Australian Government

Department of Health

PMHC-MDS Data Specification

Version 2.0.0

As at 17 May, 2019

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1. Reporting arrangements

1.1. Uploading data

During the initial stage of implementing the PMHC MDS, PHNs and their service providers will be able to either export data from their client systems and upload to the PMHC MDS or manually create spreadsheets that can then be uploaded.

The system is able to accept data for any period, either in its entirety or partially. Please note the section below regarding timeliness.

Accepting data for any period allows organisations to upload corrections when erroneous data has been identified. Allowing partial uploads allows for submission of data by separate providers without the need for the PHN to aggregate all data prior to upload.

Where associated unique keys match (e.g. Patient Key or Episode Key) these records will be replaced, if the key is new, a new record will be created.

Data may be uploaded in either Excel or CSV format.

1.2. Reporting timeliness

Records must be reported to the MDS within 31 days of the activity which generated them. For example if a client was added to the system on the 12th of November 2016 their client record must be added to the MDS on or before the 13th of December 2016. Similarly, if a service contact occurred on that date, the data associated with that contact must be submitted to the MDS by 13th of December 2016 also.

The Department accesses information within the MDS for internal planning and governance purposes therefore data in the MDS needs to be current to ensure the accuracy of the data produced for the Department.

1.3. Transition arrangements

PMHC MDS upload functionality will be separate from the existing ATAPS/MHSRRA MDS. During this initial stage the existing ATAPS/MHSRRA MDS will be kept operational so that ATAPS/MHSRRA organisations can continue to provide data through that system until they are either ready to export data to the new upload interface or until the new data entry interface is available after a later stage of development. Once all ATAPS/MHSRRA organisations are submitting data to the PMHC MDS the ATAPS/MHSRRA MDS will be shut down.

Data for programmes other than ATAPS/MHSRRA will have to be submitted via the PMHC MDS interface.

Organisations should only submit data via one interface, not both.

Data submitted via the existing ATAPS/MHSRRA MDS will be converted and merged with data submitted via the PMHC MDS in order to produce departmental reports.
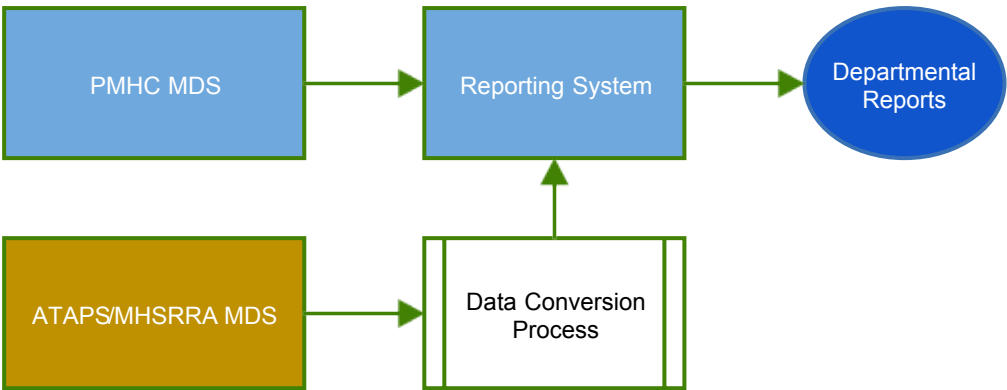
Fig. 1.1 Transitional reporting process

1.3.1. Transition to full compliance

Refer to the recent Department announcement on the INFORMATION and ACTION: PHN CEO - Primary Mental Health Care Minimum Data Set Update | June 21, 2017.

1.4. Support arrangements

Once the upload specification has been released, support will be available to PHNs and their third party developers to assist with implementing upload facilities in existing client management systems. For those PHNs who do not upload via a client management system, documentation and support will be available to manually create spreadsheets. Once the upload system goes live in October support will be available to assist with uploading data.

2. Identifier management

PMHC MDS keys are case sensitive and must have between 2- 50 valid unicode characters. Where data is being exported from client systems, these keys can be auto generated, providing that a key does not change once it is assigned.

2.1. Managing Provider Organisation Keys

Provider Organisations will be created and managed by Primary Health Networks (PHNs) through a user interface. Each PHN must create their own Provider Organisations before any data can be uploaded. Each Provider Organisation will need to be assigned a unique key. It is the responsibility of the PHN to assign and manage these keys.

2.2. Managing Client Keys

Client records will be created and managed by Provider Organisations via the upload and data entry interface. Each Client record needs to be assigned a unique key in order to facilitate adding/updating/deleting each item when uploading data. Once assigned, this key cannot change.

The Client Key will be managed by the Provider Organisation, however, the PHN may decide to play a role in coordinating assignment and management of these client keys.

Initially the Department wanted these keys to be unique across the PHN in order to ensure that there is a single key for a client within the PHN, and will continue to be investigate options for the PMHC MDS implementation of a Master Client Index during Stage Two of development.

2.3. Managing Practitioner, Episode, Service Contact and Outcome Collection Occasion Keys

The Practitioner Key, Episode Key, Service Contact Key and Outcome Collection Occasion Key will be created and managed by Provider Organisations.

The PMHC MDS specification requires each of these keys to be unique and stable at the Provider Organisation level.

Each record needs to be assigned a unique key in order to facilitate adding/updating/deleting each item when uploading/entering data. These keys will be created and managed by the Provider Organisation.

If you still have questions after reading this information, please visit the Department's responses to Questions about Unique Identifiers and 'Keys'
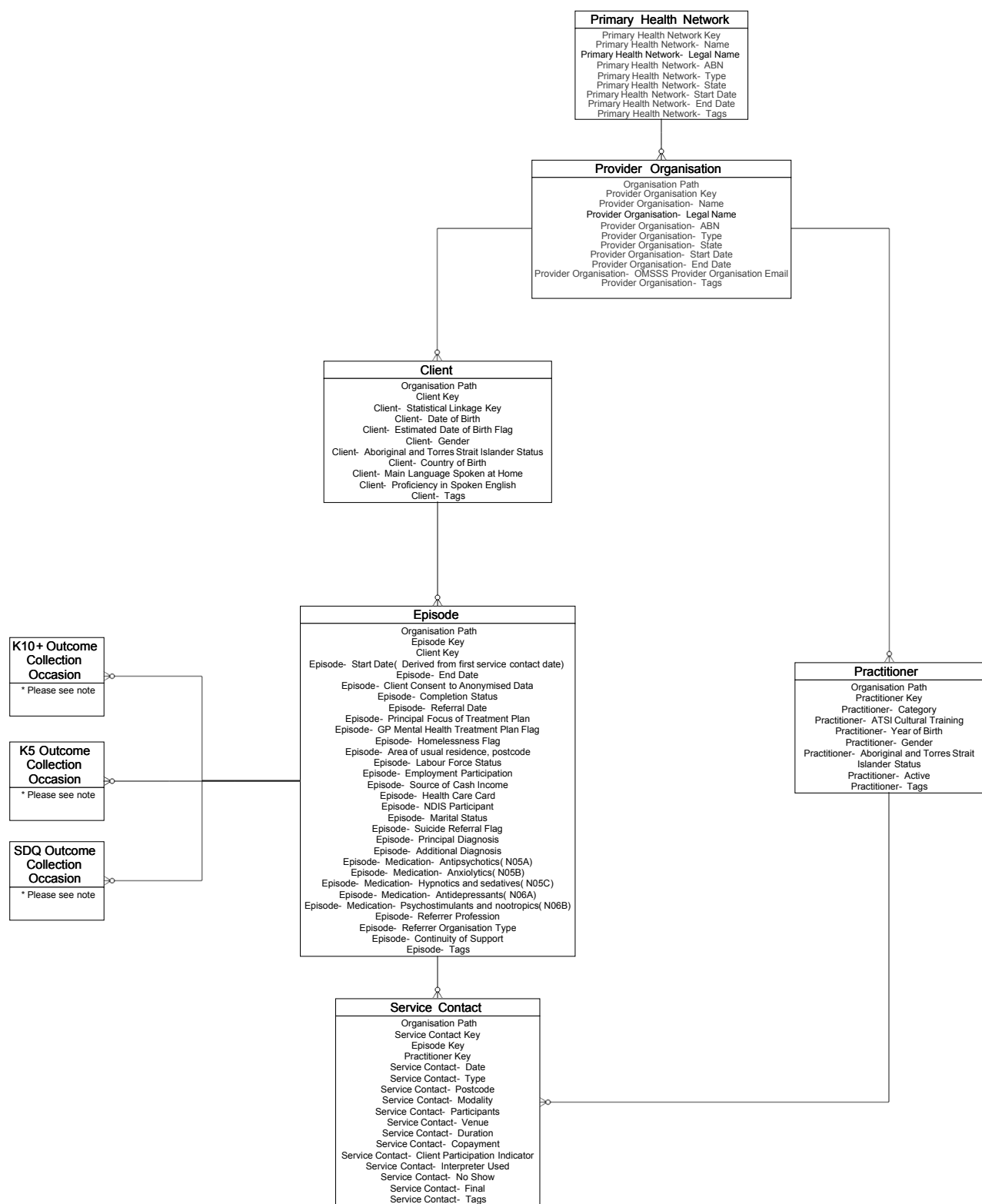
3. Data model and specifications

3.1. Data model

Fig. 3.1 PMHC data model

Note: PMHC Collection Occasion data model for more details about Collection Occasion records.

Episode
Organisation Path
Episode Key
Client Key
Other Episode Items. *See note.
...

K10+ Outcome Collection Occasion
Organisation Path
Collection Occasion Key
Episode Key
Collection Occasion- Date
Collection Occasion- Reason
K10+ Collection Occasion- Question 1 Score
K10+ Collection Occasion- Question 2 Score
K10+ Collection Occasion- Question 3 Score
K10+ Collection Occasion- Question 4 Score
K10+ Collection Occasion- Question 5 Score
K10+ Collection Occasion- Question 6 Score
K10+ Collection Occasion- Question 7 Score
K10+ Collection Occasion- Question 8 Score
K10+ Collection Occasion- Question 9 Score
K10+ Collection Occasion- Question 10 Score
K10+ Collection Occasion- Question 11 Score
K10+ Collection Occasion- Question 12 Score
K10+ Collection Occasion- Question 13 Score
K10+ Collection Occasion- Question 14 Score
K10+ Collection Occasion- Total Score
K10+ Collection Occasion- Tags

K5 Outcome Collection Occasion
Organisation Path
Collection Occasion Key
Episode Key
Collection Occasion- Date
Collection Occasion- Reason
K5 Collection Occasion- Question 1 Score
K5 Collection Occasion- Question 2 Score
K5 Collection Occasion- Question 3 Score
K5 Collection Occasion- Question 4 Score
K5 Collection Occasion- Question 5 Score
K5 Collection Occasion- Total Score
K5 Collection Occasion- Tags

SDQ Outcome Collection Occasion
Organisation Path
Collection Occasion Key
Episode Key
Collection Occasion- Date
Collection Occasion- Reason
SDQ Collection Occasion- SDQ Version
SDQ Collection Occasion- Question 1 Score
SDQ Collection Occasion- Question 2 Score
SDQ Collection Occasion- Question 3 Score
SDQ Collection Occasion- Question 4 Score
SDQ Collection Occasion- Question 5 Score
SDQ Collection Occasion- Question 6 Score
SDQ Collection Occasion- Question 7 Score
SDQ Collection Occasion- Question 8 Score
SDQ Collection Occasion- Question 9 Score
SDQ Collection Occasion- Question 10 Score
SDQ Collection Occasion- Question 11 Score
SDQ Collection Occasion- Question 12 Score
SDQ Collection Occasion- Question 13 Score
SDQ Collection Occasion- Question 14 Score
SDQ Collection Occasion- Question 15 Score
SDQ Collection Occasion- Question 16 Score
SDQ Collection Occasion- Question 17 Score
SDQ Collection Occasion- Question 18 Score
SDQ Collection Occasion- Question 19 Score
SDQ Collection Occasion- Question 20 Score
SDQ Collection Occasion- Question 21 Score
SDQ Collection Occasion- Question 22 Score
SDQ Collection Occasion- Question 23 Score
SDQ Collection Occasion- Question 24 Score
SDQ Collection Occasion- Question 25 Score
SDQ Collection Occasion- Question 26 Score
SDQ Collection Occasion- Question 27 Score
SDQ Collection Occasion- Question 28 Score
SDQ Collection Occasion- Question 29 Score
SDQ Collection Occasion- Question 30 Score
SDQ Collection Occasion- Question 31 Score
SDQ Collection Occasion- Question 32 Score
SDQ Collection Occasion- Question 33 Score
SDQ Collection Occasion- Question 34 Score
SDQ Collection Occasion- Question 35 Score
SDQ Collection Occasion- Question 36 Score
SDQ Collection Occasion- Question 37 Score
SDQ Collection Occasion- Question 38 Score
SDQ Collection Occasion- Question 39 Score
SDQ Collection Occasion- Question 40 Score
SDQ Collection Occasion- Question 41 Score
SDQ Collection Occasion- Question 42 Score
SDQ Collection Occasion- Emotional Symptoms Scale
SDQ Collection Occasion- Conduct Problem Scale
SDQ Collection Occasion- Hyperactivity Scale
SDQ Collection Occasion- Peer Problem Scale
SDQ Collection Occasion- Prosocial Scale
SDQ Collection Occasion- Total Difficulties Score
SDQ Collection Occasion- Impact Score
SDQ Collection Occasion- Tags

Fig. 3.2 PMHC Collection Occasion data model

Note: See PMHC data model for more details about how Collection Occasion records fit into the overall structure.

3.2. Key concepts

3.2.1. Primary Health Network

Primary Health Networks (PHNs) have been established by the Australian Government with the key objectives of increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes, and improving coordination of care to ensure patients receive the right care in the right place at the right time.

3.2.2. Provider Organisation

The Provider Organisation is the business entity that the PHN has commissioned to provide the service.

See Provider Organisation for the data elements for a provider organisation.

3.2.3. Practitioner

The Practitioner is the person who is delivering the service.

See Practitioner for the data elements for a practitioner.

3.2.4. Client

The Client is the person who is receiving the service.

See Client for the data elements for a client.

3.2.5. Episode

For the purposes of the PMHC MDS, an *Episode of Care* is defined as a more or less continuous period of contact between a client and a PHN-commissioned provider organisation/clinician that starts at the point of first contact, and concludes at discharge. Episodes comprise a series of one or more Service Contacts. This structure allows for a logical data collection protocol that specifies what data are collected when, and by whom. Different sets of PMHC MDS items are collected at various points in the client's engagement with the provider organisation. Some items are only collected once at the episode level, while others are collected at each *Service Contact*.

Three business rules apply to how the *Episode of Care* concept is implemented across PHN-commissioned services:

- **One episode at a time for each client, defined at the level of the provider organisation**

  While an individual may have multiple *Episodes of Care* over the course of their illness, they may be considered as being in only one episode at any given point of time for **any particular PHN-commissioned provider organisation**. The implication is that the care provided by the organisation to an individual client at any point in time is subject to only one set of reporting requirements.

- **Episodes commence at the point of first contact.** The episode start date will be derived from the first service contact irregardless of no show state as long as there is a service contact that isn't a no show. Therefore, if there is no attended service contact the episode is uncommenced.

  Some examples:

  - If a service contact occurs on the 1/1/2018 that is recorded as a no show then the episode is uncommenced.
  - If a service contact occurs on the 1/1/2018 that is recorded as a no show and another service contact occurs on the 2/1/2018 that is attended then the episode start date is derived as 1/1/2018.
- **Discharge from care concludes the episode**

  Discharge may occur clinically or administratively in instances where contact has been lost with the client. A new episode is deemed to commence if the person re-presents to the organisation.

See Episode for the data elements for a episode.

3.2.6. Service Contact

- Service contacts are defined as the provision of a service by a PHN commissioned mental health service provider for a client where the nature of the service would normally warrant a dated entry in the clinical record of the client.
- A service contact must involve at least two persons, one of whom must be a mental health service provider.
- Service contacts can be either with the client or with a third party, such as a carer or family member, and/or other professional or mental health worker, or other service provider.
- Service contacts are not restricted to face-to-face communication but can include telephone, internet, video link or other forms of direct communication.
- Service provision is only regarded as a service contact if it is relevant to the clinical condition of the client. This means that it does not include services of an administrative nature (e.g. telephone contact to schedule an appointment).

  Definition based on METeOR: 493304 with modification.

See Service Contact for the data elements for a service contact.

3.2.7. Outcome Collection Occasion

A Collection Occasion is defined as an occasion during an Episode of Care when the required outcome measure is to be collected. At a minimum, collection of outcome data is required at both Episode Start and Episode End, but may be more frequent if clinically indicated and agreed by the client.

Measures will be the Kessler Psychological Distress Scale K10+ (in the case of Aboriginal and Torres Strait Islander clients, the K5) as well as the Strengths & Difficulties Questionnaires.

See Outcome Collection Occasion for the data elements for an outcome collection occasion.

3.3. Record formats

3.3.1. Metadata

The Metadata table must be included in file uploads in order to identify the type and version of the uploaded data.

Table 3.1 Metadata record layout

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Key (key)	string	yes	A metadata key name.
Value (value)	string	yes	The metadata value.

For this version of the specification the required content is shown in the following table:

key	value
type	PMHC
version	2

3.3.2. Provider Organisation

See Provider Organisation for the definition of a provider organisation.

Provider Organisation data is for administrative use within the PMHC MDS system. It is managed by the PHN's via the PMHC MDS administrative interface, it cannot be uploaded.

Table 3.2 Provider Organisation record layout

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Organisation Path (organisation_path)	string	yes	A sequence of colon separated Organisation Keys that fully specifies the Provider Organisation providing a service to the client.
Organisation Key (organisation_key)	string (2,50)	yes	A sequence of characters which uniquely identifies the provider organisation to the Primary Health Network. Assigned by the Primary Health Network.
Provider Organisation - Name (organisation_name)	string (2,100)	yes	The name of the provider organisation.

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Provider Organisation - Legal Name (organisation_legal_name)	string	—	The legal name of the provider organisation.
Provider Organisation - ABN (organisation_abn)	string (11)	yes	The Australian Business Number of the provider organisation.
Provider Organisation - Type (organisation_type)	string	yes	1: Private Allied Health Professional Practice 2: Private Psychiatry Practice 3: General Medical Practice 4: Private Hospital 5: Headspace Centre 6: Early Youth Psychosis Centre 7: Community-managed Community Support Organisation 8: Aboriginal Health/Medical Service 9: State/Territory Health Service Organisation 10: Drug and/or Alcohol Service 11: Primary Health Network 12: Medicare Local 13: Division of General Practice 98: Other 99: Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Provider Organisation - State (organisation_state) METeOR: 613718	string	yes	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
Provider Organisation - Start Date (organisation_start_date)	date	yes	The date on which a provider organisation started delivering services.
Provider Organisation - End Date (organisation_end_date)	date	—	The date on which a provider organisation stopped delivering services.
Provider Organisation - Tags (organisation_tags)	string	—	List of tags for the provider organisation.

3.3.3. Practitioner

See Practitioner for the definition of a practitioner.

Practitioner data is intended to provide workforce planning data for use regionally by the PHN and nationally by the Department. It is managed by the provider organisations via either the PMHC MDS administrative interface or upload.

Table 3.3 Practitioner record layout

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Organisation Path (organisation_path)	string	yes	A sequence of colon separated Organisation Keys that fully specifies the Provider Organisation providing a service to the client.

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Practitioner Key (practitioner_key)	string (2,50)	yes	A unique identifier for a practitioner within the responsible provider organisation. Assigned by either the PHN or provider organisation depending on local procedures.
Practitioner - Category (practitioner_category)	string	yes	1: Clinical Psychologist 2: General Psychologist 3: Social Worker 4: Occupational Therapist 5: Mental Health Nurse 6: Aboriginal and Torres Strait Islander Health/Mental Health Worker 7: Low Intensity Mental Health Worker 8: General Practitioner 9: Psychiatrist 10: Other Medical 11: Other 12: Psychosocial Support Worker 13: Peer Support Worker 99: Not stated
Practitioner - ATSI Cultural Training (atsi_cultural_training)	string	yes	1: Yes 2: No 3: Not required 9: Missing / Not recorded
Practitioner - Year of Birth (practitioner_year_of_birth)	gYear	yes	gYear

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Practitioner - Gender (practitioner_gender) ABS	string	yes	0: Not stated/ Inadequately described 1: Male 2: Female 3: Other
Practitioner - Aboriginal and Torres Strait Islander Status (practitioner_atsi_status) METeOR: 291036	string	yes	1: Aboriginal but not Torres Strait Islander origin 2: Torres Strait Islander but not Aboriginal origin 3: Both Aboriginal and Torres Strait Islander origin 4: Neither Aboriginal or Torres Strait Islander origin 9: Not stated/ inadequately described
Practitioner - Active (practitioner_active)	string	yes	0: Inactive 1: Active
Practitioner - Tags (practitioner_tags)	string	—	List of tags for the practitioner.

3.3.4. Client

See Client for definition of a client.

Clients are managed by the provider organisations via upload.

Table 3.4 Client record layout

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Organisation Path (organisation_path)	string	yes	A sequence of colon separated Organisation Keys that fully specifies the Provider Organisation providing a service to the client.

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Client Key (client_key)	string (2,50)	yes	This is a number or code assigned to each individual referred to the commissioned organisation. The client identifier is unique and stable for each individual within the PHN.
Client - Statistical Linkage Key (slk) METeOR: 349510	string (14,40)	yes	A key that enables two or more records belonging to the same individual to be brought together.
Client - Date of Birth (date_of_birth) METeOR: 287007	date	yes	The date on which an individual was born.
Client - Estimated Date of Birth Flag (est_date_of_birth)	string	yes	1: Date of birth is accurate 2: Date of birth is an estimate 8: Date of birth is a 'dummy' date (ie, 09099999) 9: Accuracy of stated date of birth is not known
Client - Gender (client_gender) ABS	string	yes	0: Not stated/ Inadequately described 1: Male 2: Female 3: Other

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Client - Aboriginal and Torres Strait Islander Status (client_atsi_status) METeOR: 291036	string	yes	1: Aboriginal but not Torres Strait Islander origin 2: Torres Strait Islander but not Aboriginal origin 3: Both Aboriginal and Torres Strait Islander origin 4: Neither Aboriginal or Torres Strait Islander origin 9: Not stated/ inadequately described

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
Client - Country of Birth (country_of_birth) METeOR: 459973 ABS	string (4)	yes	**1101:**	Australia
			1102:	Norfolk Island
			1199:	Australian External Territories, nec
			1201:	New Zealand
			1301:	New Caledonia
			1302:	Papua New Guinea
			1303:	Solomon Islands
			1304:	Vanuatu
			1401:	Guam
			1402:	Kiribati
			1403:	Marshall Islands
			1404:	Micronesia, Federated States of
			1405:	Nauru
			1406:	Northern Mariana Islands
			1407:	Palau
			1501:	Cook Islands
			1502:	Fiji
			1503:	French Polynesia
			1504:	Niue
			1505:	Samoa
			1506:	Samoa, American
			1507:	Tokelau
			1508:	Tonga
			1511:	Tuvalu
			1512:	Wallis and Futuna
			1513:	Pitcairn Islands
			1599:	Polynesia (excludes Hawaii), nec
			1601:	Adelie Land (France)

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
			1602:	Argentinian Antarctic Territory
			1603:	Australian Antarctic Territory
			1604:	British Antarctic Territory
			1605:	Chilean Antarctic Territory
			1606:	Queen Maud Land (Norway)
			1607:	Ross Dependency (New Zealand)
			2102:	England
			2103:	Isle of Man
			2104:	Northern Ireland
			2105:	Scotland
			2106:	Wales
			2107:	Guernsey
			2108:	Jersey
			2201:	Ireland
			2301:	Austria
			2302:	Belgium
			2303:	France
			2304:	Germany
			2305:	Liechtenstein
			2306:	Luxembourg
			2307:	Monaco
			2308:	Netherlands
			2311:	Switzerland
			2401:	Denmark
			2402:	Faroe Islands
			2403:	Finland
			2404:	Greenland
			2405:	Iceland
			2406:	Norway
			2407:	Sweden

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
			2408:	Aland Islands
			3101:	Andorra
			3102:	Gibraltar
			3103:	Holy See
			3104:	Italy
			3105:	Malta
			3106:	Portugal
			3107:	San Marino
			3108:	Spain
			3201:	Albania
			3202:	Bosnia and Herzegovina
			3203:	Bulgaria
			3204:	Croatia
			3205:	Cyprus
			3206:	The former Yugoslav Republic of Macedonia
			3207:	Greece
			3208:	Moldova
			3211:	Romania
			3212:	Slovenia
			3214:	Montenegro
			3215:	Serbia
			3216:	Kosovo
			3301:	Belarus
			3302:	Czech Republic
			3303:	Estonia
			3304:	Hungary
			3305:	Latvia
			3306:	Lithuania
			3307:	Poland
			3308:	Russian Federation
			3311:	Slovakia

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
			3312:	Ukraine
			4101:	Algeria
			4102:	Egypt
			4103:	Libya
			4104:	Morocco
			4105:	Sudan
			4106:	Tunisia
			4107:	Western Sahara
			4108:	Spanish North Africa
			4111:	South Sudan
			4201:	Bahrain
			4202:	Gaza Strip and West Bank
			4203:	Iran
			4204:	Iraq
			4205:	Israel
			4206:	Jordan
			4207:	Kuwait
			4208:	Lebanon
			4211:	Oman
			4212:	Qatar
			4213:	Saudi Arabia
			4214:	Syria
			4215:	Turkey
			4216:	United Arab Emirates
			4217:	Yemen
			5101:	Myanmar
			5102:	Cambodia
			5103:	Laos
			5104:	Thailand
			5105:	Vietnam
			5201:	Brunei Darussalam

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			5202: Indonesia
			5203: Malaysia
			5204: Philippines
			5205: Singapore
			5206: Timor-Leste
			6101: China (excludes SARs and Taiwan)
			6102: Hong Kong (SAR of China)
			6103: Macau (SAR of China)
			6104: Mongolia
			6105: Taiwan
			6201: Japan
			6202: Korea, Democratic People's Republic of (North)
			6203: Korea, Republic of (South)
			7101: Bangladesh
			7102: Bhutan
			7103: India
			7104: Maldives
			7105: Nepal
			7106: Pakistan
			7107: Sri Lanka
			7201: Afghanistan
			7202: Armenia
			7203: Azerbaijan
			7204: Georgia
			7205: Kazakhstan
			7206: Kyrgyzstan
			7207: Tajikistan
			7208: Turkmenistan
			7211: Uzbekistan

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			8101: Bermuda
			8102: Canada
			8103: St Pierre and Miquelon
			8104: United States of America
			8201: Argentina
			8202: Bolivia
			8203: Brazil
			8204: Chile
			8205: Colombia
			8206: Ecuador
			8207: Falkland Islands
			8208: French Guiana
			8211: Guyana
			8212: Paraguay
			8213: Peru
			8214: Suriname
			8215: Uruguay
			8216: Venezuela
			8299: South America, nec
			8301: Belize
			8302: Costa Rica
			8303: El Salvador
			8304: Guatemala
			8305: Honduras
			8306: Mexico
			8307: Nicaragua
			8308: Panama
			8401: Anguilla
			8402: Antigua and Barbuda
			8403: Aruba
			8404: Bahamas

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
			8405:	Barbados
			8406:	Cayman Islands
			8407:	Cuba
			8408:	Dominica
			8411:	Dominican Republic
			8412:	Grenada
			8413:	Guadeloupe
			8414:	Haiti
			8415:	Jamaica
			8416:	Martinique
			8417:	Montserrat
			8421:	Puerto Rico
			8422:	St Kitts and Nevis
			8423:	St Lucia
			8424:	St Vincent and the Grenadines
			8425:	Trinidad and Tobago
			8426:	Turks and Caicos Islands
			8427:	Virgin Islands, British
			8428:	Virgin Islands, United States
			8431:	St Barthelemy
			8432:	St Martin (French part)
			8433:	Bonaire, Sint Eustatius and Saba
			8434:	Curacao
			8435:	Sint Maarten (Dutch part)
			9101:	Benin
			9102:	Burkina Faso
			9103:	Cameroon
			9104:	Cabo Verde

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
			9105:	Central African Republic
			9106:	Chad
			9107:	Congo, Republic of
			9108:	Congo, Democratic Republic of
			9111:	Cote d'Ivoire
			9112:	Equatorial Guinea
			9113:	Gabon
			9114:	Gambia
			9115:	Ghana
			9116:	Guinea
			9117:	Guinea-Bissau
			9118:	Liberia
			9121:	Mali
			9122:	Mauritania
			9123:	Niger
			9124:	Nigeria
			9125:	Sao Tome and Principe
			9126:	Senegal
			9127:	Sierra Leone
			9128:	Togo
			9201:	Angola
			9202:	Botswana
			9203:	Burundi
			9204:	Comoros
			9205:	Djibouti
			9206:	Eritrea
			9207:	Ethiopia
			9208:	Kenya
			9211:	Lesotho
			9212:	Madagascar

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			9213: Malawi
			9214: Mauritius
			9215: Mayotte
			9216: Mozambique
			9217: Namibia
			9218: Reunion
			9221: Rwanda
			9222: St Helena
			9223: Seychelles
			9224: Somalia
			9225: South Africa
			9226: Swaziland
			9227: Tanzania
			9228: Uganda
			9231: Zambia
			9232: Zimbabwe
			9299: Southern and East Africa, nec
			9999: Unknown

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Client - Main Language Spoken at Home (main_lang_at_home) METeOR: 460125 ABS	string (4)	yes	**1101:** Gaelic (Scotland) **1102:** Irish **1103:** Welsh **1199:** Celtic, nec **1201:** English **1301:** German **1302:** Letzeburgish **1303:** Yiddish **1401:** Dutch **1402:** Frisian **1403:** Afrikaans **1501:** Danish **1502:** Icelandic **1503:** Norwegian **1504:** Swedish **1599:** Scandinavian, nec **1601:** Estonian **1602:** Finnish **1699:** Finnish and Related Languages, nec **2101:** French **2201:** Greek **2301:** Catalan **2302:** Portuguese **2303:** Spanish **2399:** Iberian Romance, nec **2401:** Italian **2501:** Maltese **2901:** Basque **2902:** Latin **2999:** Other Southern European Languages, nec

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			3101: Latvian
			3102: Lithuanian
			3301: Hungarian
			3401: Belorussian
			3402: Russian
			3403: Ukrainian
			3501: Bosnian
			3502: Bulgarian
			3503: Croatian
			3504: Macedonian
			3505: Serbian
			3506: Slovene
			3507: Serbo-Croatian/ Yugoslavian, so described
			3601: Czech
			3602: Polish
			3603: Slovak
			3604: Czechoslovakian, so described
			3901: Albanian
			3903: Aromunian (Macedo-Romanian)
			3904: Romanian
			3905: Romany
			3999: Other Eastern European Languages, nec
			4101: Kurdish
			4102: Pashto
			4104: Balochi
			4105: Dari
			4106: Persian (excluding Dari)
			4107: Hazaraghi
			4199: Iranic, nec

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			4202: Arabic
			4204: Hebrew
			4206: Assyrian Neo-Aramaic
			4207: Chaldean Neo-Aramaic
			4208: Mandaean (Mandaic)
			4299: Middle Eastern Semitic Languages, nec
			4301: Turkish
			4302: Azeri
			4303: Tatar
			4304: Turkmen
			4305: Uygur
			4306: Uzbek
			4399: Turkic, nec
			4901: Armenian
			4902: Georgian
			4999: Other Southwest and Central Asian Languages, nec
			5101: Kannada
			5102: Malayalam
			5103: Tamil
			5104: Telugu
			5105: Tulu
			5199: Dravidian, nec
			5201: Bengali
			5202: Gujarati
			5203: Hindi
			5204: Konkani
			5205: Marathi
			5206: Nepali
			5207: Punjabi

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			5208: Sindhi
			5211: Sinhalese
			5212: Urdu
			5213: Assamese
			5214: Dhivehi
			5215: Kashmiri
			5216: Oriya
			5217: Fijian Hindustani
			5299: Indo-Aryan, nec
			5999: Other Southern Asian Languages
			6101: Burmese
			6102: Chin Haka
			6103: Karen
			6104: Rohingya
			6105: Zomi
			6199: Burmese and Related Languages, nec
			6201: Hmong
			6299: Hmong-Mien, nec
			6301: Khmer
			6302: Vietnamese
			6303: Mon
			6399: Mon-Khmer, nec
			6401: Lao
			6402: Thai
			6499: Tai, nec
			6501: Bisaya
			6502: Cebuano
			6503: Ilokano
			6504: Indonesian
			6505: Malay
			6507: Tetum

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			6508: Timorese
			6511: Tagalog
			6512: Filipino
			6513: Acehnese
			6514: Balinese
			6515: Bikol
			6516: Iban
			6517: Ilonggo (Hiligaynon)
			6518: Javanese
			6521: Pampangan
			6599: Southeast Asian Austronesian Languages, nec
			6999: Other Southeast Asian Languages
			7101: Cantonese
			7102: Hakka
			7104: Mandarin
			7106: Wu
			7107: Min Nan
			7199: Chinese, nec
			7201: Japanese
			7301: Korean
			7901: Tibetan
			7902: Mongolian
			7999: Other Eastern Asian Languages, nec
			8101: Anindilyakwa
			8111: Maung
			8113: Ngan'gikurunggurr
			8114: Nunggubuyu
			8115: Rembarrnga
			8117: Tiwi
			8121: Alawa

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			8122: Dalabon
			8123: Gudanji
			8127: Iwaidja
			8128: Jaminjung
			8131: Jawoyn
			8132: Jingulu
			8133: Kunbarlang
			8136: Larrakiya
			8137: Malak Malak
			8138: Mangarrayi
			8141: Maringarr
			8142: Marra
			8143: Marrithiyel
			8144: Matngala
			8146: Murrinh Patha
			8147: Na-kara
			8148: Ndjebbana (Gunavidji)
			8151: Ngalakgan
			8152: Ngaliwurru
			8153: Nungali
			8154: Wambaya
			8155: Wardaman
			8156: Amurdak
			8157: Garrwa
			8158: Kuwema
			8161: Marramaninyshi
			8162: Ngandi
			8163: Waanyi
			8164: Wagiman
			8165: Yanyuwa
			8166: Marridan (Maridan)

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			8171: Gundjeihmi
			8172: Kune
			8173: Kuninjku
			8174: Kunwinjku
			8175: Mayali
			8179: Kunwinjkuan, nec
			8181: Burarra
			8182: Gun-nartpa
			8183: Gurr-goni
			8189: Burarran, nec
			8199: Arnhem Land and Daly River Region Languages, nec
			8211: Galpu
			8212: Golumala
			8213: Wangurri
			8219: Dhangu, nec
			8221: Dhalwangu
			8222: Djarrwark
			8229: Dhay'yi, nec
			8231: Djambarrpuyngu
			8232: Djapu
			8233: Daatiwuy
			8234: Marrangu
			8235: Liyagalawumirr
			8236: Liyagawumirr
			8239: Dhuwal, nec
			8242: Gumatj
			8243: Gupapuyngu
			8244: Guyamirrilili
			8246: Manggalili
			8247: Wubulkarra
			8249: Dhuwala, nec

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			8251: Wurlaki
			8259: Djinang, nec
			8261: Ganalbingu
			8262: Djinba
			8263: Manyjalpingu
			8269: Djinba, nec
			8271: Ritharrngu
			8272: Wagilak
			8279: Yakuy, nec
			8281: Nhangu
			8282: Yan-nhangu
			8289: Nhangu, nec
			8291: Dhuwaya
			8292: Djangu
			8293: Madarrpa
			8294: Warramiri
			8295: Rirratjingu
			8299: Other Yolngu Matha, nec
			8301: Kuku Yalanji
			8302: Guugu Yimidhirr
			8303: Kuuku-Ya'u
			8304: Wik Mungkan
			8305: Djabugay
			8306: Dyirbal
			8307: Girramay
			8308: Koko-Bera
			8311: Kuuk Thayorre
			8312: Lamalama
			8313: Yidiny
			8314: Wik Ngathan
			8315: Alngith
			8316: Kugu Muminh

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			8317: Morrobalama
			8318: Thaynakwith
			8321: Yupangathi
			8322: Tjungundji
			8399: Cape York Peninsula Languages, nec
			8401: Kalaw Kawaw Ya/ Kalaw Lagaw Ya
			8402: Meriam Mir
			8403: Yumplatok (Torres Strait Creole)
			8504: Bilinarra
			8505: Gurindji
			8506: Gurindji Kriol
			8507: Jaru
			8508: Light Warlpiri
			8511: Malngin
			8512: Mudburra
			8514: Ngardi
			8515: Ngarinyman
			8516: Walmajarri
			8517: Wanyjirra
			8518: Warlmanpa
			8521: Warlpiri
			8522: Warumungu
			8599: Northern Desert Fringe Area Languages, nec
			8603: Alyawarr
			8606: Kaytetye
			8607: Antekerrepenh
			8611: Central Anmatyerr
			8612: Eastern Anmatyerr
			8619: Anmatyerr, nec

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
			8621:	Eastern Arrernte
			8622:	Western Arrarnta
			8629:	Arrernte, nec
			8699:	Arandic, nec
			8703:	Antikarinya
			8704:	Kartujarra
			8705:	Kukatha
			8706:	Kukatja
			8707:	Luritja
			8708:	Manyjilyjarra
			8711:	Martu Wangka
			8712:	Ngaanyatjarra
			8713:	Pintupi
			8714:	Pitjantjatjara
			8715:	Wangkajunga
			8716:	Wangkatha
			8717:	Warnman
			8718:	Yankunytjatjara
			8721:	Yulparija
			8722:	Tjupany
			8799:	Western Desert Languages, nec
			8801:	Bardi
			8802:	Bunuba
			8803:	Gooniyandi
			8804:	Miriwoong
			8805:	Ngarinyin
			8806:	Nyikina
			8807:	Worla
			8808:	Worrorra
			8811:	Wunambal
			8812:	Yawuru
			8813:	Gambera

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			8814: Jawi
			8815: Kija
			8899: Kimberley Area Languages, nec
			8901: Adnymathanha
			8902: Arabana
			8903: Bandjalang
			8904: Banyjima
			8905: Batjala
			8906: Bidjara
			8907: Dhanggatti
			8908: Diyari
			8911: Gamilaraay
			8913: Garuwali
			8914: Githabul
			8915: Gumbaynggir
			8916: Kanai
			8917: Karajarri
			8918: Kariyarra
			8921: Kaurna
			8922: Kayardild
			8924: Kriol
			8925: Lardil
			8926: Mangala
			8927: Muruwari
			8928: Narungga
			8931: Ngarluma
			8932: Ngarrindjeri
			8933: Nyamal
			8934: Nyangumarta
			8935: Nyungar
			8936: Paakantyi
			8937: Palyku/Nyiyaparli

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			8938: Wajarri
			8941: Wiradjuri
			8943: Yindjibarndi
			8944: Yinhawangka
			8945: Yorta Yorta
			8946: Baanbay
			8947: Badimaya
			8948: Barababaraba
			8951: Dadi Dadi
			8952: Dharawal
			8953: Djabwurrung
			8954: Gudjal
			8955: Keerray-Woorroong
			8956: Ladji Ladji
			8957: Mirning
			8958: Ngatjumaya
			8961: Waluwarra
			8962: Wangkangurru
			8963: Wargamay
			8964: Wergaia
			8965: Yugambeh
			8998: Aboriginal English, so described
			8999: Other Australian Indigenous Languages, nec
			9101: American Languages
			9201: Acholi
			9203: Akan
			9205: Mauritian Creole
			9206: Oromo
			9207: Shona
			9208: Somali

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			9211: Swahili
			9212: Yoruba
			9213: Zulu
			9214: Amharic
			9215: Bemba
			9216: Dinka
			9217: Ewe
			9218: Ga
			9221: Harari
			9222: Hausa
			9223: Igbo
			9224: Kikuyu
			9225: Krio
			9226: Luganda
			9227: Luo
			9228: Ndebele
			9231: Nuer
			9232: Nyanja (Chichewa)
			9233: Shilluk
			9234: Tigre
			9235: Tigrinya
			9236: Tswana
			9237: Xhosa
			9238: Seychelles Creole
			9241: Anuak
			9242: Bari
			9243: Bassa
			9244: Dan (Gio-Dan)
			9245: Fulfulde
			9246: Kinyarwanda (Rwanda)
			9247: Kirundi (Rundi)
			9248: Kpelle

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			9251: Krahn
			9252: Liberian (Liberian English)
			9253: Loma (Lorma)
			9254: Lumun (Kuku Lumun)
			9255: Madi
			9256: Mandinka
			9257: Mann
			9258: Moro (Nuba Moro)
			9261: Themne
			9262: Lingala
			9299: African Languages, nec
			9301: Fijian
			9302: Gilbertese
			9303: Maori (Cook Island)
			9304: Maori (New Zealand)
			9306: Nauruan
			9307: Niue
			9308: Samoan
			9311: Tongan
			9312: Rotuman
			9313: Tokelauan
			9314: Tuvaluan
			9315: Yapese
			9399: Pacific Austronesian Languages, nec
			9402: Bislama
			9403: Hawaiian English
			9404: Norf'k-Pitcairn
			9405: Solomon Islands Pijin
			9499: Oceanian Pidgins and Creoles, nec

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			9502: Kiwai
			9503: Motu (HiriMotu)
			9504: Tok Pisin (Neomelanesian)
			9599: Papua New Guinea Languages, nec
			9601: Invented Languages
			9701: Auslan
			9702: Key Word Sign Australia
			9799: Sign Languages, nec
			9999: Unknown
Client - Proficiency in Spoken English (prof_english) METeOR: 270203	string	yes	**0:** Not applicable (persons under 5 years of age or who speak only English) **1:** Very well **2:** Well **3:** Not well **4:** Not at all **9:** Not stated/ inadequately described
Client - Tags (client_tags)	string	—	List of tags for the client.

3.3.5. Episode

See Episode for definition of an episode.

Episodes are managed by the provider organisations via upload.

Table 3.5 Episode record layout

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Organisation Path (organisation_path)	string	yes	A sequence of colon separated Organisation Keys that fully specifies the Provider Organisation providing a service to the client.
Episode Key (episode_key)	string (2,50)	yes	This is a number or code assigned to each episode. The Episode Key is unique and stable for each episode at the level of the organisation.
Client Key (client_key)	string (2,50)	yes	This is a number or code assigned to each individual referred to the commissioned organisation. The client identifier is unique and stable for each individual at the level of the PMHC top level organisation.
Episode - End Date (episode_end_date) METeOR: 614094	date	—	The date on which an *Episode of Care* is formally or administratively ended
Episode - Client Consent to Anonymised Data (client_consent)	string	yes	1: Yes 2: No

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Episode - Completion Status (episode_completion_status)	string	—	0: Episode open 1: Episode closed - treatment concluded 2: Episode closed administratively - client could not be contacted 3: Episode closed administratively - client declined further contact 4: Episode closed administratively - client moved out of area 5: Episode closed administratively - client referred elsewhere 6: Episode closed administratively - other reason
Episode - Referral Date (referral_date)	date	—	The date the referrer made the referral.
Episode - Principal Focus of Treatment Plan (principal_focus)	string	yes	1: Psychological therapy 2: Low intensity psychological intervention 3: Clinical care coordination 4: Complex care package 5: Child and youth-specific mental health services 6: Indigenous-specific mental health services 7: Other 8: Psychosocial Support

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Episode - GP Mental Health Treatment Plan Flag (mental_health_treatment_plan)	string	yes	1: Yes 2: No 3: Unknown 9: Not stated/ inadequately described
Episode - Homelessness Flag (homelessness)	string	yes	1: Sleeping rough or in non-conventional accommodation 2: Short-term or emergency accommodation 3: Not homeless 9: Not stated / Missing
Episode - Area of usual residence, postcode (client_postcode) METeOR: 429894	string	yes	The Australian postcode of the client.
Episode - Labour Force Status (labour_force_status) METeOR: 621450	string	yes	1: Employed 2: Unemployed 3: Not in the Labour Force 9: Not stated/ inadequately described
Episode - Employment Participation (employment_participation) METeOR: 269950	string	yes	1: Full-time 2: Part-time 3: Not applicable - not in the labour force 9: Not stated/ inadequately described

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Episode - Source of Cash Income (income_source) METeOR: 386449	string	yes	0: N/A - Client aged less than 16 years 1: Disability Support Pension 2: Other pension or benefit (not superannuation) 3: Paid employment 4: Compensation payments 5: Other (e.g. superannuation, investments etc.) 6: Nil income 7: Not known 9: Not stated/ inadequately described
Episode - Health Care Card (health_care_card) METeOR: 605149	string	yes	1: Yes 2: No 3: Not Known 9: Not stated
Episode - NDIS Participant (ndis_participant)	string	yes	1: Yes 2: No 9: Not stated/ inadequately described
Episode - Marital Status (marital_status) METeOR: 291045	string	yes	1: Never married 2: Widowed 3: Divorced 4: Separated 5: Married (registered and de facto) 6: Not stated/ inadequately described

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Episode - Suicide Referral Flag (suicide_referral_flag)	string	yes	1: Yes 2: No 9: Unknown

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
Episode - Principal Diagnosis (principal_diagnosis)	string	yes	100:	Anxiety disorders (ATAPS)
			101:	Panic disorder
			102:	Agoraphobia
			103:	Social phobia
			104:	Generalised anxiety disorder
			105:	Obsessive-compulsive disorder
			106:	Post-traumatic stress disorder
			107:	Acute stress disorder
			108:	Other anxiety disorder
			200:	Affective (Mood) disorders (ATAPS)
			201:	Major depressive disorder
			202:	Dysthymia
			203:	Depressive disorder NOS
			204:	Bipolar disorder
			205:	Cyclothymic disorder
			206:	Other affective disorder
			300:	Substance use disorders (ATAPS)
			301:	Alcohol harmful use
			302:	Alcohol dependence
			303:	Other drug harmful use
			304:	Other drug dependence
			305:	Other substance use disorder

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
			400:	Psychotic disorders (ATAPS)
			401:	Schizophrenia
			402:	Schizoaffective disorder
			403:	Brief psychotic disorder
			404:	Other psychotic disorder
			501:	Separation anxiety disorder
			502:	Attention deficit hyperactivity disorder (ADHD)
			503:	Conduct disorder
			504:	Oppositional defiant disorder
			505:	Pervasive developmental disorder
			506:	Other disorder of childhood and adolescence
			601:	Adjustment disorder
			602:	Eating disorder
			603:	Somatoform disorder
			604:	Personality disorder
			605:	Other mental disorder
			901:	Anxiety symptoms
			902:	Depressive symptoms
			903:	Mixed anxiety and depressive symptoms
			904:	Stress related
			905:	Other

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			999: Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
Episode - Additional Diagnosis (additional_diagnosis)	string	yes	000:	No additional diagnosis
			100:	Anxiety disorders (ATAPS)
			101:	Panic disorder
			102:	Agoraphobia
			103:	Social phobia
			104:	Generalised anxiety disorder
			105:	Obsessive-compulsive disorder
			106:	Post-traumatic stress disorder
			107:	Acute stress disorder
			108:	Other anxiety disorder
			200:	Affective (Mood) disorders (ATAPS)
			201:	Major depressive disorder
			202:	Dysthymia
			203:	Depressive disorder NOS
			204:	Bipolar disorder
			205:	Cyclothymic disorder
			206:	Other affective disorder
			300:	Substance use disorders (ATAPS)
			301:	Alcohol harmful use
			302:	Alcohol dependence
			303:	Other drug harmful use
			304:	Other drug dependence

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
			305:	Other substance use disorder
			400:	Psychotic disorders (ATAPS)
			401:	Schizophrenia
			402:	Schizoaffective disorder
			403:	Brief psychotic disorder
			404:	Other psychotic disorder
			501:	Separation anxiety disorder
			502:	Attention deficit hyperactivity disorder (ADHD)
			503:	Conduct disorder
			504:	Oppositional defiant disorder
			505:	Pervasive developmental disorder
			506:	Other disorder of childhood and adolescence
			601:	Adjustment disorder
			602:	Eating disorder
			603:	Somatoform disorder
			604:	Personality disorder
			605:	Other mental disorder
			901:	Anxiety symptoms
			902:	Depressive symptoms
			903:	Mixed anxiety and depressive symptoms
			904:	Stress related

Data Element (Field Name)	Type (min,max)	Required	Format / Values
			905: Other **999:** Missing
Episode - Medication - Antipsychotics (N05A) (medication_antipsychotics)	string	yes	**1:** Yes **2:** No **9:** Unknown
Episode - Medication - Anxiolytics (N05B) (medication_anxiolytics)	string	yes	**1:** Yes **2:** No **9:** Unknown
Episode - Medication - Hypnotics and sedatives (N05C) (medication_hypnotics)	string	yes	**1:** Yes **2:** No **9:** Unknown
Episode - Medication - Antidepressants (N06A) (medication_antidepressants)	string	yes	**1:** Yes **2:** No **9:** Unknown
Episode - Medication - Psychostimulants and nootropics (N06B) (medication_psychostimulants)	string	yes	**1:** Yes **2:** No **9:** Unknown

Data Element (Field Name)	Type (min,max)	Required	Format / Values		
Episode - Referrer Profession (referrer_profession)	string	yes	1:	General Practitioner	
			2:	Psychiatrist	
			3:	Obstetrician	
			4:	Paediatrician	
			5:	Other Medical Specialist	
			6:	Midwife	
			7:	Maternal Health Nurse	
			8:	Psychologist	
			9:	Mental Health Nurse	
			10:	Social Worker	
			11:	Occupational therapist	
			12:	Aboriginal Health Worker	
			13:	Educational professional	
			14:	Early childhood service worker	
			15:	Other	
			98:	N/A - Self referral	
			99:	Not stated	

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Episode - Referrer Organisation Type (referrer_organisation_type)	string	yes	1: General Practice 2: Medical Specialist Consulting Rooms 3: Private practice 4: Public mental health service 5: Public Hospital 6: Private Hospital 7: Emergency Department 8: Community Health Centre 9: Drug and Alcohol Service 10: Community Support Organisation NFP 11: Indigenous Health Organisation 12: Child and Maternal Health 13: Nursing Service 14: Telephone helpline 15: Digital health service 16: Family Support Service 17: School 18: Tertiary Education institution 19: Housing service 20: Centrelink 21: Other 98: N/A - Self referral 99: Not stated

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Episode - Continuity of Support (continuity_of_support)	string	yes	1: Yes 2: No 9: Not stated/ inadequately described
Episode - Tags (episode_tags)	string	—	List of tags for the episode.

3.3.6. Service Contact

See Service Contact for definition of a service contact.

Service contacts are managed by the provider organisations via upload.

Table 3.6 Service contact record layout

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Organisation Path (organisation_path)	string	yes	A sequence of colon separated Organisation Keys that fully specifies the Provider Organisation providing a service to the client.
Service Contact Key (service_contact_key)	string (2,50)	yes	This is a number or code assigned to each service contact. The Service Contact Key is unique and stable for each service contact at the level of the organisation.
Episode Key (episode_key)	string (2,50)	yes	This is a number or code assigned to each episode. The Episode Key is unique and stable for each episode at the level of the organisation.
Practitioner Key (practitioner_key)	string (2,50)	yes	A unique identifier for a practitioner within the provider organisation.

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Service Contact - Date (service_contact_date) METeOR: 494356	date	yes	The date of each mental health service contact between a health service provider and patient/client.
Service Contact - Type (service_contact_type)	string	yes	**0:** No contact took place **1:** Assessment **2:** Structured psychological intervention **3:** Other psychological intervention **4:** Clinical care coordination/ liaison **5:** Clinical nursing services **6:** Child or youth specific assistance NEC **7:** Suicide prevention specific assistance NEC **8:** Cultural specific assistance NEC **9:** Psychosocial support **98:** ATAPS
Service Contact - Postcode (service_contact_postcode) METeOR: 429894	string	yes	The Australian postcode where the service contact took place.

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Service Contact - Modality (service_contact_modality)	string	yes	0: No contact took place 1: Face to Face 2: Telephone 3: Video 4: Internet-based
Service Contact - Participants (service_contact_participants)	string	yes	1: Individual client 2: Client group 3: Family / Client Support Network 4: Other health professional or service provider 5: Other 9: Not stated

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Service Contact - Venue (service_contact_venue)	string	yes	1: Client's Home
			2: Service provider's office
			3: GP Practice
			4: Other medical practice
			5: Headspace Centre
			6: Other primary care setting
			7: Public or private hospital
			8: Residential aged care facility
			9: School or other educational centre
			10: Client's Workplace
			11: Other
			12: Aged care centre - non-residential
			98: Not applicable (Service Contact Modality is not face to face)
			99: Not stated

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Service Contact - Duration (service_contact_duration)	string	yes	0: No contact took place 1: 1-15 mins 2: 16-30 mins 3: 31-45 mins 4: 46-60 mins 5: 61-75 mins 6: 76-90 mins 7: 91-105 mins 8: 106-120 mins 9: over 120 mins
Service Contact - Copayment (service_contact_copayment)	number	yes	0 - 999999.99
Service Contact - Client Participation Indicator (service_contact_participation_indicator) METeOR: 494341	string	yes	1: Yes 2: No
Service Contact - Interpreter Used (service_contact_interpreter)	string	yes	1: Yes 2: No 9: Not stated
Service Contact - No Show (service_contact_no_show)	string	yes	1: Yes 2: No

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Service Contact - Final (service_contact_final)	string	yes	1: No further services are planned for the client in the current episode 2: Further services are planned for the client in the current episode 3: Not known at this stage
Service Contact - Tags (service_contact_tags)	string	—	List of tags for the service contact.

3.3.7. Outcome Collection Occasion

See Outcome Collection Occasion for definition of an outcome collection occasion.

Individual item scores will eventually be required, however, it is noted that in the short term there are issues with collecting individual item scores. Therefore, as a transitional phase, reporting overall scores/subscales will be allowed.

Outcome collection occasions are managed by the provider organisations via upload.

PMHC MDS requires the use of one of the following three required outcome collection occasions measures, as follows:

- **For adults (18+ years)** - Kessler Psychological Distress Scale K10+ is the prescribed measure, with the option to use the K5 for Aboriginal and Torres Strait Islander people if that is considered more appropriate.
- **For children and young people (up to and including 17 years)** - the Strengths & Difficulties Questionnaires (SDQ) is the prescribed tool. The specified versions include the parent-report for 4-10 years and 11-17 years; and the self-report for 11-17 years.

Please note: For adolescents, clinician-discretion is allowed, and that the K10+ or K5 may be used, even though the person is under 18 years

3.3.7.1. K10+

As noted above, reporting individual item scores will eventually be required. In the short term, respondents can either report all 14 item scores or report the K10 total score as well as item scores for the 4 extra items in the K10+.

Table 3.7 K10+ record layout

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Organisation Path (organisation_path)	string	yes	A sequence of colon separated Organisation Keys that fully specifies the Provider Organisation providing a service to the client.
Collection Occasion Key (collection_occasion_key)	string (2,50)	yes	This is a number or code assigned to each collection occasion of outcome measures. The Collection Occasion Key is unique and stable for each collection occasion at the level of the organisation.
Episode Key (episode_key)	string (2,50)	yes	
Collection Occasion - Measure Date (measure_date)	date	yes	The date the measure was given.
Collection Occasion - Reason (reason_for_collection)	string	yes	1: Episode start 2: Review 3: Episode end
K10+ - Question 1 (k10p_item1)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
K10+ - Question 2 (k10p_item2)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K10+ - Question 3 (k10p_item3)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K10+ - Question 4 (k10p_item4)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
K10+ - Question 5 (k10p_item5)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K10+ - Question 6 (k10p_item6)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K10+ - Question 7 (k10p_item7)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
K10+ - Question 8 (k10p_item8)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K10+ - Question 9 (k10p_item9)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K10+ - Question 10 (k10p_item10)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K10+ - Question 11 (k10p_item11)	integer	yes	0 - 28, 99 = Not stated / Missing
K10+ - Question 12 (k10p_item12)	integer	yes	0 - 28, 99 = Not stated / Missing
K10+ - Question 13 (k10p_item13)	integer	yes	0 - 89, 99 = Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
K10+ - Question 14 (k10p_item14)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K10+ - Score (k10p_score)	integer	yes	10 - 50, 99 = Not stated / Missing
K10+ - Tags (k10p_tags)	string	—	List of tags for the collection occasion.

When the client's responses to Q1-10 are all recorded as 1 'None of the time', they are not required to answer questions 11-14. Where a question has not been answered please select a response of 'Not stated / missing'.

3.3.7.2. K5

As noted above, reporting individual item scores will eventually be required. In the short term, respondents can either report all 5 item scores or report the K5 total score.

Table 3.8 K5 record layout

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Organisation Path (organisation_path)	string	yes	A sequence of colon separated Organisation Keys that fully specifies the Provider Organisation providing a service to the client.
Collection Occasion Key (collection_occasion_key)	string (2,50)	yes	This is a number or code assigned to each collection occasion of outcome measures. The Collection Occasion Key is unique and stable for each collection occasion at the level of the organisation.
Episode Key (episode_key)	string (2,50)	yes	
Collection Occasion - Measure Date (measure_date)	date	yes	The date the measure was given.

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Collection Occasion - Reason (reason_for_collection)	string	yes	1: Episode start 2: Review 3: Episode end
K5 - Question 1 (k5_item1)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K5 - Question 2 (k5_item2)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K5 - Question 3 (k5_item3)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
K5 - Question 4 (k5_item4)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K5 - Question 5 (k5_item5)	string	yes	1: None of the time 2: A little of the time 3: Some of the time 4: Most of the time 5: All of the time 9: Not stated / Missing
K5 - Score (k5_score)	integer	yes	5 - 25, 99 = Not stated / Missing
K5 - Tags (k5_tags)	string	—	List of tags for the collection occasion.

3.3.7.3. SDQ

Extensive support materials are available on the SDQ developers' website, including copies of the various versions of the instrument, background information and scoring instructions. See http://www.sdqinfo.com. There are six versions (parent-report and youth-self report) currently specified format PMHC MDS reporting.

The "1" versions are administered on admission and are rated on the basis of the proceeding 6 months. The "2" follow up versions are administered on review and discharge and are rated on the basis of the previous 1 month period.

The versions specified for PMHC MDS reporting are:

- PC1 - Parent Report Measure for Children aged 4-10, Baseline version;
- PC2 - Parent Report Measure for Children and Adolescents aged 4-10, Follow up version;
- PY1 - Parent Report Measure for Youth aged 11-17, Baseline version;

- PY2 - Parent Report Measure for Youth aged 11-17, Follow up version;
- YR1 - Youth self report measure (11-17), Baseline version; and
- YR2 - Youth self report measure (11-17), Follow up version.

We acknowledge that there is also a parent-report for 2-4 years; and teacher versions for all the years (2-4; 4-10 and 11-17) but that these are not to be reported the PMHC-MDS.

Please note that the item numbering in the SDQ versions is deliberately non sequential because it covers all items in all versions, both to indicate item equivalence across versions and to assist data entry, especially of translated versions. The table below indicates the items that are included in each version, the rating periods used and the broad content covered by each item.

	Informant	Parent				Young Person	
	Age range	4-10		11-17		11 - 17	
	Application	Baseline	Followup	Baseline	Followup	Baseline	Followup
	Rating period	6 months	1 month	6 months	1 month	6 months	1 month
Items	**Item Content**	Version					
		PC1	PC2	PY1	PY2	YR1	YR2
1-25	Symptoms	✓	✓	✓	✓	✓	✓
26	Overall	✓	✓	✓	✓	✓	✓
27	Duration	✓	X	✓	X	✓	
28-33	Impact	✓	✓	✓	✓	✓	✓
34-35	Follow up progress	X	✓	X	✓	X	✓
36-38	Cross-Informant information	✓	X	✓	X	X	X
39-42	Cross-Informant information	X	X	X	X	✓	X

As noted above, reporting individual item scores will eventually be required. In the short term, respondents can either report all 42 item scores or report the SDQ subscale scores.

3.3.7.3.1. SDQ items and Scale Summary scores

The first 25 items in the SDQ comprise 5 scales of 5 items each. It is usually easiest to score all 5 scales before working out the Total Difficulties score. For data entry, the responses to items should always be entered the same way (see below), but they are not all scored the same way. Somewhat True is always scored as 1, but the scoring of Not True and Certainly True varies with each item (see Table 5). For each of the 5 scales the score can range from 0-10 if all 5 items were completed. Scale scores can be prorated if at least 3 items were completed.

		Not True	Some-what True	Certainly True	
Standard Values for Data Entry		**0**	**1**	**2**	**Summary Score**
Data element	**SDQ Item number and description**	**Item Score**			
Emotional Symptoms Scale					0-10
Item 03	Often complains of headaches ...	0	1	2	
Item 08	Many worries or often seems worried	0	1	2	
Item 13	Often unhappy, depressed or tearful	0	1	2	
Item 16	Nervous or clingy in new situations ...	0	1	2	
Item 24	Many fears, easily scared	0	1	2	
Conduct Problem Scale					0-10
Item 05	Often loses temper ...	0	1	2	
Item 07	**Generally well behaved** ...	**2**	**1**	**0**	
Item 12	Often fights with other children ...	0	1	2	
Item 18	Often lies or cheats	0	1	2	
Item 22	Steals from home, school ...	0	1	2	
Hyperactivity Scale					0-10
Item 02	Restless, overactive ...	0	1	2	
Item 10	Constantly fidgeting ...	0	1	2	
Item 15	Easily distracted ...	0	1	2	
Item 21	**Thinks things out before acting**	**2**	**1**	**0**	
Item 25	**Good attention span** ...	**2**	**1**	**0**	
Peer Problem Scale					0-10
Item 06	Rather solitary, prefers to play alone	0	1	2	
Item 11	**Has at least one good friend**	**2**	**1**	**0**	

		Not True	Some-what True	Certainly True	
Standard Values for Data Entry		**0**	**1**	**2**	**Summary Score**
Data element	**SDQ Item number and description**		**Item Score**		
Item 14	**Generally liked by other children**	**2**	**1**	**0**	
Item 19	Picked on or bullied ...	0	1	2	
Item 23	Gets along better with adults ...	0	1	2	
Prosocial Scale					0-10
Item 01	Considerate of other people's feelings	0	1	2	
Item 04	Shares readily with other children ...	0	1	2	
Item 09	Helpful if someone is hurt ...	0	1	2	
Item 17	Kind to younger children	0	1	2	
Item 20	Often volunteers to help others ...	0	1	2	
SDQ Total Difficulties Score = Sum of Scales below					0-40
	Emotional Symptoms Scale	0-10			
	Conduct Problem Scale	0-10			
	Hyperactivity Scale	0-10			
	Peer Problem Scale	0-10			

- *NB. Bold items indicate reverse scoring*

3.3.7.3.2. Scoring the SDQ

The standard values for coding individual Item responses are 0 (Not True), 1 (Somewhat True), 2 (Certainly True) and 9 (Missing data).

For completed items (response coded 0,1,2) the Item scores are usually the same as the standard values. Them exceptions are item 07, 11, 14, 21 and 25. These items are "reverse-scored", that is, the standard value is mapped to Item scores as follows: 0->2, 1->1, 2->0.

Summary scores are only calculated if at least three of the five items have been completed (that is, coded 0, 1 or 2). Otherwise the summary score is set to missing. For the Summary scores, the missing value used should be 99.

The Summary scores are computed using the equation shown below, with the result being rounded to the nearest whole number. In the first 25 SDQ questions, each summary scale is composed of five items.

Summary score = (sum of item scores/number of valid completed items) x number of items

The simplest way to calculate the total difficulties score is to add up the following summary scores with the result being rounded to the nearest whole number.

Total score = Emotional Scale + Conduct Scale + Hyperactivity Scale + Peer Problem Scale

However, some of the summary scores may be missing. The rule is if more than one summary score is missing the Total Score is set to missing, value 99.

Items 28-32 are not completed if respondents have answered "No" to Item 26, which asks for an overall opinion about difficulties being present. In this case, all Item responses for Items 27 through 33 should be coded "8" for "not applicable", and the impact score should be coded to zero. Item 27 is not included in the Impact Score since it assesses the chronicity of the difficulties- the length of time they have been present. Item 33 is not included in the Impact Score, since it assess the burden on others rather than on the child/youth.

The coded Item Responses for the remaining Items 28 through 32 have to be mapped to their Item Scores before adding up. This mapping is the same for all, namely: 0->0, 1->0, 2->1, 3->2.

Table 3.9 SDQ record layout

Data Element (Field Name)	Type (min,max)	Required	Format / Values
Organisation Path (organisation_path)	string	yes	A sequence of colon separated Organisation Keys that fully specifies the Provider Organisation providing a service to the client.
Collection Occasion Key (collection_occasion_key)	string (2,50)	yes	This is a number or code assigned to each collection occasion of outcome measures. The Collection Occasion Key is unique and stable for each collection occasion at the level of the organisation.
Episode Key (episode_key)	string (2,50)	yes	
Collection Occasion - Measure Date (measure_date)	date	yes	The date the measure was given.
Collection Occasion - Reason (reason_for_collection)	string	yes	1: Episode start 2: Review 3: Episode end

Data Element (Field Name)	Type (min,max)	Required	Format / Values	
SDQ Collection Occasion - Version (sdq_version)	string	yes	**PC101:**	Parent Report Measure 4-10 yrs, Baseline version, Australian Version 1
			PC201:	Parent Report Measure 4-10 yrs, Follow Up version, Australian Version 1
			PY101:	Parent Report Measure 11-17 yrs, Baseline version, Australian Version 1
			PY201:	Parent Report Measure 11-17 yrs, Follow Up version, Australian Version 1
			YR101:	Self report Version, 11-17 years, Baseline version, Australian Version 1
			YR201:	Self report Version, 11-17 years, Follow Up version, Australian Version 1
SDQ - Question 1 (sdq_item1)	string	yes	**0:**	Not True
			1:	Somewhat True
			2:	Certainly True
			7:	Unable to rate (insufficient information)
			9:	Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 2 (sdq_item2)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing
SDQ - Question 3 (sdq_item3)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing
SDQ - Question 4 (sdq_item4)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing
SDQ - Question 5 (sdq_item5)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 6 (sdq_item6)	string	yes	0: Not True 1: Somewhat True 2: Certainly True 7: Unable to rate (insufficient information) 9: Not stated / Missing
SDQ - Question 7 (sdq_item7)	string	yes	0: Not True 1: Somewhat True 2: Certainly True 7: Unable to rate (insufficient information) 9: Not stated / Missing
SDQ - Question 8 (sdq_item8)	string	yes	0: Not True 1: Somewhat True 2: Certainly True 7: Unable to rate (insufficient information) 9: Not stated / Missing
SDQ - Question 9 (sdq_item9)	string	yes	0: Not True 1: Somewhat True 2: Certainly True 7: Unable to rate (insufficient information) 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values		
SDQ - Question 10 (sdq_item10)	string	yes	0:	Not True	
			1:	Somewhat True	
			2:	Certainly True	
			7:	Unable to rate (insufficient information)	
			9:	Not stated / Missing	
SDQ - Question 11 (sdq_item11)	string	yes	0:	Not True	
			1:	Somewhat True	
			2:	Certainly True	
			7:	Unable to rate (insufficient information)	
			9:	Not stated / Missing	
SDQ - Question 12 (sdq_item12)	string	yes	0:	Not True	
			1:	Somewhat True	
			2:	Certainly True	
			7:	Unable to rate (insufficient information)	
			9:	Not stated / Missing	
SDQ - Question 13 (sdq_item13)	string	yes	0:	Not True	
			1:	Somewhat True	
			2:	Certainly True	
			7:	Unable to rate (insufficient information)	
			9:	Not stated / Missing	

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 14 (sdq_item14)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing
SDQ - Question 15 (sdq_item15)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing
SDQ - Question 16 (sdq_item16)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing
SDQ - Question 17 (sdq_item17)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 18 (sdq_item18)	string	yes	0: Not True 1: Somewhat True 2: Certainly True 7: Unable to rate (insufficient information) 9: Not stated / Missing
SDQ - Question 19 (sdq_item19)	string	yes	0: Not True 1: Somewhat True 2: Certainly True 7: Unable to rate (insufficient information) 9: Not stated / Missing
SDQ - Question 20 (sdq_item20)	string	yes	0: Not True 1: Somewhat True 2: Certainly True 7: Unable to rate (insufficient information) 9: Not stated / Missing
SDQ - Question 21 (sdq_item21)	string	yes	0: Not True 1: Somewhat True 2: Certainly True 7: Unable to rate (insufficient information) 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 22 (sdq_item22)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing
SDQ - Question 23 (sdq_item23)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing
SDQ - Question 24 (sdq_item24)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing
SDQ - Question 25 (sdq_item25)	string	yes	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 26 (sdq_item26)	string	yes	0: No 1: Yes - minor difficulties 2: Yes - definite difficulties 3: Yes - severe difficulties 7: Unable to rate (insufficient information) 9: Not stated / Missing
SDQ - Question 27 (sdq_item27)	string	yes	0: Less than a month 1: 1-5 months 2: 6-12 months 3: Over a year 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 28 (sdq_item28)	string	yes	0: Not at all 1: A little 2: A medium amount 3: A great deal 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing
SDQ - Question 29 (sdq_item29)	string	yes	0: Not at all 1: A little 2: A medium amount 3: A great deal 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 30 (sdq_item30)	string	yes	0: Not at all 1: A little 2: A medium amount 3: A great deal 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing
SDQ - Question 31 (sdq_item31)	string	yes	0: Not at all 1: A little 2: A medium amount 3: A great deal 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 32 (sdq_item32)	string	yes	0: Not at all 1: A little 2: A medium amount 3: A great deal 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing
SDQ - Question 33 (sdq_item33)	string	yes	0: Not at all 1: A little 2: A medium amount 3: A great deal 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 34 (sdq_item34)	string	yes	0: Much worse 1: A bit worse 2: About the same 3: A bit better 4: Much better 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing
SDQ - Question 35 (sdq_item35)	string	yes	0: Not at all 1: A little 2: A medium amount 3: A great deal 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 36 (sdq_item36)	string	yes	**0:** No **1:** A little **2:** A lot **7:** Unable to rate (insufficient information) **8:** Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) **9:** Not stated / Missing
SDQ - Question 37 (sdq_item37)	string	yes	**0:** No **1:** A little **2:** A lot **7:** Unable to rate (insufficient information) **8:** Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) **9:** Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 38 (sdq_item38)	string	yes	0: No 1: A little 2: A lot 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing
SDQ - Question 39 (sdq_item39)	string	yes	0: No 1: A little 2: A lot 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 40 (sdq_item40)	string	yes	0: No 1: A little 2: A lot 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing
SDQ - Question 41 (sdq_item41)	string	yes	0: No 1: A little 2: A lot 7: Unable to rate (insufficient information) 8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Required	Format / Values
SDQ - Question 42 (sdq_item42)	string	yes	**0:** No **1:** A little **2:** A lot **7:** Unable to rate (insufficient information) **8:** Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0) **9:** Not stated / Missing
SDQ - Emotional Symptoms Scale (sdq_emotional_symptoms)	integer	yes	0 - 10, 99 = Not stated / Missing
SDQ - Conduct Problem Scale (sdq_conduct_problem)	integer	yes	0 - 10, 99 = Not stated / Missing
SDQ - Hyperactivity Scale (sdq_hyperactivity)	integer	yes	0 - 10, 99 = Not stated / Missing
SDQ - Peer Problem Scale (sdq_peer_problem)	integer	yes	0 - 10, 99 = Not stated / Missing
SDQ - Prosocial Scale (sdq_prosocial)	integer	yes	0 - 10, 99 = Not stated / Missing
SDQ - Total Difficulties Score (sdq_total)	integer	yes	0 - 40, 99 = Not stated / Missing
SDQ - Impact Score (sdq_impact)	integer	yes	0 - 10, 99 = Not stated / Missing
SDQ - Tags (sdq_tags)	string	—	List of tags for the collection occasion.

3.4. Definitions

3.4.1. Client - Aboriginal and Torres Strait Islander Status

Whether a person identifies as being of Aboriginal and/or Torres Strait Islander origin, as represented by a code.

Field name: client_atsi_status

Data type: string

Required: yes

Domain:
1: Aboriginal but not Torres Strait Islander origin

2: Torres Strait Islander but not Aboriginal origin

3: Both Aboriginal and Torres Strait Islander origin

4: Neither Aboriginal or Torres Strait Islander origin

9: Not stated/inadequately described

Notes:
Code 9 is not to be available as a valid answer to the questions but is intended for use:

- Primarily when importing data from other data collections that do not contain mappable data.
- Where an answer was refused.
- Where the question was not able to be asked prior to completion of assistance because the client was unable to communicate or a person who knows the client was not available.

METeOR: 291036

3.4.2. Client - Country of Birth

The country in which the client was born, as represented by a code.

Field name: country_of_birth

Data type: string (4)

Required: yes

Domain:

1101: Australia

1102: Norfolk Island

1199: Australian External Territories, nec

1201: New Zealand

1301: New Caledonia

1302: Papua New Guinea

1303: Solomon Islands

1304: Vanuatu

1401: Guam

1402: Kiribati

1403: Marshall Islands

1404: Micronesia, Federated States of

1405: Nauru

1406: Northern Mariana Islands

1407: Palau

1501: Cook Islands

1502: Fiji

1503: French Polynesia

1504: Niue

1505: Samoa

1506: Samoa, American

1507: Tokelau

1508: Tonga

1511: Tuvalu

1512: Wallis and Futuna

1513: Pitcairn Islands

1599: Polynesia (excludes Hawaii), nec

1601: Adelie Land (France)

1602: Argentinian Antarctic Territory

1603: Australian Antarctic Territory

1604: British Antarctic Territory

1605: Chilean Antarctic Territory

1606: Queen Maud Land (Norway)

3108: Spain

3201: Albania

3202: Bosnia and Herzegovina

3203: Bulgaria

3204: Croatia

3205: Cyprus

3206: The former Yugoslav Republic of Macedonia

3207: Greece

3208: Moldova

3211: Romania

3212: Slovenia

3214: Montenegro

3215: Serbia

3216: Kosovo

3301: Belarus

3302: Czech Republic

3303: Estonia

3304: Hungary

3305: Latvia

3306: Lithuania

3307: Poland

3308: Russian Federation

3311: Slovakia

3312: Ukraine

4101: Algeria

4102: Egypt

4103: Libya

4104: Morocco

4105: Sudan

4106: Tunisia

4107: Western Sahara

4108: Spanish North Africa

4111: South Sudan

4201: Bahrain

4202: Gaza Strip and West Bank

4203: Iran

4204: Iraq

4205: Israel

4206: Jordan

4207: Kuwait

4208: Lebanon

4211: Oman

4212: Qatar

4213: Saudi Arabia

4214: Syria

4215: Turkey

4216: United Arab Emirates

4217: Yemen

5101: Myanmar

5102: Cambodia

5103: Laos

5104: Thailand

5105: Vietnam

5201: Brunei Darussalam

5202: Indonesia

5203: Malaysia

5204: Philippines

5205: Singapore

5206: Timor-Leste

6101: China (excludes SARs and Taiwan)

6102: Hong Kong (SAR of China)

6103: Macau (SAR of China)

6104: Mongolia

6105: Taiwan

6201: Japan

6202: Korea, Democratic People's Republic of (North)

6203: Korea, Republic of (South)

7101: Bangladesh

7102: Bhutan

7103: India

7104: Maldives

7105: Nepal

7106: Pakistan

7107: Sri Lanka

7201: Afghanistan

7202: Armenia

7203: Azerbaijan

7204: Georgia

7205: Kazakhstan

7206: Kyrgyzstan

7207: Tajikistan

7208: Turkmenistan

7211: Uzbekistan

8101: Bermuda

8102: Canada

8103: St Pierre and Miquelon

8104: United States of America

8201: Argentina

8202: Bolivia

8203: Brazil

8204: Chile

8205: Colombia

8206: Ecuador

8207: Falkland Islands

8208: French Guiana

8211: Guyana

8212: Paraguay

8213: Peru

8214: Suriname

8215: Uruguay

8216: Venezuela

8299: South America, nec

8301: Belize

8302: Costa Rica

8303: El Salvador

8304: Guatemala

8305: Honduras

8306: Mexico

8307: Nicaragua

8308: Panama

8401: Anguilla

8402: Antigua and Barbuda

8403: Aruba

8404: Bahamas

8405: Barbados

8406: Cayman Islands

8407: Cuba

8408: Dominica

8411: Dominican Republic

8412: Grenada

8413: Guadeloupe

8414: Haiti

8415: Jamaica

8416: Martinique

8417: Montserrat

8421: Puerto Rico

8422: St Kitts and Nevis

8423: St Lucia

8424: St Vincent and the Grenadines

8425: Trinidad and Tobago

8426: Turks and Caicos Islands

8427: Virgin Islands, British

8428: Virgin Islands, United States

8431: St Barthelemy

8432: St Martin (French part)

8433: Bonaire, Sint Eustatius and Saba

8434: Curacao

8435: Sint Maarten (Dutch part)

9101: Benin

9102: Burkina Faso

9103: Cameroon

9104: Cabo Verde

9105: Central African Republic

9106: Chad

9107: Congo, Republic of

9108: Congo, Democratic Republic of

9111: Cote d'Ivoire

9112: Equatorial Guinea

9113: Gabon

9114: Gambia

9115: Ghana

9116: Guinea

9117: Guinea-Bissau

9118: Liberia

9121: Mali

9122: Mauritania

9123: Niger

9124: Nigeria

9125: Sao Tome and Principe

9126: Senegal

9127: Sierra Leone

9128: Togo

9201: Angola

9202: Botswana

9203: Burundi

9204: Comoros

9205: Djibouti

9206: Eritrea

9207: Ethiopia

9208: Kenya

9211: Lesotho

9212: Madagascar

9213: Malawi

9214: Mauritius

9215: Mayotte

9216: Mozambique

9217: Namibia

9218: Reunion

9221: Rwanda

9222: St Helena

9223: Seychelles

9224: Somalia

9225: South Africa

9226: Swaziland

9227: Tanzania

9228: Uganda

9231: Zambia

9232: Zimbabwe

9299: Southern and East Africa, nec

9999: Unknown

Notes:	Standard Australian Classification of Countries (SACC), 2016 4-digit code (ABS Catalogue No. 1269.0) SACC 2016 is a four-digit, three-level hierarchical structure specifying major group, minor group and country. 9999 is used when the information is not known or the client has refused to provide the information. Organisations are encouraged to produce customised lists of the most common languages in use by their local populations from the above resource. Please refer to Country of Birth for help on designing forms.
METeOR:	459973
ABS:	http://www.abs.gov.au/ausstats/abs@.nsf/mf/1269.0

3.4.3. Client - Date of Birth

The date on which an individual was born.

Field name: date_of_birth

Data type: date

Required: yes

Notes:
- The date of birth must not be before January 1st 1900.
- The date of birth must not be in the future.
- If the date of birth is unknown, the following approaches should be used:
  - If the age of the person is known, the age should be used to derive the year of birth
  - If the age of the person is unknown, an estimated age of the person should be used to estimate a year of birth
  - An actual or estimated year of birth should then be converted into an estimated date of birth using the following convention: 0101Estimated year of birth.
  - If the date of birth is totally unknown, use 09099999.
  - If you have estimated the year of birth make sure you record this in the 'Estimated date of birth flag'

METeOR: 287007

3.4.4. Client - Estimated Date of Birth Flag

The date of birth estimate flag records whether or not the client's date of birth has been estimated.

Field name: est_date_of_birth

Data type: string

Required: yes

Domain:
- **1:** Date of birth is accurate
- **2:** Date of birth is an estimate
- **8:** Date of birth is a 'dummy' date (ie, 09099999)
- **9:** Accuracy of stated date of birth is not known

3.4.5. Client - Gender

The term 'gender' refers to the way in which a person identifies their masculine or feminine characteristics. A persons gender relates to their deeply held internal and individual sense of gender and is not always exclusively male or female. It may or may not correspond to their sex assigned at birth.

Field name:	client_gender
Data type:	string
Required:	yes
Domain:	**0:** Not stated/Inadequately described **1:** Male **2:** Female **3:** Other
Notes:	**1 - M - Male** Adults who identify themselves as men, and children who identify themselves as boys. **2 - F - Female** Adults who identify themselves as women, and children who identify themselves as girls. **3 - X- Other** Adults and children who identify as non-binary, gender diverse, or with descriptors other than man/boy or
ABS:	http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/ 1200.0.55.012Main%20Features12016?opendocument&tabname=Summary&prodno=1200.0.55.012&issue=2

3.4.6. Client Key

This is a number or code assigned to each individual referred to the commissioned organisation. The client identifier is unique and stable for each individual within the PHN.

Field name:	client_key
Data type:	string (2,50)
Required:	yes
Notes:	Client keys must be unique within each PHN independent of the treating organisation. It is the responsibility of PHNs and Provider Organisations to co-ordinate to maintain this identifier. Clients should not be assigned multiple keys within the same PHN. Client keys are case sensitive and must be valid unicode characters.

3.4.7. Client - Main Language Spoken at Home

The language reported by a client as the main language other than English spoken by that client in his/her home (or most recent private residential setting occupied by the client) to communicate with other residents of the home or setting and regular visitors, as represented by a code.

Field name: main_lang_at_home

Data type: string (4)

Required: yes

Domain:

1101: Gaelic (Scotland)

1102: Irish

1103: Welsh

1199: Celtic, nec

1201: English

1301: German

1302: Letzeburgish

1303: Yiddish

1401: Dutch

1402: Frisian

1403: Afrikaans

1501: Danish

1502: Icelandic

1503: Norwegian

1504: Swedish

1599: Scandinavian, nec

1601: Estonian

1602: Finnish

1699: Finnish and Related Languages, nec

2101: French

2201: Greek

2301: Catalan

2302: Portuguese

2303: Spanish

2399: Iberian Romance, nec

2401: Italian

2501: Maltese

2901: Basque

2902: Latin

2999: Other Southern European Languages, nec

3101: Latvian

3102: Lithuanian

3301: Hungarian

3401: Belorussian

3402: Russian

3403: Ukrainian

3501: Bosnian

3502: Bulgarian

3503: Croatian

3504: Macedonian

3505: Serbian

3506: Slovene

3507: Serbo-Croatian/Yugoslavian, so described

3601: Czech

3602: Polish

3603: Slovak

3604: Czechoslovakian, so described

3901: Albanian

3903: Aromunian (Macedo-Romanian)

3904: Romanian

3905: Romany

3999: Other Eastern European Languages, nec

4101: Kurdish

4102: Pashto

4104: Balochi

4105: Dari

4106: Persian (excluding Dari)

4107: Hazaraghi

4199: Iranic, nec

4202: Arabic

4204: Hebrew

4206: Assyrian Neo-Aramaic

4207: Chaldean Neo-Aramaic

4208: Mandaean (Mandaic)

4299: Middle Eastern Semitic Languages, nec

4301: Turkish

4302:	Azeri
4303:	Tatar
4304:	Turkmen
4305:	Uygur
4306:	Uzbek
4399:	Turkic, nec
4901:	Armenian
4902:	Georgian
4999:	Other Southwest and Central Asian Languages, nec
5101:	Kannada
5102:	Malayalam
5103:	Tamil
5104:	Telugu
5105:	Tulu
5199:	Dravidian, nec
5201:	Bengali
5202:	Gujarati
5203:	Hindi
5204:	Konkani
5205:	Marathi
5206:	Nepali
5207:	Punjabi
5208:	Sindhi
5211:	Sinhalese
5212:	Urdu
5213:	Assamese
5214:	Dhivehi
5215:	Kashmiri
5216:	Oriya
5217:	Fijian Hindustani
5299:	Indo-Aryan, nec
5999:	Other Southern Asian Languages
6101:	Burmese

6102: Chin Haka

6103: Karen

6104: Rohingya

6105: Zomi

6199: Burmese and Related Languages, nec

6201: Hmong

6299: Hmong-Mien, nec

6301: Khmer

6302: Vietnamese

6303: Mon

6399: Mon-Khmer, nec

6401: Lao

6402: Thai

6499: Tai, nec

6501: Bisaya

6502: Cebuano

6503: Ilokano

6504: Indonesian

6505: Malay

6507: Tetum

6508: Timorese

6511: Tagalog

6512: Filipino

6513: Acehnese

6514: Balinese

6515: Bikol

6516: Iban

6517: Ilonggo (Hiligaynon)

6518: Javanese

6521: Pampangan

6599: Southeast Asian Austronesian Languages, nec

6999: Other Southeast Asian Languages

7101: Cantonese

7102: Hakka

7104: Mandarin

7106: Wu

7107: Min Nan

7199: Chinese, nec

7201: Japanese

7301: Korean

7901: Tibetan

7902: Mongolian

7999: Other Eastern Asian Languages, nec

8101: Anindilyakwa

8111: Maung

8113: Ngan'gikurunggurr

8114: Nunggubuyu

8115: Rembarrnga

8117: Tiwi

8121: Alawa

8122: Dalabon

8123: Gudanji

8127: Iwaidja

8128: Jaminjung

8131: Jawoyn

8132: Jingulu

8133: Kunbarlang

8136: Larrakiya

8137: Malak Malak

8138: Mangarrayi

8141: Maringarr

8142: Marra

8143: Marrithiyel

8144: Matngala

8146: Murrinh Patha

8147: Na-kara

8148: Ndjebbana (Gunavidji)

8151: Ngalakgan

8152: Ngaliwurru

8153: Nungali

8154: Wambaya

8155: Wardaman

8156: Amurdak

8157: Garrwa

8158: Kuwema

8161: Marramaninyshi

8162: Ngandi

8163: Waanyi

8164: Wagiman

8165: Yanyuwa

8166: Marridan (Maridan)

8171: Gundjeihmi

8172: Kune

8173: Kuninjku

8174: Kunwinjku

8175: Mayali

8179: Kunwinjkuan, nec

8181: Burarra

8182: Gun-nartpa

8183: Gurr-goni

8189: Burarran, nec

8199: Arnhem Land and Daly River Region Languages, nec

8211: Galpu

8212: Golumala

8213: Wangurri

8219: Dhangu, nec

8221: Dhalwangu

8222: Djarrwark

8229: Dhay'yi, nec

8231: Djambarrpuyngu

8232: Djapu

8233: Daatiwuy

8234: Marrangu

8235: Liyagalawumirr

8236: Liyagawumirr

8239: Dhuwal, nec

8242: Gumatj

8243: Gupapuyngu

8244: Guyamirrilili

8246: Manggalili

8247: Wubulkarra

8249: Dhuwala, nec

8251: Wurlaki

8259: Djinang, nec

8261: Ganalbingu

8262: Djinba

8263: Manyjalpingu

8269: Djinba, nec

8271: Ritharrngu

8272: Wagilak

8279: Yakuy, nec

8281: Nhangu

8282: Yan-nhangu

8289: Nhangu, nec

8291: Dhuwaya

8292: Djangu

8293: Madarrpa

8294: Warramiri

8295: Rirratjingu

8299: Other Yolngu Matha, nec

8301: Kuku Yalanji

8302: Guugu Yimidhirr

8303: Kuuku-Ya'u

8304: Wik Mungkan

8305: Djabugay

8306: Dyirbal

8307: Girramay

8308: Koko-Bera

8311: Kuuk Thayorre

8312: Lamalama

8313: Yidiny

8314: Wik Ngathan

8315: Alngith

8316: Kugu Muminh

8317: Morrobalama

8318: Thaynakwith

8321: Yupangathi

8322: Tjungundji

8399: Cape York Peninsula Languages, nec

8401: Kalaw Kawaw Ya/Kalaw Lagaw Ya

8402: Meriam Mir

8403: Yumplatok (Torres Strait Creole)

8504: Bilinarra

8505: Gurindji

8506: Gurindji Kriol

8507: Jaru

8508: Light Warlpiri

8511: Malngin

8512: Mudburra

8514: Ngardi

8515: Ngarinyman

8516: Walmajarri

8517: Wanyjirra

8518: Warlmanpa

8521: Warlpiri

8522: Warumungu

8599: Northern Desert Fringe Area Languages, nec

8603: Alyawarr

8606: Kaytetye

8607: Antekerrepenh

8611: Central Anmatyerr

8612: Eastern Anmatyerr

8619: Anmatyerr, nec

8621: Eastern Arrernte

8622: Western Arrarnta

8629: Arrernte, nec

8699: Arandic, nec

8703: Antikarinya

8704: Kartujarra

8705: Kukatha

8706: Kukatja

8707: Luritja

8708: Manyjilyjarra

8711: Martu Wangka

8712: Ngaanyatjarra

8713: Pintupi

8714: Pitjantjatjara

8715: Wangkajunga

8716: Wangkatha

8717: Warnman

8718: Yankunytjatjara

8721: Yulparija

8722: Tjupany

8799: Western Desert Languages, nec

8801: Bardi

8802: Bunuba

8803: Gooniyandi

8804: Miriwoong

8805: Ngarinyin

8806: Nyikina

8807: Worla

8808: Worrorra

8811: Wunambal

8812: Yawuru

8813: Gambera

8814: Jawi

8815: Kija

8899: Kimberley Area Languages, nec

8901: Adnymathanha

8902: Arabana

8903: Bandjalang

8904: Banyjima

8905: Batjala

8906: Bidjara

8907: Dhanggatti

8908: Diyari

8911: Gamilaraay

8913: Garuwali

8914: Githabul

8915: Gumbaynggir

8916: Kanai

8917: Karajarri

8918: Kariyarra

8921: Kaurna

8922: Kayardild

8924: Kriol

8925: Lardil

8926: Mangala

8927: Muruwari

8928: Narungga

8931: Ngarluma

8932: Ngarrindjeri

8933: Nyamal

8934: Nyangumarta

8935: Nyungar

8936: Paakantyi

8937: Palyku/Nyiyaparli

8938: Wajarri

8941: Wiradjuri

8943: Yindjibarndi

8944: Yinhawangka

8945: Yorta Yorta

8946: Baanbay

8947: Badimaya

8948: Barababaraba

8951: Dadi Dadi

8952: Dharawal

8953: Djabwurrung

8954: Gudjal

8955: Keerray-Woorroong

8956: Ladji Ladji

8957: Mirning

8958: Ngatjumaya

8961: Waluwarra

8962: Wangkangurru

8963: Wargamay

8964: Wergaia

8965: Yugambeh

8998: Aboriginal English, so described

8999: Other Australian Indigenous Languages, nec

9101: American Languages

9201: Acholi

9203: Akan

9205: Mauritian Creole

9206:	Oromo
9207:	Shona
9208:	Somali
9211:	Swahili
9212:	Yoruba
9213:	Zulu
9214:	Amharic
9215:	Bemba
9216:	Dinka
9217:	Ewe
9218:	Ga
9221:	Harari
9222:	Hausa
9223:	Igbo
9224:	Kikuyu
9225:	Krio
9226:	Luganda
9227:	Luo
9228:	Ndebele
9231:	Nuer
9232:	Nyanja (Chichewa)
9233:	Shilluk
9234:	Tigre
9235:	Tigrinya
9236:	Tswana
9237:	Xhosa
9238:	Seychelles Creole
9241:	Anuak
9242:	Bari
9243:	Bassa
9244:	Dan (Gio-Dan)
9245:	Fulfulde
9246:	Kinyarwanda (Rwanda)

9247: Kirundi (Rundi)

9248: Kpelle

9251: Krahn

9252: Liberian (Liberian English)

9253: Loma (Lorma)

9254: Lumun (Kuku Lumun)

9255: Madi

9256: Mandinka

9257: Mann

9258: Moro (Nuba Moro)

9261: Themne

9262: Lingala

9299: African Languages, nec

9301: Fijian

9302: Gilbertese

9303: Maori (Cook Island)

9304: Maori (New Zealand)

9306: Nauruan

9307: Niue

9308: Samoan

9311: Tongan

9312: Rotuman

9313: Tokelauan

9314: Tuvaluan

9315: Yapese

9399: Pacific Austronesian Languages, nec

9402: Bislama

9403: Hawaiian English

9404: Norf'k-Pitcairn

9405: Solomon Islands Pijin

9499: Oceanian Pidgins and Creoles, nec

9502: Kiwai

9503: Motu (HiriMotu)

9504: Tok Pisin (Neomelanesian)

9599: Papua New Guinea Languages, nec

9601: Invented Languages

9701: Auslan

9702: Key Word Sign Australia

9799: Sign Languages, nec

9999: Unknown

Notes: Australian Standard Classification of Languages (ASCL), 2016 4-digit code (ABS Catalogue No. 1267.0) or 9999 if info is not known or client refuses to supply.

The ABS recommends the following question in order to collect this data: Which language does the client mainly speak at home? (If more than one language, indicate the one that is spoken most often.)

Organisations are encouraged to produce customised lists of the most common countries based on their local populations from the above resource. Please refer to Main Language Spoken at Home for help on designing forms.

METeOR: 460125

ABS: http://www.abs.gov.au/ausstats/abs@.nsf/mf/1267.0

3.4.8. Client - Proficiency in Spoken English

The self-assessed level of ability to speak English, asked of people whose first language is a language other than English or who speak a language other than English at home.

Field name: prof_english

Data type: string

Required: yes

Domain:

0: Not applicable (persons under 5 years of age or who speak only English)

1: Very well

2: Well

3: Not well

4: Not at all

9: Not stated/inadequately described

0 - Not applicable (persons under 5 years of age or who speak only English)
Not applicable, is to be used for people under 5 years of age and people who speak only English.

9 - Not stated/inadequately described
Not stated/inadequately described, is not to be used on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.

METeOR: 270203

3.4.9. Client - Statistical Linkage Key

A key that enables two or more records belonging to the same individual to be brought together.

Field name: slk

Data type: string (14,40)

Required: yes

System generated non-identifiable alphanumeric code derived from information held by the PMHC organisation.

Supported formats:

- 14 character SLK

- a Crockford encoded sha1 hash of a 14 character SLK. This must be 32 characters in length.

- a hex encoded sha1 hash of a 14 character SLK. This must be 40 characters in length.

Notes:

SLK values are stored in sha1_hex format.

METeOR: 349510

3.4.10. Client - Tags

List of tags for the client.

Field name: client_tags

Data type: string

Required: no

A comma separated list of tags.

Organisations can use this field to tag records in order to partition them as per local requirements.

Notes: Tags can contain lower case letters (or will get lowercased), numbers, dashes, spaces, and `!` . Leading and trailing spaces will be stripped. e.g. `priority!, nurse required, pending-outcome-1` would all be legitimate.

Tags beginning with an exclamation mark (!) are reserved for future use by the Department. e.g. `!reserved, ! reserved, !department-use-only` .

3.4.11. Collection Occasion - Measure Date

The date the measure was given.

Field name: measure_date

Data type: date

Required: yes

For Date fields, data must be recorded in compliance with the standard format used across the National Health Data Dictionary; specifically, dates must be of fixed 8 column width in the format DDMMYYYY, with leading zeros used when necessary to pad out a value. For instance, 13th March 2008 would appear as 13032008.

If the date the measure was given is unknown, 09099999 should be used.

Notes:

- The measure date must not be before 1st January 2016.
- The measure date must not be before Episode - Referral Date
- The measure date must not be after Episode - End Date
- The measure date must not be in the future.

3.4.12. Collection Occasion - Reason

The reason for the collection of the outcome measures on the identified Outcome Collection Occasion.

Field name: reason_for_collection

Data type: string

Required: yes

Domain:	**1:**	Episode start
	2:	Review
	3:	Episode end

Notes:

1 - Episode start
Refers to an outcome measure undertaken at the beginning of an Episode of Care. For the purposes of the PMHC MDS protocol, episodes may start at the point of first Service Contact with a new client who has not been seen previously by the organisation, or a first contact for a new Episode of Care for a client who has received services from the organisation in a previous Episode of Care that has been completed.

2 - Review
Refers to an outcome measure undertaken during the course of an Episode of Care that post-dates Episode Start and pre-dates Episode End. An outcome measure may be undertaken at Review for a number of reasons including:

- in response to critical clinical events or changes in the client's mental health status;
- following a client-requested review; or
- other situations where a review may be indicated.

3 - Episode end
Refers to the outcome measures collected at the end of an Episode of Care.

3.4.13. Collection Occasion Key

This is a number or code assigned to each collection occasion of outcome measures. The Collection Occasion Key is unique and stable for each collection occasion at the level of the organisation.

Field name:	collection_occasion_key
Data type:	string (2,50)
Required:	yes
Notes:	Collection occasion keys are case sensitive and must be valid unicode characters.

3.4.14. Episode - Additional Diagnosis

The main additional condition or complaint co-existing with the Principal Diagnosis or arising during the episode of care.

Field name:	additional_diagnosis
Data type:	string
Required:	yes

Domain:

000:	No additional diagnosis
100:	Anxiety disorders (ATAPS)
101:	Panic disorder
102:	Agoraphobia
103:	Social phobia
104:	Generalised anxiety disorder
105:	Obsessive-compulsive disorder
106:	Post-traumatic stress disorder
107:	Acute stress disorder
108:	Other anxiety disorder
200:	Affective (Mood) disorders (ATAPS)
201:	Major depressive disorder
202:	Dysthymia
203:	Depressive disorder NOS
204:	Bipolar disorder
205:	Cyclothymic disorder
206:	Other affective disorder
300:	Substance use disorders (ATAPS)
301:	Alcohol harmful use
302:	Alcohol dependence
303:	Other drug harmful use
304:	Other drug dependence
305:	Other substance use disorder
400:	Psychotic disorders (ATAPS)
401:	Schizophrenia
402:	Schizoaffective disorder
403:	Brief psychotic disorder
404:	Other psychotic disorder
501:	Separation anxiety disorder
502:	Attention deficit hyperactivity disorder (ADHD)
503:	Conduct disorder
504:	Oppositional defiant disorder
505:	Pervasive developmental disorder

506:	Other disorder of childhood and adolescence
601:	Adjustment disorder
602:	Eating disorder
603:	Somatoform disorder
604:	Personality disorder
605:	Other mental disorder
901:	Anxiety symptoms
902:	Depressive symptoms
903:	Mixed anxiety and depressive symptoms
904:	Stress related
905:	Other
999:	Missing

Additional Diagnosis gives information on conditions that are significant in terms of treatment required and resources used during the episode of care. Additional diagnoses should be interpreted as conditions that affect client management in terms of requiring any of the following:

- Commencement, alteration or adjustment of therapeutic treatment
- Diagnostic procedures
- Increased clinical care and/or monitoring

Where the client one or more comorbid mental health conditions in addition to the condition coded as the Principal Diagnosis, record the main condition as the Additional Diagnosis.

The following responses have been added to allow mapping of ATAPS data to PMHC format.

Notes:
- 100: Anxiety disorders (ATAPS)
- 200: Affective (Mood) disorders (ATAPS)
- 300: Substance use disorders (ATAPS)
- 400: Psychotic disorders (ATAPS)

Note: These four codes should only be used for Episodes that are migrated from ATAPS MDS sources that cannot be described by any other Diagnosis. It is expected that the majority of Episodes delivered to clients from 1st July, 2017 can be assigned to other diagnoses.

These responses will only be allowed on episodes where the original ATAPS referral date was before 1 July 2017

These responses will only be allowed on episodes with the !ATAPS flag.

For further notes on the recording of diagnosis codes see Principal Diagnosis.

3.4.15. Episode - Area of usual residence, postcode

The Australian postcode of the client.

Field name:	client_postcode
Data type:	string
Required:	yes
	A valid Australian postcode or 9999 if the postcode is unknown or the client has not provided sufficient information to confirm their current residential address.
	The full list of Australian Postcodes can be found at Australia Post.
Notes:	When collecting the postcode of a person's usual place of residence, the ABS recommends that 'usual' be defined as: 'the place where the person has or intends to live for 6 months or more, or the place that the person regards as their main residence, or where the person has no other residence, the place they currently reside.'
	Postcodes are deemed valid if they are in the range 0200-0299, 0800-9999.
METeOR:	429894

3.4.16. Episode - Client Consent to Anonymised Data

An indication that the client has consented to their anonymised data being provided to the Department of Health for statistical purposes in planning and improving mental health services.

Field name:	client_consent	
Data type:	string	
Required:	yes	
	1:	Yes
Domain:	**2:**	No

1 - Yes
> The client has consented to their anonymised data being provided to the Department of Health for statistical purposes in planning and improving mental health services. The client's data will be included in reports and extracts accessible by the Department of Health.

2 - No
> The client has not consented to their anonymised data being provided to the Department of Health for statistical purposes in planning and improving mental health services. The client's data will be excluded from reports and extracts accessible by the Department of Health.

Notes:

All data can be uploaded, regardless of consent flag.

All data will be available to PHNs to extract for their own internal data evaluation purposes.

3.4.17. Episode - Completion Status

An indication of the completion status of an *Episode of Care*.

Field name: episode_completion_status

Data type: string

Required: no

Domain:

0:	Episode open
1:	Episode closed - treatment concluded
2:	Episode closed administratively - client could not be contacted
3:	Episode closed administratively - client declined further contact
4:	Episode closed administratively - client moved out of area
5:	Episode closed administratively - client referred elsewhere
6:	Episode closed administratively - other reason

In order to use code 1 (Episode closed - treatment concluded) the client must have at least one service contact. All other codes may be applicable even when the client has no service contacts.

0 or Blank - Episode open
   The client still requires treatment and further service contacts are required.

1 - Episode closed - treatment concluded
   No further service contacts are planned as the client no longer requires treatment.

2 - Episode closed administratively - client could not be contacted
   Further service contacts were planned but the client could no longer be contacted.

3 - Episode closed administratively - client declined further contact
   Further service contacts were planned but the client declined further treatment.

4 - Episode closed administratively - client moved out of area
   Further service contacts were planned but the client moved out of the area without a referral elsewhere. Where a client was referred somewhere else *Episode Completion Status* should be recorded as code 5 (Episode closed administratively - client referred elsewhere).

5 - Episode closed administratively - client referred elsewhere
   Where a client still requires treatment, but a different service has been deemed appropriate or a client has moved out of the area so has moved to a different provider.

Notes: **6 - Episode closed administratively - other reason**
   Where a client is no longer being given treatment but the reason for conclusion is not covered above.

Episode Completion Status interacts with two other data items in the PMHC MDS - *Service Contact - Final*, and *Episode End Date*.

Service Contact - Final
   Collection of data for *Service Contacts* includes a *Service Contact - Final* item that requires the service provider to indicate whether further Service Contacts are planned. Where this item is recorded as 'no further services planned', the *Episode Completion Status* should be recorded as code 1 (Episode closed - treatment concluded) code 3 (Episode closed administratively - client declined further contact), code 4 (Episode closed administratively - client moved out of area), or code 5 (Episode closed administratively - client referred elsewhere). Selection of coding option should be that which best describes the circumstances of the episode ending.

Episode End Date
   Where a Final Service Contact is recorded *Episode End Date* should be recorded as the date of the final Service Contact.

3.4.18. Episode - Continuity of Support

Is the client a Continuity of Support Client?

Field name:	continuity_of_support
Data type:	string
Required:	yes

Domain:

1: Yes

2: No

9: Not stated/inadequately described

Introduced 1 July 2019

Similar challenges to Psychosocial Support are faced with the Continuity of Support initiative. The important issues here are:

- The proposed changes to be made for the Psychosocial Support measure should accommodate most requirements for Continuity of Support clients.
- The one important difference is that CoS clients are a highly specific cohort – those currently in Commonwealth funded PIR, PHaMS and D2DL measures found to be ineligible for the NDIS. These clients should be readily identified.
- CoS clients need to have a marker in the PMHC MDS data that allows the cohort to be identified for separate reporting.

1 - Yes
The person was a client of the Personal Helpers and Mentors (PHaMs), Partners In recovery (PIR) and/or Day to Day Living (D2DL) programs and has been found to be ineligible for the National Disability Insurance Scheme (NDIS).

2 - No

Notes:

9 - Not stated/inadequately described

It is expected that most **new clients** recorded as CoS clients will have their episodes classified as Psychosocial Support.

For existing clients who have an active (not closed) episode of care who become CoS clients after 1 July 2019, there is no need to close the current episode. PHNs may however wish to change the Principal Focus of Treatment Plan to Psychosocial Support if this better reflects the overall episode goals. Alternatively, PHNs may choose to close the existing episode and commence a new episode. This decision can be made locally.

Services delivered under the new CoS arrangements should be coded as Psychosocial Support in the Service Contact Type field. This is not intended to restrict CoS clients to only Psychosocial Support services. Contact Types delivered to CoS clients can vary across the full range (e.g., they could receive psychological therapy-type service contacts). However, where services are delivered under the CoS arrangements it is essential that they be coded as Psychosocial Support contacts to enable monitoring and reporting of the new CoS measure.

As the new measure does not commence until 1 July 2019, all clients in active episodes prior to that date should be coded as 'No'. This will be implemented by Strategic Data in the PMHC MDS as a system-wide change for all existing clients in active episodes as at 30 June 2019. Changes made to those existing clients from 1 July 2019 can then be made locally.

3.4.19. Episode - Employment Participation

Whether a person in paid employment is employed full-time or part-time, as represented by a code.

Field name: employment_participation

Data type: string

Required: yes

Domain:

1: Full-time

2: Part-time

3: Not applicable - not in the labour force

9: Not stated/inadequately described

Notes:

Applies only to people whose labour force status is employed. (See metadata item Labour Force Status, for a definition of 'employed'). Paid employment includes persons who performed some work for wages or salary, in cash or in kind, and persons temporarily absent from a paid employment job but who retained a formal attachment to that job.

1 - Full-time
Employed persons are working full-time if they: (a) usually work 35 hours or more in a week (in all paid jobs) or (b) although usually working less than 35 hours a week, actually worked 35 hours or more during the reference period.

2 - Part-time
Employed persons are working part-time if they usually work less than 35 hours a week (in all paid jobs) and either did so during the reference period, or were not at work in the reference period.

9 - Not stated / inadequately described
Is not to be used on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.

METeOR: 269950

3.4.20. Episode - End Date

The date on which an *Episode of Care* is formally or administratively ended

Field name: episode_end_date

Data type: date

Required: no

- The episode end date must not be before 1st January 2016.
- The episode end date must not be in the future.

An *Episode of Care* may be ended in one of two ways:

- clinically, consequent upon conclusion of treatment for the client and discharge from care; or
- administratively (statistically), where contact with the client has been lost by the organisation prior to completion of treatment or other factors prevented treatment being completed.

Notes:

Episode End Date interacts with two other data items in the PMHC MDS - *Service Contact - Final*, and *Episode Completion Status*.

Service Contact - Final
Collection of data for *Service Contacts* includes a *Service Contact - Final* item that requires the service provider to indicate whether further *Service Contacts* are planned. Where this item is recorded as 'no further services planned', the date of the final *Service Contact* should be recorded as the *Episode End Date*.

Episode Completion Status
This field should be recorded as 'Episode closed treatment concluded' when a *Service Contact - Final* is recorded. The *Episode Completion Status* field can also be manually recorded to allow for administrative closure of episodes (e.g., contact has been lost with a client over a prolonged period - see *Episode Completion Status* for additional guidance). Where an episode is closed administratively, the *Episode End Date* should be recorded as the date on which the organisation made the decision to close episode.

METeOR: 614094

3.4.21. Episode - GP Mental Health Treatment Plan Flag

An indication of whether a client has a GP mental health treatment plan. A GP should be involved in a referral where appropriate however a mental health treatment plan is not mandatory.

Field name:	mental_health_treatment_plan
Data type:	string
Required:	yes
Domain:	1: Yes
	2: No
	3: Unknown
	9: Not stated/inadequately described

3.4.22. Episode - Health Care Card

An indication of whether the person is a current holder of a Health Care Card that entitles them to arrange of concessions for Government funded health services.

Field name:	health_care_card
Data type:	string
Required:	yes
Domain:	1: Yes 2: No 3: Not Known 9: Not stated
Notes:	Details on the Australian Government Health Care Card are available at: https://www.humanservices.gov.au/customer/services/centrelink/health-care-card
METeOR:	605149

3.4.23. Episode - Homelessness Flag

An indication of whether the client has been homeless in the 4 weeks prior to the current service episode.

Field name:	homelessness
Data type:	string
Required:	yes
Domain:	1: Sleeping rough or in non-conventional accommodation 2: Short-term or emergency accommodation 3: Not homeless 9: Not stated / Missing

1 - Sleeping rough or in non-conventional accommodation
Includes sleeping on the streets, in a park, in cars or railway carriages, under bridges or other similar 'rough' accommodation

2 - Short-term or emergency accommodation
Includes sleeping in short-term accommodation, emergency accommodation, due to a lack of other options. This may include refuges; crisis shelters; couch surfing; living temporarily with friends and relatives; insecure accommodation on a short term basis; emergency accommodation arranged in hotels, motels etc by a specialist homelessness agency.

3 - Not homeless
Includes sleeping in own accommodation/rental accommodation or living with friends or relatives on a stable, long term basis

Notes:
9 - Not stated / Missing
Not stated / Missing

Select the code that best fits the client's sleeping arrangements over the preceding 4 weeks. Where multiple options apply (e.g., client has experienced more than one of the sleeping arrangements over the previous 4 weeks) the following coding hierarchy should be followed:

- If code 1 applied at any time over the 4 week period, code 1
- If code 2 but not code 1 applied at any time over the 4 week period, code 2
- Otherwise Code 3 applies

3.4.24. Episode Key

This is a number or code assigned to each episode. The Episode Key is unique and stable for each episode at the level of the organisation.

Field name: episode_key

Data type: string (2,50)

Required: yes

Notes:
Episode Keys must be generated by the organisation to be unique at the provider organisation level and must persist across time. Creation of episode keys in this way allows clients to be merged (where duplicate Client Keys have been identified) without having to re-allocate episode identifiers since they can never clash.

Episode Keys are case sensitive and must be valid unicode characters.

A recommended approach for the creation of Episode Keys is to compute random UUIDs.

3.4.25. Episode - Labour Force Status

The self-reported status the person currently has in being either in the labour force (employed/unemployed) or not in the labour force, as represented by a code.

Field name: labour_force_status

Data type: string

Required: yes

Domain:

1:   Employed

2:   Unemployed

3:   Not in the Labour Force

9:   Not stated/inadequately described

1 - Employed
Employed persons are those aged 15 years and over who met one of the following criteria during the reference week:

- Worked for one hour or more for pay, profit, commission or payment in kind, in a job or business or son a farm (employees and owner managers of incorporated or unincorporated enterprises).

- Worked for one hour or more without pay in a family business or on a farm (contributing family workers).

- Were employees who had a job but were not at work and were:
    - away from work for less than four weeks up to the end of the reference week; or
    - away from work for more than four weeks up to the end of the reference week and
    - received pay for some or all of the four week period to the end of the reference week; or
    - away from work as a standard work or shift arrangement; or
    - on strike or locked out; or
    - on workers' compensation and expected to return to their job.

- Were owner managers who had a job, business or farm, but were not at work.

2 - Unemployed
Unemployed persons are those aged 15 years and over who were not employed during the reference week, and:

- had actively looked for full time or part time work at any time in the four weeks up to the end of the reference week and were available for work in the reference week; or
- were waiting to start a new job within four weeks from the end of the reference week and could have started in the reference week if the job had been available then.

Actively looked for work includes:

- written, telephoned or applied to an employer for work;
- had an interview with an employer for work;
- answered an advertisement for a job;
- checked or registered with a Job Services Australia provider or any other employment agency;
- taken steps to purchase or start your own business;
- advertised or tendered for work; and
- contacted friends or relatives in order to obtain work.

3 - Not in the labour force
Persons not in the labour force are those aged 15 years and over who were not in the categories employed or unemployed, as defined, during the reference week. They include people who undertook unpaid household duties or other voluntary work only, were retired, voluntarily inactive and those permanently unable to work.

9 - Not stated/inadequately described
Includes children under 15 (0-14 years)

Notes:

METeOR: 621450

3.4.26. Episode - Marital Status

A person's current relationship status in terms of a couple relationship or, for those not in a couple relationship, the existence of a current or previous registered marriage, as represented by a code.

Field name:	marital_status
Data type:	string
Required:	yes
Domain:	1: Never married
	2: Widowed
	3: Divorced
	4: Separated
	5: Married (registered and de facto)
	6: Not stated/inadequately described
Notes:	Refers to the current marital status of a person.
	2 - Widowed This code usually refers to registered marriages but when self-reported may also refer to de facto marriages.
	4 - Separated This code refers to registered marriages but when self-reported may also refer to de facto marriages.
	5 - Married (registered and de facto) Includes people who have been divorced or widowed but have since re-married, and should be generally accepted as applicable to all de facto couples, including of the same sex.
	6 - Not stated/inadequately described This code is not for use on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.
METeOR:	291045

3.4.27. Episode - Medication - Antidepressants (N06A)

Whether the client is taking prescribed antidepressants for a mental health condition as assessed at intake assessment, as represented by a code.

Field name:	medication_antidepressants
Data type:	string
Required:	yes

Domain:	**1:** Yes
	2: No
	9: Unknown

Notes: The N06A class of drugs a therapeutic subgroup of the Anatomical Therapeutic Chemical Classification System, a system of alphanumeric codes developed by the World Health Organisation (WHO) for the classification of drugs and other medical products. It covers drugs designed for the depressive disorders.

Details of drugs included in the category can be found here: http://www.whocc.no/atc_ddd_index/?code=N06A

3.4.28. Episode - Medication - Antipsychotics (N05A)

Whether the client is taking prescribed antipsychotics for a mental health condition as assessed at intake assessment, as represented by a code.

Field name: medication_antipsychotics

Data type: string

Required: yes

Domain:	**1:** Yes
	2: No
	9: Unknown

Notes: The N05A class of drugs a therapeutic subgroup of the Anatomical Therapeutic Chemical Classification System, a system of alphanumeric codes developed by the World Health Organisation (WHO) for the classification of drugs and other medical products. It covers drugs designed for the treatment of psychotic disorders.

Details of drugs included in the category can be found here: http://www.whocc.no/atc_ddd_index/?code=N05A

3.4.29. Episode - Medication - Anxiolytics (N05B)

Whether the client is taking prescribed anxiolytics for a mental health condition as assessed at intake assessment, as represented by a code.

Field name: medication_anxiolytics

Data type: string

Required:	yes
Domain:	1: Yes
	2: No
	9: Unknown

Notes:	The N05B class of drugs a therapeutic subgroup of the Anatomical Therapeutic Chemical Classification System, a system of alphanumeric codes developed by the World Health Organisation (WHO) for the classification of drugs and other medical products. It covers drugs designed for the treatment of disorders associated with anxiety and tension.
	Details of drugs included in the category can be found here: http://www.whocc.no/atc_ddd_index/?code=N05B

3.4.30. Episode - Medication - Hypnotics and sedatives (N05C)

Whether the client is taking prescribed hypnotics and sedatives for a mental health condition as assessed at intake assessment, as represented by a code.

Field name:	medication_hypnotics
Data type:	string
Required:	yes
Domain:	1: Yes
	2: No
	9: Unknown

Notes:	The N05C class of drugs a therapeutic subgroup of the Anatomical Therapeutic Chemical Classification System, a system of alphanumeric codes developed by the World Health Organisation (WHO) for the classification of drugs and other medical products. It covers drugs designed to have mainly sedative or hypnotic actions. Hypnotic drugs are used to induce sleep and treat severe insomnia. Sedative drugs are prescribed to reduce excitability or anxiety.
	Details of drugs included in the category can be found here: http://www.whocc.no/atc_ddd_index/?code=N05C

3.4.31. Episode - Medication - Psychostimulants and nootropics (N06B)

Whether the client is taking prescribed psychostimulants and nootropics for a mental health condition as assessed at intake assessment, as represented by a code.

Field name:	medication_psychostimulants
Data type:	string
Required:	yes
Domain:	**1:** Yes **2:** No **9:** Unknown
Notes:	The N06B class of drugs a therapeutic subgroup of the Anatomical Therapeutic Chemical Classification System, a system of alphanumeric codes developed by the World Health Organisation (WHO) for the classification of drugs and other medical products. It covers drugs designed to attention-deficit hyperactivity disorder (ADHD) and to improve impaired cognitive abilities. Details of drugs included in the category can be found here: http://www.whocc.no/atc_ddd_index/?code=N06B

3.4.32. Episode - NDIS Participant

Is the client a participant in the National Disability Insurance Scheme?, as represented by a code.

Field name:	ndis_participant
Data type:	string
Required:	yes
Domain:	**1:** Yes **2:** No **9:** Not stated/inadequately described

3.4.33. Episode - Principal Diagnosis

The Principal Diagnosis is the diagnosis established after study to be chiefly responsible for occasioning the client's care during the current Episode of Care.

Field name:	principal_diagnosis
Data type:	string
Required:	yes

Domain:

100: Anxiety disorders (ATAPS)

101: Panic disorder

102: Agoraphobia

103: Social phobia

104: Generalised anxiety disorder

105: Obsessive-compulsive disorder

106: Post-traumatic stress disorder

107: Acute stress disorder

108: Other anxiety disorder

200: Affective (Mood) disorders (ATAPS)

201: Major depressive disorder

202: Dysthymia

203: Depressive disorder NOS

204: Bipolar disorder

205: Cyclothymic disorder

206: Other affective disorder

300: Substance use disorders (ATAPS)

301: Alcohol harmful use

302: Alcohol dependence

303: Other drug harmful use

304: Other drug dependence

305: Other substance use disorder

400: Psychotic disorders (ATAPS)

401: Schizophrenia

402: Schizoaffective disorder

403: Brief psychotic disorder

404: Other psychotic disorder

501: Separation anxiety disorder

502: Attention deficit hyperactivity disorder (ADHD)

503: Conduct disorder

504: Oppositional defiant disorder

505: Pervasive developmental disorder

506: Other disorder of childhood and adolescence

601: Adjustment disorder

602: Eating disorder

603: Somatoform disorder

604: Personality disorder

605: Other mental disorder

901: Anxiety symptoms

902: Depressive symptoms

903: Mixed anxiety and depressive symptoms

904: Stress related

905: Other

999: Missing

Diagnoses are grouped into 8 major categories (9 for Additional Diagnosis):

- 000 - No additional diagnosis (Additional Diagnosis only)
- 1xx - Anxiety disorders
- 2xx - Affective (Mood) disorders
- 3xx - Substance use disorders
- 4xx - Psychotic disorders
- 5xx - Disorders with onset usually occurring in childhood and adolescence not listed elsewhere
- 6xx - Other mental disorders
- 9xx except 999 - No formal mental disorder but subsyndromal problems
- 999 - Missing or Unknown

Notes:

The Principal Diagnosis should be determined by the treating or supervising clinical practitioner who is responsible for providing, or overseeing, services delivered to the client during their current episode of care. Each episode of care must have a Principal Diagnosis recorded and may have an Additional Diagnoses. In some instances the client's Principal Diagnosis may not be clear at initial contact and require a period of contact before a reliable diagnosis can be made. If a client has more than one diagnosis, the Principal Diagnosis should reflect the main presenting problem. Any secondary diagnosis should be recorded under the Additional Diagnosis field.

The coding options developed for the PMHC MDS have been selected to balance comprehensiveness and brevity. They comprise a mix of the most prevalent mental disorders in the Australian adult, child and adolescent population, supplemented by less prevalent conditions that may be experienced by clients of PHN-commissioned mental health services. The diagnosis options are based on an abbreviated set of clinical terms and groupings specified in the Diagnostic and Statistical Manual of Mental Disorders Fourth Edition (DSM-IV-TR). These code list summarises the approximate 300 unique mental health disorder codes in the full DSM-IV to a set to 9 major categories, and 37 individual codes. Diagnoses are grouped under higher level categories, based on the DSM-IV. Code numbers have been assigned specifically for the PMHC MDS to create a logical ordering but are capable of being mapped to both DSM-IV and ICD-10 codes.

Options for recording Principal Diagnosis include the broad category 'No formal mental disorder but subsyndromal problems' (codes commencing with 9). These codes should be used for clients who present with problems that do not meet threshold criteria for a formal diagnosis - for example, people experiencing subsyndromal symptoms who may be at risk of progressing to a more severe symptom level.

Each category has a final entry for capturing other conditions that don't meet the more specific entries in the category. This includes the 'No formal mental disorder but subsyndromal problems' category. Code 905 ('Other symptoms') can be used to capture situations where a formal mental disorder has not be diagnosed, but the symptoms do not fall under the more specific 9XX series entries. The 905 code should not be used where there is a formal but unlisted mental disorder. In such a situation code 605 ('Other mental disorder') should be used.

Reference: Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision. Copyright 2000 American Psychiatric Association.

The following responses have been added to allow mapping of ATAPS data to PMHC format.

- 100: Anxiety disorders (ATAPS)
- 200: Affective (Mood) disorders (ATAPS)
- 300: Substance use disorders (ATAPS)
- 400: Psychotic disorders (ATAPS)

Note: These four codes should only be used for Episodes that are migrated from ATAPS MDS sources that cannot be described by any other Diagnosis. It is expected that the majority of Episodes delivered to clients from 1st July, 2017 can be assigned to other diagnoses.

These responses will only be allowed on episodes where the original ATAPS referral date was before 1 July 2017

These responses will only be allowed on episodes with the !ATAPS flag.

3.4.34. Episode - Principal Focus of Treatment Plan

The range of activities that best describes the overall services intended to be delivered to the client throughout the course of the episode. For most clients, this will equate to the activities that account for most time spent by the service provider.

Field name:	principal_focus
Data type:	string
Required:	yes
Domain:	1: Psychological therapy
	2: Low intensity psychological intervention
	3: Clinical care coordination
	4: Complex care package
	5: Child and youth-specific mental health services
	6: Indigenous-specific mental health services
	7: Other
	8: Psychosocial Support

Describes the main focus of the services to be delivered to the client for the current Episode of Care, selected from a defined list of categories.

Service providers are required to report on the 'Principal Focus of Treatment Plan' for all accepted referrals. This requires a judgement to be made about the main focus of the services to be delivered to the client for the current Episode of Care, made following initial assessment and modifiable at a later stage. It is chosen from a defined list of categories, with the provider required to select the category that best fits the treatment plan designed for the client.

Principal Focus of Treatment Plan is necessarily a judgement made by the provider at the outset of service delivery but consistent with good practice, should be made on the basis of a treatment plan developed in collaboration with the client. It should not be confused with Service Type which is collected at each Service Contact.

Notes:

1 - Psychological therapy

The treatment plan for the client is primarily based around the delivery of psychological therapy by one or more mental health professionals. This category most closely matches the type of services delivered under the previous ATAPS program where up to 12 individual treatment sessions, and 18 in exceptional circumstances, could be provided. These sessions could be supplemented by up to 10 group-based sessions.

The concept of 'mental health professionals' has a specific meaning defined in the various guidance documentation prepared to support PHNs in implementation of reforms. It refers to service providers who meet the requirements for registration, credentialing or recognition as a qualified mental health professional and includes:

- Psychiatrists
- Registered Psychologists
- Clinical Psychologists
- Mental Health Nurses;
- Occupational Therapists;
- Social Workers
- Aboriginal and Torres Strait Islander health workers.

2 - Low intensity psychological intervention

The treatment plan for the client is primarily based around delivery of time-limited, structured psychological interventions that are aimed at providing a less costly intervention alternative to 'standard' psychological therapy. The essence of low intensity interventions is that they utilise nil or relatively little qualified mental health professional time and are targeted at people with, or at risk of, mild mental illness. Low intensity episodes can be delivered through a range of mechanisms including:

- use of individuals with appropriate competencies but who do not meet the requirements for registration, credentialing or recognition as a mental health professional;
- delivery of services principally through group-based programs; and
- delivery of brief or low cost forms of treatment by mental health professionals.

3 - Clinical care coordination

The treatment plan for the client is primarily based around delivery of a range of services where the overarching aim is to coordinate and better integrate care for the individual across multiple providers with the aim of improving clinical outcomes. Consultation and liaison may occur with primary health care providers, acute health, emergency services, rehabilitation

and support services or other agencies that have some level of responsibility for the client's clinical outcomes. These clinical care coordination and liaison activities are expected to account for a significant proportion of service contacts delivered throughout these episodes.

Activities focused on working in partnership and liaison with other health care and service providers and other individuals to coordinate and integrate service delivery to the client with the aim of improving their clinical outcomes. Consultation and liaison may occur with primary health care providers, acute health, emergency services, rehabilitation and support services, family, friends, other support people and carers and other agencies that have some level of responsibility for the client's treatment and/or well-being.

4 - Complex Care Package
The treatment plan for the client is primarily based around the delivery of an individually tailored 'package' of services for a client with severe and complex mental illness who is being managed principally within a primary care setting. The overarching requirement is that the client receives an individually tailored 'package' of services that bundles a range of services that extends beyond 'standard' service delivery and which is funded through innovative, non-standard funding models. Note: As outlined in the relevant guidance documentation, only three selected PHN Lead Sites with responsibilities for trialling work in this area are expected to deliver complex care packages. A wider roll-out may be undertaken in the future pending results of the trial.

5 - Child and youth-specific mental health services
The treatment plan for the client is primarily based around the delivery of a range of services for children (0-11 years) or youth (aged 12-24 years) who present with a mental illness, or are at risk of mental illness. These episodes are characterised by services that are designed specifically for children and young people, include a broader range of both clinical and non-clinical services and may include a significant component of clinical care coordination and liaison. Child and youth-specific mental health episodes have substantial flexibility in types of services actually delivered.

6 - Indigenous-specific services
The treatment plan for the client is primarily based around delivery of mental health services that are specifically designed to provide culturally appropriate services for Aboriginal and Torres Strait Islander peoples.

7 - Other
The treatment plan for the client is primarily based around services that cannot be described by other categories.

8 - Psychosocial support
Episodes of care should be classified as Psychosocial Support (code 8) where the treatment plan for the client is primarily based around the delivery of psychosocial support services. Psychosocial support services are defined for PMHC MDS purposes as services that focus on building capacity and stability in one or more of the following areas:

- social skills and friendships, family connections;
- managing daily living needs;
- financial management and budgeting;
- finding and maintaining a home;
- vocational skills and goals, including volunteering;
- educational and training goals;
- maintaining physical wellbeing, including exercise;
- building broader life skills including confidence and resilience.

These services are usually delivered by a range of non-clinical providers including peer support workers with lived experience of mental illness

Services delivered to clients receiving episodes of care classified as Psychosocial Support may receive the full range of services as described in the Service Contact Type data item, for example, assessment, care coordination and so forth. However, in general, where the Principal Focus of Treatment Plan is coded as Psychosocial Support there should be an expectation that the majority of services provided will be of a psychosocial support nature. Further details on the relationship between the episode of care concept and service contacts is available at https://docs.pmhc-mds.com/faqs/concepts-processes/data-definitions.html#episode-one-at-a-time

PHNs may wish to advise specific commissioned organisations solely funded from their Psychosocial Support Schedule that all episodes of care should be coded as Psychosocial Support, or leave it to the discretion of service providers.

Clients who are recorded as NDIS recipients would not usually be recorded as receiving a Psychosocial Support episode of care. The National Psychosocial Support guidance material states explicitly that these services are designed for individuals who have significant psychosocial disability but do not meet NDIS eligibility criteria.

Episodes of care delivered to individuals who are recorded as Continuity of Support clients (see below) may be reported as Psychosocial Support.

3.4.35. Episode - Referral Date

The date the referrer made the referral.

Field name:	referral_date
Data type:	date
Required:	no
Notes:	For Date fields, data must be recorded in compliance with the standard format used across the National Health Data Dictionary; specifically, dates must be of fixed 8 column width in the format DDMMYYYY, with leading zeros used when necessary to pad out a value. For instance, 13th March 2008 would appear as 13032008. • The referral date must not be before 1st January 2014. • The referral date must not be in the future.

3.4.36. Episode - Referrer Organisation Type

Type of organisation in which the referring professional is based.

Field name:	referrer_organisation_type

Data type:	string
Required:	yes

Domain:		
	1:	General Practice
	2:	Medical Specialist Consulting Rooms
	3:	Private practice
	4:	Public mental health service
	5:	Public Hospital
	6:	Private Hospital
	7:	Emergency Department
	8:	Community Health Centre
	9:	Drug and Alcohol Service
	10:	Community Support Organisation NFP
	11:	Indigenous Health Organisation
	12:	Child and Maternal Health
	13:	Nursing Service
	14:	Telephone helpline
	15:	Digital health service
	16:	Family Support Service
	17:	School
	18:	Tertiary Education institution
	19:	Housing service
	20:	Centrelink
	21:	Other
	98:	N/A - Self referral
	99:	Not stated

Notes:

Medical Specialist Consulting Rooms includes private medical practitioner rooms in public or private hospital or other settings.

Public mental health service refers to a state- or territory-funded specialised mental health services (i.e., specialised mental health care delivered in public acute and psychiatric hospital settings, community mental health care services, and s specialised residential mental health care services).

Not applicable should only be selected in instances of Self referral.

3.4.37. Episode - Referrer Profession

Profession of the provider who referred the client.

Field name:	referrer_profession
Data type:	string
Required:	yes

Domain:

1:	General Practitioner
2:	Psychiatrist
3:	Obstetrician
4:	Paediatrician
5:	Other Medical Specialist
6:	Midwife
7:	Maternal Health Nurse
8:	Psychologist
9:	Mental Health Nurse
10:	Social Worker
11:	Occupational therapist
12:	Aboriginal Health Worker
13:	Educational professional
14:	Early childhood service worker
15:	Other
98:	N/A - Self referral
99:	Not stated

Notes: New arrangements for some services delivered in primary mental health care allows clients to refer themselves for treatment. Therefore, 'Self' is a response option included within 'Referrer profession'.

3.4.38. Episode - Source of Cash Income

The source from which a person derives the greatest proportion of his/her income, as represented by a code.

Field name:	income_source
Data type:	string
Required:	yes

Domain:	0: N/A - Client aged less than 16 years
	1: Disability Support Pension
	2: Other pension or benefit (not superannuation)
	3: Paid employment
	4: Compensation payments
	5: Other (e.g. superannuation, investments etc.)
	6: Nil income
	7: Not known
	9: Not stated/inadequately described

Notes:	This data standard is not applicable to person's aged less than 16 years.
	This item refers to the source by which a person derives most (equal to or greater than 50%) of his/her income. If the person has multiple sources of income and none are equal to or greater than 50%, the one which contributes the largest percentage should be counted.
	This item refers to a person's own main source of income, not that of a partner or of other household members. If it is difficult to determine a 'main source of income' over the reporting period (i.e. it may vary over time) please report the main source of income during the reference week.
	Code 7 'Not known' should only be recorded when it has not been possible for the service user or their carer/family/advocate to provide the information (i.e. they have been asked but do not know).
METeOR:	386449

3.4.39. Episode - Suicide Referral Flag

Identifies those individuals where a recent history of suicide attempt, or suicide risk, was a factor noted in the referral that underpinned the person's needs for assistance at entry to the episode, as represented by a code.

Field name:	suicide_referral_flag
Data type:	string
Required:	yes
Domain:	1: Yes
	2: No
	9: Unknown

3.4.40. Episode - Tags

List of tags for the episode.

Field name:	episode_tags
Data type:	string
Required:	no

A comma separated list of tags.

Organisations can use this field to tag records in order to partition them as per local requirements.

Notes: Tags can contain lower case letters (or will get lowercased), numbers, dashes, spaces, and `!` . Leading and trailing spaces will be stripped. e.g. `priority!, nurse required, pending-outcome-1` would all be legitimate.

Tags beginning with an exclamation mark (!) are reserved for future use by the Department. e.g. `!reserved, ! reserved, !department-use-only` .

3.4.41. Key

A metadata key name.

Field name:	key
Data type:	string
Required:	yes

3.4.42. K5 - Question 1

In the last 4 weeks, about how often did you feel nervous?

Field name:	k5_item1
Data type:	string
Required:	yes

	1:	None of the time
	2:	A little of the time
	3:	Some of the time
Domain:	**4:**	Most of the time
	5:	All of the time
	9:	Not stated / Missing

Notes: When reporting total score use '9 - Not stated / Missing'

3.4.43. K5 - Question 2

In the last 4 weeks, about how often did you feel without hope?

Field name: k5_item2

Data type: string

Required: yes

	1:	None of the time
	2:	A little of the time
	3:	Some of the time
Domain:	**4:**	Most of the time
	5:	All of the time
	9:	Not stated / Missing

Notes: When reporting total score use '9 - Not stated / Missing'

3.4.44. K5 - Question 3

In the last 4 weeks, about how often did you feel restless or jumpy?

Field name: k5_item3

Data type: string

Required: yes

3.4.45. K5 - Question 4

In the last 4 weeks, about how often did you feel everything was an effort?

Field name:	k5_item4
Data type:	string
Required:	yes

1:	None of the time
2:	A little of the time
3:	Some of the time
Domain: **4:**	Most of the time
5:	All of the time
9:	Not stated / Missing

Notes: When reporting total score use '9 - Not stated / Missing'

3.4.46. K5 - Question 5

In the last 4 weeks, about how often did you feel so sad that nothing could cheer you up?

Field name:	k5_item5
Data type:	string
Required:	yes

Domain:	1:	None of the time
	2:	A little of the time
	3:	Some of the time
	4:	Most of the time
	5:	All of the time
	9:	Not stated / Missing

Notes: When reporting total score use '9 - Not stated / Missing'

3.4.47. K5 - Score

The overall K5 score.

Field name: k5_score

Data type: integer

Required: yes

Domain: 5 - 25, 99 = Not stated / Missing

The K5 Total score is based on the sum of K5 item 1 through 5 (range: 5-25).

Notes: The Total score is computed as the sum of the item scores. If any item has not been completed (that is, has not been coded 1, 2, 3, 4, 5), it is excluded from the calculation and not counted as a valid item. If any item is missing, the Total Score is set as missing.

For the Total score, the missing value used should be 99.

When reporting individual item scores use '99 - Not stated / Missing'

3.4.48. K5 - Tags

List of tags for the collection occasion.

Field name: k5_tags

Data type: string

Required: no

A comma separated list of tags.

Organisations can use this field to tag records in order to partition them as per local requirements.

Notes: Tags can contain lower case letters (or will get lowercased), numbers, dashes, spaces, and `!` . Leading and trailing spaces will be stripped. e.g. `priority!, nurse required, pending-outcome-1` would all be legitimate.

Tags beginning with an exclamation mark (!) are reserved for future use by the Department. e.g. `!reserved, ! reserved, !department-use-only` .

3.4.49. K10+ - Question 1

In the past 4 weeks, about how often did you feel tired out for no good reason?

Field name: k10p_item1

Data type: string

Required: yes

Domain:

1:	None of the time
2:	A little of the time
3:	Some of the time
4:	Most of the time
5:	All of the time
9:	Not stated / Missing

Notes: When reporting total score use '9 - Not stated / Missing'

3.4.50. K10+ - Question 2

In the past 4 weeks, about how often did you feel nervous?

Field name: k10p_item2

Data type: string

Required: yes

	1:	None of the time
	2:	A little of the time
	3:	Some of the time
Domain:	**4:**	Most of the time
	5:	All of the time
	9:	Not stated / Missing

Notes:	When reporting total score use '9 - Not stated / Missing'

3.4.51. K10+ - Question 3

In the past 4 weeks, about how often did you feel so nervous that nothing could calm you down?

Field name:	k10p_item3
Data type:	string
Required:	yes

	1:	None of the time
	2:	A little of the time
	3:	Some of the time
Domain:	**4:**	Most of the time
	5:	All of the time
	9:	Not stated / Missing

Notes:	When reporting total score use '9 - Not stated / Missing'

3.4.52. K10+ - Question 4

In the past 4 weeks, how often did you feel hopeless?

Field name:	k10p_item4
Data type:	string
Required:	yes

Domain:	1:	None of the time
	2:	A little of the time
	3:	Some of the time
	4:	Most of the time
	5:	All of the time
	9:	Not stated / Missing

Notes: When reporting total score use '9 - Not stated / Missing'

3.4.53. K10+ - Question 5

In the past 4 weeks, how often did you feel restless or fidgety?

Field name: k10p_item5

Data type: string

Required: yes

Domain:	1:	None of the time
	2:	A little of the time
	3:	Some of the time
	4:	Most of the time
	5:	All of the time
	9:	Not stated / Missing

Notes: When reporting total score use '9 - Not stated / Missing'

3.4.54. K10+ - Question 6

In the past 4 weeks, how often did you feel so restless you could not sit still?

Field name: k10p_item6

Data type: string

Required: yes

Domain:

   1: None of the time

   2: A little of the time

   3: Some of the time

   4: Most of the time

   5: All of the time

   9: Not stated / Missing

Notes: When reporting total score use '9 - Not stated / Missing'

3.4.55. K10+ - Question 7

In the past 4 weeks, how often did you feel depressed?

Field name: k10p_item7

Data type: string

Required: yes

Domain:

   1: None of the time

   2: A little of the time

   3: Some of the time

   4: Most of the time

   5: All of the time

   9: Not stated / Missing

Notes: When reporting total score use '9 - Not stated / Missing'

3.4.56. K10+ - Question 8

In the past 4 weeks, how often did you feel that everything was an effort?

Field name: k10p_item8

Data type: string

Required: yes

	1:	None of the time
	2:	A little of the time
	3:	Some of the time
Domain:	**4:**	Most of the time
	5:	All of the time
	9:	Not stated / Missing

Notes:	When reporting total score use '9 - Not stated / Missing'

3.4.57. K10+ - Question 9

In the past 4 weeks, how often did you feel so sad that nothing could cheer you up?

Field name:	k10p_item9
Data type:	string
Required:	yes

	1:	None of the time
	2:	A little of the time
	3:	Some of the time
Domain:	**4:**	Most of the time
	5:	All of the time
	9:	Not stated / Missing

Notes:	When reporting total score use '9 - Not stated / Missing'

3.4.58. K10+ - Question 10

In the past 4 weeks, how often did you feel worthless?

Field name:	k10p_item10
Data type:	string
Required:	yes

Domain:	**1:** None of the time
	2: A little of the time
	3: Some of the time
	4: Most of the time
	5: All of the time
	9: Not stated / Missing

Notes:	When reporting total score use '9 - Not stated / Missing'

3.4.59. K10+ - Question 11

In the past four weeks, how many days were you totally unable to work, study or manage your day to day activities because of these feelings?

Field name:	k10p_item11
Data type:	integer
Required:	yes
Domain:	0 - 28, 99 = Not stated / Missing
Notes:	When the client's responses to Q1-10 are all recorded as 1 'None of the time', they are not required to answer questions 11-14. Where this question has not been answered a response of '99 - Not stated / Missing' should be selected.

3.4.60. K10+ - Question 12

Aside from those days, in the past four weeks, how many days were you able to work or study or manage your day to day activities, but had to cut down on what you did because of these feelings?

Field name:	k10p_item12
Data type:	integer
Required:	yes
Domain:	0 - 28, 99 = Not stated / Missing
Notes:	When the client's responses to Q1-10 are all recorded as 1 'None of the time', they are not required to answer questions 11-14. Where this question has not been answered a response of '99 - Not stated / Missing' should be selected.

3.4.61. K10+ - Question 13

In the past four weeks, how many times have you seen a doctor or any other health professional about these feelings?

Field name:	k10p_item13
Data type:	integer
Required:	yes
Domain:	0 - 89, 99 = Not stated / Missing
Notes:	When the client's responses to Q1-10 are all recorded as 1 'None of the time', they are not required to answer questions 11-14. Where this question has not been answered a response of '99 - Not stated / Missing' should be selected.

3.4.62. K10+ - Question 14

In the past four weeks, how often have physical health problems been the main cause of these feelings?

Field name:	k10p_item14	
Data type:	string	
Required:	yes	
Domain:	**1:**	None of the time
	2:	A little of the time
	3:	Some of the time
	4:	Most of the time
	5:	All of the time
	9:	Not stated / Missing
Notes:	When the client's responses to Q1-10 are all recorded as 1 'None of the time', they are not required to answer questions 11-14. Where this question has not been answered a response of '99 - Not stated / Missing' should be selected.	

3.4.63. K10+ - Score

The overall K10 score.

Field name:	k10p_score
Data type:	integer

Required:	yes
Domain:	10 - 50, 99 = Not stated / Missing
	The K10 Total score is based on the sum of K10 item 01 through 10 (range: 10-50). Items 11 through 14 are excluded from the total because they are separate measures of disability associated with the problems referred to in the preceding ten items.
Notes:	The Total score is computed as the sum of the scores for items 1 to 10. If any item has not been completed (that is, has not been coded 1, 2, 3, 4, 5), it is excluded from the total with the proviso that a competed K10 with more than one missing item is regarded as invalid.
	If more than one item of items 1 to 10 are missing, the Total Score is set as missing. Where this is the case, the missing value used should be 99.
	When reporting individual item scores use '99 - Not stated / Missing'.

3.4.64. K10+ - Tags

List of tags for the collection occasion.

Field name:	k10p_tags
Data type:	string
Required:	no
	A comma separated list of tags.
	Organisations can use this field to tag records in order to partition them as per local requirements.
Notes:	Tags can contain lower case letters (or will get lowercased), numbers, dashes, spaces, and `!` . Leading and trailing spaces will be stripped. e.g. `priority!, nurse required, pending-outcome-1` would all be legitimate.
	Tags beginning with an exclamation mark (!) are reserved for future use by the Department. e.g. `!reserved, ! reserved, !department-use-only` .

3.4.65. Organisation Key

A sequence of characters which uniquely identifies the provider organisation to the Primary Health Network. Assigned by the Primary Health Network.

Field name:	organisation_key
Data type:	string (2,50)

Required:	yes
Notes:	Organisation keys are case sensitive and must be valid unicode characters.

3.4.66. Organisation Path

A sequence of colon separated Organisation Keys that fully specifies the Provider Organisation providing a service to the client.

Field name:	organisation_path
Data type:	string
Required:	yes
	A combination of the Primary Health Network's (PHN's) Organisation Key and the Provider Organisation's Organisation Key separated by a colon.
	Here is an example organisation structure showing the Organisation Path for each organisation:
Notes:	

Organisation Key	Organisation Name	Organisation Type	Parent Organisation	Organisation Path
PHN999	Test PHN	Primary Health Network	None	PHN999
PO101	Test Provider Organisation	Private Allied Health Professional Practice	PHN999	PHN999:PO101

3.4.67. Practitioner - Aboriginal and Torres Strait Islander Status

Whether a person identifies as being of Aboriginal and/or Torres Strait Islander origin, as represented by a code.

Field name:	practitioner_atsi_status
Data type:	string
Required:	yes
Domain:	1: Aboriginal but not Torres Strait Islander origin
	2: Torres Strait Islander but not Aboriginal origin
	3: Both Aboriginal and Torres Strait Islander origin
	4: Neither Aboriginal or Torres Strait Islander origin
	9: Not stated/inadequately described

Code 9 is not to be available as a valid answer to the questions but is intended for use:

Notes:
- Primarily when importing data from other data collections that do not contain mappable data.
- Where an answer was refused.
- Where the question was not able to be asked prior to completion of assistance because the client was unable to communicate or a person who knows the client was not available.

METeOR: 291036

3.4.68. Practitioner - Active

A flag to represent whether a practitioner is actively delivering services. This is a system field that is aimed at helping organisations manage practitioner codes.

Field name: practitioner_active

Data type: string

Required: yes

Domain:
- 0: Inactive
- 1: Active

3.4.69. Practitioner - ATSI Cultural Training

Indicates whether a practitioner has completed a recognised training programme in the delivery of culturally safe services to Aboriginal and Torres Strait Islander peoples.

Field name: atsi_cultural_training

Data type: string

Required: yes

Domain:
- 1: Yes
- 2: No
- 3: Not required
- 9: Missing / Not recorded

This item is reported by the practitioner and applies to service providers who are either:

- not of Aboriginal or Torres Strait Islander status; or
- are not employed by an Aboriginal Community Controlled Health Service.

Notes:

1 - Yes
The practitioner has:

- undertaken specific training in the delivery of culturally appropriate mental health /health services for Aboriginal and Torres Strait Islander peoples. As a guide, recognised training programs include those endorsed by the Australian Indigenous Psychologists' Association (AIPA) or similar organisation; or
- undertaken local cultural awareness training in the community in which they are practising, as delivered or endorsed by the elders of that community or the local Aboriginal Community Controlled Health Service.

2 - No
The practitioner has not met the requirements stated above.

3 - Not required
This option is reserved only for practitioners who are of Aboriginal and Torres Strait Islander descent, or employed by an Aboriginal Community Controlled Health Service.

4 - Missing/Not recorded
This is a system code for missing data and not a valid response option for practitioners.

3.4.70. Practitioner - Category

The type or category of the practitioner, as represented by a code.

Field name: practitioner_category

Data type: string

Required: yes

	1:	Clinical Psychologist
	2:	General Psychologist
	3:	Social Worker
	4:	Occupational Therapist
	5:	Mental Health Nurse
	6:	Aboriginal and Torres Strait Islander Health/Mental Health Worker
	7:	Low Intensity Mental Health Worker
Domain:	8:	General Practitioner
	9:	Psychiatrist
	10:	Other Medical
	11:	Other
	12:	Psychosocial Support Worker
	13:	Peer Support Worker
	99:	Not stated

3.4.71. Practitioner - Gender

The term 'gender' refers to the way in which a person identifies their masculine or feminine characteristics. A persons gender relates to their deeply held internal and individual sense of gender and is not always exclusively male or female. It may or may not correspond to their sex assigned at birth.

Field name:	practitioner_gender
Data type:	string
Required:	yes

	0:	Not stated/Inadequately described
	1:	Male
Domain:	2:	Female
	3:	Other

ABS:	http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/ 1200.0.55.012Main%20Features12016?opendocument&tabname=Summary&prodno=1200.0.55.012&issue=2

3.4.72. Practitioner Key

A unique identifier for a practitioner within the responsible provider organisation. Assigned by either the PHN or provider organisation depending on local procedures.

Field name:	practitioner_key
Data type:	string (2,50)
Required:	yes
Notes:	Practitioner keys are case sensitive and must be valid unicode characters.

3.4.73. Practitioner - Tags

List of tags for the practitioner.

Field name:	practitioner_tags
Data type:	string
Required:	no
	A comma separated list of tags.
	Organisations can use this field to tag records in order to partition them as per local requirements.
Notes:	Tags can contain lower case letters (or will get lowercased), numbers, dashes, spaces, and `!`. Leading and trailing spaces will be stripped. e.g. `priority!, nurse required, pending-outcome-1` would all be legitimate.
	Tags beginning with an exclamation mark (!) are reserved for future use by the Department. e.g. `!reserved, ! reserved, !department-use-only`.

3.4.74. Practitioner - Year of Birth

The year the practitioner was born.

Field name:	practitioner_year_of_birth
Data type:	gYear
Required:	yes
Domain:	gYear

Notes:

- The year of birth must not be in the future.
- The year of birth must be after 1900.
- If the year of birth is unknown, the following approaches should be used:
  - If the age of the practitioner is known, the age should be used to derive the year of birth
  - If the age of the practitioner is unknown, an estimated age of the practitioner should be used to estimate a year of birth
  - If the date of birth is totally unknown, use 9999.

3.4.75. Provider Organisation - ABN

The Australian Business Number of the provider organisation.

Field name:	organisation_abn
Data type:	string (11)
Required:	yes

3.4.76. Provider Organisation - End Date

The date on which a provider organisation stopped delivering services.

Field name:	organisation_end_date
Data type:	date
Required:	no

3.4.77. Provider Organisation - Legal Name

The legal name of the provider organisation.

Field name:	organisation_legal_name
Data type:	string
Required:	no

3.4.78. Provider Organisation - Name

The name of the provider organisation.

Field name:	organisation_name
Data type:	string (2,100)
Required:	yes

3.4.79. Provider Organisation - Start Date

The date on which a provider organisation started delivering services.

Field name:	organisation_start_date
Data type:	date
Required:	yes

3.4.80. Provider Organisation - State

The state that the provider organisation operates in.

Field name:	organisation_state
Data type:	string
Required:	yes
Domain:	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
Notes:	• Name is taken from Australian Statistical Geography Standard (ASGS) July 2011.
	• Code is from Meteor with the addition of code for Other Territories.
METeOR:	613718

3.4.81. Provider Organisation - Tags

List of tags for the provider organisation.

Field name:	organisation_tags
Data type:	string
Required:	no
	A comma separated list of tags.
	Organisations can use this field to tag records in order to partition them as per local requirements.
Notes:	Tags can contain lower case letters (or will get lowercased), numbers, dashes, spaces, and `!` . Leading and trailing spaces will be stripped. e.g. `priority!, nurse required, pending-outcome-1` would all be legitimate.
	Tags beginning with an exclamation mark (!) are reserved for future use by the Department. e.g. `!reserved, ! reserved, !department-use-only` .

3.4.82. Provider Organisation - Type

The category that best describes the provider organisation.

Field name:	organisation_type
Data type:	string
Required:	yes

Domain:

1: Private Allied Health Professional Practice

2: Private Psychiatry Practice

3: General Medical Practice

4: Private Hospital

5: Headspace Centre

6: Early Youth Psychosis Centre

7: Community-managed Community Support Organisation

8: Aboriginal Health/Medical Service

9: State/Territory Health Service Organisation

10: Drug and/or Alcohol Service

11: Primary Health Network

12: Medicare Local

13: Division of General Practice

98: Other

99: Missing

1 - Private Allied Health Professional Practice
    The provider organisation is a group of single- or multi-discipline allied health practitioners operating as private service providers. This includes both group and solo practitioner entities.

2 - Private Psychiatry practice
    The provider organisation is a Private Psychiatry practice. This includes both group and solo practitioner entities.

3 - General Medical Practice
    The provider organisation is a General Medical Practice. This includes both group and solo practitioner entities.

4 - Private Hospital
    The provider organisation is a private hospital. This includes for-profit and not-for-profit hospitals.

5 - Headspace Centre
    The provider organisation is a Headspace centre, delivering services funded by the PHN.

    Note: Headspace and Early Psychosis Youth Centres currently collect and report a standardised dataset to headspace National Office. Pending the future of these arrangements, reporting of the PMHC minimum data set is not required by those organisations previously funded through headspace National Office that transitioned to PHNs. Where new or additional services are commissioned by PHNs and delivered through existing Headspace or Early Psychosis Youth Centres, local decisions will be required as to whether these services can be captured through headspace National Office sustem or are better reported through the PMHC MDS.

6 - Early Youth Psychosis Centre

Notes:
    The provider organisation is a Early Youth Psychosis Centre, delivering services funded by the PHN.

    Note: See Note above re Headspace.

7 - Community-managed Community Support Organisation
    The provider organisation is a community-managed (non-government) organisation that primarily delivers disability-related or social support services.

8 - Aboriginal Health/Medical Service
    The provider organisation is an Aboriginal or Torres Strait Islander-controlled health service organisation.

9 - State/Territory Health Service Organisation
    The provider organisation is a health service entity principally funded by a state or territory government. This includes all services delivered through Local Hospital Networks (variously named across jurisdictions).

10 - Drug and/or Alcohol Service Organisation
    The provider organisation is an organisation that provides specialised drug and alcohol treatment services. The organisation may be operating in the government or non-government sector, and where the latter, may be for-profit or not-for-profit.

11 - Primary Heath Network
    The PHN is the provider organisation and employs the service delivery practitioners. This may occur during the transition period as the PHN moves to a full commissioning role, or in cases of market failure where there is no option to commission external providers.

12 - Medicare Local
    The provider organisation is a former Medicare Local entity.

13 - Division of General Practice
　　The provider organisation is a former Division of General Practice entity.

98 - Other
　　The provider organisation cannot be described by any of the available options.

3.4.83. SDQ Collection Occasion - Version

The version of the SDQ collected.

Field name:	sdq_version
Data type:	string
Required:	yes

	PC101:	Parent Report Measure 4-10 yrs, Baseline version, Australian Version 1
	PC201:	Parent Report Measure 4-10 yrs, Follow Up version, Australian Version 1
	PY101:	Parent Report Measure 11-17 yrs, Baseline version, Australian Version 1
Domain:	**PY201:**	Parent Report Measure 11-17 yrs, Follow Up version, Australian Version 1
	YR101:	Self report Version, 11-17 years, Baseline version, Australian Version 1
	YR201:	Self report Version, 11-17 years, Follow Up version, Australian Version 1

Notes:	Domain values align with those collected in the NOCC dataset as defined at https://webval.validator.com.au/spec/NOCC/current/SDQ/SDQVer

3.4.84. SDQ - Conduct Problem Scale

Field name:	sdq_conduct_problem
Data type:	integer
Required:	yes
Domain:	0 - 10, 99 = Not stated / Missing
Notes:	See SDQ items and Scale Summary scores for instructions on scoring the Conduct Problem Scale. When reporting individual item scores use '99 - Not stated / Missing'.

3.4.85. SDQ - Emotional Symptoms Scale

Field name: sdq_emotional_symptoms

Data type: integer

Required: yes

Domain: 0 - 10, 99 = Not stated / Missing

Notes: See SDQ items and Scale Summary scores for instructions on scoring the Emotional Symptoms Scale.

When reporting individual item scores use '99 - Not stated / Missing'.

3.4.86. SDQ - Hyperactivity Scale

Field name: sdq_hyperactivity

Data type: integer

Required: yes

Domain: 0 - 10, 99 = Not stated / Missing

Notes: See SDQ items and Scale Summary scores for instructions on scoring the Hyperactivity Scale.

When reporting individual item scores use '99 - Not stated / Missing'.

3.4.87. SDQ - Impact Score

Field name: sdq_impact

Data type: integer

Required: yes

Domain: 0 - 10, 99 = Not stated / Missing

Notes: See SDQ items and Scale Summary scores for instructions on scoring the Impact Score.

When reporting individual item scores use '99 - Not stated / Missing'.

3.4.88. SDQ - Peer Problem Scale

Field name: sdq_peer_problem

Data type: integer

Required: yes

Domain:	0 - 10, 99 = Not stated / Missing
Notes:	See SDQ items and Scale Summary scores for instructions on scoring the Peer Problem Scale. When reporting individual item scores use '99 - Not stated / Missing'.

3.4.89. SDQ - Prosocial Scale

Field name:	sdq_prosocial
Data type:	integer
Required:	yes
Domain:	0 - 10, 99 = Not stated / Missing
Notes:	See SDQ items and Scale Summary scores for instructions on scoring the Prosocial Scale. When reporting individual item scores use '99 - Not stated / Missing'.

3.4.90. SDQ - Question 1

Parent Report: Considerate of other people's feelings.

Youth Self Report: I try to be nice to other people. I care about their feelings.

Field name:	sdq_item1
Data type:	string
Required:	yes
Domain:	**0:** Not True **1:** Somewhat True **2:** Certainly True **7:** Unable to rate (insufficient information) **9:** Not stated / Missing
Notes:	Required Versions: All When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.91. SDQ - Question 2

Parent Report: Restless, overactive, cannot stay still for long.

Youth Self Report: I am restless, I cannot stay still for long.

Field name:	sdq_item2
Data type:	string
Required:	yes
Domain:	**0:** Not True
	1: Somewhat True
	2: Certainly True
	7: Unable to rate (insufficient information)
	9: Not stated / Missing
Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.92. SDQ - Question 3

Parent Report: Often complains of headaches, stomach-aches or sickness.

Youth Self Report: I get a lot of headaches, stomach-aches or sickness.

Field name:	sdq_item3
Data type:	string
Required:	yes
Domain:	**0:** Not True
	1: Somewhat True
	2: Certainly True
	7: Unable to rate (insufficient information)
	9: Not stated / Missing
Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.93. SDQ - Question 4

Parent Report: Shares readily with other children {for example toys, treats, pencils} / young people {for example CDs, games, food}.

Youth Self Report: I usually share with others, for examples CDs, games, food.

Field name:	sdq_item4
Data type:	string
Required:	yes
Domain:	**0:** Not True
	1: Somewhat True
	2: Certainly True
	7: Unable to rate (insufficient information)
	9: Not stated / Missing
Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.94. SDQ - Question 5

Parent Report: Often loses temper.

Youth Self Report: I get very angry and often lose my temper.

Field name:	sdq_item5
Data type:	string
Required:	yes
Domain:	**0:** Not True
	1: Somewhat True
	2: Certainly True
	7: Unable to rate (insufficient information)
	9: Not stated / Missing

Required Versions: All

Notes:

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.95. SDQ - Question 6

Parent Report: {Rather solitary, prefers to play alone} / {would rather be alone than with other young people}.

Youth Self Report: I would rather be alone than with people of my age.

Field name:	sdq_item6
Data type:	string
Required:	yes

Domain:

0: Not True

1: Somewhat True

2: Certainly True

7: Unable to rate (insufficient information)

9: Not stated / Missing

Required Versions: All

Notes:

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.96. SDQ - Question 7

Parent Report: {Generally well behaved} / {Usually does what adults requests}.

Youth Self Report: I usually do as I am told.

Field name:	sdq_item7
Data type:	string
Required:	yes

Domain:

    0: Not True

    1: Somewhat True

    2: Certainly True

    7: Unable to rate (insufficient information)

    9: Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.97. SDQ - Question 8

Parent Report: Many worries or often seems worried.

Youth Self Report: I worry a lot.

Field name: sdq_item8

Data type: string

Required: yes

Domain:

    0: Not True

    1: Somewhat True

    2: Certainly True

    7: Unable to rate (insufficient information)

    9: Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.98. SDQ - Question 9

Parent Report: Helpful if someone is hurt, upset or feeling ill.

Youth Self Report: I am helpful if someone is hurt, upset or feeling ill.

Field name: sdq_item9

Data type:	string
Required:	yes
Domain:	**0:** Not True
	1: Somewhat True
	2: Certainly True
	7: Unable to rate (insufficient information)
	9: Not stated / Missing
Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.99. SDQ - Question 10

Parent Report: Constantly fidgeting or squirming.

Youth Self Report: I am constantly fidgeting or squirming.

Field name:	sdq_item10
Data type:	string
Required:	yes
Domain:	**0:** Not True
	1: Somewhat True
	2: Certainly True
	7: Unable to rate (insufficient information)
	9: Not stated / Missing
Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.100. SDQ - Question 11

Parent Report: Has at least one good friend.

Youth Self Report: I have one good friend or more.

Field name: sdq_item11

Data type: string

Required: yes

Domain:

0: Not True

1: Somewhat True

2: Certainly True

7: Unable to rate (insufficient information)

9: Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.101. SDQ - Question 12

Parent Report: Often fights with other {children} or bullies them / {young people}.

Youth Self Report: I fight a lot. I can make other people do what I want.

Field name: sdq_item12

Data type: string

Required: yes

Domain:

0: Not True

1: Somewhat True

2: Certainly True

7: Unable to rate (insufficient information)

9: Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.102. SDQ - Question 13

Parent Report: Often unhappy, depressed or tearful.

Youth Self Report: I am often unhappy, depressed or tearful.

Field name:	sdq_item13
Data type:	string
Required:	yes

Domain:

0:	Not True
1:	Somewhat True
2:	Certainly True
7:	Unable to rate (insufficient information)
9:	Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.103. SDQ - Question 14

Parent Report: Generally liked by other {children} / {young people}

Youth Self Report: Other people my age generally like me.

Field name:	sdq_item14
Data type:	string
Required:	yes

Domain:

0:	Not True
1:	Somewhat True
2:	Certainly True
7:	Unable to rate (insufficient information)
9:	Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.104. SDQ - Question 15

Parent Report: Easily distracted, concentration wanders.

Youth Self Report: I am easily distracted, I find it difficult to concentrate.

Field name:	sdq_item15
Data type:	string
Required:	yes
Domain:	**0:** Not True
	1: Somewhat True
	2: Certainly True
	7: Unable to rate (insufficient information)
	9: Not stated / Missing
Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.105. SDQ - Question 16

Parent Report: Nervous or {clingy} in new situations, easily loses confidence {omit clingy in PY}.

Youth Self Report: I am nervous in new situations. I easily lose confidence.

Field name:	sdq_item16
Data type:	string
Required:	yes
Domain:	**0:** Not True
	1: Somewhat True
	2: Certainly True
	7: Unable to rate (insufficient information)
	9: Not stated / Missing
Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.106. SDQ - Question 17

Parent Report: Kind to younger children.

Youth Self Report: I am kind to younger people.

Field name:	sdq_item17
Data type:	string
Required:	yes
Domain:	**0:** Not True
	1: Somewhat True
	2: Certainly True
	7: Unable to rate (insufficient information)
	9: Not stated / Missing
Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.107. SDQ - Question 18

Parent Report: Often lies or cheats.

Youth Self Report: I am often accused of lying or cheating.

Field name:	sdq_item18
Data type:	string
Required:	yes
Domain:	**0:** Not True
	1: Somewhat True
	2: Certainly True
	7: Unable to rate (insufficient information)
	9: Not stated / Missing

3.4.108. SDQ - Question 19

Parent Report: Picked on or bullied by {children} / {youth}.

Youth Self Report: Other children or young people pick on me or bully me.

Field name:	sdq_item19
Data type:	string
Required:	yes

Domain:

0:	Not True
1:	Somewhat True
2:	Certainly True
7:	Unable to rate (insufficient information)
9:	Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.109. SDQ - Question 20

Parent Report: Often volunteers to help others (parents, teachers, {other} children) / Omit 'other' in PY.

Youth Self Report: I often volunteer to help others (parents, teachers, children).

Field name:	sdq_item20
Data type:	string
Required:	yes

	0:	Not True
	1:	Somewhat True
	2:	Certainly True
Domain:	7:	Unable to rate (insufficient information)
	9:	Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.110. SDQ - Question 21

Parent Report: Thinks things out before acting.

Youth Self Report: I think before I do things.

Field name:	sdq_item21
Data type:	string
Required:	yes

	0:	Not True
	1:	Somewhat True
	2:	Certainly True
Domain:	7:	Unable to rate (insufficient information)
	9:	Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.111. SDQ - Question 22

Parent Report: Steals from home, school or elsewhere.

Youth Self Report: I take things that are not mine from home, school or elsewhere.

Field name:	sdq_item22

Data type:	string
Required:	yes

Domain:	**0:**	Not True
	1:	Somewhat True
	2:	Certainly True
	7:	Unable to rate (insufficient information)
	9:	Not stated / Missing

Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.112. SDQ - Question 23

Parent Report: Gets along better with adults than with other {children} / {youth}.

Youth Self Report: I get along better with adults than with people my own age.

Field name:	sdq_item23
Data type:	string
Required:	yes

Domain:	**0:**	Not True
	1:	Somewhat True
	2:	Certainly True
	7:	Unable to rate (insufficient information)
	9:	Not stated / Missing

Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.113. SDQ - Question 24

Parent Report: Many fears, easily scared.

Youth Self Report: I have many fears, I am easily scared.

Field name:	sdq_item24
Data type:	string
Required:	yes

Domain:	**0:**	Not True
	1:	Somewhat True
	2:	Certainly True
	7:	Unable to rate (insufficient information)
	9:	Not stated / Missing

Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.114. SDQ - Question 25

Parent Report: Good attention span sees chores or homework through to the end.

Youth Self Report: I finish the work I'm doing. My attention is good.

Field name:	sdq_item25
Data type:	string
Required:	yes

Domain:	**0:**	Not True
	1:	Somewhat True
	2:	Certainly True
	7:	Unable to rate (insufficient information)
	9:	Not stated / Missing

Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.115. SDQ - Question 26

Parent Report: Overall, do you think that your child has difficulties in any of the following areas: emotions, concentration, behaviour or being able to get along with other people?

Youth Self Report: Overall, do you think that you have difficulties in any of the following areas: emotions, concentration, behaviour or being able to get along with other people?

Field name:	sdq_item26
Data type:	string
Required:	yes
Domain:	**0:** No
	1: Yes - minor difficulties
	2: Yes - definite difficulties
	3: Yes - severe difficulties
	7: Unable to rate (insufficient information)
	9: Not stated / Missing
Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.116. SDQ - Question 27

Parent Report: How long have these difficulties been present?

Youth Self Report: How long have these difficulties been present?

Field name:	sdq_item27
Data type:	string
Required:	yes
Domain:	**0:** Less than a month
	1: 1-5 months
	2: 6-12 months
	3: Over a year
	7: Unable to rate (insufficient information)
	8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
	9: Not stated / Missing

Notes:

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.117. SDQ - Question 28

Parent Report: Do the difficulties upset or distress your child?

Youth Self Report: Do the difficulties upset or distress you?

Field name: sdq_item28

Data type: string

Required: yes

Domain:

    0: Not at all

    1: A little

    2: A medium amount

    3: A great deal

    7: Unable to rate (insufficient information)

    8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)

    9: Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.118. SDQ - Question 29

Parent Report: Do the difficulties interfere with your child's everyday life in the following areas? HOME LIFE.

Youth Self Report: Do the difficulties interfere with your everyday life in the following areas? HOME LIFE.

Field name: sdq_item29

Data type: string

Required: yes

Domain:	0:	Not at all
	1:	A little
	2:	A medium amount
	3:	A great deal
	7:	Unable to rate (insufficient information)
	8:	Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
	9:	Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.119. SDQ - Question 30

Parent Report: Do the difficulties interfere with your child's everyday life in the following areas? FRIENDSHIPS.

Youth Self Report: Do the difficulties interfere with your everyday life in the following areas? FRIENDSHIPS.

Field name:	sdq_item30
Data type:	string
Required:	yes

Domain:	0:	Not at all
	1:	A little
	2:	A medium amount
	3:	A great deal
	7:	Unable to rate (insufficient information)
	8:	Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
	9:	Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.120. SDQ - Question 31

Parent Report: Do the difficulties interfere with your child's everyday life in the following areas? CLASSROOM LEARNING.

Youth Self Report: Do the difficulties interfere with your everyday life in the following areas? CLASSROOM LEARNING

Field name:	sdq_item31
Data type:	string
Required:	yes
Domain:	**0:** Not at all
	1: A little
	2: A medium amount
	3: A great deal
	7: Unable to rate (insufficient information)
	8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
	9: Not stated / Missing
Notes:	Required Versions: All
	When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.121. SDQ - Question 32

Parent Report: Do the difficulties interfere with your child's everyday life in the following areas? LEISURE ACTIVITIES.

Youth Self Report: Do the difficulties interfere with your everyday life in the following areas? LEISURE ACTIVITIES.

Field name:	sdq_item32
Data type:	string
Required:	yes

	0:	Not at all
	1:	A little
	2:	A medium amount
	3:	A great deal
Domain:	7:	Unable to rate (insufficient information)
	8:	Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
	9:	Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.122. SDQ - Question 33

Parent Report: Do the difficulties put a burden on you or the family as a whole?

Youth Self Report: Do the difficulties make it harder for those around you (family, friends, teachers, etc)?

Field name:	sdq_item33
Data type:	string
Required:	yes

	0:	Not at all
	1:	A little
	2:	A medium amount
	3:	A great deal
Domain:	7:	Unable to rate (insufficient information)
	8:	Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
	9:	Not stated / Missing

Notes:

Required Versions: All

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.123. SDQ - Question 34

Parent Report: Since coming to the services, are your child's problems:

Youth Self Report: 'Since coming to the service, are your problems:

Field name: sdq_item34

Data type: string

Required: yes

Domain:

    0: Much worse

    1: A bit worse

    2: About the same

    3: A bit better

    4: Much better

    7: Unable to rate (insufficient information)

    8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)

    9: Not stated / Missing

Notes:

Required Versions:

- PC201
- PY201
- YR201

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.124. SDQ - Question 35

Has coming to the service been helpful in other ways eg. providing information or making the problems bearable?

Field name: sdq_item35

Data type: string

Required: yes

Domain:

   0: Not at all

   1: A little

   2: A medium amount

   3: A great deal

   7: Unable to rate (insufficient information)

   8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)

   9: Not stated / Missing

Required Versions:

Notes:

- PC201
- PY201
- YR201

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.125. SDQ - Question 36

Over the last 6 months have your child's teachers complained of fidgetiness, restlessness or overactivity?

Field name: sdq_item36

Data type: string

Required: yes

Domain:

   0: No

   1: A little

   2: A lot

   7: Unable to rate (insufficient information)

   8: Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)

   9: Not stated / Missing

Required Versions:

Notes:

- PC101
- PY101

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.126. SDQ - Question 37

Over the last 6 months have your child's teachers complained of poor concentration or being easily distracted?

Field name: sdq_item37

Data type: string

Required: yes

Domain:

0:	No
1:	A little
2:	A lot
7:	Unable to rate (insufficient information)
8:	Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
9:	Not stated / Missing

Notes:

Required Versions:

- PC101
- PY101

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.127. SDQ - Question 38

Over the last 6 months have your child's teachers complained of acting without thinking, frequently butting in, or not waiting for his or her turn?

Field name: sdq_item38

Data type: string

Required: yes

Domain:		
	0:	No
	1:	A little
	2:	A lot
	7:	Unable to rate (insufficient information)
	8:	Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
	9:	Not stated / Missing

Required Versions:

Notes:
- PC101
- PY101

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.128. SDQ - Question 39

Does your family complain about you having problems with overactivity or poor concentration?

Field name:	sdq_item39
Data type:	string
Required:	yes

Domain:		
	0:	No
	1:	A little
	2:	A lot
	7:	Unable to rate (insufficient information)
	8:	Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
	9:	Not stated / Missing

Required Versions:

Notes:
- YR101

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.129. SDQ - Question 40

Do your teachers complain about you having problems with overactivity or poor concentration?

Field name:	sdq_item40
Data type:	string
Required:	yes

Domain:

0:	No
1:	A little
2:	A lot
7:	Unable to rate (insufficient information)
8:	Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
9:	Not stated / Missing

Notes:

Required Versions:

- YR101

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.130. SDQ - Question 41

Does your family complain about you being awkward or troublesome?

Field name:	sdq_item41
Data type:	string
Required:	yes

Domain:

0:	No
1:	A little
2:	A lot
7:	Unable to rate (insufficient information)
8:	Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
9:	Not stated / Missing

Required Versions:

Notes:
- YR101

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.131. SDQ - Question 42

Do your teachers complain about you being awkward or troublesome?

Field name: sdq_item42

Data type: string

Required: yes

Domain:

0:	No
1:	A little
2:	A lot
7:	Unable to rate (insufficient information)
8:	Not applicable (collection not required - item not included in the version collected, or SDQ Item 26 = 0)
9:	Not stated / Missing

Required Versions:

Notes:
- YR101

When reporting subscale and total scores use '9 - Not stated / Missing'.

3.4.132. SDQ - Tags

List of tags for the collection occasion.

Field name: sdq_tags

Data type: string

Required: no

A comma separated list of tags.

Organisations can use this field to tag records in order to partition them as per local requirements.

Notes: Tags can contain lower case letters (or will get lowercased), numbers, dashes, spaces, and `!` . Leading and trailing spaces will be stripped. e.g. `priority!, nurse required, pending-outcome-1` would all be legitimate.

Tags beginning with an exclamation mark (!) are reserved for future use by the Department. e.g. `!reserved, ! reserved, !department-use-only` .

3.4.133. SDQ - Total Difficulties Score

Field name: sdq_total

Data type: integer

Required: yes

Domain: 0 - 40, 99 = Not stated / Missing

Notes: See SDQ items and Scale Summary scores for instructions on scoring the Total Difficulties Score.

When reporting individual item scores use '99 - Not stated / Missing'.

3.4.134. Service Contact - Client Participation Indicator

An indicator of whether the client participated, or intended to participate, in the service contact, as represented by a code.

Field name: service_contact_participation_indicator

Data type: string

Required: yes

Domain:
1:	Yes
2:	No

Service contacts are not restricted to in-person communication but can include telephone, video link or other forms of direct communication.

1 - Yes

This code is to be used for service contacts between a mental health service provider and the patient/client in whose clinical record the service contact would normally warrant a dated entry, where the patient/client is participating.

Notes:

2 - No

This code is to be used for service contacts between a mental health service provider and a third party(ies) where the patient/client, in whose clinical record the service contact would normally warrant a dated entry, is not participating.

Note: Where a client intended to participate in a service contact but failed to attend, Service Contact - Client Participation Indicator should be recorded as '1: Yes' and Service Contact - No Show should be recorded as '1: Yes'.

METeOR: 494341

3.4.135. Service Contact - Copayment

The co-payment is the amount paid by the client per session.

Field name: service_contact_copayment

Data type: number

Required: yes

Domain: 0 - 999999.99

Up to 6 digits before the decimal point; up to 2 digits after the decimal point.

Notes: The co-payment is the amount paid by the client per service contact, not the fee paid by the project to the practitioner or the fee paid by the project to the practitioner plus the client contribution. In many cases, there will not be a co-payment charged and therefore zero should be entered. Where a co-payment is charged it should be minimal and based on an individual's capacity to pay.

3.4.136. Service Contact - Date

The date of each mental health service contact between a health service provider and patient/client.

Field name: service_contact_date

Data type: date

Required: yes

For Date fields, data must be recorded in compliance with the standard format used across the National Health Data Dictionary; specifically, dates must be of fixed 8 column width in the format DDMMYYYY, with leading zeros used when necessary to pad out a value. For instance, 13th March 2008 would appear as 13032008.

Notes:

- The service contact date must not be before 1st January 2014.
- The service contact date must not be in the future.

METeOR: 494356

3.4.137. Service Contact - Duration

The time from the start to finish of a service contact.

Field name: service_contact_duration

Data type: string

Required: yes

0:	No contact took place
1:	1-15 mins
2:	16-30 mins
3:	31-45 mins
4:	46-60 mins
Domain: **5:**	61-75 mins
6:	76-90 mins
7:	91-105 mins
8:	106-120 mins
9:	over 120 mins

Notes: For group sessions the time for client spent in the session is recorded for each client, regardless of the number of clients or third parties participating or the number of service providers providing the service. Writing up details of service contacts is not to be reported as part of the duration, except if during or contiguous with the period of client or third party participation. Travel to or from the location at which the service is provided, for example to or from outreach facilities or private homes, is not to be reported as part of the duration of the service contact.

0 - No contact took place
   Only use this code where the service contact is recorded as a no show.

3.4.138. Service Contact - Final

An indication of whether the Service Contact is the final for the current Episode of Care

Field name: service_contact_final

Data type: string

Required: yes

Domain:
- 1: No further services are planned for the client in the current episode
- 2: Further services are planned for the client in the current episode
- 3: Not known at this stage

Notes:

Service providers should report this item on the basis of future planned or scheduled contacts with the client. Where this item is recorded as 1 (No further services planned), the episode should be recorded as completed by:

- the date of the final Service Contact should be recorded as the Episode End Date
- the Episode Completion Status field should be recorded as 'Treatment concluded.

Note that no further Service Contacts can be recorded against an episode once it is marked as completed. Where an episode has been marked as completed prematurely, the Episode End Date can be manually corrected to allow additional activity to be recorded.

3.4.139. Service Contact - Interpreter Used

Whether an interpreter service was used during the Service Contact

Field name: service_contact_interpreter

Data type: string

Required: yes

Domain:
- 1: Yes
- 2: No
- 9: Not stated

Interpreter services includes verbal language, non-verbal language and languages other than English.

Notes:

1 - Yes
Use this code where interpreter services were used during the Service Contact. Use of interpreter services for any form of sign language or other forms of non-verbal communication should be coded as Yes.

2 - No
Use this code where interpreter services were not used during the Service Contact.

9 - Not stated
Indicates that the item was not collected. This item should not appear as an option for clinicians, it is for administrative use only.

3.4.140. Service Contact - Modality

How the service contact was delivered, as represented by a code.

Field name: service_contact_modality

Data type: string

Required: yes

Domain:

0:	No contact took place
1:	Face to Face
2:	Telephone
3:	Video
4:	Internet-based

Notes:

0 - No contact took place
Only use this code where the service contact is recorded as a no show.

1 - Face to Face
- If 'Face to Face' is selected, a value other than 'Not applicable' must be selected for Service Contact Venue
- If 'Face to Face' is selected a valid Australian postcode must be entered for Service Contact Postcode. The unknown postcode is not valid.

4 - Internet-based
Includes email communication, that would normally warrant a dated entry in the clinical record of the client, involving a third party, such as a carer or family member, and/or other professional or mental health worker, or other service provider.

Note: If Service Contact Modality is not 'Face to Face' the postcode must be entered as unknown 9999.

3.4.141. Service Contact - No Show

Where an appointment was made for an intended participant(s), but the intended participant(s) failed to attend the appointment, as represented by a code.

Field name:	service_contact_no_show
Data type:	string
Required:	yes
Domain:	**1:** Yes **2:** No
Notes:	**1 - Yes** The intended participant(s) failed to attend the appointment. **2 - No** The intended participant(s) attended the appointment.

3.4.142. Service Contact - Participants

An indication of who participated in the Service Contact.

Field name:	service_contact_participants
Data type:	string
Required:	yes
Domain:	**1:** Individual client **2:** Client group **3:** Family / Client Support Network **4:** Other health professional or service provider **5:** Other **9:** Not stated

1 - Individual
Code applies for Service Contacts delivered individually to a single client without third party participants. Please refer to the Note below.

2 - Client group
Code applies for Service Contacts delivered on a group basis to two or more clients.

3 - Family / Client Support Network
Code applies to Service Contacts delivered to the family/social support persons of the client, with or without the participation of the client.

4 - Other health professional or service provider
Code applies for Service Contacts that involve another health professional or service provider (in addition to the Practitioner), with or without the participation of the client.

5 - Other
Code applies to Service Contacts delivered to other third parties (e.g., teachers, employer), with or without the participation of the client.

Note: This item interacts with Service Contact - Client Participation Indicator. Where Service Contact - Participants has a value of '1: Individual', Service Contact - Client Participation Indicator must have a value of '1: Yes'. Service Contact - No Show is used to record if the patient failed to attend the appointment.

3.4.143. Service Contact - Postcode

The Australian postcode where the service contact took place.

Field name:	service_contact_postcode
Data type:	string
Required:	yes

A valid Australian postcode or 9999 if the postcode is unknown. The full list of Australian Postcodes can be found at Australia Post.

Notes:
- If Service Contact Modality is not 'Face to Face' enter 9999
- If Service Contact Modality is 'Face to Face' a valid Australian postcode must be entered
- As of 1 November 2016, PMHC MDS currently validates that postcodes are in the range 0200-0299 or 0800-9999.

METeOR: 429894

3.4.144. Service Contact - Tags

List of tags for the service contact.

Field name:	service_contact_tags

Data type:	string
Required:	no

A comma separated list of tags.

Organisations can use this field to tag records in order to partition them as per local requirements.

Notes:	Tags can contain lower case letters (or will get lowercased), numbers, dashes, spaces, and `!` . Leading and trailing spaces will be stripped. e.g. `priority!, nurse required, pending-outcome-1` would all be legitimate.

Tags beginning with an exclamation mark (!) are reserved for future use by the Department. e.g. `!reserved, ! reserved, !department-use-only` .

3.4.145. Service Contact - Type

The main type of service provided in the service contact, as represented by the service type that accounted for most provider time.

Field name:	service_contact_type	
Data type:	string	
Required:	yes	
Domain:	**0:**	No contact took place
	1:	Assessment
	2:	Structured psychological intervention
	3:	Other psychological intervention
	4:	Clinical care coordination/liaison
	5:	Clinical nursing services
	6:	Child or youth specific assistance NEC
	7:	Suicide prevention specific assistance NEC
	8:	Cultural specific assistance NEC
	9:	Psychosocial support
	98:	ATAPS

Describes the main type of service delivered in the contact, selected from a defined list of categories. Where more than service type was provided select that which accounted for most provider time. Service providers are required to report on Service Type for all Service Contacts.

Note: NEC is used for 'Not Elsewhere Classified'. For these records, only use these service types if they cannot be classified by any of the other service options.

0 - No contact took place
    Only use this code where the service contact is recorded as a no show.

1 - Assessment
    Determination of a person's mental health status and need for mental health services, made by a suitably trained mental health professional, based on the collection and evaluation of data obtained through interview and observation, of a person's history and presenting problem(s). Assessment may include consultation with the person's family and concludes with formation of problems/issues, documentation of a preliminary diagnosis, and a treatment plan.

Notes:

2 - Structured psychological intervention
    Those interventions which include a structured interaction between a client and a service provider using a recognised, psychological method, for example, cognitive behavioural techniques, family therapy or psycho education counselling. These are recognised, structured or published techniques for the treatment of mental ill-health. Structured psychological interventions are designed to alleviate psychological distress or emotional disturbance, change maladaptive behaviour and foster mental health. Structured psychological therapies can be delivered on either an individual or group basis, typically in an office or community setting. They may be delivered by trained mental health professionals or other individuals with appropriate competencies but who do not meet the requirements for registration, credentialing or recognition as a mental health professional. Structured Psychological Therapies include but are not limited to:

- Psycho-education (including motivational interviewing)
- Cognitive-behavioural therapies
- Relaxation strategies
- Skills training
- Interpersonal therapy

3 - Other psychological intervention
    Psychological interventions that do meet criteria for structured psychological intervention.

4 - Clinical care coordination/liaison
    Activities focused on working in partnership and liaison with other health care and service providers and other individuals to coordinate and integrate service delivery to the client with the aim of improving their clinical outcomes. Consultation and liaison may occur with primary health care providers, acute health, emergency services, rehabilitation and support services, family, friends, other support people and carers and other agencies that have some level of responsibility for the client's treatment and/or well being.

5 - Clinical nursing services
    Services delivered by mental health nurses that cannot be described elsewhere. Typically, these aim to provide clinical support to clients to effectively manage their symptoms and avoid unnecessary hospitalisation. Clinical nursing services include:

- monitoring a client's mental state;
- liaising closely with family and carers as appropriate;

- administering and monitoring compliance with medication;
- providing information on physical health care, as required and, where appropriate, assist in addressing the physical health inequities of people with mental illness; and
- improving links to other health professionals/clinical service providers.

6 - Child or youth-specific assistance NEC

Services delivered to, or on behalf, of a child or young person that cannot be described elsewhere. These can include, for example, working with a child's teacher to provide advice on assisting the child in their educational environment; working with a young person's employer to assist the young person to their work environment.

Note: This code should only be used for Service Contacts that cannot be described by any other Service Type. It is expected that the majority of Service Contacts delivered to children and young people can be assigned to other categories.

7 - Suicide prevention specific assistance NEC

Services delivered to, or on behalf, of a client who presents with risk of suicide that cannot be described elsewhere. These can include, for example, working with the person's employers to advise on changes in the workplace; working with a young person's teacher to assist the child in their school environment; or working with relevant community-based groups to assist the client to participate in their activities.

Note: This code should only be used for Service Contacts that cannot be described by any other Service Type. It is expected that the majority of Service Contacts delivered to client's who have a risk of suicide can be assigned to other categories.

8 - Cultural specific assistance NEC

Culturally appropriate services delivered to, or on behalf, of an Aboriginal or Torres Strait Islander client that cannot be described elsewhere. These can include, for example, working with the client's community support network including family and carers, men's and women's groups, traditional healers, interpreters and social and emotional wellbeing counsellors.

Note: This code should only be used for Service Contacts that cannot be described by any other Service Type. It is expected that the majority of Service Contacts (see domains below) delivered to Aboriginal or Torres Strait Islander clients can be assigned to other categories.

9 - Psychosocial support

Service providers are required to report on Service Contact Type for every contact with a client. This requires a judgement about the main service delivered at each contact, selected from a small list of options, and based on the activity that accounted for most provider time. Service Contact Type complements Principal Focus of Treatment Plan by capturing information to understand the mix of services provided within an individual episode of care.

Service Contact Type should be coded as Psychosocial Support (code 9) where the main services delivered during the contact involved the delivery of psychosocial support services. Psychosocial support services are defined for PMHC MDS purposes as services that focus on building capacity and stability in one or more of the following areas:

- social skills and friendships, family connections;
- managing daily living needs;
- financial management and budgeting;
- finding and maintaining a home;
- vocational skills and goals, including volunteering;
- educational and training goals;

- maintaining physical wellbeing, including exercise;
- building broader life skills including confidence and resilience.

These services are usually delivered by a range of non-clinical providers including peer support workers with lived experience of mental illness.

Service Contacts recorded as psychosocial support may be delivered in all episodes of care, regardless of episode type. However, it is expected that they will be mainly associated with episodes where the Principal Focus of Treatment Plan is classified as Psychosocial Support.

98 - ATAPS

Services delivered as part of ATAPS funded referrals that are recorded and/or migrated into the PMHC MDS.

Note: This code should only be used for Service Contacts that are migrated from ATAPS MDS sources that cannot be described by any other Service Type. It is expected that the majority of Service Contacts delivered to clients from 1st July, 2017 can be assigned to other categories.

This response will not be allowed on service contacts delivered after 30 June 2018. (All ATAPS referrals should have concluded by that date).

This response will only be allowed on service contacts with the !ATAPS flag.

Changes in effect from 1 January 2019

- A new Psychosocial Support code has been added to the existing Service Contact Type data item. New code 9.

3.4.146. Service Contact - Venue

Where the service contact was delivered, as represented by a code.

Field name: service_contact_venue

Data type: string

Required: yes

	1:	Client's Home
	2:	Service provider's office
	3:	GP Practice
	4:	Other medical practice
	5:	Headspace Centre
	6:	Other primary care setting
	7:	Public or private hospital
Domain:	8:	Residential aged care facility
	9:	School or other educational centre
	10:	Client's Workplace
	11:	Other
	12:	Aged care centre - non-residential
	98:	Not applicable (Service Contact Modality is not face to face)
	99:	Not stated

Notes:

Note that this data item concerns only where the service contact took place. It is not about where the client lives. Thus, if a resident of an aged care residential facility is seen at another venue (e.g., at a GP Clinic), then the Service Contact Venue should be recorded as 'GP Practice' (code 3) to accurately reflect where the contact took place.

Values other than '98 - Not applicable' only to be specified when Service Contact Modality is 'Face to Face'.

6 - Other primary care setting
   This code is suitable for primary care settings such as community health centres.

8 - Residential aged care facility
   Use this code when the client is seen at an aged care residential facility.

12 - Aged care centre - non-residential
   Use this code when the client is seen at a non-residential aged care centre (e.g., community day program centre for older people).

98 - Not applicable (Service Contact Modality is not face to face)
   This code must only to be used where the Service Contact Modality is not face to face

All other data items would be recorded as per the guidelines that apply to those items – there are no special requirements specific to delivery of services to residents of aged care facilities. For example, any of the episode of care types recorded under the Principal Focus of Treatment Plan may apply; similarly, service contacts delivered to aged care residents may be any of the options available in Service Contact Type field.

3.4.147. Service Contact Key

This is a number or code assigned to each service contact. The Service Contact Key is unique and stable for each service contact at the level of the organisation.

Field name:	service_contact_key
Data type:	string (2,50)
Required:	yes
Notes:	Service contact keys are case sensitive and must be valid unicode characters.

3.4.148. Value

The metadata value.

Field name:	value
Data type:	string
Required:	yes

3.5. Download Specification Files

Available for software developers designing extracts for the PMHC MDS, please click the link below to download the PMHC MDS Specification files:

- Specification zip

4. Upload specification

4.1. File types

Files will be accepted in the following types:

- Comma Separated Values (CSV)
- Excel (XLSX)

4.1.1. Comma Separated Values (CSV)

The CSV files must conform to RFC 4180.

In addition, CSV files must be created using UTF-8 character encoding.

CSV files must have the file extension .csv

Multiple CSV files must be uploaded - one CSV file for each format described below.

The CSV files must be compressed into a single file by zipping before upload. The filename of the zip file doesn't matter as long as it has the file extension .zip

4.1.2. Excel (XLSX)

Excel files must be in XLSX format. The following versions of Excel support this format:

- Excel 2007 (v12.0)
- Excel 2010 (v14.0)
- Excel 2013 (v15.0)
- Excel 2016 (v16.0)

One XLSX file must be uploaded containing multiple worksheets - one worksheet for each format described below.

When saving your file, please choose the filetype 'Excel Workbook (.xlsx)'.

The filename of the Excel file doesn't matter as long as it has the file extension .xlsx

4.2. Files or worksheets to upload

The following files/worksheets can be uploaded to the PMHC MDS:

Table 4.1 Summary of files to upload

File Type	CSV filename	Excel worksheet name	Required
Clients	clients.csv	Clients	Required
Episodes	episodes.csv	Episodes	Required
Service Contacts	service-contacts.csv	Service Contacts	Required
K10+ Collection Occasions	k10p.csv	K10+	Required
K5 Collection Occasions	k5.csv	K5	Required
SDQ Collection Occasions	sdq.csv	SDQ	Required
Practitioners	practitioners.csv	Practitioners	Required for first upload and when practitioner information changes. Optional otherwise
Organisations	organisations.csv	Organisations	Optional only if the user has Organisation Management role
Metadata	metadata.csv	Metadata	Required

Each of the example files assumes the following organisation structure:

Organisation Key	Organisation Name	Organisation Type	Parent Organisation
PHN999	Test PHN	Primary Health Network	None
NFP01	Test Provider Organisation	Private Allied Health Professional Practice	PHN999

4.3. File format

Requirements for file formats:

- The first row must contain the column headings as defined for each file type.
- Each item is a column in the file/worksheet. The 'Field Name' must be used for the column headings. The columns must be kept in the same order.
- The second and subsequent rows must contain the data.
- Data elements for each file/worksheet are defined at Record formats.
- All files must be internally consistent. An example of what this means is that for every row in the episode file/worksheet, there must be a corresponding client in the client file/worksheet.
- All version 2.0 data uploads must include a Metadata file/worksheet. See Metadata file.

4.3.1. Metadata file

All version 2.0 data uploads must include a Metadata file/worksheet. - In the first row, the first cell must contain 'key' and the second cell must contain 'value' - In the second row, the first cell must contain 'type' and the second cell must contain 'PMHC' - In the third row, the first cell must contain 'version' and the second cell must contain '2'

i.e.:

key	value
type	PMHC
version	2

Data elements for the metadata upload file/worksheet are defined at Metadata.

Example metadata data:

- CSV metadata file.
- XLSX metadata worksheet.

4.3.2. Client format

The client file/worksheet is required to be uploaded each time.

Data elements for the client upload file/worksheet are defined at Client.

Example client data:

- CSV client file.
- XLSX client worksheet.

4.3.3. Episode file format

The episode file/worksheet is required to be uploaded each time.

Data elements for the episode upload file/worksheet are defined at Episode.

Example episode data:

- CSV episode file.
- XLSX episode worksheet.

4.3.4. Service Contact file format

The service contact file/worksheet is required to be uploaded each time.

Data elements for the service contact upload file/worksheet are defined at Service Contact.

Example service contact data:

- CSV service contact file.
- XLSX service contact worksheet.

4.3.5. K10+ Collection Occasion file format

The K10+ file/worksheet is required to be uploaded each time.

Data elements for the K10+ collection occasion upload file/worksheet are defined at K10+.

Example K10+ data:

- CSV K10+ file.
- XLSX K10+ worksheet.

4.3.6. K5 Collection Occasion file format

The K5 file/worksheet is required to be uploaded each time.

Data elements for the K5 collection occasion upload file/worksheet are defined at K5.

Example K5 data:

- CSV K5 file.
- XLSX K5 worksheet.

4.3.7. SDQ Collection Occasion file format

The SDQ file/worksheet is required to be uploaded each time.

Data elements for the SDQ collection occasion upload file/worksheet are defined at SDQ.

Example SDQ data:

- CSV SDQ file.
- XLSX SDQ worksheet.

4.3.8. Practitioner file format

The practitioner file/worksheet is required for the first upload and if there is a change in practitioners. It is optional otherwise. There is no harm in including it in every upload.

Data elements for the practitioner upload file/worksheet are defined at Practitioner.

Example practitioner data:

- CSV practitioner file.
- XLSX practitioner worksheet.

4.3.9. Organisation file format

This file is for PHN use only. The organisation file/worksheet is optional. It can be included to upload Provider Organisations in bulk or if there is a change in Provider Organisation details. There is no harm in including it in every upload.

Data elements for the Provider Organisation upload file/worksheet are defined at Provider Organisation.

Example organisation data:

- CSV organisation file.
- XLSX organisation worksheet.

4.3.10. Deleting records

- Records of the following type can be deleted via upload:

    - Client
    - Episode
    - Service Contact
    - K10+
    - K5
    - SDQ
    - Practitioner

  Organisation records *cannot* be deleted via upload. Please email support@pmhc-mds.com if you need to delete an organisation.
- An extra optional "delete" column can be added to each of the supported upload files/worksheets.
- If included, this column must be the third column in each file, after the organisation path and the record's entity key.
- To delete a record, include its organisation path and its entity key, leave all other fields blank and put "delete" in the "delete" column. Please note that case is important. "DELETE" will not be accepted.

- Marking a record as deleted will require all child records of that record also to be marked for deletion. For example, marking a client as deleted will require all episodes, service contacts and collection occasions of that client to be marked for deletion.
- While deletions can be included in the same upload as insertions/updates, we recommend that you include all deletions in a separate upload that is uploaded before the insertions/updates.

Example files showing how to delete via upload:

- XLSX file containing all the worksheets.
- CSV delete client file.
- CSV delete episode file.
- CSV delete service contact file.
- CSV delete K10+ file.
- CSV detete K5 file.
- CSV delete SDQ file.
- CSV delete practitioner file.

4.4. Frequently Asked Questions

Please also refer to Uploading data for answers to frequently asked questions about uploading data.

5. Data item summary

Table 5.1 Summary of data items

Metadata	Provider Organisation	Practitioner	Client	Episode	Service Contact	K10+ C
Key	Organisation Path	Organisation Path	Organisation Path	Organisation Path	Organisation Path	Organis
Value	Organisation Key	Practitioner Key	Client Key	Episode Key	Service Contact Key	Collect
	Provider Organisation - Name	Practitioner - Category	Client - Statistical Linkage Key	Client Key	Episode Key	Episode
	Provider Organisation - Legal Name	Practitioner - ATSI Cultural Training	Client - Date of Birth	Episode - End Date	Practitioner Key	Collect Measur
	Provider Organisation - ABN	Practitioner - Year of Birth	Client - Estimated Date of Birth Flag	Episode - Client Consent to Anonymised Data	Service Contact - Date	Collect Reason
	Provider Organisation - Type	Practitioner - Gender	Client - Gender	Episode - Completion Status	Service Contact - Type	K10+ -
	Provider Organisation - State	Practitioner - Aboriginal and Torres Strait Islander Status	Client - Aboriginal and Torres Strait Islander Status	Episode - Referral Date	Service Contact - Postcode	K10+ -
	Provider Organisation - Start Date	Practitioner - Active	Client - Country of Birth	Episode - Principal Focus of Treatment Plan	Service Contact - Modality	K10+ -
	Provider Organisation - End Date	Practitioner - Tags	Client - Main Language Spoken at Home	Episode - GP Mental Health Treatment Plan Flag	Service Contact - Participants	K10+ -
	Provider Organisation - Tags		Client - Proficiency in Spoken English	Episode - Homelessness Flag	Service Contact - Venue	K10+ -
			Client - Tags	Episode - Area of usual residence, postcode	Service Contact - Duration	K10+ -
				Episode - Labour Force Status	Service Contact - Copayment	K10+ -
				Episode - Employment Participation	Service Contact - Client Participation Indicator	K10+ -

Metadata	Provider Organisation	Practitioner	Client	Episode	Service Contact	K10+
				Episode - Source of Cash Income	Service Contact - Interpreter Used	K10+ -
				Episode - Health Care Card	Service Contact - No Show	K10+ -
				Episode - NDIS Participant	Service Contact - Final	K10+ -
				Episode - Marital Status	Service Contact - Tags	K10+ -
				Episode - Suicide Referral Flag		K10+ -
				Episode - Principal Diagnosis		K10+ -
				Episode - Additional Diagnosis		K10+ -
				Episode - Medication - Antipsychotics (N05A)		K10+ -
				Episode - Medication - Anxiolytics (N05B)		
				Episode - Medication - Hypnotics and sedatives (N05C)		
				Episode - Medication - Antidepressants (N06A)		
				Episode - Medication - Psychostimulants and nootropics (N06B)		
				Episode - Referrer Profession		
				Episode - Referrer Organisation Type		
				Episode - Continuity of Support		
				Episode - Tags		

Metadata	Provider Organisation	Practitioner	Client	Episode	Service Contact	K10+ C
Metadata	Provider Organisation	Practitioner	Client	Episode	Service Contact	K10+ C

6. Using the data specification to create client forms

Some consideration needs to be taken when designing forms based on this data specification.

6.1. Not stated/missing codes

Not stated/missing codes (normally code 9, 99, 999 or 9999) are not to be available as a valid answers to questions but is intended for use:

- Primarily when importing data from other data collections that do not contain mappable data.
- Where an answer was refused.
- Where the question was not able to be asked prior to completion of assistance because the client was unable to communicate or a person who knows the client was not available.

6.2. Country of Birth

Client - Country of Birth has a large permitted domain. It is not feasible to provide all allowed responses on a form. The Australian Bureau of Statistics recommends two standard question modules for Country of Birth:

- Detailed question module
- Short question module

6.2.1. Detailed question module

The detailed question module is the recommended module for Country of Birth. An example is:

```
Q. In which country [were you][was the person] born?

   Australia     q
   England       q
   New Zealand   q
   India         q
   Italy         q
   Vietnam       q
   Philippines   q
   South Africa  q
   Scotland      q
   Malaysia      q
   Other - Please specify.............
```

Form designers do not need to use the countries shown in this example. They should choose countries relevant to the population for their region. The "Other" response can then be mapped to a Client - Country of Birth during data entry.

6.2.2. Short question module

The short question module can be used where there are space constraints. An example is:

```
Q. In which country [were you][was the person] born?

   Australia    q
   Other - please specify..............
```

The "Other" response can then be mapped to a country code during data entry. This form has higher overheads as each response will need to be matched to a Client - Country of Birth during data entry.

6.3. Main Language Spoken at Home

Client - Main Language Spoken at Home has a large permitted domain. It is not feasible to provide all allowed responses on a form. The Australian Bureau of Statistics recommends two standard question modules for Main Language Spoken at Home:

- Detailed question module
- Short question module

6.3.1. Detailed question module

The detailed question module is the recommended module for Main Language Spoken at Home. An example is:

```
Q. [Do you][Does the person] speak a language other than English at home?
   (If more than one language, indicate the one that is spoken most often.)

   No, English      q
   Yes, Mandarin    q
   Yes, Italian     q
   Yes, Arabic      q
   Yes, Cantonese   q
   Yes, Greek       q
   Yes, Vietnamese  q
   Yes, Spanish     q
   Yes, Hindi       q
   Yes, Tagalog     q
   Yes, Other - Please Specify............
```

For self enumerated questionnaires, respondents should be instructed to mark one box only.

Form designers do not need to use the languages shown in this example. They should choose languages relevant to the population for their region. The "Other" response can then be mapped to a Client - Main Language Spoken at Home during data entry.

6.3.2. Short question module

The short question module can be used where there are space constraints. An example is:

```
Q. [Do you] [Does the person] speak a language other than English at home?

  No, English only    q
  Yes,  Other - please specify..............
```

The "Other" response can then be mapped to a country code during data entry. This form has higher overheads as each response will need to be matched to a Client - Main Language Spoken at Home during data entry.

7. Validation Rules

This document defines validation rules between items and record types. The domain of individual items is defined in Record formats.

7.1. 1. Current Validations

7.1.1. 1. Practitioner

1. Practitioner - ATSI Cultural Training must only be set to '3 - Not required' where Practitioner - Aboriginal and Torres Strait Islander Status is one of

    - '1: Aboriginal but not Torres Strait Islander origin'
    - '2: Torres Strait Islander but not Aboriginal origin'
    - '3: Both Aboriginal and Torres Strait Islander origin'

    or

    The organisation to which the practitioner belongs has Provider Organisation - Type set to '8: Aboriginal Health/Medical Service'

7.1.2. 2. Client

1. Client - Date of Birth must not be before 1 January 1900 and must not be in the future

7.1.3. 3. Episode

1. The Episode - End Date must not be before the Episode - Referral Date
2. Episode - Referrer Organisation Type must be set to '98: N/A - Self referral' if and only if Episode - Referrer Profession is also '98: N/A - Self referral'
3. A maximum of one episode shall be open per client
4. Where the Episode - Completion Status has been recorded using one of the 'Episode closed' responses (Response items 1-6), the episode must have an Episode - End Date, and/or episodes that have an Episode - End Date must have an Episode - Completion Status recorded using one of the 'Episode closed' responses (Response items 1-6)
5. On Episode - Principal Diagnosis and Episode - Additional Diagnosis the values:

   - '100: Anxiety disorders (ATAPS)'
   - '200: Affective (Mood) disorders (ATAPS)'
   - '300: Substance use disorders (ATAPS)'
   - '400: Psychotic disorders (ATAPS)'

   must only used where data has been migrated from ATAPS. The above responses must only be used under the following conditions:

   - The Episode - Referral Date was before 1 July 2017
   - The Episode - Tags field must contain the `!ATAPS` flag

6. The '4: Complex care package' response for Episode - Principal Focus of Treatment Plan must only be used by selected PHN Lead Sites
7. The `!ATAPS` tag must only be included in the Episode - Tags field where the Episode - Referral Date was before 1 July 2017
8. Episode - End Date must not be before 1 January 2016 and must not be in the future
9. Episode - Referral Date must not be before 1 January 2014 and must not be in the future

7.1.4. 4. Service Contact

1. Where Service Contact - Final is recorded as '1: No further services are planned for the client in the current episode', the Episode - Completion Status must be recorded using one of the 'Episode closed' responses (Response items 1-6)
2. Where Service Contact - Final is recorded as '1: No further services are planned for the client in the current episode', the date of the Service Contact - Final must be recorded as the Episode End Date
3. Where an Episode - End Date has been recorded, a later Service Contact - Date must not be added
4. If Service Contact - Modality is '0: No contact took place', Service Contact - No Show must be '1: Yes'
5. If Service Contact - Modality is '0: No contact took place', Service Contact - Postcode must be 9999
6. If Service Contact - Modality is '1: Face to Face', Service Contact - Postcode must not be 9999
7. If Service Contact - Modality is '1: Face to Face', Service Contact - Venue must not be '98: Not applicable (Service Contact Modality is not face to face)'
8. If Service Contact - Modality is not '1: Face to Face', Service Contact - Postcode must be 9999
9. On Service Contact - Type the value '98: ATAPS' must only be used where data has been migrated from ATAPS. The above response must only be used under the following conditions:
   - The Service Contact - Date was before 30 June 2018
   - The Service Contact - Tags field must contain the `!ATAPS` flag
10. If Service Contact - Participants is '1: Individual client' Service Contact - Client Participation Indicator must be '1: Yes'
11. The `!ATAPS` tag must only be included in the Service Contact - Tags field where the Service Contact - Date was before 30 June 2018
12. Service Contact - Date must not be before 1 January 2014 and must not be in the future

7.1.5. 5. K10+

1. Collection Occasion - Measure Date must not be before Episode - Referral Date
2. Collection Occasion - Measure Date must not be after Episode - End Date
3. If both item scores and a total score are specified, the item scores must add up to the total score
4. Collection Occasion - Measure Date must not be before 1 January 2016 and must not be in the future

7.1.6. 6. K5

1. Collection Occasion - Measure Date must not be before Episode - Referral Date
2. Collection Occasion - Measure Date must not be after Episode - End Date
3. If both item scores and a total score are specified, the item scores must add up to the total score
4. Collection Occasion - Measure Date must not be before 1 January 2016 and must not be in the future

7.1.7. 7. SDQ

1. Collection Occasion - Measure Date must not be before Episode - Referral Date
2. Collection Occasion - Measure Date must not be after Episode - End Date
3. Collection Occasion - Measure Date must not be before 1 January 2016 and must not be in the future

7.2. 2. Future Validations

7.2.1. 1. SDQ

1. Use the table at SDQ to validate the items that are used in each version of the SDQ
2. If both item scores, subscales and total score are specified, the item scores must agree with the subscales/ total score

8. ATAPS MDS to PMHC MDS data mapping

8.1. Practitioner

See Practitioner for the definition of a practitioner.

The low completion rate of MHPro profile data within the ATAPS MDS results in many practitioner records being populated with mostly "missing" values.

Table 8.1 Practitioner record mapping

Data Element (Field Name)	Type (min,max)	Format / Values
Organisation Path (organisation_path)	string	No comparable concept in ATAPS MDS. PHN's will be required to populate this field.
Practitioner Key (practitioner_key)	string (2,50)	The MHPro nickname from the ATAPS MDS

Data Element (Field Name)	Type (min,max)	Format / Values
Practitioner - Category (practitioner_category)	string	Populated from ATAPS MHPro profile *profession* data using the following mapping:

ATAPS MHP Profession	PMHC Practitioner category
1: Psychologist (Clinical)	1: Clinical Psychologist
2: Psychologist (Generalist/ Other)	2: General Psychologist
3: Social worker	3: Social Worker
4: Occupational Therapist	4: Occupational Therapist
5: Mental Health Nurse	5: Mental Health Nurse
6: Aboriginal and Torres Strait Islander Health Worker	6: Aboriginal and Torres Strait Islander Health/ Mental Health Worker
7: Other	11: Other
8: Aboriginal and Torres Strait Island Mental Health Worker	6: Aboriginal and Torres Strait Islander Health/ Mental Health Worker

Any other values are mapped to

99: Not stated |

Data Element (Field Name)	Type (min,max)	Format / Values
Practitioner - ATSI Cultural Training (atsi_cultural_training)	string	Not part of ATAPS MDS. All practitioner records populated with 9: Missing / Not recorded
Practitioner - Year of Birth (practitioner_year_of_birth)	gYear	Populated from ATAPS MHPro profile data. Missing values mapped to 9999: Date of birth is totally unknown
Practitioner - Gender (practitioner_gender)	string	Mapped from ATAPS to PMHC gender codes. Note that Female/Male codes are swapped between the two MDS systems. | ATAPS gender	PMHC gender
---	---
0: (Blank)	0: Not stated/Inadequately described
1: Female	1: Male
2: Male	2: Female	
Practitioner - Aboriginal and Torres Strait Islander Status (practitioner_atsi_status)	string	Populated from ATAPS MHPro profile data. Codes 1 to 4 map to the same vaules. All other values are mapped to 9: Not stated/inadequately described
Practitioner - Active (practitioner_active)	string	MHPros in the ATAPS MDS are considered active practitioners for data migration. i.e. all records are mapped to 1: Active

Data Element (Field Name)	Type (min,max)	Format / Values
Practitioner - Tags (practitioner_tags)	string	No comparable concept in the ATAPS MDS. All records will be populated with the reserved tag !ATAPS

8.2. Client

See Client for the definition of a client.

Table 8.2 Client record mapping

Data Element (Field Name)	Type (min,max)	Format / Values
Organisation Path (organisation_path)	string	No comparable concept in ATAPS MDS. PHN's will be required to populate this field.
Client Key (client_key)	string (2,50)	ATAPS patient_key
Client - Statistical Linkage Key (slk)	string (14,40)	ATAPS slk or slk_hash
Client - Date of Birth (date_of_birth)	date	Only the patients' year of birth is recorded in ATAPS. The date_of_birth fi is populated with an estimated date of birth, being 1st January in the recorded year of birth. For example, if a patient's year of birth is 1975, the PMHC client date_of_birth is mapped to 01011975.
Client - Estimated Date of Birth Flag (est_date_of_birth)	string	All clients have an estimated date of birth. Mapped to option 2 for all clie 2: Date of birth is an estimate

Data Element (Field Name)	Type (min,max)	Format / Values
Client - Gender (client_gender)	string	Mapped from ATAPS to PMHC gender codes. Note that Female/Male cod are swapped between the two MDS systems.

ATAPS gender	PMHC gender
0: (Blank)	0: Not stated/Inadequately described
1: Female	1: Male
2: Male	2: Female

Data Element (Field Name)	Type (min,max)	Format / Values
Client - Aboriginal and Torres Strait Islander Status (client_atsi_status)	string	Calculated from the ATAPS patient 'Aboriginal' (aboriginal) and 'Torres Stra islander' (torres_si) fields. _table below_

Format / Values table:

ATAPS patient 'aboriginal'	ATAPS patient 'torres_si'	PMHC client atsi stat
1: Yes	2: No (or Blank)	1: Aboriginal but not Torres Strait Islander origin
2: No (or Blank)	1: Yes	2: Torres Strait Islander but not Aboriginal origin
1: Yes	1: Yes	3: Both Aboriginal and Torres Strait Islander origin
2: No (or Blank)	2: No (or Blank)	4: Neither Aboriginal or Torres Strait Islander origin
3: Unknown	(any value)	9: Not stated/ inadequately described
(any value)	3: Unknown	9: Not stated/ inadequately described

Data Element (Field Name)	Type (min,max)	Format / Values
Client - Country of Birth (country_of_birth)	string (4)	Not part of ATAPS MDS. All practitioner records populated with 9999: Unknown

Data Element (Field Name)	Type (min,max)	Format / Values
Client - Main Language Spoken at Home (main_lang_at_home)	string (4)	ATAPS patient 'language spoken at home' had a reduced set of options. T[...] map to PMHC client 'main language spoken at home' as

ATAPS patient lang_at_home	PMHC client main_lan_at_home
1: English	1201: English
2: Italian	2401: Italian
3: Greek	2201: Greek
4: Cantonese	7101: Cantonese
5: Mandarin	7104: Mandarin
6: Arabic	4202: Arabic
7: Vietnamese	6302: Vietnamese
8: Other (or blank)	9999: Unknown

Data Element (Field Name)	Type (min,max)	Format / Values
Client - Proficiency in Spoken English (prof_english)	string	Mapped from ATAPS patient english level: |	ATAPS patient english level	PMHC client proficiency in spoken english
1:	Very Well	1: Very well
2:	Well	2: Well
3:	Not Well	3: Not well
4:	Not at All	4: Not at all
5:	Unknown	9: Not stated/inadequately described
0:	(blank)	9: Not stated/inadequately described	
Client - Tags (client_tags)	string	No comparable concept in the ATAPS MDS. All records will be populated the reserved tag !ATAPS

8.3. Episode

See Episode for the definition of a episode.

Table 8.3 Episode record mapping

Data Element (Field Name)	Type (min,max)	Format / Values
Organisation Path (organisation_path)	string	No comparable concept in ATAPS MDS. PHN's will be required to populate this field.

Data Element (Field Name)	Type (min,max)	Format / Values
Episode Key (episode_key)	string (2,50)	A unique identifier for each episode generated by concatenating the string 'E', an internal ATAPS identifier (integer), and the string 'ATAPS'. For example E12345ATAPS
Client Key (client_key)	string (2,50)	ATAPS patient_key
Episode - End Date (episode_end_date)	date	When the ATAPS referral has a conclusion, the date of the most recent session date for this referral.
Episode - Client Consent to Anonymised Data (client_consent)	string	All ATAPS patients are assumed to have consented to their data being collected. Mapped to option 1 for all episodes: 1: Yes

Data Element (Field Name)	Type (min,max)	Format / Values	
Episode - Completion Status (episode_completion_status)	string	Mapped from ATAPS referral conclusion 	
		ATAPS referral conclusion	**PMHC episode completion status**
		1: Treatment complete	1: Episode closed - treatment concluded
		2: Patient could not be contacted	3: Episode closed administratively - client declined further contact
		3: Patient refused treatment	3: Episode closed administratively - client declined further contact
		4: Patient referred elsewhere	5: Episode closed administratively - client referred elsewhere
		5: Treatment incomplete but referral closed	6: Episode closed administratively - other reason
		6: Patient ineligible	6: Episode closed administratively - other reason
Episode - Referral Date (referral_date)	date	ATAPS referral_date	

Data Element (Field Name)	Type (min,max)	Format / Values
Episode - Principal Focus of Treatment Plan (principal_focus)	string	Determined from ATAPS referral type using the following mapping

Determined from ATAPS referral type using the following mapping

ATAPS referral type		PMHC episode principal focus	
1:	General ATAPS	1:	Psychological therapy
2:	Telephone CBT	7:	Other
3:	Suicide Prevention	7:	Other
4:	Perinatal Depression	7:	Other
5:	Bushfire	7:	Other
6:	Homelessness	7:	Other
7:	Aboriginal & TSI	6:	Indigenous-specific mental health services
8:	Rural & remote	1:	Psychological therapy
9:	Children	5:	Child and youth-specific mental health services
10:	2010-11 Floods and Cyclone Yasi	7:	Other
11:	ATSI Suicide prevention	6:	Indigenous-specific mental health services

Data Element (Field Name)	Type (min,max)	Format / Values		
			ATAPS referral type	PMHC episode principal focus
			12: Tier 2 ECE - Flood/Cyclone	7: Other
			13: Tier 2 ECE - Bushfire	7: Other
			14: Tier 2 ECE - Other	7: Other
			15: MHSRRA	1: Psychological therapy
Episode - GP Mental Health Treatment Plan Flag (mental_health_treatment_plan)	string	Not part of ATAPS MDS. All episode records populated with 9: Not stated/inadequately described		
Episode - Homelessness Flag (homelessness)	string	Not part of ATAPS MDS. All episode records populated with 9: Not stated / Missing		
Episode - Area of usual residence, postcode (client_postcode)	string	ATAPS referral postcode		
Episode - Labour Force Status (labour_force_status)	string	Not part of ATAPS MDS. All episode records populated with 9: Not stated/inadequately described		
Episode - Employment Participation (employment_participation)	string	Not part of ATAPS MDS. All episode records populated with 9: Not stated/inadequately described		

Data Element (Field Name)	Type (min,max)	Format / Values
Episode - Source of Cash Income (income_source)	string	Not part of ATAPS MDS. All episode records populated with 9: Not stated/inadequately described
Episode - Health Care Card (health_care_card)	string	Not part of ATAPS MDS. All episode records populated with 9: Not stated
Episode - NDIS Participant (ndis_participant)	string	Not part of ATAPS MDS. All episode records populated with 9: Not stated/inadequately described
Episode - Marital Status (marital_status)	string	Not part of ATAPS MDS. All episode records populated with 6: Not stated/inadequately described
Episode - Suicide Referral Flag (suicide_referral_flag)	string	Derived from the ATAPS referral type. Referrals with an ATAPS referral_type of either 'Suicide Prevention (3)' or 'ATSI Suicide prevention (11)' are coded as 1: Yes All other referral types map to 2: No

Data Element (Field Name)	Type (min,max)	Format / Values
Episode - Principal Diagnosis (principal_diagnosis)	string	The ATAPS specifications allowed multiple diagnosis to be specifie[d] for a referral. Those referrals where no diagnosis or a single diagnosis were specified are mapped as follows: **ATAPS referral diagnosis** / **PMHC episode principal diagnosis** No diagnosis field defined → 999: Missing icd_f1: Alcohol & Drug Use → 300: Substance use disorders (ATAPS) icd_f2: Psychotic Disorders → 400: Psychotic disorders (ATAPS) icd_f3: Depression → 200: Affective (Mood) disorders (ATAPS) icd_f4: Anxiety Disorders → 100: Anxiety disorders (ATAPS) icd_f5: Unexplained Somatic → 603: Somatoform disorder icd_no_formal_diagnosis: No formal diagnosis → 905: Other icd_unknown: Unknown → 999: Missing icd_other: Other → 905: Other icd_f10_f11: F10 & F11 Substance use disorders → 300: Substance use disorders

Data Element (Field Name)	Type (min,max)	Format / Values		
		ATAPS referral diagnosis		**PMHC episode principal diagnosis**
		icd_f32: F32 Depression		**200:** Affective (Mood) disorders
		icd_f40_f41_f41_1: F40, F41, F41.1 Anxiety		**100:** Anxiety disorders
		icd_f43_2: F43.2 Adjustment disorder		**601:** Adjustment disorder
		icd_f44: F44 Dissociative (conversion) disorder		**605:** Other mental disorder
		icd_f45: F45 Unexplained somatic disorder		**603:** Somatoform disorder
		icd_f48: F48 Neurasthenia (chronic fatigue syndrome)		**605:** Other mental disorder
		icd_f50: F50 Eating disorders		**602:** Eating disorder
		icd_f51: F51 Sleep problems		**605:** Other mental disorder
		icd_f52: F52 Sexual disorders		**605:** Other mental disorder
		icd_f90: F90 Hyperkinetic (attention deficit) disorder		**502:** Attention deficit hyperactivity disorder (ADHD)
		icd_f91: F91 Conduct disorder		**503:** Conduct disorder

Data Element (Field Name)	Type (min,max)	Format / Values

ATAPS referral diagnosis	PMHC episode principal diagnosis
icd_f98: F98 Enuresis	**506:** Other disorder of childhood and adolescence

Referrals where TWO diagnosis fields were specified, the principal
diagnosis is determined using the following hierarchies.

ATAPS referral diagnosis hierarchy:

icd_f3: Depression, then

icd_f4: Anxiety Disorders, then

icd_f5: Unexplained Somatic.

For pairs of children diagnoses

ATAPS children referral diagnosis hierarchy:

icd_f32: F32 Depression, then

icd_f40_f41_f41_1:

F40, F41, F41.1 Anxiety, then

icd_f43_2: F43.2 Adjustment disorder, then

icd_f44: F44 Dissociative (conversion) disorder, then

icd_f50: F50 Eating disorders, then

icd_f51: F51 Sleep problems, then

icd_f90: F90 Hyperkinetic (attention deficit) disorder, then

icd_f91: F91 Conduct disorder.

For example, if a referral was flagged as being for Depression and
Unexplained Somatic, the principal diagnosis would be Depression
and mapped to code 200, as if specified as a single diagnosis above

All other referrals will be mapped to

905: Other

Data Element (Field Name)	Type (min,max)	Format / Values
Episode - Additional Diagnosis (additional_diagnosis)	string	Mapped from ATAPS referral diagnosis fields For referrals where NO diagnosis field was specified, the additiona[...] diagnosis is mapped to **999:** Missing Referrals where exactly ONE diagnosis field was specified, the additional diagnosis is mapped to **000:** No additional diagnosis For referrals where TWO diagnosis fields were specified, the additional diagnosis is determined using the same hierarchies as described in the principal diagnosis when two diagnoses were specified for the referral. The diagnosis NOT selected as the principal diagnosis is mapped as the additional diagnosis. For example, if a referral was flagged as being for Depression and Unexplained Somatic, the additional diagnosis would be Unexplained Somatic and mapped to code 603, using the table above for a single principal diagnosis. Similarlly for the children diagnosis options. If a referral was recorded with F32 Depression and F43.2 Adjustment disorder, the principal diagnosis would be F32 Depression and mapped to code 200, while the additional diagnosis would be F43.2 Adjustment disorder and mapped to code 601. For all other referrals, the additional diagnosis is mapped to **905:** Other
Episode - Medication - Antipsychotics (N05A) (medication_antipsychotics)	string	If ATAPS referral med_pheno is TRUE (or *1*) then **1:** Yes Otherwise **2:** No

Data Element (Field Name)	Type (min,max)	Format / Values

Episode - Medication - Anxiolytics (N05B)
 	
(medication_anxiolytics)
	string	If ATAPS referral med_benzo is TRUE (or *1*) then
		
		  1: Yes
		
		Otherwise
		
		  2: No

Episode - Medication - Hypnotics and sedatives (N05C)
 	
(medication_hypnotics)
	string	If ATAPS referral med_mood is TRUE (or *1*) then
		
		  1: Yes
		
		Otherwise
		
		  2: No

Episode - Medication - Antidepressants (N06A)
 	
(medication_antidepressants)
	string	If ATAPS referral med_antidep is TRUE (or *1*) then
		
		  1: Yes
		
		Otherwise
		
		  2: No

Episode - Medication - Psychostimulants and nootropics (N06B) (medication_psychostimulants)	string	Not part of ATAPS MDS. All episode records populated with **9:** Unknown

Data Element (Field Name)	Type (min,max)	Format / Values
Episode - Referrer Profession (referrer_profession)	string	Mapped from ATAPS referral referrer type: | ATAPS referral referrer type	PMHC episode referrer profession
---	---
1: GP	1: General Practitioner
2: Psychiatrist	2: Psychiatrist
5: Case Manager	10: Social Worker
7: Midwife	6: Midwife
8: Obstetrician	3: Obstetrician
9: Maternal health nurse	7: Maternal Health Nurse
10: Self	98: N/A - Self referral
11: Centrelink Social Workers	10: Social Worker
14: Paediatrician	4: Paediatrician
17: Medical officers in NGOs	10: Social Worker
18: School psychologist / counsellor	8: Psychologist
19: Deputy principals or principals	13: Educational professional	

Data Element (Field Name)	Type (min,max)	Format / Values

ATAPS referral referrer type	PMHC episode referrer profession
20: Director of early childhood services or equivalent	14: Early childhood service worker

All other referrer types are mapped to the referrer profession

99: Not stated

Data Element (Field Name)	Type (min,max)	Format / Values
Episode - Referrer Organisation Type (referrer_organisation_type)	string	Mapped from ATAPS referral referrer type: | ATAPS referral referrer type	PMHC episode referrer organisation type
---	---
3: Community Mental Health	8: Community Health Centre
4: Emergency Department	7: Emergency Department
6: NGO	10: Community Support Organisation NFP
10: Self	98: N/A - Self referral
11: Centrelink Social Workers	20: Centrelink
16: ATSI health organisation / ACCHS (Aboriginal Controlled Community Health Service)	11: Indigenous Health Organisation
17: Medical officers in NGOs	10: Community Support Organisation NFP
18: School psychologist / counsellor	17: School
19: Deputy principals or principals	17: School
21: Drug and alcohol service	9: Drug and Alcohol Service	

Data Element (Field Name)	Type (min,max)	Format / Values

ATAPS referral referrer type	PMHC episode referrer organisation type
22: Acute mental health team	4: Public mental health service

All other referrer types are mapped to the referrer organisation ty[...]

99: Not stated

Data Element (Field Name)	Type (min,max)	Format / Values
Episode - Tags (episode_tags)	string	No comparable concept in the ATAPS MDS. All records will be populated with the reserved tag !ATAPS

8.4. Service Contact

See Service Contact for the definition of a service contact.

Table 8.4 Service contact record mapping

Data Element (Field Name)	Type (min,max)	Format / Values
Organisation Path (organisation_path)	string	No comparable concept in ATAPS MDS. PHN's will be required to populate this field.
Service Contact Key (service_contact_key)	string (2,50)	A unique identifier for each service contact generated by concatenating the string 'SC', an internal ATAPS identifier (integer), and the string 'ATAPS'. For example SC12345ATAPS
Episode Key (episode_key)	string (2,50)	A unique identifier for each episode generated by concatenating the string 'E', an internal ATAPS identifier (integer), and the string 'ATAPS'. For example E12345ATAPS

Data Element (Field Name)	Type (min,max)	Format / Values
Practitioner Key (practitioner_key)	string (2,50)	The MHPro nickname from the ATAPS MDS
Service Contact - Date (service_contact_date)	date	ATAPS session date (ses_date).

Practitioner Key (practitioner_key)	string (2,50)	The MHPro nickname from the ATAPS MDS
Service Contact - Date (service_contact_date)	date	ATAPS session date (ses_date).

Data Element (Field Name)	Type (min,max)	Format / Values

Service Contact - Type
 	
(service_contact_type)
	string	Mapped from ATAPS session strategy (st_*) and no_show fields.
		
		Where the session no_show field is TRUE (or 1), the contact type is mapped to
		
		   0: No contact took place
		
		If the session st_diagnosis field is true, and NO other strategy field is TRUE, the contact type is mapped to
		
		   1: Assessment
		
		If the session st_other field has a non-zero length and NO other strategy field is TRUE, the contact type is mapped to
		
		   3: Other psychological intervention
		
		After the above options have been excluded, if any combination of the following session strategy fields is TRUE or st_cbt_other has a non-zero length
		
		- st_psycho_ed
		- st_interpersonal
		- st_narrative
		- st_cbt_behaviour
		- st_cbt_cognitive
		- st_cbt_relaxation
		- st_cbt_skills
		
		the contact type is mapped to
		
		   2: Structured psychological intervention
		
		Any remaining session will be mapped to the restricted response
		
		   98: ATAPS

Data Element (Field Name)	Type (min,max)	Format / Values

Service Contact - Postcode
 	
(service_contact_postcode)
	string	No postcode was recorded for ATAPS sessions.
		
		If the ATAPS session modality is recorded as *Face to Face* and the ATAPS session *no_show* field is FALSE, a valid Australian postcode is required. Where this is unavailable, the postcode may be recorded as
		
		  9998: Other
		
		All other service contact records will be populated with the postcode
		
		  9999: Unknown

Service Contact - Modality (service_contact_modality)	string	Mapped from ATAPS session no_show and modality fields. If the ATAPS session was flagged as a *no_show*, the PMHC service contact modaility is **0:** No contact took place Otherwise the ATAPS session modality is used. These are the equivilent codes in PMHC:

ATAPS session modality	PMHC service contact modality
1: Face to Face	**1:** Face to Face
2: Telephone	**2:** Telephone
3: Video Conference	**3:** Video
4: Web-based	**4:** Internet-based

Data Element (Field Name)	Type (min,max)	Format / Values
Service Contact - Participants (service_contact_participants)	string	Derived from the ATAPS session type | ATAPS session type	PMHC service contact participants
---	---
1: Individual	1: Individual client
2: Group	2: Client group
3: Child	1: Individual client
4: Parent(s)/family	3: Family / Client Support Network
5: Child & parent(s)/family	3: Family / Client Support Network
6: Child, in group	2: Client group
7: Parent(s)/family, in group	3: Family / Client Support Network
8: Child & parent(s)/family, in group	3: Family / Client Support Network
9: Family	3: Family / Client Support Network	 Any ATAPS sessions with a missing value for session type are mapped to 9: Not stated

Data Element (Field Name)	Type (min,max)	Format / Values
Service Contact - Venue (service_contact_venue)	string	No comparable concept in ATAPS MDS. Sessions that were delivered with a modality of Telephone Video or Internet-based (session.modailty > 1) are mappe to **98:** Not applicable (Service Contact Modality is not face to face) All other sessions are mapped to the response **99:** Not stated
Service Contact - Duration (service_contact_duration)	string	Its not possible to construct a one-to-one mapping betwe ATAPS session duration and PMHC service contact duration. The following mapping will be applied for data conversion: | ATAPS session duration	PMHC service contact duration
---	---
1: 0-30 mins	**2:** 16-30 mins
2: 31-45 mins	**3:** 31-45 mins
3: 46-60 mins	**4:** 46-60 mins
4: over 60 mins	**5:** 61-75 mins	 If the duration was not mapped by the above and ATAPS session was a no_show, the duration is mapped to **0:** No contact took place All other session durations values are mapped to **1:** 1-15 mins

Data Element (Field Name)	Type (min,max)	Format / Values
Service Contact - Copayment (service_contact_copayment)	number	Where ATAPS session copayment > 0, the service contact copayment is the session copayment rounded (cast) to the nearest integer. All other responses are mapped to 0.

Service Contact - Client Participation Indicator
 	
(service_contact_participation_indicator)
	string	Derived from the ATAPS session type.
		
		The participation indicator
		
		  2: No
		
		is used when the session type is either
		
		  4: Parent(s)/family
		
		  7: Parent(s)/family, in group
		
		All other session types are mapped to the participation indicator
		
		  1: Yes

Service Contact - Interpreter Used (service_contact_interpreter)	string	Not part of ATAPS MDS. All episode records populated w 9: Not stated

Service Contact - No Show
 	
(service_contact_no_show)
	string	If ATAPS session.no_show is TRUE (or *1*) then
		
		  1: Yes
		
		Otherwise
		
		  2: No

Service Contact - Final (service_contact_final)	string	No comparable concept in ATAPS MDS. All service conta will be populated with 3: Not known at this stage

Data Element (Field Name)	Type (min,max)	Format / Values
Service Contact - Tags (service_contact_tags)	string	No comparable concept in the ATAPS MDS. All records w be populated with the reserved tag !ATAPS

8.5. Outcome Collection Occasion

See Outcome Collection Occasion for definition of an outcome collection occasion.

8.5.1. K10+

Table 8.5 K10+ record mapping

Data Element (Field Name)	Type (min,max)	Format / Values
Organisation Path (organisation_path)	string	No comparable concept in ATAPS MDS. PHN's will be required to populate this field.
Collection Occasion Key (collection_occasion_key)	string (2,50)	A unique identifier for each collection occasion generated by concatenating the string 'CO', an internal ATAPS identifier (integer), and the string 'ATAPS'. For example CO12345ATAPS
Episode Key (episode_key)	string (2,50)	A unique identifier for each episode generated by concatenating the string 'E', an internal ATAPS identifier (integer), and the string 'ATAPS'. For example E12345ATAPS
Collection Occasion - Measure Date (measure_date)	date	The ATAPS collection occasion date (measure_taken), or the date 09099999 when missing

Data Element (Field Name)	Type (min,max)	Format / Values
Collection Occasion - Reason (reason_for_collection)	string	ATAPS only collected 'initial' and/or 'final' measures for an episode. Any K10+ 'initial' measures are mapped to 1: Episode start while 'final' K10+ measures are mapped to 3: Episode end
K10+ - Question 1 (k10p_item1)	string	ATAPS K10+ collection occasion item 1 score (k01)
K10+ - Question 2 (k10p_item2)	string	ATAPS K10+ collection occasion item 2 score (k02)
K10+ - Question 3 (k10p_item3)	string	ATAPS K10+ collection occasion item 3 score (k03)
K10+ - Question 4 (k10p_item4)	string	ATAPS K10+ collection occasion item 4 score (k04)
K10+ - Question 5 (k10p_item5)	string	ATAPS K10+ collection occasion item 5 score (k05)
K10+ - Question 6 (k10p_item6)	string	ATAPS K10+ collection occasion item 6 score (k06)
K10+ - Question 7 (k10p_item7)	string	ATAPS K10+ collection occasion item 7 score (k07)
K10+ - Question 8 (k10p_item8)	string	ATAPS K10+ collection occasion item 8 score (k08)
K10+ - Question 9 (k10p_item9)	string	ATAPS K10+ collection occasion item 9 score (k09)

Data Element (Field Name)	Type (min,max)	Format / Values
K10+ - Question 10 (k10p_item10)	string	ATAPS K10+ collection occasion item 10 score (k10)
K10+ - Question 11 (k10p_item11)	integer	Item score not recorded in ATAPS. All K10+ collection occasions mapped to 99: Not stated / Missing
K10+ - Question 12 (k10p_item12)	integer	Item score not recorded in ATAPS. All K10+ collection occasions mapped to 99: Not stated / Missing
K10+ - Question 13 (k10p_item13)	integer	Item score not recorded in ATAPS. All K10+ collection occasions mapped to 99: Not stated / Missing
K10+ - Question 14 (k10p_item14)	string	Item score not recorded in ATAPS. All K10+ collection occasions mapped to 9: Not stated / Missing
K10+ - Score (k10p_score)	integer	ATAPS K10+ collection occasion total score (ktot10)
K10+ - Tags (k10p_tags)	string	No comparable concept in the ATAPS MDS. All records will be populated with the reserved tag !ATAPS

8.5.2. K5

Table 8.6 K5 record mapping

Data Element (Field Name)	Type (min,max)	Format / Values
Organisation Path (organisation_path)	string	No comparable concept in ATAPS MDS. PHN's will be required to populate this field.
Collection Occasion Key (collection_occasion_key)	string (2,50)	A unique identifier for each collection occasion generated by concatenating the string 'CO', an internal ATAPS identifier (integer), and the string 'ATAPS'. For example CO12345ATAPS
Episode Key (episode_key)	string (2,50)	A unique identifier for each episode generated by concatenating the string 'E', an internal ATAPS identifier (integer), and the string 'ATAPS'. For example E12345ATAPS
Collection Occasion - Measure Date (measure_date)	date	The ATAPS collection occasion date (measure_taken), or the date 09099999 when missing

Collection Occasion - Reason
 	
(reason_for_collection)
	string	ATAPS only collected 'initial' and/or 'final' measures for an episode.
		
		Any K5 'initial' measures are mapped to
		
		   1: Episode start
		
		while 'final' K5 measures are mapped to
		
		   3: Episode end

K5 - Question 1 (k5_item1)	string	ATAPS K5 collection occasion item 1 score (k01)

Data Element (Field Name)	Type (min,max)	Format / Values
K5 - Question 2 (k5_item2)	string	ATAPS K5 collection occasion item 2 score (k02)
K5 - Question 3 (k5_item3)	string	ATAPS K5 collection occasion item 3 score (k03)
K5 - Question 4 (k5_item4)	string	ATAPS K5 collection occasion item 4 score (k04)
K5 - Question 5 (k5_item5)	string	ATAPS K5 collection occasion item 5 score (k05)
K5 - Score (k5_score)	integer	ATAPS K5 collection occasion total score (ktot5)
K5 - Tags (k5_tags)	string	No comparable concept in the ATAPS MDS. All records will be populated with the reserved tag !ATAPS

8.5.3. SDQ

Table 8.7 SDQ record mapping

Data Element (Field Name)	Type (min,max)	Format / Values
Organisation Path (organisation_path)	string	No comparable concept in ATAPS MDS. PHN's will be required to populate this field.
Collection Occasion Key (collection_occasion_key)	string (2,50)	A unique identifier for each collection occasion generated by concatenating the string 'CO', an internal ATAPS identifier (integer), and the string 'ATAPS'. For example CO12345ATAPS

Data Element (Field Name)	Type (min,max)	Format / Values
Episode Key (episode_key)	string (2,50)	A unique identifier for each episode generated by concatenating the string 'E', an internal ATAPS identifier (integer), and the string 'ATAPS'. For example E12345ATAPS
Collection Occasion - Measure Date (measure_date)	date	The ATAPS collection occasion date (measure_taken), or the date 09099999 when missing

Collection Occasion - Reason
 	
(reason_for_collection)
	string	ATAPS only collected 'initial' and/or 'final' measures for an episode.
		
		Any SDQ 'initial' measures are mapped to
		
		  1: Episode start
		
		while 'final' SDQ measures are mapped to
		
		  3: Episode end

Data Element (Field Name)	Type (min,max)	Format / Values
SDQ Collection Occasion - Version (sdq_version)	string	ATAPS recorded the three variants of SDQ as seperate measures. The SDQ version is mapped from the SDQ measure type and the reason for collection: **ATAPS measure + collection** / **PMHC SDQ version** SDQ PC + Initial collection — **PC101:** Parent Report Measure 4-10 yrs, Baseline version, Australian Version 1 SDQ PC + Final collection — **PC201:** Parent Report Measure 4-10 yrs, Follow Up version, Australian Version 1 SDQ PY + Initial collection — **PY101:** Parent Report Measure 11-17 yrs, Baseline version, Australian Version 1 SDQ PY + Final collection — **PY201:** Parent Report Measure 11-17 yrs, Follow Up version, Australian Version 1

Data Element (Field Name)	Type (min,max)	Format / Values		
		ATAPS measure + collection	**PMHC SDQ version**	
		SDQ YR + Initial collection	**YR101:**	Self report Version, 11-17 years, Baseline version, Australian Version 1
		SDQ YP + Final collection	**YR201:**	Self report Version, 11-17 years, Follow Up version, Australian Version 1
SDQ - Question 1 (sdq_item1)	string	ATAPS SDQ collection occasion item 1 score (s01)		
SDQ - Question 2 (sdq_item2)	string	ATAPS SDQ collection occasion item 2 score (s02)		
SDQ - Question 3 (sdq_item3)	string	ATAPS SDQ collection occasion item 3 score (s03)		
SDQ - Question 4 (sdq_item4)	string	ATAPS SDQ collection occasion item 4 score (s04)		
SDQ - Question 5 (sdq_item5)	string	ATAPS SDQ collection occasion item 5 score (s05)		
SDQ - Question 6 (sdq_item6)	string	ATAPS SDQ collection occasion item 6 score (s06)		
SDQ - Question 7 (sdq_item7)	string	ATAPS SDQ collection occasion item 7 score (s07)		

Data Element (Field Name)	Type (min,max)	Format / Values
SDQ - Question 8 (sdq_item8)	string	ATAPS SDQ collection occasion item 8 score (s08)
SDQ - Question 9 (sdq_item9)	string	ATAPS SDQ collection occasion item 9 score (s09)
SDQ - Question 10 (sdq_item10)	string	ATAPS SDQ collection occasion item 10 score (s10)
SDQ - Question 11 (sdq_item11)	string	ATAPS SDQ collection occasion item 11 score (s11)
SDQ - Question 12 (sdq_item12)	string	ATAPS SDQ collection occasion item 12 score (s12)
SDQ - Question 13 (sdq_item13)	string	ATAPS SDQ collection occasion item 13 score (s13)
SDQ - Question 14 (sdq_item14)	string	ATAPS SDQ collection occasion item 14 score (s14)
SDQ - Question 15 (sdq_item15)	string	ATAPS SDQ collection occasion item 15 score (s15)
SDQ - Question 16 (sdq_item16)	string	ATAPS SDQ collection occasion item 16 score (s16)
SDQ - Question 17 (sdq_item17)	string	ATAPS SDQ collection occasion item 17 score (s17)
SDQ - Question 18 (sdq_item18)	string	ATAPS SDQ collection occasion item 18 score (s18)
SDQ - Question 19 (sdq_item19)	string	ATAPS SDQ collection occasion item 19 score (s19)

Data Element (Field Name)	Type (min,max)	Format / Values
SDQ - Question 20 (sdq_item20)	string	ATAPS SDQ collection occasion item 20 score (s20)
SDQ - Question 21 (sdq_item21)	string	ATAPS SDQ collection occasion item 21 score (s21)
SDQ - Question 22 (sdq_item22)	string	ATAPS SDQ collection occasion item 22 score (s22)
SDQ - Question 23 (sdq_item23)	string	ATAPS SDQ collection occasion item 23 score (s23)
SDQ - Question 24 (sdq_item24)	string	ATAPS SDQ collection occasion item 24 score (s24)
SDQ - Question 25 (sdq_item25)	string	ATAPS SDQ collection occasion item 25 score (s25)
SDQ - Question 26 (sdq_item26)	string	ATAPS SDQ collection occasion item 26 score (s26)
SDQ - Question 27 (sdq_item27)	string	ATAPS SDQ collection occasion item 27 score (s27)
SDQ - Question 28 (sdq_item28)	string	ATAPS SDQ collection occasion item 28 score (s28)
SDQ - Question 29 (sdq_item29)	string	ATAPS SDQ collection occasion item 29 score (s29)
SDQ - Question 30 (sdq_item30)	string	ATAPS SDQ collection occasion item 30 score (s30)
SDQ - Question 31 (sdq_item31)	string	ATAPS SDQ collection occasion item 31 score (s31)

Data Element (Field Name)	Type (min,max)	Format / Values
SDQ - Question 32 (sdq_item32)	string	ATAPS SDQ collection occasion item 32 score (s32)
SDQ - Question 33 (sdq_item33)	string	Item score not recorded in ATAPS. All SDQ collection occasions mapped to 9: Not stated / Missing
SDQ - Question 34 (sdq_item34)	string	Item score not recorded in ATAPS. All SDQ collection occasions mapped to 9: Not stated / Missing
SDQ - Question 35 (sdq_item35)	string	Item score not recorded in ATAPS. All SDQ collection occasions mapped to 9: Not stated / Missing
SDQ - Question 36 (sdq_item36)	string	Item score not recorded in ATAPS. All SDQ collection occasions mapped to 9: Not stated / Missing
SDQ - Question 37 (sdq_item37)	string	Item score not recorded in ATAPS. All SDQ collection occasions mapped to 9: Not stated / Missing
SDQ - Question 38 (sdq_item38)	string	Item score not recorded in ATAPS. All SDQ collection occasions mapped to 9: Not stated / Missing

Data Element (Field Name)	Type (min,max)	Format / Values
SDQ - Question 39 (sdq_item39)	string	Item score not recorded in ATAPS. All SDQ collection occasions mapped to **9:** Not stated / Missing
SDQ - Question 40 (sdq_item40)	string	Item score not recorded in ATAPS. All SDQ collection occasions mapped to **9:** Not stated / Missing
SDQ - Question 41 (sdq_item41)	string	Item score not recorded in ATAPS. All SDQ collection occasions mapped to **9:** Not stated / Missing
SDQ - Question 42 (sdq_item42)	string	Item score not recorded in ATAPS. All SDQ collection occasions mapped to **9:** Not stated / Missing
SDQ - Emotional Symptoms Scale (sdq_emotional_symptoms)	integer	ATAPS SDQ collection occasion emotional symptoms scale (sess)
SDQ - Conduct Problem Scale (sdq_conduct_problem)	integer	ATAPS SDQ collection occasion conduct problem scale (scps)
SDQ - Hyperactivity Scale (sdq_hyperactivity)	integer	ATAPS SDQ collection occasion hyperactivity scale (shs)
SDQ - Peer Problem Scale (sdq_peer_problem)	integer	ATAPS SDQ collection occasion peer problem scale (spps)
SDQ - Prosocial Scale (sdq_prosocial)	integer	ATAPS SDQ collection occasion prosocial scale (sps)

Data Element (Field Name)	Type (min,max)	Format / Values
SDQ - Total Difficulties Score (sdq_total)	integer	ATAPS SDQ collection occasion total difficulties score (stds)
SDQ - Impact Score (sdq_impact)	integer	ATAPS SDQ collection occasion impact score (sis)
SDQ - Tags (sdq_tags)	string	No comparable concept in the ATAPS MDS. All records will be populated with the reserved tag !ATAPS

Data Element (Field Name)	Type (min,max)	Format / Values
SDQ - Total Difficulties Score (sdq_total)	integer	ATAPS SDQ collection occasion total difficulties score (stds)
SDQ - Impact Score (sdq_impact)		

9. Test Data Sets

9.1. SLK Test Data Set

We are providing the following test data to allow developers to test their implementation of the SLK specification as defined at https://docs.pmhc-mds.com/data-specification/data-model-and-specifications.html#client-statistical-linkage-key.

9.1.1. SLK Generation Test Data

Table 9.1 Summary of files to upload

Explanation	First name	Last name	Birth Day	Birth Month	Birth Year	Gender	Expected SLK
Everything there	John	Stevens	7	6	1954	1	TEEOH070619541
Everything there, padded day and month	John	Stevens	07	06	1954	2	TEEOH070619542
A short last name	John	Bo	7	6	1954	3	O22OH070619543
A short first name	Jo	Stevens	7	6	1954	9	TEEO2070619549
No last name	John		7	6	1954	1	999OH070619541
No first name		Stevens	7	6	1954	2	TEE99070619542
No names at all			7	6	1954	3	99999070619543
No gender	John	Stevens	7	6	1954	9	TEEOH070619549
Non-alpha characters in the name	Jo,hn	St' e-vens	7	6	1954	1	TEEOH070619541
No birth day	John	Stevens		6	1954	1	
No birth month	John	Stevens	7		1954	1	
No birth year	John	Stevens	7	6		1	
Non numeric inputs for dates	John	Stevens	a	b	1997`	z	
Default date of birth	John	Stevens	9	9	9999	1	TEEOH090999991

Explanation	First name	Last name	Birth Day	Birth Month	Birth Year	Gender	Expected SLK
UTF8 character in the name	John	Amélie	7	6	1954	3	MEIOH070619543

Download SLK Generation Test Data as CSV.

9.1.2. SLK Validation Test Data

Table 9.2 Summary of files to upload

Explanation	SLK	Valid/Invalid
Every component valid	TEEOH070619541	Valid
Valid with padded 2s	O22N2070619543	Valid
Valid with unknown names	99999070619543	Valid
Too short	TEEOH07061954	Invalid
Too long	99999010119993x	Invalid
Gender not valid	99999010119935	Invalid
Invalid date	99999999999999	Invalid

Download SLK Validation Tests as CSV.

10. Data Specification Change log

10.1. 22/3/2019 - Version 2.0

- Data model and specifications
  - Record formats
    - Added Metadata
    - Provider Organisation
      - Removed Provider Organisation - Organisation Status
      - Added Provider Organisation - Start Date
      - Added Provider Organisation - End Date
    - Episode
      - Added Episode - Continuity of Support
- Upload specification
  - Updated File format to remove the requirement that the first row of each file/worksheet must include the columns Version,1.0. The first row must now contain the column headings as defined for each file type.
  - Added Metadata file