

# **Day Therapy Centre Program Data Dictionary**

**Version 1.0**

The Australian Institute of Health and Welfare is Australia's national health and welfare statistics and information agency. The Institute's mission is to improve the health and well-being of Australians by informing community discussion and decision making through national leadership in developing and providing health and welfare statistics and information.

# **Day Therapy Centre Program Data Dictionary**

**Version 1.0**

Australian Institute of Health and Welfare  
Canberra

AIHW cat. no. AGE 27

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# Contents

<b>Alphabetic list of data definitions</b> .....	<b>vi</b>
<b>Abbreviations</b> .....	<b>viii</b>
<b>Acknowledgments</b> .....	<b>ix</b>
<b>1 Introduction</b> .....	<b>1</b>
1.1 The DTC data collection project .....	1
1.2 National & international standards .....	2
1.3 Objectives of the DTC data collection.....	2
1.4 The DTC national census and Data Dictionary V1.0.....	2
1.5 Scope of the DTC data collection .....	3
1.6 Limitations of the DTC data collection.....	6
<b>2 Structure of the Data Dictionary</b> .....	<b>7</b>
2.1 Format .....	7
2.2 Content.....	9
2.3 Organisation.....	10
<b>3 Data definitions</b> .....	<b>23</b>
<b>Appendix A</b> .....	<b>109</b>
Census forms.....	109
<b>Appendix B</b> .....	<b>122</b>
Definition of data element attributes.....	122
<b>Appendix C</b> .....	<b>125</b>
Code list for country of birth .....	125
Alphabetic code list for Country of birth.....	129
<b>Appendix D</b> .....	<b>132</b>
Code list for Health condition .....	132
Code list for Health condition – alphabetic .....	135
DTC Program Health condition code list mapped to the ICD-10-AM code.....	140
<b>Appendix E</b> .....	<b>147</b>
Code list for Main language other than English spoken at home .....	147

# Alphabetic list of data definitions

- Accommodation setting ..... 24
- Accommodation setting after cessation of therapy ..... 28
- Activity limitations ..... 31
- Activity limitations status ..... 34
- Address – DTC ..... 35
- Care plan ..... 36
- Care planning process – DTC ..... 37
- Care plan status ..... 38
- Carer ..... 39
- Carer availability ..... 40
- Carer co-residency status ..... 42
- Cessation of therapy episode status ..... 44
- Client profile – DTC ..... 45
- Co-location – DTC ..... 46
- Country of birth ..... 47
- Date of birth ..... 48
- Date of exit ..... 50
- Date of initial assessment ..... 51
- Day Therapy Centre agency ..... 52
- Dementia status ..... 53
- Direct service delivery – DTC ..... 55
- DTC client ..... 57
- DTC client ID ..... 58
- DTC ID ..... 59
- DTC therapy ..... 60
- DTC therapy episode ..... 62
- Family name/surname ..... 63
- Fee charging policy – DTC ..... 65
- First given name ..... 66

Government pension/benefit status .....	68
Health condition.....	69
Hours worked – DTC .....	71
Indigenous status .....	72
Letters of name .....	75
Location – DTC.....	77
Main language other than English spoken at home.....	78
Main reason for referral .....	81
Name – DTC .....	83
Operating area – DTC.....	84
Postcode.....	85
Proficiency in spoken English .....	86
Range of assistance – DTC .....	88
Reason for exit .....	90
Record linkage .....	92
Relationship of carer to care recipient.....	93
Sex .....	95
Sources of referral – DTC .....	97
Staffing profile – DTC.....	98
Suburb/town/locality name .....	100
Therapy delivery mode.....	101
Therapy delivery setting .....	102
Type of additional service.....	104
Type of pension/benefit.....	105
Type of therapy .....	107

# Abbreviations

ABS	Australian Bureau of Statistics
ACAP	Aged Care Assessment Program
AIHW	Australian Institute of Health and Welfare
CACP	Community Aged Care Package
DHA	Department of Health and Ageing
DTC	Day Therapy Centre
HACC	Home and Community Care
NCCS	National Classification of Community Services
NCSDC	National Community Services Data Committee
NCSDD	<i>National Community Services Data Dictionary</i>
NCSIM	National Community Services Information Model
NCSIMG	National Community Services Information Management Group



# Acknowledgments

AIHW Project Team: Mieke Van Doeland, Melinda Petrie and Trish Ryan.

Thanks are extended to the staff in the Assessment and Community Care Section of the Central Office of the Commonwealth Department of Health and Ageing and the State Offices of the Commonwealth Department of Health and Ageing for their advice and comment.

We would also like to acknowledge the significant contributions made by the Day Therapy Centres who participated in the Field Testing. Their suggestions, comments and advice were invaluable and much appreciated.

The Project Team would like to acknowledge the financial support of the Commonwealth Department of Health and Ageing who commissioned the AIHW to undertake this project.



# 1 Introduction

The aim of the Day Therapy Centre (DTC) Program is to provide a wide range of therapies such as physiotherapy, occupational therapy, speech therapy and podiatry to frail older people living in the community and to residents of Commonwealth-funded residential aged care facilities. Therapy is offered to individuals or groups of clients to assist them to either maintain or recover a level of independence which will allow them to remain either in the community or in low level residential care. DTC agencies may also provide therapy to young people with a disability, if there is no alternative service available to these people.

DTC agencies were originally established as a means of funding therapy in deficit-funded nursing homes. Hostel and community clients were also eligible, upon appropriate referral, to receive therapy from these Centres. The changes to nursing home funding in 1988, which included a component of funding for therapy to nursing home residents, necessitated a change to these funding arrangements. The functional separation from nursing homes established the basis of the DTC Program.

DTCs are currently administered under Conditions of Grant which provide contractual arrangements between the Commonwealth as the provider of the grant, and the DTC agency as grant recipient. There are some 160 services funded at an annual cost of \$31 million. The current distribution of services is uneven with a large proportion of funding going to services in South Australia. The uneven distribution reflects the location of services originally brought into the program.

The total annual DTC funding of \$31 million includes \$4.3 million announced in the 2001 Federal Budget for DTCs to enhance DTC services. Twelve services will receive funding from this initiative. Both new and current DTC service models will be evaluated to identify the most effective approaches to outreach into the community and in preventing premature admission to residential care.

## 1.1 The DTC data collection project

In March 2001, the Commonwealth Department of Health and Ageing contracted the Australian Institute of Health and Welfare (the Institute) to undertake a project to:

- identify information required for reporting on the DTC Program and develop a data dictionary to support reporting requirements;
- develop a data collection mechanism for the DTC Program, including field testing with DTC providers; and
- develop a guide for use to be used as a companion document to the data dictionary.

This Data Dictionary documents the outcomes of development work undertaken by the Institute, in collaboration with the Commonwealth Department of Health and Ageing, during 2001 and 2002 and includes definitions of the individual data items needed to assist with planning and policy development in the DTC Program. Forms to be used for the proposed collection of these data items via a national census are also included (Appendix A). Detailed documentation of the field testing with DTC providers can be found in the working paper *Report on the DTC Program Data Development Field Test (AIHW 2002)*.<sup>1</sup>

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<sup>1</sup> Petrie M & Van Doeland M 2002. Report on the Day Therapy Centre Program Data Development Field Test June 2002. Canberra: Australian Institute of Health and Welfare (Welfare Division Working Paper No. 39).

## 1.2 National and international standards

Throughout the process of developing the DTC data collection, the Institute has taken considerable care to maintain, wherever possible, comparability and 'mappability' between the data elements included within the *DTC Program Data Dictionary Version 1.0*, national and international standards and data elements in related collections, without compromising the logic and integrity of the DTC data collection.

In line with this the standards that have been given particular attention during this process have been Australian Bureau of Statistics (ABS) standards, the *National Community Services Data Dictionary* (NCSDD Version 2), the *National Health Data Dictionary* (NHDD Version 10), and the International Statistical Classification of Diseases and Related Health Problems (ICD-10-AM). In addition, the following data collections were also taken into account in order to promote consistency and comparability of data in the aged and community care sector: Aged Care Assessment Program Minimum Data Set (ACAP MDS Version 2.0); Community Aged Care Packages (CACP) data items; and Home and Community Care Minimum Data Set (HACC MDS Version 1.0 incorporating HACC MDS Guidelines Version 1.5).

## 1.3 Objectives of the DTC data collection

The objectives of the DTC data collection are to:

- provide Commonwealth DTC program managers with access to data for policy and program development and strategic planning;
- assist DTC agencies to provide high quality services to their clients by facilitating improved internal management and local/regional area planning and coordinated service delivery; and
- facilitate consistency and comparability of DTC data with national standards and other relevant information in the health and community services field.

## 1.4 The DTC national census and Data Dictionary V1.0

It is important to note the differences in content between the proposed DTC national census and the Data Dictionary.

The DTC national census will include all those data elements that are required for reporting consistently in a specified census period across all States and Territories and including all DTC agencies. The Dictionary contains definitions for each of these data elements as well as definitions of some other data elements and concepts which, for various reasons, do not have to be reported in the national census but nonetheless require a clear and agreed definition. These include:

- *Accommodation setting after cessation of therapy* (DRAFT data element until an on-going data collection commences);
- *Carer* (underlying concept to clarify which carers should be reported in the data collection);
- *Care plan* (underlying concept to clarify the main components of a care plan are);
- *Day Therapy Centre agency* (underlying concept to clarify one organisation reporting in the data collection);

- *Day Therapy Centre client* (underlying concept to clarify those clients who should be reported in the data collection);
- *Day Therapy Centre therapy* (underlying concept to clarify the types of assistance to be reported in the data collection);
- *Day Therapy Centre therapy episode* (underlying concept to clarify a client's period of therapy);
- *Family name/surname* (data element to support accurate reporting of *Letters of name*);
- *First given name* (data element to support accurate reporting of *Letters of name*);
- *Main language other than English spoken at home* (DRAFT data element until exploration of alternative method for identifying potential disadvantage related to cultural and linguistic diversity);
- *Proficiency in spoken English* (DRAFT data element until exploration of alternative method for identifying potential disadvantage related to cultural and linguistic diversity); and
- *Record linkage* (underlying concept to clarify reporting of *Letters of name*).

Definitions of data elements that will be included in the national census are labelled as CURRENT in the Dictionary. The data element *Accommodation setting after cessation of therapy* will remain in the Dictionary with a status of DRAFT until the possibilities of an on-going data collection are considered. The two DRAFT data elements, *Main language other than English spoken at home* and *Proficiency in spoken English* require further investigation of the standard for identification of cultural and linguistic diversity before their inclusion in the national census or ongoing data collection can be considered.

## 1.5 Scope of the DTC data collection

The proposed DTC national census is a client-centred census, designed to support program management and planning by supplying information about DTC clients and the types of therapies they receive. The DTC national census is also intended to assist service providers in monitoring their service provision and in meeting program accountability requirements. The scope of the census requirements is primarily defined by the agreed definition of a *Day Therapy Centre agency* and a *Day Therapy Centre client*. Full definitions of these two key concepts are included in Chapter 3.

In summary, a DTC client for the purpose of the national census is 'a person who receives DTC-funded therapy from the organisation'. As clients for whom the DTC agency fully recovers the cost of therapy are not included in this definition, they should not be reported in the national census. For example, clients who receive high level care in a residential setting and for whom the DTC agency fully recovers the cost of therapy should not be reported in the census. This is also the case for clients who live in a residential aged care service where they receive low level care, but for whom the residential aged care service receives therapy funding under the Resident Classification Scale (RCS questions 19 and 20), and for whom the DTC agency fully recovers the cost of therapy.

The reporting requirements for the proposed national census do not preclude DTC agencies from collecting other information considered necessary for day to day service provision nor does it preclude States/Territory offices of the Commonwealth incorporating extra items for reporting at the State/Territory level. These items are not included in the Dictionary as they are not required for national reporting purposes.

The data elements required for national reporting by DTCs relate to:

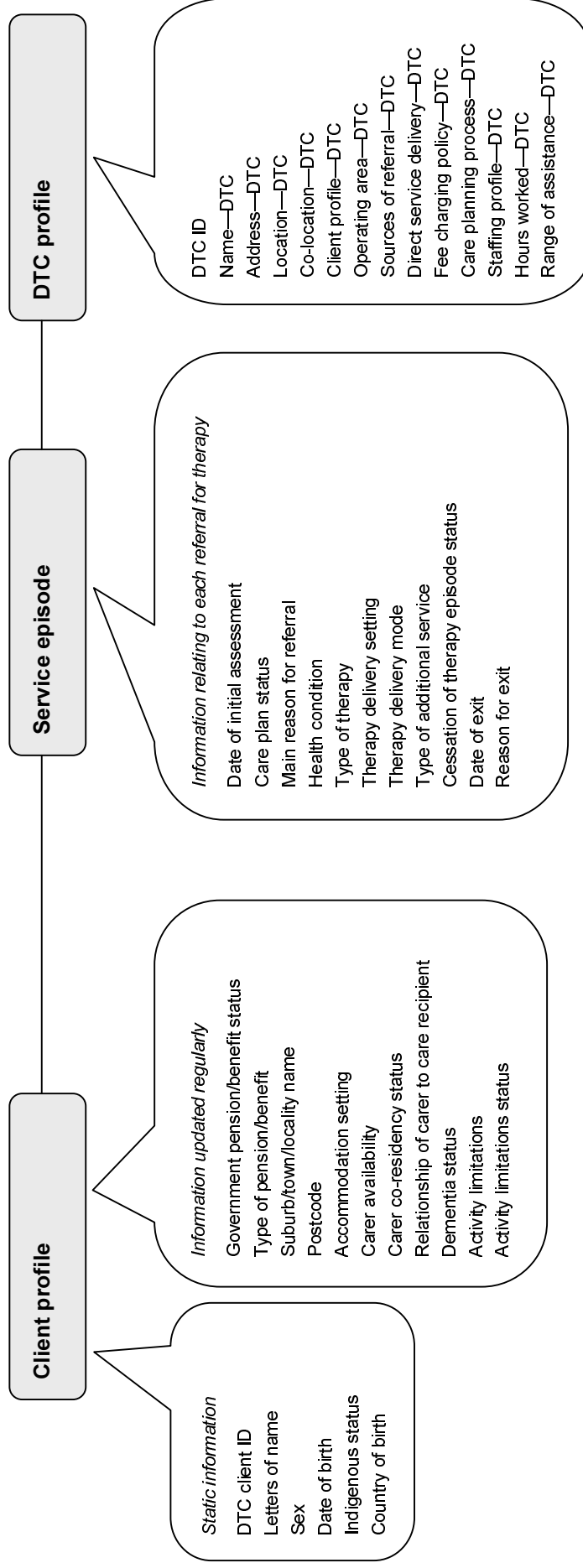
- characteristics and circumstances of clients, i.e. client profile (e.g. socio-demographic information, availability of a carer, health status, activity limitations);

- documentation of the therapy episode (e.g. date of initial assessment, date of exit, types of therapy received); and
- the DTC profile (e.g. staffing profile, range of therapies available).

The following diagram groups the data elements in the proposed DTC national census into these three categories. The information provided by these data elements is likely to be only a subset of all the information that a DTC agency will need in order to develop a client's care plan. This national census only includes the information that needs to be consistently collected and reported nationally by all DTC agencies in Australia for a given reporting period (see Section 1.5 Limitations of Version 1.0).

## Model of the Day Therapy Centre data collection

Concepts: Carer, Care Plan, Day Therapy Centre agency, DTC client, DTC therapy, DTC therapy episode, Record linkage



## 1.6 Limitations of the DTC data collection

### 1.6.1 Scope—agencies

Large differences exist between DTC agencies in terms of size, types of clients, approach to therapy, type of location, etc. This needed to be considered during the development of the national census forms and the Data Dictionary. For example, some DTC agencies are community-based while others are co-located with a residential aged care service. Also, while some DTC agencies employ multiple staff and have a designated building specifically for the provision of DTC therapy, others receive levels of funding that may only cover 25% of a therapist's salary. Careful consideration has been given to the design of the census forms to ensure that the full range of agencies will be able to complete the forms and that the information collected will be useful and consistent. However, until the census is conducted for the first time and the results examined, it is difficult to know what impact these variations will have on the data.

### 1.6.2 Scope—therapy

For the purposes of the DTC national census, DTC therapy is a service that is provided under DTC funding and that has been approved as a DTC therapy by the Commonwealth Department of Health and Ageing. In the context of the national census, the term therapy is used to describe all services provided by the DTC, including those services that are not usually referred to as 'therapy', e.g. nursing services or social work. The term therapy does not cover additional services, i.e. transport and meals provided by the DTC in conjunction with therapy. For the full definition of these terms, please refer to the data elements *Type of therapy* and *Type of additional service*.

While a therapy session to a client or group of clients may, in many cases, be covered by DTC funding alone, at other times it may be paid for out of two or even three sources of funding. A decision was made to include such therapy in the scope of this census, in order to avoid exclusion of clients who benefit from DTC funding and who would be considered DTC clients by the DTC agency. One consequence is that in some cases this will create overlap with clients reported in other data sets, for example the Home and Community Care (HACC) Program Minimum Data Set.

### 1.6.3 A 'snapshot'

The collection of information about DTC agencies and their clients will take the form of a national census rather than an on-going data collection initially. This means that the outcome of the national census will provide a 'snapshot' of DTC clients. As with any census or survey, the possibility exists that the client group reported is not 100% representative of the total DTC client base. For example, there might be 'seasonal' differences, such as different types of clients attending at different times of the year, or particular group activities offered depending on the time of year. These factors may introduce a bias into the census and will need to be taken into account when analysing the data and interpreting and reporting the results.



# 2 Structure of the Data Dictionary

## 2.1 Format

The presentation of data element definitions in the *DTC Program Data Dictionary* is primarily based on the international standards for defining data elements issued by the International Organisation for Standardization and the International Electrotechnical Commission, ISO/IEC Standard 11179 Specification and Standardization of Data Elements. The *National Community Services Data Dictionary*, the *National Health Data Dictionary*, the *HACC Data Dictionary*, the *ACAP Data Dictionary* and the *National Housing Assistance Data Dictionary* are also based on the ISO/IEC Standard 11179. The application of this international standard across data dictionaries in the health, housing and community services fields adds to the completeness, integrity and consistency of data definitions and consequently to the quality and utility of national data.

Collectively, the format describes a set of attributes for data definitions or 'metadata' standards applicable to each data definition. Metadata may be defined as data about data, or data describing the identifying, definitional, relational and representational attributes of data definitions (Australian Institute of Health and Welfare, *National Community Services Data Dictionary* Version 1.0, 1998, p.A-3).

The ISO/IEC 11179 is a six-part standard consisting of:

- Part 1 Framework for the specification and standardisation of data elements
- Part 2 Classification of concepts for the identification of domains
- Part 3 Basic attributes of data elements
- Part 4 Rules and guidelines for the formulation of data definitions
- Part 5 Naming and identification principles for data elements
- Part 6 Registration of data elements

The format used in the *DTC Program Data Dictionary* Version 1.0 (and in the other data dictionaries mentioned above) is based largely on Part 3 of the standard. Some enhancements have been made to the standard to suit Australia's circumstances.

### 2.1.1 Data element template

The template or format used as the framework for each data element definition is designed to prompt answers to a range of standard questions about each piece of information. The following table describes the specific questions that the fields in the template are designed to answer. Definitions for each of the data element attributes used in this Data Dictionary are provided at Appendix B.

Template used for specification of data elements

---

## Name

---

*Admin. status:*

### Identifying and definitional attributes

*Data element type:*

*Definition:* What is it you want to know?

*Context:* Who wants to know it and why?

### Relational and representational attributes

*Datatype:* Numeric *Representational form:*

*Field size:* *Min:* *Max:* *Representational layout:*

*Data domain:* What is the range of possible answers?

*Guide for use:* Which one of the possible answers should I choose?

*Collection methods:* How and when should this information be obtained?

*Related data:* What other information is connected to this information?

### Administrative attributes

*Source document:*

*Source organisation:*

*Comments:* What else do I need to know to understand this definition?

## 2.2 Content

There are three distinct types of data definitions included in the Data Dictionary. These are *data concepts*, *data elements* and *derived data elements*. The Dictionary contains definitions for a total of 7 data concepts, 46 data elements (3 of which have an 'Administration status' of 'DRAFT') and 1 derived data element.

- Data concepts:*** are included to clarify the concepts underpinning related data elements within the Data Dictionary. They have no reporting requirement, but define the higher level concepts that many of the individual data elements describe. Dictionary entries for data concepts are presented in a more limited format than other data elements.
- Data elements:*** specify particular pieces of information which need to be collected by DTCs and reported as part of the DTC data collection. Data elements are labelled as CURRENT. An Administration status of CURRENT reflects agreement by the Department of Health and Ageing to their inclusion in the DTC data collection.
- Derived data elements:*** are data which are not collected directly but which are derived from other information specified for collection by DTCs. The derivation of the data element may occur at different points in the data collection/provision/analysis process. In this case, the Derived data element *Letters of name* is derived by the DTCs from their record of the client's *First given name* and *Family name/surname*. Only *Letters of name* is reported nationally, and not the client's full names.

The following table lists all data definitions according to their type as described above.

## Data definitions by type (alphabetical)

<b>Data concepts</b>	
Carer	DTC therapy
Care plan	DTC therapy episode
Day Therapy Centre agency	Record linkage
DTC client	
<b>Data elements</b>	
Accommodation setting	Government pension/benefit status
Accommodation setting after cessation of therapy (Draft)	Health condition
Activity limitations	Indigenous status
Activity limitations status	Hours worked—DTC
Address—DTC	Location—DTC
Care planning process—DTC	Main language other than English spoken at home (Draft)
Care plan status	Main reason for referral
Carer availability	Name—DTC
Carer co-residency status	Operating area—DTC
Cessation of therapy episode status	Postcode
Client profile—DTC	Proficiency in spoken English (Draft)
Co-location—DTC	Range of assistance—DTC
Country of birth	Reason for exit
Date of birth	Relationship of carer to care recipient
Date of initial assessment	Sex
Date of exit	Sources of referral—DTC
Dementia status	Staffing profile—DTC
Direct service delivery—DTC	Suburb/town/locality name
DTC client ID	Therapy delivery mode
DTC ID	Therapy delivery setting
Family name/surname	Type of pension/benefit
Fee charging policy—DTC	Type of therapy
First given name	Type of additional service
<b>Derived data element</b>	
Letters of name	

## 2.3 Organisation

The data definitions in the DTC Program Data Dictionary Version 1.0 are presented in alphabetical order for easy reference. However, the data definitions have also been mapped to the National Community Services Information Model (NCSIM) Version 1.0 (with one modification – see below). The NCSIM provides an overall conceptual framework that facilitates mapping of the DTC data collection to other aged and community care program datasets and to data standards in the broader community services arena.

Diagrams illustrating the areas of the model to which each data definition relates are presented at the end of this chapter.

### 2.3.1 National Community Services Information Model Version 1.0

The *National Community Services Information Model Version 1.0* was developed by the Australian Institute of Health and Welfare during 1997, in consultation with the National Community Services Information Model Working Group. The Working Group was a subset of the National Community Services Data Committee (NCSDC), which is, in turn, a subcommittee of the National Community Services Information Management Group (NCSIMG). Membership of the NCSIMG includes representatives of all signatories to the National Community Services Information Agreement, including Commonwealth, State and Territory government departments responsible for community services, the Australian Bureau of Statistics and the Australian Institute of Health and Welfare.

The NCSDC was established primarily to develop and maintain the *National Community Services Data Dictionary* as the repository of nationally endorsed data definitions for use in the community services field across Australia. The NCSDC has a coordinating role to ensure national consistency and standards in quality control. The development of the *National Community Services Information Model* was seen by the NCSDC as the first step in improving the quality and consistency of national community services information.

The *National Community Services Information Model (NCSIM) Version 1.0* is reproduced at the end of this chapter. Following this the data definitions in Chapter 3 have been mapped to the entity in the NCSIM to which they relate.

The use of the NCSIM assists with ensuring compatibility between future developments in the DTC data collection and related data sets, and the processes and outcomes of future developments in the NCSIM. This is consistent with the objective of the DTC data collection of facilitating consistency and comparability of DTC Program data with other relevant information in the health and community services field.

### **2.3.2 Modifications to the NCSIM Version 1.0**

The NCSIM Version 1.0 has been modified by the inclusion of the Care plan entity from the National Health Information Model (NHIM) Version 2.0 (Draft). This enhancement has been made to add to the completeness of the NCSIM as applied to the Day Therapy Centre Program's information needs.



## PARTY

PERSON

AGENCY

## PARTY GROUP

FAMILY

HOUSEHOLD

TARGET GROUP

OTHER PARTY GROUP

## PARTY CHARACTERISTICS

### PERSON CHARACTERISTICS

DEMOGRAPHIC CHARACTERISTIC

SOCIO-CULTURAL CHARACTERISTIC

EDUCATIONAL CHARACTERISTIC

LABOUR CHARACTERISTIC

ACCOMMODATION/LIVING CHARACTERISTIC

INCOME CHARACTERISTIC

LEGAL CHARACTERISTIC

IMPAIRMENT CHARACTERISTIC

DISABILITY CHARACTERISTIC

FUNCTIONAL CHARACTERISTIC

OTHER PERSON CHARACTERISTIC

### PARTY GROUP CHARACTERISTIC

FAMILY CHARACTERISTIC

FAMILY INCOME CHARACTERISTIC

OTHER FAMILY CHARACTERISTIC

HOUSEHOLD CHARACTERISTIC

HOUSEHOLD INCOME CHARACTERISTIC

OTHER HOUSEHOLD CHARACTERISTIC

AGENCY CHARACTERISTIC

STATE OF WELLBEING

PERSON VIEW

## PARTY ROLE

PERSON ROLE

CITIZEN ROLE

FAMILY RELATIONSHIP ROLE

CARER ROLE

RECIPIENT ROLE

SERVICE PROVIDER ROLE (person)

### AGENCY ROLE

SERVICE PROVIDER ROLE (AGENCY)

SERVICE FUNDER ROLE

SERVICE PURCHASER ROLE

OTHER ROLE

## National Community Services Information Model Version 1.0 (Modified)

Prepared by the Community Care and Community Health Unit

Australian Institute of Health and Welfare

GPO Box 570, Canberra ACT, Australia 2601

Phone: (02) 6244 1000 Fax: (02) 6244 1199

## LOCATION

ADDRESS

### SETTING

SERVICE DELIVERY SETTING

OTHER SETTING

## NEED

## PERSON PARTICIPATION/ INDEPENDENCE

## CARE PLAN

## ENVIRONMENT

TOOLS AND EQUIPMENT

PERSONAL SUPPORT

SOCIAL AND CULTURAL ENVIRONMENT

ECONOMIC AND POLITICAL ENVIRONMENT

HUMAN-MADE PHYSICAL ENVIRONMENT

NATURAL ENVIRONMENT

## HEALTH AND WELFARE SERVICE EVENT

REFERRAL EVENT

ASSESSMENT FOR ELIGIBILITY FOR SERVICE EVENT

ENTRY INTO SERVICE EVENT

ASSESSMENT EVENT

SERVICE PROVISION EVENT

CASE MANAGEMENT EVENT

LEAVE FROM SERVICE EVENT

EXIT/DISCHARGE FROM SERVICE EVENT

DETERMINATION OF LEGAL STATUS EVENT

OTHER HEALTH AND WELFARE EVENT

OTHER EVENT

## EVENT

PERSON EVENT

BIRTH EVENT

LIFE EVENT

DEATH EVENT

ENVIRONMENTAL EVENT

ENVIRONMENTAL MODIFICATION EVENT

ECONOMIC TRANSACTION EVENT

EXPENDITURE

TRANSFER/SUBSIDY

REVENUE/RECEIPT

COMMUNITY/FAMILY EVENT

INFORMAL CARER ASSISTANCE EVENT

INFORMAL CARE EVENT

## HEALTH AND WELFARE SERVICE PROGRAM

## OUTCOME

## ENABLING FACTORS

RESOURCE

KNOWLEDGE FACTOR

AVAILABILITY FACTOR

ACCESSIBILITY FACTOR

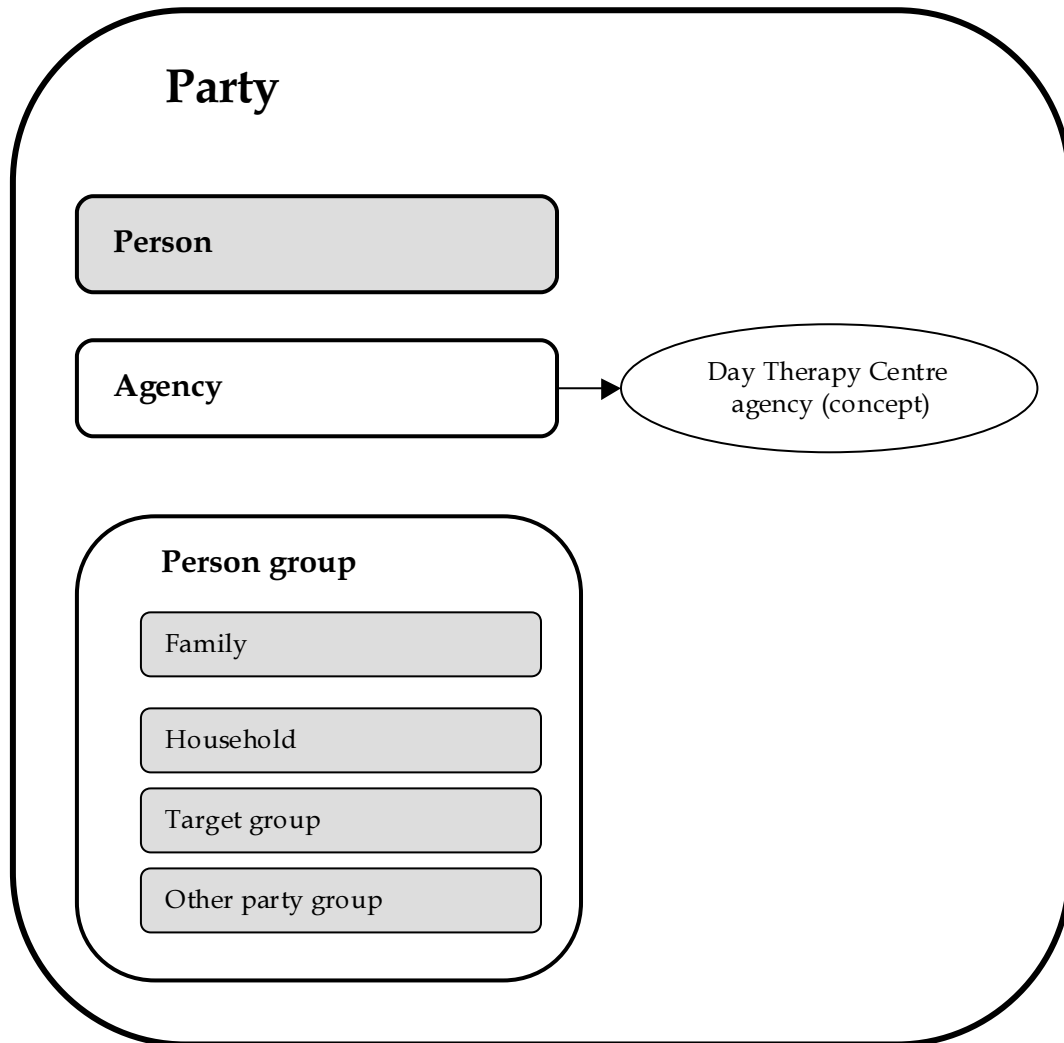
## SERVICE

FEE STRUCTURE

ACTIVITY

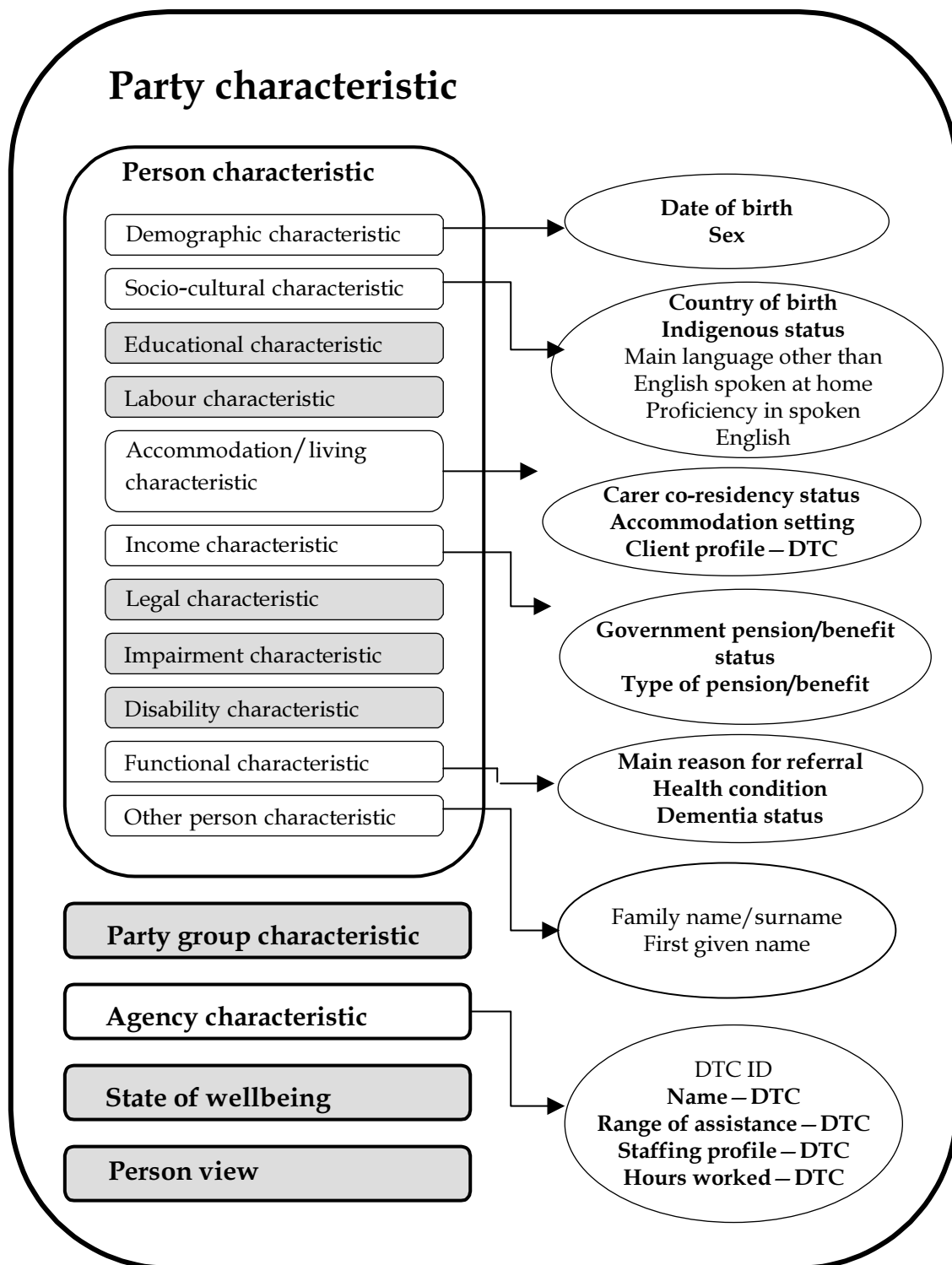






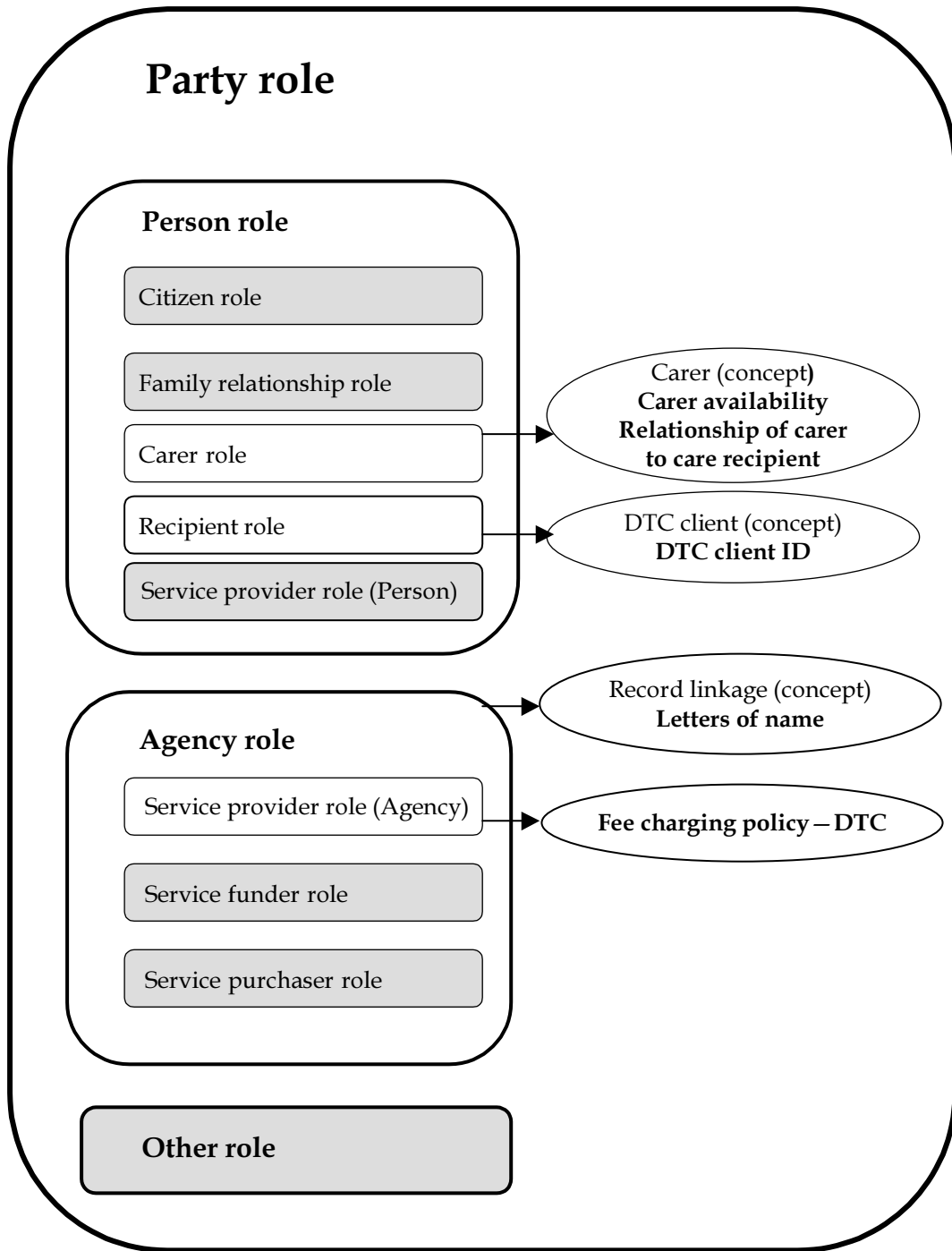
Shaded boxes represent entities that have no related data elements in the Day Therapy Centre census.

**Bold** data elements represent items that will be reported in the Day Therapy Centre census.



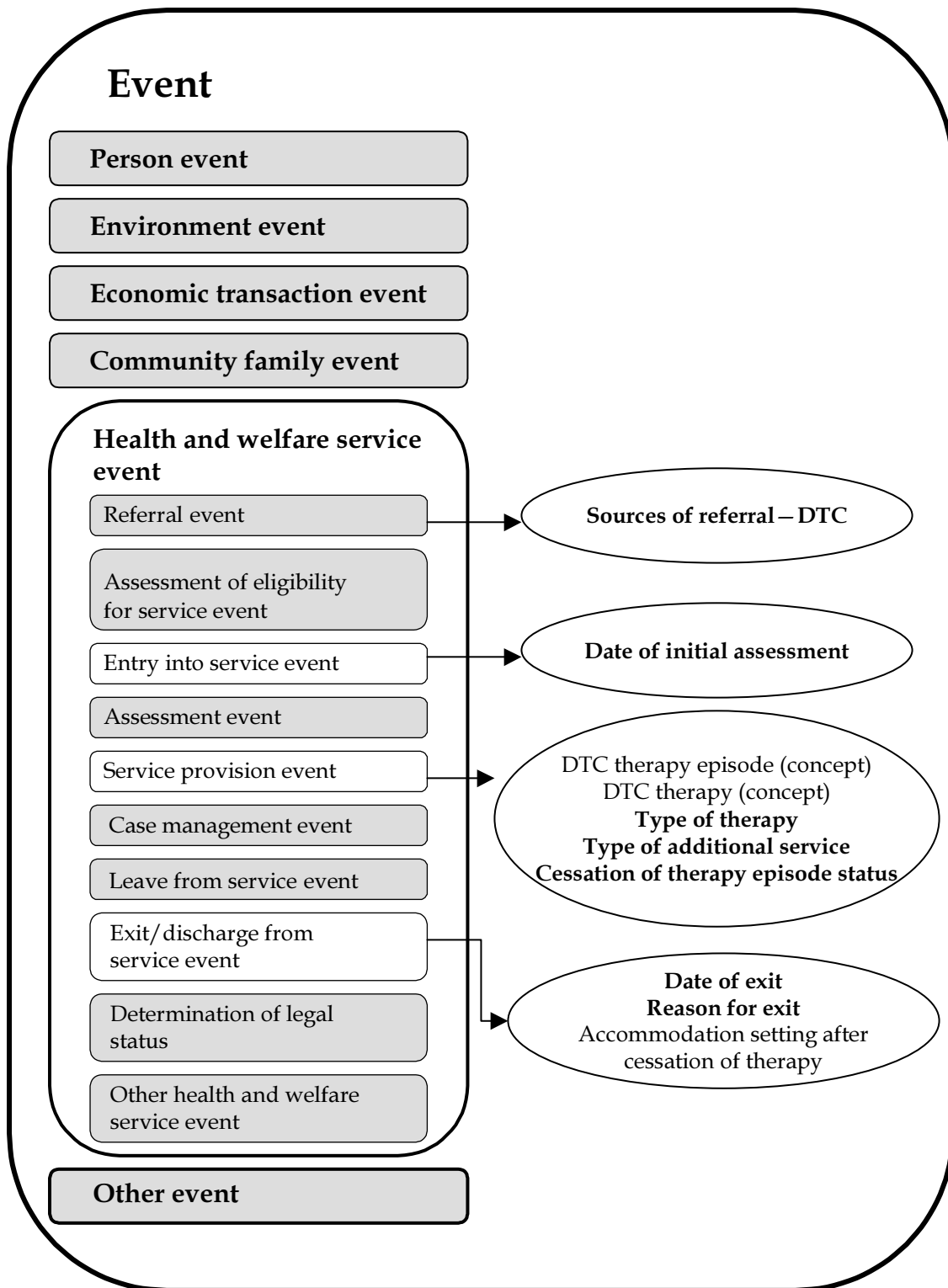
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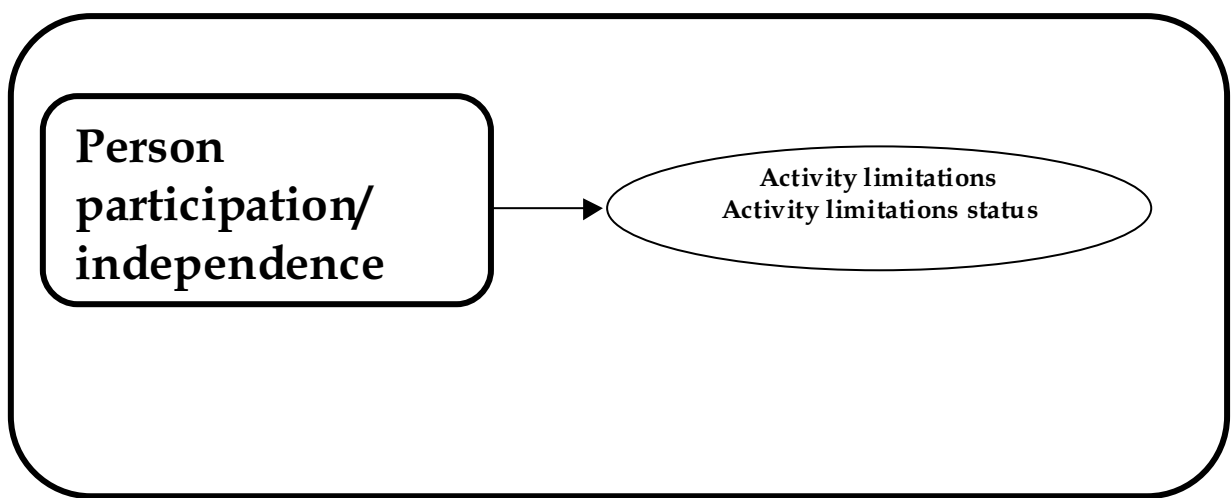
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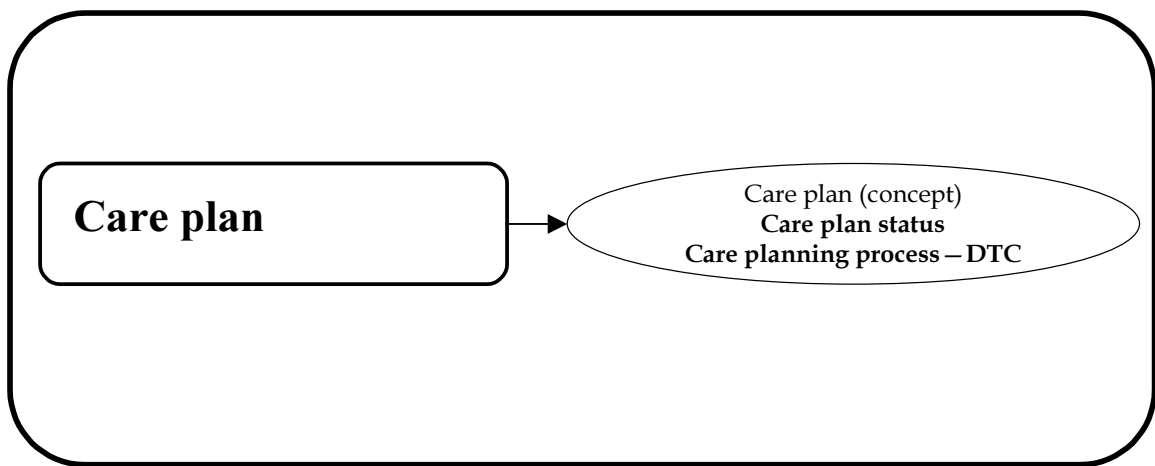


Shaded boxes represent entities that have no related data elements in the Day Therapy Centre census.

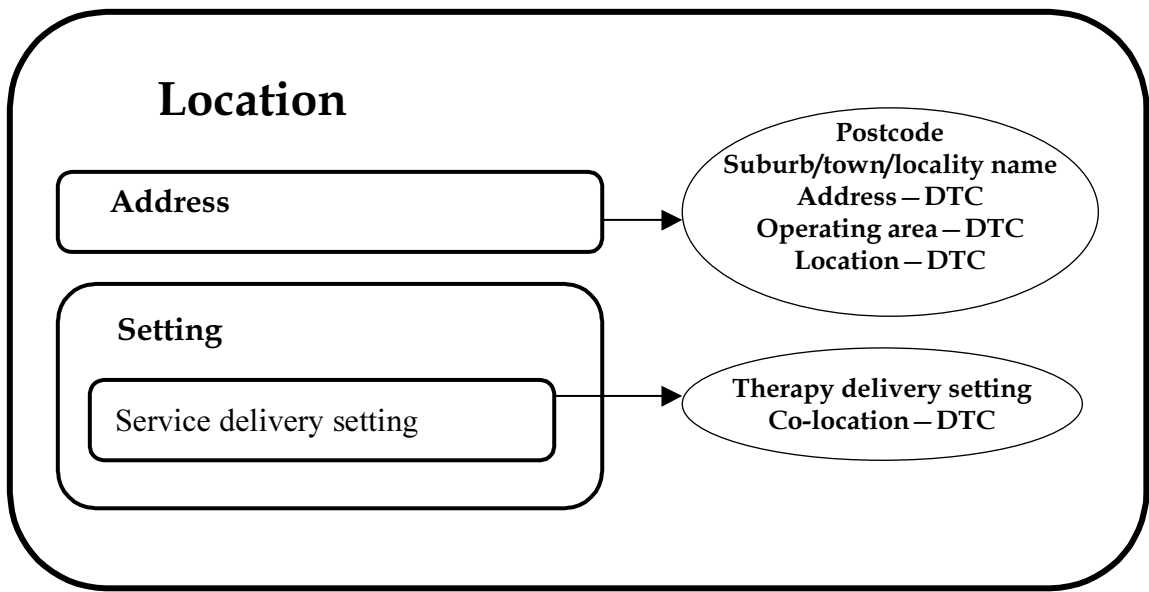
**Bold** data elements represent items that will be reported in the Day Therapy Centre census.



Shaded boxes represent entities that have no related data elements in the Day Therapy Centre census.  
**Bold** data elements represent items that will be reported in the Day Therapy Centre census.

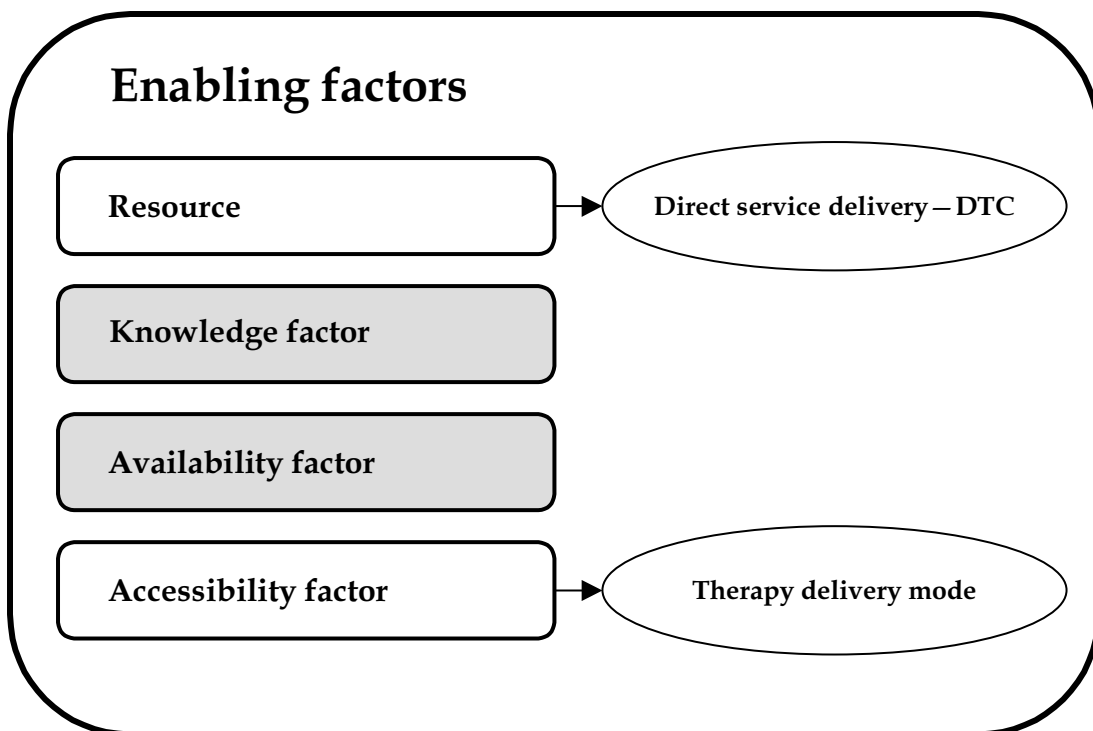


Shaded boxes represent entities that have no related data elements in the Day Therapy Centre census.  
**Bold** data elements represent items that will be reported in the Day Therapy Centre census.



Shaded boxes represent entities that have no related data elements in the Day Therapy Centre census.

**Bold** data elements represent items that will be reported in the Day Therapy Centre census.



Shaded boxes represent entities that have no related data elements in the Day Therapy Centre census.

**Bold** data elements represent items that will be reported in the Day Therapy Centre census.



# 3 Data definitions

This chapter contains definitions of individual data elements and data concepts included in the DTC national census.

Throughout the process of developing the DTC national census, the Project Team has taken considerable care to maintain, wherever possible, comparability and 'mappability' between the data elements included within the DTC Program Data Dictionary Version 1.0, national and international standards and data elements in related collections, without compromising the logic and integrity of the DTC national census.

In line with this, the standards and data collections which have been given particular attention during this process have been:

- Australian Bureau of Statistics (ABS) standards;
- *National Community Services Data Dictionary* (NCSDD Version 2);
- *National Health Data Dictionary* (NHDD Version 10);
- International Statistical Classification of Diseases and Related Health Problems (ICD-10-AM);
- Aged Care Assessment Program Minimum Data Set (ACAP MDS Version 2.0);
- Community Aged Care Packages (CACP) data items; and
- Home and Community Care Minimum Data Set (HACC MDS Version 1.0 incorporating HACC MDS Guidelines Version 1.5).

Where data elements have aligned with or are mappable to ABS, NCSDD, NHDD, ACAP MDS, CACP and HACC MDS standards, this has been indicated within the Source document field of each data definition.

In this chapter data definitions are presented in alphabetical order.

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## Accommodation setting

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The setting in which the person lives at the time of the census.

*Context:* The relationship between housing and the care needs of frail older people and people with disabilities is an area of considerable policy importance. Recent reviews have identified insecure housing as a risk factor in premature entry into residential care among frail older people and the possibility that it may be associated with more limited access to community based services.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 2 *Representational layout:* NN

*Data domain:*

- 1 Private residence – owned/purchasing
- 2 Private residence – private rental
- 3 Private residence – public rental or community housing
- 4 Private residence – unknown
- 5 Independent living within a retirement village
- 6 Boarding house/rooming house/private hotel
- 7 Short-term crisis, emergency or transitional accommodation
- 8 Supported community accommodation
- 9 Residential aged care service – low level care
- 10 Other institutional care
- 11 Public place/temporary shelter
- 12 Other
- 13 Unknown
- 99 Not stated/inadequately described (not for use in primary data collections)

*Guide for use:* **Private residence – owned/purchasing; private rental; public rental or community housing:** Includes private residences of a wide range of dwelling types, such as houses, flats, units, caravans, mobile homes, boats, marinas, etc. Codes 1, 2 and 3 distinguish between different types of tenure associated with private residences. Where the person's tenure over the residence is not clear (e.g. living rent free with friends or family), the code used should reflect the type of tenure primarily associated with the dwelling.

- 1 **Private residence – owned/purchasing:** Includes private residences which are owned or being purchased either by the person or another member of their household or family (including a non-resident relative).
- 2 **Private residence – private rental:** Includes private residences which are rented on the private rental market at competitive market rates. This includes dwellings rented through real estate agents as well as private landlords who are not part of the person’s family.
- 3 **Private residence – public rental or community housing:** Includes private residences secured through State/Territory Housing Authorities (public rental) or through community or cooperative housing groups.
- 5 **Independent living within a retirement village:** Includes persons living in self-care or independent-living units within a retirement village, irrespective of the type of tenure the person holds over the residence. Persons living in a retirement village with the provision of care services should be coded to Supported community accommodation.
- 7 **Short-term crisis, emergency or transitional accommodation:** Includes temporary or short-term accommodation provided in response to crisis or emergency situations (e.g. night shelters, refuges, hostels for the homeless), or to facilitate a transition between institutional-type settings and independent community living (e.g. halfway houses). These settings often provide some form of support services – such as meals, counselling, information or advocacy – but are not intended to function as a permanent or ongoing accommodation option. This code should only be used when the person is living in this type of setting at the time of the census and has no other usual accommodation setting.
- 8 **Supported community accommodation:** Includes community living settings or accommodation facilities in which clients are provided with support in some way by staff or volunteers. This category includes domestic-scale living facilities (such as group homes for people with disabilities, cluster apartments where a support worker lives on site, community residential apartments, congregate care arrangements, etc.) which may or may not have 24-hour supervision and care. It also includes larger-scale supported accommodation facilities providing 24-hour supervision and support services by rostered care workers (such as hostels for people with disabilities and government-regulated Supported Residential Services/Facilities (Victoria and South Australia only). Persons living in aged care hostels should be coded to Residential aged care – low level care.
- 9 **Residential aged care service – low level care:** Includes permanent residents of residential aged care services (formerly nursing homes and aged care hostels) and multi-purpose services or multi-purpose centres, who are receiving low level care. This category includes Indigenous Flexible Pilots.
- 10 **Other institutional care:** Includes other institutional settings which provide care and accommodation services such as hospitals, hospices and long-stay residential psychiatric institutions.
- 11 **Public place/temporary shelter:** Includes public places such as streets and parks, as well as temporary shelters such as bus shelters

or camps and accommodation outside legal tenure arrangements, such as squats.

- 12 **Other:** Includes all other types of settings.
- 13 **Unknown:** Should be recorded when the accommodation setting of the person cannot be ascertained for any reason.

**Collection methods:** This data element should be reported for all DTC clients and records the accommodation setting in which the person lives at the time of the census and be reported on Census Form B – Client data.

Only one code should be recorded.

Specify the accommodation setting when code 12 is used.

**Related data:** Is related to the data elements Postcode and Suburb/town/locality name  
May be used in conjunction with the draft data element Accommodation setting after cessation of therapy.  
Qualifies the data elements Carer availability, Carer co-residency status and Relationship of carer to care recipient

### **Administrative attributes**

**Source document:** Home and Community Care Data Dictionary Version 1.0, 1998.  
Aged Care Assessment Program Data Dictionary Version 1.0, 2002.

**Source organisation:** Department of Health and Ageing  
Aged Care Assessment Program Officials  
Australian Institute of Health and Welfare

**Comments:** The categories in the DTC data element *Accommodation setting* are different to the ACAP MDS Version 2.0 data element *Accommodation setting – usual* and the HACC MDS Version 1.5 data element *Accommodation setting*. However, they can all be mapped to the *National Community Services Data Dictionary Version 2 Residential setting* item (see following table). There are also differences between the concept of ‘usual’ in the ACAP MDS Version 2.0 and ‘while receiving services’ in the DTC data collection and the HACC MDS Version 1.5.

The current data element *Accommodation setting* describes the accommodation setting in which the person lives at the time of the DTC census. If and when an on-going data collection commences, it is recommended that this data element be updated to describe the accommodation setting in which the person lived ‘when they commenced their current therapy episode’.

**Mapping the coding options for Accommodation setting (DTC data collection and HACC MDS V1.5) to the *National Community Services Data Dictionary Version 2***

<b>Accommodation setting (DTC)</b>	<b>Residential setting (NCSDD)</b>	<b>Accommodation setting (HACC)</b>
Private residence—owned/purchasing Private residence—private rental Private residence—public rental or community housing Private residence—unknown Independent living within a retirement village	Private setting	Private residence—owned/purchasing Private residence—private rental Private residence—public rental  Private residence—mobile home Private residence—rented from Aboriginal community Independent living unit within a retirement village
Boarding house/rooming house/private hotel Short-term crisis, emergency or transitional accommodation Supported community accommodation	Community based setting	Boarding house/private hotel Short-term crisis, emergency or transitional accommodation facility Domestic-scale supported living facility Supported accommodation facility
Residential aged care service—low level care Other institutional care	Institutional setting	Residential aged care facility Psychiatric/mental health community care facility
Public place/temporary shelter	None/homeless/public place	Public place/temporary shelter Temporary shelter within Aboriginal community
Other		Other
Not stated/inadequately described		Not stated/inadequately described

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## Accommodation setting after cessation of therapy

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*Admin. status:* DRAFT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The setting in which the person resides immediately after they cease to attend the Day Therapy Centre agency.

*Context:* The DTC Program aims to assist frail older people maintain or recover a level of independence to allow them to remain living in the community or at a low level of residential care. Changes in a person's accommodation setting at the end of a *DTC therapy episode* gives some indication of the relationship between the provision of DTC therapy and the DTC Program's goal of helping people to remain living in the community or at a low level of residential care. Of particular interest to the DTC Program is the movement of clients from community-based settings into residential care settings and this data element will be used in conjunction with the data element *Accommodation setting* to identify these movements. In addition, this data element will be used in conjunction with the data element *Reason for exit* to gain an understanding of the circumstances surrounding client movements out of the DTC Program.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 2 *Representational layout:* NN

*Data domain:*

- 1 Private residence – owned/purchasing
- 2 Private residence – private rental
- 3 Private residence – public rental or community housing
- 4 Private residence – unknown
- 5 Independent living within a retirement village
- 6 Boarding house/rooming house/private hotel
- 7 Short-term crisis, emergency or transitional accommodation
- 8 Supported community accommodation
- 9 Residential aged care service – low level care
- 10 Residential aged care service – high level care
- 11 Hospital
- 12 Other institutional care
- 13 Public place/temporary shelter
- 14 Other
- 99 Not stated/inadequately described (not for use in primary data collections)

*Guide for use:*

This item should be used to record the accommodation setting of the person directly following the end of a *DTC therapy episode*.

**Private residence – owned/purchasing; private rental; public rental or community housing:** Includes private residences of a wide range of dwelling types, such as houses, flats, units, caravans, mobile homes, boats, marinas, etc. Codes 1, 2 and 3 distinguish between different types of tenure associated with private residences. Where the person's tenure over the residence is not clear (e.g. living rent free with friends or family), the code used should reflect the type of tenure primarily associated with the dwelling.

- 1 **Private residence – owned/purchasing:** Includes private residences which are owned or being purchased either by the person or another member of their household or family (including a non-resident relative).
- 2 **Private residence – private rental:** Includes private residences which are rented on the private rental market at competitive market rates. This includes dwellings rented through real estate agents as well as private landlords who are not part of the person's family.
- 3 **Private residence – public rental or community housing:** Includes private residences secured through State/Territory Housing Authorities (public rental) or through community or cooperative housing groups.
- 5 **Independent living within a retirement village:** Includes persons living in self-care or independent-living units within a retirement village, irrespective of the type of tenure the person holds over the residence. Persons living in a retirement village with the provision of care services should be coded to Supported community accommodation.
- 7 **Short term-crisis, emergency or transitional accommodation:** Includes temporary or short-term accommodation provided in response to crisis or emergency situations (e.g. night shelters, refuges, hostels for the homeless), or to facilitate a transition between institutional-type settings and independent community living (e.g. halfway houses). These settings often provide some form of support services – such as meals, counselling, information or advocacy – but are not intended to function as a permanent or ongoing accommodation option. This code should only be used when the person is living in this type of setting at the time of assessment and has no other usual accommodation setting.
- 8 **Supported community accommodation:** Includes community living settings or accommodation facilities in which clients are provided with support in some way by staff or volunteers. This category includes domestic-scale living facilities (such as group homes for people with disabilities, cluster apartments where a support worker lives on site, community residential apartments, congregate care arrangements, etc.) which may or may not have 24-hour supervision and care. It also includes larger-scale supported accommodation facilities providing 24-hour supervision and support services by rostered care workers (such as hostels for people with disabilities and government-regulated Supported Residential Services/Facilities (Victoria and South Australia only). Persons living in aged care hostels should be coded to Residential aged care (9 or 10) depending on the level of care they receive.

- 9 **Residential aged care service – low level care:** Includes permanent residents of residential aged care services (formerly nursing homes and aged care hostels) and multi-purpose services or multi-purpose centres, who are receiving low level care. This category includes Indigenous Flexible Pilots.
- 10 **Residential aged care service – high level care:** Includes permanent residents of residential aged care services (formerly nursing homes and aged care hostels) and multi-purpose services or multi-purpose centres, who are receiving high level care. This category includes Indigenous Flexible Pilots.
- 11 **Hospital:** This code should only be used when the person is in hospital at the time of assessment and has no other usual accommodation setting, or place they would call 'home'.
- 12 **Other institutional care:** Includes other institutional settings which provide care and accommodation services such as hospices and long-stay residential psychiatric institutions.
- 13 **Public place/temporary shelter:** Includes public places such as streets and parks, as well as temporary shelters such as bus shelters or camps and accommodation outside legal tenure arrangements, such as squats.
- 14 **Other:** Includes all other types of settings.

**Collection methods:**

This data element should be reported for clients who cease to attend the Day Therapy Centre and should be reported in conjunction with the client's *Date of exit* and the client's *Reason for exit*.

Only one code should be recorded.

Specify the accommodation setting when code 13 is used.

**Related data:**

Is used in conjunction with the data elements Accommodation setting, Date of exit and Reason for exit.

**Administrative attributes**

**Source document:**

Home and Care Community Data Dictionary Version 1.0, 1998.  
Aged Care Assessment Program Data Dictionary Version 1.0, 2002.

**Source organisation:**

Department of Health and Ageing  
Aged Care Assessment Program Officials  
Australian Institute of Health and Welfare

**Comments:**

In the classification of settings included in the National Classification of Community Services Version 1.0, aged care hostels are included in Class 205 (Supported accommodation facility) and nursing homes are included in Class 402 (Special-purpose residential facility). For the purposes of the DTC data collection, nursing homes and aged care hostels have been grouped together as Residential Aged Care Facilities (Class 402) and then divided into low/high level care. This is in line with the recent Commonwealth government restructuring of aged care services which combines nursing homes and aged care hostels into a single category called Residential Aged Care Services.

This data element is not currently reported in the national census, but may be considered for inclusion if an on-going data collection commences.



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## Activity limitations

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The activities in which the help or supervision of another individual is currently needed by the person either sometimes or always, as assessed by the Day Therapy Centre agency.

*Context:* Information about the types of assistance the client needs as assessed by the Day Therapy Centre (DTC) agency gives some indication of the extent and complexity of the needs of DTC clients. This information can be compared with members of the general population needing these types of assistance, as identified by the Australian Bureau of Statistics (ABS) in the Survey of Disability, Ageing and Carers.

The categories of assistance in this data element are designed to identify severe or profound core activity restriction (as defined by the ABS) and to enable comparisons of assistance needed by DTC clients with the types of assistance provided by other government funded community care services (e.g. Aged Care Assessment Program (ACAP), Home and Community Care (HACC) and Community Aged Care Packages (CACP)).

A person with a severe or profound core activity restriction is defined as someone who sometimes, or always, needs assistance with one or more of the tasks of self care, mobility or communication. However, needing assistance with these tasks is not used as an eligibility criterion for DTC therapy nor is it intended for use as a criterion for eligibility to any other type of service or care. The need for assistance with these tasks is one way of identifying clients with higher level needs in a way that allows them to be compared with members of the general population.

The three areas of activity in this data element are used to identify severe or profound core activity restriction. The categories used in this data element are consistent with those used in the ACAP and CACP programs. They are also consistent with the ABS Disability, Ageing and Carers Survey and thus facilitate comparisons with population data on the need for these types of assistance.

Consistency with the *National Community Services Data Dictionary* Version 2 has also been maintained. In particular, with the definition of Areas of activity used in that dictionary which is based on the International Classification of Functioning, Disability and Health (ICF, 2001).

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

**Data domain:**

- 1 Self care
- 2 Mobility
- 3 Communication
- 4 None
- 9 Not stated/inadequately described (*not for use in primary data collections*)

**Guide for use:**

- 1 **Self care:** Refers to assistance or supervision of another person with daily self care tasks such as eating, showering/bathing, dressing, toileting and managing incontinence. The independent use of aids and equipment should not be recorded against this code. Where it is considered that the persons' need for assistance with self care would be met by their independent use of aids or equipment (i.e. not requiring the help or supervision of another individual) they should not be recorded here.
- 2 **Mobility:** Refers to assistance or supervision of another person with activities such as maintaining or changing body position, walking, carrying (e.g. a glass of water), moving and manipulating objects, getting in or out of bed or a chair. The independent use of aids and equipment should not be recorded against this code. Where it is considered that the persons' need for assistance with mobility would be met by their independent use of aids or equipment (i.e. not requiring the help or supervision of another individual) they should not be recorded here.
- 3 **Communication:** Refers to assistance or supervision of another person with understanding others, making oneself understood by others. The independent use of aids and equipment, e.g. hearing aids, speech aids, and assistance from interpreters should not be recorded against this code. Where it is considered that the persons' need for assistance with communication would be met by their independent use of aids or equipment (i.e. not requiring the help or supervision of another individual) or by an interpreter, they should not be recorded here.
- 4 **None:** Should be recorded when the assistance or supervision of another person with any activity in code 1, 2 or 3 is not needed by the person.

**Collection methods:**

This data element should be reported in conjunction with the data element *Activity limitations status* for all DTC clients on Census Form B—Client data at the time of the census.

More than one code can be recorded.

Record those areas of activity in which the client needs the assistance or supervision of another person, from either formal agencies or informal carers, regardless of whether the assistance is available or not, and also regardless of whether the client agrees to a referral being made to a relevant agency.

The client's need for assistance or supervision from another person should take into account their use of, or need for, aids or equipment. That is, if a client independently uses an aid to help them with a particular activity, or could independently use such an aid, they should not be recorded as needing the help or supervision of another individual.

**Related data:** Is used in conjunction with the data element Activity limitations status.  
Is related to the data element Dementia status, Health condition and Main reason for referral.

### **Administrative attributes**

**Source document:** Aged Care Assessment Program Data Dictionary Version 1.0, 2002.

**Source organisation:** Aged Care Assessment Program Officials  
Australian Institute of Health and Welfare

**Comments:**

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## Activity limitations status

---

*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* Whether or not the person sometimes or always needs the help or supervision of another individual with self care, mobility and communication as assessed by the Day Therapy Centre agency.

*Context:* Information about the types of assistance the client needs as assessed by the Day Therapy Centre (DTC) agency gives some indication of the extent and complexity of the needs of DTC clients. This information can be compared with members of the general population needing these types of assistance, as identified by the Australian Bureau of Statistics (ABS) in the Survey of Disability, Ageing and Carers.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

1	Yes
2	No
3	Unknown
9	Not stated/inadequately described ( <i>not for use in primary data collections</i> )

*Guide for use:* 3 **Unknown:** Should be recorded when the need for assistance or supervision of another person cannot be ascertained for any reason.

*Collection methods:* This data element should be reported for codes 1, 2 and 3 in the data element *Activity limitations*.

This data element should be reported on Census Form B—Client data.

*Related data:* Is used in conjunction with the data element *Activity limitations*.  
Is related to the data elements *Dementia status*, *Health condition* and *Main reason for referral*.

### Administrative attributes

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## Address—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The postal address to which all mail for the Day Therapy Centre agency should be directed.

*Context:* This data element is required to facilitate contact with the Day Therapy Centre (DTC) agency.

### Relational and representational attributes

*Datatype:* *Representational form:*

*Field size:* *Min:* *Max:* *Representational layout:*

*Data domain:* Concatenation of:

Unit number  
Number  
Street OR PO Box  
City/town  
State/Territory  
Postcode

*Guide for use:*

*Collection methods:* This data element should be reported on Census Form A—DTC data.

*Related data:* Is related to the data elements Name—DTC and Operating area—DTC.

### Administrative attributes

*Source document:* National Community Services Data Dictionary Version 2, 2000.

*Source organisation:* National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:*

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## Care plan

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA CONCEPT

*Definition:* A personal plan that includes a statement of the client's strengths and needs, goals of care and activities/strategies to achieve the goals, recommendations for therapy and referrals to other service providers, the provision for discharge where appropriate and time limits with the provision for review and renewal.

*Context:* The development of the client's individual care plan is considered the most important outcome of the initial assessment process.

The plan should be developed with the client and their family and/or carer(s) where appropriate, as the result of an assessment process and should also include informing them of their rights and any charges that apply in a way that ensures that their rights are acknowledged and respected to promote dignity and independence.

While an overall care plan may exist for a particular client, individual therapists may also have developed therapy-specific treatment plans for this client. In this case the survey question refers to the overall care plan. Where such an overall plan does not exist, a therapy-specific treatment plan may be referred to as a 'care plan', provided that this treatment plan complies with the above definition.

### Relational and representational attributes

*Related data:* Is related to the data element Care plan status.

### Administrative attributes

*Source document:* Day Therapy Centres Program Guidelines, March 1998.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## Care planning process—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The care planning process the Day Therapy Centre agency has in place for Day Therapy Centre clients.

*Context:* The development of individual care plans is an important part of a Day Therapy Centre's (DTC's) role, because it is one of the cornerstones in providing a quality and focused service to clients. This information will give an indication of the range of care planning processes that are in place across DTC agencies.

### Relational and representational attributes

*Datatype:* Alphabetic *Representational form:* Code

*Field size:* *Min:* *Max:* *Representational layout:* AAAAAA.....

*Data domain:* (Text)

*Guide for use:*

*Collection methods:* This data element should be reported on Census Form A – DTC data.

*Related data:*

### Administrative attributes

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

---

## Care plan status

---

*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* Whether or not a care plan has been developed for the client.

*Context:* The initial assessment of clients by the Day Therapy Centre (DTC) agency establishes a basis from which progress or maintenance of function can be evaluated. The development of the client's individual care plan is considered the most important outcome of the initial assessment process. This data element provides information on the proportion of DTC clients for whom a care plan is developed.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

1	Yes
2	No
9	Not stated/inadequately described ( <i>not for use in primary data collections</i> )

#### *Guide for use:*

*Collection methods:* This data element should be reported for all DTC clients on Census Form B—Client data.

Only one code should be recorded.

*Related data:* Is related to the data concept Care plan.

### Administrative attributes

*Source document:* National Community Services Data Dictionary Version 2, 2000.

*Source organisation:* National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:*



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# Carer

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*Admin. status:* CURRENT

## Identifying and definitional attributes

*Data element type:* DATA CONCEPT

*Definition:* A person such as a family member, friend or neighbour, who provides regular and sustained care and assistance to another person without payment other than a pension or benefit.

The definition excludes formal care services such as home care or assistance provided by paid workers or volunteers arranged by formal services.

*Context:* Informal care and support networks play a critical role in community service provision, especially in caring for frail older persons living within the community. Information about carers is therefore of fundamental importance in assessing the ongoing needs of clients and their carers, and in service planning. The presence of a carer, where a vulnerable client lives alone, is an indicator of client risk. Information on client living arrangements and carer availability provides an indicator of the potential in-home support and the extent to which the burden of care is absorbed by the informal caring system. The stability or otherwise of the carer's availability may be significant in the capacity of the client continuing to remain at home.

## Relational and representational attributes

*Related data:* Is related to the data elements Carer availability, Carer co-residency status and Relationship of carer to care recipient.

## Administrative attributes

*Source document:* National Community Services Data Dictionary Version 2, 2000.  
Home and Community Care Data Dictionary Version 1.0, 1998.

*Source organisation:* National Community Services Data Committee  
Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## Carer availability

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* Whether someone, such as a family member, friend or neighbour, has been identified as providing regular and sustained care and assistance to the person without payment other than a pension or benefit.

*Context:* Recent years have witnessed a growing recognition of the critical role that informal support networks play in caring for frail older people and younger people with disabilities within the community. Not only are informal carers responsible for maintaining people with often high levels of functional impairment within the community, but the absence of an informal carer has been identified as a significant risk factor contributing to institutionalisation among the Day Therapy Centre (DTC) Program target population.

Even though carers may continue to play an important role for people in residential care, the focus of this data element is on the extent to which carers help their care recipients remain living in the community.

Increasing interest in the needs of carers and the role they play has prompted greater interest in collecting more reliable and detailed information about carers and the relationship between informal care and the provision of and need for formal services.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 Has a carer
- 2 Has no carer
- 3 Not applicable
- 4 Unknown
- 9 Not stated/ inadequately described (*not for use in primary data collections*)

*Guide for use:*

- 3 **Not applicable:** Should only be recorded for people who are permanent residents of residential aged care services, multi-purpose services (or multi-purpose centres), Indigenous flexible pilots, hospitals or other institutional care settings.
- 4 **Unknown:** Should be recorded when the availability of a carer cannot be ascertained for any reason.

This data element is purely descriptive of a client's circumstances. It is not intended to reflect whether a client is considered by the DTC agency to need a carer or not; or whether an identified 'carer' is considered to be capable of undertaking the caring role.

In line with this, the expressed views of the client and/or their carer or significant other should be used as the basis for determining whether the client is recorded as having a carer or not.

Where the client's or carer's views are not known, the following definition should be used to determine whether a person has a carer or not. A carer is someone who provides care and/or assistance to the person on a regular and sustained basis. If in doubt about whether the level and type of assistance provided by another person is sufficient to identify them as a carer, if the removal of that assistance would significantly compromise the care available to the person to their detriment, record the person as having a carer. Excluded from the definition of carers are paid workers or volunteers organised by formal services (including paid staff in funded group houses).

When asking a client about the availability of a carer, it is important for agencies to recognise that a carer does not always live with the person for whom they care. That is, a person providing care and assistance to the client does not have to live with the client in order to be called a carer.

The availability of a carer should also be distinguished from living with someone else. Although in many instances a co-resident will also be a carer, this is not necessarily the case.

**Collection methods:** This data element should be reported for all DTC clients whose accommodation setting is in the community, i.e. codes 1-8 and 11 in the data element *Accommodation setting* on Census Form B—Client data.

Only one code should be recorded.

**Related data:** Qualifies the data elements Carer co-residency status and Relationship of carer to care recipient.  
Is qualified by the data element Accommodation setting.  
Is related to the data concept Carer.

## **Administrative attributes**

**Source document:** Aged Care Assessment Program Data Dictionary Version 1.0, 2002.  
Home and Community Care Data Dictionary Version 1.0, 1998.  
National Community Services Data Dictionary Version 2, 2000.

**Source organisation:** Aged Care Assessment Program Officials  
Australian Institute of Health and Welfare  
Department of Health and Ageing  
National Community Services Data Committee

**Comments:** It is important to note that the definition of carer implied here is not the same as the definition of 'primary carer' used by the Australian Bureau of Statistics.

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## Carer co-residency status

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* Whether or not a carer lives with the person for whom they care.

*Context:* This data element helps to establish a profile of the characteristics of informal carers and as such it increases our knowledge about the dynamics and patterning of the provision of informal care to and by clients of the Day Therapy Centre (DTC) agency. In particular, whether or not the carer lives with the person for whom they care is one indication of the level of informal support available to clients and of the intensity of care provided by the carer.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 Co-resident carer
- 2 Non-resident carer
- 3 Not applicable
- 4 Unknown
- 9 Not stated/ inadequately described (*not for use in primary data collections*)

*Guide for use:*

- 3 **Not applicable:** Should only be recorded for people who are permanent residents of residential aged care services, multi-purpose services (or multi-purpose centres), Indigenous flexible pilots, hospitals or other institutional care settings.
- 4 **Unknown:** Should be recorded when the co-residency status of a carer cannot be ascertained for any reason.

A client may have more than one family member or friend providing them with care and assistance. In such circumstances, this data element relates to the carer who is identified as providing the most care and assistance.

A co-resident carer is a person who provides care and assistance on a regular and sustained basis to a person who lives in the same household. A non-resident or visiting carer is a person who provides care and assistance on a regular and sustained basis to someone who lives in a different household.

If a client has both a co-resident (e.g. a spouse) and a visiting carer (e.g. a daughter or son), the coding response to this data element should be related to the carer who provides the most care and assistance related to the client's capacity to remain living at home. The expressed views of the client and/or their carer(s) or significant other should be used as the basis

for determining which carer should be considered to be the primary or principal carer in this regard.

**Collection methods:** This data element should be reported for all DTC clients whose accommodation setting is in the community, i.e. codes 1–8 and 11 in the data element *Accommodation setting* on Census Form B—Client data.

Only one code should be recorded.

**Related data:** Is qualified by the data elements Accommodation setting and Carer availability.

Is related to the data concept Carer.

### **Administrative attributes**

**Source document:** Aged Care Assessment Program Data Dictionary Version 1.0, 2002.  
Home and Community Care Data Dictionary Version 1.0, 1998.  
National Community Services Data Dictionary Version 2, 2000.

**Source organisation:** Aged Care Assessment Program Officials  
Australian Institute of Health and Welfare  
Department of Health and Ageing  
National Community Services Data Committee

**Comments:**

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## Cessation of therapy episode status

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**Admin. status:** CURRENT

### Identifying and definitional attributes

**Data element type:** DATA ELEMENT

**Definition:** Whether or not the client has ceased to receive Day Therapy Centre-funded therapy.

**Context:** This data element may be used in conjunction with the data elements *Date of initial assessment* and *Date of exit* to provide an indication of the length of stay of clients in the Day Therapy Centre (DTC) Program.

### Relational and representational attributes

**Datatype:** Numeric **Representational form:** Code

**Field size:** **Min:** 1 **Max:** 1 **Representational layout:** N

**Data domain:**

- 1 Yes
- 2 No
- 9 Not stated/inadequately described (*not for use in primary data collections*)

**Guide for use:**

- 1 **Yes:** Should be recorded for clients who have ceased to receive DTC-funded therapy for their current referral. This includes clients who live in a residential aged care service and move from receiving low level care to high level care, or clients in low level care who become eligible for therapy funding under the Resident Classification Scale (RCS question 19 and 20). For the purposes of the DTC census, these clients cease to be DTC clients, even though they may continue to receive therapy at the DTC agency.
- 2 **No:** Includes clients who are currently inactive but are still on the books and who may resume therapy under their current referral e.g. 'review phase clients'.

**Collection methods:** This data element should be reported for all DTC clients who have ceased to receive DTC funded therapy on Census Form B—Client data.

Only one code should be recorded.

**Related data:** Is related to the data concept DTC therapy episode. Qualifies the data elements Date of exit and Reason for exit.

### Administrative attributes

**Source document:** Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

**Source organisation:** Department of Health and Ageing  
Australian Institute of Health and Welfare

**Comments:**

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## Client profile—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* Whether the clients that receive therapy at the DTC agency live at the residential aged care service, in the community or both.

*Context:* This information assists in providing a profile of the Day Therapy Centre (DTC) agency's client group.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* CODE

*Field size:* *Min:* 1 1 *Representational layout:* N

*Data domain:*

- 1 Residential aged care service
- 2 Community
- 3 Both
- 9 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:*

*Collection methods:* This data element should only be reported by DTC agencies that are co-located with a residential aged care service.

This data element should be reported on Census Form A—DTC data.

*Related data:* Is qualified by the data element Co-location—DTC.  
Is related to the data element Location—DTC.

### Administrative attributes

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## Co-location—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* Whether or not the Day Therapy Centre agency is co-located with a residential aged care service.

*Context:* This information assists in providing a profile of the Day Therapy Centre (DTC) agency's client group.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* CODE

*Field size:* *Min:* 1 1 *Representational layout:* N

*Data domain:*

1	Yes
2	No
9	Not stated/inadequately described ( <i>not for use in primary data collections</i> )

#### *Guide for use:*

*Collection methods:* This data element should be reported for all locations reported by the DTC agency.

Only one code should be recorded.

This data element should be reported on Census Form A – DTC data.

*Related data:* Qualifies the data element Client profile – DTC.  
Is related to the data element Location – DTC.

### Administrative attributes

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*



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## Country of birth

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The country in which the person was born.

*Context:* This data element can be analysed to derive measures of access to Day Therapy Centres (DTC) by culturally and linguistically diverse members of the population. This information is also used for planning of targeted services to meet the specific needs of members of culturally and linguistically diverse groups.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 4 *Max:* 4 *Representational layout:* NNNN

*Data domain:* Standard Australian Classification of Countries 1998 4-digit (individual country) level, ABS Catalogue No. 1269.0 (refer to Appendix C).

*Guide for use:* Code 0000 should be used when the country of birth has not been supplied by the client upon request or where insufficient information has been supplied by the client to code this data element.

*Collection methods:* This data element should be reported for all DTC clients on Census Form B—Client data.

DTC agencies may collect *Country of birth* in a variety of ways. Some DTC agencies use an open ended question asking the person to specify their country of birth. Regardless of the exact format used by the DTC, *Country of birth* should be collected in such a way as to allow the information to be coded using the Standard Australian Classification of Countries. A question that only asks the person to identify whether they were born in either an 'English-speaking' or 'non-English-speaking' country will not provide sufficient information to code the person's *Country of birth*.

*Related data:* Is related to the data element Indigenous status and the draft data elements Main language other than English spoken at home and Proficiency in English.

### Administrative attributes

*Source document:* Australian Bureau of Statistics: Standard Australian Classification of Countries 1998, ABS Catalogue No. 1269.0.  
National Community Services Data Dictionary Version 2, 2000.

*Source organisation:* Australian Bureau of Statistics  
National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:*

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## Date of birth

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The date of birth of the person.

*Context:* This data element is required for many purposes in the Day Therapy Centre (DTC) Program. Planning processes for the program require analysis of the number of people in the general population aged 70 and over, and 50 and over for Aboriginal and Torres Strait Islander people, living in different geographic areas across Australia. Comparisons of the number of people assessed by DTC agencies in these age groups with general population numbers is one measure of the accessibility of the program to its target group.

*Date of birth* is also combined with the data elements *Letters of name* and *Sex* to construct a statistical linkage key. This key assists with counting the number of people who have been treated by DTC agencies across Australia by identifying where multiple records appear to refer to the same person.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 8 *Max:* 8 *Representational layout:* DDMMYYYY

*Data domain:* Valid date.

*Guide for use:* This data element should always be recorded as an 8 digit valid date comprising day, month, and year. Year should always be recorded in its full 4-digit format. For days and months with a numeric value of less than 10, DTC agencies should use zeros to ensure that the date contains the required 8 digits. For example, for a person born on the 1st of July, 1926, their *Date of birth* would be reported as 01071926.

If the actual date of birth of the person is not known, DTC agencies should calculate an estimated date of birth in the following way. If the age of the person is known, the age of the person should be used to derive the person's year of birth. If the person's age is not known, an estimate of the person's age should be used to calculate an estimated year of birth. An actual or estimated year of birth should then be converted to an estimated date of birth according to the following convention: 0101 estimated year of birth. The 1st of January is used for estimated dates of birth to align with the *National Community Services Data Dictionary* Version 2, the *CACP Data Dictionary* Version 1.0 and established practice in the *HACC MDS* Version 1.5. It is important that DTC agencies do not record estimated dates of birth by using '00' for the day, month or year as this would not be considered a valid date by the system processing the data.

**Collection methods:** This data element should be reported for all DTC clients on Census Form B–Client data.

**Related data:** Is related to the data concept Record linkage.  
Is used in conjunction with the data elements Letters of name and Sex.

### **Administrative attributes**

**Source document:** National Community Services Data Dictionary Version 2, 2000.

**Source organisation:** National Community Services Data Committee  
Australian Institute of Health and Welfare

**Comments:**

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## Date of exit

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The date on which the person ceased to receive Day Therapy Centre-funded therapy.

*Context:* This data element may be used in conjunction with the data element *Date of initial assessment* to provide an indication of the length of stay of clients in the Day Therapy Centre (DTC) Program.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 8 *Max:* 8 *Representational layout:* DDMMYYYY

*Data domain:* Valid date.

*Guide for use:* This data element should always be recorded as an 8-digit valid date comprising day, month, and year. Year should always be recorded in its full 4-digit format. For days and months with a numeric value of less than 10, DTCs should use zeros to ensure that the date contains the required 8 digits. For example, for a person who last received assistance from the DTC on the 1st of July, 1926, their *Date of exit from DTC therapy episode* would be reported as 01071926.

DTC clients who live in a residential aged care service and move from receiving low level care to high level care or or clients in low level care who become eligible for therapy funding under the Resident Classification Scale (RCS question 19 and 20), cease to be DTC clients for the purposes of the DTC census, even though they may continue to receive therapy at the DTC agency. In line with the DTC Program Guidelines, the assistance provided to these clients is fully covered by the residential aged care service and should be recovered by the DTC agency.

*Collection methods:* This data element should be reported for all DTC clients who have ceased to receive DTC funded therapy on Census Form B—Client data.

*Related data:* Is related to the data concept DTC therapy episode and the data element Reason for exit.  
Is qualified by the data element Cessation of therapy episode status.  
Is used in conjunction with the data element Date of initial assessment and the draft data element Accommodation setting after cessation of therapy.

### Administrative attributes

*Source document:* National Community Services Data Dictionary Version 2, 2000.

*Source organisation:* National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:*

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## Date of initial assessment

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The date on which the person had their first assessment in relation to their current referral for therapy.

*Context:* This data element may be used in conjunction with the data element *Date of exit* to provide an indication of the length of stay of clients in the Day Therapy Centre (DTC) Program.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 8 *Max:* 8 *Representational layout:* DDMMYYYY

*Data domain:* Valid date.

*Guide for use:* This data element should always be recorded as an 8-digit valid date comprising day, month, and year. Year should always be recorded in its full 4-digit format. For days and months with a numeric value of less than 10, DTCs should use zeros to ensure that the date contains the required 8 digits. For example, for a person who first received assistance from the DTC on the 1st of July, 1926, their *Date of initial assessment* would be reported as 01071926.

*Collection methods:* This data element should be reported for all DTC clients on Census Form B—Client data.

*Related data:* Is related to the data concepts DTC client and DTC therapy episode and the data element DTC client ID  
Is used in conjunction with the data element Date of exit.

### Administrative attributes

*Source document:* National Community Services Data Dictionary Version 2, 2000.

*Source organisation:* National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:*

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## Day Therapy Centre agency

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA CONCEPT

*Definition:* An organisation or organisational sub-unit that is responsible for the provision of Day Therapy Centre-funded therapy to clients.

*Context:* An agency may or may not directly provide the therapy to clients, but is responsible for their provision, whether directly, administratively or via allocation of funds.

Regardless of the level at which an organisation is funded, a *Day Therapy Centre (DTC) agency*, for the purposes of this data collection, is the level of the organisation responsible for the service provision to clients. In some instances, this means that one DTC-funded organisation will have many DTC agencies.

Sometimes, DTC-funded agencies may contract out or broker the therapy required by their clients to other service providers. Although DTC agencies may not directly provide the therapy in these cases, the DTC agency paying for the therapy to clients is considered responsible for that therapy and should report on those clients and the therapy they receive in a DTC data collection.

### Relational and representational attributes

*Related data:* Is related to the data concept DTC client and the data element DTC ID.

### Administrative attributes

*Source document:* National Community Services Data Dictionary Version 2, 2000.

*Source organisation:* National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:* Some agencies may also administer programs other than DTC-funded therapy. Such agencies are considered DTC agencies if they also provide DTC-funded therapy to clients.

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## Dementia status

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* Whether or not the person has been formally diagnosed with dementia to the knowledge of the Day Therapy Centre agency.

*Context:* Information on whether the person has dementia assists in the identification of people who are 'at risk' of entry into residential aged care. Having dementia is considered one of the five risk factors, along with: being 80 years or over (or 60 years or over for care recipients who are Aboriginal and/or Torres Strait Islander people), having a severe or profound core activity restriction, not having an informal carer, or living alone. Any person who has four or more of these characteristics can reasonably be considered vulnerable to admission to a residential aged care service.

The methodology for the identification of care recipients who may be 'at risk' of entry to a residential aged care service as a permanent resident has been developed for the Aged Care Assessment Program (ACAP) Minimum Data Set Version 2.0. Further development of this methodology may occur in the future as some preliminary investigations applying this methodology to data from the Australian Bureau of Statistics Survey of Disability, Ageing and Carers suggest that the requirement that people meet four out of five of these criteria may eliminate a large proportion of people living in the community. A modified methodology, that would allow the identification of a larger number of people, may be developed in the context of the ACAP and would be adopted for use in the DTC Program.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 Yes
- 2 No
- 9 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:*

- 1 **Yes:** Should only be reported if the person has been formally diagnosed by a medical practitioner. Do not use this code if the diagnosis is not clear, e.g. 'confusion', 'memory loss', etc. If the person has developed dementia since treatment at the DTC agency, the person should only be recorded as having dementia if the DTC agency has been notified by a medical practitioner that the person has dementia.
- 2 **No:** Should be used when the DTC agency has not been notified that a formal diagnosis of dementia has been made, even when staff of the DTC agency believe that the person has dementia.

**Collection methods:** This data element should be reported for all DTC clients on Census Form B—Client data.

Only one code should be recorded.

**Related data:** Is related to the data elements Activity limitations, Activity limitations status, Health condition and Main reason for referral.

### **Administrative attributes**

**Source document:** Community Aged Care Package Data Dictionary Version 1.0, 2002.

**Source organisation:** Department of Health and Ageing  
Australian Institute of Health and Welfare

**Comments:** The prevalence of dementia is likely to be underestimated using this method of identifying clients who have dementia as dementia will remain undiagnosed for a number of clients, and, in other cases, will not be reported to the DTC agency.

A set of dependency measures for the HACC Program is currently being developed. This work includes the development of an initial screening process for HACC clients, and incorporates data items that may be useful as an indicator of dementia. This approach being developed for HACC may also be suitable for use by DTC agencies to identify people who may have dementia.



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## Direct service delivery—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The percentage of total Day Therapy Centre funding spent on direct service delivery to clients.

*Context:* This information assists in the measurement of the efficiency of the DTC Program.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

1	Less than 60 per cent
2	60–69 per cent
3	70–79 per cent
4	80–89 per cent
5	90–100 per cent
9	Not stated/inadequately described ( <i>not for use in primary data collections</i> )

*Guide for use:* Direct service delivery in the DTC Program context covers funding spent on services provided to clients on an inter-active or face-to-face basis or on their behalf. Only one of the percentage ranges provided on Census Form A – DTC data should be chosen.

**Includes:** wages for employees involved in direct service delivery, e.g. physiotherapists, allied health assistants, bus drivers etc., all salary on-costs, workers' compensation and superannuation for these employees, part of the wages for the coordinator, where that coordinator spends time providing approved DTC therapy to clients; administration directly related to client care, e.g. writing patient notes, calling a client's carer, etc.; sub-contracted client services, e.g. contract care staff; purchase of aids and equipment, travel to/from clients; transport of clients, meals provided to clients; and cost of interpreters.

**Excludes:** wages for administrators (including salary on-costs, workers' compensation and superannuation for administrators) and other administration costs such as stationery, postage, etc.; keeping statistics; staff training; computer expenses; subscriptions; repairs and maintenance; advertising; cleaning; and operating costs such as rent, insurance, electricity, telephone, accounting, bank charges.

**Collection methods:** This data element should be reported on Census Form A – DTC data.  
This percentage should be calculated in relation to the funding received in the 12 months preceding the census period.  
Only one code should be recorded.

**Related data:**

### **Administrative attributes**

**Source document:** Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

**Source organisation:** Department of Health and Ageing  
Australian Institute of Health and Welfare

**Comments:**

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## DTC client

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA CONCEPT

*Definition:* A person who receives Day Therapy Centre-funded therapy from the organisation.

*Context:* The overall objective of the Day Therapy Centre (DTC) Program is to assist older people to maintain or improve their level of functioning to allow them to remain living in the community or in low level residential care.

The person may be referred by a general practitioner, Aged Care Assessment Team, a social worker, geriatrician, hospital or a community worker. The person may also be self-referred or referred by a carer, friend or family member.

For clients with a Department of Veterans' Affairs (DVA) Gold Card, the DTC agency cannot recover the cost of DTC-funded therapy from DVA. These clients are therefore included within the scope of this census.

A person for whom the DTC agency fully recovers the cost of therapy is not a DTC client for the purposes of this definition, for example a person who receives high level care in a residential setting. Note that if a client of the DTC agency moves from low level to high level care in a residential setting or a client in low level care becomes eligible for therapy funding under the Resident Classification Scale (RCS questions 19 and 20), for the purposes of this definition that client ceases to be a DTC client if the cost of this therapy is fully recovered from the residential aged care service.

### Relational and representational attributes

*Related data:* Is related to the data concepts Day Therapy Centre agency and DTC therapy episode and the data elements Date of initial assessment, DTC client ID and DTC ID.

### Administrative attributes

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:* Consistent with the National Community Services Data Dictionary Version 2, 2000.

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## DTC client ID

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* This is the number assigned by the Day Therapy Centre agency to uniquely identify each client.

*Context:* In conjunction with *Day Therapy Centre (DTC) ID* and *Date of initial assessment*, the *DTC client ID* number uniquely identifies a record submitted in the DTC census. It may be used to identify particular records that require some follow-up contact with a DTC agency to resolve any queries on the data reported.

### Relational and representational attributes

*Datatype:* Alpha numeric                      *Representational form:* Code

*Field size:*                      *Min:*                      *Max:*                      *Representational layout:*

*Data domain:* The structure of the DTC client ID number may vary according to each DTC agency.

*Guide for use:* The DTC client ID number should be the number used within the DTC to identify the client or the number assigned to the client record for reporting in the census.

*Collection methods:* This data element should be reported for all DTC clients on Census Form B—Client data.

*Related data:* Is related to the data concept DTC client and the data elements Date of initial assessment and DTC ID.

### Administrative attributes

*Source document:* Aged Care Assessment Program Data Dictionary Version 1.0, 2002.

*Source organisation:* Aged Care Assessment Program Officials  
Australian Institute of Health and Welfare

*Comments:*

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## DTC ID

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* A code that uniquely identifies a Day Therapy Centre agency.

*Context:* A Day Therapy Centre (DTC) ID will be used to uniquely identify each DTC agency within Australia.

### Relational and representational attributes

*Datatype:* *Representational form:*

*Field size:* *Min:* *Max:* *Representational layout:*

*Data domain:*

*Guide for use:*

*Collection methods:* Allocation of the DTC identifier should be undertaken by the Commonwealth Department of Health and Ageing on receipt of the census forms.

*Related data:* Is related to the data concept Day Therapy Centre agency and the data element DTC client ID.

### Administrative attributes

*Source document:* National Community Services Data Dictionary Version 2, 2000.

*Source organisation:* National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:*

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## DTC therapy

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA CONCEPT

*Definition:* A DTC therapy is a therapy that is provided under DTC funding and that has been approved as a DTC therapy by the Commonwealth Department of Health and Ageing.

*Context:* A DTC therapy may be provided to an individual client or to a group of clients, and may be provided at the DTC agency or other centre, at the client's home or at another appropriate venue.

DTC therapies include:

- Occupational therapy
- Speech therapy
- Physiotherapy
- Hydrotherapy
- Podiatry
- Diversional therapy
- Nursing services
- Social work
- Personal services (e.g. hygiene)

Therapies other than those included in the above list may be offered by the DTC agency, provided that approval has been given by the relevant State Office of the Commonwealth Department of Health and Ageing.

Besides therapy, DTC agencies may also provide food services (in conjunction with relevant therapy) and transport (to and from the DTC agency only).

Some agencies may also administer programs other than DTC-funded services such as residential aged care services, Community Aged Care Packages, Home and Community Care Program, National Respite for Carers Program or community nursing programs. Services exclusively funded under those programs do not fall within the scope of the DTC census. However, if a service to an individual client or a group of clients is funded by both DTC and other funding sources, such a service is considered a DTC therapy. For example, if a group of clients attends an exercise session funded through both the HACC and DTC programs, such a session falls within the scope of this census. A person attending such a session is considered a DTC client, provided that the particular therapy is a part of the person's care plan, and an individual record is kept of that person's attendance.

### Relational and representational attributes

*Related data:* Is related to the data elements Therapy delivery mode, Therapy delivery setting, Type of additional service and Type of therapy.

## **Administrative attributes**

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary  
Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## DTC therapy episode

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA CONCEPT

*Definition:* A period of time during which a client receives therapy from a Day Therapy Centre agency.

*Context:* The concept of a *DTC therapy episode* (and associated data elements) is necessary for the analysis of the length of stay of clients in the Day Therapy Centre (DTC) Program. In conjunction with information about the type of therapy received by DTC clients, information about the length of *DTC therapy episodes* also gives some indication of the intensity of therapy provided by a DTC agency.

In the DTC census, a client's *DTC therapy episode* always begins and ends with dates that mark the first and last time that the person received therapy from the DTC agency for their current referral, i.e. *Date of initial assessment* and *Date of exit*. These two data elements can be used within the DTC census to locate in time information about the circumstances of a person's entry and exit from a *DTC therapy episode*.

The pathway or process followed by a person entering or exiting from a *DTC therapy episode* may vary from one DTC agency to another and from one type of therapy to another. It cannot be assumed, for example, that every DTC client has undergone the same type of assessment before entering a *DTC therapy episode*. At times, a client may receive therapy from a DTC agency on the basis of a referral from an established source with which the DTC agency has well-developed referral protocols. At other times, a client who has been previously assisted by the DTC agency may begin to receive therapy again without undergoing the same level of assessment on entry in to a subsequent *DTC therapy episode*.

While individual DTC agency policies and practices will impact upon the determination of a *DTC therapy episode* to some extent (e.g. different policies for taking clients 'off the books') the basic feature across DTC agencies remain the dates that mark the first and last time the person receives therapy from the DTC agency in relation to their current referral.

### Relational and representational attributes

*Related data:* Is related to the data concept DTC client and the data elements Cessation of therapy episode status, Date of initial assessment and Date of exit.

### Administrative attributes

*Source document:* National Community Services Data Dictionary Version 2, 2000.

*Source organisation:* National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:*



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## Family name/surname

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The name a person has in common with other members of her/his family, as distinguished from her/his first name.

*Context:* The person's Family name/surname is not required for Day Therapy Centre (DTC) census reporting purposes. However, DTC agencies are required to report selected letters of the person's *Family name/surname* and *First given name*. These will be used in combination with the person's *Date of birth* and *Sex* in order to link client records for statistical purposes.

The provision of letters of a person's name can be a sensitive issue because of privacy and confidentiality concerns. The use of this information will be in accordance with the Information Privacy Principles contained in the Commonwealth Privacy Act and letters from the person's name will only be used for linking records for statistical purposes.

### Relational and representational attributes

*Datatype:* Alphabetic *Representational form:* Code

*Field size:* *Min:* *Max:* *Representational layout:* AAAAAA...

*Data domain:* (Name)

*Guide for use:* The DTC agency should record the client's full *Family name/surname* on their information systems. The field length for this data element is at the discretion of information system designers.

At times, a person may be known by many names. This is sometimes the case with Aboriginal clients. Where uncertainty exists about which name to record, the name recorded on the client's Centrelink card should be used.

*Collection methods:* This data element should be recorded for all DTC clients at the beginning of each *DTC therapy episode*. but does not need to be reported in the census. It is designed to assist with the derivation of the data element *Letters of name* which is required to be reported in the DTC census.

Often people use a variety of names, including legal names, married/maiden names, nicknames, assumed names, traditional names, etc. Even small differences in recording—such as the difference between MacIntosh and McIntosh—can make record linkage impossible. To minimise discrepancies in the recording and reporting of name information, DTC agency staff should ask the person for their full (formal) *First given name* and *Family name/surname*. These may be different from the name that the person may prefer the DTC agency staff to use in personal dealings. DTC agencies may choose to separately record the preferred names that the person wishes to be used by DTC agency staff.

In some cultures it is traditional to state the family name first. To overcome discrepancies in recording/reporting that may arise as a result of this practice, DTC agencies should always ask the person to specify

their first given name and their family name or surname separately. These should then be recorded as *First given name* and *Family name/surname* as appropriate, regardless of the order in which they may be traditionally given.

***Related data:***

Is used in the derivation of the data element Letters of name.

Is used in conjunction with the data element First given name.

**Administrative attributes**

***Source document:***

National Community Services Data Dictionary Version 2, 2000.

***Source organisation:***

National Community Services Data Committee  
Australian Institute of Health and Welfare

***Comments:***

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## Fee charging policy—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The fee charging policy that is in place at the Day Therapy Centre agency.

*Context:* The charging of fees for therapy and additional services is an important issue from the point of view of efficiency for the Day Therapy Centre (DTC) agency as well as access to services for financially disadvantaged clients. This information gives an indication of the range of fee charging policies that are in place across DTC agencies and provides information about equity for clients in the DTC Program.

### Relational and representational attributes

*Datatype:* Alphabetic *Representational form:* Code

*Field size:* *Min:* *Max:* *Representational layout:* AAAAAA.....

*Data domain:* (Text)

*Guide for use:*

*Collection methods:* This data element should be reported on Census Form A – DTC data.

*Related data:*

### Administrative attributes

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## First given name

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The name given to a person (also known as Christian name) which is that person's identifying name within the family group, or the name by which the person is uniquely socially identified.

*Context:* The person's *First given name* is not required for the Day Therapy Centre (DTC) census reporting purposes. However, DTC agencies are required to report selected letters of the person's *Family name/surname* and *First given name*. These will be used in combination with the person's *Date of birth* and *Sex* in order to link client records for statistical purposes.

The provision of letters of a person's name can be a sensitive issue because of privacy and confidentiality concerns. The use of this information will be in accordance with the Information Privacy Principles contained in the Commonwealth Privacy Act and letters from the person's name will only be used for linking records for statistical purposes.

### Relational and representational attributes

*Datatype:* Alphabetic *Representational form:* Code

*Field size:* *Min:* *Max:* *Representational layout:* AAAAA...

*Data domain:* (Name)

*Guide for use:* The DTC agency should record the client's full *First given name* on their information systems. The field length for this data element is at the discretion of information system designers.

At times, a person may be known by many names. This is sometimes the case with Aboriginal clients. Where uncertainty exists about which name to record, the name recorded on the client's Centrelink card should be used.

*Collection methods:* This data element should be recorded for all DTC clients at the beginning of each *DTC therapy episode* but does not need to be reported in the census. It is designed to assist with the derivation of the data element *Letters of name* which is required to be reported in the DTC census.

Often people use a variety of names, including legal names, married/maiden names, nicknames, assumed names, traditional names, etc. Even small differences in recording—such as the difference between Thomas and Tom—can make record linkage impossible. To minimise discrepancies in the recording and reporting of name information, DTC agency staff should ask the person for their full (formal) *First given name* and *Family name/surname*. These may be different from the name that the person may prefer DTC agency staff to use in personal dealings. DTC agencies may choose to separately record the preferred name that the person wishes to be used by DTC agency staff.

In some cultures it is traditional to state the family name first. To overcome discrepancies in recording/reporting that may arise as a result

of this practice, DTC agency staff should always ask the person to specify their first given name and their family or surname separately. These should then be recorded as *First given name* and *Family name/surname* as appropriate, regardless of the order in which they may be traditionally given.

***Related data:***

Is used in the derivation of the data element Letters of name.

Is used in conjunction with the data element Family name/surname.

**Administrative attributes**

***Source document:***

National Community Services Data Dictionary Version 2, 2000.

***Source organisation:***

National Community Services Data Committee  
Australian Institute of Health and Welfare

***Comments:***

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## Government pension/benefit status

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* Whether or not the person is in receipt of an income support payment from the Commonwealth government in the form of a government pension or benefit.

*Context:* Information about clients' receipt of a government pension or benefit is an indicator of the extent of financial disadvantage among Day Therapy Centre (DTC) clients. This data element can be used as such an indicator because of the means testing involved in determining eligibility for Commonwealth pensions and benefits. Information about the type of government pension or benefit also helps to identify DTC client sub-groups of particular policy interest, such as veterans, carers and people with disabilities.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 Yes
- 2 No
- 3 Unknown
- 9 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:*

- 2 **No:** Should be recorded for people who do not receive a government pension or benefit and for people whose only source of income is a superannuation pension (i.e. self-funded retirees). This includes government superannuation pensions.
- 3 **Unknown:** Should be recorded when the government pension/benefit status of a person cannot be ascertained for any reason.

*Collection methods:* This data element should be reported for all DTC clients on Census Form B—Client data.

Only one code should be recorded.

*Related data:* Qualifies the data element Type of pension/benefit.

### Administrative attributes

*Source document:* Home and Community Care National Minimum Data Set Version 1.5, 2001.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## Health condition

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The diagnosed disease(s) or disorder(s) for which the person currently receives therapy from the Day Therapy Centre agency.

*Context:* In conjunction with the data element *Main reason for referral*, this data element establishes a basic health profile of the clients of Day Therapy Centre (DTC) agencies. Information about the sorts of health conditions experienced by DTC clients contributes to an understanding of the complexity of a client's needs and circumstances. This information also assists with comparing DTC clients with the ABS Survey of Disability, Ageing and Carers and with comparisons to health data sets, e.g. the Aged Care Assessment Program Minimum Data Set Version 2.0.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 4 *Max:* 4 *Representational layout:* NNNN

*Data domain:* Health condition code list (refer to Appendix D).

0000 No health condition diagnosed

9999 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:* There are two code lists provided at Appendix D, one presented by body system and one in alphabetic order. Either of these lists can be used to identify the person's *Health condition*.

Up to 5 health conditions may be reported for the person.

The health conditions listed may or may not include the condition reported as the *Main reason for referral* depending on the length of time a person has been attending the DTC agency.

Record 0000 when the person has no diagnosed diseases or disorders or identified sign or symptom that impacts on their functional ability.

Record 1899 when the person has been referred due to a condition that is not listed or due to a medical procedure and specify in the text box provided on Census Form B—Client data. For example, this code should be used if the person is referred due to a hip or knee replacement or a surgical leg amputation (non-traumatic).

The injury, poisoning and certain other consequences of external causes included in codes 1601–1698 should only be used to record injuries, e.g. dislocations, sprains, strains; traumatic amputations, i.e. as the result of an injury or accident; fractures; poisoning by drugs, medicaments and biological substances, e.g. narcotics, analgesics, antiparkinsonism drugs, including overdose of these substances; and other injury, poisoning and consequences of external causes, e.g. multiple fractures, unspecified dislocations, sprains, strains, fractures, burns, frostbite.

The signs and symptoms included in codes 1701–1799 should only be used to record certain symptoms that represent important problems in their own right, regardless of whether a related diagnosed disease or disorder is also reported.

The factors influencing health status included in codes 1901–1904 should only be used to record a circumstance or problem which influences a person's health status, but is not in itself a health condition, regardless of whether a related diagnosed disease or disorder is also reported.

In any analysis of 'Diseases of the nervous system' code 0500–0504 'Dementia in Alzheimer's disease' should be grouped with 0600 'Diseases of the nervous system'.

In any analysis of 'Cerebrovascular disease' code 0605 Transient cerebral ischaemic attacks (T.I.A.'s) should be grouped with 0910.

Not otherwise specified (n.o.s) is used where an assumption of the cause cannot be made that would allow a more specific code to be assigned. Not otherwise specified implies 'unspecified' or 'unqualified'.

Not elsewhere classified (n.e.c) is used when the health condition diagnosed contains specific variants which are not included in any other code.

***Collection methods:***

This data element should be reported for all DTC clients and should reflect the health conditions for which the person received therapy during the census period.

This data element should be reported on Census Form B – Client data.

Specify the condition when code 1899 is used.

***Related data:***

Is related to the data elements Activity limitations, Activity limitations status, Dementia status and Main reason for referral.

**Administrative attributes**

***Source document:***

Aged Care Assessment Program Data Dictionary Version 1.0, 2002.

***Source organisation:***

Aged Care Assessment Program Officials  
Australian Institute of Health and Welfare

***Comments:***

This code list was developed for the Aged Care Assessment Program (ACAP) and is based on the ICD-10-AM classification. A mapping of the code list to the ICD-10-AM classification is provided in Appendix D. It is comparable to the Australian Bureau of Statistics 4 digit code used for the Disability, Ageing and Carers Survey.





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## Indigenous status

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* Whether or not the person identifies themselves as being of Aboriginal and/or Torres Strait Islander descent.

*Context:* Australia's Aboriginal and Torres Strait Islander peoples occupy a unique place in Australian society and culture. Significant health disadvantage is experienced by Aboriginal and Torres Strait Islander peoples across all age groups and for almost all diseases and conditions for which information is available (ABS/AIHW, The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples, 1997). Given these gross inequalities in health status – and their likely impact on the need for and use of health and community services – there is a strong case for ensuring that information on the Indigenous status of clients is collected in the Day Therapy Centre (DTC) Program in order to plan, promote and deliver essential services, to monitor changes in wellbeing and to account for government expenditure in this area.

The lower life expectancy of Aboriginal and Torres Strait Islander Australians means that persons of Aboriginal and/or Torres Strait Islander origin can also be expected to require assessment services at an earlier age than is the case for the wider community. In accordance with this, the age benchmark used for service provision and planning within the DTC Program is lower for Aboriginal and Torres Strait Islander Australians than for the population as a whole (i.e. 50 and over for Aboriginal and/or Torres Strait Islander persons compared to 70 and over for the general population).

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 Aboriginal but not Torres Strait Islander origin
- 2 Torres Strait Islander but not Aboriginal origin
- 3 Both Aboriginal and Torres Strait Islander origin
- 4 Neither Aboriginal nor Torres Strait Islander origin
- 5 Unknown
- 9 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:* 5 **Unknown:** Should be recorded when the Indigenous status of a person cannot be ascertained for any reason.

This question refers to Australian Aboriginal and Torres Strait Islander peoples and not to people indigenous to other countries.

*Collection methods:* This data element should be reported for all DTC clients on Census Form B—Client data.

Information about Aboriginal and Torres Strait Islander status should be collected in sufficient detail to distinguish between people of Aboriginal and Torres Strait Islander origin.

The standard Australian Bureau of Statistics (ABS) one question format for collecting data on Aboriginal and Torres Strait Islander status is as follows:

Where the person is present: 'Are you of Aboriginal or Torres Strait Islander origin?'; or where the person is not present and someone who knows the person very well responds for them, 'Is the person of Aboriginal or Torres Strait Islander origin?'

The ABS recommends collection of responses in tick boxes, e.g.

No	<input type="checkbox"/>
Yes, Aboriginal	<input type="checkbox"/>
Yes, Torres Strait Islander	<input type="checkbox"/>

Persons of both Aboriginal and Torres Strait Islander origin are to be instructed to tick both boxes, enabling the responses to be appropriately coded. Responses to this question should not be based on the perceptions of anyone other than the client or their advocate.

Non-Indigenous status should not be taken as default in the presence of no other evidence.

***Related data:***

Is related to the data element Country of birth and the draft data elements Main language other than English spoken at home and Proficiency in English.

**Administrative attributes**

***Source document:***

Australian Bureau of Statistics: Standard for Statistics on Cultural and Language Diversity, November 1999, Catalogue No. 1289.0.  
National Community Services Data Dictionary Version 2, 2000.  
Home and Community Care Data Dictionary Version 1.0, 1998.  
Aged Care Assessment Program Data Dictionary Version 1.0, 2002.

***Source organisation:***

Australian Bureau of Statistics  
National Community Services Data Committee  
Department of Health and Ageing  
Aged Care Assessment Program Officials  
Australian Institute of Health and Welfare

***Comments:***

Australia has two groups of Indigenous peoples – Aboriginal peoples and the Torres Strait Islander people. An Aboriginal or Torres Strait Islander person is defined by a decision of the High Court of Australia in *Commonwealth v Tasmania* (1983) 46 ALR 625. This definition states that 'An Aboriginal or Torres Strait Islander is a person of Aboriginal or Torres Strait Islander descent who identifies as an Aboriginal or Torres Strait Islander and is accepted as such by the community in which he or she lives'.

There are three components to the definition of an Aboriginal and Torres Strait Islander person: descent, self-identification and community acceptance. In practice, it is not feasible to collect information on the community acceptance part of this definition and therefore questions on Indigenous status relate to descent and self-identification only. Ideally descent could be determined by asking if a person has either an Aboriginal or Torres Strait Islander ancestor. Self-identification could be determined by asking if a person identifies culturally as an Aboriginal or Torres Strait Islander. In practice, people are asked if they are of

Aboriginal or Torres Strait Islander origin. This question is considered to measure descent and for some, but not all, cultural identity.

The DTC Census does not include a question specific to Australian South Sea Islander ancestry. Australian South Sea Islanders have a recognised special status but are not Indigenous Australians. It is not appropriate to capture both Indigenous Status and Australian South Sea Islander status in a single question. In general a question on Australian South Sea Islander status would only be relevant to the population of the Queensland Central Coast, where most Australian South Sea Islanders live. A person of Australian South Sea Islander ancestry should only be recorded as being of Aboriginal or Torres Strait Islander origin if they identify themselves as such.

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## Letters of name

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**Admin. status:** CURRENT

### Identifying and definitional attributes

**Data element type:** DERIVED DATA ELEMENT

**Definition:** A specific combination of letters selected from the person's family name/surname and their first given name to assist with statistical record linkage.

**Context:** The person's full name is not required for the Day Therapy Centre (DTC) census. However, DTC agencies are required to report selected letters of the person's *Family name/surname* and *First given name*. These will be used in combination with the person's *Date of birth* and *Sex* in order to link client records for statistical purposes. This item specifies the exact combination of letters from the person's *Family name/surname* and *First given name* that DTC agencies will be required to report for each of their clients for whom a DTC census form is submitted.

The provision of letters of a person's name can be a sensitive issue because of privacy and confidentiality concerns. The use of this information will be in accordance with the Information Privacy Principles contained in the Commonwealth Privacy Act and letters from the person's name will only be used for linking records for statistical purposes.

### Relational and representational attributes

**Datatype:** Alphanumeric      **Representational form:** Code

**Field size:**      **Min:** 5      **Max:** 5      **Representational layout:** AAAAA (may include numeric characters where necessary)

**Data domain:** 2nd, 3rd and 5th letters of the person's *Family name/surname*; and  
2nd and 3rd letters of the person's *First given name*.

**Guide for use:** The specified field size for *Letters of name* is 5 characters long. Letters from the client's *Family name/surname* should be provided first, followed by letters from the client's *First given name*. In the first three spaces, the DTC agency staff should record the 2nd, 3rd and 5th letters of the client's family name or surname. In the following two spaces the DTC agency staff should record the 2nd and 3rd letters of the client's first given name.

For example: If the client's name is Brown, Elizabeth (i.e. surname, first given name) the *Letters of name* data element should be reported as RONLI. If the client's name is Thompson, Robert the *Letters of name* data element should be reported as HOPOB.

If either of the client's names includes non-alphabetic characters – for example hyphens (as in Lee-Archer) apostrophes (as in O'Mara) or blank spaces (as in Eu Jin) – these non-alphabetic characters should be ignored when counting the position of each character.

Regardless of the length of a person's name, the *Letters of name* field should always be five characters long. If either the surname or the first given name of the person is not long enough to supply the requested letters (i.e. a surname of less than five letters or a first name of less than

three letters) then DTC agency staff should substitute the number '2' in the *Letters of name* field to reflect the missing letters. The placement of a number '2' should always correspond to the same space that the missing letter would have within the five-digit field.

For example: If a person's name is Farr, Ben then the *Letters of name* field would be AR2EN because the 2 is substituting for a missing 5th letter of the surname. Similarly, if the person's name was Hua, Jo then the *Letters of name* field would be UA2O2 because the 2s are substituting for the missing 5th letter of the surname and the missing 3rd letter of the first given name.

If a client's surname is missing altogether DTC agency staff should record the number 9 for all three spaces associated with the *Family name/surname* and not the number 2. Similarly, if the person's first name is missing altogether DTC agency staff should substitute 9s for the two spaces associated with the *First given name*. A number (rather than a letter) is used for such substitutions in order to clearly indicate that an appropriate corresponding letter from the person's name is not available.

In some cultures it is traditional to state the family name first. To overcome discrepancies in recording/reporting that may arise as a result of this practice, DTC agency staff should always ask the person to specify their first given name and their family name or surname separately. These should then be recorded as *First given name* and *Family name/surname* as appropriate, regardless of the order in which they may be traditionally given.

**Collection methods:** This data element should be reported for all DTC clients on Census Form B—Client data.

The names from which *Letters of name* are derived should be recorded by DTC agency staff in line with the specifications detailed in the data elements *Family name/surname* and *First given name*.

**Related data:** Is related to the data concept Record linkage.  
Is derived from the data elements Family name/surname and First given name.  
Is used in conjunction with the data elements Sex and Date of birth.

## **Administrative attributes**

**Source document:** Home and Community Care National Minimum Data Set  
Version 1.5, 2001.  
Aged Care Assessment Program Data Dictionary Version 1.0, 2002.

**Source organisation:** Department of Health and Ageing  
Aged Care Assessment Program Officials  
Australian Institute of Health and Welfare

**Comments:**

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## Location—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The suburb or town where the Day Therapy Centre agency is located.

*Context:* This information helps to identify the location(s) from where Day Therapy Centre (DTC) agencies provide therapy, which DTC agencies provide therapy from multiple locations and which DTC agencies are co-located with a residential aged care service, thus contributing to a profile of the DTC agency. This type of detail about the location from which the DTC agency provides therapy assists in assessing the accessibility of DTC therapy.

### Relational and representational attributes

*Datatype:* Alphabetic *Representational form:* Text

*Field size:* *Min:* 1 *Max:* 40 *Representational layout:* AAAAAA.....

*Data domain:* Valid Australian suburb or town.

*Guide for use:*

*Collection methods:* Multiple locations can be reported.

This data element should be reported on Census Form A – DTC data.

*Related data:* Is related to the data elements Client profile – DTC and Co-location – DTC.

### Administrative attributes

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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# Main language other than English spoken at home

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*Admin. status:* DRAFT

## Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The language reported by the person as the main language other than English spoken by the person in her or his home (or most recent private residential setting) on a regular basis, to communicate with other residents of his or her home and regular visitors.

*Context:* *Main language other than English spoken at home* is analysed in conjunction with the data elements *Country of birth* and *Proficiency in spoken English* to derive measures of access to the Day Therapy Centre (DTC) Program by culturally and linguistically diverse members of the population. This information is also used for planning of targeted services to meet the specific needs of members of culturally and linguistically diverse groups.

## Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 2 *Max:* 2 *Representational layout:* NN

*Data domain:* Australian Bureau of Statistics' adaptation of the Australian Standard Classification of Languages (ASCL), ABS Catalogue No. 1267.0, 1997, to accommodate a 2-digit code (refer to Appendix E).

*Guide for use:* For persons living in non-private dwellings (such as group houses, boarding houses, residential aged care services, etc.) this data element should be used to record the person's language of greatest competence (i.e. preferred language).

Code 96 Not stated/inadequately described should be used when the *Main language other than English spoken at home* has not been supplied by the client upon request or where insufficient information has been supplied by the client to code the data element.

*Collection methods:* This data element should be reported for all DTC clients on Census Form B – Client data.

DTC agencies may collect *Main language other than English spoken at home* in a variety of ways. Some DTC agencies may use an open-ended question asking the person to specify whether they speak a language other than English at home. If more than one language is identified, the one that is spoken most often should be recorded.

Suggested question:

Does the person speak a language other than English at home?

No, English only [ ]  
Yes, other – please specify .....

Regardless of the exact format used by the DTC agency, *Main language other than English spoken at home* should be collected in such a way as to allow the information to be coded using the 2-digit adaptation of the ASCL. A question that simply identifies a person's proficiency in English



will not provide sufficient information to code *Main language other than English spoken at home* for the census.

**Related data:** Is related to the data elements Country of birth and Indigenous status and the draft data element Proficiency in spoken English.

## Administrative attributes

**Source document:** Australian Bureau of Statistics: Adaptation of Australian Standard Classification of Languages to accommodate a 2 digit code, 1997.  
Australian Bureau of Statistics. Australian Classification of Languages. Catalogue No. 1267.0, 1997.  
Australian Bureau of Statistics. Standards for Statistics on Cultural and Linguistic Diversity. Catalogue No. 1289.0, 1999.  
National Community Services Data Dictionary Version 2, 2000.

**Source organisation:** Australian Bureau of Statistics  
National Community Services Data Committee  
Australian Institute of Health and Welfare

**Comments:** Traditionally, the most widely used method for identifying and measuring multicultural phenomena in Australia has been to categorise people as being of non-English-speaking background (NESB). A decision was made in May 1996 by a Ministerial Council of the Commonwealth and State governments to discontinue the official use of NESB as a measure of cultural diversity. This decision was made following strong criticism of NESB by a House of Representatives Standing Committee on Community Affairs inquiry into migrant access and equity in its report to Parliament, *A Fair Go For All: Report on Migrant Access and Equity*.

The ABS recommends new and more relevant methods of measuring social, cultural and economic disadvantage in Australia's multicultural society. The core data elements (or variables) recommended by the ABS are *Country of birth* (or Birthplace), *Main language other than English spoken at home* and *Proficiency in spoken English*. However, at this stage the process for the analysis and interpretation of these data elements as a set remains unclear and further clarification is being sought through the National Community Services Information Management Group before their inclusion in the DTC Program national census will be considered by Commonwealth Department of Health and Ageing (DHA). The two definitions, *Main language other than English spoken at home* and *Proficiency in spoken English*, are labelled with a status of DRAFT and will remain so until further investigation of the standard for identification of cultural and linguistic diversity. The DHA will be exploring the possibility of using a methodology developed by the Department of Immigration and Multicultural Affairs for identifying potential disadvantage related to cultural and linguistic diversity that would only require DTC agencies to report *Country of birth* for each client.

This definition currently uses an ABS 2 digit code that is mappable to the 4-digit code contained in the ABS, Australian Standard Classification of Languages Cat. No. 1267.0. The code set allows for coding of sign languages and other non-verbal languages. The 2-digit code listing is currently under review by the ABS pending analysis of the 1996 census data.

The only deviation from the ABS' adaptation of the ASCL to accommodate a 2-digit code specified by this data element relates to where the information is inadequately described or not stated. The ABS recommends that code '96' should be used to code responses where the person's language is 'Inadequately described', and code '98' should be

used for 'Not stated' responses. The separate identification of 'Inadequately described' and 'Not stated' responses was considered unnecessary for the purposes of the DTC Program national census. Therefore the Guide for use for the DTC data element *Main language other than English spoken at home* specifies that code '96' should be used for both 'Not stated' and 'Inadequately described'. The code list for this data element differs from that required for reporting of *Main language spoken at home* in the Home and Community Care Minimum Data Set (HACC MDS) Version 1.0 as specified by the Guidelines to the HACC MDS (Version 1.5). That code list, which was based on the ABS' 2-digit adaptation of the ASCL includes additional codes for specific languages for all broad-level groupings with the exception of Australian Indigenous languages. For Australian Indigenous languages, the current Guidelines to the HACC MDS (Version 1.5) require only the separate identification of 'Aboriginal languages' and 'Torres Strait Islander languages'. The ABS' 2-digit adaptation does not include separate identification of 'Torres Strait Islander languages', as the population estimates for this group are relatively small. Other differences in the current HACC MDS Guidelines to the ABS' 2-digit adaptation to the ASCL are: the exclusion of 'not elsewhere classified' codes for each broad-level grouping, and the re-numbering of numeric codes.

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## Main reason for referral

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The diagnosed disease or disorder that was the main reason for the person's current referral for therapy.

*Context:* In conjunction with the data element *Health condition*, this data element establishes a basic health profile of the clients of Day Therapy Centre (DTC) agencies. Information about the sorts of health conditions experienced by DTC clients contributes to an understanding of the complexity of a client's needs and circumstances. This information also assists with comparing DTC clients with the ABS Survey of Disability, Ageing and Carers and with comparisons to other data sets, e.g. the Aged Care Assessment Program Minimum Data Set Version 2.0.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 4 *Max:* 4 *Representational layout:* NNNN

*Data domain:* Health condition code list (refer to Appendix D).

0000 No health condition diagnosed

9999 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:* There are two code lists provided at Appendix D, one presented by body system and one in alphabetic order. Either of these lists can be used to identify the person's *Main reason for referral*.

Record 0000 when the person has no diagnosed diseases or disorders or identified sign or symptom that impacts on their functional ability.

Record 1899 when the person has been referred due to a condition that is not listed or due to a medical procedure and specify in the text box provided on Census Form B—Client data. For example, this code should be used if the person is referred due to a hip or knee replacement or a surgical leg amputation (non-traumatic).

The injury, poisoning and certain other consequences of external causes included in codes 1601–1698 should only be used to record injuries, e.g. dislocations, sprains, strains; traumatic amputations, i.e. as the result of an injury or accident; fractures; poisoning by drugs, medicaments and biological substances, e.g. narcotics, analgesics, antiparkinsonism drugs, including overdose of these substances; and other injury, poisoning and consequences of external causes, e.g. multiple fractures, unspecified dislocations, sprains, strains, fractures, burns, frostbite.

The signs and symptoms included in codes 1701–1799 should only be used to record certain symptoms that represent important problems in their own right, regardless of whether a related diagnosed disease or disorder is also reported.

The factors influencing health status included in codes 1901–1904 should only be used to record a circumstance or problem which influences a person’s health status, but is not in itself a health condition, regardless of whether a related diagnosed disease or disorder is also reported.

In any analysis of ‘Diseases of the nervous system’ code 0500–0504 ‘Dementia in Alzheimer’s disease’ should be grouped with 0600 ‘Diseases of the nervous system’.

In any analysis of ‘Cerebrovascular disease’ code 0605 Transient cerebral ischaemic attacks (T.I.A.’s) should be grouped with 0910.

Not otherwise specified (n.o.s) is used where an assumption of the cause cannot be made that would allow a more specific code to be assigned. Not otherwise specified implies ‘unspecified’ or ‘unqualified’.

Not elsewhere classified (n.e.c) is used when the health condition diagnosed contains specific variants which are not included in any other code.

**Collection methods:** This data element should be reported for all DTC clients on Census Form B–Client data.

Specify the condition when code 1899 is used.

**Related data:** Is related to the data elements Activity limitations, Activity limitations status, Dementia status and Health condition.

## **Administrative attributes**

**Source document:** Aged Care Assessment Program Data Dictionary Version 1.0 2002.

**Source organisation:** Aged Care Assessment Program Officials  
Australian Institute of Health and Welfare

**Comments:** This code list was developed for the Aged Care Assessment Program (ACAP) and is based on the ICD-10-AM classification. A mapping of the code list to the ICD-10-AM classification is provided in Appendix D. It is comparable to the Australian Bureau of Statistics 4-digit code used for the Disability, Ageing and Carers Survey

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## Name—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The name of the Day Therapy Centre agency.

*Context:* This data element is required to facilitate contact with the Day Therapy Centre (DTC) agency.

### Relational and representational attributes

*Datatype:* Alphabetic *Representational form:* TEXT

*Field size:* *Min:* 1 40 *Representational layout:* AAAAAA.....

*Data domain:* (Name of DTC agency)

*Guide for use:*

*Collection methods:* This data element should be reported on Census Form A – DTC data.

*Related data:* Is related to the data elements Address – DTC and Operating area – DTC.

### Administrative attributes

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## Operating area—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The catchment area in which the Day Therapy Centre agency provides therapy to clients.

*Context:* This data element facilitates the analysis of service provision in relation to demographic and other characteristics of the population of a geographic area.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 4 *Max:* 4 *Representational layout:* NNNN

*Data domain:* Valid Australia Post postal code(s).

*Guide for use:* It is preferable that the operating (or catchment) area be identified by using postcodes, however if this is not possible or appropriate then local government areas (LGAs) may be provided. If LGAs are provided, this should be clearly marked.

If the Day Therapy Centre (DTC) agency services clients from a wide area, but provides a transport service for a smaller area only, the larger area should be reported.

If the DTC agency is co-located with a residential aged care service and all DTC clients live within that service, the name and postcode of that residential aged care service should be reported.

*Collection methods:* This data element should be reported on Census Form A – DTC data.

*Related data:* Is related to the data elements Address – DTC and Name – DTC.

### Administrative attributes

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## Postcode

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The postal code for the geographic location where the person lives at the time of the census.

*Context:* In conjunction with the data element *Suburb/town/locality name*, this data element describes the geographic location of where a client lives. Geographic location is important in the analysis of the spatial distribution of clients. This data element allows for the comparison of Day Therapy Centre (DTC) client groups with the DTC target population by geographic area and assists with planning and reporting on the accessibility of DTC agencies at a regional level.

*Suburb/town/locality* together with *Postcode* is used to derive the Statistical Local Area (SLA) in which the person lives. SLAs are the basic building blocks of the Australian Standard Geographical Classification (ASGC) and of Commonwealth government planning regions.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 4 *Max:* 4 *Representational layout:* NNNN

*Data domain:* Valid Australia Post postal code.

If the person has no usual place of residence (e.g. prolonged period of transience) record 0000.

If the person's Postcode is not known record 9999.

*Guide for use:* The DTC agency should record the *Postcode* for the address at which the person lives while receiving therapy from the DTC agency. The *Postcode* should not relate to a postal address different from the physical address at which the person is living.

The Australia Post Postcode book is updated more than once a year as postcodes are constantly changing. DTC agencies should use the most up-to-date postcode book available for the DTC census.

*Collection methods:* This data element should be reported for all DTC clients on Census Form B—Client data.

*Related data:* Is used in conjunction with the data element *Suburb/town/locality name*. Is related to the data element *Accommodation setting*.

### Administrative attributes

*Source document:* National Community Services Data Dictionary Version 2, 2000. Australia Post. Postcode Book.

*Source organisation:* National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:*

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## Proficiency in spoken English

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*Admin. status:* DRAFT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* A person's stated proficiency in spoken English.

*Context:* *Proficiency in spoken English* is analysed in conjunction with the data elements *Country of birth* and *Main language other than English spoken at home* to derive measures of access to Day Therapy Centre (DTC) Program services by culturally and linguistically diverse members of the population. This information is also used for planning of targeted services to meet the specific needs of members of culturally and linguistically diverse groups.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* CODE

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 Very well
- 2 Well
- 3 Not well
- 4 Not at all
- 9 Not stated/inadequately described (*not for use in primary data*)

*Guide for use:* This question should only be asked of people who use a language other than English in their home.

It is important that the person's self-assessed proficiency in spoken English be recorded wherever possible. Generally this would be a self-reported question, but in some circumstances (particularly where a person does not speak English well) assistance will be required in answering this question. It is important that the person's self-assessed proficiency in spoken English be recorded wherever possible. This data element does not purport to be a technical assessment of proficiency but is a self-assessment in the four broad response categories to the question.

While there will be differences in how people respond to options 1 and 2, if someone ticks either 3 or 4, that they speak English not well or not at all, then there is a fair likelihood that this person will require assistance in this area.

In cases where the person has significant difficulties with speech (for example, a person who has had a stroke) this item should reflect how well the person understands English.

In some circumstances it may be inappropriate to ask this question of a client (e.g. person suffering from dementia with limited capacity to respond appropriately). In such cases, the DTC agency staff may rely on the views of carers, or their own observations of the person's proficiency.



**Collection methods:** This data element should be reported for all DTC clients on Census Form B—Client data.

Suggested question:

How well do you speak English? (tick one)

While there will be differences in how people respond to codes 1 and 2, if someone codes either 3 or 4, that they speak English not well or not at all, then there is a fair likelihood that this person will require assistance in this area.

Code 9 should only be used for past collections where this item was not collected or if the person does not respond to the question. It should not be a response included on any collection form.

**Related data:** Is related to the data elements Country of birth and Indigenous status and the draft data element Main language other than English spoken at home.

## **Administrative attributes**

**Source document:** Australian Bureau of Statistics. Standards for Statistics on Cultural and Linguistic Diversity. Catalogue No. 1289.0, 1999.  
National Community Services Data Dictionary V2, 2000.

**Source organisation:** Australian Bureau of Statistics  
National Community Services Data Committee  
Australian Institute of Health and Welfare

**Comments:** Traditionally, the most widely used method for identifying and measuring multicultural phenomena in Australia has been to categorise people as being of non-English-speaking background (NESB). A decision was made in May 1996 by a Ministerial Council of the Commonwealth and State governments to discontinue the official use of NESB as a measure of cultural diversity. This decision was made following strong criticism of NESB by a House of Representatives Standing Committee on Community Affairs inquiry into migrant access and equity in its report to Parliament, *A Fair Go For All: Report on Migrant Access and Equity*.

The ABS recommends new and more relevant methods of measuring social, cultural and economic disadvantage in Australia's multicultural society. The core data elements (or variables) recommended by the ABS are *Country of birth* (or Birthplace), *Main language other than English spoken at home* and *Proficiency in spoken English*. However, at this stage the process for the analysis and interpretation of these data elements as a set remains unclear and further clarification is being sought through the National Community Services Information Management Group before their inclusion in the DTC Program national census will be considered by the Commonwealth Department of Health and Ageing (DHA). The two definitions, *Main language other than English spoken at home* and *Proficiency in spoken English*, are labelled with a status of DRAFT and will remain so until further investigation of the standard for identification of cultural and linguistic diversity. The DHA will be exploring the possibility of using a methodology developed by the Department of Immigration and Multicultural Affairs for identifying potential disadvantage related to cultural and linguistic diversity that would only require DTC agencies to report *Country of birth* for each client.

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## Range of assistance—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The range of assistance currently provided by the Day Therapy Centre agency out of Day Therapy Centre funding.

*Context:* In conjunction with the data element Staffing profile—DTC, this data element assists in providing a profile of the Day Therapy Centre (DTC) agency.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 2 *Representational layout:* NN

*Data domain:*

- 1 Occupational therapy
- 2 Physiotherapy
- 3 Hydrotherapy
- 4 Speech therapy
- 5 Podiatry
- 6 Diversional therapy
- 7 Group activities
- 8 Social work
- 9 Nursing services
- 10 Food services
- 11 Transport (to and from DTC)
- 12 Other assistance
- 99 Not stated/inadequately described (*not for use in primary data collections*)

#### *Guide for use:*

*Collection methods:* This data element should be reported on Census Form A—DTC data.

More than one code can be recorded.

Specify the group activity when code 7 is used and the type of assistance when code 12 is used.

*Related data:* Is used in conjunction with the data element Staffing profile—DTC.  
Is related to the data element Hours worked—DTC.

## **Administrative attributes**

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary  
Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## Reason for exit

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The main reason that the person ceased to receive therapy from the Day Therapy Centre agency.

*Context:* This data element provides information about the circumstances surrounding the discharge of a client from the Day Therapy Centre (DTC) Program. This information contributes to a general understanding of the patterns of client movement out of the DTC Program.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 Client no longer needs therapy from the DTC agency
- 2 Client referred or moved to other agency
- 3 Client funding status change
- 4 Client moved out of area
- 5 Client terminated therapy
- 6 Client died
- 7 Other reason
- 9 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:* Where the client has ceased to receive therapy for more than one reason, the DTC agency should record the main or primary reason for the cessation of therapy.

- 1 **Client no longer needs therapy from the DTC agency:** Includes situations where the client's problem has been resolved (or no longer exists) or the client is able to manage without the assistance of the DTC agency.
- 2 **Client referred or moved to other agency:** Includes situations where the client's changing dependency or need for assistance has reached the point where the DTC agency can no longer provide the necessary assistance and the client is referred to a more appropriate agency. This also includes situations where the DTC agency's assistance is no longer needed or can no longer be provided because the client has moved into an institutional setting, e.g. hospital.
- 3 **Client funding status change:** Includes situations where the DTC agency's assistance is no longer needed or can no longer be provided because the client has moved into a high level residential care service. This also includes situations where clients who live in a residential aged care service commence receiving high level care instead of low

level care, or where clients in low level care become eligible for therapy funding under the Resident Classification Scale (RCS questions 19 and 20).

- 4 **Client moved out of area:** Includes situations where the client ceased to receive therapy from the DTC agency because the client moved out of the geographic area of coverage of the DTC agency. That is, the reason the DTC agency ceases to assist the client is primarily because of a change in the client's residential locations and not because of any change in their need for assistance.
- 5 **Client terminated therapy:** Includes situations where the decision to cease receiving therapy from the DTC agency was made by the client. That is, it was the client's choice and not the result of any DTC agency assessment of need or change in the client's external circumstances. If the client had not made this choice they would have continued to receive therapy from the DTC agency.

**Collection methods:** This data element should be reported for all DTC clients who have ceased to receive DTC-funded therapy on Census Form B – Client data.

Only one code should be recorded.

Specify the reason when code 7 is used.

**Related data:** Is qualified by the data element Cessation of therapy episode status.  
Is related to the data element Date of exit.  
Is used in conjunction with the draft data element Accommodation setting after cessation of therapy.

### **Administrative attributes**

**Source document:** Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

**Source organisation:** Department of Health and Ageing  
Australian Institute of Health and Welfare

**Comments:**

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## Record linkage

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA CONCEPT

*Definition:* A process, technique or method that enables the bringing together of two or more records that are believed to belong to the same individual.

*Context:* Linkage can occur across data systems or within data systems and may be done by using a range of identifiers. In the DTC Program, the proposed use of record linkage is for statistical purposes only. For statistical purposes, including planning, research or the measurement of therapy or program outcomes, record linkage facilitates separating multiple items clustered around individuals from total counts (for example, double counting of clients can be reduced when calculating total numbers of clients across several agencies). Statistical record linkage does not need to achieve a 100% matching of client records. The linkage of records only has to be sufficiently reliable to draw valid statistical conclusions.

### Relational and representational attributes

*Related data:* Is related to the data elements Date of birth, Letters of name and Sex.

### Administrative attributes

*Source document:* National Community Services Data Dictionary Version 2, 2000.

*Source organisation:* National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:* The use of a statistical linkage key in the DTC national census is intended to make it possible to count the number of DTC clients nationally (without counting clients more than once) and the therapies which they receive. The DTC national census is using the same statistical linkage key used in the HACC MDS, the ACAP MDS and the Commonwealth State Disability Agreement MDS. The full names of clients will not be reported in the DTC national census.

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## Relationship of carer to care recipient

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The relationship of the carer to the person for whom they care.

*Context:* Information about the relationship the carer has to the person for whom they care assists in establishing a profile of informal caring relationships and the assistance provided by Day Therapy Centre (DTC) agencies to maintain and support those relationships. As such it increases our knowledge about the dynamics of caring and provides an insight into the gender and inter-generational patterns of informal caregiving in the community. The inclusion of this information in the DTC census enables useful comparisons between caring relationships identified by DTC agencies and those reported in the national population data from the Australian Bureau of Statistics (ABS) Survey of Disability, Ageing and Carers.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 2 *Representational layout:* NN

*Data domain:*

- 1 Wife/female partner
- 2 Husband/male partner
- 3 Mother
- 4 Father
- 5 Daughter
- 6 Son
- 7 Daughter-in-law
- 8 Son-in-law
- 9 Other relative – female
- 10 Other relative – male
- 11 Friend/neighbour – female
- 12 Friend/neighbour – male
- 13 Not applicable
- 14 Unknown
- 99 Not stated/inadequately described (*not for use in primary data collections*)

- Guide for use:**
- 1, 2 **Wife/female partner and Husband/male partner:** Includes defacto and same sex partnerships.
- 13 **Not applicable:** Should only be recorded for people who either have no carer or were permanent residents of residential aged care services, multi-purpose services (or multi-purpose centres), Indigenous flexible pilots, hospitals or other institutional settings during the time they were receiving therapy from the DTC agency.
- 14 **Unknown:** Should be recorded when the relationship of the carer to the care recipient cannot be ascertained for any reason.

A client may have more than one family member or friend providing them with care and assistance. In such circumstances, the data element *Relationship of carer to care recipient* relates to the carer who is identified by the client and/or their carer as providing the most significant amount and type of care and assistance.

**Collection methods:** This data element should be reported for all DTC clients whose accommodation setting is in the community, i.e. codes 1–8 and 11 in the data element *Accommodation setting*. on Census Form B – Client data.

Only one code should be recorded.

**Related data:** Is qualified by the data elements Accommodation setting and Carer availability.  
Is related to the data concept Carer and the data element Carer co-residency status.

### **Administrative attributes**

**Source document:** Aged Care Assessment Program Data Dictionary Version 1.0, 2002.  
Home and Community Care National Minimum Data Set Version 1.5, 2001.  
National Community Services Data Dictionary Version 2, 2000.

**Source organisation:** Aged Care Assessment Program Officials  
Department of Health and Ageing  
National Community Services Data Committee  
Australian Institute of Health and Welfare

**Comments:**



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## Sex

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The sex of the person.

*Context:* The sex of the person is required for demographic analyses of clients' patterns of service utilisation in the Day Therapy Centre (DTC) Program. The sex of the person is also used in conjunction with the data elements *Letters of name* and *Date of birth* for statistical record linkage purposes.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 Male
- 2 Female
- 9 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:* Coding for this data element is based on the biological distinction between male and female. Where uncertainty exists about the sex of the person (e.g. for transvestites or transsexuals) the sex to be recorded is to be based on the sex nominated by the person themselves or on the observations/judgement of the interviewer. Although this may lead to some error, it is considered preferable to any offence that may be caused by a question that suggests that there is some doubt about the person's sex or sexuality.

Coding option 9 should only be used when the person has not provided this information upon request and/or the DTC agency is unable to make an informed judgement about the person's sex. This coding option is provided for DTC agency data reporting purposes and should not be included on primary data collection tools (forms etc.).

*Collection methods:* This data element should be reported for all DTC clients on Census Form B—Client data.

It is suggested that the following question be used for data collection:

What is your (the person's) sex?

\_\_Male

\_\_Female

*Related data:* Is related to the data concept Record linkage.  
Is used in conjunction with the data elements Date of birth and Letters of name.

## **Administrative attributes**

*Source document:* National Community Services Data Dictionary Version 2, 2000.

*Source organisation:* National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:*

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## Sources of referral—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The three main sources from which the Day Therapy Centre agency receives referrals.

*Context:* This provides information about the referral patterns of Day Therapy Centre (DTC) agencies and allows comparison of referral sources between geographic areas.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* CODE

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 General practitioner (GP)
- 2 Residential Aged Care Service
- 3 Aged Care Assessment Team (ACAT)
- 4 Other health or community care service
- 5 Family/friend
- 6 Self-referral
- 7 Other
- 9 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:* 4 **Other health or community care service:** Includes community health services, Commonwealth Rehabilitation Centres (CRC), Community Options/Linkages.

*Collection methods:* The three main sources must be recorded in order of priority, with '1' being the most common source of referral.

This data element should be reported on Census Form A – DTC data.

Specify the source of referral when code 7 is used.

*Related data:*

### Administrative attributes

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## Staffing profile—DTC

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The profile of staff remunerated out of Day Therapy Centre funding.

*Context:* In conjunction with information about the range of assistance provided by the Day Therapy Centre (DTC) agency, this information assists in providing a profile of the DTC agency.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* CODE

*Field size:* *Min:* 1 *Max:* 2 *Representational layout:* NN

*Data domain:*

- 1 Occupational therapist(s)
- 2 Physiotherapist(s)
- 3 Speech therapist(s)
- 4 Podiatrist(s)
- 5 Diversional therapist(s)
- 6 Allied health assistant(s)
- 7 Social worker(s)
- 8 Nurse(s)
- 9 Coordinator
- 10 Other administrative staff
- 11 Other
- 99 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:* 9 **Coordinator:** this may include duties such as administration related to the day-to-day running of the DTC agency, administration related to client care, and client advocacy (e.g. telephone calls with clients or carers, telephone calls made on behalf of clients, etc.). Not included are client-care duties that can be classified under another discipline. For example, if the coordinator is a qualified nurse, if time is spent on nursing duties with DTC clients this should be reported against Code 8 'Nurse(s)'.

*Collection methods:* This data element should be reported on Census Form A – DTC data for each member of staff remunerated out of DTC funding.

Specify the staffing profile when code 11 is used.

*Related data:* Is used in conjunction with the data elements Range of assistance – DTC and Hours worked – DTC.

## **Administrative attributes**

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary  
Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

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## Suburb/town/locality name

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The name of the geographic area in which the person lives at the time of the census.

*Context:* In conjunction with the data element *Postcode*, this data element describes the geographic location of the residence of a client. Geographic location is important in the analysis of the spatial distribution of clients. This data element allows for the comparison of Day Therapy Centre (DTC) client groups with the DTC target population by geographic area and assists with planning and reporting on the accessibility of DTC agencies at a regional level.

*Suburb/town/locality name* together with *Postcode* is used to derive the Statistical Local Area (SLA) in which the person lives. SLAs are the basic building blocks of the Australian Standard Geographical Classification (ASGC) and of Commonwealth government planning regions.

### Relational and representational attributes

*Datatype:* Alphabetic *Representational form:* Text

*Field size:* *Min:* 1 *Max:* 40 *Representational layout:* AAAAAA.....

*Data domain:* Valid Australian suburb, town or locality name.

If the person has no usual place of residence (e.g. prolonged period of transience) record AAAA.

If the person's usual place of residence is not known record ZZZZ.

*Guide for use:* The DTC agency should record the *Suburb/town/locality name* for the address at which the person lives while receiving therapy from the DTC agency. A *Suburb/town/locality name* may be a town, city, suburb or commonly used location name such as a large agricultural property or Aboriginal community. The Australian Bureau of Statistics has suggested that a maximum field length of 40 characters should be sufficient to record the vast majority of locality names.

*Collection methods:* This data element should be reported for all DTC clients on Census Form B—Client data.

*Related data:* Is used in conjunction with the data element *Postcode*.  
Is related to the data element *Accommodation setting*.

### Administrative attributes

*Source document:* National Community Services Data Dictionary Version 2, 2000.

*Source organisation:* National Community Services Data Committee  
Australian Institute of Health and Welfare

*Comments:*

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## Therapy delivery mode

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*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* Whether the therapy provided to the client was provided individually and/or in a group context.

*Context:* Information about the type of therapy received by a Day Therapy Centre (DTC) client is of fundamental importance to program planning and accountability. In conjunction with information about the client's characteristics and circumstances, this information contributes to an understanding of the ways in which DTC agencies have responded to their clients' needs.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 Individual
- 2 Group
- 9 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:* 2 **Group:** Includes a person's attendance at group therapy provided by the DTC agency. A group therapy session is considered a DTC activity, providing that particular therapy is part of the person's care plan, and an individual record is kept of that person's attendance.

*Collection methods:* This data element should be reported for all DTC clients for each type of therapy provided during the DTC census period on Census Form B—Client data.

More than one code can be recorded.

*Related data:* Is related to the data elements Type of additional service and Therapy delivery setting.  
Is used in conjunction with the data element Type of therapy.

### Administrative attributes

*Source document:* Home and Community Care National Minimum Data Set Version 1.5, 2001.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

---

## Therapy delivery setting

---

*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The type of physical setting in which the therapy is actually provided to a client, irrespective of whether or not this is the same as the usual location of the Day Therapy Centre agency.

*Context:* Information about the type of therapy received by a Day Therapy Centre (DTC) client is of fundamental importance to program planning and accountability. In conjunction with information about the client's characteristics and circumstances, this information contributes to an understanding of the ways in which DTC agencies have responded to their clients' needs. With an increasing emphasis on accessibility to older people living in the community, the DTC Program needs to respond with flexibility to community needs by providing community based therapy in a variety of settings. This information will contribute to a better understanding of the ways in which DTC agencies may be addressing this issue.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 Centre-based (at DTC agency)
- 2 Centre-based (other than a DTC agency)
- 3 At the person's home
- 4 Other
- 9 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:*

- 1 **Centre-based (at DTC agency):** includes the setting where the DTC agency is located. This code should also be recorded where the DTC agency operates from more than one location and the therapy is provided at one of these locations.
- 2 **Centre-based (other than a DTC agency):** includes settings within another public or private building in which DTC agency therapy is provided, excluding the person's home or a DTC agency.
- 3 **At the person's home:** includes therapy provided at the client's own residence. This includes cases where the client lives in a residential aged care service setting, and individual therapy is provided to the person in the space in which they live at that setting. Where the DTC agency is co-located within the residential aged care service setting, it does not include therapy provided within the DTC agency space. In these cases, 'Centre-based (at DTC agency)' should be recorded.



**Collection methods:** This data element should be reported for all DTC clients on Census Form B—Client data.

More than one code can be recorded.

Specify the therapy delivery setting when code 4 is used.

**Related data:** Is related to the data elements Therapy delivery mode Type of additional service.

Is used in conjunction with the data element Type of therapy.

### **Administrative attributes**

**Source document:** Home and Community Care National Minimum Data Set Version 1.5, 2001.

**Source organisation:** Department of Health and Ageing  
Australian Institute of Health and Welfare

**Comments:**

---

## Type of additional service

---

*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The type of additional service provided to a client during the Day Therapy Centre census period.

*Context:* This data element, in conjunction with the data elements *Type of therapy* and *Therapy delivery mode* describes the total range of assistance that a client received during the Day Therapy Centre (DTC) census period.

Information about the type of assistance received by a DTC client is of fundamental importance to program planning and accountability. In conjunction with information about the client's characteristics and circumstances and the type of therapy they receive, this information contributes to an understanding of the ways in which DTC agencies have responded to their clients' needs.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:*

*Data domain:*

- 1 Food services
- 2 Transport
- 9 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:*

- 1 **Food services:** Refers to meals provided in conjunction with relevant therapy, i.e. this service is provided in addition to therapy recorded under the data element *Type of therapy*.

- 2 **Transport:** Includes transport to and from the DTC agency only.

*Collection methods:* This data element should be reported on Census Form B – Client data. More than one code can be recorded.

*Related data:* Is related to the data elements Therapy delivery mode, Therapy delivery setting and Type of therapy.

### Administrative attributes

*Source document:* Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

---

## Type of pension/benefit

---

*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The type of government pension or benefit the person is receiving.

*Context:* Information about clients' receipt of a government pension or benefit is an indicator of the extent of financial disadvantage among Day Therapy Centre (DTC) clients. This data element can be used as such an indicator because of the means testing involved in determining eligibility for Commonwealth pensions and benefits. Information about the type of government pension or benefit also helps to identify DTC client sub-groups of particular policy interest, such as veterans, carers and people with disabilities.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 1 *Representational layout:* N

*Data domain:*

- 1 Aged Pension
- 2 Veterans' Affairs Pension
- 3 Disability Support Pension
- 4 Carer Payment (Pension)
- 5 Unemployment related benefits
- 6 Other government pension or benefit
- 7 Unknown
- 9 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:* 7 **Unknown:** Should be recorded when the person's type of pension/benefit cannot be ascertained for any reason.

This data element does not assume that the pension or benefit is the person's main or only source of income. This item is designed to reflect the receipt of either a full or part Commonwealth government pension or benefit. Where the person receives government pension or benefit as a supplement to other income (e.g. wages, superannuation, etc.) they should still be regarded as receiving a pension/benefit and coded accordingly.

Code 6 should be used for clients who are in receipt of income from participation in a Community Development Employment Project (CDEP).

*Collection methods:* This data element should be reported on Census Form B—Client data. Only one code should be recorded. Specify the type of government pension or benefit when code 6 is used.

*Related data:* Is qualified by the data element Government pension/benefit status.

### **Administrative attributes**

*Source document:* Home and Community Care National Minimum Data Set  
Version 1.5, 2001.

*Source organisation:* Department of Health and Ageing  
Australian Institute of Health and Welfare

*Comments:*

---

## Type of therapy

---

*Admin. status:* CURRENT

### Identifying and definitional attributes

*Data element type:* DATA ELEMENT

*Definition:* The type of therapy provided to a client during the Day Therapy Centre census period.

*Context:* This data element, in conjunction with the data elements *Type of additional service* and *Therapy delivery mode* describes the total amount of assistance that a client received during the Day Therapy Centre (DTC) census period.

Information about the type of therapy received by a DTC client is of fundamental importance to program planning and accountability. In conjunction with information about the client's characteristics and circumstances and the type of additional services they receive, this information contributes to an understanding of the ways in which DTC agencies have responded to their clients' needs.

### Relational and representational attributes

*Datatype:* Numeric *Representational form:* Code

*Field size:* *Min:* 1 *Max:* 2 *Representational layout:* NN

*Data domain:*

- 1 Occupational therapy
- 2 Physiotherapy
- 3 Hydrotherapy
- 4 Speech therapy
- 5 Podiatry
- 6 Diversional therapy
- 7 Social work
- 8 Nursing services
- 9 Other service
- 99 Not stated/inadequately described (*not for use in primary data collections*)

*Guide for use:*

- 8 **Nursing services:** includes services provided to the client formally as part of their personal care plan, either individually or in a group, such as blood pressure/glucose monitoring or the provision of education and advice, e.g. incontinence clinic. This code also includes time spent informally providing treatment for cuts and bruises and other injuries/conditions for which DTC clients need attention while visiting the DTC agency.
- 9 **Other service:** includes therapy other than those listed in codes 1 to 8. This code does not include food services or transport, as

information about these two services is collected in the data element *Type of additional service*.

**Collection methods:** This data element should be reported for all DTC clients on Census Form B—Client data.

More than one code can be recorded.

Specify the type of therapy when code 9 is used.

**Related data:** Is related to the data elements Therapy delivery setting and Type of additional service.

Is used in conjunction with the data element Therapy delivery mode.

### **Administrative attributes**

**Source document:** Developed for the Day Therapy Centre Program Data Dictionary Version 1.0.

**Source organisation:** Department of Health and Ageing  
Australian Institute of Health and Welfare

**Comments:**

# Appendix A

## Census forms

# Day Therapy Centre (DTC) Program

For office use only

DTC ID:

## Census Form A — DTC data

This form should be completed by each Commonwealth-funded DTC agency providing therapy.

### 1. DTC agency name

### 2. Postal address of DTC agency

This is the address to which all mail for the DTC agency should be directed.

_____	
_____	
_____	
<i>State/Territory</i>	<i>Postcode</i>

### 3. Please record the contact details for a person we can contact if we have any queries about the census forms.

If more than one person takes part in completing the forms, one contact person should be nominated. This may or may not be the DTC Coordinator.

_____	_____
<i>Name</i>	<i>Position</i>
_____	_____
<i>Phone</i>	<i>Fax</i>
_____	_____
<i>e-mail</i>	

### 4. Please specify the suburb or town in which your DTC agency is located and whether or not it is co-located with a residential aged care service.

If you provide therapy from more than 1 location, please provide the suburb or town for each location. If more than 3 locations please attach a list.

Co-located with residential aged care service

_____	Yes	<input type="checkbox"/> 1	No	<input type="checkbox"/> 2
_____	Yes	<input type="checkbox"/> 1	No	<input type="checkbox"/> 2
_____	Yes	<input type="checkbox"/> 1	No	<input type="checkbox"/> 2

### 5. If your DTC agency is co-located with a residential aged care service, do your DTC clients live:

At that residential aged care service  1      In the community  2      Both  3

### 6. Please identify the operating (or catchment) area in which your DTC agency provides therapy to clients.

It is preferable that this area be identified by using postcodes, however if this is not possible or appropriate then local government areas (LGAs) may be provided. If LGAs are provided this should be clearly marked. If the DTC agency services clients from a wide area, but provides a transport service for a smaller area only, the larger area should be reported. If your DTC agency is co-located with a residential aged care service and all DTC clients live within that service, please report the name and the postcode of that residential aged care service. If more space is required, please attach a list.

_____
_____
_____
_____



**7. Please indicate the three main sources from which your DTC agency receives referrals.**

Please list the three main sources in order of priority, with '1' being the most common source. 'Other health or community care service' includes community health services, Commonwealth Rehabilitation Centres (CRC), Community Options/Linkages.

GP	<input type="checkbox"/>	Other health or community care service	<input type="checkbox"/>
Residential aged care service	<input type="checkbox"/>	Family/friend	<input type="checkbox"/>
ACAT	<input type="checkbox"/>	Self-referral	<input type="checkbox"/>
Hospital	<input type="checkbox"/>	Other (please specify)	<input type="checkbox"/>

**8. What percentage of your DTC funding do you spend on direct service delivery to clients?**

Direct service delivery in the DTC context covers funding spent on therapy or additional services provided to clients on an interactive or face-to-face basis or on their behalf. Please see below for details of what should be included and excluded when calculating the amount spent on direct service delivery. This percentage should be calculated in relation to the funding received in the 12 months preceding the census period.

**Please tick one box only.**

Less than 60%  1      60–69%  2      70–79%  3      80–89%  4      90–100%  5

**What should be included?**

Wages for employees involved in direct service delivery (e.g. physiotherapists, allied health assistants, bus drivers, etc). This also includes all salary on-costs, workers' compensation and superannuation for these employees.  
 (Part of) the wages for the coordinator, where that coordinator spends time providing approved DTC therapy or additional services to clients.  
 Sub-contracted client services, e.g. contract care staff  
 Purchase of aids and equipment  
 Travel to/from clients  
 Transport of clients  
 Meals provided to clients  
 Cost of interpreters  
 Client advocacy

**What should not be included?**

Wages for administrators (including salary on-costs, workers compensation and superannuation for administrators) and other administration costs such as stationery, postage, etc. (Administration directly related to client care is considered direct service delivery, e.g. writing patient notes, calling a client's carer, etc.)  
 Keeping statistics  
 Staff training  
 Computer expenses  
 Subscriptions  
 Repairs and maintenance  
 Advertising  
 Cleaning  
 Operating costs such as rent, insurance, electricity, telephone, accounting, bank charges

**9. Please describe the care planning process you have in place for DTC clients.**

Please include details on how a care plan is developed (i.e. with the client and/or carer); the main elements, e.g. client's needs, goals of care, activities and strategies to achieve the goals, recommendations for therapy and referrals, provision for discharge, time limits for review, and whether care plans are developed for all clients.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**10. Please describe the fee charging policy you have in place for DTC therapy and services.**

Please include details of exemptions and upper limits for clients receiving multiple therapies and services.


**11. Please identify the current staffing profile of your DTC agency.**

Include only the profile of staff **remunerated out of DTC funding** and the number of hours worked each week. Details should be provided on the average weekly hours worked by staff, calculated over the 12 months preceding the census period. Hours should be added up for multiple staff belonging to each discipline. For example, if the DTC agency employs 2 full-time physiotherapists who each work 38 hours per week, the total hours recorded should be 76 hours. Or if the DTC agency employs 3 part-time diversional therapists who each work 20 hours, the total hours recorded should be 60 hours.

If a staff member performs more than one function, that person's hours should be distributed over multiple boxes. For example, if the DTC agency employs an occupational therapist who works 10 hours as a coordinator and 20 hours as an occupational therapist, the 10 hours should be recorded in the coordinator box and the 20 hours in the occupational therapist box.

	Hours		Hours
Occupational therapist(s)	<input style="width: 40px; height: 20px;" type="text"/>	Social worker(s)	<input style="width: 40px; height: 20px;" type="text"/>
Physiotherapist(s)	<input style="width: 40px; height: 20px;" type="text"/>	Nurse(s)	<input style="width: 40px; height: 20px;" type="text"/>
Speech therapist(s)	<input style="width: 40px; height: 20px;" type="text"/>	Coordinator	<input style="width: 40px; height: 20px;" type="text"/>
Podiatrist(s)	<input style="width: 40px; height: 20px;" type="text"/>	Other administrative staff	<input style="width: 40px; height: 20px;" type="text"/>
Diversional therapist(s)	<input style="width: 40px; height: 20px;" type="text"/>	Other (please specify)	<input style="width: 40px; height: 20px;" type="text"/>
Allied health assistant(s)	<input style="width: 40px; height: 20px;" type="text"/>	<div style="border: 1px solid black; width: 300px; height: 40px; margin: 0 auto;"></div>	

**Coordinator:** this include duties such as administration related to the day-to-day running of the DTC agency, administration related to client care, and client advocacy (e.g. telephone calls with clients or carers, telephone calls made on behalf of clients, etc.). Not included are client-care duties that can be classified under another discipline, e.g. if the coordinator is a qualified nurse, the time spent on nursing duties with DTC clients should be reported in the 'nurse' box.

**12. Please tick the range of assistance your DTC agency currently provides.**

This only includes the range of assistance currently provided by your DTC agency **out of DTC funding**.

Occupational therapy	<input type="radio"/> 1	Diversional therapy	<input type="radio"/> 1
Physiotherapy	<input type="radio"/> 1	Social work	<input type="radio"/> 1
Hydrotherapy	<input type="radio"/> 1	Nursing services	<input type="radio"/> 1
Speech therapy	<input type="radio"/> 1	Food services	<input type="radio"/> 1
Podiatry	<input type="radio"/> 1	Transport (to & from DTC)	<input type="radio"/> 1
Group activities (please specify)	<input type="radio"/> 1	Other (please specify)	<input type="radio"/> 1

**I confirm that the clients of this DTC agency who have attended during the census period have been given the following information either verbally or in writing.**

- This DTC statement is part of an Australian wide census. During the one month census period all centres throughout Australia will be filling in census forms about all the people who get therapy from them.
- This information is needed to find out what the ages of the people are getting assistance from the main group who use DTCs.
- Your full name and address will be recorded on the census form to protect you against unintended identification. However, a code will be created using some of your details, so that in future it may be used for statistical matching with other records. This may help to obtain a more complete picture of the way the community uses aged care services.
- Patient health information will be reported in this census will be reported in your file in this centre. You have the right to see this file. You can also tell us not to supply information about you.
- The completed forms will be sent to the Australian Institute of Health and Welfare (AIHW) which is running the census for the Commonwealth Department of Health and Ageing. By law, all the forms must be kept confidential at AIHW. None of your information can be given to anyone outside of AIHW. It will only be used to produce statistics about current therapies provided by DTCs and about some common characteristics of DTC clients. Once the statistics are produced, all forms will be destroyed. The statistics will be used to produce a report on how the DTC system is working.

Signature

Date

Name of person signing

Position at DTC

***Thank you for your time taken in completing this form.***

For office use only

DTC ID:

## Day Therapy Centre (DTC) Program

### Census Form B — Client data

This form should be completed for all clients who fall within the scope of the census and who receive therapy from a DTC agency during the census period.

DTC agency name

1. DTC client ID

This ID is the code which the DTC agency allocates to each client for whom a census form is completed. The structure of the DTC client ID code may vary according to each DTC agency and may be a combination of alphabetic and numeric characters. It may be an ID code used on an agency basis to identify the client's records in the DTC agency, or a code assigned to the client's record specifically for the DTC census.

#### 2. Selected letters of care recipient's name

Often people use a variety of names, including legal names, married/maiden names, nicknames, assumed names, traditional names, etc. In order to enable statistical record linkage with other data collections, DTC staff should record the person's full (formal) first given name and family name/surname.

2a. Please record the 2nd, 3rd and 5th letters of the client's family name/surname and

2b. Please record the 2nd and 3rd letters of the client's first given name.

Please use block capital letters.

Do not count hyphens, apostrophes, blank spaces, or any other character that may appear in a name which is not a letter of the alphabet.

Where the name is not long enough to supply all requested letters, i.e. surnames less than 5 characters and given names of less than 3 characters, please fill in the remaining squares with a 2.

Where a name, or part of a name is missing, e.g. where name is not known or only the initial is known, please substitute a 9.

For further information and examples see the DTC Census Guidelines

2a. Letters of family name/surname

1st	2nd	3rd	4th	5th	6th

2b. Letters of given name

3. What is the person's sex?

Please tick one box only.

Male

1

Female

2

4. What is the person's date of birth?

d	d	m	m	y	y	y	y

The person's date of birth **should always be recorded as an 8-digit valid date** comprising day, month, and year. Year should always be recorded in its full 4-digit format. For days and months with a numeric value of less than 10, DTC agencies should use zeros to ensure that the date contains the required 8 digits. For example, for a person born on the 1st of July, 1926, their *Date of birth* would be reported as 01071926.

If the actual **date of birth of the person is not known**, DTC agencies should calculate an estimated date of birth in the following way. If the age of the person is known, the age of the person should be used to derive the person's year of birth. If the person's age is not known, an estimate of the person's age should be used to calculate an estimated year of birth. An actual or estimated year of birth should then be converted to an estimated date of birth according to the following convention: *0101 estimated year of birth*.

It is important that DTC agencies do not record estimated dates of birth by using '00' for the day, month or year as this may not be considered a valid date by the system processing the data.

**5. Does the person identify themselves as being of Aboriginal or Torres Strait Islander descent?**

Information about Indigenous status should be collected in sufficient detail to distinguish between people of Aboriginal and Torres Strait Islander origin. For persons of both Aboriginal and Torres Strait Islander origin both 'Yes' boxes are to be ticked. Responses to this question should not be based on the perceptions of anyone other than the client or their advocate. Non-Indigenous status should not be taken as default in the presence of no other evidence.

No	<input type="checkbox"/>	4	} 3	code for data entry if both boxes are ticked
Yes, Aboriginal	<input type="checkbox"/>	1		
Yes, Torres Strait Islander	<input type="checkbox"/>	2		
Unknown	<input type="checkbox"/>	5		

**6. In which country was the person born?**

Please select from the following list. If the country in which the person was born does not appear on this list, please refer to the alphabetical code list in Appendix A on page 28 of the Guidelines, and write the name of the country under 'Other (please specify)'. If you cannot find the country on this list, refer to the list of countries arranged by region on page 24.

When the country of birth has not been supplied by the client upon request or where insufficient information has been supplied by the client to choose a country code, tick not supplied/insufficient information.

Australia	<input type="checkbox"/>	1101	Italy	<input type="checkbox"/>	3104	Netherlands	<input type="checkbox"/>	2308	Poland	<input type="checkbox"/>	3307
England	<input type="checkbox"/>	2102	Greece	<input type="checkbox"/>	3207	New Zealand	<input type="checkbox"/>	1201	Malta	<input type="checkbox"/>	3105
Ireland	<input type="checkbox"/>	2201	Germany	<input type="checkbox"/>	2304	China (excl. Taiwan)	<input type="checkbox"/>	6101	India	<input type="checkbox"/>	7103
Not supplied/ insufficient information	<input type="checkbox"/>	0000	Other (please specify)	<input type="checkbox"/>	→ <input style="width: 150px; height: 20px;" type="text"/>						

**7a. Is the person in receipt of an income support payment from the Commonwealth government in the form of a government pension or benefit?**

This question does not assume that the pension or benefit is the person's main or only source of income. It relates to income only, not to any other subsidies a person may receive from the government. This question is designed to reflect the receipt of either a full or part Commonwealth government pension or benefit. Where the person receives a government pension or benefit as a supplement to other income (e.g. wages, superannuation, etc.) they should still be regarded as receiving a pension/benefit and coded accordingly. Please tick one box only.

No: should be used for people who do not receive a government pension or benefit and for people whose only source of income is a superannuation pension (i.e. self-funded retirees). This includes government superannuation pensions.

Yes	<input type="checkbox"/>	1	} Go to question 8
No	<input type="checkbox"/>	2	
Unknown	<input type="checkbox"/>	3	

**7b. If yes, please specify the type of government pension or benefit the person is receiving.**

Other government pension or benefit: should be used for clients who are in receipt of income from participation in a Community Development Employment Project (CDEP). Please tick one box only.

Aged Pension	<input type="checkbox"/>	1	Unemployment related benefits	<input type="checkbox"/>	5	Unknown	<input type="checkbox"/>	7
Veterans' Affairs Pension	<input type="checkbox"/>	2	Other (please specify)	<input type="checkbox"/>	6			
Disability Support Pension	<input type="checkbox"/>	3	<input style="width: 150px; height: 20px;" type="text"/>					
Carer Payment (Pension)	<input type="checkbox"/>	4						

**8. In which suburb, town or locality does the person live?**

A suburb/town/locality name may be a town, city, suburb or commonly used location name such as a large agricultural property or Aboriginal community.

If the person has no usual place of residence (e.g. prolonged period of transience) record AAAA. If the person's usual place of residence is not known record ZZZZ.

**9. What is the postcode for the address at which the person lives?**

The Australia Post Postcode book is updated more than once a year as postcodes are constantly changing. DTC agencies should use the most up-to-date Postcode book available for the DTC census period.

The postcode should not relate to a postal address different from the physical address at which the person is living.

If the person has no usual place of residence (e.g. prolonged period of transience) record 0000. If the person's postcode is not known record 9999.

--	--	--	--	--

**10. In what type of accommodation does the person live?**

Tick relevant box(es).

Private residence

Please specify tenure: ←

Owned/purchasing  1

Private rental  2

Public rental or community housing  3

Unknown  4

Independent living within a retirement village  5

Boarding house/rooming house/private hotel  6

Short-term crisis, emergency or transitional accommodation  7

Supported community accommodation  8

Residential aged care service — low level care  9

Other institutional care  10 } Go to Question 14

Public place/temporary shelter  11

Other (please specify)  12

Unknown  13

The 'private residence' codes include private residences of a wide range of dwelling types, such as houses, flats, units, caravans, mobile homes, boats, marinas, etc. These codes distinguish between different types of tenure associated with private residences. If the person lives in a private residence, but the **tenure is not known**, the private residence box should be ticked, along with the 'unknown' box. Where the person's tenure over the residence is not clear (e.g. living rent free with friends or family), the code used should reflect the type of tenure primarily associated with the dwelling.

**Private residence—owned/purchasing:** Includes private residences which are owned or being purchased either by the person or another member of their household or family (including a non-resident relative).

**Private residence—private rental:** Includes private residences which are rented on the private rental market at competitive market rates. This includes dwellings rented through real estate agents as well as private landlords who are not part of the person's family.

**Private residence—public rental or community housing:** Includes private residences secured through State/Territory Housing Authorities (public rental) or through community or cooperative housing groups.

**Independent living within a retirement village:** Includes persons living in self-care or independent-living units within a retirement village, irrespective of the type of tenure the person holds over the residence. Persons living in a retirement village with the provision of care services should be coded to Supported community accommodation.

**Short-term crisis, emergency or transitional accommodation:** Includes temporary or short-term accommodation provided in response to crisis or emergency situations (e.g. night shelters, refuges, hostels for the homeless), or to facilitate a transition between institutional-type settings and independent community living (e.g. halfway houses). These settings often provide some form of support services—such as meals, counselling, information or advocacy—but are not intended to function as a permanent or ongoing accommodation option. This code should only be used when the person is living in this type of setting while receiving therapy from the DTC agency and has no other usual accommodation setting.

**Supported community accommodation:** Includes community living settings or accommodation facilities in which clients are provided with support in some way by staff or volunteers. This category includes domestic-scale living facilities (such as group homes for people with disabilities, cluster apartments where a support worker lives on site, community residential apartments, congregate care arrangements, etc.) which may or may not have 24-hour supervision and care. It also includes larger-scale supported accommodation facilities providing 24-hour supervision and support services by rostered care workers (such as hostels for people with disabilities and government-regulated Supported Residential Services/Facilities (Victoria and South Australia only). Persons living in aged care hostels should be coded to Residential aged care—low level care.

**Residential aged care service—low level care:** Includes permanent residents of residential aged care services (formerly nursing homes and aged care hostels) and multi-purpose services or multi-purpose centres, who are receiving low level care. This category includes Indigenous Flexible Pilots.

**Other institutional care:** Includes other institutional settings which provide care and accommodation services such as hospitals, hospices and long-stay residential psychiatric institutions.

**Public place/temporary shelter:** Includes public places such as streets and parks, as well as temporary shelters such as bus shelters or camps and accommodation outside legal tenure arrangements, such as squats.

**Other:** Includes all other types of settings.

### 11. Does the person have a carer?

This question should be answered for all clients whose accommodation setting is in the community, i.e. those clients whose accommodation setting is either a private residence, independent living unit within a retirement village, boarding house/rooming house/private hotel, short-term crisis, emergency or transitional accommodation, supported community accommodation or public place/temporary shelter as specified in Question 10. **Please tick one box only.**

- Has a carer  1  
Has no carer  2  
Unknown  4

Go to Question 14

This question is purely descriptive of a client's circumstances. It is not intended to reflect whether a client is considered by the DTC agency to need a carer or not; or whether an identified 'carer' is considered to be capable of undertaking the caring role. In line with this, the expressed views of the client and/or their carer or significant other should be used as the basis for determining whether the client is recorded as having a carer or not.

A **carer is someone who provides care and/or assistance to the person on a regular and sustained basis.** If in doubt about whether the level and type of assistance provided by another person is sufficient to identify them as a carer, if the removal of that assistance would significantly compromise the care available to the person to their detriment, record the person as having a carer. Excluded from the definition of carers are paid workers or volunteers organised by formal services (including paid staff in funded group houses).

When asking a client about the availability of a carer, it is important for DTC agencies to recognise that a carer does not always live with the person for whom they care. That is, a person providing care and assistance to the client does not have to live with the client in order to be called a carer. The availability of a carer should also be distinguished from living with someone else. Although in many instances a co-resident will also be a carer, this is not necessarily the case.

### 12. Does their carer live with them?

A client may have more than one family member or friend providing them with care and assistance. In such circumstances, this question relates to the carer who is identified as providing the most care and assistance. The expressed views of the client and/or their carer(s) or significant other should be used as the basis for determining which carer should be considered to be the primary or principal carer. **Please tick one box only.**

- Co-resident carer  1  
Non-resident carer  2  
Unknown  4

A **co-resident carer** is a person who provides care and assistance on a regular and sustained basis to a person who lives in the same household. A **non-resident or visiting carer** is a person who provides care and assistance on a regular and sustained basis to someone who lives in a different household.

### 13. What is the relationship of the carer to the person?

A client may have more than one family member or friend providing them with care and assistance. In such circumstances, this question relates to the carer who is identified by the client and/or their carer as providing the most significant amount and type of care and assistance. **Please tick one box only.**

- |                      |                            |                         |                             |
|----------------------|----------------------------|-------------------------|-----------------------------|
| Wife/female partner  | <input type="checkbox"/> 1 | Son-in-law              | <input type="checkbox"/> 8  |
| Husband/male partner | <input type="checkbox"/> 2 | Other female relative   | <input type="checkbox"/> 9  |
| Mother               | <input type="checkbox"/> 3 | Other male relative     | <input type="checkbox"/> 10 |
| Father               | <input type="checkbox"/> 4 | Friend/neighbour—female | <input type="checkbox"/> 11 |
| Daughter             | <input type="checkbox"/> 5 | Friend/neighbour—male   | <input type="checkbox"/> 12 |
| Son                  | <input type="checkbox"/> 6 | Unknown                 | <input type="checkbox"/> 14 |
| Daughter-in-law      | <input type="checkbox"/> 7 |                         |                             |

Wife/female partner & Husband/male partner includes defacto and same sex partnerships.

### 14. What was the date on which the person had their first assessment in relation to their current referral for therapy?

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
d	d	m	m	y	y	y	y

This date should always be recorded as an 8-digit valid date comprising day, month, and year. Year should always be recorded in its full 4-digit format. For days and months with a numeric value of less than 10, DTC agencies should use zeros to ensure that the date contains the required 8 digits. For example, for a person who first received therapy from the DTC agency on the 1st of July, 1998, their *Date of initial assessment* would be reported as 01071998.

**15. What was the health condition that was recorded as the main reason for referral in relation to the person's first assessment for their current referral for therapy?**

Two lists of health conditions are provided at Appendix B of the Guidelines, one presented by body system (p. 32) and one in alphabetical order (p. 35). Either of these lists can be used when answering this question.

If **no health condition** has been diagnosed, code as 0000.

If the person has been referred due to a **condition that is not listed** or due to a **medical procedure**, code as 1899, and specify in the box provided. For example, this code should be used if the person is referred due to a hip or knee replacement or a surgical leg amputation (non-traumatic).

If code is 1899, please specify the condition:

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**Injury, poisoning & certain other consequences of external causes (1601–1698):** These codes should only be used to record injuries e.g. dislocations, sprains, strains; traumatic amputations, i.e. as a result of an injury or accident; fractures; poisoning by drugs, medicaments and biological substances, e.g. narcotics, analgesics, antiparkinsonism drugs, including overdose of these substances; and other injury poisoning and consequences of external causes, e.g. multiple fractures, unspecified dislocations, sprains, strains, fractures, burns, frostbite.

**Symptoms & signs n.o.s. or n.e.c (1701–1798):** These codes should only be used to record certain symptoms that represent important problems in their own right, regardless of whether a related diagnosed disease or disorder is also reported.

**Factors influencing health status (1901–1904):** These codes should only be used to record a circumstance or problem which influences a person's health status, but is not in itself a health condition, regardless of whether a related diagnosed disease or disorder is also reported.

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**16. Was a care plan developed for the person?**

This records whether or not a care plan has been developed for the client. A care plan is a personal plan that includes a statement of the client's strengths and needs, goals of care and activities/strategies to achieve the goals, recommendations for therapy and referrals to other service providers, the provision for discharge where appropriate and time limits with the provision for review and renewal. Clients should be consulted in the development of the care plan. The client's family/carer may also be consulted where appropriate. **Please tick one box only.**

Yes  1  
No  2

While an overall care plan may exist for a particular client, individual therapists may also have developed therapy-specific treatment plans for this client. In this case this question refers to the overall care plan. Where such an overall plan does not exist, a therapy-specific treatment plan may be referred to as a 'care plan', provided that this treatment plan complies with the above definition. This means that it needs to include the following ingredients: the client's strengths and weaknesses in relation to the condition treated; treatment goals; activities/strategies to achieve the goals; recommendations for referrals to other service providers where appropriate; provision for discharge where appropriate; and time limits with the provision for review and renewal.

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**17. Has the person been formally diagnosed with dementia by a medical practitioner to the knowledge of the DTC agency?**

Please tick one box only.

Yes  1  
No  2

**Yes:** This code should only be reported if the person has been formally diagnosed by a medical practitioner. Do not use this code if the diagnosis is not clear, e.g. 'confusion', 'memory loss', etc.

If the person has developed dementia since treatment at the DTC agency, the person should only be recorded as having dementia if the DTC agency has been notified by a medical practitioner that the person has dementia.

**No:** This code should be used when the DTC agency has not been notified that a formal diagnosis of dementia has been made, even when staff of the DTC agency believe that the care recipient has dementia.



**18. Please indicate whether, at the time of the census, the person sometimes or always needs help or supervision from another person in one or more of the following activities. Multiple boxes may be ticked.**

	Sometimes/always	Unknown
a Self care	<input type="checkbox"/> 1	<input type="checkbox"/> 9
b Mobility	<input type="checkbox"/> 1	<input type="checkbox"/> 9
c Communication	<input type="checkbox"/> 1	<input type="checkbox"/> 9
d None of the above	<input type="checkbox"/> 2	

This information should be reported for all DTC clients at the time of the census. The client's need for assistance or supervision from another person should take into account their use of aids or equipment. That is, if a client independently uses an aid to help them with a particular activity, they should not be recorded as needing the help or supervision of another individual.

**Self care:** Refers to assistance or supervision of another person with daily self care tasks such as eating, showering/bathing, dressing, toileting and managing incontinence. The independent use of aids and equipment should not be recorded against this code. E.g. if someone is able to shower with the help of equipment (i.e. not requiring the help or supervision of another individual), the self care box should not be ticked.

**Mobility:** Refers to assistance or supervision of another person with activities such as maintaining or changing body position, walking, carrying (e.g. a glass of water), moving and manipulating objects, getting in or out of bed or a chair. The independent use of aids and equipment should not be recorded against this code. E.g. if someone is able to walk with the help of a walking stick (i.e. not requiring the help or supervision of another individual), the mobility box should not be ticked.

**Communication:** Refers to assistance or supervision of another person with understanding others, making oneself understood by others. The independent use of aids and equipment, e.g. hearing aids, speech aids, and assistance from interpreters should not be recorded against this code. E.g. if someone is able to communicate with the help of a hearing aid (i.e. not requiring the help or supervision of another individual), the communication box should not be ticked.

**None of the above:** Should be recorded when the assistance or supervision of another person with self care, mobility or communication is not needed by the person.

**Unknown:** Should be recorded when the need for assistance or supervision of another person cannot be ascertained for any reason.

**19. Please identify the health condition(s) for which the person has received therapy during the census period.**

Two lists of health conditions are provided at Appendix B of the Guidelines, one presented by body system (p. 32) and one in alphabetical order (p. 35). Either of these lists can be used when answering this question.

If no health condition has been diagnosed, code as 0000.

Up to 5 health conditions may be reported for the person. It is not important in what order the conditions are reported.

If the person has been referred due to a condition that is not listed or due to a medical procedure, code as 1899, and specify in the box provided. For example, this code should be used if the person is referred due to a hip or knee replacement or a surgical leg amputation (non-traumatic).

If code is 1899, please specify the condition:

a		
b		
c		
d		
e		

**Injury, poisoning & certain other consequences of external causes (1601–1698):** These codes should only be used to record injuries e.g. dislocations, sprains, strains; traumatic amputations, i.e. as a result of an injury or accident; fractures; poisoning by drugs, medicaments and biological substances, e.g. narcotics, analgesics, antiparkinsonism drugs, including overdose of these substances; and other injury poisoning and consequences of external causes, e.g. multiple fractures, unspecified dislocations, sprains, strains, fractures, burns, frostbite.

**Symptoms & signs n.o.s. or n.e.c (1701–1798):** These codes should only be used to record certain symptoms that represent important problems in their own right, regardless of whether a related diagnosed disease or disorder is also reported.

**Factors influencing health status (1901–1904):** These codes should only be used to record a circumstance or problem which influences a person's health status, but is not in itself a health condition, regardless of whether a related diagnosed disease or disorder is also reported.

**20a. What type of DTC-funded therapy was provided to the person during the census period?**

Please indicate whether the therapy was provided individually or in a group. **Multiple boxes may be ticked.**

	<b>Individual</b>	<b>Group</b>	
Occupational therapy	<input type="radio"/> 1	<input type="radio"/> 1	<b>Group:</b> Includes a person's attendance at group therapy provided by the DTC agency. A group therapy session is considered a DTC activity, provided that particular therapy is a part of the person's care plan, and an individual record is kept of that person's attendance.
Physiotherapy	<input type="radio"/> 1	<input type="radio"/> 1	
Hydrotherapy	<input type="radio"/> 1	<input type="radio"/> 1	
Speech therapy	<input type="radio"/> 1	<input type="radio"/> 1	
Podiatry	<input type="radio"/> 1	<input type="radio"/> 1	
Diversional therapy	<input type="radio"/> 1	<input type="radio"/> 1	
Social work	<input type="radio"/> 1	<input type="radio"/> 1	
Nursing services	<input type="radio"/> 1	<input type="radio"/> 1	
Other (please specify)	<input type="radio"/> 1	<input type="radio"/> 1	

**Nursing services:** includes services provided to the client formally as part of their personal care plan, either individually or in a group, such as blood pressure/glucose monitoring or the provision of education and advice, e.g. incontinence clinic. This item also includes time spent informally providing treatment for cuts and bruises and other injuries/conditions for which DTC clients need attention while visiting the DTC agency.

**20b. Where was the therapy recorded under question 20a provided?**

Multiple boxes may be ticked.

Centre-based (at DTC)	<input type="radio"/> 1	Other (please specify)	<input type="radio"/> 1
Centre-based (other than a DTC)	<input type="radio"/> 1		
At the person's home	<input type="radio"/> 1		

**Centre-based (at DTC agency):** Includes the setting where the DTC is located. Where the DTC operates from more than one location and the therapy is provided at one of these locations, this option, 'Centre-based (at DTC)', should be ticked.

**Centre-based (other than a DTC agency):** Includes settings within another public or private building in which DTC therapy is provided, excluding the person's home or a DTC agency.

**Home:** Includes therapy provided at the client's own residence. This includes cases where the client lives in a residential aged care service setting, and individual therapy is provided to the person in the space in which they live at that setting. Where the DTC agency is co-located within the residential aged care service setting, it does not include therapy provided within the DTC space. In that case, the answer to this question is 'Centre-based (at DTC agency)'.

**20c. In addition, did your DTC agency provide the person with one or both of the following services?**

Multiple boxes may be ticked.

Food services	<input type="radio"/> 1	Transport to and from the DTC	<input type="radio"/> 1
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**Food services:** are meals provided in conjunction with relevant therapy, i.e. this service is provided in addition to therapy recorded under question 20a.

**Transport:** only includes transport to and from the DTC agency.

**21a. Has the person ceased to receive DTC-funded therapy?**

**Yes:** The person has ceased to receive DTC-funded therapy for their current referral. This includes clients who live in a residential aged care service and commence receiving high level care instead of low level care, or clients in low level care who become eligible for therapy funding under the Resident Classification Scale (RCS questions 19 & 20). For the purposes of this census, these clients cease to be DTC clients if the cost of DTC therapy is fully recovered from the residential aged care service.

**No:** Includes clients who are currently inactive but are still on the books and who may resume therapy under their current referral, e.g. 'review phase clients'. **Please tick one box only.**

Yes  1

No  2

*If no, there are no more questions to be answered*

**21b. If yes, what was the date on which the person last received therapy from the DTC agency?**

d d m m y y y y

This date should always be recorded as an 8-digit valid date comprising day, month, and year. Year should always be recorded in its full 4-digit format. For days and months with a numeric value of less than 10, DTC agencies should use zeros to ensure that the date contains the required 8 digits. For example, for a person who last received therapy from the DTC agency on the 1st of July, 2002, their *Date of exit* would be reported as 01072002.

**22. What was the main reason that the person ceased to receive therapy from the DTC agency?**

Where the client has ceased to receive therapy for more than one reason, the DTC agency should record the main or primary reason for the cessation of therapy. **Please tick one box only.**

- Client no longer needs therapy from the DTC  1
- Client referred or moved to other agency  2
- Client funding status change  3
- Client moved out of area  4
- Client died  6
- Client terminated therapy  5
- Other (please specify)  7

**Client no longer needs therapy from the DTC:** Includes situations where the client's problem has been resolved (or longer exists) or the client is able to manage without the assistance of the DTC agency.

**Client referred or moved to other agency:** Includes situations where the client's changing dependency or need for assistance has reached the point where the DTC agency can no longer provide the necessary therapy and the client is referred to a more appropriate agency. This includes situations where the DTC agency's assistance is no longer needed or can no longer be provided because the client has moved into an institutional setting e.g. hospital.

**Client funding status change:** Includes situations where the DTC agency's assistance is no longer needed or can no longer be provided because the client has moved into a high level residential care service. This also includes situations where clients who live in a residential aged care service commence receiving high level care instead of low level care, or where clients in low level care become eligible for therapy funding under the Resident Classification Scale (RCS questions 19 & 20), and the cost is fully recovered by the DTC agency.

**Client moved out of area:** Includes situations where the client ceased to receive therapy from the DTC agency because the client moved out of the geographic area of coverage of the DTC agency. That is, the reason the DTC agency ceases to assist the client is primarily because of a change in the client's residential location and not because of any change in their need for therapy.

**Client terminated service:** Includes situations where the decision to cease receiving therapy from the DTC agency was made by the client. That is, it was the client's choice and not the result of any DTC agency assessment of need or change in the client's external circumstances. If the client had not made this choice they would have continued to receive therapy from the DTC agency.

**Thank you for your time and help completing this form.** ←

# Appendix B

## Definition of data element attributes

### Data element attributes

**Admin. status:** The operational status (TRIAL, CURRENT, SUPERSEDED) of the data element or data concept and the date from which this status is effective. 'TRIAL' status indicates that the data element is subject to trialing or pilot-testing before full endorsement is given (i.e. before it becomes CURRENT).

### Identifying and definitional attributes

**Name:** A single or multi-word designation assigned to a data element. This appears in the heading for each unique data definition in the Dictionary.

**Data element type:** A data element may be either:

- a DATA CONCEPT – a concept which can be represented in the form of a data element, described independently of any particular representation. For example, 'DTC client' or 'Care plan'.
- b DATA ELEMENT – a unit of data for which the definition, identification, representational and permissible values are specified by means of a set of attributes. For example, 'Sex', 'Date of birth' and 'Country of birth'.
- c a DERIVED DATA ELEMENT – a unit of data for which the definition, identification, representational and permissible values are derived from other data elements.
- d a COMPOSITE DATA ELEMENT – a unit of data for which the definition, identification, representational and permissible values represent a grouping of the values of other data elements in a specified order.

**Definition:** A statement that expresses the essential nature of a data element and its differentiation from all other data elements.

**Context:** A designation or description of the application environment or discipline in which a name is applied or from which it originates, as well as the justification for inclusion of the data element.

## Relational and representational attributes

<b>Data type:</b>	The type of symbol, character or other designation used to represent a data element. Values include integer, numeric, alphanumeric and alphabetic. For example, the data type for 'Sex' is numeric drawn from a domain or codeset in which the numeric characters 1 = Male and 2 = Female (see Data domain below).
<b>Representational form:</b>	Name or description of the form of representation for the data element. Valid values for the Dictionary include 'CODE', 'QUANTITATIVE VALUE', 'DATE' etc. For example, the representational form for 'Accommodation setting – usual' is 'CODE' because the form of representation is individual numbers that each equate to a different data domain value, e.g. 4 = Independent living within a retirement village (see also Data domain below).
<b>Field size (minimum and maximum):</b>	The minimum and maximum number, respectively, of storage units (of the corresponding datatype) to represent the data element value. For example, a data element value expressed in dollars may require a minimum field size of one character (1) up to a maximum field size of six characters (\$\$\$\$\$\$).
<b>Representational layout:</b>	The layout of characters in data element values expressed by a character string representation. Examples include 'DDMMCCYY' for calendar date, 'N' for a 1-digit numeric field, '\$\$\$\$\$\$' for data elements about cost, etc.
<b>Data domain:</b>	The set of representations of permissible instances of the data element, according to the representational form, layout, data type and maximum size specified in the corresponding attributes. The set can be specified by name (such as valid date), by reference to a source (such as the ABS Australian Classification of Languages), or by enumeration of the representation of the instances (for example, for 'Sex' values are 1 = Male, 2 = Female).
<b>Guide for use:</b>	Additional comments or advice on the interpretation or application of the attribute 'data domain' (this attribute has no direct counterpart in the ISO/IEC Standard 11179 but has been included to assist in clarification of issues relating to the classification of data elements).
<b>Collection methods:</b>	Comments and advice concerning the actual capture of data for the particular data element, including guidelines on the design of questions for use in collecting information, treatment of 'not stated' or non-response, etc. (this attribute is not specified in the ISO/IEC Standard 11179 but has been added to cover important issues about the actual collection of data).

**Related data:** A reference between the data element, data concept or derived data element and any related data, including the type of relationship. Examples include: 'relates to the data element', 'supplements the data element', 'is derived from the data element', 'is used in conjunction with the data element' etc.

### **Administrative attributes**

**Source document:** The document from which definitional or representational attributes originate.

**Source organisation:** The organisation responsible for the source document (this attribute is not specified in the ISO/IEC Standard 11179 but has been added for completeness).

**Comments:** Remarks on the data element.

# Appendix C

**Code list for country of birth using the Standard Australian Classification of Countries 1998 4-digit level, Australian Bureau of Statistics Catalogue No. 1269.0**

## 1 Oceania and Antarctica

- 11 Australia (includes External Territories)
  - 1101 Australia
  - 1102 Norfolk Island
  - 1199 Australian External Territories, nec
- 12 New Zealand
  - 1201 New Zealand
- 13 Melanesia
  - 1301 New Caledonia
  - 1302 Papua New Guinea
  - 1303 Solomon Islands
  - 1304 Vanuatu
- 14 Micronesia
  - 1401 Guam
  - 1402 Kiribati
  - 1403 Marshall Islands
  - 1404 Micronesia, Federated States of
  - 1405 Nauru
  - 1406 Northern Mariana Islands
  - 1407 Palau
- 15 Polynesia (excludes Hawaii)
  - 1501 Cook Islands
  - 1502 Fiji
  - 1503 French Polynesia
  - 1504 Niue
  - 1505 Samoa
  - 1506 Samoa, American
  - 1507 Tokelau
  - 1508 Tonga
  - 1511 Tuvalu
  - 1512 Wallis and Futuna
  - 1599 Polynesia (excludes Hawaii), nec
- 16 Antarctica
  - 1601 Adelie Land (France)
  - 1602 Argentinian Antarctic Territory
  - 1603 Australian Antarctic Territory
  - 1604 British Antarctic Territory
  - 1605 Chilean Antarctic Territory
  - 1606 Queen Maud Land (Norway)
  - 1607 Ross Dependency (New Zealand)

## 2 North-West Europe

- 21 United Kingdom
  - 2101 Channel Islands
  - 2102 England
  - 2103 Isle of Man
  - 2104 Northern Ireland
  - 2105 Scotland
  - 2106 Wales
- 22 Ireland
  - 2201 Ireland
- 23 Western Europe
  - 2301 Austria
  - 2302 Belgium
  - 2303 France
  - 2304 Germany
  - 2305 Liechtenstein
  - 2306 Luxembourg
  - 2307 Monaco
  - 2308 Netherlands
  - 2311 Switzerland

- 24 Northern Europe
  - 2401 Denmark
  - 2402 Faeroe Islands
  - 2403 Finland
  - 2404 Greenland
  - 2405 Iceland
  - 2406 Norway
  - 2407 Sweden

## 3 Southern and Eastern Europe

- 31 Southern Europe
  - 3101 Andorra
  - 3102 Gibraltar
  - 3103 Holy See
  - 3104 Italy
  - 3105 Malta
  - 3106 Portugal
  - 3107 San Marino
  - 3108 Spain
- 32 South Eastern Europe
  - 3201 Albania
  - 3202 Bosnia and Herzegovina
  - 3203 Bulgaria
  - 3204 Croatia
  - 3205 Cyprus
  - 3206 Former Yugoslav Republic of Macedonia (FYROM)
  - 3207 Greece
  - 3208 Moldova
  - 3211 Romania
  - 3212 Slovenia
  - 3213 Yugoslavia, Federal Republic of
- 33 Eastern Europe
  - 3301 Belarus
  - 3302 Czech Republic
  - 3303 Estonia
  - 3304 Hungary
  - 3305 Latvia
  - 3306 Lithuania
  - 3307 Poland
  - 3308 Russian Federation
  - 3311 Slovakia
  - 3312 Ukraine

## 4 North Africa and the Middle East

- 41 East North Africa
  - 4101 Algeria
  - 4102 Egypt
  - 4103 Libya
  - 4104 Morocco
  - 4105 Sudan
  - 4106 Tunisia
  - 4107 Western Sahara
  - 4199 North Africa, nec
- 42 Middle East
  - 4201 Bahrain
  - 4202 Gaza Strip and West Bank
  - 4203 Iran
  - 4204 Iraq
  - 4205 Israel
  - 4206 Jordan
  - 4207 Kuwait
  - 4208 Lebanon
  - 4211 Oman
  - 4212 Qatar
  - 4213 Saudi Arabia
  - 4214 Syria
  - 4215 Turkey
  - 4216 United Arab Emirates
  - 4217 Yemen



## 5 South-East Asia

### 51 Mainland South-East Asia

- 5101 Burma (Myanmar)
- 5102 Cambodia
- 5103 Laos
- 5104 Thailand
- 5105 Viet Nam

### 52 Maritime South-East Asia

- 5201 Brunei Darussalam
- 5202 Indonesia
- 5203 Malaysia
- 5204 Philippines
- 5205 Singapore
- 5206 East Timor

## 6 North-East Asia

### 61 Chinese Asia (includes Mongolia)

- 6101 China (excludes SARs and Taiwan Province)
- 6102 Hong Kong (SAR of China)
- 6103 Macau (SAR of China)
- 6104 Mongolia
- 6105 Taiwan

### 62 Japan and the Koreans

- 6201 Japan
- 6202 Korea, Democratic People's Republic of (North)
- 6203 Korea, Republic of (South)

## 7 Southern and Central Asia

### 71 Southern Asia

- 7101 Bangladesh
- 7102 Bhutan
- 7103 India
- 7104 Maldives
- 7105 Nepal
- 7106 Pakistan
- 7107 Sri Lanka

### 72 Central Asia

- 7201 Afghanistan
- 7202 Armenia
- 7203 Azerbaijan
- 7204 Georgia
- 7205 Kazakhstan
- 7206 Kyrgyz Republic
- 7207 Tajikistan
- 7208 Turkmenistan
- 7211 Uzbekistan

## Americas

### 81 Northern America

- 8101 Bermuda
- 8102 Canada
- 8103 St Pierre and Miquelon
- 8104 United States of America

### 82 South America

- 8201 Argentina
- 8202 Bolivia
- 8203 Brazil
- 8204 Chile
- 8205 Colombia
- 8206 Ecuador
- 8207 Falkland Islands
- 8208 French Guiana
- 8211 Guyana
- 8212 Paraguay
- 8213 Peru
- 8214 Suriname
- 8215 Uruguay
- 8216 Venezuela
- 8299 South America, nec

### 83 Central America

- 8301 Belize
- 8302 Costa Rica
- 8303 El Salvador
- 8304 Guatemala
- 8305 Honduras
- 8306 Mexico
- 8307 Nicaragua
- 8308 Panama

### 84 Caribbean

- 8401 Anguilla
- 8402 Antigua and Barbuda
- 8403 Aruba
- 8404 Bahamas
- 8405 Barbados
- 8406 Cayman Islands
- 8407 Cuba
- 8408 Dominica
- 8411 Dominican Republic
- 8412 Grenada
- 8413 Guadeloupe
- 8414 Haiti
- 8415 Jamaica
- 8416 Martinique
- 8417 Montserrat
- 8418 Netherlands Antilles
- 8421 Puerto Rico
- 8422 St Kitts and Nevis
- 8423 St Lucia
- 8424 St Vincent and the Grenadines
- 8425 Trinidad and Tobago
- 8426 Turks and Caicos Islands
- 8427 Virgin Islands, British
- 8428 Virgin Islands, United States

## 9 Sub-Saharan Africa

### 91 Central and West Africa

- 9101 Benin
- 9102 Burkina Faso
- 9103 Cameroon
- 9104 Cape Verde
- 9105 Central African Republic
- 9106 Chad
- 9107 Congo
- 9108 Congo, Democratic Republic of
- 9111 Cote d'Ivoire
- 9112 Equatorial Guinea
- 9113 Gabon
- 9114 Gambia
- 9115 Ghana
- 9116 Guinea
- 9117 Guinea-Bissau
- 9118 Liberia
- 9121 Mali
- 9122 Mauritania
- 9123 Niger
- 9124 Nigeria
- 9125 Sao Tome and Principe
- 9126 Senegal
- 9127 Sierra Leone
- 9128 Togo

92 Southern and East Africa  
9201 Angola  
9202 Botswana  
9203 Burundi  
9204 Comoros  
9205 Djibouti  
9206 Eritrea  
9207 Ethiopia  
9208 Kenya  
9211 Lesotho  
9212 Madagascar  
9213 Malawi  
9214 Mauritius  
9215 Mayotte  
9216 Mozambique  
9217 Namibia  
9218 Reunion  
9221 Rwanda  
9222 St Helena  
9223 Seychelles  
9224 Somalia  
9225 South Africa  
9226 Swaziland  
9227 Tanzania  
9228 Uganda  
9231 Zambia  
9232 Zimbabwe  
9299 Southern and East Africa, nec

## **Alphabetic code list for Country of birth**

Adélie Land (France)	1601	Ethiopia	9207
Afghanistan	7201	Faeroe Islands	2402
Albania	3201	Falkland Islands	8207
Algeria	4101	Fiji	1502
Andorra	3101	Finland	2403
Angola	9201	Former Yugoslav Republic of Macedonia (FYROM)	3206
Anguilla	8401	France	2303
Antigua and Barbuda	8402	French Guiana	8208
Argentina	8201	French Polynesia	1503
Argentinian Antarctic Territory	1602	Gabon	9113
Armenia	7202	Gambia	9114
Aruba	8403	Gaza Strip and West Bank	4202
Australia	1101	Georgia	7204
Australian Antarctic Territory	1603	Germany	2304
Australian External Territories nec	1199	Ghana	9115
Austria	2301	Gibraltar	3102
Azerbaijan	7203	Greece	3207
Bahamas	8404	Greenland	2404
Bahrain	4201	Grenada	8412
Bangladesh	7101	Guadeloupe	8413
Barbados	8405	Guam	1401
Belarus	3301	Guatemala	8304
Belgium	2302	Guinea	9116
Belize	8301	Guinea-Bissau	9117
Benin	9101	Guyana	8211
Bermuda	8101	Haiti	8414
Bhutan	7102	Holy See	3103
Bolivia	8202	Honduras	8305
Bosnia and Herzegovina	3202	Hong Kong (SAR of China)	6102
Botswana	9202	Hungary	3304
Brazil	8203	Iceland	2405
British Antarctic Territory	1604	India	7103
Brunei Darussalam	5201	Indonesia	5202
Bulgaria	3203	Iran	4203
Burkina Faso	9102	Iraq	4204
Burma (Myanmar)	5101	Ireland	2201
Burundi	9203	Isle of Man	2103
Cambodia	5102	Israel	4205
Cameroon	9103	Italy	3104
Canada	8102	Jamaica	8415
Cape Verde	9104	Japan	6201
Cayman Islands	8406	Jordan	4206
Central African Republic	9105	Kazakhstan	7205
Chad	9106	Kenya	9208
Channel Islands	2101	Kiribati	1402
Chile	8204	Korea, Democratic People's Republic of (North)	6202
Chilean Antarctic Territory	1605	Korea, Republic of (South)	6203
China (excludes SARs and Taiwan Province)	6101	Kuwait	4207
Colombia	8205	Kyrgyz Republic	7206
Comoros	9204	Laos	5103
Congo	9107	Latvia	3305
Congo, Democratic Republic of	9108	Lebanon	4208
Cook Islands	1501	Lesotho	9211
Costa Rica	8302	Liberia	9118
Cote d'Ivoire	9111	Libya	4103
Croatia	3204	Liechtenstein	2305
Cuba	8407	Lithuania	3306
Cyprus	3205	Luxembourg	2306
Czech Republic	3302	Macau (SAR of China)	6103
Denmark	2401	Madagascar	9212
Djibouti	9205	Malawi	9213
Dominica	8408	Malaysia	5203
Dominican Republic	8411	Maldives	7104
East Timor	5206	Mali	9121
Ecuador	8206	Malta	3105
Egypt	4102	Marshall Islands	1403
El Salvador	8303	Martinique	8416
England	2102	Mauritania	9122
Equatorial Guinea	9112	Mauritius	9214
Eritrea	9206	Mayotte	9215
Estonia	3303	Mexico	8306

Micronesia, Federated States of	1404	Tajikistan	7207
Moldova	3208	Tanzania	9227
Monaco	2307	Thailand	5104
Mongolia	6104	Togo	9128
Montserrat	8417	Tokelau	1507
Morocco	4104	Tonga	1508
Mozambique	9216	Trinidad and Tobago	8425
Namibia	9217	Tunisia	4106
Nauru	1405	Turkey	4215
Nepal	7105	Turkmenistan	7208
Netherlands	2308	Turks and Caicos Islands	8426
Netherlands Antilles	8418	Tuvalu	1511
New Caledonia	1301	Uganda	9228
New Zealand	1201	Ukraine	3312
Nicaragua	8307	United Arab Emirates	4216
Niger	9123	United States of America	8104
Nigeria	9124	Uruguay	8215
Niue	1504	Uzbekistan	7211
Norfolk Island	1102	Vanuatu	1304
North Africa, nec	4199	Venezuela	8216
Northern Ireland	2104	Viet Nam	5105
Northern Mariana Islands	1406	Virgin Islands, British	8427
Norway	2406	Virgin Islands, United States	8428
Oman	4211	Wales	2106
Pakistan	7106	Wallis and Futuna	1512
Palau	1407	Western Sahara	4107
Panama	8308	Yemen	4217
Papua New Guinea	1302	Yugoslavia, Federal Republic of	3213
Paraguay	8212	Zambia	9231
Peru	8213	Zimbabwe	9232
Philippines	5204		
Poland	3307		
Polynesia (excludes Hawaii), nec	1599		
Portugal	3106		
Puerto Rico	8421		
Qatar	4212		
Queen Maud Land (Norway)	1606		
Réunion	9218		
Romania	3211		
Ross Dependency (New Zealand)	1607		
Russian Federation	3308		
Rwanda	9221		
Samoa	1505		
Samoa, American	1506		
San Marino	3107		
Sao Tomé and Príncipe	9125		
Saudi Arabia	4213		
Scotland	2105		
Senegal	9126		
Seychelles	9223		
Sierra Leone	9127		
Singapore	5205		
Slovakia	3311		
Slovenia	3212		
Solomon Islands	1303		
Somalia	9224		
South Africa	9225		
South America, nec	8299		
Southern and East Africa, nec	9299		
Spain	3108		
Sri Lanka	7107		
St Helena	9222		
St Kitts and Nevis	8422		
St Lucia	8423		
St Pierre and Miquelon	8103		
St Vincent and the Grenadines	8424		
Sudan	4105		
Suriname	8214		
Swaziland	9226		
Sweden	2407		
Switzerland	2311		
Syria	4214		
Taiwan	6105		

# Appendix D

## Code list for Health condition

Code	Health condition	Code	Health condition
	<b>Certain infectious &amp; parasitic diseases</b>		<b>Diseases of the nervous system<sup>1</sup></b>
0198	Other infectious & parasitic diseases n.o.s or n.e.c	0602	Huntington's disease
	<b>Neoplasms (tumours/cancers)</b>	0603	Motor neurone disease
0201	Head & neck cancer	0604	Parkinson's disease
0202	Stomach cancer	0605	Transient cerebral ischaemic attacks (T.I.A.'s) <sup>2</sup>
0203	Colorectal (bowel) cancer	0607	Multiple sclerosis
0204	Lung cancer	0611	Paralysis—non-traumatic (includes hemiplegia, paraplegia, quadriplegia, & other paralytic syndromes, excludes spinal cord injury)
0205	Skin cancer	0698	Other diseases of the nervous system n.o.s or n.e.c (includes epilepsy, muscular dystrophy, migraines, sleep disorders, Bell's palsy, peripheral neuropathy, myopathies, meningitis, brain disease/disorders)
0206	Breast cancer		<b>Diseases of the eye &amp; adnexa</b>
0207	Prostate cancer	0701	Cataracts
0208	Brain cancer	0702	Glaucoma
0209	Non-Hodgkin's lymphoma	0703	Blindness (both eyes, one eye, one eye & low vision in other eye)
0210	Leukaemia	0704	Poor vision (low vision both eyes, one eye, unspecified visual loss)
0211	Other malignant tumours n.o.s or n.e.c	0798	Other disease of the eye & adnexa n.o.s or n.e.c
0298	Other neoplasms (includes benign tumours and tumours of unknown or uncertain behaviour)		<b>Diseases of the ear &amp; mastoid process</b>
	<b>Diseases of the blood &amp; blood forming organs &amp; immune mechanism</b>	0801	Ménière's disease (includes Ménière's syndrome, vertigo)
0301	Anaemia	0802	Deafness/hearing loss
0398	Other diseases of blood & blood forming organs & immune mechanism n.o.s or n.e.c (includes haemophilia, immunodeficiency disorder (excluding AIDS))	0898	Other diseases of the ear & mastoid process n.o.s or n.e.c. (includes disease of external ear, otitis media, mastoiditis, myringitis, tinnitus)
	<b>Endocrine, nutritional &amp; metabolic disorders</b>		<b>Diseases of the circulatory system</b>
0401	Disorders of the thyroid gland (includes iodine-deficiency syndrome, hypothyroidism, hyperthyroidism, thyroiditis)	0900	Heart disease (includes angina, myocardial infarction, acute & chronic ischaemic heart disease, congestive heart failure, pulmonary embolism, acute pericarditis, acute and subacute endocarditis, cardiomyopathy, cardiac arrest, heart failure—unspecified)
0402	Diabetes mellitus—Type 1 (IDDM)	0910	Cerebrovascular disease <sup>2,3</sup> (includes subarachnoid, intracerebral & other intracranial haemorrhage, cerebral infarction, stroke (CVA) unspecified, embolism)
0403	Diabetes mellitus—Type 2 (NIDDM)	0920	Other diseases of the circulatory system (includes abdominal aortic aneurysm, other arterial or aortic aneurysms)
0404	Diabetes mellitus—other specified, unspecified, unable to be specified	0921	Hypertension (high blood pressure)
0405	Malnutrition	0922	Hypotension (low blood pressure)
0406	Nutritional deficiencies	0998	Other diseases of the circulatory system n.o.s or n.e.c (includes atherosclerosis, peripheral vascular disease, other disorders of arteries & arterioles, diseases of capillaries, varicose veins, haemorrhoids)
0498	Other endocrine, nutritional & metabolic disorders n.o.s or n.e.c (includes high cholesterol, hypoparathyroidism, obesity)		<b>Diseases of the respiratory system</b>
	<b>Mental &amp; behavioural disorders</b>	1001	Acute upper respiratory infections (includes common cold, acute sinusitis, acute pharyngitis, acute tonsillitis, acute laryngitis, upper respiratory infections of multiple & unspecified sites)
0500	Dementia in Alzheimer's disease <sup>1</sup> (includes early onset <65yrs, late onset >65 yrs, atypical or mixed type, unspecified)	1002	Influenza & pneumonia
0510	Vascular dementia (includes acute onset, multi-infarct, subcortical, mixed cortical & subcortical, other vascular, unspecified)	1003	Acute lower respiratory infections (includes acute bronchitis, bronchiolitis & unspecified acute lower respiratory infections)
0520	Dementia in other diseases (includes Pick's, Creutzfeldt-Jakob, Huntington's, Parkinson's, HIV, Lewy Body, other)	1004	Other diseases of upper respiratory tract (includes respiratory allergies (excluding allergic asthma), chronic rhinitis & sinusitis, chronic diseases of tonsils & adenoids)
0530	Other dementia n.o.s or n.e.c (includes alcoholic, presenile & senile, unspecified)	1005	Chronic lower respiratory diseases (includes emphysema, chronic obstructive airways disease (COAD), asthma)
0540	Delirium (includes not superimposed, superimposed, other, unspecified)	1098	Other diseases of the respiratory system n.o.s or n.e.c
0550	Psychoses & depression/Mood affective disorders (includes schizophrenia, paranoid states)		
0560	Other neurotic, stress related & somatoform disorders n.o.s or n.e.c (includes phobic & anxiety disorders, obsessive-compulsive disorder, nervous tension, stress)		
0570	Intellectual & developmental disorders		
0580	Other mental & behavioural disorders (includes adult personality & behavioural disorders, speech impediment)		
0581	Mental & behavioural disorders due to alcohol & other psychoactive substance use (includes alcoholism, Korsakov's psychosis alcoholic)		
0598	Other mental & behavioural disorders n.o.s or n.e.c		

1 In any analysis of 'Diseases of the nervous system' code 0500 Dementia in Alzheimer's disease should be grouped with 0600–0698.  
2 In any analysis of 'Cerebrovascular disease' code 0605 Transient cerebral ischaemic attacks (T.I.A.'s) should be grouped with 0910.  
3 Transient cerebral ischaemic attacks (T.I.A.'s) should be coded to 0605.  
n.e.c.—not elsewhere classified, n.o.s.—not otherwise specified

Code	Health condition	Code	Health condition
	<b>Diseases of the digestive system</b>		
1101	Diseases of the intestine (includes stomach/duodenal ulcer, abdominal hernia (except congenital), enteritis, colitis, vascular disorders of intestine, diverticulitis, irritable bowel syndrome, diarrhoea, constipation)	1613	Poisoning by drugs, medicaments & biological substances (includes systemic antibiotics, hormones, narcotics, hallucinogens, analgesics, antipyretics, antirheumatics, antiepileptic, anti-parkinsonism drugs, includes overdose of the above substances)
1103	Diseases of the liver (includes alcoholic liver disease, toxic liver disease, fibrosis and cirrhosis of liver)	1698	Other injury, poisoning & consequences of external causes (including all other injuries to the body, spinal cord injury, multiple fractures, unspecified dislocations, sprains, strains, fractures, burns, frostbite, chilblain, toxic effects of substances of non-medical source, complications of surgical & medical care)
1198	Other diseases of the digestive system n.o.s or n.e.c (includes other disease of the gastrointestinal tract & peritoneum, gastritis, other diseases of the gallbladder)		
	<b>Diseases of the skin &amp; subcutaneous tissue</b>		<b>Symptoms &amp; signs n.o.s or n.e.c<sup>4</sup></b>
1201	Skin & subcutaneous tissue infections (includes impetigo, boil, cellulitis, foot infection)	1702	Cough
1202	Skin allergies (Dermatitis & Eczema)	1703	Breathing difficulties/shortness of breath
1298	Other diseases of the skin & subcutaneous tissue n.o.s or n.e.c (includes bedsore, urticaria, erythema, radiation-related disorders, ingrowing nail, corn, callous, chronic ulcer n.e.c, ulcer of lower limb n.e.c)	1704	Pain
	<b>Diseases of the musculoskeletal system &amp; connective tissue</b>	1706	Dysphagia (difficulty in swallowing)
1301	Rheumatoid arthritis	1707	Bowel/faecal incontinence
1302	Other arthritis & related disorders (includes gout, arthrosis, osteoarthritis)	1708	Unspecified urinary incontinence
1304	Back problems—dorsopathies (includes scoliosis)	1709	Retention of urine
1306	Osteoporosis	1711	Disturbances of skin sensation (includes pins & needles, tingling skin)
1398	Other disorders of the musculoskeletal system & connective tissue n.o.s or n.e.c (includes rheumatism, osteomyelitis, bunion)	1713	Abnormal involuntary movements (includes abnormal head movements, tremor unspecified, cramp & spasm, twitching n.o.s)
	<b>Diseases of the genitourinary system</b>	1714	Abnormalities of gait & mobility (includes ataxic & spastic gait, difficulty in walking n.e.c)
1401	Kidney & urinary system (bladder) disorders (includes nephritis renal failure, cystitis)	1715	Falls (frequent with unknown aetiology)
1402	Urinary tract infection	1716	Disorientation (confusion)
1403	Stress/urinary incontinence (includes stress, overflow, reflex & urge incontinence)	1717	Amnesia (memory disturbance, lack or loss)
1498	Other diseases of the genitourinary system n.o.s or n.e.c (prostate, breast & menopause disorders)	1718	Dizziness & giddiness (light-headedness, vertigo n.o.s)
	<b>Congenital malformations, deformations &amp; chromosomal abnormalities</b>	1719	Restlessness & agitation
1598	Other congenital malformations, deformities & chromosomal abnormalities	1720	Unhappiness (worries n.o.s)
	<b>Injury, poisoning &amp; certain other consequences of external causes</b>	1721	Irritability & anger
1601	Injuries to the head (includes injuries to ear, eye, face, jaw, acquired brain damage)	1722	Hostility
1602	Injuries to arm/hand/shoulder (includes, dislocations, sprains & strains)	1723	Physical violence
1603	Injuries to leg/knee/foot/ankle/hip (includes dislocations, sprains & strains)	1724	Slowness & poor responsiveness
1604	Amputation of the finger/thumb/hand/arm/shoulder—related to injury or accident	1725	Speech & voice disturbances
1605	Amputation of toe/ankle/foot/leg—related to injury or accident	1726	Headache
1606	Fracture of neck (includes cervical spine & vertebra)	1727	Malaise & fatigue (includes general physical deterioration, lethargy and tiredness)
1607	Fracture of rib(s), sternum & thoracic spine (includes thoracic spine & vertebra)	1728	Blackouts, fainting, convulsions
1608	Fracture of lumbar spine & pelvis (includes lumbar vertebra, sacrum, coccyx, sacrum)	1729	Oedema n.e.c (includes fluid retention n.o.s)
1609	Fracture of shoulder, upper arm & forearm (includes clavicle, scapula, humerus, radius, ulna)	1798	Other symptoms & signs n.o.s or n.e.c (includes gangrene, nausea & vomiting, rash & other nonspecific skin eruption, illness n.o.s, loss of appetite, abnormal weight loss & gain)
1610	Fracture at wrist & hand level	1899	Has other health condition n.o.s or n.e.c
1611	Fracture of femur (includes hip (neck of femur))		<b>Factors influencing health status<sup>5</sup></b>
1612	Fracture of lower leg & foot	1901	Problems related to social environment (includes loneliness, social isolation)
		1902	Problems related to primary support group/family circumstances (includes relationship problems, grief & loss, carer issues)
		1903	Problems related to lifestyle (includes inappropriate diet & eating habits, lack of physical exercise)
		1904	Problems related to life-management difficulty (includes stress n.e.c, limitation of activities due to disability)

*4 These codes should only be used to record certain symptoms that represent important problems in their own right, regardless of whether a related diagnosed disease or disorder is also reported*

*5 These codes should only be used to record a circumstance or problem which influences a person's health status, but is not in itself a health condition, regardless of whether a related diagnosed disease or disorder is also reported.*

*n.e.c—not elsewhere classified, n.o.s—not otherwise specified*



# Code list for Health condition—alphabetic

Codes beginning with '17' belong to the Symptoms & signs group of the Health condition code list and should only be used to record certain symptoms that represent important problems in their own right, regardless of whether a related diagnosed disease or disorder is also reported. Codes beginning with '19' belong to the Factors influencing health status group of the Health condition code list and should only be used to record a circumstance or problem which influences a person's health status, but is not in itself a health condition, regardless of whether a related diagnosed disease or disorder is also reported.

1 In any analysis of 'Cerebrovascular disease' 'Transient cerebral ischaemic attacks (T.I.A.'s) should be included.

2 Transient cerebral ischaemic attacks (T.I.A.'s) should be coded to 0605.

3 In any analysis of 'Diseases of the nervous system' code 'Dementia in Alzheimer's disease' should be grouped with 'Diseases of the nervous system'.

n.e.c.—not elsewhere classified, n.o.s.—not otherwise specified

Code	Health condition	Code	Health condition
0920	Abdominal aortic aneurysm	1304	Back problems
1101	Abdominal hernia (except congenital)	1298	Bedsore
1713	Abnormal involuntary movements	0580	Behavioural & personality disorders—adult
1798	Abnormal weight gain	0698	Bell's palsy
1798	Abnormal weight loss	1728	Blackouts
1714	Abnormalities of gait & mobility	0703	Blindness—see also Poor vision
	Acquired brain damage—see Injuries	0922	Blood pressure—low
1719	Agitation	0921	Blood pressure—high
0198	AIDS/HIV	1201	Boil
	Alcoholic dementia—see Dementia	0203	Bowel (colorectal) cancer
1103	Alcoholic liver disease	1707	Bowel incontinence
0581	Alcoholism		Brain damage—acquired—see Injuries
1004	Allergies—respiratory (excl. asthma)	0208	Brain cancer
1202	Allergies—skin	0698	Brain disease/disorders
	Alzheimer's disease—see Dementia	0206	Breast cancer
1717	Amnesia	1498	Breast disorders
1604	Amputation of finger/thumb/hand/arm/shoulder—related to injury or accident	1703	Breathing difficulties/shortness of breath
1605	Amputation of the toe/ankle/foot/leg—related to injury or accident	1003	Bronchitis/bronchiolitis—acute
0301	Anaemia	1398	Bunion
0920	Aneurysms (arterial or aortic)—see also Abdominal aortic aneurysm	1698	Burns
1721	Anger	1298	Callous
0900	Angina	0900	Cardiac arrest
0560	Anxiety disorders	1902	Carer issues
0998	Arterial embolism	0701	Cataracts
1302	Arthritis and related disorders—see also Rheumatoid arthritis	1201	Cellulitis
1302	Arthrosis	0910	Cerebral infarction <sup>1,2</sup>
0570	Asperger's syndrome	0698	Cerebral palsy
1005	Asthma	0910	Cerebrovascular accident—cerebral infarction <sup>1,2</sup>
1714	Ataxic gait	0910	Cerebrovascular accident—intracerebral haemorrhage <sup>1,2</sup>
0998	Atherosclerosis	0910	Cerebrovascular accident—other intracranial haemorrhage <sup>1,2</sup>
0570	Autism	0910	Cerebrovascular accident—subarachnoid haemorrhage <sup>1,2</sup>
		0910	Cerebrovascular accident—unspecified <sup>1,2</sup>
		1698	Chilblain

Code	Health condition	Code	Health condition
1198	Cholecystitis	0510	Dementia — mixed cortical & subcortical vascular
0498	Cholesterol—high	0510	Dementia — multi-infarct
1598	Chromosomal abnormalities—other	0510	Dementia — other vascular
1005	Chronic obstructive airways disease (COAD)	0510	Dementia — subcortical vascular
0698	Chronic/postviral fatigue syndrome	0530	Dementia — unspecified (includes presenile & senile dementia)
1103	Cirrhosis of liver	0510	Dementia — vascular of acute onset
1005	COAD	0510	Dementia — vascular, unspecified
1198	Coeliac disease	0550	Depression/mood affective disorders
1001	Cold—common	1202	Dermatitis
1101	Colitis	1727	Deterioration—general physical
0203	Colorectal (bowel) cancer	0570	Developmental disorders of motor function
1716	Confusion	0570	Developmental disorders of speech & language
1598	Congenital brain damage/malformation	0570	Developmental learning disorders
0906	Congestive heart disease	0402	Diabetes mellitus—Type 1 (IDDM)
0906	Congestive heart failure	0403	Diabetes mellitus—Type 2 (NIDDM)
1101	Constipation	0404	Diabetes mellitus—other specified/unspecified/unable to be specified
1728	Convulsions	1101	Diarrhoea
1298	Corn	0198	Diarrhoea & gastroenteritis of presumed infectious origin
1702	Cough	1903	Diet—inappropriate
1713	Cramp	1904	Disability—limitation of activities due to disability
0498	Cushing's syndrome	1602	Dislocation—arm/hand/shoulder—from injury/accident
	CVA—see Cerebrovascular accident	1603	Dislocation—knee/foot/ankle—from injury/accident
1401	Cystitis	1698	Dislocation—unspecified
0802	Deafness/hearing loss	1716	Disorientation
1398	Deformities of joints/limbs—acquired	1101	Diverticulitis
1598	Deformities of joints/limbs—congenital	1718	Dizziness
0540	Delirium—not superimposed on dementia	1304	Dorsopathies
0540	Delirium—superimposed on dementia	1598	Down's syndrome
0540	Delirium—other	1101	Duodenal ulcer
0540	Delirium—unspecified	1198	Duodenitis
0530	Dementia—alcoholic	1706	Dysphagia (difficulty in swallowing)
0500	Dementia in Alzheimer's with early onset (<65 yrs) <sup>3</sup>	0570	Dyspraxia
0500	Dementia in Alzheimer's with late onset (>65 yrs) <sup>3</sup>	0698	Dystonia
0500	Dementia in Alzheimer's, atypical or mixed type <sup>3</sup>	0898	Ear & mastoid process—other diseases of
0500	Dementia in Alzheimer's, unspecified <sup>3</sup>	0598	Eating disorders
0520	Dementia in Creutzfeldt-Jakob disease	1903	Eating habits—inappropriate
0520	Dementia in HIV disease	1202	Eczema
0520	Dementia in Huntington's disease	1005	Emphysema
0520	Dementia in other specified diseases classified elsewhere	0698	Encephalitis (excl. viral)
0520	Dementia in Parkinson's disease	1101	Enteritis
0520	Dementia in Pick's disease		

Code	Health condition	Code	Health condition
0698	Epilepsy	0498	High cholesterol
1298	Erythema	0198	HIV/AIDS
1707	Faecal incontinence	1722	Hostility
1728	Fainting	0602	Huntington's disease
1715	Falls—frequent with unknown aetiology	0921	Hypertension
1727	Fatigue	0498	Hypoparathyroidism
1103	Fibrosis of liver	0401	Hyperthyroidism
1729	Fluid retention n.o.s	0922	Hypotension
0198	Foot infection—fungal	0401	Hypothyroidism
1201	Foot infection—skin	1798	Illness n.o.s
1610	Fracture at wrist & hand level	0398	Immune system—other disorders
1611	Fracture of femur (incl. hip (neck of femur))	0398	Immunodeficiency disorder (excl. AIDS)
1612	Fracture of lower leg & foot	1201	Impetigo
1608	Fracture of lumbar spine & pelvis (incl. lumbar vertebra, sacrum, coccyx, sacrum)	1707	Incontinence—bowel/faecal
1606	Fracture of neck (incl. cervical spine & vertebra)	1403	Incontinence—urinary (stress, overflow, reflex, urge)
1607	Fracture of rib(s), sternum & thoracic spine (incl. thoracic spine & vertebra)	1708	Incontinence—unspecified
1609	Fracture of shoulder, upper arm & forearm (incl. clavicle, scapula, humerus, radius, ulna)	1002	Influenza
1698	Fracture—unspecified	1298	Ingrowing nail
1698	Fractures—multiple	1601	Injuries to the head (incl. injuries to the ear/eye/face/jaw, acquired brain damage)
1698	Frostbite	1602	Injuries to the arm/hand/shoulder (incl. dislocations, sprains & strains)
1714	Gait and mobility abnormalities	1603	Injuries to the leg/knee/foot/ankle/hip (incl. dislocations, sprains & strains)
1798	Gangrene	0698	Insomnia
1198	Gastritis	0402	Insulin dependent diabetes mellitus (IDDM)
0198	Gastroenteritis & diarrhoea of presumed infectious origin	0570	Intellectual disability
1718	Giddiness	0910	Intracerebral haemorrhage <sup>1,2</sup>
0702	Glaucoma	0910	Intracranial haemorrhage—other <sup>1,2</sup>
1302	Gout	1713	Involuntary movements—abnormal
1902	Grief & loss	0401	Iodine-deficiency syndrome
0398	Haemophilia	1721	Irritability
0998	Haemorrhoids	1101	Irritable bowel syndrome
1726	Headache	0900	Ischaemic heart disease—acute & chronic
0201	Head & neck cancer	1901	Isolation—social
0698	Headache syndromes	1398	Joint/limb deformities—acquired
	Head injuries/acquired brain damage—see Injuries	1401	Kidney and urinary system (bladder) disorders (excl. incontinence & urinary tract infection)
0802	Hearing loss	0581	Korsakov's psychosis (alcoholic)
0900	Heart attack	1001	Laryngitis—acute
0611	Hemiplegia	0570	Learning disorders—developmental
1101	Hernia—abdominal (except congenital)	0198	Leprosy
0921	High blood pressure		

Code	Health condition	Code	Health condition
1727	Lethargy	1306	Osteoporosis
0210	Leukaemia	0898	Otitis media
0198	Listeriosis	0898	Otosclerosis
1103	Liver disease—alcoholic	1613	Overdose of drugs, medicaments & biological substances
1103	Liver disease—toxic	1704	Pain
1901	Loneliness	1198	Pancreatitis
1902	Loss & grief	0611	Paralysis (non-traumatic)
1798	Loss of appetite	0611	Paraplegia (non-traumatic)
0922	Low blood pressure	0604	Parkinson's disease
0204	Lung cancer	0698	Peripheral neuropathy
0209	Lymphoma—non-Hodgkin's	1198	Peritonitis
1727	Malaise	0580	Personality and behavioural disorders—adult
0405	Malnutrition	1001	Pharyngitis—acute
0898	Mastoiditis	0560	Phobic and anxiety disorders
	Memory loss—see Amnesia	1727	Physical deterioration—general
0801	Ménière's disease	1903	Physical exercise—lack of
0698	Meningitis (excl. viral)	1723	Physical violence
0198	Meningococcal infection	1711	Pins & needles
1498	Menopause disorders	1002	Pneumonia
0570	Mental retardation	1613	Poisoning by drugs, medicaments & biological substances
0698	Migraines	0198	Poliomyelitis
1714	Mobility & gait abnormalities	1724	Poor responsiveness
0550	Mood affective disorders/depression	0704	Poor vision
0603	Motor neurone disease	0698	Postviral fatigue syndrome
0607	Multiple sclerosis	0207	Prostate cancer
0698	Muscular dystrophy	1499	Prostate disorders
0900	Myocardial infarction	0900	Pulmonary embolism
0698	Myopathies	0611	Quadruplegia
0898	Myringitis	1798	Rash
1798	Nausea & vomiting	1902	Relationship problems
0201	Neck & head cancer	1401	Renal failure
1401	Nephritis	1004	Respiratory allergies (excl. allergic asthma)
0560	Nervous tension/stress	1719	Restlessness
0406	Nutritional deficiencies	1709	Retention of urine
0209	Non-Hodgkin's lymphoma	0570	Rett's syndrome
0403	Non-insulin dependent diabetes mellitus (NIDDM)	0900	Rheumatic fever
0498	Obesity	0900	Rheumatic heart disease
0560	Obsessive-compulsive disorder	1398	Rheumatism
1729	Oedema n.e.c	1301	Rheumatoid arthritis
1302	Osteoarthritis	1004	Rhinitis—chronic
1398	Osteomyelitis		

Code	Health condition	Code	Health condition
0198	Scarlet fever	1103	Toxic liver disease
0698	Schilder's disease	0605	Transient cerebral ischaemic attacks (T.I.A.'s) <sup>1</sup>
0550	Schizophrenia	1713	Tremor unspecified
1304	Scoliosis	0198	Tuberculosis
0198	Septicaemia	1713	Twitching n.o.s
1703	Shortness of breath	1298	Ulcer—chronic n.e.c
1001	Sinusitis—acute	1298	Ulcer—lower limb n.e.c
1004	Sinusitis—chronic	1101	Ulcer—stomach/duodenal
1202	Skin allergies	1720	Unhappiness
1201	Skin and subcutaneous tissue infections	1403	Urinary incontinence (stress, overflow, reflex, urge)
0205	Skin cancer	1708	Urinary incontinence—unspecified
1711	Skin sensation disturbances	1401	Urinary system disorders
0698	Sleep apnoea	1402	Urinary tract infection
1724	Slowness	1709	Urinary retention
1901	Social isolation	1298	Urticaria
1713	Spasm	0998	Varicose veins
1714	Spastic gait		Vascular dementia—see dementia
0580	Speech impediment	0801	Vertigo
1725	Speech & voice disturbances	1718	Vertigo n.o.s.
1598	Spina bifida	1723	Violence—physical
1602	Sprain—arm/hand/shoulder—from injury/accident	0198	Viral meningitis
1603	Sprain—leg/knee/foot/ankle/hip—from injury/accident	1725	Voice & speech disturbances
1698	Sprain—unspecified	1705	Vomiting & nausea
1101	Stomach ulcer	1714	Walking difficulty n.e.c.
1602	Strain—arm/hand/shoulder—from injury/accident	0198	Wart
1603	Strain—leg/knee/foot/ankle/hip—from injury/accident	1798	Weight gain—abnormal
1698	Strain—unspecified	1798	Weight loss—abnormal
	Stroke—see cerebrovascular accident	1720	Worries n.o.s.
0580	Stammering		
0202	Stomach cancer		
1903	Stress n.e.c		
0560	Stress/nervous tension		
0580	Stuttering		
0910	Subarachnoid haemorrhage <sup>1,2</sup>		
1706	Swallowing difficulty		
0611	Tetraplegia		
0401	Thyroiditis		
0605	T.I.A.'s <sup>1</sup>		
1711	Tingling skin		
0898	Tinnitus		
1727	Tiredness		
1001	Tonsillitis—acute		

**DTC Program Health condition code list mapped to equivalent code in the International Statistical Classification of Diseases & Related Health Problems—Tenth Revision—Australian Modification (1998) (also known as ICD-10-AM).**

This mapping is required if any analysis with other data sets using the ICD-10-AM is to be done in the future, e.g. ACAP MDS Version 2.0.

Code	Health condition	Equivalent ICD-10-AM code
<b>Certain infectious &amp; parasitic diseases</b>		
0198	Other infectious & parasitic diseases n.o.s or n.e.c	A00–09, A15–99, B00–99
<b>Neoplasms (tumours/cancers)</b>		
0201	Head & neck cancer	C01–14
0202	Stomach cancer	C16
0203	Colorectal (bowel) cancer	C18–20
0204	Lung cancer	C34
0205	Skin cancer	C43–44
0206	Breast cancer	C50
0207	Prostate cancer	C61
0208	Brain cancer	C70–71
0209	Non-Hodgkin's lymphoma	C82–85
0210	Leukaemia	C91–95
0211	Other malignant tumours n.o.s or n.e.c	C00, C15, C17, C21–33, C37–41, C45–49, C51–60, C62–69, C72–81, C86–90, C96–97, D00–09
0298	Other neoplasms (includes benign tumours & tumours of uncertain or unknown behaviour)	D10–48
<b>Diseases of the blood &amp; blood forming organs &amp; immune mechanism</b>		
0301	Anaemia	D50–64
0398	Other diseases of blood & blood forming organs & immune mechanism n.o.s. or n.e.c (includes haemophilia, immunodeficiency disorder (excluding AIDS))	D65–77, D80–84, D86–89
<b>Endocrine, nutritional &amp; metabolic disorders</b>		
0401	Disorders of the thyroid gland (includes iodine-deficiency syndrome, hypothyroidism, hyperthyroidism, thyroiditis)	E00–07
0402	Diabetes mellitus—Type 1 (IDDM)	E10
0403	Diabetes mellitus—Type 2 (NIDDM)	E11
0404	Diabetes mellitus—other specified/unspecified/unable to be specified	E13–14
0405	Malnutrition	E40–46
0406	Nutritional deficiencies	E50–64
0498	Other endocrine, nutritional & metabolic disorders n.o.s or n.e.c (includes high cholesterol, hypoparathyroidism, obesity)	E15–35, E65, E66–74.4, E74.9–77, E78.0, E79–83.2, E83.4–90
<b>Mental &amp; behavioural disorders</b>		
0500	Dementia in Alzheimer's disease <sup>1</sup> (includes early onset <65 yrs, late onset >65 yrs, atypical or mixed type, unspecified)	F00.0–00.2, F00.9, G30
0510	Vascular dementia (includes acute onset, multi-infarct, subcortical, mixed cortical & subcortical, other vascular, unspecified)	F01.0–01.3, F01.8–01.9
0520	Dementia in other diseases (includes Pick's, Creutzfeldt-Jakob, Huntington's, Parkinson's, HIV, Lewy Body, other)	F02.0–02.4, F02.8
0530	Other dementia n.o.s or n.e.c (includes alcoholic, presenile & senile, unspecified)	F10.7, F03
0540	Delirium (includes not superimposed, superimposed, other, unspecified)	F05.0–05.1, F05.8–05.9
0550	Psychoses & depression/Mood affective disorders (includes schizophrenia, paranoid states)	F04, F06, F20–39

n.e.c.—not elsewhere classified, n.o.s.—not otherwise specified

Code	Health condition	Equivalent ICD-10-AM code
0560	Other neurotic, stress-related & somatoform disorders n.o.s or n.e.c (includes phobic & anxiety disorders, obsessive-compulsive disorder, nervous tension, stress)	F40–48
0570	Intellectual & developmental disorders	F70–84, F88–89
0580	Other mental & behavioural disorders (includes adult personality & behavioural disorders, speech impediment)	F60–69, F98.5
0581	Mental and behavioural disorders due to alcohol & other psychoactive substance use (includes alcoholism, Korsakov's psychosis (alcoholic))	F10.0–F10.6, F10.8–19
0598	Other mental & behavioural disorders n.o.s or n.e.c	F07, F50–52, F54–55, F59, F99
<b>Diseases of the nervous system</b>		
0602	Huntington's disease	G10
0603	Motor neurone disease	G12.2
0604	Parkinson's disease (includes Parkinson's disease, secondary Parkinsomism)	G20–21
0605	Transient cerebral ischaemic attacks (T.I.A.'s) <sup>2</sup>	G45–46
0607	Multiple sclerosis	G35
0611	Paralysis—non-traumatic (includes hemiplegia, paraplegia, quadriplegia & other paralytic syndromes; excludes spinal cord injury)	G81–83
0698	Other diseases of the nervous system n.o.s or n.e.c (includes epilepsy, muscular dystrophy, migraines, sleep disorders, Bell's palsy, myopathies, meningitis, brain disease/disorders)	G00–09, G11, G12.0–12.1, G12.8–13, G22–26, G31–34, G36–37, G40–41, G43–44, G47–70, G71–73, G80, G90–99
<b>Diseases of the eye &amp; adnexa</b>		
0701	Cataracts	H25–H26
0702	Glaucoma	H40–42
0703	Blindness (both eyes, one eye, one eye & low vision in other eye)	H54.0–54.1, H54.4
0704	Poor vision (low vision both eyes, one eye, unspecified visual loss)	H54.2–54.3, H54.5–54.7
0798	Other diseases of the eye & adnexa n.o.s or n.e.c	H00–15, H19–22, H27–32, H36, H43–51, H55–59
<b>Disease of the ear &amp; mastoid process</b>		
0801	Ménière's disease (includes Ménière's syndrome, vertigo)	H81.0
0802	Deafness/hearing loss	H83.3, H90, H91
0898	Other diseases of the ear & mastoid process n.o.s or n.e.c (includes disease of external ear, otitis media, mastoiditis, myringitis, tinnitus)	H60–62, H65–75, H80, H81.1–83.2, H83.8–83.9, H92–95

<sup>1</sup> In any analysis of 'Diseases of the nervous system' code 0500 'Dementia in Alzheimer's disease' should be grouped with 0600. n.e.c—not elsewhere classified, n.o.s—not otherwise specified



Code	Health condition	Equivalent ICD-10-AM code
<b>Diseases of the circulatory system</b>		
0900	Heart disease (includes angina, myocardial infarction, acute & chronic ischaemic heart disease, congestive heart failure, pulmonary embolism, acute pericarditis, acute & subacute endocarditis, cardiomyopathy, cardiac arrest, heart failure—unspecified)	I00–02, I05–09, I20–22, I23–52, I50.0
0910	Cerebrovascular disease <sup>2,3</sup> (includes subarachnoid, intracerebral & other intracranial haemorrhage, cerebral infarction, stroke (CVA) unspecified, embolism)	I60–67, I69
0920	Other diseases of the circulatory system (includes abdominal aortic aneurysm, other arterial or aortic aneurysms)	I71–72
0921	Hypertension (high blood pressure)	I10–15
0922	Hypotension (low blood pressure)	I95
0998	Other diseases of the circulatory system n.o.s or n.e.c (includes atherosclerosis, peripheral vascular disease, other disorders of arteries & arterioles, diseases of capillaries, varicose veins, haemorrhoids)	I68, I70, I73–89, I97–99
<b>Diseases of the respiratory system</b>		
1001	Acute upper respiratory infections (includes common cold, acute sinusitis, acute pharyngitis, acute tonsillitis, acute laryngitis, upper respiratory infections of multiple & unspecified sites)	J00–06
1002	Influenza & pneumonia	J10–18
1003	Acute lower respiratory infections (includes acute bronchitis, bronchiolitis & unspecified acute lower respiratory infections)	J20–22
1004	Other diseases of upper respiratory tract (includes respiratory allergies (excluding allergic asthma), chronic rhinitis & sinusitis, chronic diseases of tonsils & adenoids)	J30–39
1005	Chronic lower respiratory diseases (includes emphysema, chronic obstructive airways disease (COAD), asthma)	J40–70
1098	Other diseases of the respiratory system n.o.s or n.e.c	J80–99
<b>Diseases of the digestive system</b>		
1101	Diseases of the intestine (includes stomach/duodenal ulcer, abdominal hernia (except congenital), enteritis, colitis, vascular disorders of intestine, diverticulitis, irritable bowel syndrome, diarrhoea, constipation)	K25–28, K40–46, K50–52, K55–63
1103	Diseases of the liver (includes alcoholic liver disease, toxic liver disease, fibrosis and cirrhosis of liver)	K70–77
1198	Other diseases of the digestive system n.o.s or n.e.c (includes other diseases of the gastrointestinal tract & peritoneum, gastritis, other diseases of the gallbladder)	K00–23, K29–38, K65–67, K80–93,

2 In any analysis of 'Cerebrovascular disease' code 0605 Transient cerebral ischaemic attacks (T.I.A.'s) should be grouped with 0910.  
3 Transient cerebral ischaemic attacks (T.I.A.'s) should be coded to 0605.  
n.e.c—not elsewhere classified, n.o.s—not otherwise specified

Code	Health condition	Equivalent ICD-10-AM code
<b>1200</b>	<b>Diseases of the skin &amp; subcutaneous tissue</b>	
1201	Skin & subcutaneous tissue infections (includes impetigo, boil, cellulitis)	L00–08
1202	Skin allergies (Dermatitis & Eczema)	L20–30
1298	Other diseases of the skin & subcutaneous tissue n.o.s or n.e.c (includes bedsore, urticaria, erythema, radiation-related disorders, ingrowing nail, corn, callous, chronic ulcer n.e.c, ulcer of lower limb n.e.c)	L10–14, L40–75, L80–90.4, L90.6–99
	<b>Diseases of the musculoskeletal system &amp; connective tissue</b>	
1301	Rheumatoid arthritis	M05–06
1302	Other arthritis & related disorders (includes gout, arthrosis, osteoarthritis)	M00–04, M07–19
1304	Back problems—dorsopathies (includes scoliosis)	M40–54
1306	Osteoporosis	M80–81
1398	Other disorders of the musculoskeletal system & connective tissue n.o.s or n.e.c (includes rheumatism, osteomyelitis, bunion)	M20–36, M60–63, M66–68, M70–79, M82–94, M96–99,
	<b>Diseases of the genitourinary system</b>	
1401	Kidney & urinary system (bladder) disorders (includes nephritis renal failure, cystitis; excludes urinary tract infection & incontinence)	N00–37, N39.1–39.2, N39.8
1402	Urinary tract infection	N39.0
1403	Stress/urinary incontinence (includes stress, overflow, reflex & urge incontinence)	N39.3–39.4
1498	Other diseases of the genitourinary system n.o.s or n.e.c (includes prostate, breast and menopause disorders)	N40–51, N60–64, N70–99
	<b>Congenital malformations, deformations &amp; chromosomal abnormalities</b>	
1598	Other congenital malformations, deformities & chromosomal abnormalities n.o.s or n.e.c	Q00–99
	<b>Injury, poisoning &amp; certain other consequences of external causes</b>	
1601	Injuries to the head (includes injuries to ear, eye, face, jaw, acquired brain damage)	S00–09
1602	Injuries to arm/hand/shoulder (includes, dislocations, sprains & strains)	S40–41, S43–47, S49–51, S53–57, S59–61, S63–67, S69
1603	Injuries to leg/knee/foot/ankle/hip (includes dislocations, sprains & strains)	S70–71, S73–77, S79–81, S83–87, S89–91, S93–97
1604	Amputation of the finger/thumb/hand/arm/shoulder—traumatic	S48, S58, S68, T05.0–05.2
1605	Amputation of toe/ankle/foot/leg—traumatic	S78, S88, S98, T05.3–05.5
1606	Fracture of neck (includes cervical spine & vertebra)	S12
1607	Fracture of rib(s), sternum & thoracic spine (includes thoracic spine & vertebra)	S22
1608	Fracture of lumbar spine & pelvis (includes lumbar vertebra, sacrum, coccyx, sacrum)	S32
1609	Fracture of shoulder, upper arm & forearm (includes clavicle, scapula, humerus, radius, ulna)	S42, S52
1610	Fracture at wrist & hand level	S62
1611	Fracture of femur (includes hip (neck of femur))	S72

n.e.c.—not elsewhere classified, n.o.s.—not otherwise specified

Code	Health condition	Equivalent ICD-10-AM code
1612	Fracture of lower leg & foot	S82, S92
1613	Poisoning by drugs, medicaments & biological substances (includes systemic antibiotics, hormones, narcotics, hallucinogens, analgesics, antipyretics, antirheumatics, antiepileptic, antiparkinsonism drugs, includes overdose of the above substances)	T36-50
1698	Other injury, poisoning & consequences of external causes n.o.s or n.e.c (including all other injuries to the body, spinal cord injury, multiple fractures, unspecified dislocations, sprains, sprains, fractures, burns, frostbite, toxic effects of substances of nonmedical source, complications of surgical & medical care)	S10-11, S13-21, S23-31, S33-39, T00-04, T05.6-09.9, T10-35, T51-98
	<b>Symptoms &amp; signs n.o.s or n.e.c</b>	
1702	Cough	R05
1703	Breathing difficulties/shortness of breath	R06
1704	Pain	R07, R10, R30, R52
1706	Dysphagia (difficulty in swallowing)	R13
1707	Bowel/faecal incontinence	R15
1708	Unspecified urinary incontinence	R32
1709	Retention of urine	R33
1711	Disturbances of skin sensation (includes pins & needles, tingling skin)	R20
1713	Abnormal involuntary movements (includes abnormal head movements, tremor unspecified, cramp & spasm, twitching n.o.s)	R25
1714	Abnormalities of gait & mobility (includes ataxic & spastic gait, difficulty in walking n.e.c)	R26
1715	Falls (frequent with unknown aetiology)	R29.81
1716	Disorientation (confusion)	R41.0
1717	Amnesia (memory disturbance, lack or loss)	R41.1-41.3
1718	Dizziness & giddiness (light-headedness, vertigo n.o.s)	R42
1719	Restlessness & agitation	R45.1
1720	Unhappiness (worries n.o.s)	R45.2
1721	Irritability & anger	R45.4
1722	Hostility	R45.5
1723	Physical violence	R45.6
1724	Slowness & poor responsiveness	R46.4
1725	Speech & voice disturbances	R47
1726	Headache	R51
1727	Malaise & fatigue (includes general physical deterioration, lethargy and tiredness)	R53
1728	Blackouts, fainting, convulsions	R55-56
1729	Oedema n.e.c (includes fluid retention n.o.s)	R60
1798	Other symptoms & signs n.o.s or n.e.c (includes gangrene, nausea & vomiting, rash & other nonspecific skin eruption, illness n.o.s, loss of appetite, abnormal weight loss & gain))	R00-03, R04, R09, R11-12, R14, R16-19, R21-23, R27, R29.0-29.8, R29.89, R31-32, R34-36, R39-40, R43-44, R45.3, R45.7-45.8, R46.0- 46.3, R46.5-46.8, R48-50, R54, R57-59, R61-64, R68-69

Code	Health condition	Equivalent ICD-10-AM code
1899	Has other health condition n.o.s or n.e.c	
	<b>Factors influencing health status</b>	
1901	Problems related to social environment (includes loneliness, social isolation)	Z60
1902	Problems related to primary support group/family circumstances (includes relationship problems, grief & loss, carer issues)	Z63
1903	Problems related to lifestyle (includes inappropriate diet & eating habits, lack of physical exercise)	Z72
1904	Problems related to life-management difficulty (includes stress n.e.c, limitation of activities due to disability)	Z73

n.e.c—not elsewhere classified, n.o.s—not otherwise specified

# Appendix E

**Code list for Main language other than English spoken at home using the Australian Bureau of Statistics' (ABS) adaptation of the Australian Standard Classification of Languages (ASCL), ABS Catalogue No. 1267.0, 1997, to accommodate a 2-digit code.**

**(01–10) Northern European languages**

- 01 Danish
- 02 English
- 03 German
- 04 Irish
- 05 Netherlandic
- 06 Norwegian
- 07 Swedish
- 08 Welsh
- 09 Yiddish
- 10 Northern European languages, nec.

**(11–17) Southern European languages**

- 11 French
- 12 Greek
- 13 Italian
- 14 Maltese
- 15 Portuguese
- 16 Spanish
- 17 Southern European languages, nec.

**(18–37) Eastern European languages**

- 18 Albanian
- 19 Armenian
- 20 Bosnian
- 21 Bulgarian
- 22 Croatian
- 23 Czech
- 24 Estonian
- 25 Finnish
- 26 Hungarian
- 27 Latvian
- 28 Lithuanian
- 29 Macedonian
- 30 Polish
- 31 Romanian
- 32 Russian
- 33 Serbian
- 34 Slovak
- 35 Slovene
- 36 Ukrainian
- 37 Eastern European languages, nec.

**(38–43) Southwest Asian and North African languages**

- 38 Arabic (including Lebanese)
- 39 Assyrian (including Aramaic)
- 40 Hebrew
- 41 Persian
- 42 Turkish
- 43 Southwest Asian and North African languages, nec.

**(44–53) Southern Asian languages**

- 44 Bengali
- 45 Gujarati
- 46 Hindi
- 47 Kannada
- 48 Punjabi
- 49 Sinhalese
- 50 Tamil
- 51 Telugu
- 52 Urdu
- 53 Southern Asian languages, nec.

**(54–66) Southeast Asian languages**

- 54 Bisaya
- 55 Bumese
- 56 Cebuano
- 57 Hmong
- 58 Indonesian
- 59 Khmer
- 60 Lao
- 61 Malay
- 62 Tagalog (Filipino)
- 63 Thai
- 64 Timorese
- 65 Vietnamese
- 66 Southeast Asian languages, nec.

**(67–74) Eastern Asian languages**

- 67 Cantonese
- 68 Hakka
- 69 Hokkien
- 70 Japanese
- 71 Korean
- 72 Mandarin
- 73 Teochew
- 74 Eastern Asian languages, nec.

**(75–86) Australian Indigenous languages**

- 75 Alyawarr (Alyawarra)
- 76 Arrernte (Aranda)
- 77 Burarra
- 78 Kriol
- 79 Kuurinji (Gurindji)
- 80 Pintupi
- 81 Pitjantjatjara
- 82 Tiwi
- 83 Walmajarri (Walmadjari)
- 84 Warlpiri
- 85 Wik-Mungkan
- 86 Australian Indigenous languages, nec.

**(87–95) Other languages**

- 87 Afrikaans
- 88 Fijian
- 89 Gilbertese
- 90 Mauritian Creole
- 91 Samoan
- 92 Somali
- 93 Swahili
- 94 Tongan
- 95 Other languages, nec.
- 96 Not stated/ Inadequately described
- 97 Non-verbal
- 99 Australian Indigenous languages, not further defined
- nec.: not elsewhere classified