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| Victorian Integrated Non-Admitted Health Minimum Data Set (VINAH MDS)manual 2022-23 Section 8 - Validations |
| 17th edition, July 2022Version 1.0 |
| OFFICIAL |

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## Introduction

This section lists all VINAH edits. It indicates the message that will be returned for each edit.

Edit reports will indicate individual messages with rejection edits and messages that have been rejected because they were transmitted in a batch that was rejected.

## About the editing process

VINAH edits are applied in groups in the order listed below:

Pre-data validations

* + - Process validations (file)
		- File level validations (file)
		- Batch level validations (batch)
		- HL7 validations (batch)

Data validations

1. Data validations (batch)
2. Referential integrity validations (batch)

A failure of a file or batch at any stage will prevent further validation levels running for that file or batch, as appropriate.

Data validations are further subdivided into logical groupings within this document. However, failure of a validation in one of these sub-groups does not prevent other validations at the data validation level from running.

Note that process validations also include validations reported when a transmission roll-back file is submitted. A transmission roll-back file will generate an X~ edit, and is the only time an edit will be generated from the VINAH validation engine that indicates a successful situation (X001); see Section 3 - File processing directive for more information.

# Validation level: Process validations

| Validation ID | Message template | Cause | Resolution |
| --- | --- | --- | --- |
| F020 | File contains invalid data as determined by the DH data quality processes. | Contact the HDSS Helpdesk for support.BR-XMT-FIL-003 | Contact the HDSS Helpdesk for support |
|  | *BR-XMT-FIL-003* | *A submission must contain data that is of an acceptable quality as per the Department’s requirements* |
| F050 | The number of validation errors (<n>) in this file indicates the file may be corrupt or invalid | The submission file generated validation errors numbering greater 500 and consisting of more than 20% of the total number of messages in the file. The processing was halted as it is likely that there is a systemic problem throughout the file, such as a consistently missing data element or data that is out of sequence with or duplicating a previous submission. As a result, all messages in the file have been refused acceptance regardless of their validity, no data has been stored. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | *BR-XMT-FIL-003*  | *A submission must contain data that is of an acceptable quality as per the Department’s requirements* |
|  | BR-XMT-FIL-005  | *The submission must not generate a number of validations greater than 500 and consisting of more than 20% of the total number of messages in the file* |
| S000 | Unspecified system error while handling file <filename> | An error occurred in the VINAH processing system, the nature of which is unknown. | Contact the HDSS Helpdesk for support. |

| S002 | Submission file <filename> was processed successfully, but an internal VINAH process failed | The file was successfully processed, but an error occurred in a step of the VINAH processing system. | Contact the HDSS Helpdesk to address the problem and reprocess the file. In most cases if this error occurs, the file will not need to be resubmitted. However a second validation report will be sent once the problem is resolved – this report will replace the previous report. |
| --- | --- | --- | --- |
| X001 | Submission <filename> was successfully purged from the VINAH System | This message indicates that the rollback was successful. | No action is required. |
| X002 | Submission <filename> was not successfully purged – incorrect TargetEnvironment/ Filename/ SubID/Health Service /UserName/ PurgeKey combination | This message indicates that the combination of values provided in the rollback file does not properly identify a previous submission, and the rollback did not occur. | Correct the information and resubmit. |
|  | *BR-XMT-PRG-001*  | *A remote purge may only occur where a valid purge request file is transmitted* |
| X003 | Submission <filename> has already been purged after the initial load, due to the PurgeAfterLoad=True instruction on the original submission | This message indicates that the submission to be rolled back was already rolled back immediately after the original load, due to the PurgeAfterLoad processing instruction being present in the FHS segment in the original submission file. Rollback cannot occur as there is nothing to rollback. | No corrective action is possible |
|  | BR-XMT-PRG-001  | *A remote purge may only occur where a valid purge request file is transmitted* |
| X004 | Submission <filename> could not be purged as it is not the last file submitted for this health service. Only the last existing file for a health service can be purged | This message indicates that the file was not the last submission, therefore rollback could not be performed it may affect submissions that were made after the submission to be rolled back. Rollback aborted. | Obtain the purge information from the most recent file report and resubmit. |
|  | BR-XMT-PRG-002  | *Only the last unpurged file for a health service can be purged* |

Validation level: Process validations 1

# Validation level: File validations

| Validation ID | Message template | Cause | Resolution |
| --- | --- | --- | --- |
| **Validation** | **group 1** |  |  |
| F001 | Filename < filename> is not valid | The filename provided does not meet the specified naming convention. | Rename the file to meet the naming convention and resubmit. |
|  | BR-XMT-FNC-001  | *A submission filename should meet the naming standards as laid out in section 5* |
|  | BR-XMT-FNC-002  | *Submission File Names (excluding the file extension) should only contain alphanumeric characters and an optional underscore* |
|  | BR-XMT-FNC-003  | *For HL7 submission files, the file extension must be ‘.hl7’* |
|  | BR-XMT-FNC-004  | *For XML submission files, the file extension must be ‘.xml’* |
|  | BR-XMT-FNC-005  | *For Flat File submissions, the file extension must be ‘.txt'*  |
|  | BR-XMT-FNC-006 BR-XMT-FNC-007 | *A valid Organisation Identifier must form the first part of the filename**Every file submitted should be named uniquely* |
| F007 | Code ('<CodeSupplied>') for field ('File Sending Application') does not exist in code table HL70361 | File Sending Application must exist in the value domain of the code table. | Vendors will be required to request a code to be added when the appropriate code is not present. |
|  | BR-XMT-FIL-010  | *File Sending Application must exist in the value domain of the code table* |
| XML001 | XML document does not validate against schema (<schemaInfo>). Validation information as follows: <schemaError> | File does not meet XML and VINAH specifications. | Contact the HDSS Helpdesk or your software vendor for support. |
| **Validation** | **group 2** |  |  |
| F002 | A file named '<filename> ' has previously been submitted | The file being transmitted has previously been received. Each submission file should be named uniquely, regardless of if its contents were previously not accepted. | Rename the file to meet the naming conventions and resubmit. |
|  | BR-XMT-FNC-007 | *Every file submitted should be named uniquely* |
| **Validation** | **group 3** |  |  |
| F003 | File '<filename> ' is empty | The file that has been transmitted is empty/contains no data. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | *BR-XMT-FIL-001* | *A submission file must contain data* |
| **Validation group 4** |
| F005 | Illegal extended ASCII character supplied (Code <ASCIICode>) at position <Position> in file. File may only contain 7-bit ASCII characters | The file contains characters outside the scope of the 7-bit ASCII character set. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-FIL-002BR-XMT-HL7-010 | *A HL7 submission file must contain only 7-bit ASCII characters**A HL7 submission file must contain only 7-bit ASCII characters* |
| **Validation** | **group 5** |  |  |
| F010 | User ‘<UserName>’ is not authorised to transmit data for Organisation identifier ‘<OrganisationIdentifier>’ | DH has not authorised your username to submit data with this Organisation identifier in the filename. | Ensure the correct organisation identifier appears in the filename. Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-SEC-002 | *A user must be authorised to transmit data on behalf of the organisation* |
| F011 | File Header Segment Organisation Identifier ‘<OrganisationIdentifier>’ does not match ‘<OrganisationIdentifier InFileName>’ in filename | The organisation identifier in the File Header Segment must match the organisation identifier in the filename. | Ensure the correct organisation identifier appears in the filename. Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-SEC-003  | *The Organisation Identifier in the File Header Segment (FHS) must the same as the Organisation Identifier in the filename* |
| **Validation** | **group 6** |  |  |
| F012 | HL7 submission file contains more than 50,000 messages (<MessageCount>) | The submission file contains more than the allowable number of messages. | Contact your software vendor for support. |
|  | BR-XMT-FIL-006 | *A HL7 file should contain no more than 50,000 messages* |
| **`Validation** | **group 7** |  |  |
| F006 | '<FieldName>' is mandatory but no value has been supplied | File must contain file reference period end date and File sending application. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-FIL-009 | *A value must be provided for file data elements defined as mandatory* |
| F013 | Submission file is larger than 25MB (<FileSize>) | The submission file is larger than the allowable size. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-FIL-007 | *The size of a submission file should be no greater than 25MB* |
| F014 | File Reference Period End Date is after the Message Date/Time | The end of the reference period of data included in the file is after the date the file was created. | Contact your software vendor for support. |
|  | *BR-XMT-FIL-008* | *The File Reference Period End Date must not be greater than the Batch Message Date/Time* |
| F015 | VINAH version <VINAH\_version> is not a valid version for the period reported in this submission. | The VINAH Version used in the submission does not correspond with the period of data being reported. | Report using a more recent VINAH version. |
|  | BR-XMT-FIL-011 | *VINAH version must be valid for the period of data submitted.* |

# Validation level: HL7 validations

| Validation ID | Message template | Cause | Resolution |
| --- | --- | --- | --- |
| **Validation**  | **group 1** |  |  |
| HL7001 | File does not contain exactly 1 FHS segment, file contains <n> FHS segments | File does not meet HL7 and VINAH specifications. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-HL7-002 | *A HL7 submission file must contain exactly one File Header Segment (FHS)* |
| **Validation** | **group2** |  |  |
| HL7002 | File does not contain exactly 1 FTS segment, file contains <n> FTS segments | File does not meet HL7 and VINAH specifications. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-HL7-003 | *A HL7 submission file must contain exactly one File Trailer Segment (FTS)* |
| **Validation** | **group 3** |  |  |
| HL7003 | First line in file is not an FHS segment <FirstLine> | File does not meet HL7 and VINAH specifications. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-HL7-001 | *The first line in a HL7 file must be an FHS segment* |
| **Validation** | **group 4** |  |  |
| HL7004 | File does not have at least one BHS segment | File does not meet HL7 and VINAH specifications. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-HL7-005 | *A HL7 submission file must contain at least one batch* |
| **Validation** | **group 5** |  |  |
| HL7005 | File does not have at least one BTS segment | File does not meet HL7 and VINAH specifications. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-HL7-006 | *A HL7 file must contain an equal number of BHS and BTS segments* |
| **Validation** | **group 6** |  |  |
| HL7006 | File does not have an equal number of BHS/BTS segments: <n1> BHS segments, <n2> BTS segments | File does not meet HL7 and VINAH specifications. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-HL7-005BR-XMT-HL7-006  | *File does not have at least one BTS segment* *File does not have an equal number of BHS/BTS segments: <n1> BHS Segments, <n2> BTS Segments* |
| **Validation** | **group 7** |  |  |
| HL7007 | MSH segment is not >= BHS segments: <n1> MSH segments, <n2> BHS segments | File does not meet HL7 and VINAH specifications. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-HL7-007 | *A HL7 batch must contain at least one message* |

# Validation level: Batch integrity

| Validation ID | Message template | Cause | Resolution |
| --- | --- | --- | --- |
| **Validation**  | **group 1** |  |  |
| B004 | Batch Control Identifier (<BatchControlID>) has been used previously (<PreviousSubmissionInfo>) | The Batch Control ID being transmitted has previously been received. Each Batch Control ID should be unique, regardless of if its contents were previously not accepted. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-RNT-005 | *Batch Control Identifiers must be unique across all submissions over time within an organisation* |
| B010 | User ‘<Username>’ is not authorised to transmit data for Organisation Identifier ‘<OrganisationIdentifier>’ | DH has not authorised your username to submit data with this Organisation Identifier in the Batch Header Segment. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-SEC-002 | *A user must be authorized to transmit data on behalf of an organisation* |
| E001 | Data element '<FieldName>' is mandatory but no value has been supplied. | A field that is required to have a value in this Program/Stream was empty. Consult with Section 3 of this manual to determine if a field needs to be populated. | Ensure there is a valid value in the relevant field in your system. If the value seems correct, or you do not have access to the code list, contact your software vendor for support. |
|  | BR-DEL-DEF-003 | *A value must be provided for data elements defined as mandatory* |
|  |  |  |
| E002 | Data Element '<FieldName>' is mandatory for this Program/Stream <Program/Stream>, but no value was supplied | A field that is required to have a value in this Program/Stream was empty. Consult with Section 3 of this manual to determine if a field needs to be populated. | Ensure there is a valid value in the relevant field in your system. If the value seems correct, or you do not have access to the code list, contact your software vendor for support. |
|  | BR-DEL-DEF-003 | *A value must be provided for data elements defined as mandatory* |
|  | BR-DEL-DEF-007 | *A data element should be reported according the requirements of the program/stream it relates to* |
| E003 | Data Element '<FieldName>' cannot have a value in this Program/Stream <Program/Stream> | A field that is not relevant to Program/Stream has a value. Consult with Section 3 of this manual to determine if a field needs to be populated. | Ensure there is a valid value in the relevant field in your system. If the value seems correct, or you do not have access to the code list, contact your software vendor for support. |
|  | BR-DEL-DEF-008 | *A data element that is not applicable within a program/stream must not have a value* |
| E007 | Message Date/Time (<MessageDateTime>) is after the Date of Submission (<SubmissionDate>) | Message Date/Time cannot be after the date of submission that is, the date and time uploaded to the HealthCollect Portal. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-FIL-004 | *The Message Date/Time must be less than or equal to the Date of Submission* |
| E008 | Date (<Value>) in field ‘<FieldName>’ is after the Message Date/Time (<MessageDateTime>) | All dates within VINAH must be before the message date and time of the message in which they are transmitted. | Ensure that the date (and time) is correct and resubmit. Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-DEL-DEF-009 | *A data element that reflects the date of an event that has previously occurred must be before the Message Date/Time* |
| E010 | Message Organisation Identifier ‘<OrganisationIdentifier>’ does not match Batch Organisation Identifier ‘<OrganisationIdentifierInFileName> | The Organisation Identifier in the Message Header Segment must match the Organisation Identifier in the Batch Header. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-SEC-004 | *The Organisation Identifier in the Message Header Segment (MSH) must match the Organisation Identifier in Batch Header Segment (BHS)* |
| E011 | Invalid layout for field '<FieldName>' – value supplied '(<val>)' does not meet the layout requirements for this element (<Layout>) | The layout of the supplied value for the field does not meet the layout requirements for this element. Consult with Section 3 of this manual to determine the correct layout of the data for this field. | Ensure the layout in the relevant field is correct in your system. If the layout seems correct, or you do not have access to the formatting, contact your software vendor for support. |
|  | BR-DEL-DEF-004 | *A value provided for a data element must meet its data type and layout requirements* |
| E012 | Data Element ‘<DataElement>’ has been repeated a number of times (<Reps>) that is outside the allowable range for this data element (Min=<Min>, Max=<Max>) | Values in some fields can be repeated, but a field was repeated more than the allowable limit, or less than the required amount. | Ensure the values submitted are correct and resubmit. Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-DEL-DEF-005 | *A data element that can repeat should be repeated within the bounds of its definition* |
| E013 | Code (‘CodeSupplied>’) for Data Element ‘<FieldName>’ is for emergency use – only to be used under the direction of the department |  Submitting organisation is not approved to report this code | Contact the HDSS Helpdesk or your software vendor for support |
|  | BR-DEL-DEF-011 | *Data element values should be reported according to the requirements of the department at the time of reporting* |
|  | BR-DAT-EPS-003  | *Episode must have a Completion of Proposed Plan of Treatment only if it has an Episode End Date* |
| E024 | <FieldName1> cannot be reported without <a/an> <FieldName2> | Values are reported for related fields, when there is a requirement for them to be reported at the same time | Contact the HDSS Helpdesk or your software vendor for support. |
|  | *BR-DAT-EPS-031* | *Episode End Date cannot be reported without a Referral In End Date* |
|  | *BR-DAT-RIN-015* | *Referral In End Date cannot be reported without an Episode End Date* |
| E051 | Cannot insert record, same Primary Key for data structure '<structure>' already exists (<conflict\_location>). Key fields: <pk\_expanded\_val> | A valid message was received, but its action (insert) would duplicate a previous record sent earlier in the file, or in a previous transmission. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-RNT-001 | *A message to insert a record cannot be sent again once the record has been accepted; rather an update message should be used* |
| E052 | A '<pk\_structure>' message (<hl7\_message>) has been sent containing a reference to a "<fk\_structure>" record that has not been previously received and accepted. Key fields: <fk\_expanded> | A valid message was received, but its action (insert) would duplicate a previous record sent earlier in the file, or in a previous transmission. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-RNT-003 | *Where a message refers to other records, those records must have previously been sent and accepted* |
| E061 | A '<pk\_structure>' message (<hl7\_message\_type>) was sent to either update or delete a record that has not been previously received and accepted. Key fields: <key\_expanded> | An update or delete record is trying to affect a record that does not exist earlier in the file, or in a previous transmission. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-RNT-002 | *An update or delete message can only be sent where an insert message has been previously accepted* |
|  | BR-XMT-RNT-003 | *Where a message refers to other records, those records must have previously been sent and accepted* |
| E062 | A '<pk\_structure>' update message (<hl7\_message>) has been sent containing <static\_field> value (<new\_val>) that has changed from its original value (<old\_val>). This field is not allowed to change via an update. | The field in question must remain the same value after its initial creation. Attempts to change it will fail. To change the value if it is in error, send delete message for it and then insert a message to re-create it. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-DAT-EPS-012 | *An Episode Program/Stream cannot change once it has been submitted* |
|  | BR-DEL-DEF-006 | *A data element must not be changed once it has been reported if its definition dictates as such* |
| HL7010 | Invalid Message Type <MessageType> | Message type is not valid. Ensure that the message type includes an underscore (e.g. PPP\_PCB instead of PPPPCB). Message type may be a valid HL7 message, but be outside the scope of VINAH. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-HL7-004 | *A HL7 message must be of a type as defined in Section 5* |
| HL7011 | Message Control Identifier <MCID> has already been allocated to a previous message | Message control identifiers must be globally unique across extracts at a Health Service. This includes for records that previously had errors. | Contact the HDSS Helpdesk or your software vendor for support. |
|  | BR-XMT-RNT-004 | *Message Control Identifiers must be unique across all submissions over time within an organisation* |
| **Validation** | **group 3** |  |  |
| E159 | Code (<CodeSupplied>) for Data Element (‘<FieldName>’) is not valid as at the Contact Date | Patient/Client data elements must be valid as of the Contact Date/Time. | Check the code values and resubmit. |
|  | BR-DAT-CNT-021 | *Code values reported for Patients/Clients must be valid as at the Contact Date* |

#

# Validation level: Business rule

| Validation ID | Message template | Cause | Resolution |
| --- | --- | --- | --- |
| **Validation**  | **group 1** |  |  |
| E004 | Code (‘<CodeSupplied>’) for Data Element ‘<FieldName>’ does not exist in code table <CodeTable> | Data elements are restricted to the value domain of their defined code table. | Check that the values of the corresponding data elements are correct for the period of time reported and resubmit. |
|  | BR-DEL-DEF-002 | *The value of a data element must be within its value domain or exist in the code table.* |
| E005 | Code ('<CodeSupplied>') for Data Element '<FieldName>' is in code table <CodeTable> but is not valid for this Program/Stream <ProgramStream> | A value that was supplied in the field exists in the code table, but is not valid for this Program/Stream. Consult Section 3 of this manual to determine the correct value with which to populate the field. | Ensure there is a valid value in the relevant field in your system. If the value seems correct, or you do not have access to the code list, contact your software vendor for support. |
|  | BR-DEL-DEF-002 | *The value of a data element must be within its value domain or exist in the code table.* |
|  | BR-DEL-DEF-007 | *A data element should be reported according the requirements of the program/stream it relates to* |
| E015 | Data Element '<FieldName>' is mandatory at this point in time (<TimingInfo>), but no value was supplied | Data elements are reported as a result of certain events occurring | Ensure there is a valid value in the relevant field in your system. |
|  | BR-DEL-DEF-023BR-DAT-EPS-027 | *A value must be provided for data elements defined mandatory**When an Episode has an End Date it must have an Episode End Reason* |
| E016 | The field '<FieldName>'(<HL7 Field>) is mandatory for this Program/Stream <Program/ Stream> at this point in time (<Timing>), but no value was supplied  | A field that is required to have a value at a point in time was empty. Consult with Section 3 of this manual to determine if and when a field needs to be populated. | Ensure there is a valid value in the relevant field in your system. If the value seems correct, or you do not have access to the code list, contact your software vendor for support. |
|  | BR-DAT-CLI-005 | *Where a Date of Death is reported, a Date of Death Accuracy Code and Place of Death must be provided* |
|  | BR-DAT-CLI-011 | *Where a Patient/Client has had a contact, demographic data must be complete* |
|  | BR-DAT-CLI-012 | *Where an episode has an end date and Episode Proposed Treatment Plan Completion = ’27’, Patient/Client Death Date is mandatory* |
|  | BR-DAT-CNT-001 | *Patient/Client demographic data must be complete at the time of the first reported Contact* |
|  | BR-DAT-CNT-008 | *For Palliative Care, the Episode Malignancy Flag must be provided at the time of the first contact* |
|  | BR-DAT-EPS-009 | *For Palliative Care, the Episode Malignancy Flag must be provided if the episode has had a contact* |
|  | BR-DAT-EPS-015 | *For HBPCCT Programs/Streams, when an Episode has an End Date it must have an Episode First Consultancy Flag* |
|  | BR-DAT-EPS-019 | *When an episode has an end date, Episode Proposed Treatment Plan Completion must be completed* |
|  |  |  |
|  | BR-DAT-EPS-029 | *When a Referral has an end date, Episode End Date must be reported* |
|  | BR-DEL-DEF-003 | *A value must be provided for data elements defined as mandatory* |
|  | BR-DEL-DEF-007BR-DAT-RIN-014 | *A data element should be reported according to the requirements of the program/stream it relates to**A Referral In Receipt Acknowledgement Date must be provided when there is an episode* |
| E017 | The field '<FieldName>'(<HL7 Field>) cannot have a value before this point in time (<Timing>) | A field that is only relevant at a certain point in time has a value before that event has occurred. | Correct the information and resubmit. |
|  | BR-DAT-EPS-003 | *Episode must have a Completion of Proposed Plan of Treatment only if it has an Episode End Date* |
| E020 | <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) | The order of certain events is not valid.  | Correct the information and resubmit. |
|  | BR-DAT-CLI-008 | *Date of Death must not be before the Date of Birth* |
|  | BR-DAT-CLI-009 | *Date of Birth must not be after the Episode Start Date (not mandatory for Palliative Care)* |
|  | BR-DAT-CNT-002 | *Episode Start Date must not be after the Contact Date/Time* |
|  | BR-DAT-CNT-003BR-DAT-CNT-028 | *Contact Date/Time must not be after the Episode End Date**Contact Start Date must not be after the Contact End Date* |
|  | BR-DAT-EPS-001 | *Episode Start Date must not be before Date of Birth* |
|  | BR-DAT-EPS-002 | *Episode Start Date must not be after the Episode End Date* |
|  | BR-DAT-EPS-005 | *Episode Start Date must not be before the Referral In Received Date* |
|  | BR-DAT-EPS-007 | *Episode Start Date must be on or before the Contact Date/Time of any contacts within the Episode* |
|  | BR-DAT-EPS-008 | *Episode End Date must be on or after the Contact Date/Time of any contacts within the Episode* |
|  | BR-DAT-EPS-010 | *Episode Start Date must be before or on the Referral Out Date of any referrals that resulted from the Episode* |
|  | BR-DAT-EPS-011 | *Episode End Date must not be before the Referral Out Date of any referrals that resulted from the Episode* |
|  | BR-DAT-RIN-002 | *Referral In Received Date must be before or on the Episode Start Date of any episodes that resulted from the referral* |
|  | BR-DAT-RIN-003 | *Referral In Received Date must not be after Referral In Receipt Acknowledgement Date* |
|  | BR-DAT-RIN-006 | *Referral In Clinical Referral Date must not be after Referral In Received Date* |
|  | *BR-DAT-RIN-011* BR-DAT-RIN-012 | *Referral In Outcome Date must be on or after the Referral In Received Date**Referral End Date is before Episode End Date* |
|  | BR-DAT-RIN-013 | *Referral In Outcome Date must be on or after the Referral In Received Date* |
|  | BR-DAT-RIN-015 | *Referral In End Date cannot be reported without an Episode End Date* |
|  | BR-DAT-RIN-016 | *Referral In End Date cannot be before the Episode End Date of any episodes that resulted from the referral* |
|  | BR-DAT-ROU-001 | *Episode Start Date must not be after Referral Out Date* |
|  | BR-DAT-ROU-002 | *Referral Out Date must not be after Episode End Date* |
|  | BR-DEL-DEF-010 | *All related events must be reported in the correct sequence* |
| E021 | <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) <FieldName> (<Date>) | The order of certain events is not valid. | Correct the information and resubmit. |
|  | BR-DAT-EPS-016 | *Episode First Appointment Booked Date cannot be before the Patient/Client Notified of First Appointment Date* |
|  | BR-DAT-EPS-017 | *Episode First Appointment Booked Date cannot be before Episode Start Date/Time* |
| E022 | Episode Ended on <Date> and the Submission Date (<Date>) is after <FinYear> Consolidation Date <Date> | An episode update was submitted for a closed episode after the consolidation date of the financial year in which the episode was ended | The episode cannot be updated as the financial year has now closed. |
|  | *BR-DAT-EPS-024* | *An episode update cannot be submitted after the consolidation date of the financial year in which they fall* |
| E022 | Related Episode Ended on <Date> and the Submission Date (<Date>) is after <FinYear> Consolidation Date <Date> | A contact insert/update was submitted for a closed episode after the consolidation date of the financial year in which the episode was ended. | The contact update/insert cannot be performed as the financial year has now closed. |
|  | BR-DAT-EPS-024  | *A contact related to a closed episode must be submitted before the consolidation date of the financial year in which the Episode End Date falls* |
| E022 | DateFieldDescription><DateFieldValue> and the submission Date (<Date>)>) is after <FinYear> Consolidation Date <Date> | A referral insert was submitted after the consolidation date of the financial year | The referral in insert cannot be performed as the financial year has now closed |
|  | BR-DAT-RIN-009 | *A Referral In insert cannot be accepted if submitted after the consolidation date of the financial year in which they fall* |
| E022 | Related Episode Ended on <Date> and the Submission Date (<Date>) is after <FinYear> Consolidation Date <Date> | A referral out insert/update was submitted for a closed episode after the consolidation date of the financial year in which the episode was ended. | The contact update/insert cannot be performed as the financial year has now closed. |
|  | BR-DAT-ROU-004 | *An insert/update to a Referral Out for a closed episode cannot be accepted if submitted before the consolidation date of the financial year in which the Episode End Date falls* |
| E023 | The time part of the date/time field Contact End Date/Time and Contact Start Date/Time is mandatory |  A value must be provided for data elements defined as mandatory | Correct the information and resubmit |
|  | BR-DEL-DEF-003 | The time part of the date/time field Contact End Date/Time and Contact Start Date/Time is mandatoryThe time part of the date/time field (<fieldname>) is mandatory but no value was supplied |
| E025 | The time value (<FieldTime>) of the date/time field (<FieldName>) is not validBR-DAT-CNT-031 | The time value (12:00am) reported Correct the information Is not valid and resubmit*The time value (12:00am) of the date/time field (20200801) is not valid*  |
| E151 | Client Age (<n>) is greater than 120 years | It is most likely that an error was made during the data entry for this patient’s/client’s date of birth. | Check that the date of birth for the patient/client is correct, and resubmit the record. |
|  | BR-DAT-CLI-001 | *The reported date of birth a client must not result in an age of greater than 120 years* |
| E152 | Carer Availability is 'Has a carer' (<ca>) but Carer Residency Status (<crs>) is not compatible | The Carer Availability and Carer Residency Status values must be a valid combination. | Check that the values of the corresponding data elements are correct, and resubmit the record. |
|  | BR-DAT-CLI-002 | *Patient/Client Carer Residency Status must be compatible with Patient Client/Carer Availability* |
| E153 | Invalid combination of Postcode (<value1>) and Locality (<value2>) | The postcode and locality values must be a valid combination. | Check that the values of the corresponding data elements are correct, and resubmit. Please note this error may be triggered when either field is missing or invalid. |
|  | BR-DAT-CLI-003 | *Patient Client/Locality and Patient/Client Postcode must be a valid combination* |
|  | BR-DAT-CLI-004 | *Where the Patient Client/Locality and Patient/Client Postcode are a location within Australia they must represent a residential location* |
| E155 | Carer Relationship (<val>) has a value but Carer Availability (<val>) is not set to '1 – Has a Carer' | Carer Relationship has a value but Carer Availability is not set to '1 – Has a Carer’. | Check that the values of the corresponding data elements are correct, and resubmit. Please note this error may be triggered when either field is missing or invalid. |
|  | BR-DAT-CLI-006 | *Where Patient/Client Carer Relationship has a value, Patient/Client Carer Availability must be set to '1 – Has a Carer'* |
| E156 | Carer Residency Status (<val>) has no value but Carer Availability (<val>) is set to '1 – Has a Carer' | Carer Residency Status has no value but Carer Availability is set to '1 – Has a Carer'. | Check that the values of the corresponding data elements are correct, and resubmit. Please note this error may be triggered when either field is missing or invalid. |
|  | BR-DAT-CLI-002 | *Patient/Client Carer Residency Status must be compatible with Patient Client/Carer Availability* |
|  | BR-DAT-CLI-007 | *Where Patient/Client Carer Residency Status does not have value, Patient/Client Carer Availability must not be '1 – Has a Carer'* |
| E204 | New open episode overlaps existing episode (<ep\_details>) for the patient (<id\_vals>) with the same program/stream (<program\_stream>) | Two open Palliative Care episodes exist for the same patient. | Check that the values of the corresponding data elements are correct for the period of time reported and resubmit. |
|  | BR-DAT-EPS-018 | *Episode overlaps other episode in Palliative Care* |
| E206 | Open episode sent for a referral with outcome specified as not accepted (<ref\_details>)  | A message was sent to insert or update an episode. The Referral Outcome of the inbound referral associated with this episode was specified as 'not accepted'. | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-RIN-001 | *A referral that results in an episode must have an outcome of ‘Accepted’* |
| E207 | Referral In Outcome is 010 – Referral accepted – New appointment’ or ‘020 – Referral accepted – Review appointment’ or ‘1 – Referral accepted’ or ‘3 – Referral accepted - Review appointment’ but no episodes have been reported | A message was sent to insert or update a Specialist Clinics (Outpatients) referral with an ‘Accepted’ outcome but no episodes have been reported. | Ensure that any Episodes relating to the Referral are submitted. |
|  | BR-DAT-RIN-007  | *When a Referral In Outcome has the value ‘010 – Referral accepted – New appointment’ or ‘020 – Referral accepted – Review appointment’ or ‘1 – Referral accepted’ or ‘3 – Referral accepted - Review appointment’, an episode must be reported* |
| E254 | Patient/client does not have a Main Carer's Relationship to the Patient but the Carer Availability is '1 - Has a carer' and Episode Program/Stream is Palliative Care | Patient/client must have a Main Carer’s Relationship to the Patient when Carer Availability is ‘1-Has a Carer’ and Episode Program/Stream is ’41- Palliative Care’. | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-EPS-004 | *Where Episode Program/Stream is Palliative Care, the patient/client must have a Main Carer's Relationship to the Patient when Carer Availability is ‘1 – Has a carer’* |
| E258 | This Organisation (<OrganisationIdentifier>) is not approved to report Episodes under this program/stream (<program\_stream>) | The organisation identified for this message is not approved to report Episodes to VINAH under this program stream. | If your organisation should legitimately be approved to report episodes under this program stream, contact the HDSS Helpdesk for support. Otherwise, contact your software vendor. |
|  | BR-XMT-SEC-005 | *An Organisation should only report data for a particular Program/Stream where they provide the relevant services and have been approved to report data for the Program/Stream by the Department* |
| E259 | The Organisation ‘<OrganisationIdentifier>’ is not approved to report Contacts under this program/stream (<program\_stream>) | The organisation identified for this message is not approved to report Episodes to VINAH under this program stream. | If your organisation should legitimately be approved to report episodes under this program stream, contact the HDSS Helpdesk for support. Otherwise, contact your software vendor. |
|  | BR-XMT-SEC-005 | *An Organisation should only report data for a particular Program/Stream where they provide the relevant services and have been approved to report data for the Program/Stream by the Department* |
| E265 | This Organisation (<OrganisationIdentifier>) is not approved to report Episodes under this campus (<Episode CampusIdentifier>) | The organisation identified for this message is not approved to report Episodes to VINAH under this Campus Identifier. | If your organisation should legitimately be approved to report episodes under this program stream, contact the HDSS Helpdesk for support. Otherwise, contact your software vendor. |
|  | BR-XMT-SEC-006 | *An Organisation can only report data for campuses belonging to the service* |
| E259 | The Organisation ‘<OrganisationIdentifier>’ is not approved to report Contacts under this program/stream (<program\_stream>) | The organisation identified for this message is not approved to report Episodes to VINAH under this program stream. | If your organisation should legitimately be approved to report episodes under this program stream, contact the HDSS Helpdesk for support. Otherwise, contact your software vendor. |
|  | BR-XMT-SEC-005 | *An Organisation should only report data for a particular Program/Stream where they provide the relevant services and have been approved to report data for the Program/Stream by the Department* |
| E265 | This Organisation (<OrganisationIdentifier>) is not approved to report Episodes under this campus (<Episode CampusIdentifier>) | The organisation identified for this message is not approved to report Episodes to VINAH under this Campus Identifier. | If your organisation should legitimately be approved to report episodes under this program stream, contact the HDSS Helpdesk for support. Otherwise, contact your software vendor. |
|  | BR-XMT-SEC-006 | *An Organisation can only report data for campuses belonging to the service* |
| E267 | Referral In Program/Stream is (<ref\_in program/stream>) but <Episode Program/Stream is (<episode program/stream>) | Referral In Program/Stream is FCP but Episode Program/Stream is not FCP | Contact HDSS Helpdesk or your software vendor for support |
|  | BR-DAT\_EPS\_032 | *When the Referral in Program/Stream is FCP the Episode Program/Stream must also be FCP* |
| E356 | Contact is Compensable (<AccountClass>) but no client identifier relevant to the agency is provided | Where an Account Class of VX (DVA), TA (TAC) or WC (VWA) is specified, a relevant and correct identifier for that organisation (e.g. DVA file number) must be provided. | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-004 | *Where the Contact Account Class is compensable (VX, TA, WC), a client identifier relevant to the compensable agency should be provided* |
| E357 | A Patient/Client's Legal Family Name or Given Names are provided but Account Class is not VX (DVA) or TA (TAC) or WC (VWA) | A Patient’s/Client’s Legal Family Name and Given names must only be supplied where the Contact Account Class is one of the mentioned compensable types. | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-006 | *A Patient/Client's Legal Family Name or Given Names should only be provided where Account Class is compensable* |
| E358 | Account Class is VX (DVA) or TA (TAC) or WC (VWA), but the Patient's Legal Name or Given Names are not provided | A Patient’s/Client’s legal and Given names must be supplied where the Contact Account Class is one of the mentioned compensable types. | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-005 | *A Patient/Client's Legal Family Name or Given Names must be provided where Account Class is compensable* |
|  E360 | Contact Preferred Language is ‘1201-English’ but Contact/Client Service Event Interpreter Required (<val>) is not ‘2 – Interpreter Not Needed’ | Contact/Client Service Event Interpreter Required must be ‘2– Interpreter not needed’ if Contact Preferred Language is ‘1201-English’ | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-019 | *Where the Contact Preferred Language is '1201-English', the Contact Interpreter Required must be '2-Interpreter not needed'* |
| E361 | Contact Date (<ccsedate>) is after Date of Death (<dod>), but Client Present Status (<val>) is not '20 - Carer(s)/Relative(s) of the patient/client only' or '31 - Patient/Client/Carer(s)/ Relative(s) not present: Indirect Contact' | 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’ where Contact/Client Service Event Date is after Date of Death for the Palliative Care Program/Stream. | Check that the values of the corresponding data elements are correct and resubmit |
|  | BR-DAT-CNT-007 | *The Contact Date/Time is after the Patient/Client Death Date, the Patient/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’* |
| E363 | <ContactDataElement> is <NAClientNotPresentValue> - <NAClientNot Present Meaning> but Contact Client Present Status is ’11 - Patient/Client present only’, ’12 - Patient/Client present with carer(s)/relative(s)’ or ’13 - Patient/Client via telehealth’ | Contact care phase, contact care model, contact preferred death place and contact preferred care setting cannot be reported as not applicable if the client is present. | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-009 | *Where Contact Care Phase is ‘9 - Not Applicable - Patient/Client not present' or ‘5 – Bereavement Phase’, the Contact Client Present Status must not be ’11 - Patient/Client present only’, ’12 - Patient/Client present with carer(s) / relative(s)’ or ’13 - Patient/Client via telehealth’* |
|  | BR-DAT-CNT-010 | *Where Contact Care Model is ‘9 - Not Applicable - Patient/Client not present', the Contact Client Present Status must not be ’11 - Patient/Client present only’, ’12 - Patient/Client present with carer(s)/relative(s)’ or ’13 – Patient / Client via telehealth’* |
|  | BR-DAT-CNT-011 | *Where Contact Preferred Death Place is ‘98 - Not Applicable - Patient/Client not present', the Contact Client Present Status must not be ’11 - Patient/ Client present only’, ’12 - Patient/Client present with carer(s)/relative(s)’ or ’13 - Patient/Client via telehealth’* |
|  | BR-DAT-CNT-012 | *Where Contact Preferred Care Setting is ‘98 - Not Applicable - Patient/Client not present', the Contact Client Present Status must not be ’11 – Patient / Client present only’, ’12 - Patient/Client present with carer(s)/relative(s)’ or ’13 - Patient/Client via telehealth’* |
| E364 | 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> | Contact care phase, contact care model, contact preferred death place and contact preferred care setting cannot be reported as not applicable if the client is present. | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-013 | *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', Contact Care Phase must be ‘9 - Not Applicable - Patient/Client not present' or ‘5 – Bereavement Phase’* |
|  | BR-DAT-CNT-014 | *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', Contact Care Model must be ‘9 - Not Applicable - Patient/Client not present'* |
|  | BR-DAT-CNT-015 | *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 Preferred Death Place must be ‘98 - Not Applicable - Patient/Client not present'* |
|  | BR-DAT-CNT-016 | *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, Contact Preferred Care Setting must be ‘98 - Not Applicable - Patient/Client not present'* |
| E365 | Contact Session Type = ‘2 - Group session’ but Contact Group Session Identifier has not been reported | When the Episode Program/ Stream is ‘101’ – ‘406’ (Specialist Clinics (Outpatient)) and the Contact Session Type is ‘2-Group Session’, a Contact Group Session Identifier must be reported. | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-020 | *Contact Session Type is '2-Group session', a Contact Group Session Identifier must be reported; and if a Contact Group Session Identifier has been reported, the Contact Session Type should be '2 - Group session’* |
| E366 | A Contact Group Session Identifier has been reported but the Contact Session Type =<> ‘2 - Group session’ | When the Episode Program/Stream is ‘101’ – ‘406’ (Specialist Clinics (Outpatients) and a Contact Group Session Identifier has been reported, the Contact Session Type must be ‘2- Group Session’. | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-020 | *Where Contact Session Type is '2-Group session', a Contact Group Session Identifier must be reported; and if a Contact Group Session Identifier has been reported, the Contact Session Type should be '2 - Group session’* |
| E366 | Contact Clinic Identifier <ContactClinicIdentifier> is not valid for this Contact Campus Code <ContactCampusCode> | Contact Clinic Identifier must exist for the submitted Contact Campus Code | Check that the values of the corresponding data elements are correct and resubmit. |
|  | *BR-DAT-CNT-30* | *Contact Clinic Identifier must exist for the submitted Contact Campus Code* |
| E367 | The Episode Program/Stream is Specialist Clinics (Outpatients) but a Contact Purpose of either '71-Follow up/Monitoring/Evaluation/Review', '72-New Patient Consultation', '51-Multi-disciplinary Case Conference – patient not present', ’73- Follow up /Monitoring /Evaluation /Review – Conservative Management’ or ’74-New patient consultation – Conservative Management’ has not been reported.  | When the Episode Program/Stream is ‘101’ – ‘418’ (Specialist Clinics (Outpatients), a Contact Purpose of either '71-Follow up/Monitoring/Evaluation/ Review', '72-New Patient Consultation', ’73‑ Follow up /Monitoring /Evaluation /Review – Conservative Management’ or ‘74 New patient consultation – Conservative Management’ or '51-Multi-disciplinary Case Conference – patient not present' must be reported. | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-017 | *For Specialist Clinics (Outpatients), the first Contact Purpose code reported must be either '71-Follow up/Monitoring /Evaluation/Review', ’73- Follow up /Monitoring /Evaluation /Review – Conservative Management’, '72 - New Patient Consultation' or ‘74 New patient consultation – Conservative Management’ or* '51-Multi-disciplinary Case Conference – patient not present' |
| E368 | Contact Account Class (AccountClass) is incompatible with Contact Medicare Suffix (<medicare\_suffix>) | If Contact Account Class is 'JP-Prisoner' then Medicare Suffix must be 'P-N', and vice versa. If Contact Account Class is 'XX or ‘ME’ or ‘MF’ then Medicare Suffix must be 'N-E-Ineligible' | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-018 | *Ineligible patients with an Account Class = 'XX' or ‘ME’ or ‘MF’ must be reported with Contact Medicare Suffix = 'N-E'. Prisoners must be reported with Patient/Client Medicare Suffix = 'P-N' and Account Class = 'JP’.* |
| E369 | Contact Delivery Mode is ‘9 - Not applicable’ but Contact Client Present is not ’32 - Patient/Client/Carer(s)Relative(s) not present: Scheduled appointment not attended’ | Care-related fields are consistent with Patient/Client Present Status. | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-022 | *Contact Delivery Mode is ‘9 - Not applicable’ but Contact Client Present is not ’32 - Patient/Client/Carer(s)Relative(s) not present: Scheduled appointment not attended’ or Contact Client Present status is not ’31 – Indirect contact when Contact Purpose is ’51 – MDCC-patient not present* |
| E370 | Data Element (<FieldName>) is mandatory (<Timing>) but no value was supplied. The (<FieldName>) for this (<FieldTypes>) is (<FieldValue>) | A field that is required to have a value at a point in time was empty. Consult with Section 3 of this manual to determine if and when a field needs to be populated. | Ensure there is a valid value in the relevant field in your system. If the value seems correct, or you do not have access to the code list, contact your software vendor for support. |
|  | BR-DAT-CNT-023 | *Where a Contact Clinic ID is provided, Contact Program Stream must be provided* |
|  | BR-DAT-EPS-025 | *Episode Special Purpose Flag must be provided where the Contact Account Class is ‘ND – National Disability Insurance* |
| E371 | Data Element (<FieldName>) is mandatory for this Program/Stream <Program/Stream> (<Timing>) but no value was supplied | A field that is required to have a value at a point in time was empty. Consult with Section 3 of this manual to determine if and when a field needs to be populated. | Ensure there is a valid value in the relevant field in your system. If the value seems correct, or you do not have access to the code list, contact your software vendor for support. |
|  | BR-DAT-EPS-020 | *Episode Advance Care Plan Alert must be provided where there is an Episode Start Date* |
|  | BR-DAT-EPS-023BR-DAT-EPS-030 | *Contact Medicare Suffix is mandatory but not value was supplied**Episode Patient/Client Ready for Care Date is mandatory (date), but no value was supplied* |
| E372 | Contact Account Class is ‘ND – National Disability Insurance Scheme’ but Episode Special Purpose Flag is not ‘ND – NDIS Participant’ | A message was sent to insert or update a Contact with a Contact Account Class of ‘ND – National Insurance Disability Scheme’ but a value of ‘ND – NDIS Participant’ for Episode Special Purpose Flag has not been supplied. | Resubmit the Episode with a value of ‘ND Participant’ for Episode Special Purpose Flag. |
|  | BR-DAT-CNT- 027 | *When Contact Account Class is ‘ND – National Disability Insurance Scheme’, Episode Special Purpose Flag must be reported with a value of ‘ND – NDIS Participant’* |
| E373 | Indirect Contacts must be reported when Contact Session Type = ‘3 – Not Applicable: Indirect Contact’ and with Contact Client Present Status = ’31 – Patient/Client Carer(s) /Relative(s) not present: Indirect Contact’ | A Contact Message was sent with either a Contact Session Type of 3 and a client present status not equal to 31 – or a client present status of 31 and a contact session type not equal to 3. | Resubmit with consistent values for Contact Session Type and Client Present Status. |
|  | BR-DAT-CNT-024 | *Contact Session Type of <ContactSessionTypeValue> – <ContactSessionTypeDescription> is incompatible with Client Present Status of <ClientPresentStatusValue> – <ClientPresentStatusDescription* |
| E374 | Contact Delivery Setting is ‘'11 – Hospital setting – inpatient setting’ but Contact Inpatient Flag is not ‘I – Yes (Inpatient/Admitted) | Contact Delivery Setting is '11 – Hospital setting – inpatient setting but Contact Inpatient Flag is not ‘I – Yes (Inpatient/Admitted)’ | Ensure there is a valid value in the relevant field in your system. If the value seems correct, or you do not have access to the code list, contact your software vendor for support. |
|  | BR-DAT-CNT-026 | *Where Contact Delivery Setting is '11 – Hospital setting – inpatient setting, Contact Inpatient Flag must be ‘I – Yes (Inpatient/Admitted)’* |
| E377 | <ContactDataElement is ’51- MDCC-patient not present,’ <ContactDataElement> is not ‘31 =Patient/Client/Carer(s)/Relative(s) not present: Indirect contact’ must be reported | Contact Purpose Code is ’51- MDCC-patient not present’ but the Contact Client Present Status code is not ‘31 - Patient/Client/Carer(s)/Relative(s) not present: Indirect contact’ must be reported. | Check that the values of the corresponding data elements are correct, and resubmit the record. |
|  | BR-DAT-CNT-29 | *Where Contact Purpose Code is ‘51- MDCC-patient not present’, the Contact Client Present Status code – ‘31’ Patient/Client/Carer(s) /Relative(s) not present: Indirect contact’ must be reported.* |
| E381 | Contact reported, but program/stream ‘<Program/Stream>’ is a Home Based Service | The Episode Program/Stream is for a Home Based Service: codes: 52, 53, 651, 751, 851 or 852. Contacts should not be reported within these episodes | Refer to Section 2: Concepts and derived item ‘Guide for Use’ for the specific home delivered service for guidance when reporting contacts |
|  | BR-DAT-CNT-032 | *Contact cannot be reported for Home Based Services programs* |
| E383  | Contact Purpose code is '10 – Screening contact' but Referral In Outcome was not '50 – Screening' at the contact date (<contact\_date\_value>) | A contact purpose code of ’10 – Screening Contact’ was reported but a Referral In Outcome of ’50 – Screening’ was not current at the time of the contact | Check that the values of the corresponding data elements are correct and resubmit. |
|  | *BR-DAT-CNT-033* | *When Contact Purpose Code is ’10 - Screening Contact’ Referral In Outcome must be ‘50 – Screening’* |
|  |  |  |
| E384 | Referral In Outcome is ’50 – Screening’ at the Contact Start Date (<contact start date/time>) but Contact Purpose is not ’10 – Screening Contact’ | The contact has a Contact Purpose that is not ‘10 – Screening Contact’ but the Referral In Outcome was ’50 – Screening’ at the Contact Start Date | Check that the values of the corresponding data elements are correct and resubmit. |
|  | BR-DAT-CNT-035 | When a Referral In Outcome of ’50 – Screening’ has been reported but the reported Contact Purpose Code is not ’10 - Screening Contact*’* |
| E385 | Contact Purpose ’71 – Follow up/Monitoring/Evaluation/Review’ and Contact Purpose ’73 - Follow up/Monitoring/Evaluation/Review – Conservative management’ cannot be reported for the same contact.Contact has a Contact Purpose of ’ 72 - New patient consultation’ and Contact Purpose ‘74 - New patient consultation – Conservative Management’  | Contact has a Contact Purpose of ’71 – Follow up/Monitoring/Evaluation/Review’ and ‘73 - Follow up/Monitoring/Evaluation/Review – Conservative management’Contact has a Contact Purpose of ’72 - New patient consultation’ and ’74 - New patient consultation – Conservative Management’ | Ensure that the contact purpose codes are correct and do not conflict, then resubmit.Ensure that the contact purpose codes are correct and do not conflict, then resubmit. |
|  | BR-DAT-CNT-034 | Contact Purpose <ContactPurpose1> and Contact Purpose <ContactPurpose2> cannot be reported for the same contact  |
| E412 | Referral In Outcome updated to Not Accepted, but one or more Episodes have resulted from this Referral (<episode\_details>) | A Referral message was previously sent stating that the Referral was accepted by the Health Service. Subsequently, an episode commenced resulting from this referral. A Referral In update message (RRI\_I13) has now been sent, in which the referral outcome has been set to 'Not Accepted', but episodes associated with the referral exist. | Check that the values of the corresponding data elements are correct and resubmit. If the referral was not accepted, the associated episodes must be deleted. |
|  | BR-DAT-RIN-001 | *A referral that results in an episode must have an outcome of ‘Accepted’* |
| E452 | This organisation (<OrganisationIdentifier>) is not approved to report Referrals In under this program/stream (<Referral In Program/Stream>) | The organisation identified in the batch header for this message is not approved to report Referrals In to VINAH under this program stream. | If your organisation should legitimately be approved to report Referrals In under this program stream, contact the HDSS Helpdesk for support. Otherwise, contact your software vendor. |
|  | BR-XMT-SEC-005 | *An Organisation should only report data for a particular Program/Stream where they provide the relevant services and have been approved to report data for the Program/Stream by the Department* |
| E453 | Referral In Outcome is <ref\_in outcome> and program/stream is <program/stream> but Referral In Clinical Urgency Category is not provided | Referral In Outcome is‘010 – Referral accepted – New appointment’ or ‘020 – Referral accepted – Review appointment’ or ‘3 – Referral accepted – Renewed referral’ and Program/Stream is OP but Referral In Clinical Urgency Category has not been reportedReferral In Outcome is‘1 – Referral accepted’ or ‘50 – Screening Referral’ and Program/Stream is PC but Referral In Clinical Urgency Category has not been reported | Contact HDSS Helpdesk or your software vendor for support. |
|  | BR-DAT-RIN-004 | For Palliative Care Program/Streams, when a Referral In Outcome has the value ‘1 – Referral accepted ‘, ‘3 – Referral accepted – Renewed referral’ or ’50 – Screening referral’, Referral In Clinical Urgency Category must be reported |
|  | BR-DAT-RIN-005 | For Specialist Clinics (Outpatients) Program/Streams, when a Referral In Outcome has the value ‘010 – Referral accepted – New appointment’, ‘020 – Referral accepted – Review appointment’ or ‘3 – Referral accepted – Renewed referral’, Referral In Clinical Urgency Category must be reported |
| E454 | Referral In Outcome is ‘010 – Referral accepted – New appointment’ or ‘020 – Referral accepted – Review appointment’, ‘1 – Referral accepted’ or ‘3 – Referral accepted – Renewed referral’ but <client\_field\_list> has not been provided | A message was sent to insert or update a Specialist Clinics (Outpatients) referral with an ‘Accepted’ outcome but client data is not complete. | Ensure that the missing client data items are submitted. |
|  | BR-DAT-RIN-008 | When a Referral In Outcome has the value ‘010 – Referral accepted – New appointment’ or ‘020 – Referral accepted – Review appointment’ or ‘1 – Referral accepted’ or ‘3 – Referral accepted – Review appointment’, Patient/Client Birth Date, Sex, Usual Residence Locality Name and Usual Residence Postcode must be reported |

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| E455 | Data Element '<FieldName>' is mandatory at this point in time (<TimingInfo>), but no value was supplied | When more than one Referral In Outcome is reported the Referral In Outcome date must be provided. | A data element must have a value when a related data element is reported |
|  | *BR-DAT-RIN-010* | *When more than one Referral In Outcome is reported the Referral In Outcome date must be reported* |
| E458 | Referral In Outcome is ‘1 - Referral accepted’ but Referral In First Triage Score has not been provided  | Referral In First Triage Score must be reported when Referral In Outcome is ‘1 – Referral accepted’ | Contact HDSS Helpdesk or your software vendor for support |
|  | *BR-DAT-RIN-017* | *For Palliative Care Program/Streams, when a Referral In Outcome has the value ‘1 – Referral accepted’, Referral In First Triage Score must be reported* |
| E460 | Referral In Outcome is ‘010 – Referral accepted – New appointment’ or ‘020 – Referral accepted – Review appointment’ or ‘1 – Referral accepted’ or ‘3 – Referral accepted – Renewed referral’, but no Referral In Reason provided | Data elements are reported as a result of certain events occurring | A data element must have a value when a related data element is reported |
|  | *BR-DAT-RIN-007* | *When a Referral In Outcome is ‘010 – Referral accepted – New appointment’ or ‘020 – Referral accepted – Review appointment’ or ‘1 – Referral accepted’ or ‘3 – Referral accepted – Review appointment’ a Referral In Reason must be reported* |
| E462 | Referrals that have an End Date must also have an End Reason | Data elements related to referrals are consistent | A data element must have a value when a related data element is reported |
|  | BR-DAT-RIN-012 | *Referral has a Referral End Date but no Referral End Reason* |