

NSW Sub-Acute and Non-Acute Patient (SNAP) Data Collection - Reporting and Submission Requirements

Summary	This Policy Document covers reporting and submission requirements for the sub-acute and non-acute patient (SNAP) data collection. This data is used to monitor delivery of sub-acute and non-acute admitted patient services by public hospitals. The data is also used for epidemiological studies and public health reporting at a state and national level and is a Commonwealth reporting requirement as part of the National Health Information Agreement.
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Audience	Administration, Medical, Allied health, Nursing, All SNAP related staff



NSW SUB-ACUTE AND NON-ACUTE PATIENT (SNAP) DATA COLLECTION – REPORTING AND SUBMISSION REQUIREMENTS

PURPOSE

This Policy Directive covers reporting and submission requirements for the sub-acute and non-acute patient (SNAP) data collection.

SNAP data is primarily used by the NSW Ministry of Health and its administrative units to monitor delivery of sub-acute and non-acute admitted patient services by public hospitals and publically contracted care in other facilities in NSW. This enables a review of service utilisation, identification of health service trends, appropriate allocation of resources and monitoring of the performance of service delivery units against benchmarks. The data is also used for epidemiological studies and public health reporting at a state and national level and is a Commonwealth reporting requirement as part of the National Health Information Agreement.

MANDATORY REQUIREMENTS

Reporting of all admitted sub-acute and non-acute episodes of care in-scope of the NSW SNAP data collection (public hospitals) is a mandatory requirement, enabling NSW to comply with the Public Health Act 1991 and to meet its state and national reporting commitments and its obligations under the National Health Reform Agreement.

IMPLEMENTATION

Chief Executives of Local Health Districts and Specialty Health Networks are to ensure:

- This Policy Directive is distributed to all staff involved in collecting and supplying data for the SNAP data collection. This includes staff of sub-acute and non-acute services, medical record and information services, and clerical staff tasked with maintaining currency of patient data in the patient administration system (PAS) and/or data entry into Synaptix.
- Staff have access to electronic systems to enable collection of data items in accordance with this Policy Directive and associated resources.
- Data collected in accordance with this Policy Directive complies with the reported schedule outlined.



REVISION HISTORY

Version	Approved by	Amendment notes
February 2018	Deputy Secretary,	PD2008_591 amended to align with AN-SNAP version 4
(PD2018_007)	Strategy and	classification.
	Resources	
May 2008	Deputy Secretary,	Initial document.
(PD2008_025)	Strategy and	
	Resources	

ATTACHMENTS

1. NSW Sub-Acute and Non-Acute Patient (SNAP) Data Collection – Reporting and Submission Requirements: Procedure

NSW Sub-Acute and Non-Acute Patient (SNAP) Data Collection – Reporting and Submission Requirements



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1 PURPOSE AND INTENT

This Policy Directive covers reporting and submission requirements for the sub-acute and non-acute patient (SNAP) data collection.

SNAP data is primarily used by the NSW Ministry of Health and its administrative units to monitor delivery of sub-acute and non-acute admitted patient services by public hospitals and publically contracted care in other facilities in NSW. This includes a review of service utilisation, identification of health service trends, appropriate allocation of resources and monitoring the performance of service delivery units against benchmarks. SNAP data is also used for epidemiological studies and public health reporting at a state and national level and is reportable to the Commonwealth under the National Health Information Agreement.

2 SCOPE

This Policy Directive applies to all NSW public hospitals as well as publically contracted care in other facilities within NSW.

A SNAP record must be provided for each sub-acute or non-acute episode of care delivered to a patient formally admitted to a public hospital within NSW. A sub-acute or non-acute episode of care is defined as a same day or overnight episode of care with one of the following care types:

- palliative care
- rehabilitation
- psychogeriatric
- geriatric evaluation and management
- maintenance care

Sub-acute and non-acute treatment and/or care can occur in a hospital or in a patient's home environment under the Hospital in the Home (HITH) program, where the patient is categorised as a 'daily HITH' patient (refer NSW HITH Guideline GL2013_006).

All sub-acute and non-acute patients remain in-scope for this collection until they are formally separated or undergo a statistical separation in the form of a care type change to a care type out of scope for this collection.

3 USES OF THE SNAP DATA COLLECTION

The SNAP data collection is used for the following purposes:

- Developing performance and service agreements between the Secretary, NSW Health and Districts/Networks
- Monthly performance reporting
- Performance reporting annual report summary of activity
- Bureau of Health Information reporting



- Commonwealth reporting including the Australian Institute of Health and Welfare (AIHW), the National Health Funding Administrator and the Independent Hospital Pricing Authority (IHPA)
- The Activity Based Management (ABM) SNAP Application (App), which links SNAP data to the admitted patient data collection for the purpose of assessing data completeness, data quality and clinical benchmarking
- Claiming payments, e.g. National Health Funding Administrator, health insurers
- Activity based funding and activity based costing
- Models of care (redesign)
- Biosurveillance (public health)
- Quality and safety projects
- Clinical outcomes evaluation
- Workforce planning
- Research purposes with the approval of a human research ethics committee (requires written request to access de-identified data)
- Submissions to external benchmarking organisations such as the Palliative Care Outcomes Collaborative (PCOC); Australasian Rehabilitation Outcome Centre (AROC); Health Round Table (HRT)
- Other ad-hoc reporting, as required.

4 SUBMISSION AND REPORTING FRAMEWORK

Local Health Districts and Specialty Health Networks (Districts/Networks) must ensure that SNAP data for all completed sub-acute and non-acute episodes of care has been entered into the SNAP data collection application (SYNAPTIX – a centralised data collection tool which replaced SNAPshot in 2009) by the fifth working day of the month following completion of the episode, i.e. data for all episodes completed in January must be entered into SYNAPTIX by the fifth working day of February.

A financial year-to-date data extraction from SYNAPTIX is carried out by ABM by the tenth day of each month. Data is then matched with admitted patient data extracted from the state Health Information Exchange (HIE). A second data extract may occur mid-month.

The HIE is the considered source of truth for SNAP data with the exception of the following data elements in SYNAPTIX:

- SNAP assessment tool
- SNAP episode/phase start and end dates

4.1 Data Quality

Data quality checks are undertaken by ABM to ensure submitted data is compliant with reporting specifications. This enables incomplete records or records with errors to be identified. SNAP data quality is monitored using the ABM SNAP App which is available to authorised users via the NSW Health Intranet. Error records must be checked and corrected by the reporting hospital. Depending on the type of error, corrections of either



SYNAPTIX or in the patient administration system (PAS) may be required. Error correction rates are monitored and benchmarked via the ABM SNAP App.

It is the responsibility of clinicians, administrative and clerical staff, information management and technology staff and health service managers to ensure the completeness and accuracy of SNAP data.

Some examples of data quality checks include:

- cross check of care type with the admitted patient data collection
- reporting of leave days
- availability of sufficient information to group to an AN-SNAP class, e.g. assessment data such as Functional Independence Measures (FIMs); Health of the Nation Outcomes Scales (HoNOS); Resource Utilisation Group – Assisted Daily Living (RUG/ADL); rehabilitation impairment code; and palliative care phase.

5 GOVERANCE

Reporting of all admitted sub-acute and non-acute episodes of care in-scope of the NSW SNAP data collection (public hospitals) is a mandatory requirement. This enables NSW to comply with the Public Health Act 1991, to meet state and national reporting commitments and obligations under the National Health Reform Agreement.

The collection is managed by ABM on behalf of NSW Health.

Sponsor:	Executive Director, ABM
Data Custodian:	Executive Director, ABM
Data Steward:	SNAP Manager, ABM

The Data Steward manages two state groups that oversee the SNAP data collection:

- The NSW Sub-Acute ABM Working Group (represented by SNAP clinicians from Districts/Networks) meets on a regular basis to assist the NSW Ministry of Health to develop a better understanding of sub and non-acute services in NSW; and to assist in developing options for costing and funding those services as part of implementing the current national health reform agenda.
- The SNAP Coordinators Group (represented by SNAP District/Network data stewards) is advised of endorsed changes and collection directions. Each District/Network data steward/SNAP coordinator group representative has responsibility for ensuring compliance and providing data to the SNAP data collection, and provides a contact point between ABM and Districts/Networks for issues concerning the SNAP data collection.

Both forums provide an opportunity to discuss SNAP data collection issues and changes.



6 IMPLEMENTATION

Chief Executives of Districts/Networks are to ensure:

- This Policy Directive is distributed to all staff involved in collecting and supplying data for the SNAP data collection. This includes staff of sub-acute and non-acute services, medical record and information services staff, and clerical staff tasked with maintaining currency of patient data in the patient administration system (PAS) and/or data entry into SYNAPTIX.
- Staff have access to electronic systems to enable collection of data items in accordance with this Policy Directive and associated resources.
- Data collected in accordance with this Policy Directive complies with the reporting schedules outlined.

7 **RESPONSIBILITIES**

The following responsibilities relate to the SNAP data collection:

- Sub-acute and non-acute personnel within Districts/Networks (clinical and clerical):
 - ensuring that data is collected according to relevant protocols, e.g. FIM
 - collection of clinical data items such as assessment data FIMs; HoNOS; RUG/ADL; rehabilitation impairment code; and palliative care phase
 - accurate recording of clerical data items such as patient demographics, episode start and end dates, leave taken, care type changes, financial class
- District/Network SNAP Coordinators Group representative/data steward:
 - ensures SNAP data is recorded in the SYNAPTIX application in a timely and accurate manner
 - establish procedures and processes for following up data completeness and quality issues within Districts/Networks
 - communicate change within Districts/Networks as well as advice to and from the Ministry and ABM
 - undertake training in the SYNAPTIX application and SNAP data collection for local stakeholders
 - o act as local SYNAPTIX super user
- NSW Sub-Acute ABM Working Group:
 - o provide clinical oversight of the data collection.
 - provide expert opinion on matters affecting the SNAP collection in relevant clinical areas and consult with and represent clinical stakeholders during SNAP classification reviews
- Collection sponsor ABM:
 - responsible for ensuring the SNAP data collection is resourced and continues to meet business needs. Such resources include appropriate



system architecture, disaster recovery and business continuity planning, comprehensive system and end-user documentation and maintenance of metadata/data dictionary

- Data custodian (ABM and Districts/Networks):
 - \circ exercises within their mandate
 - ownership and control of the collection
 - authorising access
 - release of data and changes to the collection
- Data steward (ABM):
 - monitors data quality and completeness, providing advice to the data custodian on issues and proposals for change
 - o act as state SYNPTIX administrator

8 **DEFINITIONS**

ABM	Activity Based Management
AIHW	Australian Institute of Health and Welfare
AN-SNAP	Australian National Sub-Acute and Non-Acute Patient Classification
APDC	Admitted Patient Data Collection
AROC	Australian Rehabilitation Outcomes Centre
AR-DRG	Australian Refined Diagnosis Related Group
FIM	Functional Independence Measure
GEM	Geriatric Evaluation and Management
HIE	Health Information Exchange
HITH	Hospital in the Home
HoNOS	Health of the Nation Outcome Scales
IHPA	Independent Hospital Pricing Authority
NSW	New South Wales
PAS	Patient Administration System
PCOC	Palliative Care Outcome Collaboration
PD	Policy Directive
RUG-ADL	Resource Utilisation Group – Assisted Daily Living
SNAP	Sub-Acute and Non-Acute Patient
SNAP App	Online multipurpose program
SYNAPTIX	Standalone data collection tool

9 **REFERENCES AND RESOURCES**

Further information about the collection and submission of SNAP data is available on the NSW Health intranet at <u>http://internal.health.nsw.gov.au/abf_taskforce/snap</u>. This includes links to the following resources:

 NSW SNAP Data Collection Handbook - detailed information on SNAP data items, codes and guidance on completion of each data item



- SNAP Fact Sheet summary information regarding the SNAP classification
- SYNAPTIX Users Guide a comprehensive guide on the use of the SYNAPTIX application
- SYNAPTIX Reporting Manual supports data collectors and educates users on the SYNPATIX application
- NSW SYNAPTIX Data Error Corrections Guide instructions on how to correct SNAP data errors
- ABM SNAP Application User Guide information and instructions on how to use the SNAP App to monitor data completeness and quality