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| Proposed changes and feedback to the VADC for 1 July 2021 |
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# Purpose

* This paper is seeking feedback from the alcohol and other drug (AOD) sector regarding proposals for changes to the Victorian Alcohol and Drug Collection (VADC) for implementation on 01 July 2021.
* The proposals presented have been reviewed and assessed by the VADC Change Management Group and confirmed by the VADC Change Control Group for distribution to the sector for feedback.
* This feedback will inform the recommendations for changes, made by the Change Management and Control Groups to the Data Custodian.
* Feedback from multiple people within your service should be collated into a single response for each proposal
* We suggest speaking with the supplier of your client management system regarding technical impacts and your program manager regarding clinical impacts.
* Please contact [VADC\_data@dhhs.vic.gov.au](mailto:vadc_data@dhhs.vic.gov.au) if you have any questions.

# Orientation to this document

* New elements and changes to existing data elements are highlighted in green
* Redundant values and definitions relating to existing items are ~~highlighted yellow and struck through~~.
* Comments relating only to the proposal document appear in [*square brackets and italics*].
* New validations are marked ###
* Validations to be changed are marked \* when listed as part of a data item or below a validation table.
* Anticipated changes are shown under the appropriate manual section headings.

|  |  |
| --- | --- |
| **Name:** |  |
| **Job Title:** |  |
| **AOD Service Provider name:** |  |
| **CMS System used:** |  |

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# Proposal 1 – Changes to Business Rule for presentation events

|  |  |
| --- | --- |
| It is proposed to | Change business rule to remove requirement that presentation service events must start and end on the same day. |
| Proposed by | Sector |
| Reason for proposed change | To ensure AOD CMS systems allow for presentation events to occur for over one day, which reflects current practice. |
| Data Specification change summary | Documentation - change to business rule  **Remove the following from 4.2.10.1 Presentation**  ~~A Presentation service event is non-episodic in nature and should start and end on the same day~~. |
| Technical change | CMS dependent |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 1**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 4.2.10 Service event type

#### 4.2.10.1 Presentation

~~A Presentation service event is non-episodic in nature and should start and end on the same day.~~

A service event with event type of Presentation must be associated with a client and must have one contact.

A service event with event type of Presentation must have the following information reported, in addition to the common data elements for Service events listed in Section **Error! Reference source not found.**:

* Presenting Drug of Concern

# Proposal 2 – Modify codeset for Drug of concern

|  |  |
| --- | --- |
| It is proposed to | Add a new code for ‘No drug of concern identified’ to ‘Event - presenting drug of concern’ and ‘Drug Concern - drug name’ data elements. Persons of concern clients mandated to receive AOD treatment or involuntary clients may have drug and alcohol conditions on their order, but could choose not to provide a drug of concern |
| Proposed by | Sector |
| Reason for proposed change | With the reporting of Principal Drug of Concern to become mandatory in 2021-22 specifications, there needs to be an option for mandated or involuntary clients who have drug and alcohol conditions on their order, or have been directed by Child Protection to attend assessment but who deny substance abuse issues.  The proposed change is to ensure data integrity and accuracy for the client group who do not fit the current grouping of substance use reporting. The additional field will allow clients who do not report a drug of concern to be recognised as such. |
| Data Specification change summary | Add a new value to an existing data element  **5.3.2 Drug Concern—drug name & 5.4.12 Event—presenting drug of concern**  Additional supplementary value  0002 -” Not identified as a drug of concern”  *Guide for use*  0002 – Where a client is the person of concern however will not specify a drug of concern |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 2**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.3.2 Drug Concern—drug name—NNNN

|  |  |  |  |
| --- | --- | --- | --- |
| Identifying and definitional attributes | | | |
| Definition | The drug of concern of the registered client | | |
| Value domain attributes | | | |
| Representational attributes | | | |
| Representation class | Code | Data type | Number |
| Format | NNNN | Maximum character length | 4 |
| Permissible values | Value | Meaning | |
|  | 2101 | Alcohol | |
|  | 3100 | Amphetamines Unspecified | |
|  | 2400 | Benzodiazepines Unspecified | |
|  | 3901 | Caffeine | |
|  | 3201 | Cannabis | |
|  | 3903 | Cocaine | |
|  | 1202 | Heroin | |
|  | 3405 | MDMA (includes ecstasy) | |
|  | 3103 | Methamphetamine (includes ice, speed) | |
|  | 1305 | Methadone | |
|  | 3906 | Nicotine | |
|  | The ASCDC (2011) code set | Other Substance: Specify the ASCDC four-digit code representing drug of concern.  Refer to Appendix 7.5: Large-value domains. | |
| Supplementary values | Value | Meaning | |
|  | 0000 | Inadequately Described | |
|  | 0001 | Not Stated | |
|  | 0002 | Not identified as a drug of concern | |
|  | 0005 | Opioid analgesics not further defined | |
|  | 0006 | Psychostimulants not further defined | |
| Data element attributes | | | |
| |  |  | | --- | --- | | Reporting attributes | | | Reporting requirements | Mandatory when drug of concern is related to client’s own alcohol and drug use | | | | |
| Collection and usage attributes | | | |
| Guide for use | Only report where drug of concern, is related to the client’s own alcohol and drug use. For clients whose treatment is related to the alcohol and other drug use of another person, this metadata item should not be collected.  The Australian Standard Classification of Drugs of Concern (ASCDC) provides a number of supplementary codes that have specific use, and these are detailed within the ASCDC, e.g. 0000 = inadequately described.  ‘9000 miscellaneous drug of concern’ supplementary code should only be used as principal drug of concern where the client does not have any discernible precise drugs of concern.  Other supplementary codes that are not already specified in the ASCDC may be used in National Minimum Data Sets (NMDS) when required.  In the Alcohol and other drug treatment service NMDS, two additional supplementary codes have been created which enable a finer level of detail to be captured:   |  |  | | --- | --- | | Code 0002 | Not identified as a drug of concern- Includes where a client is the person of concern however will not specify a drug of concern | | Code 0005 | Opioid analgesics not further defined | | This code is to be used when it is known that the client's principal drug of concern is an opioid, but the specific opioid used is not known. The existing code 1000 combines opioid analgesics and non-opioid analgesics together into Analgesics nfd and the finer level of detail, although known, is lost. | | Code 0006 | Psychostimulants not further defined | | This code is to be used when it is known that the client's principal drug of concern is a psychostimulant but not which type. The existing code 3000 combines stimulants and hallucinogens together into Stimulants and hallucinogens nfd and the finer level of detail, although known, is lost.  Psychostimulants refer to the types of drugs that would normally be coded to 3100-3199, 3300-3399 and 3400-3499 categories plus 3903 and 3905. | | | |
| Source and reference attributes | | | |
| Definition source | Australian Bureau of Statistics | | |
| Definition source identifier | http://www.abs.gov.au/ausstats/abs@.nsf/ | | |
| Value domain source | Drugs of Concern (1248.0 - Australian Standard Classification of Drugs of Concern, 2011) | | |
| Value domain identifier | http://www.abs.gov.au/ausstats/abs@.nsf/mf/1248.0 | | |
| Relational attributes | | | |
| Related concepts | Outcome | | |
| Related data elements | Event-presenting drug of concern | | |
| Edit/validation rules | AOD2 cannot be null | | |
|  | AOD113 cannot have two identical drugs of concern for same outcome measure | | |
|  | AOD114 only 6 drugs of concern required for same outcome measure | | |
| Other related information |  | | |

### 5.4.12 Event—presenting drug of concern—NNNN

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | The drug of concern of the client, when presenting to the service | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | NNNN | **Maximum character length** | 4 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 2101 | Alcohol | |
|  | 3100 | Amphetamines Unspecified | |
|  | 3103 | Methamphetamine (includes ice, speed) | |
|  | 2400 | Benzodiazepines Unspecified | |
|  | 3901 | Caffeine | |
|  | 3201 | Cannabis | |
|  | 3903 | Cocaine | |
|  | 3405 | MDMA (includes ecstasy) | |
|  | 1202 | Heroin | |
|  | 1305 | Methadone | |
|  | 3906 | Nicotine | |
|  | ASCDC (2011) code set | The ASCDC (2011) code set representing drug of concern.  Refer to Appendix 7.5: Large-value domains. | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 0002 | Not identified as a drug of concern | |
|  | 0005 | Opioid analgesics not further defined | |
|  | 0006 | Psychostimulants not further defined | |
| **Data element attributes** | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Conditional –  Mandatory for Presentation service events | | | | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | When service provided is related to potential client/client’s own alcohol or other drug use, this is the presenting drug of most concern, they are seeking help for.  Where treatment is related to the alcohol and other drug use of another person, e.g. the potential client/client is a family member or significant other, this refers to the presenting drug of concern for the client.  The Australian Standard Classification of Drugs of Concern (ASCDC) provides a number of supplementary codes that have specific uses, and these are detailed within the ASCDC, e.g. 0000 = inadequately described.  ‘9000 miscellaneous drug of concern’ supplementary code should only be used as presenting drug of concern where the client does not have any discernible precise drugs of concern.  Other supplementary codes that are not already specified in the ASCDC may be used in National Minimum Data Sets (NMDS) when required.  In the Alcohol and other drug treatment service NMDS, two additional supplementary codes have been created which enable a finer level of detail to be captured:  Use null for Assessment, Treatment, Support and Review Service Event Types   |  |  | | --- | --- | | Code 0002 | Not identified as a drug of concern- Includes where a client is the person of concern however will not specify a drug of concern | | Code 0005 | Opioid analgesics not further defined | | This code is to be used when it is known that the client's principal drug of concern is an opioid, but the specific opioid used is not known. The existing code 1000 combines opioid analgesics and non-opioid analgesics together into Analgesics nfd and the finer level of detail, although known, is lost. | | Code 0006 | Psychostimulants not further defined | | This code is to be used when it is known that the client's principal drug of concern is a psychostimulant but not which type. The existing code 3000 combines stimulants and hallucinogens together into Stimulants and hallucinogens nfd and the finer level of detail, although known, is lost.  Psychostimulants refer to the types of drugs that would normally be coded to 3100-3199, 3300-3399 and 3400-3499 categories plus 3903 and 3905. | | | |
| *Source and reference attributes* | | | |
| **Definition source** | Australian Bureau of Statistics | | |
| **Definition source identifier** | http://www.abs.gov.au/ausstats/abs@.nsf/ | | |
| **Value domain source** | Drugs of Concern (1248.0 - Australian Standard Classification of Drugs of Concern, 2011) | | |
| **Value domain identifier** | http://www.abs.gov.au/ausstats/abs@.nsf/mf/1248.0 | | |
| *Relational attributes* | | | |
| **Related concepts** | Service event | | |
| **Related data elements** | Drug Concern-principal concern | | |
| **Edit/validation rules** | AOD28 event type mismatch, event type is not presentation  AOD159 presentation but no presenting drug of concern | | |
| **Other related information** |  | | |

# Proposal 3 – Remove an existing data element MASCOT

|  |  |
| --- | --- |
| It is proposed to | Remove the data element MASCOT and associated business rules |
| Proposed by | Sector |
| Reason for proposed change | MASCOT is no longer required for forensic clients |
| Data Specification change summary | Remove an existing data element and business rule  **~~5.4.10 Event—MASCOT Score—N~~**  **4.2.10 Service event**  ~~Assessment service events for clients on a forensic order, require a MASCOT score to also be reported for those clients assessed by ACSO~~ |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 3**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### ~~5.4.10 Event—MASCOT Score—N~~

|  |  |  |  |
| --- | --- | --- | --- |
| *~~Identifying and definitional attributes~~* | | | |
| **~~Definition~~** | ~~The score from the MASCOT assessment tool for the client~~ | | |
| **~~Value domain attributes~~** | | | |
| *~~Representational attributes~~* | | | |
| **~~Representation class~~** | ~~Code~~ | **~~Data type~~** | ~~Number~~ |
| **~~Format~~** | ~~N~~ | **~~Maximum character length~~** | ~~1~~ |
| **~~Permissible values~~** | ***~~Value~~*** | ***~~Meaning~~*** | |
|  | ~~1~~ | ~~low (15-45)~~ | |
|  | ~~2~~ | ~~moderate (46-60)~~ | |
|  | ~~3~~ | ~~high (61-75)~~ | |
| **~~Supplementary values~~** | ***~~Value~~*** | ***~~Meaning~~*** | |
|  | ~~9~~ | ~~not stated/inadequately described~~ | |
| **~~Data element attributes~~** | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *~~Reporting attributes~~* | | | **~~Reporting requirements~~** | ~~Conditional –~~  ~~Mandatory at Assessment service event end when service stream is Comprehensive assessment, client is forensic and service provider is ACSO~~ | | | | | |
| *~~Collection and usage attributes~~* | | | |
| **~~Guide for use~~** | ~~Use null if non-forensic client, and/or service provider is not ACSO and where Service Event Type is Presentation, Treatment, Support or Review~~  ~~CODE 9 Should be used if MASCOT Score for forensic client, is not calculated, or is unknown.~~ | | |
| *~~Source and reference attributes~~* | | | |
| **~~Definition source~~** | ~~ACSO~~ | | |
| **~~Definition source identifier~~** | [~~http://coats.ACSO.org.au/files/8214/6179/9995/Working\_with\_Forensic\_Clients\_-\_An\_Assessment\_Guide.pdf~~](http://coats.acso.org.au/files/8214/6179/9995/Working_with_Forensic_Clients_-_An_Assessment_Guide.pdf) | | |
| **~~Value domain source~~** | ~~ACSO~~ | | |
| **~~Value domain identifier~~** | [~~http://coats.ACSO.org.au/files/8214/6179/9995/Working\_with\_Forensic\_Clients\_-\_An\_Assessment\_Guide.pdf~~](http://coats.acso.org.au/files/8214/6179/9995/Working_with_Forensic_Clients_-_An_Assessment_Guide.pdf)  ~~Section 7.3~~ | | |
| *~~Relational attributes~~* | | | |
| **~~Related concepts~~** | ~~Service event~~ | | |
| **~~Related data elements~~** | ~~Event-end date~~ | | |
| **~~Edit/validation rules~~** | ~~AOD0 value not in codeset for reporting period~~  ~~AOD29 event type mismatch, event type is not assessment~~ | | |
| **~~Other related information~~** |  | | |

**4.2 Services (Business rules)**

**4.2.10.2 Assessment**

~~Assessment service events for clients on a forensic order, require a MASCOT score to also be reported for those clients assessed by ACSO~~

**7.3 Data Dictionary**

Table 12 Service event

| Data element name | Type | Mandatory | Comment |
| --- | --- | --- | --- |
| Start date | Date | Yes | The day, month and year of the service event start. |
| End date | Date | Yes (on end) | The day, month and year of the service event end. |
| Forensic type | N(4) | Yes | An indication of the order or notice that the client is on for this service event |
| Indigenous status | N(1) | Yes | Whether the client identified as being Aboriginal and/or Torres Strait Islander Origin for this service event. |
| Service delivery setting | N(1) | Yes (on end) | The main setting in which the service was delivered |
| Event type | N(1) | Yes | The event type for the event, which indicates the current point in the client journey. |
| Service stream | N(2) | Yes | The service stream that the event belongs to. |
| Funding source | N(N(2)) | Yes | The funding source for the service event |
| Did not attend | N(N) | Conditional | A count of the number of times a client or potential client did not attend |
| Presenting drug of concern | N(4) | Conditional | The presenting drug of concern for the potential client or client |
| TIER | N(1) | Conditional | The TIER of the client for the service event, rated by the clinician |
| ~~MASCOT Score~~ | ~~N(1)~~ | ~~Conditional~~ | ~~A score from the MASCOT tool indicating whether a forensic client is ready for treatment~~ |
| Assessment completed date | Date | Conditional | The day, month and year of the assessment end, that led to a treatment service event. |
| Target population | N(1) | Conditional | The target population for a treatment service event, for both Residential and non-Residential service streams |
| Course length | N(1) | Conditional | The length of a treatment service event either Standard or Long, from service streams of Counselling, Residential or Non-Residential Withdrawal. |
| Percentage course completed | N(1) | Conditional | The percentage of the treatment completed by the client |
| Significant goal achieved | N(1) | Conditional | Whether a significant goal was achieved over the course of treatment |
| Reporting period | Date | Yes | The period the record relates to |
| Extract date | Date/Time | Yes | The date and time the record was extracted, or compiled for submission |
| Action | N(1) | Yes | I-Insert, U-Update, D-Delete |
| Outlet client ID | A(10) | Yes | The client the change relates to |
| Outlet service event ID | A(10) | Yes | The service event the change relates to |
| Outlet code | A(9) | Yes | The outlet the service event record relates to |
| Business Rules | | | |
| * All service events will have one service stream * All service events will have at least one contact or bed day * All service events must have an associated registered client * Did not attend, must be reported for Assessment and Treatment service events on end * Presenting drug of concern must be reported for all Presentation service events * TIER must be reported on all Assessment service event end * ~~MASCOT score must be reported on all Assessment service event end for forensic clients assessed by ACSO~~ * Assessment completed date and target population must be reported on all Treatment service events. * Percentage course complete, and end reason must be reported on all Treatment service event end * Course length, and significant goal achieved are conditionally required based on Service stream of Treatment service events. | | | |

**7.4 Data element definitions**

Table 16 Data element origin

| Data element | Data Element type | CRDD |
| --- | --- | --- |
| Accommodation type | Outcomes | Client v3.0 |
| Acquired brain injury | Client |  |
| Assessment completed date | Event |  |
| ACSO identifier | Referral |  |
| Arrested last four weeks | Outcomes |  |
| AUDIT Score | Outcomes |  |
| Client review date | Outcomes |  |
| Contact date | Contact | Service 1.0 |
| Contact duration | Contact | Service 1.0 |
| Contact method | Contact | Service 1.0 |
| Contact type | Contact | Service 1.0 |
| Country of birth | Client | Client v3.0 |
| Date first registered | Client |  |
| Date last use | Drug Concern |  |
| Date of birth | Client | Client v3.0 |
| Days injected last four weeks | Outcomes |  |
| Dependant child protection order flag | Client |  |
| Dependant living with flag | Client |  |
| Dependant vulnerable flag | Client |  |
| Dependant year of birth | Client |  |
| Did not attend | Event |  |
| Direction | Referral |  |
| DOB accuracy indicator | Client | Client v3.0 |
| Drug name | Drug Concern |  |
| Drug of concern identifier | Outlet |  |
| DUDIT Score | Outcomes |  |
| Employment status | Outcomes | Client v3.0 |
| End date | Event | Service 1.0 |
| End reason | Event |  |
| Event type | Event | Service 1.0 |
| Forensic type | Event | Client-legal status |
| Frequency last 30 days | Drug Concern |  |
| Funding source | Event |  |
| Gender identity | Client |  |
| Indigenous status | Event | Client v3.0 |
| Individual health identifier | Client |  |
| K10 Score | Outcomes |  |
| LGB flag | Client |  |
| Locality name | Client | Address v1.1 |
| Maltreatment code | Client |  |
| Maltreatment perpetrator | Client |  |
| ~~MASCOT score~~ | ~~Event~~ |  |
| Medicare card number | Client | Client v3.0 |
| Mental health diagnosis | Client |  |
| Method of use | Drug Concern |  |
| Need for interpreter services | Client | Client v3.0 |
| Number of facilitators present | Contact |  |
| Number service recipients | Contact |  |
| Outcome measure identifier | Outlet |  |
| Outlet client identifier | Outlet |  |
| Outlet code | Outlet |  |
| Outlet service event identifier | Outlet | Service 1.0 |
| Outlet dependant identifier | Outlet |  |
| Outlet contact identifier | Outlet |  |
| Outlet referral identifier | Outlet |  |
| Percentage course completed | Event |  |
| Physical health | Outcomes |  |
| Postcode | Client | Address v1.1 |
| Preferred language | Client | Client v3.0 |
| Presenting drug of concern | Event |  |
| Principal concern | Drug Concern |  |
| Psychological health | Outcomes |  |
| Quality of life | Outcomes |  |
| Referral date | Referral | Service 1.0 |
| Referral provider type | Referral | Service 1.0 |
| Referral service type | Referral |  |
| Refugee status | Client | Client v3.0 |
| Relationship to client | Contact |  |
| Risk to others | Outcomes |  |
| Risk to self | Outcomes |  |
| Service delivery setting | Event |  |
| Service Stream | Event |  |
| Sex at birth | Client | Client v3.0 |
| Significant goal achieved | Event |  |
| Start date | Event | Service 1.0 |
| Statistical linkage key | Client | Client v3.0 |
| Target population | Event |  |
| TIER | Event |  |
| Unemployed not training | Outcomes |  |
| Violent last four weeks | Outcomes |  |
| Volume | Drug Concern |  |
| Volume unit | Drug Concern |  |

### 6 Edit/Validation Rules

| ID | Edit name/description | Data elements | Pseudo code/rule | Status |
| --- | --- | --- | --- | --- |
| AOD29 | Event type mismatch, event type is not assessment | ~~Event-MASCOT Score~~  Event-TIER  Event-event type | value !=(null, 8, 9) AND event type != 2 | warning |

# Proposal 4 – Add two new contact data elements Direct/Indirect descriptions & modify codeset for contact type

|  |  |
| --- | --- |
| It is proposed to | Add two new contact data elements and modify codeset for Contact-contact type |
| Proposed by | Vendor |
| Reason for proposed change | To capture the specifics of what type of activity that is being undertaken for example admin, travel time, counselling, learning, education etc.  One element lacking from a number of Minimum Data Sets is the collection of the context of a contact. Adding an additional ‘Contact\_Activity’ field would provide much more visibility into what these contacts actually are. While all Data Sets require contact level information (time, duration, specialty, location) there is no classification of what exactly a clinician is spending their time doing with their clients. Having this context would provide much richer contact data for DHHS and its providers and should provide a much clearer picture into clinician’s practices and how they engage with their clients. |
| Data Specification change summary | **Add two new data elements: Contact-direct description; Contact-indirect description**  **Modify Contact-contact type codeset** |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 4**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.2.3 Contact—contact type-N

|  |  |  |  |
| --- | --- | --- | --- |
| Identifying and definitional attributes | | | |
| Definition | The type of contact that was made | | |
| Value domain attributes | | | |
| Representational attributes | | | |
| Representation class | Code | Data type | Number |
| Format | N | Maximum character length | 1 |
| Permissible values | Value | Meaning | |
|  | 1 | Individual | |
|  | 2 | group | |
|  | 4 | Indirect | |
| Supplementary values | ***Value*** | ***Meaning*** | |
|  | 9 | not stated/inadequately described | |
| Data element attributes | | | |
| |  |  | | --- | --- | | Reporting attributes | | | Reporting requirements | Mandatory | | | | |
| Collection and usage attributes | | | |
| Guide for use | Report the type of contact between an AODT service provider and a client/potential client and their family members or significant others.  Every contact should be related to a service event that involved an individual or a group.   |  |  | | --- | --- | | Code 1 | Individual - Contact is direct and with/about a sole client.  Includes:  -Where client and their family members are present during the contact, and family members are not clients.  -Where multiple AODT clinicians are concurrently providing a contact to a sole client present.  - Contact about a sole client, where client is not present ie. Clinician(s) to clinician(s) | | Code 2 | Group – Contact is direct and with one or more participants who all have concurrent treatment in a group setting. | | Code 4 | Indirect - Time spent indirectly servicing a registered client | | | |
| Source and reference attributes | | | |
| Definition source | METeOR | | |
| Definition source identifier | Based on Contact Type Indicator - N - CHMDS - DE - 10005720 | | |
| Value domain source | METeOR | | |
| Value domain identifier | [Contact Type Indicator - N - CHMDS - VD - 10005721](javascript:void(0);) | | |
| Relational attributes | | | |
| Related concepts | Contact | | |
| Related data elements | Contact-number of facilitators present | | |
|  | Contact-number of service recipients | | |
|  | Contact-direct description | | |
|  | Contact-indirect description | | |
| Edit/validation rules | \*AOD0 value not in codeset for reporting period  AOD2 cannot be null | | |
|  | AOD26 group contact with less than two service recipients | | |
|  | AOD27 individual contact with more than one service recipient | | |
| Other related information |  | | |

### Contact-direct contact description—NN

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | The contact activity type spent servicing a registered client | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N | **Maximum character length** | 2 |
| **Permissible values instructions** | ***Value*** | ***Meaning*** | |
|  | 1 | client consult | |
|  | 2 | care coordination | |
|  | 3 | assessment | |
|  | 4 | needs identification | |
|  | 5 | goals identification | |
|  | 6 | case management | |
|  |  |  | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 98 | other | |
|  | 99 | not stated /inadequately described | |
| **Data element attributes** | | | |
| *Reporting attributes* | | | |
| **Reporting requirements** | Conditional  Mandatory where contact type is NOT 4, otherwise must be NULL | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | Other types of indirect hours should not be reported e.g. preventative community education, administration tasks such as arranging appointments. | | |
| *Source and reference attributes* | | | |
| **Definition source** | DHHS | | |
| **Definition source identifier** |  | | |
| **Value domain source** | DHHS | | |
| **Value domain identifier** | DHHS | | |
| *Relational attributes* | | | |
| **Related concepts** | Contact | | |
| **Related data elements** | Contact-type | | |
|  | Contact-duration | | |
| **Edit/validation rules** | \*AOD0 value not in codeset for reporting period | | |
|  |  | | |
| **Other related information** |  | | |

### Contact—indirect contact description—NN

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | The type of indirect time spent indirectly servicing a registered client | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N | **Maximum character length** | 2 |
| **Permissible values instructions** | ***Value*** | ***Meaning*** | |
|  | 1 | case preparation and review | |
|  | 2 | preparation for not attended session (DNA) | |
|  | 3 | referral management | |
|  | 4 | group session preparation | |
|  | 5 | secondary consultations | |
|  | 6 | health and welfare professional contacts | |
|  | 7 | attempted follow up | |
|  | 8 | travel time | |
|  | 9 | case management | |
|  | 10 | report writing | |
|  | 11 | waitlist management | |
|  | 12 | information and advice | |
|  | 13 | advocacy | |
|  | 14 | liaison | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 98 | other | |
|  | 99 | not stated /inadequately described | |
| **Data element attributes** | | | |
| *Reporting attributes* | | | |
| **Reporting requirements** | Conditional  Mandatory where contact type is 4, otherwise must be NULL | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | These must be essential activities spent away from a client, to provide support to the servicing and clinical care of a registered client.   |  |  | | --- | --- | | Code 1 | This should be used for Preparing and reviewing case notes where the client has attended the session | | Code 2 | This should be used for Preparing and reviewing case notes where the client did not attend the session | | Code 3 | This should be used when reporting time spent on referring the client including writing and finding an appropriate referral destination provider. | | Code 4 | This should be used when reporting time spent on preparing for a group session, that is not a health promotion session | | Code 5 | Secondary consultation when two clinicians discuss a client’s case to form a collaborative opinion. The time can be counted as indirect service time by both if they are both seeing the client, otherwise if only one is seeing the client then only that provider can count the time. | | Code 6 | This should be used for any health or welfare professional contacts that are not secondary consultations e.g. contacts with allied health, general practitioners. May be providing feedback on client’s progress or needs. | | Code 7 | This should be used for reporting time spent on attempting follow up with a client that was then unsuccessful | | Code 8 | This code should be used for reporting the time spent travelling to service the client e.g. Rural, Outreach settings. | | Code 9 | If indirect hours are reported as zero, then the indirect hours type should be reported as Code 9. |   Other types of indirect hours should not be reported e.g. preventative Community education, administration tasks such as arranging appointments. | | |
| *Source and reference attributes* | | | |
| **Definition source** | DHHS | | |
| **Definition source identifier** | DHHS | | |
| **Value domain source** | DHHS | | |
| **Value domain identifier** | DHHS | | |
| *Relational attributes* | | | |
| **Related concepts** | Contact | | |
| **Related data elements** | Contact-type | | |
|  | Contact-duration | | |
|  |  | | |
| **Edit/validation rules** | \*AOD0 value not in codeset for reporting period | | |
|  |  | | |
| **Other related information** |  | | |

### 6 Edit/Validation Rules

| ID | Edit name/description | Data elements | Pseudo code/rule | Status |
| --- | --- | --- | --- | --- |
| ### | Contact record with direct contact description where contact type is indirect | *Contact-Direct description*  *Contact-Contact Type* | *[TBC]* | Error |
| ### | Contact record with indirect contact description where contact type is not indirect | *Contact-Indirect description*  *Contact-Contact Type* | *[TBC]* | Error |

### 3.2 Services (Concepts)

**3.2.6 Indirect time**

Duration (in minutes) that has been spent away from a client or clients in essential activities to provide support to a client or clients.

**7.3 Data Dictionary**

Table 10 Contacts

| Data element name | Type | Mandatory | Comment |
| --- | --- | --- | --- |
| Contact date | Date/Time | Yes | The date and time of the contact between the client/potential client and the service provider. |
| Contact duration | N(N(2)) | Yes | Total minutes of contact between the client/potential client and service provider |
| Contact method | N(1) | Yes | Method with which the client/potential client and service provider contact took place |
| Contact type | N(1) | Yes | Whether the contact was an individual or group contact |
| Relationship to client | N(1) | Yes | The relationship of the contact to the client |
| Number facilitators present | N(N) | Conditional | The total number of facilitators present at the contact |
| Number of service recipients | N(N) | Conditional | The total number of service recipients at the contact |
| Outlet contact identifier | N(10) | Conditional | A numerical identifier that uniquely identifies a contact from an outlet |
| Direct contact description | NN | Conditional | The contact activity type spent servicing a registered client |
| Indirect contact description | NN | Conditional | The type of indirect time spent indirectly servicing a registered client |
| Business Rules | | | |
| * Direct Contacts should only be reported if they actually occurred and not just attempted * Contacts will always be associated with a Service event * Contacts should not be reported for administration tasks e.g. arranging appointments * Contacts should not be reported for Residential Rehabilitation and Residential Withdrawal * Should result in a record being made in the client’s case notes, file or history * Number of facilitators and service recipients to be reported for group contacts only | | | |

**7.4 Data element definitions**

Table 16 Data element origin

| Data element | Data Element type | CRDD |
| --- | --- | --- |
| Direct contact description | Contact | Service 1.0 |
| Indirect contact description | Contact | Service 1.0 |

[*No further changes to Table 16*]

# Proposal 5 – Modify codeset for Client-mental health diagnosis

|  |  |
| --- | --- |
| It is proposed to | Modify descriptor for code in Client - mental health diagnosis data element |
| Proposed by | Sector |
| Reason for proposed change | To improve accuracy in code description. |
| Data Specification change summary | Modify description of a code for an existing data element  “**Client—mental health diagnosis**”  “0 No mental health diagnosis” to  “0 No co-occurring mental health diagnosis” |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 5**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.1.17 Client—mental health diagnosis—N[N]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Identifying and definitional attributes | | | | |
| Definition | Whether the client has been diagnosed by a mental health practitioner as having a co-occurring mental health diagnosis, excluding those due to psychoactive substance use | | | |
| Value domain attributes | | | | |
| Representational attributes | | | | |
| Representation class | Code | | Data type | Number |
| Format | N[N] | | Maximum character length | 2 |
| Permissible values | Value | | Meaning | |
|  | 0 | | No co-occurring mental health diagnosis | |
|  | 1 | | F00-F09 Organic, including symptomatic, mental disorders | |
|  | 2 | | F20-F29 Schizophrenia, schizotypal and delusional disorders | |
|  | 3 | | F30-F39 Mood [affective] disorders | |
|  | 4 | | F40-F48 Neurotic, stress-related and somatoform disorders | |
|  | 5 | | F50-F59 Behavioural syndromes associated with physiological disturbances and physical factors | |
|  | 6 | | F60-F69 Disorders of adult personality and behaviour | |
|  | 7 | | F70-F79 Mental retardation | |
|  | 8 | | F80-F89 Disorders of psychological development | |
|  | 9 | | F90-F98 Behavioural and emotional disorders with onset usually occurring in childhood and adolescence | |
|  | 10 | | F99-F99 Unspecified mental disorder | |
| Supplementary values | ***Value*** | | ***Meaning*** | |
|  | 99 | | not stated/inadequately described | |
| Data element attributes | | | | |
| Reporting attributes | | | | |
| Reporting requirements | Mandatory | | | |
| Collection and usage attributes | | | | |
| Guide for use | Reporting of Mental Health diagnosis is mapped to a code based on block levels within the Mental and Behavioural disorder chapter of ICD10.  Example – Treatment Services receives confirmation that client has a Diagnosis of “Post Traumatic Stress Disorder”. ICD10 code is “F43.1”. F43.1 falls within “F40-F48 Neurotic, stress-related and somatoform disorders” so VADC code to be reported is 4.  Note, F10-F19 Mental and behavioural disorders due to psychoactive substance use are not to be reported. | | | |
| Code 0 | Use this code where it is reported that the client does NOT have a co-occuring mental health diagnosis ie if a client has a mental disorder which is classifiable as a Mental and behavioural disorders due to psychoactive substance use and no other disorder, record here | | |
| Code 10 | Should use this code when mental health diagnosis is confirmed but specific diagnosis is unknown | | |
| Code 99 | Should use this code when unable to obtain this information, or is unknown | | |
| Source and reference attributes | | | | |
| Definition source | Department of Health and Human Services | | | |
| Definition source identifier |  | | | |
| Value domain source | Based on block level structure of Chapter V Mental and Behavioural Disorders as defined within International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD-10)-WHO Version:2019 | | | |
| Value domain identifier | Based on <https://icd.who.int/browse10/2019/en#/V> | | | |
| Relational attributes | | | | |
| Related concepts | Client | | | |
| Related data elements | Client-acquired brain injury | | | |
|  | Outcomes-K10 Score | | | |
| Edit/validation rules | AOD0 value not in codeset for reporting period  AOD2 cannot be null | | | |

# Proposal 6 – Remove AOD15

|  |  |
| --- | --- |
| It is proposed to | Remove AOD15 validation rule |
| Proposed by | Sector |
| Reason for proposed change | AOD15 validation rule states that a client cannot be homeless and living with dependants. We have many clients (usually women) who are homeless, both primary and tertiary, with their children. |
| Data Specification change summary | Remove validation  **6 Edit/Validation Rules**  Remove warning validation:  AOD15 living with client but client is homeless |
| Technical change | CMS dependent |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 6**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.1.6 Client—dependant living with flag—N

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | Whether the dependant is living with the client | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N | **Maximum character length** | 1 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 1 | the dependant is living with the client | |
|  | 2 | the dependant is not living with the client | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 9 | not stated/inadequately described | |
| **Data element attributes** | | | |
| *Reporting attributes* | | | |
| **Reporting requirements** | Mandatory | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | This meta data item should be reported for dependants of any age   |  |  | | --- | --- | | Code 1 | The dependant lives with the client at least 50% of the time | | Code 2 | The dependant lives with the client for less than 50% of the time | | | |
| *Source and reference attributes* | | | |
| **Definition source** | Department of Health and Human Services | | |
| **Definition source identifier** |  | | |
| **Value domain source** | METeOR | | |
| **Value domain identifier** | Based on 270732 yes/no, Code N | | |
| *Relational attributes* | | | |
| **Related concepts** | Dependant | | |
| **Related data elements** | Outcomes-accommodation type | | |
| **Edit/validation rules** | AOD2 cannot be null | | |
|  | ~~AOD15 living with client but client is homeless~~ | | |

### 5.5.1 Outcomes—accommodation type—N[N]

|  |  |
| --- | --- |
| Relational attributes | |
| Related concepts | Outcome |
| Related data elements | Client-dependant living with flag |
| Edit/validation rules | AOD0 value not in codeset for reporting period  AOD2 cannot be null |
|  | ~~AOD15 living with client, but client is homeless~~ |
|  | AOD67 no registered client for event |
|  | AOD69 no accommodation type AND comprehensive assessment or treatment has ended |
|  | AOD71 age is too young for aged care accommodation |
|  | AOD85 postcode indicates no fixed address and accommodation type is not homeless |
|  | AOD139 Outcome measure group not supplied for a closed treatment or assessment service event. |
|  | AOD140 At least one Drug of concern group not reported within an Outcome measure for closed service events |
| Other related information |  |

### 6 Edit/Validation Rules

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ID** | **Edit name/description** | **Data elements** | **Pseudo code/rule** | **Status** |
| ~~AOD15~~ | ~~Living with flag, but client is homeless~~ | ~~Client-dependant living with flag~~  ~~Outcomes-accommodation type~~ | ~~IF the client has more than zero dependants living with flag = 1 AND accommodation type = 12 THEN invalid~~ | **Warning** |

# Proposal 7 – Modify validations and add new validation (warning) Drug Concern-drug volume

|  |  |
| --- | --- |
| It is proposed to | Update AOD152 validation to allow Drug Concern—volume to be able to be 0. |
| Proposed by | Sector |
| Reason for proposed change | There are many clients who access treatment who have not used recently - those in custody, those who have exited custody and those who have exited rehab, returned from OS etc. This could be a period of years.  Clients who have not used in a significant amount of time and never had a stable nor predictable use volume - means it is impossible to enter correct data here.  This has created incomplete and poor data integrity, and does not reflect our work, or our cohort. |
| Data Specification change summary | Modify validations and add new validation (warning)  **6 Edit/Validation Rules**  **AOD152**  **Drug Concern—volume—N[N][N][N]** Change the validation range on Drug Concern—volume—N[N][N][N] from “AOD152 value must be 1 to 9999” to  “AOD152 value must be 0 to 9999” |
| Technical change |  |
| Specification change |  |

**FEEDBACK FOR PROPOSAL 7**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.3.6 - Drug Concern—volume—N[N][N][N]

|  |  |  |  |
| --- | --- | --- | --- |
| Identifying and definitional attributes | | | |
| Definition | Volume of the drug of concern consumed by the client per day | | |
| Value domain attributes | | | |
| Representational attributes | | | |
| Representation class | Quantity | Data type | Number |
| Format | N[N][N][N] | Maximum character length | 4 |
| Permissible values | Value | Meaning | |
|  | 0< and <9999 | value greater than zero and less than 9999 | |
| Supplementary values | Value | Meaning | |
|  | 9999 | not stated/inadequately described | |
| Data element attributes | | | |
| |  |  | | --- | --- | | Reporting attributes | | | Reporting requirements | Mandatory when drug of concern is related to client’s own alcohol and drug use | | | | |
| Collection and usage attributes | | | |
| Guide for use | Only report where drug of concern, is related to the client’s own alcohol and drug use. For clients whose treatment is related to the alcohol and other drug use of another person, this metadata item should not be collected. | | |
| Source and reference attributes | | | |
| Definition source | Department of Health and Human Services | | |
| Definition source identifier | Based on [https://www2.health.vic.gov.au/alcohol-and-drugs/AOD-treatment-services/pathways-into-AOD-treatment/intake-assessment-for-AOD-treatment](https://www2.health.vic.gov.au/alcohol-and-drugs/aod-treatment-services/pathways-into-aod-treatment/intake-assessment-for-aod-treatment) | | |
| Value domain source |  | | |
| Value domain identifier |  | | |
| Relational attributes | | | |
| Related concepts | Outcome | | |
| Related data elements | Drug Concern-volume unit | | |
| Edit/validation rules | AOD2 cannot be null | | |
|  | AOD9 numeric only  AOD111 method of use and volume unit mismatch  \*AOD152 value must be ~~1~~ 0 to 9999 | | |

### 6 Edit/Validation Rules

| ID | Edit name/description | Data elements | Pseudo code/rule | Status |
| --- | --- | --- | --- | --- |
| AOD152 | Value must be 0 to 9999 | Drug Concern-volume | Drug Concern-volume 0< OR > 9999 | error |
| ### | Frequency last 30 days when drug volume = 0 | Drug Concern-frequency last 30 days  Drug Concern-date last use  Outcomes-Client review date | DC-frequency last 30 days != [0,9]  AND DC-volume=0 | warning |

# Proposal 8 – Modify validation AOD29

|  |  |
| --- | --- |
| It is proposed to | Update AOD29 so that it does not trigger when a treatment event has a TIER. |
| Proposed by | Sector |
| Reason for proposed change | Remove the warning from treatment events to allow TIERs to be entered during treatment.  Will provide more comprehensive data regarding client complexity and progress. |
| Data Specification change summary | Modify validation so that treatment events with a TIER recorded do not trigger a warning |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 8**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 6 Edit/Validation Rules

| ID | Edit name/description | Data elements | Pseudo code/rule | Status |
| --- | --- | --- | --- | --- |
| AOD29 | Event type mismatch, event type is not assessment or treatment | Event-MASCOT Score  Event-TIER  Event-event type | value !=(null, 8, 9) AND event type != [2,3] | warning |

# Proposal 9 – Modify codeset for Outcomes—unemployed not training

|  |  |
| --- | --- |
| It is proposed to | Add codes for Employed, not studying, and Employed and studying to Outcomes – unemployed not training |
| Proposed by | Sector |
| Reason for proposed change | To better assess the client population that enters assessment and treatment within an agency. It would also, if used during a review, demonstrate changes in circumstances. |
| Data Specification change summary | Add codes to existing data element  **5.5.14 Outcomes—unemployed not training**  add options: 3 employed and not studying/training  4 employed and studying/training |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 9**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.5.14 Outcomes—unemployed not training—N

|  |  |  |  |
| --- | --- | --- | --- |
| Identifying and definitional attributes | | | |
| Definition | ~~Whether the client is currently, unemployed and not involved in study or training~~  The employment and training status of the client | | |
| Value domain attributes | | | |
| Representational attributes | | | |
| Representation class | Code | Data type | Number |
| Format | N | Maximum character length | 1 |
| Permissible values | Value | Meaning | |
|  | 1 | unemployed and not studying/training | |
|  | 2 | unemployed and studying/training | |
|  | 3 | employed and not studying/training | |
|  | 4 | employed and studying/training | |
| Supplementary values | Value | Meaning | |
|  | 8 | not applicable | |
|  | 9 | not stated/inadequately described | |

### 6 Edit/Validation Rules

| ID | Edit name/description | Data elements | Pseudo code/rule | Status |
| --- | --- | --- | --- | --- |
| AOD88 | Employment status and ~~unemployed not~~ training mismatch | Outcomes-unemployed not training  Outcomes-employment status | Outcomes-unemployed not training = [1 OR 2] AND Outcomes-employment status =[3] OR  Outcomes-unemployed not training = [3 OR 4] AND Outcomes-employment status =[4] | Warning |
| AOD89 | Employment status of student and unemployed not training mismatch | Outcomes-unemployed not training  Outcomes-employment status | Unemployed not training = [1 OR 3] AND employment status = [2] | Warning |

# Proposal 10 – Change to VADC collection rules for Outcomes-AUDIT/DUDIT Scores

|  |  |
| --- | --- |
| It is proposed to | Collection should only be required to submit AUDIT/DUDIT at assessment services, and optional for other service streams |
| Proposed by | DHHS |
| Reason for proposed change | Allow AOD agencies to prioritise correction of closed service events  AUDIT/DUDIT Scores are most appropriate for assessment or at service commencement, and not suitable for routine clinical reviews within treatment episodes |
| Data Specification change summary | Make AUDIT/DUDIT Scores mandatory for comprehensive assessment events, and optional for other event types. (But no longer required at each treatment clinical review point within a single treatment service stream). |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 10**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### ~~Outcome~~ Event—AUDIT Score—N[N]

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Identifying and definitional attributes | | | | | | | | | | |
| Definition | A client’s score from the Alcohol Use Disorders Identification Test (AUDIT) | | | | | | | | | |
| Value domain attributes | | | | | | | | | | |
| Representational attributes | | | | | | | | | | |
| Representation class | | | Total | | | | Data type | Number |
| Format | | | N[N] | | | | Maximum character length | 2 |
| Permissible values | | | ***Value*** | | | | ***Meaning*** | |
|  | | | >=0 and <=40 | | | | The AUDIT Score must be between 0 and 40, inclusive. | |
| Supplementary values | | | ***Value*** | | | | ***Meaning*** | |
|  | | | 98 | | | | not applicable | |
|  | | | 99 | | | | not stated/inadequately described | |
| Data element attributes | | | | | | | | | | |
| Reporting attributes | | | | | | | | | | |
| Reporting requirements | | | | | ~~Mandatory for Assessment service events on end, otherwise “98 -Not applicable” to be submitted~~  Conditional –  Mandatory for Assessment service events | | | | | |
| Collection and usage attributes | | | | | | | | | | |
| Guide for use | | | | | The World Health Organization’s Alcohol Use Disorders Identification Test (AUDIT) is comprised of 3 scores, the Consumption score, the Dependence score and the Alcohol-related problems score. The AUDIT Score should be captured as the total of all of these 3 scores for a registered Client.  Only report where client is receiving service for own alcohol and drug use.  For clients whose treatment is related to the alcohol and other drug use of another person, this should be reported as 98  This data element is used to calculate Client TIER   |  |  | | --- | --- | | 98 | Should be only used when considered not applicable to client e.g. for client’s where treatment is related to the alcohol and other drug use of another person, OR Youth and Forensic Services that do not perform AUDIT | | 99 | Should only be used where the information was not disclosed, unknown or client has disengaged prior to measuring outcomes. | | | | | | |
| Source and reference attributes | | | | | | | | | |
| Definition source | | | | | | Based on The World Health Organization’s Alcohol Use Disorders Identification Test | | | |
| Definition source identifier | | | | | | http://apps.who.int/iris/bitstream/10665/67205/1/WHO\_MSD\_MSB\_01.6a.pdf | | | |
| Value domain source | | | | | | The World Health Organization’s Alcohol Use Disorders Identification Test | | | |
| Value domain identifier | | | | | |  | | | |
| Relational attributes | | | | | | | | | | |
| Related concepts | | ~~Outcome~~ Service event | | | | | | | | |
| Related data elements | | Event -DUDIT Score | | | | | | | | |
|  | | Event-TIER | | | | | | | | |
| Edit/validation rules | | ~~AOD2 cannot be null~~  ~~AOD9 numeric only~~ | | | | | | | | |
|  | | \*AOD67 no registered client for event | | | | | | | | |
|  | | \*AOD68 invalid outcome since client registered is not client | | | | | | | | |
|  | | \*AOD74 out of audit score range | | | | | | | | |
|  | | \*AOD75 no AUDIT score AND comprehensive assessment or treatment has ended | | | | | | | | |
|  | | ~~AOD139 Outcome measure group not supplied for a closed treatment or assessment service event.~~ | | | | | | | | |
|  | | ~~AOD140 At least one Drug of concern group not reported within an Outcome measure for closed service events~~ | | | | | | | | |
| Other related information | | | |  | | | | | | |

*[AUDIT/DUDIT Validations will need to be updated to reflect NULL values are permissible]*

### ~~Outcome~~ Event—DUDIT Score—N[N]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Identifying and definitional attributes | | | | | |
| Definition | A client’s score from the Drug Use Disorders Identification Test (DUDIT) | | | | | |
| Value domain attributes | | | | | |
| Representational attributes | | | | | |
| Representation class | Total | | | Data type | Number | |
| Format | N[N] | | | Maximum character length | 2 | |
| Permissible values instructions | ***Value*** | | | ***Meaning*** | | |
|  | >=0 and <=44 | | | The DUDIT Score must be between 0 and 44, inclusive | | |
| Supplementary values | ***Value*** | | | ***Meaning*** | | |
|  | 98 | | | not applicable | | |
|  | 99 | | | not stated/inadequately described | | |
| Data element attributes | | | | | |
| Reporting attributes | | | | | |
| Reporting requirements | ~~Mandatory for Assessment service events on end, otherwise “98 -Not applicable” to be submitted~~  Conditional –  Mandatory for Assessment service events | | | | | |
| Collection and usage attributes | | | | | | | |
| Guide for use | | | The DUDIT Score should be Total score captured from the DUDIT Assessment tool for a registered Client.  For clients whose treatment is related to the alcohol and other drug use of another person, this should be reported as 98  This data element is used to calculate Client TIER   |  |  | | --- | --- | | 98 | Should only be used when considered not applicable to client e.g. for client’s where treatment is related to the alcohol and other drug use of another person, OR where this is considered not applicable e.g. Youth and Forensic Services that do not perform DUDIT | | 99 | Should only be used where the information was not disclosed, unknown or client has disengaged prior to measuring outcomes. | | | | | |
| Source and reference attributes | | | | | | | | | |
| Definition source | | | Karolinska Institutet, Department of Clinical Neuroscience | | | | | | | |
| Definition source identifier | | | Berman, Bergman, Palmstierna & Schlyter (2003) | | | | | | | |
| Value domain source | | |  | | | | | | | |
| Value domain identifier | | |  | | | | | | | |
| Relational attributes | | | | | | | |
| Related concepts | | ~~Outcome~~ Service event | | | | | | |
| Related data elements | | Event-AUDIT Score | | | | | | |
|  | | Event-TIER | | | | | | |
| Edit/validation rules | | ~~AOD2 cannot be null~~  AOD9 numeric only | | | | | | |
|  | | AOD67 no registered client for event | | | | | | |
|  | | \*AOD68 invalid outcome since client registered is not person of concern (self) | | | | | | |
|  | | AOD82 out of DUDIT score range | | | | | | |
|  | | AOD83 no DUDIT score AND comprehensive assessment or treatment has ended | | | | | | |
| Other related information |  | | | | | |

*[AUDIT/DUDIT Validations will need to be updated to reflect NULL values are permissible]*

### 4.2.6 Outcome

Within the Victorian Department of Health and Human Services Outcomes Framework, outcomes are directly related to key areas of need. While the outcomes cover all aspects of a person’s life, only those outcome measures chosen by the Department of Health and Human Services, which are underpinned by the existing national standards, will need to be reported. These outcome measures encompass outcome areas of substance use, health and wellbeing.

As a minimum, the set of outcomes measures should be reported on registered clients:

* on ending of an Assessment service event;
* and on ending of any service event with the event type of Treatment.

Service providers can choose to report more sets of outcome measures at their discretion. However there must be a minimum period of four weeks between sets of outcome measures.

Where additional outcome measures are reported, they should be reported as an entire set of outcome measures, and not as a partial set of measures. All outcomes within the outcome set must be accurate at the time of the Client Review Date.

The following outcome measures should be reported as ‘Not Applicable’ when a client’s treatment service event is related to the alcohol and other drug use of another person. E.g. family member/significant other:

* ~~AUDIT Score;~~
* ~~DUDIT Score~~;

*[No changes to rest of this section]*

### 6 Edit/Validation Rules

| ID | Edit name/description | Data elements | Pseudo code/rule | Status |
| --- | --- | --- | --- | --- |
| ### | No AUDIT/DUDIT and assessment has ended, when event type is Assessment and client is Person of concern | Event-AUDIT  Event-DUDIT  Event-end date  Event-event type | Contact-relation to person of concern =[0] AND  Event-AUDIT = (null OR 9), when Event-end date !=null AND Event-event type=[2]  OR  Contact-relation to person of concern =[0] AND  Event-DUDIT = (null OR 9), when Event-end date !=null AND Event-event type=[2] | error |
| AoD68 | Contact-  Invalid outcome since client registered is not person of concern | ~~Outcomes-AUDIT Score~~  ~~Outcomes-DUDIT Score~~  Outcomes-days injected last four weeks | Contact-relation to person of concern !=[1]and Outlet Service Event ID !=null when outcomes value !=98 | Error |

**7.3 Data Dictionary**

Table 12 Service event

| Data element name | Type | Mandatory | Comment |
| --- | --- | --- | --- |
| Start date | Date | Yes | The day, month and year of the service event start. |
| End date | Date | Yes (on end) | The day, month and year of the service event end. |
| Forensic type | N(4) | Yes | An indication of the order or notice that the client is on for this service event |
| Indigenous status | N(1) | Yes | Whether the client identified as being Aboriginal and/or Torres Strait Islander Origin for this service event. |
| Service delivery setting | N(1) | Yes (on end) | The main setting in which the service was delivered |
| Event type | N(1) | Yes | The event type for the event, which indicates the current point in the client journey. |
| Service stream | N(2) | Yes | The service stream that the event belongs to. |
| Funding source | N(N(2)) | Yes | The funding source for the service event |
| Did not attend | N(N) | Conditional | A count of the number of times a client or potential client did not attend |
| Presenting drug of concern | N(4) | Conditional | The presenting drug of concern for the potential client or client |
| TIER | N(1) | Conditional | The TIER of the client for the service event, rated by the clinician |
| MASCOT Score | N(1) | Conditional | A score from the MASCOT tool indicating whether a forensic client is ready for treatment |
| Assessment completed date | Date | Conditional | The day, month and year of the assessment end, that led to a treatment service event. |
| Target population | N(1) | Conditional | The target population for a treatment service event, for both Residential and non-Residential service streams |
| Course length | N(1) | Conditional | The length of a treatment service event either Standard or Long, from service streams of Counselling, Residential or Non-Residential Withdrawal. |
| Percentage course completed | N(1) | Conditional | The percentage of the treatment completed by the client |
| Significant goal achieved | N(1) | Conditional | Whether a significant goal was achieved over the course of treatment |
| Reporting period | Date | Yes | The period the record relates to |
| Extract date | Date/Time | Yes | The date and time the record was extracted, or compiled for submission |
| Action | N(1) | Yes | I-Insert, U-Update, D-Delete |
| Outlet client ID | A(10) | Yes | The client the change relates to |
| Outlet service event ID | A(10) | Yes | The service event the change relates to |
| Outlet code | A(9) | Yes | The outlet the service event record relates to |
| AUDIT Score | N(N) | Yes | The total score from the AUDIT tool |
| DUDIT Score | N(N) | Yes | The total score from the DUDIT tool |
| Business Rules | | | |
| * All service events will have one service stream * All service events will have at least one contact or bed day * All service events must have an associated registered client * Did not attend, must be reported for Assessment and Treatment service events on end * Presenting drug of concern must be reported for all Presentation service events * TIER must be reported on all Assessment service event end * MASCOT score must be reported on all Assessment service event end for forensic clients assessed by ACSO * Assessment completed date and target population must be reported on all Treatment service events. * Percentage course complete, and end reason must be reported on all Treatment service event end * Course length, and significant goal achieved are conditionally required based on Service stream of Treatment service events. * AUDIT, DUDIT should be reported as Not Applicable when client is not client | | | |

Table 13 Outcome Measures

| Data element name | Type | | Mandatory | Comment |
| --- | --- | --- | --- | --- |
| Client review date | Date | | Yes | The day, month and year that the client’s outcome measures were captured |
| ~~AUDIT Score~~ | ~~N(N)~~ | | ~~Yes~~ | ~~The total score from the AUDIT tool~~ |
| ~~DUDIT Score~~ | ~~N(N)~~ | | ~~Yes~~ | ~~The total score from the DUDIT tool~~ |
| K10 Score | N(2) | | Yes | The total score from the K10 tool |
| Employment status | N(1) | | Yes | The employment status of the client represented by a code |
| Unemployed not training | N(1) | | Yes | Whether the client is unemployed and not currently studying or training |
| Accommodation type | N(N) | | Yes | The accommodation type the client is residing in |
| Days injected last four weeks | N(1) | | Yes | The total number of days in the last four weeks where the client injected |
| Arrested last four weeks | N(1) | | Yes | Whether the client was arrested in the last four weeks |
| Violent last four weeks | N(1) | | Yes | Whether the client was violent against someone in the last four weeks |
| Risk to self | N(1) | | Yes | The overall assessment of the client’s risk to self |
| Risk to others | N(1) | | Yes | The overall assessment of the client’s risk to others |
| Physical health | N(N) | | Yes | The client’s rating of physical health |
| Psychological health | N(N) | | Yes | The client’s rating of psychological health |
| Quality of life | N(N) | | Yes | The client’s rating of quality of life |
| Outlet outcome measure identifier | N(10) | Conditional | | A numerical identifier that uniquely identifies an outcome measure from an outlet |
| Business Rules | | | | |
| * Outcome measures should be reported for a client at Comprehensive Assessment end and on Treatment Completion * ~~AUDIT, DUDIT,~~ Days injected last four weeks should be reported as Not Applicable when client is not client | | | | |

**7.4 Data element definitions**

Table 16 Data element origin

| Data element | Data Element type | CRDD |
| --- | --- | --- |
| AUDIT Score | ~~Outcomes~~ Event |  |
| DUDIT Score | ~~Outcomes~~ Event |  |

[*No further changes to Table 16*]

# Proposal 11 – Addition of two new data elements and move two data elements – MARAM

|  |  |
| --- | --- |
| It is proposed to | Add two new data elements Event-MARAM tools and Event-Family Violence and move Client-maltreatment code and Client-maltreatment perpetrator from Client entity to Event entity. |
| Proposed by | DHHS and sector |
| Reason for proposed change | The proposed change is to ensure the AOD sector in Victoria is reporting the prevalence of family violence in AOD clients, and to support implementation of the Family Violence Multi Agency Risk Assessment and Management framework and tools (MARAM) – a state-wide framework for all services to respond to family violence |
| Data Specification change summary | Add two new data elements Event-MARAM tools and Event-Family Violence and move Client-maltreatment code and Client-maltreatment perpetrator from Client entity to Event entity |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 11**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### Event— MARAM tools —N

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | The status of whether MARAM framework/tools were applied. | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N | **Maximum character length** | 1 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 1 | Yes MARAM tools and/or framework applied | |
|  | 2 | No MARAM tools and/or framework not applied | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 9 | not stated/inadequately described | |
| **Data element attributes** | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Mandatory | | | | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | |  |  | | --- | --- | | Code 1 | Yes MARAM tools and/or Framework applied’ may be selected where there is documented evidence in the client record or CMS system of the following use of the Multi Agency Risk Assessment and Management (MARAM) framework and/or tools:   * Family violence screening completed (MARAM based questions asked at intake or at assessment but can be asked at any time during involvement with a client if family violence is indicated). * MARAM screening and identification tool used * MARAM intermediate assessment tool used * MARAM brief assessment tool used * MARAM child assessment tool used | | | |
| *Source and reference attributes* | | | |
| **Definition source** | DHHS | | |
| **Definition source identifier** |  | | |
| **Value domain source** | DHHS | | |
| **Value domain identifier** |  | | |
| *Relational attributes* | | | |
| **Related concepts** | Service event | | |
| **Related data elements** |  | | |
| **Edit/validation rules** | *[Validations to be confirmed]* | | |
| **Other related information** |  | | |

### Event— Family Violence —N

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | Specifies whether the client has experienced family violence as a victim survivor or is a perpetrator (person who uses family violence) | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N | **Maximum character length** | 1 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 1 | No family violence | |
|  | 2 | Yes Victim survivor of family violence | |
|  | 3 | Yes Perpetrator | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 9 | not stated/inadequately described | |
| **Data element attributes** | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Mandatory | | | | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | Family violence has the meaning set out in the *Family Violence Protection Act 2008* is summarised as any behaviour that occurs in family, domestic or intimate relationships that is physically or sexually abusive; emotionally or psychologically abusive; economically abusive; threatening or coercive; or is in any other way controlling that causes a person to live in fear for their safety or wellbeing or that of another person. In relation to children, family violence is also defined as behaviour by any person that causes a child to hear or witness or otherwise be exposed to the effects of the above behaviour. This definition includes violence within a broader family context, such as extended families, kinship networks and communities’  Identification of a client as a victim survivor or perpetrator (person who uses violence) will be achieved by undertaking a MARAM framework based family violence risk assessment, and in line with definitions provided in Family Violence Protection Act 2008.     |  |  | | --- | --- | | Code 2 | Yes victim survivor of family violence - reasons to believe there is risk that the person may be subjected to family violence’. | | Code 3 | Yes perpetrator (person who uses family violence) - there is a risk that they may commit family violence. | | | |
| *Source and reference attributes* | | | |
| **Definition source** | DHHS | | |
| **Definition source identifier** | *Family Violence Protection Act 2008* | | |
| **Value domain source** | DHHS | | |
| **Value domain identifier** |  | | |
| *Relational attributes* | | | |
| **Related concepts** | Service event | | |
| **Related data elements** |  | | |
| **Edit/validation rules** | *[Validations to be confirmed]* | | |
| **Other related information** |  | | |

### ~~Client-E~~vent— maltreatment code—N

|  |  |  |  |
| --- | --- | --- | --- |
| Identifying and definitional attributes | | | |
| Definition | The type of maltreatment a client has experienced as indicated by a code | | |
| Value domain attributes | | | |
| Representational attributes | | | |
| Representation class | Code | Data type | Number |
| Format | N | Maximum character length | 1 |
| Permissible values | Value | Meaning | |
|  | 0 | No maltreatment | |
|  | 1 | Neglect/Abandonment | |
|  | 2 | Physical abuse | |
|  | 3 | Sexual abuse | |
|  | 4 | Psychological abuse | |
| Supplementary values | ***Value*** | ***Meaning*** | |
|  | 5 | Other maltreatment or mixed maltreatment | |
|  | 6 | Abuse not otherwise specified | |
|  | 9 | Not stated | |
| Data element attributes | | | |
| Reporting attributes | | | |
| Reporting requirements | Conditional-  Mandatory, when service provided is related to potential client/client’s own alcohol or other drug use.  When service provided is for a family member or significant other of an alcohol or drug user, this metadata item should not be reported. | | |
| Collection and usage attributes | | | |
| Guide for use | When the client advises, or assessing clinician identifies that the client’s personal experience of maltreatment has in part, or entirely lead to their drug and alcohol use, maltreatment type must be reported. Where there are multiple forms of maltreatment, the predominant maltreatment form must be submitted. If a predominant form cannot be identified, code 5 – mixed is to be used.  Use null when service provided is for a family member or significant other of an alcohol or drug user   |  |  | | --- | --- | | Code 0 | No maltreatment or where maltreatment has been identified in past, but no longer impacting the client’s alcohol and drug use | | Code 4 | Should be used for mental and verbal abuse | | Code 5 | Mixed maltreatment forms, or Other specified abuse or maltreatment e.g. financial abuse, human rights abuses | | Code 9 | Should use this code when not able to obtain this information | | | |
| Source and reference attributes | | | |
| Definition source | Department of Health and Human Services | | |
| Definition source identifier |  | | |
| Value domain source | Based on International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD-10)-WHO Version for ;2016/Chapter XIX | | |
| Value domain identifier | Based on <https://icd.who.int/browse10/2019/en#/T74> | | |
| Relational attributes | | | |
| Related concepts | Event | | |
| Related data elements | Event-maltreatment perpetrator | | |
|  | Event-event type | | |
|  | Event-funding source | | |
| Edit/validation rules | AOD0 value not in codeset for reporting period  AOD124 maltreatment with no maltreatment perpetrator | | |
|  | AOD125 maltreatment perpetrator and no maltreatment | | |
|  | AOD126 maltreatment code and client is not the person of concern (self) | | |
|  | AOD127 no maltreatment code and client is the person of concern (self) | | |
| Other related information |  | | |

### ~~Client-E~~vent— maltreatment perpetrator—N

|  |  |  |  |
| --- | --- | --- | --- |
| Identifying and definitional attributes | | | |
| Definition | The perpetrator of maltreatment towards the client | | |
| Value domain attributes | | | |
| Representational attributes | | | |
| Representation class | Code | Data type | Number |
| Format | N | Maximum character length | 1 |
| Permissible values | Value | Meaning | |
|  | 0 | Spouse/Domestic Partner | |
|  | 1 | Parent | |
|  | 2 | Other Family member | |
|  | 3 | Carer | |
|  | 4 | Friend/acquaintance | |
|  | 5 | Official authorities | |
|  | 6 | Person unknown to the victim | |
|  | 7 | Multiple persons unknown to the victim (gang) | |
| Supplementary values | ***Value*** | ***Meaning*** | |
|  | 8 | Other specified perpetrator | |
|  | 9 | Unspecified perpetrator | |
| Data element attributes | | | |
| Reporting attributes | | | |
| Reporting requirements | Conditional-  Mandatory when maltreatment code is NOT “no maltreatment” and when service provided is related to potential client/client’s own alcohol or other drug use.  Where multiple categories apply, report the most clinically significant. | | |
| Collection and usage attributes | | | |
| Guide for use | Report when maltreatment code is not 0 or 9 or null.  Must be null when maltreatment code is “no maltreatment” or when service provided is for a family member or significant other of an alcohol or drug user.   |  |  | | --- | --- | | Code 0 | Use this code for spouses and domestic partners including ex-partner, ex-spouse | | Code 1 | Parents including adoptive, natural, step, parents partner cohabiting. Excludes; foster parent, parent’s partner non-cohabiting | | Code 2 | Includes sister, brother, cousin, grandchild, grandparent, niece and nephew, son and daughter, step sibling, uncle and aunt | | Code 3 | Includes babysitter, foster parent, health care provider, nursing home, hostel and boarding house carer, school teacher | | Code 4 | Includes employer, employee and co-worker, family friend, neighbour, parents partner non-cohabiting | | Code 5 | Official authorities include Correctional services, Immigration personal, military personnel, police, ranger, security guard, sheriff, special constable | | Code 6 | Use this code for strangers | | Code 7 | Use this code for gangs, mobs | | Code 8 | Other specified perpetrator | | Code 9 | Unspecified perpetrator | | | |
| Source and reference attributes | | | |
| Definition source | Department of Health and Human Services | | |
| Definition source identifier |  | | |
| Value domain source | Based on International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD-10)-WHO Version for 2016 | | |
| Value domain identifier | <https://icd.who.int/browse10/2019/en#/Y07> | | |
| Relational attributes | | | |
| Related concepts | Event | | |
| Related data elements | Event-maltreatment perpetrator | | |
| Edit/validation rules | AOD0 value not in codeset for reporting period  AOD124 maltreatment with no maltreatment perpetrator | | |
|  | AOD125 maltreatment perpetrator and no maltreatment | | |
|  | ### mismatch between Family violence survivor and maltreatment code and maltreatment perpetrator | | |
| Other related information |  | | |

### 6 Edit/Validation Rules

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ID** | **Edit name/description** | **Data elements** | **Pseudo code/rule** | **Status** |
| ### | *New warning validation: If Family Violence = “2 – Yes - Victim survivor” then Maltreatment code should not equal 9-Not stated” and 5.1.15 “Maltreatment perpetrator” should equal 0 Spouse-Domestic Partner / 1 Parent / 2 Other Family member / 3 Carer.* | Event – maltreatment code  Event – maltreatment perpetrator  Event – family violence | [*TBC*] | warning |

**7.3 Data Dictionary**

Table 8 Client details

| Data element name | Type | Mandatory | Comment |
| --- | --- | --- | --- |
| Registration Date | Date | Yes | The date these client details were first recorded. |
| Statistical Linkage Key 581 | A(14) | Yes | A calculated linkage key that is used to link client records |
| Individual Health identifier | N(16) | Yes | Unique identifier issued by Medicare Australia |
| Medicare card number | N(11) | Yes | Client identifier issued to those eligible under the health insurer Medicare scheme |
| Date of birth | Date | Yes | The date of birth of the client. |
| Date accuracy | N(3) | Yes | The accuracy of the components of the birthdate. |
| Sex | N(1) | Yes | The nominated sex at birth of the client. |
| Gender identity | N(1) | Yes | The gender that the client identifies as |
| LGB flag | N(1) | Yes | The sexual orientation of the client |
| Locality name | A[A(45)] | Yes | The name of the locality/suburb of the address. |
| Postcode | N(4) | Yes | The Australian numeric descriptor for the postal delivery area, aligned with locality, suburb or place. |
| Country of Birth | N(4) | Yes | The country in which the client was born. |
| Cultural background | N(4) | Yes | The cultural identity of the client. |
| Preferred Language | N(4) | Yes | The language most preferred by the client for communication |
| Need for Interpreter services | N(1) | Yes | The need for an interpreter, verbal or non-verbal (sign language) |
| Refugee status | N(1) | Yes | Whether the client is a refugee, or asylum seeker |
| Acquired brain injury | N(1) | Yes | Whether the client has been diagnosed with an acquired brain injury |
| ~~Maltreatment code~~ | ~~N(1)~~ | ~~Conditional~~ | ~~The type of maltreatment the client has at the current presentation~~ |
| ~~Maltreatment perpetrator~~ | ~~N(1)~~ | ~~Conditional~~ | ~~The perpetrator of maltreatment towards the client~~ |
| Mental health diagnosis | N(N) | Yes | The category of mental health diagnosis the client has at the current presentation. |
| Reporting period | Date | Yes | The period the record relates to |
| Extract date | Date | Yes | The date the record was extracted or compiled for submission |
| Action | N(1) | Yes | I-Insert, U-Update, D-Delete |
| Outlet client identifier | A(10) | Yes | A numerical identifier that uniquely identifies each client from an outlet |
| Outlet code | A(9) | Yes | The outlet the client record relates to |
| Business Rules | | | |
| * SLK is calculated only when client is first registered * IHI’s only supplied for those clients that have been issued an identifier | | | |

Table 12 Service event

| Data element name | Type | Mandatory | Comment |
| --- | --- | --- | --- |
| Start date | Date | Yes | The day, month and year of the service event start. |
| End date | Date | Yes (on end) | The day, month and year of the service event end. |
| Forensic type | N(4) | Yes | An indication of the order or notice that the client is on for this service event |
| Indigenous status | N(1) | Yes | Whether the client identified as being Aboriginal and/or Torres Strait Islander Origin for this service event. |
| Service delivery setting | N(1) | Yes (on end) | The main setting in which the service was delivered |
| Event type | N(1) | Yes | The event type for the event, which indicates the current point in the client journey. |
| Service stream | N(2) | Yes | The service stream that the event belongs to. |
| Funding source | N(N(2)) | Yes | The funding source for the service event |
| Did not attend | N(N) | Conditional | A count of the number of times a client or potential client did not attend |
| Presenting drug of concern | N(4) | Conditional | The presenting drug of concern for the potential client or client |
| TIER | N(1) | Conditional | The TIER of the client for the service event, rated by the clinician |
| MASCOT Score | N(1) | Conditional | A score from the MASCOT tool indicating whether a forensic client is ready for treatment |
| Assessment completed date | Date | Conditional | The day, month and year of the assessment end, that led to a treatment service event. |
| Target population | N(1) | Conditional | The target population for a treatment service event, for both Residential and non-Residential service streams |
| Course length | N(1) | Conditional | The length of a treatment service event either Standard or Long, from service streams of Counselling, Residential or Non-Residential Withdrawal. |
| Percentage course completed | N(1) | Conditional | The percentage of the treatment completed by the client |
| Significant goal achieved | N(1) | Conditional | Whether a significant goal was achieved over the course of treatment |
| Reporting period | Date | Yes | The period the record relates to |
| Extract date | Date/Time | Yes | The date and time the record was extracted, or compiled for submission |
| Action | N(1) | Yes | I-Insert, U-Update, D-Delete |
| Outlet client ID | A(10) | Yes | The client the change relates to |
| Outlet service event ID | A(10) | Yes | The service event the change relates to |
| Outlet code | A(9) | Yes | The outlet the service event record relates to |
| Maltreatment code | N(1) | Conditional | The type of maltreatment the client has at the current presentation |
| Maltreatment perpetrator | N(1) | Conditional | The perpetrator of maltreatment towards the client |
| MARAM tools | N(1) | Yes | The status of whether MARAM framework/tools were applied. |
| Family Violence | N(1) | Yes | Specifies whether the client has experienced family violence as a victim survivor or is a perpetrator (person who uses family violence) |
| Business Rules | | | |
| * All service events will have one service stream * All service events will have at least one contact or bed day * All service events must have an associated registered client * Did not attend, must be reported for Assessment and Treatment service events on end * Presenting drug of concern must be reported for all Presentation service events * TIER must be reported on all Assessment service event end * MASCOT score must be reported on all Assessment service event end for forensic clients assessed by ACSO * Assessment completed date and target population must be reported on all Treatment service events. * Percentage course complete, and end reason must be reported on all Treatment service event end * Course length, and significant goal achieved are conditionally required based on Service stream of Treatment service events. | | | |

**7.4 Data element definitions**

Table 16 Data element origin

| Data element | Data Element type | CRDD |
| --- | --- | --- |
| Family Violence | Event |  |
| Maltreatment code | ~~Client~~ Event |  |
| Maltreatment perpetrator | ~~Client~~ Event |  |
| MARAM tools | Event |  |

[*No further changes to Table 16*]

# Proposal 12 – Changes to Referral - ACSO identifier Guide for use

|  |  |
| --- | --- |
| It is proposed to | Clarify ACSO identifier guide for use in determining forensic client for VADC reporting |
| Proposed by | DHHS |
| Reason for proposed change | To more accurately reflect referral sources for forensic clients and providers by providing clearer guidance as to when the ACSO COATS event identifier should be recorded. |
| Data Specification change summary | **5.7.1 Referral—ACSO identifier – N(7)** *Improve wording for ACSO Identifier Guide for use: Clarify supplementary value code use.*  Note: *Events reported with the supplementary value may not be counted as a forensic service event for the purposes of performance reporting.* |
| Technical change | No |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL12**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.7.1 Referral—ACSO identifier – N(7)

|  |  |
| --- | --- |
| Collection and usage attributes | |
| Guide for use | ACSO identifier is required for all forensic referrals which have been entered on the Penelope CMS.  All ACSO identifier codes must be represented using seven digits. Any four, five or six-digit ACSO Identifier codes must include leading zeroes to pad to seven digits.  Record the Event ID of all forensic clients.   * This will be relevant for all referrals that are made out and accepted by treatment service provider.   Record the Event ID of the incoming referrals of forensic client.   * Only those that result in a Service Event should be recorded.   *The Supplementary value ~~should~~ can be used temporarily when the ACSO COATS event ID is not able to be immediately obtained or is illegible.*  Note: *Events reported with the supplementary value may not be counted as a forensic service event for the purposes of performance reporting.*  Use null when referral is not for a forensic client. |

# Proposal 13 – Changes to business rule - 4.2.5 Funding source attributes

|  |  |
| --- | --- |
| It is proposed to | Modify Table 4 Service event funding sources and funding units to remove two specified code combinations for reporting Drug Diversion Appointment Line events. |
| Proposed by | DHHS |
| Reason for proposed change | This change will reduce complexity of reporting and improve data integrity. Service stream code 71 will be retained as it most closely aligns the DDAL activity type |
| Data Specification change summary | Change to business rule  **4.2.5 Funding source attributes, Table 4 Service event funding sources and funding units** |
| Technical change | CMS dependent |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 13**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

**4.2.5 Funding source attributes**

**Table 4 Service event funding sources and funding units**

| **Funding Source code** | **Service Stream Code** | | |
| --- | --- | --- | --- |
|  | 20-Counselling | 21-Brief Intervention | 71-Comprehensive Ax |
| 102-Vic State Gov- Drug Diversion Appointment Line (DDAL) | ~~D~~ | ~~D~~ | D |

# Proposal 14 – Change to business rule for Event—course length

|  |  |
| --- | --- |
| It is proposed to | Changes are required to the guide for use for **5.4.2 Event—course length—N** as it does not accurately reflect reporting requirements for the listed service events. |
| Proposed by | DHHS |
| Reason for proposed change | The changes were proposed to align the specification to current funding policy. Therapeutic Day Rehabilitation and Care & Recovery Coordination have a single funding unit value regardless of course length and so requirements to report this data element for these events is proposed to be removed.  The course length code value is currently being used to determine the funding unit allocation for “complex” treatment types. Additional guidance is required for clarification |
| Data Specification change summary | Change to business rule  Changes are required to the guide for **use for 5.4.2 Event—course length—N** as it does not accurately reflect reporting requirements for the listed service events. The changes were proposed to align the specification to current funding policy. Therapeutic Day Rehabilitation and Care & Recovery Coordination have a single funding unit value regardless of course length and so requirements to report this data element for these events is proposed to be removed.  **Reporting requirements**  Conditional - Mandatory for Treatment service events with service stream of Counselling, Non-Residential Withdrawal, Residential Rehabilitation, ~~Therapeutic Day Rehabilitation,~~ Residential Withdrawal or ~~Care and Recovery Coordination~~  AND  **Collection and usage attributes** |
| Technical change | No |
| Specification change | No |

**FEEDBACK FOR PROPOSAL 14**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### Event—course length—N

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | The length of a treatment service event | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N | **Maximum character length** | 1 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 1 | standard | |
|  | 2 | extended | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 8 | not applicable | |
|  | 9 | not stated/inadequately described | |
| **Data element attributes** | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Conditional-  Conditional - Mandatory for Treatment service events with service stream of Counselling, Non-Residential Withdrawal, Residential Rehabilitation, ~~Therapeutic Day Rehabilitation,~~ Residential Withdrawal or ~~Care and Recovery Coordination~~ | | | | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | Refer to Section 4.2.5, regarding inclusion/exclusion Service Streams.  Use null for Presentation, Assessment, Support and Review Service Event Types.   |  |  | | --- | --- | | Code 1 | Should be used for short or “standard” length events. | | Code 2 | Should be used for events that have extended past the standard length of treatment or where the client is eligible for “complex” treatment types. ~~long, or “complex” treatment that is extended past the standard length of treatment~~  Use this code ~~includes~~ where the length of ~~residential length of~~ stay in residential treatment is:   * > 10 days for funding source codes 119,120,121 * > 90 days for funding source codes 126,127 * > 160 days for funding source codes 106,125,128   Use this code where the client is eligible for the “complex” treatment type for the following funding source code and service stream code combinations:   * Funding source code 100 (General) OR 116 (Small rural health funding) AND service stream code 20 (Counselling);   Funding source code 100 (General) OR 116 (Small rural health funding) AND service stream code 11 (Non-residential withdrawal). | | Code 8 | Should be used for service events which are not listed as requiring a course length attribute in Table 4, Section 4.2.5 | | Code 9 | Should be used if course length is relevant to the service stream but is unknown | | | |
| *Source and reference attributes* | | | |
| **Definition source** | Department of Health and Human Services | | |
| **Definition source identifier** |  | | |
| **Value domain source** | Department of Health and Human Services | | |
| **Value domain identifier** |  | | |
| *Relational attributes* | | | |
| **Related concepts** | Service event | | |
| **Related data elements** | Event-service stream | | |
| **Edit/validation rules** | AOD0 value not in codeset for reporting period  AOD30 event type mismatch, event type is not treatment | | |
|  | AOD37 course length but not required for combination of funding source and service stream | | |
|  | AOD38 no course length for combination of funding unit and required service stream | | |
|  | AOD170 Residential withdrawal length of stay is over 10 days and the course length element is not reported as extended ~~complex~~ for applicable residential withdrawal funding source | | |
|  | AOD171 Residential rehabilitation length of stay is over 90 days and the course length element is not reported as extended ~~complex~~ for applicable residential rehabilitation funding source | | |
|  | AOD172 Residential rehabilitation length of stay is over 160 days and the course length element is not reported as extended ~~complex~~ for applicable residential rehabilitation funding source | | |
|  | AOD173 Residential withdrawal length of stay is 10 days or less and the course length element is reported as complex when should be reported as standard for applicable residential withdrawal funding source | | |
|  | AOD174 Residential rehabilitation length of stay is 90 days or less and the course length element is reported as complex when should be reported as standard for applicable residential rehabilitation funding source | | |
|  | AOD175 Residential rehabilitation length of stay is 160 days or less and the course length element is reported as complex when should be reported as standard for applicable residential rehabilitation funding source | | |
| **Other related information** |  | | |

### 4.2.5 Funding source attributes

| Refer to Table 4, Section 4.2.5, regarding inclusion/exclusion Service Streams.**Funding Source code** |
| --- |
|  | 31-Therapeutic Day Rehabilitation | 50-Care & Recovery Coordination |
| 100-Vic State Gov – General | D~~[L]~~ | D~~[L]~~ |
| 116-Vic State Gov-Small Rural Health funding | D~~[L]~~ | D~~[L]~~ |

# Proposal 15 – Modify codeset for Event - forensic type

|  |  |
| --- | --- |
| It is proposed to | Modify Event - forensic type to align with the DHHS *Forensic Client Definition* *Policy 2020-21*. |
| Proposed by | VADC Sector Problem Solving Group |
| Reason for proposed change | The change will remove inaccurate forensic types and provide clarity in the Guide for Use. |
| Data Specification change summary | Remove codes and modify descriptors of existing codes for Event – forensic type and update Guide for use  Remove the following codes: 5 – detention and treatment order – severe substance dependence – Magistrates Court  6 – imprisonment  9 – personal safety intervention order (PSIO) – non family members  10 – police custody – Pre-sentence, Remand or sentence (adult only)  98 – other  Modify descriptors:  7– non-parole (released from prison) Prison release (StepOut Program)  11– supervision order (SO - adult only) or Interim Supervision Order (ISO)  13 – Youth justice order (incl. supervision, detention orders)  Add new code:  97 – Other diversion  Update Guide for use (details below)  Remove validation AOD129 |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 15**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.4.7 Event—forensic type—N[N]

|  |  |  |  |
| --- | --- | --- | --- |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | N[N] | **Maximum character length** | 2 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 0 | none | |
|  | 1 | bail | |
|  | 2 | community correction order (CCO) | |
|  | 3 | court diversion | |
|  | 4 | drug treatment order (DTO) – Drug Court | |
|  | ~~5~~ | ~~detention and treatment order – severe substance dependence – Magistrates Court~~ | |
|  | ~~6~~ | ~~imprisonment~~ | |
|  | 7 | ~~non-parole (released from prison)~~ Prison release (StepOut Program) | |
|  | 8 | parole (adult only) | |
|  | ~~9~~ | ~~personal safety intervention order (PSIO) – non-family members~~ | |
|  | ~~10~~ | ~~police custody – Pre-sentence, Remand, or sentence (adult only)~~ | |
|  | 11 | supervision order (SO - adult only) or Interim Supervision Order (ISO) | |
|  | 12 | Victorian police diversion | |
|  | 13 | youth justice order ~~(incl. supervision, detention orders)~~ | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 97 | other diversion referral | |
|  | ~~98~~ | ~~other~~ | |
|  | 99 | not stated /inadequately described | |
| **Data element attributes** | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Mandatory | | | | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | |  |  | | --- | --- | | Code 0 | The forensic type should be recorded as None if the event is for a non-forensic client. Forensic types can include Court Orders and ~~also~~ Police notices (e.g. DDAL is an example of a caution notice via Victorian Police).  Where a client is on more than one order, the reported order should be the one considered most dominant.  Should be reported as ‘99’ when Client is known to be under Order, however, type is unknown.  Use this code when the client has an order listed under exclusion list of Code 97 and does not have another order~~, use this code~~. | | Code 2 | A community correction order (CCO) is a flexible sentencing order served in the community. The order can be imposed by itself or in addition to imprisonment or a fine. This replaced Intensive correction orders, home detention and correction-based orders in 2012. | | Code 3 | Court diversion is a specialised program aimed at diverting minor drug offenders from the criminal justice system. Offenders who plead guilty to eligible drug charges in a Magistrates Court or a Children’s Court (Magistrates Court) can be referred by the magistrate to an AODT program as part of their order rather than having a traditional penalty like a fine or probation order imposed upon them. Court diversion includes court orders. | | Code 4 | A drug treatment order can only be ordered by the Victorian Drug Court, which is a venue of the Magistrates' Court. The DTO consists of two parts, a custodial part and a treatment and supervision part. The custodial sentence is suspended to allow for the treatment of the offender. | | ~~Code 5~~ | ~~Under the Victorian Severe Substance Dependence Treatment Act, this is used for the detention and treatment of people with severe alcohol or drug dependence. The court may order an involuntary period of detention (14 days) and treatment of the person in a treatment centre.~~ | | ~~Code 6~~ | ~~Client is under imprisonment or on a detention order in prison.~~  ~~Excludes: Youth Detention, use Code 13.~~ | | Code 7 | Clients released from prison, not on parole, and enrolled in the StepOut program.  ~~Note: non-parole released from prison clients are not considered forensic clients for the purposes of forensic target derivation’.~~  ~~Excludes: Youth Parole, use Code 13.~~ | | Code 8 | Client has been released from prison and is on parole imposed by an adult court.  Excludes parole issued by Children's Court and the youth justice center | | ~~Code 9~~ | ~~Use this code for respondent under personal safety intervention order (PSIO) or Interim order issued against them by Magistrates Court.~~  ~~A personal safety intervention order is an order made by a magistrate to protect a person from physical or mental harm caused by someone who is NOT a family member. Also, known as restraining orders.~~ | | ~~Code 10~~ | ~~Client is in police custody, regardless of whether held in pre-trial detention and during trial by order of a court OR sentenced, but not yet imprisoned.~~  ~~Excludes: Youth Remand, use Code 13.~~ | | Code 11 | Supervision Orders provide for the post-sentence supervision of serious sex offenders who pose an unacceptable risk of committing a relevant offence if a supervision order is not made and the offender is in the community, under the Serious Sex Offenders (Detention and Supervision) Act 2009.  Includes: Interim Supervision Orders (ISO)  Excludes: Detention or supervision orders for Youth, use Code 13. | | Code 12 | Client has been issued a police-initiated diversion to an AODT program e.g. Caution with Cannabis, Drug Diversion program or other Drug Diversion programs.  Includes DDAL: Client has been given a police notice and referred to Drug Diversion Appointment Line | | Code 13 | The Youth Justice service is responsible for managing community-based and custodial sentencing orders imposed by the Children's Court and youth justice center orders imposed by an adult court.  Community based orders include:   * Probation * Youth Supervision Order (YSO) * Youth Attendance Order (YAO) * Youth Control Order (YCO) * Parole * Supervised bail * Deferred sentences   Custodial sentencing orders include:   * Remand * Youth Justice Centre order * Youth Residential Centre order. | | Code 97 | Other diversion referral ~~orders e.g. deferred sentences~~  **Includes:**   * Self-referral only in cases where the client meets the defining characteristics for a forensic AOD client as stated in the *Forensic AOD client definition policy 2020-21* * Fine/Fine Conversion – Community Work Order (when client has been imposed a fine, by the Magistrates' Court. This may be with or without a conviction and may be imposed by itself or in addition to another penalty. Also, use this code when the fine has been converted to community work.) * Undertakings/bond - Where a charge is proved, the court may order an adjourned undertaking, which allows a person to be released into the community unsupervised for up to five years. The offender must agree to the undertaking. Standard conditions attached to an adjourned undertaking include being of good behaviour (i.e. not committing further offences) for the duration of the undertaking. The court may impose other, special conditions. If a person breaches the conditions of an adjourned undertaking, he or she may be called back to court for resentencing. * Child Protection Orders or Child Protection prohibition orders (excludes Family Reunification Orders) * Koori Court; * Magistrates Court (not including the formal Court Diversion programs listed above); * County Court; * Family Court; * Drink and Drug Driver programs; * Referral from Custodial Health Alcohol and Drug Nurse; * Referral from solicitor; * Victoria Police (not including DDAL); and * Referral from Salvation Army Prison Chaplain.   **Excludes**:  The following clients are excluded from the forensic client definition unless they have met any of the acceptance criteria outlined in *Forensic AOD client definition policy 2020-21*   * ~~Child Protection Orders or Child Protection prohibition orders~~   t orders by the Family Court of Australia including: Parenting Orders, an order made after a hearing by a judicial officer, or an order made after parties who have reached their own agreement have applied to a court for consent orders.   * Clients with a Family Reunification Order. * Clients who are only on an Intervention Order (This does not include: Child Protection Orders or Child Protection Prohibitions; Court orders by the Family Court of Australia including Parenting Orders, an order made after a hearing by a judicial officer, or an order made after parties who have reached their own agreement have applied to a court for consent orders; Family violence intervention order or Interim intervention order issued against the client by a local Magistrates Court.) * Family violence intervention order a family violence intervention order or Interim intervention order issued against them by local Magistrates Court. A family violence intervention order protects a person from a family member who is using family violence * Mental Health Act orders, including Community Treatment Orders. | | | |

### 6 Edit/Validation Rules

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ID** | **Edit name/description** | **Data elements** | **Pseudo code/rule** | **Status** |
| ~~AOD129~~ | ~~Client in prison and forensic type mismatch~~ | ~~Event-forensic type~~  ~~Outcomes-accommodation type~~ | ~~Event-forensic type !=6 AND Outcomes-accommodation type=11~~ | **Warning** |

# Proposal 16 – Modify codeset for Event - funding source

|  |  |
| --- | --- |
| It is proposed to | Add new code to Funding source for youth counselling and non-residential withdrawal activity and update 4.2.5 Funding source attributes. |
| Proposed by | Sector |
| Reason for proposed change | Allow for services providers to report delivery of episodes of care (EOC) for funded youth counselling and non-residential withdrawal. |
| Data Specification change summary | Add new value to existing data element  Modify Event—Funding source and Table 4 Service event funding sources and funding units so that a code combination is available for service providers to report the delivery of the Episode of Care funded youth counselling and non-residential withdrawal. Update validation AOD47 allowable combinations for Funding source and Service stream.  The valid code combinations will be   * Funding source code:137 – Vic State Youth-specific community treatment; and * Service stream code: 11 – Non-residential withdrawal   or  20 – Counselling. |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 16**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.4.7 Event—funding source—N[N][N]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | | |
| **Definition** | The funding source of the service event. Used to identify different funding units (COT, EOC, DTAU) or different DTAU values for broad service streams with notable variations in service stream model of care and/or performance monitoring requirements. | | | |
| **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 | |
|  | 100 | | General | |
|  | 102 | Drug Diversion Appointment Line (DDAL) | | |
|  | 103 | Aboriginal Metro Ice Partnership | | |
|  | 104 | Pharmacotherapy Outreach | | |
|  | 105 | Specialist Pharmacotherapy Program | | |
|  | 107 | ACCHO services – drug services | | |
|  | 108 | ACCHO-AOD nurse program | | |
|  | 109 | Low Risk Offender Program | | |
|  | 112 | 8-hour individual offender program | | |
|  | 113 | 15-hour individual offender program | | |
|  | 114 | 24-hour group offender program | | |
|  | 115 | 42-hour group offender program | | |
|  | 116 | Small rural health funding | | |
|  | 137 | Vic State Youth-specific community treatment | | |
|  | **Residential Withdrawal funding codes** | | | |
|  | 117 | | Sub-acute withdrawal | |
|  | 118 | | Three-stage stepped withdrawal program | |
|  | 119 | | Mother/baby withdrawal program | |
|  | 120 | | Youth-specific facility withdrawal | |
|  | 121 | | Residential withdrawal general | |
|  | **Residential rehabilitation funding codes** | | | |
|  | 106 | | Slow stream pharmacotherapy | |
|  | 111 | | Residential dual diagnosis program | |
|  | 123 | | 6-week rehabilitation program | |
|  | 125 | | Family beds program | |
|  | 126 | | Youth-specific facility rehabilitation | |
|  | 127 | | Aboriginal-specific facility rehabilitation | |
|  | 128 | | Residential rehabilitation general | |
|  | 129 | | Stabilisation model | |
|  | **Bridging Support funding codes** | | | |
|  | 130 | | Bridging support – post–residential withdrawal | |
|  | 131 | | Bridging support – post–residential rehabilitation | |
|  | 132 | | Bridging support – intake | |
|  | 133 | | Bridging support – assessment | |
|  | **Brief intervention funding codes** | | | |
|  | 134 | | Brief intervention – intake | |
|  | 135 | | Brief intervention – assessment | |
|  | 136 | | Brief intervention – counselling | |
|  | **Commonwealth funding codes** | | | |
|  | 500 | | Commonwealth Government (non PHN) | |
|  | 501 | | Primary Health Networks (PHN Commonwealth) | |
| **Supplementary values** | ***Value*** | | ***Meaning*** | |
|  | 999 | | Not stated/inadequately described | |
| **Data element attributes** | | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Mandatory | | | | | | |
| *Collection and usage attributes* | | | | |
| **Guide for use** | |  |  | | --- | --- | | Code 0 | Not funded | | Code 100 | Default value for all service events with Victorian State Government funded service streams Includes: Small rural health services flexible funding. | | Code 102 | Funding source for service events that are part of a DDAL program | | Code 103 | Funding source for service events that are part of a Aboriginal Metro Ice Partnership funded program | | Code 104 | Funding source for service events that have an Outreach service stream, and are specifically for Pharmacotherapy | | Code 105 | Funding source for service events that are associated with a Specialist Pharmacotherapy program | | Code 107 | Funding source for service events that are associated with ACCHO Drug Services.  Includes: Koori A&D Worker services provided | | Code 108 | Funding source for service events that are part of an Aboriginal and/or Torres Strait Islander AOD Nurse Program | | Code  109 | Funding source for service events that are part of a Client education program, called Low Risk Offender program. | | Code 112 | Funding for the eight-hour individual offender program. This is a structured course of eight sessions of counselling for individuals based on the content of the group offender programs. | | Code 113 | Funding for the fifteen-hour individual offender program. This is a structured course of eight sessions of counselling for individuals based on the content of the group offender programs. | | Code 114 | Funding for the twenty-four-hour group offender program. This is a structured, closed 24-hour criminogenic alcohol and other drug program. | | Code 115 | Funding for the forty-two-hour group offender program. This is a structured, closed 42-hour criminogenic alcohol and other drug program delivered over eight weeks. | | Code 116 | Funding source to be used where a service provider has a Small Rural Health funding arrangement with the DHHS. Only to be used for service streams which DHHS has agreed in consultation with the service provider on an annual basis. | | Code 137 | Funding for youth-specific community counselling and non-residential withdrawal treatment. Only to be used by service providers funded to deliver youth specific treatment using Episode of Care funding units. | | **Residential withdrawal funding source codes** | | | Code 117 | Sub-acute withdrawal - Hospital-based, subacute withdrawal services for clients also requiring complex medical or psychiatric management, delivered from specific facilities.  These services are for clients who are too medically complex for a community withdrawal bed. | | Code 118 | Three-stage withdrawal stabilisation program - Withdrawal services provided during stages one and two of the three-stage stepped stabilisation model delivered from specific facilities. Stage one provides a stay of up to six days, and stage two provides a stay of up to 21 days. | | Code 119 | Mother/baby withdrawal program - Withdrawal services provided to mothers with dependant babies in a specific mother/baby unit.  A standard course is up to ten days, and an extended course 11 days or longer. | | Code 120 | Youth-specific facility withdrawal - Withdrawal services provided to young people up to 25 years old in a youth-specific residential withdrawal facility.  A standard course is up to ten days, and an extended course 11 days or longer. | | Code 121 | Residential Withdrawal general - Residential withdrawal services support clients to safely achieve neuro-adaptation reversal from drugs of dependence, in a supervised residential or hospital facility.  Withdrawal services provided to young people and adults through a community residential drug withdrawal service.  A standard course is up to ten days, and an extended course 11 days or longer. | | **Residential rehabilitation funding source codes** | | | Code 106 | Slow Stream Pharmacotherapy - Rehabilitation services provided to clients in conjunction with treatment to assist with withdrawal from pharmacotherapy.  A standard course is up to 160 days, and an extended course 161 days or longer. | | Code  111 | Dual diagnosis rehabilitation program - Enhanced residential rehabilitation services for clients with co-occurring mental health and alcohol and other drug needs, delivered from specific facilities. | | Code 123 | 6-week rehabilitation program - Rehabilitation services based around a time-limited, six-week therapy program, and delivered from specific facilities. | | Code 125 | Family beds program - Residential rehabilitation services delivered to clients accompanied by family members at facilities with specially designated family units.  A standard course is up to 160 days, and an extended course 161 days or longer. | | Code 126 | Youth-specific facility rehabilitation - Rehabilitation services provided to young people up to 25 years old in a youth-specific residential rehabilitation facility.  A standard course is up to = 0-90 days, extended =91+ days | | Code 127 | Aboriginal-specific facility rehabilitation - Rehabilitation services provided to Aboriginal clients in a specific Aboriginal residential rehabilitation facility.  A standard course is up to = 0-90 days, extended =91+ days | | Code 128 | Residential Rehabilitation general - Residential rehabilitation services provide intensive interventions that address the psychosocial causes of drug dependence in a structured residential setting.  Rehabilitation services provided in a 24-hour staffed residential treatment program. These services include a range of interventions that aim to ensure lasting change and assist re-integration into community living.  A standard course is up to 160 days, and an extended course 161 days or longer. | | Code 129 | Stabilisation model - Residential Rehabilitation services for medically complex clients requiring a longer period of stabilisation following a withdrawal episode. | | **Bridging Support funding codes** | | | Code 130 | Bridging support - Post-residential withdrawal - Regular contact which aims to support client engagement, retention, motivation and stability after a client has left residential withdrawal. | | Code 131 | Bridging support - Post-residential rehabilitation - Regular contact which aims to support client engagement, retention, motivation and stability after a client has left residential rehabilitation. | | Code 132 | Bridging support – intake - Regular contact which aims to support client engagement, retention, motivation and stability while clients wait for assessment. | | Code 133 | Bridging support – assessment - Regular contact which aims to support client engagement, retention, motivation and stability while clients wait for treatment. | | **Brief Intervention funding codes** | | | Code 134 | Brief intervention – intake - Education and advice that aims to achieve a short-term reduction in harm associated with AOD use, occurring around the time of intake of a client. This may include crisis intervention, harm reduction measures, relapse prevention planning, and support for co-occurring issues, such as mental health. | | Code 135 | Brief intervention – assessment - Education and advice that aims to achieve a short-term reduction in harm associated with AOD use, occurring around the assessment of a client. This may include crisis intervention, harm reduction measures, relapse prevention planning, and support for co-occurring issues, such as mental health. | | Code 136 | Brief intervention – counselling - Education and advice that aims to achieve a short-term reduction in harm associated with AOD use, provided at any other time than intake or assessment. This may include crisis intervention, harm reduction measures, relapse prevention planning, and support for co-occurring issues, such as mental health. | | **Other funding codes** | | | Code 500 | Funding source for service events that are directly funded by the Commonwealth Government. Excludes PHN funded activity. | | Code 501 | AOD services commissioned and funded by Commonwealth Primary Health Networks (PHN). | | Code 999 | Should be used when funding source is unknown | | | | |
| *Source and reference attributes* | | | | |
| **Definition source** | Department of Health and Human Services | | | |
| **Definition source identifier** | Service Agreement Management System | | | |
| **Value domain source** | Department of Health and Human Services | | | |
| **Value domain identifier** | Service Agreement Management System | | | |
| *Relational attributes* | | | | |
| **Related concepts** | Service stream | | | |
| **Related data elements** | Event-Target pop  Event stream | | | |
| **Edit/validation rules** | \*AOD0 value not in codeset for reporting period  AOD2 cannot be null | | | |
|  | \*AOD47 service stream mismatch | | | |
| **Other related information** |  | | | |

### 4.2.5 Funding source attributes

| **Funding Source code** | **Service Stream Code** | | |
| --- | --- | --- | --- |
|  | 11-Non – Residential Withdrawal | 20-Counselling |  |
| 137-Vic State Youth specific community treatment | E [S] | E [S] |  |

# Proposal 17 – Change to business rule for youth residential bridging support

|  |  |
| --- | --- |
| It is proposed to | Ensure bridging support events are reported against the associated type of residential service.  (Proposal 10 from 2019-20 Specifications for revisions – subsequently withdrawn for later consideration)  Allowing a new combination for bridging support and youth residential funding source. |
| Proposed by | DHHS |
| Reason for proposed change |  |
| Data Specification change summary | NA |
| Technical change | No |
| Specification change | No |

**FEEDBACK FOR PROPOSAL 17**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 4.2.5 Funding source attributes

| Refer to Table 4, Section 4.2.5, regarding inclusion/exclusion Service Streams.**Funding Source code** |
| --- |
|  | 52-Bridging support |
| 120-Youth-specific facility withdrawal | D |
| 126-Youth-specific facility rehabilitation | D |

# Proposal 18 – Change AOD140 from warning to error

|  |  |
| --- | --- |
| It is proposed to | Change AOD140 from a warning (data accepted but must be checked) to an error (data not accepted) to enforce the rule that at least one drug of concern must be recorded upon closure within each outcome measure. |
| Proposed by | DHHS |
| Reason for proposed change | To make “presenting drug of concern” mandatory for support events |
| Data Specification change summary | Update AOD140 drug of concern validation pseudo code. |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL18**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 6 Edit/Validation Rules

| ID | Edit name/description | Data elements | Pseudo code/rule | Status |
| --- | --- | --- | --- | --- |
| AOD140 | At least one Drug of concern group not reported within an Outcome measure for closed service events where the client is a person of concern | Outcome Measure  Drug of Concern  Event-end date  Contact-relationship to client  Event – Service stream | Event-end date != null AND for each Outcome Measure (count(Drug of concern) < 1) AND (ISNULL(Contact-relationship to client,9) = 0) OR event service stream = (table 3 Activity Type = R) | ~~Warning~~  Error |

# Proposal 19 – Modify codeset for Event – funding source

|  |  |
| --- | --- |
| It is proposed to | Add six new PHN funding source codes and remove legacy PHN code. Add three new funding source codes for state block funded activity. |
| Proposed by | Vic PHN and DHHS |
| Reason for proposed change | To further VADC/PHN alignment and allow the six PHNs to report through the VADC. To allow services to correctly report funding source for events which are state funded but not through DTAU/EOC. |
| Data Specification change summary | Addition of nine new codes to Event – funding source and remove one code. Update validation AOD47 allowable combinations for Funding source and Service stream. Update Table 4. |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 19**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.4.8 Event—funding source—N[N][N]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | | |
| **Definition** | The funding source of the service event. Used to identify different funding units (COT, EOC, DTAU) or different DTAU values for broad service streams with notable variations in service stream model of care and/or performance monitoring requirements. | | | |
| **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 | | Block funded (unit not specified) | |
|  | 2 | | EOC block funded | |
|  | 3 | | DTAU block funded | |
|  | 100 | | General | |
|  | 102 | Drug Diversion Appointment Line (DDAL) | | |
|  | 103 | Aboriginal Metro Ice Partnership | | |
|  | 104 | Pharmacotherapy Outreach | | |
|  | 105 | Specialist Pharmacotherapy Program | | |
|  | 107 | ACCHO services – drug services | | |
|  | 108 | ACCHO-AOD nurse program | | |
|  | 109 | Low Risk Offender Program | | |
|  | 112 | 8-hour individual offender program | | |
|  | 113 | 15-hour individual offender program | | |
|  | 114 | 24-hour group offender program | | |
|  | 115 | 42-hour group offender program | | |
|  | 116 | Small rural health funding | | |
|  | **Residential Withdrawal funding codes** | | | |
|  | 117 | | Sub-acute withdrawal | |
|  | 118 | | Three-stage stepped withdrawal program | |
|  | 119 | | Mother/baby withdrawal program | |
|  | 120 | | Youth-specific facility withdrawal | |
|  | 121 | | Residential withdrawal general | |
|  | **Residential rehabilitation funding codes** | | | |
|  | 106 | | Slow stream pharmacotherapy | |
|  | 111 | | Residential dual diagnosis program | |
|  | 123 | | 6-week rehabilitation program | |
|  | 125 | | Family beds program | |
|  | 126 | | Youth-specific facility rehabilitation | |
|  | 127 | | Aboriginal-specific facility rehabilitation | |
|  | 128 | | Residential rehabilitation general | |
|  | 129 | | Stabilisation model | |
|  | **Bridging Support funding codes** | | | |
|  | 130 | | Bridging support – post–residential withdrawal | |
|  | 131 | | Bridging support – post–residential rehabilitation | |
|  | 132 | | Bridging support – intake | |
|  | 133 | | Bridging support – assessment | |
|  | **Brief intervention funding codes** | | | |
|  | 134 | | Brief intervention – intake | |
|  | 135 | | Brief intervention – assessment | |
|  | 136 | | Brief intervention – counselling | |
|  | **Commonwealth funding codes** | | | |
|  | 500 | | Commonwealth Government (non PHN) | |
|  | ~~501~~ | | ~~Primary Health Networks (PHN Commonwealth)~~ | |
|  | 502 | | PHN - North Western Melbourne | |
|  | 503 | | PHN - Eastern Melbourne | |
|  | 504 | | PHN - South Eastern Melbourne | |
|  | 505 | | PHN - Gippsland | |
|  | 506 | | PHN - Murray | |
|  | 507 | | PHN - Western Victoria | |
| **Supplementary values** | ***Value*** | | ***Meaning*** | |
|  | 999 | | Not stated/inadequately described | |
| **Data element attributes** | | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Mandatory | | | | | | |
| *Collection and usage attributes* | | | | |
| **Guide for use** | |  |  | | --- | --- | | Code 0 | Not funded | | Code 1 | Block funded – unit not specified | | 2 | EOC block funded – EOC activity | | 3 | DTAU block funded – DTAU activity | | Code 100 | Default value for all service events with Victorian State Government funded service streams Includes: Small rural health services flexible funding.  Excludes: Victorian State Government block funded | | Code 102 | Funding source for service events that are part of a DDAL program | | Code 103 | Funding source for service events that are part of a Aboriginal Metro Ice Partnership funded program | | Code 104 | Funding source for service events that have an Outreach service stream, and are specifically for Pharmacotherapy | | Code 105 | Funding source for service events that are associated with a Specialist Pharmacotherapy program | | Code 107 | Funding source for service events that are associated with ACCHO Drug Services.  Includes: Koori A&D Worker services provided | | Code 108 | Funding source for service events that are part of an Aboriginal and/or Torres Strait Islander AOD Nurse Program | | Code  109 | Funding source for service events that are part of a Client education program, called Low Risk Offender program. | | Code 112 | Funding for the eight-hour individual offender program. This is a structured course of eight sessions of counselling for individuals based on the content of the group offender programs. | | Code 113 | Funding for the fifteen-hour individual offender program. This is a structured course of eight sessions of counselling for individuals based on the content of the group offender programs. | | Code 114 | Funding for the twenty-four-hour group offender program. This is a structured, closed 24-hour criminogenic alcohol and other drug program. | | Code 115 | Funding for the forty-two-hour group offender program. This is a structured, closed 42-hour criminogenic alcohol and other drug program delivered over eight weeks. | | Code 116 | Funding source to be used where a service provider has a Small Rural Health funding arrangement with the DHHS. Only to be used for service streams which DHHS has agreed in consultation with the service provider on an annual basis. | | **Residential withdrawal funding source codes** | | | Code 117 | Sub-acute withdrawal - Hospital-based, subacute withdrawal services for clients also requiring complex medical or psychiatric management, delivered from specific facilities.  These services are for clients who are too medically complex for a community withdrawal bed. | | Code 118 | Three-stage withdrawal stabilisation program - Withdrawal services provided during stages one and two of the three-stage stepped stabilisation model delivered from specific facilities. Stage one provides a stay of up to six days, and stage two provides a stay of up to 21 days. | | Code 119 | Mother/baby withdrawal program - Withdrawal services provided to mothers with dependant babies in a specific mother/baby unit.  A standard course is up to ten days, and an extended course 11 days or longer. | | Code 120 | Youth-specific facility withdrawal - Withdrawal services provided to young people up to 25 years old in a youth-specific residential withdrawal facility.  A standard course is up to ten days, and an extended course 11 days or longer. | | Code 121 | Residential Withdrawal general - Residential withdrawal services support clients to safely achieve neuro-adaptation reversal from drugs of dependence, in a supervised residential or hospital facility.  Withdrawal services provided to young people and adults through a community residential drug withdrawal service.  A standard course is up to ten days, and an extended course 11 days or longer. | | **Residential rehabilitation funding source codes** | | | Code 106 | Slow Stream Pharmacotherapy - Rehabilitation services provided to clients in conjunction with treatment to assist with withdrawal from pharmacotherapy.  A standard course is up to 160 days, and an extended course 161 days or longer. | | Code  111 | Dual diagnosis rehabilitation program - Enhanced residential rehabilitation services for clients with co-occurring mental health and alcohol and other drug needs, delivered from specific facilities. | | Code 123 | 6-week rehabilitation program - Rehabilitation services based around a time-limited, six-week therapy program, and delivered from specific facilities. | | Code 125 | Family beds program - Residential rehabilitation services delivered to clients accompanied by family members at facilities with specially designated family units.  A standard course is up to 160 days, and an extended course 161 days or longer. | | Code 126 | Youth-specific facility rehabilitation - Rehabilitation services provided to young people up to 25 years old in a youth-specific residential rehabilitation facility.  A standard course is up to = 0-90 days, extended =91+ days | | Code 127 | Aboriginal-specific facility rehabilitation - Rehabilitation services provided to Aboriginal clients in a specific Aboriginal residential rehabilitation facility.  A standard course is up to = 0-90 days, extended =91+ days | | Code 128 | Residential Rehabilitation general - Residential rehabilitation services provide intensive interventions that address the psychosocial causes of drug dependence in a structured residential setting.  Rehabilitation services provided in a 24-hour staffed residential treatment program. These services include a range of interventions that aim to ensure lasting change and assist re-integration into community living.  A standard course is up to 160 days, and an extended course 161 days or longer. | | Code 129 | Stabilisation model - Residential Rehabilitation services for medically complex clients requiring a longer period of stabilisation following a withdrawal episode. | | **Bridging Support funding codes** | | | Code 130 | Bridging support - Post-residential withdrawal - Regular contact which aims to support client engagement, retention, motivation and stability after a client has left residential withdrawal. | | Code 131 | Bridging support - Post-residential rehabilitation - Regular contact which aims to support client engagement, retention, motivation and stability after a client has left residential rehabilitation. | | Code 132 | Bridging support – intake - Regular contact which aims to support client engagement, retention, motivation and stability while clients wait for assessment. | | Code 133 | Bridging support – assessment - Regular contact which aims to support client engagement, retention, motivation and stability while clients wait for treatment. | | **Brief Intervention funding codes** | | | Code 134 | Brief intervention – intake - Education and advice that aims to achieve a short-term reduction in harm associated with AOD use, occurring around the time of intake of a client. This may include crisis intervention, harm reduction measures, relapse prevention planning, and support for co-occurring issues, such as mental health. | | Code 135 | Brief intervention – assessment - Education and advice that aims to achieve a short-term reduction in harm associated with AOD use, occurring around the assessment of a client. This may include crisis intervention, harm reduction measures, relapse prevention planning, and support for co-occurring issues, such as mental health. | | Code 136 | Brief intervention – counselling - Education and advice that aims to achieve a short-term reduction in harm associated with AOD use, provided at any other time than intake or assessment. This may include crisis intervention, harm reduction measures, relapse prevention planning, and support for co-occurring issues, such as mental health. | | **Other funding codes** | | | Code 500 | Funding source for service events that are directly funded by the Commonwealth Government. Excludes PHN funded activity. | | ~~Code 501~~ | ~~AOD services commissioned and funded by Commonwealth Primary Health Networks (PHN).~~ | | Codes 502-507 | AOD services commissioned and funded by the specific Commonwealth Primary Health Networks (PHN). | | Code 999 | Should be used when funding source is unknown | | | | |
| *Source and reference attributes* | | | | |
| **Definition source** | Department of Health and Human Services | | | |
| **Definition source identifier** | Service Agreement Management System | | | |
| **Value domain source** | Department of Health and Human Services | | | |
| **Value domain identifier** | Service Agreement Management System | | | |
| *Relational attributes* | | | | |
| **Related concepts** | Service stream | | | |
| **Related data elements** | Event-Target pop  Event stream | | | |
| **Edit/validation rules** | \*AOD0 value not in codeset for reporting period  AOD2 cannot be null | | | |
|  | \*AOD47 service stream mismatch | | | |
| **Other related information** |  | | | |

### 4.2.5 Funding source attributes

*[Table 4 to be updated for new block funded codes]*

*[ Where marked as tbc, VPHN to confirm which service streams funded by which Vic PHN area to create a PE [PHN episode of care]*

| **Funding Source code** |  | **Service Stream Code** | | | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 10- Residential Withdrawal | 11-Non-Residential Withdrawal | 20-Counselling | 21-Brief Intervention | 22-Ante & Post Natal Support | 30-Residential Rehabilitation | 31-Therapeutic Day Rehabilitation | 32 – Residential pre-admission engagement \* | 33 – Residential pre-admission engagement \* | 50-Care & Recovery Coordination | 51-Outreach | 52-Bridging Support | 60-Client education program | 71-Comprehensive assessment | 80-Intake | 81-Outdoor Therapy (Youth) | 82-Day Program (Youth) | 83-Follow up | 84-Supported Accommodation |
| Codes 502-507  Primary Health Networks (PHN). |  | PE[S] | PE[S] | PE |  |  | PE(S) |  |  | PE[S] | PE[S] | tbc | PE | tbc | tbc | PE(s) | PE[S] | tbc |  |

# Proposal 20 – Modify codeset for Contact—contact type

|  |  |
| --- | --- |
| It is proposed to | Include family member/other as separated item from individual, to align with AOTDS NMDS client type. |
| Proposed by | VIC PHN |
| Reason for proposed change | To gain a better understanding of family support needs, and where services are delivered to family independent of the service user. |
| Data Specification change summary | Addition of new value to an existing data element  **5.2.3 Contact—contact type**  Create new code:  03 Family/Carer |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 20**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.2.3 Contact—contact type-N

|  |  |  |  |
| --- | --- | --- | --- |
| Identifying and definitional attributes | | | |
| Definition | The type of contact that was made | | |
| Value domain attributes | | | |
| Representational attributes | | | |
| Representation class | Code | Data type | Number |
| Format | N | Maximum character length | 1 |
| Permissible values | Value | Meaning | |
|  | 1 | individual | |
|  | 2 | group | |
|  | 3 | family/carer | |
| Supplementary values | ***Value*** | ***Meaning*** | |
|  | 9 | not stated/inadequately described | |
| Data element attributes | | | |
| |  |  | | --- | --- | | Reporting attributes | | | Reporting requirements | Mandatory | | | | |
| Collection and usage attributes | | | |
| Guide for use | Report the type of contact between an AODT service provider and a client/potential client and their family members or significant others.  Every contact should be related to a service event that involved an individual or a group.   |  |  | | --- | --- | | Code 1 | Individual - Contact is with/about a sole client.  Includes:  -Where client and their family members are present during the contact, and family members are not clients.  -Where multiple AODT clinicians are concurrently providing a contact to a sole client present.  - Contact about a sole client, where client is not present ie. Clinician(s) to clinician(s) – excludes Code 3 | | Code 2 | Group - With one or more participants who all have concurrent treatment in a group setting – excludes Code 3 | | Code 3 | Family/carer – where family members/carers are present during the contact and client is not present and family members are not clients. | | | |
| Source and reference attributes | | | |
| Definition source | METeOR | | |
| Definition source identifier | Based on Contact Type Indicator - N - CHMDS - DE - 10005720 | | |
| Value domain source | METeOR | | |
| Value domain identifier | [Contact Type Indicator - N - CHMDS - VD - 10005721](javascript:void(0);) | | |
| Relational attributes | | | |
| Related concepts | Contact | | |
| Related data elements | Contact-number of facilitators present | | |
|  | Contact-number of service recipients | | |
| Edit/validation rules | \*AOD0 value not in codeset for reporting period  AOD2 cannot be null | | |
|  | AOD26 group contact with less than two service recipients | | |
|  | AOD27 individual contact with more than one service recipient | | |

# Proposal 21 – Modify codeset for Outcomes – accommodation type

|  |  |
| --- | --- |
| It is proposed to | Capture accommodation types including:   * hospital/psychiatric hospital to be separated * add informal housing and supported accommodation * add mental health/dual diagnose client accommodation |
| Proposed by | VIC PHN |
| Reason for proposed change | To align with AODTS NMDS data fields and gain a better understanding of homelessness amongst AOD clients. |
| Data Specification change summary | **5.5.1 – Accommodation type**  Create new codes:  14 Informal housing  15 Supported accommodation facility  16 Acute general hospital (excludes psychiatric)  17 Psychiatric Hospital  Remove code  2 Hospital/Psychiatric hospital |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 21**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.5.1 Outcomes—accommodation type—N[N]

|  |  |  |  |
| --- | --- | --- | --- |
| Identifying and definitional attributes | | | |
| Definition | The type of physical accommodation in which the client usually lives | | |
| Value domain attributes | | | |
| Representational attributes | | | |
| Representation class | Code | Data type | Number |
| Format | N[N] | Maximum character length | 2 |
| Permissible values | Value | Meaning | |
|  | 1 | Private residence (e.g. house, flat, bedsitter, caravan, boat, independent unit in retirement village), including privately and publicly rented homes, rented from Aboriginal Community and defence force housing | |
|  | ~~2~~ | ~~Hospital/Psychiatric hospital~~ | |
|  | 3 | Residential aged care service | |
|  | 4 | Specialist alcohol/other drug treatment residence | |
|  | 5 | Specialised mental health community-based residential support service | |
|  | 6 | Domestic-scale supported living facility (e.g. group home for people with disability) | |
|  | 7 | Boarding/rooming house/hostel or hostel type accommodation, not including aged persons’ | |
|  | 8 | Emergency accommodation/short term crisis/shelter | |
|  | 9 | Transitional accommodation facility | |
|  | 10 | Home detention/detention centre | |
|  | 11 | Prison/remand centre/youth training centre | |
|  | 12 | Homeless | |
|  | 13 | Other accommodation not elsewhere classified | |
|  | 14 | Informal housing | |
|  | 15 | Supported accommodation facility | |
|  | 16 | Acute general hospital (excludes psychiatric) | |
|  | 17 | Psychiatric Hospital | |
| Supplementary values | Value | Meaning | |
|  | 98 | not applicable | |
|  | 99 | not stated/inadequately described | |
| Data element attributes | | | |
| |  |  | | --- | --- | | Reporting attributes | | | Reporting requirements | Mandatory | | | | |
| Collection and usage attributes | | | |
| Guide for use | Report where client is receiving service for own alcohol and drug use or clients whose treatment is related to the alcohol and other drug use of another person. E.g. family member/significant other  'Usual' is defined as the type of accommodation the person has living for the most amount of time over the past four weeks.  If a person stays in a particular place of accommodation for four or more days a week over the period, that place of accommodation would be the person's type of usual accommodation. In practice, receiving an answer to questioning about a person's usual accommodation setting may be difficult to achieve. The place the person perceives as their usual accommodation will often prove to be the best approximation of their type of usual accommodation.  This data element is used to calculate Client TIER   |  |  | | --- | --- | | Code 8 | Emergency accommodation/short term crisis/shelter – accommodation type for the homeless or at risk of homelessness, where an individual’s need to leave a dangerous situation, such as domestic or family violence, or if they have to leave their usual residence to access medical treatment. | | Code 9 | Transitional accommodation facility – an intermediate step between emergency crisis shelter and permanent housing. Is for is for people who are homeless or at risk of homelessness, that provides non-emergency support services, with a goal of maintaining housing and a successful tenancy. | | Code 12 | Should be used if the client is usually homeless and not utilising an emergency, crisis, shelter or transitional accommodation. | | Code 13 | Should be used for any other type of accommodation not specified in other categories. | | Code 98 | Should be only used when considered not applicable | | Code 99 | Should be used if unknown, and/or when client disengaged prior to measuring outcomes. | not stated/inadequately described | | | |
| Source and reference attributes | | | |
| Definition source | METeOR | | |
| Definition source identifier | Based on [270088 Person—accommodation type (usual)](http://meteor.aihw.gov.au/content/index.phtml/itemId/270088), Code N[N] | | |
| Value domain source | METeOR | | |
| Value domain identifier | Based on [270683 Accommodation type](http://meteor.aihw.gov.au/content/index.phtml/itemId/270683), Code N[N] | | |
| Relational attributes | | | |
| Related concepts | Outcome | | |
| Related data elements | Client-dependant living with flag | | |
| Edit/validation rules | \*AOD0 value not in codeset for reporting period  AOD2 cannot be null | | |
|  | AOD15 living with client, but client is homeless | | |
|  | AOD67 no registered client for event | | |
|  | AOD69 no accommodation type AND comprehensive assessment or treatment has ended | | |
|  | AOD71 age is too young for aged care accommodation | | |
|  | AOD85 postcode indicates no fixed address and accommodation type is not homeless | | |
|  | AOD139 Outcome measure group not supplied for a closed treatment or assessment service event. | | |
|  | AOD140 At least one Drug of concern group not reported within an Outcome measure for closed service events | | |
| Other related information |  | | |

# Proposal 22 – Modify codeset for Event - service stream

|  |  |
| --- | --- |
| It is proposed to | Create new service stream for Group Counselling |
| Proposed by | DHHS plus additional sector proposals |
| Reason for proposed change | To acquit AOD funding against group counselling sessions that occur concurrently with individual counselling sessions and align VADC with current practice.  *Note:*   * *While the option to report this activity may be made available in 2021-22, the department still needs to undertake work to determine DTAU weighting and consider impact on EOC funding model before group activity will contribute to performance reports.* |
| Data Specification change summary | Addition of a new code to an existing data element  **5.4.14 Event—service stream—NN**  Create new code:  23 – Group counselling |
| Technical change | Yes |
| Specification change | Yes |

**FEEDBACK FOR PROPOSAL 22**

|  |  |
| --- | --- |
| **AOD business impact and feasibility comments** |  |
| **Recommendation: Support to proceed or do not?** |  |
| **Other comments** |  |

### 5.4.14 Event—service stream—NN

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | The stream of service type that the service event belongs to | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | NN | **Maximum character length** | 2 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 10 | Residential withdrawal | |
|  | 11 | Non-residential withdrawal | |
|  | 20 | Counselling | |
|  | 21 | Brief intervention (incl. Single sessions with family) | |
|  | 22 | Ante & post natal support | |
|  | 23 | Group counselling | |
|  | 30 | Residential rehabilitation | |
|  | 31 | Therapeutic day rehabilitation | |
|  | 32 | Residential pre-admission engagement \* | |
|  | 33 | Residential pre-admission engagement \* | |
|  | 50 | Care & recovery coordination | |
|  | 51 | Outreach | |
|  | 52 | Bridging support | |
|  | 60 | Client education program | |
|  | 71 | Comprehensive assessment | |
|  | 80 | Intake | |
|  | 81 | Outdoor therapy (Youth) | |
|  | 82 | Day program (Youth) | |
|  | 83 | Follow up | |
|  | 84 | Supported accommodation | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 98 | Other | |
| **Data element attributes** | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Mandatory | | | | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | A single service stream should be nominated for a service event.   |  |  | | --- | --- | | Code 20 | Focus of the session is the individual client. applies to one-on-one sessions, which may include group contacts. Excludes concurrent ongoing group focussed counselling sessions | | Code 21 | To be used for Brief interventions, including Single sessions with family | | Code 23 | Group focussed counselling where two or more clients (usually unrelated) receiving an ongoing group counselling session at the same time from the same staff | | Code 32 | Code 32 will be retired in 2021-22. Transition to use replacement Code 33 during 2020-21. Codes 32 and 33 describe the same activity. | | Code 33 | Pre-admission preparation for clients prior to their entering a course of residential withdrawal or rehabilitation Codes 32 and 33 describe the same activity. | | Code 51 | To be used for all outreach activities including youth and pharmacotherapy regional outreach | | Code 52 | To be used for support services provided pre and post assessment and treatment service events | | Code 60 | For specific client educations programs only. Not to be used for general education and information, preventative community-based education. | | Code 82 | To be used for any youth day program | | Code 83 | To be used for follow up services where funding source is not applicable. | | Code 84 | Youth/Aboriginal Supported Accommodation Services only | | Code 98 | Where there is no appropriate service stream to describe the service event, this code is to be used e.g. where a new type of treatment has been developed | | | |
| *Source and reference attributes* | | | |
| **Definition source** | METeOR | | |
| **Definition source identifier** | Based on Episode of treatment for alcohol and other drugs–treatment type (main), code N - 270056 | | |
| **Value domain source** | METeOR | | |
| **Value domain identifier** | Based on [Main treatment type for alcohol and other drugs code N - 270660](javascript:void(0);) | | |
| *Relational attributes* | | | |
| **Related concepts** | Service event | | |
|  | Service stream | | |
| **Related data elements** | Event-funding source | | |
|  | Event-event type | | |
| **Edit/validation rules** | \*AOD0 value not in codeset for reporting period | | |
|  | AOD2 cannot be null | | |
|  | \*AOD48 event type mismatch | | |
| **Other related information** |  | | |

Table 4 Service event funding sources and funding units

*[Allowable combinations to be confirmed, while the option to report this activity may be made available in 2021-22, the department still needs to undertake work to determine DTAU weighting and consider impact on EOC funding model before group activity will contribute to performance reports]*

# PART TWO – PREVIOUSLY APPROVED PROPOSALS FROM 2020-21

### Purpose

* The following proposals were approved and endorsed and approved as part of the VADC 2020-21 Annual Change Process. However, they were not implemented on 01 July 2020 due to the technical, clinical and administrative challenges posed by the COVID-19 pandemic.
* These proposals have already been reviewed and assessed by the VADC Change Management Group, confirmed by the VADC Change Control Group and endorsed by the Data Custodian.
* No further feedback is required. The proposals are presented here for your information.

# Proposal 23 – Modify codeset for Referral - Provider type

|  |  |
| --- | --- |
| It is proposed to | Remove ACSO-COATS from referral provider type and require the AOD treatment service to record the referral provider as either   * Corrections Victoria * Police diversion * Court diversion * VFTAC (New 2021)   to improve insights for sources of Forensic referrals to Community based AOD treatment. |
| Proposed by | DHHS |
| Reason for proposed change | To ensure the collection more accurately reflects true referral sources for forensic clients. The change will remove inaccurate referral provider types and provide clarity in the Guide for Use for others. |
| Data Specification change summary | **update code set value name 9 and 10**  **remove code set value 21 ACSO-COATS**  **add new code 27 Youth Justice**  **add new code 28 VFTAC** |
| Technical change | Yes |
| Specification change | Yes |
| 2020-21 approved | Proposal deferred due to COVID-19 pandemic: no feedback required |

# Proposal 24 – Add a new Funding source / Service stream combination - CHOICES

|  |  |
| --- | --- |
| It is proposed to | Add a new Funding source / Service stream combination to facilitate the recording of activity for the Low Risk Offender Program (CHOICES)  *Changes are required to Table 4 Service event funding sources and funding units so that a code combination is available for service providers to report the delivery of the CHOICES program* |
| Proposed by | DHHS |
| Reason for proposed change | Changes are required to Table 4 Service event funding sources and funding units so that a code combination is available for service providers to report the delivery of the CHOICES program. This will more accurately collect data regarding forensic service delivery. |
| Data Specification change summary | Change to business rule  **4.2.5 Funding source attributes** *Table 4 Service event funding sources and funding units*  The valid code combination will be:   * Funding source code: 109 – Vic State Gov-Low Risk Offender Program   Service stream code: 21 – Brief intervention |
| Technical change | Yes |
| Specification change | Yes |
| 2020-21 approved | Proposal deferred due to COVID-19 pandemic: no feedback required |

# Proposal 25 – Remove AOD140 and add new Drug of concern validation

|  |  |
| --- | --- |
| It is proposed to | Delete AOD140 and add AODXXX |
| Proposed by | Mental health and Drugs Data, Health Services Data, DHHS |
| Reason for proposed change | This validation enforces that the drug of concern must be reported upon closure of a service event where the client is the person of concern. |
| Data Specification change summary | Update Service event Table 6  Update validations within data definitions |
| Technical change | CMS dependant |
| Specification change | Yes |
| 2020-21 Approved | Proposal deferred due to COVID-19 pandemic: no feedback required |

### 6 Edit/Validation Rules

| ID | Edit name/description | Data elements | Pseudo code/rule | Status |
| --- | --- | --- | --- | --- |
| ~~AOD140~~ | ~~At least one Drug of concern group not reported within an Outcome measure for closed service events~~ | ~~Outcome Measure~~  ~~Drug of Concern~~  ~~Event-end date~~ | ~~Event-end date != null AND for each Outcome Measure (count(Drug of concern) < 1)~~ | ~~warning~~ |
| AODXXX | At least one Drug of concern group not reported within an Outcome measure for closed service event where the client is a person of concern | Outcome Measure  Drug of Concern  Event-end date  Contact-relationship to client  Event-service stream | Event-end date != null AND for each Outcome Measure (count(Drug of concern) < 1) AND  (Contact-relationship to client !=[0] AND Service Stream != (Table 3 Activity Type = R) | error |

# Proposal 26 – Change to codeset -Drug of Concern

|  |  |
| --- | --- |
| It is proposed to | Remove legacy cannabis code “3201” |
| Proposed by | VAHI |
| Reason for proposed change | “Cannabis code 3201” within drug of concern codeset was required whilst services transitioned from ADIS to VADC. With services no longer reporting via ADIS, this code is now redundant () |
| Data Specification change summary | Remove code “3201 Cannabis” from *presenting drug of concern* and *drug of concern* codeset. Use the existing code of “7101” for Cannabis  7101 cannabis code is part of the 1248.0 - Australian Standard Classification of Drugs of Concern, 2011. |
| Technical change | Yes |
| Specification change | Yes |
| 2020-21 approved | Proposal deferred due to COVID-19 pandemic: no feedback required |

### 5.3.2 Drug Concern—drug name—NNNN

|  |  |  |  |
| --- | --- | --- | --- |
| Identifying and definitional attributes | | | |
| Definition | The drug of concern of the registered client | | |
| Value domain attributes | | | |
| Representational attributes | | | |
| Representation class | Code | Data type | Number |
| Format | NNNN | Maximum character length | 4 |
| Permissible values | Value | Meaning | |
|  | 2101 | Alcohol | |
|  | 3100 | Amphetamines Unspecified | |
|  | 2400 | Benzodiazepines Unspecified | |
|  | 3901 | Caffeine | |
|  | ~~3201~~ | ~~Cannabis~~ | |
|  | 7101 | Cannabis | |
|  | 3903 | Cocaine | |
|  | 1202 | Heroin | |
|  | 3405 | MDMA (includes ecstasy) | |
|  | 3103 | Methamphetamine (includes ice, speed) | |
|  | 1305 | Methadone | |
|  | 3906 | Nicotine | |
|  | The ASCDC (2011) code set | Other Substance: Specify the ASCDC four-digit code representing drug of concern.  Refer to Appendix 7.5: Large-value domains. | |
| Supplementary values | Value | Meaning | |
|  | 0000 | Inadequately Described | |
|  | 0001 | Not Stated | |
|  | 0005 | Opioid analgesics not further defined | |
|  | 0006 | Psychostimulants not further defined | |
| Data element attributes | | | |
| |  |  | | --- | --- | | Reporting attributes | | | Reporting requirements | Mandatory when drug of concern is related to client’s own alcohol and drug use | | | | |
| Collection and usage attributes | | | |
| Guide for use | Only report where drug of concern, is related to the client’s own alcohol and drug use. For clients whose treatment is related to the alcohol and other drug use of another person, this metadata item should not be collected.  The Australian Standard Classification of Drugs of Concern (ASCDC) provides a number of supplementary codes that have specific use, and these are detailed within the ASCDC, e.g. 0000 = inadequately described.  ‘9000 miscellaneous drug of concern’ supplementary code should only be used as principal drug of concern where the client does not have any discernible precise drugs of concern.  Other supplementary codes that are not already specified in the ASCDC may be used in National Minimum Data Sets (NMDS) when required.  In the Alcohol and other drug treatment service NMDS, two additional supplementary codes have been created which enable a finer level of detail to be captured:   |  |  | | --- | --- | | Code 0005 | Opioid analgesics not further defined | | This code is to be used when it is known that the client's principal drug of concern is an opioid, but the specific opioid used is not known. The existing code 1000 combines opioid analgesics and non-opioid analgesics together into Analgesics nfd and the finer level of detail, although known, is lost. | | Code 0006 | Psychostimulants not further defined | | This code is to be used when it is known that the client's principal drug of concern is a psychostimulant but not which type. The existing code 3000 combines stimulants and hallucinogens together into Stimulants and hallucinogens nfd and the finer level of detail, although known, is lost.  Psychostimulants refer to the types of drugs that would normally be coded to 3100-3199, 3300-3399 and 3400-3499 categories plus 3903 and 3905. | | | |
| Source and reference attributes | | | |
| Definition source | Australian Bureau of Statistics | | |
| Definition source identifier | http://www.abs.gov.au/ausstats/abs@.nsf/ | | |
| Value domain source | Drugs of Concern (1248.0 - Australian Standard Classification of Drugs of Concern, 2011) | | |
| Value domain identifier | http://www.abs.gov.au/ausstats/abs@.nsf/mf/1248.0 | | |
| Relational attributes | | | |
| Related concepts | Outcome | | |
| Related data elements | Event-presenting drug of concern | | |
| Edit/validation rules | AOD2 cannot be null | | |
|  | AOD113 cannot have two identical drugs of concern for same outcome measure | | |
|  | AOD114 only 6 drugs of concern required for same outcome measure | | |
| Other related information |  | | |

### 5.4.12 Event—presenting drug of concern—NNNN

|  |  |  |  |
| --- | --- | --- | --- |
| *Identifying and definitional attributes* | | | |
| **Definition** | The drug of concern of the client, when presenting to the service | | |
| **Value domain attributes** | | | |
| *Representational attributes* | | | |
| **Representation class** | Code | **Data type** | Number |
| **Format** | NNNN | **Maximum character length** | 4 |
| **Permissible values** | ***Value*** | ***Meaning*** | |
|  | 2101 | Alcohol | |
|  | 3100 | Amphetamines Unspecified | |
|  | 3103 | Methamphetamine (includes ice, speed) | |
|  | 2400 | Benzodiazepines Unspecified | |
|  | 3901 | Caffeine | |
|  | ~~3201~~ | ~~Cannabis~~ | |
|  | 7101 | Cannabis | |
|  | 3903 | Cocaine | |
|  | 3405 | MDMA (includes ecstasy) | |
|  | 1202 | Heroin | |
|  | 1305 | Methadone | |
|  | 3906 | Nicotine | |
|  | ASCDC (2011) code set | The ASCDC (2011) code set representing drug of concern.  Refer to Appendix 7.5: Large-value domains. | |
| **Supplementary values** | ***Value*** | ***Meaning*** | |
|  | 0005 | Opioid analgesics not further defined | |
|  | 0006 | Psychostimulants not further defined | |
| **Data element attributes** | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | *Reporting attributes* | | | **Reporting requirements** | Conditional –  Mandatory for Presentation service events | | | | | |
| *Collection and usage attributes* | | | |
| **Guide for use** | When service provided is related to potential client/client’s own alcohol or other drug use, this is the presenting drug of most concern, they are seeking help for.  Where treatment is related to the alcohol and other drug use of another person, e.g. the potential client/client is a family member or significant other, this refers to the presenting drug of concern for the client.  The Australian Standard Classification of Drugs of Concern (ASCDC) provides a number of supplementary codes that have specific uses, and these are detailed within the ASCDC, e.g. 0000 = inadequately described.  ‘9000 miscellaneous drug of concern’ supplementary code should only be used as presenting drug of concern where the client does not have any discernible precise drugs of concern.  Other supplementary codes that are not already specified in the ASCDC may be used in National Minimum Data Sets (NMDS) when required.  In the Alcohol and other drug treatment service NMDS, two additional supplementary codes have been created which enable a finer level of detail to be captured:  Use null for Assessment, Treatment, Support and Review Service Event Types   |  |  | | --- | --- | | Code 0005 | Opioid analgesics not further defined | | This code is to be used when it is known that the client's principal drug of concern is an opioid, but the specific opioid used is not known. The existing code 1000 combines opioid analgesics and non-opioid analgesics together into Analgesics nfd and the finer level of detail, although known, is lost. | | Code 0006 | Psychostimulants not further defined | | This code is to be used when it is known that the client's principal drug of concern is a psychostimulant but not which type. The existing code 3000 combines stimulants and hallucinogens together into Stimulants and hallucinogens nfd and the finer level of detail, although known, is lost.  Psychostimulants refer to the types of drugs that would normally be coded to 3100-3199, 3300-3399 and 3400-3499 categories plus 3903 and 3905. | | | |
| *Source and reference attributes* | | | |
| **Definition source** | Australian Bureau of Statistics | | |
| **Definition source identifier** | http://www.abs.gov.au/ausstats/abs@.nsf/ | | |
| **Value domain source** | Drugs of Concern (1248.0 - Australian Standard Classification of Drugs of Concern, 2011) | | |
| **Value domain identifier** | http://www.abs.gov.au/ausstats/abs@.nsf/mf/1248.0 | | |
| *Relational attributes* | | | |
| **Related concepts** | Service event | | |
| **Related data elements** | Drug Concern-principal concern | | |
| **Edit/validation rules** | AOD28 event type mismatch, event type is not presentation  AOD159 presentation but no presenting drug of concern | | |
| **Other related information** |  | | |

# Proposal 27 – New validation for Drug Concern – Principal Concern

|  |  |
| --- | --- |
| It is proposed to | Enforce at least one principal drug of concern when reporting drug of concern element group |
| Proposed by | VAHI |
| Reason for proposed change | Currently VADC allows for drug of concern data element group to be reported without requiring the client principal drug of concern to be specified.  The principal drug of concern should be the main drug of concern to the client and is the focus of the client's treatment. It has led the client to seek treatment from the service  The collection of principal concern is required for national minimum data set reporting. |
| Data Specification change summary | New validation |
| Technical change | CMS Dependant |
| Specification change | Yes |
| 2020-21 Approved | Proposal deferred due to COVID-19 pandemic: no feedback required |

### 6 Edit/Validation Rules

| ID | Edit name/description | Data elements | Pseudo code/rule | Status |
| --- | --- | --- | --- | --- |
| AODXXX | Where drug of concern is reported a principal drug of concern must be specified | Drug concern-principal concern | TBC | error |

# Proposal 28 – Remove a value in an existing data element – Service stream

|  |  |
| --- | --- |
| It is proposed to | Amend the residential pre-admission engagement service event type from Treatment to Presentation |
| Proposed by | DHHS |
| Reason for proposed change | To reduce reporting burden and more accurately reflect practice. |
| Data Specification change summary | Remove Code 32 Residential pre admission engagement from Event – Service stream 5.4.1.4 Event—service stream—NN ~~32 – Residential pre admission engagement~~  Retire legacy code 32 preadmission engagement to complete the implementation of this proposal – new Code 33 preadmission engagement as a Presentation event type was implemented on 1 July 2020. |
| Technical change | Yes |
| Specification change | Yes |
| 2020-21 approved | Full implementation of proposal deferred due to COVID-19 pandemic: no feedback required |