

HDSS Bulletin

Issue 201: 14 January 2016

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Global update

201.1 Commonwealth Government circular updates

The following circulars have been released since the publication of HDSS Bulletin 200:

| PHI circular | Subject |
|--------------|---|
| 75/15 | Amendments To August 2015 Prostheses List |
| 76/15 | Private Hospital Information |
| 77/15 | New Version (version 1.12.0.1) of Check-IT 2 Released |
| 78/15 | Prostheses List – Applications For 2016 |
| 79/15 | Payment of the 2015 Private Health Insurance Complaints Levy |
| 80/15 | Prostheses List Management System |
| 81/15 | Prostheses List February 2016 - Critical Dates |
| 82/15 | Appointment of new PLAC Chair |
| 83/15 | Prostheses List Guide and Updated Website |
| 84/15 | Changes to Private Health Insurance (Benefit Requirements) Rules 2011 |
| 85/15 | Changes to Second Tier Eligible Hospitals |

Private Health Insurance circulars are available at:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/health-phicirculars2015-index1>

To subscribe to the circulars, email your subscription details to Private Health Insurance Branch at: privatehealth@health.gov.au

201.2 Department of Health and Human Services circular updates

The following circulars have been released since the publication of HDSS Bulletin 200:

| Circular | Subject |
|----------|-------------------------|
| 5/15 | Car Parking Fees review |
| 8/15 | Prior Year Adjustment |

Hospital circulars are available at:

<http://www.health.vic.gov.au/hospitalcirculars/circ15/index.htm>

201.3 New look HealthCollect coming soon

HealthCollect is being updated to align with the corporate departmental style. All functionality will remain the same. It is expected to be implemented in early February 2016.

If you have any questions, comments or feedback regarding this change, please contact the HDSS help desk.

201.4 Postcode locality file update

An updated version of the postcode locality file, including the following combination, will be available shortly on the HDSS website.

| Postcode | Locality |
|----------|------------|
| 0839 | COOLALINGA |

201.5 Amendment to reporting guide for Advance Care Plan Alert in VAED and VINAH manuals

Additional information has been added to the reporting guide for Advance Care Plan Alert in Section 3 of the VAED and VINAH manuals. The amendments will be included in the next edition of the manuals.

Advance Care Plan Alert

Reporting guide

An advance care plan alert will be identified by an alert identifying any of the following:

- A completed Refusal of Treatment Certificate
- A formally documented advance care plan
- Other advance care planning documentation (documentation of a person's future wishes such as a written letter or advance care planning discussion record)
- **Advance Statement under the Mental Health Act (Vic) 2014**

A resuscitation plan, limitation of treatment order or goals of patient care form alone do not meet the requirements for this data item.

A substitute decision maker alert will be identified by an alert, flag or similar identifying any of the following:

- Enduring power of attorney (medical treatment)
- Enduring Power of Guardianship which includes consent to health care
- Guardian appointed by VCAT with powers to consent to health care
- Nomination in writing of a person responsible
- Identification of the 'person responsible' as per the 'person responsible hierarchy'
- **Nominated Person under the Mental Health Act (Vic) 2014**

Advance care planning: have the conversation: A strategy for Victorian health services 2014-2018 (the Strategy) www.health.vic.gov.au/acp

201.6 Campus code table update

An updated version of the campus code table, including the following new sites, will be available shortly on the HDSS website.

| Code | Name | Sector |
|------|--|---------|
| 1321 | Mercy Mental Health Ursula Frayne Centre | Public |
| 6120 | Chelsea Heights Day Procedure Centre | Private |
| 6090 | St John of God Berwick Day Oncology Centre | Private |
| 8320 | PANCH Day Surgery Centre | Private |
| 8350 | Ballarat Surgicentre | Private |
| 8250 | Casey Radiation Oncology Centre | Private |

201.7 Country of Birth reporting – non-specific codes

Country of Birth codes ending in 0 (zero) or 9 represent regions, rather than a specific country, and should rarely be reported to HDSS data collections.

Reporting of codes such as 8200 *South America, not further defined*, should only be necessary in unusual circumstances where more specific detail cannot be gathered (see also HDSS Bulletin 194, item 194.3, released 3 March 2015).

A review of VAED reporting for 2015-16 shows higher than expected incidence of Country of Birth codes 1100, 2100 and 6100: hospitals are reminded to report the most specific level of detail possible.

Report code 1101 for patients born in Australia, and code 1102 for those born on Norfolk Island. Only patients born in Australia's external territories, such as Christmas Island, should report code 1100. That is, code 1100 must *not* be used for patients who report they were born in Australia.

Similarly, code 2100 *United Kingdom, Channel Islands and Isle of Man, not further defined* should be reported only when a more specific location, identified by the following codes, cannot be elicited:

- 2102 *England*
- 2103 *Isle of Man*
- 2104 *Northern Ireland*
- 2105 *Scotland*
- 2106 *Wales*
- 2107 *Guernsey*
- 2108 *Jersey*

Likewise, code 6100 *Chinese Asia (including Mongolia), not further defined* is to be used only where a more specific location cannot be determined from the following options:

- 6101 *China (excluding Special Administrative Regions (SARs) and Taiwan)*
- 6102 *Hong Kong (Special Administrative Region of China)*
- 6103 *Macau (Special Administrative Region of China)*
- 6104 *Mongolia*
- 6105 *Taiwan*

Health services should ensure Country of Birth reference files accessed in their patient information management systems are consistent with the Country of birth and country of residence SACC codeset available on the HDSS website, <https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems>).

Sites with high rates of reporting non-specific Country of Birth codes will be contacted to review their data.

Victorian Admitted Episodes Dataset (VAED)

201.8 Addendum – Specifications for revisions to VAED for 1 July 2016

The following changes to validations were omitted from the Specifications for revisions to the VAED for 1 July 2016 document published in December 2015.

Section 8 Validation

~~477—Funding Arrangement 5, not approved for Rural Patients Initiative (removed)~~

Funding Arrangement 5 is not a valid code from 1 July 2016

351 Illegal code format (change to function only)

Change in function to not allow A as first character in the Diagnosis Codes field

201.9 VAED reconciliation reports available on request

Episode level VAED reconciliation reports are available upon request each month. The reports contain selective administrative and funding data items to enable health services to reconcile VAED. The reconciliation reports available are:

- Standard: contains episodes for all care types, includes WIES
- Palliative: contains a phase of care report for care type 8 episodes
- Sub-acute: contains additional sub-acute fields including iSNACs for care types 2, 6, 8, 9, MC and P

Please note that the department receives VAED data once a month (around the 12th) and the data provided in the reports will only reflect the data transmitted as of the monthly consolidation date (5pm, 10th of the month).

Reconciliation reports can be requested by emailing HDSS.helpdesk@dhhs.vic.gov.au with the following details:

- Campus code/s
- Type of report/s
- HealthCollect login

Reconciliation reports will be delivered to health services by HealthCollect FileShare. Existing HealthCollect users will have the 'FileShare' context added to their account. New HealthCollect accounts can be created by completing the web form located via the link on the HDSS website HealthCollect Portal User

Request <http://forms.health.vic.gov.au/TakeSurveycss.asp?SurveyID=741lm5KI9m74M>

201.10 Admission Policy update

For 2016-17 the following codes will be transferred from the NAQAL to the AAPL.

36851-00 Endoscopic administration of agent into bladder wall

36561-00 Closed biopsy of kidney

Any further updates will be notified as they are confirmed.

201.11 VAED submission compliance and the S1A form for public health services

A reminder to public health services that the deadlines for monthly VAED data submissions are outlined in the *Department of Health & Human Services policy and funding guidelines Volume 2, Chapter 3: Conditions of funding*. Financial penalties for noncompliance are also detailed in this document.

If a service is unable to report patient level data, the AIMS S1A form must be submitted by the deadline or the penalties may be applied.

If you believe you will have difficulty meeting the deadline for any month you should;

- Complete and submit aggregate data (via the AIMS S1A form) **before** the deadline has passed.
- Submit a Late Data Penalty Exemption Request, available at the HDSS website at: <https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems/data-collections/vaed>

You will require a HealthCollect log in order to access AIMS and complete the S1A. If you do not have a log in, please complete the HealthCollect Portal user request form, available here: <http://forms.health.vic.gov.au/TakeSurveycss.asp?SurveyID=741lm5KI9m74M>

Victorian Emergency Minimum Dataset (VEMD)

201.12 Addendum – Specifications for revisions to VEMD for 1 July 2016

The following changes to validations were omitted from the Specifications for revisions to VEMD for 1 July 2016 published in December 2015.

Section 6 Validation Reports and Validations

~~E207 Procedure code format invalid (removed)~~

E386 Unexpected Combination between Triage Category and Type of Visit (amended)

Effect **WARNING**

Problem A presentation with Triage Category 1 or 2 has been reported with a Type of Visit of:

2 – Return Visit Planned

8 – Pre-arranged admission – clerical, nursing, clinical

~~9 – Patient in transit~~

These combinations are unlikely and require further investigation.

E391 The Primary Diagnosis for this record requires the completion of all injury surveillance data elements

There is no change to validation E391 – included in specifications as change to function only.

Elective Surgery Information System (ESIS)

201.13 Addendum – Specifications for revisions to ESIS on 1 July 2016

The following changes were omitted from the Specifications for revisions to ESIS for 1 July 2016 published in December 2015.

Section 5 Compilation and submission

Reason for Removal codes B, U and I were omitted from the key to note on page 7.

Episode Extract Structure (amended)

| Key to Note | |
|-------------|---|
| 2 | Mandatory for Reason for Removal codes W, M, S, Y, B, I, U, P and X |

Section 6 Validation

The following change to validation was omitted.

S400 Date of Admission for awaited procedure invalid (amended)

Effect

Correction

Problem

Date of admission is invalid in that:

- (Reason For Removal is W, S, X, K, P, M, Y, B, U, or I and Date Of Admission is null) **OR**
- (Reason For Removal is Not null and not W, S, X, K, M, Y, B, U, or I N, T, R, Z, Q, F or O and Date Of Admission is not null) **OR**
- (Date Of Admission is greater than Removal Date) **OR**
- (Date Of Admission is less than Clinical Registration Date)

Remedy

Valid: A date of format DDMMCCYY that is on or before the Removal Date AND on or after the Clinical Registration Date,

Where Reason For Removal is W, S, X, K, P, M, Y, B, U, or I.

Correct Date of Admission for Awaited Procedure and resubmit.

See Section 3a Date of Admission
Reason for Removal
Removal Date

Victorian Integrated Non-Admitted Health Minimum Dataset (VINAH)

201.14 Addendum – Specifications for revisions to VINAH for 1 July 2016

Generic process (concepts): 2 episodes per case

Episode Assessment Dates and Scores

Episode Pathway Type

Definition: The nature of an event described by a date on a goal-oriented care pathway.

Value domain: Enumerated

Table identifier 990078

| Code | Descriptor |
|------|---------------------------------|
| ACPA | Episode Advance Care Plan Alert |

Reporting guide: Report this value when an advance care plan and/or substitute decision maker has been recorded.

Segment PTH – Episode Advance Care Plan Alert

| | Name | Data type | Required | Length | Cardinality | Fixed value | Validation table |
|---|------------------------|-----------|----------|---------|-------------|-------------|------------------|
| 5 | PathwayLifeCycleStatus | CE | Required | 4 0. .1 | 1. .1 | | 990050 |

| | | |
|----------------|--|---|
| BR-DAT-EPS-023 | Contact Medicare Suffix is mandatory but no value was supplied | |
| Validations | E371 | Data Element (<FieldName>) is mandatory (<Timing>) but no value was supplied. |

| | | |
|----------------|--|--|
| BR-DAT-CNT-013 | Where Contact Client Present Status is '9 - Not Applicable - Patient/Client not present', the Contact Client Present Status must be '20 - Carer(s)/Relative(s) of the patient/client only' or '31 -Patient/Client/Carer(s)/Relative(s) not present: Indirect Contact', Contact Care Phase must be '9 - Not Applicable - Patient/Client not present' or '5 - Bereavement Phase' | |
| Validations | E364 | <ContactDataElement> is not <NAClientNotPresentValue> <NAClientNotPresentMeaning> but Contact Client Present Status is '20 - Carer(s)/Relative(s) of the patient/client only' or '31 - Patient/Client/Carer(s)/Relative(s) not present: Indirect Contact' but <ContactDataElement> is <NAClientNotPresentValue> - <NAClientNotPresentMeaning>. |

The following change to the business data element timing summary was documented in error in the Specifications for revisions to VINAH for 1 July 2016 published in December 2015, and should not be removed.

~~'Episode TCP Home-Based Care Transition Date'~~

| Key Symbol | Reporting Obligation |
|------------|--|
| C12 | Either Episode TCP Bed-Based Care Transition Date or Episode TCP Home-Based Care Transition Date must be reported |

The following change was omitted from the Specifications for revisions to VINAH for 1 July 2016 published in December 2015.

| Business Data Element Timing | |
|------------------------------|--|
| DATA ELEMENT | Patient/Client Death Date Referral Out Date Episode End Date Second and Subsequent Contact Date/Time First Contact Date/Time Episode TCP Care Transition Date Episode Care Plan Documented Date Episode Patient/Client Notified of First Appt Date Episode Start Date Referral In Receipt Acknowledgement Date Referral In Received Date |
| Contact Medicare Suffix | M M |

Reported when: All Programs, not elsewhere specified
 First Contact Date/Time (Mandatory)
 Second and Subsequent Contact Date/Time (Mandatory)

Contacts

The Data Collections unit within the System Intelligence and Analytics branch manages several Victorian health data collections including:

- Victorian Admitted Episodes Dataset (VAED)
 - Includes Admitted Patient Entry & Transmission System (APET)
- 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

| | |
|---------------------------------|--|
| HDSS website | http://www.health.vic.gov.au/hdss |
| | |
| HDSS help desk | |
| Telephone | (03) 9096 8595 |
| Email VAED/VINAH/AIMS | HDSS.helpdesk@dhhs.vic.gov.au |
| Email VEMD | submit.vemd@dhhs.vic.gov.au |
| Email ESIS | ESIS.ESIS@dhhs.vic.gov.au |
| | |
| Hospital Data Front Desk | |
| Email | Hosdata.frontdesk@dhhs.vic.gov.au |

To receive this publication in an accessible format phone (03) 9096 8595, using the National Relay Service 13 36 77 if required, or email HDSS.helpdesk@dhhs.vic.gov.au

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Available at <https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems/hdss-communications>