AROC Ambulatory Dataset V4.1

Data item	Impairment
Establishment identifier	All impairments
Establishment name	All impairments
Program/Unit Identifier	All impairments
Program/Unit name	All impairments
Unique Record Number	All impairments
Date of birth	All impairments
Date of birth estimate flag	All impairments
Letters of Name	All impairments
Sex	All impairments
Indigenous status (AU/NZ) / Ethnicity (NZ)	All impairments
Episode begin date	All impairments
Episode end date	All impairments
Geographical residence	All impairments
Postcode	All impairments
Funding source	All impairments
Health Fund/other payer	All impairments
NDIS status	All impairments
AROC Impairment Code	All impairments
Date of injury/impairment onset	All impairments
Time since onset (if date unknown)	All impairments
Date of relevant inpatient episode	All impairments
Referral date	All impairments
Mode of episode start	All impairments
Is this the first direct care rehabilitation episode for this impairment?	All impairments
Need for interpreter	All impairments
Type of accommodation **prior** to this impairment	All impairments
Carer status **prior** to this impairment	All impairments
Employment status **prior** to this impairment	All impairments
Type of accommodation **during** this impairment	All impairments
Carer status **during** this impairment	All impairments
Is there an existing comorbidity interfering with this episode	All impairments
If yes, select up to four (multiple options)	All impairments
Did the patient have any cognitive impairment which impacted on their ability to participate in rehabilitation?	All impairments
Date MDT rehab plan established	All impairments
Mode of episode end	All impairments
Final destination	All impairments
Carer status **post** discharge	All impairments
Employment status **post** discharge	All impairments
Was the patient able to return to pre-impairment leisure and recreational activities?	All impairments

Data item	Impairment
Total number of days seen	All impairments
Total number of occasions of service	All impairments
Staff type providing therapy(s) during episode of care (multiple options)	All impairments
General Comments	All impairments
Outcome measures	
Date episode start Australian Modified Lawton's IADL Scale assessment	All impairments
Date episode end Australian Modified Lawton's IADL Scale assessment	All impairments
Australian Modified Lawton's IADL Scale (start and end)	All impairments
Was rehabilitation aimed at: Upper limb function; if yes, complete Motor Assessment Scale - Upper Limb	Stroke
Was rehabilitation aimed at: Gait training; if yes, complete 10 metre walk test	Stroke
Was rehabilitation aimed at: Aphasia; if yes, record outcome measure used and pre/post treatment scores in the 'General Comments' section	Stroke
Date episode start Motor Assessment Scale - Upper Limb assessment	Stroke
Date episode end Motor Assessment Scale - Upper Limb assessment	Stroke
Motor Assessment Scale - Upper Limb scores (start and end)	Stroke
Date episode start 10 metre walk test	Stroke Orthopaedic Conditions
Date episode end 10 metre walk test	Stroke Orthopaedic Conditions
10 metre walk test score (start and end)	Stroke Orthopaedic Conditions
Date episode start Mayo Portland Adaptability Index 4 (MPAI-4)	Brain dysfunction
Date episode end Mayo Portland Adaptability Index 4 (MPAI-4)	Brain dysfunction
MPAI-4 Abilities Subscale scores (start and end)	Brain dysfunction
MPAI-4 Adjustment Subscale scores (start and end)	Brain dysfunction
MPAI-4 Participation Subscale scores (start and end)	Brain dysfunction
Level of SCI at episode start	SCI
Date ready for casting	Amputation of limb
Phase of amputee care at episode **start**	Amputation of limb
Did patient pass through the following phases of care **during** their rehabilitation episode?	Amputation of limb
Phase of amputee care at episode **end**	Amputation of limb
Does the patient have a prosthetic device fitted, or will have one fitted in the future?	Amputation of limb
Date of first prosthetic fitting	Amputation of limb
Reason for delay in first fitting?	Amputation of limb
Timed up and go	Amputation of limb
6 minute walk	Amputation of limb **Optional**

Data item	Impairment
10 metre walk	Amputation of limb **Optional**
Date episode start De Morton Mobility Index (DEMMI) assessment	Reconditioning
Date episode end De Morton Mobility Index (DEMMI) assessment	Reconditioning
De Morton Mobility Index (DEMMI) scores (start and end)	Reconditioning
Optional outcome measure	
Date episode start Goal Attainment Scale assessment	All impairments
Date episode end Goal Attainment Scale assessment	All impairments
Goal Attainment Scale scores (start and end)	All impairments