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**SOUTH AFRICAN QUALIFICATIONS AUTHORITY (SAQA)**

In accordance with Regulation 24(c) of the National Standards Bodies Regulations of 28 March 1998, the Task Team for

Promotive Health and Developmental Services

registered by Organising Field 09 – Health Sciences and Social Services, publishes the following Qualification and Unit Standards for public comment.

This notice contains the titles, fields, sub-fields, NQF levels, credits, and purpose of the Qualification and Unit Standards. The full Qualification and Unit Standards can be accessed via the SAQA web-site at www.saqa.org.za. Copies may also be obtained from the Directorate of Standards Setting and Development at the SAQA offices, SAQA House, 1067 Arcadia Street, Hatfield, Pretoria.

Comment on the Qualification and Unit Standards should reach SAQA at the address below and **no later than 4 May 2009**. All correspondence should be marked **Standards Setting – Task Team for Promotive Health and Developmental Services** and addressed to

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ACTING DIRECTOR: STANDARDS SETTING AND DEVELOPMENT



SOUTH AFRICAN QUALIFICATIONS AUTHORITY

QUALIFICATION:
National Certificate: Diagnostic and Procedural Coding

SAQA QUAL ID	QUALIFICATION TITLE		
66389	National Certificate: Diagnostic and Procedural Coding		
ORIGINATOR	PROVIDER		
TT - Promotive Health and Developmental Services			
QUALIFICATION TYPE	FIELD	SUBFIELD	
National Certificate	9 - Health Sciences and Social Services	Promotive Health and Developmental Services	
ABET BAND	MINIMUM CREDITS	NQF LEVEL	QUAL CLASS
Undefined	120	Level 5	Regular-Unit Stds Based

This qualification does not replace any other qualification and is not replaced by another qualification.

PURPOSE AND RATIONALE OF THE QUALIFICATION

Purpose:

The purpose of this qualification is to provide learners with a well defined knowledge of diagnostic and procedural coding and to practically apply basic to advanced professional skills in the chosen field. Learners will systematically access, critically analyse and evaluate existing knowledge in the specific field. This qualification enables learners to apply knowledge and research skills in order to create effective intervention strategies in the chosen field.

Qualifying learners will be able to:

- > Assess health records to abstract diagnosis and procedures and accurately assign ICD and procedure codes.
- > Apply the rules and conventions of ICD and procedural coding.
- > Apply the World Health Organisation and South African Coding standards, rules and guidelines when coding.
- > Demonstrate an understanding of the legal and ethical requirement when assigning a diagnostic and procedural code and its applicability to health information systems nationally and internationally.

Rationale:

Diagnostic coding (International Statistical Classification of Diseases and related health problems - ICD) and procedural coding lend themselves well to the improvement of healthcare efficiency. Accurate and standardised recording of diagnoses and procedures enables analysis of information for patient care, research, performance improvement, healthcare planning and facility management. It also enables fair reimbursement for healthcare services rendered and communicates data in a predictable, consistent and reproducible manner. Diagnostic and Procedural Coding is mandatory for all healthcare professionals. Over and above the basic generic knowledge and skills that form the foundation for all workers within the healthcare environment, each field of practice has its own specific advanced body of knowledge, skills and competencies, where the use of Diagnostic and Procedural codes are mandatory.

As ICD-10 is the national diagnostic standard in South Africa, it is essential to provide all workers in the South African healthcare environment with the opportunity for basic to advanced ICD coding knowledge and skills. The clinical coding qualification has a practice focus and also promotes healthcare worker's ability to code accurately, identify gaps in work practice, think independently and creatively and propose interventions within the chosen focus area. This qualification is also designed to enable candidates to pursue further personal and professional development and to promote life-long learning.

There is a critical skills shortage of qualified/accredited Clinical Coders especially at this time when Clinical Coding is increasingly becoming business critical to all organisations in the South African healthcare environment. This entry-level qualification provides learners access to Clinical Coding that is integral to the healthcare industry, both public and private sector. Qualifying learners will be able to be employed in specific occupations that involve Clinical Coding, data collection, supervising data collection, data editing/auditing, data capturing, elementary analysis of data and research. The Healthcare Industry and Organisation/Structures that utilise Diagnostic (ICD) and Procedural codes have projected an increase in the need for qualified individuals that are able to competently code and manage information of which Clinical Coding is a critical component. This qualification helps to contribute to a quality hierarchy of skills required to provide quality health data in the healthcare industry.

The qualification contributes to the holistic development of the learner by providing a learning pathway and further development opportunities within Clinical Coding and related fields. The competencies gained through completion of this qualification also add value to economic development in an information-driven society where monitoring and evaluation is a critical component.

RECOGNIZE PREVIOUS LEARNING?

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LEARNING ASSUMED IN PLACE

It is assumed that learners are already competent in the following:

- > Communication at NQF Level 4.
- > Mathematical literacy at NQF Level 4 or equivalent.

Recognition of Prior Learning:

Pre-assessments in both the Fundamental and Core areas of learning associated with this qualification will be conducted on learners prior to entry into the qualification. Successful demonstration of competence against all criteria contained in unit standards, against which prior learning is measured, will culminate in the award of credits to the learner. Learners' will not be required to repeat learning in those areas where prior learning is recognised and accredited.

The Recognition of Prior Learning process will also be applied where learners', who have achieved this Qualification, wish to continue their further learning.

Access to the Qualification:

Senior Certificate or Further Education and Training Certificate at NQF Level 4.

QUALIFICATION RULES

Fundamental Component:

The Fundamental Component consists of a total of 30 credits comprising unit standards in the anatomy and biophysical functioning of the human body, legal and ethical requirements and coding resources.

All Unit Standards to the value of 30 credits in the Fundamental Component are compulsory.

Core Component:

The Core Component consists of Unit Standards to the value of 60 credits, all of which are compulsory.

Elective Component:

The Elective Component consists of a list of unit standards that could be chosen by learners in various disciplines and contexts e.g. Health information management, insurance health economics Learners should choose Elective Unit Standards to the value of 30 credits from this list so as to attain a minimum of 120 credits for this qualification.

It is envisaged that specializations in either clinical auditing, health information management, or procedural could be accommodated in this qualification in the future.

EXIT LEVEL OUTCOMES

1. Assess health records to abstract diagnosis and procedures and accurately assign ICD and procedure codes.
2. Apply the rules and conventions of ICD and procedural coding.
3. Apply the World Health Organisation (WHO) and South African Coding Standards, rules and guidelines when coding.
4. Demonstrate an understanding of the legal and ethical requirements when assigning a diagnostic and procedural code and its applicability to health information systems nationally and internationally.

Critical Cross-Field Outcomes:

This qualification promotes, in particular, the following critical cross-field outcomes:

- > Identifying and solving problems in which responses display that responsible decisions using critical and creative thinking have been made when:
 - > Identifying data documentation problems and finding creative ways to obtain relevant data from healthcare providers.
- > Working effectively with others as a member of a team, group, organisation, and community during:
 - > The following of the principles as determined by the definitions.
- > Organising and managing oneself and one's activities responsibly and effectively when:
 - > Abstracting information and assigning ICD and procedure to medical records and/or medical data.
- > Collecting, analysing, organising and critically evaluating information to better understand and explain by:
 - > Evaluating clinical information and/or health records and related clinically coded sets.
- > Communicating effectively using visual, mathematical and/or language skills in the modes of oral and/or written persuasion when:
 - > Communicating effectively during the explanations of definitions/terminology used in the genitourinary system and the application thereof.

- > Compiling and presenting reports and/or clinically coded information.
- > Using science and technology effectively and critically, showing responsibility towards the environment and health of others when:
 - > Capturing and compiling data sets.
- > Demonstrating an understanding of the world as a set of related systems by recognising that problem-solving contexts do not exist in isolation when:
 - > Demonstrating an understanding and applying definitions/terminology and the implications of non-compliance.
 - > Understanding that incorrect translation of medical terminology will lead to incorrect health data collection for South Africa.

ASSOCIATED ASSESSMENT CRITERIA

Associated Assessment Criteria for Exit Level Outcome 1:

- > Different classifications are utilised when assigning a clinical code in order to abstract the appropriate code.
 - > Range: Different classifications include but are not limited to; Open classification, Closed classification, Statistical classification, Procedural classification, Diagnostic classification, Nomenclature, Family of classification.
- > The different sections found in each of the ICD and Procedural Volumes are analysed to reflect their uses for a specific purpose.
 - > Range: Volumes include and is not limited to ICD Volume 1, 2 and 3, Volumes for Procedure coding.
- > The use of the lead term and conventions in the Volumes are applied when assigning a clinical code to accurately identify specific information.
- > The structure of ICD and Procedural codes are analysed and evaluated in terms of their implications on coding and health information.
- > Clinical information /health records are analysed and reviewed to abstract the appropriate health information to assign ICD and Procedural codes accurately.
 - > Range: Clinical information includes and is not limited to health records, medical reports, and medical terminology.
- > Medical terminology is applied to reflect their meaning when assigning ICD and Procedural codes.
- > ICD and Procedural codes are accurately assigned to the clinical information.
- > The assigned ICD and Procedural codes are evaluated to ensure the quality of the data.
- > ICD and Procedural codes are accurately captured in the coding Database patient records and claims.
- > The importance of accurate clinical data and the context in which coding is assigned and captured is analysed to reflect the benefits for the medical and/or health insurance environment of South Africa.

Associated Assessment Criteria for Exit Level Outcome 2:

- > The principles of a primary and secondary diagnosis are applied and evaluated accordingly when assigning ICD and Procedural codes to clinical information to ensure the quality of data.
 - > Range: Accordingly includes but not limited to the rules and conventions of the WHO and the SA Coding Standards and guidelines.
- > The specific coding rules and conventions of ICD and Procedural coding are evaluated and applied in accordance with the rules and conventions of the WHO and the SA Coding Standards and guidelines.
- > Combination coding rules and conventions are applied and evaluated in accordance with the rules and conventions of the WHO and the SA Coding Standards and guidelines.
 - > Range: Combination coding rules include and are not limited to external cause codes, sequelae codes, coding of local infections, dagger and asterisk codes.