Hospice Database

This document is to be used in conjunction with the Hospice database for the 2019 Data Supplement for Hospice Agencies.

The database contains 12 tables and the relationships are indicated in the hospicerel2019.pdf file located in the zipped folder. There is also a direct link to the relationships.

This data is in-process working data for the internal use of the Healthcare Planning and Certificate of Need Section. It may be changed or revised over time. There is no assurance provided or representations as to its accuracy, and any user of the data assumes the risk of errors or inaccuracy.

Table 1: tblCounties

Field Name	Data Type	Definition
County	Text	North Carolina counties

Table 2: tblINP_RES

Field Name	Data Type	Definition
IngInpatientResID	Number	Primary Key
IngHospiceID	Number	Establishes table relationships
strCounty	Text	County of patient origin
IngInpatAdmits	Number	Number of inpatient direct admits
IngInpatTransfer	Number	Number of inpatient transfers from hospice home care
IngInpatDOC	Number	Total number of inpatient days of care
IngInpatDeaths	Number	Total number of inpatient deaths
IngResAdmits	Number	Total number of residential patients admitted
IngResDOC	Number	Total number of residential days of care
IngResDeaths	Number	Total number of residential deaths

Table 3: tblPART_2

Field Name	Data Type	Definition
lngInpatientInfoID	Number	Primary Key
lngHospiceID	Number	Establishes table relationships
strFacilityName	Text	Facility Name
lngInpatientBeds	Number	Number of licensed inpatient beds
lngResidentialBeds	Number	Number of licensed residential beds
strInp_Sited	Text	Where is the inpatient facility located?
strInp_Sited_Other	Text	Specify other location
ysnInp_Open	Yes/No	Did the facility open during the fiscal year?
dtmInp_Date_Licensed	Date/Time	The date the facility was licensed
dtmInp_Date_Certified	Date/Time	The date the facility was Medicare certified
ysnInp_AddBeds	Yes/No	Did the facility add beds during the fiscal year?
lngInp_BedsAdded	Number	Number of beds added
dtmInp_Date_NewBeds	Date/Time	Date the new beds were licensed
ysnConvertResToInpBeds	Yes/No	Did the facility convert residential beds to inpatient beds?
lngResToInpBeds	Number	Number of beds converted from residential to inpatient
dtmResToInpBedsDate	Date/Time	Date the converted beds were licensed
dblNurseClinical_FacFTE	Number	Inpatient FTEs: nursing – direct clinical
dblSocServ_FacFTE	Number	Inpatient FTEs: social services
dblHospAide_FacFTE	Number	Inpatient FTEs: hospice aides
dblPhysPaid_FacFTE	Number	Inpatient FTEs: paid physicians
dblPhysVol_FacFTE	Number	Inpatient FTEs: volunteer physicians
dblChaplain_FacFTE	Number	Inpatient FTEs: chaplains
dblOtherClinical_FacFTE	Number	Inpatient FTEs: other clinical
dblNonClinical_FacFTE	Number	Inpatient FTEs: non – clinical
dblNurse_ResFTE	Number	Residential FTEs: nursing – direct clinical
dblSocServ_ResFTE	Number	Residential FTEs: social services
dblHospAide_ResFTE	Number	Residential FTEs: hospice aides
dblPhysPaid_ResFTE	Number	Residential FTEs: paid physicians
dblPhysVol_ResFTE	Number	Residential FTEs: volunteer physicians
dblChaplain_ResFTE	Number	Residential FTEs: chaplains
dblOtherClinical_ResFTE	Number	Residential FTEs: other clinical
dblNonClinical_ResFTE	Number	Residential FTEs: non – clinical

Table 4: tblPAT_VOLUME

Field Name	Data Type	Definition
lngPatientVolumeID	Number	Primary Key
lngHospiceID	Number	Establishes table relationships
strCounty	Text	County of patient origin
lngAdmissions	Number	Number of new admissions
lngDeaths	Number	Number of deaths
lngNonDeaths	Number	Number of non-death discharges
lngPatTotal	Number	Number of patients served
lngRHCDays	Number	Routine home care days
lngICDays	Number	Inpatient care days
lngRCDays	Number	Respite care days
lngCCDays	Number	Continuous care days
lngTotalDays	Number	Total days of care

Table 5: tblSECTION_A

Field Name	Data Type	Definition
lngHospiceID	Number	Establishes table relationships
strLicenseNum	Text	License Number
strFID	Text	Facility ID
strLegalIdentity	Text	Legal Identity of Applicant
strDBA	Text	Doing Business As
strStreet	Text	Agency Site Address: Street address
strStreet2	Text	Agency Site Address: Street address line 2
strCity	Text	Agency Site Address: City
strST	Text	Agency Site Address: State
strZip	Text	Agency Site Address: Zip code
strCounty	Text	Agency Site Address: County
strAgencyPhone	Text	Agency phone number
strAgencyFax	Text	Agency fax number
dtmPeriod_Startdate	Date/Time	Date the reporting period began
dtmPeriod_Enddate	Date/Time	Date the reporting period ended
strContactName	Text	Contact Name
strContactPhone	Text	Contact Phone
strContactEmail	Text	Contact Email
strContactFax	Text	Contact Fax
strCertify_Name	Text	Authenticating Signature: Name
strCertify_Title	Text	Authenticating Signature: Title
strCertify_Date	Text	Authenticating Signature: Date

Table6: tblSECTION_B

Field Name	Data Type	Definition
lngDemoID	Number	Primary Key
lngHospiceID	Number	Establishes table relationships
strAgencyType	Text	Agency Type: Free Standing; Hospital; Home Health; Nursing Home
lngCensus	Number	Number of patients for the one day census
strZeroExpl	Text	If zero census, please give explanation
ysnMedicareCert	Yes/No	Is this facility Medicare certified?
strProviderNo	Text	What is your Medicare Provider Number?
ysnAccredACHC	Yes/No	Are you accredited by ACHC?
ysnAccredCHAP	Yes/No	Are you accredited by CHAP?
ysnAccredTJC	Yes/No	Are you accredited by TJC?
ysnAccredDNV	Yes/No	Are you accredited by DNV?
ysnAccredOther	Yes/No	Are you accredited by other?
ysnAccredNotAccred	Yes/No	Are you not accredited?
strTaxStatus	Text	Is ownership voluntary, proprietary, or government?

Table 7: tblSECTION_C

Field Name	Data Type	Definition
lngPatientVolID	Number	Primary Key
lngHospiceID	Number	Establishes table relationships
dblAvgLengthStay	Number	Average length of stay
dblMedianLengthStay	Number	Median length of stay
dblAvgDailyCensus	Number	Average daily census
dblTotalDeaths	Number	Total number of deaths
dblDeath_Days7	Number	Number of patients who died in seven or less days
dblDeath_Days180	Number	Number of patients who died in > 180 days (stays of 180 days or more)
dblPatientServ_HosMedicare	Number	Number of patients served whose payment source is hospice Medicare
dblPatientServ_HosMedicaid	Number	Number of patients served whose payment source is hospice Medicaid
dblPatientServ_Private	Number	Number of patients served whose payment source is private insurance
dblPatientServ_Selfpay	Number	Number of patients served whose payment source is self pay
dblPatientServ_Other	Number	Number of patients served whose payment source is other
dblPatientServ_Total	Number	Total number of patients served
dblDaysRout_HosMedicare	Number	Days of routine home care whose payment source is hospice Medicare
dblDaysRout_HosMedicaid	Number	Days of routine home care whose payment source is hospice Medicaid
dblDaysRout_Private	Number	Days of routine home care whose payment source is private insurance
dblDaysRout_Selfpay	Number	Days of routine home care whose payment source is self pay
dblDaysRout_Other	Number	Days of routine home care whose payment sourse is other
dblDaysRout_Total	Number	Totals days of routine home care
dblDaysInpt_HosMedicare	Number	Days of inpatient care whose payment source is hospice Medicare
dblDaysInpt_HosMedicaid	Number	Days of inpatient care whose payment source is hospice Medicaid
dblDaysInpt_Private	Number	Days of inpatient care whose payment source is private insurance
dblDaysInpt_Selfpay	Number	Days of inpatient care whose payment source is self pay
dblDaysInpt_Other	Number	Days of inpatient care whose payment source is other
dblDaysInpt_Total	Number	Total days of inpatient care
dblDaysResp_HosMedicare	Number	Days of respite care whose payment source is hospice Medicare
dblDaysResp_HosMedicaid	Number	Days of respite care whose payment source is hospice Medicaid
dblDaysResp_Private	Number	Days of respite care whose payment source is private insurance
dblDaysResp_Selfpay	Number	Days of respite care whose payment source is self pay
dblDaysResp_Other	Number	Days of respite care whose payment source is other
dblDaysResp_Total	Number	Total days of respite care
dblDaysCont_HosMedicare	Number	Days of continuous care whose payment source is hospice Medicare
dblDaysCont_HosMedicaid	Number	Days of continuous care whose payment source is hospice Medicaid
dblDaysCont_Private	Number	Days of continuous care whose payment source is private insurance
dblDaysCont_Selfpay	Number	Days of continuous care whose payment source is self pay

Field Name	Data Type	Definition
dblDaysCont_Other	Number	Days of continuous care whose payment source is other
dblDaysContTotal	Number	Total days of continuous care
dblTotalDays_HosMedicare	Number	Total patient care days whose payment source is hospice Medicare
dblTotalDays_HosMedicaid	Number	Total patient care days whose payment source is hospice Medicaid
dblTotalDays_Private	Number	Total patient care days whose payment source is private insurance
dblTotalDays_Selfpay	Number	Total patient care days whose payment source is self pay
dblTotalDays_Other	Number	Total patient care days whose payment source is other
dblTotalDays_Total	Number	Sum of all total patient care days

Table 8: tblSECTION_D

Field Name	Data Type	Definition
lngAdminDeathID	Number	Primary Key
lngHospiceID	Number	Establishes table relationships
lngAdmiss_Home	Number	Number of new unduplicated admissions from a private residence
lngAdmiss_NurseFac	Number	Number of new unduplicated admissions from a nursing facility
lngAdmiss_Hospice	Number	Number of new unduplicated admissions from a hospice unit
lngAdmiss_Hospital	Number	Number of new unduplicated admissions from a hospital
lngAdmiss_Inpatient	Number	Number of new unduplicated admissions from a free standing inpatient facility or residence
lngAdmiss_ResCare	Number	Number of new unduplicated admissions from a residential care setting
lngAdmiss_Total	Number	Total number of admissions
lngDeaths_Home	Number	Number of deaths in a private residence
lngDeaths_NurseFac	Number	Number of deaths in a nursing facility
lngDeaths_Hospice	Number	Number of deaths in a hospice unit
lngDeaths_Hospital	Number	Number of deaths in a hospital
lngDeaths_Inpatient	Number	Number of deaths in a free standing hospice inpatient facility or residence
lngDeaths_ResCare	Number	Number of deaths in a residential care setting
lngDeath_Total	Number	Total number of deaths

Table 9: tblSECTION_E

Field Name	Data Type	Definition
lngDiagnosisID	Number	Primary Key
lngHospiceID	Number	Establishes table relationships
lngAdmitInfectious	Number	Number of new admissions: Infectious
lngAdmitNeoplasms	Number	Number of new admissions: Neoplasms
lngAdmitBlood	Number	Number of new admissions: Blood and blood-forming organs
lngAdmitEndocrine	Number	Number of new admissions: Endocrine
lngAdmitMental	Number	Number of new admissions: Mental disorders
lngAdmitNervous	Number	Number of new admissions: Nervous system
lngAdmitCirculatory	Number	Number of new admissions: Circulatory system
lngAdmitRespiratory	Number	Number of new admissions: Respiratory system
lngAdmitDigestive	Number	Number of new admissions: Digestive system
lngAdmitSkinandSub	Number	Number of new admissions: Skin and Subcutaneous tissue
lngAdmitMusculoskel	Number	Number of new admissions: Musculoskeletal system
lngAdmitGenitourin	Number	Number of new admissions: Genitourinary system
lngAdmitCongenital	Number	Number of new admissions: Congenital anomalies
lngAdmitInjandPois	Number	Number of new admissions: Injury and Poisoning
lngAdmitOthers	Number	Number of new admissions: Others
lngAdmitTotal	Number	Number of new admissions: Total
lngDeathsInfectious	Number	Number of deaths: Infectious
lngDeathsNeoplasms	Number	Number of deaths: Neoplasms
lngDeathsBlood	Number	Number of deaths: Blood and blood-forming organs
lngDeathsEndocrine	Number	Number of deaths: Endocrine
lngDeathsMental	Number	Number of deaths: Mental disorders
lngDeathsNervous	Number	Number of deaths: Nervous system
lngDeathsCirculatory	Number	Number of deaths: Circulatory system
lngDeathsRespiratory	Number	Number of deaths: Respiratory system
lngDeathsDigestive	Number	Number of deaths: Digestive system
lngDeathsSkinandSub	Number	Number of deaths: Skin and Subcutaneous tissue
lngDeathsMusculoskel	Number	Number of deaths: Musculoskeletal system
lngDeathsGenitourin	Number	Number of deaths: Genitourinary system
lngDeathsCongenital	Number	Number of deaths: Congenital anomalies
lngDeathsInjandPois	Number	Number of deaths: Injury and Poisoning
lngDeathsOthers	Number	Number of deaths: Others
lngDeathsTotal	Number	Number of deaths: Total
lngDischInfectious	Number	Number of discharges: Infectious
lngDischNeoplasms	Number	Number of discharges: Neoplasms

Field Name	Data Type	Definition
IngDischBlood	Number	Number of discharges: Blood and blood-forming organs
IngDischEndocrine	Number	Number of discharges: Endocrine
IngDischMental	Number	Number of discharges: Mental disorders
IngDischNervous	Number	Number of discharges: Nervous system
IngDischCirculatory	Number	Number of discharges: Circulatory system
IngDischRespiratory	Number	Number of discharges: Respiratory system
IngDischDigestive	Number	Number of discharges: Digestive system
IngDischSkinandSub	Number	Number of discharges: Skin and Subcutaneous tissue
IngDischMusculoskel	Number	Number of discharges: Musculoskeletal system
IngDischGenitourin	Number	Number of discharges: Genitourinary system
IngDischCongenital	Number	Number of discharges: Congenital anomalies
IngDischInjandPois	Number	Number of discharges: Injury and Poisoning
IngDischOthers	Number	Number of discharges: Others
IngDischTotal	Number	Number of discharges: Total
IngPTDaysInfectious	Number	Number of patient days: Infectious
IngPTDaysNeoplasms	Number	Number of patient days: Neoplasms
IngPTDaysBlood	Number	Number of patient days: Blood and blood-forming organs
IngPTDaysEndocrine	Number	Number of patient days: Endocrine
IngPTDaysMental	Number	Number of patient days: Mental disorders
IngPTDaysNervous	Number	Number of patient days: Nervous system
IngPTDaysCirculatory	Number	Number of patient days: Circulatory system
IngPTDaysRespiratory	Number	Number of patient days: Respiratory system
IngPTDaysDigestive	Number	Number of patient days: Digestive system
IngPTDaysSkinandSub	Number	Number of patient days: Skin and Subcutaneous tissue
IngPTDaysMusculoskel	Number	Number of patient days: Musculoskeletal system
IngPTDaysGenitourin	Number	Number of patient days: Genitourinary system
IngPTDaysCongenital	Number	Number of patient days: Congenital anomalies
IngPTDaysInjandPois	Number	Number of patient days: Injury and Poisoning
IngPTDaysOthers	Number	Number of patient days: Others
IngPTDaysTotal	Number	Number of patient days: Total

Table 10: tblSECTION_F

Field Name	Data Type	Definition
lngStaffingID	Number	Primary Key
lngHospiceID	Number	Establishes table relationships
dblHospFTE_Nurse	Number	Home hospice FTEs that are nursing - direct clinical
dblHospFTE_NursePrac	Number	Home hospice FTEs that are nurse practioners
dblHospFTE_SocServ	Number	Home hospice FTEs that are social services
dblHospFTE_HospAide	Number	Home hospice FTEs that are hospice aides
dblHospFTE_PhysPaid	Number	Home hospice FTEs that are paid physicians
dblHospFTE_PhysVol	Number	Home hospice FTEs that are volunteer physicians
dblHospFTE_Chaplain	Number	Home hospice FTEs that are chaplains
dblHospFTE_OtherClinic	Number	Home hospice FTEs that are other clinical
dblHospFTE_Clinical	Number	Total Home hospice FTEs that are clinical
dblHospFTE_NurseInd	Number	Home hospice FTEs that are nursing - indirect clinical
dblHospFTE_Bereave	Number	Home hospice FTEs that provide bereavement services
dblHospFTE_NonClin	Number	Home hospice FTEs that are non-clinical
dblHospFTE_Total	Number	Total home hospice FTEs
dblVisits_Nurse	Number	Number of visits by nursing
dblVisits_NursePrac	Number	Number of visits by nurse practitioners
dblVisits_SocServ	Number	Number of visits by social services
dblVisits_HospAide	Number	Number of visits by hospice aides
dblVisits_PhysPaid	Number	Number of visits by paid physicians
dblVisits_PhysVol	Number	Number of visits by volunteer physicians
dblVisits_Chaplain	Number	Number of visits by chaplains
dblVisits_OtherClinic	Number	Number of visits by other clinical staff
dblCaseload_Nurse	Number	Caseload of primary nurse/nurse case manager
dblCaseload_SocServ	Number	Caseload of social worker
dblCaseload_HospAide	Number	Caseload of hospice aide
dblCaseload_Chaplain	Number	Caseload of chaplain
dblCaseload_Volunteer	Number	Caseload of volunteer coordinator
dblCaseload_MedicalDir	Number	Caseload of medical director

Table 11: tblSECTION_G

Field Name	Data Type	Definition
lngPatientDemoID	Number	Primary Key
lngHospiceID	Number	Establishes table relationships
lngGender_Female	Number	Number of female patients admitted
lngGender_Male	Number	Number of male patients admitted
lngGender_Total	Number	Total number of patients admitted
lngAge_Below1	Number	Number of patients admitted age < 1
lngAge_1to4	Number	Number of patients admitted age 1-4
lngAge_5to14	Number	Number of patients admitted age 5-14
lngAge_15to20	Number	Number of patients admitted age 15-20
lngAge_21to24	Number	Number of patients admitted age 21-24
lngAge_25to34	Number	Number of patients admitted age 25-34
lngAge_35to64	Number	Number of patients admitted age 35-64
lngAge_65to74	Number	Number of patients admitted age 65-74
lngAge_75-84	Number	Number of patients admitted age 75-84
lngAge_85orMore	Number	Number of patients admitted age 85+
lngAge_Total	Number	Total number of patients admitted
lngEthnic_Hispanic	Number	Number of patients admitted who are Hispanic
lngEthnic_NonHispanic	Number	Number of patients admitted who are non-Hispanic
lngEthnic_Total	Number	Total number of patients admitted
lngRace_AmerInd	Number	Number of patients admitted who are American Indian or Alaskan Native
lngRace_Asian	Number	Number of patients admitted who are Asian
lngRace_AfricanAm	Number	Number of patients admitted who are Black or African American
lngRace_Hawaiian	Number	Number of patients admitted who are Hawaiian or other Pacific Islander
lngRace_White	Number	Number of patients admitted who are White
lngRace_Other	Number	Number of patients admitted who are some other race or races
lngRace_Total	Number	Total number of patients admitted

Table 12: tblSECTION_H

Field Name	Data Type	Definition
lngProcessesID	Number	Primary Key
lngHospiceID	Number	Establishes table relationships
dblVolunteer_DirPatient	Number	Number of direct patient care volunteers
dblVolunteer_ClinicalSupp	Number	Number of clinical support volunteers
dblVolunteer_GeneralSupp	Number	Number of general support volunteers
dblVolunteer_Total	Number	Total number of hospice volunteers
dblVolHours_DirPatient	Number	Number of hours for direct patient care volunteers
dblVolHours_ClinicalSupp	Number	Number of hours for clinical support volunteers
dblVolHours_GeneralSupp	Number	Number of hours for general support volunteers
dblVolHours_Total	Number	Total number of volunteer hours
dblVolVisit_DirPatient	Number	Number of patient visits by direct patient care volunteers
dblBereave_Visit_HospFamily	Number	Number of bereavement visits with hospice family members
dblBereave_Visit_CommMem	Number	Number of bereavement visits with community members
dblBereave_Visit_Total	Number	Total number of visits
dblBereave_Phone_HospFamily	Number	Number of phone calls with hospice family members
dblBereave_Phone_CommMem	Number	Number of phone calls with community members
dblBereave_Phone_Total	Number	Total number of phone calls
dblBereave_Mail_HospFamily	Number	Number of mailings to the bereaved family members
dblBereave_Mail_CommMem	Number	Number of mailings to the bereaved community members
dblBereave_Mail_Total	Number	Total number of mailings
dblBereave_Ind_HospFamily	Number	Number of hospice family members who received bereavement services
dblBereave_Ind_CommMem	Number	Number of community members who received bereavement services
dblBereave_Ind_Total	Number	Total number of individuals who received bereavement services