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| Proposals for changes to VADC for 1 July 2022 and feedback |
| Annual Change Proposals 2022-23 |
| OFFICIAL |

# Purpose

* This paper is seeking feedback from the alcohol and other drug (AOD) sector regarding proposals for changes to the Victorian Alcohol and Drug Collection (VADC) for implementation on 01 July 2022.
* The proposals presented have been reviewed by the VADC Change Management Group and the VADC Change Control Group for distribution to the sector for feedback.
* This feedback will inform the recommendations for changes, made by the Change Management and Change Control Groups to the Data Custodian.
* Feedback from multiple people within your service should be collated into a single response for each proposal
* We suggest speaking with the supplier of your client management system regarding technical impacts and your program manager regarding clinical impacts.
* Please contact [VADC\_data@health.vic.gov.au](mailto:VADC_data@health.vic.gov.au) if you have any questions.

# Orientation to this document

* New elements and changes to existing data elements are highlighted in green
* Redundant values and definitions relating to existing items are ~~highlighted yellow and struck through~~.
* Comments relating only to the proposal document appear in [*square brackets and italics*].
* New validations are marked ###
* Validations to be changed are marked \* when listed as part of a data item or below a validation table.
* Anticipated changes are shown under the appropriate manual section headings.
* Refer to Appendix 1 which lists the proposals that have been withdrawn or not proceeding.

|  |  |
| --- | --- |
| **Name:** |  |
| **Job Title:** |  |
| **AOD Service Provider name:** |  |
| **CMS System used:** |  |

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# Proposal 1 – Change VADC01 to a warning validation

|  |  |
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| It is proposed to | Change the VADC01 Delete has no corresponding prior entry for reporting period validation from an error to a warning. |
| Proposed by | Mental Health and Drugs Data, VAHI, Dept of Health,  Vendor |
| Reason for proposed change | There is no direct interface between VADC and CMS so the service does not know if a deleted service event in CMS has been processed and accepted in VADC. The validation is confusing to the end users and there is no impact to reporting. |
| Data Specification change summary | Change VADC01 to a warning validation in section 6 Edit/Validation rules of *VADC Data Specification 2022-23*. No change to the description of the validation.  Update the VADC01 validation rule in *VADC compilation and submission specification 2022-23*. |
| Technical change | Yes |
| Specification change | Yes |

FEEDBACK FOR PROPOSAL 1

|  |  |
| --- | --- |
| AOD business impact and feasibility comments |  |
| Recommendation: Support to proceed or do not? |  |
| Other comments |  |

Table 5.b Data Element edit/validation rules

| ID | Database edit rule | Source | Status |
| --- | --- | --- | --- |
| VADC01 | Delete has no corresponding prior entry for reporting period | VADC Compilation & Submission manual | Client error warning |

### 9.3.1 VADC01 Delete has no corresponding prior entry for reporting period

VADC01 *~~error~~* warning checks for deletion of a record that does not exist on the VADC database.

#### Scenario

Deletion record (Delete action) has been submitted for service event ID 999. VADC01 will trigger if service event ID 999 does not exist, or has not been previously accepted onto the VADC database

#### Proposed scenario resolution

If intended to delete a record, submit correct client ID or service event ID deletion record.

OR

Ignore this validation if the deletion has been sent in error as it will not affect other accepted records.

# Proposal 2 – Change VADC05 to a warning validation

|  |  |
| --- | --- |
| It is proposed to | Change VADC05 Service event is closing but is still open in a later reporting periodfrom an error to a warning. Auto/system delete service events in later reporting periods. |
| Proposed by | Mental Health and Drugs Data, VAHI, Dept of Health  Combination of several proposals received from service providers and CMS vendors (Proposal 2 covers Proposal 10) |
| Reason for proposed change | The change is to make it easier for services to have the most recent submission of service events accepted in the VADC   * The current process to fix incorrect or missing end dates, often requires multiple submissions * The objective is to make it easier for services to submit accurate data and correct erroneous information previously supplied * Reduce the manual effort to fix VADC05 errors. |
| Data Specification change summary | Change the VADC05 Database edit rule description  From: **VADC 05 - Service event is closing but is still open in a later reporting period**  To: **VADC 05 - Service event is closing and service events removed from later reporting periods**  Change VADC05 to a warning validation and description in section 6 Edit/Validation rules of *VADC Data Specification 2022-23*  Change the VADC05 to a warning validation and add the example shown below in *VADC Compilation and submission specification 2022-23*.  Scenario 1:  insert a service event with an end date in a timeline when the service event is open in a later reporting period.  Example: Service event ID 999 was submitted as open (ie end date is null) in 032021, 042021, 052021 reporting periods.  Service event ID 999 was submitted again as closed with end date 28/3/2021 in 032021 reporting period.  Current behaviour:  VADC05 error is triggered for service event ID 999 with end date 28/3/2021 in 032021 reporting period.  Incoming record not inserted. Result: no change to database.  Proposed behaviour:   VADC05 warning is triggered, for service event ID 999 with end date 28/3/2021 in 032021 reporting period. Incoming record is inserted and instances of the record in reporting periods 042021, 052021 are auto/system deleted. The open service event in 032021 is overwritten with the closed service event. Result: database has changed. |
| Technical change | Yes |
| Specification change | Yes |

FEEDBACK FOR PROPOSAL 2

|  |  |
| --- | --- |
| AOD business impact and feasibility comments |  |
| Recommendation: Support to proceed or do not? |  |
| Other comments |  |

Table 5.b Data Element edit/validation rules

| ID | Database edit rule | Source | Status |
| --- | --- | --- | --- |
| VADC05 | Service event is closing ~~but is still~~ and ~~open~~ service events removed in a later reporting period | VADC Compilation & Submission manual | Client ~~error~~ warning |

### 9.3.5 VADC05 Service event is closing ~~but is still~~ and ~~open~~ service events removed in a later reporting period

VADC05 *~~error~~* *warning* triggers when a service event end date is reported in this submission, but there are later reporting periods where this service event is still open on the VADC database.

#### Scenario

Service event ID 999 submitted as open (end date is NULL) in 012021, 022021 and 032021 reporting periods and was accepted into the VADC database. 012021 reporting period is resubmitted with service event ID 999 and 15012021 end date. VADC05 will trigger advising service event ID 999 is still open in future reporting periods.

#### Proposed scenario resolution

~~Submit deletion records for service event ID 999 for 022021 and 032021 reporting periods.~~

~~AND~~

~~Resubmit the client and service event ID 999 with the 15012021 end date for 012021 reporting period, including all relevant events and as well as service event ID 999.~~

Service event ID 999 with end date 15/1/2021 in 012021 reporting period has been inserted.  Open service events in reporting periods 022021 and 032021 have been auto/system deleted from the VADC. The open service event in 012021 is overwritten with the closed service event. Review the service event to ensure correct details have been reported.

# Proposal 6 – Limit reportable VADC data

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| --- | --- |
| It is proposed to | Introduce concept of an annual cut-off or consolidation date.  Submissions for a reporting period earlier than the annual cut off date will not be accepted.  A proposed consolidation date is 1st January. After that date submissions for reporting periods prior to the preceding July would not be accepted.  This will require CMS vendors to support, at a minimum, VADC XML extract formats for the current financial year, and previous financial year until consolidation date to be considered VADC compliant.  Feedback sought on both the concept and the proposed date. |
| Proposed by | VAHI, Dept of Health  Vendor (proposal modified after consultation with the VADC Change Management Group) |
| Reason for proposed change | In order to reduce maintenance of multiple validation frameworks, once a financial year is closed off, no need to report on changes to previous year's data. This will enable services to focus on current financial year data completeness and quality. |
| Data Specification change summary | Add a new validation:  XML### Submission Reporting Period prior to cut off date.  Current date >01012023 and Reporting Period <072022  Add XML validation rules in *VADC Data Specification 2022-23*  Add XML validation rules in *VADC Compilation and submission specification 2022-23* |
| Technical change | Yes |
| Specification change | Yes |

FEEDBACK FOR PROPOSAL 6

|  |  |
| --- | --- |
| AOD business impact and feasibility comments |  |
| Recommendation: Support to proceed or do not? |  |
| Other comments |  |

### 6 Edit/Validation Rules

Table 5.a Data Element edit/validation rules

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| XML### | Submission Reporting Period prior to cut off date.  Current cut off date >01012023 and Reporting Period date <072022 | Reporting period is earlier than the annual cut off date.  . | VADC Compilation & Submission manual | File load fail |

### 5.1.1 Data submission timelines

Service providers must submit data to the VADC according to the following timelines:

* Submissions to the Department of Health must be made monthly
* The deadline for submission is the 15th of the month following the reporting period
* Where the 15th of the month falls on a weekend or public holiday, the deadline does not change
* The reporting period runs from the first day of the month to the last day of the month
* Resubmission of data for the same reporting period can be made to address critical errors, which caused the failed submission. However, the extract date within the XML file (DDMMYYYYHHMM) must clearly identify the most recent extract
* It is strongly recommended that all errors are corrected before resubmission
* Unless specified otherwise, extracts must be submitted sequentially one at a time, ensuring all records are fully accepted and errors corrected before the next reporting period is submitted
* Submissions to the Department of Health where the reporting period is prior to the preceding July won’t be accepted after the cut-off date of 1st of January.

# Proposal 7 – Discontinuation of Child code as an option in target population selection

|  |  |
| --- | --- |
| It is proposed to | Remove child as a permissible value in the Event-Target Population data element |
| Proposed by | Mental Health and Community Services Reporting, VAHI, Dept of Health |
| Reason for proposed change | (1) There is no concept that child and youth are two separate groups because child is reported as youth in the reports.  (2) Simplify the reporting process by removing the need to recode ‘child’ to ‘youth’  (3) We want one definition for one code where youth and child are the same, so they should be reported under one code.  (4) Consistent definition of the codes across the VADC data source and AoDTS reports. |
| Data Specification change summary | Update section 5.4.20 Event – target population and section 6 Edit/Validation rules in the *VADC Data Specification 2022-23*. The changes include:   * Remove code relating to ‘child’ in the Event-Target Population data element * Remove validation AOD63 * Update validation AOD64 where the criteria for client-date of birth has changed to >25. |
| Technical change | Yes |
| Specification change | Yes |

FEEDBACK FOR PROPOSAL 7

|  |  |
| --- | --- |
| AOD business impact and feasibility comments |  |
| Recommendation: Support to proceed or do not? |  |
| Other comments |  |

### 5.4.20 Event—target population—N

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | Specifies the target population for a service | | |
| Value domain attributes | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N | **Maximum character length** | 1 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 1 | men | |
|  | 2 | women | |
|  | 3 | parent with child | |
|  | 4 | family | |
|  | ~~5~~ | ~~child~~ | |
|  | 6 | youth | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 9 | general non-specific | |
| Data element attributes | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Conditional –  Mandatory for Treatment service events | | | | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | This should be reported for both community and residential courses and must relate to a specific funded activity E.g. Youth Outreach.  If the funding source does not target a specific population then code 9 ‘general non-specific’ should be used.  Use null for Presentation, Assessment, Support and Review Service Event Types   |  |  | | --- | --- | | Code 1 | Should be used for services that are targeted at men | | Code 2 | Should be used for services that are targeted at women | | Code 3 | Should be used for parent with a child, e.g. mother/baby | | Code 4 | Should be used where the target population is family members or significant others of a client e.g. single counselling sessions with family members | | ~~Code 5~~ | ~~Should be used where services are targeted at a child (aged <16)~~ | | Code 6 | Should be used for those services targeted at Youth populations ~~e.g. 16 – 25~~<=25, e.g. Outreach, Day Program, Outdoor Therapy | | Code 9 | Should be used for services that are not targeted at specific populations. This should be the default target population | | | |
| *Source and reference attributes* | | | |
| **Definition source** | Department of Health | | |
| **Definition source identifier** | <https://www2.health.vic.gov.au/alcohol-and-drugs/AOD-treatment-services/pathways-into-AOD-treatment/bed-vacancy-register-AOD-treatment> | | |
| **Value domain source** | Department of Health | | |
| **Value domain identifier** |  | | |
| *Relational attributes* | | | |
| **Related concepts** | Service event | | |
|  | Service stream | | |
| **Related data elements** | Event-funding source | | |
|  | Event-end date | | |
| **Edit/validation rules** | AOD0 value not in codeset for reporting period  AOD30 event type mismatch, event type is not treatment | | |
|  | AOD62 no target pop and treatment has ended | | |
|  | ~~AOD63 target pop child mismatch with date of birth~~ | | |
|  | AOD64 target pop youth mismatch with date of birth | | |
|  | AOD65 target pop female mismatch with sex at birth | | |
|  | AOD66 target pop male mismatch with sex at birth | | |
| **Other related information** |  | | |

### 6 Edit/Validation Rules

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ~~AOD63~~ | ~~Target pop. child mismatch with date of birth~~ | ~~Event-target pop.~~  ~~Client-date of birth~~ | ~~Event-target pop. = [5] AND reporting period year (YYYY) - get Year(Client-date of birth) > 16~~ | ~~DH~~ | ~~warning~~ |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| AOD64 | Target pop. youth mismatch with date of birth | Event-target pop.  Client-date of birth | Event-target pop. = [6] AND reporting period year (YYYY) - get Year(Client-date of birth) ~~<16 OR~~ >25 | DH | warning |

# Proposal 8 – Update Event - Service delivery setting and Forensic Type

|  |  |
| --- | --- |
| It is proposed to | The change proposal is to provide the ability to distinguish between clients in prison or court settings, that receive treatment from AODTS providers. |
| Proposed by | Mental Health and AOD System Management, Mental Health and Wellbeing |
| Reason for proposed change | To be able to determine the number of people referred to AOD services through the prison OR court referral pathways.  To readily access information from CMS and VADC, around how many people are being referred to AOD services from prisons. There is an increased risk for people who use substances when leaving prison. If an increased number of people can be assessed and supported before they return to the community, there is an opportunity for services to be able to reduce risk for current/potential clients in the AOD service system. |
| Data Specification change summary | Update section 5.4.16 Event-service delivery setting and section 5.4.8 Event -forensic type in *VADC Data Specification 2022-23* . The changes include:   * Have separate codes for court and prison in the permissible values list for Event-Service Delivery Setting. * Reinstate code 6(imprisonment) to the permissible values list to the Event-Forensic Type * Update Guide for use accordingly |
| Technical change | Yes |
| Specification change | Yes |

FEEDBACK FOR PROPOSAL 8

|  |  |
| --- | --- |
| AOD business impact and feasibility comments |  |
| Recommendation: Support to proceed or do not? |  |
| Other comments |  |

### 5.4.16 Event—service delivery setting—N

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | The main setting where the AODT service was provided to the client | | |
| Value domain attributes | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N | **Maximum character length** | 1 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 1 | non-residential treatment facility | |
|  | 2 | residential treatment facility | |
|  | 3 | home | |
|  | 4 | off site | |
|  | 5  6 | court~~/prison~~  prison | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 8 | other (incl. phone/internet) | |
| Data element attributes | | | |
| |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Mandatory at service event end | | | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | The main physical setting in which alcohol and other drug service is actually delivered to the client irrespective of whether or not this is the same as the usual location of the service provider, as represented by a code.  Where the service is provided over a series of appointments, at different settings, the setting where most of the service was delivered should be reported.  Only one code to be selected at the end of the alcohol and other drug service event. Agencies should report the setting in which most of the service was received by the client.  Use null when service event has not ended.   |  |  | | --- | --- | | Code 1 | This code refers to any non-residential centre that provides alcohol and other drug treatment services, including hospital outpatient services, non-government organisations and community health centres. | | Code 2 | This code refers to community-based settings in which clients reside either temporarily or long-term in a facility that is not their home or usual place of residence to receive alcohol and other drug treatment. This does not include ambulatory situations but does include therapeutic community settings. | | Code 3 | This code refers to the client's own home or usual place of residence. Excludes prison: use code 5. | | Code 4 | This code refers to an off-site environment, excluding a client's home or usual place of residence, where service is provided. An off-site environment may be any public or private location that is not covered by Codes 1-3 and excluding court/prison.  Mobile/outreach alcohol and other drug treatment service providers would usually provide treatment within this setting. | | Code 5  Code 6 | This code refers to providing the service in a Courtroom, ~~or Prison~~  ~~setting~~  This code refers to providing the service in a Prison setting | | Code 8 | This code should be used for all other settings including phone, internet, telehealth. | | | |

### 5.4.8 Event—forensic type—N[N]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | | |
| **Definition** | | Specifies the type of order or notice a client is under for an associated event | | |
| Value domain attributes | | | | |
| *Representational attributes* | | | | |
| **Representation class** | | Code | **Data type** | Number |
| **Format** | | N[N] | **Maximum character length** | 2 |
| **Permissible values** | | ***Value*** | ***Meaning*** | |
|  | | 0 | none | |
|  | | 1 | bail | |
|  | | 2 | community correction order (CCO) | |
|  | | 3 | court diversion | |
|  | | 4  6 | drug treatment order (DTO) – Drug Court  imprisonment | |
|  | | 7 | Prison release (StepOut Program) | |
|  | | 8 | parole (adult only) | |
|  | | 11 | supervision order (SO - adult only) or Interim Supervision Order (ISO) | |
|  | | 12 | Victorian police diversion | |
|  | | 13 | youth justice order | |
| **Supplementary values** | | **Value**  97 | **Meaning**  other diversion referral | |
|  | | 99 | not stated /inadequately described | |
| Data element attributes | | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Mandatory | | | | | | |
| *Collection and usage attributes* | | | | |
| **Guide for use** | | |  |  | | --- | --- | | Code 0 | The forensic type should be recorded as None if the event is for a non-forensic client. Forensic types can include Court Orders and Police notices e.g. DDAL is an example of a caution notice via Victorian Police.  Where a client is on more than one order, the reported order should be the one considered most dominant.  Should be reported as ‘99’ when client is known to be under an order, however type is unknown.  Use this code when the client has an order listed under exclusion list of Code 97 and does not have another order. | | Code 2 | A community correction order (CCO) is a flexible sentencing order served in the community. The order can be imposed by itself or in addition to imprisonment or a fine. This replaced Intensive correction orders, home detention and correction-based orders in 2012. | | Code 3 | Court diversion is a specialised program aimed at diverting minor drug offenders from the criminal justice system. Offenders who plead guilty to eligible drug charges in a Magistrates Court or a Children’s Court (Magistrates Court) can be referred by the magistrate to an AODT program as part of their order rather than having a traditional penalty like a fine or probation order imposed upon them. Court diversion includes court orders. | | Code 4 | A drug treatment order can only be ordered by the Victorian Drug Court, which is a venue of the Magistrates' Court. The DTO consists of two parts, a custodial part and a treatment and supervision part. The custodial sentence is suspended to allow for the treatment of the offender. | | Code 6  Code 7 | Client is under imprisonment or on a detention order in prison.  Excludes: Youth Detention, use Code 13.  Clients released from prison, not on parole, and enrolled in the StepOut program. | | Code 8 | Client has been released from prison and is on parole. imposed by an adult court.  Excludes parole issued by Children's Court and the youth justice center | | Code 11 | Supervision orders provide for the post-sentence supervision of serious sex offenders who pose an unacceptable risk of committing a relevant offence if a supervision order is not made and the offender is in the community, under the Serious Sex Offenders (Detention and Supervision) Act 2009.  Excludes: Detention or supervision orders for Youth, use Code 13. | | Code 12 | Client has been issued a police initiated diversion to an AODT program e.g. Caution with Cannabis, Drug Diversion program, or other Drug Diversion programs.  Includes DDAL: Client has been given a police notice and referred to Drug Diversion Appointment Line | | Code 13 | The Youth Justice service is responsible for managing community-based and custodial sentencing orders imposed by the Children's Court and youth justice center orders imposed by an adult court.  Community based orders include:   * Probation * Youth Supervision Order (YSO) * Youth Attendance Order (YAO) * Youth Control Order (YCO) * Parole * Supervised bail * Deferred sentences   Custodial sentencing orders include:   * Remand * Youth Justice Centre order * Youth Residential Centre order. | | Code 97 | Other diversion referral  **Includes:**   * Self-referral only in cases where the client meets the defining characteristics for a forensic AOD client as stated in the *Forensic AOD client definition policy 2020-21* * Fine/Fine Conversion – Community Work Order (when client has been imposed a fine, by the Magistrates' Court. This may be with or without a conviction and may be imposed by itself or in addition to another penalty. Also, use this code when the fine has been converted to community work.) * Undertakings/bond - where a charge is proved, the court may order an adjourned undertaking, which allows a person to be released into the community unsupervised for up to five years. The offender must agree to the undertaking. Standard conditions attached to an adjourned undertaking include being of good behaviour (i.e. not committing further offences) for the duration of the undertaking. The court may impose other, special conditions. If a person breaches the conditions of an adjourned undertaking, he or she may be called back to court for resentencing. * Child Protection Orders or Child Protection prohibition orders (excludes Family Reunification Orders) * Koori Court * Magistrates Court (not including the formal Court Diversion programs listed above) * County Court * Family Court * Drink and Drug Driver programs * Referral from Custodial Health Alcohol and Drug Nurse * Referral from solicitor * Victoria Police (not including DDAL) * Referral from Salvation Army Prison Chaplain.   **Excludes**:  The following clients are excluded from the forensic client definition unless they have met any of the acceptance criteria outlined in *Forensic AOD client definition policy 2020-21*   * Court orders by the Family Court of Australia including: Parenting Orders, an order made after a hearing by a judicial officer, or an order made after parties who have reached their own agreement have applied to a court for consent orders. * Clients with a Family Reunification Order. * Clients who are only on an Intervention Order (This does not include: Child Protection Orders or Child Protection Prohibitions; Court orders by the Family Court of Australia including Parenting Orders, an order made after a hearing by a judicial officer, or an order made after parties who have reached their own agreement have applied to a court for consent orders; Family violence intervention order or Interim intervention order issued against the client by a local Magistrates Court.) * Family violence intervention order a family violence intervention order or Interim intervention order issued against them by local Magistrates Court. A family violence intervention order protects a person from a family member who is using family violence * Mental Health Act orders, including Community Treatment Orders. | | | |

# Proposal 13 – Change AOD177 warning to check for consistency between reported family violence victim/survivor but no maltreatment code

|  |  |
| --- | --- |
| It is proposed to | Update the AOD177 warning validation to **check the client is registered as person of concern** and values **0 and null** are part of the test condition for maltreatment code. |
| Proposed by | Mental Health and Drugs Data, VAHI, Dept of Health,  Sector |
| Reason for proposed change | * Ensure correct values are recorded for maltreatment code and maltreatment perpetrator for clients registered as person of concern when family violence has been reported * Improve data quality when reporting maltreatment code, maltreatment perpetrator and family violence for clients registered as person of concern |
| Data Specification change summary | Update 5.4.7 Event-Family Violence and 5.4.12 Event-maltreatment perpetrator in the *VADC Data Specification 2022-23*.  Update the description and pseudo code of AOD177 warning validation in section 6 Edit/Validation Rules in *VADC Data Specification 2022-23*. Ensure the following conditions are added:   1. check if the client is registered as person of concern. Note: **Service event level checks for both** “Contact-relationship to client” and “Service stream- Activity Type != R”. 2. add values 0 and null values to the test condition for maltreatment code   Update the rule to check client is registered as person of concern for AOD180.  Current behavior  Client event level checks for both “Contact-relationship to client” and “Service stream- Activity Type != R”.  Proposed behavior  Remove the Client event level checks for both “Contact-relationship to client” and “Service stream- Activity Type != R”  Add **Service event level checks for both** “Contact-relationship to client” and “Service stream- Activity Type != R” |
| Technical change | Yes |
| Specification change | Yes |

FEEDBACK FOR PROPOSAL 13

|  |  |
| --- | --- |
| AOD business impact and feasibility comments |  |
| Recommendation: Support to proceed or do not? |  |
| Other comments |  |

### 5.4.7 Event— Family Violence —N

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | Specifies whether the client has experienced family violence as a victim survivor or is a perpetrator (person who uses family violence) | | |
| Value domain attributes | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N | **Maximum character length** | 1 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 1 | no family violence | |
|  | 2 | victim survivor of family violence | |
|  | 3 | perpetrator / person who uses family violence | |
|  | 4 | not able to be asked/identified | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 9 | not stated / inadequately described | |
| Data element attributes | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Conditional –  Mandatory for Intake and Comprehensive Assessment service events on end | | | | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | Family violence has the meaning set out in the *Family Violence Protection Act 2008* is summarised as any behaviour that occurs in family, domestic or intimate relationships that is physically or sexually abusive; emotionally or psychologically abusive; economically abusive; threatening or coercive; or is in any other way controlling that causes a person to live in fear for their safety or wellbeing or that of another person. In relation to children, family violence is also defined as behaviour by any person that causes a child to hear or witness or otherwise be exposed to the effects of the above behaviour. This definition includes violence within a broader family context, such as extended families, kinship networks and communities’  Identification of a client as a victim survivor or perpetrator (person who uses violence) will be achieved by undertaking a MARAM framework based family violence risk assessment, and in line with definitions provided in Family Violence Protection Act 2008.   |  |  | | --- | --- | | Code 2 | Victim survivor of family violence - reasons to believe there is risk that the person may be subjected to family violence’. | | Code 3 | Perpetrator / person who uses family violence - there is a risk that they may commit family violence. | |  |  | | | |
| *Source and reference attributes* | | | |
| **Definition source** | DH | | |
| **Definition source identifier** | *Family Violence Protection Act 2008* | | |
| **Value domain source** | DH | | |
| **Value domain identifier** |  | | |
| *Relational attributes* | | | |
| **Related concepts** | ~~Service event~~ Event | | |
| **Related data elements** | Event-maltreatment perpetrator  Event-maltreatment code  Event- Contact-relationship to client | | |
| **Edit/validation rules** | AOD0 value not in codeset for reporting period | | |
|  | AOD177 Maltreatment code OR Maltreatment perpetrator not recorded for person of concern where family violence recorded | | |
| **Other related information** |  | | |

### 5.4.11 Event— maltreatment code—N

|  |  |  |  |
| --- | --- | --- | --- |
| Identifying and definitional attributes | | | |
| Definition | The type of maltreatment a client has experienced as indicated by a code | | |
| Value domain attributes | | | |
| Representational attributes | | | |
| Representation class | Code | Data type | Number |
| Format | N | Maximum character length | 1 |
| Permissible values | Value | Meaning | |
|  | 0 | No maltreatment | |
|  | 1 | Neglect/Abandonment | |
|  | 2 | Physical abuse | |
|  | 3 | Sexual abuse | |
|  | 4 | Psychological abuse | |
| Supplementary values | ***Value*** | ***Meaning*** | |
|  | 5 | Other maltreatment or mixed maltreatment | |
|  | 6 | Abuse not otherwise specified | |
|  | 9 | Not stated | |
| Data element attributes | | | |
| Reporting attributes | | | |
| Reporting requirements | Conditional-  Mandatory, when service provided is related to potential client/client’s own alcohol or other drug use.  When service provided is for a family member or significant other of an alcohol or drug user, this metadata item should not be reported. | | |
| Collection and usage attributes | | | |
| Guide for use | When the client advises, or assessing clinician identifies that the client’s personal experience of maltreatment has in part, or entirely lead to their drug and alcohol use, maltreatment type must be reported. Where there are multiple forms of maltreatment, the predominant maltreatment form must be submitted. If a predominant form cannot be identified, code 5 – mixed is to be used.  Use null when service provided is for a family member or significant other of an alcohol or drug user   |  |  | | --- | --- | | Code 0 | No maltreatment or where maltreatment has been identified in past, but no longer impacting the client’s alcohol and drug use | | Code 4 | Should be used for mental and verbal abuse | | Code 5 | Mixed maltreatment forms, or other specified abuse or maltreatment e.g. financial abuse, human rights abuses | | Code 9 | Should use this code when not able to obtain this information | | | |
| Source and reference attributes | | | |
| Definition source | Department of Health | | |
| Definition source identifier |  | | |
| Value domain source | Based on International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD-10)-WHO Version for ;2016/Chapter XIX | | |
| Value domain identifier | Based on <https://icd.who.int/browse10/2019/en#/T74> | | |
| Relational attributes | | | |
| Related concepts | Event | | |
| Related data elements | Event-maltreatment perpetrator | | |
|  | Event-event type | | |
|  | Event-funding source  Event- Contact-relationship to client | | |
| Edit/validation rules | AOD0 value not in codeset for reporting period | | |
|  | AOD177 Maltreatment code OR Maltreatment perpetrator not recorded for person of concern where family violence recorded | | |
| AOD178 maltreatment with no maltreatment perpetrator | | |
| AOD179 maltreatment perpetrator and no maltreatment | | |
| AOD180 maltreatment code and client is not the person of concern | | |
| AOD181 no maltreatment code and client is the person of concern | | |
| Other related information |  | | |

### 5.4.12 Event— maltreatment perpetrator—N

|  |  |  |  |
| --- | --- | --- | --- |
| Identifying and definitional attributes | | | |
| Definition | The perpetrator of maltreatment towards the client | | |
| Value domain attributes | | | |
| Representational attributes | | | |
| Representation class | Code | Data type | Number |
| Format | N | Maximum character length | 1 |
| Permissible values | Value | Meaning | |
|  | 0 | Spouse/Domestic Partner | |
|  | 1 | Parent | |
|  | 2 | Other Family member | |
|  | 3 | Carer | |
|  | 4 | Friend/acquaintance | |
|  | 5 | Official authorities | |
|  | 6 | Person unknown to the victim | |
|  | 7 | Multiple persons unknown to the victim (gang) | |
| Supplementary values | ***Value*** | ***Meaning*** | |
|  | 8 | Other specified perpetrator | |
|  | 9 | Unspecified perpetrator | |
| Data element attributes | | | |
| Reporting attributes | | | |
| Reporting requirements | Conditional-  Mandatory when maltreatment code is NOT “no maltreatment” and when service provided is related to potential client/client’s own alcohol or other drug use.  Where multiple categories apply, report the most clinically significant. | | |
| Collection and usage attributes | | | |
| Guide for use | Report when maltreatment code is not 0 or 9 or null.  Must be null when maltreatment code is “no maltreatment” or when service provided is for a family member or significant other of an alcohol or drug user.   |  |  | | --- | --- | | Code 0 | Use this code for spouses and domestic partners including ex-partner, ex-spouse | | Code 1 | Parents including adoptive, natural, step, parents partner cohabiting. Excludes; foster parent, parent’s partner non-cohabiting | | Code 2 | Includes sister, brother, cousin, grandchild, grandparent, niece and nephew, son and daughter, step sibling, uncle and aunt | | Code 3 | Includes babysitter, foster parent, health care provider, nursing home, hostel and boarding house carer, school teacher | | Code 4 | Includes employer, employee and co-worker, family friend, neighbour, parents partner non-cohabiting | | Code 5 | Official authorities include Correctional services, Immigration personal, military personnel, police, ranger, security guard, sheriff, special constable | | Code 6 | Use this code for strangers | | Code 7 | Use this code for gangs, mobs | | Code 8 | Other specified perpetrator | | Code 9 | Unspecified perpetrator | | | |
| Source and reference attributes | | | |
| Definition source | Department of Health | | |
| Definition source identifier |  | | |
| Value domain source | Based on International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD-10)-WHO Version for 2016 | | |
| Value domain identifier | <https://icd.who.int/browse10/2019/en#/Y07> | | |
| Relational attributes | | | |
| Related concepts | Event | | |
| Related data elements | Event-maltreatment perpetrator | | |
| Edit/validation rules | AOD0 value not in codeset for reporting period | | |
|  | AOD177 Maltreatment code OR Maltreatment perpetrator not recorded for person of concern where family violence recorded | | |
|  | AOD178 maltreatment with no maltreatment perpetrator | | |
|  | AOD179 maltreatment perpetrator and no maltreatment | | |
| Other related information |  | | |
|  |  | | |

### 6 Edit/Validation Rules

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| AOD177 | Maltreatment code OR Maltreatment perpetrator not recorded for person of concern where family violence recorded  *Only applies when Report Period >= 072021* | Event – maltreatment code  Event – maltreatment perpetrator  Event – family violence  Contact-relationship to client | Event-Family Violence = 2 AND [Contact - relationship to client = 0 OR Event-service stream != (Table 3 Activity Type = R)]  AND [( Event-Maltreatment code ~~= “9”~~ IN (null,0,9) OR Event-Maltreatment Perp NOT in (0,1,2,3) )] | DH | warning |

Note: For AOD 177 - Contact-relationship to client has been added. Add **service event level checks for both** “Contact-relationship to client” and “Service stream- Activity Type != R”.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| AOD180 | Maltreatment code and client is not the person of concern  *Only applies when Report Period >= 072021* | Event –maltreatment code  Contact-relationship to client  Event-service stream | Event –maltreatment code != (0 OR null)  AND Contact-relationship to client !=0  AND Event-service stream != (Table 3 Activity Type = R) | DH | warning |

Note: For AOD180 -

Current behavior

Client event level checks for both “Contact-relationship to client” and “Service stream- Activity Type != R”.

Proposed behavior

Remove the Client event level checks for both “Contact-relationship to client” and “Service stream- Activity Type != R”.

Add **Service event level checks for both** “Contact-relationship to client” and “Service stream- Activity Type != R”.

# Proposal 15 – Add missing funding unit

|  |  |
| --- | --- |
| It is proposed to | Reinstate DTAU funding activity:  Funding source 127 - Vic State Gov-Aboriginal-specific facility rehabilitation  AND  Service stream 52 – Bridging support |
| Proposed by | Mental Health and Drugs Data, VAHI, Dept of Health,  Sector |
| Reason for proposed change | DTAU funded activity don’t exist for funding source 127 /service stream 52 combination which impacts Bunjilwarra because it cannot be recognised for DTAU episodes in the performance reports. |
| Data Specification change summary | Update Table 4 in section 4.2.5 of *VADC Data Specification 2022-23* to include DTAU funding unit against funding source 127 (Vic State Gov – Aboriginal specific facility rehabilitation) and service stream 52 (Bridging Support). |
| Technical change | Yes |
| Specification change | Yes |

FEEDBACK FOR PROPOSAL 15

|  |  |
| --- | --- |
| AOD business impact and feasibility comments |  |
| Recommendation: Support to proceed or do not? |  |
| Other comments |  |

### 

### 4.2.5 Funding source attributes

A funding source and service stream must be nominated for all service events. Different combinations of funding source and service stream relate to:

* Different funding units (COT, EOC, DTAU, PE)
* Different DTAU values due to variations in service stream model of care and/or performance monitoring requirements.

Only the combinations specified below can be used:

Funding Unit

* C: Courses of Treatment
* E: Episodes of Care
* D: Drug Treatment Activity Unit
* PE: PHN Episodes of Care
* NA: Not applicable (no funding unit, therefore [L] & [S] are optional)

Other values

* [L]: Course Length expected at service event end for this combination
* [S]: Significant goal achieved expected at service event end for this combination

Table 4 Service event funding sources and funding units

| Funding Source code |  |  |
| --- | --- | --- |
|  | 10- Residential Withdrawal | 11-Non-Residential Withdrawal | 20-Counselling | 21-Brief Intervention | 22-Ante & Post Natal Support | 30-Residential Rehabilitation | 31-Therapeutic Day Rehabilitation | 33 – Residential pre-admission engagement | 50-Care & Recovery Coordination | 51-Outreach | 52-Bridging Support | 60-Client education program | 71-Comprehensive assessment | 80-Intake | 81-Outdoor Therapy (Youth) | 82-Day Program (Youth) | 83-Follow up | 84-Supported Accommodation |
| 0 –Not funded | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |
| 1- Blocked funded - funding unit unspecified | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |
| 2- EOC Block funded |  | E[S] | E[S] | E |  |  |  |  | E[S] | E[S] |  |  | E |  |  |  |  |  |
| 3- DTAU Block funded | D | D[L] | D[L] |  |  | D | D |  | D |  |  |  | D | D |  |  |  |  |
| 100-Vic State Gov – General | D | D[L] | D[L] |  | E[S] | D | D |  | D | E[S] |  | C | D | D | E[S] | E[S] |  | E[S] |
| 102-Vic State Gov- Drug Diversion Appointment Line (DDAL) |  |  | D | D |  |  |  |  |  |  |  |  | D |  |  |  |  |  |
| 103-Vic State Gov-Aboriginal Metro Ice Partnership |  |  | E[S] |  |  |  |  |  | E[S] |  |  |  |  |  |  |  |  |  |
| 104-Vic State Gov-Pharmacotherapy Outreach |  |  | E[S] |  |  |  |  |  |  | E[S] |  |  |  |  |  |  |  |  |
| 105-Vic State Gov-Specialist Pharmacotherapy Program |  |  | E[S] |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 106-Vic State Gov-Slow Stream Pharmacotherapy |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 107-Vic State Gov-ACCHO Services-Drug Services |  |  | E[S] | E |  |  |  |  | E[S] | E[S] |  |  | E |  |  |  |  |  |
| 108-Vic State Gov-ACCHO-AOD Nurse Program |  | E[S] | E[S] | E |  |  |  |  | E[S] | E[S] |  |  | E |  |  |  |  |  |
| 109-Vic State Gov-Low Risk Offender Program |  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 111-Vic State Gov-Residential dual diagnosis |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 112-Vic State Gov-8 hour individual offender |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 113-Vic State Gov -15 hour individual offender |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 114-Vic State Gov -24 hour group offender |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 115-Vic State Gov -42 hour group offender |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 116-Vic State Gov-Small Rural Health funding |  | D[L] | D[L] | D |  |  | D |  | D | E[S] | D |  | D |  |  | E[S] |  |  |
| 117-Vic State Gov-Sub-acute withdrawal | D |  |  |  |  |  |  | D |  |  |  |  |  |  |  |  |  |  |
| 118-Vic State Gov-Three-stage withdrawal stabilisation program | D |  |  |  |  |  |  | D |  |  |  |  |  |  |  |  |  |  |
| 119-Vic State Gov-Mother/baby withdrawal program | D |  |  |  |  |  |  | D |  |  |  |  |  |  |  |  |  |  |
| 120-Vic State Gov-Youth-specific facility withdrawal | D |  |  |  |  |  |  | D |  |  | D |  |  |  |  |  |  |  |
| 121-Vic State Gov-Residential Withdrawal (general) | D |  |  |  |  |  |  | D |  |  |  |  |  |  |  |  |  |  |
| 123-Vic State Gov-6-week rehabilitation program |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 125-Vic State Gov-Family beds program |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 126-Vic State Gov-Youth-specific facility rehabilitation |  |  |  |  |  | D |  | D |  |  | D |  |  |  |  |  |  |  |
| 127-Vic State Gov-Aboriginal-specific facility rehabilitation |  |  |  |  |  | D |  | D |  |  | D |  |  |  |  |  |  |  |
| 128-Vic State Gov-Residential Rehabilitation (general) |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 129-Vic State Gov-Stabilisation model |  |  |  |  |  | D |  | D |  |  |  |  |  |  |  |  |  |  |
| 130-Vic State Gov-Bridging support- Post-residential withdrawal |  |  |  |  |  |  |  |  |  |  | D |  |  |  |  |  |  |  |
| 131-Vic State Gov-Bridging support- Post-residential rehabilitation |  |  |  |  |  |  |  |  |  |  | D |  |  |  |  |  |  |  |
| 132-Vic State Gov-Bridging support -intake |  |  |  |  |  |  |  |  |  |  | D |  |  |  |  |  |  |  |
| 133-Vic State Gov-Bridging support- assessment |  |  |  |  |  |  |  |  |  |  | D |  |  |  |  |  |  |  |
| 134-Vic State Gov-Brief intervention- intake |  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 135-Vic State Gov-Brief intervention- assessment |  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 136-Vic State Gov-Brief intervention-counselling |  |  |  | D |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 137- Vic State Youth specific  Community treatment |  | E[S] | E[S] |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 500-Commonwealth (non PHN) | E[S] | NA | E[S] | NA | NA | E[S] | NA | NA | NA | E[S] | NA | NA | NA | NA | NA | NA | NA | E[S] |
| 502- PHN North Western Melbourne |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 503- PHN Eastern Melbourne |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 504- PHN South Eastern Melbourne |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 505- PHN Gippsland |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 506-PHN Murray |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 507- PHN Western Victoria |  | PE[S] | PE[S] | PE |  |  | PE[S] |  | PE[S] | PE[S] |  | PE | PE |  | PE[S] | PE[S] |  |  |
| 999-Unknown | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |

# Proposal 16 – Change AOD140 validation to ensure at least one Drug of Concern is reported

|  |  |
| --- | --- |
| It is proposed to | Change AOD140 from a warning validation to an error validation and update the pseudo code to of AOD140 to include check for clients registered as person of concern |
| Proposed by | Mental Health and Drugs Data, VAHI, Dept of Health |
| Reason for proposed change | This validation enforces that the drug of concern must be reported upon closure of a service event where the client is the person of concern. Drug of concern is crucial information for an AOD collection and should be required |
| Data Specification change summary | Update AOD140 in section 6 Edit/Validation rules of *VADC Data Specification 2022-23*. The changes include  Update status of AOD140 to an error  Update pseudo code of AOD140 to include   1. reference to the Contact-relationship to client and Event-service stream data elements. 2. Add a new rule to the validation:   Check that the client registered is a person of concern (ie relationship to client = 0). Note: **Service event level checks for both** “Contact-relationship to client” and “Service stream- Activity Type != R”.  OR it is a residential service. Note: Client receiving residential services are registered as person of concern.  Update the rule to check client is registered as person of concern for AOD68.  Current behavior  Client event level check for “Contact-relationship to client” and Service event level check for “Service stream- Activity Type != R”.  Proposed behavior  Remove the Client event level check for “Contact-relationship to client”  Add **Service event level for both** “Contact-relationship to client” and “Service stream- Activity Type != R” |
| Technical change | Yes |
| Specification change | Yes |

FEEDBACK FOR PROPOSAL 16

|  |  |
| --- | --- |
| AOD business impact and feasibility comments |  |
| Recommendation: Support to proceed or do not? |  |
| Other comments |  |

### 6 Edit/Validation Rules

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| AOD140 | At least one Drug of concern group not reported within an Outcome measure for closed service event where the client is a person of concern | Outcome measure  Drug of concern  Event-end date  Contact-relationship to client  Event-service stream | Event-end date != null AND for each Outcome measure (count(Drug of concern) < 1) AND (ISNULL(Contact-relationship to client, 9) = 0) OR Event service stream = (Table 3 Activity Type = R)) | DH | ~~warning~~error |

Note: For AOD 140 - Contact-relationship to client has been added. Add **service event level checks for both** “Contact-relationship to client” and “Service stream- Activity Type != R”.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| AOD68 | Invalid outcome since client registered is not person of concern (self) | Outcomes-AUDIT Score  Outcomes-DUDIT Score  Outcomes-days injected last four weeks  Contact-relationship to client | Outlet service event ID != null AND Outcomes value !=98 AND  (Contact-relationship to client !=[0] AND Service stream != (Table 3 Activity Type = R) | DH | error |

Note: For AOD068 -

Current behavior

Client event level check for “Contact-relationship to client” and Service event level check for “Service stream- Activity Type != R”.

Proposed behavior

Remove the Client event level check for “Contact-relationship to client”.

Add **Service event level checks for both** “Contact-relationship to client” and “Service stream- Activity Type != R”.

# Proposal 18 – Update Guide for use to clarify that Assessment only data element is to be reported as the comprehensive assessment completion date

|  |  |
| --- | --- |
| It is proposed to | The change is to provide a specific and clear definition on the comprehensive assessment completion date. That is:  The **Assessment completed date** data element guide for use, should state that the data element refers to the client's Comprehensive Assessment Service event end date, where the comprehensive assessment occurred prior to the treatment event. If the client has received a comprehensive assessment during or after the treatment event, that date should not be reported for this element (ie put a default date of 01011900) |
| Proposed by | Mental Health and Drugs Data, VAHI, Dept of Health |
| Reason for proposed change | Improve data quality for **Assessment completed date** to align with AOD strategy and policy team requirements for counting rules and reporting of the BP3 measure: *Median wait time between assessment and commencement of treatment.* |
| Data Specification change summary | Update Guide for Use in section 5.4.1 Event-assessment completed date of *VADC Data Specification 2022-23* |
| Technical change | No |
| Specification change | Yes |

FEEDBACK FOR PROPOSAL 18

|  |  |
| --- | --- |
| AOD business impact and feasibility comments |  |
| Recommendation: Support to proceed or do not? |  |
| Other comments |  |

### 5.4.1 Event—assessment completed date—DDMMYYYY

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | The date on which a client’s Assessment was completed for a Treatment service event | | |
| Value domain attributes | | | |
| *Representational attributes* | | | |
| **Representation class** | Date | **Data type** | Date/time |
| **Format** | DDMMYYYY | **Maximum character length** | 8 |
| Data element attributes | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Conditional-  Mandatory at Treatment service event end | | | | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | Event – assessment completed date refers to the completion date of the comprehensive assessment which occurred prior to the treatment event.~~The completed end date of the client’s comprehensive Assessment for the Treatment service event being reported~~. If no comprehensive assessment has occurred for a treatment or if the client has only received comprehensive assessment after the treatment event has started, then report Event – assessment completed date as 01/01/1900.  ~~prior to treatment~~~~In the event that there is no Assessment for a client that is going through Treatment, this date will be 01/01/1900.~~  If there ~~–~~ is more than one comprehensive Assessment service event, the Event – assessment completed date will be the date of the most recent comprehensive Assessment service event. This date directly relates a client’s Treatment service event to their comprehensive Assessment service event  Use null for Presentation, Assessment, Support and Review Service Event Types. | | |
| *Source and reference attributes* | | | |
| **Definition source** | METeOR | | |
| **Definition source identifier** |  | | |
| **Value domain source** | METeOR | | |
| **Value domain identifier** | [Date DDMMYYYY - 270566](javascript:void(0);) | | |
| *Relational attributes* | | | |
| **Related concepts** | Service event | | |
| **Related data elements** |  | | |
| **Edit/validation rules** | AOD4 date must be in DDMMYYYY format | | |
|  | AOD5 date cannot be in the future | | |
|  | AOD6 date earlier than client's date of birth | | |
|  | AOD30 service event mismatch, not treatment | | |
|  | AOD41 date later than event start date | | |
| **Other related information** |  | | |

# 

# Proposal 19 – Clarification between internal and external referral

|  |  |
| --- | --- |
| It is proposed to | Update the data definition for internal referral, external referral, forensic referral and Referral OUT   * Internal referral won’t need to have referral direction (IN or OUT) for a service event. * External referral must report a referral direction (IN or OUT) for a service event. * Forensic referrals must be classified as external referral regardless if the person of concern is already receiving treatment within the service or consortium. * Referral OUT includes all referrals which generate an ACSO/COATS event ID |
| Proposed by | Mental Health and Drugs Data, VAHI, Dept of Health |
| Reason for proposed change | * This will improve consistent reporting of referral information * To align the data definitions with section 7.3 of the VADC data specification, table 14 “referrals”. |
| Data Specification change summary | Update *VADC Data Specification 2022-23* to clarify the definition of internal and external referrals in the following sections:   1. 3.2.7 Referral 2. 4.2.8 Referral 3. Table 14 Referral |
| Technical change | Yes for some client management systems  No for DH. |
| Specification change | Yes |

FEEDBACK FOR PROPOSAL 19

|  |  |
| --- | --- |
| AOD business impact and feasibility comments |  |
| Recommendation: Support to proceed or do not? |  |
| Other comments |  |

### 3.2.7 Referral

A request for review/assessment/treatment made on behalf of a client or potential client by clinician/worker at an approved service provider.

Referrals are made and received via a variety of methods including verbal, written, electronic.

Referrals can be internal or external:

* Internal referrals are those that are sent between clinicians/workers at the same AODT service provider or consortia.
* External referrals are those that are sent to or received from a clinician/worker external to the AODT service provider or consortia.

All service event activities must be reported, however the referral element group must not be reported for internal referrals.

Referrals can be ‘IN’ or ‘OUT’:

* Referral ‘IN’ - relates to those received by a service provider from another clinician or service provider.
* Referral ‘OUT’- relates to those sent by one service provider to another, for further care. This includes all referrals which generate an ACSO/COATS event ID.

### 4.2.8 Referral

No more than one referral ‘IN’ to a service event should be reported. Referrals ‘IN’ to a Service provider that do not eventuate in a Service event for a potential client or client should not be reported.

It will be assumed that client consent to share information has been obtained, for all referrals ‘OUT’. All referrals ‘OUT’ of service events should be reported, regardless of whether they are accepted or not.

An ACSO identifier should be recorded on all forensic referrals.

The referral element group for i~~I~~nternal referrals within a service -or consortium should not be reported, therefore it is possible for a reported service event to have no referral ‘IN’ or ‘OUT’.

An ACSO/COATS variation of treatment is classified as an external referral, regardless of whether the person of concern is already receiving treatment within the service or consortium. The relevant forensic referral provider type should be selected, eg Police, court, corrections Victoria, as well as the ACSO/COATS event ID, as part of referral IN record.

Review service events should have no referrals ‘IN’ (however, referrals ‘OUT’ are permissible).

Table 14 Referral

| Data element name | Type | | Mandatory | Comment |
| --- | --- | --- | --- | --- |
| Referral date | Date | | Yes | The day, month and year the referral was made or received by the service provider |
| Direction | N(1) | | Yes | Whether the referral was in or out of the service provider |
| Referral provider type | N(N) | | Yes | The provider type of the referral source, or destination |
| Referral service type | NN | | Yes | The service type of the client referral |
| ACSO identifier | N(7) | | Conditional | Unique ACSO identifier that identifies forensic referrals |
| Outlet referral identifier | N(10) | Conditional | | A numerical identifier that uniquely identifies a referral from an outlet |
| Business Rules | | | | |
| * Only one external referral IN should be reported for a service event * All external referrals out of a service event should be reported * ACSO identifier to be reported on all forensic referrals. * Only external referrals should be reported, and not internal referrals. All service event activities must be reported, however the referral element group must not be reported for internal referrals. * An ACSO/COATS variation of treatment is classified as an external referral. * Review service events should have no Referral ‘In’ | | | | |

# VADC Compilation and Submission Specifications for revisions from 1 July 2022

## Proposal 1, 2 and 6 changes

|  |
| --- |
| Change summary |
| Document release changes   * **Section 4.7 Implicit deletions** * **Section 5.1.1 Data submission timelines** * **Section 9.3.1 VADC01** * **Section 9.3.5 VADC05** |

## 4.7 Implicit deletions

Where a submission instance for a reporting period contains Insert or Update actions, it must contain all service events that were previously submitted within that reporting period. If this extract requirement is not followed, service events will be implicitly deleted from the DH VADC database.

#### Example:

Client ID 999 with service event ID 001 and 002 & and Client ID 888 with service event ID 003 and 004 submitted and accepted into the VADC database for 032021 reporting period. ~~If client ID 999 is resubmitted with service event ID 001 only, the other service event with ID 002 will be implicitly deleted.~~ If 032021 reporting period is resubmitted the following day again, but only with client ID 999 and service event ID 001: Client ID 999’s service event ID 002 will be implicitly deleted. Client ID 888 and service event IDs 003 and 004 will not be implicitly deleted.

**Note:** Only service events can be implicitly deleted. Client records cannot be implicitly deleted.

## 5.1.1 Data submission timelines

Service providers must submit data to the VADC according to the following timelines:

* Submissions to the Department of Health must be made monthly
* The deadline for submission is the 15th of the month following the reporting period
* Where the 15th of the month falls on a weekend or public holiday, the deadline does not change
* The reporting period runs from the first day of the month to the last day of the month
* Resubmission of data for the same reporting period can be made to address critical errors, which caused the failed submission. However, the extract date within the XML file (DDMMYYYYHHMM) must clearly identify the most recent extract
* It is strongly recommended that all errors are corrected before resubmission
* Unless specified otherwise, extracts must be submitted sequentially one at a time, ensuring all records are fully accepted and errors corrected before the next reporting period is submitted
* Submissions to the Department of Health where the reporting period prior to the preceding July won’t be accepted after the cut-off date of 1st of January.

## 9.3.1 VADC01 Delete has no corresponding prior entry for reporting period

VADC01 *~~error~~* warning checks for deletion of a record that does not exist on the VADC database.

#### Scenario

Deletion record (Delete action) has been submitted for service event ID 999. VADC01 will trigger if service event ID 999 does not exist, or has not been previously accepted onto the VADC database

#### Proposed scenario resolution

If intended to delete a record, submit correct client ID or service event ID deletion record.

OR

Ignore this validation if the deletion has been sent in error as it will not affect other accepted records.

## 9.3.5 VADC05 Service event is closing and service events removed in a later reporting period

VADC05 *~~error~~* *warning* triggers when a service event end date is reported in this submission, but there are later reporting periods where this service event is still open on the VADC database.

#### Scenario

Service event ID 999 submitted as open (end date is NULL) in 012021, 022021 and 032021 reporting period and was accepted into the VADC database. 012021 reporting period is resubmitted with service event ID 999 and 15012021 end date. VADC05 will trigger advising service event ID 999 is still open in future reporting periods.

#### Proposed scenario resolution

~~Submit deletion records for service event ID 999 for 022021 and 032021 reporting periods.~~

~~AND~~

~~Resubmit the client and service event ID 999 with the 15012021 end date for 012021 reporting period, including all relevant events and as well as service event ID 999.~~

Service event ID 999 with end date 15/1/2021 in 012021 reporting period has been inserted.  Open service events in reporting periods 022021 and 032021 have been auto/system deleted from the VADC. The open service event in 012021 is overwritten with the closed service event. Review the service event to ensure correct details have been reported.

# Appendix 1

## Proposals not proceeding

As part of the VADC Annual Change Process, all proposals were assessed by the VADC Change Control and Change Management Groups, and subsequently the following proposals will not proceed to the next phase in the process.

Proposal 3 - Change merge practice to handle duplicate client records (Deferred)

Proposal 4 - Changes to “Validation & Load Summary” report to provide visibility of how many clients or service events are accepted by VADC (Out-of-scope)

Proposal 5 - Earlier publishing of approved changes documents to improve testing quality assurance (Out-of-scope)

Proposal 9 - Change VADC submission logic to address the high costs involved in maintaining a historical snapshot of VADC data for each year in order to align with VADC submission/re-submission process (Deferred)

Proposal 12 - Change AOD78 warning to improve capture of Drug of Concern (Deferred)

Proposal 17 - Modify ‘sex at birth’ collection and add ‘gender diverse’ flag (Deferred)

## Proposals withdrawn

Two proposals were received and then subsequently withdrawn after discussions between the proposer and VADC Data team.

Proposal 11 - Remove mandatory reporting of maltreatment perpetrator when Maltreatment code is reported

Proposal 14 - Change AOD120 validation to restrict Youth Justice and VFTAC to Referrals In only

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