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| Data Validation Reference Guide |
| A guide for correcting data errors for CMI/ODS |
| OFFICIAL |

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| To receive this document in another format email MHDReporting@health.vic.gov.au <MHDReporting@health.vic.gov.au>.Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.© State of Victoria, Australia, Department of Health, August 2024.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.ISBN/ISSN 978-1-76096-465-8 (online/PDF/Word) or (print) |

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# Release Versions

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| **Version** | **Date** | **Author** | **Changes** |
| --- | --- | --- | --- |
| V1.4 | 15/08/2024 | Glenda Wyatt | * Updated reference from vFire to Alemba
* Change ‘What is the data used for by the Department of Health’ to ‘Data Integrity’.
* Amend validation dates and change quarterly to monthly review
* High Priority validation errors are required to be corrected each month
* Timelines for reporting amended to reflect MH Bulletin 80
* Delete validation 1.16 Unusual place of birth
* Update to edit 2.01 with addition of F32.01, F32.11, F32.21, F32.31, F32.81 and F32.91
* Update to edit 2.02 with removal of ICD-10-AM codes F64.2 and F84.3 removed in alignment with edition 12, addition of F93.3, F98.0, F98.1 and to identify that these codes would normally be specific to childhood.
* Update edit 2.04 to identify that the codes should only apply to females aged 15-55
* Addition of codes to 2.05 – F01.0, F01.1, F01.2, F01.3, F01.9, F02.0, F02.1, F02.2, F02.3, F02.4, F02.8 with a warning that would be rare in ages less than 15
* Removal of edit 2.06 Medium edit regarding diagnosis and children aged <1
* Removal of edit 2.07 – use of Z00 as not a valid code. Z00.4 is a valid code and is often used by Triage
* Addition of 2.08 Incorrect Diagnosis event ‘Community’ against inpatient episode
* Change 3.02 from low priority to high priority
* Change 3.04 from low priority to high priority
* Change age for 3.06 from 46 to <55 years
* Change in terminology for 3.10 from target population to program type is not CAMHS.
* Addition of edit 3.17 Contact time recorded as 00:00
* Addition of edit 3.18 Contact recorded against ‘workaround’ subcentre
* Change duration of 6.04 from 12 months to 120 days
* Addition of new edit 10.04 – Prone restraint greater than 3 mins.
* Update to 12.08 to exclude scheduled discharge OM if community episode 14 days or less
* Addition of new edit 13.01, 13.02, 13.03, 13.04 missing phase of care
 |
| V1.3 | 26/3/2020 | Sue Nielson | * Updated existing manual
 |

# Introduction

## Key Message

* Data validation workbooks must be returned to the department monthly. All issues from the previous financial year are to be resolved by late August (see Policy & Funding Guidelines for applicable dates and MH Bulletin 80)
	+ Issues are given a priority of high, medium or low, but all issues are expected to be corrected or responded to.
	+ A full list of edit checks is included in the appendix of this document.

## Purpose of this document

* To outline the clinical mental health data validation process including the reasons for the process and the rules used to identify potential errors.
* Covers the timelines and prioritisation used as part of this process.
* To be referenced by services when providing local CMI/ODS data entry training.

## Data Integrity

Information about clinical mental health services that is relevant to funding, activity and performance monitoring is collected by the department through a range of channels. The collections underpin public accountability for service provision, quality and safety, with the outputs contributing to a range of national datasets and performance measurement and monitoring for Commonwealth, state and departmental purposes.

Accurate data is important for funding purposes, performance monitoring, reporting, policy development and planning, and for maintaining public confidence in the health system.

Services must review and reconcile data quality issues identified by the department and provide return advice on a quarterly basis. Validation reports are updated monthly.

## Background

The data validation process is in place to identify potential errors within the data and prompt health services to rectify these.

The need for health services to undertake efforts to address data validation issues is included as part of the Department of Health Policy & Funding Guidelines which states: ‘Services must review and reconcile data quality issues identified by the department and provide return advice on a monthly basis……’.

The date for correction of has been changed to align with other departmental data collection consolidation. Refer to the Policy and Funding Guidelines and MH Bulletin 80

The submission of Victorian data to the Commonwealth involves a series of validation checks which require a response to any issues which are found. Some of the edit checks in this document are based on the Commonwealth validation rules. Preventing or resolving data quality issues at this stage of the process reduces the need for the department to follow up with health services regarding these issues later.

### Data validation workbooks

Electronic spreadsheet workbooks which display a list of data validation issues for each campus are sent to health services monthly with a view to these being reviewed and issues reviewed and reconciled.

Issues which are genuine errors should be corrected through CMI/ODS wherever possible, this will prevent issues from appearing in the workbook again in the future. A suggested remedy to each type of validation issue is provided along with a description of the issue at the end of this document.

Some issues cannot be resolved locally and require a ticket to be lodged with Mental Health Applications, Applications and Services team via the AlembaSM Core software. Assign these issues a response of ‘Reviewed - ticket logged (provide number)’ which will flag the issue as being in the process of being resolved by the department. Including the ticket number in the comment column will have the issue removed from the workbook.

It is expected that all errors will be corrected, however there may be some instances where this is either not possible or not required. There is a column in the workbook dedicated to responding to such issues, with one of the following responses:

### Preloaded - Unreviewed

Data has not been checked. These will continue to appear in future workbooks.

### Not reviewed - supply reason

Data has not been checked. These will continue to appear in future workbooks.

### Reviewed - CMI Corrected

Data has been checked and was incorrect. This has been corrected on CMI locally at the service. Department of Health, Mental Health & Community Services Data team members have no action to take.

### Reviewed - No change required

Data has been checked and is accurate, no change is required. At the end of each quarter comments that are flagged as ‘Valid’ will be excluded from appearing in reports in the future.

For example, client is flagged as being over 104 years of age, but client is genuinely over 104 years of age.

### Reviewed - Not a duplicate

Data has been checked and the consumers involved are not the same person. Comments that are flagged as ‘Valid’ will be excluded from appearing in reports in the future.

### Reviewed - Outcome measure compliance education undertaken

Data has been checked, the outcome measure was either entered as an additional measure, had more than two 9’s or the outcome measure was not entered. Education to the clinician involved has been undertaken to ensure compliance for future outcome measure entry.

### Reviewed - Unable to correct (provide reason)

Use this response if it is unclear whether the data is valid or invalid. This should only be used when validity of data cannot be determined. Only comments that are flagged as ‘Valid’ will be excluded from appearing in reports in the future. If no additional comments are supplied, the issue will be deemed as unresolved and remain on future validation workbooks.

### Reviewed - Unable to locate Medicare number

Data has been checked and a Medicare card number was unable to be located in the patient record or local PAS system.

### Reviewed - Ticket logged (provide number)

Data has been checked and assistance from Mental Health Applications, Applications & Services team is required. A ticket has been lodged and the number should be recorded in the return workbook so this can be followed up by the Mental Health & Community Services Data team.

\* Always respond to Program/Subcentre issues as these need to be removed manually, you may need to liaise with the Mental Health Applications, Applications & Services team to resolve these issues.

## Accessing validation workbooks

Data validation workbooks are accessed through the department’s Managed File Transfer (MFT).

## MFT registration process

1. Send an email to MHDReporting@health.vic.gov.au with CMI MFT in the Subject line.
2. In the body of the email, provide the following details:
	1. First name:
	2. Surname:
	3. Day and month of birth (dd/mm only):
	4. Email address:
	5. Service provider name:
3. Your user account will be created, and your login details will be emailed back to you.
4. You will need to set your password before you can connect to the MFT server.
5. Instructions on how to do this will be in the email sent to you with your login details.

Please note individual email addresses are required to register and create user accounts. No shared email addresses can be used in the registration process. If there are any issues accessing the MFT, please email MHDReporting@health.vic.gov.au.

## MFT system requirements

The MFT system can be run in today's most popular browsers. The following minimum system requirements must be met:

One of the following browsers must be used:

* Firefox - latest and previous version
* Internet Explorer 8, 9, 10 or 11
* Chrome - latest version
* Safari 5 or 7

Please note that Cookies and JavaScript must be enabled in the browser.

## Connecting to the MFT

Upon initial connection you will see a folder called **MH-####** where **####** is the Campus code allocated as the service ID. To be in the Parent Directory/folder for your service you MUST always double click on this folder.

All completed CMI validation workbook files must be uploaded into the service’s Parent Directory.



Parent Directory

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## MFT file naming convention

The naming convention for CMI data validation file submissions is *campuscode\_monthyear*. E.g. 5000\_112019

## Collecting CMI validation workbook files

After the 15th of each month, Department of Health runs validations against the ODS, the created data validation workbooks will be available for you to download in the **pickup** folder from the MFT portal.

Click the **Download** button and **save** the workbook file to your local drive.

The **sent** and **backup** folders are system folders and should not be accessed by users at any time.



Pickup folder



Download button (will become usable once a file is available)

Pickup folder

## Uploading completed CMI validation workbook files

Log onto the MFT using your login details. Access your Parent directory/folder. Once in the Parent directory/folder you can use the **Upload** option to submit the file. Locate the file to be uploaded on your local system, then highlight and select using the Open option and then upload. The file has been successfully uploaded once it is in the MH-#### Parent folder.

Upload option

Parent Directory



File will appear here after successful upload

## Data refresh

CMI/ODS data is used to generate the report however this data is not completely live, data may be up to a week old by the time the report is received by services. The date which the data was refreshed appears on the top of each tab within the workbook.

This means that any changes to CMI/ODS made between the time the data was refreshed and the reports are received will not be reflected on the report.

Workbooks will be uploaded into the MFT portal between the 12-15th of the month. Any alterations made to remove valid/invalid issues which could not be corrected will only be removed at the end of each quarter.

## Validation priority

All issues are given a priority level of High, Medium or Low. This priority is based on the requirements for the data involved in each issue.

High Priority - Data which is required to be submitted as part of the National Minimum Dataset (NMDS) submission. Any issues which carry a high priority are expected to be corrected each month.

Data which is used in supporting statutory functions of the OCP or MHT will have their priority based on potential risk to these functions.

If an issue cannot be corrected, a detailed explanation must be provided in the workbook, outlining the reason this could not be done. This is then returned to the department.

## Timeframes for reporting

Issues are to be resolved and completed workbooks are to be returned to the department via MFT each month with quarterly consolidation, by the following dates:

 26th January (October – December)

 26th April (January – March)

 26th July (April – June)

 27th October (July – September)

Each issue will indicate which of the above dates is the required response date. Although April-June data is to be finalised by 26th July, all issues from the previous financial year are to be resolved by the late August to bring CMI/ODS into align with other key departmental collection consolidation dates (please check the Policy & Funding Guidelines for applicable dates).

After workbooks have been received and processed, a new workbook will be produced and distributed.

## Review of this document

This document will be reviewed regularly. Changes to the process or list of validation issues will be considered at this time. If a validation issue is required to be added to the list during the year, a bulletin will be distributed outlining the new edit and rationale behind the update.

## Guide for using Data Validation Rules

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| 99.01 - Example Data Validation Rule |

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| --- | --- |
| Priority | Refer to ‘Validation Priority’ above |
| Edit Description | Describes the validation rule which has been applied. |
| Remedy | Provides a suggested solution to resolve the issue. If possible, resolve the issue using suggested remedy. If this isn’t possible, respond via workbook in the response/comment columns.  |

# Rules

## Edit Type: Client

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| --- |
| 1.01 - Client under 16 with unusual marital status |

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| Priority | High  |
| Edit Description | Clients who are under 16 years of age but have an unusual marital status for this age group (Married, Widowed, Separated or Divorced).  |
| Remedy | Update Marital Status within CMI Detail tab of client registration as required.  |

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| 1.02 - Client older than 104 years of age |

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| Priority | Medium |
| Edit Description | Client recorded as being older than 104 years of age.  |
| Remedy | Check client’s data of birth and update Date of Birth within ODS Detail tab of client registration as required. |

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| 1.03 - Indigenous status Aboriginal and/or Torres Strait Islander but born overseas |

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| Priority | High |
| Edit Description | Clients who identify as Aboriginal or Torres Strait Islander are most likely to have been born in Australia.  |
| Remedy | Update Indigenous Status within CMI Detail tab of client registration as required. |

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| 1.04 - State & postcode combination mismatch |

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| --- | --- |
| Priority | High |
| Edit Description | State/postcode combination mismatch, client recorded as being from Victoria, but postcode does not begin with a 3 or recorded as being non-Victorian but has a Victorian postcode.  |
| Remedy | Update postcode and/or state within the ODS Detail tab of client registration as required otherwise edit Client Region and MHA to be **non-Victorian**.  |

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| 1.05 - Suspect date of birth |

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| Priority | Medium |
| Edit Description | Date of birth accuracy is AAA but date of birth is questionable. |
| Remedy | Update the Date of Birth in the ODS Detail tab of client registration. If exact Date of Birth is not known, update the Date of Birth Accuracy in the ODS Detail tab of client registration. |

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| 1.06 - Client with no fixed address inappropriately recorded |

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| Priority | Low |
| Edit Description | Clients who are homeless should have their suburb and state listed as 'No Fixed Abode', and the region and MHA listed as 'homeless/itinerant'.  |
| Remedy | Update suburb/state/client region/client MHA in the ODS Detail tab of client registration. Postcode for no fixed abode is 1000, overseas is 8888, unknown is 9988 |

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| 1.07 - Suburb & postcode combination incorrect for address |

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| Priority | Medium |
| Edit Description | Suburb & postcode combination probably incorrect for this address.  |
| Remedy | Update suburb and postcode in the ODS Detail tab of client registration.  |

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| 1.08 - Client died but case still open |

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| Priority | Medium |
| Edit Description | Client has died but case still open.  |
| Remedy | In case summary screen close any open episodes and close case.If it looks like it has been closed on CMI log CMI/ODS sync issue on infra and make note of this in the response column.  |

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| 1.09 - Child admitted to Adult Inpatient/PARC/CCU Unit |

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| Priority | High |
| Edit Description | Client aged < 12 but admitted to Adult/Aged Inpatient/PARC/CCU Unit.  |
| Remedy | Update the Date of Birth in the ODS Detail tab of client registration. If admitted to incorrect subcentre, delete admission and re-enter correct details via Admission or Residential Placement screen.  |

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| 1.10 - Incomplete Address |

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| Priority | Medium |
| Edit Description | Address missing suburb, postcode &/or state. |
| Remedy | Update suburb and postcode and/or state in the ODS Detail tab of client registration. |

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| 1.11 - MHA/region incorrect for address |

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| Priority | Low |
| Edit Description | MHA/region incorrect for address |
| Remedy | Update client region/client MHA in the ODS Detail tab of client registration. |

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| 1.12 - Missing Medicare |

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| Priority | Low |
| Edit Description | Missing Medicare number for admitted patient.  |
| Remedy | Please record client Medicare number in the ODS tab of client registration. If card details are unavailable, please enter C-U as suffix.  |

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| 1.13 - Incorrect address  |

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| Priority | Low |
| Edit Description | Address could not be mapped to ABS SA2 location. |
| Remedy | Please check the suburb &/or postcode is correct (noting that CMI promptings are not necessarily correct). |

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| 1.14 - Overseas Client not recorded appropriately |

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| Priority | Low |
| Edit Description | Client state listed as overseas but MHA isn’t **‘non-Victorian’**.  |
| Remedy | If client lives overseas, in the ODS tab of the client registration screen update state to be overseas and/or update client region/client MHA to be **non-Victorian**.If client lives in Australia, update state and client region/MHE accordingly. |

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| 1.15 - Interstate Client not recorded appropriately |

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| Priority | Low |
| Edit Description | Non-Victorian clients should have the region and MHA listed as 'non-Victoria'.  |
| Remedy | If client lives outside of Victoria, in the ODS tab of client registration, update client region/client MHA to be non-Victorian  |

## Edit Type: Client Diagnosis

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| 2.01 - Males with Female diagnosis code |

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| Priority | High |
| Edit Description | Diagnosis codes F32.01, F32.11, F32.21, F32.31, F32.81, F32.91, F53.0, F53.1, F53.8 or F53.9 should not apply to males.  |
| Remedy | If sex requires update, go to ODS tab of client registration screen and change title and sex as required. If diagnosis data entry correction is required, go to functions 🡪 diagnosis, select incorrect diagnosis event which corresponds with data outlined on validation report. Delete incorrect diagnosis code and insert a correct diagnosis.  |

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| 2.02 - Diagnosis with onset specific to childhood would generally apply to ages <18 |

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| --- | --- |
| Priority | Medium |
| Edit Description | Diagnosis code F93.0, F93.1, F93.2, F93.3, F93.8, F93.9, F94.1, F94.2, F94.8, F94.9, F98.0, F98.1, F98.2 or F98.3 do not usually apply to ages greater than18  |
| Remedy | If date of birth requires update, go to ODS tab of client registration screen and change as required. If diagnosis data entry correction is required, go to functions 🡪 diagnosis, select incorrect diagnosis event which corresponds with data outlined on validation report. Delete incorrect diagnosis code and insert a correct diagnosis. If code is correct this should be identified |

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| 2.03 - Females with Male diagnosis code |

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| --- | --- |
| Priority | High |
| Edit Description | The diagnosis code of F52.4 should not apply to females.  |
| Remedy | If sex requires update, go to ODS tab of client registration screen and change title and sex as required. If diagnosis data entry correction is required, go to functions 🡪 diagnosis, select incorrect diagnosis event which corresponds with data outlined on validation report. Delete incorrect diagnosis code and insert a correct diagnosis. |

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| 2.04 - Diagnosis usually applies for ages 15-55 |

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| --- | --- |
| Priority | Medium |
| Edit Description | Diagnosis code, F53.0, F53.1, F53.8 & F53.9 should only apply to females aged 15-55.  |
| Remedy | If date of birth requires update, go to ODS tab of client registration screen and change as required. If diagnosis data entry correction is required, go to functions 🡪 diagnosis, select incorrect diagnosis event which corresponds with data outlined on validation report. Delete incorrect diagnosis code and insert a correct diagnosis. |

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| 2.05 - Diagnosis should not apply for ages <15 |

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| --- | --- |
| Priority | Medium |
| Edit Description | Diagnosis code F00.0, F00.1, F00.2, F00.9, F01.0, F01.1, F01.2, F01.3, F01.8, F01.9, F02.0, F02.1, F02.2, F02.3, F02.4, F02.8, F03, F05.1, F52, F52.0, F52.1, F52.2, F52.3, F52.4, F52.5, F52.6, F52.7, F52.8, F52.9, F64.0, F64.1 would be rare in ages less than 15.  |
| Remedy | If date of birth requires update, go to ODS tab of client registration screen and change as required. If diagnosis data entry correction is required, go to functions 🡪 diagnosis, select incorrect diagnosis event which corresponds with data outlined on validation report. Delete incorrect diagnosis code and insert a correct diagnosis. If the diagnosis is correct identify same from drop down box (diagnosis reviewed and correct). |

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| 2.08 - Diagnosis Event ‘Community’ against inpatient episode |

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| --- | --- |
| Priority | High |
| Edit Description | A diagnosis event of ‘Community’ is entered against an inpatient episode  |
| Remedy | If a consumer is in an inpatient episode but the diagnosis event selected is ‘Community’ then this is incorrect and should be amended to ‘Separation’ diagnosis event. If the diagnosis event is correct then change the episode that has been entered to reflect a community episode. |

## Edit Type: Contacts

### Closed Screening Registers

To update a contact generated by a screening register which has been ‘Acknowledged’, the screening register needs to be Unacknowledged before any changes can be made to either the screening event or the contact that has been generated. Additional contacts can be added to an open or closed case by clicking on the Additional contacts tab which then activates the Add Contact option on the toolbar at the top of the screen.



And once clicking the details button, user is able to add contacts:





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| 3.01 - Contact duration > 8 hrs |

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| --- | --- |
| Priority | High |
| Edit Description | Single contact with contact duration more than 8 hrs (480 minutes).  |
| Remedy | If contact is incorrect, select functions 🡪 contact and search for contact using details provided on validation report. Update contact to reflect correct duration.  |
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| 3.02 - Contact duration < 5 mins |

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| --- | --- |
| Priority | High |
| Edit Description | Client contact with contact duration less than 5 minutes.  |
| Remedy | If contact is incorrect or was of an administrative nature, select functions 🡪 contact and search for contact using details provided on validation report. Update contact to reflect correct duration and ensure it is a valid contact. Contacts of less than 5 mins will need to be verified by services as clinically significant |

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| 3.03 - Client with contact > 250 times per 12-month period |

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| --- | --- |
| Priority | Low |
| Edit Description | Client with contact with a HCP more than 250 times per 12-month period.  |
| Remedy | If contacts have been recorded which should not have been, delete these by selecting functions 🡪 contact and search for contacts using details provided on validation report. |

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| --- |
| 3.04 - Client with contact > 10 times in one day |

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| --- | --- |
| Priority | High |
| Edit Description | Client with contact with a HCP in excess of 10 times in one day.  |
| Remedy | If contacts have been recorded which should not have been, delete these by selecting functions 🡪 contact and search for contacts using details provided on validation report. |

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| 3.05 - Client age >26 with CAMHS contact |

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| --- | --- |
| Priority | Medium |
| Edit Description | Client age at contact is greater than 25 years, but target population is for Child and Adolescent.  |
| Remedy | If date of birth requires update, go to ODS tab of client registration screen and change as required. If contact is incorrect or was of an administrative nature, select functions 🡪 contact and search for contact using details provided on validation report. Update contact to reflect correct details.  |

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| 3.06 - Client age <55 with Aged contact |

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| --- | --- |
| Priority | Medium |
| Edit Description | Client age at contact is less than 55 years, but target population is for Older Persons.  |
| Remedy | If date of birth requires update, go to ODS tab of client registration screen and change as required. If contact is incorrect or was of an administrative nature, select functions 🡪 contact and search for contact using details provided on validation report. Update contact to reflect correct details. |

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| 3.07 - Possible unreportable contact |

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| --- | --- |
| Priority | Medium |
| Edit Description | Possible unreportable contact. Data indicates this contact may have been administrative in nature.  |
| Remedy | Please verify contact meets criteria for a reportable contact. If contact is incorrect or was of an administrative nature, select functions 🡪 contact and search for contact using details provided on validation report and delete incorrect contact. |

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| --- |
| 3.08 - Date of birth incorrect |

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| --- | --- |
| Priority | High |
| Edit Description | Contact date, or other incorrect date entered instead of client date of birth.  |
| Remedy | If possible, attempt an estimate of date of birth in field 20 of contact forms data entry screen or adjust DOB in patient registration.If contact date is incorrect, select functions 🡪 contact and search for contact using details provided on validation report. Delete incorrect contact and if required insert correct contact details. |

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| 3.09 - Client present contacts >8hrs per day  |

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| --- | --- |
| Priority | High |
| Edit Description | Total duration of "client present" contacts on one day for a client is more than 8 hours on the one day.  |
| Remedy | If contacts have been recorded which should not have been, delete these by selecting functions 🡪 contact and search for contacts using details provided on validation report |

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| 3.10 - Client age at < 10 years, but not Child/Infant contact |

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| --- | --- |
| Priority | Medium |
| Edit Description | Client age at contact is less than 10 years, but program type is not CAMHS service .  |
| Remedy | If date of birth requires update, go to ODS tab of client registration screen and change as required. If contact is incorrect, select functions 🡪 contact and search for contact using details provided on validation report. Delete incorrect contact and if required insert correct contact duration as part of a new contact. |

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| 3.11 - Duplicate contact |

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| --- | --- |
| Priority | High |
| Edit Description | Client has >1 contact where the Contact Date/Time, Subcentre, Program, Contact Type, Service Medium, Service Location, Duration, Number Providing/Receiving Service and Service Recipient fields are identical.  |
| Remedy | If the same contact has been recorded twice by separate HCP’s delete one of the contacts by selecting functions 🡪 contact and search for contact using details provided on validation report. If this issue has been flagged because the date/time wasn’t entered correctly, update contact to include correct details.  |

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| --- |
| 3.12 - Contact with test client |

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| --- | --- |
| Priority | Medium |
| Edit Description | Contact with test client  |
| Remedy | Please log a request with the department to have these clients removed, include the ticket number in comments column of validation workbook to prevent these issues showing up again. Delete this contact by selecting functions 🡪 contact and search for contact using details provided on validation report.Delete all contacts with test clients.  |

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| --- |
| 3.13 - Clinician > 10 hrs contacts per day |

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| --- | --- |
| Priority | High |
| Edit Description | Clinician recording more than 10 hours of contacts in one day. |
| Remedy | If contact is incorrect or was of an administrative nature, select functions 🡪 contact and search for contact using details provided on validation report. Delete incorrect contact and if required insert correct contact duration(s) as new contact. |

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| --- |
| 3.14 - Client with contact > 20 times in one day |

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| --- | --- |
| Priority | Medium |
| Edit Description | Client with contact with a health service unit in excess of 20 times in one day. |
| Remedy | If contact(s) is incorrect or was of an administrative nature, select functions 🡪 contact and search for contact using details provided on validation report. Delete incorrect contact or update contact duration.  |

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| 3.15 - Possible Community Contact |

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| --- | --- |
| Priority | Low |
| Edit Description | Contact is recorded as a 'B' (unregistered client) using generic client details. Individual client details must be provided for each member of a group otherwise 'C' (community) type contacts recorded where appropriate. |
| Remedy | If contact is more appropriately recorded as a community contact, select functions 🡪 contact and search for contact using details provided on validation report. Delete incorrect contact and if required insert correct community contact as new contact. |

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| 3.16 – Large HCP number over low duration |

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| --- | --- |
| Priority | Medium |
| Edit Description | Single contact with duration less than 15 minutes, but with 15 or more HCP’s. |
| Remedy | Review contact. Select functions 🡪 contact and search for contact using details provided on validation report. Delete the incorrect contact and if required insert correct community contact as new contact for specified date. |

3.17 – Contact time recorded as 00:00 |

|  |  |
| --- | --- |
| Priority | Medium |
| Edit Description | The contact time should not be recorded as 00:00  |
| Remedy | Contact time should be recorded as either 11:59 or 00:01. Please amend |

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| --- |
| 3.18 – Contact recorded for subcentre ‘Workaround’ |

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| --- | --- |
| Priority | High |
| Edit Description | A contact has been recorded for a consumer in a subcentre called ‘workaround’  |
| Remedy | If a workaround subcentre has been created then any data entered against this subcentre should be deleted as soon as the error that necessitated the workaround is actioned. There should not be any contacts attached to this subcentre. |

## Edit Type: Duplicate Client

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| --- |
| 4.01 - Dup Client: Recent Registration - Name/DoB/Sex  |

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| --- | --- |
| Priority | High |
| Edit Description | A recently registered client shares the same surname, first initial, date of birth and sex, as an existing client.  |
| Remedy | In the registration screen, verify that client details for both clients are correct. If it is a duplicate of an existing client, please log an infra to have the state-wide UR’s merged.  |

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| --- |
| 4.02 - Dup Client: Recent Registration - Medicare |

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| --- | --- |
| Priority | High |
| Edit Description | A recently registered client shares the same Medicare number and Medicare suffix as an existing client.  |
| Remedy | In the registration screen, verify that client details for both clients are correct. If it is a duplicate of an existing client, please log an infra to have the state-wide UR’s merged. |

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| --- |
| 4.03 - Dup Client: Recent Registration – Pension / DoB |

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| --- | --- |
| Priority | High |
| Edit Description | A recently registered client shares the same pension number and date of birth as an existing client.  |
| Remedy | In the registration screen, verify that client details for both clients are correct. If it is a duplicate of an existing client, please log an infra to have the state-wide UR’s merged. |

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| --- |
| 4.04 - Dup Client: Recent Activity - Name/DoB/Sex  |

|  |  |
| --- | --- |
| Priority | High |
| Edit Description | An existing client who has been active recently, shares the same surname, first initial, date of birth and sex, as another existing client.  |
| Remedy | In the registration screen, verify that client details for both clients are correct. If it is a duplicate of an existing client, please log an infra to have the state-wide UR’s merged.  |

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| 4.05 - Dup Client: Recent Activity - Medicare |

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| --- | --- |
| Priority | High |
| Edit Description | An existing client who has been active recently, shares the same Medicare number and Medicare suffix as another existing client.  |
| Remedy | In the registration screen, verify that client details for both clients are correct. If it is a duplicate of an existing client, please log an infra to have the state-wide UR’s merged. |

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| --- |
| 4.06 - Dup Client: Recent Activity – Pension / DoB |

|  |  |
| --- | --- |
| Priority | High |
| Edit Description | An existing client who has been active recently, shares the same pension number and date of birth as another existing client.  |
| Remedy | In the registration screen, verify that client details for both clients are correct. If it is a duplicate of an existing client, please log an infra to have the state-wide UR’s merged. |

## Edit Type: ECT

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| 5.01 - No ECT diagnosis |

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| Priority | Medium |
| Edit Description | No ECT diagnosis recorded. |
| Remedy | Navigate to ECT course treatment screen, search for client and select appropriate course for the treatment date in question. Select Options 🡪 Diagnosis and complete all required fields.  |

## Edit Type: Episodes

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| --- |
| 6.01 - Admission episode closed but admission open |

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| --- | --- |
| Priority | Medium |
| Edit Description | Inpatient/CCU/PARC/SECU episode closed but the admission is not.  |
| Remedy | If it looks like it has been closed on CMI log CMI/ODS sync issue ticket and make note of this in the response column. |

|  |
| --- |
| 6.02 - Admission episode created no admission details |

|  |  |
| --- | --- |
| Priority | Medium |
| Edit Description | Inpatient/CCU/PARC/SECU episode created however there are no admission details.  |
| Remedy | If it looks like it has been closed on CMI log CMI/ODS sync issue on infra and make note of this in the response column. |

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| --- |
| 6.03 - Inpatient episode LOS > 1 year |

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| --- | --- |
| Priority | Medium |
| Edit Description | Client admitted to inpatient unit for more than 1 year.  |
| Remedy | Navigate to admission screen and search for client to check whether inpatient episode is accurate, update where required.  |

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| --- |
| 6.04 - Comm episode no contacts last 120 days |

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| --- | --- |
| Priority | High |
| Edit Description | Open community episode with no contacts recorded in the last 120 days. NOCC protocol requires a case to be closed if there has not been any contact for 120 days. |
| Remedy | Firstly, verify that episode start and end dates are accurate within CMI by navigating to functions 🡪 case summary. If dates are accurate, verify with clinical manager whether there have been any contacts within the last 120 days and enter these. If no contacts within that time the episode should be closed.  |

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| --- |
| 6.05 - Admission episode with test client |

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| --- | --- |
| Priority | High. |
| Edit Description | Admission episode with test client.  |
| Remedy | Navigate to functions 🡪 admission. Select most recent admission event within the admission and delete. Continue to delete the most recent event until all admission events have been removed. Log CMI/ODS request to have case deleted for test client.  |

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| --- |
| 6.06 - New comm episode no contacts |

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| --- | --- |
| Priority | Medium |
| Edit Description | New Community episode opened (in last 6-12 months) but no contacts have been recorded.  |
| Remedy | Firstly, verify that episode start and end dates are accurate within CMI by navigating to functions 🡪 case summary. If dates are accurate, verify with clinical manager whether there have been any contacts since episode start and enter these. Otherwise delete episode or update episode details with correct episode closure date. |

|  |
| --- |
| 6.07 - Episode with test client |

|  |  |
| --- | --- |
| Priority | Medium |
| Edit Description | Episode with test client  |
| Remedy | Delete all admitted or residential placements (see above for details on how to do this) and then navigate to functions 🡪 case summary. Search for test client, re-open case if required then delete all episodes starting with most recent. Log CMI/ODS request to have case deleted for test client. |

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| --- |
| 6.08 - Residential/PARC episode with LOS 1 hr |

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| --- | --- |
| Priority | High |
| Edit Description | Residential/PARC episode with length of stay less than 1 hr. |
| Remedy | Navigate to admission screen and search for client to check whether inpatient episode is accurate, update where required. |

## Edit Type: Missing Diagnosis

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| --- |
| 7.01 - Ongoing community case with no diagnosis recorded in last 12 mths |

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| --- | --- |
| Priority | Medium |
| Edit Description | Client with an ongoing community case, with no diagnosis recorded within the last 12 months, as at the end of the reporting period.  |
| Remedy | Navigate to functions 🡪 diagnosis, search for client, select relevant episode and record diagnosis, taking care to **ensure diagnosis date is within episode date range.**  |

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| --- |
| 7.02 - Ended admitted episode with no diagnosis recorded |

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| --- | --- |
| Priority | High |
| Edit Description | Clients with an ended admitted episode with no separation diagnosis recorded. Separation diagnoses must be entered by the 10th day of the second month following separation. |
| Remedy | Navigate to functions 🡪 diagnosis, search for client, select relevant admitted episode and record diagnosis, taking care to ensure diagnosis date corresponds with separation date.  |

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| --- |
| 7.03 - Started community case with no diagnosis recorded |

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| --- | --- |
| Priority | Medium |
| Edit Description | Clients with a new community case with no diagnosis recorded. A community diagnosis is to be added within 4 weeks of the end of the month of the episode start.  |
| Remedy | Navigate to functions 🡪 diagnosis, search for client, add diagnosis, taking care to ensure diagnosis date corresponds with start date.  |

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| --- |
| 7.04 - Ended community case with no diagnosis recorded |

|  |  |
| --- | --- |
| Priority | Medium |
| Edit Description | Client with a closed community case, with no diagnosis recorded at case end.  |
| Remedy | Navigate to functions 🡪 diagnosis, search for client, add diagnosis, taking care to ensure diagnosis date corresponds with case closure date. |

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| --- |
| 7.05 - Open resid/SECU episode with no diagnosis recorded |

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| --- | --- |
| Priority | High |
| Edit Description | Client with an open resid/SECU episode with no diagnosis recorded. A admission diagnosis is to be added by the 6th week of the end of the admission month. |
| Remedy | Navigate to functions 🡪 diagnosis, search for client, select relevant residential placement and record diagnosis, taking care to ensure diagnosis date corresponds with case start.  |

## Edit Type: Compulsory Notification Persons and Nominated Persons (CN & NP)

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| --- |
| 8.01 - Address details of nominated person is incomplete |

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| --- | --- |
| Priority | Low |
| Edit Description | Address details of nominated person is incomplete/invalid/missing. |
| Remedy | Navigate to functions 🡪 client registration, search for client, select compulsory notification tab, select CN person and update details as required. If unable to update, end date the CN person as all CN persons must have an address on CMI. |

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| --- |
| 8.02 - Name of nominated person is incomplete |

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| --- | --- |
| Priority | High |
| Edit Description | Name of nominated person is incomplete/invalid/missing. |
| Remedy | Navigate to functions 🡪 client registration, search for client, select compulsory notification tab, select CN person and update details as required. |

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| --- |
| 8.03 - Preferred method of contact for compulsory notification person incomplete |

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| --- | --- |
| Priority | Medium |
| Edit Description | Contact details for notified persons preferred method of contact are incomplete/invalid/missing. Issues meet one of the following criteria:Preferred method of contact is….* Letter but address details are incomplete/invalid/missing
* Home phone but details are incomplete/invalid/missing
* Mobile phone but details are incomplete/invalid/missing
* Work phone but details are incomplete/invalid/missing
* Email but details are incomplete/invalid/missing
 |
| Remedy | Navigate to functions 🡪 client registration, search for client, select compulsory notification tab, select CN person and update details as required or end date the CN if unable to update an address. Note: The system will record notified persons details against the CMI campus which his currently logged in. Ensure you are logged in to the correct CMI campus when completing these details.  |

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| --- |
| 8.04 - Client is age >16 but CN Parent |

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| --- | --- |
| Priority | High |
| Edit Description | Notified person is listed as Parent but the client was over 16 years of age at the time, so Parent is no longer valid. |
| Remedy | Verify with clinician whether parent listed under compulsory notification meets criteria for a carer under the mental health act, if yes navigate to functions 🡪 client registration, search for client, select compulsory notification tab, select CN parent and change to carer not parent as required. If the person does not meet the criteria to be a carer you will need to end-date the compulsory notification. |

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| --- |
| 8.05 - Client turned 16 but CN Parent still active |

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| --- | --- |
| Priority | High |
| Edit Description | Client NP was listed as Parent; client has since turned 16 so Parent is no longer valid. |
| Remedy | Verify with clinician whether parent listed under compulsory notification meets criteria for a carer under the mental health act, if yes navigate to functions 🡪 client registration, search for client, select compulsory notification tab, select CN parent, and change to carer not parent as required. If the person does not meet the criteria to be a carer you will need to end-date the compulsory notification. |

## Edit Type: Program/Subcentre setup

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| 9.01 - Prog/Subcentre setup |

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| --- | --- |
| Priority | Medium |
| Edit Description | Program or subcentre setup does not meet DH reporting requirements.  |
| Remedy | Please update program, subcentre or program/subcentre maintenance based on the description in the report. More details about DH program/subcentre maintenance can be found on the Mental Health Data website at: [Bulletins and Program Management Circulars (PMC) for public mental health services | health.vic.gov.au](https://www.health.vic.gov.au/research-and-reporting/bulletins-and-program-management-circulars-pmc)Otherwise email MHDReporting@health.vic.gov.au for more information.  |

## Edit Type: Seclusion / Restraint

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| 10.01 - Seclusion/Restraint recorded outside admission function |

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| --- | --- |
| Priority | Medium |
| Edit Description | Event with incomplete admission details (eg. Client was admitted at time of seclusion/restraint but no admission details were included). Indicates that seclusion or restraint was recorded outside of the admission function.  |
| Remedy | Check to see whether admission and discharge times are accurate. If admission times are accurate, please re-enter seclusion/restraint event using the Functions 🡪 Client 🡪 Admission 🡪 Options 🡪 Bodily Restraint/Seclusion function.If admission times are inaccurate, re-enter correction admission episode date/time. |

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| 10.02 - Physical only restraint > 4 hours duration |

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| --- | --- |
| Priority | High |
| Edit Description | Physical only restraint recorded of more than 4 hours duration.  |
| Remedy | Please check the accuracy within Functions🡪Bodily restraint. Delete and re-enter accurate date/times where required. |

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| 10.03 - Restraint/seclusion episode not authorized by a psychiatrist/medical officer/senior nurse |

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| --- | --- |
| Priority | Medium |
| Edit Description | Restraint/seclusion episode which was not authorized by a psychiatrist/medical officer/senior nurse.  |
| Remedy | Please verify that HCP reported as authorising the restraint/seclusion is correct, and has their correct discipline recorded against them within the HCP table. |

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| --- |
| 10.04 - Physical Restraint – Prone restraint more than 3 mins |

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| --- | --- |
| Priority | Medium |
| Edit Description | Prone restraint identified as longer than 3 minutes  |
| Remedy | This is also notifiable to the OCP. Check duration of prone restraint and amend if required. |

## Edit Type: Orders

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| --- |
| 11.01 - Order expired but not end dated |

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| --- | --- |
| Priority | Medium |
| Edit Description | Order expired but not end dated.  |
| Remedy | Please check that orders have been entered correctly for the client. If the order has expired, please enter expiry within functions🡪Client🡪Compulsory Orders🡪Expire |

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| --- |
| 11.02 - Order with test client |

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| --- | --- |
| Priority | Medium |
| Edit Description | Order with test client - please delete. Use the training database for these instances, not the live system. |
| Remedy | Please log a request with the department to have these clients removed, include the infra number in comments column of validation workbook to prevent these issues showing up again. |

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| --- |
| 11.03 - Order HCP name not valid |

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| --- | --- |
| Priority | Low |
| Edit Description | Order has default HCP name. Please enter the actual HCP details. |
| Remedy | Please enter the actual HCP details or verify reason for use of default HCP within validation workbook. |

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| 11.04 - Incorrect order dates |

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| --- | --- |
| Priority | Medium |
| Edit Description | Assessment Order receipt date is in accurate. |
| Remedy | Go to Functions 🡪Client 🡪 Compulsory Treatment Orders🡪Enter client details and check relevant Assessment Order. If the Assessment Order start date, or the Assessment Order expiry date is inaccurate, please delete and re-enter correct dates. If unable to due to subsequent orders placed by other services, please log a request. |

## Edit Type: HoNOS

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| --- |
| 12.01 - Missing HoNOS - 91 Day Review |

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| --- | --- |
| Priority | Medium |
| Edit Description | HoNOS measure expected to be recorded - 91 Day Review.  |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure if done within the expected timeframe. If not done ask clinical staff to complete and enter as a discretionary review task |

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| --- |
| 12.02 - Missing HoNOS - Admission to Inpatient |

|  |  |
| --- | --- |
| Priority | Medium |
| Edit Description | HoNOS measure expected to be recorded - Admission to Inpatient. |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure if completed within timeframe |

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| --- |
| 12.03 - Missing HoNOS - Admission to Residential |

|  |  |
| --- | --- |
| Priority | Medium |
| Edit Description | HoNOS measure expected to be recorded - Admission to Residential. |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure if completed within timeframe |

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| --- |
| 12.04 - Missing HoNOS - Discharge from Inpatient |

|  |  |
| --- | --- |
| Priority | Medium |
| Edit Description | HoNOS measure expected to be recorded unless the admission is 3 days or less. In this instance discharge outcome measures are not required. |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure if completed within timeframe |

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| --- |
| 12.05 - Missing HoNOS - Discharge from Residential |

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| --- | --- |
| Priority | Medium |
| Edit Description | HoNOS measure expected to be recorded - Discharge from Residential.  |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure if completed within timeframe |

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| --- |
| 12.06 - Missing HoNOS - Discretionary Review |

|  |  |
| --- | --- |
| Priority | Medium |
| Edit Description | HoNOS measure expected to be recorded - Discretionary Review. |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure. |

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| --- |
| 12.07 - Missing HoNOS - Intake to Community |

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| --- | --- |
| Priority | Medium |
| Edit Description | HoNOS measure expected to be recorded - Intake to Community. |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure if completed |

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| --- |
| 12.08 - Missing HoNOS - Discharge from Community |

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| --- | --- |
| Priority | Medium |
| Edit Description | HoNOS measure expected to be recorded - Discharge from Community unless the ambulatory episode is 14 days or less. |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure if completed. |

## Edit Type: Phase of Care

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| --- |
| 13.01 - Missing PoC - Admission to Inpatient |

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| --- | --- |
| Priority | Medium |
| Edit Description | PoC measure expected to be recorded - Admission to Inpatient. |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure if completed within timeframe |

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| --- |
| 13.02 - Missing PoC - Admission to Residential |

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| --- | --- |
| Priority | Medium |
| Edit Description | PoC measure expected to be recorded - Admission to Residential. |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure if completed within timeframe |

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| --- |
| 13.03 - Missing PoC - Discretionary Review |

|  |  |
| --- | --- |
| Priority | Medium |
| Edit Description | PoC measure expected to be recorded - Discretionary Review. |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure. |

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| --- |
| 13.04 - Missing PoC - 91 Day Review |

|  |  |
| --- | --- |
| Priority | Medium |
| Edit Description | PoC measure expected to be recorded - 91 Day Review.  |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure if done within the expected timeframe. If not done ask clinical staff to complete and enter as a discretionary review task |

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| --- |
| 13.05 - Missing PoC - Intake to Community |

|  |  |
| --- | --- |
| Priority | Medium |
| Edit Description | PoC measure expected to be recorded - Intake to Community. |
| Remedy | Please review Tasks for collection occasion specified and enter required Outcome Measure if completed |

## Submitting a request via Alemba

Several issues can’t be resolved locally and require intervention from the department. These require a request to be logged through Alemba

Issues can be logged at: https://ehvalembasm.prod.services/asm/core.aspx

## Further Questions

If you have any queries about the data validation process, any of the validation rules, accessing the data validation workbooks or any other questions. Please email these to MHDReporting@health.vic.gov.au.