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| |  | | --- | | Victorian Integrated Non-Admitted Health Minimum Data Set (VINAH MDS)  Manual 2023-24  Section 4 - Business Rules | | 18th edition, July 2023  Version 1.0  **OFFICIAL** | |
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In this document, ‘Aboriginal’ refers to both Aboriginal and Torres Strait Islander people. ‘Indigenous’ or ‘Koori/Koorie’ is retained when part of the title of a report, program or quotation.

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# Introduction and definitions

This section outlines the business rules that are in place in the VINAH MDS data collection. Business rules serve many purposes in the VINAH MDS data collection, the most important being to preserve the quality, consistency, and integrity of the data.

**Business rules**

In the context of the VINAH MDS, business rules are plain English statements which provide a constraint, condition, or restriction on some aspect of the data collection.

**Data quality objectives**

Each business rule is aligned to a data quality objective. This objective represents the desired outcome of the rule’s successful observation and enforcement. A data quality objective may be achieved by one or more business rules.

**Data quality principles**

Each data quality objective aims to uphold a data quality principle. A data quality principle may be upheld by one or more data quality objectives.

These principles are:

**Consistency**

Although data is obtained from a variety of health services and through numerous software applications, the data shall be comparable through the use of standardised coding methods.

**Integrity**

The data must maintain its integrity with reference to a number of aspects:

* Structural – the encoded format of the data is of the appropriate format.
* Referential – other records or data exist where reference is made to them.
* Elemental – data elements meet its standalone definition.

**Privacy**

The privacy of individuals is maintained in accordance with established guidelines.

**Security and accountability**

The source of the data must be from a trusted and authorised individual.

**Validations**

A business rule may be enforced by one or more validations. These validations are the reaction to an instance of data violating a business rule.

If a business rule is not enforced by a validation, this does not mean that the business rule does not need to be observed. Some business rules are not enforced by validations but may be enforced through other means such as data quality investigations and audits.

The validations are listed in Section 8 of this manual.

# VINAH MDS business rules

## Data quality principle: Consistency

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| **BR-DAT-RIN-001** | A referral that results in an episode must have an outcome of 'Accepted' |
| **Data quality objective** | The outcome of the inbound referral reflects the decision to open an episode |
| **Validations** | E412 Referral In Outcome updated to Not Accepted, but one or more Episodes have resulted from this Referral (<episode\_details>)  E206 Open episode sent for a referral with outcome specified as not accepted (<ref\_details>) |

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| **BR-DAT-RIN-002** | Referral In Received Date must not be after the Episode Start Date of any episodes that resulted from the referral |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-RIN-003** | Referral In Received Date must not be after Referral In Receipt Acknowledgement Date |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-RIN-004** | For Palliative Care Program/Streams, when a Referral In Outcome has the value ‘1 – Referral accepted’ or ‘3 – Referral accepted – Renewed referral’, Referral In Clinical Urgency Category must be reported |
| **Data quality objective** | Data elements related to referrals are consistent |
| **Validations** | E453 Referral In Outcome is <ref\_in outcome> and Program/Stream is <program/stream> but Referral In Clinical Urgency Category is not provided |

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| **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 |
| **Data quality objective** | Data elements related to referrals are consistent |
| **Validations** | E453 Referral In Outcome is <ref\_in outcome> and Program/Stream is <program/stream> but Referral In Clinical Urgency Category is not provided |

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| **BR-DAT-RIN-006** | Referral In Clinical Referral Date must not be after Referral In Received Date |
| **Data qualityobjective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **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 – Renewed referral’ a Referral In Reason must be reported |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | 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 has been provided |

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| **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 – Renewed referral, Patient/Client Birth Date, Usual Residence Locality Name and Usual Residence Postcode must be reported |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | E454 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 <client\_field\_list> has not been provided |

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| **BR-DAT-RIN-009** | A Referral In insert cannot be accepted if submitted after the consolidation date of the financial year in which the Referral In Received Date falls |
| **Data quality objective** | To support VINAH consolidation by ensuring new referrals are submitted before the consolidation date of the financial year in which they fall |
| **Validations** | E022 <DateFieldDescription> <DateFieldValue> and the Submission Date (<Date>) is after <FinYear> Consolidation Date <Date> |

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| **BR-DAT-RIN-010** | When more than one Referral In Outcome is reported the Referral In Outcome Date must be reported |
| **Data quality objective** | A data element must have a value when a related data element is reported |
| **Validations** | E455 Data Element '<FieldName>' is mandatory at this point in time (<TimingInfo>) |

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| **BR-DAT-RIN-011** | Referral In Outcome Date must be on or after the Referral In Received Date |
| **Data quality objective** | Dates of related events are out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent>(<SucceedingEventValue>) is before <Preceding Event>(<PrecedingEventValue>) |

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| **BR-DAT-RIN-12** | Referrals that have an End Date must also have an End Reason |
| **Data quality objective** | Data elements related to referrals are consistent |
| **Validations** | E462 Referral has a Referral End Date but no Referral End Reason |

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| **BR-DAT-RIN-013** | Referral In Outcome Date must be on or after the Referral In Received Date | |
| **Data quality objective** | Dates of related events are out of sequence, here a given event should succeed a related event |
| **Validations** | E020 SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) | |

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| **BR-DAT-RIN-014** | A Referral In Receipt Acknowledgement Date must be provided when there is an episode |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | 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 |

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| **BR-DAT-RIN-015** | Referral In End Date cannot be reported without an Episode End Date |
| **Data quality objective** | Values are reported for related fields, when there is a requirement for them to be reported at the same time |
| **Validations** | E024 <FieldName1> cannot be reported without <a/an> <FieldName2> |

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| **BR-DAT-RIN-016** | Referral In End Date cannot be before the Episode End Date of any episodes that resulted from the referral |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-RIN-017** | For Palliative Care Program/Streams, when a Referral In Outcome has the value ‘1 – Referral accepted’ or *‘*3 – Referral accepted – Renewed referral, Referral In First Triage Score must be reported |
| **Data quality objective** | Data elements related to referrals are consistent |
| **Validations** | E458 Referral In Outcome is ‘1 – Referral accepted’ or ‘3 – Referral accepted – Renewed referral’, but Referral In First Triage Score has not been provided |

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| **BR-DAT-RIN-018** | When Referral In First Triage Score is 999, Referral In Clinical Urgency Category must be 99 – Not stated or unknown and when Referral In Clinical Urgency Category is 99 – Not stated or unknown, Referral In First Triage Score must be 999 |
| **Data quality objective** | Related data elements have the correct value |
| **Validations** | E019 <field1 name> is <field1 value> but <field2 name> is not <field2 value> |
| **BR-DAT-RIN-019** | When Referral In Outcome is ‘1 – Referral accepted’ or ‘3 – Referral accepted – Renewed referral’, Referral In Frist Triage Score must be provided |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | E458 Referral In Outcome is ‘1 – Referral accepted’ or ‘3 – Referral accepted – Renewed referral’, but Referral In First Triage Score has not been provided |

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| **BR-DAT-EPS-001** | Episode Start Date must not be before Date of Birth |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-EPS-002** | Episode Start Date must not be after the Episode End Date |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-EPS-003** | Episode must have an Episode Proposed Treatment Plan Completion only if it has an Episode End Date |
| **Data quality objective** | Data elements that relate to a particular event do not have a value before that event has occurred |
| **Validations** | E017 The field '<FieldName>' (<HL7 Field>) cannot have a value before this point in time (<Timing>) |

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| **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' |
| **Data quality objective** | Data Elements relating to a Patient's/Client's Carer are consistent |
| **Validations** | E254 Patient/client must 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 |

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| **BR-DAT-EPS-005** | Episode Start Date must not be before the Referral In Received Date |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-EPS-007** | Episode Start Date must be on or before the Contact Date/Time of any contacts within the Episode |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-EPS-008** | Episode End Date must be on or after the Contact Date/Time of any contacts within the Episode |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-EPS-009** | For Palliative Care, the Episode Malignancy Flag must be provided if the episode has had a contact |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | 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 |

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| **BR-DAT-EPS-010** | Episode Start Date must be before or on the Referral Out Date of any referrals that resulted from the episode |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-EPS-011** | Episode End Date must not be before the Referral Out Date of any referrals that resulted from the episode |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-EPS-016** | Episode First Appointment Booked Date cannot be before the Patient/Client Notified of First Appointment Date |
| **Data quality objective** | Exclude where Referral In Outcome code: 3 – Renewed Referral |
| **Validations** | E021 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) <FieldName> (<Date>) |

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| **BR-DAT-EPS-017** | Episode First Appointment Booked Date cannot be before Episode Start Date/Time |
| **Data quality objective** | Exclude where Referral In Outcome code: 3 – Renewed Referral |
| **Validations** | E021 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) <FieldName> (<Date>) |

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| **BR-DAT-EPS-027** | Episode End Date and Episode End Reason must be reported together. An Episode End Date must not be reported without an Episode End Reason. An Episode End Reason must not be reported without an Episode End Date |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | E015 Data Element '<FieldName>' is mandatory at this point in time (<Timing>), but no value was supplied |

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| **BR-DAT-EPS-029** | When a Referral has an end date, Episode End Date must be reported |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | 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 |

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| **BR-DAT-EPS-033** | When an episode has an end date (and has contacts) and Contact Client Present Status is not 32 – Patient/Client/Carer(s)/Relative(s) not present: Scheduled appointment not attended or 31 Patient/Client/Carer(s)/Relative(s) not present: Indirect contact, Episode Health Condition must be reported |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | 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 |

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| **BR-DAT-EPS-034** | When an episode has an Episode Patient/Client Notified of First Appointment Date an Episode First Appointment Booked Date must be reported |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | 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 |

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| **BR-DAT-EPS-035** | When Contact Account Class is ND – National Disability Insurance Scheme, Episode Patient/Client NDIS Participant Identifier must be provided |
| **Data quality objective** | Related fields are consistent |
| **Validations** | E270 Contact Account Class of ND – National Disability Insurance Scheme has been reported but no Patient/Client NDIS Participant Identifier number has been provided |

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| **BR-DAT-EPS-036** | Episode Campus Code must be provided at the time of the first contact |
| **Data quality objective** | Related fields are consistent |
| **Validations** | 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 |

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| **BR-DAT-CLI-001** | The reported date of birth a client must not result in an age of greater than 120 years |
| **Data quality objective** | Detect data entry errors on the Birth Date data element |
| **Validations** | E151 Client Age (<n>) is greater than 120 years |

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| **BR-DAT-CLI-002** | Patient/Client Carer Residency Status must have a value when Patient/Client Carer Availability is ‘1 - Has a carer’ and Episode/Program Stream is not Specialist Clinics or HBPCCT |
| **Data quality objective** | Data Elements relating to a Patient's/Client's Carer Residency Status are consistent |
| **Validations** | E152 Carer Availability is 'Has a carer' (<ca>) but Carer Residency Status (<crs>) is not compatible  E156 Carer Residency Status (<val>) has no value but Carer Availability (<val>) is set to '1 – Has a Carer' |

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| **BR-DAT-CLI-003** | Patient Client/Locality and Patient/Client Postcode must be a valid combination |
| **Data quality objective** | Data Elements relating to a Patient's/Client's Carer Residency Status are consistent |
| **Validations** | E153 Invalid combination of Postcode (<value1>) and Locality (<value2>) |

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| **BR-DAT-CLI-004** | Where the Patient Client/Locality and Patient/Client Postcode are a location within Australia they must represent a residential location |
| **Data quality objective** | Data Elements relating to a Patient's/Client's Usual Residence locality are consistent |
| **Validations** | E153 Invalid combination of Postcode (<value1>) and Locality (<value2>) |

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| **BR-DAT-CLI-005** | Where a Date of Death is reported, a Date of Death Accuracy Code and Place of Death must be provided |
| **Data quality objective** | Data Elements relating to a Patient's/Client's Death are consistent |
| **Validations** | 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 |

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| **BR-DAT-CLI-006** | Where Patient/Client Carer Relationship has a value, Patient/Client Carer Availability must be set to '1 – Has a Carer' |
| **Data quality objective** | Data Elements relating to a Patient's/Client's Carer are consistent |
| **Validations** | E155 Carer Relationship (<val>) has a value but Carer Availability (<val>) is not set to '1 – Has a Carer' |

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| **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' |
| **Data quality objective** | Data Elements relating to a Patient's/Client's Carer are consistent |
| **Validations** | E156 Carer Residency Status (<val>) has no value but Carer Availability (<val>) is set to '1 – Has a Carer' |

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| **BR-DAT-CLI-008** | Date of Death must not be before the Date of Birth |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-CLI-009** | Date of Birth must not be after the Episode Start Date (not mandatory for Palliative Care) |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-CLI-011** | Where a Patient/Client has had a contact, demographic data must be complete |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | 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 |

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| **BR-DAT-CLI-012** | Where an episode has an end date and Episode Proposed Treatment Plan Completion = ’27’, Patient/Client Death Date is mandatory |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | 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 |

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| **BR-DAT-CLI-013** | Patient/Client Death Date cannot be reported without an Episode End Date.  For Palliative Care, an Episode End Date is not required where Contact Care Phase = 5 - bereavement phase and contact date/time is within the thirteen month period post reported Patient/Client Death date. |
| **Data quality objective** | Data elements cannot be reported until related events have been reported |
| **Validations** | E017 The field '<FieldName>' (<HL7 Field>) cannot have a value before this point in time (<Timing>) |

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| **BR-DAT-CLI-014** | Patient/Client Sex must be provided at the time of the first reported Contact when Contact Client Present Status is not 32 – Patient/Client/Carer(s)/Relative(s) not present: Scheduled appointment not attended or 31 - Patient/Client/Carer(s)/Relative(s) not present: Indirect contact |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | 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 |

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| **BR-DAT-CNT-001** | Patient/Client demographic data must be complete at the time of the first reported Contact |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | 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 |

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| **BR-DAT-CNT-002** | Episode Start Date must not be after the Contact Date/Time |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-CNT-003** | Contact Date/Time must not be after the Episode End Date |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **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 |
| **Data quality objective** | A Patient/Client identifier relevant to the compensable agency is provided |
| **Validations** | E356 Contact is Compensable (<AccountClass>) but no client identifier relevant to the agency is provided |

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| **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’ |
| **Data quality objective** | Dates of related events are not out of sequence |
| **Validations** | 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' |

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| **BR-DAT-CNT-008** | For Palliative Care, the Episode Malignancy Flag must be provided at the time of the first contact |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | 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 |

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| **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’ |
| **Data quality objective** | Care-related fields are consistent with Patient/Client Present Status |
| **Validations** | E363 <ContactDataElement> is <PhaseOfCareValue> - <PhaseOfCareMeaning> 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’ |

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| **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’ |
| **Data quality objective** | Care-related fields are consistent with Patient/Client Present Status |
| **Validations** | E363 <ContactDataElement> is <NAClientNotPresentValue> - <NAClientNotPresentMeaning> 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’ |

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| **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’ |
| **Data quality objective** | Care-related fields are consistent with Patient/Client Present Status |
| **Validations** | E363 <ContactDataElement> is <NAClientNotPresentValue> - <NAClientNotPresentMeaning> 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’ |

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| **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’ |
| **Data quality objective** | Care-related fields are consistent with Patient/Client Present Status |
| **Validations** | E363 <ContactDataElement> is <NAClientNotPresentValue> - <NAClientNotPresentMeaning> 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’ |

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| **BR-DAT-CNT-013** | Contact Client Present Status must be '20 - Carer(s)/Relative(s) of the patient/client only' or '31 -Patient/Client/Carer(s)/Relative(s) not present: Indirect Contact', Contact Care Phase must be ‘9 - Not Applicable - Patient/Client not present' or ‘5 – Bereavement Phase’ |
| **Data quality objective** | Care-related fields are consistent with Patient/Client Present Status |
| **Validations** | 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> |

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| **BR-DAT-CNT-014** | Where 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' |
| **Data quality objective** | Care-related fields are consistent with Patient/Client Present Status |
| **Validations** | 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> |

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| **BR-DAT-CNT-015** | Where 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' |
| **Data quality objective** | Care-related fields are consistent with Patient/Client Present Status |
| **Validations** | 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> |

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| **BR-DAT-CNT-016** | Where 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' |
| **Data quality objective** | Care-related fields are consistent with Patient/Client Present Status |
| **Validations** | 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> |

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| **BR-DAT-CNT-017** | For Specialist Clinics (Outpatients), the first Contact Purpose code reported must be either '71 - Follow up/Monitoring/Evaluation/Review', '72 - New Patient Consultation', ’73- Follow up /Monitoring /Evaluation /Review – Conservative Management’, ‘74 New patient consultation – Conservative Management or '51-Multidisciplinary Case Conference – patient not present' |
| **Data quality objective** | The purpose of the contact for Specialist Clinics (Outpatients) can be identified as either 'new' or 'review' |
| **Validations** | 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-Multidisciplinary Case Conference – patient not present', ’73- Follow up /Monitoring /Evaluation /Review – Conservative Management’ or ’74-New patient consultation – Conservative Management’ has not been reported |

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| **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 Contact Medicare Suffix = 'P-N' and Account Class = 'JP' |
| **Data quality objective** | Contact Account Class is consistent with Contact Medicare Suffix |
| **Validations** | E368 Contact Account Class (<AccountClass>) is incompatible with Contact Medicare Suffix (<medicare\_suffix>) |

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| **BR-DAT-CNT-019** | Where the Contact Preferred Language is '1201 - English', the Contact Interpreter Required must be '2 - Interpreter not needed' |
| **Data quality objective** | Contact Preferred Language is consistent with Contact Interpreter Required |
| **Validations** | E360 Contact Preferred Language is ‘1201 - English’ but Contact Interpreter Required (<val>) is not ‘2 – Interpreter Not Needed’ |

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| **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' |
| **Data quality objective** | Contact Session Type and Contact Group Session Identifier are compatible |
| **Validations** | E365 Contact Session Type = ‘2 - Group session’ but Contact Group Session Identifier has not been reported  E366 A Contact Group Session Identifier has been reported but the Contact Session Type =<> ‘2 - Group session’ |

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| **BR-DAT-CNT-021** | Code values reported for Patients/Clients must be valid as at the Contact Date/Time |
| **Data quality objective** | Data elements relating to a Patient/Client are accurate |
| **Validations** | E159 Code (<CodeSupplied>) for Data Element (‘<FieldName>’) is not valid as at the Contact Date/Time |

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| **BR-DAT-CNT-022** | When Contact Delivery Mode is ‘9 - Not applicable’ and Contact Purpose is not ’51 – Multidisciplinary Case Conference – patient not present’, the Contact Client Present Status must be ’32 - Patient/Client/Carer(s)Relative(s) not present: Scheduled appointment not attended’ |
| **Data quality objective** | Contact related fields are consistent with Patient/Client Present Status |
| **Validations** | 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’ (when Contact Purpose is not ’51 – Multidisciplinary Case Conference - patient not present) |

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| **BR-DAT-CNT-023** | Where a Contact Clinic Identifier is provided, Contact Program Stream must also be provided |
| **Data quality objective** | A field that is required to have a value at a point in time was empty |
| **Validations** | E370 Data Element (<FieldName>) is mandatory (<Timing>) but no value was supplied. The (<FieldName>) for this (<FieldTypes>) is(<FieldValue>) |

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| **BR-DAT-CNT-024** | Indirect Contacts must be reported with 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 |
| **Data quality objective** | Contact Session Type is consistent with Contact Client Present Status |
| **Validations** | E373 Contact Session Type of <ContactSessionTypeValue> – <ContactSessionTypeDescription> is incompatible with Client Present Status of <ClientPresentStatusValue> – <ClientPresentStatusDescription |

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| **BR-DAT-CNT-025** | An insert or update of a contact attached to a closed episode must be submitted before the consolidation date of the financial year in which the Episode End Date falls |
| **Data quality objective** | To support VINAH consolidation by ensuring updates to closed episodes are submitted before the consolidation date of the financial year in which they fall |
| **Validations** | E022 <DateFieldDescription> <DateFieldValue> and the Submission Date (<Date>) is after <FinYear> Consolidation Date <Date> |

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| **BR-DAT-CNT-026** | Where Contact Delivery Setting is '11 – Hospital setting – inpatient setting, Contact Inpatient Flag must be ‘I – Yes (Inpatient/Admitted)’ |
| **Data quality objective** | Contact Inpatient Flag is consistent with Contact Delivery Setting |
| **Validations** | E374 Contact Delivery Setting is ‘'11 – Hospital setting – inpatient setting’ but Contact Inpatient Flag is not ‘I – Yes (Inpatient/Admitted) |

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| **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’ |
| **Data quality objective** | Account Class is consistent with Episode Special Purpose Flag |
| **Validations** | E372 Contact Account Class is ‘ND – National Disability Insurance Scheme’ but Episode Special Purpose Flag is not ‘ND – NDIS Participant’ |

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| **BR-DAT-CNT-028** | Contact Start Date must not be after the Contact End Date |
| **Data quality objective** | Dates of related events are out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-CNT-029** | Where Contact Purpose Code is ’51- Multidisciplinary Case Conference-patient not present’, the Contact Client Present Status code – ’31 - Patient/Client/Carer(s)/Relative(s) not present: Indirect contact’ must be reported. |
| **Data quality objective** | Data purpose is consistent with Contact Client Present Status |
| **Validations** | E377 Where <ContactDataElement*>* is ’51- Multidisciplinary case conference - patient not present,’ <ContactDataElement> ‘31 - Patient/Client/Carer(s)/Relative(s) not present: Indirect contact’ must be reported |

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| **BR-DAT-CNT-030** | Contact Clinic Identifier must exist for the submitted Contact Campus Code |
| **Data quality objective** | Data elements are restricted to the value domain of their defined code table |
| **Validations** | E376 Contact Clinic Identifier <ContactClinicIdentifier> is not valid for this Contact Campus Code <ContactCampusCode> |

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| **BR-DAT-CNT-031** | The time value 12:00am is not valid for Contact Start and Contact End date/time fields |
| **Data quality objective** | Data elements defined as requiring a value are provided |
| **Validations** | E025 The time value (<FieldTime>) of the date/time field (<FieldName>) is not valid |

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| **BR-DAT-CNT-032** | Contact cannot be reported for Home Based Services programs |
| **Data quality objective** | Data elements are not reported when they are not valid for particular programs |
| **Validations** | E381 Contact reported but program/stream ‘<Program/Stream>’ is a Home Based Service |

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| **BR-DAT-CNT-033** | When Contact Purpose Code is ’10 - Screening Contact’ Referral In Outcome must be ‘50 – Screening’ |
| **Data quality objective** | Data elements are only reported when they are valid for particular referral outcomes |
| **Validations** | E383 Contact Purpose code is ‘10 – Screening Contact’ but Referral In Outcome was not ’50 – Screening’ at the Contact Start Date (<contact start date/time>) |

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| **BR-DAT-CNT-034** | Conflicting contact purpose codes cannot be reported for the same contact |
| **Data quality objective** | Data elements values are reported accurately and do not conflict |
| **Validations** | E385 Contact Purpose <ContactPurpose1> and Contact Purpose <ContactPurpose2> cannot be reported for the same contact |

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| **BR-DAT-CNT-035** | When a Referral In Outcome of ’50 – Screening’ has been reported the Contact Purpose Code must be ’10 - Screening Contact’ |
| **Data quality objective** | Data elements are only reported when they are valid for particular referral outcomes |
| **Validations** | E384 Referral In Outcome is '50 – Screening' at the contact start date (<contact start date/time>) but Contact Purpose Code is not ’10 - Screening Contact’ |

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| **BR-DAT-ROU-001** | Episode Start Date must not be after Referral Out Date |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-ROU-002** | Referral Out Date must not be after Episode End Date |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DAT-ROU-004** | An insert/update to a Referral Out for a closed episode cannot be accepted if submitted after the consolidation date of the financial year in which the Episode End Date falls |
| **Data quality objective** | To support VINAH consolidation by ensuring changes to closed episode related events are submitted before the consolidation date of the financial year in which they fall |
| **Validations** | E022 <DateFieldDescription> <DateFieldValue> and the Submission Date (<Date>) is after <FinYear> Consolidation Date <Date>) |

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| **BR-DEL-DEF-001** | The value of a data element must comply with the specified meaning as listed in Section 3 |
| **Data quality objective** | The values of a data element must comply with its specified meaning |
| **Validations** | None (a). The majority of the validation in this document serve this purpose, however this specific rule is achieved by audit and other data quality processes |

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| **BR-DEL-DEF-002** | The value of a data element must be within its value domain or exist in the code table |
| **Data quality objective** | Data elements are restricted to the value domain of their defined code table |
| **Validations** | E004 Code ('<CodeSupplied>') for Data Element '<FieldName>' does not exist in code table <CodeTable>  E005 Code ('<CodeSupplied>') for Data Element '<FieldName>' is in code table <CodeTable> but is not valid for this Program/Stream <ProgramStream> |

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| **BR-DEL-DEF-003** | A value must be provided for data elements defined as mandatory |
| **Data quality objective** | Data elements defined as requiring a value are provided |
| **Validations** | E001 Data Element '<FieldName>' is mandatory, but no value was supplied  E002 Data Element '<FieldName>' is mandatory for this Program/Stream <Program/Stream>, but no value was supplied  E015 Data Element '<FieldName>' is mandatory at this point in time (<TimingInfo>), but no value was supplied  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  E023 The time part of the date/time field (<FieldName>) and Contact Start Date/Time is mandatory |

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| **BR-DEL-DEF-004** | A value provided for a data element must meet its data type and layout requirements |
| **Data quality objective** | Data elements that are not restricted to values in a code table meet their layout |
| **Validations** | E011 Invalid layout for field '<FieldName>' - value supplied '(<val>)' does not meet the layout requirements for this element (<Layout>) |

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| **BR-DEL-DEF-005** | A data element that can repeat should be repeated within the bounds of its definition |
| **Data quality objective** | Data elements defined are repeated both sufficiently and not excessively, as per their definition |
| **Validations** | 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>) |

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| **BR-DEL-DEF-007** | A data element should be reported according to the requirements of the program/stream it relates to |
| **Data quality objective** | Data elements defined as requiring a value are to be provided within a certain Program/Stream |
| **Validations** | E002 Data Element '<FieldName>' is mandatory for this Program/Stream <Program/Stream>, but no value was supplied  E005 Code ('<CodeSupplied>') for Data Element '<FieldName>' is in code table <CodeTable> but is not valid for this Program/Stream <ProgramStream>  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 |

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| **BR-DEL-DEF-008** | A data element that is not applicable within a program/stream must not have a value |
| **Data quality objective** | Data elements that are not relevant or applicable to a given Program/Stream are not reported, avoiding misinterpretation of the reported data |
| **Validations** | E003 Data Element '<FieldName>' cannot have a value in this Program/Stream <Program/Stream> |

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| **BR-DEL-DEF-010** | All related events must be reported in the correct sequence |
| **Data quality objective** | Dates of related events are not out of sequence, where a given event should succeed a related event |
| **Validations** | E020 <SucceedingEvent> (<SucceedingEventValue>) is before <Preceding Event> (<PrecedingEventValue>) |

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| **BR-DEL-DEF-011** | Data element values should be reported according to the requirements of the department at the time of reporting |
| **Data quality objective** | Data elements defined as requiring a value at a point in time, under particular circumstances, are not reported at other times |
| **Validations** | E013 Code (‘CodeSupplied>’) for Data Element ‘<FieldName>’ is for emergency use only – to be used under the direction of the department |

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| **BR-XMT-RNT-005** | Batch Control Identifiers must be unique across all submissions over time within an organisation |
| **Data quality objective** | Avoid duplicate or out of sequence data |
| **Validations** | B004 Batch Control Identifier (<Batch Control ID>) has been used previously (<PreviousSubmissionInfo>) |

## Data quality principle: Integrity

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| **BR-DAT-EPS-012** | An Episode Program/Stream cannot change once it has been submitted |
| **Data quality objective** | Preserve the integrity of the Episode and ensure the appropriate validation logic can be applied |
| **Validations** | 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. |

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| **BR-DAT-EPS-015** | For HBPCCT Programs/Streams, when an Episode has an End Date it must have an Episode First Consultancy Flag |
| **Data quality objective** | Episode Assessment Score data elements are consistent |
| **Validations** | 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 |

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| **BR-DAT-EPS-018** | Episode overlaps other episode in Palliative Care |
| **Data quality objective** | To prevent multiple episodes being reported to VINAH |
| **Validations** | E204 New open episode overlaps existing episode (<ep\_details>) for the patient (<id\_vals>) with the same program/stream (<program\_stream>) |

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| **BR-DAT-EPS-019** | When an episode has an end date, Episode Proposed Treatment Plan Completion must be completed |
| **Data quality objective** | Data elements are reported as a result of certain events occurring |
| **Validations** | 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 |

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| **BR-DAT-EPS-020** | Episode Advance Care Plan Alert must be provided where there is an Episode Start Date |
| **Data quality objective** | A field that is required to have a value at a point in time was empty |
| **Validations** | E371 Data Element (<FieldName>) is mandatory for this Program/Stream (<Program/Stream>) after (<Timing>) but no value was supplied |

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| **BR-DAT-EPS-023** | Contact Medicare Suffix is mandatory but no value was supplied |
| **Data quality objective** | A field that is required to have a value at a point in time was empty |
| **Validations** | E371 Data Element (<FieldName>) is mandatory for this Program/Stream (<Program/Stream>) after (<Timing>) but no value was supplied |

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| **BR-DAT-EPS-024** | An update of a closed episode cannot be accepted if submitted after the consolidation date of the financial year in which the Episode End Date falls |
| **Data quality objective** | To support VINAH consolidation by ensuring updates to closed episodes are submitted before the consolidation date of the financial year in which they fall |
| **Validations** | E022 <DateFieldDescription> <DateFieldValue> and the Submission Date (<Date>) is after <FinYear> Consolidation Date <Date> |

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| **BR-DAT-EPS-025** | Episode Special Purpose Flag must be provided where the Contact Account Class = ‘ND – National Disability Insurance Scheme’ |
| **Data quality objective** | A field that is required to have a value at a point in time was empty |
| **Validations** | E370 Data Element <FieldName> is mandatory (<Timing>) but no value was supplied. The <FieldName> for this <FieldTypes> is <FieldValue> |

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| **BR-DAT-EPS-026** | An episode cannot be closed with an end date that falls in a previous financial year if submitted after the consolidation date for that year |
| **Data quality objective** | To support VINAH consolidation by ensuring updates to closed episodes are submitted before the consolidation date of the financial year in which they fall |
| **Validations** | E022 <DateFieldDescription> <DateFieldValue> and the Submission Date (<Date>) is after <FinYear> Consolidation Date <Date> |

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| **BR-DAT-EPS-030** | Episode Patient/Client Ready for Care Date is mandatory (date), but no value was supplied |
| **Data quality objective** | A field that is required to have a value at a point in time was empty |
| **Validations** | E371 Data Element <FieldName> is mandatory for this Program/Stream (<Program/Stream>) after (<Timing>) but no value was supplied |

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| **BR-DAT-EPS-031** | Episode End Date cannot be reported without a Referral In End Date |
| **Data quality objective** | Values are reported for related fields, when there is a requirement for them to be reported at the same time |
| **Validations** | E024 <FieldName1> cannot be reported without <a/an> <FieldName2> |

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| **BR-DAT-EPS-032** | When the Referral In Program/Stream is FCP the Episode Program/Stream must also be FCP |
| **Data quality objective** | Related data elements are consistent |
| **Validations** | E267 Referral In Program/Stream is (<ref\_in program/stream>) but Episode Program/Stream is (<episode program/stream>) |

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| **BR-DEL-DEF-006** | A data element must not be changed once it has been reported if its definition dictates as such |
| **Data quality objective** | Preserve the integrity of the Episode and ensure the appropriate validation logic can be applied |
| **Validations** | 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. |

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| **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 |
| **Data quality objective** | Dates of events within the data are not reported as being in the future |
| **Validations** | E008 Date (<Value>) in field ‘<FieldName>’ is after the Message Date/Time (<MessageDateTime>) |

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| **BR-XMT-HL7-001** | The first line in a HL7 file must be a FHS segment |
| **Data quality objective** | HL7 Files are correctly assembled |
| **Validations** | HL7003 First line in file is not a FHS segment: <FirstLine> |

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| **BR-XMT-HL7-002** | A HL7 submission file must contain only 7-bit ASCII characters |
| **Data quality objective** | HL7 Files are correctly assembled |
| **Validations** | F005 Illegal extended ASCII character supplied (Code <ASCIICode>) at position <Position> in file. File may only contain 7-bit ASCII characters |

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| **BR-XMT-HL7-003** | A HL7 file must contain an equal number of FHS and FTS segments |
| **Data quality objective** | HL7 Files are correctly assembled |
| **Validations** | HL7001 File does not contain exactly one 1 FHS segment, file contains <n> FHS segments  HL7002 File does not contain exactly one 1 FTS segment, file contains <n> FTS segments |

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| **BR-XMT-HL7-004** | A HL7 message must be of a type as defined in Section 5 |
| **Data quality objective** | HL7 Files are correctly assembled |
| **Validations** | HL7010 Invalid Message Type <MessageType> |

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| **BR-XMT-HL7-006** | A HL7 file must contain an equal number of BHS and BTS segments |
| **Data quality objective** | HL7 Files are correctly assembled |
| **Validations** | HL7004 File must contain at least 1 BHS segment, file contains 0 BHS segments  HL7005 File must contain at least 1 BTS segment, file contains 0 BTS segments  HL7006 File does not have an equal number of BHS/BTS segments: <n1> BHS segments, <n2> BTS segments |

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| **BR-XMT-HL7-007** | A HL7 batch must contain at least one message |
| **Data quality objective** | HL7 Files are correctly assembled |
| **Validations** | HL7007 No of MSH segments must be >= No of BHS Segments. File has <n1> MSH Segments and <n2> BHS Segments |

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| **BR-XMT-HL7-008** | A HL7 submission must have a valid segment structure according to HL7 v2.5 |
| **Data quality objective** | HL7 Files are correctly assembled |
| **Validations** | None |

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| **BR-XMT-HL7-009** | A single line within an HL7 file should contain no more than 1000 characters |
| **Data quality objective** | HL7 Files are correctly assembled |
| **Validations** | None |

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| **BR-XMT-FIL-001** | A submission file must contain data |
| **Data quality objective** | A submission contains data |
| **Validations** | F003 File <FileName> is empty |

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| **BR-XMT-FIL-002** | *A HL7 submission file must contain only 7-bit ASCII characters* |
| **Data quality objective** | Data is acceptable to the Department |
| **Validations** | F005 Illegal extended ASCII character supplied (Code <ASCIICode>) at position <Position> in file. File may only contain 7-bit ASCII characters |

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| **BR-XMT-FIL-003** | A submission must contain data that is of an acceptable quality as per the Department’s requirements |
| **Data quality objective** | Data is acceptable to the Department |
| **Validations** | F050 The number of validation errors (<n>) in this file indicates the file may be corrupt or invalid |

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| **BR-XMT-FIL-004** | The Message Date/Time must be less than or equal to the Date of Submission |
| **Data quality objective** | Allow the Message Date/Time to be used to ensure other dates within the data are not in the future |
| **Validations** | E007 Message Date/Time (<MessageDateTime>) is after the Date of Submission (<SubmissionDate>) |

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| **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 |
| **Data quality objective** | Ensure efficient and stable operation of the processing system for all users |
| **Validations** | F050 The number of validation errors (<n>) in this file indicates the file may be corrupt or invalid |

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| **BR-XMT-FIL-006** | A HL7 file should contain no more than 50,000 messages |
| **Data quality objective** | Ensure efficient and stable operation of the processing system for all users |
| **Validations** | F012 HL7 submission file contains more than 50,000 messages (<MessageCount>) |

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| **BR-XMT-FIL-007** | The size of a submission file should be no greater than 25MB |
| **Data quality objective** | Ensure efficient and stable operation of the processing system for all users |
| **Validations** | F013 Submission file is larger than 25MB (<FileSize>) |

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| **BR-XMT-FIL-008** | The File Reference Period End Date must not be greater than the Batch Message Date/Time |
| **Data quality objective** | The period of data is identified in the file |
| **Validations** | F014 File Reference Period End Date is after the Message Date/Time. |

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| **BR-XMT-FIL-009** | A value must be provided for file data elements defined as mandatory |
| **Data quality objective** | File data elements defined as requiring a value are provided |
| **Validations** | F006 '<FieldName>' is mandatory but no value has been supplied |

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| **BR-XMT-FIL-010** | File Sending Application must exist in the value domain of the code table |
| **Data quality objective** | The sending application is identified in the file |
| **Validations** | F007 Code ('<CodeSupplied>') for field ('File Sending Application') does not exist in code table HL70361 |

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| **BR-XMT-FIL-011** | VINAH version must be valid for the period of data submitted |
| **Data quality objective** | The VINAH Version is appropriate for the period of data submitted in the file. The most recent VINAH Version for a given year should be submitted |
| **Validations** | F015 VINAH version <VINAH version> is not a valid version for the period reported in this submission |

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| **BR-XMT-FNC-001** | The filename provided does not meet the specified naming conventions laid out in section 5 |
| **Data quality objective** | Filenames meet the specified naming conventions |
| **Validations** | F001 Filename <FileName> is not valid |

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| **BR-XMT-FNC-007** | Every file submitted should be named uniquely |
| **Data quality objective** | Avoid duplicate or out of sequence data |
| **Validations** | F002 A file named '<FileName>' has previously been submitted |

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| **BR-XMT-PRG-001** | A remote purge may only occur where a valid purge request file is transmitted |
| **Data quality objective** | Purge request files are correctly assembled |
| **Validations** | X002 Submission <filename> was not successfully purged – incorrect TargetEnvironment/Filename/SubID/HealthService/UserName/ PurgeKey combination  X003 Submission <filename> has already been purged after the initial load, due to the PurgeAfterLoad=True instruction on the original submission |

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| **BR-XMT-PRG-002** | Only the last unpurged file for a health service can be purged |
| **Data quality objective** | Ensure that only the most recent submission can be purged/rolled back to prevent orphaned data |
| **Validations** | 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 |

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| **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 |
| **Data quality objective** | Avoid duplicate or out of sequence data |
| **Validations** | E051 Cannot insert record, same Primary Key for data structure '<structure>' already exists (<conflict\_location>). Key fields: <pk\_expanded\_val> |

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| **BR-XMT-RNT-002** | An update or delete message can only be sent where an insert message has been previously accepted |
| **Data quality objective** | Other records that are referenced by identifiers have been previously sent and accepted, maintaining referential integrity |
| **Validations** | 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> |

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| **BR-XMT-RNT-003** | Where a message refers to other records, those records must have previously been sent and accepted |
| **Data quality objective** | Other records that are referenced by identifiers have been previously sent and accepted, maintaining referential integrity |
| **Validations** | 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>  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> |

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| **BR-XMT-RNT-004** | Message Control Identifiers must be unique across all submissions over time within an organisation |
| **Data quality objective** | Avoid duplicate or out of sequence data |
| **Validations** | HL7011 Message Control Identifier <MCID> has already been allocated to a previous message |

## Data quality principle: Privacy

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| **BR-DAT-CNT-005** | A Patient/Client's Legal Family Name or Given Names must be provided where Account Class is compensable |
| **Data quality objective** | Patient/Client names are provided where the contact account class is compensable (VX, TA, WC) |
| **Validations** | E358 Account Class is VX (DVA) or TA (TAC) or WC (VWA), but the Patient's Legal Name or Given Names are not provided |

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| **BR-DAT-CNT-006** | A Patient/Client's Legal Family Name or Given Names should only be provided where Account Class is compensable |
| **Data quality objective** | Patients/Clients are not identified unnecessarily |
| **Validations** | 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) |

## Data quality principle: Security and accountability

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| **BR-XMT-SEC-001** | A user must be authorised to transmit data via an approved mechanism |
| **Data quality objective** | Data is transmitted via an approved mechanism, which authenticates the user |
| **Validations** | None (b) This is not handled by a specific validation rule, but by the security protocols of the HealthCollect portal |

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| **BR-XMT-SEC-002** | A user must be authorised to transmit data on behalf of the organisation |
| **Data quality objective** | Users are authorised to submit data on behalf of an organisation; avoid the possibility of a user accidentally or otherwise incorrectly submitting data on behalf of an organisation |
| **Validations** | B010 User ‘<Username>’ is not authorised to transmit data for Organisation Identifier ‘<OrganisationIdentifier>’  F010 User ‘<Username>’ is not authorised to transmit data for Organisation Identifier ‘<OrganisationIdentifier>’ |

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| **BR-XMT-SEC-003** | The Organisation Identifier in the File Header Segment (FHS) must be the same as the Organisation Identifier in the filename |
| **Data quality objective** | The contents of the file represent the organisation in the file name |
| **Validations** | F011 File Header Segment Organisation Identifier ‘<OrganisationIdentifier>’ does not match ‘<OrganisationIdentifier InFileName>’ in filename |

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| **BR-XMT-SEC-004** | The Organisation Identifier in the Message Header Segment (MSH) must match the Organisation Identifier in the Batch Header Segment (BHS) |
| **Data quality objective** | Messages relate to the same organisation as specified in the containing batch |
| **Validations** | E010 Message Organisation Identifier ‘<OrganisationIdentifier>’ does not match Batch Organisation Identifier ‘<OrganisationIdentifierInFileName>’ |

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| **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 |
| **Data quality objective** | Organisations are submitting data that reflects the services they provide; avoid accidental coding of data into incorrect Program/Stream |
| **Validations** | E258 This organisation (<OrganisationIdentifier>) is not approved to report Episodes under this program/stream (<program\_stream>)  E259 The organisation ‘<OrganisationIdentifier>’ is not approved to report Contacts under this program/stream (<program\_stream>)  E452 This organisation (<OrganisationIdentifier>) is not approved to report Referrals In under this program/stream (<Referral In Program/Stream>) |

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| **BR-XMT-SEC-006** | An organisation can only report data for campuses belonging to the service |
| **Data quality objective** | Organisations are submitting data that reflects the services they provide; avoid accidental coding of data into incorrect Campus Identifier |
| **Validations** | E265 This organisation (<OrganisationIdentifer>) is not approved to report Episodes under this campus (<CampusIdentifier>) |