

# Queensland Hospital Admitted Patient Data Collection (QHAPDC) – Licensed Private Health Facilities Fact Sheet

## Provision of admitted patient data

### Reporting mandates

Licensed private health facilities are required to supply demographic and clinical details of separated admitted patients to the [Queensland Hospital Admitted Patient Data Collection \(QHAPDC\)](#) under Section 144 of the [Private Health Facilities Act 1999 \(Qld\)](#) (*the Act*), at times prescribed under Section 7(2)(a) of the [Private Health Facilities Regulation 2000 \(Qld\)](#) (*the Regulation*), and as part of their licencing agreement with the Department of Health.

*The Act* states:

#### 144 Submission of reports

- (1) The licensee of a private health facility must give reports to the chief health officer as required by this section.  
Maximum penalty—50 penalty units.
- (2) The purposes of the reports are as follows—
  - (a) to monitor the quality of health services provided at private health facilities;
  - (b) to enable the State to give information to the Commonwealth or another State, or an entity of the Commonwealth, or another State (*the recipient*), under an agreement with the recipient prescribed under a regulation for section 147(4)(c);
  - (c) to monitor, analyse or evaluate public health having regard to the types and numbers of health services provided at the facilities.
- (3) The reports must—
  - (a) be in the approved form; and
  - (b) be given at the times prescribed under a regulation.

*The Regulation* states:

#### 7 Giving of reports—Act, s 144

- (1) This section applies to reports required to be given under section 144 of the Act.
- (2) For section 144(3)(b) of the Act, the licensee must give the reports at the following times—



- (a) for a report about patient identification, diagnosis and activity data—within 35 days after the end of each month during the term of the licence;
- (b) for a report about clinical indicator data—within 35 days after the end of each 6-month period during the term of the licence;
- (c) for a report about a review by a quality assurance entity to decide whether to certify under a quality assurance program that the facility operates, or continues to operate, under a quality assurance system—within 35 days after the licensee receives a written notice of the outcome of the review from the quality assurance entity.

## Reporting time frames

QHAPDC data must be submitted to the Statistical Services Branch on a monthly basis, and is finalised on a financial year basis.

Under Section 7(2)(a) of *the Regulation*, licensed private health facilities must provide this data ‘within 35 days after the end of each month...’

The table below details the reporting schedule:

Reporting Period	Finalised Data Due
July	4 September
August	5 October
September	4 November
October	5 December
November	4 January
December	4 February
January	7 March (6 in a leap year)
February	4 April
March	5 May
April	4 June
May	5 July
June	4 August

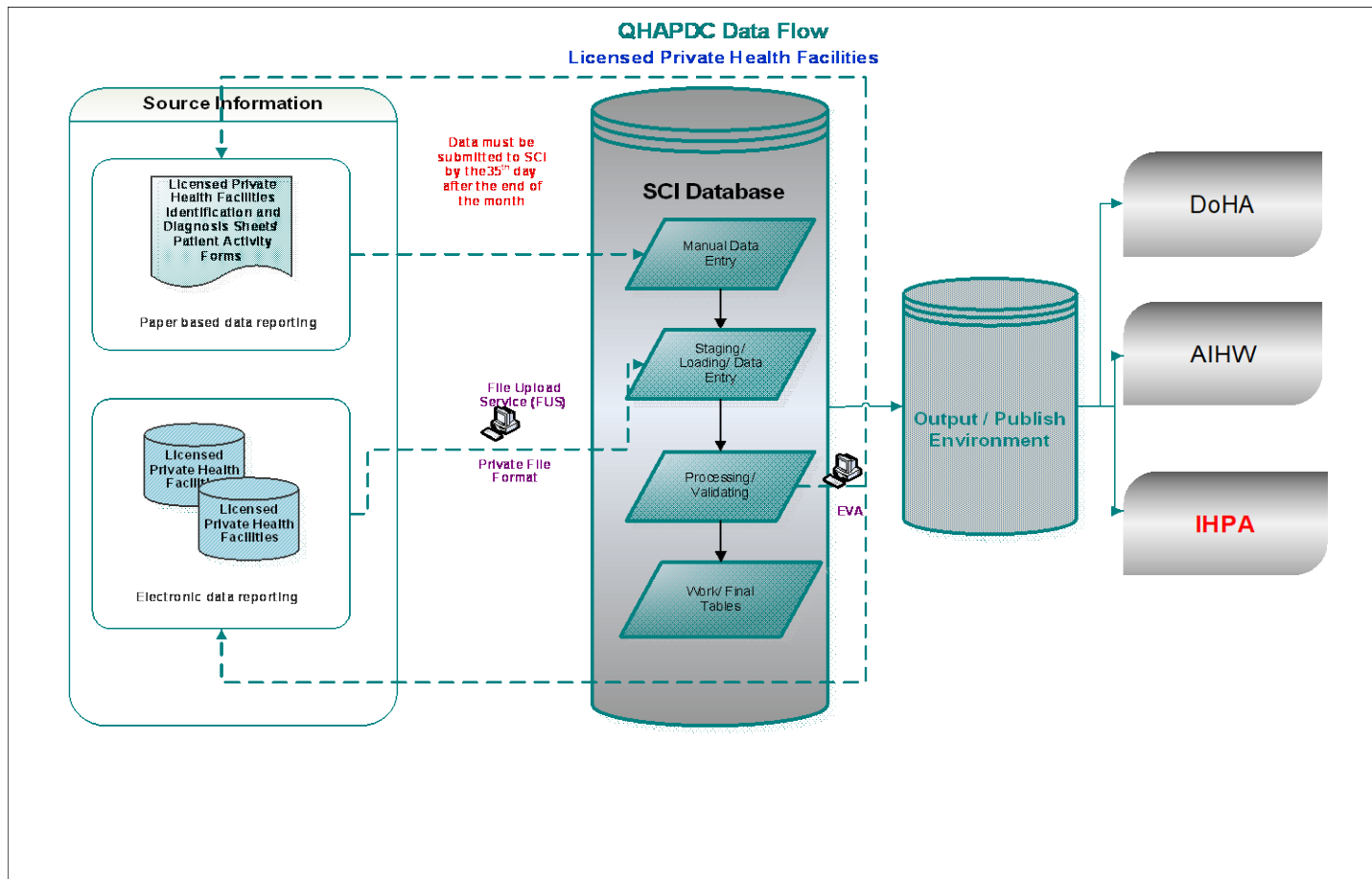
## Data submission and validation process

Licensed private health facilities are required to submit data to the Statistical Services Branch in the approved file format as per section 144(3)(a) of *the Act*.

Electronic data submission is via the File Upload Service (FUS).

Once data is received, it is then loaded and validated. Data that is supplied on forms for data entry is also manually entered and validated. Validations generated are published to the Electronic Validation Application (EVA) for notification and then actioning by these facilities.

This diagram illustrates the data flow between licensed private health facilities and SSB.



## Quality

Licensed private health facilities must ensure that data are of high quality prior to submission to SSB.

The data provided must be complete, consistent, undergo regular validation and be of sufficient quality to enable the Department of Health to carry out its regulatory functions such as legislative requirements, accountabilities to the state and commonwealth governments and to monitor and promote the safety and quality of health services.

Data containing high numbers of validation errors will not be accepted, and the facility will be requested to rectify the source data in their patient information system and resubmit the data.

*Resubmissions of data are to occur in a timely manner to comply with the monthly due dates.*

## Audits

Audits should be undertaken internally as well as by agencies that are external to the hospital to focus on the quality of financial, statistical and clinical data.

Where facilities do not meet the requirements under *the Act*, *the Regulation* or the license, SSB will advise the Chief Health Officer, Department of Health for possible contact with the Chief Executive Officer of the licensed private health facility.

## Contacts

For further information please contact Dave Kearney, Principal Data Collection Officer on (07) 3708 5679 or via [ghipmail@health.qld.gov.au](mailto:ghipmail@health.qld.gov.au)

[QHAPDC Manual and associated documentation](#)