

Queensland Health Non-admitted Patient Data Collection (QHNAPDC)
2022-2023 Data Elements and File Format
V 1.1

The 2022-2023 QHNAPDC data elements are found in the Queensland Health Information Knowledgebase (QHIC) here:

Queensland Health Non-Admitted Patient Data Collection (QHNAPDC) Metadata Dataset
(Information Asset)

Patient identifier
First given name
Second given name
Family name
Sex of patient
Patient date of birth
Patient country of birth
Service event identifier
National provider identifier



These data elements are also included in the 2022-2023 QHNAPDC and are in the process of being published to the internet.

Item No	Data item	Type and size	Notes/valid values	Requirement	CRDS Domain
Header row					
H(1)	Extract period beginning	DDMMYYYY	Located in the first row of the file. The first date of the non-admitted patient data collection reporting period.	Essential	-
H(2)	Extract period ending	DDMMYYYY	Located in the first row of the file. The last date of the non-admitted patient data collection reporting period. Extract period ending must be a valid date and cannot be before the extract period beginning date.	Essential	-
H(3)	Source system	X[X(19)]	Refer to Data Dictionary link.	Essential	NAPSRC
H(4)	Number of records	N(10)	Located in the first row of the file. Contains a count of the rows contained in the submission, excluding the header row.	Essential	-
File details					
1	Facility code	N(5)	Refer to Data Element link.	Essential	Facility Dataset
2	Patient identifier	X[X(19)]	Refer to Data Element link.	Essential	-
3	First given name	[X(40)]	Condition: If the patient has a first given name then this field is essential. If the patient does not have both a given name and a family name, then record the one name in the family name field (data element 5) and leave this field blank.	Conditional	-
4	Second given name	[X(40)]	Condition: If the patient has a middle name then this field is essential. If the patient does not have a middle name, this field is to be left blank.	Conditional	-
5	Family name	[X(40)]	If the patient has a family name then this field is essential. If the patient does not have a family name, record as UNKNOWN.	Essential	-
6	Sex of patient	N(1)	1 - Male 2 - Female 3 - X 9 - Not stated/inadequately described	Essential	-
7	Patient date of birth	DDMMYYYY	Refer to Data Element link.	Essential	-
8	Estimated date of birth indicator	N(1)	Condition: If any component of the date of birth was estimated, then this data element is essential. Otherwise leave this data element blank.	Conditional	-
9	Patient country of birth	N(4)	Refer to Data Element link.	Essential	CNTRY
10	Patient indigenous status	N(1)	Refer to Data Element link.	Essential	INDIG
11	Patient usual residence - address	X[X(119)]	The address line is a combination of the standard address data elements that may be concatenated in the following sequence: For a physical location: - Building/complex sub-unit type - Building/complex sub-unit number - Building/property name- Floor/level type - Floor/level number - House/property number - Lot/section number - Street name - Street type - Street suffix If the address line is not known or cannot be established, record "Unknown".	Essential	-
12	Patient usual residence - suburb	X[X(49)]	Refer to Data Element link.	Essential	Locality Dataset
13	Patient usual residence - postcode	N(4)	Refer to Data Element link.	Essential	-
14	Tier 2 code	N(4)	Condition: This field is optional. However, this data element should be provided If the source system is capable of reporting Tier 2 codes. A Tier 2 code will be derived using the CCC and Service provider code provided.	Optional	TIER2C
15	Corporate Clinic Code (CCC)	N(3)	Refer to Data Element link. New CCC: 728 Child Health - Home Support	Essential	CCC
16	Local Clinic Code	X[X(49)]	Condition: If a local clinic code is available, then this field is essential. Otherwise leave blank.	Conditional	-
17	Service provider	N(8)	Refer to Data Element link.	Essential	PRVTYP
18	Care type	N(1)	Refer to Data Element link.	Essential	CTYNAP

Item No	Data item	Type and size	Notes/valid values	Requirement	CRDS Domain
19	Service delivery setting	N(1)	Note: The setting is from the point of view of the patient in relation to the healthcare provider.	Essential	SRVDEL
20	Service delivery mode	N(1)	1 - In person 2 - Telephone 4 - Electronic mail 5 - Postal/courier service 6 - Telehealth - provider 7 - Telehealth - recipient 8 - Other 9 - Patient self-administered - other 10 - Patient self-administered - diagnostic monitoring (telemonitoring)	Essential	SRVMOD
21	National provider identifier	X[X(7)]	The Medicare service provider/registration number assigned to the clinician who delivers the service event. The Medicare service provider number is a fixed length 8 character field consisting of 6 or 7 numbers and 1 or 2 letters. If more than one clinician provided the service event only a single clinician should be included in this data element. The Tier 2 compendium determines the provider of multi-disciplinary clinics via the 50% rule, whereby the provider who provided the largest percentage of the service event is included.	Optional	-
22	Local provider identifier	X[X(19)]	Conditional: If a local provider identifier exists, then this field is essential.	Conditional	-
23	Multiple Health Care Provider indicator	N(1)	Refer to Data Element link.	Essential	-
24	Service request received date	DDMMYYYYhhmm	Refer to Data Element link.	Essential	-
25	Service request source	N(2)	Refer to Data Element link.	Essential	REQSRC
26	Service request provider name	X[X(79)]	Refer to Data Element link.	Desirable	-
27	Service event date	DDMMYYYYhhmm	Service date must be a valid date, within the values defined in the extract period beginning and extract period ending data elements, and cannot be before the service request received date.	Essential	-
28	Group session indicator	N(1)	Refer to Data Element link.	Essential	-
29	Purchaser establishment identifier	N(5)	Condition: If the service was performed under a contracting arrangement, then this field is essential. Otherwise, leave this blank.	Conditional	Facility Dataset
30	Funding source	N(2)	Refer to Data Element link.	Essential	OOSFND
31	Chargeable status	N(2)	Refer to Data Element link.	Essential	OPCHGE
32	Payment class	N(2)	Condition: If the source system collects this data element, then this field is essential.	Conditional	PAYNAP
33	Medicare number	N(11)	Condition: If the patient has a Medicare number, then this field is essential.	Conditional	-
34	Medicare eligibility	N(1)	Refer to Data Element link.	Essential	MEDCR
35	Blank	N(1)			-
36	Blank	N(1)			-
37	New/review flag	N(1)	Refer to Data Element link.	Essential	NEWREV
38	Department of Veterans' Affairs file number	AAXNNNN[A]	Condition: If a patient has a DVA file number and the service event is to be funded by DVA, then this field is essential.	Conditional	-
39	Department of Veterans' Affairs card type	N(1)	Condition: If a patient holds a DVA card and the service event is to be funded by DVA, then this field is essential.	Conditional	DVACAR
40	Provider establishment identifier	N(5)	Condition: If the service was performed under a contracting arrangement, or by an establishment that is not a declared hospital, then this field is essential. Otherwise, leave blank.	Conditional	Facility Dataset
41	Contract indicator	N(1)	Condition: If the service was performed under a contracting arrangement this field is essential. Otherwise, leave this data element blank.	Conditional	-
42	Additional information	[X(40)]	Refer to Data Element link.	Optional	-
43	Reporting facility identifier	N(5)	Condition: The data item will be used when multiple facilities share the same source system and will enable the activity to be correctly attributed to the facility reporting the activity.	Conditional	Facility Dataset
44	Self referral indicator	N(1)	Note: there are restricted CCCs to which this indicator can be applied. Please refer to business rules document for list of permissible CCCs. Refer to QHNPDC business rules 10a, 10b, 11a and 11b for the application of this indicator.	Optional	-
45	Patient not present indicator	N(1)	Condition: If a patient was not present in a non-admitted patient multiple health care provider service event, then this field is essential. Otherwise leave blank.	Conditional	-
46	Commonwealth funded program type	N(1)	Condition: If a service event was funded under a National Partnership Agreement or another Commonwealth program, then this field is essential. Otherwise, leave blank.	Conditional	CWPTYP
47	Commonwealth exemption type	N(1)	Condition: If a Commonwealth exemption type applies to a service event, then this field is essential. Otherwise leave blank.	Conditional	COAGEX
48	Service request identifier	X[X(99)]	Note: this is not the Statewide service request identifier. Refer to data item #50 Condition: If a referral identifier is available, then this field is essential. Otherwise leave blank.	Conditional	-
49	Service event identifier	X[X(99)]	Hospital Based Corporate Information System (HBCIS): The appointment identifier is derived upon extract and includes clinic code, doctor code, appointment date, patient number, and appointment time. Other enterprise systems that are not interfaced with (SATr): A unique identifier for each service event in the enterprise system. For all other systems that cannot provide the service event identifier: The service event identifier is derived upon extract and includes patient identifier (URN), the first three characters only of the patient's surname, appointment date and time. Must not be blank. Must not be used more than once by the facility. Must be unique for each service event within the facility.	Essential	-
50	Statewide service request identifier (SSRID)	X[X(14)]	A unique statewide service request identifier issued by the Referral Lodgement and Tracking (RLaT) service for referral workflow solutions. Condition: If the SSRID is available, then this field is essential. Otherwise leave blank.	Conditional	-
51	Service request issue date	DDMMYYYY	Condition: If a service request issue date is available, then this field is essential. Otherwise leave blank.	Conditional	-
52	Encounter type	[X(40)]	The type of encounter provided by a hospital or HHS for a service event. This field can assist the reporting facility to identify the type of activity provided in a service event e.g. Community Health.	Optional	-
53	First service event indicator	N(1)	Refer to Data Element link.	Optional	-

Background Colour Legend	
Colour	Type of Data Item
	Patient Details
	Service Details
	Service Event Details
	Service Event Funding Details