

Bulletin

Health Data Standards and Systems

Issue 87: 29 June 2005

Attention: Health Information Managers - For action
VAED/ESIS/VEMD Submission officers - For action
VAED/ESIS/VEMD Software suppliers - For action
Emergency Department Directors - For action

This edition of the Health Data Standards & Systems (HDSS) Bulletin has been published in electronic format only. It has been posted onto our website at <http://www.health.vic.gov.au/hdss/bulletin/87-290605.pdf> and can be viewed as a downloadable file. To view the subject index for every edition of the bulletin, please refer to: <http://www.health.vic.gov.au/hdss/bulletin/bulindex.htm>

This edition of the Bulletin provides information regarding:

- Hospital code changes
- DHS circular update
- AIMS update
- Addenda and Errata to the *Specification for revisions to PRS/2 and the VAED for 1 July 2005*
- VEMD Editor and file naming convention
- Requirements for the first load of new format ESIS data

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

87.1 Hospital Code Table Updates

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 hospitals, in both alphabetical and numerical order.

Hospital Name Change

Previous Name	New Name	Campus code	Effective date
Box Hill Gardens Day Surgery	Epworth Eastern Hospital	7370 (Same as previous)	1 Jun 2005

87.2 DHS Circular Update

Please note that the following circulars have been released, and can be found at: <http://www.health.vic.gov.au/hospitalcirculars/>

Hospital Circular 6/2005

Subject:

1. Accounting Treatment of Bond Retention, Bond Interest and Accommodation Charges

Hospital Circular 13/2005

Subject:

1. Accounting Treatment of Bond Retention, Bond Interest and Accommodation Charges from 1.7.2005

Hospital Circular 7/2005

Subject:

1. Updated National Private Patient Claim Form

Hospital Circular 9/2005

Subject:

1. Designated Officers of Hospitals

Hospital Circular 10/2005

Subject:

1. Highly Specialised Drugs Program

Hospital Circular 11/2005

Subject:

1. Commonwealth Government 2005 Aged Care Approvals Round - Public Sector Endorsement Process

Hospital Circular 12/2005

Subject:

1. Public Hospital fees - Changes
 - (i) Private Admitted Patients - overnight stays, same day patients and hospital outreach service patients
 - (ii) Compensable Admitted Patients (excluding WorkCover and TAC recipients)

Hospital Circular 8/2005

Subject:

1. Impact of a new TAC contract with DHS for the provision of public hospital services to TAC claimants.

Hospital Circular 13/2005

Subject:

1. To advise of changes required on Circular 6/2005 due to revision of account codes for 2005/06.

Hospital Circular 14/2005

Subject:

1. Urgent Action – Do you have the new medical certificate of cause of death.

87.3 AIMS Update

Revisions to AIMS data collections for 2005-06

A summary of the revisions to AIMS data collections in 2005-06 and the business justification for these changes is has been published in electronic format on the AIMS website <http://health.vic.gov.au/aims>. Can you please ensure that all relevant staff in your organisation are advised of these changes.

Development of the revised AIMS on-line entry system for 2005-06 is progressing and will be released early August 2005. Version 13.0 of the AIMS Public Hospital User Manual will be released on the AIMS website over the next four weeks.

Please contact the AIMS Help Desk on 9616 8595 for any queries regarding the new reporting requirements.

AIMS 2004-05 End of Financial Year

To ensure the smooth completion of the 2004-05 reporting year, agencies should ensure all data, including the month of June, are complete and accurate before the returns are closed for the year. All data should be submitted and verified by 17 September 2005.

Hospitals can view data submitted on the AIMS on-line entry system using the Hospital Activity reports available under the Hospital Reporting folder. Where an error is detected, a correction should be submitted. Please remember that all data submission is reflected on the Hospital Activity reports the following day.

Victorian Admitted Episodes Dataset (VAED)

87.4 Addenda and Errata to the Specifications for revisions to VAED 1 July 2005

87.4.1 Funding Arrangement

The table printed on page 54 of the Appendix document is missing Account Classes PA, PB, PC and PD. The table should read as follows:

Funding Arrangement: Elective Surgery Access Service

If Funding Arrangement is 6 *Elective Surgery Access Service*, then the following fields must contain the codes shown below. Only fields that cannot contain the full code set are listed.

Field	Valid codes
E2 Episode Record	
Admission Type	L
Admission Source	T, B, N, A, H
Account Class	MP, PA, PB, PC, PD, PE, PF, VX, WC, TA, AS, CL, OO
Qualification Status	X
Carer Availability	Space
Care Type	4
Criterion for Admission	B, O, E, C
Mental Health Legal Status	9

Edit 491 Incompat Fields for ESAS

87.4.2 Rehabilitation in the home edit amendments

Due to the removal of Care Type J Rehabilitation in the Home (RITH):

- Edit 589 **Care Type J, not appr for Rehab Home** will be deleted.
- Edit 598 **Same Day Rehabilitation: Not in Scope** will be amended to remove Care Type J.

87.4.3 Reason for Critical Care Transfer

After consultation with hospitals and software suppliers, from 1 July 2005, hospitals are no longer required to report *Reason for Critical Care Transfer*. These data are no longer collected by the VAED. For hospitals currently reporting *Reason for Critical Care Transfer*, please report a space for separations on or after 1 July 2005.

The *Critical Care Inter-Hospital Transfer (CCIHT) Program: Participating Hospitals* list will be removed from Section 9 of the VAED Manual. Removing the list will mean that no hospitals will appear to be 'approved' and therefore, if a value is reported in this field, the record will be rejected with edit 524 *CCIHT not approved*. This does not remove approval for hospitals currently on the list; it is merely a method to force consistency of data.

This data item will not be removed from the file specification for 2005-06, nor will edits be amended. Full removal will occur for 2006-07.

87.4.4 Transition Care

Transition Care is to be a newly funded program to be implemented in 2005-06. Only approved services will be able to report Admission Source B *Transfer from Transition Care bed based program*, Separation Mode B *Separation and Transfer to Transition Care bed based program*, and Separation Referral T *Referral to Transition Care home based program, arranged before discharge*.

At this stage, no hospitals have approved Transition Care services.

A new edit, edit 614, will be introduced which will reject records that contain any of the above codes unless the hospital is an approved service.

614 Transition Care codes, not approved service

Effect

REJECTION

Problem

The E2 Episode Record has Admission Source B *Transfer from Transition Care bed based program*, Separation Mode B *Separation and transfer to Transition Care bed based program*, or Separation Referral T *Referral to Transition Care bed based program*, arranged before discharge but the Hospital Campus does not have an approved Transition Care service.

Remedy

Check Admission Source, Separation Mode and Separation Referral, amend as appropriate and re-transmit the E2.

- If you believe the Hospital Campus is approved to report Transition Care codes, contact the HDSS Help Desk.

Refer to:

- Section 9: Code Lists: *Transition Care Services*

87.4.5 Private Hospital Psychiatric Outreach Services

From 1 July 2005, Private Hospitals with approval from the Commonwealth Department of Health and Ageing to provide psychiatric outreach services will be able to report Care Type 5x *Approved Mental Health Service or Psychogeriatric Program* with Accommodation Type 4 *In the Home (Hospital – HITH)*. Approved services will be listed in Section 9: *Approved Psychiatric Outreach Service* of the VAED manual.

An admitted episode is created at the commencement of treatment and remains open until treatment ceases. Days when a patient does not receive treatment should be reported as leave days. Visits to a patient in their home should not be reported to the VAED as individual episodes.

Edit 463 *Accom Type 4, Care Type Invalid* has been amended to allow Care Type 5x and Accommodation Type 4 to be a valid combination of data for approved services.

463 Accom Type 4, Care Type invalid

Effect

REJECTION

Problem

The E2 Episode Record's Accommodation Type is 4 *In the Home (Hospital – HITH)* and the Care Type is not 4 *Other care (Acute) including Qualified newborn*. For approved Private Hospitals (refer to Section 9: *Approved Psychiatric Outreach Service*), Care Type 5x *Approved Mental Health Service or Psychogeriatric Program* may be reported with Accommodation Type 4.

Remedy

Check Accommodation Type and Care Type, amend as appropriate and re-transmit the E2.

- If you believe the Hospital Campus is approved to report Care Type 5x and Accommodation Type 4, contact the HDSS Help Desk.

Refer to:

- Section 9: Code Lists: *Approved Psychiatric Outreach Service*.

87.4.6 Further information regarding the new Private Account Classes

Bed day fees for the three new private Account Classes, PW *Intensive Care Unit*, PX *Coronary Care Unit* and PY *High Dependency Unit*, have not been set. The Financial Strategy Unit will collect data from these Account Classes for analysis purposes only, before beginning negotiations with health funds and the Commonwealth.

The new Account Classes should only be used for private patients admitted to designated units in both public and private hospitals.

Hospitals will need to send these new Account Classes to the VAED, but use pre- 1 July 2005 Account Classes for billing purposes.

The new Account Classes are subject to the same rules governing use of existing Account Classes. The patient's Account Class as of midnight should be reported. For example, if a patient is in ICU but moves to another ward before midnight, then the PW Account Class is not reported.

Victorian Emergency Minimum Dataset (VEMD)

87.5 MS Access™ VEMD Editor

The latest version of the MS Access VEMD Version 9 Editor (1.0.6) is now available for download from:

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

The Editor for VEMD Version 10 (1.0.0) is due for release by 4 July 2005.

87.6 VEMD Version 10 extract naming convention

Every file submitted to the VEMD must be named as follows:

File Naming Convention	AAAABnna.txt
Where:	AAAA = Campus Code (for example: 1010)
	B = Version of the dataset (for example: 2005-06 is version 10 but only record the second character - '0')
	nn = Month of Transmission
	a = Data Submission Indicator (1 st submission 07a, 2 nd 07b)
Example:	
	1020007a.txt (<i>please zip the file before submission via e-mail 1020007a.zip</i>)

ie: For version 10 of the VEMD, the version identifier (the "B" character) is "0".

Elective Surgery Information System (ESIS)

87.7 Requirements for the First Load of New Format ESIS

On 3 June 2005 ESIS Sites and vendors were advised by email of the following.

With the introduction of the new format of ESIS data, HDSS advises the following submission timelines. First submission will be due by 21 July and must contain at least the following:

- All episodes unremoved as at 30 **April** 2005 (and all related patient records and intra-episode records) and
- All episodes (and related patient and intra-episode records) registered between 1 May 2005 and 30 June 2005

This extract would have an extract end date of 30 June 2005 (filename: 9999_05_06_30_001.zip)

If sites and vendors find it easier to also submit activity that has occurred since 30 June in the first submission, this will be handled by the system, provided the extract end date is correct. For example an extract with the above activity AND activity to 7 July would have an extract end date of 9999_05_07_07_001.zip).

As stated on previous occasions, in the normal course of business, all activity for a given month should be submitted by the tenth day of the following month.

To correct errors in extracts with an end date occurring in this month, hospitals will have until the 21st day of the following month. For example errors first identified as a result of processing extracts in 9999_05_08_14_012.zip (extract end date is 14 August 2005) should be corrected by 21 September 2005.

Note that HDSS has historically adopted a flexible approach to data quality and timeliness deadlines penalties in relation the introduction of new reporting requirements, and will continue to consider these circumstances when deciding whether to apply penalties.

87.8 Booking and Rescheduling of Admissions

In Bulletin 85, HDSS announced a new data item ('Scheduled Admission Date Identifier'). The reporting guide for the data item stated that:

'...Each SAD Identifier must be greater than the previous one for this episode where multiple bookings/cancellations are reported on the same day, because DHS will assume that the greatest SAD Identifier relates to the most recent booking....'

Discussion with sites and vendors indicates that it will in fact, not be necessary for the greatest SAD Identifier to relate to the latest 'Set SAD' event, and removing this constraint will simplify collection and data management. Where DHS processing needs to identify the most recent booking, it will be able to do so along the following lines:

- Where the latest 'Set SAD' event date contains only one 'Set SAD' event, then that 'Set SAD' is the most recent.
- Where the latest 'Set SAD' event date contains more than one 'Set SAD' event and one of them does not have a 'Reason SAD Changed' event, then that 'Set SAD' is the most recent.
- Where the latest 'Set SAD' event date contains more than one 'Set SAD' event and all of them have a 'Reason SAD Changed' event, then no booking is currently open, so there is no requirement to identify which 'Set SAD' event on this day is the most recent.

Data submitted as prescribed by the original specifications will be valid, but this relaxation of the business rule should also allow sites added flexibility in submission. This also means that edit S428 is no longer required.

The data item, and business rules affected by this, are reproduced below with deleted text ~~struck through~~ and added text boxed.

New Data Item

Scheduled Admission Date Identifier (New)

Specification

Definition An identifier that links a 'Set SAD' event to its 'Reason SAD Changed' event.

Label SAD_Identifier

Field size 10

Layout

XXXXXXXXXX

Leading zero filled, numeric characters only.

Reported in Intra Episode Table.

Reported for All 'Set SAD' and 'Reason SAD Changed' events.

Reported when A Scheduled Admission Date is set or changed.

Reporting guide Refer to the 'Bookings' business rules (section 4) for a comprehensive explanation of issues related to the reporting of the SAD Identifier.

A new SAD Identifier must be reported each time a 'Set SAD' event is reported for an episode. ~~Each SAD Identifier must be greater than the previous one for this episode where multiple bookings/cancellations are reported on the same day, because DHS will assume that the greatest SAD Identifier relates to the most recent booking.~~

Every 'Set SAD' event is linked to its 'Reason SAD Changed' event by the SAD identifier. On each occasion the SAD is changed, that identifier must be

recorded against the 'Reason SAD Changed' event.

The SAD identifier must be unique to each pair of bookings and cancellations within an episode, and should be system-generated.

The SAD Identifier along with Event Date, Event Type and Episode Identifier form the Primary Key of the Intra Episode table.

Edits

S287 Scheduled Admission Date Exceeded

S417 Scheduled Admission Date Changed Without Reason For Change

S418 Reason For SAD Change Reported, But No Admission Currently Scheduled

S426 Invalid SAD Identifier

S427 SAD Identifier Previously Reported For this episode

~~S428 Sequencing Error Between SAD Identifier and Event Date~~

S429 SAD Identifier/Event Type Mismatch

Related items

Section 2: *Intra Episode Event and Primary Key.*

Section 3: *Episode Identifier, Event Date, Event Type, Reason For SAD Change, and Scheduled Admission Date.*

Section 4: *Bookings.*

Section 5: *Structure.*

Administration

Purpose

To definitively link an episode's booking to its cancellations and identify the latest booking where multiple bookings on a single day for a single episode are reported.

Principal data users

DHS, campuses, health services

Collection start

July 2005

Version

1 (Effective 01 July 2005)

Definition source

DHS

Code set source

Hospital-generated.

Business Rules:

Booking (Amended)

Guide for use When reporting the scheduling of an admission, there are two aspects to consider:

- The setting of a Scheduled Admission Date (the 'Set SAD' event) and
- The reason a Scheduled Admission Date changes (the 'Reason SAD Changed' event)

Reporting the setting of an SAD for a particular episode requires:

- The date on which the scheduling (or booking) is done (this is the event date)
- The SAD (the proposed date of admission - this is the event value)
- A system generated SAD Identifier (used to link the setting of an SAD to its reason for change)

Reporting the reason a Scheduled Admission Date changes for a particular episode requires:

- That a SAD has already been set
- The date on which the need to change the SAD occurred (this is the event date)
- The reason the SAD changed (this is the event value)
- A system generated SAD identifier (used to link the setting of an SAD to its reason for change)

The change of an SAD can occur on or after the date the SAD was originally set and an episode can have multiple pairs of these events. A 'Reason SAD Changed' event must always have a related 'Set SAD' event. All but the latest 'Set SAD' event for an episode must have a related 'Reason SAD Changed' event. The latest 'Set SAD' event will also require a 'Reason SAD Changed' event where the Scheduled Admission Date has passed.

Once a Scheduled Admission Date has been set, a variety of things can happen that may impact on it. The scheduled admission may:

- Be brought forward (the next SAD that is set will be earlier than the previous one)
- Be postponed (the next SAD that is set will be later than the

previous one)

- Be cancelled (no new SAD has been set yet, episode not removed)
- Go ahead as planned
- Go ahead, but not as planned
- Not go ahead at all (the patient no longer requires the surgery and this episode is therefore removed from the list).

Scheduled Admission Date brought forward:

The SAD is brought forward if the new SAD is earlier than the previous SAD.

Example: The patient is scheduled on 12 November 2004, for admission on 28 November 2004. Later on 12 November, an earlier theatre slot is identified and the patient agrees to be admitted on 19 November 2004.

Episode_Identifier	Event_Type	Event_Date	Event_Value	SAD_Identifier
0000123456	Set SAD	12112004	28112004	0000000101
0000123456	Reason SAD Changed	12112004	F	0000000101
0000123456	Set SAD	12112004	19112004	0000000677

Scheduled Admission Date postponed:

The SAD is postponed if the new SAD is later than the previous SAD.

Example: The patient is scheduled on 12 November 2004, for admission on 28 November 2004. On 26 November 2004 it becomes apparent that the admission will not be going ahead on the 28th, and the patient is rebooked for 5 December 2004. Report the Reason For Scheduled Admission Date Change as occurring on the same date as the new SAD is set.

Episode_Identifier	Event_Type	Event_Date	Event_Value	SAD_Identifier
0000123456	Set SAD	12112004	28112004	0000000101
0000123456	Set SAD	26112004	05122004	0000000677

6				
000012345 6	Reason SAD Changed	26112004	H	0000000101

Scheduled Admission Date cancelled:

Where a patient's admission is cancelled (no new SAD has been set) 'Reason SAD Changed' event is required but a new 'Set SAD' event is not. The 'Reason SAD Changed' event must have an Event Date that is greater than or equal to the 'Set SAD' event date, and less than or equal to the end date of the extract in which it is reported.

Example: The patient is scheduled on 12 November 2004, for admission on 28 November 2004. When the SAD arrives it is determined that the patient is not currently suitable for the awaited procedure. It is unknown at that time when the next opportunity to perform the procedure will arise. Report the 'Reason SAD Changed' event as occurring on the date the procedure is cancelled. Where data entry relating to this is performed at some point after the SAD has passed, software should allow users to backdate the Event Date to the time the SAD was cancelled.

(Extract end date: 2 December 2004)

Episode_Identifier	Event_Type	Event_Date	Event_Value	SAD_Identifier
000012345 6	Set SAD	12112004	28112004	000000010 1
000012345 6	Reason SAD Changed	28112004	C	000000010 1

Admission goes ahead as planned:

Example: The patient is scheduled on 12 November 2004, for admission on 28 November 2004, and gets admitted as planned on that date (note the Removal Date - the date the procedure is performed - is independent of this business rule as it may be after the Date of Admission). The event value must equal the date of admission.

Intra Episode Level Data:

Episode_Identifier	Event_Type	Event_Date	Event_Value	SAD_Identifier
000012345 6	Set SAD	12112004	28112004	000000010 1

6				1
---	--	--	--	---

Episode Level Data:

Episode_Id entifier	Reason_For _Removal	Removal_D ate	Date_Of_ Admission	[Other fields]
000012345 6	W	29112004	28112004	...

Patient is admitted for procedure as an Emergency:

Example: The patient is scheduled on 12 November 2004, for admission on 28 November 2004, and gets admitted as an Emergency, for the awaited procedure on 26 November (note the Removal Date - the date the procedure is performed - is independent of this business rule as it may be after the date of admission). The event value must be on or earlier than the Date of Admission.

Intra Episode Level Data:

Episode_Id entifier	Event_Type	Event_Date	Event_Val ue	SAD_Iden tifier
000012345 6	Set SAD	12112004	28112004	000000010 1

Episode Level Data:

Episode_Id entifier	Reason_For _Removal	Removal_D ate	Date_Of_ Admission	[Other fields]
000012345 6	M	27112004	26112004	...

Patient receives awaited procedure elsewhere:

Example: The patient is booked on 12 November 2004, for admission scheduled for 28 November 2004, and gets admitted instead at a private hospital on 17 November.

Intra Episode Level Data:

Episode_Id entifier	Event_Type	Event_Date	Event_Val ue	SAD_Iden tifier
000012345 6	Set SAD	12112004	28112004	000000010 1

Episode Level Data:

Episode_Id	Reason_For	Removal_D	Date_Of_	[Other
------------	------------	-----------	----------	--------

entifier	_Removal	ate	Admission	fields]
000012345 6	I	17112004	17112004	...

Notes:

- If the patient is treated elsewhere (B, U, I S or X) and the most recently set SAD is earlier than the date of admission it must be accompanied by its 'Reason SAD Changed' event.
- If the patient is treated elsewhere, the Date of Admission and the date of procedure (the Removal Date) may not be readily available. In these cases use the best information available at the time as a plausible estimate for date of admission and date of procedure.
- Do not report booking events that occur at other organisations (if reporting as a campus this means organisations other than your campus, if reporting as a Health Service, this means organisations other than your Health Service).

Reporting multiple bookings and cancellations for an episode on a single day:

It may transpire that a patient is booked and cancelled multiple times within a single day. If hospital systems store all these bookings as individual transactions, they are able to report all to DHS. ~~It is important to note that DHS will assume that the latest booking is the one with the highest SAD Identifier.~~

In the example below, three attempts were made to book the patient on 12 November, ~~the latest booking event is numbered '0000000003'.~~

Episode_Id entifier	Event_Type	Event_Date	Event_Val ue	SAD_Iden tifier
000012345 6	Set SAD	12112004	28112004	000000000 1
000012345 6	Reason SAD Changed	12112004	C	000000000 1
000012345 6	Set SAD	12112004	1112004	000000000 2
000012345 6	Reason SAD Changed	12112004	P	000000000 2
000012345 6	Set SAD	12112004	0512004	000000000 3
000012345 6	Reason SAD Changed	12112004	P	000000000 3

Editing:

The following are examples of incorrect data and the edits they will trigger:

S287 Scheduled Admission Date Exceeded:

Example 1: Admission did not take place as planned on 28 November. A 'Reason SAD Changed' event should have been recorded on or before 28 November.

Intra Episode Level Data:

Episode_Identifier	Event_Type	Event_Date	Event_Value	SAD_Identifier
0000123456	Set SAD	12112004	28112004	0000000101

Episode Level Data:

Episode_Identifier	Reason_For_Removal	Removal_Date	Date_Of_Admission	[Other fields]
0000123456	I	17122004	17122004	...

Example 2: Episode not removed, end date of extract: 30 November 2004:

Intra Episode Level Data:

Episode_Identifier	Event_Type	Event_Date	Event_Value	SAD_Identifier
0000123456	Set SAD	12112004	28112004	0000000101

Episode Level Data:

Episode_Identifier	Reason_For_Removal	Removal_Date	Date_Of_Admission	[Other fields]
0000123456				...

S417 Scheduled Admission Date Changed Without Reason For Change:

In the following example, the SAD was set on 12 November and reset on 13 November. No 'Reason SAD Changed' event has been reported.

Episode_Identifier	Event_Type	Event_Date	Event_Value	SAD_Identifier
0000123456	Set SAD	12112004	28112004	0000000101
0000123456	Set SAD	13112004	05122004	0000000102

Assuming the episode was cancelled on 12 November, the following should have been reported.

Episode_Identifier	Event_Type	Event_Date	Event_Value	SAD_Identifier
0000123456	Set SAD	12112004	28112004	0000000101
0000123456	Reason SAD	12112004	P	0000000101

6	Changed			1
000012345 6	Set SAD	13112004	05122004	000000010 2

S418 Reason For SAD Change Reported, But No Admission Currently Scheduled:

Example 1: In the following example, no 'Set SAD' event has ever been reported for this episode.

Episode_Id entifier	Event_Type	Event_Date	Event_Val ue	SAD_Iden tifier
000012345 6	Reason SAD Changed	13112004	P	000000010 2

Assuming the above data is correct, and the SAD was set on the previous day, report the following:

Episode_Id entifier	Event_Type	Event_Date	Event_Val ue	SAD_Iden tifier
000012345 6	Set SAD	12112004	28112004	000000010 2
000012345 6	Reason SAD Changed	13112004	P	000000010 2

Example 2: Here the episode has had SADs set before, but all have since had changes reported. The change for SAD '0000000104' has been reported but the initial 'Set SAD' event for '0000000104' has not.

Episode_Id entifier	Event_Type	Event_Date	Event_Val ue	SAD_Iden tifier
000012345 6	Set SAD	12112004	28112004	000000010 2
000012345 6	Reason SAD Changed	13112004	P	000000010 2
000012345 6	Set SAD	13112004	28112004	000000010 3
000012345 6	Reason SAD Changed	14112004	P	000000010 3
000012345 6	Reason SAD Changed	14112004	P	000000010 4

Assuming the above data is correct, the following should be reported:

Episode_Id entifier	Event_Type	Event_Date	Event_Val ue	SAD_Iden tifier
000012345 6	Set SAD	12112004	28112004	000000010 2
000012345 6	Reason SAD Changed	13112004	P	000000010 2
000012345 6	Set SAD	13112004	28112004	000000010 3
000012345 6	Reason SAD Changed	14112004	P	000000010 3
000012345 6	Set SAD	14112004	28112004	000000010 4
000012345 6	Reason SAD Changed	14112004	P	000000010 4

S427 SAD Identifier Previously Reported For this episode:

The following episode has reported SAD Identifier '000000102' for two different 'Set SAD' events.

Episode_Identifier	Event_Type	Event_Date	Event_Value	SAD_Identifier
0000123456	Set SAD	12112004	28112004	000000102
0000123456	Reason SAD Changed	13112004	P	000000102
0000123456	Set SAD	14112004	05122004	000000102

~~S428 Sequencing Error Between SAD Identifier and Event Date:~~

~~Example 1: In the following example, SAD '000000102' appears to have been given a reason for change on 15 November and yet the new 'Set SAD' event actually occurred two days earlier.~~

Episode_Identifier	Event_Type	Event_Date	Event_Value	SAD_Identifier
0000123456	Set SAD	12112004	28112004	000000102
0000123456	Reason SAD Changed	13112004	P	000000103
0000123456	Set SAD	13112004	28112004	000000103
0000123456	Reason SAD Changed	15112004	P	000000102

Refer to: Section 3-Data Definitions: *Event Date, Event Type-Set SAD, Event Type-Reason SAD Changed, Reason For Scheduled Admission Date Change, SAD Identifier and Scheduled Admission Date.*

HDSS Bulletin by dataset

This table lists the most recent HDSS Bulletins, and identifies the dataset to which they relate. All previous bulletins are on the website at:

<http://www.health.vic.gov.au/hdss/bulletin/bulindex.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 87	29 June 2005	✓	✓	✓	✓
Bulletin 86	01 June 2005	✓			✓
Bulletin 85	09 May 2005			✓	
Bulletin 84	29 April 2005	✓			✓
Bulletin 83	13 April 2005	✓		✓	✓
Bulletin 82	01 April 2005	✓			✓
Bulletin 81	07 March 2005			✓	✓
Bulletin 80	24 February 2005	✓		✓	
Bulletin 79	21 January 2005	✓		✓	✓
Bulletin 78	20 December 2004	✓			✓
Bulletin 77	26 November 2004	✓		✓	✓
Bulletin 76	03 November 2004	✓			✓
Bulletin 75	26 October 2004	✓	✓	✓	✓
Bulletin 74	20 October 2004			✓	
Bulletin 73	13 September 2004	✓			✓
Bulletin 72	08 September 2004	✓		✓	✓
Bulletin 71	05 August 2004		✓	✓	✓
Bulletin 70	05 August 2004	✓			
Bulletin 69	09 July 2004	✓	✓		✓
Bulletin 68	16 June 2004	✓	✓		✓
Bulletin 67	28 May 2004	✓	✓		
Bulletin 66	30 April 2004	✓	✓	✓	✓
Bulletin 65	08 April 2004	✓	✓	✓	✓
Bulletin 64	25 February 2004	✓	✓	✓	✓
Bulletin 63	26 November 2003	✓			✓
Bulletin 62	10 October 2003	✓	✓	✓	✓
Bulletin 61	16 September 2003	✓	✓	✓	✓
Bulletin 60	26 August 2003	✓	✓		✓
Bulletin 59	05 August 2003	✓	✓		✓
Bulletin 58	22 July 2003	✓			✓
Bulletin 57	01 July 2003	✓	✓	✓	✓
Bulletin 56	11 June 2003	✓	✓	✓	✓
Bulletin 55	29 May 2003	✓	✓	✓	✓
Bulletin 54	07 April 2003	✓	✓	✓	✓
Bulletin 53	19 February 2003	✓	✓		

HDSS Bulletin No:	Date released:	Dataset:			
		VAED / PRS/2	VEMD	ESIS	Other info
Bulletin 52	20 January 2003	✓	✓		

HDSS Contact Details

The Health Data Standards and Systems (HDSS) Unit of the Metropolitan Health and Aged Care Division has responsibility for maintaining data standards for five Victorian health data collections:

- Victorian Admitted Episodes Dataset (VAED)
- Victorian Emergency Minimum Dataset (VEMD)
- Elective Surgery Information System (ESIS)
- Agency Information Management System (AIMS)
- Client Management Interface (CMI)(for Mental Health clients).

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;
- 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; and,
- Information on upcoming events.

HDSS Web Site <http://www.health.vic.gov.au/hdss/>

HDSS Helpdesk

Telephone: 03 9616 8141 Fax: 03 9616 7743

Email: VAED: PRS2.Help-Desk@dhs.vic.gov.au

VEMD: submit.vemd@dhs.vic.gov.au

ESIS: ESIS.ESIS@dhs.vic.gov.au

AIMS Helpdesk

Telephone: 03 9616 8595 Fax: 03 9616 7743

Email: aimsmail@aims.dhs.vic.gov.au

CMI / ODS Helpdesk

Mantrack CMI Helpdesk: support@mantrack.com

Mantrack phone contact: 1800 331 946