



Government of **Western Australia**
Department of **Health**

Data Quality Statement

Hospital Morbidity Data Collection

Document version control

| Version | Date | Purpose |
|---------|-------------|---|
| 0.6 | April 2020 | Metadata compilation for Data Management |
| 1.0 | August 2020 | This version. Format content into current document template for Department of Health |

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Summary details for Hospital Morbidity Data Collection

Background / history

The Hospital Morbidity Data Collection (HMDC) is a comprehensive data set containing records for all hospital separations of admitted patients from all public and private hospitals in Western Australia. The HMDC reflects what patients are hospitalised for, and the care they receive. HMDC data is available from January 1970.

Purpose

The HMDC provides the WA Health system with the necessary information for planning, allocating and evaluating health services within Western Australia. Other key purposes of the collection include:

- Mandatory reporting to the Commonwealth
- Monitoring and assessing state health service utilisation (public and private)
- Strategic planning, resource allocation and performance measurement of all levels of health care
- Safety and Quality
- Health service funding and resource allocation
- Epidemiological, medical and other research
- Data linkage

Governance

Mandates for this collection include the following two Acts:

For public hospital, and contracted health entities: *Part 17 of the Health Services Act 2016*

For private hospitals: Part 111c of the *Private Hospitals and Health Services Act 1927*

Data Steward: Assistant Director General, Purchasing and System Performance Division

Data Custodian: Principal Data Management Officer, Inpatient Data Collections team, Information & Performance Governance Unit

Data collection

Both demographic and clinical data elements are collected as part of capturing clinical activity. Clinical coding staff translate the patient's medical record for each separation into a series of diagnosis and procedure codes using ICD-10-AM/ACHI/ACS Eleventh Edition, as per the rules stipulated by the Australian Coding Standards and local WA coding policy.

The data are provided to the HMDC as electronic records via regular data extracts.

Type of data collected

HMDC collects information about each episode of care, to reflect the care provided to the patient at separation. Each episode of care is reflected via a single 'care type'. Data types include:

Patient demographic information: age, sex, country of birth and other identifying elements

Administrative information: admission date, separation date, funding source, source of referral, mode of separation etc.

Clinical information: principal diagnosis which indicates the principal reason for the patient's admission, additional diagnoses relevant to the episode of care and procedures performed during the episode of care.

Scope of data

HMDC Inclusions: all episodes of care that occur in the following Western Australian health services:

- Public acute hospitals
- Public psychiatric hospitals
- Private acute hospitals (licensed by the WA Health System)
- Private psychiatric hospitals (licensed by the WA Health System)
- Private day surgeries (licensed by the WA Health System)

HMDC Exclusions: does not include episodes of care (or equivalent unit of measurement) pertaining to:

- Patients attending emergency, outpatient or community health services
- Patients in residential aged care facilities
- Patients classified as flexible care or residential aged care residing in publicly funded hospitals
- Patients in community residential care facilities
- Patients treated in the Defence Force or other non-Western Australian health services
- Still births
- Mothers electing to deliver at home and newborns delivered at home (excluding those in an approved Homebirth program and newborns requiring formal admission to hospital post-delivery)
- Patients admitted for services that do not meet admission criteria as per the *Admission Policy MP 0058/17*

Frequency/timing

The collection contains data from 1 January 1970. Over the years, the data have been collected using different methods. Currently, coded records are received daily from public hospitals. Private hospitals provide files containing separations for a calendar month.

Quality

Data is available from January of 1970 onwards. Fundamentally, the collection scope or purpose has not changed. There have been several changes over the years in the number and type of collected data items, and data item values. Changes to clinical coding classification systems can affect interpretability of data over time.

Further information

Inpatient Data Collections team:

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