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## Geographic location of establishment

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**Admin. status:** CURRENT 01/07/1997

### Identifying and definitional attributes

**Knowledgebase ID:** 000260 **Version number:** 2

**Data element type:** DATA ELEMENT

**Definition:** Geographical location of the establishment. For establishments with more than one geographical location, the location is defined as that of the main administrative centre.

**Context:** Health services: To enable the analysis of service provision in relation to demographic and other characteristics of the population of a geographic area.

### Relational and representational attributes

**Data type:** Numeric **Representational form:** CODE

**Field size:** **Min.** 5 **Max.** 5 **Representational layout:** NNNNN

**Data domain:** The geographical location is reported using a 5-digit numerical code to indicate the Statistical Local Area (SLA) within the reporting State or Territory, as defined in the Australian Standard Geographical Classification (ASGC) (Australian Bureau of Statistics, catalogue number 1216.0).

**Guide for use:** The ASGC is updated on an annual basis with a date of effect of 1 July each year. Therefore, the edition effective for the data collection reference year should be used. The Australian Bureau of Statistics' National Localities Index (NLI) can be used to assign each locality or address in Australia to an SLA. The NLI is a comprehensive list of localities in Australia with their full code (including SLA) from the main structure of the ASGC. For the majority of localities, the locality name (suburb or town, for example) is sufficient to assign an SLA. However, some localities have the same name. For most of these, limited additional information such as the postcode or State can be used with the locality name to assign the SLA. In addition, other localities cross one or more SLA boundaries and are referred to as split localities. For these, the more detailed information of the number and street of the establishment is used with the Streets Sub-index of the NLI to assign the SLA.

### Verification rules:

**Related data:** Relates to the data element Establishment type, version 1  
Supersedes previous data element Geographic location, version 1

## **Administrative attributes**

**Source document:** Australian Standard Geographical Classification (Australian Bureau of Statistics Catalogue No. 1216.0).

**Source organisation:** National Health Data Committee

### **National minimum data sets:**

Public hospital establishments from 1/07/2000 to

Community mental health care from 1/07/1998 to

Alcohol and other drug treatment services from 1/07/2000 to

**Comments:** The geographical location does not provide direct information on the geographical catchment area or the catchment population of the establishment.

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## Indigenous status

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**Admin status:** CURRENT 1/07/2000

### Identifying and definitional attributes

**Knowledgebase ID:** 000001 **Version number:** 3

**Data element type:** DATA ELEMENT

**Definition:** 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.

**Context:** Given the gross inequalities in health status between Indigenous and non-Indigenous peoples in Australia, the size of the Aboriginal and Torres Strait Islander populations and their historical and political context, there is a strong case for ensuring that information on Indigenous status is collected for planning and service delivery purposes and for monitoring Aboriginal and Torres Strait Islander health.

### 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 Aboriginal and Torres Strait Islander origin
- 4 Neither Aboriginal nor Torres Strait Islander origin
- 9 Not stated

**Guide for use:** There are three components to the definition:  
–Descent;  
–self-identification; and  
–community acceptance.  
The classification for ‘Indigenous status’ has a hierarchical structure comprising two levels. There are four categories at the detailed level of the classification which are grouped into two categories at the broad level. There is one supplementary category for ‘not stated’ responses. The classification is as follows:

- Indigenous
  - Aboriginal but not Torres Strait Islander origin
  - Torres Strait Islander but not Aboriginal origin
  - Both Aboriginal and Torres Strait Islander origin
- Non-indigenous
  - Neither Aboriginal nor Torres Strait Islander origin

- Not stated

This category is not to be available as a valid answer to the questions but is intended for use:

- primarily when importing data from other data collections that do not contain mappable data;
- where an answer was refused; or
- where the question was not able to be asked prior to discharge because the patient was unable to communicate (e.g. patient unconscious) or a person who knows the patient was not available.

Only in the last two situations may the tick boxes on the questionnaire be left blank.

**Verification rules:**

**Collection methods:**

The standard question for Indigenous status is as follows:  
[Are you] [Is the person] [Is (name)] of Aboriginal or Torres Strait Islander origin?

(For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes.)

No.....

Yes, Aboriginal.....

Yes, Torres Strait Islander.....

This question is recommended for self-enumerated or interview-based collections. It can also be used in circumstances where a close relative, friend or another member of the household is answering on behalf of the subject.

When someone is not present, the person answering for them should be in a position to do so, i.e. this person must know the person about whom the question is being asked and feel confident to provide accurate information about them. However, it is strongly recommended that this question be asked directly wherever possible.

In circumstances where it is impossible to ask the person directly, such as in the case of death, the question should be asked of a close relative or friend, and only if a relative or friend is not available should the undertaker or other such person answer.

This question should always be asked even if the person does not 'look' Aboriginal or Torres Strait Islander.

The Indigenous status question allows for more than one response. The procedure for coding multiple responses is as follows:

If the respondent marks 'No' and either 'Aboriginal' or 'Torres Strait Islander', then the response should be coded to either Aboriginal or Torres Strait Islander as indicated (i.e. disregard the 'No' response).

If the respondent marks both the 'Aboriginal' and 'Torres Strait Islander' boxes, then their response should be coded to 'Both Aboriginal and Torres Strait Islander origin'.

If the respondent marks all three boxes ('No', 'Aboriginal' and 'Torres Strait Islander'), then the response should be coded to 'Both Aboriginal and Torres Strait Islander Origin' (i.e. disregard the 'No' response).

***Related data:***

**Administrative attributes**

***Source document:*** Standards for Statistics on Cultural and Language Diversity, ABS Catalogue Number. 1289.0, November 1999.

***Source organisation:*** Australian Bureau of Statistics

***National minimum data sets:***

Admitted patient care	from 1/07/1989 to
Institutional mental health care	from 1/07/1997 to
Perinatal	from 1/07/1997 to
Community mental health care	from 1/07/2000 to
Palliative care	from 1/07/2000 to
Alcohol and other drug treatment services	from 1/07/2000 to

***Comments:***

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## Injecting drug use

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**Admin. status:** CURRENT 1/07/2000

### Identifying and definitional attributes

**Knowledgebase ID:** 000432 **Version number:** 1

**Data element type:** DATA ELEMENT

**Definition:** The client's use of injection as a method of administering drugs. Includes intravenous, intramuscular and subcutaneous forms of injection.

**Context:** Alcohol and other drug treatment services. The data element is important for identifying patterns of drug use and harms associated with injecting drug use.

### Relational and representational attributes

**Data type:** Numeric **Representational form:** CODE

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

**Data domain:**

- 1 Current injecting drug use (last injected within the previous three months)
- 2 Injecting drug use more than three months ago but less than twelve months ago
- 3 Injecting drug use more than twelve months ago (and not in last twelve months)
- 4 Never injected
- 9 Not stated/inadequately described

#### **Guide for use:**

#### **Verification rules:**

**Collection methods:** To be collected on commencement of treatment with a service.

**Related data:** Relates to the data element Principal drug of concern, version 1  
Relates to the data element Method of use for principal drug of concern, version 1  
Relates to the data element Other drugs of concern, version 1

### Administrative attributes

#### **Source document:**

**Source organisation:** Intergovernmental Committee on Drugs National Minimum Data Set Working Group

#### **National minimum data sets:**

Alcohol and other drug treatment services from 1/07/2000 to

**Comments:** This data element is used in conjunction with Commencement of treatment for reporting the NMDS for alcohol and other drug

treatment services, and has been developed for use in clinical settings.

A code that refers to a three-month period to define 'current' injecting drug use is required as a clinically relevant period of time.

The data element may also be used in population surveys that require a longer timeframe, for example to generate 12-month prevalence rates, by aggregating codes 1 and 2. However, caution must be exercised when comparing clinical samples with population samples.

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## Method of use for principal drug of concern

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**Admin. status:** CURRENT 1/07/2000

### Identifying and definitional attributes

**Knowledgebase ID:** 000433 **Version number:** 1

**Data element type:** DATA ELEMENT

**Definition:** The client's usual method of administering the 'Principal drug of concern' as stated by the client.

**Context:** Alcohol and other drug treatment services. Identification of drug use methods is important for minimising specific harms associated with drug use, and is consequently of value for informing treatment approaches.

### Relational and representational attributes

**Data type:** Numeric **Representational form:** CODE

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

**Data domain:**

- 1 Ingests
- 2 Smokes
- 3 Injects
- 4 Sniffs (powder)
- 5 Inhales (vapour)
- 6 Other
- 9 Not stated/inadequately described

**Guide for use:** Code 1 Refers to eating or drinking as the method of administering the 'Principal drug of concern'.

#### **Verification rules:**

**Collection methods:** Collect only for Principal drug of concern.  
To be collected on commencement of treatment with a service.

**Related data:** Relates to the data element Principal drug of concern, version 1, relates to the data element Injecting drug use, version 1

### Administrative attributes

#### **Source document:**

**Source organisation:** Intergovernmental Committee on Drugs National Minimum Data Set Working Group

#### **National minimum data sets:**

Alcohol and other drug treatment services from 1/07/2000 to

#### **Comments:**



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## Other drugs of concern

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**Admin. status:** CURRENT 1/07/2000

### Identifying and definitional attributes

**Knowledgebase ID:** 000442 **Version number:** 1

**Data element type:** DATA ELEMENT

**Definition:** Any drugs apart from the 'Principal drug of concern' which the client perceives as being a health concern.

**Context:** Alcohol and other drug treatment services. This item complements 'Principal drug of concern'. The existence of other drugs of concern may have a role in determining the types of treatment required and may also influence treatment outcomes.

### Relational and representational attributes

**Data type:** Numeric **Representational form:** CODE

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

**Data domain:** Australian standard classification of illicit drugs and other substances of concern

**Guide for use:** This is a multiple response data item to allow for the coding of polydrug use. The data element can be used in conjunction with Principal drug of concern.

**Verification rules:** There should be no duplication with 'Principal drug of concern'.

**Collection methods:** More than one drug may be selected.  
To be collected on commencement of treatment with a service.

**Related data:** Relates to the data element Principal drug of concern, version 1.

### Administrative attributes

#### **Source document:**

**Source organisation:** Intergovernmental Committee on Drugs National Minimum Data Set Working Group

#### **National minimum data sets:**

Alcohol and other drug treatment services from 1/07/2000 to

**Comments:** The Australian standard classification of illicit drugs and other substances of concern is being developed by the Australian Bureau of Statistics (ABS) and will be available from the end of July 2000. The ABS has also undertaken to develop a short form menu list of this classification for use by service providers that will be issued separately when finalised.

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## Person identifier

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**Admin. status:** CURRENT 1/07/1989

### Identifying and definitional attributes

**Knowledgebase ID:** 000127 **Version number:** 1

**Data element type:** DATA ELEMENT

**Definition:** Person identifier unique within establishment or agency.

**Context:** This item could be used for editing at the establishment or collection authority level and, potentially, for episode linkage. There is no intention that this item would be available beyond collection authority level.

### Relational and representational attributes

**Data type:** Alphanumeric **Representational form:** CODE

**Field size:** **Min.** **Max.** **Representation layout:**

**Data domain:**

**Guide for use:** Individual establishments or collection authorities may use their own alphabetic, numeric or alphanumeric coding systems.

**Verification rules:**

**Collection methods:**

**Related data:**

### Administrative attributes

**Source document:**

**Source organisation:** National minimum data set working parties

#### **National minimum data sets:**

Admitted patient care from 1/07/2000 to

Admitted patient mental health care from 1/07/2000 to

Perinatal from 1/07/1997 to

Community mental health care from 1/07/2000 to

Admitted patient palliative care from 1/07/2000 to

Alcohol and other drug treatment services from 1/07/2000 to

**Comments:** For admitted patient care statistics, person identifier is used in conjunction with other data elements recording individual episodes of care or events. To date, there has been limited development of patient-based data i.e. linking data within hospital morbidity collections about all episodes of care for individuals.

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## Preferred language

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**Admin. status:** CURRENT 1/07/1998

### Identifying and definitional attributes

**Knowledgebase ID:** 000132 **Version number:** 2

**Data element type:** DATA ELEMENT

**Definition:** The language (including sign language) most preferred by the person for communication. This may be a language other than English even where the person can speak fluent English.

**Context:** Health and welfare services: An important indicator of ethnicity, especially for persons born in non-English-speaking countries. Its collection will assist in the planning and provision of multilingual services and facilitate program and service delivery for migrants and other non-English speakers.

### Relational and representational attributes

**Data type:** Numeric **Representational form:** CODE

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

**Data domain:**

- 00 Afrikaans
- 01 Albanian
- 02 Alyawarr (Alyawarra)
- 03 Arabic (including Lebanese)
- 04 Armenian
- 05 Arrernte (Aranda)
- 06 Assyrian (including Aramaic)
- 07 Australian Indigenous languages, not elsewhere classified
- 08 Bengali
- 09 Bisaya
- 10 Bosnian
- 11 Bulgarian
- 12 Burarra
- 13 Burmese
- 14 Cantonese
- 15 Cebuano
- 16 Croatian
- 17 Czech
- 18 Danish
- 19 English
- 20 Estonian
- 21 Fijian
- 22 Finnish
- 23 French
- 24 German
- 25 Gilbertese
- 26 Greek
- 27 Gujarati

28 Hakka  
29 Hebrew  
30 Hindi  
31 Hmong  
32 Hokkien  
33 Hungarian  
34 Indonesian  
35 Irish  
36 Italian  
37 Japanese  
38 Kannada  
39 Khmer  
40 Korean  
41 Kriol  
42 Kuurinji (Gurindji)  
43 Lao  
44 Latvian  
45 Lithuanian  
46 Macedonian  
47 Malay  
48 Maltese  
49 Mandarin  
50 Mauritian Creole  
51 Netherlandic  
52 Norwegian  
53 Persian  
54 Pintupi  
55 Pitjantjatjara  
56 Polish  
57 Portuguese  
58 Punjabi  
59 Romanian  
60 Russian  
61 Samoan  
62 Serbian  
63 Sinhalese  
64 Slovak  
65 Slovene  
66 Somali  
67 Spanish  
68 Swahili  
69 Swedish  
70 Tagalog (Filipino)  
71 Tamil  
72 Telugu  
73 Teochew  
74 Thai  
75 Timorese  
76 Tiwi  
77 Tongan  
78 Turkish  
79 Ukranian

- 80 Urdu
- 81 Vietnamese
- 82 Walmajarri (Walmadjari)
- 83 Warlpiri
- 84 Welsh
- 85 Wik-Mungkan
- 86 Yiddish
- 95 Other languages, nfd
- 96 Inadequately described
- 97 Non-verbal, so described (including sign languages e.g. Auslan, Makaton)
- 98 Not stated

**Guide for use:** The classification used in this data element is a modified version of the 2-digit level Australian Standard Classification of Languages (ABS) classification. All non-verbal means of communication, including sign languages, are to be coded to 97. Code 96 should be used where some information, but insufficient, is provided. Code 98 is to be used when no information is provided. All Australian Indigenous languages not shown separately on the code list are to be coded to 07.

**Verification rules:**

**Collection methods:** This information may be collected in a variety of ways. It may be collected by using a predetermined shortlist of languages that are most likely to be encountered from the above code list accompanied by an open text field for 'Other language' or by using an open-ended question that allows for recording of the language nominated by the person. Regardless of the method used for data collection the language nominated should be coded using the above ABS codes.

**Related data:** Supersedes previous data element Preferred language, version 1

**Administrative attributes**

**Source document:** Australian Standard Classification of Languages (ASCL), Australian Bureau of Statistics, Catalogue number 1267.0

**Source organisation:** National Health Data Committee (NHDC), Australian Bureau of Statistics

**National minimum data sets:** Alcohol and other drug treatment services from 1/07/00

**Comments:** The ABS has developed a detailed 4-digit language classification of 193 language units which was used in the 1996 Census. Although it

is preferable to use the classification at a 4-digit level, the requirements of administrative collections have been recognised and the ABS has developed a classification of 86 languages at a two-digit level from those most frequently spoken in Australia. Mapping of this 2-digit running code system to the 4-digit Australian Standard Classification of Language is available from ABS. The classification used in this data element is a modified version of the 2-digit level ABS classification.

The NHDC considered that the grouping of languages by geographic region was not useful in administrative settings. Thus the data domain includes an alphabetical listing of the 86 languages from the ABS 2-digit level classification with only one code for 'Other languages, nfd'. By removing the geographic groupings from the classification information about the broad geographic region of languages that are not specifically coded is lost. However, the NHDC considered that the benefits to data collectors gained from simplifying the code listing outweighed this disadvantage.

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## Principal drug of concern

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**Admin. status:** CURRENT 1/07/2000

### Identifying and definitional attributes

**Knowledgebase ID:** 000443 **Version number:** 1

**Data element type:** DATA ELEMENT

**Definition:** The drug that has led a person to seek treatment from the service, as stated by the client.

**Context:** Alcohol and other drug treatment services. Required as an indicator of the client's treatment needs.

### Relational and representational attributes

**Data type:** Numeric **Representational form:** CODE

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

**Data domain:** Australian standard classification of illicit drugs and other substances of concern.

**Guide for use:** A principal drug of concern may be indicated on a client's referral, however the criterion for nominating the principal drug of concern is the identification by the client of the drug.

#### **Verification rules:**

**Collection methods:** To be collected on commencement of treatment with a service.

**Related data:** Relates to the data element Method of use for principal drug of concern, version 1

Relates to the data element Other drugs of concern, version 1

### Administrative attributes

#### **Source document:**

**Source organisation:** Intergovernmental Committee on Drugs National Minimum Data Set-Working Group

#### **National minimum data sets:**

Alcohol and other drug treatment services from 1/07/2000 to

**Comments:** The Australian standard classification of illicit drugs and other substances of concern is being developed by the Australian Bureau of Statistics (ABS) and will be available from the end of July 2000. The ABS has also undertaken to develop a short form menu list of this classification for use by service providers that will be issued separately when finalised.

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## Region code

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**Admin. status:** CURRENT 01/07/1997

### Identifying and definitional attributes

**Knowledgebase ID:** 000378 **Version number:** 2

**Data element type:** DATA ELEMENT

**Definition:** An identifier for location of health services in an area.

**Context:** Health services

### Relational and representational attributes

**Data type:** Alphanumeric **Representational form:** CODE

**Field size:** **Min.** 1 **Max.** 2 **Representational layout:** A

**Data domain:**

**Guide for use:** Domain values are specified by individual States/Territories

**Verification rules:**

**Related data:** Is a composite part of Establishment identifier, version 2

### Administrative attributes

**Source document:**

**Source organisation:**

**National minimum data sets:**

Admitted patient care from 1/07/2000 to

Public hospital establishments from 1/07/2000 to

Admitted patient mental health care from 1/07/2000 to

Perinatal from 1/07/1997 to

Alcohol and other drug treatment services from 1/07/2000 to

**Comments:**



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## Sex

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**Admin. status:** CURRENT 1/07/1998

### Identifying and Definitional Attributes

**Knowledgebase ID:** 000149 **Version number:** 2

**Data element type:** DATA ELEMENT

**Definition:** The sex of the person.

**Context:** Required for analyses of service utilisation, needs for services and epidemiological studies.

### Relational and representational attributes

**Data type:** Numeric **Representational form:** CODE

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

**Data domain:**

- 1 Male
- 2 Female
- 3 Indeterminate
- 9 Not stated / inadequately described

**Guide for use:** An indeterminate sex category may be necessary for situations such as the classification of perinatal statistics when it is not possible for the sex to be determined.

**Verification rules:** For the provision of State and Territory hospital data to Commonwealth agencies this field must be consistent with diagnosis and procedure codes, for records grouped in Major Diagnostic Categories 12, 13 and 14, for valid grouping, otherwise resulting in a fatal error for sex conflicts. For other Major Diagnostic Categories, sex conflicts result in a warning error.

**Collection methods:** It is suggested that the following format be used for data collection:  
What is your (the person's) sex?  
\_\_\_ Male  
\_\_\_ Female

The term 'sex' refers to the biological differences between males and females, while the term 'gender' refers to the socially expected/perceived dimensions of behaviour associated with males and females—masculinity and femininity. The ABS advises that the correct terminology for this data element is sex. Information collection for transsexuals and people with transgender issues should be treated in the same manner. To avoid problems with edits, transsexuals undergoing a sex change operation should have their sex at time of hospital admission recorded.

**Related data:** Is used in the derivation of Diagnosis-related group, version 1

Supersedes previous data element Sex, version 1

**Administrative attributes**

**Source document:** ABS Directory of concepts and standards for social, labour and demographic statistics, 1993

**Source organisation:** National Health Data Committee

**National minimum data sets:**

Admitted patient care from 1/07/2000 to

Admitted patient mental health care from 1/07/2000 to

Perinatal from 1/07/1997 to

Community mental health care from 1/07/2000 to

Admitted patient palliative care from 1/07/2000 to

Alcohol and other drug treatment services from 1/07/2000 to

**Comments:** This item has been altered to enable standardisation of the collection of information relating to sex (to include indeterminate), gender, people with transgender issues and transsexuals.

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## Source of referral to alcohol & other drug treatment service

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**Admin. status:** CURRENT 1/07/2000

### Identifying and definitional attributes

**Knowledgebase ID:** 000444 **Version number:** 1

**Data element type:** DATA ELEMENT

**Definition:** The source from which the person was transferred or referred care to the alcohol and other drug treatment service.

**Context:** Alcohol and other drug treatment services. Source of referral is important in assisting in the analyses of inter-sectoral patient/client flow and for health care planning.

### Relational and representational attributes

**Data type:** Numeric **Representational form:** CODE

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

**Data domain:**

1	Self
2	Family member/friend
3	General practitioner
4	Medical specialist
5	Psychiatric hospital
6	Other hospital
7	Residential community mental health care unit
8	Residential alcohol and other drug treatment/care unit
9	Other residential community care unit
10	Non-residential medical and/or allied health care agency
11	Non-residential community mental health care agency or outpatient clinic
12	Non-residential alcohol and other drug treatment agency or outpatient clinic
13	Other non-residential community health care agency or outpatient clinic
14	Other community service agency
15	Community-based corrections
16	Police diversion
17	Court diversion
18	Other
99	Not stated/inadequately described

**Guide for use:** Code 3 General practitioner includes vocationally registered general practitioners, vocationally registered general practitioner trainees and other primary-care medical practitioners in private practice.

Code 4 Includes specialists in private practice.

Code 6 Includes public and private hospitals, hospitals specialising in dental, ophthalmic aids and other specialised medical or surgical care, satellite units managed and staffed by a hospital, emergency departments of hospitals, and mothercraft hospitals. Excludes outpatient clinics (which should be coded to 11–13), non-residential community healthcare agencies, or outpatient clinics.

Code 7–9 Includes settings in which persons reside temporarily at an accommodation unit providing support, non-acute care and other services to people with particular personal, social or behavioural problems. Includes mental health care units for people with severe mental illness or severe psychosocial disability and drug and alcohol residential treatment units.

Code 10 Non-residential service centres that operate a range of medical and/or allied health services from a centre-based establishment, including blood donation centres, breast-screening clinics, dental clinics, general medical centres, HIV or AIDS clinics, sexual health clinics, day procedure centres or facilities, Aboriginal medical centres. Excludes any of the above operating from hospital outpatient clinics, which should be coded to 17 Other non-residential community health care agency or outpatient clinic.

Code 11–13 Non-residential centre-based establishments providing a range of community-based health services, including community health centres, family planning centres, maternal and child health centres, migrant women's health centres, multipurpose health centres.

Code 14 Includes Home and Community Care agencies, Aged Care Assessment Teams, agencies providing care or assistance to persons in their own homes, childcare centres/pre-schools or kindergartens, community centres, family support services, domestic violence and incest resource centres or services, Aboriginal co-operatives.

***Verification rules:***

***Collection methods:***

***Related data:***

**Administrative attributes**

***Source document:***

***Source organisation:***

***National minimum data sets:***

Alcohol and other drug treatment services from 1/07/2000 to

***Comments:***

A working group of the National Health Data Committee will be convened to develop the source of referral data element for use in all settings, for use by July 2001.

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## State identifier

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**Admin. status:** CURRENT 1/07/1997

### Identifying and definitional attributes

**Knowledgebase ID:** 000380 **Version number:** 2

**Data element type:** DATA ELEMENT

**Definition:** An identifier for State or Territory.

**Context:** Health Services

### Relational and representational attributes

**Data type:** Numeric **Representational form:** CODE

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

**Data domain:**

- 1 New South Wales
- 2 Victoria
- 3 Queensland
- 4 South Australia
- 5 Western Australia
- 6 Tasmania
- 7 Northern Territory
- 8 Australian Capital Territory
- 9 Other territories (Cocos (Keeling) Islands, Christmas Island and Jervis Bay Territory)

**Guide for use:**

**Verification rules:**

**Collection methods:**

**Related data:** Is composite part of Establishment identifier, version 2

### Administrative attributes

**Source document:** Domain values are derived from the Australian Standard Geographic Classification (Australian Bureau of Statistics, Catalogue Number 1216.0)

**Source organisation:** National Health Data Committee

***National minimum data sets:***

Admitted patient care	from 1/07/2000 to
Public hospital establishments	from 1/07/2000 to
Admitted patient mental health care	from 1/07/2000 to
Perinatal	from 1/07/1997 to
Alcohol and other drug treatment services	from 1/07/2000 to

***Comments:***