



# Process for inpatient data provision – hospital morbidity data collection

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## 1. Background

The Hospital Morbidity Data Collection (HMDC) is managed by the Principal Data Management Officer (PDMO) within Information and Performance Governance Unit (IPG), Information and System Performance Directorate (ISPD), Purchasing and System Performance Division of the Department of Health, Western Australia.

The HMDC is the central source of truth for admitted hospital activity data across Western Australia, that are used for performance reporting, planning, monitoring, funding, and research. The HMDC is also the source for provision of the data to the Commonwealth as mandated under the National Healthcare Agreement and the Patient Activity Data Policy.

To ensure availability of accurate and timely admitted data for local and Commonwealth mandatory reporting requirements, and for the planning and evaluation of hospital and health services, hospitals must be aware of and meet the following data reporting standards<sup>1</sup>.

## 2. Data reporting deadlines

- A. The licensee shall provide IPG with complete calendar months of clinically coded inpatient data and complete all data quality validations as specified in Appendix B – Hospital Morbidity Data Collection Data and Edit Schedule within the HMDC data specifications.

Data for a complete month is due by the end of the following month. For example, July 2023 data is due for submission on 31 August 2023. All edit validations must be addressed and submitted by 14 September 2023.

- B. Hospital staff must liaise with the Principal Data Management Officer (PDMO) responsible for the HMDC if hospitals are unable to meet the above requirements.

The PDMO can be contacted via the following email:

[DoH.AdmittedDataCollection@health.wa.gov.au](mailto:DoH.AdmittedDataCollection@health.wa.gov.au).

- Hospital staff can also liaise with Data Quality for assistance and guidance with validation process via the following e-mail:

[Royalst.DataQuality@health.wa.gov.au](mailto:Royalst.DataQuality@health.wa.gov.au)

## 3. Data reporting protocol and standards

The licensee must ensure that the following data reporting protocols are adhered to when submitting data to IPG:

- A. Admitted episodes of care are classified in accordance with:
- a. The current edition of ICD-10-AM/ACHI/ACS and;
  - b. Independent Hospital and Aged Care Pricing Authority (IHACPA) Coding Rules located on the Australian Classification Exchange and;
  - c. Western Australia Coding Rules and Clinical Coding Guidelines located on the

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<sup>1</sup> Authorised purposes are outlined in section 26R of the *Private Hospitals and Health Services Act 1927*

Western Australia Clinical Coding Authority website.

- B. Data complies with the business rules outlined within the [Admitted Patient Activity Data Business Rules](#) pertaining to the time period being reported and relevant policies referred to within it.
- C. Data provided are complete and representative of all relevant admitted activity that has taken place during the reporting period.
- D. Data must be submitted to HMDC electronically in accordance with the [HMDC Data Collection Data Specifications](#).
- E. To ensure data quality, hospitals must pre-validate their intended data submissions, by processing data extracts through the most current version of supplied validation software (T-Check). This application flags any records which may not meet rudimentary data quality rules, including matching of separation count to actual inpatient separation counts from each sites' Patient Administration System (PAS).
- F. Extracts with fatal errors detected by the validation software must not be submitted to the HMDC. Files containing fatal errors will be rejected and data must be corrected, re-extracted and re-submitted. All data files submitted to the HMDC must contain the most recent T-Check log demonstrating that validation of the file has taken place and all correctable errors have been corrected.
- G. As at 1 July 2017, HA22 Forms Data software is no longer supplied nor supported. Sites must procure their own data entry systems from patient administration system vendors and ensure that electronic data extracts conform to the HMDC Data Specifications for all separations and data submissions from this date.
- H. Hospitals must submit HMDC data electronically using the MyFT secure data transfer application or other secure data drop mechanisms as advised by the PDMO.

#### 4. Data quality validation

The HMDC data quality assurance process is a practice used to validate data against set references, expected values and condition checks. Hospitals are responsible for reviewing all cases failing this process and correcting any errors and/or confirming the validity of the data via the resolution process outlined below. Details of individual data quality validations, their level of severity and steps required to resolve are listed in the most current version of the [Hospital Morbidity Data Collection Data Validation Manual](#). This manual is an important reference document for hospital staff and is updated as validations and/or reporting needs change.

Incomplete and/or untimely data impacts significantly on reporting requirements. Therefore, hospitals must be aware of and meet the relevant hospital morbidity data deadlines and standards:

- A. Cases with identified errors to be corrected and re-submitted within 10 working days of a hospital having been notified.
- B. All data validations queries will be sent via email and corrections and queries are to be returned via the following email [HMDS.Edits@health.wa.gov.au](mailto:HMDS.Edits@health.wa.gov.au)
- C. Hospitals are to supply valid responses to data validations queries in the format provided (Excel csv).<sup>2</sup>

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<sup>2</sup> The Excel (.xls) or Comma-Separated Value (.csv) format file must contain the following fields: *Estab, Batch Id, Case Id, Error Message, Error, Severity, Extract date, Unique Medical Record Number (UMRN), Account Number, Update, Admission Date, Discharge Date* and *HDWA Comments*. An additional column is to be included at the end of this variable list, which must be filled in by the hospital with the hospital's response to each case in error.

## 5. Related documents

- [Patient Activity Data Collection Policy](#)
  - [Admitted Patient Activity Data Business Rules](#)
  - [HMDC Data Specifications](#)
  - [HMDC Data Validation Manual](#)

## 6. Review

This mandatory procedure will be reviewed as required to determine effectiveness, relevance and currency. At a minimum it will be reviewed within 1 year after first issue and at least every three years thereafter.

Version	Effective from	Effective to	Amendment(s)
1.0	November 2009	18 November 2009	Original version
2.0 - 6.0	18 November 2009	September 2019	Multiple revisions
7.0	1 July 2020	30 June 2021	Multiple revisions
7.1	1 July 2021	30 June 2022	Multiple revisions
7.1	1 July 2022	30 June 2023	Multiple revisions
7.1	1 Sept 2023	27 Sept 2023	Multiple revisions

The review table indicates previous versions of the mandatory document and any significant changes.

## 7. Approval

<b>Approval by</b>	\ (refer to section 3.3.4 of the <i>DoH Policy governance procedure</i> for relevant officer)
<b>Approval date</b>	Day, Month, Year (to be entered by BSP)
<b>Published date</b>	Day, Month, Year (to be entered by BSP unless there is a requirement to publish on a specific date)
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