

Developing Coding Guidance for Elective Care Surgical Hubs in Ireland

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Introduction

As with many countries Ireland has waiting lists for many day case and minor procedures. As part of the health care systems response, an elective Surgical Hub is being developed in four healthcare regions. Surgical Hubs will provide elective day case surgery and minor procedures in addition to outpatient clinics. Each Surgical Hub will be under the governance of a major hospital and other hospitals in the region can refer patients to the Surgical Hub. It is envisaged that clinicians from across the region will be able to perform surgery at the Hub.

In Ireland hospital activity data is captured in public hospitals for admitted in patient and daycase activity in a system called the Hospital In-Patient Enquiry (HIPE). The Healthcare Pricing Office manages this system and provides guidance on data collection. The HPO was requested to develop guidance on the coding of data from Surgical Hubs.

Methods

The HPO were invited to develop coding guidance that would support the reporting of HIPE data for the surgical hubs. Initial meetings were held with the project team and also the hospital with responsibility for Surgical Hub. The clinical coding of the data had not been considered in any of the early plans for the new facilities. The HPO identified key areas for consideration and provided guidance on areas including:

- * Each Surgical Hub to be identifiable in the HIPE data along with any referring hospitals
- * Coding resources must be assigned for the Hub but can be located in the governing hospital.
- * Need for clinical coders access to healthcare records for Surgical Hub
- * Need for clinical coders to have access to required information e.g. histologies
- * Coding coverage is the responsibility of the governing hospital
- * A HIPE Coding Process flow for surgical hubs was developed.

The importance of documentation and availability of information for accurate coding is critical as patients will only attend as daycases and healthcare records will not be kept in the Surgical Hubs.

Results

The first Surgical Hub opened in February 2025 and activity will be ramped up over the coming months. In this first site there are EHRs which facilitate coding and the need to ensure all relevant information is available such as histologies. The next Surgical Hub, due to open later this year, does not presently have an EHR and decisions around the type and level of documentation for patients having procedures in the Surgical Hub are in progress.

The system set up for data entry and coding of Surgical Hub activity is working well to date although the activity is at small numbers in these early stages.

Discussion/Conclusions

Clinical coders are needed to code and manage the data flow for accurate coding in these new hubs, the absence of a standard EHR across sites may prove to be a challenge for timely, accurate coding. The HIPE system has a national standardised data entry and reporting system and has been responsive in adapting to this new type of health care facility. As services expand, challenges may arise with coding coverage and specificity. The HPO will look to support the HIPE teams capturing this data and also to review coding quality to ensure activity data is robust for future inclusion in activity based funding.

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