Hospital Morbidity Data Collection
Data Specifications

July 2023

Owner:	Department of Health, Western Australia
Contact:	Information and Performance Governance
Approved by:	Rob Anderson, Assistant Director General, Purchasing and System Performance
Links to:	Information Management Policy Framework https://ww2.health.wa.gov.au/About-us/Policy-frameworks/Information-Management

Contents

Abbreviations

DRG	Diagnosis Related Group
DVA	Department of Veterans Affairs
HMDC	Hospital Morbidity Data Collection
ICT	Information and Communications Technology
MDC	Major Diagnostic Category
PAS	Patient Administration System
webPAS	Web-based Patient Administration System

1. Purpose

The purpose of the *Hospital Morbidity Data Collection Data Specifications* is to outline the requirements for Health Service Providers and Contracted Health Entities to report admitted patient care activity to the Department of Health.

The *Hospital Morbidity Data Collection Data Specifications* is a related document mandated under MP 0164/21 *Patient Activity Data Policy.*

These data specifications are to be read in conjunction with this policy and other related documents and supporting information as follows:

- *Admitted Patient Activity Data Business Rules*
- *Hospital Morbidity Data Collection Data Dictionary*
- *Patient Activity Data Policy Information Compendium*

2. Background

Admitted patient activity must be recorded in approved Patient Administration Systems (PAS) in an accurate and timely manner so that the data is available and can be accessed for inclusion into the Hospital Morbidity Data Collection (HMDC).

3. Contact details requirements

Data providers must complete the contact details form (Appendix A) and provide contact details for two people who can be contacted in the event of data submission queries or issues:

- ICT technical contact – for data load/extract issues
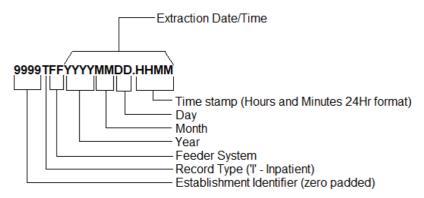- Information management contact – for data queries

4. Submission of data

Data must be submitted to the HMDC in accordance with the data submission schedule (Section 0) and data element listing (Section 0) outlined below, unless otherwise agreed to with the HMDC Custodian.

Admitted episodes of care are grouped according to the Australian Refined Diagnosis Related Groups (AR-DRG). For more information on the current version that is used, refer to the IHACPA website.

4.1   File naming standards

The file name must adhere to the following naming convention:

For example: file 0105IW420231112.0416 is from Sir Charles Gairdner Hospital (0105), containing inpatient records (I), to be loaded into the Hospital Morbidity Data System via feeder system (W4). The data was extracted on and the file created on 12 November 2023 at 04:16AM.

5. Data submission schedule

Data must be made available for the relevant reporting period as detailed in HMDC Data and Edit Submission schedule (Appendix B) and as per the schedule set below:

5.1   Daily extracts

PAS	Reporting Period	Provided to HMDC	Notes
WebPAS	Previous 24 hours' worth of activity	Midnight	Supplied by public hospitals only via Health Support Services E.g. Reporting period: activity from Monday 16 November from 00:00 to 23:59:59 Provided to HMDC: 00:01 Tuesday 17 November

5.2   Monthly extracts

PAS	Reporting Period	Provided to HMDC	Notes
Various	Previous month's worth of activity	End of month	Supplied by contracted entities, private hospitals and day facilities

6. Data element listing

Data providers must ensure that data is made available as per the specifications in the following appendices:

- Appendix C – Hospital Morbidity Data Collection Data Element Listing

7. Data quality and validation correction process

Data providers are responsible for the quality of data provided. Data quality validations are undertaken by the Quality and Assurance Team at the Department of Health to ensure that data is compliant with reporting specifications, and the five data quality principles:

- relevance

- accuracy

- timeliness

- coherence

- interpretability.

To ensure all admitted patient activity data is complete, accurate and timely the data undergoes a data quality validation process. A data quality validation (also known as 'edit') is an essential business requirement designed to validate the accuracy of a submitted episode.

Data validations are issued by the Quality and Assurance Team via email.

All data providers have a requirement under the *Health Services Act 2016* to address data quality validations within 10 working days of issue.

For the full list of current HMDC data quality validations, refer to the HMDC Data Validation Manual.

8. Glossary

The following definition(s) are relevant to this document.

Term	Definition
Contracted Health Entity	As per section 6 of the *Health Services Act 2016*, a non-government entity that provides health services under a contract or other agreement entered into with the Department Chief Executive Officer on behalf of the State, a Health Service Provider or the Minister
Custodian	A custodian manages the day-to-day operations of the information asset(s) and implements policy on behalf of the Steward and Sponsor.
Data Collection	Refer to Information Asset
Data Specifications	Data Specifications mandate the list of data elements, format and submission schedule for each information asset.
Health Service Provider	As per section 6 of the *Health Services Act 2016*, a Health Service Provider established by an order made under section 32(1)(b)
Information asset	A collection of information that is recognised as having value for the purpose of enabling the WA health system to perform its clinical and business functions, which include supporting processes, information flows, reporting and analytics.
Information Management Policy Framework	The Information Management Policy Framework specifies the information management requirements that all Health Service Providers must comply with in order to ensure effective and consistent management of health, personal and business information across the WA health system.
Patient Activity Data Business Rules	Patient Activity Data Business Rules mandate the rules, scope and criteria to be used when recording health service patient activity data and reporting to the Department of Health.
WA health system	Pursuant to section 19(1) of the *Health Services Act 2016*, means the Department of Health, Health Service Providers, and to the extent that Contracted Health Entities provide health services to the State, the Contracted Health Entities.

Appendix A – Contact details form

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

Hospital Morbidity Data Collection
Data Provider Contact Details Form

The purpose of this form is to collect contact information for persons providing data to the Hospital Morbidity Data Collection (HMDC).

Name of Data Provider or Feeder System   Click or tap here to enter text.
Date   Click or tap here to enter text.

ICT Technical Contact

Please provide details for the person to contact regarding technical queries (e.g. data loading, extract issues)

Name   Click or tap here to enter text.
Position   Click or tap here to enter text.
Organisation   Click or tap here to enter text.
Email   Click or tap here to enter text.
Phone   Click or tap here to enter text.

Information Management Contact

Please provide contact details for the person to contact regarding data queries (e.g. queries relating to data interpretation)

Name   Click or tap here to enter text.
Position   Click or tap here to enter text.
Organisation   Click or tap here to enter text.
Email   Click or tap here to enter text.
Phone   Click or tap here to enter text.

Please submit this form to the HMDC Custodian via
DoH.AdmittedDataCollection@health.wa.gov.au

Appendix B – Hospital Morbidity Data Collection Data and Edit Submission Schedule

Separations for the month of:	Submission to HMDC must include all separations between the following dates:	Due date for submission to HMDC:	Due date for return of edit validations:	Last date for finalising data for inclusion in national submissions
Notes *All separations must be clinically coded as per current edition of ICD-10-AM.*	*All separation data must be included in data submissions for the reporting period*	*Notes* *All separations must be clinically coded and ready for processing.*	*Notes* *All edit validations must be addressed and submitted within 10 working days of issue. # The due dates noted below for edit completion across the financial years take into consideration known public holidays to ensure 10 working days have been allowed.*	*Notes* *HMDC must fulfil quarterly reporting deadlines to the Commonwealth. The dates below reflect that last acceptable date that HMDC will accept data for the period due for submission.*
			2023-2024	
July	1st to 31st Jul inclusive	31-August	14-Sep-23	*September Submission: All seps 1 Jul – 30 Sep of current financial year* • *23 November*
August	1st to 31st Aug inclusive	30-September	16-Oct-23	
September	1st to 30th Sep inclusive	31-October	14-Nov-23	
October	1st to 31st Oct inclusive	30-November	14-Dec-23	*December Submission: All seps 1 Jul – 31 Dec of current financial year* • *28th February*
November	1st to 30th Nov inclusive	31-December	15-Jan-24	
December	1st to 31st Dec inclusive	31-January	14-Feb-24	
January	1st to 31st Jan inclusive	28/29 February	14-Mar-24	*March Submission: All seps 1 Jul – 31 Mar of current financial year* • *2nd June*
February	1st to 28th/29th Feb inclusive	31-March	15-Apr-24	
March	1st to 31st Mar inclusive	30-April	14-May-24	
April	1st to 30th Apr inclusive	31-May	14-Jun-24	*June Submission: All seps 1 Jul – 30 Jun of preceding financial year* • *31st August*
May	1st to 31st May inclusive	30-June	15-Jul-24	
June	1st to 30th Jun inclusive	31-July	14-Aug-24	

Note: Should a due date fall on a weekend or public holiday, the due date will be the **first working day that precedes it.**

Appendix C – Hospital Morbidity Data Collection Data Element Listing

Data Element	Data type	Size	Start Position	End Position	Requirement	Permitted Values/Comments
Line 1: Demographic Details						
Event Type	String	4	1	4	Mandatory	Hardcoded value of "SUM" Available options: DIS – if record is a discharge only event and not clinically coded SUM – if record is discharged and clinically coded
Morbidity Record Type	String	1	5	5	Mandatory	Hardcoded value of "I"
Episode of Care Link Field	String	12	6	17	Mandatory	N/A
Days of qualified newborn care	Number	3	18	20	Conditional	N/A
Number of leave periods	Number	2	21	22	Conditional	N/A
Accommodation occupied	Number	1	23	23	Mandatory	1 – Single room 2 – Shared room
Language of Interpreter	Number	4	24	27	Conditional	Refer to Language Code List
Update Flag	String	1	28	28	Conditional	Value of "U" if record is an update to previously reported record, otherwise blank
Source of Referral – Location	Number	2	29	30	Mandatory	1 – Home 2 – Residential Aged Care Service 3 – Other Health Care Accommodation 4 – Acute Hospital 5 – Psychiatric Hospital 6 – Prison 7 – Other
Source of Referral – Professional	Number	2	31	32	Mandatory	1 – General practitioner 2 – Specialist medical practitioner 3 – Outpatient department medical practitioner 4 – Emergency department medical practitioner 5 – Hospital medical practitioner (re-admission) 6 – Community health medical practitioner 7 – Statistical admission/type change 8 – Other
Source of Referral – Transport	Number	2	33	34	Mandatory	1 – Private/public transport 2 – Hospital transport 3 – Ambulance – emergency 4 – Royal Flying Doctor Service

Data Element	Data type	Size	Start Position	End Position	Requirement	Permitted Values/Comments
						5 – Helicopter (evacuation) 6 – Other
Days of Hospital in the home care	Number	3	35	37	Conditional	N/A
Filler	String	7	38	44	N/A	Blank value
Establishment Code	Number	4	45	48	Mandatory	Refer to Establishment Code List
Account Number	String	12	49	60	Mandatory	N/A
Client Identifier	String	10	61	70	Mandatory	N/A
Mother's Identifier	String	10	71	80	Conditional	N/A
Admission Date	Number	8	81	88	Mandatory	Must be in DDMMYYYY format.
Admission Time	Number	4	89	92	Mandatory	Must be in HHmm format.
Separation Date	Number	8	93	100	Mandatory	Must be in DDMMYYYY format
Separation Time	Number	4	101	104	Mandatory	Must be in HHmm format.
Surname	String	50	105	154	Mandatory	N/A
First Forename	String	30	155	184	Mandatory	N/A
Second Forename	String	30	185	214	Conditional	N/A
Residential Address	String	50	215	264	Mandatory	N/A
Suburb	String	30	265	294	Mandatory	N/A
Australian Postcode	Number	6	295	300	Mandatory	N/A
State or Territory	Number	1	301	301	Mandatory	0 – Not applicable (includes overseas resident and unknown) 1 – New South Wales 2 – Victoria 3 – Queensland 4 – South Australia 5 – Western Australia 6 – Tasmania 7 – Northern Territory 8 – Australian Capital Territory 9 – Other Territories
Filler	N/A	6	302	307	N/A	Blank Value
Date of Birth	Number	8	308	315	Mandatory	Must be in DDMMYYYY format
Sex Recorded at Birth	Number	1	316	316	Mandatory	1 – Male 2 – Female 3 – Another Term
Aboriginal Status	Number	1	317	317	Mandatory	1 – Aboriginal but not Torres Strait Islander 2 – Torres Strait Islander but not Aboriginal

Data Element	Data type	Size	Start Position	End Position	Requirement	Permitted Values/Comments
						3 – Both Aboriginal and Torres Strait Islander 4 – Neither Aboriginal nor Torres Strait Islander
Australian State or Country of Birth	Number	4	318	321	Mandatory	Refer to Country or State of Birth Code List
Marital Status	Number	1	322	322	Mandatory	1 – Never married 2 – Widow/Widower 3 – Divorced 4 – Separated 5 – Married (Registered or De-Facto) 6 – Not Stated/Unknown/Inadequately Described
Employment Status	Number	2	323	324	Mandatory	1 – Child not at School 2 – Student 3 – Employed 4 – Unemployed 5 – Home Duties 6 – Retired 7 – Pensioner 8 – Other
Interpreter Required	Number	1	325	325	Mandatory	1 – Yes 2 – No
Filler	N/A	4	326	329	N/A	Blank Value
Filler	N/A	2	330	331	N/A	Blank Value
Intended Length of Stay	Number	1	332	332	Mandatory	1 - Intended same-day stay 2 - Intended overnight stay
Admitted From	Number	4	333	336	Mandatory	Refer to Establishment Code List
Ward/Location	String	20	337	356	Mandatory	N/A
Clinician on Admission	String	13	357	369	Mandatory	APHRA Register of Practitioners
Specialty of Clinician on Admission	Number	3	370	372	Mandatory	Refer to Clinician Specialty Code List
Specialty of Clinician on Separation	Number	3	373	375	Mandatory	Refer to Clinician Specialty Code List
Admission Status	Number	1	376	376	Mandatory	3 – Elective - waitlist 4 – Elective - not waitlist 6 – Emergency - Emergency Department admission 7 – Emergency - Direct admission
Infant Weight	Number	4	377	380	Conditional	N/A
Leave Days Total	Number	4	381	384	Conditional	N/A
Days of Psychiatric Care	Number	4	385	388	Conditional	N/A
Mental Health Legal Status	Number	1	389	389	Conditional	1 – Involuntary 2 – Voluntary

Data Element	Data type	Size	Start Position	End Position	Requirement	Permitted Values/Comments
Funding Source	Number	2	390	391	Mandatory	21 – Australian Health Care Agreement 22 – Private Health Insurance 23 – Self-Funded 24 – Worker's Compensation 25 – Motor Vehicle Third Party Personal Claim 26 – Other Compensation 27 – Department of Veterans' Affairs 28 – Department of Defence 29 – Correctional Facility 30 – Reciprocal Health Care Agreement 31 – Ineligible (inc. Detainee) 32 – Other 33 – Ambulatory Surgery Initiative 34 – Detainee (no longer used)
DVA Card Colour	Number	1	392	392	Conditional	1 – Gold 2 – White
Insurance Status	Number	1	393	393	Mandatory	1 – Yes 2 – No
Filler	Number	4	394	397	N/A	N/A
Hours of Continuous Ventilatory Support	Number	5	398	402	Conditional	N/A
Readmission Status	Number	1	403	403	Conditional	1 – Planned Readmission 2 – Unplanned Readmission
Unplanned Return to Theatre	Number	1	404	404	Conditional	1 – Yes 2 – No
Care Type	Number	2	405	406	Mandatory	21 – Acute Care 22 – Rehabilitation Care 23 – Palliative Care 24 – Psychogeriatric Care 25 – Maintenance Care 26 – Newborn 27 – Organ Procurement 28 – Boarder 29 – Geriatric Evaluation and Management 32 – Mental Health Care
Client Status	Number	2	407	408	Mandatory	0 – Funding Hospital 1 – Qualified Newborn 2 – Unqualified Newborn 3 – Boarder 4 – Nursing Home Type 5 – Contracted Service 6 – Admitted Client

Data Element	Data type	Size	Start Position	End Position	Requirement	Permitted Values/Comments
						7 – Organ Procurement 9 – Contracted Care Qualified Newborn 10 – Contracted Care Unqualified Newborn
Contracted Funding Establishment	Number	4	409	412	Conditional	Refer to Establishment Code List
Mode of Separation	Number	2	413	414	Mandatory	1 – Discharge/transfer to an acute hospital 2 – Discharge/transfer to a residential aged care service 3 – Discharge/transfer to a psychiatric hospital 4 – Discharge/transfer to other health care accommodation 5 – Statistical discharge Type Change 6 – Left against medical advice/discharge at own risk 7 – Discharge from Leave 8 – Deceased 9 – Other/Home
Discharged to	Number	4	415	418	Mandatory	Refer to Establishment Code List
Clinician on Separation	String	13	419	431	Mandatory	APHRA Register of Practitioners
DRG Version	String	10	432	441	Mandatory	N/A
MDC	String	3	442	444	Mandatory	N/A
DRG	Number	4	445	448	Mandatory	N/A
Coder ID	String	20	449	468	Mandatory	N/A
DVA File Number	String	12	469	480	Conditional	N/A
Filler	N/A	12	481	492	N/A	Blank Value
Filler	N/A	8	493	500	N/A	Blank Value
Home phone number	String	18	501	518	Mandatory	Private hospitals not required to submit
Contact phone number	String	18	519	536	Mandatory	Private hospitals not required to submit
Resident status	String	3	537	539	Conditional	DET – Detainee NST – Not stated OVE – Overseas visitor REC – Reciprocal overseas RES – Resident RET – Retiree visa STU – Student visa WOR – Working visa Private hospitals not required to submit (blank value)
Hours in Intensive Care Unit	Number	5	540	544	Conditional	Private hospitals can report this element in position 501 to 505 due to fields above not being required

Data Element	Data type	Size	Start Position	End Position	Requirement	Permitted Values/Comments
Medicare Card Number	Number	10	545	554	Conditional	Private hospitals can report this element in positions 506 to 515 due to fields above not being required
Medicare Person Number	Number	1	555	555	Conditional	Private hospitals can report this element in position 516 due to fields above not being required
Contract Leave Days	Number	3	556	558	Conditional	Private hospitals not required to submit
NDIS Flag	Number	2	559	560	Conditional	Private hospitals not required to submit Value of 1 reported if an NDIS concession card is added, otherwise blank
NDIS Card Number	Number	20	561	580	Conditional	Private hospitals not required to submit If an NDIS concession card is added, report the NDIS card number that is recorded, otherwise blank
Gender code	Number	1	581	581	Mandatory	1 – Man or male 2 – Woman or female 3 – Non-binary 4 – Different term 5 – Prefer not to answer 9 – Not stated or inadequately described
Subsequent diagnosis related records						
Event Type	String	4	1	4	Mandatory	Must contain one of following values: PD – Principal Diagnosis CA – Co-Diagnosis (Can only be reported by private establishments. Public establishments must use OC) CM – Complications MO – Morphology OC – Additional Diagnosis EC – External Cause PL – Place of Occurrence AC – Activity (follows EC)
Account Number	String	12	5	16	Mandatory	N/A
Client Identifier	String	10	17	26	Mandatory	N/A
Filler	N/A	18	27	44	N/A	Blank Value
Establishment Code	Number	4	45	48	Mandatory	Refer to Establishment Code List
Priority	Number	3	49	51	Mandatory	N/A
Diagnosis Code	String	10	52	61	Mandatory	Refer to ICD – 10-AM 11th Edition
Filler	String	10	62	71	N/A	Blank Value
Filler	String	10	72	81	N/A	Blank Value

Data Element	Data type	Size	Start Position	End Position	Requirement	Permitted Values/Comments
Condition Onset Flag for Diagnosis	String	1	82	82	Conditional	1 - Condition with onset during the episode of admitted patient care 2 - Condition not noted as arising during the episode of admitted patient care
Filler	N/A	1	83	83	N/A	Blank Value
Filler	N/A	1	84	84	N/A	Blank Value
Contracted Care Flag	Number	2	85	86	Conditional	01 - B – Care provided by hospital B 02 - AB – Care provided by both hospital A and hospital B Private hospitals not required to submit
Subsequent procedure related records						
Event Type	String	4	1	4	Mandatory (where applicable)	Valid values: PP - Principal Procedure OP - Additional Procedure
Account Number	String	12	5	16	Mandatory (where applicable)	N/A
Client Identifier	String	10	17	26	Mandatory (where applicable)	N/A
Filler	N/A	18	27	44	N/A	Blank Value
Establishment Code	Number	4	45	48	Mandatory (where applicable)	Refer to Establishment Code List
Priority	Number	3	49	51	Mandatory (where applicable)	N/A
Procedure Code	String	10	52	61	Mandatory (where applicable)	Refer to ACHI 12th Edition (effective from 1 July 2022)
Clinician Performing Procedure	String	13	62	74	Mandatory (where applicable)	APHRA Register of Practitioners
Date of Procedure	Number	8	75	82	Mandatory (where applicable)	Must be in DDMMYYYY format
Filler	N/A	10	83	92	N/A	Blank Value
Contracted Care Flag	Number	2	93	94	Mandatory (where applicable)	01 - B – Care provided by hospital B 02 - AB – Care provided by both hospital A and hospital B

Data Element	Data type	Size	Start Position	End Position	Requirement	Permitted Values/Comments
						Private hospitals not required to submit (blank value)
Check line (present as last line for each case)						
Event Type	String	4	1	4	Mandatory	Hardcoded value of "CHK"
Account Number	String	12	5	16	Mandatory	N/A
Client Identifier	String	10	17	26	Mandatory	N/A
Filler	N/A	18	27	44	N/A	Blank Value
Establishment Code	Number	4	45	48	Mandatory	Refer to Establishment Code List
Diagnosis Code Count	Number	4	49	52	Mandatory (where applicable)	N/A
External Cause Code Count	Number	4	53	56	Mandatory (where applicable)	N/A
Morphology Code Count	Number	4	57	60	Mandatory (where applicable)	N/A
Procedure Code Count	Number	4	61	64	Mandatory (where applicable)	N/A

Appendix D – Summary of revisions

Date Released	Author	Approval	Amendment
1 July 2021	Arek Szejna & Catherine Ayling	Rob Anderson, Assistant Director General, Purchasing and System Performance	Document created.
1 July 2022	Catherine Ayling & Bernard Sharpe	Rob Anderson, Assistant Director General, Purchasing and System Performance	**Hospital Morbidity Data Collection Data and Edit Submission Schedule** updated to reflect 2022/2023 dates. Alphanumeric data types changed to String. **Data Element Names updated** to match HMDC Data Dictionary: -Account Number -Australian State or Country of Birth -Client Identifier -First Forename -Interpreter Service Required -Language of Interpreter -Mother's Identifier -Second Forename -Surname **Permitted Values** updated to match HMDC Data Dictionary -Australian State or Country of Birth -DVA Card Colour -Insurance Status -Intended Length of Stay -Marital Status -Sex -Unplanned Return to Theatre **Requirement Status** updated for Medicare Card Number field
1 July 2023	Selina Li & Bernard Sharpe	Rob Anderson, Assistant Director General, Purchasing and System Performance	**Hospital Morbidity Data Collection Data and Edit Submission Schedule** updated to reflect 2023/2024 dates. Added link to IHACPA website for more information on DRG versions Remove century reference from file naming diagram

			Additional comments added to the following fields in Appendix C:
			-Hours in ICU
			-Medicare Card Number
			-Medicare Person Number
			-Event Type
			New fields added:
			-NDIS Flag
			-NDIS Card Number
			-Gender, Code
			Sex field changed to Sex recorded at Birth

Produced by:
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Information and System Performance Directorate
Purchasing and System Performance Division
The Department of Health Western Australia

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This document can be made available in alternative formats on request for a person with disability