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| HDSS Bulletin |
| Issue 246: 6 May 2021 |
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# Global update

## Circulars

[Private hospital circulars](https://www.health.gov.au/news/phi-circulars) <https://www.health.gov.au/news/phi-circulars>

[Victorian hospital circulars](https://dhhsvicgovau.sharepoint.com/sites/DCU-DHHS-GRP/Shared%20Documents/General/HDSS%20bulletins/Victorian%20hospital%20circulars) <https://www2.health.vic.gov.au/about/news-and-events/hospitalcirculars>

## New private day procedure centre

The following new private day procedure centre has been added to our reference data.

| Hospital / Campus name | Campus code | Effective date |
| --- | --- | --- |
| Cosmos Cosmetic Day Surgery | 7080 | 08/01/2021 |

## Hospital access for people seeking asylum

The department recently updated the ‘Hospital Access for people seeking asylum’ policy.

The updated policy maintains the previous policy intent that all Medicare ineligible people seeking asylum be provided full medical care in Victorian public hospitals as admitted, non-admitted or emergency patients. It provides additional guidance on inclusions and exclusions, funding and reporting arrangements, Commonwealth cost recovery processes (where applicable), and additional supports available to people seeking asylum living in Victoria.

Contact your usual department contact if you have questions about this policy. The policy is published [here](https://www2.health.vic.gov.au/about/publications/policiesandguidelines/Hospital-access-for-people-seeking-asylum). https://www2.health.vic.gov.au/about/publications/policiesandguidelines/Hospital-access-for-people-seeking-asylum>

# Agency Information Management System (AIMS)

## AIMS S10, S11, S11A and S12 forms

The AIMS S10, S11, S11A and S12 forms will continue to be required to be submitted by public health services in 2021-22. Health Services Data will continue to monitor AIMS vs VINAH data in 2021-22 and will follow-up with health services if discrepancies are identified.

# Victorian Admitted Episodes Dataset (VAED)

## Elective Surgery Blitz reporting

Public and private hospitals participating in the Elective Surgery Blitz are reminded that new reporting guidelines were introduced to identify activity performed under this initiative. The guidelines were provided in HDSS Bulletin 243 on 15 February 2021, HDSS Bulletin 244 on 2 March 2021 and are available [here](https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems/hdss-communications) on the HDSS website.

There are two main scenarios in which **additional** elective surgery activity will be undertaken:

* by a public hospital managing their own waiting list
* a contract arrangement with another hospital (public or private)

**Additional activity undertaken by a public hospital managing their own waiting list**

Additional elective surgery activity undertaken by a public health service that has received additional funding as part of the elective surgery initiative to address deferred elective surgery activity should be reported with a Funding Arrangement of B Elective Surgery Blitz (new code).

**Contract arrangement with another hospital**

The admitted episode is reported to the VAED by **both** the public hospital purchasing the service and the hospital (public or private) undertaking the elective surgery. In addition to the contract details, admitted episodes should be reported with a Program Identifier 13 Elective Surgery Blitz (new code).

Health Services Data are monitoring the Elective Surgery Blitz data reported by health services and following-up missing or inaccurate data.

For further information contact the HDSS helpdesk <hdss.helpdesk@health.vic.gov.au>.

# Victorian Emergency Minimum Dataset (VEMD)

## VEMD Library file and editing matrix 2021-2022

The 2021-2022 VEMD library file and editing matrix is now available for health services and their vendors. To obtain a copy please email the HDSS Helpdesk.

# Victorian Integrated Non-Admitted Health Minimum Dataset (VINAH)

## New VALP Program

A new VINAH program stream, 1700, will be introduced in 2021-22 allowing patient level activity reporting for the Victorian Artificial Limb Program (VALP). Specifications for reporting this program will be published as an addendum to VINAH 16 specifications and included in the 2021-22 VINAH manual.

Eleven health services are funded to provide VALP. It is optional for these 11 health services to report the VALP program stream in 2021-22 but will be mandatory in 2022-23. Health services in a position to implement the change in 2021-22 should commence reporting in VINAH from 1 July 2021.

Health services are still required to report VALP activity via the AIMS S11 form in 2021-22.

For further information or to discuss this change, contact the NADE project through the HDSS helpdesk <hdss.helpdesk@health.vic.gov.au>.

## New Episode Program Stream – Statewide Palliative Care Program

A new Episode Program Stream for the Statewide Palliative Care Program will be introduced into VINAH in 2021-22. An addendum to the VINAH 16 specifications to incorporate this change will published soon.

## Post Natal Domiciliary Care reporting

VINAH reporting is required for Post Natal Domiciliary Care (PNDC) activity. PNDC activity should be reported as part of the Specialist Clinic (Outpatient) program – Obstetric stream. Any health service that will not be able to submit PNDC data to VINAH by 1 July 2021 should contact the NADE Project through the HDSS helpdesk <hdss.helpdesk@health.vic.gov.au>.

Health services are reminded that to report PNDC activity in VINAH, you must report a Contact Clinic Identifier that matches a registered Tier 2 clinic (40.28 Midwifery and Maternity) on the Non-Admitted Clinic Management System.

## Victorian Specialist Immunisation Services (Vic-SIS)

Nine Victorian public health services will be providing specialist immunisation clinics for people who have experienced an adverse event following immunisation with a COVID-19 vaccine, or those who are identified as at risk of an adverse event following immunisation.

Health services should register Vic-SIS clinics on the Non-Admitted Clinic Management System, report aggregate data on the AIMS S10 form and submit patient level data to VINAH. Retrospective submission of AIMS and/or VINAH data is optional.

## VINAH 16 available in test environment

The 2021–22 annual changes have now been implemented into the **VINAH Test** context tab on the Live HealthCollect Portal [Healthcollect Portal](https://www.healthcollect.vic.gov.au/) <https://www.healthcollect.vic.gov.au>

VINAH 16 submissions will now be accepted in the test environment.

For testing purposes, the dates are as follows:

|  |  |
| --- | --- |
| Start date for VINAH version 16 | 1 January 2021 |
| Start date for new data elements and additions to codesets | 1 January 2021 |
| End date for ceased codes | 31 December 2020 |

## Correction to Specifications for revisions to VINAH 2021-22 Part A

Please note the following correction to the reporting guide for data element Episode Health Condition.

|  |  |
| --- | --- |
| **Reporting guide**  | At least one health condition must be reported in order for an episode to be ended ~~(note that this may be '9998-Diagnosis unclear').~~ |

The correction will be included in the next edition of the manual.

# National Funding Model implementation

## NWAU reports

To assist with the transition to the national funding model and NWAU reporting, Health Services Data will make the following NWAU reports and extracts available to Victorian public health services in 2021-22.

* Acute admitted NWAU report
* Acute admitted NWAU extract
* Subacute admitted NWAU report
* Subacute admitted NWAU extract
* Non-admitted NWAU report
* Non-admitted NWAU extract
* Emergency Department NWAU report
* Emergency Department NWAU extract
* UCC NWAU report

The acute admitted, subacute admitted, emergency department and UCC NWAU reports/extracts will be available to health services via MFT mid-month. The non-admitted NWAU reports will be available to health services via HealthCollect, on a self-serve basis.

The first NWAU activity reports for admitted acute and subacute, emergency, and non-admitted will be available in mid-August 2021. Further information will be provided soon.

# Contacts

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

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

The HDSS Bulletin is produced at intervals to provide:

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

**Website**

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

**HDSS help desk**

Enquiries regarding data collections and requests for standard reconciliation reports

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

**Other Victorian health data requests**

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

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

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