



Issue 48: 04 October 2002

Attention: Health Information Managers - For Action
VAED/ESIS / VEMD Submission Officers - For Action
VAED/ESIS / VEMD Software Suppliers - For Action

The Health Data Standards and Systems Unit has produced Issue 48 of the Health Data Standards & Systems (HDSS) Bulletin in electronic format only. The Bulletin has been posted onto our website at <http://hdss.health.vic.gov.au/bulletin/48-041002.htm> and can be viewed as both a browseable and downloadable file. To view the subject index for every edition of the bulletin, please refer to <http://hdss.health.vic.gov.au/bulletin/index.htm>.

Bulletin 48 provides information regarding:

- HDSS Forum
- Request for Proposals for Revisions for 1 July 2003
- Hospital Code Table Updates (VAED, VEMD, ESIS)
- Availability of the VAED Manual
- Changes to the VAED Manual
- WIES Report
- PRS/2 Technical Problems
- Clarification of Edit 452
- Health Insurance Fund Update
- EDIS Review Committee Meeting

Please download the document from our web site. If you do not have Internet access, please contact the HDSS Help Desk to obtain a hard copy of this Bulletin. It is essential that this document be distributed to relevant staff in your organisation.

Yours faithfully,

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Global Update

48.1 HDSS Forum

HDSS will be holding the Forum for all three Victorian Hospital Data Collections, on Monday 25 November 2002. Details of the forum are:

Date: Monday 25 November 2002

Venue: Mary Aikenhead Conference Centre.

St Vincent's Hospital, 41 Victorian Parade Fitzroy 3065

Structure: The forum will be divided into three parts, as was the 2001 HDSS Forum.

Morning Session:

Presentation & Discussion of Victorian Emergency Minimum Dataset (VEMD)

Presentation & Discussion of Elective Surgery Information System (ESIS)

Afternoon Session:

Presentation & Discussion of Victorian Admitted Episode Dataset (VAED)

Full details regarding times and registration forms will be forwarded with the *Proposals for Revisions for 1 July 2003* documents.

48.2 Request for Proposals for Revisions for 1 July 2003

A request for Proposals for Revisions to the Victorian Hospital Collections (VAED, ESIS and VEMD) for 1 July 2003 was distributed on Wednesday 25 September 2002.

The proforma for submitting proposals for any of the data collection can be downloaded from the HDSS Website at <http://hdss.health.vic.gov.au/> or emailed out by contacting the HDSS HelpDesk. The deadline for the acceptance of proposals is 16 October 2002.

The Time frame for the Revision process is as follows:

Date	Action
25 September 2002	Request for Proposals for Revisions to Victorian Hospital Collections for 1 July 2003 distributed.
16 October 2002	Deadline for acceptance of Proposals for Revisions for 1 July 2003
4 November 2002	<i>Proposals for Revisions for 1 July 2003</i> documents for VAED, ESIS and VEMD distributed.
25 November 2002	HDSS Forum held to discuss proposed revisions to VAED, ESIS and VEMD.
End of February 2003	<i>Final Specifications for Revisions for 1 July 2003</i> documents for VAED, ESIS and VEMD to be distributed

48.3 Hospital Code Table Updates (VAED, VEMD, ESIS)

An updated version of the Hospital Code Table file, including the details below, has been posted onto the HDSS Website:

<http://hdss.health.vic.gov.au/reffiles/index.htm>

The Excel file contains multiple worksheets that categorise public, private and Non-Victorian (new addition) hospitals, in both alphabetical and numerical order.

New Hospital

The following hospital has recently been registered:

Name	PRS/2 Code	VAED Code	Date Effective
Bayswater Day Procedure Centre	H19	8190	13 September 2002

Hospital Closure

For your information the following hospital has closed, effective 11 September 2002:

Name	PRS/2 Code	VAED Code	Date Effective
Nenagh Private Hospital	P98	6980	11 September 2002

Victorian Admitted Episodes Dataset (VAED)

48.4 Availability of the VAED Manual

The *VAED Manual 12th Edition* (previously known as the *PRS/2 Manual*) is currently being printed and sent to hospitals. Only one copy of the *VAED Manual* is being provided to each hospital and software supplier. Please ensure that all relevant staff in your hospital or organisation have access to it, or are able to copy sections relevant to their work. An electronic version of this manual has been placed on the internet at:

<http://hdss.health.vic.gov.au/vaed/index.htm>

You will notice that sections 6 and 7 are not yet available. They will be mailed to you within the next month.

Additional features of the *VAED Manual* include:

- Section 2: A full list of derived items included in the VAED.
- Section 3: For each data item, the inclusion of a 'Related Items' section to accommodate cross-referencing with the other sections of the Manual.
- Section 4: Additional Code Lists including Hospital Code Tables for non-Victorian hospitals and Notifiable Infectious Disease ICD-10-AM Codes.
- Section 8: Addition of edit numbers that relate to Edit Tables, listed under each Edit Table. Creation of an 'Edit Matrix', which contains all Edit Messages for Records. The aim of the Edit Matrix is to provide a reference as to which data items (in combination with others) are affected by the Edits.
- Entire manual: Extensive cross-referencing within and between sections of the Manual.

The VAED User Manual, 12th Edition for 1 July 2003 is available for viewing on the HDSS Website at: <http://hdss.health.vic.gov.au/vaed/2002-03/manual/index.htm>

If you have any feedback regarding the VAED Manual, please contact Catherine Perry on 9616 6928, or via email on Catherine.Perry@dhs.vic.gov.au.

48.5 Changes to the VAED Manual

Listed below are changes from the *PRS/2 Manual 11th Edition* to the *VAED Manual 12th Edition*, which have not previously been notified in the Specifications, Errata, or HDSS Bulletins.

Accommodation Type 4

Descriptor is now: In the Home (Hospital - HITH)(Rehabilitation - RITH)

Reporting guide is now: Approved care in accommodation outside the hospital.

Includes:

- Under the Hospital in the Home (HITH) program, if the public hospital's Health Service Agreement specifies the hospital is participating in this program. HITH services can only be provided to public, private, DVA, TAC and WorkCover patients. Refer to: Section 4: *Hospital in the Home Program: Participating Hospitals*.
- Conducted by a Hospital with a designated Rehabilitation Unit (Level 2 or 3), or Geriatric Evaluation and Management (GEM) Program, where the providing care in the home has been agreed to by the Sub-Acute Unit.

Rationale: To widen the use of the Accommodation Type for Care Types other than 4 *Other care (Acute) including Qualified Newborns*.

Admission Date and Admission Time: Admission from Non-admitted Services

The Reporting Guide for these two data items previously had a section called Admission From Emergency Department. This has been replaced with a section called Admission from Non-admitted Services, as displayed below:

Non-admitted (emergency or outpatient) services provided to a patient who is subsequently classified as an admitted patient shall be regarded as part of the admitted episode. Any occasion of service should be recorded and identified as part of the admitted patient's episode of care. For example, when a patient is admitted from the Emergency Department, then the admission time is the time treatment was started in the Emergency Department. That is, when the patient was first treated by a nurse or doctor, whichever comes first, rather than the time the decision is taken to admit the patient. In this context, 'treatment' includes commencement of baseline observations by a nurse and assessment of the patient by a doctor.

Admission Time and Separation Time: Statistical Separations

The Reporting Guide for these two data items includes a section on statistical admissions and separations respectively. This has been amended to make the intent clear; where the care is continuous (possibly in another ward/location) that entire period should be captured in one of the episodes. There should not be a period between the statistical separation and subsequent admission that is not accounted for, as noted below. HDSS will investigate the possibility of applying edits between episodes for the next financial year.

The Admission Time must be ~~at least~~ one minute later than the Separation Time of the preceding episode (for example, if Separation Time of the earlier episode was made to be 1200, Admission Time of the new episode would be 1201).

Care Type: Palliative Care

Reporting guide is now:

- A patient who is admitted to a Palliative Care Program.
- Public hospitals: Code 8 may only be used only on admission, if the patient receives palliative care under the supervision of a palliative care specialist or physician. That is, public hospitals may not change a patient to palliative Care Type following another Episode of Care; the original episode must continue. This program excludes Nursing Home Type/Non-Acute patients.
- Private hospitals: If the hospital operates a similar program and wishes to identify episodes of care using code 8, they may.

Rationale for change: Changes in the structure at DHS has resulted in funding for all admitted inpatient episodes being provided by the one division.

Palliative Care: Admission Type 8 and Separation Type 8

In line with the above change, the Reporting Guide for these two data items has been amended to include:

Public hospitals: Do not use code 8, as statistical separation and admission to Palliative Care Program is not allowed.

Reason for Critical Care Transfer

Codes: Receiving: X, Sending: Y *Specialty not available*

- Now includes patients transferred from any hospital to the Victorian Respiratory Support Service at the Austin and Repatriation Medical Centre (which operates specialised weaning beds for intensive care patients).

Edit 258: Sub-Acute: No Sub-Acute Record

Calls to the HDSS Helpdesk have resulted in the inclusion of the triggers for this edit being included in the Manual. Note that this is not a change to the edit, but a clarification of the programming of the edit.

Triggers for this edit are:

- If Care Type = 2, 6 or 7, Clinical Subprogram is not present.
- If Care Type = 9, E or F, Barthel Index on Admission is not present.
- If Care Type = 8, RUG ADL on Admission is not present.

Edit 408: Contract Role 'A' W/Out Proc Flag

Problem (has been amended to): The E2 Episode Record's Contract Role is A Contracting hospital and the Contract Type is not 6 Contract Type A(B), but the X2/Y2 Diagnosis Record does not include a Procedure Code with Contract Procedure Flag F or N.

Edit 455: Inconsist Newborn Transferred/Unqual Data

This edit has been amended. It is now triggered by Account Class on Separation (rather than Account Class), no longer checks Admission Source (which is checked by another edit), and checks Accommodation Type on Separation (rather than Accommodation Type).

Editing Table: Criterion for Admission, Age, Admission Type and Admission Source

Changes are underlined, as per HDSS Bulletin 47.5.

Age	Criterion for Admission	Admission Type	Admission Source
<2 days	N <i>Qualified newborn</i>	Y <i>Newborn</i>	Y <i>Birth episode</i>
<2 days	U <i>Unqualified newborn</i>	Y <i>Newborn</i>	Y <i>Birth episode</i>
<10 days	N <i>Qualified newborn</i> B <i>Day Only Bands</i> C <i>Type C</i>	Y <i>Newborn</i>	C <i>Emergency episode</i> T <i>Transfer</i> Z <i>Other formal admission source</i>
<10 days	U <i>Unqualified newborn</i>	Y <i>Newborn</i>	<u>C <i>Emergency episode</i></u> T <i>Transfer</i> <u>Z <i>Other formal admission source</i></u>

48.6 IES Report

All known problems notified to DHS, with the IES Report generated by PRS/2, have been rectified.

If hospitals identify any values that do not match in-house counts, please contact the HelpDesk immediately.

The Department intends to commence distribution of the monthly consolidated IES Report, received via password protected email, next week.

48.7 PRS/2 Technical problems

A programming error in the Trailer Records has been identified. The Prisoner Account class JP is not being counted in the compensable patient days.

48.8 Clarification of Edit 452

There have been a number of calls to the HDSS Help Desk, indicating some confusion with Edit 452. Edit 452 is triggered when a string of ICD-10-AM Diagnosis Codes includes both Place of Occurrence and Activity Codes without the appropriate External Cause Code requiring assignment of both these codes (V01-Y34). The following list provides clarification for the assigning of Place of Occurrence and Activity Codes:

- External Cause Codes (V01-Y34) requires assignment of both Place of Occurrence (Y92) and Activity Codes (U50-U73).
- External Cause Codes (Y35-Y89) only requires assignment of a Place of Occurrence Code (Y92).
- External Cause Codes (Y90-Y91) do not require assignment of either a Place of Occurrence (Y92) or Activity Code (U50-U73).

48.9 Health Insurance Fund Update

The Health Insurance Fund, Transition Benefit Fund Pty Ltd, has closed.

Victorian Emergency Minimum Dataset (VEMD)

48.10 EDIS Review Committee Meeting

The next EDIS Review Committee meeting is scheduled as below:

Date: Wednesday 23 October 2002

Time: 8:30am

Where: 17th Floor Conference Room, 555 Collins Street, Melbourne.

Issues discussed at the meeting will include the Proposals for Revisions to VEMD for 1 July 2003.

Any hospital wishing to have a representative attend the meeting should contact the Leanne Daking on 03 9616 8022 or leanne.daking@dhs.vic.gov.au to confirm attendance and receive the agenda and minutes from previous meetings.

HDSS Bulletin by Dataset

This table lists HDSS Bulletins released in the current and prior financial year only, and identifies the dataset to which they relate. All previous Bulletins are on the website at:

<http://hdss.health.vic.gov.au/bulletin/index.htm>

If you are unable to access the website, please contact the HDSS HelpDesk to request any previously released HDSS Bulletins.

HDSS Bulletin No:	Date released:	Dataset:			
		VAED / PRS/2	VEMD	ESIS	Other info
Bulletin 24	30 July 2001	✓	✓	✓	✓
Bulletin 25	03 September 2001		✓		
Bulletin 26	05 September 2001	✓			✓
Bulletin 27	07 September 2001	✓			
Bulletin 28	14 September 2001			✓	
Bulletin 29	01 November 2001	✓	✓		
Bulletin 30	09 January 2002	✓			✓
Bulletin 31	18 February 2002	✓	✓	✓	
Bulletin 32	14 March 2002	✓	✓	✓	✓
Bulletin 33	03 April 2002	✓	✓	✓	✓
Bulletin 34	19 April 2002	✓			
Bulletin 35	26 April 2002	✓			
Bulletin 36	22 May 2002	✓			
Bulletin 37	28 May 2002	✓	✓	✓	✓
Bulletin 38	21 June 2002	✓	✓	✓	✓
Bulletin 39	26 June 2002	✓			✓
Bulletin 40	28 June 2002	✓			
Bulletin 41	04 July 2002	✓	✓		✓
Bulletin 42	12 July 2002	✓	✓	✓	✓
Bulletin 43	19 July 2002	✓		✓	
Bulletin 44	6 August 2002	✓	✓	✓	✓
Bulletin 45	13 August 2002	✓	✓	✓	
Bulletin 46	23 August 2002	✓		✓	
Bulletin 47	12 September 2002	✓	✓	✓	✓
Bulletin 48	04 October 2002	✓	✓	✓	✓

HDSS Contact Details

The Health Data Standards and Systems (HDSS) Unit of the Metropolitan Health and Aged Care Division manages three Victorian hospital data collections:

- Victorian Admitted Episodes Dataset (VAED)
- Victorian Emergency Minimum Dataset (VEMD)
- Elective Surgery Information System (ESIS).

The *Health Data Standards and Systems Bulletin*, produced on an ad hoc basis by HDSS, provides:

- Answers to common questions recently directed to the HDSS HelpDesk,
- Directives for implementation of revisions to data collection specifications (VAED, VEMD, ESIS), including notification of amendments to specified data collection reference tables,
- Feedback on selected data quality studies undertaken, and
- Information on upcoming events.

HDSS Bulletin Web Site <http://hdss.health.vic.gov.au/bulletin/index.htm>

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