

6 Uses, data quality and future of the collection

The CSDA MDS collections are now providing national data on services funded under the CSDA, and are seen as a useful, sometimes primary, source of data in individual jurisdictions. The data are also being recognised as useful source information by service providers and others interested in national data.

The CSDA MDS collections benefited greatly from the preceding development and testing. Continuing feedback and analysis may well suggest further improvements, and the ongoing reviews and renegotiation within the disability field will also shape future collections. The ability to improve will be enhanced by ongoing quality input from the disability field.

6.1 Collection uses

All jurisdictions have experienced an increased demand for CSDA MDS data, as has the AIHW. The data have been used for policy and planning purposes as well as for public and ministerial accountability. Examples include:

- input to the national performance indicators developed by the Disability Services Working Group (Steering Committee for the Review of Commonwealth/State Service Provision 1997). The existence of the MDS data avoided the rapid development and collection organised by groups working with the Commission in other sectors where no national standardised data were available;
- State submissions and presentations to the Commonwealth Grants Commission;
- State budget submissions;
- regional planning;
- responding to ministerial correspondence;
- performance standards contracts monitoring;
- CSDA evaluation demand study (Madden et al. 1996)– MDS enabled comparison of supply and demand;
- State decisions on distribution of new funding– MDS revealed existing patterns of supply);
- area profiles of service use (within States);
- informing the development of planning for particular groups of people with a disability;
- summary reports to participating service providers and other stakeholders;
- ad hoc requests for data from specific services or areas; and
- ad hoc requests for data, for instance from State Industrial Commission, inquiries into poverty, employment steering committees.

6.2 Response rates and data quality

The national rate for return of Service Forms was 96%, which was higher than the 1995 rate of 93% (Table 6.1). Victorian and Northern Territory response rates in particular improved since 1995.

Gaps in both the 1995 and 1996 collections, due to absence of data from one or more jurisdictions, make national comparisons between years impossible. National analysis of trends over time will be possible in the future after collation of annual CSDA MDS collections with no gaps. This would be an important achievement for the CSDA MDS collections.

Table 6.1: Response rates for Service Forms, Commonwealth (partial), States and the Northern Territory, 1995 and 1996 (%)

	NSW	Vic.	Qld	WA	SA	Tas.	ACT	NT	Cwlth	Total
1995	94	80	96	n.a.	94	88	99	67	99	93
1996	97	95	97	99	94	88	n.a.	94	94	96

Notes

1. Data for CSDA services funded by Western Australia were not supplied in 1995.
2. Data for CSDA services funded by the Australian Capital Territory were not collected in 1996.
3. Data for CSDA services funded by the Commonwealth were not collected in 1996, except for those in the NIMS collection.
4. The response rate for Victoria in 1995 is an estimate only, due to incomplete regional records.
5. Figures are the percentage of services surveyed by each data source.

Areas of concern with the 1996 collection were:

- The Commonwealth did not collect recipient data, or much of the service-level data, from supported employment services. The 1997 collection has been undertaken and a commitment made to collect data annually for all services thereafter.
- Data collected by Western Australian covered a full-year period. They contained a data item asking whether recipients received an active service on the selected 'snapshot' day. The question did not work as expected. Responses were obtained at organisation level rather than at service-type level. A high number of 'not known' responses by service type were received from organisations providing services of more than one service type. This makes comparability between data from Western Australia and data from other jurisdictions difficult, and confuses the national picture. The question has been corrected in the 1997 collection.
- The non-participation of the Australian Capital Territory, related to departmental reorganisation. The 1997 collection has been undertaken.
- Recipient data for Commonwealth-funded open employment services were obtained from the NIMS data collection. In this data collection only one 'other disability type' can be recorded, and the data item on frequency of support in the emotional and social areas is not included. It is also not currently possible in NIMS data to determine whether service recipients actually received an active 'service' on the nominated 'snapshot' day, or just within the previous quarter.

Missing and 'not known' responses are described in Tables 6.2 and 6.3, as a proportion of total responses for each data item. The proportion of missing responses was quite low for most data items across most jurisdictions.

Table 6.2: 'Not stated' response rates for Service and Consumer Form data items, Commonwealth (partial), States and the Northern Territory, 1996 (%)

Data item	NSW	Vic.	Qld	WA	SA	Tas.	ACT	NT	Cwth
Service items									
Staff hours	1.0	2.3	1.3	10.0	1.0	5.9	n.a.	7.0	n.a.
Income sources	1.4	1.3	0	0	0	0	n.a.	2.3	n.a.
Operating hours per day	<0.1	1.8	0	2.9	0.6	3.4	n.a.	2.3	n.a.
Operating days per week	0	1.6	0	0.9	1.0	3.4	n.a.	2.3	n.a.
Operating weeks per year	0	1.6	0	0.7	0.7	3.4	n.a.	2.3	n.a.
Typical 1995–96 daily consumer numbers	4.2	7.2	6.8	14.7	11.8	20.3	n.a.	23.3	n.a.
Total 1995–96 consumer numbers	4.0	8.3	5.7	4.5	10.7	20.3	n.a.	23.3	n.a.
Consumer items									
Age	1.3	1.1	0.3	18.8	0.8	1.4	n.a.	0	0.1
Sex	0.6	1.0	0	1.5	0.5	0	n.a.	0	0
Country of birth	0.8	0.9	0	0	0.4	0	n.a.	0	0
Indigenous origin	1.4	1.9	0	0	0.4	0	n.a.	0	0
Method of communication	0.3	1.4	0	0	0.4	0	n.a.	0	0
Main language spoken at home	1.1	1.1	<0.1	0	0.5	0	n.a.	0	1.9
Primary disability type	0.4	2.1	0	17.3	0.2	0	n.a.	0	0
Other significant disability types	0	4.7	0	60.9	0	0	n.a.	0	0
Frequency of support or assistance needed:									
self-care	0.7	0.9	0	0	0.5	0	n.a.	0	n.a.
mobility	0.8	1.0	0	0	0.6	0	n.a.	0	n.a.
communication	0.6	0.9	0	0	0.6	0	n.a.	0	n.a.
home living	0.7	1.1	0	0	0.5	0	n.a.	0	n.a.
social skills	0.6	0.9	0	0	0.6	0	n.a.	0	n.a.
self-direction	0.7	0.9	0	0	0.5	0	n.a.	0	n.a.
managing emotions	0.7	0.9	0	n.a.	0.6	0	n.a.	0	n.a.
learning	0.8	1.0	0	0	0.7	0	n.a.	0	n.a.
working	1.1	1.3	0	0	1.2	0	n.a.	0	n.a.
other day activity	0.8	1.0	0	0	0.9	0	n.a.	0	n.a.
Main income source	4.3	5.8	0.1	0	5.8	0	n.a.	0	0
'Living arrangement/accommodation type'	1.0	2.2	0	0	0.4	0	n.a.	0	0

Notes

1. Data for CSDA services funded by the Australian Capital Territory and their recipients were not collected.
2. Data for CSDA services funded by the Commonwealth were not collected. Data for recipients were not collected, except for those in the NIMS collection. The NIMS collection did not include a range of data items.
3. Data on service income source, and some service recipient data items were not collected for CSDA directly provided 'Intellectual Disability Service' services funded by Queensland.
4. Data on managing emotions for recipients of CSDA services funded by Western Australia were not collected.
5. Figures are the percentage of total data item responses for each data source.

Some key areas of concern for the 1996 data collections, were:

- Indigenous origin– an important indicator for national planning purposes– a high level of ‘not stated’ and ‘not known’ responses, varying from 1% to 42% across States and the Northern Territory (when combined, Tables 6.2 and 6.3).
- Main income source for service recipients aged less than 16 years– a high level of ‘not known’ response, varying from 15% to 70% across States and the Northern Territory (Table 6.3).
- Individuals receiving a service over a year– some services are recording instances of service rather than numbers of people.
- Income source and amount– a high level of ‘not stated’ response in relation to non-government-sourced income from non-government service providers.

Table 6.3: ‘Not known’ response rates for Consumer Form data items, Commonwealth (partial), States and the Northern Territory, 1996

Data item	NSW	Vic.	Qld	WA	SA	Tas.	ACT	NT	Cwth
	Percentage								
Country of birth	1.8	1.9	15.4	40.9	2.1	3.6	n.a.	4.2	2.9
Indigenous origin	1.9	1.3	25.8	42.4	1.4	10.9	n.a.	0.8	6.3
Method of communication	0.1	0.5	7.8	52.9	1.1	0.7	n.a.	0.8	0.4
Main language spoken at home	1.3	1.5	14.8	37.2	1.8	4.0	n.a.	6.5	0
Frequency of support or assistance needed:									
self-care	0.5	1.7	4.4	61.5	1.6	0.6	n.a.	0.8	n.a.
mobility	0.3	1.0	17.2	60.9	1.2	0.3	n.a.	0.8	n.a.
communication	0.3	0.9	8.9	61.5	1.1	0.5	n.a.	0.4	n.a.
home living	1.4	2.9	4.6	67.6	2.2	1.5	n.a.	1.1	n.a.
social skills	1.7	2.0	4.7	66.8	3.0	1.9	n.a.	2.7	n.a.
self-direction	1.5	1.9	0.7	66.9	2.6	1.8	n.a.	0.8	n.a.
managing emotions	2.6	3.0	11.8	n.a.	4.1	4.4	n.a.	4.2	n.a.
learning	1.5	2.3	1.3	68.2	3.0	3.7	n.a.	4.9	n.a.
working	1.9	3.6	2.0	68.5	3.2	7.9	n.a.	6.5	n.a.
other day activity	1.2	2.4	4.9	70.0	2.2	1.3	n.a.	2.3	n.a.
CDA income source: child under 16 yrs	20.6	14.7	20.6	70.2	22.3	23.0	n.a.	28.6	0
Main income source: person 16 yrs or more	2.6	4.4	9.3	59.4	3.5	2.4	n.a.	3.8	0
‘Living arrangement/accommodation type’	1.1	0.6	0.2	38.3	0.8	0.8	n.a.	0.4	3.5

Notes

1. Data for CSDA services funded by the Australian Capital Territory and their recipients were not collected.
2. Data for CSDA services funded by the Commonwealth were not collected. Data for recipients were not collected, except for those in the NIMS collection. The NIMS collection did not include a range of data items.
3. Data for CSDA directly provided ‘Intellectual Disability Service’ services funded by Queensland and their recipients were not collected.
4. Data on managing emotions for recipients of CSDA services funded by Western Australia were not collected.
5. Figures are the percentage of total data item responses for each data source.

The high levels of ‘not known’ responses for Western Australia (Table 6.3) reflect the lack of snapshot day data. As noted earlier, these high levels make interpretation of Western Australian data difficult, and care should be taken with comparisons to other jurisdictions. However, they do not affect the national data to a great extent.

6.3 Ongoing data development

This 1996 collection forms part of an ongoing data development process. A pilot test was conducted in the second half of 1994 and, in 1995, the first annual collection. After each of these, changes have been implemented for the following collection. Plans are under way for the 1997 collection.

The process for change involves a meeting, early each year, of the MDS Network. Recommendations may be made for changes to data items, response categories, formats or protocols. The aim of the network is progressively to improve the collection, while maintaining as far as possible consistency over time of the data items and definitions, to enhance data comparability and minimise inconvenience to service providers. If the Disability Services Subcommittee (which oversees the MDS Network) endorses these recommendations, the AIHW drafts forms and guides that are circulated for comment and then finalised.

The 1994 pilot test covered all States and Territories, and all CSDA-funded non-government services. Directly provided government CSDA services were also included with the exception of New South Wales, Victoria and Queensland.

The 1995 collection was the first annual collection and also the first collection covering both services provided directly by governments under the CSDA and services provided by non-government organisations that were funded by a government under the CSDA. Unfortunately all data provided by Western Australia were withdrawn from the 1995 report due to that jurisdiction's concern about their data quality.

The key changes from the 1994 pilot test for the 1995 collection and from the 1995 collection for the 1996 collection are given in Appendix 3.

Most jurisdictions reported that the 1996 MDS collection proceeded more smoothly than that in 1995. Response rates were generally higher and missing data less frequent. Help desks received fewer enquiries.

These changes are attributed to clarifications in definitions and explanations in the 1996 Data Guide, the relative stability of the collection between 1995 and 1996, and acceptance that those changes that had been made were generally improvements, for example changes to the 'level of support' question.

The collection planned to take place in 1997 will be very similar to that for 1996, but will include a range of refinements and clarifications as detailed in Appendix 3.

Further improvements to the collection process for 1997 include:

- measures to increase overall response rates and better responses on all data items, including checks against other known data, greater follow-up for responses by all services and on items such as country of birth and Indigenous identification;
- planning data audits at service level, where possible;
- circulating details of improved edit checks being implemented by jurisdictions, to ensure the highest standard is reached by all;
- further clarification and explanation in the Data Guide; and
- development of a Network Guide for data coordinators in government departments.

In February 1997, the MDS Network discussed many of the issues raised above, as well as recommendations made by service providers and funding departments. The DSSC accepted the recommendations relating to improved quality, but did not want data items changed,

other than to make clarifications, until the new CSDA agreement was clarified. The 1991 CSDA expired on June 30 1997 and is being 'rolled-over' pending its renegotiation which may change Commonwealth and State responsibilities and/or the scope and coverage of the CSDA.

The 1997 MDS collection will proceed using the same scope of services as used for the 1996 MDS collection, that is on services which jurisdictions consider to fall within the CSDA in their jurisdiction in 1996. A new CSDA may require a review of the scope, content and method of future MDS collections.

6.4 Data quality and future collections

There are a number of issues, in addition to the CSDA renegotiation, which have the potential to impact on the CSDA MDS collection in the near future.

Further development of performance indicators may necessitate some further changes or additions to the CSDA MDS items. The use of, and the potential for further use of, MDS data for work on performance indicators, highlights the need for these data sets to be timely and accurate, and to be capable of being related to other key sources of planning data.

Feedback following use of the 1995 MDS collection confirmed the usefulness of the collection. However, the financial data did not meet the information needs of some users and hence there may be some changes in this area. The 'income source' question is believed to yield poorer quality data than some other items, because of the complexity of provision at 'outlet level' as well as possible sensitivity. One proposal is that 'total expenditure' would yield data of greater value and higher accuracy. 'Total expenditure' could use the categories: direct costs, indirect costs and capital costs. This would permit the calculation of CSDA funding as a proportion of total expenditure on services.

In addition to work on performance indicators and on improving the financial data, further work is considered necessary on a range of other issues including:

- ways of reducing respondent burden and more effectively integrating the CSDA MDS collection with other data requirements of jurisdictions;
- a possible variation of the 'snapshot' day style of collection for respite and recreation services;
- the use of service type to describe supply of services;
- multiple counting of individuals, and patterns of multiple service use;
- appropriate methods to collect a possible 'client satisfaction survey';
- interactions with those responsible for developing minimum data sets for Home and Community Care services and mental health services;
- alignment of the CSDA MDS and other related collections within national information modelling and planning; and
- quantity and quality of services received by individuals.

An issue of importance for data collections, from the year 2000 onwards, is that the World Health Organization is in the process of revising the International Classification of Impairments, Disabilities and Handicaps (the ICIDH). The Institute, as the Australian collaborating centre for the ICIDH, is working with an expert group to assist this process. The final classification is scheduled for release in 1999 and may well reshape the definitions used for disability for a number of national disability data collections, including the CSDA MDS.

A recent discussion paper (Madden & Hogan 1997) attempts to set out comparability between different data collections on disability and their relation to the ICIDH. The paper describes the current data in the disability field in Australia, including discussion of the CSDA MDS collections. National and international developments are outlined. A number of significant national service and survey definitions are related to key disability concepts. Suggestions are proposed as to how to progress towards the ultimate aim of greater consistency in data definitions, thereby enabling an improved picture of the need for and provision and use of disability services in Australia.

In conclusion, the CSDA MDS collections are now in a 'bedding down' stage. Improvement has been achieved each year in terms of response, accuracy, and quality of data. These improvements should continue for future collections, given the current level of cooperation and interest in the data.