

Financial and Residential Activity Collection (FRAC) Data Collection Guide

2023-2024

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Published by the State of Queensland (Queensland Health), August 2024

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An electronic version of this document is available at https://www.health.qld.gov.au/hsu/collections/frac

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# Overview

The Financial and Residential Activity Collection (FRAC) is an annual collection of **recurrent** expenditure, revenue, staffing and other hospital related data reported by the three hierarchical levels of the public health system; being declared public hospitals (acute and psychiatric), Hospital and Health Services[[1]](#footnote-2) (HHSs) and the jurisdiction (the State).

Financial and residential activity reporting is mandatory and is prescribed in the [Data Supply Requirements](https://qheps.health.qld.gov.au/purchasing-performance/hhs-agreements/data-reporting-requirements), Appendix 1 Reference Documents of the HHS Service Agreements.

Data reported to the FRAC is used as a source of information for:

* [Local Hospital Networks/Public hospital establishments NMDS 2023-24](https://meteor.aihw.gov.au/content/756101) (PHE-NMDS)
* [Queensland Health Block Funded Hospitals Funding Model](https://www.health.qld.gov.au/system-governance/health-system/managing/funding-model)
* [Report on Government Services](https://www.pc.gov.au/research/ongoing/report-on-government-services) (RoGS)
* Australian Government’s [My Hospitals](https://www.aihw.gov.au/reports-data/myhospitals) and
* [Independent Health and Aged Care Pricing Authority](https://www.ihacpa.gov.au/) (IHACPA)

Expenditure reported to the FRAC should align to the annual expenditure data reported as part of the annual [National Hospital Cost Data Collection](https://www.ihacpa.gov.au/health-care/costing/national-hospital-cost-data-collection) (NHCDC).

The NHCDC is the collection of public hospital cost data from a range of public hospital facilities nationally. The objective of the NHCDC is to provide all governments with a robust dataset, developed using nationally consistent methods of costing hospital activity. The dataset is used for benchmarking, funding and planning hospital services and is the primary dataset used to develop the National Efficient Price and produce weights for the funding of public hospital services on an activity basis.

Queensland Health, in keeping with the [Addendum to the National Health Reform Agreement](https://federalfinancialrelations.gov.au/sites/federalfinancialrelations.gov.au/files/2021-07/NHRA_2020-25_Addendum_consolidated.pdf), is required to attest as to the completeness and quality of NHCDC data submitted by providing a Statement of Assurance.

Specifically, this statement includes:

* steps taken to promote completeness and accuracy of activity data
* efforts applied to ensure the classification of activity was in accordance with the current year’s standards, data plans and determinations
* variations in activity volumes and movements between activity-based funding and block funding, and
* as determined by the signing officer, other information deemed useful and relevant.

In preparation for these submissions, it is critical that clinical costing data is finalised, complete and available to Healthcare Purchasing and Funding Branch (HPFB), Healthcare Purchasing and System Performance Division by the requested date (see memoranda to [HHSs](https://www.health.qld.gov.au/__data/assets/pdf_file/0033/1358178/DDG-HPSP-Memo-HHS-Chief-Executives-Financial-and-Residential-Activity-Collection-2023-24.pdf) and [Mater Health Services](https://www.health.qld.gov.au/__data/assets/pdf_file/0019/1359001/Dr-Peter-Steer-Financial-and-Residential-Activity-Collection.pdf)).

# Scope

The scope of the FRAC includes components relative to the three hierarchical levels of the public hospital system:

* public acute and psychiatric hospitals (PHE component)
* HHS[[2]](#footnote-3) (excluding public acute and psychiatric hospitals) (HHS component)
  + HHS reporting is the ‘gap amounts’ i.e., total HHS minus all of the declared public hospitals in the HHS and includes the non-hospital facilities of the HHS.
* jurisdiction (public hospital services managed by the State e.g., Surgery Connect, Community Services Funding Branch)

# Data Collection Approach

The FRAC is managed overall by the Statistical Services Branch (SSB), with the data collection approach being that the HPFB prepare, distribute and validate in-scope expenditure, product stream and human resources (HR) data; and SSB receive and validate revenue, specialised services, teaching and accreditation status data. The SSB compiles and provides the complete Queensland Health’s data submission to the Australian Institute of Health and Welfare (AIHW).

## Recurrent expenditure, product streams and staffing

Please refer to this [formatting information](https://www.health.qld.gov.au/__data/assets/word_doc/0030/1358184/Expenditure_Product-Stream_Staffing_23-24_v1.0.docx) to assist in the provision of this data to HPFB.

## Revenue, Specialised Services, Teaching and Accreditation Status data

These types of data are to be supplied by reporting entities to SSB by completing FRAC form templates.

|  |  |  |
| --- | --- | --- |
| **Type of data** | **Reporting entity** | **FRAC form template** |
| Revenue | Hospital | [MTHACFR3](https://www.health.qld.gov.au/__data/assets/word_doc/0027/1358181/MTHACFR3_23-24_v1.0.docx) |
| HHS | [MTHACFR3](https://www.health.qld.gov.au/__data/assets/word_doc/0027/1358181/MTHACFR3_23-24_v1.0.docx) |
| State | [MTHACFR3](https://www.health.qld.gov.au/__data/assets/word_doc/0027/1358181/MTHACFR3_23-24_v1.0.docx) |
| Specialised Services | Hospital | [MTHACFR7](https://www.health.qld.gov.au/__data/assets/word_doc/0029/1358183/MTHACFR7_23-24_v1.0.docx) |
| Teaching Status | Hospital | [MTHACFR10](https://www.health.qld.gov.au/__data/assets/word_doc/0026/1358180/MTHACFR10_23-24_v1.0.docx) |
| Accreditation Status | Hospital | [MTHACFR11](https://www.health.qld.gov.au/__data/assets/word_doc/0028/1358182/MTHACFR11_23-24_v1.0.docx) |

Completed forms are then to be uploaded through the [MAC Online application](https://oasdcasprod.health.qld.gov.au:8443/ords/f?p=MAC:LOGIN:). [MAC Online User Guides](https://healthqld.sharepoint.com/sites/HPSPD-FRAC/SitePages/MAC-Online-Application.aspx) provide instructions on using this application.

**Note:** FRAC templates must not be altered in any way. Modified templates will not upload to MAC Online, preventing data submission.

## Data validation and comments

Data entered into a FRAC form are validated at source before the form can be submitted for HHS Chief Executive approval. Validation exceptions are raised when the reported activity for the reference year is compared to the previous year and fails predetermined acceptance criteria (e.g., variance percentage is high, same value both periods, null values etc).

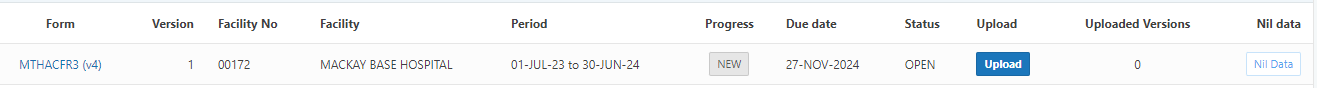
Reporting entities must respond to validation exceptions with relevant and meaningful comments that detail the reason/s for the variations in data reported.

Comments provided are retained within SSB’s databases and are utilised to respond to queries raised from within the Department of Health as well as the Commonwealth Government. Therefore, it is important that the comments provided clearly state the reasons for the variations. Reporting entities will be contacted by SSB seeking comments on data anomalies that appear where adequate comments are not provided.

In addition to validations applied by the MAC Online application, the SSB also undertake manual data quality checks to ensure the quality of the data and, where necessary, contact HHSs for explanation or amendment to data. This may include data quality, time-series validation checks raised by the Australian Institute of Health and Welfare where the Department is required to seek further clarification and/or commentary on the data as reported.

## Nil activity report

If there is no information to report on a FRAC form, a nil return is required to be submitted in MAC Online. When uploading a nil statement, please ensure the financial year, facility name and facility ID fields are completed. The Nil Data button on the ‘Data Entry’ screen can also be used to submit a nil statement:



# Further information

## New/amended General Ledger codes

General ledger account codes for 2023-2024 were sourced from the Finance Branch and based on the S/4 general ledger Chart of Accounts.

## Account Hierarchy

The ‘FRAC’ account code hierarchy created in S/4HANA is specifically used to support AIHW reporting requirements. As required, the Financial and Asset Accounting team provide advice as to the correct mapping for any expenditure and revenue account codes (as per the Queensland Health Chart of Accounts).

This account hierarchy is incorporated in DSS ‘FRAC’ reports within the ‘Finance T’ folder to assist with expenditure and revenue reporting where required.

The Department of Health job codes have been mapped to AIHW staffing categories in the ‘HR Payroll SAP’ folder to assist with ‘FRAC’ FTE and salaries & wages reporting.

### FRAC Contacts

|  |  |
| --- | --- |
| **FRAC Contacts** | |
| Healthcare Purchasing and Funding Branch | Colin McCrow  Manager – Activity Costing (HFCU)  phone: 07 3708 5894  email: colin.mccrow@health.qld.gov.au |
| Statistical Services Branch | Joanne Georgiou  Manager – Statistical Collections and Integration  phone: 07 2100 8810  email: joanne.georgiou@health.qld.gov.au |

# Abbreviations

|  |  |
| --- | --- |
| **Abbreviation** | **Description** |
| AIHW | Australian Institute of Health and Welfare |
| DSS | Decision Support System |
| FRAC | Financial and Residential Activity Collection |
| FTE | Full-time Equivalent |
| HHS | Hospital and Health Service |
| HPFB | Healthcare Purchasing and Funding Branch |
| HR | Human Resources |
| IHACPA | Independent Health and Aged Care Pricing Authority |
| MAC | Monthly Activity Collection |
| LHN/PHE NMDS | Local Hospital Networks / Public Health Establishments National Minimum Data Set |
| SSB | Statistical Services Branch |

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1. Referred to as Local Hospital Network (LHN) nationally. [↑](#footnote-ref-2)
2. Includes non-hospital facilities e.g. community health centres, primary health care centres, nursing homes, aged care and other residential care type facilities and Multi Purpose Health Services (MPHSs) [↑](#footnote-ref-3)