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| HDSS Bulletin |
| Issue 286: 07 August 2025 |
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# Global Updates

## Test patients in data submissions

Recently, the identification of test patient data within submissions to the department has raised concerns regarding data integrity. Data submitted to the department is critical for funding allocation, performance monitoring, and service planning, and must accurately represent health service activities.

The department understands the need to test systems, new functionality and annual changes. To achieve this health services are encouraged to work with their vendors to obtain suitable test environments that support comprehensive end-to-end testing. Health services can send test files to the department, ensuring they are clearly identified as test files. **Under no circumstances should test patient data be included in submissions to the production environment.**

Public health service boards are accountable for the accuracy of reported data. Boards are expected to make data integrity the responsibility of their Audit Committee and ensure that data accuracy is subject to appropriate controls, including regular internal audit.

Health services are expected to coordinate their data submission and reconciliation processes internally between teams (both clinical and administrative where necessary) to ensure that mandatory reporting to the department is accurate and complete.

## 2025-26 Health data standards and systems data collection manuals

The 2025-26 data collection manuals for Elective Surgery Information System (ESIS), Victorian Admitted Episodes Dataset (VAED), Victorian Emergency Minimum Dataset (VEMD) and Victorian Integrated Non-Admitted Health Minimum Data Set (VINAH MDS) have been published on the [Data collections](https://www.health.vic.gov.au/data-reporting/data-collections) <https://www.health.vic.gov.au/data-reporting/data-collections> web page.

The Victorian Perinatal Data Collection (VPDC) manual for 2025-26 has been published on the [VPDC webpage](https://www.health.vic.gov.au/quality-safety-service/victorian-perinatal-data-collection) <https://www.health.vic.gov.au/quality-safety-service/victorian-perinatal-data-collection>.

The Agency Information Management System (AIMS) manual for the 2025-26 reporting period is being finalised.

## HDSS Helpdesk support – include data collection/ application in email subject line

The HDSS Helpdesk receives a high volume of emails from many stakeholders enquiring about a wide range of topics.

To help us triage your enquiry appropriately, please ensure emails to the HDSS Helpdesk indicate in the ‘Subject’ line which data collection/application the question relates to. Additional information is helpful too.

For example: VAED MFT: , VPDC Errors: , ESIS Test submission: , AIMS UCC: , VINAH HealthCollect portal: etc.

## Updated Postcode – locality reference file available

An updated Postcode – locality reference file is available to Victorian health services for non-commercial use, for the purpose of reporting and submitting data to the department’s acute data collections, including VAED, VEMD, ESIS, VINAH, and VPDC.

To request a copy of the Postcode – locality reference file email the [HDSS help desk](mailto:HDSS.helpdesk@health.vic.gov.au)  
 [<HDSS.helpdesk@health.vic.gov.au](mailto:%3cHDSS.helpdesk@health.vic.gov.au)>, noting this issue in your email subject line.

# Agency Information Management System (AIMS)

## Reporting to AIMS S10, S11, S11A and S12 forms for 2025-26 non-admitted activity

Effective for reporting of 2025-26 activity, health services submitting patient-level non-admitted data to the Victorian Integrated Non-Admitted Health Minimum Data Set (VINAH MDS) and/or the Non-Admitted Data Collection (NADC) will cease completing AIMS forms S10, S11, S11A, and S12 (further information is available in section 286.18 of this Bulletin for VINAH reporting sites).

**Important**:

* This change applies only to the AIMS S10, S11, S11A, and S12 forms, regardless of funding through NWAU or Block arrangements.
* It does not affect other AIMS data collections, including the Palliative Care Consultancy Program PCCP web form.
* Health services **not** submitting data to the VINAH MDS and/or NADC **must continue** to complete the AIMS S10 and/or S11 as assigned in the AIMS Selector for 2025-26. These health services are asked to **review** the clinics listed in the AIMS S10 to ensure they remain active, to **register** in the Non-Admitted Clinic Management System (NACMS) any new clinics relevant to 2025-26, and to **‘close’** in NACMS, effective 30/6/2025, any clinic that is no longer active in 2025-26.
* **All health services** **must continue to register** acute non-admitted specialist clinics in **NACMS**, as the registered clinic identifier is reported via the VINAH MDS and/or the NADC.

Please email the [HDSS help desk](mailto:HDSS.Helpdesk@health.vic.gov.au) <hdss.helpdesk@health.vic.gov.au> if you do not report VINAH/NADC data and the appropriate AIMS form is not available.

## HealthCollect Year selector now defaults to 2025-26.

From 1 July 2025, the Year selector in HealthCollect now defaults to 2025-26. To find data collections for reporting periods in 2024-25, the user must select 2024-25 in the drop-down list in the ‘Year’ window in the AIMS Selector.

## Hospital Research Activities data for 2024-25 now overdue

The Hospital Research Activities data collection for 2024-25 was due to be completed by 21 July 2025 and is now overdue. Health services that have not completed this reporting are asked to do so immediately.

This data collection is reported annually, at the whole-of-health-service level. It is found in the AIMS Selector by selecting ‘Year’ 2024-25, then the ‘Health Service’ name with the (AU) suffix.

Details about this data collection are provided in the [AIMS manual](https://www.health.vic.gov.au/data-reporting/agency-information-management-system-aims) <https://www.health.vic.gov.au/data-reporting/agency-information-management-system-aims>.

## AR7A and AR7B data collections for 2024-25 now open

The annual AR7A and AR7B data collections for 2024-25 have been released in the AIMS context in HealthCollect. These data collections report on Medical Equipment and Plant Equipment purchased during the financial year (AR7A) for all health services, and on Replacements under Medical Equipment and Engineering Infrastructure specific purpose capital grants (AR7B) for selected health services.

These data collections must be completed by 30 September 2025 for the 2024-25 financial year.

Health services participating in the Medical Equipment and/or Engineering Infrastructure replacement programs will have been notified of their Specific Purpose Capital Grants: the sum granted (rounded to the nearest $1000) has been pre-populated to their 2024-25 AR7B form, along with any carry-over amounts reported on their AR7B for the end of the 2023-24 financial year. The AR7B for 2024-25 reports expenditure during 2024-25, including any amount remaining at the end of 2024-25. When all details have been finalised on the 2024-25 form, check the ‘Completed’ box to ensure the data is submitted. If there was no carry-over amount at the end of 2023-24, and no expenditure during 2024-25, please submit the 2024-25 form to confirm this, by checking the ‘Completed’ box.

Information about the AR7A and AR7B data collections is provided in the [AIMS manual](https://www.health.vic.gov.au/data-reporting/agency-information-management-system-aims) <https://www.health.vic.gov.au/data-reporting/agency-information-management-system-aims>.

Questions about grants should be directed to the Health Infrastructure team at the Victorian Health Building Authority at [MERP&EIRP@health.vic.gov.au](mailto:MERP&EIRP@health.vic.gov.au) <MERP@EIRP@health.vic.gov.au>.

## Final dates for submission of AIMS data for 2024-25

Final dates for submission or correction of AIMS data are shown below.

**No extensions are possible to these deadlines.**

Please review and finalise 2024-25 data before the final submission date for each AIMS form.

**Note:** for most \*AIMS collections, the final date for submitting 2024ssion is Sunday 24 August 2025, so **please finalise data by COB on Friday 22 August 2025.**

The AIMS online year-to-date reports located under the Reports tab show data submitted for each collection.

|  |  |  |
| --- | --- | --- |
| **Data Collections grouped by reporting frequency** | **Form code** | **Final submission by** |
| **Annual data collections** | | |
| Hospital Research Data (2024-25) | HRA | 24 August 2025\* |
| Specialised Services Indicators (as of June 2025) | A2 | 24 August 2025\* |
| Plant and Equipment Purchased (2024-25) | AR7A | 30 September 2025 |
| Replacements under ME and EI grants (2024-25) | AR7B | 30 September 2025 |
| **Quarterly collections** | | |
| Commonwealth Quality Indicators and PSRACS Performance Indicators | QIPSRACS | 24 August 2025\* |
| Transition Care Program Key Performance Indicators | TCPKPIs | 24 August 2025\* |
| Palliative Care Consultancy Program | PCCP | 24 August 2025\* |
| **Monthly collections** | | |
| Public Hospital Beds | A3 | 24 August 2025\* |
| Acute Non-Admitted Clinic Activity | S10 | 24 August 2025\* |
| Sub-Acute Non-Admitted Activity | S11 | 24 August 2025\* |
| Subacute Non-Admitted MDCC patient not present | S11A | 24 August 2025\* |
| Self-delivered Non-Admitted Services | S12 | 24 August 2025\* |
| Urgent Care Centre | UCC | 24 August 2025\* |
| Radiotherapy Non-Admitted Services | S8 | 24 August 2025\* |
| Sub-Acute Access Indicators | SAAI | 24 August 2025\* |

# Elective Surgery Information System (ESIS)

## Reminder: Final ESIS Consolidation for 2024/25

Final corrections to 2024-25 data must be submitted before final consolidation on Sunday, 24 August 2025.

## Reporting of 2025-26 ESIS data

Health services that are yet to submit 2025-26 data are reminded the file sequence number for your first July submission must be 001: for example, ‘5000\_25\_07\_01\_001.zip’.

# Victorian Admitted Episode Dataset (VAED)

## Reminder: Final VAED Consolidation for 2024–25

Final submission of VAED data for the 2024–25 financial year must be completed by **5:00 pm on Sunday, 24 August 2025**.

This includes all **updates, corrections** and any **outstanding data** for episodes separated during the 2024–25 financial year. Please note, after this date **no further updates, corrections, or deletions** for FY2024–25 will be accepted.

To support the 2024-25 consolidation process, the following reports have been refreshed and distributed this week.

* **NWAU Reports and Extracts**
* **Hospital Activity Report**
* **Patient Level Reconciliation Report**
* **Admission Before Departure Report** – *Distributed via the VEMD MFT folder for each campus*

These extract and report files will be produced **weekly until consolidation and are available to download from the MFT portal from Tuesdays onwards.** Please note that reports are limited to weekly refreshes; more frequent updates are not available.

## Processing of 2025-26 data

The implementation of VAED system updates for 2025-26 is now complete. Sites may commence reporting data for the 2025-26 financial year by submitting July 2025 header dates.

As per the previous bulletin, before sites commence VAED reporting for 2025-26, VAED reporting for 2024-25 must be finalised. This includes the submission of all diagnosis (X5), palliative (P5) and sub-acute (S5) records for episodes separated in 2024-25, and the submission of any required updates and corrections for this financial year.

**It will not be possible for sites to include any data for the 2024-25 financial year in a VAED (PRS2) submission file with header dates in the 2025-26 financial year (July). The inclusion of any data (E5/J5/X5&Y5/V5/P5/S5) for episodes reporting a separation date in 2024-25, will result in this data being rejected by the PRS2 application.**

Public hospitals that are unable to submit patient-level data must submit the monthly aggregate data using the S1A form, available on the HealthCollect portal.

* The S1A form must be completed **for each public campus/site** that reports to the **VAED** within the health service.
* Ensure **both sections** of the form are completed
* Confirm the **tick box** indicating completion is appropriately updated

In addition to the S1A form, each health service reporting to the VAED must submit a [VAED late data notification form](https://forms.office.com/pages/responsepage.aspx?id=H2DgwKwPnESciKEExOufKII_2IfNHexFkH_EAj2AB_tUMVhVTFBKNzJMNVUwRTZXTDBZQ0FJUDNNMiQlQCN0PWcu&route=shorturl) <https://forms.office.com/pages/responsepage.aspx?id=H2DgwKwPnESciKEExOufKII\_2IfNHexFkH\_EAj2AB\_tUMVhVTFBKNzJMNVUwRTZXTDBZQ0FJUDNNMiQlQCN0PWcu&route=shorturl>.

Due to the high volume of submissions, individual acknowledgments will not be provided for each notification received.

If your site would like to submit VAED data for 2025-26 through the PRS2 Test database first, please email HDSS help desk <HDSS.helpdesk@health.vic.gov.au> with the **subject line: VAED testing – include site name.** As it is a manual process to run TEST data, please allow a day for the edit reports to be returned.

## 2025-26 Criteria for Reporting

VAED Criteria for Reporting has been updated for 2025-26 and published on the HDSS website.  
Updates include:

* Reporting scenarios for admitted patients attending the emergency department have been added.
* Section for Early Parenting Centres has been updated with new sites.
* Patients presenting for same day rehabilitation have been added to the non-admitted patient list.

# Victorian Emergency Minimum Dataset (VEMD)

## VEMD 2024-25 Consolidation

2024-25 VEMD is now consolidated. Final NWAU reports and extracts as well as VEMD Workcover statements were distributed via MFT to Health Services on 29 July 2025.

## [VEMD data resubmission request](https://forms.office.com/r/Jq4ZhqfBPB) no longer required

Effective 1 July 2025, health services will no longer be required to submit a VEMD data resubmission request form. Resubmissions may be made as needed without prior notification via the form.

# Victorian Integrated Non-Admitted Health Minimum Data Set (VINAH MDS)

## Final reminder regarding 2024-25 consolidation

All sites are reminded that VINAH data updates and corrections for the 2024-25 financial year must be **completed by 24 August 2025**,as published in the [Policy & Funding Guidelines](https://www.health.vic.gov.au/policy-and-funding-guidelines-for-health-services) <https://www.health.vic.gov.au/policy-and-funding-guidelines-for-health-services>. After this date it will no longer be possible to add Referral In, Episode, Contacts and Referral Out data for 2024–25. Please allow sufficient time to allow corrections and resubmissions before 24 August.

Prior to consolidation, please review data that has been reported to both AIMS and the VINAH MDS to ensure all data has been reported and accepted.   
Where AIMS corrections are required refer to instructions in the [AIMS Manual](https://urldefense.com/v3/__https:/www.health.vic.gov.au/data-reporting/agency-information-management-system-aims__;!!Eazh1jsY7uADovUh0Ro!4uLAkMe0oBE-92TtoQ_Mdg0_DTfWGiqVpbDq2Z0PsnoD_IxmmlIldyDbkW5pEYcjhutv4_j0UwtEoj-4xnOnMgKDSIJ2vdyE$) <https://www.health.vic.gov.au/data-reporting/agency-information-management-system-aims> for ‘Correction of Data Already Submitted’.

## Impact of changes when VINAH MDS/NADC reporting sites cease reporting to AIMS S10, S11, S11A and S12 forms

Effective for 2025-26 reporting, public health services and agencies submitting patient-level non-admitted data to the VINAH MDS and/or the Non-Admitted Data Collection (NADC) will cease completing AIMS forms S10, S11, S11A, and S12.

This change aligns with national requirements to use patient-level data for calculating activity against the National Weighted Activity Unit (NWAU) - see section 10 of the 2024-25 funding rules in the [Policy and Funding Guidelines](https://www.health.vic.gov.au/policy-and-funding-guidelines-for-health-services) <https://www.health.vic.gov.au/policy-and-funding-guidelines-for-health-services>.

#### Key impacts:

**Reporting data**: If a public health service or agency submits data for a program via the VINAH MDS and/or the NADC for *any* campus, program data for *all* campuses should be submitted via the VINAH MDS and/or the NADC

* Health services reporting patient-level program data via the VINAH MDS and/or the NADC are expected to include all relevant health service programs in these submissions.
* This includes patient-level reporting of Multidisciplinary Case Conference (MDCC) - both patient present and patient not present. Refer to the [Non-Admitted Multidisciplinary Case Conferences - Reporting Guidelines](https://www.health.vic.gov.au/publications/non-admitted-multidisciplinary-case-conferences-reporting-guidelines) <https://www.health.vic.gov.au/publications/non-admitted-multidisciplinary-case-conferences-reporting-guidelines>.

**AIMS vs VINAH reports**: These reports will not be available for 2025-26 as there will be no data in AIMS to compare. Previous years will continue to be available.

**Data Reconciliation**: Public health services/agencies must reconcile data reported and accepted to the VINAH MDS and/or the NADC with their internal system records.

* + Reconciliation reports are available for download via HealthCollect in various formats, including Excel.
  + These reports display VINAH MDS activity that has been accepted into the VINAH MDS database.
  + Hospitals can use these reports to verify their activity data.
  + For the NADC, NWAU reports and extracts are uploaded twice monthly in the MFT folder.

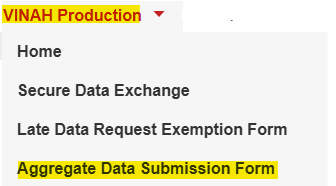
Health services are expected to coordinate their data submission and reconciliation processes internally between teams (both clinical and administrative where necessary) to ensure that mandatory reporting to the department is accurate and complete.

### Public health services/agencies unable to report complete patient level data by the due date

In line with current procedure, a late data exemption request must be submitted for each program where complete patient-level data for the health service is not able to be reported via the VINAH MDC/NADC.

Effective from the 2025-26 reporting period, aggregate data for each program where complete patient-level data cannot be reported by the due date must be reported for the health service.

A new VINAH aggregate data submission form is now available via HealthCollect - click on the VINAH production link to access.



Complete patient-level data must be reported as soon as it becomes available. Aggregate data does not replace the requirement to report patient-level data.

## Additions to the VINAH MDS manual 2025-26

### Section 9 - code set

#### Contact Campus Code

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Data Element Name** | Code Set Identifier | Code Set Type | Code | Descriptor | Reportable Requirements | Change |
| Contact Campus Code | HL70115 | Code Set | 2850 | Monash Health [Cranbourne Community Hospital] | Reportable as of 01/07/2025 | Add |

#### Contact Provider Code

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Data Element Name** | Code Set Identifier | Code Set Type | Code | Descriptor | Reportable Requirements | Change |
| Contact Provider Code | 990012 | Code Set | 2850 | Monash Health [Cranbourne Community Hospital] | Reportable as of 01/07/2025 | Add |

#### Episode Campus Code

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Data Element Name** | Code Set Identifier | Code Set Type | Code | Descriptor | Reportable Requirements | Change |
| Episode Campus Code | HL70115 | Code Set | 2850 | Monash Health [Cranbourne Community Hospital] | Reportable as of 01/07/2025 | Add |

# Non-Admitted Data Collection (NADC)

## Final reminder regarding 2024-25 consolidation

All sites are reminded that NADC data updates and corrections for the 2024–25 financial year must be **completed by 24 August 2025**,as published in the [Policy & Funding Guidelines](https://www.health.vic.gov.au/policy-and-funding-guidelines-for-health-services) <https://www.health.vic.gov.au/policy-and-funding-guidelines-for-health-services>.

Remember that until your return reports are error free, including resubmissions, all data reported for that month is rejected.

Please allow sufficient time to allow corrections and resubmissions before 24 August. After this date it will not be possible to make submissions for 2024–25 data.

## NADC manual 2025-26

The NADC manual for 2025-26 has been distributed to the HDSS contacts for approved reporting health services. If you are an NADC approved reporting health service and have not received the manual, please email the [HDSS help desk](mailto:HDSS.Helpdesk@health.vic.gov.au) <hdss.helpdesk@health.vic.gov.au>.

# Contacts

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 MDS)
* Victorian Perinatal Data Collection (VPDC)

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://www.health.vic.gov.au/data-reporting/health-data-standards-and-systems) <https://www.health.vic.gov.au/data-reporting/health-data-standards-and-systems>

**HDSS help desk**

Enquiries regarding data collections and requests for standard reconciliation reports email

[HDSS help desk](mailto:HDSS.Helpdesk@health.vic.gov.au) <HDSS.helpdesk@health.vic.gov.au>

**Other Victorian health data requests**

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

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