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| HDSS Bulletin |
| Issue 237: 10 August 2020 |

Contents

[Global update 1](#_Toc47950000)

[237.1 Circulars 1](#_Toc47950001)

[Agency Information Management System (AIMS) 1](#_Toc47950002)

[237.2 Daily Capacity and Occupancy Register 1](#_Toc47950003)

[237.3 Daily Elective Surgery Activity report  2](#_Toc47950004)

[237.4 Release of AIMS forms for 2020-21 2](#_Toc47950005)

[Elective Surgery Information System (ESIS) 2](#_Toc47950006)

[237.5 Updated ESIS manual data form 2](#_Toc47950007)

[Victorian Admitted Episodes Dataset (VAED) 3](#_Toc47950008)

[237.6 Correction to Medicare Suffix in VAED manual 2020–21 3](#_Toc47950009)

[237.7 Nursing home patient transfers 3](#_Toc47950010)

[Non-Admitted Data Expansion project 3](#_Toc47950011)

[237.8 Post Natal Domiciliary Care 3](#_Toc47950012)

[Contact details 5](#_Toc47950013)

# Global update

## Circulars

Access private hospital circulars at: [Private hospital circulars](http://www.health.gov.au/internet/main/publishing.nsf/Content/health-phicirculars2019-index1) <http://www.health.gov.au/internet/main/publishing.nsf/Content/health-phicirculars2019-index1>

Access hospital circulars at: [Hospital circulars](https://www2.health.vic.gov.au/about/news-and-events/hospitalcirculars) <https://www2.health.vic.gov.au/about/news-and-events/hospitalcirculars>

# Agency Information Management System (AIMS)

## Daily Capacity and Occupancy Register

Changes to the Daily Capacity and Occupancy Register, submitted via the HealthCollect portal, will be implemented from Monday 10 August 2020, to be reported by 11am on Tuesday 11 August.

Two additional columns report beds occupied by patients who are COVID-19 positive, and by those under quarantine for suspected COVID-19 infection and/or awaiting test results.

Four new columns report categories of clinical staff unavailable for duty due to COVID-19 related illness or restriction.

One column reports the total number of these staff who are unavailable for duty due to SARS-CoV-2 infection (COVID-19 positive).

These additional fields appear to the right of the existing data columns: please ensure you scroll to the right to reveal and complete these important data.

Guidelines, describing the new data items in more detail, will soon be available on the HDSS website.

All services are reminded that data entered in this form is used daily to measure bed capacity within the sector. Therefore, health services are asked to ensure reporting of both staffed beds and physical beds is accurate.

It has been noted that staffed bed numbers appear relatively stable over this current period, against an expected decline due to elective surgery restrictions and increased furloughed staff.

Please ensure that capacity data are being reported accurately in accordance with the definitions outlined in the Guidelines for reporting, available at: [COVID-19 Daily Capacity and Occupancy Register- Guidelines for reporting](https://www2.health.vic.gov.au/about/publications/policiesandguidelines/covid-19-daily-cap-occupancy-reg-guidelines-reporting) <https://www2.health.vic.gov.au/about/publications/policiesandguidelines/covid-19-daily-cap-occupancy-reg-guidelines-reporting>

Email HDSS help desk <HDSS.helpdesk@dhhs.vic.gov.au> for questions related to this register.

## Daily Elective Surgery Activity report

Public and private hospitals and Day Procedure Centres are required to continue reporting elective surgery activity daily until advised otherwise.

Data submissions are required by 1.00pm each subsequent business day. Data for Friday, Saturday and Sunday are due by 1.00pm on Mondays.

For days when no reportable procedures are performed, click the ‘Nil elective surgery/procedures performed’ button to zero-fill each cell. For all submissions, it is still essential to check the ‘Completed’ box: this activates validations, locks the data, and ensures the submission is forwarded to DHHS.

This reporting remains an ongoing requirement until advised otherwise.

## Release of AIMS forms for 2020-21

The AIMS annual upgrade has been released and forms for 2020-21 are now available on the HealthCollect portal.

Changes since last year:

* Annual Return Form 5C HACC Program for Younger People – Annual Fee Report has been removed.
	+ New AIMS Form S11A Subacute Non-admitted MDCC patient not present.

Form S11A is a new monthly form, similar to the existing AIMS S11 form, created for health services to report subacute non-admitted multidisciplinary case conferences (MDCC) when the patient is not present. Activity for MDCC when the patient is not present can be reported for SACS, HARP, RIR, PAC, palliative care, VALP, VRSS and FCP programs.

The due date for submission of the S11A form is 14 days after the end of each month.

Advice regarding the new form was published in HDSS Bulletin 234 on 26 June 2020.

# Elective Surgery Information System (ESIS)

## Updated ESIS manual data form

An updated ESIS manual data form will be available shortly on the HDSS website. Reason for Removal P is included under ‘Admissions from the elective surgery waiting list (W, X, S, P)’.

# Victorian Admitted Episodes Dataset (VAED)

## Correction to Medicare Suffix in VAED manual 2020–21

Medicare Suffix codes are missing the dash between the second and third characters in Section 3, page 104 of the VAED manual. The correct codes are shown below.

Code Descriptor

C-U Card unavailable/Not applicable

N-E Not eligible for Medicare

P-N Prisoner

## Nursing home patient transfers

Health services are reminded to report Admission Source code N Transfer from residential aged care facility when a nursing home patient is transferred to hospital for care.

# Non-Admitted Data Expansion project

## Post Natal Domiciliary Care

Several questions were generated from the Post Natal Domiciliary Care article in the last HDSS Bulletin, and answers to common questions are included below.

### Activity reporting

All Post Natal Domiciliary Care activity should be reported as aggregate on the AIMS S10 form and at patient level via VINAH, regardless of how the activity is funded. This means that initial as well as subsequent visits should all be reported.

### Timelines for patient level reporting

The department is required to report patient level activity to the Commonwealth from 1 July 2021. All health services are required to ensure they report patient level activity for Post Natal Domiciliary Care by 1 July 2021. The Non-Admitted Data Expansion project team will work with health services to achieve this reporting requirement.

### Reporting baby visits

Most health services reporting Post Natal Domiciliary Care are only reporting activity for mothers but not for babies. All health services are expected to report activity that meets the definition for Activity Based Funding.

The [Activity Based Funding Frequently Asked Questions](https://www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability/activity-based-funding/abf-services-streams/non-admitted-care)  <https://www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability/activity-based-funding/abf-services-streams/non-admitted-care> provides guidance to reporting requirements.

A home visit that involves an interaction between a nurse/midwife and more than one non-admitted patient (i.e. mother and baby) can be counted as two service events (or three service events for twins etc). This is providing that all aspects of the service event definition are met for each non-admitted patient:

* the interaction is between a healthcare provider and a non-admitted patient
* the interaction is clinical or therapeutic in nature
* there is a dated entry in each patient's medical record.

The [VAED Criteria for Reporting](https://www2.health.vic.gov.au/about/publications/policiesandguidelines/vaed-criteria-for-reporting-2020-21)(Appendix A) [VAED Criteria for Reporting 2020-21](https://www2.health.vic.gov.au/about/publications/policiesandguidelines/vaed-criteria-for-reporting-2020-21) <https://www2.health.vic.gov.au/about/publications/policiesandguidelines/covid-19-daily-cap-occupancy-reg-guidelines-reporting> outlines routine newborn domiciliary postnatal care that is provided as an outpatient (non-admitted service) which includes:

* monitoring of newborn feeding and weight gain
* monitoring and assessment of general health including jaundice and signs and symptoms of infection
* review and routine care of umbilical cord site and any birth injuries
* sleep and settling advice and support.

Any questions about Post Natal Domiciliary Care activity reporting and the Non-Admitted Data Expansion project should be directed to the HDSS helpdesk.

# Contact details

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

* Victorian Admitted Episodes Dataset (VAED)
* Victorian Emergency Minimum Dataset (VEMD)
* Elective Surgery Information System (ESIS)
* Agency Information Management System (AIMS)
* Victorian Integrated Non-Admitted Health Minimum Dataset (VINAH)
	+ F1 data collections (technical support)

The HDSS Bulletin is produced at intervals to provide:

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

**Website**

[HDSS website](https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems) <https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems>

**HDSS help desk**

Enquiries regarding data collections and requests for standard reconciliation reports

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

**Other Victorian health data requests**

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

Email HOSdata <Hosdata.frontdesk@vahi.vic.gov.au>

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