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| HDSS Bulletin |
| Issue 223: 28 June 2019 |

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# Global update

## Circulars

The following private hospital insurance (PHI) circulars have been released since the publication of HDSS Bulletin 222.

PHI 36/19 Hospital Declarations

PHI 37/19 July 2019 Prostheses List – Delay in Publication

PHI 38/19 Private Health Insurance (Prostheses) Rules (No. 2) 2019

Access 2019 PHI circulars at: [Private hospital circulars](http://www.health.gov.au/internet/main/publishing.nsf/Content/health-phicirculars2019-index1) <http://www.health.gov.au/internet/main/publishing.nsf/Content/health-phicirculars2019-index1>

No hospital circulars have been released since the publication of HDSS Bulletin 222.

Access hospital circulars at: [Hospital circulars](https://www2.health.vic.gov.au/about/news-and-events/hospitalcirculars) <https://www2.health.vic.gov.au/about/news-and-events/hospitalcirculars>

# Elective Surgery Information System (ESIS)

## ESIS manual for 2019–20

The ESIS manual for 2019–20 is available on the HDSS website.

# Victorian Integrated Non-Admitted Health Minimum Dataset (VINAH)

## Segment OBX (amend)

The following change has been made to the “Specifications for revisions to Victorian Integrated Non-Admitted Health minimum dataset (VINAH) for 1 July 2019” to correct and clarify the change to the OBX segment relating to Referral In Outcome.

Used in this implementation for two purposes;

* To code the following items associated with an episode;
	+ Health Condition, Other Factors Affecting Health and Malignancy Flag
* To code a Referral In Outcome and associated outcome date

|  | Name | Data type | Required | Length | Cardinality | Fixed value | Validation table |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1 | SetID | SI | Required | 1. .4
 | 1. .1
 |  |  |
| 2 | ValueType | ID | Required | 1. .3
 | 1. .1
 | CE | HL70125 |
| 3 | ObservationIdentifier | CE | Required | 1. .250
 | 1. .1
 |  |  |
| 7 | ~~ObservationDate~~ ReferencesRange\*  | ~~TS~~ ST | Required | 1. . ~~26~~ 60
 | 1. .1
 |  |  |
| 11 | ObservationResultStatus | ID | Required | 1. .1
 | 1. .1
 | F | HL70085 |

\* Referral In Outcome Date (not required for episode items)

The name for OBX.7 item has been changed to ‘Reference Ranges’ to align with the HL7 2.4 standards. It will continue to be used for the data element ‘Referral In Outcome Date’

The HL7 2.4 standards specifies item OBX.7 as datatype ST (string) with a length of 60. This will allow for a date with a length of 8 (YYYYMMDD) to be reported.

These changes will be included into the VINAH manual (15th edition, July 2019)

## VINAH 15 available in test environment

The 2019–20 annual changes have now been implemented into the **VINAH Test** context tab on the Live Healthcollect Portal at [Healthcollect Portal](https://www.healthcollect.vic.gov.au/) <https://www.healthcollect.vic.gov.au>

VINAH 15 submissions will now be accepted in the test environment.

For testing purposes, the dates are as follows:

|  |  |
| --- | --- |
| Start date for VINAH 15 | 1 May 2019 |
| Start date for additions to code sets | 1 May 2019 |
| End date for codes removed | 30 April 2019 |

Please respond with any feedback or issues to HDSS help desk <HDSS.helpdesk@dhhs.vic.gov.au>

# Victorian Admitted Episodes Dataset (VAED)

## Update to narrative of validations 450 and 451 in the VAED manual 2019–20

The following changes have been made to the narrative of validations 450 and 451 following a help desk call regarding the concern that codes listed as explanatory diagnosis codes do not always meet ACS 0002, and that there is no coding instruction to enable coders to assign these codes when they do not meet criteria for coding.

Instructions have been included to assign explanatory diagnosis code F64.9 in the absence of any other documentation to allow the episode to be accepted. The intent of the validations is to reflect the clinical accuracy of the episode regarding the reported sex and diagnoses/procedures. This is an interim solution until the national sex edits are reviewed next year.

Note that this narrative change does not impact on how the validations are triggered.

450 Code incompatible with female sex

| **Effect** | **REJECTION** |
| --- | --- |
| **Problem** | The E5 Episode Record’s Sex is Female, but the X5/Y5 Diagnosis Record has a Diagnosis or Procedure Code that is normally only relevant to a male patient in accordance with national sex edits. The patient may be undergoing a procedure to reassign or clarify gender, or the patient may have retained their biological sex specific organs that require a form of treatment.~~There is~~ No Diagnosis Code from the list below has been reported that might explain why ~~the~~ a diagnosis or procedure code ~~is recorded~~ has been assigned for a patient recorded as female.~~Such procedures can be performed to reassign or clarify gender, or on patients who have retained their biological sex specific organs, that require a form of treatment.~~**Explanatory diagnosis codes**E25.0 Congenital adrenogenital disorders associated with enzyme deficiency (includes Congenital adrenal pseudohermaphroditism)E25.8 Other adrenogenital disorders (includes Adrenal pseudohermaphroditism)E29.1 Testicular hypofunction (includes Pseudohermaphroditism, male, with 5 alpha- reductase deficiency)E34.5 Androgen resistance syndrome (includes Pseudohermaphroditism, male, with feminising testisF64.0 TranssexualismF64.2 Gender identity disorder of childhoodF64.8 Other gender identity disordersF64.9 Gender identity disorder, unspecifiedF66.0 Sexual maturation disorderF66.1 Egodystonic sexual orientationQ56.- Indeterminate sex and pseudohermaphroditismQ99.0 Chimera 46,XX/46,XY (hermaphrodite)Q99.1 46,XX true hermaphrodite |
| **Remedy** | Firstly, check Sex (E5) to ensure it is accurate. If the sex has been reported correctly, ensure that the Diagnosis Code(s) and Procedure Code(s)(X5/Y5) reported for the episode are accurate. For the episode to be accepted, one of the above explanatory diagnosis codes must also be assigned according to the documentation in the episode. In the absence of documentation of a specific diagnosis, assign F64.9 to allow the episode to be accepted. ~~amend as appropriate and re-submit the E5 and/or X5/Y5.~~ |

# Contact details

The Data Collections unit manages several Victorian health data collections including:

* Victorian Admitted Episodes Dataset (VAED)
* Victorian Emergency Minimum Dataset (VEMD)
* Elective Surgery Information System (ESIS)
* Agency Information Management System (AIMS)
* Victorian Integrated Non-Admitted Health Minimum Dataset (VINAH)
	+ F1 data collections (technical support)

The HDSS Bulletin is produced at intervals to provide:

* answers to common questions recently directed to the HDSS help desk
* communication regarding the implementation of revisions to data collection specifications, including notification of amendments to specified data collection reference tables
* feedback on selected data quality studies undertaken
	+ information on upcoming events

**Website**

[HDSS website](https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems) <https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems>

**HDSS help desk**

Enquiries regarding data collections and requests for standard reconciliation reports

Telephone (03) 9096 8595

Email HDSS help desk <HDSS.helpdesk@dhhs.vic.gov.au>

**Other data requests**

[HOSdata Victorian hospital data reports](https://bettersafercare.vic.gov.au/our-work/performance-and-safety-reporting/HOSdata) <https://bettersafercare.vic.gov.au/our-work/performance-and-safety-reporting/HOSdata >

Email HOSdata Hosdata.frontdesk@vahi.vic.gov.au

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