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| HDSS Bulletin |
| Issue 275: 14 March 2024 |
| OFFICIAL |

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# Global updates

##  Forms on the HDSS website

The Department of Health has created a number of MS Forms to standardise and streamline processes. The following forms are now available at the [HDSS Forms](https://www.health.vic.gov.au/data-reporting/health-data-standards-and-systems-hdss-forms) webpage <https://www.health.vic.gov.au/data-reporting/health-data-standards-and-systems-hdss-forms>

* Late data exemption request forms – ESIS, VAED, VEMD
* Request for MFT portal user access
* Subscribe to HDSS Bulletin or Classification and Coding Communications
* Request to update work contact details
* Data collection specific processes:
	+ ESIS request for manual change
	+ NADC request to report
	+ VAED testing notification
	+ VEMD data resubmission request

The HealthCollect Portal User Request Form remains accessible at the [HDSS HealthCollect](https://www.health.vic.gov.au/data-reporting/healthcollect) webpage < <https://www.health.vic.gov.au/data-reporting/healthcollect>>

## HDSS helpdesk support

The HDSS helpdesk provides data reporting advice and assistance to many stakeholders. Due to the high volume of enquiries received, we ask that health services and vendors review the relevant data collection manuals and other documentation available on the HDSS website **prior** to sending any questions to the helpdesk. Often, the answers to many questions can be found in the data collection manuals, a HDSS Bulletin or another document on our website.

**When sending an email to the HDSS helpdesk please include the data collection/application in the subject line, as this will help us to direct the email to the appropriate team for a response.**

# Agency Information Management System (AIMS)

## Reporting of urgent care activity on AIMS S10 form to cease after June 2024

Health services are reminded that reporting of urgent care activity on the AIMS S10 Acute Non-Admitted Clinic Activity form will cease from 1 July 2024. This change was notified in the Specifications for revisions to the Agency Information Management System (AIMS) for 2024-25, accessible at the [HDSS Annual Changes webpage](https://www.health.vic.gov.au/data-reporting/annual-changes) < https://www.health.vic.gov.au/data-reporting/annual-changes> .

Health services that report urgent care activity on the AIMS S10 form should review the other acute non-admitted clinic activity reported using the AIMS S10 form:

* Campuses that have no acute non-admitted clinics registered to report on the AIMS S10 form, and do not wish to register any new acute non-admitted clinics, can cease submitting the AIMS S10 form after completing reporting of June 2024 activity;
* Campuses that have acute non-admitted clinics registered but are not reporting any activity in those clinics should consider whether those clinics can be closed, using the Non Admitted Clinic Management System (NACMS) or whether activity in those clinics should now be reported;
* Campuses with ongoing acute non-admitted clinics registered and for which activity is being reported on the AIMS S10 form must continue to submit the S10 form.

From July 2024, all campuses must report urgent care activity using the AIMS Urgent Care Centre webform only. See also item below.

## Urgent care activity to be reported using AIMS Urgent Care Centre form commencing July 2024

From 1 July 2024 all campuses, including Small Rural Health Services, that provide urgent care/ unplanned emergency medical treatment must report data about urgent care presentations using the AIMS Urgent Care Centre form. This change was notified in the Specifications for revisions to the Agency Information Management System (AIMS) for 2024-25, accessible at the [HDSS Annual Changes webpage](https://www.health.vic.gov.au/data-reporting/annual-changes) < https://www.health.vic.gov.au/data-reporting/annual-changes> .

Information about the Urgent Care Centre data collection is provided in the AIMS manual accessible at the [HDSS AIMS webpage](https://www.health.vic.gov.au/data-reporting/agency-information-management-system-aims) < https://www.health.vic.gov.au/data-reporting/agency-information-management-system-aims> . **Health services should ensure they are able to capture relevant data from 1 July 2024, in order to be able to complete this reporting.**

The Urgent Care Centre webform will be assigned to all relevant campuses for 2024-25 reporting. HealthCollect users who currently report urgent care activity on the AIMS S10 form will also be able to access the Urgent Care Centre form in the AIMS context from 1 July 2024.

The change to the Urgent Care Centre form is to provide the additional detail needed for grouping activity to Urgency Disposition Groups (UDGs), as required under the National Health Reform Agreement.

# Elective Surgery Information System (ESIS)

##  Reminder to reconcile ESIS data

The accuracy of data submitted through ESIS each month is critical for monitoring planned surgery as part of the Planned Surgery Reform Blueprint. ESIS data is used in the suite of dashboards accessed by health service CEOs.

Recent queries to the helpdesk indicate that not all health services are reconciling their ESIS data with their internal systems. This is a general reminder that **every health service is expected to reconcile ESIS data regularly and routinely**.

On receipt of each ESIS submission a series of reports are returned to the health service via MFT Pickup folder. These reports provide health services with a range of valuable information including waiting list performance data and summaries regarding data validations.

The reports are provided in two zip files containing the submission file name followed by ‘ODS’ and ‘Edits’. Operational Data Store (ODS) files are a snapshot summary of your health service’s ESIS data that has been successfully loaded into the ESIS database for the current financial year.

As per the ESIS manual and the Policy and Funding Guidelines, ESIS data must be complete and correct (zero rejection, notifiable or corrections) by the 14th day of the following month or a day prior if the 14th is fall on the weekend or a public holiday.

# Victorian Admitted Episodes Dataset (VAED)

##  Outstanding Diagnosis Episodes

Hospitals are reminded that diagnosis, palliative and sub-acute records (X5/Y5, P5 and S5) must be submitted by 5.00pm on the 10th day of the second month following separation. Some health services have outstanding diagnosis, palliative and sub-acute records for separated episodes from the beginning of the financial year. These outstanding records must be submitted, or the episodes removed from the VAED as soon as possible.

The Outstanding List tab in the latest PRS/2 Edit report provides the episode details for all outstanding diagnosis, palliative and sub-acute records year to date (YTD).

Health services are asked to regularly review the Outstanding List tab in PRS/2 Edit report files to ensure that all outstanding records YTD have been submitted/cleared, and any newly listed episodes are also identified.

## Admitted acute NWAU reports

Provisional line-item definitions are available on request from HDSS helpdesk to assist health services reconcile between the acute admitted NWAU report and acute admitted NWAU extract.

The extract includes a column named VIC\_NWAU\_Funded\_Flag which can be used to filter out different funding sources.

# Victorian Emergency Minimum Dataset (VEMD)

## VEMD daily data submissions

Thank you for continuing to submit VEMD data daily. The requirement to submit VEMD data every business day was implemented in March 2020 and although the initial reason for increasing the reporting frequency of the VEMD was the global COVID-19 pandemic, the need to continue daily VEMD data submissions remains.

The demand placed on Victorian emergency departments has continued to increase post pandemic. This is demonstrated by waiting times and the continued growth of emergency activity. Improving emergency department services, facilities and waiting times is a priority for the department.

The department has developed several reporting products that depend on the daily submission of VEMD data from Victorian health services. These products cater to a diverse audience, including policymakers, performance managers and health services. They encompass a variety of measures, such as presentation count, ambulance handover times, and Key Performance Indicators (KPIs). These measures can only be derived from the VEMD.

Further to this, the data derived from the VEMD enables the department to conduct timely analyses, ensuring that appropriate measures are taken to address any issues as they arise. Notably, the monitoring of 24-hour emergency department breaches is now exclusively reliant on the daily submission of VEMD data. Although public health services are still obligated to report breaches to the department within 24 hours of occurrence or awareness, the department now oversees this process through the daily submission of VEMD data.

If you would like to know more about products available to health services, then please visit <https://vahi.vic.gov.au/ourwork/our-reports>.

If would like to know more about the departments’ performance monitoring framework then please visit [Performance monitoring framework | health.vic.gov.au](https://www.health.vic.gov.au/funding-performance-accountability/performance-monitoring-framework)

# Victorian Integrated Non-Admitted Health Minimum Data Set (VINAH MDS)

## Service event derivation rules

Further to advice published in HDSS Bulletin issue 272, the department has finalised its review of the service event derivation rules which will be updated to include multi-disciplinary case conferences where the patient is not present and contacts where the carer/family act on behalf of the patient when the patient is not present.

The service event derivation rules in the Victorian NWAU mapping table available on the HDSS website will be updated as will the non-admitted NWAU extracts and reports available on the HealthCollect portal.

The changes to the service event derivation rules will be applied retrospectively from 1 July 2023 and will be in place by the end of March 2024.

## Corrections to the VINAH MDS manual 2023-24

### Section 9 - code set

#### Contact Campus Code

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| --- | --- | --- | --- | --- | --- | --- |
| **Data Element Name** | Code Set Identifier | Code Set Type | Code | Descriptor | Reportable Requirements | Change |
| Contact Campus Code | HL70115 | Code Set | 2221 | Peninsula Health [Frankston Public Surgical Centre] | Reportable as of 01/12/2023 | Update |

#### Contact Provider Code

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Data Element Name** | Code Set Identifier | Code Set Type | Code | Descriptor | Reportable Requirements | Change |
| Contact Provider Code | 990012 | Code Set  | 2221 | Peninsula Health [Frankston Public Surgical Centre] | Reportable as of 01/12/2023 | Update |

#### Episode Campus Code

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Data Element Name** | Code Set Identifier | Code Set Type | Code | Descriptor | Reportable Requirements | Change |
| Episode Campus Code | HL70115 | Code Set  | 2221 | Peninsula Health [Frankston Public Surgical Centre] | Reportable as of 01/12/2023 | Update |

## Corrections to the VINAH MDS specifications 2024-25

### Implementation Notes

**Contact Account Class (amend)**

For the Palliative Care Consultancy (HBPCCT) program/stream ~~code 41 – Community Palliative Care~~, report the Contact Account Class for contacts scheduled from 1 July 2024.

# Non-Admitted Data Collection (NADC)

## Specification for revision to the Non-Admitted Data Collection (NADC) for 2024-25

The *Specifications for revisions to the Non-Admitted Data Collection (NADC) for 2024-25* have been distributed to NADC reporting health services. If you are an NADC reporting health service and have not received the specifications please email the HDSS help desk <hdss.helpdesk@health.vic.gov.au>

Health Services are reminded to liaise with their vendors or internal IT department to ensure their software can create submission files in accordance with revised specifications, and data is submitted by published deadlines.

# Contacts

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

* Victorian Admitted Episodes Dataset (VAED)
* Victorian Emergency Minimum Dataset (VEMD)
* Elective Surgery Information System (ESIS)
* Agency Information Management System (AIMS)
* Victorian Integrated Non-Admitted Health Minimum Dataset (VINAH MDS)

The HDSS Bulletin is produced at intervals to provide:

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

**Website**

[HDSS website](https://dhhsvicgovau.sharepoint.com/sites/DCU-DHHS-GRP/Shared%20Documents/General/HDSS%20bulletins/HDSS%20website) <https://www.health.vic.gov.au/data-reporting/health-data-standards-and-systems>

**HDSS help desk**

Enquiries regarding data collections and requests for standard reconciliation reports

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

**Other Victorian health data requests**

[VAHI](https://vahi.freshdesk.com/support/home) Data Request Hub < https://vahi.freshdesk.com/support/home>

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