critical Care Period.

Must be completed when the Critical Care Discharge Date is recorded.

Format: 2 character alpha-numeric

Value	Meaning
<mark>01</mark>	Ward
02	Recovery only (when used to provide temporary critical care facility)
03	Other intermediate care or specialised treatment area but excluding temporary visits en route, e.g. imaging, endoscopy, catheter suites and operating departments.
04	Adult level three critical care bed (e.g. in a flexibly configured unit)
05	Adult level two critical care bed (e.g. in a flexibly configured unit)
<mark>06</mark>	No discharge location, patient died in unit
<mark>07</mark>	Obstetrics area
08	Paediatric critical care area
09	Home or other residence (e.g. nursing home, H.M. Prison, residential care)
10	Other non-hospital location

Critical Care Discharge Ready Date

(CC mds)

The date on which the patient has been declared clinically ready for discharge or transfer from the Critical Care Period and a formal request has been made to the hospital bed management system (or appropriate staff with authority to admit at the intended destination) and the date and time of this status is recorded as such in the clinical record.

Only to be completed if the patient has not died.

Format: ccyymmdd

Critical Care Discharge Ready Time

(CC mds)

The time at which the patient has been declared clinically ready for discharge or transfer from the Critical Care Period and a formal request has been made to the hospital bed management system (or appropriate staff with authority to admit at the intended destination) and the date and time of this status is recorded as such in the clinical record.

Format: hh.mm.ss

Critical Care Discharge Status

(CC mds)

The discharge status of a patient who is discharged from a Ward Stay where they were receiving care as part of a Critical Care Period and the discharge ends the Critical Care Period.

Must be completed when the Critical Care Discharge Date is recorded.

Value	Meaning
01	Fully ready for discharge
02	Discharge for palliative care
03	Early discharge due to shortage of critical care beds
04	Delayed discharge due to shortage of other ward beds
<mark>05</mark>	Current level of care continuing in another location
<mark>06</mark>	More specialised care in another location
07	Self discharge against medical advice
08	Patient died (no organs donated)
09	Patient died and became heart beating organ donor for heart, lungs, kidney, liver or other solid internal organ.
10	Patient died and provided cadaveric tissue donation

Critical Care Discharge Time

(CC mds)

The end time of a Critical Care Period. This occurs either when the patient dies or when the patient is transferred from the critical care unit. When the patient is transferred from a temporary area to a critical care unit or from one critical care unit to another, even within the same NHS Trust, this will be the end of the current patient and the start of a new one.

Format: hh.mm.ss

<u>Critical Care Level 2 D</u> (CC mds)	ays
The total number of days a	patient received level 2 care during a Critical Care Period.
Must be completed when t	he patient has been discharged from the Critical Care Unit or has died.
Format: 3 digit numeric	
Value	Meaning
000	000
<mark>001-997</mark>	No. of days of Level 2 Care
998	998 or more days of Level 2 Care
<mark>999</mark>	Occurred but day count not known

Critical Care Level 3 Days

(CC mds)

The total number of days a patient received level 3 care during a Critical Care Period.

Must be completed when the patient has been discharged from the Critical Care Unit or has died.

Format: 3 digit numeric	
Value	Meaning
000	000
001-997	No. of days of Level 3 Care
998	998 or more days of Level 3 Care
999	Occurred but day count not known

Critical Care Local Identifier

(CC mds)

This is a unique local activity identifier used to identify a Critical Care Period. This locally defined variable should as a minimum include a sequential numerical component that can discriminate two or more Critical Care Periods occurring on the same calendar day for the same patient.

Format: 8 character alpha-numeric

Critical	Care	Source	Location
	-		

(CC mds)

The type of location the patient was in prior to the start of the Critical Care Period.

Value	Meaning
01	Theatre and Recovery (following surgical and/or anaesthetic procedure)
<mark>02</mark>	Recovery only (when used to provide temporary critical care facility)
<mark>03</mark>	Other Ward (not critical care)
<mark>04</mark>	Imaging department
<mark>05</mark>	Accident and emergency
<mark>06</mark>	Other intermediate care or specialist treatment areas including endoscopy units and catheter suites
<mark>07</mark>	Obstetrics area
<mark>08</mark>	Clinic
09	Home or other residence (including nursing home, H.M. Prison or other residential care)
<mark>10</mark>	Adult level three critical care bed (ICU bed)
11	Adult level two critical care bed (HDU bed)
12	Paediatric critical care area

Critical Care Start Date

(CC mds)

The date the patient first occupies a designated critical care bed. If there are repeated admissions to the same unit or transfers to different critical care areas within the same Hospital Provider, these should produce separate Critical Care Periods identified by different start dates.

If there are repeated admissions to the same unit during the same calendar day, each period must record and be uniquely identified by the Critical Care Local Identifier.

See DATE FORMAT

Critical Care Start Time

(CC mds)

The time the patient first occupies a designated critical care bed.

Format: hh.mm.ss

Critical Care Unit Function

(CC mds)

The type of area to which the patient was admitted during a Critical Care Period. This is the principal clinical service provided within the WARD.

Value	Meaning
01	Non-specific, general adult critical care
02	Surgical adult patients (unspecified specialty)
<mark>03</mark>	Medical adult patients (unspecified specialty)
04	Paediatric critical care
<mark>05</mark>	Neurosciences patients predominate
<mark>06</mark>	Cardiac surgical patients predominate
<mark>07</mark>	Thoracic surgical patients predominate
<mark>08</mark>	Burns and plastic surgery patients predominate
<mark>09</mark>	Spinal patients predominate
<mark>10</mark>	Renal patients predominate
11	Liver patients predominate

<mark>12</mark>	Obstetric patients predominate
<mark>90</mark>	Non standard location using a ward area
91	Non standard location using the operating department

Dermatological Support Days

(CC mds)

The total number of days that the patient received dermatological system support during a Critical Care Period.

To be completed when the patient has been discharged from the Critical Care Unit or has died.

Format: 3 digit numeric	
Value	Meaning
000	000
001-997	No. of days of Dermatological Support
998	998 or more days of Dermatological Support
999	Occurred but day count not known

Gastro-intestinal Support Days

(CC mds)

The total number of days that the patient received gastro-intestinal system support during a Critical Care Period.

To be completed when the patient has been discharged from the Critical Care Unit or has died.

Format: 3 digit numeric	
Value	Meaning
000	000
<mark>001-997</mark>	No. of days of Gastro-Intestinal Support
<mark>998</mark>	998 or more days of Gastro-Intestinal Support
<mark>999</mark>	Occurred but day count not known

Liver Support Days (CC mds)

The total number of days that the patient received liver support during a Critical Care Period.

To be completed when the patient has been discharged from the Critical Care Unit or has died.

Format: 3 digit numeric	
Value	Meaning
000	000
001-997	No. of days of Liver Support
998	998 or more days of Liver Support
<mark>999</mark>	Occurred but day count not known

Neurological Support Days

(CC mds)

The total number of days that the patient received neurological system support during a Critical Care Period.

To be completed when the patient has been discharged from the Critical Care Unit or has died.

Format: 3 digit numeric	
Value	Meaning
000	000
001-997	No. of days of Neurological Support
998	998 or more days of Neurological Support
999	Occurred but day count not known

Organ Support Maximum

(CC mds)

The maximum number of organ systems supported on any one day during a Critical Care Period. The duration of each organ system support is calculated using the date from which the organ support was effective and the date the organ support ended. Each organ system can only be counted once on any calendar day. Both basic and advanced categories cannot be counted at the same time. The range of values for Organ Support Maximum is from 0 to 7.

Format: 2 digit numeric

Renal Support Days

(CC mds)

The total number of days that the patient received renal system support during a Critical Care Period.

To be completed when the patient has been discharged from the Critical Care Unit or has died.

Format: 3 digit numeric	
Value	Meaning
000	000
001-997	No. of days of Renal Support
998	998 or more days of Renal Support
999	Occurred but day count not known

Unit Bed Configuration

(CC mds)

The main composition of critical care bed types for the ward.

Value	Meaning
<mark>02</mark>	Level 2 beds only where patients require more detailed observation or intervention including support for a single failing organ system or post-operative care and those 'stepping down' from higher levels of care
03	Level 3 beds only where patients require advanced respiratory support alone or basic respiratory support together with support of at least two organ systems. This level includes beds for all complex patients requiring support for multi-organ failure
<mark>05</mark>	Flexible critical care beds where there is a mix of level 2 and level 3 beds
<mark>90</mark>	Temporary use of non critical care bed

Additional Information:

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