

Specifications for revisions to the
Victorian Emergency Minimum
Dataset (VEMD) for 1 July 2005

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Introduction

The need for Victorian Emergency Minimum Dataset (VEMD) modifications

From 1 July 2005, changes to the Victorian Emergency Minimum Dataset are necessary to better inform Victorian health program monitoring, planning and policy development by the Department of Human Services (DHS).

Comments from hospitals and software suppliers regarding the content of the document *Proposals for Revisions the Victorian Emergency Minimum Dataset (VEMD), December 2004* have been taken into account and where possible, suggestions have been accommodated.

Distribution and components of this document

This document has been distributed to all Victorian hospitals, software suppliers known to have Victorian clients, and to a range of industry bodies and DHS staff. It provides information regarding an amended data item and related amended edit.

The *VEMD Manual, 10th Edition, July 2005* will be distributed at a later date. In the meantime, the *VEMD Manual, 9th Edition* (as amended by HDSS Bulletins 74 onwards) together with this document form the VEMD specification for 2005–06.

Victorian hospitals are required to arrange for their software to be modified in accordance with the revised specifications.

The *VEMD Manual, 9th Edition, July 2004* may be accessed on the Internet at <http://www.health.vic.gov.au/hdss/vemd/index.htm>

HDSS Bulletins may be accessed on the Internet at <http://www.health.vic.gov.au/hdss/bulletin/index.htm>

Any questions related to this document may be directed to the HDSS Help Desk on 9616 8141, or PRS2.Help-Desk@dhs.vic.gov.au

Orientation to this document

As this document provides 'specifications' for revisions, there are a few features that require explanation:

- New values and definitions relating to existing items appear in boxes
- ~~Redundant values and definitions relating to existing items are struck through.~~
- *[Comments relating to the specification document only appear in square brackets and italics.]*
- The text is divided into the categories of 'Specification' and 'Administration' as presented in *Victorian Emergency Minimum Dataset (VEMD 9th Edition, 1 July 2004)*.
Specification: details the reporting requirements for the item.
Administration: provides additional information including the purpose of the collection of the data item and the source of the code set and definitions.
- Further information, such as the background to each specification is provided.

Abbreviations

DHS	Department of Human Services, Victoria
NHDD	National Health Data Dictionary
VEMD	Victorian Emergency Minimum Dataset

Amended Data Definition

Indigenous Status (*Amend*)

Revision Summary Add new codes to the codeset.

Specification

Definition

~~Indigenous Status of the patient as determined by self-identification.~~

An Aboriginal or Torres Strait Islander is a person of Aboriginal or Torres Strait Island descent who identifies as an Aboriginal or Torres Strait Islander and is accepted as such by the community in which he or she lives.

Datatype Numeric **Form** Code

Field size One **Layout** N

Reported for Every Emergency Department presentation.

Code set

Code	Descriptor
2	Not indigenous - <i>Not</i> Aboriginal or Torres Strait Islander origin
5	Indigenous - Aboriginal but not Torres Strait Islander origin
6	Indigenous - Torres Strait Islander but not Aboriginal origin
7	Indigenous - Aboriginal and Torres Strait Islander origin
8	Question unable to be asked
9	Patient refused to answer

Reporting guide

~~Select the first appropriate category.~~

~~An Aboriginal or Torres Strait Islander is a person of Aboriginal or Torres Strait Islander descent who identifies as an Aboriginal or Torres Strait Islander and is accepted as such by the community with which he/she lives (High Court of Australia in Commonwealth V Tasmania (1983) 46 ALR).~~

~~Given the gross inequalities in health status between Indigenous and non-Indigenous peoples in Australia, the size of the Aboriginal and Torres Strait Islander populations and their historical and political context, there is a strong case for ensuring that information on Indigenous Status is collected for planning and service delivery purposes and for monitoring Aboriginal and Torres Strait Islander health.~~

A person of Aboriginal descent is a person descended from the original inhabitants of Australia.

The Torres Strait Islands are the islands directly to the north of Cape York, between Cape York and New Guinea.

In Victoria, the community of Torres Strait Island people is small and the community of people of Aboriginal and Torres Strait Island people is smaller again, therefore code 6 Indigenous-Torres Strait Islander but not Aboriginal origin and code 7 Indigenous-Aboriginal and Torres Strait Islander origin would not be widely used.

Code 8 *Question unable to be asked* should only be used under the following circumstances:

- When the patient's medical condition prevents the question of Indigenous Status being asked; or
- In the case of an unaccompanied child who is too young to be asked their Indigenous Status.

This information must be collected for every Emergency Department presentation and updated each time the patient represents to the hospital.

Systems must not be set up to input a default code.

Rather than asking every patient about his or her indigenous status, first ask the patient. "Were you born in Australia?":

- If No, the patient should be asked, "What country were you born in?"
- If Yes, the patient should be asked, "Are you of Aboriginal or Torres Strait Islander origin?"
- If the patient answers Yes to being of Aboriginal or Torres Strait Islander origin, then ask further questions to record correctly the person's indigenous status.

Patient is baby or child

The parent or guardian should be asked about the indigenous status of the child ~~child's mother or father~~. If the mother of a newborn baby has not identified as being of Aboriginal or Torres Strait Islander descent, hospital staff should not assume the baby is non-Aboriginal; the father may be of Aboriginal or Torres Strait Islander descent.

For further information refer to the Principles of recording Aboriginal Status in Victoria available on the internet at:

<http://www.health.vic.gov.au/koori/>

Edits

E105 Indigenous Status Invalid

E107 Aboriginal/Ts Island Origin but Not Aust Born

E360 Indigenous Status and Preferred Language Mismatch

Administration

Purpose Required for analysis of service utilisation, needs and epidemiological studies. The information collected on the number and health status of Aboriginal and Torres Strait Islanders assists planning and service delivery to these populations.

Principal data users Koori Health Unit (Public Health, DHS); Monash University Accident Research Centre; Hospital Demand Management, DHS; Financial Analysis and Purchasing Branch, DHS.

Collection start	1 July 1995	Version	1 (Effective 01.07.95)
			2 (Effective 01.07.99)
			3 (Effective 01.07.05)
Definition source	NHDD	Code set source	NHDD (DHS modified)

E105 Indigenous Status Invalid

Effect REJECTION

Problem An Indigenous Status value has not been reported or the value specified does not exist in the Indigenous Status codeset. *[Add 8 and 9].*

Remedy Allocate an appropriate Indigenous Status code and re-submit the transaction.

See: Section 3, Indigenous Status.