



Australian Government

Department of Health, Disability and Ageing

PMHC-MDS User Documentation

The PMHC MDS User Documentation site has been divided into the roles available on the MDS. There are step by step instructions and screenshots to assist users with performing a specific task.

A Frequently Asked Questions guide is also available for each role.

Version 1.0.39

Getting Help

A dedicated **Help Desk** is available to support Primary Health Networks and Provider Organisations implementing PMHC in relation to the minimum dataset system. All enquiries should be directed to: support@pmhc-mds.com.

As at 17 December, 2025

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1. Home, Sign-in & Passwords

- [Access to the PMHC MDS](#)
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- [Forgotten or Expired Password](#)
- [Account Blocked](#)

To use the PMHC MDS navigate to <https://pmhc-mds.net>.

The first page you will see is the **Home** page. The home page shows you the most recent announcements made via the [PMHC mailing list](#).

Home

Home

The Primary Mental Health Care Minimum Data Set (PMHC MDS) will provide the basis for PHNs and the Department of Health to monitor and report on the quantity and quality of service delivery, and to inform future improvements in the planning and funding of primary mental health care services funded by the Australian Government.

For more information please visit www.pmhc-mds.com

Announcements

[PMHC MDS outage scheduled for 6am AEST Thursday 26th May 2022](#)

PMHC MDS outage scheduled for 6am AEST Thursday 26th May 2022

We will be performing maintenance on part of our infrastructure on Thursday 26th May 2022 between 6:00am and 7:00am AEST.

We do not expect the outage to be longer than 30 minutes.

If you are planning on uploading or entering any data during this time, we advise you to complete your work before 6:00am AEST.

Thank-you for your patience whilst this work is carried out.

[PMHC MDS - Domain name change - whitelisting required](#)

Dear All,

As part of our transition to Logicyl we're updating our systems to be accessible under the logicyl.com.au and logicyl.au domains, rather than strategicdata.com.au.

The strategicdata.com.au domain will cease to be active on 31st May 2022.

If your organisation is whitelisting our domains to permit access to our applications please contact your IT department to request that they add the logicyl.com.au and logicyl.au domains. This is important to ensure your uninterrupted access. Note that we have no way of knowing if this is the case. If you are unsure, your IT department can assist.

While the strategicdata.com.au domain will remain registered and under our control for the foreseeable future we will no longer be exposing any application related content on that domain once our transition to the logicyl.com.au domains is complete.

Kind regards, The Logicyl team

[Update to the PMHC MDS - 31/3/2022](#)

PMHC MDS Update v1.15.7

We are pleased to announce that PMHC MDS Update v1.15.7 was released on March 31, 2022.

The following new validation has been implemented:

- All entity key fields (Organisation Key, Practitioner Key, Client Key, etc) must start with a POSIX alphanumeric character (A-Za-z0-9)

Some organisations have a small number of records that break this new rule by starting entity keys with one of the characters [<#>, [-](#), [~](#), [+](#), [\\$](#), [%](#), [_](#)]. These will cause issues if the data is modified. Please contact support@pmhc-mds.com for assistance.

The user guides have been updated to reflect these updates. They are available at <https://docs.pmhc-mds.com/>.

[View Archive](#) (link opens in a new window)

Department of Health

An announcements archive link is now available on the **Home** tab under the three most recent announcements - Click [View Archive](#) to view all the PMHC MDS announcements.

1.1. Access to the PMHC MDS

To access the PMHC MDS, you'll need a Logicyl account, which you'll create when accepting a PMHC MDS invitation.

A user with the User Management role in the PMHC MDS can manage access for new and existing users in their organisation.

If unsure who has this role at for organisation, please contact support@pmhc-mds.com and confirm your commissioning PHN name to enable us to search for these details.

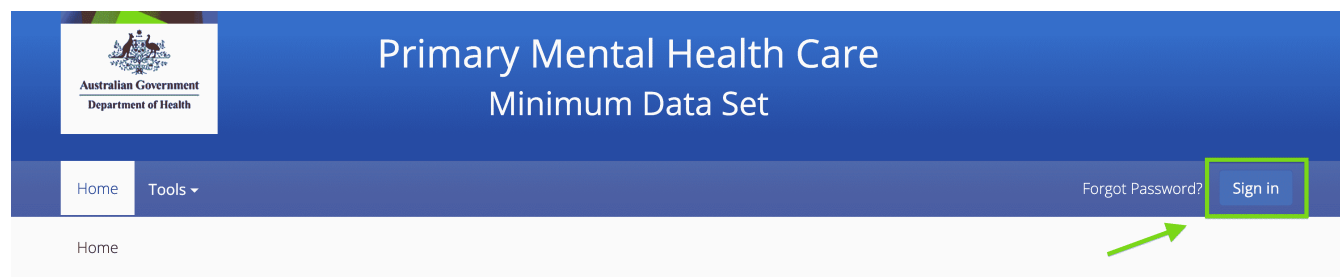
1.2. Accepting an invitation to become a PMHC MDS User

To become a PMHC MDS user you will be sent an PMHC invitation which will enable you to set up a Logically account.

For more information, follow the the steps outlined at [Accepting a Logically account invitation](#)

1.3. Logging In

After navigating to <https://pmhc-mds.net/>, click **Sign in**.



This will open a window to log in. Enter your email address and click **Continue**.



Welcome

Log in to Logicly to continue.

Continue

On the next window, enter your password and click **Continue**.



Enter Your Password

Enter your password for Logicly to continue.

email@example.com

Edit

Password



Continue

To maintain compliance with current best practices in security policy, Multi Factor Authentication (MFA) has been implemented for user access to the PMHC MDS. On first log in you will be prompted to set up MFA. For assistance in setting up and using MFA, follow the Logicly details at [MFA documentation](#).

1.4. Logging Out

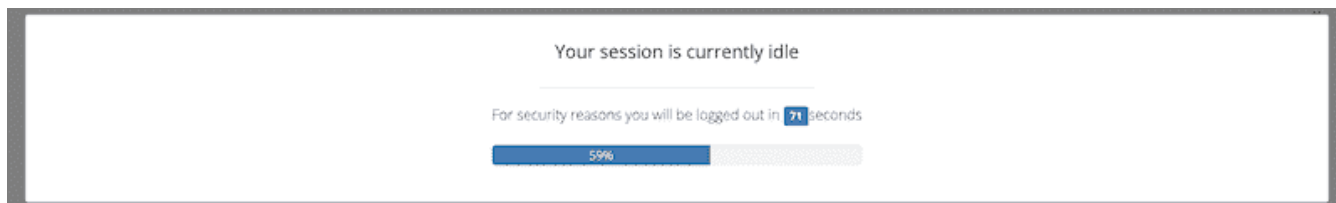
We strongly encourage users to logout when they have completed their tasks.

Logout by:

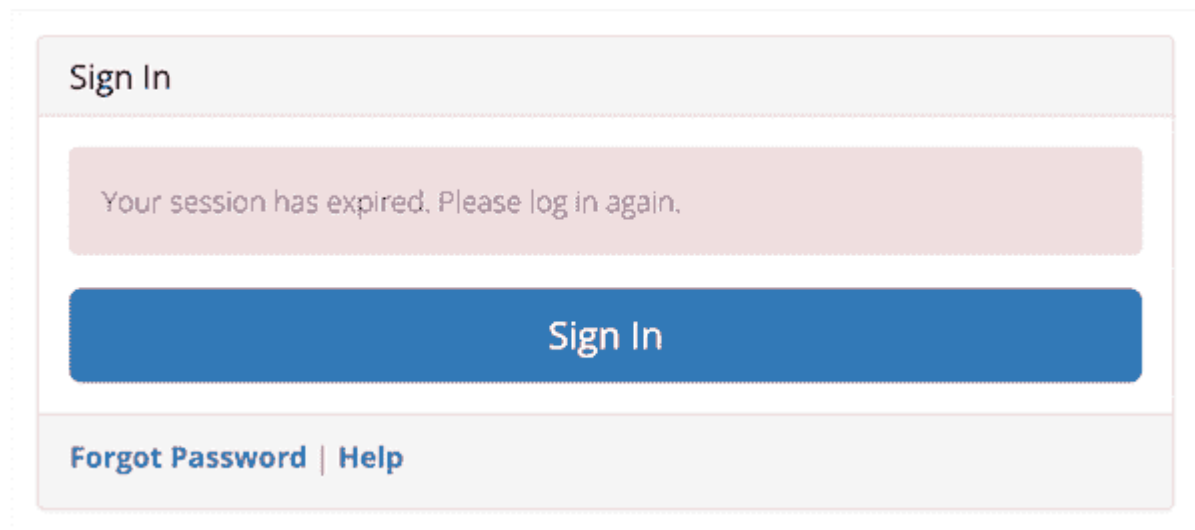
1. Clicking on the button to the right of the menubar that says **Logged in as [Name]**
2. Click **Logout** from the options that open

The screenshot shows the top navigation bar of the Logicly application. The bar is blue and contains several menu items: Home, Organisations, Users, Upload, Data Extract, Reports, Data Entry, and Tools. On the right side of the bar, there is a button that says "Logged in as PMHC Training". A dropdown menu is open from this button, showing two options: "Profile" and "Logout". A green arrow points to the "Logout" option. Below the navigation bar, the "Home" page is visible, with a heading "Home" and a paragraph of text about the Primary Mental Health Care Minimum Data Set (PMHC MDS). At the bottom of the page, there is a link to "www.pmhc-mds.com".

Please note - the PMHC MDS will automatically log users out after 15 minutes of inactivity. You will see a pop up box that provides a countdown feature prior to automatically logging out the idle user.



The login screen will confirm when an auto-logout has occurred to an idle user.



1.5. Updating your details

If your email address has changed, it is important that you update your account. You must be logged in to proceed with these instructions.

For more information, follow the the steps outlined at [Updating Logicly account contact details](#)

If you are unable to log in - See [Request your details be updated](#).

1.6. Request your details be updated

If you can't access your Logicly profile, [contact the PMHC Helpdesk](#) so that your records can be updated. When contacting the PMHC Helpdesk you will be asked to arrange for a [letter of authority](#) stating the change(s) you require.

1.7. Passwords Requirements

As required by the Australian Government's Protective Security Policy Framework passwords must be changed every twelve months. If you do not change your password it will expire and you will not be able to login to the system without resetting your password.

When creating a password, if you see the message “Password unacceptably weak” the password is not of sufficient complexity. To learn more about the password complexity requirements, please refer to [Logicly password requirements](#).

1.8. Password Expiry Notifications

As required by the Australian Government’s Protective Security Policy Framework passwords must be changed every twelve months.

Users will be reminded via an email sent from noreply@logicly.com.au each day for 14 days prior to their password expiry date, and will also be reminded on PMHC MDS login 7 days prior to their password expiry.

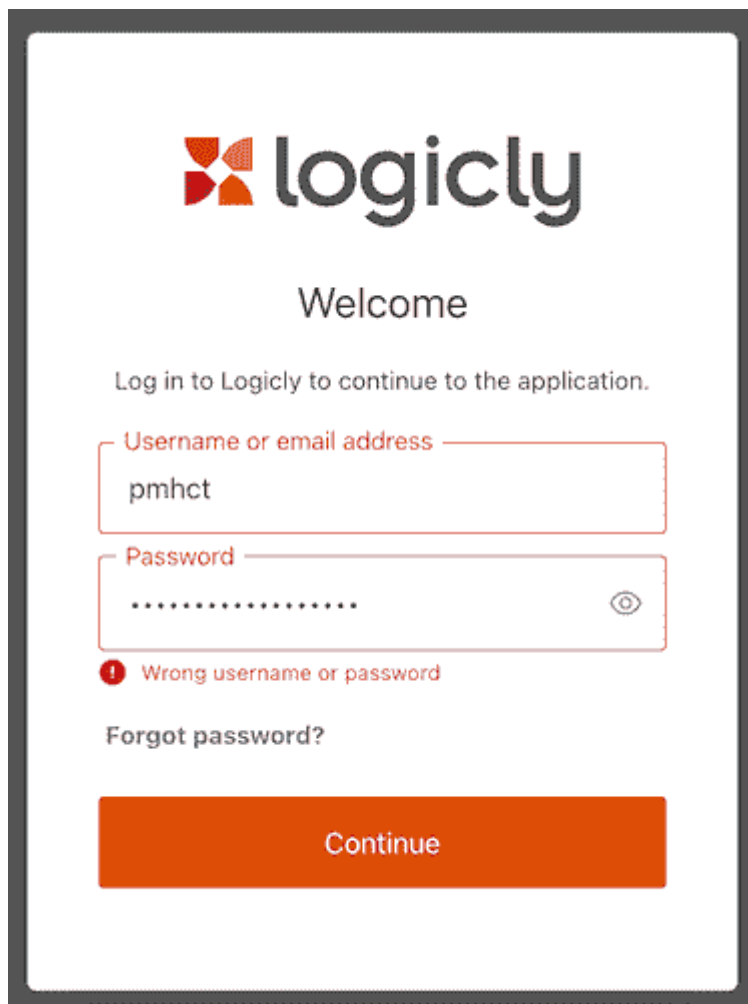
It is quicker to reset your password before it expires. Passwords can be reset by clicking the password reset link, which will open <https://auth.logicly.com.au/>.

For more information, follow the the steps outlined at [Password Expiry Notifications](#).

After your new password has been successfully saved, log out of the Logicly profile management page. Navigate back to the PMHC MDS <https://pmhc-mds.net> and sign in.

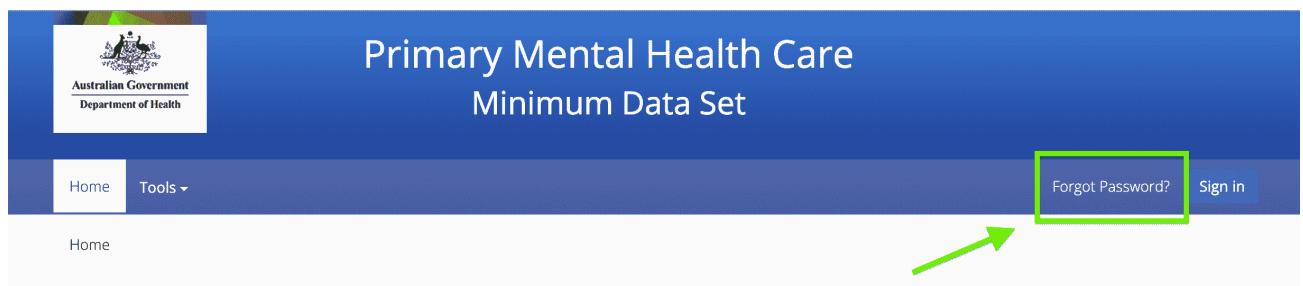
1.9. Forgotten or Expired Password

As required by the Australian Government’s Protective Security Policy Framework passwords must be changed every three months. If you do not change your password it will expire and you will not be able to login to the system without resetting your password.



The image shows a Logicly login interface. At the top is the Logicly logo, which consists of a stylized 'X' made of four colored squares (red, orange, yellow, green) followed by the word 'logicly' in a lowercase sans-serif font. Below the logo is the word 'Welcome' in a bold, sans-serif font. Underneath is the instruction 'Log in to Logicly to continue to the application.' There are two input fields: the first is labeled 'Username or email address' and contains the text 'pmhct'; the second is labeled 'Password' and contains a series of dots, with an eye icon to its right. Below the password field is a red error message: 'Wrong username or password'. Underneath the error message is a link that says 'Forgot password?'. At the bottom is a large orange button with the word 'Continue' in white text.

If you have forgotten your password or it has expired, you can use the automated 'Forgot Password' system to reset your password. Navigate to <https://pmhc-mds.net/> and click **Forgot Password?** (next to **Sign in** button).

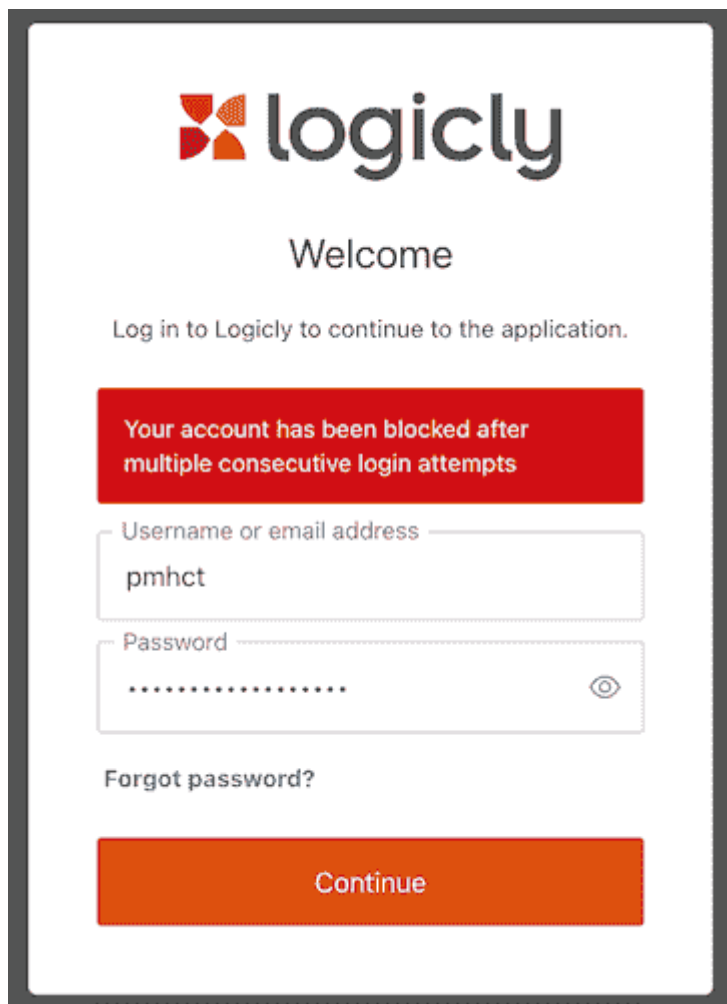


For more information, follow the the steps outlined at [Forgotten Password](#).

After your new password has been successfully saved, log out of the Logicly profile management page. Navigate back to the PMHC MDS <https://pmhc-mds.net> and sign in.

1.10. Account Blocked

To ensure security, the system blocks users who make too many incorrect attempts to access their account on the PMHC MDS.

The image shows a Logicly login interface. At the top is the Logicly logo, which consists of a stylized orange and red icon followed by the word "logicly" in a dark grey sans-serif font. Below the logo is the word "Welcome" in a smaller, dark grey font. Underneath that is the instruction "Log in to Logicly to continue to the application." in a small, dark grey font. A prominent red rectangular box contains the message "Your account has been blocked after multiple consecutive login attempts" in white text. Below this box are two input fields. The first is labeled "Username or email address" and contains the text "pmhct". The second is labeled "Password" and contains a series of dots, with a small eye icon to its right. Below the password field is a link that says "Forgot password?". At the bottom of the form is a large orange button with the word "Continue" in white text.

When this occurs, an automated email will be sent to the email address the PMHC MDS has on file for the user.

For more information, follow the the steps outlined at [Logicly Account Blocked](#).

Please note: Reset your password before attempting to log in again - See [Forgotten or Expired Password](#).

2. Organisations

- [Viewing a PHN](#)
- [Searching for a Provider Organisation](#)
- [Viewing a Provider Organisation](#)
- [Adding a Provider Organisation](#)
- [Editing a Provider Organisation](#)
- [Inactivate a Provider Organisation](#)
- [Viewing an inactive Provider Organisation](#)
- [Deleting a Provider Organisation](#)

You will be able to see the **Organisations** tab if you have been assigned the 'Organisation Management', or the 'User Management' role, when logged into the PMHC MDS on <https://pmhc-mds.net>.

If you believe you should have access to an organisation and it doesn't appear in your list please contact someone who has the 'User Management' role in that provider organisation or the provider organisation's commissioning PHN.

If you are unsure who has the 'User Management' role please email the PMHC helpdesk at support@pmhc-mds.com.

After navigating to the **Organisations** tab, you will be presented with a list of top level organisations for which you have been assigned the 'Organisation Management' or the 'User Management' role.

HomeOrganisationsTools

Logged in as PMHC Training

Home / Organisations

Organisations

Users with the Organisation Management role can use this tab to view, add and edit an organisation commissioned by a PHN.

Users with the User Management role will also be able to use this tab to see all users assigned to an organisation.

Support: For more information and assistance visit PMHC MDS Documentation. (link opens in a new window)

PHNsProvider Organisations

View Organisations

FiltersShow / HideOrganisation

☐ Include inactive organisations

Name	Type	State	Start Date	End Date	Tags
Test PHN <i>PHN999</i>	Primary Health Network	VIC	01/06/2014	09/09/9999	TEST PHN for user traini...

1 / 1

10 items per page

1 - 1 of 1 Items

Australian Government
Department of Health

PMHC-MDS managed by Strategic Data Pty Ltd | Contact Support | Documentation

2.1. Viewing a PHN

You can view a PHN organisation's details through the **Organisations** tab, by following these steps:

- 1. Navigate to the **Organisations** tab
- 2. Click on the PHN name in blue text displayed within the table

The PHN organisation's details will be displayed, along with the **Provider Organisations** tab. If you have the 'User Management' role, a 'Users' tab listing the users that belong to this PHN will also be included.

★ ? PHN 'Test PHN'

Details Provider Organisations Roles of Assigned Users

View Details Edit Details

Tags

TEST PHN for user training purposes

Organisation Path

PHN999

Organisation Key

PHN999

Name

Test PHN

Legal Name

Strategic Data Training PHN

ABN

42072953425

Type

Primary Health Network

State

VIC

Start Date

01/01/2014

End Date

09/09/9999

2.2. Searching for a Provider Organisation

You can search for a provider organisation by sorting and filtering the provider organisations of a PHN. Follow these steps:

1. Navigate to the **Organisations** tab
2. Click the PHN name in blue text displayed within the table
3. Click the **Provider Organisations** tab

★ ? PHN 'Test PHN'

Details Provider Organisations

View Provider Organisations Add Provider Organisation

▼ Filters

👁 Show / Hide

? Provider Organisation

☐ Include inactive organisations

Organisation Name	Type	State	Start Date	End Date	Tags
Not for Profit 1 <i>NFP01</i>	Private Allied Health Prof...	NSW	01/07/2015	09/09/9999	
Not for Profit 2 <i>NFP02</i>	Private Allied Health Prof...	NSW	01/07/2016	09/09/9999	
Test Provider Organisation 1 <i>PO1</i>	General Medical Practice	NT	01/06/2014	01/07/2024	!nspt
Test Provider Organisation 2 <i>PO2</i>	Headspace Centre	ACT	01/06/2014	09/09/9999	
Test Provider Organisation PO <i>PO3</i>	Headspace Centre	NT	01/06/2014	09/09/9999	
ORGANISATION PHN999:PO4 <i>PO4</i>	General Medical Practice	VIC	01/06/2019	09/09/9999	
Test PO <i>test</i>	Community-managed C...	VIC	01/01/2019	09/09/9999	!nspt

◀ ◁ 1 / 1 ▷ ▶ 10 items per page

1 - 7 of 7 Items

4. Sort the listed provider organisations by simply clicking on a column header of the **Provider Organisations** table. Alternately, you can click on the arrow beside a column header for more sort options, as follows:
- **Sort Ascending**
 - **Sort Descending**
 - **Remove Sort**
 - **Hide Column**

You can also show or hide columns by unselecting and reselecting the items listed after pressing the **Show/Hide** button.

[Home](#) / [Organisations](#) / [PHN999](#) / [View Provider Organisations](#)

★ ? PHN 'Test PHN'

Details

Provider Organisations

View Provider Organisations

Add Provider Organisation

▼ Filters

Show / Hide

Provider Organisation

☐ Include inactive organisations

Organisation Name	Type	State	Start Date	End Date	Tags
Not for Profit 1 <i>NFP01</i>	Private Allied Health Prof...	NSW	01/07/2015		
Not for Profit 2 <i>NFP02</i>	Private Allied Health Prof...	NSW	01/07/2016		
Test Provider Organisation 1 <i>PO1</i>	General Medical Practice	NT	01/06/2014		Inspt
Test Provider Organisation 2 <i>PO2</i>	Hearspace Centre	ACT	01/06/2014		
Test Provider Organisation PO <i>PO3</i>	Hearspace Centre	NT	01/06/2014	09/09/9999	
ORGANISATION PHN999:PO4 <i>PO4</i>	General Medical Practice	VIC	01/06/2019	09/09/9999	
Test PO <i>test</i>	Community-managed C...	VIC	01/01/2019	09/09/9999	Inspt

◀ ◻ 1 / 1 ▶

10 items per page

1 - 7 of 7 Items

To filter the listed provider organisations:

1. Click the grey **Filters** button
2. Start typing in any of the column header edit boxes now displayed above the column headers
3. Click the blue **Apply** button

Details
Provider Organisations

View Provider Organisations
Add Provider Organisation
Filters
Show / Hide
Provider Organisation

Select Your Filters:

Organisation Name

Organisation Key

Type

State

Start Date

End Date

Tags

Cancel
Apply

☐ Include inactive organisations

Organisation Name	Type	State	Start Date	End Date	Tags

- To remove the filters, click the black cross on the applied filter name or the **Clear all** button if more than one filter is applied

Details
Provider Organisations
Roles of Assigned Users

View Provider Organisations
Add Provider Organisation
Filters
Show / Hide
Provider Organisation

Filters:
✕ Organisation Name : test
✕ State : NT
✕ Clear all

☐ Include inactive organisations

Organisation Name	Type	State	Start Date	End Date	Tags

2.3. Viewing a Provider Organisation

You can view a provider organisation's details through the **Organisations** tab, by following these steps:

- Navigate to the **Organisations** tab
- Click the PHN name in blue text displayed within the table
- Click the **Provider Organisations** tab
- Click the provider organisation's name from the **View Provider Organisations** table

? [Provider Organisation](#) "Test Provider Organisation 1" at PHN "Test PHN"

Details Roles of Assigned Users

View Details Edit Details

Tags

Insppt

PHN Name

Test PHN

Organisation Path

PHN999:PO1

Organisation Key

PO1

Name

Test Provider Organisation 1

Legal Name

PHN999:PO1 Pty Ltd

ABN

18123456789

Type

General Medical Practice

State

NT

OMSSS Provider Organisation Email**Start Date**

01/06/2014

End Date

01/07/2024

2.4. Adding a Provider Organisation

If you have the 'Organisation Management' role you can add provider organisations through the organisation tab by following these steps:

1. Navigate to the **Organisations** tab
2. Click the PHN name in blue text displayed within the table
3. Click the **Provider Organisations** tab
4. Click the **Add Provider Organisation** tab

★ ? PHN 'Test PHN'

Details Provider Organisations Roles of Assigned Users

View Provider Organisations

Add Provider Organisation

? Provider Organisation

Note: * denotes a mandatory field

Tags ?

Add a tag

Organisation Path

PHN999:

Organisation Key * ?

Name * ?

Legal Name ?

ABN * ?

Type * ?

State * ?

OMSSS Provider Organisation Email

Start Date * ?

Enter date in DD/MM/YYYY or D/M/YYYY format

End Date ?

Enter date in DD/MM/YYYY or D/M/YYYY format

Save

- Complete all the mandatory fields marked with an * in the form
- Click the blue **Save** button
- You will receive confirmation that the organisation has been saved, and it will now be displaying in the PHN's Provider Organisations list

Saved successfully



2.5. Editing a Provider Organisation

If you have the 'Organisation Management' role you can edit a Provider Organisation's details through the organisation tab, by following these steps:

- Navigate to the **Organisations** tab
- Click the PHN name in blue text displayed within the table

★ ? PHN 'Test PHN'

Details Provider Organisations Roles of Assigned Users

View Details Edit Details

Tags

TEST PHN for user training purposes

Organisation Path

PHN999

Organisation Key

PHN999

Name

Test PHN

Legal Name

Strategic Data Training PHN

ABN

42072953425

Type

Primary Health Network

State

VIC

Start Date

01/01/2014

End Date

09/09/9999

3. Click the **Provider Organisation** tab
4. Click the **Provider Organisation** name in blue text displayed within the table

? Provider Organisation "Test Provider Organisation 1" at PHN "Test PHN"

Details Roles of Assigned Users

View Details Edit Details

Tags

Inspt

PHN Name

Test PHN

Organisation Path

PHN999:PO1

Organisation Key

PO1

Name

Test Provider Organisation 1

Legal Name

PHN999:PO1 Pty Ltd

ABN

18123456789

Type

General Medical Practice

State

NT

OMSSS Provider Organisation Email

Start Date

01/06/2014

End Date

01/07/2024

3. If you have permission to edit the Provider Organisation an **Edit Details** tab will be displayed
4. Click the blue **Edit** button

? [Provider Organisation](#) "Test Provider Organisation 1" at PHN "Test PHN"

Details Roles of Assigned Users

View Details Edit Details

Note: * denotes a mandatory field

Tags

Inspt x Add a tag

PHN Name

Test PHN

Organisation Path

PHN999:PO1

Organisation Key

PO1

Name * ?

Test Provider Organisation 1

Legal Name ?

PHN999:PO1 Pty Ltd

ABN * ?

18123456789

Type * ?

General Medical Practice

State * ?

NT

OMSSS Provider Organisation Email

Start Date * ?

Enter date in DD/MM/YYYY or D/M/YYYY format

01/06/2014

End Date ?

Enter date in DD/MM/YYYY or D/M/YYYY format

01/07/2024

Save

- Update the organisation's details. Mandatory fields are marked with an *
- Click the blue **Save** button
- You will receive confirmation that the updated organisation details have been saved

Saved successfully

2.6. Inactivate a Provider Organisation

You can make a provider organisation inactive by entering an **End Date** in the provider organisation details. The **End Date** can be in the future.

Once an end date is saved, there will be a 90 day grace period, in which the users of this inactive provider organisation can finalise adding their data. Users of an inactive provider organisation will not be able to add data after the grace period has passed.

Please note: Service Contact data and Outcome Collection Occasion data will not be able to be recorded after an organisation's end date.

Please note: Only organisations that are active within a reporting period will be displayed in the reports organisation field.

2.7. Viewing an inactive Provider Organisation

You can view an inactive provider organisation's details through the **Organisations** tab, by following these steps:

1. Navigate to the **Organisations** tab
2. Click the PHN name in blue text displayed within the table
3. Click the **Provider Organisations** tab
4. Select the **Include inactive organisations** checkbox
5. Click the provider organisation's name from the table

Inactive organisations will be displayed with a **ZZZ** icon and will be greyed out.

Home / Organisations / PHN999 / View Provider Organisations

★ ? PHN 'Test PHN'

Details Provider Organisations

View Provider Organisations Add Provider Organisation

Filters Show / Hide Provider Organisation

☒ Include inactive organisations

Organisation Name	Type	State	Start Date	End Date	Tags
Not for Profit 1 NFP01	Private Allied Health Prof...	NSW	01/07/2015	09/09/9999	
Not for Profit 2 NFP02	Private Allied Health Prof...	NSW	01/07/2016	09/09/9999	
Test Provider Organisation 1 PO1	General Medical Practice	NT	01/06/2014	01/07/2024	Inspt
ZZZ Test Inactive Provider Organis. PO1i	General Medical Practice	SA	01/06/2016	01/06/2018	
Test Provider Organisation 2 PO2	Headspace Centre	ACT	01/06/2014	09/09/9999	
ZZZ Test Inactive Provider Organis. PO2i	Aboriginal Health/Medic...	NT	01/06/2016	31/12/2018	
Test Provider Organisation PO PO3	Headspace Centre	NT	01/06/2014	09/09/9999	
ORGANISATION PHN999:PO4 PO4	General Medical Practice	VIC	01/06/2019	09/09/9999	
Test PO test	Community-managed C...	VIC	01/01/2019	09/09/9999	Inspt

1 / 1

10 items per page

1 - 9 of 9 Items

2.8. Deleting a Provider Organisation

You cannot delete a provider organisation. If you believe an organisation should be deleted please email support@pmhc-mds.com.

Please note that a provider organisation cannot be deleted if it contains any data within the PMHC MDS. Data can be reviewed through [Data Extract](#) and [Reports](#). To delete data in bulk, please refer to [Deletion of data via an upload file](#). If you wish to delete data record by record, please see [Deletion of client data via data entry](#).

3. Users

- [Users Roles](#)
- [Finding a user](#)
- [Viewing a User's details](#)
- [Editing a User's details](#)
- [Adding a new user](#)
- [Adding an existing user](#)
- [Viewing Invitations](#)
- [Viewing a user's invitation details](#)
- [Reissue an invitation](#)
- [Revoke a pending invitation](#)
- [Delete an invitation](#)
- [Viewing a user's roles](#)
- [Editing a user's roles](#)
- [Deleting a user](#)
- [User Auditing Tool](#)
- [Viewing all Organisational Users](#)
- [Assigning Extra Roles to an Organisational User](#)

You will only be able to see the **Users** tab if you have been assigned the 'User Management' role, when logged into the PMHC MDS on <https://pmhc-mds.net>.

If you don't have access to the **Users** tab and you believe you should, please contact someone in your provider organisation or provider organisation's PHN who has the 'User Management' role.

If you are unsure who has the 'User Management' role please email the PMHC Helpdesk at support@pmhc-mds.com

After navigating to the **Users** tab, you will be presented with a list of the users that are assigned to the organisations for which you have the 'User Management' role.

Users

Users with the User Management role can use this tab to view users, invite new users and edit a user's roles.

Support: For more information and assistance visit [PMHC MDS Documentation](#). (link opens in a new window)

List

Invites (1)

View Users

Invite New User

Filters

Show / Hide

User

Username	Name	Email
user1	given-user1 surname-user1	user1@email.example.com
user10	given-user10 surname-user10	user10@email.example.com
user11	given-user11 surname-user11	user11@email.example.com
user12	given-user12 surname-user12	user12@email.example.com
user13	given-user13 surname-user13	user13@email.example.com
user2	given-user2 surname-user2	user2@email.example.com
user21	given-user21 surname-user21	user21@email.example.com
user22	given-user22 surname-user22	user22@email.example.com
user23	given-user23 surname-user23	user23@email.example.com
user24	given-user24 surname-user24	user24@email.example.com
user25	given-user25 surname-user25	user25@email.example.com

3.1. Users Roles

Access to the PMHC MDS is based around roles. The following table provides a summary of each of the roles that currently exist within the PMHC MDS:

Role	Tasks allowed
Organisation Management	A user with the Organisation Management role for a PHN can manage provider organisations for that PHN.
User Management	A user with the User Management role for an organisation can manage user accounts for that associated organisation.
Upload	A user with the Upload role can upload data to the associated organisation.
Reporting	A user with the Reporting role can run reports and also download data from the associated organisation.
Aggregate Reporting	A user with the Aggregate Reporting role can run reports from the associated organisation.
Data Entry	A user with the Data Entry role can enter client data and practitioners from the associated organisation.
Service Feedback	A user with the Service Feedback role can run completed episodes report and generate invitations for YES-PHN survey.

Each role allows a user to perform specific tasks. A user can have more than one role. Each role is granted for a user against an organisation. An organisation can either be a Primary Health Network or a provider organisation. If a user is granted a role for a Primary Health Network (PHN) they will also have this role for any provider organisations of that PHN. A user can be invited to have a role at more than one organisations. There is no limit to the number of users per organisation.

What users see after they have logged in will depend upon the roles that have been assigned. The table below lists the tabs that will be shown for each role:

Role	Tab
Organisation Management	Organisations
User Management	Organisations, Users
Upload	Upload
Reporting	Reports, Data Extract
Aggregate Reporting	Reports
Data Entry	Data Entry
Service Feedback	Tools: YES-PHN
All users	Tools: SLK

3.2. Finding a user

You can sort and filter the listed users through the **Users** tab.

Please note: Newly invited users will not be visible until they have successfully accepted their invitation.

Sort the listed users by simply clicking on the column header. Alternately you can click on the arrow beside a column header for more sort options, as follows:

- **Sort Ascending**
- **Sort Descending**
- **Remove Sort**
- **Hide Column**

To filter the listed users:

1. Click the grey **Filters** button
2. Start typing in an edit box now displayed under the column headers
3. To remove the filter, click the grey cross within the edit box beside any entered text

List

Invites (1)

View Users

Invite New User

Filters

Show / Hide

User

Username	Name	Email
orga.user1	given-orga.user1 surname-orga.user1	orga.user1@email.example.com
user1	given-user1 surname-user1	user1@email.example.com

3.3. Viewing a User’s details

You can view a user’s details through the user tab, by following these steps:

1. Navigate to the **Users** tab
2. Click on the user’s name in blue displayed within the table

Home / Users / User Details / Details

PMHC Training details

User Details

Roles

View Details

Full Name	Email
PMHC Training	

A page will display showing the user’s details and the [Users Roles](#) they have at particular organisations. See [Viewing a user’s roles](#).

3.4. Editing a User’s details

A user can edit their own contact details.

See [Updating your details](#).

3.5. Adding a new user

Note: PHNs can devolve ‘user management’ authority to one or more users in a provider organisation so that the provider organisation can manage their own logins, or a PHN can choose to keep user management authority at the level of the PHN requiring each provider organisation to contact the PHN when they need a new user added.

Each individual staff member should be set up with their own unique login access. Generic login accounts are not encouraged to be set up and used within the PMHC MDS, and usernames / passwords should not be shared with other individuals. This process ensures that when a staff member leaves, their access can be easily disabled and it doesn't affect other users or the security of the organisation's data. A user's account, should not be passed from one staff member to the next.

Before inviting a user, it is always best to inform them that they will receive a PMHC MDS invitation by email from Logicy on noreply@logicy.com.au. You can also provide them with the link to the online [PMHC-MDS User Documentation](#) to read the steps they will need to complete the steps outlined in [Accepting an invitation to become a PMHC MDS User](#).

The next step to adding a new user is to invite them through the **Users** tab, by following these steps:

1. Navigate to the **Users** tab
2. Click the **Invite New User** tab

The screenshot shows the 'Invite New User' form within the 'Users' tab. The form has a header with 'List' and 'Invites (5)' tabs, and a sub-header with 'View Users' and 'Invite New User' tabs. A 'User' button is in the top right. The form contains several fields: 'First Name *' (text input), 'Surname *' (text input), 'Email *' (text input), and 'Organisation *' (dropdown menu). Below these is a 'Roles *' section with a list of checkboxes: 'Organisation Management', 'User Management', 'Reporting', 'Aggregate Reporting', 'Data Entry', 'Upload', and 'Service Feedback'. At the bottom are 'Invite' and 'Clear' buttons.

3. Complete all the fields with the new users contact details. (Mandatory fields are marked with an *)
4. Select an organisation, either a PHN or Provider Organisation
5. Assign one or more [Users Roles](#). (Extra roles can be added after the user has access to the system. See [Editing a user's roles](#))

List
Invites (5)

View Users
Invite New User
User

First Name *

Firstname

Surname *

Surname

Email *

Firstname.Surname@testpo.com.au

Organisation *

Test PO (PHN999:test)

Roles *

☐ Organisation Management
☐ User Management
☒ Reporting
☐ Aggregate Reporting
☐ Data Entry
☐ Upload
☐ Service Feedback

Invite

Clear

- Click the blue **Invite** button
- You will receive confirmation that the user has been sent an email to invite them to the PMHC MDS. The user will need to follow the instructions in the email before they can gain access to the system. See [Accepting an invitation to become a PMHC MDS User](#) This invitation will be valid for 7 days. Invitations are listed in the **View Invitations** table.
- When the user has accepted the invitation you will be sent an email to let you know. This user will then be listed in the **View Users** table

noreply@strategicdata.com.au

To: **firstname.surname@email.example.com**

PMHC MDS invitation accepted

Hello,

A short while ago you invited **FirstName1 Surname1** to sign up to the PMHC MDS authentication system.

They have now completed the sign-up process, so you are now able to assign roles to them, by searching for their email address: [firstname1.surname1@po1.example.com](#)

Thank you.

*Please note: An invitation for a new user is valid for ****7 days***. If you receive an error that a previous invitation already exists for a user, you can either reissue or revoke the invitation. See [Viewing a user's invitation details](#).*

3.6. Adding an existing user

Note: An existing user must have completed the required steps for [Accepting an invitation to become a PMHC MDS User](#) from their initial PMHC MDS invitation before they can be added again.

Before adding an existing user please ensure you have the same email as their current PMHC MDS Profile. By ensuring these are identical, the system will automatically pick up if a user already exists in the PMHC MDS.

You can invite an existing user through the **Users** tab, by following these steps:

1. Navigate to the **Users** tab
2. Click the **Invite New User** tab
3. Complete all the mandatory fields marked with an * in the **Invite User** form, ensuring these are the same details as their existing PMHC MDS Profile
4. Select an organisation and assign their [Users Roles](#)

The screenshot shows the 'Invite New User' form. At the top, there are tabs for 'List' and 'Invites (5)'. Below this is a sub-header with 'View Users' and 'Invite New User' tabs. The 'Invite New User' tab is active. The form contains the following fields:

- First Name ***: A text input field with a red '...' icon on the right.
- Surname ***: A text input field.
- Email ***: A text input field.
- Organisation ***: A dropdown menu.
- Roles ***: A list of checkboxes for selecting roles:
 - ☐ Organisation Management
 - ☐ User Management
 - ☐ Reporting
 - ☐ Aggregate Reporting
 - ☐ Data Entry
 - ☐ Upload
 - ☐ Service Feedback

At the bottom of the form are two buttons: 'Invite' (in blue) and 'Clear'.

5. Click the blue **Invite** button
6. You will receive confirmation that the roles have been added to the existing user

Please note: The user will receive notification that they have been granted these additional roles at the relevant organisation.

3.7. Viewing Invitations

You can view user invitation details through the **Users** tab, by following these steps:

1. Navigate to the **Users** tab
2. Click on the **Invites** tab

A table will display a list of users that have been sent a recent invitation. These are either:

- **Pending** - these are active invitations which have not been accepted yet
- **Revoked** - these were active invitations which were revoked
- **Expired** - these are inactive invitations which were not accepted within 7 days
- **Accepted** - these are invitations that have been successfully accepted and the user will be listed in the **Users** tab

List **Invites (89)**

View Invitations Filters Show / Hide

Name	Email	Organisation	Invitation issued by	Status
John Doe	john.doe@example.com	Example Org	John Doe	pending
Jane Smith	jane.smith@example.com	Example Org	John Doe	expired
Bob Johnson	bob.johnson@example.com	Example Org	John Doe	accepted
Alice Brown	alice.brown@example.com	Example Org	John Doe	revoked

Please note: Deleted invitations will not be display the in the View Invitations tab. Please note: Invitations sent prior to this feature launch on 29 April 2020 will not display the Organisation and Inviters details.

3.8. Viewing a user's invitation details

You can view a user's invitation details through the **Users** tab, by following these steps:

1. Navigate to the **Users** tab
2. Click on the **Invites** tab
3. Click on the user's email in blue displayed within the table

A page will display the user's invitation details, as entered on the invitation form.

Home / Users / Invites / Invite Details / View Details

Invite Details

View Details

Name	Email
John Doe	john.doe@example.com

Invitation details

Status: Accepted

Expiry Date: 24/12/2020

Organisation: Example Org

Roles: Data Entry, Upload

[Delete Invitation](#)

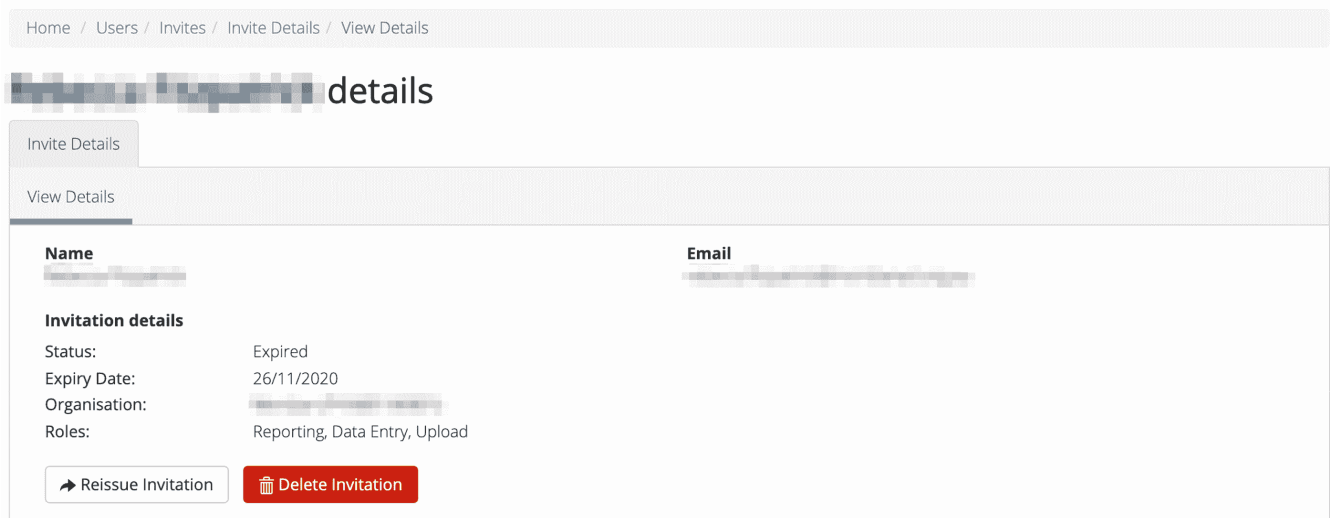
On the page you can:

- [Reissue an invitation](#)
- [Delete an invitation](#)

3.9. Reissue an invitation

You can reissue a pending or expired invitation through the **Users** tab, by following these steps:

1. Navigate to the **Users** tab
2. Click on the **Invites** tab
3. Click on the user's email in blue displayed within the table



1. Review all details are correct
2. Click the 'Reissue Invitation' button to resend the invitation using the same details
3. Click the 'Reissue' button to resend the email invitation details. (or click the 'Cancel' button if you decide not to reissue this invite)

Please note: If any of the details are incorrect on the previous invite, you will need to remove the invitation before being able to send a new invite. See: [Revoke a pending invitation](#).

3.10. Revoke a pending invitation

A pending invitation is an active invitation which has not been accepted yet.

The user has seven days to accept an invitation.

When a pending invitation is revoked, this will inactivate the invite so that the user will no longer be able to accept the invite. You may need to inactivate an invitation if the invitee's details have been incorrectly entered, or if the user should no longer be granted access.

You can revoke a user's invitation through the **Users** tab, by following these steps:

1. Navigate to the **Users** tab
2. Click on the **Invites** tab

3. Click on the user's email in blue displayed within the table

Home / Users / Invites / Invite Details / View Details

details

Invite Details

View Details

Name	Email

Invitation details

Status: Pending

Expiry Date: 27/01/2021

Organisation:

Roles: Data Entry, Upload

[➔ Reissue Invitation](#) [✕ Revoke Invitation](#)

1. Click **Revoke Invitation** to inactivate the pending invite.
2. Click 'Revoke' to confirm that you are sure. (or click the 'Cancel' button if you decide not to revoke this invite)

Please note: Once a previous pending invitation has been revoked, you will then be able to send a new invitation to the user.

3.11. Delete an invitation

An expired invitation is an inactive invitation which was not accepted within seven days of being issued. If you don't intend to reissue the expired invitation, you can delete an expired invitation to remove this invitation from the list.

Accepted invitations will also be shown in the 'invitation' tab. You can also delete an accepted invitation to manually remove the accepted invite from this list.

You can delete a user's invitation through the **Users** tab, by following these steps:

1. Navigate to the **Users** tab
2. Click on the **Invites** tab
3. Click on the user's email in blue displayed within the table

details

Invite Details

View Details

Name

Email

Invitation details

Status: Expired
 Expiry Date: 26/11/2020
 Organisation:
 Roles: Reporting, Data Entry, Upload

[↩ Reissue Invitation](#)
[🗑 Delete Invitation](#)

1. Click **Delete Invitation** to inactivate the pending invite.
2. Click 'Revoke' to confirm that you are sure. (or click the 'Cancel' button if you decide not to revoke this invite)

Please note: A pending invitation can not be deleted. See [Revoke a pending invitation](#).

3.12. Viewing a user's roles

A user can have more than one role. Each role is granted for a user against the appropriate organisation.

You can view the roles for an existing user by following these steps:

1. Navigate to the **Users** tab
2. Click the user's name in blue displayed within the table
3. Click the **Roles** tab to show the user's assigned roles

PMHC Training details

User Details

Roles

View Roles

Note: Organisations can be filtered by typing or selecting criteria below.

Organisation Path	Organisation Name	Organisation Management	User Management	Reporting	Aggregate Reporting	Data Entry	Upload	Service Feedback
<input type="text" value="PHN999"/>	<input type="text"/>							
PHN999	Test PHN	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
— PHN999:HTH01	Test HeadtoHelp		<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
— PHN999:Hub01	Hub 1		<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
— PHN999:Intake0	Intake 01		<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
— PHN999:NFP01	Not for Profit 1 &C		<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
— PHN999:NFP02	Not for Profit 2		<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
— PHN999:PO1	Test Provider Orga		<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
— PHN999:PO2	Test Provider Orga		<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
— PHN999:PO3	Test Provider Orga		<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/> *

A tick displays the user currently has this role assigned at the relevant organisation.

3.13. Editing a user's roles

A user can have more than one role. Each role is granted for a user against the appropriate organisation.

You can edit and assign extra [roles](#) to an existing user by following these steps:

1. Navigate to the **Users** tab
2. Click the user's name in blue displayed within the table
3. Click the **Roles** tab
4. Click the **Edit Roles** tab

Please note: a user can not edit their roles. The 'Edit Roles' tab will not be displayed when viewing your own profile.

given-user1 surname-user1 details


User DetailsRoles

View RolesEdit Roles

Roles


Warning: Roles will be automatically saved when edited.

Organisation Path	Organisation Name	Organisation Management	User Management	Reporting	Aggregate Reporting	Data Entry	Upload	Service Feedback	Actions
PHN999	Test PHN	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<div><div></div><div></div><div></div></div>
— PHN999:HTH	Head2Help 1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
— PHN999:NFP	Test PO 1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
— PHN999:NFP	Test PO 2		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
— PHN999:NFP	Test PO 3		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
— PHN999:NFP	Test inactive PO		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
— PHN999:NFP	Test inactive PO		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
— PHN999:TWB	Not for Profit 1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
— PHN999:TWB	Not for Profit 2		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

6. A tick indicates the user currently has this role assigned at the relevant organisation. Multiple roles can be assigned and these roles are shown as blue ticks
 - **Add** a role by clicking the empty checkbox
 - **Remove** a role by clicking the selected checkbox
 - In the Actions column, clicking the  button will remove all the user's roles at that organisation. If the user then has no roles left for any organisation they will be prevented from logging into the PMHC MDS system.
7. All changes are automatically saved
8. The system will automatically notify the user overnight of any role changes.

Please note: you will still see users in your list that have had all their roles removed unless you use the 'Actions' feature.

3.14. Deleting a user

A user can be deleted from an organisation by using the  button under the edit roles tab, which will remove all the roles a user has at that organisation.

Once completed, if the user does not have any remaining roles within the PMHC MDS, the user will no longer be displayed in the view users table.

See [Editing a user's roles](#).

3.15. User Auditing Tool

The User Auditing Tool allows users with the User Management role to review users who have not recently logged in to the PMHC MDS. User managers should periodically check this table and remove all roles from any user who no longer requires access.

See [User Auditing Tool](#)

3.16. Viewing all Organisational Users

You can view users assigned to an organisation through the organisation tab, by following these steps:

1. Navigate to the tab showing either the PHNs details or the provider organisations details
2. Click on the PHNs or provider organisations name in blue displayed within the table list. If you are unsure how to view the details see [Viewing a PHN](#) or [Viewing a Provider Organisation](#)
3. Under the **Users** tab, you can view a table list of the organisation's users
4. You can filter the users within this table list, click the grey **Filters** button and start typing in an edit box now displayed under the column headers. To remove the filter, click the grey cross within the edit box beside any entered text

View Users Filters Show / Hide

Username	Name	Organisation Management	User Management	Reporting	Aggregate Reporting	Data Entry	Upload	Service Feedback
[redacted]	[redacted]	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
[redacted]	[redacted]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
[redacted]	[redacted]	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
pmhct	PMHC Training	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
[redacted]	[redacted]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
[redacted]	[redacted]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1 1 / 1 10 items per page 1 - 6 of 6 Items

3.17. Assigning Extra Roles to an Organisational User

You can assign extra roles to an existing organisational user, by following these steps:

1. [Navigate to the relevant client details](#)
2. Click the user's name
3. Follow on from Step 3 at [Editing a user's roles](#)

4. Upload

- [Uploading a file](#)
- [Uploading a file in Test Mode](#)
- [Viewing Previous Uploads](#)
- [Viewing Upload Details](#)
- [Complete uploads](#)
- [Error messages](#)
- [Correcting upload errors](#)
- [Deletion of data via an upload file](#)

You will only be able to see the **Upload** tab if you have been assigned the 'Upload' role, when logged into the PMHC MDS on <https://pmhc-mds.net>.

If you don't have access to the **Upload** tab and you believe you should, please contact someone in your provider organisation or provider organisation's PHN who has the 'User Management' role.

If you are unsure who has the 'User Management' role please email the PMHC helpdesk at support@pmhc-mds.com

After navigating to the **Upload** tab, you will be presented with a drop down list of the organisations to which you can upload.

HomeUploadTools

Logged in as PMHC Training

Home / Upload A File

Upload

Users with the Upload role can use this tab to upload files, view file upload status along with validation error reports and successful upload summaries.

Files will be accepted in the following types:

- A zip file (.zip) containing Comma Separated Values (.csv) files
- Excel (XLSX)

Note: After your file has been submitted, it will then be validated. You will receive an email informing you if your file was successfully uploaded to the PMHC MDS, or outlining any errors that occurred.

For more information on the data requirements please refer to the [Upload Specification](#).

Support: For more information and assistance visit [PMHC MDS Documentation](#). (link opens in a new window)

Uploads

Upload A FileView Uploads

Upload

Note: * denotes a mandatory field

Organisation *

Test PHN (PHN999)

Select File

☐ Upload as test data

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Department of Health

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4.1. Uploading a file

After navigating to the **Upload** tab, you will be able to upload data files to organisations for which you have the 'Upload' role.

You can upload data files through the upload tab, by following these steps:

1. Navigate to the **Upload** tab
2. The Primary Health Network (PHN) will be pre-filled in the **Organisation** field, unless you are allowed to upload to more than one PHN which will allow you to select the PHN whose data you are uploading

Uploads

Upload A FileView Uploads

Upload

Note: * denotes a mandatory field

Organisation *

✓

Primary Health Networks

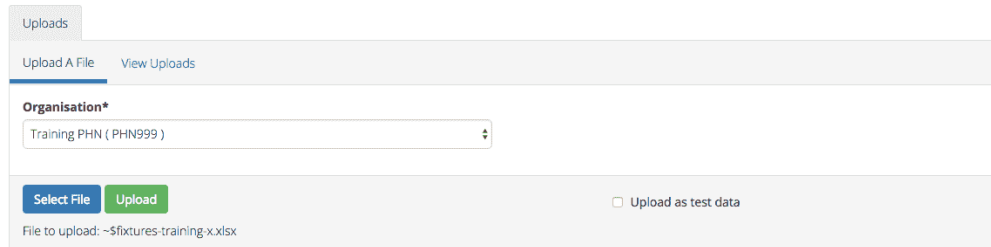
Test Australian Capital Territory (PHN801)

Test PHN (PHN999)

Select File

☐ Upload as test data

4. Click the blue **Select File** button
5. Navigate to where the upload file is saved on your system. Select the file and click the grey **Open** button



The screenshot shows the 'Upload A File' interface. At the top, there are two tabs: 'Upload A File' (active) and 'View Uploads'. Below the tabs is a form with a label 'Organisation*' and a dropdown menu showing 'Training PHN (PHN999)'. At the bottom of the form, there are two buttons: 'Select File' (blue) and 'Upload' (green). To the right of these buttons is a checkbox labeled 'Upload as test data'. Below the buttons, it says 'File to upload: ~\$fixtures-training.xlsx'.

6. Check to ensure you have selected the correct file by reviewing the file name now displayed below the **Select File** button
7. Click the green **Upload** button

You will receive confirmation that your file has been accepted. The file will now be validated and you will receive a confirmation notification and an email. You can click on the link confirmation notification or open the email to view the upload status, informing you that your file was successfully uploaded to the PMHC MDS, or informing you of any errors that occurred. See [Viewing Previous Uploads](#).

Please email support@pmhc-mds.com if you don't receive an email within one hour.

Further discussion about the error messages can be found at [Error messages](#).

4.2. Uploading a file in Test Mode

A file can be uploaded in Test Mode. When uploading in test mode, the file is validated, however the data is not updated in the PMHC MDS database.

After navigating to the **Upload** tab, you will be able to upload in Test Mode data files to organisations for which you have the 'Upload' role.

You can upload data files in Test Mode through the **Upload** tab, by following these steps:

1. Navigate to the **Upload** tab
2. If you are allowed to upload to more than one organisation you will be asked to select an organisation name
3. Select the name of the organisation whose data you are uploading from the drop down list
4. Click the blue **Select File** button
5. Navigate to where the upload file is saved on your system. Select the file and click the grey **Open** button
6. Check to ensure you have selected the correct file by reviewing the file name now displayed below the **Select File** button
7. Click the **Upload as test data** checkbox on the right hand side

Uploads

[Upload A File](#)
[View Uploads](#)

Upload

Note: * denotes a mandatory field

Organisation *

Test PHN (PHN999)

Select File

☒ Upload as test data

8. Click the green **Upload** button

You will receive confirmation that your file has been accepted. The file will now be validated and you will receive an email informing you if your file was valid, or informing you of any errors that occurred.

Even if your file was valid, the data will not be updated in the PMHC MDS database.

Upload Details

View Details

File Name
 fixtures-training.xlsx

Upload ID
 37fb099b

Upload Date
 29/08/2018 04:28:52 PM

Status
 complete

Uploader
 PMHC Training

Specification
 PMHC 1.0

Messages
 Completed in Test Mode

4.3. Viewing Previous Uploads

The PMHC MDS allows you to review previous uploads.

Uploads

[Upload A File](#)
[View Uploads](#)

Filters
 Show / Hide

Upload

Upload ID	Date Uploaded	Organisation Name	Username	File Name	Specification	Test	Status
6e0413ec	01/11/2018 01:34:18 PM	Test PHN	PMHCT	fixtures.xlsx	PMHC 1.0	No	accept
a2e60b3d	31/10/2018 02:23:37 PM	Test PHN	PMHCT	fixtures.xlsx	PMHC 1.0	No	complete
506aa42f	29/10/2018 09:18:10 AM	Test PHN	PMHCT	fixtures.xlsx	PMHC 1.0	Yes	complete
216d1fa5	25/10/2018 09:39:28 AM	Test PHN	PMHCT	fixtures.xlsx	PMHC 1.0	Yes	error

When an upload has been completed, regardless of whether it validated successfully or not, the upload will be added to the table.

The **Status of Previous Uploads** table refreshes once files finish the validation process. Types of status results are:

- **accept** - the file is currently going through the validation process
- **complete** - the file has successfully passed the validation process
- **error** - the file has returned errors through the validation process. Please review the error messages and correct the data to upload again

Further discussion about the error messages can be found at [Error messages](#).

4.4. Viewing Upload Details

You can view the results of an upload by following these steps:

1. Navigate to the **Upload** tab
2. Click the **Upload Status** tab
3. Locate the date and time of the upload you are interested in
4. Click on the filename of the relevant upload
5. You will be shown the **Upload Detail** page

4.5. Complete uploads

[Viewing Upload Details](#) for complete uploads will display data verification information by listing the number of data records present and if those records are added, updated, or deleted, within the MDS records.

Messages				
File/Worksheet	Present	Added	Updated	Deleted
organisations	1	0	1	0
practitioners	11	0	11	0
clients	27	2	25	0
episodes	27	2	25	0
service contacts	114	20	94	0
k10p	10	2	8	0
k5	0	0	0	0
sdq	0	0	0	0

4.6. Error messages

If the status of your file shows error, you can view the returned errors through [Viewing Previous Uploads](#).

Upload Details

View Details

File Name

fixtures-training-x.xlsx

Upload ID

537e4d0d

Upload Date

29/08/2018 06:17:30 PM

Uploader

PMHC Training

Status

error

Specification

PMHC 1.0

Errors

File/Worksheet	Row	Column Name	Error
Practitioners	7	atsi_cultural_training	Invalid ATSI Cultural Training. "Not required" is reserved only for practitioners who are of ATSI descent or employed by an Aboriginal Community Controlled Health Service. Therefore practitioner_atSI_status must have the value "Aboriginal but not Torres Strait Islander origin", "Torres Strait Islander but not Aboriginal origin" or "Both Aboriginal and Torres Strait Islander origin" or the Provider Organisation must have the type "Aboriginal Health/Medical Service".
Clients	12	date_of_birth	required to have a date between 01011900 and today's date.
Clients	24	client_atSI_status	value of "5" is invalid.
Clients	30	client_gender	required.
Clients	30	client_gender	value of "[blank]" is invalid.
Clients	34	organisation_path / client_key	value of "PHN999:PO2 / CL1003" is not unique. A previous row in the file contains the same values.
Episodes	7	episode_end_date	required to have a date between 01012016 and today's date.
Episodes	12	referral_date	required to have a date between 01012014 and today's date.
Service contacts	72	service_contact_date	required to have a date between 01012014 and today's date.
Service contacts	74	organisation_path / episode_key	value of "PHN999:PO2 / EP000039" is invalid. There is no matching row in the Episodes file/worksheet with this identifier.
K10p	11	measure_date	required to have a date between 01012016 and today's date.
Sdq	4	sdq_total	Inconsistent sdq_total. The Total Difficulties Score doesnt match the sum on the underlying subscales.

4.7. Correcting upload errors

Any data errors will need to be corrected in your internal system and a new upload file created. Or if you manually record data on the upload file, you can edit the data records directly on the file.

The definition of each data item has associated notes that will provide guidance on why an error is returned. By visiting the data specifications documentation and clicking on the [Record formats](#) field name this will take you to the field definition which outlines the associated notes.

In the Frequently Asked Questions guide there are questions about some of the common and unusual upload error messages. These answers contain information on what you can do to fix the error. See - [Uploading Data FAQs](#).

If you require assistance in understanding an error message, please email support@pmhc-mds.com.

4.8. Deletion of data via an upload file

All data except for Organisation records can be deleted through an upload file. Further details on how to create a deletion file is available in the online specifications. See: [Delete upload file format](#).

5. Data Entry

- [Client Data](#)
- [Intake](#)
- [Intake IAR-DST Measure](#)
- [Episodes](#)
- [Intake Episodes](#)
- [Universal Aftercare Episode](#)
- [Service Contacts](#)
- [Outcome Collection Occasions](#)
- [Collection Occasion Measures](#)
- [Practitioners](#)

You will only be able to see the **Data Entry** tab if you have been assigned the 'Data Entry' [Users Roles](#), when logged into the PMHC MDS on <https://pmhc-mds.net>.

If you don't have access to the **Data Entry** tab and you believe you should, please contact someone in your provider organisation or provider organisation's PHN who has the 'User Management' role. If you are unsure who has the 'User Management' role please email the PMHC Helpdesk at support@pmhc-mds.com.

After navigating to the **Data Entry** tab, you will be presented a table of clients.

Home
Data Entry
Tools
Logged in as PMHC Training

Home / Data Entry / Clients / View Clients

Data Entry

Users with the Data Entry role can use this tab to add, view and edit client records.

Support: For more information and assistance visit [PMHC MDS Documentation](#). (link opens in a new window)

Clients

Practitioners

View Clients
Add New Client

Filters
Show / Hide

Client Key	Organisation Path	SLK	Date Of Birth	Gender	Last Known Postcode	Last Contact Date	Tags
99	PHN999:PO1	S9F9M5JSPKP59Y2...	13/09/1976	Not stated/Inadeq...			9
CFIX000000	PHN999:PO1	FG0B9BAHYCC34...	01/01/1940	Female	3114	27/10/2016	
CFIX000001	PHN999:PO1	MBKDJ4TD21FVFN...	14/01/1940	Male	9999	19/12/2016	
CFIX000002	PHN999:PO1	CTY7W5DWDHMD...	27/01/1940	Female	9999	12/01/2018	
CFIX000003	PHN999:PO1	0FWRZFHX3ME6H...	09/02/1940	Other	3899	26/02/2016	
CFIX000004	PHN999:PO1	YYWTEA9QF2RV8J...	22/02/1940	Female	9999	03/11/2017	
CFIX000005	PHN999:PO1	N98442TX29825R...	06/03/1940	Male	9998	19/11/2016	
CFIX000006	PHN999:PO1	T7HRAN1P38AWK...	19/03/1940	Male	3114	08/01/2017	
CFIX000007	PHN999:PO1	1HRB4SK6CRC71...	01/04/1940	Male	3899	28/04/2016	
CFIX000008	PHN999:PO1	5TXJJ40EQ5QDC7...	01/01/1940	Other	3065	20/11/2017	

1 / 206
10 items per page
1 - 10 of 2058 items

Australian Government
Department of Health

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5.1. Client Data

- Clients
- Finding a Client
- Viewing a Client's details
- Editing a Client
 - Editing a Client Key
- Adding a New Client
- Deleting a Client
 - Confirm Delete
 - Cannot Delete

5.1.1. Clients

A display of the client data will be listed within the table.

Clients Practitioners								
View Clients Add New Client		Filters Show / Hide ?						
Client Key ^ v	Organisation Path	SLK ^ v	Date Of Birth ^ v	Gender ^ v	Last Known Postcode ^ v	Last Contact Date	Tags ^ v	
99	PHN999:PO1	S9F9MSJSPKPS9Y2...	13/09/1976	Not stated/Inadeq...			9	
CFIX000000	PHN999:PO1	FG0B9BAHYCC34...	01/01/1940	Female	3114	27/10/2016		
CFIX000001	PHN999:PO1	MBKDJ4TD21FVN...	14/01/1940	Male	9999	19/12/2016		
CFIX000002	PHN999:PO1	CTY7W5DWDHMD...	27/01/1940	Female	9999	12/01/2018		
CFIX000003	PHN999:PO1	0FWRZFH3ME6H...	09/02/1940	Other	3899	26/02/2016		
CFIX000004	PHN999:PO1	YYWTEA9QF2RV8J...	22/02/1940	Female	9999	03/11/2017		
CFIX000005	PHN999:PO1	N98442TX29825R...	06/03/1940	Male	9998	19/11/2016		
CFIX000006	PHN999:PO1	T7HRAN1P38AWK...	19/03/1940	Male	3114	08/01/2017		
CFIX000007	PHN999:PO1	1HRB4SK6CRC71...	01/04/1940	Male	3899	28/04/2016		
CFIX000008	PHN999:PO1	5TXJJ40EQ5QDC7...	01/01/1940	Other	3065	20/11/2017		

1 / 206
10 items per page
1 - 10 of 2058 Items

You can scroll through the results by using the page arrows to view the data.

5.1.2. Finding a Client

You can choose any of the filters to search for a client, depending on the client information that is available.

To filter the listed clients:

1. Click the grey **Filters** button. This will open a field in which to enter text

Clients Practitioners

View Clients Add New Client
Filters Show / Hide ?

Select Your Filters:

Client Key

Client Key

Organisation Path

Organisation Path

SLK

SLK

Date Of Birth

DD/MM/YYYY

Gender

Last Known Postcode

Last Known Postcode

Last Contact Date

DD/MM/YYYY

Tags

Tags

Cancel Apply

Client Key ^ v	Organisation Path	SLK ^ v	Date Of Birth ^ v	Gender ^ v	Last Known Postcode ^ v	Last Contact Date	Tags ^ v
----------------	-------------------	---------	-------------------	------------	-------------------------	-------------------	----------

2. Type an appropriate filter into any of the fields
3. Click the blue **Apply** button (or click the **Cancel** button if you decide not to filter the client data)

You can view the applied filters at the top of the filtered client data table.

Clients

Practitioners

View Clients

Add New Client

Filters

Show / Hide

Filters:

✕ Client Key : CL

✕ Gender : Male

✕ Last Known Postcode : 9999

✕ Clear all

Client Key ▲ ▼	Organisation Path	SLK ▼	Date Of Birth ▼	Gender ▼	Last Known Postcode ▼	Last Contact Date	Tags ▼
CL0002	PHN999:PO1	BBR6G3CWCQAKE...	24/09/2007	Male	9999	17/07/2016	tag2
CL0006	PHN999:PO1	MN65F3CEKY47K...	04/01/1958	Male	9999	24/07/2016	tag2 tag3
CL02092020	PHN999:PO1	1XECGWXQNQ1D...	01/01/2010	Male	9999	02/09/2020	
CL04032020	PHN999:PO1	3JXPTRFFDT72MJE...	01/01/2011	Male	9999	02/03/2020	
CL04042020	PHN999:PO1	1XECGWXQNQ1D...	01/01/2010	Male	9999	01/04/2020	
CL07052019	PHN999:PO1	3JXPTRFFDT72MJE...	01/01/2011	Male	9999	02/05/2019	123659
CL10072020	PHN999:PO1	1XECGWXQNQ1D...	01/01/2010	Male	9999	07/07/2020	
CL11122019	PHN999:PO1	3JXPTRFFDT72MJE...	01/01/2011	Male	9999	15/07/2019	123569845
CL15072020	PHN999:PO1	1XECGWXQNQ1D...	01/01/2010	Male	9999	15/07/2020	
CL16042020	PHN999:PO1	1XECGWXQNQ1D...	01/01/2010	Male	9999	16/04/2020	

1

/ 2

10

items per page

1 - 10 of 19 Items

To remove the filter, click the grey cross (X) listed before the filter name or click the blue **Clear all** button.

You can sort the listed client search results by simply clicking the column header. Alternately you can click the arrow beside a column header for more sort options, as follows:

- Sort Ascending
- Sort Descending
- Remove Sort
- Hide Column

5.1.3. Viewing a Client's details

You can view a client's details through the [Clients](#) available on the **Data Entry** tab, by following these steps:

1. [Find the client](#)
2. Click the **Client Key** in blue displayed within the table
3. This is the **Client's Summary** view, with summary details along with a snapshot of the five most recent episodes

Client "CL0001" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01"

Summary Details Intakes Episodes (2)

View Summary

Client Key

CL0001

Gender

Female

Date Of Birth

17/02/1983

CL0001-E01

Suicide Referral 

Start Date: 13/02/2016

Referral Date: 12/02/2016

Episode Concluded: Yes

Last Service Contact: 05/04/2016

Number of service contacts: 4

Principal Focus of Treatment Plan: Low intensity psychological intervention

Outcome Measure Summary

☒ Episode start

☒ Review

☒ Episode end

CL0001-E02

Suicide Referral 

Start Date:

Referral Date: 14/07/2016

Episode Concluded: No

Last Service Contact: 21/07/2016

Number of service contacts: 1

Principal Focus of Treatment Plan: Psychological therapy

Outcome Measure Summary

☐ Episode start

☐ Review

☐ Episode end

4. Click the **Details** tab for more information about the client

A page will display the client's details as recorded via the [Client Data Elements](#).

?Client "CL0001" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01"

Summary Details Intakes Episodes (2)

View Details Edit Details

Delete

Tags

tag1

Organisation Path

PHN999:NFP01

Client Key

CL0001

Date of Birth

17/02/1983

Estimated Date of Birth Flag

Date of birth is accurate

Gender

Female

Statistical Linkage Key

Z4H4TBAEASY0T27J0GMX3P2N4C3BCYSN

Aboriginal and Torres Strait Islander Status

Aboriginal but not Torres Strait Islander origin

Country of Birth

Australia

Main Language Spoken at Home

English

Proficiency in Spoken English

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

5.1.4. Editing a Client

You can edit a client's details through the [Clients](#) available on the **Data Entry** tab, by following these steps:

1. [Find the client](#)
2. From the **Client Search Table**, click the **Client Key**
3. Click the **Details** tab, to view client's details
4. Click the **Edit Details** tab
5. Update the client's details. Mandatory fields are marked with an * (Specification [Client Data Elements](#))
6. **Please note:** You can edit the **Client Key** from this screen. See [Editing a Client Key](#)

?Client "CL0001" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01"

Summary Details Intakes Episodes (2)

View Details Edit Details

Tags ?

tag1 X Add Tag

Organisation Path * ?

PHN999:NFP01

Client Key * ?

Edit Key

CL0001

Date of Birth * ?

Enter date in DD/MM/YYYY or D/M/YYYY format

17/02/1983



Estimated Date of Birth Flag * ?

Date of birth is accurate



Gender * ?

Female



Enter SLK

Generate SLK

SLK ?

Z4H4TBAEASY0T27J0GMX3P2N4C3BCYSN

Aboriginal and Torres Strait Islander Status * ?

Aboriginal but not Torres Strait Islander origin



Country of Birth * ?

Australia



Main Language Spoken at Home * ?

English



Proficiency in Spoken English * ?

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



Save

7. **Please note:** If you edit the **Date of Birth** or **Gender** you will be required to update the **Statistical Linkage Key** field. You can choose to **Enter** or **Generate** a client's SLK. The SLK is generated on your device, the names used are not stored or transmitted over the network.

Statistical Linkage Key *

Enter SLK

Generate SLK

First Name



Last Name

Generate

The SLK is generated on your device, the names used to construct it are not stored or transmitted over the network.

[View Documentation.](#)

Values that are used to generate an SLK have changed, please regenerate or re-enter this client's SLK. The old SLK was 'Z4H4TBAEASY0T27J0GMX3P2N4C3BCYSN'.

8. Click the blue **Save** button. (If you decide not to save changes, you can navigate away from this screen)

You will receive confirmation that the client's details have been saved, and it will now be display the updated details in the **Clients View Details** tab.

Saved successfully

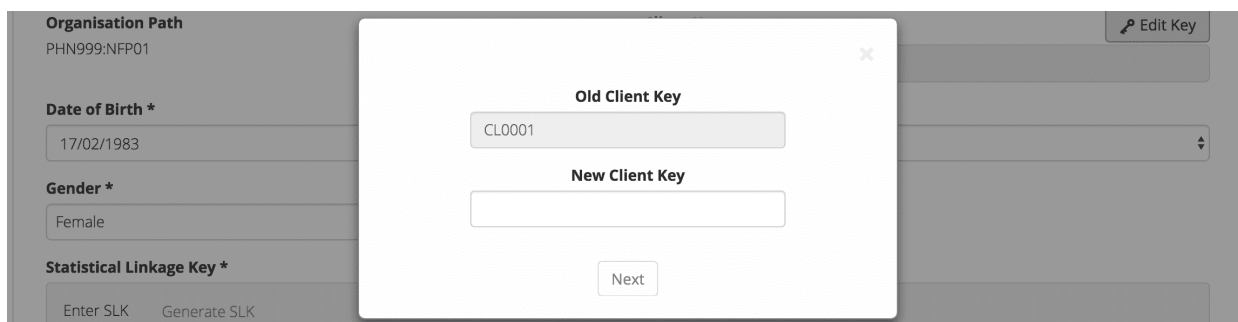


If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Client](#).

5.1.4.1. Editing a Client Key

You can edit a client's identification key through [Editing a Client](#) available on the **Data Entry** tab, by following these steps:

1. Return to step five when [Editing a Client](#)
2. From the **Client Edit Details** tab, click the **Edit Key** button



3. Type in the new client key and click **Next**
4. Double check the new key is correct and click **Save**. (If it is incorrect, click back to re-enter the key or click the 'cross' in the top right to cancel this key change request)

You will receive confirmation that the client's key has been saved, and the screen will now be displaying the updated client key details in the **Clients View Details** tab.

Successfully updated client's key as CL00001

5.1.5. Adding a New Client

You can add a client through the [Clients](#) available on the **Data Entry** tab, by following these steps:

1. [Find the client](#)
2. Firstly double check the client is not already added
3. Click the blue **Add New Client** button
4. Choose the **Provider Organisation** from the drop down list
5. Enter the client's details. Mandatory fields are marked with an * (Specification [Client Data Elements](#))
6. **Please note:** With the **Statistical Linkage Key** field you can choose to **Enter** or **Generate** a client's SLK. The SLK is generated on your device, the names used are not stored or transmitted over the network.

Statistical Linkage Key *

Enter SLK Generate SLK

First Name

Last Name

Generate

The SLK is generated on your device, the names used to construct it are not stored or transmitted over the network.
[View Documentation.](#)

- Click the blue **Save** button. (If you decide not to add this client, you can simply navigate away from this screen)

[Home](#) / [Data Entry](#) / [Clients](#) / [Add New Client](#)

Data Entry

Users with the Data Entry role can use this tab to add, view and edit client records.

Support: For more information and assistance visit [PMHC MDS Documentation](#). (link opens in a new window)

Clients Practitioners

View Clients Add New Client

Organisation Path *

Client Key *

Date of Birth *

Estimated Date of Birth Flag *

Gender *

Statistical Linkage Key *

Enter SLK Generate SLK

SLK

Aboriginal and Torres Strait Islander Status *

Country of Birth *

Main Language Spoken at Home *

Proficiency in Spoken English *

Tags

Save

You will receive confirmation that the Client has been saved, and it will now be displaying the client's saved information in the **Clients View Details** tab.

Saved successfully



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Client](#).

5.1.6. Deleting a Client

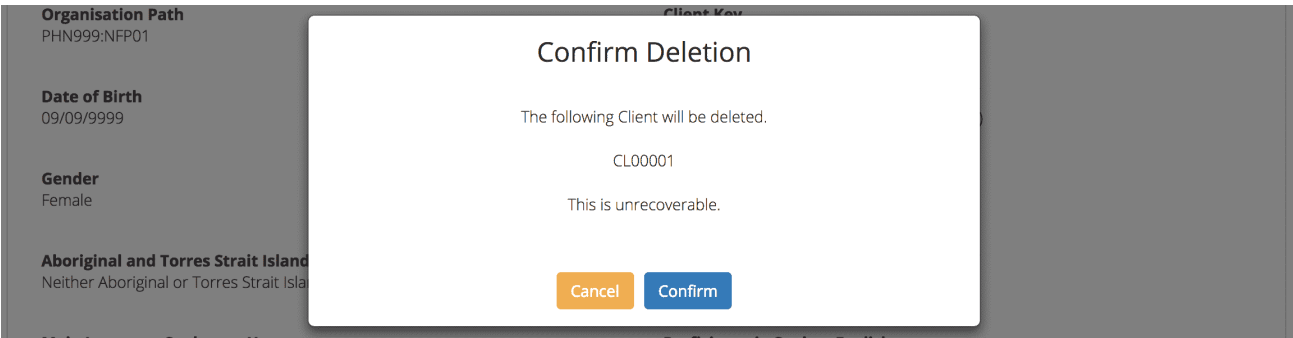
You can delete a client through [Viewing a Client's details](#) available on the **Data Entry** tab, by following these steps:

1. [Find the client](#)
2. From the [Clients](#) table, click the **Client Key**
3. Click the **Details** tab, to [view Client's details](#)
4. Click the red **Delete** button
5. You will either be displayed a [Confirm Delete](#) screen or a [Cannot Delete](#) screen

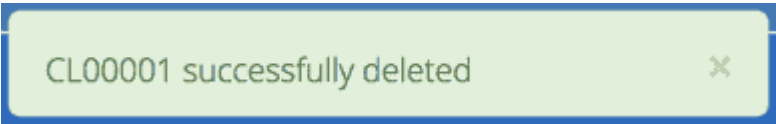
5.1.6.1. Confirm Delete

Please note: Once the client is deleted, you will not be able to recover this client data.

1. Click the blue **Confirm** button to delete this client. (or click the orange **Cancel** button if you decide not to delete this client data)



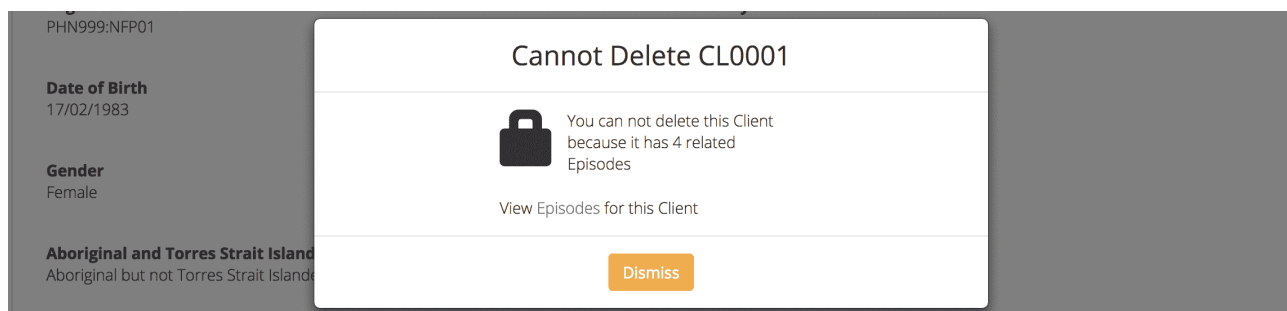
After you click **Confirm**, you will receive confirmation that the client has been deleted, and you will be redirected to the [Clients](#), which will no longer display the deleted client.



5.1.6.2. Cannot Delete

If the client you are trying to delete has any dependant records, you will not be able to proceed with deleting this client until all the related records have been deleted.

1. Click on the link provided to view the Client's Episodes, or click the orange **Dismiss** button



See [Deleting an Episode](#).

5.2. Intake

- [Viewing a Client's Intakes](#)
- [Editing a Client's Intakes data](#)
 - [Editing an Intake Key](#)
- [Adding a Client's Intake data](#)
- [Closing a Client's Intake](#)
- [Deleting an Intake](#)
 - [Confirm Delete](#)
 - [Cannot Delete](#)

5.2.1. Viewing a Client's Intakes

You can view a client's intakes through [Viewing a Client's details](#) available on the **Data Entry** tab, by following these steps:

1. Once [Viewing a Client's details](#)
2. From the client's tab, you can view all intakes by clicking on the **Intakes** tab. The heading for this tab displays in brackets the total number of intakes recorded in the PMHC MDS for this client at the Intake Provider Organisations for which you have access.

A table will display all the Client's Intakes at Provider Organisations for which you have access.

?Client "CFIX000011" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01-intake"

Summary Details Intakes (3) Episodes

View Intakes Add New Intake

Filters

Show / Hide

All Intakes

Suicide Referral	Intake Key	Referral date ↓	Date client contacted Intake	Program Type	Date referred to other service at Intake conclusion	Organisation type referred to at Intake conclusion	Tags
!	IFIX000009	02/10/2021	08/10/2021	Head to Health	10/10/2021	Correctional service, Centre...	
	IFIX000108	17/11/2020	21/11/2020	Flexible Funding...	25/11/2020	School/other education or t...	
!	IFIX000004	11/05/2020	12/05/2020	Head to Health	12/05/2020	AMHC, Early childhood servi...	

A drop down list is available to view:

- All Intakes
- Currently Open Intakes
- Closed Intakes

Summary Details Intakes (3) Episodes

View Intakes Add New Intake

Filters

Show / Hide

✓ All Intakes

Currently Open Intakes

Closed Intakes

Suicide Referral	Intake Key	Referral date ↓	Date client contacted Intake	Program Type	other service at Intake conclusion	Organisation type referred to at Intake conclusion	Tags
!	IFIX000009	02/10/2021	08/10/2021	Head to Health	10/10/2021	Correctional service, Centre...	
	IFIX000108	17/11/2020	21/11/2020	Flexible Funding...	25/11/2020	School/other education or t...	
!	IFIX000004	11/05/2020	12/05/2020	Head to Health	12/05/2020	AMHC, Early childhood servi...	

4. To view the client's intake details, click the blue Intake Key

"CFIX000011" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01-intake"

?Intake client contacted 12/05/2020

Details

View Details
Edit Details
Delete

! Suicide Referral

Tags

Organisation Path PHN999:NFP01-intake	Intake Key IFIX000004
Client Key CFIX000011	Client Consent to Anonymised Data Yes
Referral Date 11/05/2020	Referrer Profession Midwife
Referrer Organisation Type Public mental health service	Intake - Date client contacted Intake 12/05/2020
Suicide Referral Flag Yes	Program Type Head to Health
Date referred to other service at Intake 12/05/2020	Referred to Organisation Path PHN999:NFP01

Organisation type referred to at Intake conclusion

AMHC
Early childhood service
School/other education or training institution
Sexual Assault service

A page will display the client's intakes details as recorded via the [Intake Data Elements](#).

5.2.2. Editing a Client's Intakes data

You can edit a client's intake details through [Viewing a Client's details](#) available on the **Data Entry** tab, by following these steps:

1. Once [Viewing a Client's Intakes](#)
2. From the client's **Intakes** table, click the **Intake Key**
3. Click the **Edit Details** tab
4. Update the client's **Intakes** details. Mandatory fields are marked with an * (Specification [Intake Data Elements](#))
5. **Please note:** You can edit the **Intake Key** from this screen. See [Editing an Intake Key](#)


"CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Intake client contacted 03/11/2025


Details

View Details Edit Details


Note: * denotes a mandatory field

Tags 


Add Tag


Organisation Path 


PHN999:PO1


Client Key 


CL0001


Referral Date *  Enter date in DD/MM/YYYY or D/M/YYYY format


01/11/2025 

Referrer Organisation Type * 


General Practice 


Suicide Referral Flag * 


Yes 


Referred to Organisation Path 



PHN999:PO1

Date referred to other service at Intake conclusion  Enter date in DD/MM/YYYY or D/M/YYYY format


05/11/2025 


Organisation type referred to at Intake conclusion 


Community based Drug and Alcohol Service × Community support groups/agencies × Psychiatric/mental health service or facility × 


Intake Key   Edit Key


IFIX0000001


Client Consent to Anonymised Data * 


Yes 


Referrer Profession * 


General Practitioner 


Intake - Date client contacted Intake *  Enter date in DD/MM/YYYY or D/M/YYYY format

03/11/2025 

Program Type * 

Psychosocial 

Veteran * 

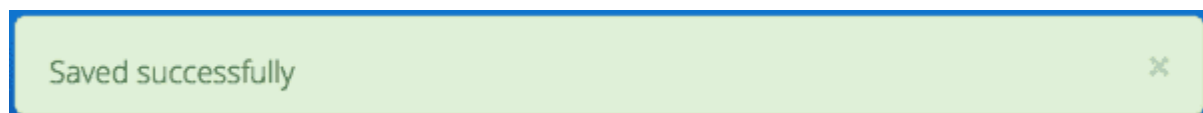
Not stated/Inadequately described 

Enter date in DD/MM/YYYY or D/M/YYYY format

Save

6. Click the blue **Save** button. (If you decide not to save changes, you can simply navigate away from this screen)

You will receive confirmation that the client's intake details have been saved, and it will now be displaying these new details in the intake **View Details** tab.



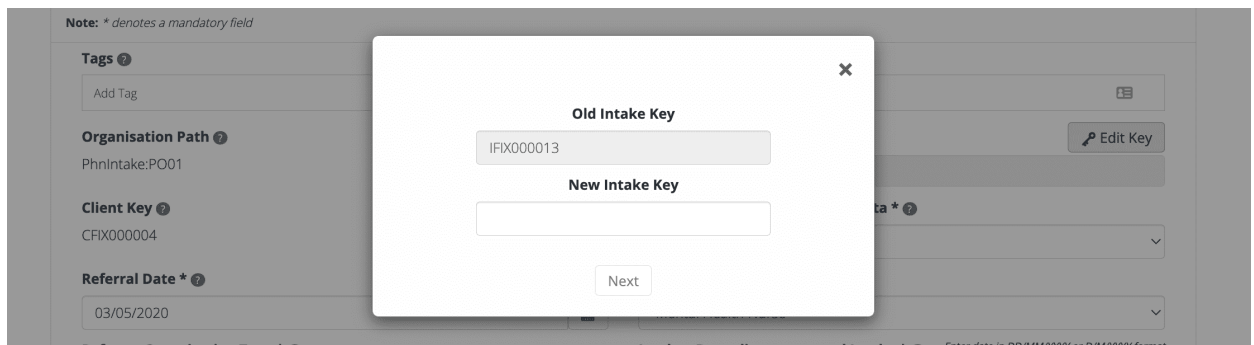
If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Intake](#).

5.2.2.1. Editing an Intake Key

You can edit an episode's identification key through [Viewing a Client's Intakes](#) available on the **Data Entry** tab, by following these steps:

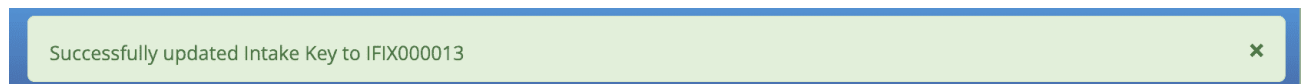
1. Return to step five when [Editing a Client's Intakes data](#)

2. From the Episode **Edit Details** tab, click the **Edit Key** button



3. Type in the new episode key and click **Next**
4. Double check the new key is correct and click **Save**. (If it is incorrect, click back to re-enter the key or click the 'cross' in the top right to cancel this key change request)

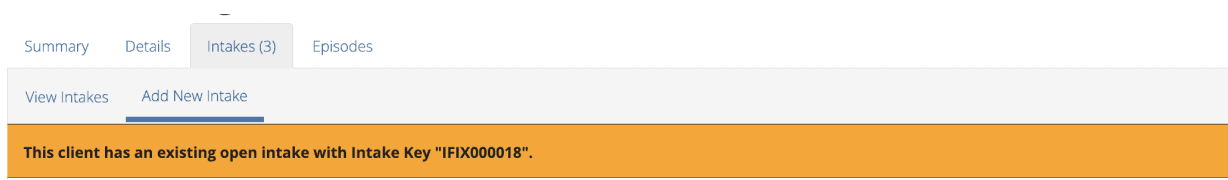
You will receive confirmation that the Intake's key has been saved, and the screen will now be displaying the updated intake key details in the Intake **View Details** tab.



5.2.3. Adding a Client's Intake data

You can add a client's intake data through [Viewing a Client's details](#) available on the **Data Entry** tab, by following these steps:

1. Once [Viewing a Client's Intakes](#)
2. Check to ensure the client does not have any open intakes already showing.
3. Click the **Add Intake** tab (If a client already has an open intake, the following warning message will be displayed at the top off the Add Intake form)



4. Enter the client's intake details. Mandatory fields are marked with an * (Specification [Intake Data Elements](#))

? Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Summary Details **Intakes** Episodes (4)

View Intakes **Add New Intake**

Note: * denotes a mandatory field

Tags ?

Add Tag

Organisation Path ?

PHN999:PO1

Client Key ?

CL0001

Referral Date * ?

Enter date in DD/MM/YYYY or D/M/YYYY format

Referrer Organisation Type * ?

Suicide Referral Flag * ?

Referred to Organisation Path ?

Date referred to other service at Intake conclusion ?

Enter date in DD/MM/YYYY or D/M/YYYY format

Organisation type referred to at Intake conclusion ?

Intake Key * ?

Client Consent to Anonymised Data * ?

Referrer Profession * ?

Intake - Date client contacted Intake * ?

Enter date in DD/MM/YYYY or D/M/YYYY format

Program Type * ?

Veteran * ?

Save

For more information on the Intake data section see: [Intake Key Concept](#)

5. Click the blue **Save** button. (If you decide not to add this client's intake, you can simply navigate away from this screen)

You will receive confirmation that the client's intake details have been added, and it will now be displaying these new details in the intake **View Details** tab.

Saved successfully



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Intake](#).

5.2.4. Closing a Client's Intake

You can close a client's intake details through [Viewing a Client's details](#) available on the **Data Entry** tab, by following these steps:

1. Once [Viewing a Client's Intakes](#)
2. From the client's **Intake** table, click the **Intake Key** of the open intake
3. Click the **Edit Details** tab
4. Update the client's intake details, by entering an **Date referred to other service at Intake** and **Referred to Organisation Path** and **Organisation type referred to at Intake conclusion** (Specification [Intake Data Elements](#))

Home / Data Entry / Clients / CL0001@PHN999:PO1 / Client Intakes / Edit Details

"CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

[Intake](#) client contacted 03/11/2025

Details

View Details

Edit Details

Note: * denotes a mandatory field

Tags

Add Tag

Organisation Path

PHN999:PO1

Client Key

CL0001

Referral Date *

01/11/2025

Referrer Organisation Type *

General Practice

Suicide Referral Flag *

Yes

Referred to Organisation Path

PHN999:PO1

Date referred to other service at Intake conclusion

05/11/2025

Organisation type referred to at Intake conclusion

Community based Drug and Alcohol Service × Community support groups/agencies × Psychiatric/mental health service or facility ×

Intake Key

IFIX0000001

Edit Key

Client Consent to Anonymised Data *

Yes

Referrer Profession *

General Practitioner

Intake - Date client contacted Intake *

03/11/2025

Program Type *

Psychosocial

Veteran *

Not stated/Inadequately described

Save

5. Click the blue **Save** button. (If you decide not to save changes, you can simply navigate away from this screen)

You will receive confirmation that the client's intake details have been saved, and it will now be displaying these new details in the intake **View Details** tab.

Saved successfully



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Intake](#).

5.2.5. Deleting an Intake

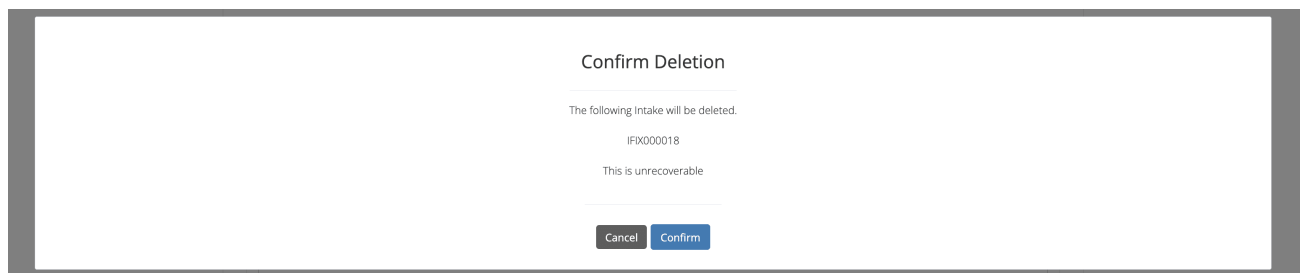
You can delete a client's intake through [Viewing a Client's Intakes](#) available on the **Data Entry** tab, by following these steps:

1. [Search](#) for the client
2. From the [Clients](#) table, click the **Client Key**
3. Click **Intakes** tab, to [view Client's Intakes](#)
4. From the [View Intakes](#) table, click the **Intake Key**
5. Click the red **Delete** button
6. You will either be displayed a [Confirm Delete](#) screen or a [Cannot Delete](#) screen

5.2.5.1. Confirm Delete

Please note: Once the intake is deleted, you will not be able to recover this intake data.

1. Click the blue **Confirm** button to delete this intake. (or click the orange **Cancel** button if you decide not to delete this intake data)



After you click **Confirm**, you will receive confirmation that the intake has been deleted, and you will be redirected to [View Intakes](#) where the intake will no longer be displayed.

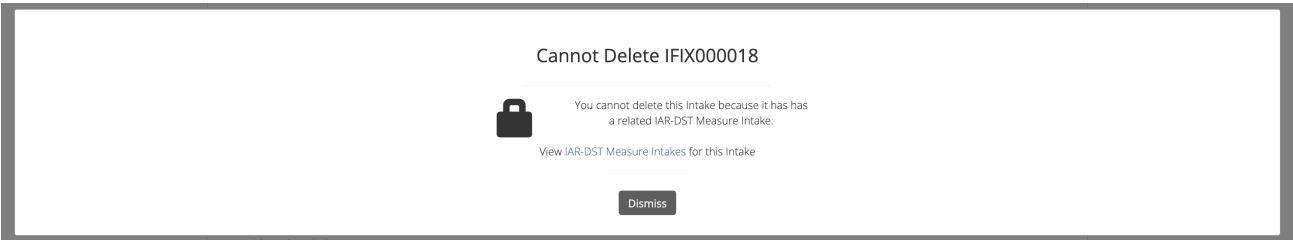
Delete IFIX000108. successfully



5.2.5.2. Cannot Delete

If the intake you are trying to delete has any dependant records, you will not be able to proceed with deleting this intake until all the related records have been deleted.

1. You can click on the link provided to view the client’s intake measure, or click the orange **Dismiss** button



See [Deleting a Measure from a Intake](#).

5.3. Intake IAR-DST Measure

- [Viewing a Client’s Measure for an Intake](#)
- [Adding an Client’s Measures for a Intake](#)
- [Editing a Client’s Measures for a Intake](#)
 - [Editing a Measure Key](#)
- [Deleting a Measure from a Intake](#)

5.3.1. Viewing a Client’s Measure for an Intake

PMHC MDS requires the use of the IAR-DST at intake.

You can view a Client’s Measure added to an Intake through [Viewing a Client’s Intakes](#) available on the Data Entry tab, by following these steps:

1. Once [Viewing the Intake](#).
2. Scroll down to the IAR-DST Measures

A table will display all the Measures linked to this Client’s Intake.

IAR-DST (1) Add new IAR-DST			
Measure Key	Practitioner Level of Care	Recommended Level of Care	Tags
2a9853ac-7ca9-4424-a05d-acffeb54e...	Result: 3	Result: 3+	

3. To view the Measure details, click the Blue Measure Key.

View IAR-DST

Edit IAR-DST

Back to List

Delete

Measure Key

2a9853ac-7ca9-4424-a05d-acffeb54ee97

Intake Key

IFIX000004

Tags

Question	Answer
1. Domain 1 - Symptom severity and distress (primary domain)	0
2. Domain 2 - Risk of harm (primary domain)	1
3. Domain 3 - Functioning (primary domain)	2
4. Domain 4 - Impact of co-existing conditions (primary domain)	3
5. Domain 5 - Treatment and recovery history (contextual domain)	4
6. Domain 6 - Social and environmental stressors (contextual domain)	3
7. Domain 7 - Family and other supports (contextual domain)	2
8. Domain 8 - Engagement and motivation (contextual domain)	1
Practitioner Level of Care	3
Recommended Level of Care	3+

A page will display the Measure details as recorded via the [Measures at Intake](#).

- See [IAR-DST Measure data specifications](#)

5.3.2. Adding an Client's Measures for a Intake

PMHC MDS requires the use of the IAR-DST at intake.

Single or multiple measures can be added to an Intake.

You can add a Client's Measure for a Intake through [Viewing a Client's Intakes](#) available on the Data Entry tab, by following these steps:

1. Once [Viewing a Client's Intakes](#).
2. Firstly double check the measure is not already showing.
3. Click the Add New IAR-DST** tab.

IAR-DST
Add new IAR-DST

Tags

Add Tag

Question	Answer
1. Domain 1 - Symptom severity and distress (primary domain) * ?	<input type="text"/>
2. Domain 2 - Risk of harm (primary domain) * ?	<input type="text"/>
3. Domain 3 - Functioning (primary domain) * ?	<input type="text"/>
4. Domain 4 - Impact of co-existing conditions (primary domain) * ?	<input type="text"/>
5. Domain 5 - Treatment and recovery history (contextual domain) * ?	<input type="text"/>
6. Domain 6 - Social and environmental stressors (contextual domain) * ?	<input type="text"/>
7. Domain 7 - Family and other supports (contextual domain) * ?	<input type="text"/>
8. Domain 8 - Engagement and motivation (contextual domain) * ?	<input type="text"/>
Practitioner Level of Care * ?	<input type="text"/>

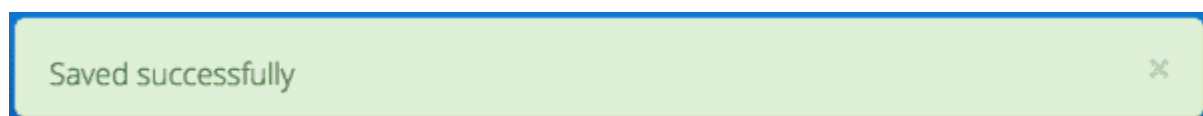
Save

4. Enter the Client's Measure details for the Intake. Mandatory fields are marked with an * .

- See [IAR-DST Measure data specifications](#)

5. Click the blue **Save** button. (If you decide not to add this client's measure, you can simply navigate away from this screen)

You will receive confirmation that the Client's Measure details have been added, and it will now be displaying these new details in the View Measure tab.



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [IAR-DST](#).

5.3.3. Editing a Client's Measures for a Intake

You can edit a Client's Measure for a Intake through [Viewing a Client's Outcome Collection Occasions for an Episode](#) available on the Data Entry tab, by following these steps:

1. Once [Viewing a Client's Outcome Collection Occasions for an Episode](#).
2. Scroll down to the IAR-DST measures.

3. Click the Blue Measure Key.
4. Click Edit IAR-DST.
5. Update the Client's Measure details. Mandatory fields are marked with an *.

Please note: You can edit the Measure Key from this screen. See [Editing a Measure Key](#).

View IAR-DST
Edit IAR-DST
Back to List
Delete

Measure Key
Edit Key
2a9853ac-7ca9-4424-a05d-acffeb54ee97

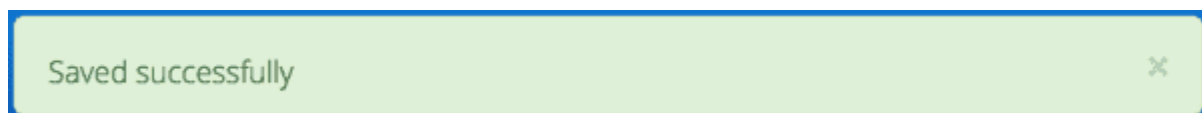
Tags
Add Tag

Question	Answer
1. Domain 1 - Symptom severity and distress (primary domain) *	0: No problem in this domain
2. Domain 2 - Risk of harm (primary domain) *	1: Low risk of harm
3. Domain 3 - Functioning (primary domain) *	2: Moderate impact
4. Domain 4 - Impact of co-existing conditions (primary domain) *	3: Severe impact
5. Domain 5 - Treatment and recovery history (contextual domain) *	4: Negligible recovery with previous treatment
6. Domain 6 - Social and environmental stressors (contextual domain) *	3: Highly stressful environment
7. Domain 7 - Family and other supports (contextual domain) *	2: Limited supports
8. Domain 8 - Engagement and motivation (contextual domain) *	1: Positive
Practitioner Level of Care *	3: Level 3 - Moderate Intensity Services
Recommended Level of Care *	3+: Level 3 or above - Review assessment on Contextual Dom

Save

6. Click the blue **Save** button. (If you decide not to save changes, you can simply navigate away from this screen)

You will receive confirmation that the Client's Intakes details have been saved, and it will now be displaying these new details in the View Intake Details tab.

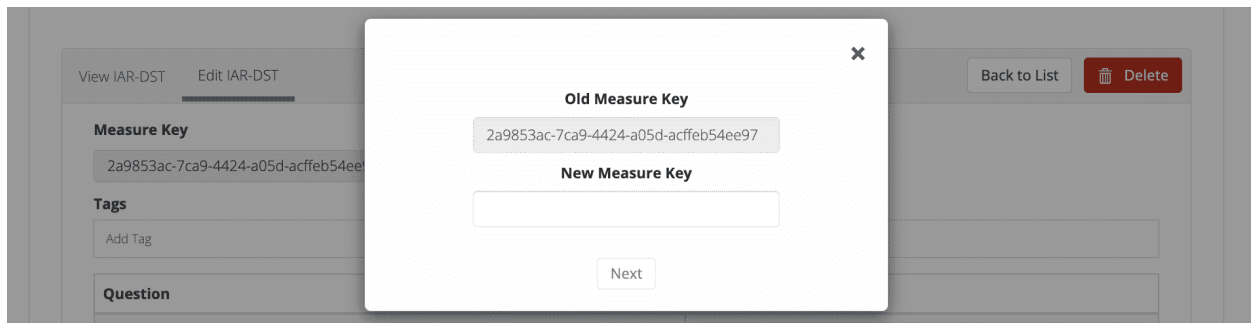


If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [IAR-DST](#).

5.3.3.1. Editing a Measure Key

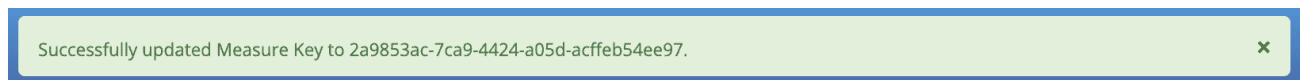
You can edit an measure's identification key through [Viewing a Client's Outcome Collection Occasions for an Episode](#) available on the Data Entry tab, by following these steps:

1. In step four when [Editing a Client's Measures for a Collection Occasion](#).
2. From the Edit IAR-DST measure details tab, click the **Edit Key** button.



3. Type in the new measure key and click 'Next'.
4. Double check the new key is correct and click save. (If it is incorrect, click back to re-enter the key or click the 'cross' in the top right to cancel this key change request)

You will receive confirmation that the Measure's key has been saved, and the screen will now be displaying the updated measure key details in the View Measure details tab.



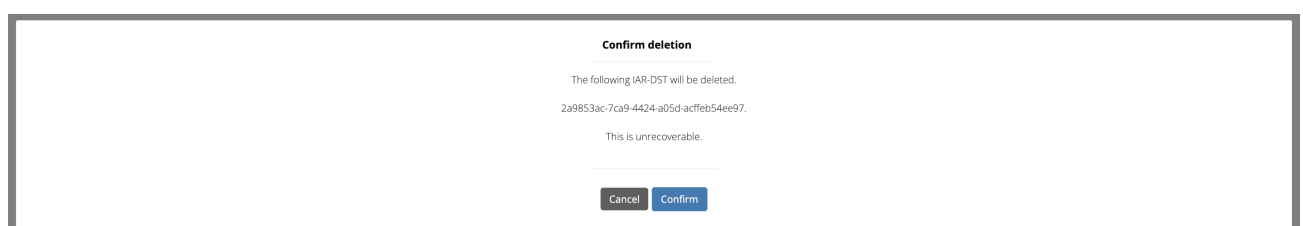
5.3.4. Deleting a Measure from a Intake

You can delete a Client's Measure from a Intake through '[Viewing a Client's Measures for a Collection Occasion](#)' available on the Data Entry tab, by following these steps:

1. Once [Viewing a Client's Outcome Collection Occasions for an Episode](#).
2. Scroll down to the IAR-DST Measures
3. Click the Blue Measure Key.
4. Click Edit IAR-DST.
5. Click the red **Delete** button.
6. You will be displayed a 'Confirm Deletion' screen.

Please note: Once the measure is deleted, you will not be able to recover this measure data.

7. Click the blue **Confirm** button to delete this measure. (or click the orange **Cancel** button if you decide not to delete this measure data)



After you click 'Confirm', you will receive confirmation that the measure has been deleted, and you will be redirected to the [View Measures](#) where the measure will no longer be displayed.

Delete 2a9853ac-7ca9-4424-a05d-acffeb54ee97. successfully



5.4. Episodes

- [Viewing a Client's Episodes](#)
- [Editing a Client's Episode data](#)
 - [Editing an Episode Key](#)
- [Adding a Client's Episode data](#)
- [Closing a Client's Episode](#)
- [Deleting an Episode](#)
 - [Confirm Delete](#)
 - [Cannot Delete](#)

5.4.1. Viewing a Client's Episodes

You can view a client's episodes through [Viewing a Client's details](#) available on the **Data Entry** tab, by following these steps:

1. Once [Viewing a Client's details](#)
2. From the client's **Summary** tab, you can shortcut straight to an episode by clicking the blue **Episode Key** displayed in the snapshot of the five most recent episodes

Client "CL0001" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01"

Summary Details Intakes Episodes (2)

View Summary

Client Key

CL0001

Gender

Female

Date Of Birth

17/02/1983

CL0001-E01

Suicide Referral 

Start Date: 13/02/2016

Referral Date: 12/02/2016

Episode Concluded: Yes

Last Service Contact: 05/04/2016

Number of service contacts: 4

Principal Focus of Treatment Plan: Low intensity psychological intervention


Outcome Measure Summary

☒ Episode start

☒ Review

☒ Episode end

CL0001-E02

Suicide Referral 

Start Date:

Referral Date: 14/07/2016

Episode Concluded: No

Last Service Contact: 21/07/2016

Number of service contacts: 1

Principal Focus of Treatment Plan: Psychological therapy

Outcome Measure Summary

☐ Episode start

☐ Review

☐ Episode end

- Alternately, if you would like to view all episodes you can click on the **Episode** tab. The heading for this tab displays in brackets the total number of episodes recorded in the PMHC MDS for this client at Provider Organisations for which you have access.

A table will display all the Client's Episodes at Provider Organisations for which you have access.

?Client "CL0001" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01"

Summary Details Intakes Episodes (2)

View Episodes Add New Episode

Filters

Show / Hide

Episode

All Episodes

Suicide Referral	Episode Key	Start Date ↓	End Date	Completion Status	Principal Focus of Treatment Plan	Number of Service Contacts	Date of Last Service Contact	Tags
!	CL0001-E01	13/02/2016	18/06/2016	Episode closed ...	Low intensity p...	4	05/04/2016	tag3
	CL0001-E02			Episode open	Psychological t...	1	21/07/2016	tag1

A drop down list is available to view:

- All Episodes
- Currently Open Episodes
- Closed Episodes

?Client "CL0001" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01"

Summary Details Intakes Episodes (2)

View Episodes Add New Episode

Filters

Show / Hide

Episode

<div> <div>✓ All Episodes</div> <div>Currently Open Episodes</div> <div>Closed Episodes</div> </div>								
Suicide Referral	Episode Key	Start Date ↓	End Date	Completion Status	of Treatment Plan	Number of Service Contacts	Date of Last Service Contact	Tags
!	CL0001-E01	13/02/2016	18/06/2016	Episode closed ...	Low intensity p...	4	05/04/2016	tag3
	CL0001-E02			Episode open	Psychological t...	1	21/07/2016	tag1

4. To view the client's episode details, click the blue **Episode Key**

"CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

? Episode starting 13/02/2016

Details Collection Occasions (2) Service Contacts (4)

View Details Edit Details

 Delete

! Suicide Referral

Tags

Icovid19, tag3, 1

Organisation Path

PHN999:PO1

Episode Key

CL0001-E01

Client Key

CL0001

Client Consent to Anonymised Data

Yes

Referral Date

12/02/2016

Program Type

Flexible Funding Pool

Principal Focus of Treatment Plan

Low intensity psychological intervention

GP Mental Health Treatment Plan Flag

Yes

Homelessness Flag

Sleeping rough or in non-conventional accommodation

Area of usual residence, postcode

2101

Labour Force Status

Unemployed

Employment Participation

Not applicable - not in the labour force

Source of Cash Income

Other pension or benefit (not superannuation)

Health Care Card

Yes

NDIS Participant

No

Marital Status

Never married

Suicide Referral Flag

Yes

Veteran

Not stated/Inadequately described

Principal Diagnosis

Acute stress disorder

Additional Diagnosis

Mixed anxiety and depressive symptoms

Medication Antipsychotics (N05A)

No

Medication Anxiolytics (N05B)

No

Medication Hypnotics and sedatives (N05C)

No

Medication Antidepressants (N06A)

No

Medication Psychostimulants and nootropics (N06B)

No

Referrer Profession

Psychiatrist

Referrer Organisation Type

General Practice

End Date

01/06/2022

Completion Status

Episode closed administratively - client declined further contact

Organisation type referred to at Episode conclusion

General Practice

Intake

Intake Organisation Path

Intake Key

A page will display the client's episode details as recorded via the [Episode Data Elements](#).

5.4.2. Editing a Client's Episode data

You can edit a client's episode details through [Viewing a Client's details](#) available on the **Data Entry** tab, by following these steps:

1. Once [Viewing a Client's Episodes](#)
2. From the client's **Episode** table, click the **Episode Key**
3. Click the **Edit Details** tab
4. Update the client's **Episode** details. Mandatory fields are marked with an * (Specification [Episode Data Elements](#))
5. **Please note:** You can edit the **Episode Key** from this screen. See [Editing an Episode Key](#)

Note

The Department has recently changed some reserve tags. For more information please see [System Tags](#).

"CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

? Episode starting 13/02/2016

Details Collection Occasions (2) Service Contacts (4)

View Details Edit Details

! Suicide Referral

Note: * denotes a mandatory field

Tags ?

lcovid19 x tag3 x 1 x Add Tag

Organisation Path ?

PHN999:PO1

Client Key ?

CL0001

Referral Date * ?

Enter date in DD/MM/YYYY or D/M/YYYY format

12/02/2016

Principal Focus of Treatment Plan * ?

Low intensity psychological intervention

Homelessness Flag * ?

Sleeping rough or in non-conventional accommodation

Labour Force Status * ?

Unemployed

Source of Cash Income * ?

Other pension or benefit (not superannuation)

NDIS Participant * ?

No

Suicide Referral Flag * ?

Yes

Principal Diagnosis * ?

107 - Acute stress disorder

Medication Antipsychotics (N05A) * ?

No

Medication Hypnotics and sedatives (N05C) * ?

No

Medication Psychostimulants and nootropics (N06B) * ?

No

Referrer Organisation Type * ?

General Practice

Completion Status ?

Episode closed administratively - client declined further contact

Organisation type referred to at Episode Conclusion * ?

General Practice x

Episode Key * ?

Edit Key

CL0001-E01

Client Consent to Anonymised Data * ?

Yes

Program Type * ?

Flexible Funding Pool

GP Mental Health Treatment Plan Flag * ?

Yes

Area of usual residence, postcode * ?

2101

Employment Participation * ?

Not applicable - not in the labour force

Health Care Card * ?

Yes

Marital Status * ?

Never married

Veteran * ?

Not stated/Inadequately described

Additional Diagnosis * ?

903 - Mixed anxiety and depressive symptoms

Medication Anxiolytics (N05B) * ?

No

Medication Antidepressants (N06A) * ?

No

Referrer Profession * ?

Psychiatrist

End Date ?

Enter date in DD/MM/YYYY or D/M/YYYY format

01/06/2022

Intake

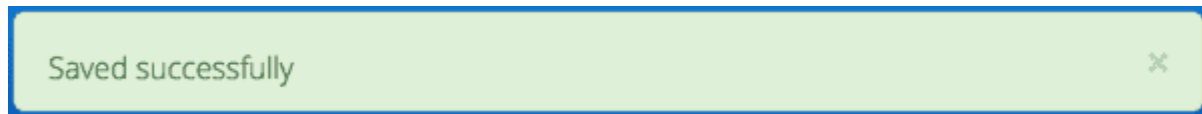
Intake Organisation Path ?

Intake Key ?

Save

6. Click the blue **Save** button. (If you decide not to save changes, you can simply navigate away from this screen)

You will receive confirmation that the client's episode details have been saved, and it will now be displaying these new details in the episode **View Details** tab.

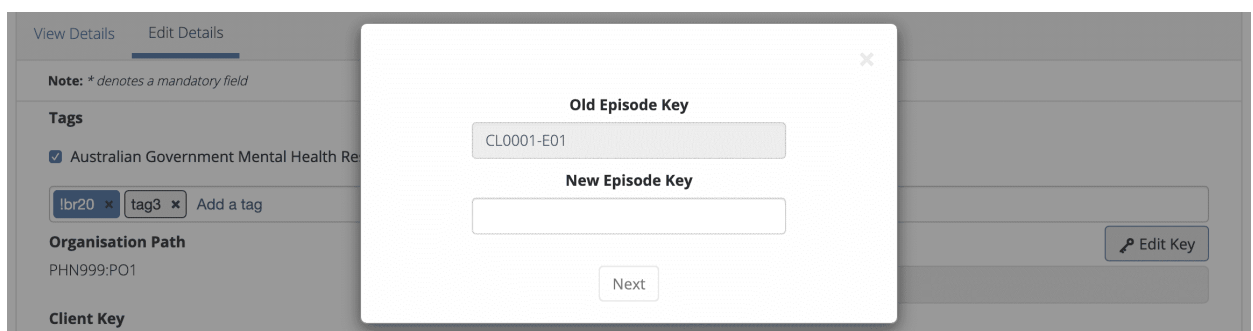


If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Episode](#).

5.4.2.1. Editing an Episode Key

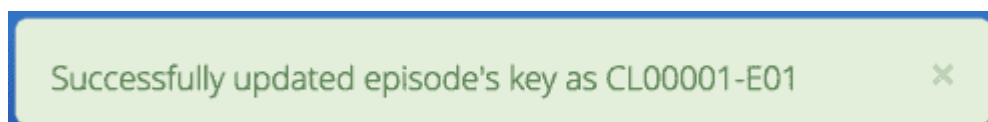
You can edit an episode's identification key through [Viewing a Client's Episodes](#) available on the **Data Entry** tab, by following these steps:

1. Return to step five when [Editing a Client's Episode data](#)
2. From the Episode **Edit Details** tab, click the **Edit Key** button



3. Type in the new episode key and click **Next**
4. Double check the new key is correct and click **Save**. (If it is incorrect, click back to re-enter the key or click the 'cross' in the top right to cancel this key change request)

You will receive confirmation that the Episode's key has been saved, and the screen will now be displaying the updated episode key details in the Episode **View Details** tab.



5.4.3. Adding a Client's Episode data

You can add a client's episode data through [Viewing a Client's details](#) available on the **Data Entry** tab, by following these steps:

1. Once [Viewing a Client's Episodes](#)
2. Check to ensure the client does not have any open episodes already showing. (A client can only have [one open episode](#) at a provider organisation)
3. Click the **Add Episode** tab (If a client already has an open episode, the following warning message will be displayed at the top off the Add Episode form)

The screenshot shows a web interface with tabs: Summary, Details, Intakes, and Episodes (2). The 'Add New Episode' tab is selected. Below the tabs, there is a warning message in an orange box: "This client has an existing open episode with Episode Key "CL0001-E02".". Below the warning, there is a note: "Note: * denotes a mandatory field". At the bottom, there is a section for "Tags" with a help icon.

4. Enter the client's episode details. Mandatory fields are marked with an * (Specification [Episode Data Elements](#))

Note

The Department has recently changed some reserve tags. For more information please see [System Tags](#).

?Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Summary Details Intakes Episodes (3)

View Episodes Add New Episode

Episode

Note: * denotes a mandatory field

Tags ?

Add Tag

Organisation Path ?

PHN999:PO1

Client Key ?

CL0001

Referral Date * ?

Enter date in DD/MM/YYYY or D/M/YYYY format



Principal Focus of Treatment Plan * ?

Homelessness Flag * ?

Labour Force Status * ?

Source of Cash Income * ?

NDIS Participant * ?

Suicide Referral Flag * ?

Principal Diagnosis * ?

Medication Antipsychotics (N05A) * ?

Medication Hypnotics and sedatives (N05C) * ?

Medication Psychostimulants and nootropics (N06B) * ?

Referrer Organisation Type * ?

Completion Status ?

Organisation type referred to at Episode Conclusion ?

Episode Key * ?

Client Consent to Anonymised Data * ?

Program Type * ?

GP Mental Health Treatment Plan Flag * ?

Area of usual residence, postcode * ?

Employment Participation * ?

Health Care Card * ?

Marital Status * ?

Veteran * ?

Additional Diagnosis * ?

Medication Anxiolytics (N05B) * ?

Medication Antidepressants (N06A) * ?

Referrer Profession * ?

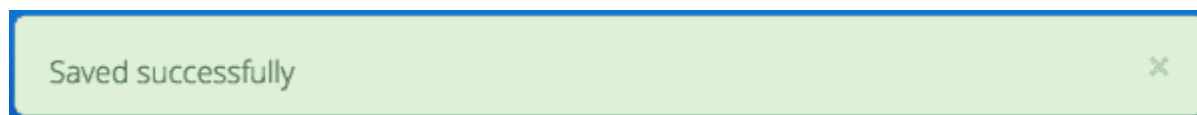
End Date ?

Enter date in DD/MM/YYYY or D/M/YYYY format

Fig. 5.1 For more information on the Intake Episode data section see: [Adding a Client's Intake Episode data](#)

5. Click the blue **Save** button. (If you decide not to add this client's episode, you can simply navigate away from this screen)

You will receive confirmation that the client's episode details have been added, and it will now be displaying these new details in the episode **View Details** tab.



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Episode](#).

5.4.4. Closing a Client's Episode

You can close a client's episode details through [Viewing a Client's details](#) available on the **Data Entry** tab, by following these steps:

1. Once [Viewing a Client's Episodes](#)
2. From the client's **Episode** table, click the **Episode Key** of the open episode
3. Click the **Edit Details** tab
4. Update the client's episode details, by entering an **End Date** and **Completion Status** and **Organisation type referred to at Episode Conclusion** (Specification [Episode Data Elements](#))

"CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

? Episode starting 13/02/2016

Details Collection Occasions (2) Service Contacts (4)

View Details Edit Details

! Suicide Referral

Note: * denotes a mandatory field

Tags ?

lcovid19 x tag3 x 1 x Add Tag

Organisation Path ?

PHN999:PO1

Client Key ?

CL0001

Referral Date * ?

Enter date in DD/MM/YYYY or D/M/YYYY format

12/02/2016

Principal Focus of Treatment Plan * ?

Low intensity psychological intervention

Homelessness Flag * ?

Sleeping rough or in non-conventional accommodation

Labour Force Status * ?

Unemployed

Source of Cash Income * ?

Other pension or benefit (not superannuation)

NDIS Participant * ?

No

Suicide Referral Flag * ?

Yes

Principal Diagnosis * ?

107 - Acute stress disorder

Medication Antipsychotics (N05A) * ?

No

Medication Hypnotics and sedatives (N05C) * ?

No

Medication Psychostimulants and nootropics (N06B) * ?

No

Referrer Organisation Type * ?

General Practice

Completion Status ?

Episode closed administratively - client declined further contact

Organisation type referred to at Episode Conclusion * ?

General Practice x

Episode Key * ?

Edit Key

CL0001-E01

Client Consent to Anonymised Data * ?

Yes

Program Type * ?

Flexible Funding Pool

GP Mental Health Treatment Plan Flag * ?

Yes

Area of usual residence, postcode * ?

2101

Employment Participation * ?

Not applicable - not in the labour force

Health Care Card * ?

Yes

Marital Status * ?

Never married

Veteran * ?

Not stated/Inadequately described

Additional Diagnosis * ?

903 - Mixed anxiety and depressive symptoms

Medication Anxiolytics (N05B) * ?

No

Medication Antidepressants (N06A) * ?

No

Referrer Profession * ?

Psychiatrist

End Date ?

Enter date in DD/MM/YYYY or D/M/YYYY format

01/06/2022

Intake

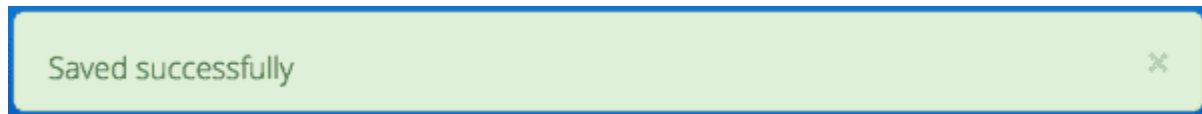
Intake Organisation Path ?

Intake Key ?

Save

5. Click the blue **Save** button. (If you decide not to save changes, you can simply navigate away from this screen)

You will receive confirmation that the client's episode details have been saved, and it will now be displaying these new details in the episode **View Details** tab.



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Episode](#).

5.4.5. Deleting an Episode

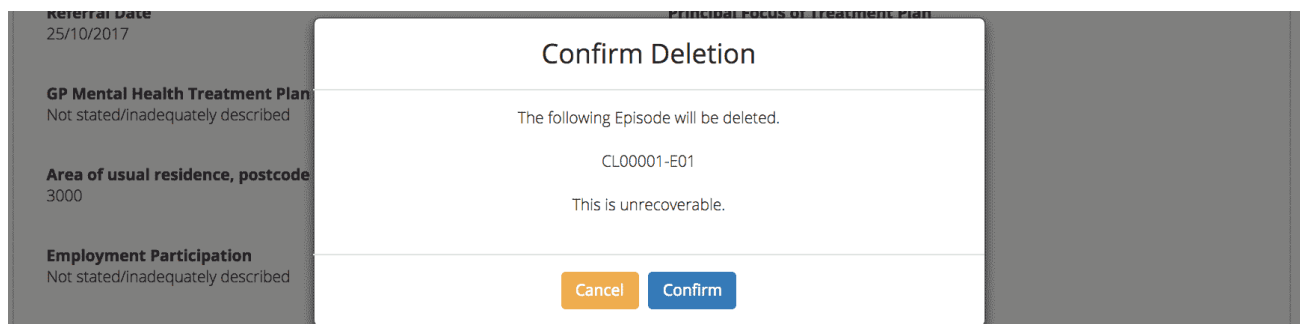
You can delete a client's episode through [Viewing a Client's Episodes](#) available on the **Data Entry** tab, by following these steps:

1. [Search](#) for the client
2. From the [Clients](#) table, click the **Client Key**
3. Click **Episodes** tab, to [view Client's Episodes](#)
4. From the [View Episodes](#) table, click the **Episode Key**
5. Click the red **Delete** button
6. You will either be displayed a [Confirm Delete](#) screen or a [Cannot Delete](#) screen

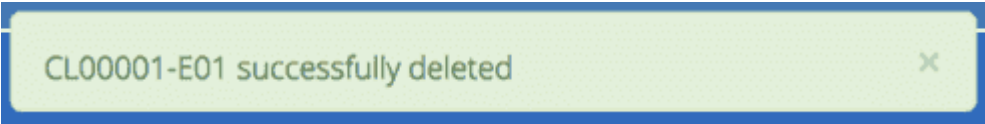
5.4.5.1. Confirm Delete

Please note: Once the episode is deleted, you will not be able to recover this episode data.

1. Click the blue **Confirm** button to delete this episode. (or click the orange **Cancel** button if you decide not to delete this episode data)



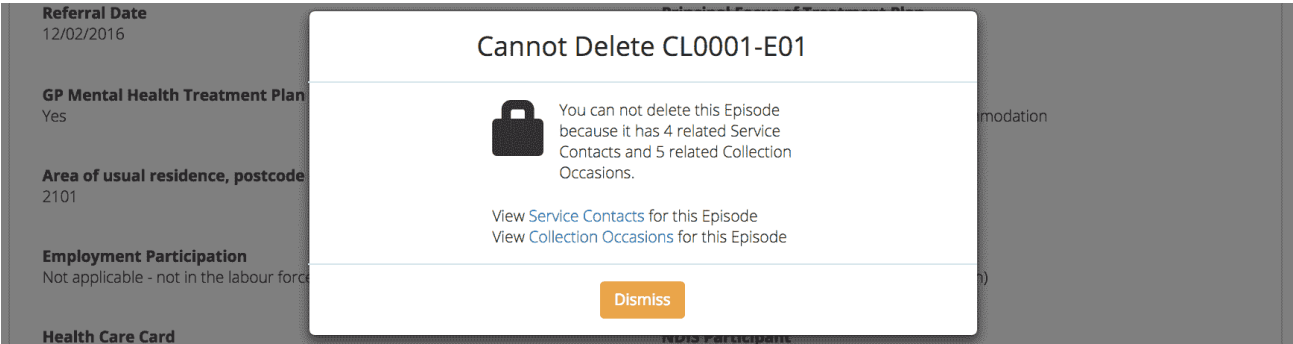
After you click **Confirm**, you will receive confirmation that the episode has been deleted, and you will be redirected to [View Episodes](#) where the episode will no longer be displayed.



5.4.5.2. Cannot Delete

If the episode you are trying to delete has any dependant records, you will not be able to proceed with deleting this episode until all the related records have been deleted.

- 1. You can click on the link provided to view the client’s service contacts and collection occasions, or click the orange **Dismiss** button



See [Deleting a Service Contact](#) and [Deleting an Outcome Collection Occasion](#).

5.5. Intake Episodes

- [Viewing a Client’s Intake Episode](#)
- [Editing a Client’s Intake Episode data](#)
- [Adding a Client’s Intake Episode data](#)
- [Deleting an Intake Episode](#)

5.5.1. Viewing a Client’s Intake Episode

Where the client has been referred via an intake process, an additional Intake Episode record is available on the Episode record.

You can view a client’s intake episode data by follow the steps at [Viewing a Client’s Episodes](#) and scroll to the bottom of the episode form.

Intake	
Intake Organisation Path PHN999;PO1	Intake Key CL0001-E02-intake

5.5.2. Editing a Client’s Intake Episode data

Where the client has been referred via an intake process, an additional Intake Episode record is available on the Episode record.

You can edit a client’s intake episode data by follow the steps at [Editing a Client’s Episode data](#) and scroll to the bottom of the episode form.

Intake

Intake Organisation Path ?

Intake Key ?

PHN999:PO1

CL0001-E02-Intake

5.5.3. Adding a Client’s Intake Episode data

Where the client has been referred via an intake process, an additional Intake Episode record is available on the Episode record.

The Intake Episode record links an Intake record and an Episode record. The intake episode data must be entered by the organisation that delivers the treatment to the client. (Specification [Intake Episode Data Elements](#))

Intake

Intake Organisation Path * ?

Intake Key * ?

Save

You can add a client’s intake episode when you add the episode data. Follow the steps at [Adding a Client’s Episode data](#) and complete the additional Intake Episode section at the bottom of the form before clicking save.

If you didn’t have the intake data available when the episode data was entered, follow the steps at [Editing a Client’s Episode data](#) and complete the additional Intake Episode section at the bottom of the form before clicking save.

5.5.4. Deleting an Intake Episode

You can delete a client’s intake episode data without deleting the entire episode record.

Simply remove the data in the client’s intake episode fields on the episode record, follow the steps at [Editing a Client’s Episode data](#) and scroll to the bottom of the episode form.

Intake

Intake Organisation Path * ?

Intake Key * ?

Save

5.6. Universal Aftercare Episode

- [Viewing Universal Aftercare data on a Client's Episode](#)
- [Adding Universal Aftercare data to a Client's Episode](#)
- [Editing Universal Aftercare data on a Client's Episode](#)
- [Deleting Universal Aftercare data from a Client's Episode](#)
- [Universal Aftercare Out of Hospital](#)

Episodes with Program Type Universal Aftercare have extra information associated with them. The extra Universal After information is shown underneath the general Episode information when viewing or editing an Episode.

5.6.1. Viewing Universal Aftercare data on a Client's Episode

You can view the Universal Aftercare data associated with an episode that has the Universal Aftercare Program Type by following the steps at [Viewing a Client's Episodes](#) and scrolling to the bottom of the tab.

Universal Aftercare

Sexual Orientation

Bisexual or pansexual

Intersex Status

No

Transgender Status

No

Eligibility Type

Secondary Criteria

External Evaluator Contact Consent

Consented to be contacted by external evaluators

Previous Suicide Attempts

Previous attempt(s) made in the past 12 months

Method Of Suicide Attempt

Intentional self-poisoning

Primary Nominated Professional

Medical

Primary Nominated Professional Contact

Consent Date

02/11/2025

Entry Date

04/11/2025

Exit Date

09/09/9999

Critical Incidents

No critical incidents recorded.

Recommendation Outs

No recommendation outs recorded.

5.6.2. Adding Universal Aftercare data to a Client's Episode

You can edit a Client's PMHC Episode details through [Viewing a Client's Episodes](#) available on the Data Entry tab to add a Client's UA Episode data, by following these steps:

1. Once [Viewing a Client's Episodes](#).
2. From the Client's Episode table, click the Episode Key.
3. Click Edit Details tab.
4. Select 'Universal Aftercare' from the Program Type field
5. Scroll to the bottom of the PMHC Episode

Add the Client's UA Episode details. Mandatory fields are marked with an *. (Specification [UA Episode Data Elements](#))

Universal Aftercare

Sexual Orientation * ?	Intersex Status * ?
<input type="text"/>	<input type="text"/>
Transgender Status * ?	Eligibility Type * ?
<input type="text"/>	<input type="text"/>
External Evaluator Contact Consent * ?	Previous Suicide Attempts * ?
<input type="text"/>	<input type="text"/>
Method Of Suicide Attempt * ?	Primary Nominated Professional * ?
<input type="text"/>	<input type="text"/>

Primary Nominated Professional Contact

Consent Date* ?

Entry Date ?

Exit Date ?

Critical Incidents

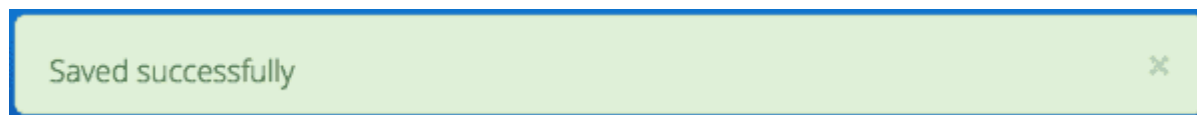
Recommendation Outs

You can also add the following information if available, or these can be added later:

- See [UA-Critical Incident data specifications](#) for Critical Incident Data.
- See [UA-Recommendation Out data specifications](#) for Recommendation Out Data.

6. Click the blue 'Save' button. (If you decide not to add UA data, you can simply navigate away from this screen)

You will receive confirmation that the Client's Episode details have been saved, and it will now be displaying.



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [UA Episode](#)

5.6.3. Editing Universal Aftercare data on a Client's Episode

You can edit a Client's PMHC Episode details through [Viewing a Client's Episodes](#) available on the Data Entry tab, by following these steps:

1. Once [Viewing a Client's Episodes](#).
2. From the Client's Episode table, click the Episode Key.
3. Click Edit Details tab.
4. Scroll to the bottom of the PMHC Episode.

Update the Client's UA Episode details. Mandatory fields are marked with an *. (Specification [UA Episode Data Elements](#))

Universal Aftercare

Sexual Orientation * ?	Intersex Status * ?
<div>Bisexual or pansexual</div>	<div>No</div>
Transgender Status * ?	Eligibility Type * ?
<div>No</div>	<div>Secondary Criteria</div>
External Evaluator Contact Consent * ?	Previous Suicide Attempts * ?
<div>Consented to be contacted by external evaluators</div>	<div>Previous attempt(s) made in the past 12 months</div>
Method Of Suicide Attempt * ?	Primary Nominated Professional * ?
<div>Intentional self-poisoning</div>	<div>Medical</div>

Primary Nominated Professional Contact

Consent Date* ?	
<div>02/11/2025</div>	<div></div>
Entry Date ?	Exit Date ?
<div>04/11/2025</div>	<div></div>

Critical Incidents

Add Critical Incident

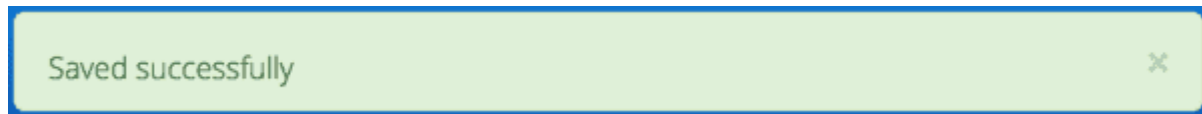
Recommendation Outs

Add Recommendation Out

Save

5. Click the blue 'Save' button. (If you decide not to save changes, you can simply navigate away from this screen)

You will receive confirmation that the Client's UA Episode details have been saved, and it will now be displaying these new details in the Episode View Details tab.



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [UA Episode](#)

5.6.4. Deleting Universal Aftercare data from a Client's Episode

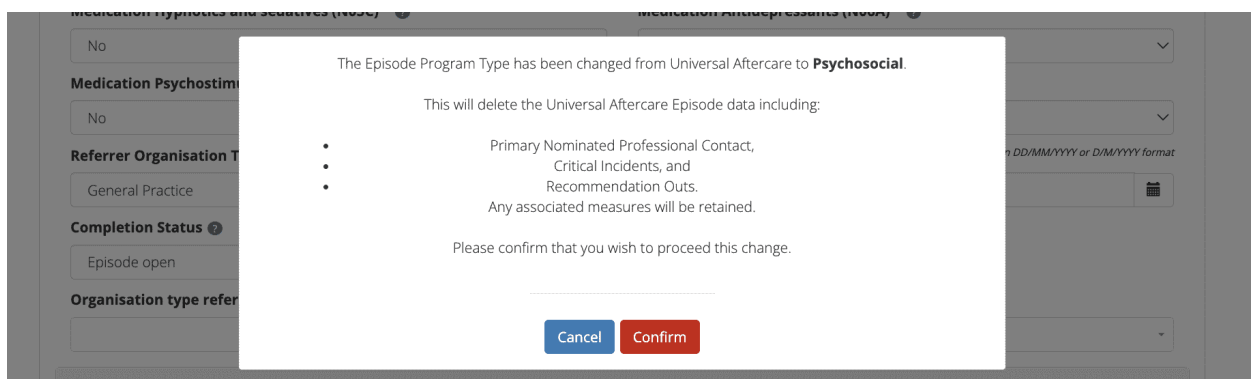
Removing 'Universal Aftercare' from the Program Type field will delete an UA Episode, through [Viewing a Client's Episodes](#) available on the Data Entry tab, by following these steps:

1. Once [Viewing a Client's Episodes](#).
2. From the Client's Episode table, click the Episode Key.
3. Click Edit Details tab.
4. Remove 'Universal Aftercare' from the Program Type field by selecting another Program Type
5. Click the blue 'Save' button.

Deleting the Universal Aftercare Episode data will also delete the:

- Primary Nominated Professional Contact,
- Critical Incidents, and
- Recommendation Outs.

However any associated measures will be retained.



Please note: Once the collection occasion is deleted, you will not be able to recover this collection occasion data.

6. Click the red 'Confirm' button to delete the data. (If you decide not to delete the data, you can click the blue 'Cancel' button)

Saved successfully



5.6.5. Universal Aftercare Out of Hospital

A new system tag (!uaoooh) has been introduced to distinguish episodes under the Universal Aftercare Outside of Hospital/Expanded Referral Pathway Trial. The !uaoooh tag will only be allowed on Episode records where the Program Type is '9: Universal Aftercare'. This tag should be applied to all episodes delivered under the Universal Aftercare Outside of Hospital/Expanded Referral Pathway Trial.

Tags

☐ Australian Government Out Of Hospital Universal Aftercare (!uaoooh) - Program guidance

Add Tag

See more details in the [System Tags](#).

5.7. Service Contacts

- [Viewing a Client's Service Contacts for an Episode](#)
- [Editing a Client's Service Contacts for an Episode](#)
 - [Editing a Service Contact Key](#)
- [Adding a Client's Service Contact data](#)
- [Duplicating a Client's existing Service Contact data](#)
- [Deleting a Service Contact](#)

5.7.1. Viewing a Client's Service Contacts for an Episode

You can view a client's service contacts through [Viewing a Client's Episodes](#) available on the **Data Entry** tab, by following these steps:

1. Navigate to [Viewing a Client's Episodes](#)
2. From the client's **Episode Details** tab, click the **Service Contacts** tab. The heading for this tab displays in brackets the total number of service contacts recorded in the PMHC MDS for this episode
3. A table will display all the Service Contacts linked to this client's Episode

"CL0001" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01"

? Episode starting 13/02/2016

Details Collection Occasions (4) Service Contacts (4)

View Service Contacts Add New Service Contact

Filters

Show / Hide

? Service Contact

Service Contact Key	Primary Practitioner	Service Contact Date ↓	No Show	Tags	
CL0001-E01-SC04		05/04/2016	No	tag3	
CL0001-E01-SC03		29/03/2016	Yes		
CL0001-E01-SC02		18/03/2016	No	tag1	
CL0001-E01-SC01		13/02/2016	Yes		

4. To view the Service Contact's details, click the blue Service Contact Key

Client "CL0001" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01"

Episode starting 13/02/2016

? Service Contact on 05/04/2016

Details

View Details Edit Details

Delete

Tags

tag3

Organisation Path

PHN999:NFP01

Service Contact Key

CL0001-E01-SC04

Episode Key

CL0001-E01

Practitioners

P01

Primary Practitioner

P01

Date

05/04/2016

Start Time

No Show

No

Postcode

1101

Type

Assessment

Funding Source

Flexible funding pool - Not Otherwise Stated

Modality

Face to Face

Participants

Individual client

Venue

Client's Home

Duration

31-45 mins

Copayment

10.00

Client Participation Indicator

Yes

Interpreter Used

No

Final

Not known at this stage

A page will display the Service Contacts details as recorded via the [Service Contact Data Elements](#).

5.7.2. Editing a Client's Service Contacts for an Episode

You can edit a client's service contacts through [Viewing a Client's Episodes](#) available on the **Data Entry** tab, by following these steps:

1. Once [Viewing a Client's Service Contacts for an Episode](#)
2. From the **Service Contacts** table, click the **Service Contact Key**
3. Click the **Edit Service Contact** tab
4. Update the client's service contact details for that service contact. Mandatory fields are marked with an * (Specification [Service Contact Data Elements](#))
5. **Please note:** You can edit the Service Contact Key from this screen. See [Editing a Service Contact Key](#)

[Home](#) / [Data Entry](#) / [Clients](#) / [CL0001@PHN999:NFP01](#) / [Client Episodes](#) / [CL0001-E01](#) / [Service Contacts](#) / [CL0001-E01-SC04](#) / [Edit Details](#)

Client "CL0001" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01"

Episode starting 13/02/2016

? [Service Contact](#) on 05/04/2016

Details

[View Details](#) [Edit Details](#)

Tags ?

tag3 × [Add Tag](#) ⌵

Organisation Path ?

PHN999:NFP01

Service Contact Key * ? [Edit Key](#)

CL0001-E01-SC04

Episode Key ?

CL0001-E01

Practitioners * ?

P01 × ⌵

Primary Practitioner * ?

P01 ⌵

Date * ? Enter date in DD/MM/YYYY or D/M/YYYY format

05/04/2016 ⌵

Start Time ?

12H 24H ⌵ : ⌵

No Show * ?

No ⌵

Postcode * ?

1101

Type * ?

Assessment ⌵

Funding Source * ?

Flexible funding pool - Not Otherwise Stated ⌵

Modality * ?

Face to Face ⌵

Participants * ?

Individual client ⌵

Venue * ?

Client's Home ⌵

Duration * ?

31-45 mins ⌵

Copayment * ?

10.00

Client Participation Indicator * ?

Yes ⌵

Interpreter Used * ?

No ⌵

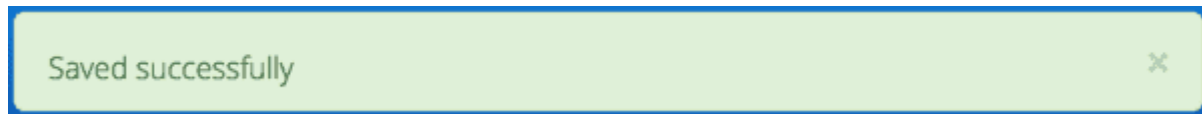
Final * ?

Not known at this stage ⌵

[Save](#)

6. Click the blue **Save** button. (If you decide not to save changes, you can simply navigate away from this screen)

You will receive confirmation that the client's service contact details have been saved, and it will now be displaying these new details in the **View Service Contact Details** tab.

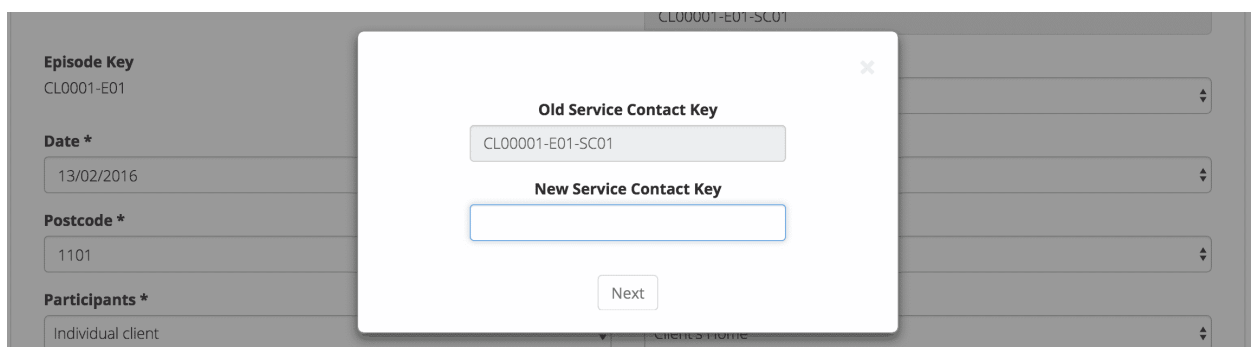


If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Service Contact](#).

5.7.2.1. Editing a Service Contact Key

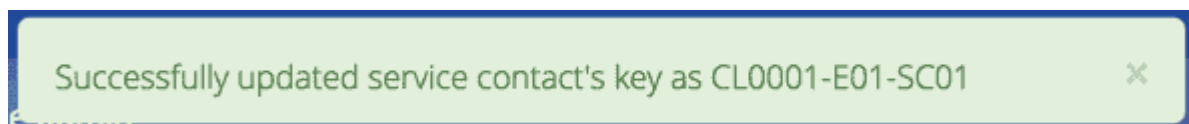
You can edit a service contact's identification key through [Viewing a Client's Episodes](#) available on the **Data Entry** tab, by following these steps:

1. In step five when [Editing a Client's Service Contacts for an Episode](#)
2. From the **Service Contact Edit Details** tab, click the **Edit Key** button



3. Type in the new service contact key and click **Next**
4. Ensure the new key is correct and click save. (If it is incorrect, click back to re-enter the key or click the 'cross' in the top right to cancel this key change request)

You will receive confirmation that the Service Contact's key has been saved, and the screen will now be displaying the updated service contact key details in the service contact's **View Details** tab.



5.7.3. Adding a Client's Service Contact data

You can add a client's service contacts through the [Viewing a Client's Episodes](#) available on the **Data Entry** tab, by following these steps:

1. Navigate to [Viewing a Client's Service Contacts for an Episode](#)
2. Ensure the service contact is not already showing
3. Click the **Add Service Contact** tab
4. Enter the client's service contact details for that episode. Mandatory fields are marked with an * (Specification [Service Contact Data Elements](#))

Home / Data Entry / Clients / CL0001@PHN999:NFP01 / Client Episodes / CL0001-E01 / Service Contacts / Add New Service Contact

"CL0001" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01"

? Episode starting 13/02/2016

Details Collection Occasions (4) **Service Contacts (4)**

View Service Contacts **Add New Service Contact** ? Service Contact

Tags ?

Organisation Path ?
 PHN999:NFP01

Service Contact Key * ?

Episode Key ?
 CL0001-E01

Practitioners * ?

Primary Practitioner * ?

Date * ? Enter date in DD/MM/YYYY or D/M/YYYY format

No Show * ?

Type * ?

Modality * ?

Venue * ?

Copayment * ?

Interpreter Used * ?

Start Time * ?
 12H 24H :

Postcode * ?

Funding Source * ?

Participants * ?

Duration * ?

Client Participation Indicator * ?

Final * ?

Save

5. Click the blue **Save** button. (If you decide not to add this client's episode, you can simply navigate away from this screen)

You will receive confirmation that the client's service contact details have been added, and it will now be displaying these new details in the **View Service Contact Details** tab.

Saved successfully



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Service Contact](#).

5.7.4. Duplicating a Client's existing Service Contact data

To improve the speed of data entry, users can now duplicate a previously recorded service contact. This process creates a new record with a copy of the fields recorded in the existing service contact record you have duplicated.

You can duplicate a client's service contacts through [Viewing a Client's Service Contacts for an Episode](#) available on the **Data Entry** tab, by following these steps:

1. Navigate to [Viewing a Client's Service Contacts for an Episode](#)
2. Click the **Duplicate this Service Contact** icon next to a record, or open the service contact record and click the **Duplicate** button
3. Complete the mandatory fields marked with an * and review the pre-filled values (Specification [Service Contact Data Elements](#))

"CL0001" at PHN "Test PHN", Provider Organisation "ORGANISATION PHN999:NFP01"

?Episode starting 13/02/2016

Details Collection Occasions (4) Service Contacts (4)

View Service Contacts Add New Service Contact ?Service Contact

Tags ?
tag3 X Add Tag 📋

Organisation Path ?
PHN999:NFP01

Service Contact Key * ?

Episode Key ?
CL0001-E01

Practitioners * ?

Primary Practitioner * ?

Date * ? Enter date in DD/MM/YYYY or D/M/YYYY format
 📅

No Show * ?

Start Time * ?
 🕒 ⌵ : ⌵

Postcode * ?

Type * ?

Funding Source * ?

Modality * ?

Participants * ?

Venue * ?

Duration * ?

Copayment * ?

Client Participation Indicator * ?

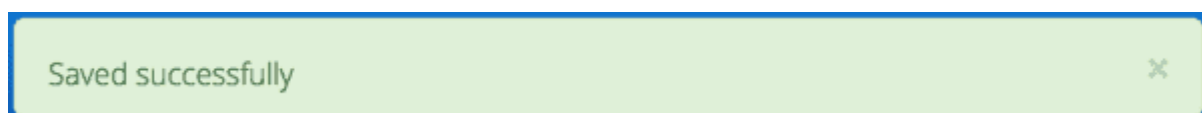
Interpreter Used * ?

Final * ?

Save

- Click the blue **Save** button. (If you decide not to duplicate this client's service contact, you can simply navigate away from this screen)

You will receive confirmation that the client's service contact details have been added, and it will now be displaying these new details in the **View Service Contact Details** tab.



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Service Contact](#).

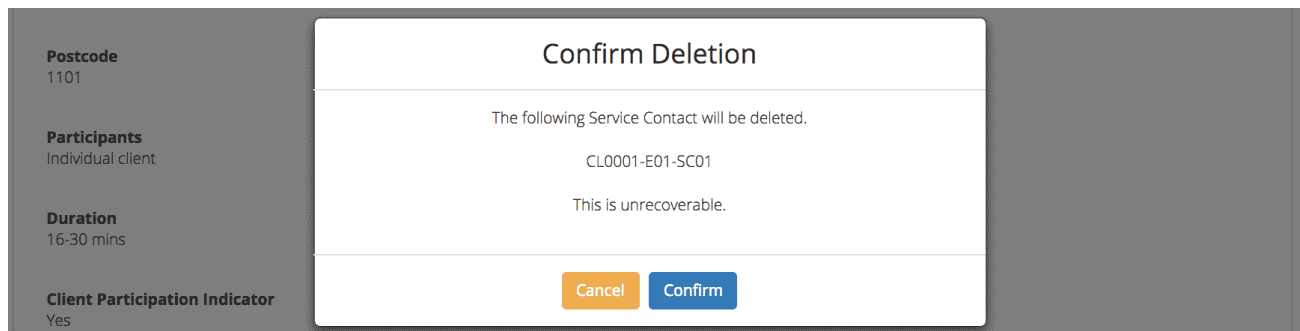
5.7.5. Deleting a Service Contact

You can delete a client's service contacts through '[Viewing a Client's Service Contacts for an Episode](#)' available on the **Data Entry** tab, by following these steps:

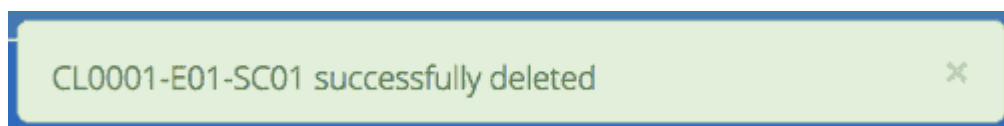
1. [Search](#) for the client
2. From the [Clients](#) table, click the **Client Key**
3. Click the **Episodes** tab, to [view Client's Episodes](#)
4. From the [View Episodes](#) table, click the **Episode Key**
5. Click the **Service Contacts** tab, to [View Client's Service Contacts](#)
6. From the [View service contact](#) table, click the **Service Contact Key**
7. Click the red **Delete** button
8. You will be prompted to confirm the deletion

Please note: You are not able to recover the data for a deleted service contact.

9. Click the blue **Confirm** button to delete this service contact. (or click the orange **Cancel** button if you decide not to delete this service contact data)



After you click **Confirm**, you will receive confirmation that the service contact has been deleted, and you will be redirected to the [View Service Contacts](#) where the service contact will no longer be displayed.



5.8. Outcome Collection Occasions

- [Viewing a Client's Outcome Collection Occasions for an Episode](#)
- [Editing a Client's Outcome Collection Occasions for an Episode](#)
 - [Editing a Collection Occasion Key](#)
- [Adding a Client's Outcome Collection Occasion data](#)
- [Generate a Client's Outcome Collection Occasion Self Service Link through the Online Measures Self Service System \(OMSSS\)](#)
- [Deleting an Outcome Collection Occasion](#)

5.8.1. Viewing a Client's Outcome Collection Occasions for an Episode

You can view a client's outcome collection occasions through [Viewing a Client's Episodes](#) available on the **Data Entry** tab, by following these steps:

1. When [Viewing the Client's Episode](#)
2. Click the **Episode Collection Occasions** tab This tab displays in brackets the total number of collection occasions recorded in the PMHC MDS for this episode.

A table will display all the collection occasions linked to this client's episode.

[Home](#) / [Data Entry](#) / [Clients](#) / [CL0001@PHN999:PO1](#) / [Client Episodes](#) / [CL0001-E01](#) / [Collection Occasions](#) / [View Collection Occasions](#)

Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

? [Episode](#) starting 13/02/2016

[Details](#) [Collection Occasions \(5\)](#) [Service Contacts \(4\)](#)

[View Collection Occasions](#) [Add New Collection Occasion](#) [Refresh](#) [Filters](#) [Show / Hide](#) | [? Collection Occasion](#)

Collection Occasion Key	Date	Reason	Measure Types	Tags
CL0001-E01-CO05_sdq	13/02/2016	Episode start	SDQ	
CL0001-E01-CO04_k5	14/02/2016	Episode start	K5	
CL0001-E01-CO03_k10p	18/06/2016	Episode end	K10+	tag1
CL0001-E01-CO02	25/04/2016	Review	K10+	tag1
CL0001-E01-CO01	12/02/2016	Episode start	K10+	

3. To view the collection occasion's details, click the blue **Collection Occasion Key**

[Home](#) / [Data Entry](#) / [Clients](#) / [CL0001@PHN999:PO1](#) / [Client Episodes](#) / [CL0001-E01](#) / [Collection Occasions](#) / [CL0001-E01-CO01](#) / [View Details](#)

Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Episode starting 13/02/2016

? [Collection Occasion](#) on 12/02/2016

[Details](#)

[View Details](#) [Edit Details](#) [Delete](#)

Organisation Path
PHN999:PO1

Episode Key
CL0001-E01

Tags

Collection Occasion Key
CL0001-E01-CO01

Collection Occasion Reason
Episode start

Collection Occasion Date
12/02/2016

A page will display the collection occasion's details as recorded via the [Outcome Collection Occasion Data Elements](#).

5.8.2. Editing a Client's Outcome Collection Occasions for an Episode

You can edit a client's outcome collection occasions through [Viewing a Client's Outcome Collection Occasions for an Episode](#) available on the **Data Entry** tab, by following these steps:

1. Navigate to [Viewing a Client's Outcome Collection Occasions for an Episode](#)
2. Click the **Collection Occasion Key**
3. Click **Edit Details** tab
4. Update the client's collection occasion's details. Mandatory fields are marked with an * (Specification [Outcome Collection Occasion Data Elements](#))
5. **Please note:** You can edit the **Collection Occasion Key** from this screen. See [Editing a Collection Occasion Key](#)

Home / Data Entry / Clients / CL0001@PHN999:PO1 / Client Episodes / CL0001-E01 / Collection Occasions / CL0001-E01-CO01 / Edit Details

Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Episode starting 13/02/2016

? [Collection Occasion](#) on 12/02/2016

Details

View Details Edit Details

Note: * denotes a mandatory field

Organisation Path ? PHN999:PO1	Episode Key ? CL0001-E01
--	------------------------------------

Tags ?
Add a tag

Collection Occasion Key ? [Edit Key](#)
CL0001-E01-CO01

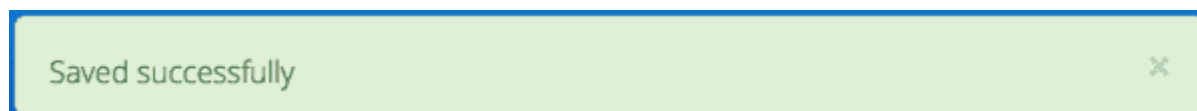
Collection Occasion Reason * ?
Episode start

Collection Occasion Date * ? Enter date in DD/MM/YYYY or D/M/YYYY format
12/02/2016

[Save](#)

6. Click the blue **Save** button. (If you decide not to save changes, you can navigate away from this screen)

You will receive confirmation that the client's collection occasion's details have been saved, and it will now be displaying these new details in the **View Collection Occasion Details** tab.

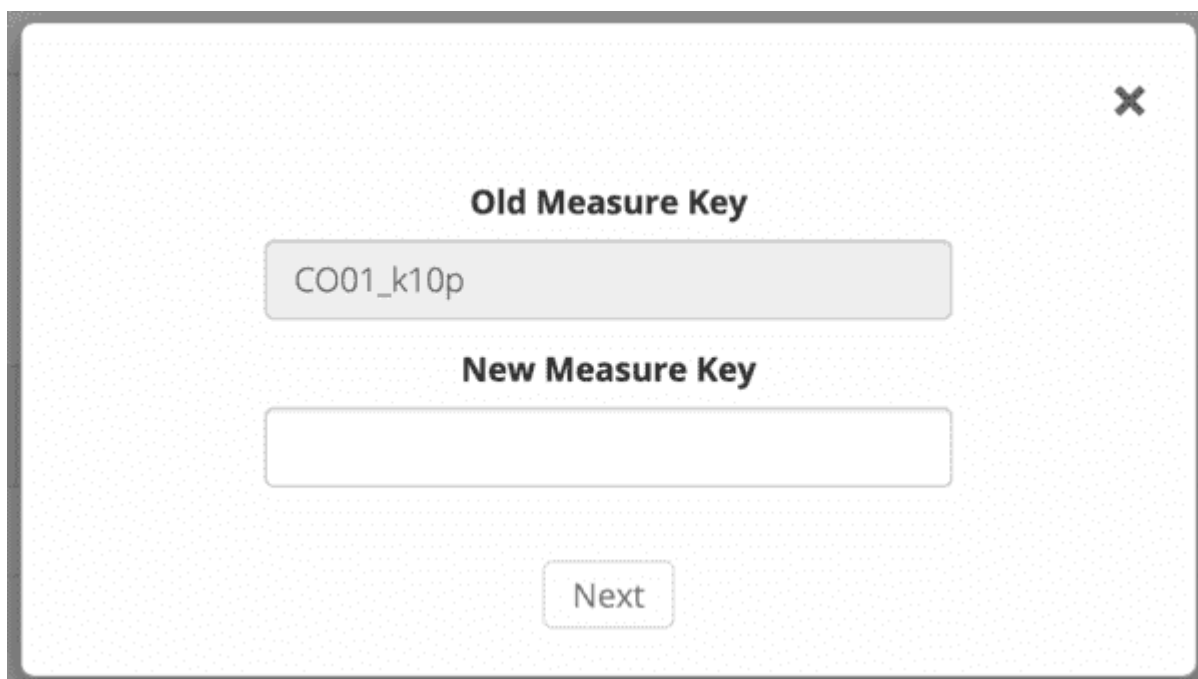


If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Outcome Collection Occasion Validations](#)

5.8.2.1. Editing a Collection Occasion Key

You can edit a collection occasion's identification key through [Viewing a Client's Episodes](#) available on the **Data Entry** tab, by following these steps:

1. In step five when [Editing a Client's Outcome Collection Occasions for an Episode](#)
2. From the **Collection Occasion Edit Details** tab, click the **Edit Key** button



The screenshot shows a modal dialog box for editing a collection occasion key. It has a light gray background with a dotted pattern. At the top right is a close button (X). The main content area has two sections: 'Old Measure Key' with a text input field containing 'CO01_k10p', and 'New Measure Key' with an empty text input field. At the bottom center is a 'Next' button.

3. Type in the new collection occasion key and click **Next**
4. Ensure the new key is correct and click **Save**. (If it is incorrect, click back to re-enter the key or click the 'cross' in the top right to cancel this key change request)

You will receive confirmation that the collection occasion's key has been saved, and the screen will now be displaying the updated collection occasion key details in the **Collection Occasion View Details** tab.



5.8.3. Adding a Client's Outcome Collection Occasion data

You can add a client's outcome collection occasions through [Viewing a Client's Outcome Collection Occasions for an Episode](#) available on the **Data Entry** tab, by following these steps:

1. Navigate to [Viewing a Client's Outcome Collection Occasions for an Episode](#)
2. Check that the collection occasion is not already showing
3. Click the **Add New Collection Occasion** tab

4. Enter the client's collection occasion details for that episode. Mandatory fields are marked with an * (Specification [Outcome Collection Occasion Data Elements](#))

Home / Data Entry / Clients / CL0001@PHN999:PO1 / Client Episodes / CL0001-E01 / Collection Occasions / Add New Collection Occasion

Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

? Episode starting 13/02/2016

Details | **Collection Occasions (5)** | Service Contacts (4)

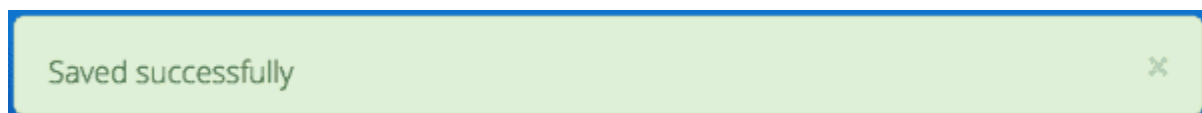
View Collection Occasions | **Add New Collection Occasion** | ? Collection Occasion

Note: * denotes a mandatory field

Organisation Path ?	Episode Key ?
PHN999:PO1	CL0001-E01
Tags ?	
<input type="text" value="Add a tag"/>	
Collection Occasion Key * ?	
<input type="text"/>	
Collection Occasion Reason * ?	Collection Occasion Date * ? <small>Enter date in DD/MM/YYYY or D/M/YYYY format</small>
<input type="text"/>	<input type="text"/>

5. Click the blue **Save** button. (If you decide not to add this collection occasion, you can navigate away from this screen)

You will receive confirmation that the client's collection occasion's details have been added, and it will now be displaying these new details in the **View Collection Occasion Details** tab.



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Outcome Collection Occasion Validations](#)

5.8.4. Generate a Client's Outcome Collection Occasion Self Service Link through the Online Measures Self Service System (OMSSS)

The Online Measures Self Service System (OMSSS) is a service funded by the Australian Government Department of Health, Disability and Aging (DoHDA) as part of the Primary Mental Health Care Minimum Data Set (PMHC MDS). It allows clients of mental health services commissioned by Primary Health Networks (PHNs) to complete the standardised outcome measures mandated in the PMHC MDS and have the results reported back to their service providers. See more at <http://docs.omsss.online/>.

You can now generate a self service link on the PMHC MDS for a Outcome Collection Occasion through [Viewing a Client's Outcome Collection Occasions for an Episode](#) available on the **Data Entry** tab, by following these steps:

1. Navigate to [Viewing a Client's Outcome Collection Occasions for an Episode](#)
2. Check that the collection occasion is not already showing
3. Click the **Generate Self Service Link** tab
4. Complete Screen One; about the collection occasion measure and click the blue **Next** button

Home / Data Entry / Clients / CL0001@PHN999:PO1 / Client Episodes / CL0001-E01 / Collection Occasions / Generate Self Service Link

Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Episode starting 13/02/2016

Details **Collection Occasions (2)** Service Contacts (4)

View Collection Occasions Add New Collection Occasion **Generate Self Service Link**

Note: * denotes a mandatory field

1/3

SLK

Z4H4TBAEASY0T27J0GMX3P2N4C3BCYSN

Measure Type *

Collection Occasion Reason *

Collection Occasion Key *

Practitioner Key *

Next

5. Complete Screen Two; review the measure details just entered and complete the 'Invitation' and 'Results' fields, and click the blue **Next** button

The client will be sent an SMS and/or email if you entered their details in the invitation section.

The Practitioner and/or Organisation will receive the results of the completed measure if you have entered their details and selected these options

Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

? Episode starting 13/02/2016

Details Collection Occasions (2) Service Contacts (4)

View Collection Occasions Add New Collection Occasion Generate Self Service Link

Note: * denotes a mandatory field

2/3

SLK

Z4H4TBAEASY0T27J0GMX3P2N4C3BCYSN

Measure Type

K10+

Collection Reason

Review

Collection Occasion Key

CL0001-E01-CO03.

Practitioner Key

P01

Invitation

NOTE: This information will not be stored.

Enter the client's email address and/or mobile number to send them an outcome measure link.

If both are left blank only a QR code will be generated.

Client's Mobile

Client's Email

Requestor's Name

0/150

This could be either the practitioner's name or the provider organisation's name.

It will be used in the SMS and/or email to the client so that they can identify who is asking them to complete the measure.

Results

Please select where to email a link to the results when the client completes the outcome measure. Results will still be available via the PMHC MDS if no email addresses are selected.

- ☐ Send results to practitioner (sandraz+omsss@strategicdata.com.au)
- ☐ Provider organisation PHN999:PO1 has no recorded email.

Back

Generate Measure Link

6. Final screen three; will display the QR code and the unique OMSSS collection code for your records.

Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

? Episode starting 13/02/2016

Details Collection Occasions (2) Service Contacts (4)

View Collection Occasions Add New Collection Occasion Generate Self Service Link

Note: * denotes a mandatory field

3/3

NOTE: This information will not be stored.



<https://staging.omsss.online/#/9457VRG>
(link opens in a new window)

9457VRG

Please write this code against the client file.

Back to start

7. Click the blue **Back to start** button.

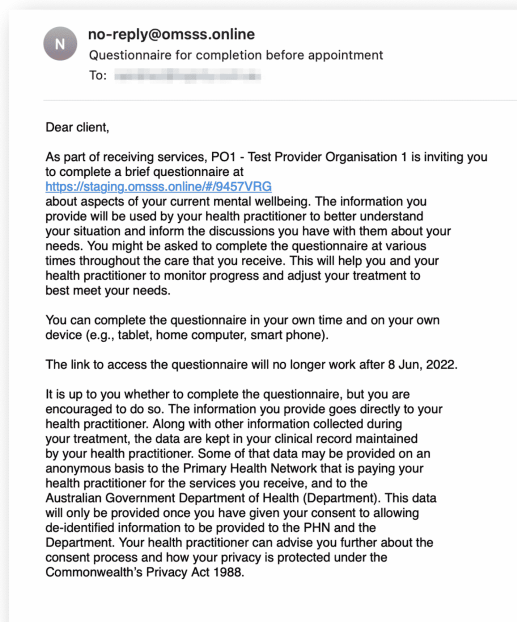
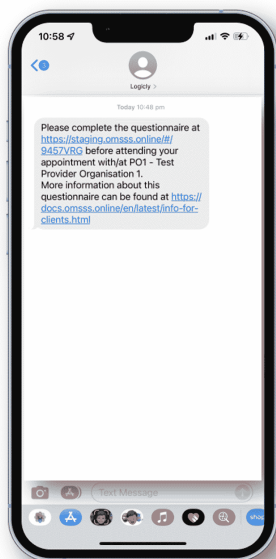
Questionnaires are valid for 7 days. The following reminder emails will be sent:

2 days after the invitation -
Reminding the client to fill in the

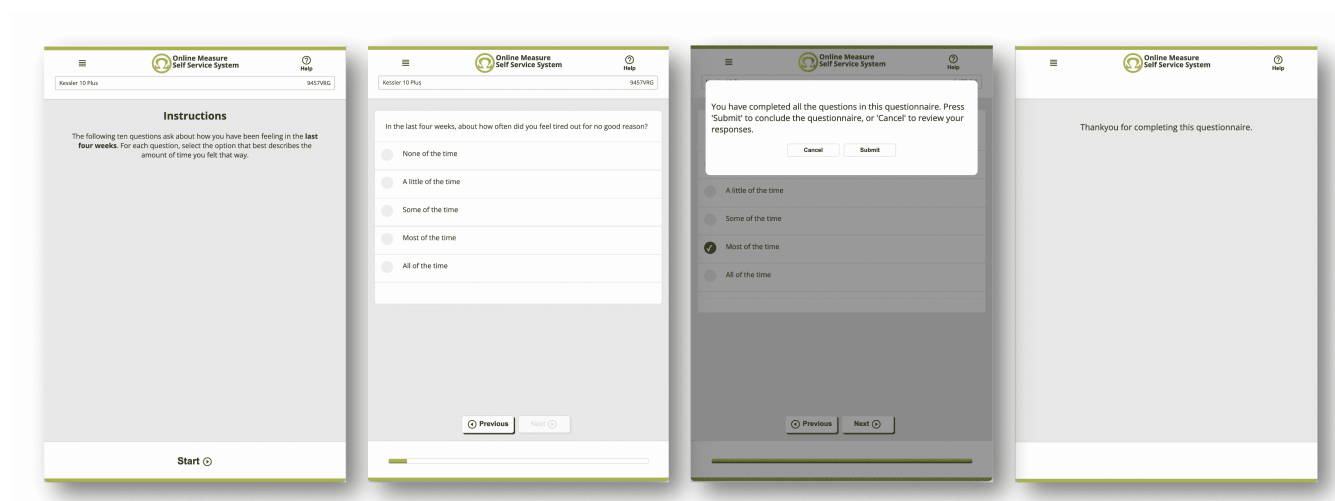
questionnaire. Also reminding them of the date on which it will expire.

- 6 days after the invitation - Reminding the client to fill in the questionnaire. Reminding them that it will expire tomorrow.

Example Self Service Link Screens



Example Measure Screens



Example confirmation email for complete measure



Online Measure Self Service System

A K10+ outcome measure has been completed by a client with the OMSSS code 9457VRG.

Score

The total score from the outcome measure is: 30

Responses

Question	Response Score
1 In the last four weeks, about how often did you feel tired out for no good reason?	A little of the time 2
2 In the last four weeks, about how often did you feel nervous?	A little of the time 2
3 In the last four weeks, about how often did you feel so nervous that nothing could calm you down?	Some of the time 3
4 In the last four weeks, about how often did you feel hopeless?	Some of the time 3
5 In the last four weeks, about how often did you feel restless or fidgety?	Most of the time 4
6 In the last four weeks, about how often did you feel so restless you could not sit still?	Most of the time 4
7 In the last four weeks, about how often did you feel depressed?	Some of the time 3
8 In the last four weeks, about how often did you feel that everything was an effort?	A little of the time 2
9 In the last four weeks, about how often did you feel so sad that nothing could cheer you up?	Most of the time 4
10 In the last four weeks, about how often did you feel worthless?	Some of the time 3
11 In the last four weeks, how many days were you TOTALLY UNABLE to work, study or manage your day to day activities because of these feelings?	3 3
12 (Aside from those days), in the last 4 weeks, HOW MANY DAYS were you able to work or study or manage your day to day activities, but had to CUT 5 DOWN on what you did because of these feelings?	5
13 In the last 4 weeks, how many times have you seen a doctor or any other health professional about these feelings?	2 2
14 In the last 4 weeks, how often have physical health problems been the main cause of these feelings?	Most of the time 4
TOTAL	30

Example complete measure 'CL0001-E01-CO03' in the PMHC MDS

Home / Data Entry / Clients / CL0001@PHN999:PO1 / Client Episodes / CL0001-E01 / Collection Occasions / View Collection Occasions

Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

? Episode starting 13/02/2016

Details Collection Occasions (3) Service Contacts (4)

View Collection Occasions Add New Collection Occasion Generate Self Service Link

Refresh

Filters

Show / Hide

? Collection Occasion

Collection Occasion Key	Date	Reason	Measure Types	Tags
CL0001-E01-CO03	01/06/2022	Review	K10+	OMSSS:9457VRG
CL0001-E01-CO02	01/04/2016	Review	K10+	tag1
CL0001-E01-CO01	13/02/2016	Episode start	K10+	

5.8.5. Deleting an Outcome Collection Occasion

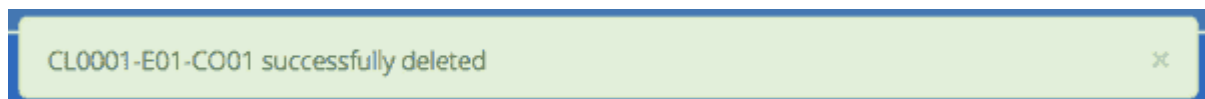
You can delete a client's outcome collection occasion through [Viewing a Client's Outcome Collection Occasions for an Episode](#) available on the **Data Entry** tab, by following these steps:

1. [Search](#) for the client
2. From the [Clients](#) table, click the **Client Key**
3. Click the **Episodes** tab, to [view Client's Episodes](#)
4. From the [View Episodes](#) table, click the **Episode Key**
5. Click the **Collection Occasions** tab, to [View Collection Occasions](#)
6. From the [View Collection Occasions](#) table, click the **Collection Occasion Key**
7. Click the red **Delete** button

8. You will be prompted to confirm the deletion
9. **Please note: Data can not be recovered for deleted collection occasions**
10. Click the blue **Confirm** button to delete this collection occasion. (or click the orange **Cancel** button if you decide not to delete this collection occasion data)



After you click **Confirm**, you will receive confirmation that the collection occasion has been deleted, and you will be redirected to the [View Collection Occasions](#) where the collection occasion will no longer be displayed.



5.9. Collection Occasion Measures

- [Viewing a Client's Measures for a Collection Occasion](#)
- [Adding an Client's Measures for a Collection Occasion](#)
- [Editing a Client's Measures for a Collection Occasion](#)
 - [Editing a Measure Key](#)
- [Deleting a Measure from a Collection Occasion](#)

5.9.1. Viewing a Client's Measures for a Collection Occasion

You can view a Client's Measures added to a Collection Occasion through [Viewing a Client's Outcome Collection Occasions for an Episode](#) available on the Data Entry tab, by following these steps:

1. Once [Viewing the Collection Occasion](#).
2. Scroll down to the Measures

A table will display all the Measures linked to this Client's Episode Collection Occasion.

Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Episode starting 13/02/2016

? [Collection Occasion](#) on 13/02/2016

Details

View Details Edit Details Delete

Organisation Path PHN999:PO1	Episode Key CL0001-E01
Tags	
Collection Occasion Key CL0001-E01-CO05_sdq	
Collection Occasion Reason Episode start	Collection Occasion Date 13/02/2016

? [Measures](#)

View Measures Add New Measure

Measure Key	Measure Type	Result
9689cb68-ad36-46a1-a2fd-5d8...	SDQ - YR101	Total Difficulties Score: 22
9009d82c-e203-49d5-86c9-0cc...	SDQ - PY101	Total Difficulties Score: 20

3. To view the Measure details, click the Blue Measure Key.

? [Measures](#)

View Measures Add New Measure

View Measure Edit Measure Back to List Delete

A page will display the Measure details as recorded via the [Outcome Collection Occasion Data Elements](#).

- See [K10+ Measure data specifications](#).
- See [K5 Measure data specifications](#).
- See [SDQ Measure data specifications](#).

If the client has a [Universal Aftercare Episode](#) you can also view the following measures when added:

- See [SIDAS Measure data specifications](#).
- See [WHO-5 Measure data specifications](#).
- See [UA-Plan data specifications](#).
- See [UA-NI data specifications](#).

5.9.2. Adding an Client's Measures for a Collection Occasion

Single or multiple measures can be added to a collection occasion. You can add a Client's Measure for a Collection Occasion. Multiple through [Viewing a Client's Outcome Collection Occasions for an Episode](#) available on the Data Entry tab, by following these steps:

- 1. Once [Viewing a Client's Outcome Collection Occasions for an Episode](#).
- 2. Firstly double check the measure is not already showing.
- 3. Click the Add New Measure tab.

Home / Data Entry / Clients / CL0001@PHN999:PO1 / Client Episodes / CL0001-E01 / Collection Occasions / CL0001-E01-CO01 / View Details

Client "CL0001" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Episode starting 13/02/2016

?

Collection Occasion

 on 12/02/2016

Details

View Details

Edit Details

Delete

Organisation Path

PHN999:PO1

Episode Key

CL0001-E01

Tags

Collection Occasion Key

CL0001-E01-CO01

Collection Occasion Reason

Episode start

Collection Occasion Date

12/02/2016

?

Measures

View Measures

Add New Measure

Measure Type

Score Type

Next

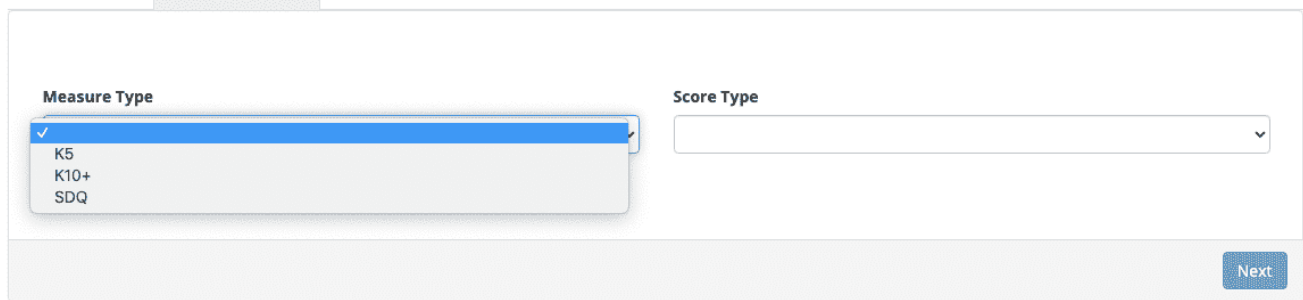
- 4. Select the Collection Occasion Measure type.

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? Measures

View Measures

Add New Measure



Measure Type

- ✓ K5
- K10+
- SDQ

Score Type

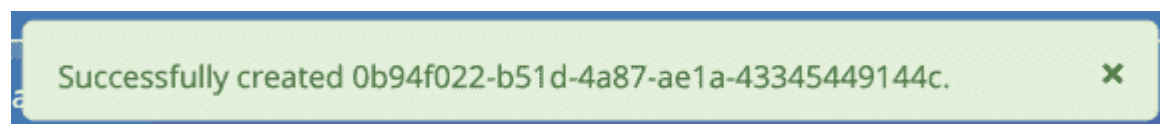
Next

5. Choose the Score Type, if it isn't already pre-filled.
6. Click the blue **Next** button.
7. Enter the Client's Measure details for the Collection Occasion. Mandatory fields are marked with an * .
 - See [K10+ Measure data specifications](#).
 - See [K5 Measure data specifications](#).
 - See [SDQ Measure data specifications](#).

If the client has a [Universal Aftercare Episode](#) you can also add the following measures:

- See [SIDAS Measure data specifications](#).
 - See [WHO-5 Measure data specifications](#).
 - See [UA-Plan data specifications](#).
 - See [UA-NI data specifications](#).
6. Click the blue **Save** button. (If you decide not to add this client's measure, you can simply navigate away from this screen)

You will receive confirmation that the Client's Measure details have been added, and it will now be displaying these new details in the View Measure tab.



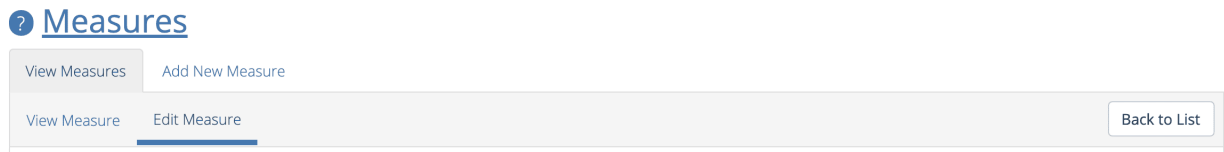
If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [K10+ K5 SDQ SIDAS UA-Plan UA-NI](#)

5.9.3. Editing a Client's Measures for a Collection Occasion

You can edit a Client's Measure for a Collection Occasion through [Viewing a Client's Outcome Collection Occasions for an Episode](#) available on the Data Entry tab, by following these steps:

1. Once [Viewing a Client's Outcome Collection Occasions for an Episode](#).
2. Scroll down to the Measures
3. Click the Blue Measure Key.
4. Click Edit Measure
5. Update the Client's Measure details. Mandatory fields are marked with an * .

Please note: You can edit the Measure Key from this screen. See [Editing a Measure Key](#).



6. Click the blue **Save** button. (If you decide not to save changes, you can simply navigate away from this screen)

You will receive confirmation that the Client's Collection Occasions details have been saved, and it will now be displaying these new details in the View Collection Occasion Details tab.

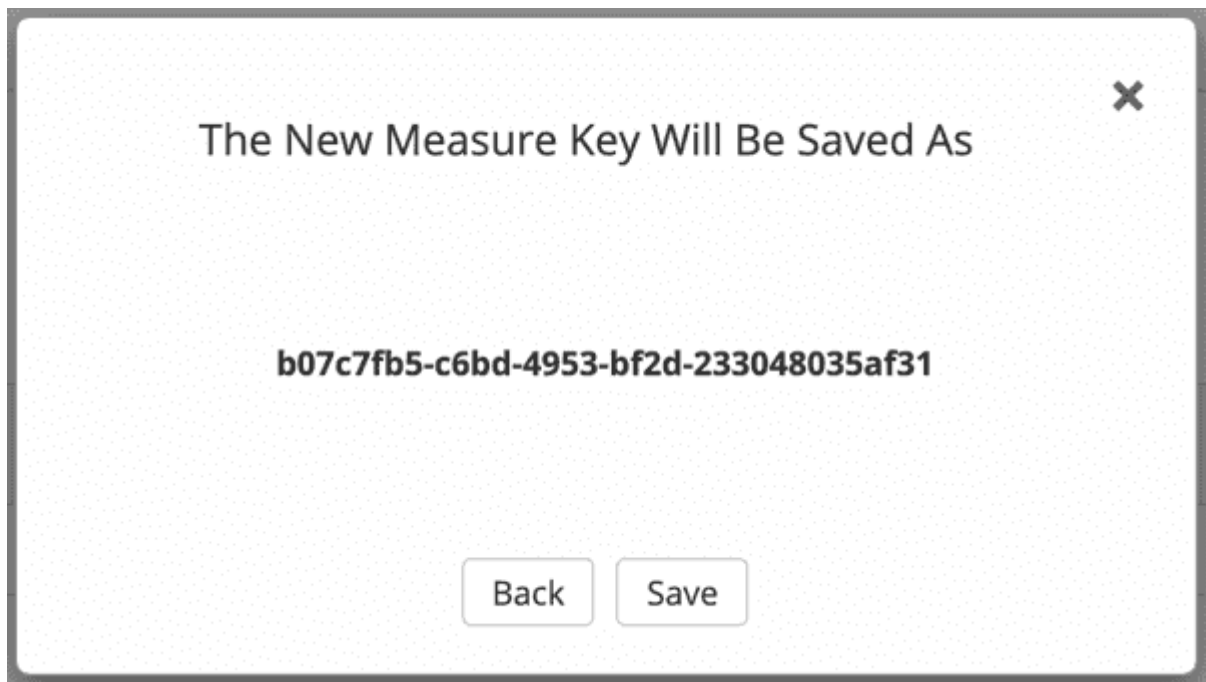


If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [K10+ K5 SDQ SIDAS UA-Plan UA-NI](#)

5.9.3.1. Editing a Measure Key

You can edit an measure's identification key through [Viewing a Client's Outcome Collection Occasions for an Episode](#) available on the Data Entry tab, by following these steps:

1. In step four when [Editing a Client's Measures for a Collection Occasion](#).
2. From the Edit Measure details tab, click the **Edit Key** button.



3. Type in the new measure key and click 'Next'.
4. Double check the new key is correct and click save. (If it is incorrect, click back to re-enter the key or click the 'cross' in the top right to cancel this key change request)

You will receive confirmation that the Measure's key has been saved, and the screen will now be displaying the updated measure key details in the View Measure details tab.



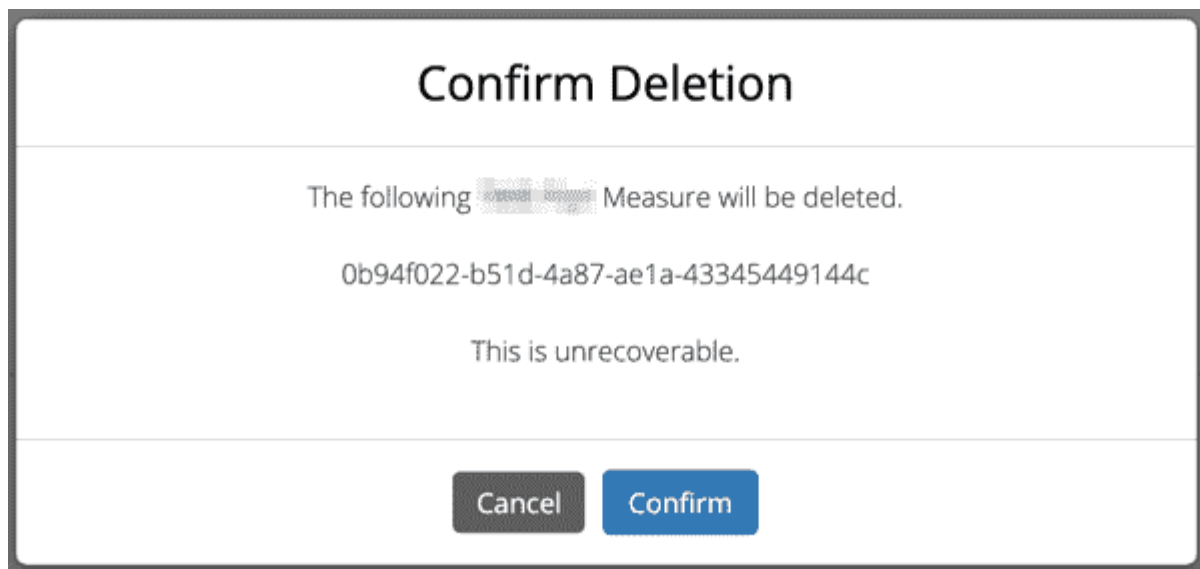
5.9.4. Deleting a Measure from a Collection Occasion

You can delete a Client's Measure from a Collection Occasion through '[Viewing a Client's Measures for a Collection Occasion](#)' available on the Data Entry tab, by following these steps:

1. Once [Viewing a Client's Outcome Collection Occasions for an Episode](#).
2. Scroll down to the Measures
3. Click the Blue Measure Key.
4. Click Edit Measure
5. Click the red **Delete** button.
6. You will be displayed a 'Confirm Deletion' screen.

Please note: Once the measure is deleted, you will not be able to recover this measure data.

7. Click the blue **Confirm** button to delete this measure. (or click the orange **Cancel** button if you decide not to delete this measure data)



After you click 'Confirm', you will receive confirmation that the measure has been deleted, and you will be redirected to the [View Measures](#) where the measure will no longer be displayed.

5.10. Practitioners

- [Finding a Practitioner](#)
- [Viewing a Practitioner](#)
- [Editing a Practitioner](#)
 - [Editing a Practitioner Key](#)
- [Adding a Practitioner](#)
- [Deleting a Practitioner](#)
 - [Confirm Delete](#)
 - [Cannot Delete](#)
- [Inactive Practitioners](#)
- [Viewing a Practitioner's Clients](#)
- [Viewing a Practitioner Providing Client Services](#)

5.10.1. Finding a Practitioner

You can search for practitioners assigned to an organisation through the **Data Entry** tab, by following these steps:

1. Click the **Practitioners** tab

Data Entry

Users with the Data Entry role can use this tab to add, view and edit client records.

Support: For more information and assistance visit [PMHC MDS Documentation](#). (link opens in a new window)

Clients **Practitioners** Activities

View Practitioners Add New Practitioner

Filters

Show / Hide

Practitioner

Practitioner Key	Organisation Path	Category	Gender	Year of Birth	Active	Tags
hsDMP	PHN999:PO1	Clinical Psychologist	Female	1963	Active	
P01	PHN999:PO1	General Practitioner	Other	1975	Active	tag1
P01	PHN999:NFP01	General Practitioner	Other	1975	Active	tag1
P02	PHN999:PO1	General Psychologist	Female	1967	Active	tag2 tag3
P02	PHN999:NFP01	General Psychologist	Female	1967	Active	tag2 tag3
P03	PHN999:PO1	Other Medical	Male	1952	Active	
P03	PHN999:NFP01	Other Medical	Male	1952	Active	
P04	PHN999:PO1	Not stated	Not stated/Ina...	1939	Inactive	
P04	PHN999:NFP01	Not stated	Not stated/Ina...	1939	Inactive	
PFIX000000	PHN999:PO1	Not stated	Male	1928	Active	

1 / 36 10 items per page

1 - 10 of 359 Items

5.10.2. Viewing a Practitioner

You can view a practitioner's details through [Finding a Practitioner](#) on the **Data Entry** tab, by following these steps:

1. Click the [Practitioners](#) tab
2. Click the practitioner's key in blue displayed within the table

Practitioner "P01" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Practitioner Details

View Details Edit Details View Clients

Delete

Tags

tag1

Organisation Path

PHN999:PO1

Category

General Practitioner

Year of Birth

1975

Aboriginal and Torres Strait Islander Status

Aboriginal but not Torres Strait Islander origin

OMSSS Practitioner Email

Practitioner Key

P01

Active

Active

Gender

Other

ATSI Cultural Training

Yes

Please note: You can also view a practitioner's details through the **Client Data** tab. See [Viewing a Practitioner Providing Client Services](#)

5.10.3. Editing a Practitioner

You can view a practitioner's details through [Finding a Practitioner](#) on the **Data Entry** tab, by following these steps:

1. Click the [Practitioners](#) tab
2. Click the practitioner's key in blue displayed within the table
3. From the **View Practitioner Details** tab, click the **Edit Details** tab
4. Update the practitioner's details. Mandatory fields are marked with an *
5. **Please note:** You can edit the **Practitioner Key** from this screen. See [Editing a Practitioner Key](#)

Home / Data Entry / Practitioners / P01@PHN999:PO1 / Edit Details

Practitioner

"P01" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Practitioner Details

View Details

Edit Details

View Clients

Note: * denotes a mandatory field

Tags

tag1

Add a tag

Organisation Path *

PHN999:PO1

Practitioner Key *

P01

Edit Key

Category *

General Practitioner

Active *

Active

Year of Birth *

1975

Gender *

Other

Aboriginal and Torres Strait Islander Status *

Aboriginal but not Torres Strait Islander origin

ATSI Cultural Training *

Yes

OMSSS Practitioner Email

Save

6. Click the blue **Save** button. (If you decide not to save changes, you can navigate away from this screen)

You will receive confirmation that the practitioner's details have been added, and it will now be displaying these new details in the **View Practitioner Details** tab.

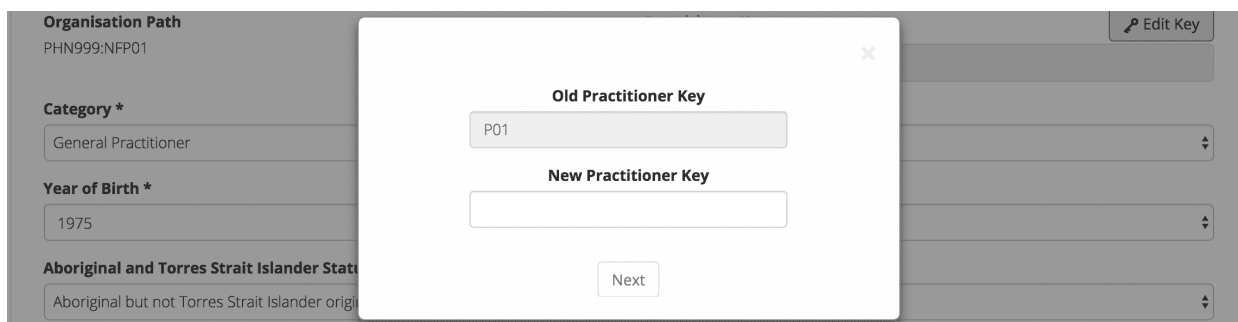
Page 109 of 252

If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Practitioner](#).

5.10.3.1. Editing a Practitioner Key

You can edit a practitioner's identification key through [Editing a Practitioner](#) available on the **Data Entry** tab, by following these steps:

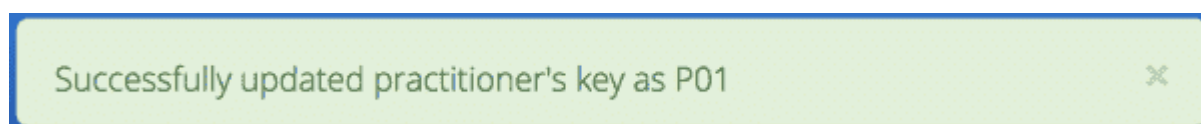
1. In step five, when [Editing a Practitioner](#)
2. From the **Practitioner Edit Details** tab, click the **Edit Key** button



The screenshot shows the 'Practitioner Edit Details' form. On the left, there are fields for 'Organisation Path' (PHN999:NFP01), 'Category *' (General Practitioner), 'Year of Birth *' (1975), and 'Aboriginal and Torres Strait Islander Status' (Aboriginal but not Torres Strait Islander origin). On the right, there is an 'Edit Key' button. A modal window is open in the center, titled 'Old Practitioner Key' with a close button (X) in the top right. The modal contains a text input field with 'P01' and a 'New Practitioner Key' text input field. At the bottom of the modal is a 'Next' button.

3. Type in the new practitioner key and click **Next**
4. Ensure the new key is correct and click **Save**. If it is incorrect, click back to re-enter the key or click the 'cross' in the top right to cancel this key change request.

You will receive confirmation that the **Practitioners Key** has been saved, and the screen will now be displaying the updated practitioner key details in the **Practitioner View Details** tab.



5.10.4. Adding a Practitioner

You can view a practitioner's details through [Finding a Practitioner](#) on the **Data Entry** tab, by following these steps:

1. Click the [Practitioners](#) tab
2. Click the **Add New Practitioner** tab
3. Enter the practitioner's details. Mandatory fields are marked with an *

Data Entry

Users with the Data Entry role can use this tab to add, view and edit client records.

Support: For more information and assistance visit [PMHC MDS Documentation](#). (link opens in a new window)

[Clients](#)
[Practitioners](#)
[Activities](#)

[View Practitioners](#)
[Add New Practitioner](#)

Practitioner

Note: * denotes a mandatory field

Tags

Organisation Path *

Practitioner Key *

Category *

Active *

Year of Birth *

Gender *

Aboriginal and Torres Strait Islander Status *

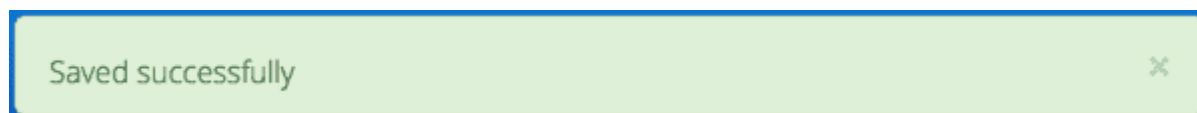
ATSI Cultural Training *

OMSSS Practitioner Email

Save

- Click the blue **Save** button. (If you decide not to save changes, you can navigate away from this screen)

You will receive confirmation that the practitioner's details have been added, and it will now display these new details in the **View Practitioner Details** tab.



If you receive an error message, the data will need to be corrected before the record is saved and added to the PMHC MDS. See Validation Rules - [Practitioner](#).

You can add a practitioners individually through the data entry interface or alternatively, practitioner records can be uploaded in bulk. See [Upload](#).

5.10.5. Deleting a Practitioner

You can delete a practitioner's details through [Editing a Practitioner](#) on the **Data Entry** tab, by following these steps:

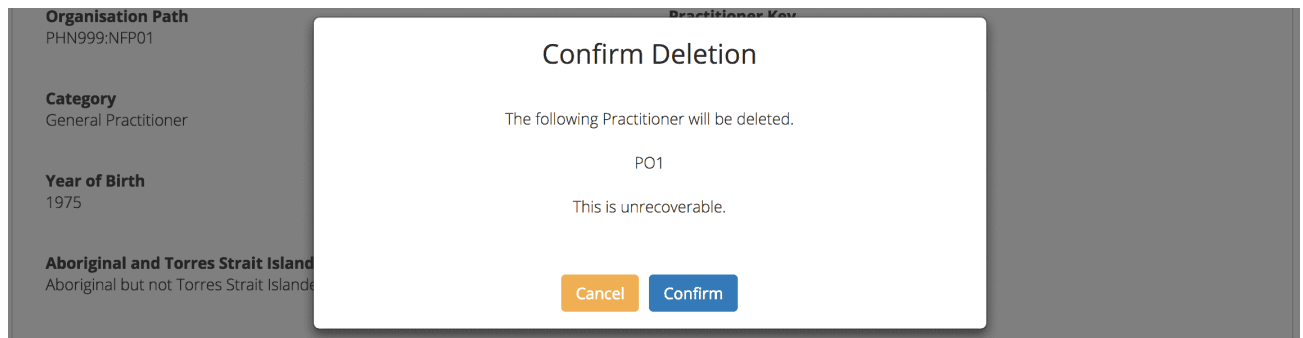
- Click the [Practitioners](#) tab
- Click the practitioner's key in blue displayed within the table

3. Click the red **Delete** button
4. You will either be shown a [Confirm Delete](#) screen or a [Cannot Delete](#) screen

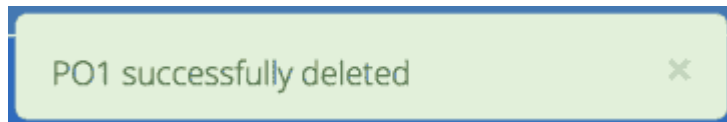
5.10.5.1. Confirm Delete

Please note: Data from deleted practitioners can not be recovered.

1. Click the blue **Confirm** button to delete this practitioner. (or click the orange **Cancel** button to cancel the deletion)



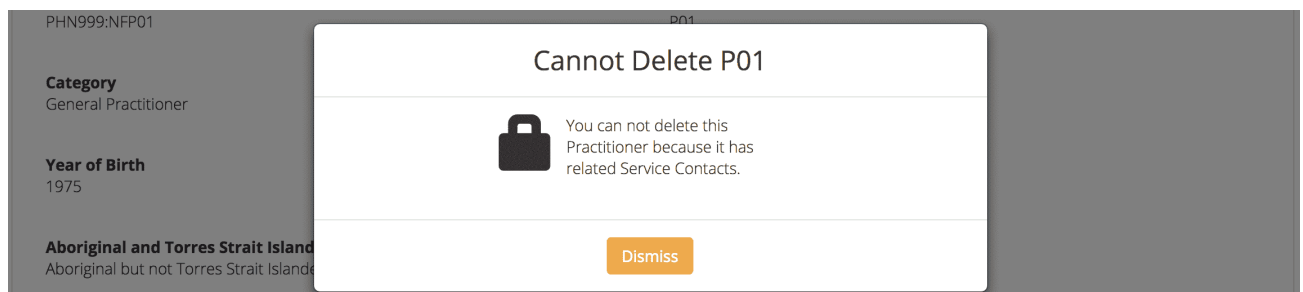
After you click **Confirm**, you will receive confirmation that the practitioner has been deleted, and you will be redirected to the [View Practitioners](#) where the practitioner will no longer be displayed.



5.10.5.2. Cannot Delete

If the practitioner you are trying to delete has any dependant records, you will not be able to proceed with deleting this practitioner until all the related records have been edited or deleted.

1. Click the orange **Dismiss** button



See [Editing a Client's Service Contacts for an Episode](#) or [Deleting a Service Contact](#).

5.10.6. Inactive Practitioners

Currently a practitioner can not be deleted from the PMHC MDS if they have any dependant records.

You can change the practitioner from 'active' to 'inactive' by editing their details. By doing this, the inactive practitioner keys will no longer be displayed in the **Practitioner Key** drop down list displayed on the **Service Contact** forms.

See [Editing a Practitioner](#).

5.10.7. Viewing a Practitioner's Clients

You can view a practitioner's clients through [Viewing a Practitioner](#) on the **Data Entry** tab, by following these steps:

1. Click the [Practitioners](#) tab
2. Click the practitioner's key in blue displayed within the table
3. Navigate to **View Clients** tab

Home / Data Entry / Practitioners / P01@PHN999:P01 / View Clients

? [Practitioner](#) "P01" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Practitioner Details

[View Details](#) [Edit Details](#) [View Clients](#)

Filters

Show / Hide

Client Key ▲ ▼	SLK ▼	Date Of Birth ▼	Gender ▼	Last Known Postcode ▼	Last Contact Date ▼	Tags ▼
CL0001	TB4MR8H0DRR8T9Q...	17/02/1983	Male	9999	05/08/2021	tag1
CL0007	G6MMH65XPW819Sj...	09/09/9999	Not stated/Inadequat...	1107	10/05/2016	tag2
CL0008	B07MMQ44YAM5EQ...	28/02/1978	Female	9999	30/09/2016	tag1
CL0009	CXN263HSPMB0ZK6T...	19/06/2002	Other	1111	15/07/2016	tag2 tag3

1

/ 1

10

items per page

1 - 4 of 4 Items

Click the client's key to view the client's details. See [Client Data](#).

5.10.8. Viewing a Practitioner Providing Client Services

You can view a practitioner's details through [Viewing a Client's Service Contacts for an Episode](#) on the **Data Entry** tab, by following these steps:

1. Navigate to [Viewing a Client's Service Contacts for an Episode](#)
2. From the **View Details** tab, click the **Practitioner Key**

[Home](#) / [Data Entry](#) / [Clients](#) / [CL0001@PHN999:NFP01](#) / [Client Episodes](#) / [CL0001-E01](#) / [Service Contacts](#) / [CL0001-E01-SC01](#) / [View Details](#)

Client "CL0001" at PHN "Test PHN", Provider Organisation "Test PO 1"


Episode starting 13/02/2016


? Service Contact on 13/02/2016

Details

View Details

Edit Details

 Duplicate

 Delete

Tags

Organisation Path
PHN999:NFP01

Episode Key
CL0001-E01

Date
13/02/2016

Postcode
1101

Participants
Individual client

Duration
16-30 mins

Client Participation Indicator
Yes

No Show
Yes

Service Contact Key
CL0001-E01-SC01

Practitioner Key
P01

Type
Assessment

Modality
Face to Face

Venue
Client's Home

Copayment
0.00

Interpreter Used
No

Final
Further services are planned for the client in the current episode

A page will display the practitioner's details as recorded via the [Practitioner Data Elements](#).

? Practitioner "P01" at PHN "Test PHN", Provider Organisation "Test Provider Organisation 1"

Practitioner Details

View Details Edit Details View Clients

Delete

Tags tag1	
Organisation Path PHN999:PO1	Practitioner Key P01
Category General Practitioner	Active Active
Year of Birth 1975	Gender Other
Aboriginal and Torres Strait Islander Status Aboriginal but not Torres Strait Islander origin	ATSI Cultural Training Yes
OMSSS Practitioner Email	

6. Reports

- [How to produce a Standard report](#)
- [Data Sources for reports](#)
- [Filter by Tag](#)
- [Types of Standard reports](#)
- [Reporting Considerations](#)
- [Inputs to help replicate system generated reports](#)

You will only be able to see the **Reports** tab if you have been assigned the 'Reporting' [Users Roles](#), when logged into the PMHC MDS on <https://pmhc-mds.net>.

If you don't have access to the **Reports** tab and you believe you should, please contact someone in your provider organisation or provider organisation's PHN who has the 'User Management' role. If you are unsure who has the 'User Management' role please email the PMHC Helpdesk at support@pmhc-mds.com

After navigating to the **Reports** tab, you will be able to view and export various [Types of Standard reports](#).

Home
Reports
Tools
Logged in as PMHC Training

Home / Reports

Reports

Users with the Reporting role can use this tab to request reporting data

Support: For more information and assistance visit [PMHC MDS Documentation](#) (link opens in a new window)

Select Data Source * ⓘ

PMHC

Select Report Type * ⓘ

Select Start Date * Enter date in DD/MM/YYYY or D/M/YYYY format

01/07/2019

End Date * Enter date in DD/MM/YYYY or D/M/YYYY format

30/06/2020

View | Select format Download

Australian Government
Department of Health

PMHC-MDS managed by Strategic Data Pty Ltd | [Contact Support](#) | [Documentation](#)

6.1. How to produce a Standard report

You can produce a standard system report by completing the fields in the **Reports** tab by following these steps:

1. Navigate to the **Reports** tab

Home / Reports

Reports

Users with the Reporting role can use this tab to request reporting data

Support: For more information and assistance visit [PMHC MDS Documentation](#) (link opens in a new window)

Select Data Source * ⓘ

PMHC

Select Report Type * ⓘ

Select Start Date * Enter date in DD/MM/YYYY or D/M/YYYY format

01/07/2019

End Date * Enter date in DD/MM/YYYY or D/M/YYYY format

30/06/2020

View | Select format Download

2. If you are allowed to produce reports for more than one data source you will be asked to select a data source
3. Select the type of report you would like to produce
4. If you are allowed to produce reports for more than one organisation you will be asked to select an organisation name
5. Select the name of the organisation from the drop down list
6. Click the first calendar icon to select the start date and then the second calendar icon to select the end date

7. If you click the **Include only records with Client Consent** tickbox, the data for clients that have not consented to their anonymised data being provided to the Department of Health, Disability and Aging (DoHDA) will be excluded from your report. (See [Episode – Client Consent to Anonymised Data](#))
8. Click the blue **Request** button
9. Your report will be displayed on screen and can be downloaded as a CSV

Note: If you are not sure what data is displayed in a report, please click on the **Counting Rules Explained** link.

[Home](#) / [Reports](#) / Report E1 - High level summary of overall volumes by entity for Test PHN; 01/10/2017 - 31/12/2017

Report E1 - High level summary of overall volumes by entity for Test PHN; 01/10/2017 - 31/12/2017

Back							
Organisation	Clients	Episodes	Service Contacts	K10+	K5	SDQ	Practitioners
Test ATSI Provider One	3	0	0	0	0	0	0
Test Provider Organisation 1	0	0	0	0	0	0	1
Test Provider Organisation 2	1	0	0	0	0	0	0
Test Provider Organisation NFP1	12	17	25	37	4	0	12
Test Provider Organisation NFP2	12	0	0	0	0	0	0
Total	28	17	25	37	4	0	13
Generated on 08/01/2018 17:20:23 AEDT							
Download as CSV Counting Rules Explained							

6.2. Data Sources for reports

The overarching program areas and extensions that are associated with the data in the PMHC MDS are available to partition reports.

The following are listed as the data sources currently available for reports:

- [All PMHC Program Types](#)
 - [Flexible Funding Pool](#)
 - [Head to Health Clinics](#)
 - [Psychosocial](#)
 - [Bushfire Recovery 20](#)
 - [MMHC](#)
 - [Universal Aftercare](#)
- [hAPI \(headspace\)](#)

6.2.1. All PMHC Program Types

The *All PMHC Program Types* data source includes all the following PMHC Program Types:

- [Flexible Funding Pool](#)
- [Head to Health Clinics](#)
- [Psychosocial](#)
- [Bushfire Recovery 20](#)
- [MMHC](#)
- [Universal Aftercare](#)

Data linked to the previous Beyond Blue The Way Back extension, has been migrated to the Universal Aftercare Program Type.

Note

The *All PMHC Program Types* data source does not include any hAPI headspace extension data.

6.2.1.1. Flexible Funding Pool

Programs commissioned through the Primary Mental Health Care Schedule that are not otherwise described by another category. (See [PMHC Program Type](#)).

6.2.1.2. Head to Health Clinics

Mental health services delivered through Head to Health Clinics in New South Wales and Victoria. (See [PMHC Program Type](#)).

6.2.1.3. Psychosocial

Mental health services delivered through the National Psychosocial Support Services Program. (See [PMHC Program Type](#)).

6.2.1.4. Bushfire Recovery 20

Mental health services in fire affected communities can use this field for episodes delivered through the Australian Government Mental Health Response to Bushfire Trauma. (See [PMHC Program Type](#)).

6.2.1.5. MMHC

Mental health services delivered through the Medicare Mental Health Care Program. (See [PMHC Program Type](#)).

6.2.1.6. Universal Aftercare

Mental health services delivered through the Universal Aftercare Program. (See [PMHC Program Type](#)).

6.2.2. hAPI (headspace)

hAPI is data that headspace National Office upload from their internal hAPI client information management system (See [headspace Data Specification](#)).

Some of the standard reports, namely the [Category D: Key Performance Indicators](#) and [Category E: Reports for data managers to monitor data supply](#) series are not pertinent for headspace. However there are two headspace only reports - the [A12 – Episodes shared across multiple organisations](#) and the [B7 – Activity Report – hAPI Funding Source](#) - and contact-based reports are enhanced to allow breakdowns by funding source.

6.3. Filter by Tag

The Department reserved tags identify specific data record types in the PMHC MDS and begin with an exclamation mark (!).

The following tags can currently be used to filter data for reports:

- [!amhc](#) - Australian Government Mental Health Centres
- [!br20](#) - Australian Government Mental Health Response to Bushfire
- [!covid19](#) - Episode occurred as result of COVID-19 pandemic
- [!uaoooh](#) - Universal Aftercare data

Note

Local tags can not be used to filter standard reports.

6.4. Types of Standard reports

The reports are grouped into categories, each designed to serve different purposes.

- [Category A: Monitoring progress of MDS implementation](#)
- [Category B: Monitoring overall service delivery](#)
- [Category C: Monitoring implementation of stepped care](#)
- [Category D: Key Performance Indicators](#)
- [Category E: Reports for data managers to monitor data supply](#)
- [Category G: Cohorts of interest](#)
- [Category I: Monitoring Intakes](#)
- [Category M: Monitoring service delivery](#)
- [Category W: Monitoring Universal Aftercare](#)

6.4.1. Category A: Monitoring progress of MDS implementation

These reports are designed to assist monitoring MDS uptake and compliance with key business rules.

The reports provide summary data on:

- Volumes ('active clients'/'active episodes'/contacts)
- Data quality in terms of compliance with key business rules

Available Category A reports:

- [A1 – High level summary of overall volumes by entity](#)
- [A1a – High level summary of overall intakes](#)
- [A2 – Volume trends](#)
- [A3 – Data quality report – Missing and invalid client data](#)
- [A4 – Data quality report – Missing and invalid episode data](#)
- [A4a – Data quality report – Missing and invalid intake data](#)
- [A5 – Data quality report – Missing and invalid service contact data](#)
- [A6 – Data quality report – Missing and invalid practitioner data](#)
- [A7 – Open episodes with no service contact activity for 90+ days](#)
- [A8 – Data quality report – Recording of outcome measures for open episodes](#)
- [A9 – Data quality report – Recording of outcome measures for completed episodes](#)
- [A10 – Data quality report – Missing and invalid Referral Dates](#)
- [A11 – Data quality report – Episodes with no service contact](#)
- [A12 – Episodes shared across multiple organisations](#)
- [A13 – Data quality report – Universal Aftercare episodes with no linked UA episode record](#)
- [A14 – Data quality report - Missing UA Episode data](#)
- [A15 – Data quality report - Missing UA Needs Identification and Recommendation Outs](#)

Note: A subset of these reports is included in [Category E: Reports for data managers to monitor data supply](#) without any filtering for active clients or episodes to enable organisational data managers to monitor 'raw' upload and data supply to the MDS.

6.4.1.1. A1 – High level summary of overall volumes by entity

This report is designed to provide a 'one page' view, with data aggregated for the specified reporting period, covering counts of clients, episodes and service contacts. The A1 allows data to be broken down into entities or by Principal Focus of Treatment Plan or by Practitioner types.

Key specifications:

- To be counted, a client must have had one or more Service Contacts in the reporting period, defined for this report's purposes as 'Active Clients'. Clients are counted uniquely regardless of number of episodes
- Episodes to be counted if one or more Service Contacts were recorded in the period – defined for this report purpose as 'Active Episodes'
- All Service Contacts in the period are reported except those that are flagged as 'No Show'

- Only service contacts with primary practitioners are included in the report
- Only primary practitioners are counted in the Practitioner Category breakdowns

6.4.1.2. A1a – High level summary of overall intakes

This report is designed to provide a view analogous to the A1 for intakes, with data aggregated for the specified reporting period. The count is not incorporated with the A1 because it is based on different inclusion criteria. Additionally, intakes have no stratification options because PHN/PO is the only applicable stratification and this is presented automatically. (The A1 allows stratification by Practitioner Category and Principle Focus of Treatment Plan as well as PHN/PO)

Key specifications:

- To be counted, an intake must have a 'Date client contacted Intake' within the reporting period

6.4.1.3. A2 – Volume trends

This report is designed to show volume trends in clients, episodes, service contacts and intakes. Each data point in the table and the chart shows weekly or monthly data, depending on the option selected.

Key specifications:

- The inclusion criterion for intakes is a 'Date client contacted Intake' within the reporting period
- Other items (clients/episodes/contacts) are based on 'Active Episodes'. An Active Episode is one associated with at least one attended contact during the reporting period
- The Service Contacts column reports all the contacts associated with the active episodes, except those contacts that are identified as 'no show'

6.4.1.4. A3 – Data quality report – Missing and invalid client data

The A3 reports are designed to identify Client data elements with significant amounts of missing or invalid data.

Two formats of this report are offered to users:

- [A3-1 – Data quality report – Missing and invalid client data – Summary](#)
- [A3-2 – Data quality report – Missing and invalid client data – Detail](#)

Key specifications:

- Clients to be counted uniquely regardless of number of episodes. To be counted, a client must have had one or more Service Contacts in the reporting period i.e. 'Active Clients'
- Service Contacts flagged as 'No Show' are not included for this purpose

- Missing/invalid data defined as: Data elements with null or invalid values, or where 'system generated' codes have been reported to denote 'not stated', 'inadequately defined' or 'missing'

6.4.1.4.1. A3-1 – Data quality report – Missing and invalid client data – Summary

Summary format provides a simple listing of missing/invalid data rates for relevant Client data elements, aggregated across the organisation, region or nationally.

6.4.1.4.2. A3-2 – Data quality report – Missing and invalid client data – Detail

Detailed format presents missing/invalid data rates at the entity level (PHN and Provider Organisation). For this version, the user selects the specific Client data element to be targeted for the report from a list of possible options.

Missing/invalid client data elements that can be selected for the A3-2 report are:

- Date of Birth
- Date of Birth Flag
- Gender
- ATSI status
- Country of Birth
- Main Language Spoken at Home
- Proficiency in Spoken English

Note: For a user with the Reporting role at a single Provider Organisation, this report is redundant as it would only ever have a single row, which is already present in the output of the A3-1 report. Therefore this report is not made available to these users.

6.4.1.5. A4 – Data quality report – Missing and invalid episode data

The A4 reports are designed to identify data Episode elements with significant amounts of missing or invalid data.

Two formats of this report are offered to users:

- [A4-1 – Data quality report – Missing and invalid episode data – Summary](#)
- [A4-2 – Data quality report – Missing and invalid episode data – Detail](#)

Some Episode data elements are not included in the options list as they are allowed to have a blank value (eg. Episode End Date), or there is no missing value provided in the specification and the system doesn't allow blank values to be submitted (eg. Principal Focus of Treatment Plan):

- Client Consent to Anonymised Data
- Episode End Date

- Episode Completion Status
- Episode Start Date
- Medication - Antipsychotics (N05A)
- Medication - Anxiolytics (N05B)
- Medication - Hypnotics and sedatives (N05C)
- Medication - Antidepressants (N06A)
- Medication - Psychostimulants and nootropics (N06B)
- Program Type
- Principal Focus of Treatment Plan

Key specifications:

- Report counts only 'active episodes'. An Episode is defined as 'active' if it has one or more Service Contacts recorded in the period
- Service Contacts flagged as 'No Show' are not included for this purpose
- Missing/invalid data defined as: Episode data elements with null or invalid values, or where 'system generated' codes have been reported to denote 'not stated', 'inadequately defined' or 'missing'

6.4.1.5.1. A4-1 – Data quality report – Missing and invalid episode data – Summary

Summary format provides a simple listing of missing/invalid data rates for relevant Episode data elements, aggregated across the organisation, region or nationally.

6.4.1.5.2. A4-2 – Data quality report – Missing and invalid episode data – Detail

Detailed format presents missing/invalid Episode data rates at the entity level (PHN and Provider Organisation). For this version, the user selects the specific Episode data element to be targeted for the missing/invalid data report from a list of possible options.

Missing/invalid episode data elements that can be selected for the A4-2 report are:

- Episode Referral Date
- Referrer Profession
- Referrer Organisation Type
- Suicide Referral Flag
- GP Mental Health Treatment Plan Flag
- Homelessness flag
- Area of Usual Residence, Postcode
- Labour Force Status
- Employment Participation
- Source of Cash Income
- Health Care Card

- NDIS Participant
- Marital Status
- Principal Diagnosis
- Additional Diagnosis
- Continuity of Support
- Organisation Type Referred to at Episode Conclusion

Note: For a user with the Reporting role at a single Provider Organisation, this report is redundant as it would only ever have a single row, which is already present in the output of the A4-1 report. Therefore this report is not made available to these users.

6.4.1.6. A4a – Data quality report – Missing and invalid intake data

The A4a reports are designed to identify data Intake elements with significant amounts of missing or invalid data.

Two formats of this report are offered to users:

- [A4a-1 – Data quality report – Missing and invalid episode data – Summary](#)
- [A4a-2 – Data quality report – Missing and invalid episode data – Detail](#)

Some Intake data elements are not included in the options list as they are allowed to have a blank value (eg. Date referred to other service at Intake conclusion), or there is no missing value provided in the specification and the system doesn't allow blank values to be submitted (eg. Program Type):

- Client Consent to Anonymised Data
- Program Type
- Date referred to other service at Intake conclusion
- Referred to Organisation Path

Key specifications:

- Intakes are included if the Date client contacted Intake is during the the reporting period
- Missing/invalid data defined as: Intake data elements with invalid values, or where 'system generated' codes have been reported to denote 'not stated', 'inadequately defined' or 'missing'

6.4.1.6.1. A4a-1 – Data quality report – Missing and invalid episode data – Summary

Summary format provides a simple listing of missing/invalid data rates for relevant Intake data elements, aggregated across the organisation, region or nationally.

6.4.1.6.2. A4a-2 – Data quality report – Missing and invalid episode data – Detail

Detailed format presents missing/invalid Intake data rates at the entity level (PHN and Provider Organisation). For this version, the user selects the specific Intake data element to be targeted for the missing/invalid data report from a list of possible options.

Missing/invalid intake data elements that can be selected for the A4-2 report are:

- Referrer Profession
- Referrer Organisation Type
- Suicide Referral Flag
- Organisation Type Referred to at Episode Conclusion

Note: For a user with the Reporting role at a single Provider Organisation, this report is redundant as it would only ever have a single row, which is already present in the output of the A4a-1 report. Therefore this report is not made available to these users.

6.4.1.7. A5 – Data quality report – Missing and invalid service contact data

The A5 reports are designed to identify Service Contact data elements with significant amounts of missing or invalid data.

Two formats of this report are offered to users:

- [A5-1 – Data quality report – Missing and invalid service contact data – Summary](#)
- [A5-2 – Data quality report – Missing and invalid service contact data – Detail](#)

Episodes that only have contacts marked “no show” are included in this report.

Some service contact data elements are not included in the options list as there is no missing value provided in the specification and the system doesn’t allow blank values to be submitted:

- Service Contact Date
- Service Contact Final
- Service Contact Type
- Service Contact Modality
- Service Contact Duration
- Service Contact Copayment
- Service Contact Client Participation Indicator
- Service Contact No Show

Note

When the **hAPI** Data Source is selected an extra **Funding Source** selector is provided for all A5 reports. Unlike the [B7 – Activity Report – hAPI Funding Source](#), which has 8 funding categories (including Missing), the filters on the A5 are less fine grained and include only 5 funding categories (including 'Missing').

6.4.1.7.1. A5-1 – Data quality report – Missing and invalid service contact data – Summary

Summary format provides a simple listing of missing/invalid data rates for relevant Service Contact data elements, aggregated across the organisation, region or nationally.

6.4.1.7.2. A5-2 – Data quality report – Missing and invalid service contact data – Detail

Detailed format presents missing/invalid Service Contact data rates at the entity level (PHN and Provider Organisation). For this version, the user selects the Service Contact data to be targeted for the missing/invalid data report from a list of possible options.

Missing/invalid episode data elements that can be selected for the A5-2 report are:

- Service Contact Postcode
- Service Contact Participants
- Service Contact Venue
- Service Contact Interpreter Used
- Service Contact Type
- Service Contact Duration
- Service Contact Start Time

Note: For a user with the Reporting role at a single Provider Organisation, this report is redundant as it would only ever have a single row, which is already present in the output of the A5-1 report. Therefore this report is not made available to these users.

6.4.1.8. A6 – Data quality report – Missing and invalid practitioner data

The A6 reports are designed to identify Practitioner data elements with significant amounts of missing data.

Two formats of this report are offered to users:

- [A6-1 – Data quality report – Missing and invalid practitioner data – Summary](#)
- [A6-2 – Data quality report – Missing and invalid practitioner data – Detail](#)

Key specifications:

- Report is confined only to 'active practitioners'. A Practitioner is defined as 'active' if it they have recorded one or more Service Contacts in the period
- Service Contacts flagged as 'No Show' are not included for this purpose

6.4.1.8.1. A6-1 – Data quality report – Missing and invalid practitioner data – Summary

Summary format provides a simple listing of missing/invalid data rates for relevant data elements, aggregated across the organisation, region or nationally.

6.4.1.8.2. A6-2 – Data quality report – Missing and invalid practitioner data – Detail

Detailed format presents missing/invalid data rates at the entity level (PHN and Provider Organisation). For this version, the user selects the Practitioner data to be targeted for the missing/invalid data report from a list of options.

Missing/invalid episode data elements that can be selected for the A6-2 report are:

- Practitioner Category
- ATSI Cultural Training Flag
- Practitioner Year of Birth
- Gender
- Aboriginal and Torres Strait Islander Status

Note: For a user with the Reporting role at a single Provider Organisation, this report is redundant as it would only ever have a single row, which is already present in the output of the A6-1 report. Therefore this report is not made available to these users.

6.4.1.9. A7 – Open episodes with no service contact activity for 90+ days

The A7 report is designed to allow monitoring of adherence to the requirement to close episodes where there are no further services scheduled for the client.

Setting of the 90 day threshold does not imply a strict business rule to close episodes where no contact has occurred for this period, but rather to identify episodes that may warrant review.

Key specifications:

- Open Episodes defined as those without an End Date or an End Date after the end date of the report
- Service Contacts flagged as 'No Show' are not included for this purpose

Unlike the A8 report, this report has no requirement to start during the reporting period.

6.4.1.10. A8 – Data quality report – Recording of outcome measures for open episodes

The A8 report is designed to show the percentage of open (not yet completed) episodes that have an outcome measure recorded at the Episode Start collection occasion. Its purpose is to allow monitoring of adherence to the minimum requirements for outcome recording – i.e. measures to be recorded at Episode Start and Episode End.

Report A9 examines a related aspect – the extent to which Completed Episodes have both Episode Start and Episode End measures.

Key specifications:

- Open Episodes defined as those without an End Date or an End Date after the end date of the report
- For this report, Episodes must also have an Episode Start Date equal to or greater than the report start date
- Only Episodes with one or more Service Contacts in the reporting period are included in the analysis (referred to as 'active episodes')
- Service Contacts flagged as 'No Show' are not included for this purpose
- Measures that have a total score of '99 = Not stated / Missing' are invalid and counted as 'no measure'

6.4.1.11. A9 – Data quality report – Recording of outcome measures for completed episodes

The A9 report is designed to show the percentage of completed episodes that have outcome measures recorded. Its purpose is to allow monitoring of adherence to the minimum requirements for outcome recording – i.e. measures to be recorded at Episode Start and Episode End.

Note: that unlike the requirements set out in at Episode Start and Episode End. [Out series reports \(Out-1 to Out-3\)](#) for the Out series reports where the same measure must be collected at start and finish, the A9 will accept any combination of measures provided there is at least one at the start of the episode and one at the end of the episode.

Key specifications:

- Episodes must have an Episode End Date within the reporting period.
- Episodes must have had one or more Service Contacts not flagged as 'No Show', but not necessarily during the reporting period
- Measures that have a total score of '99 = Not stated / Missing' are invalid and counted as 'no measure'

6.4.1.12. A10 – Data quality report – Missing and invalid Referral Dates

The A10 report is designed to show the counts of episodes with missing and invalid Referral Dates. Its purpose is to allow monitoring of adherence to the minimum requirements for outcome recording – i.e. measures to be recorded at Episode Start and Episode End. For this report there are no date selections.

Key specifications:

- The three columns relating to Service Contacts ignore contacts flagged as 'No Show'
- The Service Contact used in Episodes with Referral date is the one with the earliest date that is also not marked as 'No Show'
- Referral > Date 1 year before Service Contact is defined as a Referral Date more than 365 days prior to the earliest (non no-show) Service Contact

6.4.1.13. A11 – Data quality report – Episodes with no service contact

The A11 report is designed to show the number of episodes with no service contact. Episodes with and without referral dates are reported separately. Note that there are no date selectors on this report - it shows every recorded episode that has no (non no-show) Service Contact.

Key specification:

- Episodes that only have contacts marked “no show” are included in this report.

6.4.1.14. A12 – Episodes shared across multiple organisations

This report applies to hAPI (headspace) data only.

The PMHC model specifies that all activity (service contacts and collection occasions) for an episode must occur at the same organisation. The headspace model allows an episode of care to be delivered by multiple organisations. For compatibility with the PMHC, reports based on hAPI data exclude episodes (and corresponding service contacts, collection occasions and potentially clients) that involve more than one organisation.

For each entity (headspace centre or PHN) the A12 reports 2 lines:

- “As lead organisation”
- “As delivery organisation”

The headspace enhancement of the PMHC MDS model adds a “delivery organisation” to both the service contact records and the collection occasion records. This can be different to the organisation that initiated the episode (the “lead organisation”). The A12 reports any episode that has at least one collection occasion or service contact delivered by an organisation that is not the lead organisation. Thus any particular organisation can operate in lead and/or delivery context.

The “As lead organisation” means the entity initiated the episode but at least one collection occasion or service contact was delivered away from that entity. All activity pertaining to such episodes is reported in this row.

“As delivery organisation” reports all activity for all episodes the entity was not the lead organisation for, but delivered at least one collection occasion or service contact for. This second view is a better indicator of work that an organisation was involved with but does not get included in the bulk of the headspace reports. Note that a single episode can appear more than once in the “As delivery organisation” line but only ever once in the “As lead organisation” line.

The A12 tallies the number of contacts/episodes/contacts/collections occasions that are delivered by multiple organisations. It is based on [Active Episodes](#), and the number of episodes delivered at multiple organisations is what is reported in the “Active Episodes” column.

The “Service Contacts” column counts all the non no-show contacts in the reporting period that are associated with the [Active Episodes](#). Similarly the [Active Clients](#) is the enumeration of all clients for whom ALL episodes active during the reporting period were delivered at multiple organisations. A single episode during the reporting period delivered at only one organisation excludes client from this count.

6.4.1.15. A13 – Data quality report – Universal Aftercare episodes with no linked UA episode record

The A13 provides an overview of the number of episodes that have the Universal Aftercare Program Type but no linked UA Episode record.

Key specifications:

- [Active Episodes](#) with Program Type ‘Universal Aftercare’ that do not have an associated UA Episode record

6.4.1.16. A14 – Data quality report - Missing UA Episode data

The A14 is a summary Universal Aftercare (UA) format report that provides a simple listing of missing/invalid data rates for relevant UA Episode data elements. It is analogous to the [standard A4 report](#) that deals with the standard PMHC Episode elements with missing data.

Key specifications:

- Data in this report is associated with an Active UA Episode; however, for this report there is slightly tighter criteria regarding what it means to be active. Rather than the usual one or more [attended service contact](#) during the reporting period, for the A14, there must be at least TWO such contacts (i.e. non-no shows) during the reporting period.
- The episode must appear in the [UA Episode table](#). This number is reported in the column labelled ‘Number of active episodes in period’.
- The ‘Number of active episodes with missing data’ column counts, separately for each of the UA Episode record elements, how many episodes have the pertinent missing value code. For the elements “Method of Suicide Attempt” and “Primary Nominated Professional”, ‘Other’ (code 98) is counted as a missing value as well as ‘Not stated/Inadequately described’ (code 99).

- The '% Missing Data' column is a simple percentage of the active episodes that have missing data, calculated from the preceding two columns.

6.4.1.17. A15 – Data quality report - Missing UA Needs Identification and Recommendation Outs

The A15 is a summary Universal Aftercare (UA) format report that provides a simple listing of missing/invalid data rates for relevant UA Needs Identification and UA Recommendation Outs data elements. It does the same job for these elements as the [A14 report](#) does for UA Episode data elements, and uses the same assumptions.

Key specifications:

- Data in this report is associated with an Active UA Episode; however, for this report there is slightly tighter criteria regarding what it means to be active. Rather than the usual one or more [attended service contact](#) during the reporting period, for the A15, there must be at least TWO such contacts (i.e. non-no shows) during the reporting period.
- The episode must appear in the [UA Episode table](#). This number is reported in the column labelled 'Number of active episodes in period'.
- The 'Number of active episodes with missing data' column counts, separately for each of the UA Episode record elements, how many episodes have the pertinent missing value code. For both elements "Needs Identification" and "Recommendation Out", 'Other' (code 98) is counted as a missing value as well as 'Not stated/Inadequately described' (code 99).
- The '% Missing Data' column is a simple percentage of the active episodes that have missing data, calculated from the preceding two columns.

6.4.2. Category B: Monitoring overall service delivery

These reports are designed to present a range of data in the form of summary tables. Their purpose is to allow the user to monitor overall service delivery based on counts of clients, episodes, and service contacts, stratified in various ways that depend on the data being sourced.

There are several reports in this series, each covering a specific data category.

Available category B reports

- [B1 – Activity report – Client characteristics](#)
- [B2 – Activity report – Episode characteristics](#)
- [B2a – Activity report – Intake characteristics](#)
- [B3 – Activity report – Service Contact characteristics](#)
- [B4 – Activity report – Provider Organisation characteristics](#)
- [B5 – Activity report – Practitioner characteristics](#)
- [B6 – Client Outcomes](#)
- [B7 – Activity Report – hAPI Funding Source](#)
- [B8 – YES PHN index](#)

- [B9 - Activity Report - Number of practitioners](#)

6.4.2.1. B1 – Activity report – Client characteristics

The B1 report is designed to allow selection of a Client stratification variable of interest, with a menu of options covering all core Client data fields.

Key specifications:

- Client to be counted uniquely regardless of number of episodes. To be counted, a client must have had one or more Service Contacts in the reporting period
- Counts of Episodes to be based only on 'active' Episodes, defined as those that had one or more Service Contacts recorded in the period
- Service Contacts flagged as 'No Show' are not included for this purpose
- Age is calculated at start of episode
- Only service contacts with primary practitioners are included in the report

6.4.2.2. B2 – Activity report – Episode characteristics

The B2 report is designed to allow selection of an Episode stratification variable of interest, with a menu of options covering all core Episode data fields.

Key specifications:

- An Episode is defined as 'active' and in-scope for inclusion in this report if it had one or more Service Contacts recorded in the period. No distinction is made between Open and Completed Episodes, except for the "Organisation Referred to at Episode Conclusion" which only applies to closed episodes
- Service Contacts flagged as 'No Show' are not included for this purpose
- Only service contacts with primary practitioners are included in the report
- [Interpretation of remoteness counts](#) is pertinent to the B2 report

6.4.2.3. B2a – Activity report – Intake characteristics

The B2a report is designed to allow selection of an Intake stratification variable of interest, with a menu of options covering all core Intake data fields.

Key specifications:

- To be counted, an intake must have a Date client contacted Intake within the reporting period

6.4.2.4. B3 – Activity report – Service Contact characteristics

The B3 report is designed to allow selection of a Service Contact stratification variable of interest, with a menu of options covering all core Service Contact fields.

Note

When the **hAPI** Data Source is selected an extra **Funding Source** selector is provided for the B3 report. Unlike the [B7 – Activity Report – hAPI Funding Source](#), which has 8 funding categories (including Missing), the filters on the B3 are less fine grained and include only 5 funding categories (including 'Missing').

Key specifications:

- Reporting by 'Service Contact No Show' element counts all service contacts by whether they are flagged as 'No Show'
- Otherwise, Service Contacts flagged as 'No Show' are not included in this report
- Only service contacts with primary practitioners are included in the report
- [Interpretation of remoteness counts](#) is pertinent to the B3 report

6.4.2.5. B4 – Activity report – Provider Organisation characteristics

The B4 report is designed to allow selection of a Provider Organisation stratification variable of interest, with a menu of options covering all core Provider Organisation data fields.

Key specifications:

- A Provider Organisation is defined as 'active' if it has recorded and in-scope for this report if there is one or more Service Contacts recorded for the Provider Organisation in the period
- Service Contacts flagged as 'No Show' are not included for this purpose
- Only service contacts with primary practitioners are included in the report

6.4.2.6. B5 – Activity report – Practitioner characteristics

The B5 report is designed to allow selection of a Practitioner stratification variable of interest, with a menu of options covering all core Practitioner data fields.

Key specifications:

- A Primary Practitioner is defined as 'active' and in-scope for this report if they have recorded one or more Service Contacts in the period
- Service Contacts flagged as 'No Show' are not included for this purpose
- Only service contacts with primary practitioners are included in the report

6.4.2.7. B6 – Client Outcomes

The B6 report is an extension of the outcome indicators that note significant clinical changes between episode start and finish. Out-1 and Out-2 ([Out-1 and Out-2 – Clinical outcomes](#)) are restricted to episodes with a Principal Focus of Treatment Plan classified as “Low intensity psychological interventions” and “Psychological therapies delivered by mental health professionals” respectively. The B6 extends this to any type of focus.

- The change for an episode is based on the effect size statistic which is defined as (score at episode start – score at episode end) / standard deviation of episode start scores for all episodes
- Effect sizes of +0.5 or more constitute ‘Significant improvement’, –0.5 or less constitute ‘Significant deterioration’. Effect sizes between –0.5 and 0.5 indicate ‘No significant change’
- [Interpretation of remoteness counts](#) is pertinent to the B6 report

6.4.2.8. B7 – Activity Report – hAPI Funding Source

This report applies to hAPI (headspace) data only.

Unlike data reported by PHNs, which is funded exclusively by the PHNs, data reported to hAPI is funded by many different sources. The B7 report provides a detailed breakdown of the funding source under which service contacts were delivered. Only non no-show contacts during the reporting period are included.

In addition, the B7 aggregates the contacts into episode and client counts. An episode may have activity with more than one funding source, in which case it will be counted in every row for which it has a contact funded by the pertinent source. Unless all contacts for all episodes are funded by the same source, the total number of episodes reported will be lower than the sum of the number of episodes in all funding sources. The same principle applies to Client counts.

Key specifications:

- Service Contacts flagged as ‘No Show’ are not included for this purpose
- Only service contacts with primary practitioners are included in the report

6.4.2.9. B8 – YES PHN index

This report applies to YES-PHN data only.

Your Experience of Service Primary Health Network (YES-PHN) Survey aims to help providers and consumers to work together to build better services. Completion of the survey is voluntary. All information collected in this survey is anonymous.

Detailed description and explanation about using and interpreting the YES-PHN is available at https://www.amhocn.org/__data/assets/pdf_file/0018/700452/yes_phn_guidance_v1.0_20200408.pdf. The YES PHN index in the B8 report reflects the definition in this document and reports the proportion of respondents with an experience of service score over 80.

The B8 report provides a summary average experience score, outcome score and YES-PHN index. Only completed YES-PHN surveys during the reporting period are included.

Key specifications:

- The collection date must be within the reporting period
- Any YES-PHN surveys with more than half of the items missing is excluded

6.4.2.10. B9 - Activity Report - Number of practitioners

The B9 is designed to monitor the composition of multi-practitioner teams delivering a single contact. It counts the number of contacts made up of different sized practitioner teams. It reports both the total number of practitioners involved with each contact, and the number of unique practitioner categories involved.

Over time, the PMHC has recorded practitioners in three different ways. Initially only a single practitioner (and their category) was recorded. With the introduction of Head To Health programs it was expanded to also include a count of different practitioner categories. With the release of version 4 all practitioners and their categories can be recorded. The B9 does not adjust for these historical changes, so therefore contacts conducted prior to version 4 will always be counted in the '1' column for both Number of Practitioners and Number of Practitioner Categories.

Key specifications:

- The contact must not be a "no show" contact
- The contact must take place during the reporting period

6.4.3. Category C: Monitoring implementation of stepped care

This group of reports is based on composite data, built from cross-tabulation of data drawn from multiple levels of the PMHC data model – Clients, Episodes, Service Contacts, Practitioners.

Their purpose is to allow the user to monitor selected aspects of the implementation of the stepped care model.

The stepped care reports represent work in progress and will be subject to ongoing improvement with PHN feedback on their utility.

Available category C reports

- [C1 – Stepped care report – Episode type by Client characteristics](#)

- [C2 – Stepped care report – Episode Type by Service Contacts Type](#)
- [C3 – Stepped care report – Episode Type by Service Contact Intensity](#)

6.4.3.1. C1 – Stepped care report – Episode type by Client characteristics

Purpose: To provide summary information on the characteristics of clients who receive different types of services, grouped by 'episode type'.

Client data fields to be selected by user from a list of options.

Key specifications:

- Only 'active episodes' are reported. An Episode is defined as 'active' and in scope for inclusion in this report if it had one or more Service Contacts recorded in the period. No distinction is made between Open and Completed Episodes
- Service Contacts flagged as 'No Show' are not included for this purpose.
- Counts shown in the report refer to Episodes, and are displayed as numbers or percent column based on user selection
- Age is calculated at start of episode
- A client can fall into multiple age groups because they may have multiple episodes within the reporting period

Client data elements that can be selected for the C1 report are:

- Client age group based on Date of Birth, grouped to the following categories:
 - 0-11, 12-17, 18-24, 25-64, 65+
- Indigenous status
- Area of Usual Residence
 - Grouped by Remoteness Classification (Major Cities, Outer Regional, Inner Regional, Remote, Very Remote)
- Principal diagnosis – High level grouping
 - Anxiety disorders
 - Affective (Mood) disorders
 - Substance use disorders
 - Psychotic disorder
 - Disorders with onset usually occurring in childhood and adolescence not listed elsewhere
 - Other mental disorder
 - No formal mental disorder but subsyndromal problem
- Gender
- Country of Birth – grouped to high level categories
- [Interpretation of remoteness counts](#) is pertinent to the C1 report

6.4.3.2. C2 – Stepped care report – Episode Type by Service Contacts Type

Purpose: To provide summary information on the types of service contacts delivered within each of the episode types.

Key specifications:

- Only 'active episodes' are reported. An Episode is defined as 'active' and in scope for inclusion in this report if it had one or more Service Contacts recorded in the period. No distinction is made between Open and Completed Episodes
- Service Contacts flagged as 'No Show' are not included for this purpose
- Counts shown in the report refer to Episodes, and are displayed as numbers or percent rows based on user selection

6.4.3.3. C3 – Stepped care report – Episode Type by Service Contact Intensity

Purpose: To provide summary information on the volumes of service delivered within each of the episode types.

Key specifications:

- Only 'active episodes' are reported. An Episode is defined as 'active' and in scope for inclusion in this report if it had one or more Service Contacts recorded in the period. No distinction is made between Open and Completed Episodes
- Service Contacts flagged as 'No Show' are not included for this purpose
- Counts shown in the report refer to Episodes, and are displayed as numbers or percent rows based on user selection
- Total Clients is a unique count of clients, not the sum of the individual rows. Clients may be counted in more than one row

6.4.4. Category D: Key Performance Indicators

A set of 13 key performance indicators was introduced in July 2016, designed to monitor the progress of mental health reforms being led by Primary Health Networks (PHNs). The indicators covered activities related to the delivery of services in six priority areas set by government, along with two overarching program management indicators covering integrated service planning and delivery, and implementation of stepped care models of care.

All 13 indicators were subsequently incorporated in schedules for mental health program funding, requiring PHNs to report on performance annually. Data sources for the majority of indicators (11) are derived in full or part from the Primary Mental Health Care Minimum Data Set (PMHC MDS).

The mental health KPIs were introduced prior to the implementation of the current PHN Performance and Quality Framework (September 2018) and need to be positioned within that policy framework. One additional indicator was added to the mental health KPIs as a result of the new framework, bringing the total to 14.

9 of the 14 KPI reports will ultimately be available via the PMHC MDS.

Available category D reports

- ACC series reports (Acc-1 to Acc-3)
 - Acc-1 — Access to Low Intensity Services
 - Acc-2 — Access to Psychological Services
 - Acc-3 — Access to Clinical Care Coordination
- APP series reports (App1 to App3)
 - App-1 — Youth receiving youth-specific services
 - App-2 — Indigenous Population receiving culturally appropriate services
 - App-3 — Suicide Risk Followup
- Out series reports (Out-1 to Out-3)
 - Out-1 and Out-2 — Clinical outcomes
 - Out-3 — Completion rates for clinical outcome measures
 - Matching measure types

The following reports are not available via the PMHC MDS as they require information that is not derived from the PMHC MDS:

- Eff-1 — Average cost of PHN-commissioned low intensity psychological intervention services
- Eff-2 — Average cost of PHN-commissioned psychological therapies delivered by mental health professionals
- Eff-3 — Average cost of PHN-commissioned clinical care coordination for people with severe and complex mental illness
- Prog-1 — Proportion of PHN annual flexible funding allocated to low intensity services, psychological therapies and services for people with severe and complex mental illness
- Prog-2 — Formalised partnerships with other regional service providers to support integrated regional planning and service delivery

6.4.4.1. ACC series reports (Acc-1 to Acc-3)

Purpose: Measure the proportion of regional population receiving PHN-commissioned specific services.

Please note: For Acc series reports, it's important to keep in mind that the splits may not always produce the same totals. Clients can have multiple episodes and each episode can be counted in each group. Using age group as an example, the episode start date is used to determine a client's age. When a client has multiple episodes, and their birthday has occurred in the reporting period, each episode can fall into a different age group.

Additionally, the remoteness classifications are derived using the episode postcode, but a postcode can belong to multiple remoteness classifications. These reports will proportion an individual episode across all relevant classifications. For example, postcode 2900 has been classified as both a major city and an inner region.

Key specifications applying to all ACC series reports:

- Only 'active clients' are reported. A Client is defined as 'active' and in scope for inclusion in this report if they had one or more Service Contacts recorded in the period.
- Service Contacts flagged as 'No Show' are not included for this purpose
- Population is calculated from Estimated Regional Population figures
- KPI is measured in clients per 100,000 population
- Age is calculated at start of episode
- [Interpretation of remoteness counts](#) is pertinent to the Acc series reports

And key specifications for:

- [Acc-1 – Access to Low Intensity Services](#)
- [Acc-2 – Access to Psychological Services](#)
- [Acc-3 – Access to Clinical Care Coordination](#)

6.4.4.1.1. Acc-1 – Access to Low Intensity Services

Purpose: Measure the proportion of regional population receiving PHN-commissioned low intensity psychological interventions

See [key specifications for all ACC series reports](#), plus:

Key specifications:

- The episode must have a 'Principal Focus of Treatment Plan' flagged as 'Low intensity psychological intervention'

6.4.4.1.2. Acc-2 – Access to Psychological Services

Purpose: Measure the proportion of regional population receiving PHN-commissioned psychological therapies delivered by mental health professionals.

See [key specifications for all ACC series reports](#), plus:

Key specifications:

- The episode must have a 'Principal Focus of Treatment Plan' flagged as 'Psychological therapy'

6.4.4.1.3. Acc-3 – Access to Clinical Care Coordination

Purpose: Measure the proportion of regional population receiving PHN-commissioned clinical care coordination for people with severe and complex mental illness.

See [key specifications for all ACC series reports](#), plus:

Key specifications:

- The episode must have a 'Principal Focus of Treatment Plan' flagged as 'Clinical care coordination'

6.4.4.2. APP series reports (App1 to App3)

Key specifications applying to all App series reports:

- Age is calculated at start of episode
- [Interpretation of remoteness counts](#) is pertinent to the App series reports

And key specifications for:

- [App-1 – Youth receiving youth-specific services](#)
- [App-2 – Indigenous Population receiving culturally appropriate services](#)
- [App-3 – Suicide Risk Followup](#)

6.4.4.2.1. App-1 – Youth receiving youth-specific services

Purpose: Measure the proportion of regional youth population receiving youth-specific mental health services.

Key specifications:

- Only 'active clients' are reported. A Client is defined as 'active' and in scope for inclusion in this report if they are aged between 12-24 and had one or more Service Contacts recorded in the period. The episode must have a 'Principal Focus of Treatment Plan' flagged as 'Child and youth-specific mental health services'
- Service Contacts flagged as 'No Show' are not included for this purpose
- Population is calculated from Estimated Regional Population figures for people aged 12-24
- KPI is measured in clients per 100,000 population

6.4.4.2.2. App-2 – Indigenous Population receiving culturally appropriate services

Purpose: Measure the proportion of PHN-commissioned mental health services delivered to the regional Indigenous population where the services were culturally appropriate.

Key specifications:

- Service contacts are in scope for inclusion in this report if they occurred within the reporting period and are not flagged as 'No Show'
- KPI is measured as the percentage of service contacts which are culturally appropriate
- A culturally appropriate service is defined as one that is delivered by a service provider that is recorded as of ATSI origin, or employed by an Aboriginal Community Controlled Health Service or has indicated that they have completed a recognised training programme in the delivery of culturally safe services to ATSI peoples

- Only service contacts with primary practitioners are included in the report

6.4.4.2.3. App-3 – Suicide Risk Followup

Purpose: Measure the proportion of people referred to PHN-commissioned services due to a recent suicide attempt or because they are at risk of suicide, who are followed up within 7 days of referral.

Unlike most reports, this measure includes episodes where no service contact occurs to ensure all clients are followed up within the required timeframe, allowing for review of why no contact was made for this risk group.

It is important to keep in mind that Episodes that have not yet commenced do not have a episode start date. As a result, it is not possible to determine the client's age at the beginning of the episode. Such clients will be included in the unknown age group.

Key specifications:

- Only episodes with a referral date within the reporting period are included
- Service contacts which are flagged as 'No Show' are not included
- Service contacts where the Client Participation Indicator flag is 'No' are not included
- '% Episodes with Suicide Risk Flag %' counts the proportion of all episodes which are flagged as a suicide risk
- Other than in the "% Episodes with Suicide Risk Flag" column, only episodes flagged as suicide risk are counted
- Episodes where the first service contact occurred within 7 days are tabulated as '7 days or less'
- Episodes where no service contact occurred are tabulated as 'No Service Contact Occurred'
- Clients with an uncommenced episode are tabulated as 'Unknown' age group
- KPI is measured as percentage of episodes flagged as a suicide risk which have a service contact within 7 days

6.4.4.3. Out series reports (Out-1 to Out-3)

Key specifications applying to all Out series reports:

- Based on all episodes with an Episode End Date falling within the reporting period
- There must be at least one [attended contact](#) associated with the episode but it need not be in the reporting period
- Measures that have an invalid total score of '99 = Not stated / Missing' are excluded
- To be counted as 'Matched', both an initial and final measure of matching type must be recorded. See [Matching measure types](#).
- Age is calculated at start of episode
- [Interpretation of remoteness counts](#) is pertinent to the Out series reports

Note: Matching of measures in the Out series is tighter than that used in [A9 – Data quality report – Recording of outcome measures for completed episodes](#), so figures may vary between these reports.

And key specifications for:

- [Out-1 and Out-2 – Clinical outcomes](#)
- [Out-3 – Completion rates for clinical outcome measures](#)
- [Matching measure types](#)

6.4.4.3.1. Out-1 and Out-2 – Clinical outcomes

See [key specifications for all Out series reports](#), plus:

- These indicators group the [matched pair](#) for all episodes reported in Out-3 to indicate significant clinical changes between episode start and end
- The change for an episode is based on the effect size statistic which is defined as (score at episode start – score at episode end) / standard deviation of episode start scores for all episodes
- Effect sizes of +0.5 or more constitute 'Significant improvement', -0.5 or less constitute 'Significant deterioration'. Effect sizes between -0.5 and +0.5 indicate 'No significant change'
- Out-1 includes only episodes identified as "Low intensity psychological interventions", Out-2 only those identified as "Psychological therapies delivered by mental health professionals"

6.4.4.3.2. Out-3 – Completion rates for clinical outcome measures

See [key specifications for all Out series reports](#), plus:

- Reports the percentage of episodes completed in the reporting period that have outcome measures collected at both episode start and episode finish
- The "All Episodes" columns count episodes regardless of their Episode Completion Status
- The "Treatment Concluded" columns only include episodes that have an Episode Completion Status of 'Treatment Concluded'; administratively closed episodes are excluded
- The KPI % is defined as the number of Treatment Concluded episodes with a [matched pair](#) divided by the total number of Treatment Concluded episodes

6.4.4.3.3. Matching measure types

[Out series reports](#) require initial and final measures (Collection Occasion Reason 'Episode Start' and 'Episode End') to have valid total score (not '99 = Not stated / Missing') and to be of matching measure type as per the following table:

Initial	Final
K5	K5
K10+	K10+
SDQ PC101	SDQ PC201

Initial	Final
SDQ PY101	SDQ PY201
SDQ YR101	SDQ YR201

This rule is a little tighter than that used in [A9 – Data quality report – Recording of outcome measures for completed episodes](#), so figures may vary.

If an episode has more than one measure of the same type at the same collection occasion (e.g. there are two SDQ-PC values identified as 'Episode start') the mean score is used.

If an episode has a matched pair for more than one measure type only one is taken, according to the hierarchy K10+, K5, SDQ_YR, SDQ_PY, SDQ_PC.

6.4.5. Category E: Reports for data managers to monitor data supply

These reports are designed to assist in monitoring the amount and type of data that has been input into the MDS.

They are based on a subset of Category A reports but differ in two important ways:

- The reports are based on 'raw data', not filtered or trimmed by any data quality censoring. Comparable Category A reports restrict the reported data by specific edit criteria (e.g., Category A reports are only based on 'active clients', 'active episodes' and 'active providers')
- Category A reports are based on date of service contact. Comparable E Category reports either use date of modification or date of insertion. Further information is provided in the report specific documentation.

Category E reports are specifically designed to enable PHN and Provider Organisation data managers to monitor upload and data supply to the MDS.

The reports provide summary data on:

- Raw volumes (clients/episodes/service contacts/collection occasions/practitioners) over time periods
- Raw volumes per day (clients/episodes/service contacts/collection occasions/practitioners)

Available category E reports

- [E1 – High level summary of overall volumes by entity](#)
- [E2 – Volume trends](#)
- [E3 – Activity per day](#)

6.4.5.1. E1 – High level summary of overall volumes by entity

This report is designed to provide a 'one page' view, with data aggregated for the specified reporting period, covering counts of clients, episodes, service contacts, collection occasions and practitioners, without any filtering for business rules.

Key specifications:

- All records to be counted with no filtering
- All dates refer to date of modification, not date of service

6.4.5.2. E2 – Volume trends

This report is designed to show volume trends in clients, episodes, service contacts, collection occasions and practitioners.

Key specifications:

- All records to be counted with no filtering
- All dates refer to date of insertion, not date of service
- Results are cumulative

6.4.5.3. E3 – Activity per day

This report will show a summary of the number of clients, episodes, service contacts, collections occasions and practitioners added or modified each day. Its purpose is to give entities information about when and how much data was added or modified.

Key specifications:

- All records to be counted with no filtering
- All dates refer to date of modification, not date of service

6.4.6. Category G: Cohorts of interest

6.4.6.1. G1 – Residential Aged Care Facility Client Outcomes

This report is intended to provide insight into Residential Aged Care Facilities. It is basically a combination of the A1 - episodes/clients/contacts columns - and the B6 report - improvement and (pertinent) episode count columns - for RACF activity. The inclusion criteria is slightly oblique because episode activity is not directly attributable to RACFs. Instead, the G1 counts attended contacts that took place at an RACF. Episodes are included if they contain have at least one attended contact that took place at an RACF.

Key specifications:

- All Service Contacts in the period that have a Service Contact - Venue of '8: Residential aged care facility' except those that are flagged as 'No Show'
- Episodes to be counted if one or more Service Contacts as defined immediately above were recorded in the period
- Clients comprise the clients who were the subject of the episodes defined immediately above, and are counted uniquely regardless of number of episodes
- The episode count on the far right is the subset of the 'Episodes N' for which there are initial and final measures from the same outcome instrument.
- The change for an episode is based on the effect size statistic which is defined as (score at episode start – score at episode end) / standard deviation of episode start scores for all episodes
- Effect sizes of +0.5 or more constitute 'Significant improvement', –0.5 or less constitute 'Significant deterioration'. Effect sizes between –0.5 and 0.5 indicate 'No significant change'

6.4.7. Category I: Monitoring Intakes

These reports monitor intakes and dispatches to treatment organisations. Some reports summarise the results and context of the Initial Assessment and Referral Decision Support Tool ([IAR-DST](#)); others look at the extent of linkage between intake and treatment episodes.

Available category I reports

- [I1 – Recommended vs practitioner level of care](#)
- [I2 – IAR-DST by K10+](#)
- [I3 – IAR-DST by Referral In](#)
- [I4 – IAR-DST by Referral Out](#)
- [I5 – Intake Conclusion Referral Pathway](#)
- [I6 – Intake Dispatch Status by Intake Organisation and I7 – Link Status of Episodes Dispatched to Organisation](#)
- [I8 – Links Without an Existing Intake](#)
- [I9 – Dispatches to unidentified MDS treatment organisations](#)

6.4.7.1. I1 – Recommended vs practitioner level of care

The [IAR-DST](#) combines ratings on eight domains describing clinical severity and service needs to suggest a Level of Care. Levels are best thought of as combinations of interventions that form potential 'packages' for people requiring that level of care. There are 5 levels of care, however in some situations the IAR-DST will recommend a particular level of care "or higher" - for example '3+'. Regardless of the suggestion made by the IAR-DST, the final decision about the appropriate level is made by a clinician. The I1 cross-tabulates the suggestion made by the tool (Recommended Level of Care) against the clinician's final decision (Practitioner Level of Care)

Key specifications:

Note

As of 11/8/2024 the PMHC MDS supports both [Version 1](#) and [Version 2 of the IAR-DST](#). This report does not filter by IAR DST version. All IAR DST records are counted.

- The report counts intakes where the client first contacted the service during the reporting period for which there is an IAR-DST administration (the date the IAR-DST was collected is not relevant)
- Counts in the “Not stated” column indicate that no practitioner rating was recorded

6.4.7.2. I2 – IAR-DST by K10+

This report cross-tabulates the Practitioner Level of Care with the K10+ Score collected at episode start. It shows the relationship between the level of psychological distress and the suggested level of care. These variables should correlate highly.

Key specifications:

Note

As of 11/8/2024 the PMHC MDS supports both [Version 1](#) and [Version 2 of the IAR-DST](#). This report does not filter by IAR DST version. All IAR DST records where there are a corresponding K10+ record collected at episode start are counted.

- The report counts intakes where the client first contacted the service during the reporting period for which there is an IAR-DST administration, and a linked episode with a valid K10+ score taken during a collection occasion that is marked as having a Collection Occasion Reason of “Episode start”
- Intakes where the client first contacted the service during the reporting period are included (the date the IAR-DST was collected is not relevant).
- The intake must be associated with a valid K10+ score taken during a collection occasion that is marked as having a Collection Occasion Reason of “Episode start”
- Counts in the “Not stated” column indicate that no practitioner rating was recorded

6.4.7.3. I3 – IAR-DST by Referral In

The I3 reports the Practitioner Level of Care broken down by the type of referring organisation. It helps describe where clients present as a function of their required treatment complexity.

Key specifications:

Note

As of 11/8/2024 the PMHC MDS supports both [Version 1](#) and [Version 2 of the IAR-DST](#). This report does not filter by IAR DST version. All IAR DST records are counted.

- The report counts intakes where the client first contacted the service during the reporting period for which there is an IAR-DST administration (the date the IAR-DST was collected is not relevant)
- The Referrer Organisation Type is a mandatory field so the total intakes is the same as for the I1
- Counts in the “Not stated” column indicate that no practitioner rating was recorded

6.4.7.4. I4 – IAR-DST by Referral Out

The I4 reports the Practitioner Level of Care broken down by the type of organisation to which the intake service refers the client at the end of the intake process. It helps describe where clients are sent as a function of their required treatment complexity.

Key specifications:

Note

As of 11/8/2024 the PMHC MDS supports both [Version 1](#) and [Version 2 of the IAR-DST](#). This report does not filter by IAR DST version. All IAR DST records are counted.

- The report counts intakes where the client first contacted the service during the reporting period for which there is an IAR-DST administration (the date the IAR-DST was collected is not relevant)
- The Organisation Type referred to at Intake conclusion is NOT a mandatory field so the total intakes may be fewer than the total reported on I1
- Counts in the “Not stated” column indicate that no practitioner rating was recorded

6.4.7.5. I5 – Intake Conclusion Referral Pathway

The I5 summarises the type of service to which an intake process refers a client. It says nothing about whether that service subsequently has any interaction with the client, merely that the intake process considered that service type the appropriate follow up.

The basis for the report is all intakes where the date the client contacted the intake service falls during the reporting period. The referral pathways enumerated are based on the “Organisation type referred to at Intake conclusion” variable. Most of the responses to this variable are grouped into broader categories, but a few are passed through untouched other than (usually) minor renaming:

“AMHC” -> “AMHC” “HeadtoHelp / HeadtoHealth” -> “Head To Health” “Other PHN funded service” -> “Other PHN funded” “No Referral” -> “None” “Not stated/Inadequately described” -> “Unknown”

Anything else except a blank is mapped to “External service”. A blank is reported as “Intake not concluded”.

Key specifications:

- The report counts intakes where the client first contacted the service during the reporting period

6.4.7.6. I6 – Intake Dispatch Status by Intake Organisation and I7 – Link Status of Episodes Dispatched to Organisation

The I6 and I7 comprise a pair of reports intended to help monitor linkage of intake and treatment (episode) organisation. Recording of such linkages is more complex than most MDS processes because they can involve data submission by more than one submitter. The data from intake and treatment organisations can be uploaded at different times, so potentially only one side of the transaction may be in the MDS. These reports help identify the extent to which events that can be inferred to exist have not been submitted.

The I6 looks at what has happened from an intake perspective, the I7 from a treatment perspective.

The I6 takes all the INTAKES for the chosen organisations (the Total column) and classifies them as having (the Linked column) or not having (the Unlinked column) a corresponding Intake Episode record.

The By Treatment Organisation column displays the organisations that recorded treatment for the intakes in the Linked column. Note that the total for the By Treatment Organisation column can be higher than that for the Linked column as a single intake can be associated with more than one treatment episode.

The I7 takes all EPISODES for the chosen organisations (the Total column) and classifies them as having (the Linked column) or not having (the Unlinked column) a corresponding Intake Episode record.

The By Intake Organisation column displays the organisation that recorded intake for the episodes in the Linked column. An episode can only be linked to a single intake, so in this report the total for By Intake Organisation must be the same as the total for the Linked column.

Key specifications:

- The Date client contacted Intake must have occurred during the reporting period

6.4.7.7. I8 – Links Without an Existing Intake

The I8 identifies cases where a treatment organisation has submitted an Intake Episode record, but the corresponding Intake record does not exist in the MDS. This is possible because different organisations are responsible for these two types of records and the treatment organisation that provides the Intake Episode record may do so before the organisation responsible for the intake submits the Intake record. However an Intake Episode can only be submitted if the organisation path and intake key of the intake are defined, so the existence of the intake can be inferred (and identified) even in the absence of the Intake record. This report shows where the

implied intake has not had its record submitted. For any organisation listed in a row the report counts the “missing” Intake records for which the organisation is responsible (“Dispatched by”) and those for which it has implied the existence of an intake by submitting an Intake Episode record (“Dispatched to”).

Key specifications:

- Cases in this report are identified by a combination of Organisation Path and Intake Key in the Intake Episode table that do not have a corresponding entry in the Intake records in the MDS
- There is no date restriction on this report

6.4.7.8. I9 – Dispatches to unidentified MDS treatment organisations

The I9 reports intakes where a client is referred to one or more MDS Reporting organisation, but no specific organisation is identified in the Referred To Organisation Path field.

Note: that an intake may be dispatched to more than one organisation type.

Key specifications:

- The inclusion criterion for intakes is a ‘Date client contacted Intake’ within the reporting period
- The intake must indicate one or more dispatches to an ‘Organisation type referred to at Intake conclusion’ with a code of 42, 43 or 44 (“AMHC”, “Other PHN funded service”, or “HeadtoHelp / HeadtoHealth”)
- The report counts intakes, not dispatches

6.4.8. Category M: Monitoring service delivery

These reports have been introduced to monitor MMHCs, however all except for the [M6 – IAR-DST - Recommended Level of Care, where intake referred to MMHC](#) are pertinent for other program types as well.

Available category M reports

- [M1 – Client wait time](#)
- [M2 – Activity Reports by Age group](#)
- [M3 – Activity Reports by Gender](#)
- [M4 – Activity Reports by Aboriginal and Torres Strait Islander status](#)
- [M5 – IAR-DST - Recommended Level of Care](#)
- [M6 – IAR-DST - Recommended Level of Care, where intake referred to MMHC](#)
- [M7 – Monthly service activity](#)
- [M8 – Episode of care characteristics](#)
- [M9 – Activity Report: Service contact type](#)
- [M10 – Activity Report: Service contact duration](#)

6.4.8.1. M1 – Client wait time

Wait time defined as number of days between a client's intake referral date and the date of the client's first service contact.

Key specifications:

- Service Contacts flagged as 'No Show' are not included for this purpose.
- A client's wait time is defined as the time from intake referral to the first attended contact

6.4.8.2. M2 – Activity Reports by Age group

Number and proportion of active clients, active episodes and service contacts by age.

Key specifications:

- Only [active clients](#) are reported
- Only [active episodes](#) are reported. No distinction is made between Open and Completed Episodes
- Service Contacts flagged as 'No Show' are not included for this purpose
- Age is calculated at start of episode
- A client can fall into multiple age groups because they may have multiple episodes within the reporting period
- Client age group based on Date of Birth, grouped to the following categories:
 - 0-11, 12-17, 18-25, 26-35, 36-45, 46-55, 56-65, 66-75, 76-85, 86-95, 95+

6.4.8.3. M3 – Activity Reports by Gender

Number and proportion of active clients, active episodes and service contacts by gender.

Key specifications:

- Only [active clients](#) are reported
- Only [active episodes](#) are reported No distinction is made between Open and Completed Episodes
- Service Contacts flagged as 'No Show' are not included for this purpose
- Client gender grouped into categories as per [Client Gender](#).

6.4.8.4. M4 – Activity Reports by Aboriginal and Torres Strait Islander status

Number and proportion of active clients, active episodes and service contacts by ATSI status.

Key specifications:

- Only [active clients](#) are reported
- Only [active episodes](#) are reported No distinction is made between Open and Completed Episodes

- Service Contacts flagged as 'No Show' are not included for this purpose
- Client ATSI status grouped into categories as per [Aboriginal and Torres Strait Islander](#).

6.4.8.5. M5 – IAR-DST - Recommended Level of Care

IAR-DST recommended level of care presented as numbers and proportions (Level 1, Level 1+, Level 2, Level 2+, Level 3, Level 3+, Level 4, Level 4+, and Level 5).

Key specifications:

- To be counted, an intake must have a 'Date client contacted Intake' within the reporting period

6.4.8.6. M6 – IAR-DST - Recommended Level of Care, where intake referred to MMHC

Number of completed IAR-DST referred into Medicare Mental Health Centres grouped by recommended level of care and presented as numbers and proportions.

Key specifications:

- To be counted, an intake must have all of these properties:
 - a [Date client contacted Intake](#) within the reporting period
 - 'MMHC' in its set of [Organisation types referred to at intake conclusion](#)

6.4.8.7. M7 – Monthly service activity

Count of active clients, new episodes, active episodes, closed episodes and service contacts in the defined reporting period.

Key specifications:

- Only [active clients](#) are reported
- Only [active episodes](#) are reported No distinction is made between Open and Completed Episodes
- 'New episodes' are episodes with at least one attended service contact (inside or outside the reporting period) and a commencement date within the defined reporting period
- 'Closed episodes' are episodes with at least one attended service contact (inside or outside the reporting period) and an end date within the defined reporting period.
- Service Contacts flagged as 'No Show' are not included for this purpose.

6.4.8.8. M8 – Episode of care characteristics

Number of service contacts in an episode of care.

Key specifications:

- Episode end date is within reporting period.
- The episode has at least one attended service contact (inside or outside the reporting period).
- Options:
 - Episode duration (days) is the number of calendar dates between the episode start date and end date inclusive.
 - Number of service contacts includes all service contacts regardless of attendance.

6.4.8.9. M9 – Activity Report: Service contact type

Number and proportion of service contacts by service contact type.

Key specifications:

- Service Contacts flagged as 'No Show' are not included for this purpose.
- Service contact type grouped into categories as per [Service Contact Type](#).
- 'ATAPS' and 'Missing' service contact types are excluded.

6.4.8.10. M10 – Activity Report: Service contact duration

Number and proportion of service contacts by duration.

Key specifications:

- Service Contacts flagged as 'No Show' are not included for this purpose.
- Service contact duration grouped into categories as per [Duration](#).
- 'Missing' service contact duration is excluded.

6.4.9. Category W: Monitoring Universal Aftercare

These reports are designed to assist in monitoring the amount and type of data that has been input into the MDS for the Universal Aftercare program, formally known as Universal Aftercare (UA) Support Service Minimum Data Set extension.

- [W1 – Universal Aftercare Quarterly Report Template](#)
 - [Activity Data](#)
 - [Client Profile](#)
 - [Referral Profile](#)
 - [Service Contact Data](#)
 - [Client Measures and Experience](#)
 - [Issues and Risks](#)
 - [Key Performance Indicators](#)
 - [Safety Plan Update / Development](#)
 - [Support Plan Development](#)

6.4.9.1. W1 – Universal Aftercare Quarterly Report Template

Universal Aftercare Quarterly reporting function allows users to automatically populate Universal Aftercare Quarterly Report using data contained in the PMHC MDS.

During The Wayback trial, this report was submitted to Beyond Blue. After the trial finished some organisations were still required to submit this report to their PHNs. It has now been rebranded for Universal Aftercare.

This report requires some manual completion of information not available to the PMHC-MDS system before providing to your PHN.

Many of the items reported are summarised over two time periods - reporting period and year to date. The former is always a full quarter worth of data as selected in the drop down boxes on the report generation page, unless the most recent quarter has been selected in which case it will be all data from the start of the current quarter until the day the report is generated. Financial years are listed in the report dropdowns with both relevant calendar years listed (e.g. **2025 - 2026**). The year to date figure is always from July 1 of the earlier calendar year until either the end of the selected reporting period or the date the report was generated if the current quarter is selected.

Data in this report is all associated with episodes that appear in the [UA Episode table](#), - the Universal Aftercare Program Type on the Episode record is NOT sufficient.

The first section of the report explicitly details the dates covered by the reporting period and the year to date, as well as identifying the time at which it was generated.

6.4.9.1.1. Activity Data

New Client Episodes

This is the number of episodes commenced during the relevant period (reporting or YTD). A key concept here is the episode start date. This is defined as the date of the earliest contact, even if the client is a no-show, but only if there is at least one [attended service contact](#) during the reporting period.

Number of Completed Episodes (Exits)

Any episode with an [Episode - End Date](#) during the relevant period.

Number of Completed Episodes (Service Complete)

The subset of Completed Episodes as defined immediately above that have an [Episode - Completion Status](#) of *1: Episode closed - treatment completed*

Number of Administratively Closed Episodes

The subset of Completed Episodes as defined above that have an [Episode - Completion Status](#) between 2 and 6 inclusive, indicating an administrative closure.

6.4.9.1.2. Client Profile

The first three elements in the Client Profile summarise new episodes by client gender:

Male

The number of episodes started during the relevant period where the [Client - Gender](#) is indicated as 1:
Male

Female

The number of episodes started during the relevant period where the [Client - Gender](#) is indicated as 2:
Female

Other

The number of episodes started during the relevant period where the [Client - Gender](#) is indicated as 3:
Other

The next 2 elements summarise new episodes for clients in at risk groups:

Aboriginal and Torres Strait Islander

The number of episodes started during the relevant period where the [Client - Aboriginal and Torres Strait Islander Status](#) was 1,2 or 3, indicating Aboriginal or Torres Strait Islander origin or both.

LGBTIQ

The number of episodes started during the relevant period where the client indicates a [UA Episode - Sexual Orientation](#) other than 1: *Straight or heterosexual* or 9: *Not stated*.

The final section in the Client Profile is Age Profile, summarising the number of new episodes in the relevant period by the client's age group at the time the episode began. This is derived from [Client - Date of Birth](#), using only records where [Client - Estimated Date of Birth Flag](#) is not a dummy date (code 8) and is not missing (code 9).

6.4.9.1.3. Referral Profile

The Referral Profile summarises referral criteria (essentially eligibility codes) and sources for episodes starting in the reporting period. There is no corresponding profile for the Year To Date.

Primary Referral Criteria

The number of episodes starting in the reporting period with [UA Episode – Eligibility Type Code: 1](#)

Secondary Referral Criteria

The number of episodes starting in the reporting period with [UA Episode – Eligibility Type Code: 2](#)

Referral Source

The number of episodes starting in the reporting period with [Episode - Referrer Organisation Type](#) codes of:

Hospital ED

- *7: Emergency Department*

Hospital Ward

- *5: Public Hospital*
- *6: Private Hospital*

Community Mental Health Service

- *4: Public mental health service*

Other

- All the other codes (1-3,8-21,98,99)

6.4.9.1.4. Service Contact Data

The service contact section of the report is concerned exclusively with the [Service Contact - Modality](#) on [attended service contacts](#). For all contacts in the relevant period it is a simple count of the number of contact each modality:

- *1: Face to Face*
- *2: Telephone*
- *3: Video*
- *4: Internet-based*

6.4.9.1.5. Client Measures and Experience

Information about three clinical measures is reported in this section. For each measure there are three summary statistics:

1. The number of episodes with (valid) initial measures collected during the reporting period
2. The number of episodes with (valid) final measures collected during the reporting period
3. The number of episodes with at least two (valid) outcome measures, at least one of which must be collected during the reporting period

Information about collection occasions - including dates and reasons - is available [in the Collection Occasion specification documentation](#). A critical feature of a collection occasion is its “reason”, which is actually about the point in the clients’ journey when the measure was taken. For reporting purposes this can be either “initial” (i.e. start of the episode) or final (end of the episode). Note however that the collection occasion dates need not be the same as the episode start and end dates. Measures can be collected on any day.

The specific measures of interest are the K5/K10+ and the SIDAS. The WHO-5 was formerly reported but was removed in the report update of September 2022. Information about these measures - including what constitutes a valid measure - can be accessed [in the Collection Occasion Key Concepts documentation](#).

The two Kessler measures (K10+ and K5) are treated interchangeably in this section of the report. Additionally, for the ‘Initial’ and ‘Exit’ measures columns multiple measures of the same type are counted once only. So for example, 2 SIDAS marked as ‘Final’ for the same episode will only add 1 to the count. An episode with initial K5 and K10+s also only adds 1 to the count of ‘Initial Measures’, however this combination also adds 1 to the count of “Number of Paired Measures During Period”, provided at least one of the measures was taken during the reporting period.

Although there should be no cases where an episode has multiple instances of a particular measure taken at any collection occasion identified as initial or final, if such an anomaly occurs the CO is still included as having the initial/final/paired measure. In other words the technical definition of “having a measure” is interpreted as “having one or more instances of the relevant measure”.

6.4.9.1.6. Issues and Risks

This section counts client deaths and suicide attempts during the relevant reporting period and year-to-date. Details about such events are available [in the UA Critical Incident - Date documentation](#). Codes 2 and 3 comprise deaths; code 1 indicates a suicide attempt.

6.4.9.1.7. Key Performance Indicators

The KPIs produced by the automated reports are all based on particular events occurring within a certain number of days of a precipitating event. KPIs pertain to the reporting period only.

Each KPI reports a reference population (the number in the 'Calc B' column) and the subset of that population that meets the criteria in the 'Target Metric' column ('Calc A'). Note that a population in this case means a count of episodes, not a number of people. The ratio is presented as a percentage in the '% Achieved During' column.

Business days are defined as Monday to Friday inclusive, unless they are listed in Australian Public Holidays shown within the [information at the Digital Transformation Office](#). The business day calculator takes into account the jurisdiction (state or territory of the service). A week is defined as 5 business days.

6.4.9.1.8. Safety Plan Update / Development

The relevant episodes here are those where the first [attended service contact](#) is within the reporting period, and the episode has an initial collection occasion with a corresponding [UA Plan - Plan Type](#) equal to 1: *Safety Plan*. The numerator is the subset of these episodes for which the collection occasion date is before or on the same day as the first attended service contact.

Please note: Prior to September 2022 it had to be on or before the date of the second attended service contact.

6.4.9.1.9. Support Plan Development

The relevant episodes here are those where the first [attended service contact](#) is within the reporting period, and the episode has an initial collection occasion with a corresponding [UA Plan - Plan Type](#) equal to 2: *Support Plan*. The numerator is the subset of these episodes for which the collection occasion date is not more than 10 days after the initial attended service contact.

6.5. Reporting Considerations

6.5.1. Interpretation of remoteness counts

The PMHC MDS is a de-identified dataset and the Department of Health, Disability and Aging (DoHDA) as custodian is mindful of its obligations to protect client privacy. One expression of this is the minimal collection of data locating clients' residential location. No addresses are collected, only postcodes. Postcode is a commonly collected data item as it is non-specific enough to protect privacy but is readily known by most clients. As a basis for geographic analysis however it is imperfect. Any analysis, breakdown or comparison of the data within the PMHC MDS by geographic aggregations will be derived from postcodes, and are therefore subject to caveats and/or interpretation.

The PMHC MDS Remoteness Classification is derived from the client's Area of usual residence, postcode. This postcode is mapped using a concordance file to the ABS defined Remoteness Areas:

- Major Cities of Australia
- Inner Regional Australia
- Outer Regional Australia
- Remote Australia

- Very Remote Australia

A single postcode can be mapped to more than one remoteness area using different weights. This can result in low number anomalies such as that seen in this example B6 report:

B6: Client outcomes - Child and youth-specific mental health services for National

Data source: hAPI (headspace); 01/07/2021 - 30/06/2022

Back		View Report Code		
Client Remoteness	Significant improvement %	No significant change %	Significant deterioration %	Episode count
Major Cities of Australia	0.0	100.0	0.0	2
Inner Regional Australia	—	—	—	0
Outer Regional Australia	0.0	100.0	0.0	0
Remote Australia	0.0	100.0	0.0	0
Very Remote Australia	61.6	38.4	0.0	2
Missing	---	---	---	0
Unknown	—	—	—	0
TOTAL	25.0	75.0	0.0	4

Notice that there are 2 episodes in the very remote Australia classification, but these two episodes are distributed across the 'Significant Improvement' and 'No significant change' categories in the seemingly impossible proportions of 61.6% and 38.4% respectively.

This is because the client postcodes associated with these episodes include one postcode (0822) that splits across 3 remoteness classifications, with proportions being defined by the "weight" variable:

Postcode	Weight	Remoteness Area
3065	1	Major Cities of Australia
3086	1	Major Cities of Australia
0822	0.173	Outer Regional Australia
0822	02.03	Remote Australia
0822	0.623	Very Remote Australia
4490	1	Very Remote Australia

These weights are applied to each of the 4 episodes, and their change groups, as follows. Note that the sum of the weights is the same as the total number of episodes:

Change	Weight	Remoteness Area
No change	1.0000000	Major Cities of Australia
No change	1.0000000	Major Cities of Australia
No change	0.1734224	Outer Regional Australia
No change	0.2034875	Remote Australia
No change	0.6230901	Very Remote Australia
Improvement	1.0000000	Very Remote Australia

Compare this source data to the report above.

Major Cities of Australia is straightforward: 2 records, both with weights of 1 for a total of 2 episodes, both of which are in the **No change** group. The next remoteness category (**Inner Regional Australia**) has an episode count of 0 and is indicated by dashes in the report, consistent with the source data. After that it gets confusing. The third category in the report (**Outer Regional Australia**) is also listed as having an episode count of 0, but in this case change groups have figures rather than dashes, with the **No significant change** group indicating 100%.

This can be understood looking at the source data where, unlike **Inner Regional Australia**, there is an **Outer Regional Australia** row. The weight for this row is 0.1734, which rounds to 0 episodes. However 100% of that 0.1734 of an episode is in the **No significant change** group, hence the 100% figure for that group, and the 0% reported for the other two groups.

Remote Australia can be understood the same way, in this case 100% of its 0.2035 episodes are also **No significant change** (in fact this is a further 0.2034 of the same episode that **Outer Regional Australia** constitutes 0.1734 of - the remaining 0.6231 is in **Very Remote Australia**).

Which leaves the final and most confusing category: **Very Remote Australia**. The source data indicates two records for this category, with weights of 1.000 and 0.6231 for a total of 1.6231 episodes. This rounds to 2 episodes (which is what is reported), but the percentages are based on the weighted episodes, so the Significant Improvement group is $1/1.6231 = 0.616$ (61.6%). The No Significant Change group has $0.6231/1.6231 = 0.384$ (38.4%).

Strictly speaking, the Episode Counts for the 5 Client Remoteness categories are:

Major Cities of Australia	1.0000
Inner Regional Australia	0.0000
Outer Regional Australia	0.1734

Remote Australia	0.2035
Very Remote Australia	1.6231

But to reduce confusion the episode counts have been rounded. Unfortunately this may increase confusion because it makes it harder to understand the change percentages.

6.6. Inputs to help replicate system generated reports

Organisations frequently replicate the system reports at a local level for their own auditing purposes.

Some reports, such as the Out series reports, use extra inputs that cannot be generated locally.

These inputs are being supplied here to assist organisations who wish to replicate the system reports.

6.6.1. Outcome Measure Standard Deviations

Outcome Measure Standard Deviations will be updated in the second half of August each year.

Current version:

[Download PMHC Outcome Measure Standard Deviations 2025 as XLSX.](#)

Previous versions:

- [Download PMHC Outcome Measure Standard Deviations 2024 as XLSX.](#)
- [Download PMHC Outcome Measure Standard Deviations 2023 as XLSX.](#)
- [Download PMHC Outcome Measure Standard Deviations 2022 as XLSX.](#)
- [Download PMHC Outcome Measure Standard Deviations 2021 as XLSX.](#)
- [Download PMHC Outcome Measure Standard Deviations 2020 as XLSX.](#)

7. Data Extract

- [How to request an organisation's data](#)
- [How to download a requested extract](#)
- [Dates explained for Data Extract](#)
- [Data Extract Specification](#)
- [Data extract options](#)

You will only be able to see the **Data Extract** tab if you have been assigned the 'Reporting' [Users Roles](#), when logged into the PMHC MDS on <https://pmhc-mds.net>.

If you don't have access to the **Data Extract** tab and you believe you should, please contact someone in your provider organisation or provider organisation's PHN who has the 'User Management' role. If you are unsure who has the 'User Management' role please email the PMHC Helpdesk at support@pmhc-mds.com

After navigating to the **Data Extract** tab, you will see a form to request a data extract.

HomeData ExtractReportsTools

Logged in as PMHC Training

Home / Data Extract

Data Extract

Users with the Reporting role can use this tab to request reporting data

Support: For more information and assistance visit [PMHC MDS Documentation](#). (link opens in a new window)

Extracts

Request extractView extracts

Data Extract

Note: * denotes a mandatory field

Start Date *

Enter date in DD/MM/YYYY or D/M/YYYY format

25/08/2023

End Date *

Enter date in DD/MM/YYYY or D/M/YYYY format

25/09/2023

Organisation *

Organisation Name	Organisation Path	Data Extract
<div>Test Provider Organisation 1</div>	PHN999:PO1	<input type="checkbox"/>
PHN999	PHN999	

1 / 1

10 items per page

1 - 2 of 2 Items

Selected Organisation

No organisation selected

Select Specification *

PMHC 4.0

Select File Type *

.xlsx

Options

☐ Include data without associated dates.

☐ Include all data associated with matched episodes.

Request

Associated Date Rules Explained

Australian Government
Department of Health

[Logically](#) | [Contact Support](#) | [Documentation](#) | [Training](#)

7.1. How to request an organisation's data

You can request a organisation's PMHC MDS data by completing the **Request extract** fields in the **Data Extract** tab, by following these steps:

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1. Navigate to the **Data Extract** tab
2. On the **Request extract** tab, click the first calendar icon to select the start date and then the second calendar icon to select the end date. See [Dates explained for Data Extract](#)
3. Click the checkbox next to the organisation name/path. You can use the filter options under the organisation name or organisation path to find the relevant organisation. Only one PHN/organisation can be request at a time
4. Select the data specification type, if other than PMHC 4.0 See [Data Extract Specification](#)
5. Click the options checkboxes as relevant. See [Data extract options](#)
6. Select the appropriate file type to be downloaded

Home / Data Extract

Data Extract

Users with the Reporting role can use this tab to request reporting data

Support: For more information and assistance visit [PMHC MDS Documentation](#). (link opens in a new window)

Extracts

[Request extract](#)
[View extracts](#)

Data Extract

Note: * denotes a mandatory field

Start Date *
Enter date in DD/MM/YYYY or D/M/YYYY format

End Date *
Enter date in DD/MM/YYYY or D/M/YYYY format

Organisation *

Organisation Name	Organisation Path	Data Extract
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
— Test Provider Organisation 1	PHN999:PO1	<input type="checkbox"/>
PHN999	PHN999	

/ 1

items per page

1 - 2 of 2 Items

Selected Organisation
 No organisation selected

Select Specification *

Select File Type *

Options

☐ Include data without associated dates.

☐ Include all data associated with matched episodes.

Request

[Associated Date Rules Explained](#)

7. Click the blue **Request** button
8. You will receive confirmation that the extract has been successfully requested, and the screen will now be blank ready for the next extract request

X

9. Requested extracts will be available under the next tab, **View extracts** tab. See [How to download a requested extract](#).

You can download the requested organisation's data by viewing a the **View extracts** table in the **Data Extract** tab, by following these steps:

1. Navigate to the **Data Extract** tab
2. Open the **View extracts** tab
3. Find the extract you would like to download in the View Extracts table

Extracts

[Request extract](#)
[View extracts](#)
[Refresh](#)
[Filters](#)
[Show / Hide](#)
[Data Extract](#)

Extracted ↓	Requested by	Status	Organisati... Path	Start date	End date	Specificati...	Without associated dates	Episodes + associated data	hAPI data	Actions
25/09/2023 08:41:19 PM	PMHC Trai...	Processing	PHN999:P...	01/01/2014	25/09/2023	PMHC 4.0	Yes	No	No	
25/09/2023 08:40:41 PM	PMHC Trai...	Completed	PHN999:P...	01/01/2022	30/06/2023	WAYBACK ...	No	Yes	No	i
25/09/2023 08:39:45 PM	PMHC Trai...	Completed	PHN999:P...	01/01/2023	30/06/2023	PMHC 4.0	No	No	No	i

[◀](#)
[◀](#)
 / 1
 [▶](#)
[▶](#)
 items per page

1 - 3 of 3 Items

4. Click the **Download** icon located to the far right of each extract request in the 'Actions' column.

Note: If the download icon is not displayed in the 'Actions' column, the system is still in the process of downloading it. You can use the 'Refresh' icon to check if the download has completed.

5. You will receive confirmation that the extract has been successfully requested via your browser

Requested extracts will be available under the **View Extracts** tab for 7 days.

7.3. Dates explained for Data Extract

The Data Extract dates are based on the Client's Service Contact dates for the PMHC MDS.

The default data extract file will include all service contacts that have been recorded within the date range of the request, the associated client and episode and measures records.

It will not include any records that are outside the date range of the request.

7.4. Data Extract Specification

7.4.1. PMHC 4.0

If you would like to download a file that includes data from the Primary Mental Health Care Minimum Data Set (PMHC MDS), select the dropdown option labelled **PMHC 4.0**. This downloads a file that is the base PMHC MDS data which is not linked to any extensions dataset. (See [PMHC-MDS Data Specification](#)).

The resulting file can be uploaded.

7.4.2. headspace 4.1 (PMHC extension)

If you would like to download a file that includes data from headspace extension, select the dropdown option labelled **headspace 4.1**. This downloads a file that is the data that has been updated from headspace headoffice hAPI system. (See [headspace Specification](#)).

The resulting file cannot be uploaded. This is a download only format.

7.4.3. The Way Back 3.0 (PMHC extension)

If you would like to download a file that includes data from The Way Back Support Services extension (current 3.0), select the dropdown option labelled **WAYBACK 3.0**. This downloads a file that is a combination of the base PMHC MDS data extensions linked to the PMHC episode with the tag *!wayback* and/or a linked TWB-Episode record. (See [The Way Back Data Specification](#)).

The resulting file can be uploaded.

7.4.4. SURVEY 1.0 (YES-PHN Results)

If you would like to download a file that includes data from the YES PHN Survey results, select the dropdown option labelled **SURVEY 1.0**. This downloads a file that is a combination of the YES-PHN data collected via invitations sent using the Online Measures Self Service System (OMSSS) and YES-PHN data collected outside of OMSSS uploaded using the PMHC MDS Survey Specification. (See [YES Invitation Data Specification](#) and [Survey Specification](#)).

The data is extracted in the [Survey Specification](#) format and can therefore be reuploaded.

7.4.5. Include data from all specifications (includes extensions)

If you would like to download a file that includes data from all PMHC MDS extensions (current and past), select the dropdown option labelled **Include data from all specifications**. This downloads a file that is a combination of all of the extensions listed at <https://docs.pmhc-mds.com/>.

The resulting file cannot be uploaded. This is a download only format. It is based on the most recent version used by either the core specification or an extension.

Please note: In the interim, until all extensions data is transitioned to Version 4, fields with changes to their specifications between versions will show twice in these META files.

For example “Referral Date”: In versions 2 and 3, Referral date was not required. In version 4 it is required. For episodes where no referral date was supplied, the column corresponding to versions 2 (or 3) will be blank, whereas the column corresponding to version 4 will have the missing date value ‘09099999’. If you are using the data from a file exported in the META format for re-upload, use the appropriate column for the specification version you are uploading. (See [Referral Date Definition](#)).

7.5. Data extract options

7.5.1. Include data without associated dates

As the query is date based, the following data will by default, not be included in the extract:

- The start date of an episode is derived from the date of the first service contact. Therefore, if an episode doesn't have any associated service contacts, there will be no start date for the episode and they will not be included in the data extract
- Clients that don't have any associated episodes, or who are associated with an episode with no service contacts also will not be included in the data extract
- Practitioners who are not associated with a service contact will not be included in the data extract

If you would like to include these inactive episodes, inactive clients and inactive practitioners check the checkbox labelled **Include data without associated dates**.

7.5.2. Include all data associated with matched episodes

If you would like to include all the associated data for active episodes within the data extract date range, check the checkbox labelled **Include all data associated with matched episodes**. The data extract will then also include ALL service contacts and ALL measures including those that are outside the data extract date range.

8. Tools

The following tools are available in the PMHC MDS.

- [SLK](#)
- [YES-PHN](#)
- [User Auditing Tool](#)

8.1. SLK

- [Generate a Client's SLK](#)
- [Video training module - Statistical Linkage Key \(SLK\)](#)

We have provided a stand-alone generator that can be used without logging into the PMHC MDS on <https://pmhc-mds.net>. This allows users to generate a client's Statistical Linkage Key (SLK) to enter into upload files.

The screenshot displays the 'Primary Mental Health Care Minimum Data Set' website. The header includes the Australian Government Department of Health logo and the title 'Primary Mental Health Care Minimum Data Set'. A navigation bar shows 'Home' and 'Tools' (with a dropdown arrow), and a 'Sign in' button is on the right. Below the navigation bar, a breadcrumb trail reads 'Home / Tools / SLK'. The main heading is 'Statistical Linkage Key Generator'. A note states: 'The Statistical Linkage Key Generator can be used to create a client SLK. The SLK is generated on your device, no details are stored or transmitted over the network. You can copy either of these SLK formats to be used within the [Client Statistical Linkage Key field](#). (link opens in a new window)'. The form itself has a tab labeled 'SLK' and a 'Generate SLK' button. A note indicates '* denotes a mandatory field'. The form fields are: 'Given Name' (text input), 'Family Name' (text input), 'Date of Birth *' (text input with a calendar icon and a note 'Enter date in DD/MM/YYYY or D/M/YYYY format'), and 'Gender *' (dropdown menu with 'Not stated/Inadequately described' selected). A 'Generate Key' button is at the bottom of the form. The footer of the page shows the Department of Health logo, the Australian Government logo, and links for 'Strategic Data Pty Ltd', 'Contact Support', 'Documentation', and 'Training'.

8.1.1. Generate a Client's SLK

1. Navigate to the **Tools** tab and select **SLK**. This will open up the SLK generator

2. Enter the following client details: **Given Name**, **Family Name**, **Date of Birth** and **Gender**
3. Click on the blue **Generate Key** button

Home / SLK

Statistical Linkage Key Generator

The Statistical Linkage Key Generator can be used to create a client SLK. The SLK is generated on your device, no details are stored or transmitted over the network.

You can copy either of these SLK formats to be used within the [Client Statistical Linkage Key field](#). (link opens in a new window)

SLK

Generate SLK

SLK

Note: * denotes a mandatory field

Given Name	Family Name
<input type="text" value="Firstname"/>	<input type="text" value="Surname"/>
Date of Birth *	Gender *
<input type="text" value="01/01/1901"/>	<input type="text" value="Other"/>

Generate Key

Your statistical linkage key

SLK	Generated Hash
<div>URAIR010119013</div> <div>Copy to clipboard</div>	<div>7AZFQB02PQAZGXJ1Z89SNZ6306WDF0XC</div> <div>Copy to clipboard</div>

4. The client's **SLK Key** and **Generated Hash** key will now be displayed
5. Click **Copy to clipboard** next to either of these items
6. Paste this information into your data file

Please note: you can only copy one SLK at a time to the clipboard.

8.1.2. Video training module - Statistical Linkage Key (SLK)

8.1.2.1. Transcription of Statistical Linkage Key (SLK) Video Training module

8.1.2.1.1. Statistical Linkage Key

Welcome to our Primary Mental Health Care Minimum Data Set Tutorial for our manual statistical linkage key generator.

The statistical linkage key is known by its acronym SLK. An SLK is a key that enables two or more records belonging to the same individual to be statistically brought together. An SLK is not unique. Different individuals can have the same SLK.

The SLK is a system generated non-identifiable alpha numeric code. It's based on an algorithm that captures characters from the client's information held by the provider organisation - Given Name, Family Name, Date of Birth and Gender

The SLK is a field that is required to be captured within your PMHC client data. The SLK generator is available on the PMHC MDS under the SLK tab. It would generally be used to generate SLK's when manually creating upload files. An SLK generator is provided within the data entry interface for those entering data directly on the PMHC MDS. When used, the SLK is generated on your device so no client details are stored or transmitted over the network. This tab is available whether you are logged in or logged out.

8.1.2.1.2. Generating the SLK

After navigating to the [SLK tab](#), you'll be able to generate a client's SLK by following these basic steps:

- Complete the client details in the 4 fields on the 'Generate SLK' form
- You can enter your client data into the form by clicking and typing. You can tab between the fields, or you can use your mouse to navigate between the fields.
- Required fields are marked with an asterix(*).
- The Generate button will only become active once all required fields are completed.
- Once you are finished filling out the form, click the blue 'Generate Key' button.

Now you'll notice that the system has generated two different representations of the SLK towards the bottom of the screen. The client's SLK Key and the Generated Hash key will be displayed. The first is a 14 character SLK, which the algorithm has generated from the client data supplied. The Generated Hash key further de-identifies the 14 character SLK into a 32 character key.

You can use either of these generated keys by clicking 'Copy to clipboard' next to either of these SLKs. Now you can only copy one key at a time to the clipboard, however you can use either of these SLK formats within the PMHC data set. To see where you can use this SLK within the PMHC MDS, please view the data entry video tutorial or online user guide for client data. Also available on this tab is a link to the online user guide available through the SLK button on the right displayed with the question mark(?). This user guide simply documents the steps as outlined earlier in this training module.

8.1.2.1.3. Implementing an SLK generator internally

For those organisations that have an internal client information management system, you may be able to capture the client SLK directly through your internal data. We have listed all of the information your technical contact needs to implement an SLK generator into an internal system. The SLK algorithm is available through the PMHC MDS field definition link available at the top of this tab, with the technical details listed within the Meteor link. We also provide test data to allow developers to test their implementation of the SLK specifications. This is available under the Test Data Set menu in the PMHC MDS data specifications.

8.1.2.1.4. User Support

If you have any questions or require any support with the SLK generator please don't hesitate to contact the PMHC helpdesk on support@pmhc-mds.com. You can also reach the helpdesk through the 'Contact Us' link in the blue footer of this website.

We hope you found this tutorial informative. To learn more, check out the video training library by clicking this [link](#). It contains ready to watch tutorials designed around a user's roles in the PMHC MDS.

Thanks for watching.

This tutorial will cover a basic introduction to the Statistical Linkage Key (SLK). It will enable viewers to understand where you can find relevant SLK information, step-by-step instructions on using the manual SLK generator provided on the PMHC MDS and discusses the technical materials for implementing an SLK generator into an internal client information management system.

A [transcription](#) of the video is available.

8.2. YES-PHN

- [Download Completed Episodes](#)
 - [Dates explained for Completed Episodes Download](#)
- [Uploading an invitations file](#)
- [Uploading a file in Test Mode](#)
- [Viewing Previous Uploads](#)
- [Viewing Upload Details](#)
- [Complete uploads](#)
- [Error messages](#)
- [Correcting upload errors](#)
- [Example Self Service Link Screens](#)

The Tools: YES-PHN tab allows invitations to be sent to clients to complete a [Your Experience of Service Primary Health Network \(YES-PHN\) Survey](#). The YES-PHN survey is designed to gather information from mental health consumers about their experiences of care.

After navigating to the **Tools: YES-PHN** tab, you will see a tab to request a report of clients who have completed episodes in a specified period and a tab to re-upload the report to generate invitations for the specified clients to complete a Your Experience of Service Primary Health Network (YES PHN) Survey.

You will only be able to see the **Tools: YES-PHN** tab if you have been assigned the 'Service Feedback' [Users Roles](#), when logged into the PMHC MDS on <https://pmhc-mds.net>.

If you don't have access to the **Tools: YES-PHN** tab and you believe you should, please contact someone in your provider organisation or provider organisation's PHN who has the 'User Management' role. If you are unsure who has the 'User Management' role please email the PMHC Helpdesk at support@pmhc-mds.com

The screenshot shows the PMHC MDS web application interface. At the top, there is a navigation bar with 'Home', 'Upload', and 'Tools' (selected). A user is logged in as 'PMHC Training'. Below the navigation bar, a breadcrumb trail shows 'Home / Tools / YES PHN / Download'. The main heading is 'YES Tools'. A description states: 'Users with the Service Feedback role can use this tab to request a report of clients who have completed episodes in a specified period and to re-upload the report to generate invitations for the specified clients to complete a YES-PHN survey.' A support link is provided: 'Support: For more information and assistance visit [PMHC MDS Documentation](#). (link opens in a new window)'. The interface has two tabs: 'Download Completed Episodes' (active) and 'Upload Invitations'. Under the 'Download Completed Episodes' tab, there is a 'Download' section with the following fields: 'Start Date *' (02/10/2021), 'End Date *' (02/11/2021), 'Organisation Path *' (a dropdown menu), and 'Select File Type *' (a dropdown menu). A 'Request' button is located at the bottom left of the form. The footer contains the Australian Government Department of Health logo and the text 'Strategic Data Pty Ltd | [Contact Support](#) | [Documentation](#) | [Training](#)'.

8.2.1. Download Completed Episodes

You can request a report of clients who have completed episodes in a specified period by completing the Download fields in the **Tools: YES-PHN** tab, by following these steps:

1. Navigate to the **Tools** tab and select **YES-PHN**
2. Click the first calendar icon to select the start date and then the second calendar icon to select the end date.
See [Dates explained for Completed Episodes Download](#)
3. If you are allowed to download data from more than one organisation you will be asked to select an organisation name
4. Select the appropriate file type to be downloaded

YES Tools

Users with the Service Feedback role can use this tab to request a report of clients who have completed episodes in a specified period and to re-upload the report to generate invitations for the specified clients to complete a YES-PHN survey.

Support: For more information and assistance visit [PMHC MDS Documentation](#). *(link opens in a new window)*

Download Completed Episodes
Upload Invitations

Download

Start Date *

Enter the start date

01/7/2019

End Date *

Enter the end date

31/12/2019

Organisation Path *

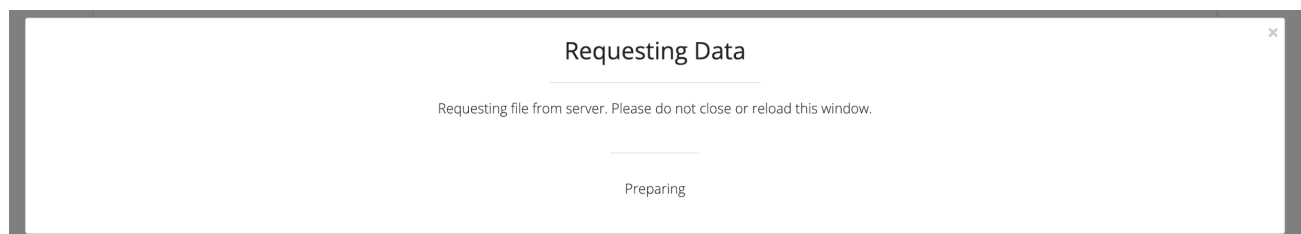
Test Provider Organisation 1 (PHN999:PO1)

Select File Type *

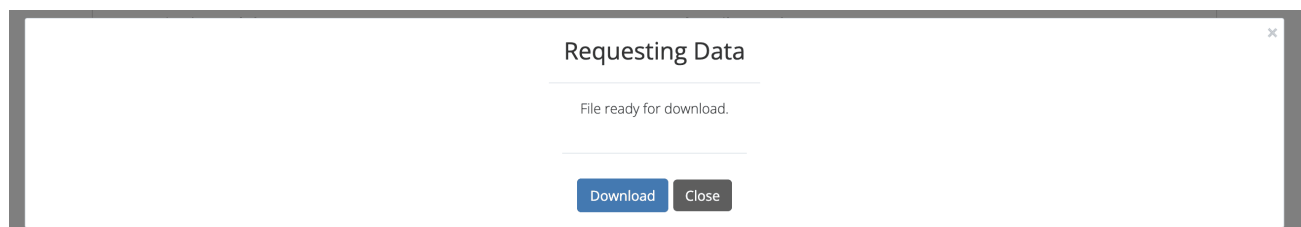
CSV (zipped)

Request

- Click the blue **Request** button
- A dialogue box will be displayed, showing that the file is being requested from the server



- When the file is ready, a 'File ready for download' message will be displayed



- Click the blue **Download** button
- The data extract will be downloaded to your computer

Note

Excel automatically removes leading zeros, and converts large numbers to scientific notation, like 1.23E+15, in order to allow formulas and math operations to work on them. See [Excel file issues](#)

An example download file is available in the YES-PHN specification documentation at [YES-PHN Download Completed Episodes](#)

8.2.1.1. Dates explained for Completed Episodes Download

The Download Completed Episodes dates are based on the Client's [Episode End Date](#) for the PMHC MDS. The file will include all Episodes that have an end date within the date range of the request.

8.2.2. Uploading an invitations file

The YES-PHN survey is designed to gather information from mental health consumers about their experiences of care. See [What is the YES-PHN survey?](#).

After navigating to the **Tools: YES-PHN** tab, you will be able to upload client details for the organisations for which you have the 'Service Feedback' role and 'Upload' role. The upload process will send YES-PHN invitations to these clients via email or SMS.

Home / Tools / YES PHN / Upload / Make New Upload

YES Tools

Users with the Service Feedback role can use this tab to request a report of clients who have completed episodes in a specified period and to re-upload the report to generate invitations for the specified clients to complete a YES-PHN survey.

Support: For more information and assistance visit [PMHC MDS Documentation](#). (link opens in a new window)

Download Completed Episodes

Upload Invitations

Upload a file

View uploads

Note: * denotes a mandatory field

Organisation *

Select File

☐ Upload as test data

The YES-PHN invitations file can either be auto generated through an internal system, or a [Download Completed Episodes](#) can be manually completed by adding one of the the client's details, either the [mobile_number](#), or [email](#), and [reminders](#) fields as documented in the YES_PHN specifications. (Please note: manual changes to columns A-E should not occur. See [Incorrect data](#))

You can upload YES-PHN invitations files through the upload tab, by following these steps:

1. Navigate to the **Tools: YES-PHN** tab
2. Click the **Upload Invitations** tab
3. Click the **Upload a file** tab
4. The PHN will be pre-filled in the **Organisation** field, unless you are allowed to upload to more than one PHN. (If blank - See [Can't see the organisation](#))

Download Completed Episodes Upload Invitations

Upload a file View uploads

Note: * denotes a mandatory field

Organisation *

- ✓ Primary Health Networks
- Test Australian Capital Territory (PHN801)
- Test PHN (PHN999)

☐ Upload as test data

5. Click the blue **Select File** button
6. Navigate to where the upload file is saved on your system. Select the file and click the grey **Open** button

Download Completed Episodes Upload Invitations

Upload a file View uploads

Note: * denotes a mandatory field

Organisation *

Test PHN (PHN999)

Select File ☐ Upload as test data

7. Check to ensure you have selected the correct file by reviewing the file name now displayed below the **Select File** button
8. Click the green **Upload** button

You will receive confirmation that your file has been accepted. The file will now be validated and you will receive a confirmation notification and an email. You can click on the link confirmation notification or open the email to view the upload status, informing you that your file was successfully uploaded to the PMHC MDS, or informing you of any errors that occurred. See [Viewing Previous Uploads](#).

Please email support@pmhc-mds.com if you don't receive an email within one hour.

Further discussion about the error messages can be found at [Error messages](#).

8.2.3. Uploading a file in Test Mode

A file can be uploaded in Test Mode. When uploading in test mode, the file is validated, however the data is not updated in the PMHC MDS database.

After navigating to the **Upload** tab, you will be able to upload in Test Mode data files to organisations for which you have the 'Service Feedback' role.

You can upload data files in Test Mode through the **Upload** tab, by following these steps:

1. Navigate to the **Upload** tab
2. If you are allowed to upload to more than one organisation you will be asked to select an organisation name
3. Select the name of the organisation whose data you are uploading from the drop down list
4. Click the blue **Select File** button
5. Navigate to where the upload file is saved on your system. Select the file and click the grey **Open** button
6. Check to ensure you have selected the correct file by reviewing the file name now displayed below the **Select File** button
7. Click the **Upload as test data** checkbox on the right hand side

Download Completed Episodes
Upload Invitations

Upload a file
View uploads

Note: * denotes a mandatory field

Organisation *

Test PHN (PHN999)

Select File

☒ Upload as test data

8. Click the green **Upload** button

You will receive confirmation that your file has been accepted. The file will now be validated and you will receive an email informing you if your file was valid, or informing you of any errors that occurred.

Even if your file was valid, the data will not be updated in the PMHC MDS database.

Messages

Completed in Test Mode

8.2.4. Viewing Previous Uploads

The PMHC MDS allows you to review previous uploads.

Download Completed Episodes
Upload Invitations

Upload a file
View uploads

Filters
Show / Hide

Upload ID	Date Uploaded	Organisation Name	Username	File Name	Specification	Test	Status
5c780cb5	23/11/2021 02:37:53 AM	Test PHN	pmhct	PHN999-yesphn-test.xlsx	YES-Invitation 1.0	No	complete
aa90c224	23/11/2021 02:37:35 AM	Test PHN	pmhct	PHN999-yesphn-test.xlsx	YES-Invitation 1.0	Yes	complete
0eb3f440	23/11/2021 02:36:47 AM	Test PHN	pmhct	PHN999-yesphn-test.xlsx	YES-Invitation 1.0	Yes	error
8ceb8db7	23/11/2021 02:33:04 AM	Test PHN	pmhct	PHN999-yesphn-test.xlsx	YES-Invitation 1.0	Yes	error

When an upload has been completed, irregardless of whether it validated successfully or not, the upload will be added to the table.

The **Status of Previous Uploads** table refreshes once files finish the validation process. Types of status results are:

- **accept** - the file is currently going through the validation process
- **complete** - the file has successfully passed the validation process
- **error** - the file has returned errors through the validation process. Please review the error messages and correct the data to upload again

Further discussion about the error messages can be found at [Error messages](#).

8.2.5. Viewing Upload Details

You can view the results of an upload by following these steps:

1. Navigate to the **Upload** tab
2. Click the **Upload Status** tab
3. Locate the date and time of the upload you are interested in
4. Click on the filename of the relevant upload
5. You will be shown the **Upload Detail** page

8.2.6. Complete uploads

[Viewing Upload Details](#) for complete uploads will display data verification information by listing the number of data records present and if those records are added, updated, or deleted, within the MDS records.

Messages				
File/Worksheet	Present	Added	Updated	Deleted
invitations	7	0	0	0

Upload Details

8.2.7. Error messages

If the status of your file shows error, you can view the returned errors through [Viewing Previous Uploads](#).

Errors			
File/Worksheet	Row	Column Name	Error
Invitations	8	email	Must supply a mobile number, an email address, or both in row 8 for client CL0023 and episode EP000024 at organisation PHN999:PO2
Invitations	9	email	Must supply a mobile number, an email address, or both in row 9 for client CL0013 and episode EP000023 at organisation PHN999:PO2
Invitations	11	email	Must supply a mobile number, an email address, or both in row 11 for client CL0021 and episode EP000025 at organisation PHN999:PO2
Invitations	12	email	Must supply a mobile number, an email address, or both in row 12 for client CL0011 and episode EP000034 at organisation PHN999:PO2

8.2.8. Correcting upload errors

Any upload validation errors will need to be corrected in your internal system and a new upload file created. Or if you manually record data on the upload file, you can edit the data records directly on the file. See - [Validation Rules](#).

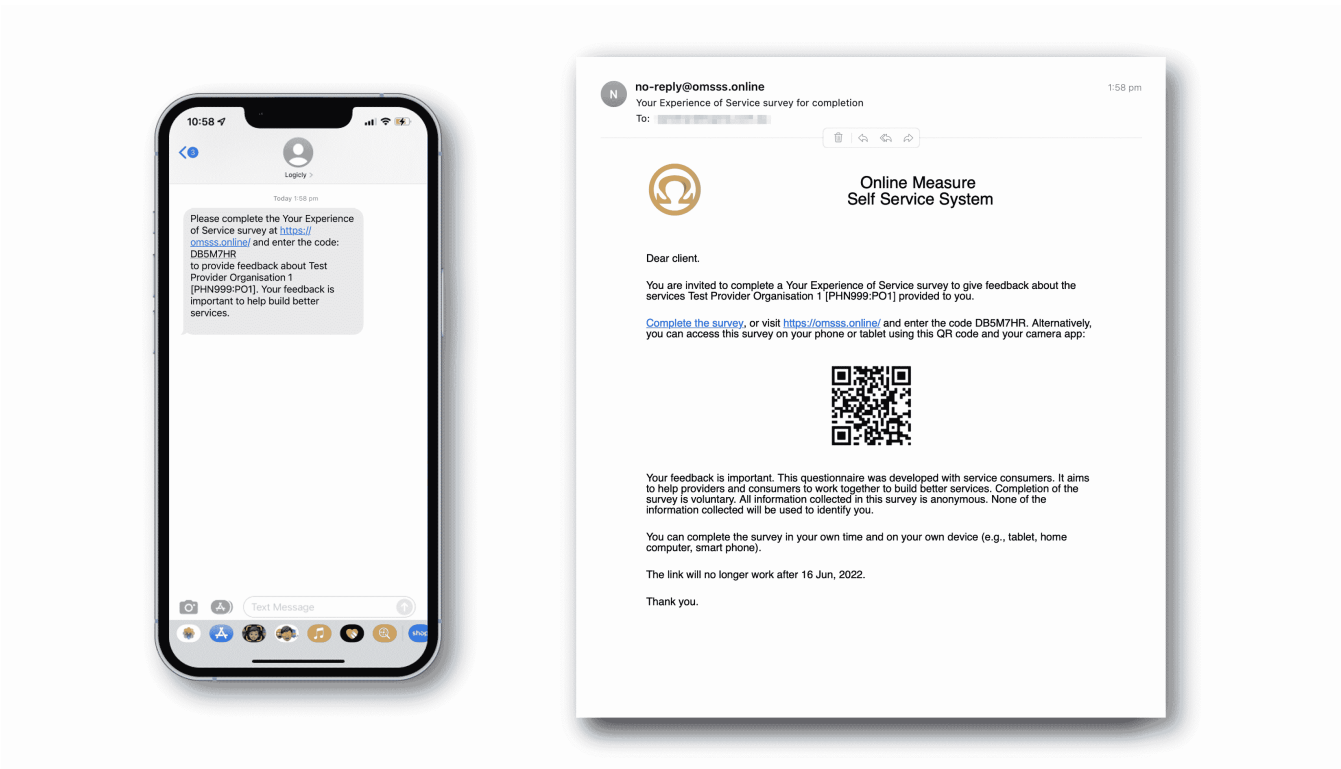
The definition of each data item has associated notes that will provide guidance on why an error is returned. By visiting the data specifications documentation and clicking on the [Record formats](#) field name this will take you to the field definition which outlines the associated notes.

In the Frequently Asked Questions guide there are questions about some of the common and unusual upload error messages. These answers contain information on what you can do to fix the error. See - [YES-PHN FAQs](#).

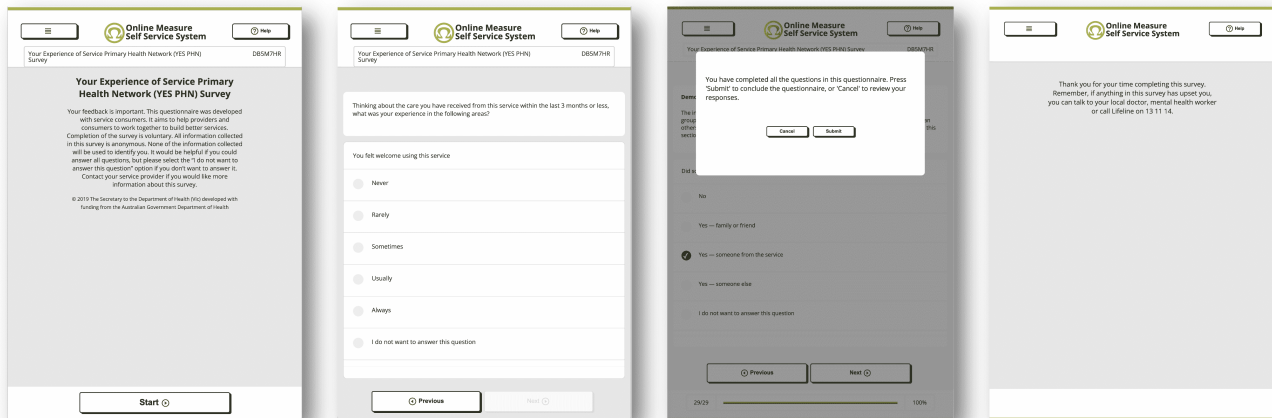
If you require assistance in understanding an error message, please email support@pmhc-mds.com.

8.2.9. Example Self Service Link Screens

Example YES-PHN Invitation OMSSS Screens



Example YES-PHN Survey OMSSS Screens



Anonymised PMHC MDS Report 'B8 - YES PHN Index'

Home / Reports

B8: YES PHN index for Test PHN; 01/01/2020 - 09/06/2022

Back View Report Code

Organisation name	Organisation key	YES PHN count	Average experience score	Average outcome score	YES PHN index
Test Provider Organisation 1	PO1	4	36.75	8.50	0.00

Generated on 09/06/2022 15:12:03 AEST

Select format Download Counting Rules Explained

Fig. 8.1 More information available in the online user documentation for [B8 - YES PHN Index](#) report.

8.3. User Auditing Tool

- [Auditing Users](#)
- [Finding a User](#)
- [Changing a users roles or removing access](#)

The Tools: User Auditing tab allows users with the User Management role to review users who have not recently logged in to the PMHC MDS.

You will only be able to see the **Tools: User Auditing** tab if you have been assigned the 'User Management' [Users Roles](#), when logged into the PMHC MDS on <https://pmhc-mds.net>.

If you don't have access to the **Tools: User Auditing** tab and you believe you should, please contact someone in your provider organisation or provider organisation's PHN who has the 'User Management' role. If you are unsure who has the 'User Management' role please email the PMHC Helpdesk at support@pmhc-mds.com.

After navigating to the **Tools: User Auditing** tab, you will be presented with a table of users whose access you manage. By default, the table is sorted by the 'Last Logged In' column sorted so that users who have not logged in for the longest are displayed at the top.

[Home](#) [Organisations](#) [Users](#) [Upload](#) [Data Extract](#) [Reports](#) [Data Entry](#) [Tools ▾](#) Logged in as given-admin surname-admin ▾

[Home](#) / [Tools](#) / [User Auditing](#)

User Auditing

This tab allows users with the User Management role to review users who have not recently logged in to the PMHC MDS.

Filters

Show / Hide

User Auditing

Name ▾	Email ▾	Last Logged In ▲ ▾
given-user1 surname-user1	user1@email.example.com	16/12/2021 (a minute ago)
given-user2 surname-user2	user2@email.example.com	16/12/2021 (a few seconds ago)
given-user3 surname-user3	user3@email.example.com	
given-user4 surname-user4	user4@email.example.com	
given-user5 surname-user5	user5@email.example.com	
given-user6 surname-user6	user6@email.example.com	
given-user8 surname-user8	user8@email.example.com	
given-user9 surname-user9	user9@email.example.com	
given-user10 surname-user10	user10@email.example.com	
given-user11 surname-user11	user11@email.example.com	

◀ ◁ 1 / 7 ▷ ▶

10 ▾ items per page

1 - 10 of 62 Items

8.3.1. Auditing Users

User managers should periodically check this table and [remove all roles](#) from any user who no longer requires access.

A monthly 'PMHC-MDS User Audit Reminder Notification' email will be sent to users with the User Management role to prompt this process:

- PMHC MDS Production users will receive the audit reminder email on the first Monday of each month
- PMHC MDS Developers users will receive the audit reminder email on the fourth Monday of each month

PMHC MDS

Hello 

The PMHC MDS follows current best practices in security standards, requiring regular review of who can access the PMHC MDS.

Please go to <https://developers.pmhc-mds.net/#/tools/user-audit>, review your PMHC MDS users and remove any users who no longer require access.

Instructions for removing users are available at <https://docs.pmhc-mds.com/projects/user-documentation/en/latest/users.html#edit-role>.

Removing users who no longer require access improves the safety of your data by preventing unauthorised updates.

Thank you.

You can scroll through the results by using the page arrows to view the data. See [Finding a User](#)

8.3.2. Finding a User

You can choose any of the filters to search for a user, depending on the user information that is available.

To filter the listed users:

1. Click the grey **Filters** button. This will open a field in which to enter text

Filters

Show / Hide

User Auditing

Select Your Filters: ×

Name

Email

Last Logged In

Name

Email

Last Logged In

Cancel

Apply

Name	Email	Last Logged In
given-user1 surname-user1	user1@email.example.com	16/12/2021 (a minute ago)
given-user2 surname-user2	user2@email.example.com	16/12/2021 (7 minutes ago)
given-user3 surname-user3	user3@email.example.com	
given-user4 surname-user4	user4@email.example.com	
given-user5 surname-user5	user5@email.example.com	
given-user6 surname-user6	user6@email.example.com	
given-user8 surname-user8	user8@email.example.com	
given-user9 surname-user9	user9@email.example.com	
given-user10 surname-user10	user10@email.example.com	
given-user11 surname-user11	user11@email.example.com	

1 / 7

10 items per page

1 - 10 of 62 Items

2. Type an appropriate filter into any of the fields
3. Click the blue **Apply** button (or click the **Cancel** button if you decide not to filter the user data)

You can view the applied filters at the top of the filtered user data table.

Filters

Show / Hide

User Auditing

Select Your Filters: X

Name

Email

Last Logged In

Name

user1

Last Logged In

Cancel

Apply

Filters: X Email : user1

Name	Email	Last Logged In
given-user1 surname-user1	user1@email.example.com	16/12/2021 (a minute ago)
given-user10 surname-user10	user10@email.example.com	
given-user11 surname-user11	user11@email.example.com	
given-user12 surname-user12	user12@email.example.com	
given-user13 surname-user13	user13@email.example.com	
given-user14 surname-user14	user14@email.example.com	
given-user15 surname-user15	user15@email.example.com	
given-user16 surname-user16	user16@email.example.com	
given-user17 surname-user17	user17@email.example.com	
given-user18 surname-user18	user18@email.example.com	

1 / 2

10

items per page

1 - 10 of 11 Items

To remove the filter, click the grey cross (X) listed before the filter name or click the blue **Clear all** button.

You can sort the listed user search results by simply clicking the column header. Alternately you can click the arrow beside a column header for more sort options, as follows:

- **Sort Ascending**
- **Sort Descending**

8.3.3. Changing a users roles or removing access

Clicking on the user's name will take you to [Editing a user's roles](#). From there you can edit there roles, or fully remove their access to the PMHC MDS.

Please note: use the 'Actions' feature when removing a user's roles to remove that user from the User Auditing list.

9. Additional Services

The following additional services are available in the PMHC MDS.

- [Name-like scanning service](#)

9.1. Name-like scanning service

Data supplied to the PMHC MDS must adhere to the Australian Privacy Principles for the collection of personal information. Identifying information, such as client or practitioner names are not collected as part of the dataset. Where identifying information is not required, it is an absolute priority to ensure data within the PMHC MDS remains de-identified.

It was discovered that client names had been used in keys. In order to attempt to detect where names have been used in keys, a service that scans records in the PMHC MDS looking for name-like keys and sends an email to alert users with the Organisation Manager role has been implemented.

The service only provides the first three characters of each key in order to avoid any potential for data spillage via the email. If this is not enough information to identify the record contact support@pmhc-mds.com for additional assistance.

The scanning service can only alert organisations that there may be identifiable information in their data. It cannot provide a definitive list of keys that includes names. It is the responsibility of organisations to fully analyse the extent of identifying information leaking into PMHC-MDS data, if any, and correct it.

Finally, note that the system is looking for “name-like” text within entity keys. It is possible that it will produce some false positives. It is safe for you to leave any false positives as is, over time they will be ignored and will no longer trigger this email.

10. Environments

- [Production](#)
- [Developers](#)

10.1. Production

The main (production) environment of the PMHC MDS is available at <https://pmhc-mds.net/>. Only real data that is to be reported to the Department of Health, Disability and Aging (DoHDA) should be uploaded to this environment. A [Developers](#) environment is provided for testing third-party developed software against the PMHC MDS.

10.2. Developers

A secondary (developers) environment is available at <https://developers.pmhc-mds.net/>. The developers environment runs the same code revision as the production environment. This environment has been made available for testing and training purposes for PHNs, Provider Organisations and third-party developers.

Real client data should not be uploaded to <https://developers.pmhc-mds.net/>. The developers environment is being provided for the purposes of testing third-party developed software against the PMHC MDS only. Production data should only be uploaded to <https://pmhc-mds.net/>

Logically reserves the right to delete data from the developers environment at any time should it become necessary. While we would provide prior notification of such an event, you should not assume historical data exists in the system when developing your testing procedures.

To set up an account on <https://developers.pmhc-mds.net/> that has access to a test Primary Health Network, please provide us with a 'Letter of Authority' on your organisation or companies letterhead.

This letter must be signed by an authority at your company who holds a position that is higher than the person for whom the account is being created (i.e., the person's manager or the CEO).

This letter must contain the following details (for the person for whom the MDS access is being requested):

1. The name of the person the account is for
2. The email address of the person
3. Contact telephone number
4. Request access to the 'Test [Your Organisation or Company Name]'
5. This letter must be scanned and emailed to support@pmhc-mds.com.

11. Frequently Asked Questions

11.1. Concepts and Processes Frequently Asked Questions

11.1.1. Questions about the scope of the MDS

- Coverage of community-based suicide prevention activities
 - Activities such as mental health and suicide awareness training and whole of community health promotion programs (non-clinical services) (e.g., Farm-Link). targeted at groups or whole communities, are not a good fit for the PHMC MDS. They are currently reported to the National Suicide Prevention Program) MDS which finishes on the 30th June 2016. What is the mechanism for the future?
- Coverage of digital health services
 - Are the PHNs expected to collect and upload all of the data outlined under the six Mental Health Priority Areas? If so it will be difficult to collect this data for referrals made to e-mental health sites such as mood gym, mind spot etc. There are also challenges around self-help groups.
- Coverage of whole of region services regardless of who funds
 - Are we only reporting on services and processes that we are commissioning and undertaking or the region as a whole?
- Appropriateness of occasions of service as a counting measure

- This unit of counting is not appropriate for the full range of services that might be commissioned by PHNs, for example, whole of community-oriented prevention activities
- Exclusion of 'non clinical' time
 - The MDS only captures actual clinical time. Administrative tasks such as arranging for case conferences, updating electronic health information records, undertaking program contractual management tasks, travelling to service provision venue amongst others, are currently not being captured.
- Are headspace services covered by the requirements?
 - Are services funded through headspace expected to collect the PHMC MDS?
- Are EPYS centres covered?
 - Are services funded as Early Psychosis Centres expected to collect the PHMC MDS?
- Coverage of Mental Health Nursing services
 - Are services previously delivered under MHNIP expected to collect the PHMC MDS?

PHNs raised a number of questions regarding the scope of the MDS and whether specific areas of commissioned activity were intended to be covered. The [Overview paper](#) covers the scope issue (page 4), an extract of which is copied below:

"The new arrangements are designed to capture data on PHN-commissioned mental health services **delivered to individual clients, including group-based delivery to individual clients ...**

The scope of coverage will not extend to services targeted at communities, such as the community capacity building activities previously funded under projects sourced from National Suicide Prevention Program funding. Collection and reporting of activities of this type requires a different approach to 'counting' and identification of the 'client'. PHNs commissioning activities of this type will have flexibility to establish local data reporting arrangements that suit requirements."

PHNs raised a number of questions to further clarify the scope of the PMHC MDS, summarised below.

11.1.1.1. Coverage of community-based suicide prevention activities

11.1.1.1.1. Activities such as mental health and suicide awareness training and whole of community health promotion programs (non-clinical services) (e.g., Farm-Link). targeted at groups or whole communities, are not a good fit for the PHMC MDS. They are currently reported to the National Suicide Prevention Program) MDS which finishes on the 30th June 2016. What is the mechanism for the future?

PHN-commissioned services of this type are outside the scope of the PMHC MDS.

Regional whole-of-community suicide prevention activities previously funded directly by the Department and now transferred to PHNs (e.g., Farm-Link) have previously reported to the National Suicide Prevention Program MDS managed by Australian Healthcare Associates under contract to the Department. The Department is currently exploring options to continue this collection and will advise PHNs accordingly, with a view to ensuring continuity of reporting of community-based suicide prevention activities.

Suicide prevention oriented services provided to individuals are in scope for collection and reporting to the PMHC MDS.

11.1.1.2. Coverage of digital health services

11.1.1.2.1. Are the PHNs expected to collect and upload all of the data outlined under the six Mental Health Priority Areas? If so it will be difficult to collect this data for referrals made to e-mental health sites such as mood gym, mind spot etc. There are also challenges around self-help groups.

As indicated, scope of coverage is all PHN-commissioned mental health services delivered to individual clients, regardless of mode of service delivery.

Digital health services present particular challenges that need to be unbundled to resolve a way forward. Where PHNs refer the consumer to self-help, clinician unmoderated assistance (e.g., Mood Gym), this is not a PHN-commissioned service as such and falls outside of the scope of collection. Similarly, referral to a nationally funded clinician-moderated service such as Mindspot is not a PHN-commissioned services and falls outside of scope, bypassing the need for data collection.

However, there are acknowledged issues where a PHN enters a funding agreement with a digital health provider to provide individually tailored, clinician-moderated services to specific populations within their regions. Such services clearly fall within scope. The Department is considering the options to capture the required data. These include setting up arrangements for digital providers to collect and submit data on behalf of PHNs.

11.1.1.3. Coverage of whole of region services regardless of who funds

11.1.1.3.1. Are we only reporting on services and processes that we are commissioning and undertaking or the region as a whole?

The PMHC MDS is designed to cover only those services commissioned by PHNs.

11.1.1.4. Appropriateness of occasions of service as a counting measure

11.1.1.4.1. This unit of counting is not appropriate for the full range of services that might be commissioned by PHNs, for example, whole of community-oriented prevention activities

This is agreed. The scope of the PMHC MDS does not cover every activity that a PHN may commission.

Where activities are outside the scope of the PMHC MDS, PHNs are expected to set up their own arrangements to collect data suitable for reporting purposes. See also the response above regarding [Coverage of community-based suicide prevention activities](#).

11.1.1.5. Exclusion of 'non clinical' time

11.1.1.5.1. The MDS only captures actual clinical time. Administrative tasks such as arranging for case conferences, updating electronic health information records, undertaking program contractual management tasks, travelling to service provision venue amongst others, are currently not being captured.

The focus of the PMHC MDS collection is on clinical service delivery to individual clients. It is acknowledged that clinician have to undertake other activities to maintain their clinical work and time spent on these can be significant. However, any broadening of scope to include as mandatory other activities would create an unacceptable data reporting burden on clinical service providers, all of whom are practitioners independent of the PHN.

It should be noted however that the PMHC MDS differs from the previous ATAPS collection in allowing a range of services delivered 'on behalf' of the client to be recorded. Section 4.4 of the [Overview paper](#) ('Determining what activities are in scope for reporting as service contacts') provides the relevant details.

11.1.1.6. Are headspace services covered by the requirements?

11.1.1.6.1. Are services funded through headspace expected to collect the PHMC MDS?

First-stage development of the MDS will not include existing youth-specific services (headspace, Early Psychosis Youth Services) that currently collect and report a standardised dataset to headspace National Office. Pending the future of these arrangements, and access to data by PHNs, the PHMC MDS can be expanded at a future stage to allow incorporation of headspace and Early Psychosis Youth Services should this be required.

11.1.1.7. Are EPYS centres covered?

11.1.1.7.1. Are services funded as Early Psychosis Centres expected to collect the PHMC MDS?

First-stage development of the MDS will not include existing youth-specific services (headspace, Early Psychosis Youth Services) that currently collect and report a standardised dataset to headspace National Office. Pending the future of these arrangements, and access to data by PHNs, the PHMC MDS can be expanded at a future stage to allow incorporation of headspace and Early Psychosis Youth Services should this be required.

11.1.1.8. Coverage of Mental Health Nursing services

11.1.1.8.1. Are services previously delivered under MHNIP expected to collect the PHMC MDS?

From July 2016, funding has been provided to PHNs through a flexible funding pool to enable commissioning of a wide range of primary mental healthcare and suicide prevention services at regional levels. As such the MHNIP and other programs that have transitioned into the flexible funding pool, and their associated guidelines, are no longer applicable.

All 31 PHNs are required to collect and enter/upload data into the PMHC MDS. The PMHC MDS has been developed to capture the broader range of mental health services now being commissioned by PHNs, including services previously delivered under MHNIP. However, principal responsibility for establishing regional arrangements for data collection and reporting rests with PHNs.

11.1.2. Questions about Specific Data Items and Definitions

- **Provider Organisation**
 - **Provider organisation – solo practitioners:** If the organisation is a sole trader private practitioner, does the organisation name become the providers name?
 - **Provider Organisation ABN:** Why is this needed?
- **Practitioner**
 - **Practitioner category:** Should there be separate categories for accredited mental health social workers and occupational therapists in mental health?
 - **Principal Focus of Treatment Plan – Psychological Therapy:** Is the Department going to provide a firm definition of a mental health professional under the new specifications – noting the intent of increased flexibility to provide a workforce of mixed and flexible professional background?
- **Client**
 - **Gender:** Should there be consistency in how Practitioner and Client gender are collected?
 - **Statistical Linkage Keys (SLK)** - will these be generated in a similar manner to the ATAPS MDS?
- **Episode**
 - **Diagnosis:** Is this required across all service delivery areas, including low intensity services?
 - **Diagnosis - DSM-IV:** Why isn't DSM-V used as the standard given that that is the most current classification system?
 - **Episode - Completion Status:** If the client is referred elsewhere (i.e. not suitable for this service) would this be recorded as "Episode closed administratively-other reason" or should there be an additional code to capture this information?
 - **GP mental health treatment plan:** Can we include an item to capture whether the client has GP mental health treatment plan? Would be very useful from a planning and commissioning perspective.
 - **Source of Cash Income, Income range:** What is the rationale for these items? They are not relevant to PHNs and providers may not be comfortable in asking the questions.
 - **One episode of care at a time:** We have clients who are receiving treatment at multiple programs and require multiple episodes with different 'Principal Focus of Treatment Plan'. The PMHC MDS only allows one episode at a time for each client, defined at the level of the provider organisation. What do we do?
- **Service Contact**
 - **Service contact - Definition:** Does the definition extend to the writing of reports to assist the client in accessing appropriate services etc (although this may not involve 2 people)?
 - **Service Contact - Duration:** It is unclear if the expectation is to calculate all occasions of contact for an individual consumer over an entire 24-hour day or every individual contact recorded separately. A 24-hour or full work day summation of time would be useful.
 - **Service Contact – No Show:** When item "Service Contact - No Show" is selected as "Yes", it would be useful to capture how that time of appointment was used.

- **Service Contact – Type:** This item includes limited options of the actual service function delivered e.g., more detailed information - CBT, ACT, DBT, mindfulness etc. These are all grouped under the category of structured psychological
- **Service Contact – Type:** Is it possible to obtain further examples of “structured psychological interventions” and “other psychological interventions”? e.g., where would narrative therapy fit?

11.1.2.1. Provider Organisation

11.1.2.1.1. Provider organisation – solo practitioners: If the organisation is a sole trader private practitioner, does the organisation name become the providers name?

The sole practitioner should use the trading name against which they have registered their ABN.

11.1.2.1.2. Provider Organisation ABN: Why is this needed?

Understanding the characteristics and number of Provider Organisations is important for both regional and national planning purposes, and requires an approach that uniquely identifies organisations. While Provider Organisation identifiers are set up by PHNs, these are only unique at the regional level. They therefore do not allow a national picture of the number and type of organisations engaged in the delivery of primary mental health care.

The ABN provides a simple and nationally unique organisation identifier. Organisation ABNs are also public domain information, being available via the Australian Business Register website.

11.1.2.2. Practitioner

11.1.2.2.1. Practitioner category: Should there be separate categories for accredited mental health social workers and occupational therapists in mental health?

The coding options allows for separate identification of social workers and occupational therapists. PHNs are free to add additional details to their local collection on the proviso that any additions are capable of being mapped to the national MDS categories.

11.1.2.2.2. Principal Focus of Treatment Plan – Psychological Therapy: Is the Department going to provide a firm definition of a mental health professional under the new specifications – noting the intent of increased flexibility to provide a workforce of mixed and flexible professional background?

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.

11.1.2.3. Client

11.1.2.3.1. Gender: Should there be consistency in how Practitioner and Client gender are collected?

Yes. The data coding options are the same for both items and based on the new standards recently released by Australian Government Guidelines on the Recognition of Sex and Gender.

11.1.2.3.2. Statistical Linkage Keys (SLK) - will these be generated in a similar manner to the ATAPS MDS?

Yes.

Details on how the SLKs are created, are currently available on the [PMHC MDS Specifications - SLK](#). An SLK Generator has been developed on the [PMHC MDS - SLK tab](#).

See [SLK](#) for details how to use this feature.

11.1.2.4. Episode

11.1.2.4.1. Diagnosis: Is this required across all service delivery areas, including low intensity services?

Yes. While low intensity workers will not be qualified to assign a clinical diagnosis, it is expected that they will be working under the supervision of a clinically qualified mental health professional.

11.1.2.4.2. Diagnosis - DSM-IV: Why isn't DSM-V used as the standard given that that is the most current classification system?

The DSM-IV is the diagnostic classification currently used by the majority of Australian mental health clinicians. Any move to DSM-V would require confidence that most clinicians providing services through PHN commissioning arrangements have had training in, and moved across to, the new system. The Department does not believe that this is the case. Pending uptake of DSM-V, there is scope to change to the new classification in future versions of the PMHC MDS.

Additionally, as the diagnostic codes included in the PMHC MDS represent an abbreviated 'pick list', the decision to use either DSM-IV or DSM-V will not have material impact given the substantial common ground between the two classifications.

11.1.2.4.3. Episode - Completion Status: If the client is referred elsewhere (i.e. not suitable for this service) would this be recorded as "Episode closed administratively-other reason" or should there be an additional code to capture this information?

Under the new PMHC MDS, an episode does not formally commence until the client receives their first Service Contact. For referrals that do not lead to a Service Contact, and where the person is referred elsewhere, there is no need to open an Episode. However, based on previous experience with the ATAPS system, the Department understands that many PHNs are likely to want to do this as a means to track referrals that do not lead to Service Contacts, or to begin entering data prior to the first Service Contact. Therefore, there will be scope in the system to set up an Episode even it does not lead to a Service Contact. Standard reports to be developed will build in capacity to monitor these and ensure that they are not counted in service delivery indicators. Where a referral is followed by an initial Service Contact, and the person is referred elsewhere due to being assessed as not suitable, or requires an alternative service, a new code for Episode- Completion Status has been added ('Episode closed administratively - client referred elsewhere').

11.1.2.4.4. GP mental health treatment plan: Can we include an item to capture whether the client has GP mental health treatment plan? Would be very useful from a planning and commissioning perspective.

The Department agrees that this is a useful item for both PHN and national purposes. It has been added to the final Version 1 specifications and is to be reported at the level of Episodes of Care.

11.1.2.4.5. Source of Cash Income, Income range: What is the rationale for these items? They are not relevant to PHNs and providers may not be comfortable in asking the questions.

Both items were intended to address key indicators of socioeconomic disadvantage of the consumers using PHN-commissioned services. The intent is to replace the previous 'low income' data item of the previous ATAPS/ MHSRRA dataset which was poorly defined and of doubtful reliability.

Based on discussions we believe the intent of these data items is understood by most PHNs.

'Source of cash income' is a standard Meteor item that importantly, identifies whether the consumer is receiving government income support through a Disability Support Pension or other means. It is used in a number of data collections covering Australia Government funded human services.

Income range was intended as a supplementary measure to identify low income consumers. The Department has considered the feedback and agrees this data item is not the appropriate approach. It has been replaced by an alternative item – 'Health Care Card holder'.

The Department considers it essential for the data collection to have a reliable approach to identifying consumers who are economically challenged.

11.1.2.4.6. One episode of care at a time: We have clients who are receiving treatment at multiple programs and require multiple episodes with different 'Principal Focus of Treatment Plan'. The PMHC MDS only allows one episode at a time for each client, defined at the level of the provider organisation. What do we do?

The 'one episode at a time per organisation' rule is fundamental to the concepts underpinning the MDS. This rule has important implications, and is based on the long standing principle that, in bringing together all the various services used by an individual during their healthcare for a particular illness, the episode of care should be bundled to the highest level possible. This allows for a more accurate approach to understanding costs and outcomes at the patient level. A single episode of care may entail multiple service types, and service events which in some systems are bundled together under the concept of 'service episodes'. This situation is common in mental health care; for example where a consumer is simultaneously under the care of a community mental health team and a separate day program. Typically, the patient is registered at both centres and contacts are separately recorded by each service or team. But it's important to not confuse such 'service episodes', which are based on service characteristics, with the episode of care concept, which is patient based.

So the short response to the query is that no, the 'one episode of care at a time per organisation rule' should not be breached. The fact that the person is receiving multiple service types during the course of their episode is not a reason to break their care down into multiple episodes. Doing so would have consequences of subjecting the person to two sets of data collection and outcome measures (noting outcomes are needed for each episode).

It is essential the following aspects of the way episode types (as denoted by the Principal Focus of Treatment Plan) are conceptualised:

1. A single episode may include heterogenous services, as outlined above.
2. The mix of services provided during a single episode is captured by the Service Type data item - collected at each Service Contact.
3. Classifying the episode type by Principal Focus of Treatment Plan 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 following initial assessment. It is important to note that can be modified at a later stage if the initial judgement made proved to be incorrect.
4. Episodes are not defined by the source of funding.

Further detail on the concepts underpinning the PMHC MDS are outlined in the Overview paper at <https://www.pmhc-mds.com/doc/pmhc-mds-overview.pdf>

Several PHN organisations have also queried whether a new and separate episode can be opened when a client is shifted to a significantly different type of care from that originally envisaged. The PMHC does not require this, but also the PMHC does not prevent it. It's a clinical decision that can be made - i.e. a new episode can be opened (after the previous one is closed) when there is a significant shift in the type of care provided e.g., the client begins with a Low Intensity episode, because it was envisaged that the episode would be relatively brief/inexpensive, but in the course of treatment it became clear that the client had complex mental health issues that would warrant

higher intensity services and over a more prolonged period. In such instances, the original episode can be closed, and a new one opened. However, the department does not believe this to be the best alternative as it artificially segments a continuous course of treatment into multiple episodes.

One innovation suggested by some PHNs is to establish a mechanism in the MDS collection to identify where an episode is closed to allow the person to be stepped up, or down, to a lower level of care. Specifically, the suggestion has been made that a new coding option should be added to the Episode Completion Status field to identify episodes that end due to a change in the type of care. The department will consider this as part of any changes made to the MDS in the future.

11.1.2.5. Service Contact

11.1.2.5.1. Service contact - Definition: Does the definition extend to the writing of reports to assist the client in accessing appropriate services etc (although this may not involve 2 people)?

No. See response to [Exclusion of 'non clinical' time](#).

As stated in the [Overview paper](#), 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 and:

- must involve at least two persons, one of whom must be a mental health service provider, and
- 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 another service provider.

11.1.2.5.2. Service Contact - Duration: It is unclear if the expectation is to calculate all occasions of contact for an individual consumer over an entire 24-hour day or every individual contact recorded separately. A 24-hour or full work day summation of time would be useful.

In general, it is expected that each Service Contact is reported separately. However, PHNs have discretion on how to handle multiple contacts on a single day. The approach taken will depend on how PHNs commission and remunerate service providers. We have assumed that most services will be paid on a service contacts-as-delivered basis, and thus PHNs will want to track these. But where PHNs opt to remunerate at whole-of-episode of care basis, aggregating Service Contact-Duration to whole days may be a more efficient approach.

11.1.2.5.3. Service Contact – No Show: When item “Service Contact - No Show” is selected as “Yes”, it would be useful to capture how that time of appointment was used.

The creation of the ‘No Show’ item represents a carry-over from the previous ATAPS collection, and was created at the request of the former Medicare Locals to monitor the extent to which this was impacting. As it does not represent a service contact as such, the Department does not believe it to be reasonable to require practitioners to report on how they used the ‘no show’ time.

11.1.2.5.4. Service Contact – Type: This item includes limited options of the actual service function delivered e.g., more detailed information - CBT, ACT, DBT, mindfulness etc. These are all grouped under the category of structured psychological

The approach taken in the PMHC MDS is to use a higher level grouping of interventions provided at each contact, designed to provide a simpler set of options for the practitioner to select from. More detailed lists of intervention types, where the provider is required to select from a long list of options, creates 'selection burden' on the provider and has proved of doubtful reliability. The former ATAPS system used a more detailed reporting on interventions, with practitioners reporting on the types of psychological interventions used, but this has not proved to be useful for regional or national purposes.

11.1.2.5.5. Service Contact – Type: Is it possible to obtain further examples of “structured psychological interventions” and “other psychological interventions”? e.g., where would narrative therapy fit?

The rationale for this item is explained in the [Overview paper](#), along with definitions of the following major categories:

- Assessment
- Structured psychological intervention
- Other psychological intervention
- Clinical care coordination/liaison
- Clinical nursing services
- Child or youth specific assistance NEC
- Suicide prevention specific assistance NEC
- Cultural specific assistance NEC

Exhaustive inclusion lists are not provided, but structured psychological interventions are indicated to include, but not be limited to:

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

Narrative therapy would best fit in the category 'Other Psychological interventions', defined as those psychological interventions that do meet criteria for structured psychological intervention.

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11.1.3. Questions about Standard Outcome Measures

- [Consumer experience measures](#)

- Why isn't a measure of consumer experience of services added to the PMHC MDS? This is needed to capture a person centred approach to commissioned services. Is the Department planning on developing a standard measure for use by PHNs?
- Alternative outcome measures – for severe mental illness
 - The K10 has been selected as the outcome tool across all populations. Is there scope to include an alternative measure for those with severe mental illness?
- Alternative measures – additional measures set by PHNS
 - Can the measures be extended to include the Depression, Anxiety Stress Scale (DASS) and Modified Scale Suicide Ideation (MSSI)?
- Mandatory measures – applicable to all priority areas?
 - Is the K10 and SDQ for children going to be required across all priority areas?
- Use of collection reported by Referrer
 - Does the collection occasion date (for the first outcome measure) need to correspond to the first service contact date? It is possible that the referrer may have already completed this measure with the client at time of referral.
- K5 for Aboriginal and Torres Strait Islander population
 - The definitions document details the K10+, K5 and SDQ as the possible measures but the PMHC MDS overview document only mentions the K10+ for adults and the SDQ for children and young people. Is the K5 recommended for an Aboriginal and Torres Strait Islander population?
- SDQ for 2-4 year olds
 - We collect data for younger children using the SDQ 2-4 year olds. Please clarify whether we should continue this, given that the SDQ is listed as covering only 4- 11 year olds.
- Multiple collection occasions
 - It is essential that the PMHC MDS have capacity for numerous outcome measure scores to be recorded against a single episode.
- Outcome measure date
 - To gather meaningful clinical outcome data, the PMHC MDS needs to allow a date to be added against each measure administered.
- Low intensity workers
 - Use of clinical outcome measure for low intensity interventions is questionable given non-mental health professionals will deliver this service.
- Reporting individual item scores versus subscale totals and total score
 - The ATAPS system only required totals and subscale scores to be reported but the PMHC MDS requires all individual scores to be reported. This may not be practical for many service providers because it adds a significant reporting burden.
- Statistical significance
 - Please specify whether measured changes should be statistically significant.
- MHNIP outcome measures
 - The PHMC MDS requires the K10+, K5 or SDQ to be captured, however for MHNIP the DoH 2015-16 guidelines requires providers to capture the HoNOS. Can we record HoNOS through PMHC MDS?

11.1.3.1. Consumer experience measures

11.1.3.1.1. Why isn't a measure of consumer experience of services added to the PMHC MDS? This is needed to capture a person centred approach to commissioned services. Is the Department planning on developing a standard measure for use by PHNs?

The Department has previously acknowledged the importance of capturing consumer experience of service delivery as an essential measure of service quality. Considerable work has been funded by the Department since 2010 to develop the 'Your Experience of Services' (YES) consumer survey instrument that is currently being rolled out in several state and territory mental health services and non-government agencies. However, this instrument will need modification to enable a better fit to primary mental health care services and the Department will give this consideration. It is agreed that a nationally consistent tool is highly desirable.

An important caveat is that, assuming a national tool is developed, any collection would sit outside a routine minimum data set collection. Consumer experience measures are usually offered to consumers on a voluntary, opt-in basis and are completed anonymously in way that is not linked to MDS data. They are also usually collected on a periodic basis (e.g., annually) rather than as a routine requirement of service delivery, unlike standard outcome measures.

Further work on this will be considered as a component of establishing a quality framework for primary mental health care services.

11.1.3.2. Alternative outcome measures – for severe mental illness

11.1.3.2.1. The K10 has been selected as the outcome tool across all populations. Is there scope to include an alternative measure for those with severe mental illness?

The issues entailed in the specification of mandatory outcome measures are covered in section 4.7 of the [Overview paper](#). Key selection criteria include that the core measures should be meaningful and applicable across all client groups, be capable of being used by all service providers, and reflect the client's perspective – that is, be based on self-report. The K10 is regarded as meeting all these essential elements. An important note is that the K10 is the mandatory measure used by four state and territory jurisdictions' specialised mental health services which predominantly focus on consumers with severe mental illness. Nationally, the K10+ is the consumer selfreport outcome measure that has the highest level of consumer uptake across state and territory mental health services.

Each PHN has the capacity to add additional outcome measures to their own regional data collection systems to meet local requirements but these are not necessary for reporting the national data PMHC minimum data set.

11.1.3.3. Alternative measures – additional measures set by PHNS

11.1.3.3.1. Can the measures be extended to include the Depression, Anxiety Stress Scale (DASS) and Modified Scale Suicide Ideation (MSSI)?

As per [Capturing additional data](#), each PHN has the capacity to add additional outcome measures to their own regional data collection systems to meet local requirements but these are not necessary for reporting the national data PMHC minimum data set.

11.1.3.4. Mandatory measures – applicable to all priority areas?

11.1.3.4.1. Is the K10 and SDQ for children going to be required across all priority areas?

Yes – noting that the K5 is included as an alternative to the K10 for use with Aboriginal and Torres Strait Islander clients.

11.1.3.5. Use of collection reported by Referrer

11.1.3.5.1. Does the collection occasion date (for the first outcome measure) need to correspond to the first service contact date? It is possible that the referrer may have already completed this measure with the client at time of referral.

The first Collection Occasion for the outcome measure should correspond as closely as possible to the Episode Start date. If the measure has been collected and reported by the Referrer shortly before this date, it is acceptable for those scores to be used even though it will predate the Episode Start date.

11.1.3.6. K5 for Aboriginal and Torres Strait Islander population

11.1.3.6.1. The definitions document details the K10+, K5 and SDQ as the possible measures but the PMHC MDS overview document only mentions the K10+ for adults and the SDQ for children and young people. Is the K5 recommended for an Aboriginal and Torres Strait Islander population?

The K5 is included as an alternative to the K10 for use with Aboriginal and Torres Strait Islander clients. A version of the instrument will be made available on the PMHC MDS website. The overview document will be amended accordingly to include the K5.

11.1.3.7. SDQ for 2-4 year olds

11.1.3.7.1. We collect data for younger children using the SDQ 2-4 year olds. Please clarify whether we should continue this, given that the SDQ is listed as covering only 4- 11 year olds.

There are no mandated measures for children less than 4 years of age simply because there is not yet a nationally agreed standard for this age group. Work is under way to redesign the HoNOSCA but that is not yet complete. PHNs do however have the flexibility to add additional measures to meet local requirements but these are not included in the PMH MDS.

11.1.3.8. Multiple collection occasions

11.1.3.8.1. It is essential that the PMHC MDS have capacity for numerous outcome measure scores to be recorded against a single episode.

The new arrangements will allow this. Collection Occasions between Episode Start and Episode End are termed 'Review'. There is no limit in the number of Review Collection Occasions.

11.1.3.9. Outcome measure date

11.1.3.9.1. To gather meaningful clinical outcome data, the PMHC MDS needs to allow a date to be added against each measure administered.

The data item Collection Occasion Date is included in the PMHC MDS to achieve this.

11.1.3.10. Low intensity workers

11.1.3.10.1. Use of clinical outcome measure for low intensity interventions is questionable given non-mental health professionals will deliver this service.

The mandated measures are based on consumer self-report rather than clinician-completed. They can be offered and collected by low intensity workers.

11.1.3.11. Reporting individual item scores versus subscale totals and total score

11.1.3.11.1. The ATAPS system only required totals and subscale scores to be reported but the PMHC MDS requires all individual scores to be reported. This may not be practical for many service providers because it adds a significant reporting burden.

The PMHC MDS requires individual item scores because these provide a stronger basis for understanding outcomes, and avoid the necessity for providers having to calculate subscale scores (on the SDQ). However, it is acknowledged that this may not be possible in the short term for all providers. Therefore, as a transitional step, reporting overall scores/subscales is allowed. This means:

- For the K10+, providers 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+.
- For the K5, providers can either report all 5 item scores or report the K5 total score.
- For the SDQ, providers can either report all 42 item scores or report the SDQ subscale scores.

The Department will advise PHNs of when this transitional arrangement will be ceased and individual item scores required for all measures.

Additionally, the Department is giving consideration to developing a web-based reporting arrangement that would allow the client to complete and submit the outcomes data, bypassing the need for practitioners to undertake collection and reporting.

11.1.3.12. Statistical significance

11.1.3.12.1. Please specify whether measured changes should be statistically significant.

No, the data required for the immediate future by the PMHC MDS are individual item scores, or as noted above, subscale scores and totals. These will be used to derive a range of change indicators.

11.1.3.13. MHNIP outcome measures

11.1.3.13.1. The PHMC MDS requires the K10+, K5 or SDQ to be captured, however for MHNIP the DoH 2015-16 guidelines requires providers to capture the HoNOS. Can we record HoNOS through PMHC MDS?

The PMHC MDS is designed to monitor and evaluate regional service delivery against key mental health performance indicators. The PMHC MDS does not confine PHNs to the data specified. Rather, it sets the minimum and common ground for what data are to be collected and reported for mental health services commissioned by PHNs. It is anticipated that many PHNs will seek to collect an enhanced set of data to meet local needs, however this data will not be submitted to the MDS. Therefore, a PHN can of course continue to collect additional outcome measures such as the HoNOS in relation to specific service/episode types but this is at their discretion and will not form part of the MDS at this time.

11.1.4. Questions about privacy protections and patient consent

- [Privacy and patient consent](#)
 - [\(a\) Can PHNs collect the required MDS data?](#)
 - [\(b\) Can PHNs supply the data to the Department of Health, Disability and Aging \(DoHDA\) and state and territory health departments/agencies?](#)

11.1.4.1. Privacy and patient consent

The Commonwealth Privacy Act 1988 and associated Australian Privacy Principles (APPs) in Schedule 1 of that Act set the overarching requirements for the collection and use of all personal information by organisations and entities involved in the Primary Mental Health Care Minimum Data Set (PMHC MDS). A key feature to the operation of the PMHC MDS is based on obtaining client consent to the collection, use and disclosure of their personal information.

Specific responses to two issues commonly raised are provided below.

11.1.4.1.1. (a) Can PHNs collect the required MDS data?

Under APP 3, an organisation can collect sensitive information (e.g. health information) where it is reasonably necessary for, or directly related to, its functions or activities, and the individual concerned consents to the collection, or another exception applies.

The “primary purpose” for which PHNs originally collect personal information about clients in the PMHC MDS can be broadly expressed as supporting the role of PHNs managing commissioned services. Use or disclosure by the PHNs of personal information for the secondary purpose of national information would require the individual’s consent.

As commissioners and regional planners, PHNs require a range of data to remunerate service providers as well as monitor overall regional service provision and plan future service improvements. These are all core functions of PHNs and require that PHNs collect and analyse data on what services are delivered, to what clients, at what costs and with what outcomes. Without data, PHNs cannot undertake these functions.

Additionally, most PHNs have set up centralised referral coordination points to which the GP or other referrer forwards client and referral details. This centralised function allows referrals to be processed and services selected to match the client’s needs as well as giving the PHN an efficient method for managing demand.

In line with the Privacy Principles and the PIA, the department expects that the PHNs will continue to collect and upload all non-consented client data into the regional data repository. The department and State and Territory health departments do not have access to the personal information in the regional data repository, only summary reports

11.1.4.1.2. (b) Can PHNs supply the data to the Department of Health, Disability and Aging (DoHDA) and state and territory health departments/agencies?

Provision of information to the department and state and territory health departments/agencies is necessary for governments to undertake their role in funding, monitoring and planning future service delivery.

Supply of personal information collected by PHNs to the department and state and territory health departments/agencies is governed by APP 6 which regulates how an organisation may use and disclose the health information that it collects. Under APP 6, if an organisation collects health information for a particular or ‘primary purpose’, it generally cannot use or disclose that information for a ‘secondary purpose’ unless an exception applies. A specific exception under APP 6 allows personal information to be used or disclosed for a ‘secondary purpose’ where there is client consent.

To comply with APP 3, the department is required to obtain the consent of clients before collecting health information. The department relies on PHNs to obtain this consent from a client. An item is included in the PMHC MDS to confirm that client consent for supply of their personal information to the department and state and territory health departments/agencies has been obtained. Any personal information attached to clients for whom the consent flag is not checked as ‘yes’ will not be passed to the department or state and territory health departments/agencies.

PHNs should therefore, by 30 April 2024, ensure that the consent documents and processes they establish include client consent to the provision of personal information to the Australian Government Department of Health and state and territory health departments/agencies.

It is important to note that consent is not required where data supplied by PHNs to the department and state and territory health departments/agencies does not include personal information. This applies, for example, to PMHC MDS Standard Reports that present aggregated, summary statistics on activities commissioned by each PHN.

The Department has prepared a set of standard words that can be used, or adapted as necessary, in any locally developed forms. These are available on the resources section of the PMHC MDS website (<https://www.pmhc-mds.com/resources/>).

11.1.5. Questions about Unique Identifiers and 'Keys'

- Client keys
 - Does the Department have any recommendations for assignment of the Client Key? Can the Department provide any further information regarding the process for allocation of region wide unique client identifiers?
- Episode keys
 - Could the Department provide further information about the purpose and creation of episode Keys?
- Manual data entry via MDS interface
 - Do we need to create 'keys' if we intend to enter data directly into the MDS?
- Practitioner identifiers
 - There is currently a jumble of systems for coding service providers, making it difficult to report against the 'delivered by whom' part of the complex multi-part question posed. How will this be improved?

PHNs raised a number of queries about the assignment of unique keys. Client Keys must be unique and persistent for an individual across the entire PHN. It is the responsibility of the PHN to derive a format for these fields to be used across their commissioned organisations. Practitioner, Episode, Service Contact and Outcome Collection Occasion Keys will be managed by provider organisations and will be unique at the level of the provider organisation.

An important requirement to note is that Keys (or identifiers) are strings that can have a minimum length of 2 characters and a maximum length of 50 characters. Once assigned keys cannot be changed. The purpose of keys on each of the records is to provide a unique and persistent identifier in order to allow addition, update and deletion of each individual record. Responses to specific questions are provided below.

11.1.5.1. Client keys

11.1.5.1.1. Does the Department have any recommendations for assignment of the Client Key? Can the Department provide any further information regarding the process for allocation of region wide unique client identifiers?

Client Keys must be unique and persistent for an individual across the entire PHN. It is the responsibility of the PHN to derive a format for these fields to be used across their commissioned organisations.

Some PHNs have or are already implementing centralised client identifier ('key') allocation in order to facilitate services between their contracted provider organisations.

It is recommended that at the very least PHNs ensure that Client Keys issued by provider organisations do not overlap.

11.1.5.2. Episode keys

11.1.5.2.1. Could the Department provide further information about the purpose and creation of episode Keys?

The purpose of keys on each of the records is to provide a unique and persistent identifier in order to allow addition, update and deletion of each individual record without reference to items on that record which might need to change. e.g. correcting a patient key or date. This also applies to the other record types such as client and service contact.

11.1.5.3. Manual data entry via MDS interface

11.1.5.3.1. Do we need to create 'keys' if we intend to enter data directly into the MDS?

Stage One of the PMHC MDS will only allow upload, not direct data entry. Upload files will either be produced automatically from client systems or by hand via Excel spreadsheet. Therefore, all organisations uploading data to the PMHC MDS will need to provide keys for each record. Where data is being exported from client systems, these keys can be auto generated, provided that a key does not change once it is assigned to an item.

11.1.5.4. Practitioner identifiers

11.1.5.4.1. There is currently a jumble of systems for coding service providers, making it difficult to report against the 'delivered by whom' part of the complex multi-part question posed. How will this be improved?

The new MDS specifications include separate unique keys for Provider Organisation and Practitioner which are intended to resolve this problem

11.1.6. Questions about PHN access to the Data Warehouse

11.1.6.1. Data Warehouse

11.1.6.1.1. Data entered into PMHC data set will be stored in a national data warehouse. Will all of the information be accessible by PHN's for benchmarking and service development/collaborative purposes?

PHNs will have access to all de-identified data pertaining to their services but will not have access to the information of other PHNs.

Benchmarking and service development reports will be developed in a subsequent development stage with input from appropriate stakeholders.

11.1.7. Questions about Implementation and Support

- Support to developers
 - Will the Department be providing further support to system developers to ensure that they are able to develop their clinical systems in line with the revised MDS specification?
- Staging:
 - We would seek assurance from the Department that there is sufficient lead time for system developers to refine systems in line with these new requirements.
 - Is year one a baseline data gathering year as opposed to there being any expectation to manage providers against levels of activity not fully understood due to the extended MDS requirements?
- Support to PHNs to engage providers
 - Can the Department offer assistance to PHNs in terms of creation of a spreadsheet suitable for storing and uploading collected data
 - PHNs would desirably see the actual mechanics of the MDS hands-on prior to wider release. Successful roll-out will depend on how well PHNs are able to communicate and support providers. We suggest the department conducts PHN specific webinars and training for key nominated staff
- Data capture via the web-based portal
 - With the data being submitted via the web based portal – does the web based portal also allow PHN's to use this as their data capture tool as well?

11.1.7.1. Support to developers

11.1.7.1.1. Will the Department be providing further support to system developers to ensure that they are able to develop their clinical systems in line with the revised MDS specification?

System developers will have access to the following resources:

- API documentation online
- Test accounts on both staging and production systems
- Offline data validation for ease of testing extracted datasets
- Access to help desk via e-mail. Telephone support will be provided where the issue can't be resolved via email
- Developer announcement mailing list to notify developers of pending changes and issues

11.1.7.2. Staging:

11.1.7.2.1. We would seek assurance from the Department that there is sufficient lead time for system developers to refine systems in line with these new requirements.

The Department is aware that developers will need sufficient lead time to make the required system changes and/or additions.

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. This date has not yet been specified.

Data for services 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.

11.1.7.2.2. Is year one a baseline data gathering year as opposed to there being any expectation to manage providers against levels of activity not fully understood due to the extended MDS requirements?

The Department is aware that 2016-17 is a transitional year and will not provide sufficiently comprehensive data to serve as a baseline for monitoring future activity. 2017-18 is expected to serve as the baseline year for comprehensive data collection.

11.1.7.3. Support to PHNs to engage providers

11.1.7.3.1. Can the Department offer assistance to PHNs in terms of creation of a spreadsheet suitable for storing and uploading collected data

Yes – Excel data entry templates for submission are provided on the PMHC MDS website. Visit Upload Specifications [File format](#).

11.1.7.3.2. PHNs would desirably see the actual mechanics of the MDS hands-on prior to wider release. Successful roll-out will depend on how well PHNs are able to communicate and support providers. We suggest the department conducts PHN specific webinars and training for key nominated staff

Online support documentation is currently being created around the data specification and online portal. In addition, the Department is currently in negotiations with external providers to supply ongoing support and training for the system. Further details of these arrangements will be made available subsequent to the finalisation of these arrangements.

11.1.7.4. Data capture via the web-based portal

11.1.7.4.1. With the data being submitted via the web based portal – does the web based portal also allow PHN's to use this as their data capture tool as well?

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. Data may be uploaded in either Excel or CSV format.

During phase 2 a full data entry capacity will be added. This is expected to be ready for the 2017-18 financial year.

11.1.8. Questions from Clients

- Why are my data collected and how are they used?
- What is a Primary Health Network (PHN)?
- What happens to my data?
- Who can access it?
- Can I change my consent?
- What data are collected?
- Can I refuse to answer any questions?
- Can I still access services if I do not consent to sharing my data?
- Where does my data go?
- What is the role of the Australian Government?
- What does it mean that my data are de-identified? Can I be identified from my data?
- Who do I contact if I have any questions?
- Can I have my data removed/deleted from the Data Set?
- Can my data be shared with other departments e.g. Centrelink?
- What is good about agreeing to provide data?
- What does 'informed consent mean'?
- Where are my data stored?

This FAQ was developed for PHNs and their commissioned service providers to share with clients to explain the Primary Mental Health Minimum Data Set and how data are collected, stored and used.

11.1.8.1. Why are my data collected and how are they used?

As part of providing services to you, your mental health service provider will collect some information about you and the services you are accessing. This will be kept by the provider and will be primarily used to keep up-to-date details about your needs. This data also helps your service provider understand how their mental health services are being used, so they can work to improve those services.

Your personal information will not be shared with anyone apart from you, your service provider, and your Primary Health Network (PHN), which funds your service provider. Your information will not be disclosed to any other person, organisation or agency, unless you consent, or where disclosure is authorised or required under privacy law (such as in the case of a medical emergency).

Your service provider stores data to ensure they can provide the best possible services. If you give consent, your de-identified data will be provided to the Australian Government Department of Health (Health) to help them monitor and evaluate the services that are provided to you. They may also use your data to help improve the planning and future funding of mental health care services by the PHN and Health.

11.1.8.2. What is a Primary Health Network (PHN)?

PHNs were established by Health to fund health services in your local community, including your mental health service provider. More information about PHNs can be found on the Health website at:

<https://www.health.gov.au/our-work/phn>.

PHNs collect data about the services you receive to help with future planning for health services, and to improve the quality of mental health services in your local area.

11.1.8.3. What happens to my data?

If you have given consent, your data will be provided electronically to Health through the Primary Mental Health Care Minimum Data Set (Data Set). The data are de-identified by removing personally identifying information, such as your name and address, before they are provided to Health.

The data are stored securely in Australia by an IT organisation called Logically, which has been contracted by Health to manage the Data Set securely on its behalf.

Data may also be stored by your service provider and/or your PHN in their client information systems. If you would like more information about how your data is used and stored, please ask your service provider for more details about their data storage and privacy policies. [Service provider to add details of privacy policy here]. For further details about the de-identification of data, please see [What does it mean that my data are de-identified? Can I be identified from my data?](#).

If you do not consent for your data to be included in the Data Set, certain information about your service will still be collected and used in summarised reports. Health use this information to understand the overall number and types of services being provided. You will not be able to be identified from these reports.

11.1.8.4. Who can access it?

Your data can be accessed by:

- Your mental health service provider – The organisation who is providing your care. They work in partnership with your local Primary Health Network (PHN).
- Your local PHN – This organisation is funded by Health to engage mental health services from suitable health service providers in your local area. They are responsible for ensuring services are effective, efficient and meet clients' needs.
- Health – From time to time, Health may share the data with third parties for the purpose of program evaluation. Where this is the case, additional protections are put in place to ensure your privacy.
- Logicy – This organisation manages the secure IT system where your data are stored and protected. Your data is stored securely in Australia. Trained and authorised analysts at Health use the data by accessing this secure IT system.

11.1.8.5. Can I change my consent?

Yes. You can choose to change or withdraw your consent for Health to access your data through the Data Set at any time. Please contact your service provider if you wish to change or withdraw your consent and your data will be removed from the Data Set.

11.1.8.6. What data are collected?

When your data are added to the Data Set, Health collects and securely stores information from your service provider about: your service provider organisation, the practitioner who is delivering services to you (not including their name), and the services they provided. This may also include the following information about you:

- Your date of birth
- Your gender
- Your marital status
- Whether or not you identify as Aboriginal and Torres Strait Islander
- Your country of birth and main language spoken at home
- Your postcode and type of residence
- Information about your employment and source of income, including if you receive any pensions or benefits
- Whether you have a health care card, or are participating on the National Disability Insurance Scheme (NDIS)
- Date of your referral and who referred you
- Whether you have a GP Mental Health Treatment Plan (if applicable)
- Your main mental health diagnosis, and any other diagnoses
- Whether or not you are taking certain types of medications for a mental health condition.

Your service provider may also provide your results from one (or more) outcome questionnaires, which will help to determine if their services are working for you.

11.1.8.7. Can I refuse to answer any questions?

Yes. Even if you have provided consent for your data to be shared with Health, you do not have to provide any information you don't feel comfortable with sharing. This includes using a pseudonym (a made-up name), if you wish.

11.1.8.8. Can I still access services if I do not consent to sharing my data?

Yes. You do not have to provide consent to share your data in order to receive services. If you prefer not to have your data shared, please contact your service provider. Your service provider will continue to provide services to you, even if you choose for your data to not be provided to Health.

11.1.8.9. Where does my data go?

When your data are sent to the Data Set, they are held in a secure data storage system (managed by Logically) which is housed in Australia. Only authorised people will be able to see your data.

11.1.8.10. What is the role of the Australian Government?

The Australian Government, through Health, funds PHNs to commission health services in your local area. The Australian Government uses data about PHN funded service delivery to monitor and evaluate whether PHNs are achieving their goals, and to assist in improving mental health services in Australia.

11.1.8.11. What does it mean that my data are de-identified? Can I be identified from my data?

When your data are de-identified, this means that information with direct identifiers such as your name, address and Medicare number are excluded, and only information like your date of birth, gender, and the types of services you received records are collected.

Removing this information makes it extremely unlikely that you will be identified, however that does not mean there is no possible way for you to be identified. To provide additional protections, Health has a range of security controls in place to protect its data from unauthorised access such as restricted IT security and only providing access to authorised users for approved purposes. Health puts protections in place to ensure any use of the data does not seek to identify you.

11.1.8.12. Who do I contact if I have any questions?

If you have any questions about the use of your data, please contact your service provider. [Service provider to add contact details here and link to privacy policy for information].

11.1.8.13. Can I have my data removed/deleted from the Data Set?

Yes. If you withdraw your consent, no further information will be added to the Data Set. However, as data in the Data Set does not contain information that can be used to identify you, only your service provider can remove or edit your individual data.

11.1.8.14. Can my data be shared with other departments e.g. Centrelink?

The Government may share data reports with other departments and organisations from time to time. However, data are only used for monitoring service performance, and improving the planning and funding of future mental health services.

Any data shared by Health are de-identified. This means all personally identifying information is removed, ensuring you will not be able to be identified as an individual.

11.1.8.15. What is good about agreeing to provide data?

The data that are collected through the Data Set plays an important role – it helps plan services and programs to improve mental health care in Australia. The data are also used to evaluate programs and services, to find out how well they are working and what needs to be done to make them work better.

11.1.8.16. What does 'informed consent mean'?

In this context, informed consent means that you clearly understand why your information is being collected and how it will be handled. It also means that you agree to your data being provided to the Data Set.

Providing consent for your data to be provided to Health should always be voluntary. It is important that you are given adequate information about the use of your information before you provide consent. If you are under the age of 18, your service provider will be able to determine your capacity to consent. Informed consent for people under the age of 15 must be obtained from a parent or authorised caregiver. Please ask your service provider if you need any further information to make an informed decision.

If you do not consent for your data to be included in the Data Set, certain information about your service will still be collected and used in summarised data reports. These reports help Health understand the overall number and types of services provided. You will not be able to be identified from these reports.

11.1.8.17. Where are my data stored?

Your data may be stored in up to four places, depending on who you consent to sharing your data with, including:

- In a secure client information management system. This is a type of medical/health records system owned either by your PHN or mental health service provider.
- In your PHN's secure data storage systems

- In Strategic Data's secure data storage systems
- In Health's secure data storage systems (only if you consent).

All data held by Health and Logicly are stored in Australia [PHN to add details on their data storage policy here].

11.1.9. Miscellaneous Questions

- Clients/consumer terminology
 - The terms 'patient', 'client' and 'consumer' are used interchangeably in the documentation. Consultation indicates a preference for the term "consumer".
- Provisional Psychologists
 - Can provisional psychologists provide services under supervision in priority area 3?
- Referrer postcode
 - It would also be useful to collect the postcode of the referrer to understand referral patterns across and within regions.
- Multiple episodes
 - When patients receive services under multiple funding areas is the data recorded against a separate episode of care for each service? For eg: a young person is receiving care through a headspace site (priority area 2) yet has an acute episode and requires services for a follow up around a suicide attempt- (Priority area 5) is the MDS data uploaded against both priority areas?
- Data collection responsibility
 - Does the referrer of clinical provider collect the sociodemographic and clinical data? If the former, this may not be acceptable to GPs

11.1.9.1. Clients/consumer terminology

11.1.9.1.1. The terms 'patient', 'client' and 'consumer' are used interchangeably in the documentation. Consultation indicates a preference for the term "consumer".

The Department acknowledges the importance of language in describing those who use mental health services and that 'consumer' is the current preferred term in the sector. However, for the purpose of specifying the PMHC MDS, the term 'client' is used in the technical specifications. This does not imply that the term 'consumer' should not be used in PHN communications with stakeholders.

11.1.9.2. Provisional Psychologists

11.1.9.2.1. Can provisional psychologists provide services under supervision in priority area 3?

Provisional Psychologists fall within the broader Practitioner category of 'low intensity workers'. These are defined as "individuals with appropriate competencies but who do not meet the requirements for registration, credentialing or recognition as a mental health professional". The deployment of low intensity workers is at the discretion of PHNs, but of course depends on suitable clinical supervisory arrangements being in place.

11.1.9.3. Referrer postcode

11.1.9.3.1. It would also be useful to collect the postcode of the referrer to understand referral patterns across and within regions.

Referrer postcode is not regarded as essential for the national data and thus not included in the PMHC MDS. However, PHNs have the discretion to add this as additional information collected at regional level.

11.1.9.4. Multiple episodes

11.1.9.4.1. When patients receive services under multiple funding areas is the data recorded against a separate episode of care for each service? For eg: a young person is receiving care through a headspace site (priority area 2) yet has an acute episode and requires services for a follow up around a suicide attempt- (Priority area 5) is the MDS data uploaded against both priority areas?

The business rules for Episodes are stated in the MDS specifications. Episodes are defined at the level of the Provider Organisation, not the funding source. A client can only have one episode at a time **for any given Provider Organisation**. Or course, if two Provider Organisations are delivering services simultaneously, one episode would be created by each Provider Organisation.

Each Episode is classified according to a single 'Principal Focus of Treatment Plan'. This may be changed in the course of an episode if the original code entered changes during the course of treatment.

11.1.9.5. Data collection responsibility

11.1.9.5.1. Does the referrer of clinical provider collect the sociodemographic and clinical data? If the former, this may not be acceptable to GPs

While referrers will continue to provide some information as part of the referral process, it is the responsibility of the Practitioner and Provider Organisation to ensure the integrity of data submitted to the PMHC MDS. Most of the data required would normally be collected as part of the assessment process by the Practitioner. GPs are not expected to provide the full set of sociodemographic data.

11.2. System Frequently Asked Questions

11.2.1. Accessing the PMHC Minimum Data Set

- [What internet browser should I use?](#)
- [How do I get started using the MDS?](#)
- [How do I obtain access to the PMHC MDS?](#)
- [What is required for the Letter of Authority?](#)
- [When is a Letter of Authority required?](#)
- [What can a user see in the MDS?](#)
- [Can I pass on my username and password to my organisation's IT person or evaluator if they are entering data?](#)
- [Can I add an existing user to another PHN or Provider Organisation?](#)

- Why did I get this message when inviting a user - 'An error occurred: Inviting user failed: An outstanding PMHC MDS invite exists'?
- What should I do if a user didn't receive the email invitation?
- Can GPs or Mental Health Providers (MHPs) access the MDS to upload data themselves?
- I'm a third-party software developer developing software to assist with uploading data to the MDS. Can I have an account to test my data uploads?
- Can I have an account to test adding data and for training new staff?
- I forgot my password. What do I do?
- How can I update my user details?
- How can I recover my password or username?

11.2.1.1. What internet browser should I use?

You can access the PMHC MDS using any up-to-date evergreen browser, like the following:

- Chrome (version 78+)
- Microsoft Edge (version 78+)
- Firefox (version 68+)
- Safari (version 13+)

Please note: Internet Explorer is no longer supported.

11.2.1.2. How do I get started using the MDS?

Each individual staff member should be set up with their own unique login access. It is inadvisable to set up and use generic login accounts within the PMHC MDS, and usernames / passwords should not be shared with other individuals. This ensures that when a staff member leaves, their access can be easily disabled without affecting other users or data security. A user's account should not be passed from one staff member to the next.

Refer to [How do I obtain access to the PMHC MDS?](#) for information on getting an account on the MDS.

The PMHC website is available at <https://pmhc-mds.com/>. Here you will find documentation on using the MDS.

The MDS is accessed on the web at the following address: <https://pmhc-mds.net/>

11.2.1.3. How do I obtain access to the PMHC MDS?

Access to the PMHC MDS is based on roles. Each role allows a user to perform specific tasks, and a user can be assigned multiple roles. Each role is granted for a user against an organisation. An organisation can either be a Primary Health Network (PHN) or a Provider Organisation. If a user is granted a role for a PHN they will also have this role for any Provider Organisations of that PHN. A user can be invited to have a role at more than one organisations.

See [Users Roles](#) for a summary of each of the roles that currently exist within the PMHC MDS.

User accounts can be created by a user at your PHN or provider organisation who has the User Management role. If unsure who this is, please contact support@pmhc-mds.com to find out who has this access.

Alternatively, if you cannot contact any users who have the User Management role access can be gained by producing a [letter of authority](#).

11.2.1.4. What is required for the Letter of Authority?

A **letter of authority** is a written request made on your Primary Health Network or Provider Organisation's letterhead which must be signed by an authority at the Primary Health Network or Provider Organisation who holds a position that is higher than the person for whom the account is being created (i.e., the person's manager or the CEO).

This letter must contain the following details (for the person for whom the MDS access is being requested/changed):

1. Name
2. Email address
3. Contact telephone number
4. The exact Primary Health Network or Provider Organisation's name in the MDS you are seeking to access
5. For new profiles, the roles required for the user. (See [Users Roles](#) for a summary of each of the roles that currently exist within the PMHC MDS.)
6. For existing profile updates, list the email being changed, what it was and what it should be changed to

This letter must be scanned and then emailed to support@pmhc-mds.com.

Refer to [When is a Letter of Authority required?](#)

11.2.1.5. When is a Letter of Authority required?

The protocol for the PMHC MDS Helpdesk to set up a new account or change an existing account requires a formal [letter of authority](#).

When there are no existing users with the 'User Management' role at a PHN, the protocol for setting up a new account to access this role, or granting this role to an existing user, requires a written letter of authority by that PHN. Refer to [How do I obtain access to the PMHC MDS?](#)

This protocol will also apply when a user is requesting an update to their profile details when they are unable to log in. The [Updating your details](#) process via the MDS login screen is the preferred method for a user to update their own details.

The same protocol applies if a new MDS user requires MDS access using a past users MDS access or email address. However, in this case it is advised that the new MDS user has a new username and password issued to protect the privacy and security of the organisation's data. Refer to [How do I get started using the MDS?](#).

11.2.1.6. What can a user see in the MDS?

What you see after you login will depend upon the roles to which you have been assigned.

Refer to [Users Roles](#) for more information.

11.2.1.7. Can I pass on my username and password to my organisation's IT person or evaluator if they are entering data?

No, each user should be issued with their own username and password.

Refer to [How do I obtain access to the PMHC MDS?](#)

11.2.1.8. Can I add an existing user to another PHN or Provider Organisation?

Yes, a user can have roles at more than one organisation.

By ensuring you enter the same email when completing the invitation steps in [Adding an existing user](#), the system will automatically pick up if a user already exists in the PMHC MDS and will grant them access to the additional organisation.

11.2.1.9. Why did I get this message when inviting a user - 'An error occurred: Inviting user failed: An outstanding PMHC MDS invite exists'?

An invitation will be valid for 7 days. This user has previously been invited and has not yet completed the required steps for [Accepting an invitation to become a PMHC MDS User](#).

See [Viewing a user's invitation details](#).

11.2.1.10. What should I do if a user didn't receive the email invitation?

First confirm that you have the users correct email address. See [Viewing a user's invitation details](#).

- If the email is incorrect, you will be able to [Delete an invitation](#) and then send a new invitation.
- If the email is correct, ask the user to double check their junk mail folder and search for an email sent from noreply@logicly.com.au.

You can [Reissue an invitation](#). When you reissue an invitation, the email is sent again to the invitee.

If the email still doesn't arrive, please contact the Helpdesk on support@pmhc-mds.com

11.2.1.11. Can GPs or Mental Health Providers (MHPs) access the MDS to upload data themselves?

Yes, GPs and MHPs can access the MDS to upload their data directly into the system. However, it is not possible to limit their data access to the select data fields that they would normally manage. For example, MHPs would normally only need to enter or edit their own client information and the episodes and service contacts associated with these clients.

However, it is not possible to restrict their access only to their own clients' data. They will be able to modify data for clients across their entire provider organisation. Therefore, MHPs who access the MDS could potentially change data for a client that is not their own.

Refer to [Users Roles](#).

11.2.1.12. I'm a third-party software developer developing software to assist with uploading data to the MDS. Can I have an account to test my data uploads?

Yes, we can supply you with an account that has access to a test Primary Health Network. Please refer to information about our [Developers](#) environment.

11.2.1.13. Can I have an account to test adding data and for training new staff?

Yes, please refer to information about our [Developers](#) environment.

11.2.1.14. I forgot my password. What do I do?

See [Forgotten or Expired Password](#).

11.2.1.15. How can I update my user details?

If your name or email address has changed, it is important that you update your account. See [Updating your details](#).

11.2.1.16. How can I recover my password or username?

The system offers an automated password/username recovery feature. The system will email the registered email address on your account.

See [Forgotten or Expired Password](#) for instructions on resetting your password.

It is important to keep your email address current so that you can make use of this facility. If you can no longer access the PMHC MDS please email the PMHC MDS Helpdesk at support@pmhc-mds.com to update your email address.

Please note, when contacting the PMHC Helpdesk you will be asked to arrange for a [letter of authority](#) stating the change(s) required. Refer to [What is required for the Letter of Authority?](#)

11.2.2. Entering data in the PMHC Minimum Data Set

- [What is the best way to manage the client key?](#)
- [Can you suggest a best practice approach to managing client keys?](#)
- [Why can't we use the SLK as the client key?](#)
- [How will the Master Client Index work?](#)
- [How often should I enter data into the MDS?](#)
- [Can I enter fictitious data as a part of testing?](#)
- [How do I find or create a Client's Statistical Linkage Key \(SLK\)?](#)
- [How do I find what the Episode Key, Service Contact Key and Outcome Collection Occasion Key is?](#)
- [How do I find what my Practitioner Key is?](#)
- [How can I edit a record's identifying key?](#)
- [How do I enter a referral?](#)
- [How do I enter a K10+, or K5, or SDQ?](#)
- [How can I delete a record I incorrectly entered?](#)
- [Can I go back and enter information if I don't have it at the time?](#)
- [Do I enter a Service Contact when a client doesn't show up for the session?](#)
- [If the client is referred elsewhere \(e.g. not suitable for this service\) should this be recorded?](#)
- [Why is an episode showing as uncommenced?](#)
- [How can I close an episode?](#)
- [What do I do if the GP / mental health provider has not given an answer to one or more questions in the minimum dataset?](#)
- [What are the options where the information collected does not fit into the available fields?](#)
- [The PHMC MDS specifications seems limited. Can we capture and record additional data?](#)
- [Where do I enter MHNIPS data collection?](#)
- [How can I capture client services under the 2020 Australian Government Mental Health Response to Bushfire Trauma?](#)
- [I have an error message but no idea what it means or how to fix it. What should I do?](#)

11.2.2.1. What is the best way to manage the client key?

The Client Key needs to be stable for each individual within the provider organisation.

The PHN may decide to play a role in coordinating assignment and management of these keys for provider organisations.

See data specifications for [Identifier management](#).

11.2.2.2. Can you suggest a best practice approach to managing client keys?

We understand that PHNs and provider organisations will approach [Identifier management](#) in various different ways to best suit their practice. We suggest speaking with your PHN or another provider organisation in your network to understand their approach to managing their client keys.

Refer to the Department's response to [Questions about Unique Identifiers and 'Keys'](#).

11.2.2.3. Why can't we use the SLK as the client key?

The client key is required to be a unique client identifier. The SLK isn't a unique key and therefore not suitable to be used as the client key.

Refer to data specifications for [Identifier management](#).

11.2.2.4. How will the Master Client Index work?

The previous PMHC MDS specification required a client key that was unique and stable at the PHN regional level, not at the provider organisation level. The purpose of the master client index was to help PHNs and their provider organisations manage client information across the PHN region. This requirement proved problematic for PHNs and was worked through by the PMHC MDS working group.

To determine what issues existed with managing the client key and possible solutions, nine PHNs worked with Logicy (then Strategic Data) to describe their models for triaging patients, the information systems being used by PHNs and Provider Organisations, the ease of updating information systems and resources available for manual reconciliation of clients.

As a result of this work, a master client index is not possible at this time, and as such, will not be a requirement for full compliance from 1 July 2017.

See [Master Client Index](#).

11.2.2.5. How often should I enter data into the MDS?

Refer to [Reporting timeliness](#).

11.2.2.6. Can I enter fictitious data as a part of testing?

The MDS is live and data uploads will be recorded. Real PMHC data can be trialled by uploading in test mode, whereas fictitious data should be trialled with a test organisation on [developers.pmhc-mds.net](#).

See [PMHC Developers Announcement](#).

11.2.2.7. How do I find or create a Client's Statistical Linkage Key (SLK)?

If you don't have an internal system that can provide you with the client's SLK, an SLK generator is available within the client data entry forms. Refer to the online User Guide [Adding a New Client](#).

There is also a manual statistical linkage key generator available on the PMHC MDS website, under the Tools tab - <https://pmhc-mds.net/#/slk>. See [SLK](#).

11.2.2.8. How do I find what the Episode Key, Service Contact Key and Outcome Collection Occasion Key is?

The [Episode Key](#), [Service Contact Key](#), and [Outcome Collection Occasion Key](#) are the system [unique identification keys](#) that will need to be manually created and managed by your provider organisation.

Each record needs to be assigned a stable unique key within the provider organisation, in order to facilitate adding/updating/deleting each item when entering data.

See data specifications for [Identifier management](#).

11.2.2.9. How do I find what my Practitioner Key is?

The practitioner key is one of the system [unique identification keys](#) that will need to be manually created and managed by your provider organisation.

Data entry users can add a practitioner once they know their key. Refer to the online User Guide [Adding a Practitioner](#).

11.2.2.10. How can I edit a record's identifying key?

Each record needs to be assigned a stable unique key within the provider organisation, in order to facilitate adding/updating/deleting each item when entering data.

You can edit a record's identifying key you have entered within the data entry interface. There is an edit key button available when editing a records details.

See:

- [Editing a Practitioner Key](#)
- [Editing a Client Key](#)
- [Editing an Episode Key](#)
- [Editing a Service Contact Key](#)
- [Editing a Collection Occasion Key](#)

11.2.2.11. How do I enter a referral?

A referral can be entered as an [Episode](#).

An episode does not need to be concluded if the client requires as a new referral. If the treatment continues with a client, the service contacts can continue to be recorded to the original episode until treatment is formally concluded either clinically or administratively.

Refer to the online User Guide [Episodes](#).

11.2.2.12. How do I enter a K10+, or K5, or SDQ?

These measures tools, K10+, K5 and SDQ, are entered as an [Outcome Collection Occasion](#).

Refer to the online user guide [Outcome Collection Occasions](#).

11.2.2.13. How can I delete a record I incorrectly entered?

You can delete a record you have entered within the data entry interface. There is a delete button available when viewing a records details.

However, if the record you are trying to delete has any dependant records, you will not be able to proceed with deleting the parent record until all the related dependant records have been edited or deleted.

See:

- [Deleting a Practitioner](#)
- [Deleting a Client](#)
- [Deleting an Episode](#)
- [Deleting a Service Contact](#)
- [Deleting an Outcome Collection Occasion](#)

11.2.2.14. Can I go back and enter information if I don't have it at the time?

Yes, the MDS allows you to go back and enter information at a later date.

When data in the upload has the same identification key as recorded in the MDS, (e.g. client, practitioner, episode, service contact, and outcome collection keys) the data will automatically be updated for these files. The number of files present, created, and updated, are summarised on the successful upload notification email.

Refer to upload specification [File format](#).

11.2.2.15. Do I enter a Service Contact when a client doesn't show up for the session?

Yes. A service contact record has a 'No Show' field and selecting the value 'Yes' indicates that the intended participant(s) failed to attend the appointment.

Some of the other service contact fields have a 'no show' option available to be selected. For any other service contact fields, please enter the response that would have been entered if the participant had attended the session.

You can decide to enter as much information as possible within a no show form, as long as it meet the 'No Show' [validation guidelines for a service contact](#).

Refer to [Service Contact](#).

11.2.2.16. If the client is referred elsewhere (e.g. not suitable for this service) should this be recorded?

This decision depends upon your local guidelines.

Under the new PMHC MDS, an episode does not formally commence until the client receives their first service contact. For referrals that do not lead to a service contact, and where the person is referred elsewhere, there is no need to open an episode.

However the Department understands that many PHNs are likely to want to do this as a means to track referrals that do not lead to service contacts, or to begin entering data prior to the first service contact. Therefore, an episode can be set up in the system, even if it does not lead to a service contact. Standard reports to be developed will build in capacity to monitor these and ensure that they are not counted in service delivery indicators.

Where a referral is followed by an initial service contact, and the person is referred elsewhere due to being assessed as not suitable, or requires an alternative service, a new code for **Episode - Completion Status** has been added ('Episode closed administratively - client referred elsewhere').

11.2.2.17. Why is an episode showing as uncommenced?

The episode definition states that 'Episodes commence at the point of first contact. The episode start date will be derived from the first service contact date.'

When an episode does not have any service contacts added yet, it does not have a start date and the system will reported it as 'Uncommenced'.

Refer to [Episode](#).

11.2.2.18. How can I close an episode?

To close an episode, you can edit a client's episode details and enter an 'Episode - End Date' and update the 'Episode - Completion Status' value.

Refer to [Editing a Client's Episode data](#).

11.2.2.19. What do I do if the GP / mental health provider has not given an answer to one or more questions in the minimum dataset?

Provider organisations should make every effort to ensure that the data entered into the MDS is as complete as possible. However, most data items specify a 'Missing' response. Where information is unavailable, please use this response item. The aim is to minimise missing data as much as possible.

Refer to [Record formats](#) for more information. By clicking the field name this will take you to the field definition which outlines the associated notes that provide guidance on the most suitable response.

11.2.2.20. What are the options where the information collected does not fit into the available fields?

Each data item has associated notes that provide guidance on which response to use. By clicking on the [Record formats](#) field name this will take you to the field definition which outlines the associated notes.

Refer to [Record formats](#).

11.2.2.21. The PHMC MDS specifications seems limited. Can we capture and record additional data?

PHNs can choose to capture and record additional data outside the PMHC MDS.

See [Can the PMHC MDS capture and record additional data?](#).

11.2.2.22. Where do I enter MHNIPS data collection?

The Department of Health is expecting all commissioned Mental Health Nursing services data from July 2016 to be entered into the PMHC MDS.

Refer to the Department's response to [Are services previously delivered under MHNIP expected to collect the PHMC MDS?](#).

11.2.2.23. How can I capture client services under the 2020 Australian Government Mental Health Response to Bushfire Trauma?

The Department has recently announced the "Australian Government Mental Health Response to Bushfire Trauma". From January 2020, there is now a reserved **Episode Tag** !br20 that can be easily selected or added to an Episode record if a new or existing client receives any services that meet the reporting requirements.

While services funded under the response must report in-scope activity using this tag, all PHNs may use this tag.

Refer to [Reserved Tags](#) - !br20.

11.2.2.24. I have an error message but no idea what it means or how to fix it. What should I do?

Refer to [Record formats](#) for more information. Clicking the field name will take you to the field definition, which outlines the associated notes that provide guidance on the response to use. It will also inform you if there are any interrelated field requirements that can cause data errors.

If you are still unsure, please email the PMHC helpdesk on support@pmhc-mds.com and provide a description of where the error occurred, a screenshot if possible, and the error log number. The error log number is displayed at the end of the error message, e.g. [BVDS105Q], and will assist for the helpdesk in quickly identifying the error and providing you with a clear response about how to rectify the issue.

11.2.3. Uploading data

- [How do I obtain a template to upload my data to the MDS?](#)
- [What do I do if I have collected the data in Excel or Access?](#)
- [Should an upload file only contain new or changed data or should it contain all cumulative data from the start of service delivery?](#)
- [How can I edit a record I have previously uploaded?](#)
- [How can I delete a record I have previously uploaded?](#)
- [How can I review why the status of my upload file shows error?](#)
- [How can I view my uploaded data?](#)
- [How do I upload the individual CSV files?](#)
- [How do I fix upload file errors?](#)
- [How do I fix data errors in an upload?](#)
- [Has my data uploaded if my file has an error status?](#)
- [Will valid data be accepted if there are errors in the file?](#)
- [If validation rules change how will you treat legacy data?](#)
- [I am receiving an upload error that has a code that is not in my records. What should I do now?](#)
- [I am receiving an unknown error in my records. How can I fix this?](#)
- [Why am I receiving an error saying I don't have permission to upload organisation data?](#)
- [Why am I receiving an error saying 'Could not find worksheet \[Name\]'?](#)
- [Why am I receiving an error saying 'Column \[Name\] is not valid'?](#)
- [Why am I receiving an error saying 'Organisation_path is not valid on row ...'?](#)
- [Why am I receiving an error saying 'PMHC MDS does not support version 1'?](#)
- [Why am I receiving an error saying 'Column \[Name\] is required on row ...'?](#)
- [Why am I receiving an error saying 'Invalid file ...'?](#)
- [Why am I receiving an error saying 'Could not parse worksheet \[Name\]: Bad request at ...'?](#)

11.2.3.1. How do I obtain a template to upload my data to the MDS?

Upload templates are available from [Upload specification](#).

11.2.3.2. What do I do if I have collected the data in Excel or Access?

Visit the online MDS documentation regarding uploads where a detailed user guide for data uploads is available.

See [Upload specification](#).

11.2.3.3. Should an upload file only contain new or changed data or should it contain all cumulative data from the start of service delivery?

All data should be uploaded for the first upload, but subsequently only new or changed data should be uploaded. However, parent records of new or changed data also need to be uploaded in order to keep the file internally consistent.

An example of what this means is that if a service contact record is added or changed, there must be a corresponding episode record in the episode file and a client record in the client file, even if the episode and client data hasn't changed. Also, as service contacts refer to practitioners, there must also be a practitioner record in the practitioner file.

11.2.3.4. How can I edit a record I have previously uploaded?

There is a unique identifying key associated with every record in the PMHC MDS. When you upload a record with the same unique identifying key with updated data, the MDS will recognise the record's key and update the data already recorded in the system.

When the upload has completed successfully, you will see a summary of the updated records shown in the 'Upload Change Summary' table displayed in the View Upload Details for complete uploads. See [Complete uploads](#).

11.2.3.5. How can I delete a record I have previously uploaded?

You can delete records via upload.

Please refer to [Deleting records](#).

11.2.3.6. How can I review why the status of my upload file shows error?

If the status of your file shows error, you can view the returned errors through Viewing Previous Uploads.

Refer to [Error messages](#).

11.2.3.7. How can I view my uploaded data?

When the upload has completed successfully, you will see a summary of the updated records shown in the 'Upload Change Summary' table. See [Complete uploads](#).

If you have the reporting role, you can produce system reports or extract recorded data. See [Reports](#).

11.2.3.8. How do I upload the individual CSV files?

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 All the required CSV files must be included for each upload, even if the file contains no data. If choosing to include any optional CSV files, these must be included with the required files in the single upload zip file.

See [Upload specification](#).

11.2.3.9. How do I fix upload file errors?

Refer to [Correcting upload errors](#).

11.2.3.10. How do I fix data errors in an upload?

Refer to [Record formats](#) related to column name for each error. By clicking on the field name this will take you to the field definition which outlines the associated notes that provide guidance on which response to use.

If still unsure, please email the PMHC helpdesk on support@pmhc-mds.com and provide a copy of the error email, and/or a screenshot if possible. The error email is very important for the Helpdesk to quickly identifying the error and to provide you with a clear response on how to rectify the data issue.

11.2.3.11. Has my data uploaded if my file has an error status?

No. Only 'Complete' uploads that are not in test mode, are recorded in the PMHC MDS.

See [Viewing Previous Uploads](#).

11.2.3.12. Will valid data be accepted if there are errors in the file?

For example, if we upload 200 lines of service contacts, and there are validation errors in 10 lines - will 190 lines be accepted?

No. All files and records in an upload have to validate before any data is accepted.

11.2.3.13. If validation rules change how will you treat legacy data?

When implementing new validation rules or changing existing rules, where possible we prefer to enforce the new rules as of a certain date.

For example, if a data field that is now optional were to be made mandatory, we would specify that it was mandatory as of a particular date. For any data previous to that date the field could still be optional, but for any data after that date the field would be mandatory.

11.2.3.14. I am receiving an upload error that has a code that is not in my records. What should I do now?

We have implemented an upload error log that reports when an error is not providing the relevant details. The error log code will be reported to the user after the error message, for example [ABC123ZY]

The [AW97AZRX] error code refers to our internal error log. With this error code, we will be able to quickly source you the relevant key details for this record. And this error log is also reviewed by our developers to diagnose and fix the specific error to ensure that the system reports the relevant details/keys for future uploads.

If you receive this type of error message, please email the PMHC Helpdesk on support@pmhc-mds.com and provide a copy of the entire error message along with the error code.

11.2.3.15. I am receiving an unknown error in my records. How can I fix this?

If you receive an 'unknown error' message, please email the PMHC Helpdesk on support@pmhc-mds.com and provide a copy of the error email, and/or a screenshot if possible. The error email is important, and will assist the helpdesk to quickly identify the error, and provide you with a clear response on how to rectify the issue.

11.2.3.16. Why am I receiving an error saying I don't have permission to upload organisation data?

If you receive an error message stating 'Upload file contains organisations data, but user doesn't have Organisation Management role' you do not have permission to upload organisation data. (The Organisation Management role is only available for PHN users - see [Users Roles](#))

The 'Organisations' data is optional and does not need to be included in the uploaded file. Please delete the 'Organisations' worksheet/file from your upload.

11.2.3.17. Why am I receiving an error saying 'Could not find worksheet [Name]'?

This error occurs when you are uploading an Excel spreadsheet. The worksheet names need to exactly match the name in the 'Excel worksheet name' column of the 'Summary of files to upload' table at [Files or worksheets to upload](#). If all the required worksheets are not present you will receive the error above.

11.2.3.18. Why am I receiving an error saying 'Column [Name] is not valid'?

Each item is a column in the file/worksheet. The 'Field Name' should be used for the column headings. These values can be found at [File format](#), or listed on the provided example file at [Files or worksheets to upload](#). If the Column [Name] doesn't match identically you will receive the error above.

11.2.3.19. Why am I receiving an error saying 'Organisation_path is not valid on row ...'?

The organisation path provided does not map to a valid organisation. The format should be a combination of your PHN key and the provider organisation key, separated with a colon. Example PHN_key:POrg_key. If the organisation path doesn't match identically you will receive the error above.

11.2.3.20. Why am I receiving an error saying 'PMHC MDS does not support version 1'?

As of 1st July 2020, the PMHC MDS does not support version 1 of the PMHC specification.

Uploads using version 2 and above should use a metadata file or worksheet. The metadata information is documented in the upload specifications on either the core specification or an extension. See [Data Specifications](#).

11.2.3.21. Why am I receiving an error saying 'Column [Name] is required on row ...'?

There is a required field that has not been entered. If not supplied, insert the default 'Missing' or 'Not recorded' value. These values can be found at [Record formats](#). If the Column [Name] is blank in a mandatory field you will receive the error above.

11.2.3.22. Why am I receiving an error saying 'Invalid file ...'?

The system is having trouble identifying your upload file. Please provide a copy of your upload file to support@pmhc-mds.com.

11.2.3.23. Why am I receiving an error saying 'Could not parse worksheet [Name]: Bad request at ...'?

Something has gone wrong with the upload. Please contact support@pmhc-mds.com.

11.2.4. Capturing additional data

- [It seems that the data being collected is quite limited, would it not be useful to collect more detailed information?](#)
- [The information collected does not fit into the available fields. Can we add another option?](#)
- [Can the PMHC MDS capture and record additional data?](#)

11.2.4.1. It seems that the data being collected is quite limited, would it not be useful to collect more detailed information?

The development of the minimum dataset balanced the ideal against what was realistic, given that any additional data item places extra burden on those collecting and entering data.

Organisations may collect extra information for their own analysis however this information does not need to be submitted to the PMHC MDS.

Refer to [What are the options where the information collected does not fit into the available fields?](#)

11.2.4.2. The information collected does not fit into the available fields. Can we add another option?

The development of the minimum dataset balanced the ideal against what was realistic, given that any additional data item places extra burden on those collecting and entering data.

See [What are the options where the information collected does not fit into the available fields?](#) and [Can the PMHC MDS capture and record additional data?](#)

11.2.4.3. Can the PMHC MDS capture and record additional data?

The PMHC MDS is designed to monitor and evaluate regional service delivery against key mental health performance indicators and can not capture and record additional data outside the [Data model](#).

The PMHC MDS does not confine PHNs to the data specified. Rather, it sets the minimum and common ground for what data are to be collected and reported for mental health services commissioned by PHNs.

It is anticipated that many PHNs will seek to collect and manage an enhanced set of data to meet local needs, however this data will not be submitted to the MDS.

Refer to [It seems that the data being collected is quite limited, would it not be useful to collect more detailed information?](#)

11.2.5. Checking data

- [Who should be checking data?](#)
- [How can I run a report?](#)
- [How can I view the rules of a report?](#)
- [What are the types of system reports?](#)
- [How can I view all data?](#)

11.2.5.1. Who should be checking data?

Each individual organisation is responsible for checking their data in the MDS to confirm its accuracy and completion. It is advisable that this review is undertaken regularly to ensure data integrity and avoid widespread errors.

11.2.5.2. How can I run a report?

If you can see the reports tab you will be able to run a report.

Refer to [Reports](#).

11.2.5.3. How can I view the rules of a report?

Each report has its own rules. If you are not sure what data is displayed in a report, please click on the 'Counting Rules Explained' link displayed after running a report.

Refer to [How to produce a Standard report](#).

11.2.5.4. What are the types of system reports?

The reports are grouped into different categories, each designed to serve different purposes.

Refer to [Types of Standard reports](#)

11.2.5.5. How can I view all data?

To access your data in full, you can download your data.

Refer to [Data Extract](#).

11.2.6. Storing data relating to the minimum dataset system

11.2.6.1. After entering data in the MDS how long should I store my hardcopy and/or electronic files?

There is no set time limit; however, it is recommended that you archive this data and keep it secure for at least two years. As with all electronic data (including MDS) there is a risk of corruption due to a system bug or human error. The MDS stores the original upload files and the imported data, however it is always good to keep the original data as a backup to either check details against or re-enter, if needed.

11.2.7. YES-PHN survey

- [What is the YES-PHN survey?](#)
- [How do I obtain a template to upload YES-PHN invitations via the MDS?](#)

- [How do I upload the individual CSV files?](#)
- [What data should be in a YES-PHN invitations upload file only?](#)
- [Is there an example YES-PHN invitations upload file?](#)
- [How can I edit an incorrect episode records?](#)
- [How do I enter my organisation when uploading?](#)
- [How can I delete a record I have previously uploaded?](#)
- [How can I review why the status of my upload file shows error?](#)
- [How can I check my data has uploaded?](#)
- [How do I fix upload file errors?](#)
- [How do I fix data errors in an upload?](#)
- [Has my data uploaded if my file has an error status?](#)
- [Will valid data be accepted if there are errors in the file?](#)
- [Why am I receiving an error with my Episode Key when I downloaded the data from the PMHC MDS?](#)
- [I am receiving an upload error that has a code that is not in my records. What should I do now?](#)
- [I am receiving an unknown error in my records. How can I fix this?](#)
- [Why am I receiving an error saying 'Could not find worksheet \[Name\]'?](#)
- [Why am I receiving an error saying 'Column \[Name\] is not valid'?](#)
- [Why am I receiving an error saying 'Column \[Name\] is required on row ...'?](#)
- [Why am I receiving an error saying 'Invalid file ...'?](#)
- [Why am I receiving an error saying 'Could not parse worksheet \[Name\]: Bad request at ...'?](#)

11.2.7.1. What is the YES-PHN survey?

The YES survey is designed to gather information from mental health consumers about their experiences of care. By helping to identify specific areas where quality improvements can be made, the YES can support collaboration between mental health services and consumers to build better services.

See [Yes-PHN specification](#).

11.2.7.2. How do I obtain a template to upload YES-PHN invitations via the MDS?

A user with the Service Feedback role can request a report of clients who have completed episodes in a specified period. This report will be in the YES-PHN invitations format.

See [Download Completed Episodes](#)

11.2.7.3. How do I upload the individual CSV files?

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 All the required CSV files must be included for each YES-PHN upload and must be named as per the specifications.

See [Upload specification](#).

11.2.7.4. What data should be in a YES-PHN invitations upload file only?

A report of clients who have completed episodes in a specified period will include the organisation_path, client_key, episode_key, episode_end_date, and episode_completion_status, this data will enable an organisation to complete the remaining columns. Either a client's mobile or email should be completed, not both. Any clients that should not be sent an invites should be removed from the file.

11.2.7.5. Is there an example YES-PHN invitations upload file?

Is there an example YES-PHN invitations upload file in both formats - Excel and CSV. You can download the example upload file from the specification documentation.

See [Upload specification](#).

11.2.7.6. How can I edit an incorrect episode records?

Manual changes to columns A-E of the YES-PHN download file should not occur within the YES-PHN file. If this data is incorrect in the download file, it should be modified in the PMHC MDS dataset through the organisations usual method of recording the PMCH MDS data.

If manual changes are made to the episode end date or episode completion status within the YES-PHN upload file, these will be ignored when submitted through the YES-PHN invitation validation process.

11.2.7.7. How do I enter my organisation when uploading?

The PHN will be pre-filled in the **Organisation** field.

If you are allowed to upload YES-PHN surveys to more than one PHN, you will need to select the PHN whose data you are uploading.

If no organisation is available, you will need to request the 'upload' [Users Roles](#).

11.2.7.8. How can I delete a record I have previously uploaded?

You can not delete a YES-PHN invitation once it has been successfully uploaded (IE not in test mode).

11.2.7.9. How can I review why the status of my upload file shows error?

If the status of your file shows error, you can view the returned errors through Viewing Previous Uploads.

Refer to [Error messages](#)

11.2.7.10. How can I check my data has uploaded?

When the upload has completed successfully, you will see a summary of the updated records shown in the 'Upload Change Summary' table. See [Complete uploads](#).

11.2.7.11. How do I fix upload file errors?

Refer to [Correcting upload errors](#).

11.2.7.12. How do I fix data errors in an upload?

The data must pass all YES-PHN invitation [validation rules](#).

Refer to [Record formats](#) related to column name for each error. By clicking on the field name this will take you to the field definition which outlines the associated notes that provide guidance on which response to use.

If still unsure, please email the PMHC helpdesk on support@pmhc-mds.com and provide a copy of the error email, and/or a screenshot if possible. The error email is very important for the Helpdesk to quickly identifying the error and to provide you with a clear response on how to rectify the data issue.

11.2.7.13. Has my data uploaded if my file has an error status?

No. Only 'Complete' uploads that are not in test mode, are recorded in the PMHC MDS.

See [Viewing Previous Uploads](#).

11.2.7.14. Will valid data be accepted if there are errors in the file?

For example, if we upload 200 lines of YES-PHN survey data, and there are validation errors in 10 lines - will 190 lines be accepted?

No. All files and records in an upload have to validate before any data is accepted.

11.2.7.15. Why am I receiving an error with my Episode Key when I downloaded the data from the PMHC MDS?

Double check that the Episode Keys in the excel file you are uploading are identical to the data in the PMHC MDS. This includes any leading zeros and prefixes.

When opening a file, Excel automatically removes leading zeros, and converts large numbers to scientific notation, like 1.23E+15, in order to allow formulas and math operations to work on them. To assist avoiding this issue, please view Microsoft support documentation on "Keeping leading zeros and large numbers" - <https://support.microsoft.com/en-us/office/keeping-leading-zeros-and-large-numbers-1bf7b935-36e1-4985-842f-5dfa51f85fe7>

If this change was intentional, see [:How can I edit an incorrect episode records?](#).

11.2.7.16. I am receiving an upload error that has a code that is not in my records. What should I do now?

We have implemented an upload error log that reports when an error is not providing the relevant details. The error log code will be reported to the user after the error message, for example [ABC123ZY]

The [AW97AZRX] error code refers to our internal error log. With this error code, we will be able to quickly source you the relevant key details for this record. And this error log is also reviewed by our developers to diagnose and fix the specific error to ensure that the system reports the relevant details/keys for future uploads.

If you receive this types of errors message, please email the PMHC Helpdesk on support@pmhc-mds.com and provide a copy of the entire error message along with the error code.

11.2.7.17. I am receiving an unknown error in my records. How can I fix this?

If you receive an 'unknown error' message, please email the PMHC Helpdesk on support@pmhc-mds.com and provide a copy of the error email, and/or a screenshot if possible. The error email is important, and will assist the helpdesk to quickly identify the error, and provide you with a clear response on how to rectify the issue.

11.2.7.18. Why am I receiving an error saying 'Could not find worksheet [Name]'?

This error occurs when you are uploading and Excel spreadsheet. The worksheet names need to exactly match the name in the 'Excel worksheet name' column of the 'Summary of files to upload' table at [YES-PHN files or worksheets to upload](#). If all the required worksheets are not present you will receive the error above.

11.2.7.19. Why am I receiving an error saying 'Column [Name] is not valid'?

Each item is a column in the file/worksheet. The 'Field Name' should be used for the column headings. These values can be found at [Record formats](#), or listed on the provided example file at [Files or worksheets to upload](#). If the Column [Name] doesn't match identically you will receive the error above.

11.2.7.20. Why am I receiving an error saying 'Column [Name] is required on row ...'?

There is a required field that has not been entered. If not supplied, insert the default 'Missing' or 'Not recorded' value. These values can be found at [Record formats](#). If the Column [Name] is blank in a mandatory field you will receive the error above.

11.2.7.21. Why am I receiving an error saying 'Invalid file ...'?

The system is having trouble identifying your upload file. Please provide a copy of your upload file to support@pmhc-mds.com.

11.2.7.22. Why am I receiving an error saying 'Could not parse worksheet [Name]: Bad request at ...'?

Something has gone wrong with the upload. Please contact support@pmhc-mds.com.

11.2.8. Bulk updating data or transitioning to a new Client Information Management System

The following information is being provided to assist users who need to do bulk updates to their data, including transitioning to a new Client Information Management System (CIMS).

- [How can I modify my organisation key?](#)
- [How can I bulk change my record keys?](#)
- [The record keys are changing between our old CIMS and the new one. How can we update the data already in the PMHC MDS so that data is not duplicated?](#)

11.2.8.1. How can I modify my organisation key?

If there is a change to your organisation key, therefore your organisation path, your PHN will need to contact the PMHC Helpdesk at support@pmhc-mds.com to edit this MDS information.

11.2.8.2. How can I bulk change my record keys?

The PMHC MDS Helpdesk can assist with a bulk key change request, if a document mapping the old keys to the new keys is provided. The mapping document needs to contain the separate worksheets labelled as in a PMHC MDS upload or data extract, for each record type to be updated. Each worksheet needs to contain three columns:

- Organisation path
- Existing record key
- New record key

Email the mapping document to the PMHC MDS Helpdesk via support@pmhc-mds.com. For these types of requests, our developers should be able to complete this within a week of receiving all the required information.

Warning

- To protect client privacy, it is important that no other client data is included in the mapping document

11.2.8.3. The record keys are changing between our old CIMS and the new one. How can we update the data already in the PMHC MDS so that data is not duplicated?

All the PMHC MDS identification keys that are changing will need to be reviewed. This could include any of the record keys for the data specifications that your organisation has uploaded.

It may include, but not be limited to:

- Practitioner Key,
- Intake Key,
- Episode Key,
- Service Contact Key,
- Service Contact Practitioner Key,
- Collection Occasion Key,
- Measure Key

There are a couple of ways this update can be achieved.

1. If all your existing PMHC MDS data is going to be loaded into your new CIMS, you can delete all your existing data in the PMHC MDS and then do a bulk upload from the new CIMS of all the previous PMHC MDS data with keys generated by the new system.
2. If only some of the data will be loaded, then the PMHC MDS Helpdesk can assist with a bulk key change request. Please refer to [How can I bulk change my record keys?](#).

11.2.9. Development of the PMHC Minimum Data Set

- [YES-PHN Survey](#)
- [Reporting](#)
- [Master Client Index](#)
- [Suggesting changes](#)

Regularly check the announcements on the [PMHC MDS homepage](#) to remain informed about development releases.

11.2.9.1. YES-PHN Survey

The remaining YES-PHN Survey data features will be rolled out iteratively over the following months.

11.2.9.1.1. YES-PHN Survey Data Upload

- Ability to upload YES-PHN survey results collected outside of the PMHC MDS OMSSS feature

11.2.9.1.2. YES-PHN Survey Data Extract

- Ability to extract YES-PHN survey data from the PMHC MDS data

Due to privacy concerns, the Department is consulting with their legal advice about the YES-PHN text fields and if the data can be made available in an extract.

11.2.9.1.3. YES-PHN Survey Reports

The Department has consider local PHN requirements for YES-PHN reporting functionality.

- The [B8 – YES PHN index](#) is already available
- A more details YES-PHN Survey results report is currently in development

11.2.9.2. Reporting

The [Category I: Monitoring Intakes](#) are now all available.

The following reporting functionality is scheduled to be enhanced with row based summaries:

- The [B1 – Activity report – Client characteristics](#)
- The [B2 – Activity report – Episode characteristics](#)
- The [B3 – Activity report – Service Contact characteristics](#)

The following new reporting functionality is scheduled to be developed: * A more details YES-PHN Survey results report

11.2.9.3. Master Client Index

Current development for the master client index is on hold.

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

11.2.9.4. Suggesting changes

In late 2018, the Department of Health reinstated the Primary Mental Health Care Data Reference Group (PMHC DRG) to assist them with reviewing and prioritising future PMHC MDS changes.

The PMHC Helpdesk often receives suggestions for changes to the current PMHC MDS specifications and/or functionality, however, the Department would like all suggestions to be formalised and to now go through PMHC DRG.

To assist you with the process of explaining your issue to the Department, please find an example paper that Brisbane North produced that you can use as a best practice sample - [Brisbane North PHN Example Paper](#).

Logically are happy to provide comment on your paper before you formally submit it. To request this, please contact the PMHC Helpdesk at support@pmhc-mds.com.

Final papers should be submitted directly to the Department of Health at MentalHealthData@health.gov.au. However, we would appreciate it if you could copy in the PMHC Helpdesk whenever possible.

11.2.10. PMHC mailing list

- [How can I be advised of any changes to the MDS?](#)
- [I have an MDS account but don't receive update emails.](#)
- [I no longer wish to receive PMHC update emails. How can I be removed from the list?](#)
- [I am a third-party software developer developing code to assist with uploading data to the MDS. Can I be informed of updates to the MDS?](#)

11.2.10.1. How can I be advised of any changes to the MDS?

When changes are made to the MDS we alert all users via an email list. MDS users are automatically added to this list, however sometimes other Primary Health Network or provider organisation staff who do not have accounts wish to be informed of updates.

If you would like to be added to the mailing list please email support@pmhc-mds.com.

11.2.10.2. I have an MDS account but don't receive update emails.

Please check that we have your correct email address. Refer to [Updating your details](#)

Mailing list emails will be sent from support@pmhc-mds.com. Please make sure this is not being caught by any spam filters.

11.2.10.3. I no longer wish to receive PMHC update emails. How can I be removed from the list?

Please email support@pmhc-mds.com and ask to be removed from the mailing list.

11.2.10.4. I am a third-party software developer developing code to assist with uploading data to the MDS. Can I be informed of updates to the MDS?

Yes, we have a mailing list specifically for third-party developers.

Please email support@pmhc-mds.com and ask to be added to the developers mailing list. Please provide us with a generic address that will survive staffing changes.

11.2.11. Getting Help

A dedicated **helpdesk** is available to support Primary Health Networks and provider organisations implementing PMHC in relation to the minimum dataset system. All enquiries should be directed to: support@pmhc-mds.com.

11.3. Frequently Asked Questions Change log

11.3.1. 31/7/2025

- Added [Bulk updating data or transitioning to a new Client Information Management System](#)

11.3.2. 30/7/2025

- Added [Questions from Clients](#)

11.3.3. 06/05/2025

- Removed user mobile device related questions

11.3.4. 16/12/2021

11.3.4.1. System - Data Entry FAQs

- Updated [How do I find or create a Client's Statistical Linkage Key \(SLK\)?](#)

11.3.4.2. System - Uploading data

- Updated [Why am I receiving an error saying 'PMHC MDS does not support version 1'?](#)

11.3.4.3. System - YES-PHN FAQs

- Added a section [YES-PHN survey](#)

11.3.4.4. System - Access FAQs

- Updated [What is required for the Letter of Authority?](#)
- Added [When is a Letter of Authority required?](#)
- Updated [What internet browser should I use?](#)

11.3.5. 29/04/2020

11.3.5.1. System - Access FAQs

- Updated [Why did I get this message when inviting a user - 'An error occurred: Inviting user failed: An outstanding PMHC MDS invite exists'?](#)
- Updated [What should I do if a user didn't receive the email invitation?](#)

11.3.6. 20/1/2020

11.3.6.1. System - Data Entry FAQs

- Added the question [How can I capture client services under the 2020 Australian Government Mental Health Response to Bushfire Trauma?](#)

11.3.7. 28/10/2019

11.3.7.1. System - Development FAQs

- Added a section [Suggesting changes](#)

11.3.8. 21/06/2019

11.3.8.1. System - Data Entry FAQs

- Updated the question [How do I enter a K10+, or K5, or SDQ?](#)

11.3.9. 8/4/2019

11.3.9.1. System - Development FAQs

- Updated the section [Development of the PMHC Minimum Data Set](#)

11.3.10. 14/3/2019

11.3.10.1. System - Uploading data

- Added the question [Why am I receiving an error saying I don't have permission to upload organisation data?](#)
- Updated the question [How do I fix upload file errors?](#)
- Moved error messages from the Upload User Guide to [Uploading Data FAQs](#)

11.3.10.2. System - Checking Data FAQs

- Added the question [How can I run a report?](#)
- Added the question [How can I view the rules of a report?](#)
- Added the question [What are the types of system reports?](#)

11.3.10.3. System - Development FAQs

- Updated the section [Development of the PMHC Minimum Data Set](#)

11.3.11. 11/9/2018

11.3.11.1. System - Access FAQs

- Updated the question to [How do I get started using the MDS?](#)

11.3.11.2. System - Development FAQs

- Updated the section [Development of the PMHC Minimum Data Set](#)

11.3.12. 23/7/2018

11.3.12.1. System - Development FAQs

- Updated the question to [Reporting - Development of the PMHC Minimum Data Set](#)

11.3.13. 13/3/2018

11.3.13.1. Concepts Processes - Specific Data Items and Definitions

- Added the question [One episode of care at a time: We have clients who are receiving treatment at multiple programs and require multiple episodes with different 'Principal Focus of Treatment Plan'. The PMHC MDS only allows one episode at a time for each client, defined at the level of the provider organisation. What do we do?](#)

11.3.13.2. System - Development FAQs

- Updated the question to [Reporting](#)

11.3.14. 19/1/2018

11.3.14.1. Concepts Processes - Outcome Measures FAQs

- Fixed a spelling error in [K5 for Aboriginal and Torres Strait Islander population](#)

11.3.15. 22/12/2017

11.3.15.1. System - Development FAQs

- Updated the question to [Reporting](#)

11.3.16. 08/12/2017

11.3.16.1. System - Data Entry FAQs

- Added the question [How can I close an episode?](#)
- Updated the question [How do I enter a referral?](#)

11.3.17. 20/11/2017

11.3.17.1. System - Data Entry FAQs

- Updated the question [How can I delete a record I incorrectly entered?](#)
- Updated the question [How can I edit a record's identifying key?](#)

11.3.17.2. System - Upload FAQs

- Updated the question [How can I delete a record I have previously uploaded?](#)

11.3.17.3. System - Development FAQs

- Updated the question to [YES-PHN Survey Reports](#)

11.3.18. 03/10/2017

11.3.18.1. System - Data Entry FAQs

- Updated the question [Do I enter a Service Contact when a client doesn't show up for the session?](#)
- Updated the question [How do I enter a K10+, or K5, or SDQ?](#)

11.3.18.2. System - Uploading data FAQs

- Added the question [I am receiving an upload error that has a code that is not in my records. What should I do now?](#)
- Added the question [I am receiving an unknown error in my records. How can I fix this?](#)

11.3.19. 12/9/2017

11.3.19.1. System - Uploading data FAQs

- Added the section [Should an upload file only contain new or changed data or should it contain all cumulative data from the start of service delivery?](#)
- Removed the section 'Should an upload file include all service contacts and measures for an episode every time?'
- Removed the section 'Do I need to include all service contacts and measures for an episode in an file?'
- Added the section [Will valid data be accepted if there are errors in the file?](#)

11.3.20. 30/8/2017

11.3.20.1. System - Data Entry FAQs

- Updated the question [What is the best way to manage the client key?](#)
- Updated the question [Can you suggest a best practice approach to managing client keys?](#)
- Updated the question [How will the Master Client Index work?](#)
- Added the question [How do I find or create a Client's Statistical Linkage Key \(SLK\)?](#)
- Added the question [How do I enter a referral?](#)
- Added the question [How do I enter a K10+, or K5, or SDQ?](#)
- Added the question [Do I enter a Service Contact when a client doesn't show up for the session?](#)
- Added the question [If the client is referred elsewhere \(e.g. not suitable for this service\) should this be recorded?](#)
- Added the question [I have an error message but no idea what it means or how to fix it. What should I do?](#)
- Added the question [How do I find what my Practitioner Key is?](#)
- Added the question [How do I find what the Episode Key, Service Contact Key and Outcome Collection Occasion Key is?](#)
- Added the question [How can I delete a record I incorrectly entered?](#)
- Added the question [How can I edit a record's identifying key?](#)

11.3.20.2. System - Development FAQs

- Updated the section [Development of the PMHC Minimum Data Set](#)

11.3.20.3. System - Upload FAQs

- Added the question ['Do I need to include all service contacts and measures for an episode in an file?'](#)
- Added the question [How can I edit a record I have previously uploaded?](#)
- Added the question [How can I view my uploaded data?](#)
- Added the question [How can I delete a record I have previously uploaded?](#)
- Added the question [How do I upload the individual CSV files?](#)
- Added the question [How do I fix upload file errors?](#)
- Added the question [How do I fix data errors in an upload?](#)
- Added the question [Has my data uploaded if my file has an error status?](#)

11.3.21. 28/7/2017

11.3.21.1. System - Development FAQs

- Updated the section [Development of the PMHC Minimum Data Set](#)

11.3.22. 26/6/2017

11.3.22.1. System - Development FAQs

- Updated the section [Development of the PMHC Minimum Data Set](#)
- Removed the question *What features will be included in Stage Two development?*
- Added the section [Reporting](#)

11.3.23. 21/6/2017

11.3.23.1. System - Development FAQs

- Updated the question to [YES-PHN Survey Reports](#)

11.3.24. 6/7/2017

11.3.24.1. System - Data Entry FAQs

- Added the question to [Why is an episode showing as uncommenced?](#)

11.3.24.2. System - Development FAQs

- Added the question to [YES-PHN Survey Reports](#)
- Added the question to [Master Client Index](#)

11.3.24.3. System - Upload FAQs

- Added the question to [How can I review why the status of my upload file shows error?](#)

11.3.25. 1/5/2017

11.3.25.1. System - Data Entry FAQs

- Refined the answer to [Can I go back and enter information if I don't have it at the time?](#)

11.3.26. 10/3/2017

11.3.26.1. Concepts Processes - Outcome Measures FAQs

- Refined the answer to [MHNIP outcome measures](#)

11.3.26.2. Concepts Processes - Scope FAQs

- Added the question [Are services previously delivered under MHNIP expected to collect the PHMC MDS?](#)

11.3.26.3. System - Access FAQs

- Added the question [Are services previously delivered under MHNIP expected to collect the PHMC MDS?](#)
- Refined the answer to [What can a user see in the MDS?](#)
- Added the question [What should I do if a user didn't receive the email invitation?](#)
- Added the question [Can I add an existing user to another PHN or Provider Organisation?](#)
- Added the question [Why did I get this message when inviting a user - 'An error occurred: Inviting user failed: An outstanding PMHC MDS invite exists'?](#)
- Added the question [What should I do if a user didn't receive the email invitation?](#)
- Refined the question [I'm a third-party software developer developing software to assist with uploading data to the MDS. Can I have an account to test my data uploads?](#)

11.3.26.4. System - Data Entry FAQs

- Added the question [Can I enter fictitious data as a part of testing?](#)
- Added the question [Where do I enter MHNIPS data collection?](#)
- Added the question [Can the PMHC MDS capture and record additional data?](#)
- Added the question [Why can't we use the SLK as the client key?](#)

11.3.26.5. System - Uploading FAQs

- Added the question [How can I view my uploaded data?](#)

11.3.27. 8/2/2017

- Made the 'Department response to issues raised by PHNs' document the [Concepts and Processes Frequently Asked Questions](#) subsection in the online Frequently Asked Questions
- Moved the current Frequently Asked Questions section into the [System Frequently Asked Questions](#) subsection in the online Frequently Asked Questions

12. User Guide Change log

12.1. 17/12/2025

- Added [Universal Aftercare Episode](#)
- Updated [Collection Occasion Measures](#) to include Universal Aftercare measures
- Updated [Episodes](#) screenshots to include Veteran field
- Updated [Intake](#) screenshots to include Veteran field
- Added [Category M: Monitoring service delivery](#) reports
- Added [Category W: Monitoring Universal Aftercare](#) reports

12.2. 31/07/2025

- Added [Additional Services](#)
- Updated [Home, Sign-in & Passwords](#) to link to updated account management documentation

12.3. 06/05/2025

- Updated [Home, Sign-in & Passwords](#) to remove user mobile device information
- Updated [Users](#) to remove user mobile device information
- Updated [headspace 4.1 \(PMHC extension\)](#) to version 4.1

12.4. 10/12/2024

- Added [Reporting Considerations](#)
- Added [Inputs to help replicate system generated reports](#)

12.5. 22/08/2024

- Updated [Category I: Monitoring Intakes](#) to note that the I1-I4 does not filter by IAR-DST version.

12.6. 2/08/2024

- Added [Environments](#)

12.7. 24/07/2024

- Added [Deletion of data via an upload file](#)
- Updated [Deleting a Provider Organisation](#)

12.8. 29/04/2024

- Updated [Questions about privacy protections and patient consent](#)

12.9. 17/10/2023

- Added [Account Blocked](#)

12.10. 12/10/2023

- Updated [APP series reports \(App1 to App3\)](#)

12.11. 3/10/2023

- Updated [ACC series reports \(Acc-1 to Acc-3\)](#) and [APP series reports \(App1 to App3\)](#)

12.12. 21/09/2023

- Added [Data Extract Specification](#)
- Updated [Data extract options](#)

12.13. 01/08/2023

- Updated [A1 – High level summary of overall volumes by entity](#)
- Added [Filter by Tag](#)

12.14. 26/06/2023

- Added [I8 – Links Without an Existing Intake](#)
- Added [I9 – Dispatches to unidentified MDS treatment organisations](#)

12.15. 05/06/2023

- Updated [Category I: Monitoring Intakes](#) renamed from 'IAR-DST' to 'Monitoring Intakes'
- Added [I6 – Intake Dispatch Status by Intake Organisation](#) and [I7 – Link Status of Episodes Dispatched to Organisation](#)

12.16. 31/03/2023

- Updated [Reports](#) specifications for A1, A2, B1, B2, B3, B4, B5, B7 (hAPI), App-2, as only service contacts with primary practitioners are included
- Added [I5 – Intake Conclusion Referral Pathway](#)
- Updated [Data Sources](#) for reports
- Added [I5 – Intake Conclusion Referral Pathway](#)
- Added [B9 - Activity Report - Number of practitioners](#)

12.17. 01/09/2022

- Updated [Data Sources](#) for reports

12.18. 21/8/2022

- Updated [Include data from all specifications \(includes extensions\)](#)
- Updated [Data Sources](#) for reports
- Updated [A4-2 – Data quality report – Missing and invalid episode data – Detail](#)

- Updated [A5-2 – Data quality report – Missing and invalid service contact data – Detail](#)

12.19. 15/8/2022

- Added [Intake](#)
- Added [Intake IAR-DST Measure](#)
- Added [Intake Episodes](#)
- Added [Category I: Monitoring Intakes](#)

12.20. 27/6/2022

- Added [User Auditing Tool](#)
- Added [Auditing Users](#)

12.21. 31/05/2022

- Added [Generate a Client's Outcome Collection Occasion Self Service Link through the Online Measures Self Service System \(OMSSS\)](#)
- Added [Example Self Service Link Screens](#)

12.22. 27/05/2022

- Updated [Updating your details](#)

12.23. 16/12/2021

- Added [User Auditing Tool](#) to Tools menu
- Updated [Editing a user's roles](#) to explain how to remove all roles from a user

12.24. 3/12/2021

- Strategic Data rebranded to [Logicly](#). Updated Strategic Data references to [Logicly](#).
- Updated noreply@strategicdata.com.au references to noreply@logicly.com.au
- Updated screenshots

12.25. 25/11/2021

- Added reports B8 to [B8 – YES PHN index](#)

12.26. 1/11/2021

- Updated [Users Roles](#) to add 'Service Feedback' role
- Updated [Generate a Client's SLK](#) move to Tools menu

- Added [YES-PHN](#) to Tools menu

12.27. 31/08/2021

- Updated reports OUT-1 and OUT-2 and OUT-3 to [Out series reports \(Out-1 to Out-3\)](#)
- Updated [Dates explained for Data Extract](#)

12.28. 25/06/2021

- Added [Video training module - Statistical Linkage Key \(SLK\)](#)

12.29. 18/3/2021

- Updated [Client Data](#) to remove the initial client search
- Added [Viewing a Practitioner's Clients](#)

12.30. 24/02/2021

- Updated [A12 – Episodes shared across multiple organisations](#) to include “lead” and “delivery” organisation information

12.31. 12/02/2021

- Updated [Reports](#) to include information about headspace (hAPI) reports
- Added [Data Sources for reports](#)
- Updated screenshots for [Reports](#)

12.32. 9/2/2021

- Added [Data extract options](#)
- Updated [Data Extract](#) to include the checkbox labelled **Include data from all specifications**
- Updated screenshots for [Data Entry](#)
- Updated screenshots for [Data Extract](#)
- Updated screenshots for [Organisations](#)
- Updated screenshots for [Reports](#)
- Updated screenshots for [Upload](#)
- Updated screenshots for [Users](#)
- Updated screenshots for [SLK](#)

12.33. 7/12/2020

- Updated [Data Extract](#) to include the checkbox labelled **Include data from all specifications**

12.34. 21/10/2020

- Added Wayback reports
- Updated screenshots for [How to produce a Standard report](#)

12.35. 20/9/2020

- Updated [Users Roles](#) to add the Aggregate Reporting role

12.36. 27/08/2020

- Updated [Viewing a Client's Outcome Collection Occasions for an Episode](#)
- Updated [Editing a Client's Outcome Collection Occasions for an Episode](#)
- Updated [Adding a Client's Outcome Collection Occasion data](#)
- Updated [Deleting an Outcome Collection Occasion](#)
- Added [Viewing a Client's Measures for a Collection Occasion](#)
- Added [Adding an Client's Measures for a Collection Occasion](#)
- Added [Editing a Client's Measures for a Collection Occasion](#)
- Added [Deleting a Measure from a Collection Occasion](#)

12.37. 29/04/2020

- Added [Viewing Invitations](#)
- Added [Viewing a user's invitation details](#)
- Added [Reissue an invitation](#)
- Added [Revoke a pending invitation](#)
- Added [Delete an invitation](#)

12.38. 16/4/2020

- Added reports A10 and A11 to [Category A: Monitoring progress of MDS implementation](#)

12.39. 23/1/2020

- Updated [Adding a Client's Episode data](#) to include *!br20* tag note.
- Updated [Editing a Client's Episode data](#) to include *!br20* tag note.
- Updated screenshots for [Data Entry - Episodes](#)
- Added report [B6 – Client Outcomes](#)

12.40. 6/9/2019

- Updated reports OUT-1 and OUT-2 and OUT-3 to [Out series reports \(Out-1 to Out-3\)](#)

12.41. 14/8/2019

- Added reports OUT-1 and OUT-2 to [Category D: Key Performance Indicators](#)

12.42. 16/7/2019

- Added [Duplicating a Client's existing Service Contact data](#)
- Updated screenshots for [Outcome Collection Occasions](#)

12.43. 21/06/2019

- Edited [Adding a Client's Outcome Collection Occasion data](#) to include entering SDQ items scores.

12.44. 14/3/2019

- Edited [Inactivate a Provider Organisation](#)
- Added [Viewing an inactive Provider Organisation](#)
- Updated screenshots for [Organisations](#)
- Updated screenshots for [Service Contacts](#)
- Added reports C3 to [Category C: Monitoring implementation of stepped care](#)
- Added [Correcting upload errors](#)
- Moved example upload error messages to [Uploading Data FAQs](#)

12.45. 19/11/2018

- Added [Password Expiry Notifications](#)
- Moved [Forgotten or Expired Password](#) from under [Home, Sign-in & Passwords](#) to under [Passwords Requirements](#)
- Edited [Inactivate a Provider Organisation](#)
- Added [Delete an invitation](#)
- Edited [Editing a user's roles](#)
- Updated screenshots for [Upload](#)
- Edited [A9 – Data quality report – Recording of outcome measures for completed episodes](#)
- Edited [A8 – Data quality report – Recording of outcome measures for open episodes](#)

12.46. 11/9/2018

- Added reports C1-C2 to [Category C: Monitoring implementation of stepped care](#)

12.47. 23/7/2018

- Added reports A7-A9 to [Category A: Monitoring progress of MDS implementation](#)
- Added reports B1-B5 to [Category B: Monitoring overall service delivery](#)

12.48. 13/3/2018

- Added reports A3-A6 to [Category A: Monitoring progress of MDS implementation](#)
- Added [Closing a Client's Episode](#)

12.49. 19/1/2018

- Updated screenshots for [Home, Sign-in & Passwords](#)
- Updated screenshots for [Data Entry](#)
- Updated screenshots for [Data Extract](#)
- Updated screenshots for [Organisations](#)
- Updated screenshots for [Reports](#)
- Updated screenshots for [Upload](#)
- Updated screenshots for [Users](#)
- Updated the question to [Reporting](#)
- Edited the Reporting [Users Roles](#)
- Edited [Passwords Requirements](#) to state the password email will be received from noreply@logicly.com.au

12.50. 22/12/2017

- Edited [Reports](#) documentation
- Edited [Data Extract](#)
- Moved [Data Extract](#) out from under [Reports](#)
- Edited the Reporting [Users Roles](#)

12.51. 08/12/2017

- Added [Dates explained for Data Extract](#)

12.52. 20/11/2017

- Edited [Editing a Practitioner](#)
- Added [Editing a Practitioner Key](#)
- Edited [Editing a Client](#)
- Added [Editing a Client Key](#)
- Edited [Editing a Client's Episode data](#)
- Added [Editing an Episode Key](#)
- Edited [Editing a Client's Service Contacts for an Episode](#)
- Added [Editing a Service Contact Key](#)
- Edited [Editing a Client's Outcome Collection Occasions for an Episode](#)
- Added [Editing a Collection Occasion Key](#)
- Edited [Adding a Client's Outcome Collection Occasion data](#)

12.53. 25/10/2017

- Edited [Deleting a Practitioner](#)
- Edited [Deleting a Client](#)
- Edited [Deleting an Episode](#)
- Edited [Deleting a Service Contact](#)
- Edited [Deleting an Outcome Collection Occasion](#)
- Added [Inactive Practitioners](#)

12.54. 23/10/2017

- Edited [Editing a Client](#)

12.55. 03/10/2017

- Edited [Finding a user](#)
- Edited [Adding a new user](#)

12.56. 25/9/2017

- Edited [Viewing a user's roles](#)
- Edited [Editing a user's roles](#)

12.57. 25/8/2017

- Edited [Adding a New Client](#)
- Edited [Editing a Client](#)
- Updated screenshots for [Data Entry](#)

12.58. 28/7/2017

- Removed *Reporting* documentation
- Added [Reports](#) documentation
- Moved [Data Extract](#) under [Reports](#)

12.59. 20/7/2017

- Added [Adding a Client's Outcome Collection Occasion data](#)
- Added [Editing a Client's Outcome Collection Occasions for an Episode](#)
- Added [Deleting an Outcome Collection Occasion](#)

12.60. 11/7/2017

- Edited [Finding a Practitioner](#)
- Edited [Viewing a Practitioner](#)
- Edited [Adding a Practitioner](#)
- Edited [Editing a Practitioner](#)
- Edited [Deleting a Practitioner](#)
- Updated screenshots for [Data Entry](#)

12.61. 30/6/2017

- Added [Adding a New Client](#)
- Added [Editing a Client](#)
- Added [Deleting a Client](#)
- Added [Adding a Client's Episode data](#)
- Added [Editing a Client's Episode data](#)
- Added [Deleting an Episode](#)
- Added [Adding a Client's Service Contact data](#)
- Added [Editing a Client's Service Contacts for an Episode](#)
- Added [Deleting a Service Contact](#)
- Updated screenshots for [Data Entry](#)

12.62. 14/6/2017

- Added [Adding a Practitioner](#)
- Added [Editing a Practitioner](#)
- Added [Deleting a Practitioner](#)
- Moved [Finding a Practitioner](#) under Data Entry tab
- Moved [Viewing a Practitioner](#) under Data Entry tab
- Moved [Viewing all Organisational Users](#) under Users tab
- Moved [Assigning Extra Roles to an Organisational User](#) under Users tab

12.63. 26/5/2017

- Updated screenshots for [Data Entry](#) documentation
- Updated screenshots for [Adding a new user](#)
- Updated screenshots for [Editing a user's roles](#)
- Updated screenshots for [Viewing Upload Details](#)
- Updated screenshots for [Error messages](#)
- Added [Complete uploads](#)

12.64. 18/5/2017

- Added [Data Entry](#) documentation
- Added [Viewing a Practitioner](#)
- Added to the [Users Roles](#) section
- Moved [Accepting an invitation to become a PMHC MDS User](#) under Home tab
- Updated screenshots for [Adding a new user](#)
- Updated screenshots for [Editing a user's roles](#)

12.65. 15/3/2017

- Updated the references of suborganisations to provider organisation

12.66. 10/3/2017

- Added [Adding an existing user](#) documentation
- Updated screenshots for [Accepting an invitation to become a PMHC MDS User](#) to include the Reporting role
- Updated screenshots for [Viewing a user's roles](#) to show roles at an organisation
- Added screenshots for [Logging In](#) to show the pop up count down feature
- Added screenshots for [Uploading a file](#) to include the organisation drop down

12.67. 24/2/2017

- Added [Data Extract](#) documentation
- Added [Reporting](#) documentation
- Added Reporting role information to the [Users Roles](#) section
- Updated screenshots for [Adding a new user](#) to include the Reporting role
- Updated screenshots for [Editing a user's roles](#) to include the Reporting role

12.68. 8/2/2017

- Reorganised the documentation to separate User Guide and Frequently Asked Questions
- Updated user guide for user interface changes that created sub tabs

Data Specifications

The PMHC MDS Data Specification documentation site defines what data items are collected in the PMHC MDS, what file formats are accepted for upload and associated reporting requirements - available at <https://docs.pmhc-mds.com/#data-specifications>.