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| Specifications for revisions to the Community Health Minimum Data Set (CHMDS) for 2024-25 |
| December 2023 |
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# Executive summary

The revisions to the Community Health Minimum Data Set (CHMDS) for 2024-25 financial year are summarised below:

**Change to current data items**

* Additional codes to be added to Contact – funding source codeset
* Update codes for Client – gender identity
* Change reporting requirements for Service-priority type from mandatory to optional
* Change to permissible values for Contact – number service recipients to allow groups with only 1 participant

**Change to definition**

* Change to Contact - Service Stream Care Coordination definition

The changes for 2024-25 financial year, as outlined in this document, are applicable to the *Community Health Minimum Data Set Submission Guidelines.*

The final set of data collection guidelines for CHMDS will be published in May 2024 for implementation 1 July 2024.

# Introduction

Each year the Department of Health reviews its key data collections to ensure the data collected:

* supports the department's state and national reporting obligations
* assists service planning and policy development
* reflects changes in funding and service provision arrangements for the coming financial year
* incorporates appropriate feedback from stakeholders on improvements.

As part of the Community Health Minimum Data Set (CHMDS) annual change process, proposals and feedback are invited from stakeholders to ensure changes to the CHMDS are fit-for-purpose for each financial year.

All annual change proposals submitted are reviewed and assessed against a set of change criteria by the CHMDS Change Management Group (CMG) comprising departmental and sector representatives.

The proposals accepted by the CHMDS CMG then proceed to publication for feedback.

Service providers are asked to discuss technical impacts with the supplier of their client management system and clinical impacts with their program manager when assessing the annual change proposals.

The stakeholder feedback received is compiled and reviewed by the CHMDS CMG to inform their recommendations for CHMDS Data Custodian approval for implementation in the CHMDS from 1 July 2024.

The revisions set out in this document are recommended by the CHMDS CMG and approved by the CHMDS Data Custodian and are complete as at the date of publication. Where further changes are required during the year, for example to improve data validation rules or supporting documentation, these will be advised via regular CHMDS Bulletins.

Victorian service providers must ensure their software can create a data submission file in accordance with the revised specifications and ensure reporting capability is achieved to maintain compliance with reporting timeframes.

Please contact [CHMDS-data@health.vic.gov.au](mailto:CHMDS-data@health.vic.gov.au) with any queries.

## Orientation to this document

* Changes to existing data elements are highlighted in green
* Redundant values and definitions relating to existing elements are ~~struck through and highlighted yellow~~.
* New validations are marked ### if validation number has not yet been allocated
* Changes are shown under the appropriate *Community Health Minimum Data Set Submission Guidelines* section headings.

# Proposals for Implementation

The six proposals approved by the CHMDS Data Custodian for implementation to CHMDS in 2024-25 are listed below alongside their relevant changes:

**Proposal 2B – Counting of group contacts to be reflective of work done – allow reporting of groups with only 1 participant**

[Section 4.3.9 Contact—number service recipients—N[N]](#_4.3.9_Contact—number_service)

**Proposal 3 – Change to description for service stream 50 Care Coordination**

[Section 2.2.10 Service Stream Table 2 Service stream definitions](#_Table_2_Service)

**Proposal 5 – Inclusion of new funding source for Diabetes Connect program**

[Section 3.1 Table 3 Interrelationship of Funding Source, Funded Activity and Service Type](#_Table_3_Interrelationship)

[Section 4.3.6 Contact—funding source—N[N][N]](#_4.3.6__Contact—funding)

**Proposal 6 – Remove Prioritisation (concept) and Service-priority type (Data element) / make non mandatory**

[Section 2.2.8 Prioritisation](#_2.2.8_Prioritisation)

[Section 4.5.6 Service—priority type—N](#_4.5.6_Service—priority_type—N)

[Section 5 Table 4 Validation CH67](#_Table_4_Edit/Validation)

[Section 5 Table 4 New validation CH15](#_Table_4_Edit/Validation)

**Proposal 7 – Targeted health support for children in out of home care – new funding source**

[Section 3.1 Table 3 Interrelationship of Funding Source, Funded Activity and Service Type](#_Table_3_Interrelationship)

[Section 4.3.6 Contact—funding source—N[N][N]](#_4.3.6__Contact—funding)

**Proposal 10 – Update Client Gender Identity codeset**

[Section 4.2.5 Client—gender identity—N](#_4.2.5_Client—gender_identity—N)

# CHMDS Submission Guidelines changes for 2024-25

Section 2 Concepts

### 2.2.8 Prioritisation

The process by which a client is briefly assessed to determine the urgency of their need and/or priority for service.

~~Different scores/scales may be used in different settings such as Emergency care, and Community Health.~~

~~In the Community health setting, priority types are derived from the~~ [~~service coordination tool templates~~](https://www2.health.vic.gov.au/primary-and-community-health/community-health/community-health-program/ch-demand-management/priority-tools-for-community-health-services)~~. <https://www2.health.vic.gov.au/primary-and-community-health/community-health/community-health-program/ch-demand-management/priority-tools-for-community-health-services>~~

### 2.2.10 Service Stream

A service stream is a unique ‘service type’ provided to a client or potential client.

In the case of family members or significant others, the ‘service type’ will be indirectly related to the client’s identified need.

A service stream is also used to determine applicable funding sources.

Service streams are defined in Table 2.

#### Table 2 Service stream definitions

| **Code** | **Service stream** | **Description** |
| --- | --- | --- |
| 01 | Audiology | Audiology services such as evaluation of hearing loss and related disorders, including balance (vestibular) disorders and tinnitus (ringing in the ears), and to rehabilitate individuals with hearing loss and related disorders. |
| 02 | Dietetics | Dietetics services such as application of nutritional principles to the planning and preparation of foods and the regulation of the diet in relation to both health and disease. |
| 03 | Occupational Therapy | Occupational Therapy such as activities involving working with people and communities to enhance their ability to engage in the occupations they want to, need to, or are expected to do, or by modifying the environment to better support their occupational engagement. |
| 04 | Physiotherapy | Physiotherapy services are activities involving assessment, diagnosis, treatment and prevention of a wide range of health conditions and movement disorders. Physiotherapy helps repair damage, reduce stiffness and pain, increase mobility and improve quality of life. |
| 05 | Podiatry | Podiatry includes services that deal with the prevention, diagnosis, treatment and rehabilitation of medical and surgical conditions of the feet and lower limbs. Conditions that may be treated include those resulting from bone and joint disorders such as arthritis and soft-tissue and muscular pathologies, as well as neurological and circulatory disease. It may also include diagnosis and treatment of any complications of the above which affect the lower limb, including skin and nail disorders, corns, calluses and ingrown toenails. Foot injuries and infections gained through sport or other activities are also diagnosed and treated through podiatry. |
| 06 | Speech Pathology/Therapy | Speech Pathology/Therapy includes services concerned with a broad scope of speech, language, swallowing, and voice issues involving communication. These may include word-finding issues, social communications difficulties, structural language impairments, literacy impairments related to the letter-to-sound relationship (phonics), voice difficulties or cognitive impairment to the extent that they interfere with communications. |
| 07 | Nursing | Nursing services encompasses the promotion of health, prevention of illness, and care of physically ill, mentally ill, and disabled people of all ages, in all health care and other community settings. Nursing encompasses autonomous and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings. Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled and dying people. Advocacy, promotion of a safe environment, research, participation in shaping health policy and inpatient and health systems management, and education are also key nursing roles. |
| 20 | Counselling/Casework | Therapeutic counselling interventions of varying duration and intensity to individuals, families and groups. Incorporates face-to-face, online and telephone counselling. |
| 50 | Care Coordination | ~~Offered to those with the highest need or at the greatest risk. Provides additional individualised and flexible support for designated people through face-to-face, telephone and online services continuing throughout clients’ treatment and for up to 12 months after commencement of treatment. This includes residential treatment preparation and after care support.~~  Offered to those with the highest need or at the greatest risk. Provides additional individualised and flexible support for designated people through face-to-face, telephone and online services continuing throughout clients’ care and for an initial period of up to 12 months after commencement of care, after which time, the need for care coordination should be reviewed. This includes residential treatment preparation and after care support. |
| 60 | Client Education | Client education programs designed to provide information and support to clients and their families or significant others, This does not include community education programs or school education. |
| 61 | Clinical Services & Training | Clinical services are the broad range of services relating to the observation and treatment of patients rather than theoretical or laboratory studies. Accordingly, Clinical Training encompasses training activities that relates to clinical services. |
| 62 | Diabetes Education | Diabetes education services support people with diabetes and their families or carers, to gain the knowledge and skills required to make informed decisions and effectively manage their diabetes. Diabetes education may include but is not limited to: lifestyle changes and adapting to life with diabetes, treatment options, self-management, blood glucose monitoring, complications awareness and prevention. Diabetes Education is provided by Credentialled Diabetes Educators. |
| 70 | Initial Needs Identification | Initial Needs Identification is a process where the underlying issues as well as the presenting issues are uncovered to the best extent possible. It is not a diagnostic process but is a determination of the client's risk, eligibility and priority for service, a balancing for the service capacity and client needs. |
| 90 | Nursing (Remote Area) | Nursing services performed in a remote or very remote location. Remote or very remote locations are detailed in the Australian Standard Geographic Classification (ASGC). |
| 91 | Medical | Includes general and specialist medical treatment. |

Section 3 Business Rules

**3.1 Service activities funded by the Community Health Program**

Agencies funded to deliver Community Health Program services are required to report their service provision to the department via the Community Health Minimum Dataset (CHMDS). Table 3 shows the relationship between Funding Source, Funded Activity and Service stream in the CHMDS and how these interrelate.

* + Refer to your service agreement to check which activities are relevant to your agency and only report on those activities.
  + It is important that each funded activity is correctly aligned with the corresponding funding source and accepted service types when reporting service provision to the department. If the Funding Source and Service stream are not an allowable combination, the data will not be counted towards agency targets.

#### Table 3 Interrelationship of Funding Source, Funded Activity and Service Type

| Funding Source data element(a) | | Activity | | Service stream(b) | |
| --- | --- | --- | --- | --- | --- |
| Funding Source Code No. | Funding Source Description | Activity No. | Activity Name | Service stream code | Service stream description |
| 1 | Community Health Program | 28086 | Community Health | 01 | Audiology |
| 02 | Dietetics |
| 03 | Occupational Therapy |
| 04 | Physiotherapy |
| 05 | Podiatry |
| 06 | Speech Pathology/Therapy |
| 07 | Nursing |
| 20 | Counselling/ Casework |
| 50 | Care Coordination |
| 62 | Diabetes Education |
| 70 | Initial Needs Identification |
| 4 | Family Planning | 28064 | Family Planning – Clinical Services and Training | 07 | Nursing |
| 61 | Clinical Services and Training |
| 70 | Initial Needs Identification |
| 28068 | Family Planning | 07 | Nursing |
| 20 | Counselling |
| 50 | Care Coordination |
| 70 | Initial Needs Identification |
| 5 | Innovative Health Services for Homeless Youth (IHSHY) | 28066 | Innovative Health Services for Homeless Youth (IHSHY) | 07 | Nursing |
| 20 | Counselling |
| 50 | Care Coordination |
| 70 | Initial Needs Identification |
| 9 | Family and Reproductive Rights Education Program (FARREP) | 28015 | Family and Reproductive Rights Education Program (FARREP) | 20 | Counselling |
| 50 | Care Coordination |
| 70 | Initial Needs Identification |
| 12 | Small Rural – Primary Health Flexible Services | 35048 | Small Rural – Primary Health Flexible Services | 01 | Audiology |
| 02 | Dietetics |
| 03 | Occupational Therapy |
| 04 | Physiotherapy |
| 05 | Podiatry |
| 06 | Speech Pathology/Therapy |
| 07 | Nursing |
| 20 | Counselling/ Casework |
| 50 | Care Coordination |
| 62 | Diabetes Education |
| 70 | Initial Needs Identification |
| 19 | Integrated Chronic Disease Management | 28072 | Integrated Chronic Disease Management | 01 | Audiology |
| 02 | Dietetics |
| 03 | Occupational Therapy |
| 04 | Physiotherapy |
| 05 | Podiatry |
| 06 | Speech Pathology/Therapy |
| 07 | Nursing |
| 20 | Counselling/ Casework |
| 50 | Care Coordination |
| 62 | Diabetes Education |
| 70 | Initial Needs Identification |
| 21 | Refugee & Asylum Seeker Health Services | 28076 | Refugee & Asylum Seeker Health Services | 01 | Audiology |
| 02 | Dietetics |
| 03 | Occupational Therapy |
| 04 | Physiotherapy |
| 05 | Podiatry |
| 06 | Speech Pathology/Therapy |
| 07 | Nursing |
| 20 | Counselling/ Casework |
| 50 | Care Coordination |
| 62 | Diabetes Education |
| 70 | Initial Needs Identification |
| 22 | Healthy Mothers Healthy Babies | 28080 | Healthy Mothers Healthy Babies | 01 | Audiology |
| 02 | Dietetics |
| 03 | Occupational Therapy |
| 04 | Physiotherapy |
| 05 | Podiatry |
| 06 | Speech Pathology/Therapy |
| 07 | Nursing |
| 20 | Counselling/ Casework |
| 50 | Care Coordination |
| 62 | Diabetes Education |
| 70 | Initial Needs Identification |
| 24 | MDC Community Health Nurse | 28090 | MDC – Community Health Nurse | 50 | Care Coordination |
| 70 | Initial Needs Identification |
| 90 | Nursing |
| 25 | Community Asthma Program | 28091 | Community Asthma Program | 50 | Care Coordination |
| 60 | Client Education |
| 70 | Initial Needs Identification |
| 26 | Bush Nursing Centres | 35023 | Bush Nursing Centres | 01 | Audiology |
| 02 | Dietetics |
| 03 | Occupational Therapy |
| 04 | Physiotherapy |
| 05 | Podiatry |
| 06 | Speech Pathology/Therapy |
| 07 | Nursing |
| 20 | Counselling/ Casework |
| 50 | Care Coordination |
| 70 | Initial Needs Identification |
| 90 | Nursing (Remote Area) |
| 27 | Infant child and family health and wellbeing hubs | 28092 | Infant child and family health and wellbeing hubs – Community Health | 01 | Audiology |
| 02 | Dietetics |
| 03 | Occupational Therapy |
| 04 | Physiotherapy |
| 05 | Podiatry |
| 06 | Speech Pathology/Therapy |
| 20 | Counselling/ Casework |
| 50 | Care Coordination |
| 70 | Initial Needs Identification |
| 91 | Medical |
| 28 | Putting Families First | 28095 | Putting Families First – Community Health | 50 | Care Coordination |
| 60 | Client Education |
| 70 | Initial Needs Identification |
| 29 | Autism Assessment | 28096 | Autism Assessment | 03 | Occupational Therapy |
| 06 | Speech Pathology/Therapy |
| 20 | Counselling/ Casework |
| 50 | Care Coordination |
| 70 | Initial Needs Identification |
| 91 | Medical |
| 30 | Diabetes Connect | 28074 | Diabetes Connect | 01 | Audiology |
| 02 | Dietetics |
| 03 | Occupational Therapy |
| 04 | Physiotherapy |
| 05 | Podiatry |
| 06 | Speech Pathology/Therapy |
| 07 | Nursing |
| 20 | Counselling/ Casework |
| 50 | Care Coordination |
| 62 | Diabetes Education |
| 70 | Initial Needs Identification |
| 31 | Health support for children in care | 28055 | Health support for children in care | 01 | Audiology |
| 02 | Dietetics |
| 03 | Occupational Therapy |
| 04 | Physiotherapy |
| 05 | Podiatry |
| 06 | Speech Pathology/Therapy |
| 07 | Nursing |
| 20 | Counselling/ Casework |
| 50 | Care Coordination |
| 60 | Client Education |
| 70 | Initial Needs Identification |
| 91 | Medical |
| This activity is reported using the [Contact—Interpreting time](#_Initial_Contact_Date—DDMMYYYY) data element | | 28048 | Language Services |  |  |

(a) See [Contact—funding source](#_Funding_Source_—N[N]_1) data element description.

(b) See [Contact—service stream](#_Contact—-service_stream—NN) data element description.

Section 4 Data element definitions

### 4.2.5 Client—gender identity—N

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | | |
| **Definition** | | The gender with which the client identifies. | | |
| **Value domain attributes** | | | | |
| *Representational attributes* | | | | |
| **Representation class** | | Code | **Data type** | Number |
| **Format** | | N | **Maximum character length** | 1 |
| **Permissible values** | | ***Value*** | ***Meaning*** | |
|  | | 1 | man, or boy, or male | |
|  | | 2 | woman, or girl, or female | |
|  | | ~~3~~ | ~~other~~ | |
|  | | 4 | non-binary | |
|  | | 5 | different term | |
|  | | 6 | prefer not to answer | |
| **Supplementary values** | | ***Value*** | ***Meaning*** | |
|  | | 9 | not stated/Inadequately described | |
| **Data element attributes** | | | | |
| *Reporting attributes* | | | | |
| **Reporting requirements** | | Mandatory when Contact—contact type = 1 and Contact—client type = 1 | | |
| *Collection and usage attributes* | | | | |
| **Guide for use** | ~~Gender identity is defined as a personal conception of oneself as male or female (or other).~~  ~~Gender identity can be the same or different than the sex assigned at birth.~~  ~~When a person’s gender identity differs from their sex assigned at birth, they are considered transgender.~~  ~~Note: While service providers may choose to capture many categories of gender identity within their CMS system, the reporting requirement of the department only requires alignment with those codes specified.~~ | | | |
|  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | ~~Code 3~~ | | | ~~Adults and children who identify as non-binary, gender diverse, or with descriptors other than man/boy or woman/girl. Terms such as ‘gender diverse’, ‘non-binary’, ‘unspecified’, 'trans', '~~[~~transgender~~](https://dhhs.authenticated.modelpedia.com.au/PublishedWebsite/ItemDetail.aspx?ConfigurationId=26040&RootConfigurationId=18&ModelId=5B8A8481-0259-4FA0-B803-01E7B307A6CD&ItemId=A8F8E1A1-E54A-4600-8BDC-D798813D0EEA&Target=ctl00_ctl03_CenterTopPane&Theme=25&Version=3.0.6.22_1&IsLatest=Final)~~', 'transsexual', 'gender queer', 'pan-gendered', 'androgynous' and 'inter-gender' are variously used to describe the 'Other' category of gender. Some cultures may have their own terms for gender identities outside male and female. The label ‘Other’ is used because a more descriptive term has not been widely agreed within the general community.~~ | | | Gender is a social and cultural concept. It is about social and cultural differences in identity, expression and experience as a man, boy, woman, girl, or non-binary person. Non-binary is an umbrella term describing gender identities that are not exclusively male or female.  Gender identity can be the same or different than the sex recorded at birth.  Note: While service providers may choose to capture many categories of gender identity within their Client Management System, the reporting requirement of the department only requires alignment with those codes specified. | | | | Code 1 | A person who describes their gender as man, or boy, or male | | | Code 2 | A person who describes their gender as woman, or girl, or female | | | Code 4 | A person who describes their gender as non-binary. | | | Code 5 | A person who describes their gender as a term other than man/boy/male, woman/girl/female or non-binary. | | | Code 6 | A person who prefers not to respond on how they describe their gender. | | | Code 9 | Should be used if unable to attain gender identity or unknown | | | | | |
| **Purpose/context** | Program monitoring, service planning. | | | |
| *Source and reference attributes* | | | | |
| **DHHS Common data dictionary** | |  | | |
| **Definition source** | | METeOR | | |
| **Definition source identifier** | | Based on ~~635994~~ 741842 - Person–gender, code X | | |
| **Value domain source** | | METeOR | | |
| **Value domain identifier** | | Based on ~~635944~~ 741825 - [Gender code ~~N~~](javascript:void(0);) X | | |
| *Relational attributes* | | | | |
| **Related concepts** | | [Client](#_Client_2) | | |
| **Related data elements** | | [Contact—client type](#_Client_type—X)  [Contact—contact type](#_Contact—contact_type—N) | | |
| **Edit/validation rules** | | CH94 Cannot be null when Client is registered and contact type is individual  CH14 Value must be active within codeset | | |
| **Other related information** | | [~~Australian Government Guidelines for the Recognition of Sex and Gender~~](https://www.ag.gov.au/Publications/Documents/AustralianGovernmentGuidelinesontheRecognitionofSexandGender/AustralianGovernmentGuidelinesontheRecognitionofSexandGender.PDF) | | |
|  | | <https://www.abs.gov.au/statistics/standards/standard-sex-gender-variations-sex-characteristics-and-sexual-orientation-variables/latest-release> | | |

### 4.3.6 Contact—funding source—N[N][N]

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | The Community Health Program funding source | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N[N][N] | **Maximum character length** | 3 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 0 | Not funded | |
|  | 1 | Community Health Program | |
|  | 4 | Family Planning | |
|  | 5 | Innovative Health Services for Homeless Youth | |
|  | 9 | Family and Reproductive Rights Education Program | |
|  | 12 | Small Rural Health Services – Primary Health | |
|  | 19 | Integrated Chronic Disease Management | |
|  | 21 | Refugee & Asylum Seeker Health | |
|  | 22 | Healthy Mothers Healthy Babies | |
|  | 24 | MDC Community Health Nurse | |
|  | 25 | Community Asthma Program | |
|  | 26 | Bush Nursing Centres | |
|  | 27 | Infant Child and Family Health and Wellbeing Hubs | |
|  | 28 | Putting Families First | |
|  | 29 | Autism Assessment | |
|  | 30 | Diabetes Connect | |
|  | 31 | Health support for children in care | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 999 | not stated/inadequately described | |
| **Data element attributes** | | | |
| *Reporting attributes* | | | |
| **Reporting requirements** | Mandatory – All Contacts | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | Enter the code representing the Funding Source. | | |
|  | The funding source recorded needs to relate to the funded activities as per your service agreement or Statement of Priorities. If you are unsure, seek clarification from your Departmental divisional contact.  It is important for service providers to understand and accurately record the source of their program area funding. For instance most activities relating to community health will fall under the Community Health Program funding source.  Be aware that some agencies receive specific initiative funding. If that applies to your agency make sure you select the correct funding source for the initiative and not just allocate it to the Community Health Program. Confirm which services your agency is funded to provide.in your service agreement or Statement of Priorities.  If you have selected **‘21’ (Refugee & Asylum Seeker Health),** Refugee Status must equal **‘1 or 3’ (Client is a refugee or Asylum seeker)**  If you have selected **‘0 Not funded’ or ‘999 not stated/inadequately described’** this activity will not be counted towards targets  See Table 3 for further information about how the funding source is related to Service stream. | | |
| **Purpose/context** | Program monitoring, service planning, funding and accountability. | | |
| *Source and reference attributes* | | | |
| **DHHS Common data dictionary** | Not applicable | | |
| **Definition source** | DH | | |
| **Definition source identifier** |  | | |
| **Value domain source** | DH | | |
| **Value domain identifier** |  | | |
| *Relational attributes* | | | |
| **Related concepts** | [Contact](#_Contact)  [Chronic and complex client](#_Chronic_and_Complex_2) | | |
| **Related data elements** | [Client—refugee status](#_Client—-refugee_status—N)  [Contact—client type](#_Client_type—X)  [Contact—contact date](#_Contact—contact_date—DDMMYYYYHHMM)  [Contact—direct time](#_Contact—direct_time—N[N][N])  [Contact—fee](#_Contact—fee—[NNN]N.NN)  [Contact—indirect time](#_Contact—indirect_time—N[N][N])  [Contact—interpreting time](#_Contact—interpreting_time—N[N][N])  [Contact—number service recipients](#_Contact—number_service_recipients—N)  [Contact—service stream](#_Contact—service_stream—NN)  [Service—service provider number](#_Service—service_provider_number—NNN) | | |
| **Edit/validation rules** | CH148 Cannot be null  CH14 Value must be active in codeset  AoD47 Service stream mismatch | | |
|  | CH31 If Contact—funding source is Refugee & Asylum Seeker Health, Client—refugee status cannot be not a current refugee nor asylum seeker (Client-refugee status-N code = 2) | | |
| **Other related information** | <https://www.health.vic.gov.au/policy-and-funding-guidelines-for-health-services>  Values for this data element are contained in a master table | | |

### 4.3.9 Contact—number service recipients—N[N]

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | The total number of service recipients present at this contact | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Total | **Data type** | Number |
| **Format** | N[N] | **Maximum character length** | 2 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | ~~>1~~ >0 and <99 | value greater than ~~one~~ zero and less than 99 | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 99 | not stated/inadequately described | |
| **Data element attributes** | | | |
| *Reporting attributes* | | | |
| **Reporting requirements** | Mandatory when contact type = 2 | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | Only report for Group contacts.  This should not include family members that have come along to support the client/potential client unless they are also being serviced as a client. | | |
| **Purpose/context** | Program monitoring, service planning. | | |
| *Source and reference attributes* | | | |
| **DHHS Common data dictionary** | Not applicable | | |
| **Definition source** | DH | | |
| **Definition source identifier** |  | | |
| **Value domain source** | DH | | |
| **Value domain identifier** |  | | |
| *Relational attributes* | | | |
| **Related concepts** | [Client](#_Client_2)  [Contact](#_Contact) | | |
| **Related data elements** | [Contact—contact type](#_Contact—contact_type—N) | | |
| **Edit/validation rules** | CH96 Contact-number of service recipients cannot be null when contact type is group | | |
| **Other related information** |  | | |

### 4.5.6 Service—priority type—N

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | Priority type is used to categorise the client’s need for a service and occurs as a result of the Initial Needs Identification (INI) | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N | **Maximum character length** | 1 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 1 | Low | |
|  | 2 | Routine | |
|  | 3 | Urgent | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 9 | not stated/inadequately described | |
| **Data element attributes** | | | |
| *Reporting attributes* | | | |
| **Reporting requirements** | Optional ~~Mandatory when Service—List start date or Service—Initial needs identification date is present.~~ | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | ~~Priority types are derived from the service coordination tool templates.~~ It is suggested that you utilise ~~the priority tools in the “Towards a Demand Management Framework”~~ ~~document or~~ the current prioritising mechanisms that your agency has in place when capturing this data item. | | |
| **Purpose/context** | Program monitoring and service planning.  Understanding access and service utilisation of priority population groups. | | |
| *Source and reference attributes* | | | |
| **DHHS Common data dictionary** | Not applicable | | |
| **Definition source** | METeOR | | |
| **Definition source identifier** | Based on 334003 | | |
| **Value domain source** | DH | | |
| **Value domain identifier** | DH | | |
| *Relational attributes* | | | |
| **Related concepts** | [Initial needs identification](#_7.5_Initial_Needs) | | |
| **Related data elements** | [Contact—client type](#_Client_type—X)  [Contact—contact type](#_Contact—contact_type—N)  [Service—initial needs identification date](#_Service—initial_needs_identificatio)  [Service—list start date](#_Service—list_start_date—DDMMYYYY) | | |
| **Edit/validation rules** | ~~CH14 Value must be active within codeset~~  ~~CH67 Service-priority type cannot be null when when Service—list start date or Service—initial needs identification date is present~~  CH15 Value must be active within codeset or null | | |
| **Other related information** | [~~Community Health Priority Tools~~](https://www2.health.vic.gov.au/primary-and-community-health/community-health/community-health-program/ch-demand-management/priority-tools-for-community-health-services) | | |

Section 5 Edit/validation rules

The data element edit/validation rules are listed in ID order, and grouped by ID type in Table 4. Note that it is expected that all data elements will be completed and in the correct format as specified in Chapter 4.

#### Table 4 Edit/Validation rules

| ID | Edit name/description | Data elements | Pseudo-code/rule | Source | Status |
| --- | --- | --- | --- | --- | --- |
| ~~CH67~~ | ~~Service-priority type cannot be null when when Service—list start date or Service—initial needs identification date is present~~ | ~~Service-priority type~~  ~~Service-list start date~~  ~~Service-initial needs identification date~~ | ~~Service-priority type = null and Service-list start date or Service-initial needs identification date ≠ null~~ | ~~DH~~ | ~~Critical Rejection~~ |
| CH15 | Value must be active within codeset or null | Applicable to optional codeset fields. Refer to edit/validation rules in Section 4. Data element definitions | Code ≠ codeset and ≠ null | DH | Critical Rejection |