

Data and limitations

Introduction

The prime data source for this publication is the Nursing Home Payment System at the Department of Health and Family Services. This central computerised system is primarily a payment processing system with the major objective of making accurate and timely payment of nursing home benefits to nursing homes, in respect of their residents. At the time of its development, management information, other than that required for financial management, was a minor objective. In some cases this has led to the development of an environment where accurate non-financial information is difficult to obtain. The access to the nursing home data, however, has been improved by the development of a new computer system, the Aged and Community Care Strategic Information System (ACCSIS) at the Department.

The Nursing Home Payment System contains information gathered through a number of instruments. Among those instruments, the following three are directly relevant to this report.

- ‘Application for Nursing Home Admission’ (NH5), a form completed by persons applying for admission to a nursing home or someone (normally a carer) on behalf of the applicant;
- ‘Application for Resident Classification’ (NH4), a form completed by the nursing home to determine the residents overall level of nursing and personal care needs; and
- ‘Claim for Commonwealth Benefits — In Respect of Qualified Nursing Home Patients in Approved Nursing Homes’ (NH3), a form completed by the nursing home as part of the monthly funding cycle.

Resident information

All residents admitted to a non-government nursing home (including the private for profit and private not for profit nursing homes) must have a valid NH5. This form is valid for 90 days from the date of the approval decision. Aged Care Assessment Teams (ACATs) with delegation are authorised to approve NH5s.

The information entered into the Nursing Home Payment System from the NH5 is the major source for the following data items in the tables:

- Sex
- Date of birth
- Marital status
- Pension status
- Indigenous status
- Country of birth
- Preferred language
- Resident’s usual residence (prior to admission)
- Resident’s living arrangements (prior to admission)
- Whether in hospital at time of application.

Generally NH5 forms are not used by State Government controlled nursing homes (although some residents have them); in these cases a more limited set of data (the persons age and sex only) is derived from the NH3 form (refer below).

Resident Classification Instrument (RCI)

The Resident Classification Instrument (RCI) application form (NH4) is forwarded to State/Territory offices of the Commonwealth Department of Health and Family Services by nursing homes for each resident admitted. On the basis of the information provided, residents are assigned to one of five service-need categories for the purpose of funding. The information provided on the RCI is used in Section 5 of this report.

Claim for Commonwealth Benefit (NH3)

The Claim for Commonwealth Benefits (NH3) form is sent to approved nursing homes each calendar month as part of the payment cycle. It shows claim details for the previous month plus a 'forecast' schedule for the current month. The nursing home checks the information and records separation and absence (hospital and social leave) data for current residents and details of any admissions to the home which occurred during the month.

The NH3 is the source for the following data items in the tables:

- Date of admission
- Date of separation
- Separation mode
- Admission type

The NH3 is the only source of resident data for the majority of residents in State Government controlled nursing homes.

The location and characteristics of these nursing homes are also recorded on the Nursing Home Payment System.

Populations used in tables

It should be noted that tables in this publication have different coverage and, consequently, may not be directly comparable. The populations covered in the tables in this report are summarised below.

Section 2: Nursing home residents and nursing home characteristics

All tables in this section relate to the number of approved residents who were in nursing homes on 30 June. There were 72,309 residents (72,023 for permanent care and 286 for respite care) in 1993, 72,482 (72,029 for permanent care and 453 for respite care) in 1994 and 72,492 (71,976 for permanent care and 516 for respite care) in 1995.

Section 3: Nursing home admissions

Tables 3.1 to 3.3 relate to admissions for permanent and/or respite care over a financial year. In 1992–93, 38,744 admissions for permanent care and 4,227 for respite care were reported¹. The corresponding figures were 34,385 and 6,031 in 1993–94, and 34,833 and 7,931 in 1994–95.

Tables 3.4 to 3.7 refer to separations of permanent and/or respite residents over a financial year. In 1992–93, 37,736 separations of permanent residents and 4,206 of respite residents were reported². The corresponding figures were 33,790 and 5,874 in 1993–94, and 34,247 and 7,875 in 1994–95.

Section 4: Resident characteristics (data from NH5)

These tables are based on the same population as that used in Section 2. As only sex and date of birth are mandatory for the NH5 forms, there are considerable numbers of 'not reported' cases in some of these tables.

Section 5: Nursing home resident dependency (data from NH4)

Tables 5.1 to 5.3 in this section relate to the number of permanent nursing home residents as at 30 June of each year (68,286 in 1993, 68,518 in 1994 and 67,818 in 1995) who had been classified using the Resident Classification Instrument. Respite residents are not included in this section as the vast majority of them were given default category 3 on the dependency scale.

Table 5.4 relates to people who were admitted to a nursing home for permanent care during a financial year (33,416 in 1992–93³, 30,475 in 1993–94 and 30,552 in 1994–95). Multiple admissions are excluded from this table.

Tables 5.5 to 5.6 represent those permanent residents who separated from the nursing homes during a financial year (34,695 in 1992–93⁴, 32,281 in 1993–94 and 33,040 in 1994–95). Multiple separations are also excluded from these tables.

Data limitations

It should be noted that the accuracy of some specific data items may be limited. Such cases include:

- Compensation status and Domiciliary Nursing Care Benefit – data on these items are not available to this report.
- Death indicator – In some cases, nursing homes may not be equipped for some terminally ill residents. Accordingly, some residents were transferred to acute-care institutions prior to death, hence there is an under enumeration of discharges due to death.
- Length of stay – The length of stay of a resident is based upon the time between the date of admission and the date of separation in relation to completed stays, and between the date of admission and 30 June of the relevant year for current residents' uncompleted stays. When a person is transferred from one nursing home to another, the date of admission to the first nursing home is the date on which the length of stay is calculated.

¹ The admission figures for 1992–93 should be treated with caution. The higher level was affected by the 'book' transfer of some State government nursing home beds to adjusted fees nursing home beds as a consequence of a shift in their funding arrangements.

² See footnote 1.

³ See footnote 1.

⁴ See footnote 1.