



Aged Care National Minimum Data Set V2.0

Registered aged care standards

31 October 2025

Aged Care National Minimum Data Set 2025– Data Set Specification	4
Aged care registered provider cluster	9
Aged care registered provider identifier	10
Aged care registered provider legal name	12
Aged care registered provider organisation type	14
Aged care registered provider registration status	17
Aged care registered provider registration start date	21
Aged care registered provider registration end date	23
Aged care registered provider registration category	25
Aged care address cluster	28
Aged care program payment entity identifier	30
Aged care residential care home cluster	32
Residential care home identifier	33
Residential care home registered name	35
Residential care home compliance rating	37
Residential care home compliance rating date	41
Aged care address cluster	43
Aged care program payment entity identifier	45
Aged care branch cluster	47
Aged care branch identifier	48
Aged care branch name	50
Aged care address cluster	52
Aged care program payment entity cluster	54
Aged care program payment entity identifier	55
Aged care program payment entity government funding	57
Aged care person cluster	59
A persons aged care identifier	60
Family name	62

Given name	66
Date of birth	71
Gender of a person	74
Sex of a person	80
Indigenous status	86
Usual accommodation type	93
Country of birth	97
Preferred language	100
Informal carer existence indicator	103
Interpersonal relationship of carer to care recipient	106
Person living arrangement	110
Marital status	113
Aged care housing tenure type	116
Aged care assessment identifier	120
Aged care episode cluster	122
Aged care episode program type	123
Aged care episode start date	126
Aged care episode end date	128
Aged care episode cessation reason	130
A persons aged care identifier	133
Aged care program payment entity identifier	135
Aged care assessment cluster	137
Aged care assessment identifier	138
Aged care assessment type	140
Australian National Aged Care Classification assessment result	143
Aged care technical nursing requirement type	149
Aged care assessment start date	154
Aged care assessment end date	156
Aged care assessment cessation reason	158
Aged care assessment setting	162
Reason for aged care assessment	166
Aged care assessment source of information	171
Aged care assessment palliative care phase	175
Recommended care setting	179
Recommended formal aged care	183
Approved program	187
Reported health condition (aged care)	191
Aged care address cluster	193
NMDS Glossary	196
Address	196
Aged care assessment	196
Aged care branch	196
Aged care episode	196
Aged care person registered in the aged care system	196
Aged care program payment entity	196

Aged care registered provider	196
Family	196
Gender	196
Geographic indicator	196
Informal carer	196
Palliative care phase	196
Registered supporter	196
Residential care home	197
Sex	197
Statistical Local Area	197
Urban Centre and Locality	197

Metadata Items

Aged Care National Minimum Data Set 2025–

Identifying and definitional attributes

Metadata item type: Data Set Specification

METEOR identifier: 807114

Registration status: [Aged Care](#), Standard 31/10/2025

DSS type: Data Set Specification (DSS)

Scope: The Aged Care National Minimum Data Set (NMDS) is a core set of standardised data items for mandatory collection and reporting at a national level about aged care.

The purpose of the Aged Care NMDS is to improve data quality, comparability and usefulness of data collected across the aged care sector. This means that data must be collected in accordance with the NMDS data specifications at the point of care, capture or record creation (as applicable).

In scope is aged care - which includes both care and assessments - that is funded by the Australian Government.

Assessments include those related to:

- eligibility for care
- care needs
- funding.

Aged care includes community-based (or in-home) aged care and residential aged care services. As at 01 November 2025, this consists of the following programs:

- Commonwealth Home Support Programme
- Support at Home Program
- Residential aged care (permanent)
- Residential aged care (respite)
- Transition Care Program
- National Aboriginal and Torres Strait Islander Flexible Aged Care Program
- Multi-Purpose Services.

The Aged Care NMDS data specifications are applicable to all aged care-related data, whether it is administrative, census or survey. For example, the data specifications apply to aged care data reported to/collected by:

- Department of Health, Disability and Ageing

- Department of Social Services
- Services Australia
- Aged Care Quality and Safety Commission.

Out of scope are:

- aged care providers that do not operate under Government-funded arrangements
- information held by aged care providers not relevant to this collection.
- Other entities that capture aged care-related data, such as the Department of Veterans Affairs, the Australian Commission on Safety and Quality in Health Care or the Independent Health and Aged Care Pricing Authority are not currently in scope.

The Aged Care NMDS is being developed progressively, with content added over time. This second version has an implementation date of 1 November 2025 to align with the start date of the Aged Care Act 2024. This version revises items included in the first version and includes some additional items that have been established through consultation with a range of stakeholders. They represent a minimum set of core data items (or, data elements) where consistent collection is needed and where standards can feasibly be progressed and implemented. The data items selected for inclusion has been based on prioritising existing data that have long-term utility and are common across the aged care system.

Collection and usage attributes

Statistical unit:

The Aged Care NMDS data specifications relate to:

1. **Persons** registered in the aged care system – people going through an aged care-related assessment process or currently accessing government-funded aged care services.
2. **Aged care registered providers** – entities that have been registered with the Aged Care Quality and Safety Commission to provide aged care. An individual provider may operate a number of residential care homes or aged care branches.
3. **Aged care residential care homes** – Residential care homes (sometimes known as a nursing homes or residential aged care facilities) are residences for older people who need ongoing help with everyday tasks or health care, in which funded services are provided.
4. **Aged care branches** – are places of business through which the provider delivers funded aged care services to an individual in the older person’s home or in the community.

5. **Aged care program payment entities** - Program payment entities of a registered provider each represent an agreement to deliver aged care services either at a residential care home or aged care branch.

6. **Aged care episodes** – the period of time during which a person receives care from an aged care registered provider (whether one-off, session-based or ongoing). A person may have multiple aged care episodes over time and across different aged care programs and providers.

7. **Aged care assessments** – assessments that are undertaken to assess people’s needs and recommend services that would best address those needs, as well as assessments of care needs of people living in residential aged care for funding purposes.

Note that the statistical unit for each cluster within the NMDS is specified in the relevant cluster.

Note that the same statistical units apply to the Aged Care National Best Practice Data Set (NBPDS); this data set also includes an additional person-based cluster of items relating to the aged care workforce.

Guide for use: The Aged Care NMDS will be expanded over time, with old data elements revised and new data elements added each year, as agreed.

Collection methods: *National collection and reporting requirements*

The Aged Care NMDS data are generally:

- **collected** by a registered provider, aged care branch, residential care home, program payment entity, or assessor
- **reported** to government
- **collated** by government.

The data are then forwarded to the AIHW National Aged Care Data Clearinghouse for public dissemination via the AIHW’s dedicated aged care data website GEN and other platforms, as well as made available for research, analysis, and data integration.

Government-funded aged care providers are required to record key information about care events, care needs and service users on an ongoing basis. Different government departments also collect information while supporting, administering, or regulating Government-funded aged care services. In addition to the Department of Health, Disability and Ageing, these include the Department of Social Services, Services Australia, and the Aged Care Quality and Safety Commission.

Where government departments or government-funded aged care providers collect aged care information included in the NMDS, the information should be collected as per the NMDS data specifications.

Interim arrangements may allow for collecting some data as per the Aged Care NMDS data specifications based on aggregate rather than individual-level data (for example, where person-level data collection does not yet exist, the standards for e.g., sex should nonetheless be used when data on people's sex are collected).

Periods for which data are collected

The implementation of the first version of the Aged Care NMDS data specifications began on 1 July 2023; ongoing system change may be required to support data capture as per the data specifications. Interim arrangements allowed for a transition period: the NMDS is implemented progressively – for each iteration of the NMDS, the data standards will be implemented for collection over a 12-month period. In the 12 months following data standard release, the data standards progress from voluntary to mandatory implementation.

Records are created, edited and updated continuously/as needed.

Wherever possible, NMDS data items are to be collected upon record creation (e.g., assessment or entry to aged care provider) and updated if/when changes occur (e.g., move from in-home care to residential aged care).

Periods for which data are reported and collated

Each source (e.g., aged care provider) is required to report data to the Department of Health, Disability and Ageing at various points of the year, either through automatic or manual processes. As a minimum, data are supplied annually.

All Aged Care NMDS data are collated by the Department of Health, Disability and Ageing.

Implementation start date:

01/11/2025

Comments:

Glossary terms that are relevant to data published from this NMDS will be available on the GEN aged care website (<https://www.gen-agedcaredata.gov.au>).

Where appropriate, these standards should be considered in conjunction with the Aged Care National Best Practice Data Set. The Aged Care NBPDS Version 1 contains items specific to people accessing aged care services and people working in aged care. Standards from other health and community-based data set specifications may also be relevant, for example the Admitted patient care NMDS, the Disability services NMDS, the Dementia National Best Practice Data Set and the Individual Healthcare Identifier National Best Endeavours Data Set.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Relational attributes

Related metadata references: Supersedes [Aged Care National Minimum Data Set 2023-24 Aged Care](#), Standard 30/06/2023

See also [Aged Care National Best Practice Data Set Aged Care](#), Standard 31/10/2025

Aged care registered provider cluster

Identifying and definitional attributes

Metadata item type: Data Set Specification

METEOR identifier: 807160

Registration status: [Aged Care](#), Standard 31/10/2025

DSS type: Data Element Cluster

Scope: The aged care registered provider cluster specifies data to be collected for each entity registered with the Aged Care Quality and Safety Commission to provide Commonwealth funded aged care services.

An individual [provider](#) may operate a number of [aged care residential care homes](#) or [aged care branches](#), or none.

Collection and usage attributes

Statistical unit: An [aged care registered provider](#)

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Aged care registered provider identifier

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care registered provider—identifier, X[X(19)]
METEOR identifier:	807493
Registration status:	Aged Care , Standard 31/10/2025
Definition:	A sequence of characters which uniquely identifies an aged care registered provider , as represented by a string of alphanumeric characters.
Data Element Concept:	Aged care registered provider—identifier
Value Domain:	Identifier X[X(19)]

Value domain attributes

Representational attributes

Representation class:	Identifier
Data type:	String
Format:	X[X(19)]
Maximum character length:	20

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	Providers must apply and be registered by the Aged Care Quality and Safety Commissioner to deliver Commonwealth funded aged care services. Each aged care registered provider is to have a unique identifier at the national
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level. The provider identifier is allocated by the Government as part of the provider registration process.

This information is collected and reported by the Australian Government.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: [Aged Care Bill 2024 – Parliament of Australia](#), Australia, accessed 9 April 2025.

Reference documents: Department of Health, Disability and Ageing (2024) [Preparing providers for the new model](#), Department of Health, Disability and Ageing website, accessed 5 August 2024.

Aged care registered provider legal name

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care registered provider—legal name, text X[X(199)]
METEOR identifier:	807497
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The legal name of the aged care registered provider as represented by text.
Data Element Concept:	Aged care registered provider—legal name
Value Domain:	Text X[X(199)]

Value domain attributes

Representational attributes

Representation class:	Text
Data type:	String
Format:	X[X(199)]
Maximum character length:	200

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	This field reflects the legal entity name of the provider organisation as recorded in the Australian Business Register.
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As defined by the Australian Business Register “A legal name is the name that appears on all official documents or legal papers, such as:

- legal contracts and registrations
- property leases
- employment contracts.

Your legal name can be different from your business name (the name you trade under). Depending on your business structure, your legal name may be:

- your own name if you’re a sole trader
- the name of a partnership
- the name of a proprietary limited company
- the name of an incorporated association.”

The legal name of the aged care registered provider is recorded with the Australian Government and Aged Care Quality and Safety Commission as part of the registration process.

This information is collected and reported by the Australian Government.

Source and reference attributes

Submitting organisation:

Department of Health, Disability and Ageing

Reference documents:

[Aged Care Bill 2024 – Parliament of Australia](#), Australia, accessed 9 April 2025.

Department of Health, Disability and Ageing (2024) [Preparing providers for the new model](#), Department of Health, Disability and Ageing website, accessed 5 August 2024.

ABR (Australian Business Register) (2024) [Business names, trading names and legal names](#), ABR website, accessed 5 August 2024.

ABR (Australian Business Register) (2024) [Business names/Trading names FAQs](#), ABR website, accessed 5 August 2024.

Aged care registered provider organisation type

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care registered provider—organisation type, code N[N]
Synonymous names:	Aged care organisation purpose, Aged care provider purpose
METEOR identifier:	807499
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The business structure type of an aged care registered provider organisation , as represented by a code.
Data Element Concept:	Aged care registered provider—organisation type
Value Domain:	Organisation type code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Private for profit
	2	Government
	3	Not-for-profit
Supplementary values:	97	Not applicable

Collection and usage attributes

Guide for use:	CODE 1	PRIVATE FOR PROFIT
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This code is used where the organisation is a Private for profit entity. 'Private for profit' entities include private incorporate bodies, publicly-listed companies, individual/sole traders trusts, and partnerships.

CODE 2 GOVERNMENT

This code is used where the organisation is owned by a government or is operating under the authority of a government, meaning that it has been established for a public purpose. 'Government' entities include Local, State and Territory Government entities.

CODE 3 NOT-FOR-PROFIT

This code is used where the organisation is a Not-for-profit entity, meaning an organisation that provides services to the community which does not operate to make a profit for its members or shareholders. 'Not-for-profit' entities include Charitable, Community-based and Religious organisations.

CODE 97 NOT APPLICABLE

This supplementary value is used to code a response that is not applicable. It is not to be used on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where it is not applicable to the data item.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Relational attributes

Implementation in Data Set Specifications: [Aged care registered provider cluster](#)
[Aged Care, Standard 31/10/2025](#)

DSS specific information:

For use in the Aged Care NMDS, the organisation type is collected for the [aged care registered provider](#) or its parent body. The organisation structure of the aged care registered provider or parent entity is recorded during the aged care provider registration process.

This information is collected and reported by the Australian Government.

Data element attributes

Collection and usage attributes

Comments: Please note: previous versions of this element used different permissible values in a different order.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Reference documents: ABR (Australian Business Register) (2025) [Entity types](#), ABR website, accessed 5 March 2025.

ABR (Australian Business Register) (2025) [Business structures](#), ABR website, accessed 4 April 2025.

ATO (Australian Taxation Office) (2025) [Not-for-profit organisations](#), ABR website, accessed 12 May 2025.

Department of Health, Disability and Ageing (2024) [Preparing providers for the new model](#), Department of Health, Disability and Ageing website, accessed 5 August 2024.

Aged care registered provider registration status

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care registered provider—registration status, aged care registered provider code N[N]
METEOR identifier:	807501
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The status of an aged care registered provider's registration, as represented by a code.
Data Element Concept:	Aged care registered provider—registration status
Value Domain:	Aged care registered provider registration status code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Registered
	2	Registered (applied for renewal)
	3	Suspended
	4	Revoked
	5	Expired
Supplementary values:	97	Not applicable

Collection and usage attributes

Guide for use: The following registration statuses are assigned by the Aged Care Quality and Safety Commission (Commission.)

CODE 1 REGISTERED

This code is used to reflect the decision whereby the aged care provider is registered either for the first time or re-registered after a prior period of registration that has elapsed or after having been previously revoked or suspended.

CODE 2 REGISTERED APPLIED FOR RENEWAL

This code is used where the provider's previous registration period has expired and the provider has submitted a valid application for renewal of registration which is yet to be assessed. The provider's registration status remains as 'Registered applied for renewal' until the Commission makes a decision on the provider's application for renewal of registration.

CODE 3 SUSPENDED

This code is used where the registration of an aged care provider has been suspended by the Commission following review and monitoring of the provider's performance against legislation on the responsibilities of registered aged care providers. For example, the Commission can revoke or suspend a provider's registration where: there are very high levels of risk to the safety of older people; risk to their ongoing continuity of care; the provider is no longer suitable to deliver aged care services.

CODE 4 REVOKED

This code is used where previous registration of an aged care provider has been revoked by the Commission following a decision based on the provider's performance against legislation on the responsibilities of registered aged care providers. For example, the Commission can revoke or suspend a provider's registration where: there are very high levels of risk to the safety of older people; risk to their ongoing continuity of care; the provider is no longer suitable to deliver aged care services.

CODE 5 EXPIRED

This code is used where the provider's previous registration period has expired and has not been renewed. Where the provider has submitted a valid application for renewal of registration, and the Commission has not yet decided the outcome, use CODE 2.

CODE 97 NOT APPLICABLE

This code is used where aged care providers do not require registration to operate, or registration status is otherwise not applicable.

Comments: Please note: previous versions of this element used different permissible values in a different order.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: Providers must apply and be registered by the Aged Care Quality and Safety Commission (Commission) to deliver Commonwealth funded aged care services. Certain eligibility requirements must be met and providers may be registered in one or more registration categories. Residential care homes must also be approved as part of the registration process.

The provider registration period is generally 3 years, however, the Commission may decide on an alternative registration period. Providers need to re-register to continue to deliver services after a registration period expires. During a registration period, a provider can also apply to vary their registration.

Registration status may reflect the initial registration of a provider to deliver Commonwealth funded aged care services. It may also reflect subsequent modifications made to the registration status because of changes arising from, re-registration, variation, or review and monitoring of the provider's performance against legislation. In some cases it may reflect the status of a previously approved provider (under the old Act) that has been 'deemed' to be registered in transition to the registration system on commencement of the Aged Care Act.

All registration periods have a registration start date, a registration end date, and provider registration category/ies.

This information is collected and reported by the Australian Government.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: [Aged Care Bill 2024 – Parliament of Australia](#), Australia, accessed 9 April 2025.

Reference documents: ACQSC (Aged Care Quality and Safety Commission) (2024) [Provider registration unpacked - registration and registration renewal \(Residential Services\)](#), [presentation], *National Aged Care Provider Conference*, Adelaide, accessed 14 August 2024.

Department of Health, Disability and Ageing (2024) [Preparing providers for the new model](#), Department of Health, Disability and Ageing website, accessed 5 August 2024.

Aged care registered provider registration start date

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care registered provider—registration start date, DDMMYYYY
METEOR identifier:	807527
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The date on which an aged care registered provider 's formal registration status becomes effective or is renewed, expressed as DDMMYYYY.
Data Element Concept:	Aged care registered provider—registration start date
Value Domain:	Date DDMMYYYY

Value domain attributes

Representational attributes

Representation class:	Date
Data type:	Date/Time
Format:	DDMMYYYY
Maximum character length:	8

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	The registration date is the date that a provider's registration commences or is renewed. This information is collected and reported by the Australian Government.
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Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: [Aged Care Bill 2024 – Parliament of Australia](#), Australia, viewed 9 April 2025.

Reference documents: Department of Health, Disability and Ageing (2024) [Preparing providers for the new model](#), Department of Health, Disability and Ageing website, accessed 5 August 2024.

Aged care registered provider registration end date

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care registered provider—registration end date, DDMMYYYY
METEOR identifier:	807529
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The date on which an aged care registered provider 's registration ceases to be effective, expressed as DDMMYYYY.
Data Element Concept:	Aged care registered provider—registration end date
Value Domain:	Date DDMMYYYY

Value domain attributes

Representational attributes

Representation class:	Date
Data type:	Date/Time
Format:	DDMMYYYY
Maximum character length:	8

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	The status, start date and end date should be collected for each registration period of a provider. The end date may relate to the initial period of registration for a provider in one or more registration categories, or a subsequent re-registration.
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Source and reference attributes

Submitting organisation:	Department of Health, Disability and Ageing
Origin:	Aged Care Bill 2024 – Parliament of Australia , Australia, viewed 9 April 2025.
Reference documents:	Department of Health, Disability and Ageing (2024) Preparing providers for the new model , Department of Health, Disability and Ageing website, accessed 5 August 2024.

Relational attributes

Implementation in Data Set Specifications:	Aged care registered provider cluster Aged Care , Standard 31/10/2025
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DSS specific information:

For use in the Aged Care NMDS, the provider registration end date is the date on which an **aged care registered provider's** period of registration with the Aged Care Quality and Safety Commission (Commission) ends, as per the Notice of decision provided by the Commission. Each aged care provider registration period has a start date and end date. The registration period is generally 3 years, however, the Commission may decide on an alternative registration period. Providers need to re-register to continue to deliver services after a registration period expires. This information is collected and reported by the Australian Government.

Aged care registered provider registration category

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care registered provider—provider registration category, code N
Synonymous names:	Provider registration type, Provider registered category
METEOR identifier:	807531
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The category of aged care registered provider registration under the aged care regulatory model, as represented by a code.
Context:	Aged care
Data Element Concept:	Aged care registered provider—provider registration category
Value Domain:	Aged care registered provider registration category code N

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Home and community services
	2	Assistive technology and home modifications
	3	Advisory and support services
	4	Personal care and care support in the home or community (including respite)
	5	Nursing and transition care

Collection and usage attributes

Guide for use:

CODE 1 HOME AND COMMUNITY SERVICES

This code is used where an aged care provider is registered with the Government to provide one or more of the following aged care service types in a home and community setting: Domestic assistance, Home maintenance and repairs, Meals, Transport services.

CODE 2 ASSISTIVE TECHNOLOGY AND HOME MODIFICATIONS

This code is used where an aged care provider is registered with the Government to provide one or more of the following aged care service types: Equipment and products, Home adjustments.

CODE 3 ADVISORY AND SUPPORT SERVICES

This code is used where an aged care provider is registered with the Government to provide one or more of the following aged care service types in a home and community setting: Hoarding and squalor assistance, Social support and community engagement.

CODE 4 PERSONAL CARE AND CARE SUPPORT IN THE HOME OR COMMUNITY (INCLUDING RESPITE)

This code is used where an aged care provider is registered with the Government to provide one or more of the following aged care service types in a home and community setting: Allied health or other therapy, Personal care, Nutrition, Therapeutic services for independent living, Home or community general respite, Community cottage respite, Care management, Restorative care management.

CODE 5 NURSING AND TRANSITION CARE

This code is used where an aged care provider is registered with the Government to provide one or more of the following aged care service types in a home and community setting: Nursing care, Assistance with transition care.

CODE 6 RESIDENTIAL CARE (INCLUDING RESPITE)

This code is used where an aged care provider is registered with the Government to provide the following aged care service types in a residential setting: Residential accommodation, Residential everyday living, Residential clinical care, Residential non-clinical care.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: Providers must apply and be registered by the Aged Care Quality and Safety Commissioner to deliver funded aged care services.

Providers must register in one or more categories. The categories they need to register in will be based on the types of services they deliver. An aged care provider is registered to provide one or more of the associated service types in a registration category, with the exception of Code 6, for which the registered provider must provide all listed service types.

Residential care homes must also be approved as part of the registration process. Providers in the residential care category (CODE 6) must have at least one residential care home approved by the Commissioner.

The registration period is generally 3 years. Providers then need to re-register to continue to deliver services. During a registration period, providers can also apply to vary their registration.

Where a provider is registered in more than one category, all categories in which the provider is registered should be recorded along with the registration status, start date and end date.

This information is collected and reported by the Australian Government.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: [Aged Care Bill 2024 – Parliament of Australia](#), Australia, accessed 9 April 2025.

Reference documents: ACQSC (Aged Care Safety Commission) (2024) [Provider registration unpacked - registration and registration renewal \(Residential Services\)](#), [presentation], *National Aged Care Provider Conference*, Adelaide, accessed 14 August 2024.

Department of Health, Disability and Ageing (2025) [Aged Care Rules 2024 Consultation Draft](#), Department of Health, Disability and Ageing website, accessed 2 May 2025.

Aged care address cluster

Identifying and definitional attributes

Metadata item type: Data Set Specification

METEOR identifier: 812259

Registration status: [Aged Care, Standard 31/10/2025](#)

DSS type: Data Element Cluster

Scope: The Address cluster defines the data elements needed to collect the components of an address, which is defined as a collection of information used for describing the location of an entity, and/or details describing how the entity can be contacted, for individuals or organisations.

The Aged care address cluster may be used to collect address information relating to the location where a person lives or receives care, or to the location of providers, residential care homes and aged care branches (this can include both their physical location, as well as their contact (postal) location).

Please note that when collected in these different contexts, some data elements in this cluster may be specified as mandatory for collection. Not all of the items are mandatory for collection within the aged care context, but where address information are collected for any of the items included in the Aged care address cluster, it should be done as per the data specifications.

Collection and usage attributes

Collection methods: The Aged care address cluster may be used to collect address information relating to the location where a person lives or receives care, or to the location of providers, residential care homes and aged care branches (this can include both their physical location, as well as their contact (postal) location).

Please note that when collected in these different contexts, some data elements in this cluster may be specified as mandatory for collection.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Reference documents: DOHAC (Department of Health and Aged Care) 2018. 2018 Aged Care Planning Region maps. Canberra: DOHAC, viewed 27 April 2023, <https://www.health.gov.au/resources/collections/2018-aged-care-planning-region-maps>

DOHAC (Department of Health and Aged Care) 2021. Modified Monash Model. Canberra: DOHAC, viewed 27 April 2023, <https://www.health.gov.au/topics/rural-health-workforce/classifications/mmm>

Aged care program payment entity identifier

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care program payment entity—identifier, X[X(19)]
METEOR identifier:	807547
Registration status:	Aged Care , Standard 31/10/2025
Definition:	A sequence of characters which uniquely identifies an aged care program payment entity , as represented by a string of alphanumeric characters.
Data Element Concept:	Aged care program payment entity—identifier
Value Domain:	Identifier X[X(19)]

Value domain attributes

Representational attributes

Representation class:	Identifier
Data type:	String
Format:	X[X(19)]
Maximum character length:	20

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	Each aged care program payment entity has a unique identifier at the national level.
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Each [residential care home](#) may be associated with one or more program payment entity identifier.

Each [aged care branch](#) is associated with only one program payment entity. Where a program payment entity is associated with an aged care branch, program payment entity identifier is identical with [Aged care branch—identifier, X\[X\(19\)\]](#). This information is collected and reported by the Australian Government.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Relational attributes

Implementation in Data Set Specifications: [Aged care registered provider cluster](#)
[Aged Care, Standard 31/10/2025](#)

DSS specific information:

Note: an aged care registered provider may be associated with multiple [Aged care program payment entities](#). All relevant identifiers should be collected.

Aged care residential care home cluster

Identifying and definitional attributes

Metadata item type: Data Set Specification

METEOR identifier: 807162

Registration status: [Aged Care](#), Standard 31/10/2025

DSS type: Data Element Cluster

Scope: The aged care residential care home cluster specifies data to be collected for each [residential care home](#) of an [aged care registered provider](#).

Collection and usage attributes

Statistical unit: A [residential care home](#)

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Residential care home identifier

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Residential care home—identifier, X[X(8)]
METEOR identifier:	807533
Registration status:	Aged Care , Standard 31/10/2025
Definition:	A sequence of characters which uniquely identifies a residential care home , as represented by a string of alphanumeric characters.
Data Element Concept:	Residential care home—identifier
Value Domain:	Identifier X[X(8)]

Value domain attributes

Representational attributes

Representation class:	Identifier
Data type:	String
Format:	X[X(8)]
Maximum character length:	9

Source and reference attributes

Submitting organisation:	Department of Health, Disability and Ageing
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Data element attributes

Collection and usage attributes

Guide for use:	Each residential care home has a unique identifier at the national level. This information is assigned and reported by the Australian Government.
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Source and reference attributes

Submitting
organisation:

Department of Health, Disability and Ageing

Residential care home registered name

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Residential care home—registered name, text X[X(199)]
METEOR identifier:	807535
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The name under which a residential care home is entered into an official register, as represented by text.
Data Element Concept:	Residential care home—registered name
Value Domain:	Text X[X(199)]

Value domain attributes

Representational attributes

Representation class:	Text
Data type:	String
Format:	X[X(199)]
Maximum character length:	200

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Collection methods:	If special characters or symbols form part of the registered name, they should be included. This includes all characters from the standard printable ASCII character set such as the letters A-Z, hyphens, commas, apostrophes,
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@, # etc, as well as the non-standard or extended ASCII characters such as ü, á, é, ®, ™ etc. Mixed case should be used rather than upper case only.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Relational attributes

Implementation in Data Set Specifications: [Aged care residential care home cluster](#)
[Aged Care, Standard 31/10/2025](#)

DSS specific information:

In the Aged care residential care home cluster this data element records the name of the [residential care home](#) of an [aged care registered provider](#) as registered with the Australian Government.

Residential care home compliance rating

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Residential care home—compliance rating, code N[N]
METEOR identifier:	807537
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The rating of a residential care home's conformance with the strengthened quality standards and compliance through the type of any regulatory decisions in place, as represented by a code.
Data Element Concept:	Residential care home—compliance rating
Value Domain:	Residential care home compliance rating code N[N]

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N[N]	
Maximum character length:	2	
	Value	Meaning
Permissible values:	1	Significant improvement needed
	2	Improvement needed
	3	Acceptable
	4	Good
	5	Excellent
Supplementary values:	97	Not applicable

Collection and usage attributes

Guide for use: CODE 1 SIGNIFICANT IMPROVEMENT NEEDED

This code applies where the aged care home has:

- current regulatory decision/s in place, or
- an assessment finding of major non-conformance against the strengthened Aged Care Quality Standards made by the Aged Care Quality and Safety Commission (Commission.)

CODE 2 IMPROVEMENT NEEDED

This code applies where the aged care home has:

- current regulatory decision/s in place, or
- an assessment finding of minor non-conformance against the strengthened Aged Care Quality Standards made by the Commission.

CODE 3 ACCEPTABLE

This code applies where the aged care home has:

- current regulatory decision/s in place, or
- regulatory decision/s made prior to 1 November 2025 become non-current within the past 12-months, or
- an assessment finding of major or minor non-conformance against the strengthened Aged Care Quality Standards made by the Commission, that has been resolved.

CODE 4 GOOD

This code applies where the aged care home has:

- no current regulatory decisions in place, and
- regulatory decision/s made prior to 1 November 2025 become non-current within the past 12–36 months, or
- an assessment finding of conformance against the strengthened Aged Care Quality Standards made by the Commission.

CODE 5 EXCELLENT

This code applies where the aged care home:

- has no current regulatory decisions in place, and
- if has not been reregistered by the Commission, has an accreditation period of 3 or more years granted by the Commission prior to 1 November 2025, or
- has an assessment finding of exceeding conformance against the strengthened Aged Care Quality Standards made by the Commission.

CODE 97 NOT APPLICABLE

This code applies where the Compliance rating is not applicable to the residential care home.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Collection methods: Record one code.

This information is collected and reported by the Australian Government.

Compliance is one of the 4 key areas of performance that make up the overall Star Rating. This sub-category is based on compliance information from the Aged Care Quality and Safety Commission (Commission) and the Secretary of the Department of Health, Disability and Ageing as the System Governor (System Governor). The Compliance rating reflects a residential care home's current compliance status and is based on graded assessment findings against the strengthened Quality Standards and the type of any regulatory decisions in place. This sub-category will also continue to incorporate:

- the period of time accreditation was granted for, for homes not yet assessed against the strengthened Quality Standards
- previous specific formal regulatory notices, issued prior to 1 November 2025
- the period of time since specific formal regulatory notices, issued prior to 1 November 2025, were resolved.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Reference documents: ACQSC (Aged Care Quality and Safety Commission) (2024) [Accreditation and reaccreditation](#), ACQSC website, accessed 17 April 2024.

ACQSC (Aged Care Quality and Safety Commission) (2024) [Strengthened Quality Standards](#), ACQSC website, accessed 15 April 2024.

Department of Health, Disability and Ageing (2024) [Star Ratings for residential aged care](#), Department of Health, Disability and Ageing website, accessed 17 April 2024.

My Aged Care (2024) [Compliance in aged care](#), My Aged Care website, accessed 17 April 2024.

Residential care home compliance rating date

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Residential care home—compliance rating date, DDMMYYYY
METEOR identifier:	807539
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The date on which a residential care home's rating of compliance with standards and/or legal requirements becomes effective, expressed as DDMMYYYY.
Data Element Concept:	Residential care home—compliance rating date
Value Domain:	Date DDMMYYYY

Value domain attributes

Representational attributes

Representation class:	Date
Data type:	Date/Time
Format:	DDMMYYYY
Maximum character length:	8

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	This information is collected and reported by the Australian Government.
Collection methods:	The Compliance rating process seeks to measure the extent to which aged care homes are meeting their responsibilities. Compliance is one of the 4 key

areas of performance that make up the overall Star Rating. This sub-category is based on compliance information from the Aged Care Quality and Safety Commission (Commission) and the Secretary of the Department of Health, Disability and Ageing as the System Governor (System Governor). The Compliance rating reflects a residential care home's current compliance status and is based on graded assessment findings against the strengthened Quality Standards and the type of any regulatory decisions in place.

This sub-category will also continue to incorporate:

- the period of time accreditation was granted for, for homes not yet assessed against the strengthened Quality Standards
- previous specific formal regulatory notices, issued prior to 1 November 2025
- the period of time since specific formal regulatory notices, issued prior to 1 November 2025, were resolved.

Each [Residential care home—compliance rating, code N\[N\]](#) should be recorded with a compliance rating date.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Reference documents: ACQSC (Aged Care Quality and Safety Commission) (2024) [Accreditation and reaccreditation](#), ACQSC website, accessed 17 April 2024.

ACQSC (Aged Care Quality and Safety Commission) (2024) [Strengthened Quality Standards](#), ACQSC website, accessed 15 April 2024.

Department of Health, Disability and Ageing (2024) [Star Ratings for residential aged care](#), Department of Health, Disability and Ageing website, accessed 17 April 2024.

My Aged Care (2024) [Compliance in aged care](#), My Aged Care website, accessed 17 April 2024.

Aged care address cluster

Identifying and definitional attributes

Metadata item type: Data Set Specification

METEOR identifier: 812259

Registration status: [Aged Care](#), Standard 31/10/2025

DSS type: Data Element Cluster

Scope: The Address cluster defines the data elements needed to collect the components of an address, which is defined as a collection of information used for describing the location of an entity, and/or details describing how the entity can be contacted, for individuals or organisations.

The Aged care address cluster may be used to collect address information relating to the location where a person lives or receives care, or to the location of providers, residential care homes and aged care branches (this can include both their physical location, as well as their contact (postal) location).

Please note that when collected in these different contexts, some data elements in this cluster may be specified as mandatory for collection. Not all of the items are mandatory for collection within the aged care context, but where address information are collected for any of the items included in the Aged care address cluster, it should be done as per the data specifications.

Collection and usage attributes

Collection methods: The Aged care address cluster may be used to collect address information relating to the location where a person lives or receives care, or to the location of providers, residential care homes and aged care branches (this can include both their physical location, as well as their contact (postal) location).

Please note that when collected in these different contexts, some data elements in this cluster may be specified as mandatory for collection.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Reference documents: DOHAC (Department of Health and Aged Care) 2018. 2018 Aged Care Planning Region maps. Canberra: DOHAC, viewed 27 April 2023, <https://www.health.gov.au/resources/collections/2018-aged-care-planning-region-maps>

DOHAC (Department of Health and Aged Care) 2021. Modified Monash Model. Canberra: DOHAC, viewed 27 April 2023, <https://www.health.gov.au/topics/rural-health-workforce/classifications/mmm>

Aged care program payment entity identifier

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care program payment entity—identifier, X[X(19)]
METEOR identifier:	807547
Registration status:	Aged Care , Standard 31/10/2025
Definition:	A sequence of characters which uniquely identifies an aged care program payment entity , as represented by a string of alphanumeric characters.
Data Element Concept:	Aged care program payment entity—identifier
Value Domain:	Identifier X[X(19)]

Value domain attributes

Representational attributes

Representation class:	Identifier
Data type:	String
Format:	X[X(19)]
Maximum character length:	20

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	Each aged care program payment entity has a unique identifier at the national level.
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Each [residential care home](#) may be associated with one or more program payment entity identifier.

Each [aged care branch](#) is associated with only one program payment entity. Where a program payment entity is associated with an aged care branch, program payment entity identifier is identical with [Aged care branch—identifier, X\[X\(19\)\]](#). This information is collected and reported by the Australian Government.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Relational attributes

Implementation in Data Set Specifications: [Aged care residential care home cluster](#)
[Aged Care, Standard 31/10/2025](#)

DSS specific information:

Note: each [residential care home](#) may be associated with one or more [Aged care program payment entity](#). All relevant identifiers should be collected.

Aged care branch cluster

Identifying and definitional attributes

Metadata item type: Data Set Specification

METEOR identifier: 807169

Registration status: [Aged Care](#), Standard 31/10/2025

DSS type: Data Element Cluster

Scope: The aged care branch cluster specifies data to be collected for each [aged care branch](#) of an [aged care registered provider](#).

Collection and usage attributes

Statistical unit: An [aged care branch](#)

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Aged care branch identifier

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care branch—identifier, X[X(19)]
METEOR identifier:	807541
Registration status:	Aged Care , Standard 31/10/2025
Definition:	A sequence of characters which uniquely identifies an aged care branch , as represented by a string of alphanumeric characters.
Data Element Concept:	Aged care branch—identifier
Value Domain:	Identifier X[X(19)]

Value domain attributes

Representational attributes

Representation class:	Identifier
Data type:	String
Format:	X[X(19)]
Maximum character length:	20

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Collection methods:	Each aged care branch has a unique service identifier at the national level. This information is collected and reported by the Australian Government.
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Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Department of Health, Disability and Aged Care (2025) [Draft Aged Care Rules - Release 4a](#), Department of Health, Disability and Aged Care, accessed 31 March 2025.

Relational attributes

Implementation in Data Set Specifications: [Aged care branch cluster](#)
[Aged Care](#), Standard 31/10/2025

DSS specific information:

This data element has a one to-one-relationship with [Aged care program payment entity—identifier, X\[X\(19\)\]](#)

Aged care branch name

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care branch—branch name, text X[X(199)]
METEOR identifier:	807545
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The unique name of an aged care branch , as represented by text.
Data Element Concept:	Aged care branch—branch name
Value Domain:	Text X[X(199)]

Value domain attributes

Representational attributes

Representation class:	Text
Data type:	String
Format:	X[X(199)]
Maximum character length:	200

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	The name of the aged care branch is recorded with the Department on Health, Disability and Ageing. This information is collected and reported by the Australian Government.
Collection methods:	If special characters or symbols form part of the aged care branch name, they should be included. This includes all characters from the standard

printable ASCII character set such as the letters A-Z, hyphens, commas, apostrophes, @, # etc, as well as the non-standard or extended ASCII characters such as ü, á, é, ®, ™ etc. Mixed case should be used rather than upper case only.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Aged care address cluster

Identifying and definitional attributes

Metadata item type: Data Set Specification

METEOR identifier: 812259

Registration status: [Aged Care](#), Standard 31/10/2025

DSS type: Data Element Cluster

Scope: The Address cluster defines the data elements needed to collect the components of an address, which is defined as a collection of information used for describing the location of an entity, and/or details describing how the entity can be contacted, for individuals or organisations.

The Aged care address cluster may be used to collect address information relating to the location where a person lives or receives care, or to the location of providers, residential care homes and aged care branches (this can include both their physical location, as well as their contact (postal) location).

Please note that when collected in these different contexts, some data elements in this cluster may be specified as mandatory for collection. Not all of the items are mandatory for collection within the aged care context, but where address information are collected for any of the items included in the Aged care address cluster, it should be done as per the data specifications.

Collection and usage attributes

Collection methods: The Aged care address cluster may be used to collect address information relating to the location where a person lives or receives care, or to the location of providers, residential care homes and aged care branches (this can include both their physical location, as well as their contact (postal) location).

Please note that when collected in these different contexts, some data elements in this cluster may be specified as mandatory for collection.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Reference documents: DOHAC (Department of Health and Aged Care) 2018. 2018 Aged Care Planning Region maps. Canberra: DOHAC, viewed 27 April 2023, <https://www.health.gov.au/resources/collections/2018-aged-care-planning-region-maps>

DOHAC (Department of Health and Aged Care) 2021. Modified Monash Model. Canberra: DOHAC, viewed 27 April 2023, <https://www.health.gov.au/topics/rural-health-workforce/classifications/mmm>

Aged care program payment entity cluster

Identifying and definitional attributes

Metadata item type:	Data Set Specification
METEOR identifier:	807135
Registration status:	Aged Care , Standard 31/10/2025
DSS type:	Data Element Cluster
Scope:	The aged care program payment entity cluster specifies data to be collected for each program payment entity of an aged care registered provider .

Collection and usage attributes

Statistical unit:	An aged care program payment entity
Comments:	Each residential care home may be associated with one or more program payment entity. Each aged care branch is associated with only one program payment entity.

Source and reference attributes

Submitting organisation:	Department of Health, Disability and Ageing
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Aged care program payment entity identifier

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care program payment entity—identifier, X[X(19)]
METEOR identifier:	807547
Registration status:	Aged Care , Standard 31/10/2025
Definition:	A sequence of characters which uniquely identifies an aged care program payment entity , as represented by a string of alphanumeric characters.
Data Element Concept:	Aged care program payment entity—identifier
Value Domain:	Identifier X[X(19)]

Value domain attributes

Representational attributes

Representation class:	Identifier
Data type:	String
Format:	X[X(19)]
Maximum character length:	20

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	Each aged care program payment entity has a unique identifier at the national level.
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Each [residential care home](#) may be associated with one or more program payment entity identifier.

Each [aged care branch](#) is associated with only one program payment entity. Where a program payment entity is associated with an aged care branch, program payment entity identifier is identical with [Aged care branch—identifier, X\[X\(19\)\]](#). This information is collected and reported by the Australian Government.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Relational attributes

Implementation in Data Set Specifications: [Aged care program payment entity cluster](#)
[Aged Care, Standard 31/10/2025](#)

DSS specific information:

Where a [program payment entity](#) is associated with an [aged care branch](#), this data element has a one to-one-relationship with [Aged care branch—identifier, X\[X\(19\)\]](#).

Aged care program payment entity government funding

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care program payment entity—amount of government funding, total Australian currency N[N(8)]
METEOR identifier:	807549
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The total amount of money allocated by government to an aged care program payment entity , as represented in Australian dollars.
Data Element Concept:	Aged care program payment entity—amount of government funding
Value Domain:	Total Australian currency N[N(8)]

Value domain attributes

Representational attributes

Representation class:	Total
Data type:	Currency
Format:	N[N(8)]
Maximum character length:	9
Unit of measure:	Australian currency (AU\$)

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Source and reference attributes

Submitting organisation:	Department of Health, Disability and Ageing
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Relational attributes

Implementation in Data Set Specifications: [Aged care program payment entity cluster](#)
[Aged Care, Standard 31/10/2025](#)

DSS specific information:

In the Aged care program payment entity cluster, this data element collects the total Commonwealth funding provided by the Australian Government per aged care entity for the activity that has occurred between 1 July and 30 June of that financial year, as reported by the Department of Health, Disability and Aged Care. For grant funded aged care programs the same methodology should be followed.

Aged care person cluster

Identifying and definitional attributes

Metadata item type:	Data Set Specification
METEOR identifier:	807128
Registration status:	Aged Care , Standard 31/10/2025
DSS type:	Data Element Cluster
Scope:	The aged care person cluster specifies data to be collected for each person seeking or accessing aged care services.

Collection and usage attributes

Statistical unit:	A Person seeking or accessing aged care services
Guide for use:	<p>The data elements in this cluster are specified to be collected for each person seeking or accessing aged care services.</p> <p>This includes people registered within the aged care system, going through an aged care-related assessment process or using government-funded aged care services.</p>

Source and reference attributes

Submitting organisation:	Department of Health, Disability and Ageing
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A persons aged care identifier

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—aged care identifier, XXXXXX[X(14)]
METEOR identifier:	775012
Registration status:	Aged Care , Standard 30/06/2023
Definition:	A sequence of characters which uniquely identifies a person in an aged care service setting, as represented by a string of alphanumeric characters.
Data Element Concept:	Person—aged care identifier
Value Domain:	Identifier XXXXXX[X(14)]

Value domain attributes

Representational attributes

Representation class:	Identifier
Data type:	String
Format:	XXXXXX[X(14)]
Maximum character length:	20

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	Each person seeking or accessing aged care is to have a unique identifier at the national level.
Comments:	The aged care identifier ensures a persons records can be matched accurately over time and across aged care providers, services and programs.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Relational attributes

Implementation in Data Set Specifications: [Aged care person cluster](#)
[Aged Care](#), Standard 31/10/2025

DSS specific information:

Each person seeking or accessing aged care is to have a unique identifier at the national level.

Family name

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—family name, text X[X(39)]
Synonymous names:	Surname; Last name
METEOR identifier:	613331
Registration status:	Health , Standard 05/10/2016 Tasmanian Health , Standard 27/06/2017 Aged Care , Standard 30/06/2023 Indigenous , Standard 07/04/2024
Definition:	The name a person has in common with some other members of their family, as represented by text. It is often hereditary, and is distinguished from that person's first given name.
Data Element Concept:	Person—family name
Value Domain:	Text X[X(39)]

Value domain attributes

Representational attributes

Representation class:	Text
Data type:	String
Format:	X[X(39)]
Maximum character length:	40

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use: A person's family name is one of the following:

- the hereditary or tribal surname of a person's family
- acquired by a person in accordance with a due process defined in a state or territory Act relating to the registration of births, deaths, marriages and changes of name and sex, and for related purposes
- any other name distinguished from a person's given name.

The agency or establishment should record the person's full **family** name on their information systems.

Collection methods: Family name

Family name should be recorded in the format preferred by the person. The format should be the same as that written by the person on a (pre) registration form or in the same format as that printed on an identification card, such as a Medicare card, to ensure consistent collection of name data.

Punctuation

If special characters (such as hyphens, umlauts or commas) form part of the family name they should be included without spaces. For example, hyphenated names should be entered with a hyphen without spaces.

Hyphenated family names should only be recorded using this data element, and not [Person—family name prefix, text A\[A\(29\)\]](#).

Apostrophe—for example O'Brien, D'Agostino

No space should be left before or after the apostrophe; for example, for the name 'O'Brien', there should not be a space between the 'O' and the apostrophe, or between the apostrophe and 'Brien'.

Family names with apostrophes should only be recorded using this data element, and not [Person—family name prefix, text A\[A\(29\)\]](#).

Full stop—for example, St. John or St. George.

No space should be left before a full stop; for example, for the name 'St. John' there should not be a space between 'St' and the full stop. A space should be left between the full stop and the next name; for example, for the name 'St. John' there should be a space between the full stop and 'John'. In this example, it would be incorrect to enter 'St .John' or 'St . John'.

Space—for example, Van Der Humm, Le Brun (examples which should be entered using the provision for family name prefix).

If the person has recorded their family name as more than one word, displaying spaces in between the words, record their family name in the same way leaving one space between each word. When it is displayed

there should be a space between each family name in the same sequence as collected.

Person with only a single name

Some people do not have a family name and a given name, but have only a single name by which they are known. For such individuals the name should be recorded in the Family name field and the Given name field left blank.

Registering a pseudonym

This process may be required in order to mask the identity of an individual—for example, in the case of HIV testing—where the subject of care has the right of anonymity in many jurisdictions. In this case a pseudonym (fictitious or partial name) will be entered in lieu of the person’s full or actual name. It is recommended that the subject be asked to record both the pseudonym (other name) as well as a legally known name (for example, identity card name).

Registering a pseudonym requires the local system to be able to identify which name is to be used or displayed as the preferred name for the purpose of the test. This might require the temporary change of the pseudonym name to preferred name, which is then changed back to the normal preferred name after the pseudonym use is over.

This issue also arises when those working in health care are being treated. It is a common requirement in relation to staff of an organisation or people in a comparatively small community.

Registered unnamed newborn babies

When registering a newborn, the mother’s family name should be used as the baby’s family name unless instructed otherwise by the mother. Unnamed babies should be recorded with a name usage value of Newborn name. This is a name that is not expected to persist but, unlike most temporary names, no follow-up is required during the birth episode of care to find the correct longer term name.

Registering an unidentified person

The default for unknown family name should be ‘unknown’ in all instances, and the name recorded as a name usage type of Other name (note: the name conditional use flag should be used to indicate that this is not a reliable name). A ‘fictitious’ family name such as ‘Doe’ shall not be created, as this is an actual family name. When the subject’s name becomes known, it shall be recorded as the ‘preferred’ name and the other name of ‘unknown’ shall not be overwritten.

Registering individuals from disaster sites

People from disaster sites being treated should be recorded with a name usage of 'other name'. Local business rules should be developed for consistent recording of disaster site patient details. Care should be taken not to use identical dummy data (family name, given name, date of birth, sex) for two or more subjects from a disaster site. For example, use of the surname 'Unknown1', 'Unknown2' in the family name can clearly differentiate between individuals. Some organisations use an injury description in the given name field to assist in identification. The use of a standard start to the name supports the use of search strategies to assist in finding individuals, especially when a large number of people need to be managed in a disaster. These names have restricted use as they are relevant only for the current episode of care and purpose and should be updated with the individual's real name as soon as possible.

Comments:

Often people use a variety of names, including legal names, married/maiden names, nicknames, assumed names, traditional names, and so forth. 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, agencies or establishments should ask the person for their full (formal) 'Given name' and 'Family name'. These may be different from the name that the person may prefer the agency or establishment workers to use in personal dealings. Agencies or establishments may choose to separately record the preferred name that the person wishes to be used by agency or establishment workers.

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, agencies or establishments should always ask the person to specify their first given name and their family name or surname separately. These should then be recorded as 'Given name' and 'Family name' as appropriate, regardless of the order in which they may be traditionally given.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Reference documents: Standards Australia 2014. AS 4846:2014 Person and provider identification in healthcare. Sydney: Standards Australia.

Given name

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—given name, text X[X(39)]
Synonymous names:	First name; Forename; Christian name; Middle name; Second name; Other given name
METEOR identifier:	613340
Registration status:	Health , Standard 05/10/2016 Tasmanian Health , Standard 27/06/2017 Aged Care , Standard 30/06/2023 Indigenous , Standard 07/04/2024
Definition:	The person's identifying name(s) within the family group or by which the person is socially identified, as represented by text.
Data Element Concept:	Person—given name
Value Domain:	Text X[X(39)]

Value domain attributes

Representational attributes

Representation class:	Text
Data type:	String
Format:	X[X(39)]
Maximum character length:	40

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	<p>A person's given name can be:</p> <ul style="list-style-type: none">• assigned by a person's parents shortly after birth or adoption or other cultural ceremony• acquired by a person in accordance with a due process defined in a state or territory Act relating to the registration of births, deaths, marriages and changes of name and sex, and for related purposes• attained by a person within the family group or by which that person is socially identified. <p>The agency or establishment should record all of the person's given name(s) on their information systems.</p>
Collection methods:	<p>There are no universal verification rules for a person's given name.</p> <p>Given name(s) should be recorded in the format preferred by the person. The format should be the same as that indicated by the person (for example, written on a form) or in the same format as that printed on an identification card (for example, on a Medicare card) to ensure consistent collection of name data.</p> <p>The following format may assist with data collection:</p> <p>What is the given name you would like to be known by?</p> <p>_____</p> <p>Are you known by any other given names that you would like recorded?</p> <p>If so, what are they?</p> <p>_____</p> <p>Whenever a person informs the agency or establishment of a change of given name (for example, prefers to be known by their middle name), the former name should be recorded according to the appropriate name usage type. Do not delete or overwrite a previous given name. For example 'Mary Georgina Smith' informs the hospital that she prefers to be known as 'Georgina'. Record 'Georgina' as her preferred given name and record 'Mary Georgina Smith' as the registered name.</p> <p>Multiple given names:</p> <p>All of the person's given names should be recorded, with each given name being recorded against the relevant Given name sequence number.</p> <p>Registering an unidentified client:</p> <p>If the person's given name is not known, the name used to identify that person shall not include a given name, that is the 'Given name' field shall be left blank. When the person's name becomes known, the actual name should</p>

be added as a complete full name. The previous name should be retained without a given name.

Use of first initial:

If the person's first given name is not known, but the first letter (initial) of the given name is known, record the first letter in the registered 'Given name' field. Do not record a full stop following the initial.

Persons with only a single name:

Some people do not have a family name and a given name: they have only a single name by which they are known. If the person has only a single name, record it in the 'Family name' field and leave the 'Given name' field blank.

Shortened or alternate first given name:

If the person uses a shortened version or an alternate version of their given name, the person shall have two names recorded. These being the full name and the name with the shorter version.

The individual will need to identify which name is to be used for registered or reporting purposes and which is the name by which that individual prefers to be known.

Example 1: The person's given name is Jennifer, but she prefers to be called Jenny. Both Jennifer and Jenny shall be recorded as given names, with Jenny recorded as the preferred name.

Example 2: The person's given name is 'Giovanni', and this is their legal name. However, the person prefers to be called 'John'. 'John' shall be recorded as the preferred name with a name usage type of Other name (alias), and 'Giovanni' as the Reporting name.

Punctuation:

If special characters (for example hyphens, umlauts or commas) form part of the given name they should be included without spaces. For example, hyphenated names such as Anne-Maree should be entered without a space before or after the hyphen, that is do not leave a space between the last letter of 'Anne' and the hyphen, or between the hyphen and the first letter of 'Maree'.

Spaces:

If the person has recorded their given name as more than one word, displaying spaces in between the words, each word is considered to be an additional given name, for example, Jean Claude Marcel Moreaux. That is Jean is one given name, Claude is another given name and Marcel is another given name.

Names not for continued use:

For cultural reasons, a person such as an Aboriginal or Torres Strait Islander may advise that they are no longer using the given name they had previously registered and are now using an alternative current name. Record the current name as the Registered name (and as the preferred given name) and the previously used given name as an Other name (alias) (with a Name conditional use flag of 'Name not to be used.')

Composite name:

If a person identifies their first name as being a composite word, both parts should be recorded under the first given name (rather than the first and second given name). For example, if 'Anne Marie Walker' notes her preferred given name to be 'Anne Marie', then 'Anne Marie' is recorded as the first given name, and the second given name is left blank.

Registering an unnamed newborn baby:

An unnamed newborn baby is to be registered using the mother's given name in conjunction with the prefix 'Baby of'. For example, if the baby's mother's given name is Fiona, then record 'Baby of Fiona' in the preferred 'Given name' field for the baby. This name is recorded under the Newborn name usage type. If a name is subsequently given, record the new name as the preferred given name and retain the newborn name.

Registering unnamed multiple births:

An unnamed (newborn) baby from a multiple birth should use their mother's given name plus a reference to the multiple births. For example, if the baby's mother's given name is 'Fiona' and a set of twins is to be registered, then record 'Twin 1 of Fiona' in the 'Given name' field for the first born baby, and 'Twin 2 of Fiona' in the 'Given name' field of the second born baby. Arabic numerals (1, 2, 3 ...) are used, not Roman numerals (I, II, III ...).

In the case of triplets or other multiple births the same logic applies. The following terms should be used for recording multiple births:

- Twin: use Twin; for example, Twin 1 of Fiona
- Triplet: use Trip; for example, Trip 1 of Fiona
- Quadruplet: use Quad; for example, Quad 1 of Fiona
- Quintuplet: use Quin; for example, Quin 1 of Fiona
- Sextuplet: use Sext; for example, Sext 1 of Fiona
- Septuplet: use Sept; for example, Sept 1 of Fiona.

These names should be recorded with a name usage type of Newborn name. When the babies are named, the actual names should be recorded as the preferred name. The newborn name is retained.

Ethnic Names:

A useful resource when capturing ethnic names is the referenced Naming Systems of Ethnic Groups produced by Centrelink, Canberra, AGPS.

Misspelled given names:

If the person's given name has been misspelled, update the given name field with the correct spelling and record the misspelled given name as Other name (alias) in the name usage type (with a Name conditional use flag of 'Unreliable information.'). Recording misspelled names is important for filing documents that may be issued with previous versions of the client's name. Discretion should be used regarding the degree of recording that is maintained.

Comments:

Often people use a variety of names, including legal names, married/maiden names, nicknames, assumed names, traditional names and so forth. 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, agencies or establishments should ask the person for their full (formal) Given name and Family name. These may be different from the name that the person may prefer the agency or establishment workers to use in personal dealings. Agencies or establishments may choose to separately record the preferred name that the person wishes to be used by agency or establishment workers.

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, agencies or establishments should always ask the person to specify their first given name and their family or surname separately. These should then be recorded as Given name and Family name as appropriate, regardless of the order in which they may be traditionally given.

Source and reference attributes

Submitting organisation:

Australian Institute of Health and Welfare

Reference documents:

Centrelink 2000. Naming systems of ethnic groups: a guide. Canberra: Australian Government Publishing Service.

Standards Australia 2014. AS 4846:2014 Person and provider identification in healthcare. Sydney: Standards Australia.

Date of birth

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—date of birth, DDMMYYYY
METEOR identifier:	287007
Registration status:	Health , Standard 04/05/2005 Housing assistance , Standard 20/06/2005 Community Services (retired) , Standard 25/08/2005 Early Childhood , Standard 21/05/2010 Homelessness , Standard 23/08/2010 Independent Hospital Pricing Authority (retired) , Standard 01/11/2012 Indigenous , Standard 11/08/2014 Disability , Standard 07/10/2014 WA Health , Standard 19/03/2015 National Health Performance Authority (retired) , Retired 01/07/2016 Tasmanian Health , Standard 31/08/2016 Children and Families , Standard 22/11/2016 Youth Justice , Standard 15/02/2022 Australian Teacher Workforce Data Oversight Board , Standard 30/08/2022 Aged Care , Standard 30/06/2023 Commonwealth Department of Health (retired) , Retired 19/08/2023 Australian Institute of Health and Welfare , Standard 23/09/2025
Definition:	The date of birth of the person, expressed as DDMMYYYY.
Data Element Concept:	Person—date of birth
Value Domain:	Date DDMMYYYY

Value domain attributes

Representational attributes

Representation class:	Date
Data type:	Date/Time
Format:	DDMMYYYY
Maximum character length:	8

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Data element attributes

Collection and usage attributes

Guide for use: If date of birth is not known or cannot be obtained, provision should be made to collect or estimate age. Collected or estimated age would usually be in years for adults, and to the nearest three months (or less) for children aged less than two years. Additionally, an estimated date flag or a date accuracy indicator should be reported in conjunction with all estimated dates of birth.

For data collections concerned with children's services, it is suggested that the estimated date of birth of children aged under 2 years should be reported to the nearest 3 month period, i.e. 0101, 0104, 0107, 0110 of the estimated year of birth. For example, a child who is thought to be aged 18 months in October of one year would have his/her estimated date of birth reported as 0104 of the previous year. Again, an estimated date flag or date accuracy indicator should be reported in conjunction with all estimated dates of birth.

Collection methods: Information on date of birth can be collected using the one question:

What is your/(the person's) date of birth?

In self-reported data collections, it is recommended that the following response format is used:

Date of birth: __ / __ / ____

This enables easy conversion to the preferred representational layout (DDMMYYYY).

For record identification and/or the derivation of other metadata items that require accurate date of birth information, estimated dates of birth should be identified by a date accuracy indicator to prevent inappropriate use of date of birth data. The linking of client records from diverse sources, the sharing of patient data, and data analysis for research and planning all rely heavily on the accuracy and integrity of the collected data. In order to maintain data integrity and the greatest possible accuracy an indication of the accuracy of the date collected is critical. The collection of an indicator of the accuracy of the date may be essential in confirming or refuting the positive identification of a person. For this reason it is strongly recommended that the data element Date—accuracy indicator, code AAA

also be recorded at the time of record creation to flag the accuracy of the data.

Comments: Privacy issues need to be taken into account in asking persons their date of birth.

Wherever possible and wherever appropriate, date of birth should be used rather than age because the actual date of birth allows a more precise calculation of age.

When date of birth is an estimated or default value, national health and community services collections typically use 0101 or 0107 or 3006 as the estimate or default for DDMM.

It is suggested that different rules for reporting data may apply when estimating the date of birth of children aged under 2 years because of the rapid growth and development of children within this age group which means that a child's development can vary considerably over the course of a year. Thus, more specific reporting of estimated age is suggested.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Origin: National Health Data Committee
National Community Services Data Committee

Reference documents: Standards Australia 2002. AS5017—2002 Health Care Client Identification. Sydney: Standards Australia
Standards Australia 2004. AS4846—2004 Health Care Provider Identification. Sydney: Standards Australia

Relational attributes

Implementation in Data Set Specifications: [Aged care person cluster](#)
[Aged Care, Standard 31/10/2025](#)

DSS specific information:

For the purposes of the Aged Care NBPDS, references to the collection of date of birth information about children are not applicable.

Gender of a person

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—gender, code X
METEOR identifier:	741842
Registration status:	Health , Standard 15/02/2022 Aged Care , Standard 30/06/2023 Australian Institute of Health and Welfare , Qualified 17/01/2024
Definition:	How a person describes their gender , as represented by a code.
Data Element Concept:	Person—gender
Value Domain:	Gender code X

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	String
Format:	X
Maximum character length:	1

	Value	Meaning
Permissible values:	1	Man, or boy, or male
	2	Woman, or girl, or female
	3	Non-binary
	4	Different term
	5	Prefer not to answer
Supplementary values:	9	Not stated/inadequately described

Collection and usage attributes

Guide for use: This Value Domain is based on the Australian Bureau of Statistics *Standard for sex, gender, variations of sex characteristics and sexual orientation variables* (ABS 2021). The values are defined as follows:

CODE 1 Man, or boy, or male

A person who describes their **gender** as man, or boy, or male.

CODE 2 Woman, or girl, or female

A person who describes their gender as woman, or girl, or female.

CODE 3 Non-binary

A person who describes their gender as non-binary.

CODE 4 Different term

A person who describes their gender as a term other than man/boy/male, woman/girl/female or non-binary.

CODE 5 Prefer not to answer

A person who prefers not to respond on how they describe their gender.

Alternative Codes

The ABS Standard also allows for the following Alternative Code system, which can be mapped to the Codes specified above:

CODE M Man, or boy, or male

CODE F Woman, or girl, or female

CODE X Non-binary

CODE T Different term

CODE Z Prefer not to answer

Mapping Codes

The ABS Standard also allows for the categories for gender to be mapped as follows:

- Man, or boy
Includes CODE 1
- Woman, or girl

Includes CODE 2

- Non-binary

Includes CODES 3 and 4

- Not stated

Includes CODES 5 and 9.

CODE 9 Not stated/inadequately described

This supplementary value is used to code inadequately described responses and non-responses for gender. It is not to be used on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.

Comments:

Former versions of this Value Domain contained only three permissible values:

CODE 1 Male

CODE 2 Female

CODE 3 Other (formerly 'Gender other/diverse')

Source and reference attributes

Submitting organisation:

Department of Health, Disability and Ageing

Origin:

ABS (Australian Bureau of Statistics) 2021. Standard for sex, gender, variations of sex characteristics and sexual orientation variables. Canberra: ABS, viewed 6 October

2021 <https://www.abs.gov.au/statistics/standards/standard-sex-gender-variations-sex-characteristics-and-sexual-orientation-variables/latest-release>

AGD (Attorney-General's Department) 2015. Australian Government Guidelines on the Recognition of Sex and Gender, viewed 6 October 2021 <https://www.ag.gov.au/rights-and-protections/publications/australian-government-guidelines-recognition-sex-and-gender>

Data element attributes

Collection and usage attributes

Guide for use:

Gender is a social and cultural concept. It is about social and cultural differences in identity, expression and experience as a man, boy, woman, girl,

or non-binary person. Non-binary is an umbrella term describing gender identities that are not exclusively male or female.

Gender includes the following concepts:

- Gender identity is about who a person feels themselves to be
- Gender expression is the way a person expresses their gender. A person's gender expression may also vary depending on the context, for instance expressing different genders at work and home
- Gender experience describes a person's alignment with the sex recorded for them at birth i.e. a cis experience or a trans experience.

The terms **sex** and gender are interrelated, and are often used interchangeably, however they are distinct concepts:

- Sex is understood in relation to sex characteristics. Sex recorded at birth refers to what was determined by sex characteristics observed at birth or in infancy
- Gender is about social and cultural differences in identity, expression and experience.

While they are related concepts, caution should be exercised when comparing counts for sex with those for gender.

"The preferred Australian Government approach is to collect and use gender information. Information regarding sex would ordinarily not be required and should only be collected where there is a legitimate need for that information and it is consistent with Australian Privacy Principle 3." (AGD 2015)

Collection methods:

Standard Question Module

The following standard question module is based on that recommended in the Australian Bureau of Statistics *Standard for sex, gender, variations of sex characteristics and sexual orientation variables* (ABS 2021):

How [do/does] [you/Person's name/they] describe [your/their] gender?

Gender refers to current gender, which may be different to sex recorded at birth and may be different to what is indicated on legal documents.

Please [tick/mark/select] one box:

- Man, or boy, or male
- Woman, or girl, or female
- Non-binary

[] [I/They] use a different term (please specify)

[] Prefer not to answer

Mandatory elements

The following elements must be included:

- The word 'gender' in the question to clearly articulate the concept being collected
- Label the response options "Man, or boy, or male", "Woman, or girl, or female", "Non-binary", "[I/they] use a different term (please specify)", and "Prefer not to answer"
- A write-in facility is available when the "[I/they] use a different term (please specify)" response option is selected
- Including a note to respondents that "Gender refers to current gender, which may be different to sex recorded at birth and may be different to what is indicated on legal documents"
- Only one response is permitted
- If this question is interviewer administered, the question must always be asked as written and no assumptions made by the interviewer.

Recommended elements

The following elements are recommended for inclusion:

- Use inclusive language (e.g. "they" or "their" rather than "he/she" or "his/her")
- If both sex and gender questions are included, ask the sex question first and note that a separate question on gender is also asked
- If both sex and gender questions are included, ask both on the same page if practical.

The *Australian Government Guidelines on the Recognition of Sex and Gender* recommend "departments and agencies should refrain from making assumptions about a person's sex and/or gender identity based on indicators such as their name, voice or appearance" (AGD 2015.)

The inclusion of the write-in facility for 'Different term' as a response option recognises that there are a range of terms used to describe gender which is neither male nor female, and enhances data quality. Where the "Different term" code has been selected for gender, the data element [Person—gender, text X\[X\(99\)\]](#) may be used to capture any further (optional) specification of gender descriptors.

Note: Where written responses for CODE 4 (T) 'Different term' indicate a variation of one of 'Man, or boy, or male', 'Woman, or girl, or female' or 'Non-binary', those responses may be coded to the associated label.

Comments: A person's gender may stay the same or can change over the course of their lifetime. The gender response option chosen will reflect a person's gender at that point in time. Some people may not identify with a specific gender or with the concept of gender at all.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: ABS (Australian Bureau of Statistics) 2021. Standard for sex, gender, variations of sex characteristics and sexual orientation variables. Canberra: ABS, viewed 6 October 2021 <https://www.abs.gov.au/statistics/standards/standard-sex-gender-variations-sex-characteristics-and-sexual-orientation-variables/latest-release>

AGD (Attorney-General's Department) 2015. Australian Government Guidelines on the Recognition of Sex and Gender, viewed 6 October 2021 <https://www.ag.gov.au/rights-and-protections/publications/australian-government-guidelines-recognition-sex-and-gender>

Relational attributes

Implementation in Data Set Specifications: [Aged care person cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:

This data element is collected on a Conditional basis with the element [Person—sex, code X](#). Data must be collected for at least one of the two elements, either sex or gender.

Where both sex and gender are known, both should be collected.

Sex of a person

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—sex, code X
Synonymous names:	Sex characteristics of a person
METEOR identifier:	741686
Registration status:	Health , Standard 15/02/2022 Youth Justice , Standard 15/02/2022 Aged Care , Standard 30/06/2023 Indigenous , Standard 27/08/2023 Housing assistance , Recorded 19/06/2024 Australian Institute of Health and Welfare , Standard 23/09/2025
Definition:	The sex of a person, as represented by a code.
Data Element Concept:	Person—sex
Value Domain:	Sex code X

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	String	
Format:	X	
Maximum character length:	1	
	Value	Meaning
Permissible values:	1	Male
	2	Female
	3	Another term
Supplementary values:	9	Not stated/inadequately described

Collection and usage attributes

Guide for use:	<p>This Value Domain is based on the Australian Bureau of Statistics <i>Standard for sex, gender, variations of sex characteristics and sexual orientation variables</i> (ABS 2021). The values are defined as follows:</p> <p>CODE 1 Male</p> <p>Persons whose sex at birth or infancy was recorded as male, or who reported their sex as male at the time of collection.</p> <p>CODE 2 Female</p> <p>Persons whose sex at birth or infancy was recorded as female, or who reported their sex as female at the time of collection.</p> <p>CODE 3 Another term</p> <p>Persons whose sex at birth or infancy was recorded as another term (not male or female), or who reported their sex as another term (not male or female) at the time of collection.</p> <p>The value meaning of "Another term" has been assigned to Code 3 for this value domain, which replaces "Other" and "Intersex or indeterminate" in previous versions of this element. The third option recognises that across Australian jurisdictions and elsewhere there are a range of terms used.</p> <p>CODE 9 Not stated/inadequately described</p> <p>This supplementary value is used to code inadequately described responses and non-responses for sex. It is not to be used on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.</p> <p>Alternative Codes</p> <p>The Australian Bureau of Statistics (ABS) <i>Standard for sex, gender, variations of sex characteristics and sexual orientation variables</i> (ABS 2021) includes the following Alternative Code system:</p> <p>CODE M Male</p> <p>CODE F Female</p> <p>CODE X Another term</p> <p>These alternate Codes can be mapped to the Codes above.</p>
Comments:	<p>A person's sex is based upon their sex characteristics, such as their chromosomes, hormones and reproductive organs. While typically based upon the sex characteristics observed and recorded at birth or in infancy, a person's reported sex can change over the course of their lifetime and may differ from their sex recorded at birth.</p>

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
Origin:	<p>ABS (Australian Bureau of Statistics) 2021. Standard for sex, gender, variations of sex characteristics and sexual orientation variables. Canberra: ABS, viewed 6 October 2021 https://www.abs.gov.au/statistics/standards/standard-sex-gender-variations-sex-characteristics-and-sexual-orientation-variables/latest-release</p> <p>AGD (Attorney-General's Department) 2015. Australian Government Guidelines on the Recognition of Sex and Gender, viewed 6 October 2021 https://www.ag.gov.au/rights-and-protections/publications/australian-government-guidelines-recognition-sex-and-gender</p>

Data element attributes

Collection and usage attributes

Guide for use:	<p>The terms sex and gender are interrelated, and are often used interchangeably, however they are distinct concepts:</p> <ul style="list-style-type: none">• Sex is understood in relation to sex characteristics. Sex recorded at birth refers to what was determined by sex characteristics observed at birth or in infancy• Gender is about social and cultural differences in identity, expression and experience. <p>While they are related concepts, caution should be exercised when comparing counts for sex with those for gender.</p> <p>“The preferred Australian Government approach is to collect and use gender information. Information regarding sex would ordinarily not be required and should only be collected where there is a legitimate need for that information and it is consistent with Australian Privacy Principle 3.” (AGD 2015)</p>
Collection methods:	<p>This Data Element may be used to collect <i>either</i> sex recorded at birth <i>or</i> sex reported at the time of collection. This information should be specified in the Data Set Specific Information in order to provide transparency about which type of data was collected.</p> <p>The Australian Bureau of Statistics (ABS) <i>Standard for sex, gender, variations of sex characteristics and sexual orientation variables</i> (ABS 2021) recommends that where data on sex is collected, the preferred question should relate to sex recorded at birth. Sex recorded at birth refers to what</p>

was determined by sex characteristics observed at birth or in infancy. This is an important indicator for statistical analysis in births and deaths, health statistics, calculating fertility rates and deriving counts for cis and trans populations.

A data collection may instead collect data on a person's sex reported at the time of collection, rather than their sex recorded at birth. However, there are advantages of sex recorded at birth as the sex question and further data that can be derived when using sex recorded at birth as the sex question.

Caution should be exercised when comparing counts for sex of a person recorded at birth and the sex of a person reported at the time of collection, as a person's reported sex may change over the course of their lifetime. Also, as the terms sex and gender are often used interchangeably, a respondent might provide a gender response to a sex question.

Standard questions

Sex recorded at birth

The ABS recommends the following standard question structure:

What was [your/Person's name/their] sex recorded at birth? Please [tick/mark/select] one box

Male

Female

Another term (please specify)

Mandatory elements

The following elements must be included:

- The words "sex recorded at birth" in the question to clearly articulate the concept being collected
- Label the response options "Male", "Female", and "Another term (please specify)"
- A write-in facility is available when the "Another term (please specify)" response option is selected
- Only one response is permitted
- If this question is interviewer administered, the question must always be asked as written and no assumptions made by the interviewer.

Recommended elements

The following elements are recommended:

- Use inclusive language (e.g. "they" or "their" rather than "he/she" or "his/her")

- If both sex and gender questions are included, ask the sex question first and note that a separate question on gender is also asked
- If both sex and gender questions are included, ask both on the same page if practical.

Sex reported at the time of collection

The ABS recommends the following standard question structure:

What is [your/Person's name/their] sex? Please [tick/mark/select] one box.

Male

Female

Another term (please specify)

Mandatory elements

The following elements must be included:

- The word "sex" in the question to clearly articulate the concept being collected
- Label the response options "Male", "Female", and "Another term (please specify)"
- A write-in facility is available when the "Another term (please specify)" response option is selected
- Only one response is permitted
- If this question is interviewer administered, the question must always be asked as written and no assumptions made by the interviewer.

Recommended elements

The following elements are recommended for inclusion:

- Use inclusive language (e.g. "they" or "their" rather than "he/she" or "his/her")
- If both sex and gender questions are included, ask the sex question first and note that a separate question on gender is also asked
- If both sex and gender questions are included, ask both on the same page if practical.

The *Australian Government Guidelines on the Recognition of Sex and Gender* recommend "departments and agencies should refrain from making assumptions about a person's sex and/or gender identity based on indicators such as their name, voice or appearance" (AGD 2015.)

The inclusion of the write-in facility for "Another term" as a third response option recognises that there are a range of terms used to describe sex which is neither male nor female, and enhances data quality. Where the "Another term" code has been selected for sex, the data element [Person—sex, text](#)

[X\[X\(99\)\]](#) may be used to capture any further (optional) specification of sex descriptors.

Comments: Where this data element is used to record sex reported at the time of collection, the data may not be used to derive cis and trans counts through the 'two-step method'.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Origin: ABS (Australian Bureau of Statistics) 2021. Standard for sex, gender, variations of sex characteristics and sexual orientation variables. Canberra: ABS, viewed 25 February 2021
<https://www.abs.gov.au/statistics/standards/standard-sex-gender-variations-sex-characteristics-and-sexual-orientation-variables/latest-release>

AGD (Attorney-General's Department) 2015. Australian Government Guidelines on the Recognition of Sex and Gender, viewed 26 February 2021
<https://www.ag.gov.au/rights-and-protections/publications/australian-government-guidelines-recognition-sex-and-gender>

Relational attributes

Implementation in Data Set Specifications: [Aged care person cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:

This data element is collected on a Conditional basis with the element [Person—gender, code X](#). Data must be collected for at least one of the two elements, either sex or gender.

Where both sex and gender are known, both should be collected.

DSS specific information:

This data element is used to collect a person's sex as recorded at birth. Where sex at birth is not available, [Person—gender, code X](#) only should be collected.

24/09/2025

Indigenous status

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—Indigenous status, code N
METEOR identifier:	602543
Registration status:	Health , Standard 19/11/2015 Independent Hospital Pricing Authority (retired) , Qualified 23/11/2015 Disability , Standard 29/02/2016 Housing assistance , Standard 30/08/2017 Indigenous , Standard 16/10/2017 Homelessness , Standard 10/08/2018 Children and Families , Standard 20/01/2021 Youth Justice , Standard 15/02/2022 Aged Care , Standard 30/06/2023 Tasmanian Health , Superseded 10/11/2023 Early Childhood , Superseded 12/08/2025
Definition:	Whether a person identifies as being of Aboriginal or Torres Strait Islander origin, as represented by a code.
Context:	The purpose of this data element is to provide information about whether persons identify as being of Aboriginal and/or Torres Strait Islander origin.
Data Element Concept:	Person—Indigenous status
Value Domain:	Indigenous status code N

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N	
Maximum character length:	1	
	Value	Meaning
Permissible values:	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
Supplementary values:	9	Not stated/inadequately described

Collection and usage attributes

Guide for use: This metadata item is based on the Australian Bureau of Statistics (ABS) standard for Indigenous status. For detailed advice on its use and application please refer to the ABS website as indicated in the Reference documents.

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/inadequately described' responses. The classification is as follows:

Indigenous Australians:

- Aboriginal but not Torres Strait Islander origin.
- Torres Strait Islander but not Aboriginal origin.
- Both Aboriginal and Torres Strait Islander origin.

Non-Indigenous Australians:

- Neither Aboriginal nor Torres Strait Islander origin.

Not stated/inadequately described:

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 the answer cannot be determined without clarification from the respondent (for example, 'No' and 'Yes, Aboriginal' are both selected).
- Where an answer was declined.
- Where the question was not able to be asked because the client was unable to communicate or a person who knows the client was not available.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Reference documents: Australian Bureau of Statistics 2014. Indigenous Status Standard Version 1.5, Canberra. Viewed 29 September 2015, <http://www.abs.gov.au/ausstats/abs@.nsf/a866861f12e106e0ca256a38002791fa/5609d66dcc94996eca257d6a000fb3fc!OpenDocument>

Australian Institute of Health and Welfare 2010. National best practice guidelines for collecting Indigenous status in health data sets. Cat. no. IHW 29. Canberra: AIHW. Viewed 29 September 2015, <http://www.aihw.gov.au/publication-detail/?id=6442468342>.

Data element attributes

Collection and usage attributes

Guide for use: This metadata item is based on the Australian Bureau of Statistics (ABS) standard for Indigenous status. For detailed advice on its use and application please refer to the ABS website as indicated in the Reference documents.

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

- If the respondent answers 'Yes, Aboriginal' and 'Yes, Torres Strait Islander', then their response should be coded to 'Yes, both Aboriginal and Torres Strait Islander origin'.
- If the respondent answers 'No' and one or more of the following:
 - 'Yes, Aboriginal'
 - 'Yes, Torres Strait Islander'
 - 'Yes, both Aboriginal and Torres Strait Islander'

then the response should be coded to 'Not stated/inadequately described' if the response cannot be clarified with the respondent.

Collection methods: The following information provides advice on the recommended way to ask the Indigenous status question.

Self-enumerated collections

For self-enumerated collections (for example, self-completed questionnaires or forms), the following question is recommended:

Q1. [Are you] [Is the person] [Is (name)] of Aboriginal or Torres Strait Islander origin?

- No
- Yes, Aboriginal
- Yes, Torres Strait Islander

If [you] [the person] [(name)] are of both Aboriginal and Torres Strait Islander origin, answer using both 'Yes' options.

This approach may be problematic in some data collections, for example when data are collected using screen based data capture systems. An additional response category of 'Yes, both Aboriginal and Torres Strait Islander' may be included if this better suits the data collection practices of the agency or establishment concerned.

If the Indigenous status question has not been completed on a returned form, this should be followed up and confirmed with the person.

Interviewer-conducted collections

For interviewer-conducted collections in which the Indigenous status of one person is collected, the following question set is recommended:

Q1. Are you of Aboriginal or Torres Strait Islander origin?

- Yes
- No (no more questions)

Q2. Are you of Aboriginal origin, Torres Strait Islander origin, or both?

- Aboriginal
- Torres Strait Islander
- Both Aboriginal and Torres Strait Islander

The first question is used to sequence out non-Indigenous Australians. The second question is used to determine the specific Aboriginal and/or Torres Strait Islander origin of the person. A benefit of this approach is that the interviewer is not required to prompt the respondent with response categories. The 'Both Aboriginal and Torres Strait Islander' response category can be included or excluded in interviewer conducted collections depending on which option best suits the data collection practices of the agency concerned. Including the additional response category ensures that respondents are aware of the option to identify as being of both Aboriginal and Torres Strait Islander origin.

Various articulations of the standard question are recommended to address the following circumstances:

Person is present and answers

This question wording is recommended where it is known that the person being interviewed is the subject:

Q1. Are you of Aboriginal or Torres Strait Islander origin?

Q2. Are you of Aboriginal origin, Torres Strait Islander origin, or both?

Person is not present and someone else who knows the person well answers

The following question wording is recommended when another member of the household answers for the person. Examples of such incidents include: parents answering for children, or relatives answering in hospital situations.

Q1. Is [the person] [(name)] of Aboriginal or Torres Strait Islander origin?

Q2. Is [the person] [(name)] of Aboriginal origin, Torres Strait Islander origin, or both?

Person is deceased and someone else answers on their behalf (for example, death information form)

In these circumstances a close relative or friend should answer. Only if a relative or friend is unavailable should the undertaker or other such person answer. The suggested question wording follows:

Q1. Was [the person] [(name)] of Aboriginal or Torres Strait Islander origin?

Q2. Was [the person] [(name)] of Aboriginal origin, Torres Strait Islander origin, or both?

Person is an infant and parents answer (e.g. perinatal information form)

In this circumstance it is recommended that parents are asked:

Q1. Is [the baby's] [(name)'s] mother of Aboriginal or Torres Strait Islander origin?

Q2. Is [the baby's] [(name)'s] mother of Aboriginal origin, Torres Strait Islander origin, or both?

and

Q1. Is [the baby's] [(name)'s] father of Aboriginal or Torres Strait Islander origin?

Q2. Is [the baby's] [(name)'s] father of Aboriginal origin, Torres Strait Islander origin, or both?

For interview conducted collections in which the Indigenous Status of more than one person is collected from a household representative, the following question set is recommended:

Q1. Is anyone who (usually lives here) (or) (is visiting here) of Aboriginal or Torres Strait Islander origin?

- Yes
- No

Q2. Who are they?

Question 3 is asked of each person identified as being of Aboriginal or Torres Strait Islander origin.

Q3. [Are you] [Is (name)] of Aboriginal origin, Torres Strait Islander origin, or both?

- Aboriginal
- Torres Strait Islander

- Both Aboriginal and Torres Strait Islander

The first question is used to sequence out households in which no Aboriginal and/or Torres Strait Islander people usually live (or are visiting). The second question is used to identify those usual residents (and visitors) of Aboriginal or Torres Strait Islander origin. This approach eliminates the need to repeatedly ask the Indigenous status question of each individual in a household when data are collected on a single household form. It is particularly advantageous when collecting from areas with a large proportion of households with non-Indigenous Australians.

For both self-enumerated collections and interviewer-conducted collections

The Indigenous status question can be used in circumstances where a close relative, friend, or another member of the household is answering on behalf of the subject. It is strongly recommended that the question be asked directly wherever possible.

When the subject person is not present, the person answering for them should be in a position to do so, that is, this person must know the person about whom the question is being asked well and feel confident to provide accurate information about them.

The Indigenous status question must always be asked regardless of data collectors' perceptions based on appearance or other factors.

The Indigenous status question may only be left unanswered in the following circumstances:

- Where the person declined to answer
- Where the question was not able to be asked because the client was unable to communicate or a person who knows the client was not available.

Comments:

The following definition, commonly known as 'The Commonwealth Definition', was given in a High Court judgement in the case of *Commonwealth v Tasmania* (1983) 46 ALR 625.

'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 Commonwealth definition:

- descent;
- self-identification; and
- community acceptance.

In practice, it is not feasible to collect information on the community acceptance part of this definition in general purpose statistical and

administrative collections and therefore standard questions on Indigenous status relate to descent and self-identification only.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Reference documents: Australian Bureau of Statistics 2014. Indigenous Status Standard Version 1.5, Canberra. Viewed 29 September 2015, <http://www.abs.gov.au/ausstats/abs@.nsf/a866861f12e106e0ca256a38002791fa/5609d66dcc94996eca257d6a000fb3fc!OpenDocument>.

Australian Institute of Health and Welfare 2010. National best practice guidelines for collecting Indigenous status in health data sets. Cat. no. IHW 29. Canberra: AIHW. Viewed 29 September 2015, <http://www.aihw.gov.au/publication-detail/?id=6442468342>.

Usual accommodation type

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—accommodation type, usual code N[N]
METEOR identifier:	807922
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The type of accommodation setting in which a person usually lives/lived, as represented by a code.
Context:	Aged Care.
Data Element Concept:	Person—accommodation type
Value Domain:	Usual accommodation type code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Private residence
	2	Residential care home
	3	Independent living within a retirement village
	4	Other specialised/supported accommodation
	5	Indigenous community or settlement
	6	Boarding house, hostel or similar accommodation
	7	Crisis or transitional housing
	8	Public place

	20	Other
Supplementary values:	97	Not applicable
	98	Unknown/unable to be determined
	99	Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 1 Private residence

This code applies to people living a house, apartment or other dwelling with private facilities.

CODE 2 Residential care home

This code applies to people living in a residential care home (also known as a nursing or aged care facility). This does not include people who use residential aged care on a respite basis and maintain a usual living arrangement elsewhere).

CODE 3 Independent living within a retirement village

This code applies to people living in a self-care living unit within a retirement village (irrespective of the type of tenure held over the residence). Independent living within retirement villages is generally for people who are independent and able to care for themselves.

CODE 4 Other specialised/supported accommodation

This code applies to people living in settings where care is provided by staff on a live in or rostered basis, excluding residential aged care. It can consist of:

- supported living within a retirement village
- disability support or disability supported accommodation, such as group homes for people with disability or Specialist Disability Accommodation
- alcohol/other drug treatment units in psychiatric hospitals
- mental health units and forensic health units of corrective services systems
- specialised mental health community-based residential support services
- specialised dementia care units (SDCUs)
- other specialised rehabilitation or institutional settings

CODE 5 Indigenous community or settlement

This code applies to people who usually reside within an Aboriginal/Torres Strait Islander community or settlement. This can include any type of residence within those communities.

CODE 6 Boarding house, hostel or similar accommodation

This code applies to people who usually reside in buildings or rooms for lodging, generally consisting of a bedroom that is not self-contained, and usually shares a common kitchen and/or bathroom. Boarding house bedrooms are usually accessed via a common entrance such as a foyer or hallway. Some nursing homes have historically been known as hostels; these are included under residential aged care.

CODE 7 Crisis or transitional housing

This code applies to people living in short-term or temporary accommodation. It includes crisis, emergency and transitional housing such as night shelters, women's refuges and other agency-led temporary arrangements for accommodation. Accommodation may be linked to external support through another agency.

CODE 8 Public place

This code applies to people experiencing homelessness. For example, people may be sleeping rough, squatting, in improvised dwellings, using cars or railway carriages or sleeping in parks.

CODE 20 Other

This code applies to people living in an accommodation setting not specified above. For example, this can include people living in an adult correctional facility, prison or immigration detention centre.

CODE 97 Not applicable

This code applies where there was no assessment of the person's accommodation setting.

CODE 98 Unknown/unable to be determined

This code applies where the usual accommodation is unknown or unable to be determined.

CODE 99 Not stated/inadequately described

This code is not to be used on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.

Source and reference attributes

Submitting
organisation:

Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: 'Usual' is defined as the type of accommodation the person has lived in for the most amount of time over the past three months prior. For example, if a person stays in a particular place of accommodation for four or more days a week over the period, that place of accommodation would be the person's type of usual accommodation. In practice, receiving an answer to questioning about a person's usual accommodation setting may be difficult to achieve. The place the person perceives as their usual accommodation will often prove to be the best approximation of their type of usual accommodation.

Source and reference attributes

Submitting
organisation:

Department of Health, Disability and Ageing

Origin:

Australian Institute of Health and Welfare (2002) [Aged care assessment program data dictionary version 1.0](#), AIHW, Australian Government, accessed 21 February 2023.

Country of birth

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—country of birth, code (SACC 2016) NNNN
METEOR identifier:	659454
Registration status:	Health , Standard 06/12/2016 Tasmanian Health , Standard 27/06/2017 Disability , Standard 15/12/2017 Commonwealth Department of Social Services (retired) , Standard 20/06/2018 Homelessness , Standard 10/08/2018 Youth Justice , Standard 15/02/2022 Australian Teacher Workforce Data Oversight Board , Standard 30/08/2022 Aged Care , Standard 30/06/2023 Housing assistance , Recorded 19/06/2024 Australian Institute of Health and Welfare , Standard 23/09/2025
Definition:	The country in which the person was born, as represented by a code.
Data Element Concept:	Person—country of birth
Value Domain:	Country code (SACC 2016) NNNN

Value domain attributes

Representational attributes

Classification scheme:	Standard Australian Classification of Countries 2016
Representation class:	Code
Data type:	Number
Format:	NNNN
Maximum character length:	4

Collection and usage attributes

Guide for use: The Standard Australian Classification of Countries 2016 (SACC) is a four-digit, three-level hierarchical structure specifying major group, minor group and country.

A country, even if it comprises other discrete political entities such as states, is treated as a single unit for all data domain purposes. Parts of a political entity are not included in different groups. Thus, Hawaii is included in Northern America (as part of the identified country United States of America), despite being geographically close to and having similar social and cultural characteristics as the units classified to Polynesia.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Data element attributes

Collection and usage attributes

Collection methods: Some data collections ask respondents to specify their country of birth. In others, a pre-determined set of countries is specified as part of the question, usually accompanied by an 'other (please specify)' category.

Recommended questions are:

In which country were you/was the person/was (name) born?

Australia

Other (please specify) ...

or

In which country were you/was the person/was (name) born?

Australia

England

New Zealand

India

Italy
Vietnam
Philippines
South Africa
Scotland
Malaysia
Other (please specify) ...

The option list for this question includes countries according to their statistical frequency in Australia, according to data from the Census of Population and Housing. Exceptions are made for countries such as 'United Kingdom' and 'China', as they are likely to reduce the level of detail that is possible to be coded to the Standard Australian Classification of Countries (SACC).

Comments: This metadata item is based on the Australian Bureau of Statistics' Country of Birth standard for collecting, processing and presenting country of birth statistics (ABS 2016a).

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Reference documents: Australian Bureau of Statistics (ABS) 2016a. [Country of Birth Standard, 2016](#). ABS cat. no. 1200.0.55.004. Canberra: ABS.

ABS 2016b. [Standard Australian Classification of Countries \(SACC\) 2016](#). ABS cat. no. 1269.0. Canberra: ABS.

Preferred language

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—preferred language, code (ASCL 2025) NN[NNNNNN]
METEOR identifier:	805306
Registration status:	Health, Qualified 09/07/2025 Aged Care, Standard 31/10/2025
Definition:	The language (including sign language) most preferred by a person for communication, as represented by a code.
Data Element Concept:	Person—preferred language
Value Domain:	Language code (ASCL 2025) NN[NNNNNN]

Value domain attributes

Representational attributes

Classification scheme:	Australian Standard Classification of Languages 2025
Representation class:	Code
Data type:	Number
Format:	NN[NNNNNN]
Maximum character length:	8

Collection and usage attributes

Guide for use:	The ASCL has a four-level hierarchical structure, as follows: Language family group (two-digit codes) The language family group level is the highest and most general level of the classification. The language family group level is represented by a two-digit code and is the first and broadest level of the classification. Each language family is made up of sub family groups which have originated from the same common ancestral language. The 2025 classification has 16 language family groups:
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Sub family group (four-digit codes)

Sub family groups (four-digit codes) are the second level of the 2025 classification. The classification contains 49 sub family groups, created by aggregating the most closely related narrow groups. Within each sub family group, narrow groups are ordered by the similarity of the location where the languages originated (geographic proximity).

Narrow group (six-digit codes)

Narrow groups (six-digit codes) make up the third level of the classification. The 2025 classification contains 95 narrow groups, created by aggregating the most closely related languages. Within narrow groups, language groups have been organised alphabetically.

Language groups (eight-digit codes)

The fourth and most detailed level of the classification is the language level (eight-digit codes). There are 444 Languages at this level of the classification, including 204 Aboriginal and Torres Strait Islander languages.

For example, the Lithuanian language has a code of 13151112. In this case 13 denotes that it is an Indo-European Language, 1315 that it is a Balto-Slavic Language, and 131511 that it is a Baltic Language. The Pintupi Aboriginal language is coded as 11111218. In this case 11 denotes that it is an Aboriginal and Torres Strait Islander Language, 1111 that it is a Pama-Nyungan Language, and 111112 that it is a South West Language, Western Desert.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Data element attributes

Collection and usage attributes

Guide for use: This may be a language other than English even where the person can speak fluent English.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Reference documents: ABS (Australian Bureau of Statistics) 2025. [Australian Standard Classification of Languages \(ASCL\)](#). Viewed 9 April 2025.
ABS 2016. [Language Standards](#). Viewed 9 April 2025.

Relational attributes

Implementation in Data [Aged care person cluster](#)
Set Specifications: [Aged Care](#), Standard 31/10/2025

DSS specific information:

DSS specific information –This data item is distinct from the Aged Care NBPDS item [Person—main language other than English spoken at home, code \(ASCL 2025\) NN\[NNNNNN\]](#) which captures the language reported by a person as the main language other than English spoken by that person in his/her home (or most recent private residential setting occupied by the person) to communicate with other residents of the home or setting and regular visitors.

Informal carer existence indicator

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—informal carer existence indicator, yes/no/not applicable/unknown/not stated/inadequately described code N[N]
Synonymous names:	Informal carer availability; Informal carer existence flag; Carer arrangements (informal)
METEOR identifier:	787901
Registration status:	Aged Care , Standard 20/06/2023
Definition:	An indicator of whether a person has an informal carer , as represented by a code.
Data Element Concept:	Person—informal carer existence indicator
Value Domain:	Yes/no/not applicable/unknown/not stated/inadequately described code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Boolean
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Yes
	2	No
Supplementary values:	97	Not applicable
	98	Unknown
	99	Not stated/inadequately described

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Data element attributes

Collection and usage attributes

Guide for use: **Informal carers** may include those people who receive a pension or benefit for their caring role and people providing care under family care agreements. Excluded from the definition of informal carers are volunteers organised by formal services and paid workers. This metadata item is purely descriptive of a client's circumstances. It is not intended to reflect whether the informal carer is considered by the service provider to be capable of undertaking the caring role. The expressed views of the client and/or their carer should be used as the basis for determining whether the client is recorded as having an informal carer or not.

When asking a client whether they have an informal carer, it is important for agencies or establishments to recognise that a carer does not always live with the person for whom they care. That is, a person providing significant care and assistance to the client does not have to live with the client in order to be called an informal carer.

Collection methods: Agencies or establishments and service providers may collect this item at the beginning of each service episode and/or assess this information at subsequent assessments.

Some agencies, establishments/providers may record this information historically so that they can track changes over time. Historical recording refers to the practice of maintaining a record of changes over time where each change is accompanied by the appropriate date.

Examples of questions that have been used for data collection include:

Home and Community Care (HACC) MDS
'Do you have someone who helps look after you?'

Disability Services NMDS
*'Does the service user have an informal carer, such as **family** member, friend or neighbour, who provides care and assistance on a regular and sustained basis?'*

Comments: Recent years have witnessed a growing recognition of the critical role that informal support networks play in caring for frail older people and people with disabilities within the community. Not only are informal carers

responsible for maintaining people with often high levels of functional dependence within the community, but the absence of an informal carer is a significant risk factor contributing to institutionalisation. 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.

This definition of informal carer is not the same as the Australian Bureau of Statistics (ABS) definition of carer or primary carer used in the Survey of Disability, Ageing and Carers (SDAC). The ABS definitions require that the carer has or will provide care for a certain amount of time and that they provide certain types of care. In SDAC, a carer is defined as a person of any age who provides any informal assistance, in terms of help or supervision, to an older person or someone who has a disability or a long-term health condition. This assistance has been, or is likely to be, ongoing for at least six months. A primary carer is someone aged 15 years and over who provides the most informal assistance to a person with disability with one or more of the core activities of mobility, self-care and communication. These definitions may not be appropriate for community services agencies wishing to obtain information about a person's carer regardless of the amount of time that care is for, or the types of care provided. Information such as the amount of time for which care is provided can of course be collected separately but, if it were not needed, it would place a burden on service providers.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Interpersonal relationship of carer to care recipient

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—informal carer relationship to care recipient, code N[N]
Synonymous names:	Carer relationship to care recipient
METEOR identifier:	748846
Registration status:	Health , Standard 05/10/2022 Aged Care , Standard 30/06/2023
Definition:	The relationship of the main informal carer to the person for whom they care, as represented by a code.
Data Element Concept:	Person—Informal carer relationship to care recipient
Value Domain:	Interpersonal carer relationship code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	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 female relative
	10	Other male relative
	11	Female friend/neighbour
	12	Male friend/neighbour
Supplementary values:	97	Not applicable
	98	Unknown/unable to be determined
	99	Not stated/inadequately described

Collection and usage attributes

Guide for use: This code set should always be used to record the relationship of the carer to the person for whom they care.

CODE 1 Wife/female partner

Includes married and de facto partners who are carers.

CODE 2 Husband/male partner

Includes married and de facto partners who are carers.

CODE 3 Mother

Includes step- and foster parents.

CODE 4 Father

Includes step- and foster parents.

CODE 5 Daughter

Includes stepchildren.

CODE 6 Son

Includes stepchildren.

CODE 7 Daughter-in-law

CODE 8 Son-in-law

CODE 9 Other female relative

CODE 10 Other male relative

CODE 11 Female friend/neighbour

CODE 12 Male friend/neighbour

CODE 97 Not applicable

This code is used where the person's informal carer is a paid worker or a volunteer organised by formal services.

CODE 98 Unknown/unable to be determined

This code is used where the assessor or person collecting the information could not determine whether the person had a carer or what their relationship was.

CODE 99 Not stated/inadequately described

This code should only be recorded where the carer has not been identified. This code is not for use in primary data collections.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Origin: Australian Institute of Health and Welfare 2016. Disability Services National Minimum Data Set: data guide, July 2016. Cat. no. DAT 4. Canberra: AIHW.

Data element attributes

Collection and usage attributes

Comments: Information about this relationship assists in the establishment of a profile of informal caring relationships and the assistance provided to maintain and support those relationships. As such, it increases knowledge about the dynamics of caring and provides an insight into the gender and inter-generational patterns of informal care giving in the community.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Relational attributes

Implementation in Data [Aged care person cluster](#)
Set Specifications: [Aged Care, Standard 31/10/2025](#)

Conditional obligation:

This item should only be completed if CODE 1 Yes was selected for [Person—informal carer existence indicator, yes/no/not applicable/unknown/not stated/inadequately described code N\[N\]](#).

DSS specific information:

For the purposes of the Aged Care NMDS:

CODE 3 Mother should also include step mothers and mothers-in-law.

CODE 4 Father should also include step-fathers and fathers-in-law.

CODE 99 should also include non-binary, a different term, or prefer not to answer with respect to the person's sex or gender.

Person living arrangement

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—living arrangement, code N[N]
METEOR identifier:	807928
Registration status:	Aged Care , Standard 31/10/2025
Definition:	Whether a person usually resides alone or with others, as represented by a code.
Data Element Concept:	Person—living arrangement
Value Domain:	Living arrangement code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	String
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Lives alone
	2	Lives with family – partner only
	3	Lives with family – other
	4	Lives with others
	10	Other
Supplementary values:	97	Not applicable
	98	Unknown/unable to be determined
	99	Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 1 Lives alone

The person lives on their own. A person living alone in a private room within a retirement village, aged care home, boarding house etc. should be coded as CODE 04 'Lives with others', except in those instances in which they are sharing their own private space/room within the premises with a family member (in which case code as CODE 02 'Lives with family – partner only' or CODE 03 'Lives with family – other').

CODE 2 Lives with family – partner only

The person lives with their partner only. Includes registered marriages and de facto relationships.

CODE 3 Lives with family – other

The person lives with family members. Family members may include the person's partner but if they live with their partner only, the person should be coded as CODE 2 'Lives with family – partner only'. If the person's household includes both family and non-family members, the person should be coded as living with family.

CODE 4 Lives with others

The person lives with non-family members.

CODE 10 Other

The person's living arrangements are not described by CODE 1–CODE 4.

CODE 97 Not applicable

This code is used where an assessment does not include this question.

CODE 98 Unknown/unable to be determined

This code is used where information is unclear, unavailable or insufficient to assign CODE 01–CODE 10.

CODE 99 Not stated/inadequately described

This code is not for use in primary data collections.

Source and reference attributes

Submitting organisation:

Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Collection methods: Generally this metadata item is collected for the person's usual living arrangement, but may also, if required, be collected for a person's main living arrangement or living arrangement at a particular time reference point.

Comments: Date collected about the type of living arrangement for a person gives information about the level of support, both physical and emotional, to which a person may have access.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Australian Institute of Health and Welfare (2002) [Aged care assessment program data dictionary version 1.0](#), AIHW, Australian Government, accessed 21 February 2023.

Marital status

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—marital status, code N
METEOR identifier:	766507
Registration status:	Health , Standard 09/12/2022 Aged Care , Standard 30/06/2023
Definition:	A person's current relationship status in terms of a couple relationship or, for those not in a couple relationship, the existence of a current or previous registered marriage, as represented by a code.
Data Element Concept:	Person—marital status
Value Domain:	Marital status code N

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N
Maximum character length:	1

	Value	Meaning
Permissible values:	1	Never married
	2	Widowed
	3	Divorced
	4	Separated
	5	Married (registered and de facto)
Supplementary values:	6	Not stated/inadequately described

Collection and usage attributes

Guide for use:	<p>The following codes refer to the current marital status of a person.</p> <p>CODE 1 Never married</p> <p>Use this code when a person has never been married. People who have never been in a registered marriage but are currently in a de facto marriage should use CODE 5 'Married (registered and de facto)'.</p> <p>CODE 2 Widowed</p> <p>Use this code when a person's marriage partner is deceased, and they have not re-married. For persons whose previous marriage partner is not living, but who have re-married, use CODE 5 'Married (registered and de facto)'.</p> <p>CODE 3 Divorced</p> <p>Use this code when a person is no longer legally married to their most recent marriage partner.</p> <p>CODE 4 Separated</p> <p>Use this code when a person considers themselves to be no longer in a relationship with most recent registered marriage partner, but has not legally divorced.</p> <p>CODE 5 Married (registered and de facto)</p> <p>Use this code when a person is in a current registered or de facto marriage. Includes people who have been divorced or widowed but have since re-married.</p> <p>CODE 6 Not stated/inadequately described</p> <p>This code is not for use on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.</p>
Collection methods:	<p>While some codes (such as CODE 2 'Widowed' or CODE 3 'Divorced') imply a registered marital status, when self-reported they may also refer to de facto marriage relationships.</p>
Comments:	<p>The Australian Bureau of Statistics identifies two concepts of marital status:</p> <ul style="list-style-type: none">• Registered marital status - defined as whether a person has, or has had, a registered marriage;• Social marital status - based on a person's living arrangement (including de facto marriages), as reported by the person (ABS 2019). <p>Please note, however, that this Value Domain is not compatible with the code sets described in the ABS standard.</p>

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Reference documents: ABS (Australian Bureau of Statistics) 2019. Family, Household and Income Unit Variables, 2014. Canberra: ABS, viewed 21 September 2022
<https://www.abs.gov.au/statistics/standards/family-household-and-income-unit-variables/2014>

Data element attributes

Collection and usage attributes

Comments: The [Marriage Act 1961 \(Cth\)](#) (as amended) defines marriage as 'the union of 2 people to the exclusion of all others, voluntarily entered into for life'.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Relational attributes

Implementation in Data Set Specifications: [Aged care person cluster](#)
[Aged Care, Standard 31/10/2025](#)

DSS specific information:

Specific to the aged care person cluster, supplementary CODE 6 is not used, rather the supplementary codes are as follows:

CODE 97 NOT APPLICABLE

This code is used where an assessment does not include this question.

CODE 98 UNKNOWN/UNABLE TO BE DETERMINED

This code is used where information is unclear, unavailable or insufficient to assign CODE 1 - CODE 5.

CODE 99 NOT STATED/INADEQUATELY DESCRIBED

This code is not for use on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.

Aged care housing tenure type

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—housing tenure type, aged care code N
METEOR identifier:	775037
Registration status:	Aged Care , Standard 30/06/2023
Definition:	The arrangement under which a person accessing aged care services occupies a dwelling, as represented by a code.
Context:	Aged care.
Data Element Concept:	Person—housing tenure type
Value Domain:	Aged care housing tenure type code N

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	String
Format:	N
Maximum character length:	1

	Value	Meaning
Permissible values:	1	Owned outright
	2	Owned with a mortgage
	3	Rented privately
	4	Rented through public, community or social housing
	5	Rented otherwise
	6	Occupied under other arrangements
	7	No tenure
Supplementary values:	97	Not applicable

98	Unknown/unable to be determined
99	Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 1 Owned outright

A person owns their dwelling and is not making any payments on mortgages or loans secured against the dwelling. (Thus persons who have repaid a loan but technically not discharged the associated mortgage are included in this category.)

CODE 2 Owned with a mortgage

A person who owns their dwelling and is repaying a mortgage or loans secured against the dwelling.

CODE 3 Rented privately

A person pays money in the private rental market in return for accommodation.

CODE 4 Rented through public, community or social housing

A person pays money to a housing authority or housing assistance agency in return for accommodation.

CODE 5 Rented otherwise

A person pays money to another entity not included in the categories listed above, such as boarding house or caravan park, in return for accommodation.

CODE 6 Occupied under other arrangements

A person occupies a dwelling under arrangements not specified above. This includes a person living in residential aged care and situations where the person occupies the dwelling rent free or under a life tenure scheme (such as some retirement villages) or the dwelling is purchased under a shared equity scheme.

CODE 7 No tenure

A person does not occupy a private dwelling or has no rights over the dwelling. This includes situations where the person has no address.

CODE 97 Not applicable

This code is used where an assessment does not include this question.

CODE 98 Unknown/unable to be determined

This code is used where information is unclear, unavailable or insufficient to assign CODE 01–CODE 7.

CODE 99 Not stated/inadequately described

This supplementary value is used to code inadequately described responses and non-responses for tenure type. It is not to be used on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.

Collection methods: The permissible values for this data element are used to form the response categories to:

‘Which of the following best describes the arrangement you have in place for the house, apartment or other dwelling in which you live?’

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: [My Aged Care – National Screening and Assessment Form User Guide | Australian Government Department of Health and Aged Care](#), viewed 16 February 2023. <https://www.health.gov.au/resources/publications/my-aged-care-national-screening-and-assessment-form-user-guide?language=en>.

Reference documents: ABS (Australian Bureau of Statistics) 2021. Census of Population and Housing: Census dictionary. Canberra: ABS, viewed 10 February 2023 <https://www.abs.gov.au/census/guide-census-data/census-dictionary/2021/variables-topic/housing/tenure-type-tend>

Relational attributes

Implementation in Data Set Specifications: [Aged care person cluster](#)
[Aged Care](#), Standard 31/10/2025

DSS specific information:

Data collected about the housing tenure type gives information relevant to people's vulnerabilities when seeking or using services. This item can be used in combination with [Person—accommodation type, usual code N\[N\]](#) to identify homelessness, risk of homelessness and precarious housing situations.

Aged care assessment identifier

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—identifier, X[X(19)]
METEOR identifier:	807584
Registration status:	Aged Care , Standard 31/10/2025
Definition:	A sequence of characters which uniquely identifies an aged care assessment , as represented by a string of alphanumeric characters.
Data Element Concept:	Aged care assessment—identifier
Value Domain:	Identifier X[X(19)]

Value domain attributes

Representational attributes

Representation class:	Identifier
Data type:	String
Format:	X[X(19)]
Maximum character length:	20

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	Each assessment type may have its own system for determining how identifiers are allocated and the format used. There is the potential for the same number sequence in different types of assessments.
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Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Aged care episode cluster

Identifying and definitional attributes

Metadata item type:	Data Set Specification
METEOR identifier:	807173
Registration status:	Aged Care , Standard 31/10/2025
DSS type:	Data Element Cluster
Scope:	The Aged care episode cluster specifies the data to be collected for each aged care episode .

Collection and usage attributes

Statistical unit:	An aged care episode
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Source and reference attributes

Submitting organisation:	Department of Health, Disability and Ageing
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Aged care episode program type

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care episode—aged care program type, code N[N]
METEOR identifier:	807665
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The type of aged care program associated with an aged care episode , as represented by a code.
Data Element Concept:	Aged care episode—aged care program type
Value Domain:	Aged care program type code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Residential aged care (permanent)
	2	Residential aged care (respite)
	4	Transition Care Program
	6	Support at Home program
	7	Commonwealth Home Support Programme
	8	Multi-Purpose Services
	9	National Aboriginal and Torres Strait Islander Flexible Aged Care Program

Collection and usage attributes

Guide for use: CODE 1 RESIDENTIAL AGED CARE (PERMANENT)

This code is used where the program type is residential aged care, consisting of aged care delivered to people in residential care homes (commonly known as nursing homes or aged care homes) for people with complex care needs. This code applies where residential aged care is provided on a permanent or ongoing basis. Where residential aged care is provided as respite (time-limited) use code 2.

CODE 2 RESIDENTIAL AGED CARE (RESPITE)

This code is used where the program type is residential aged care, consisting of aged care delivered to people in residential care homes (commonly known as nursing homes or aged care homes) for people with complex care needs. This code applies where residential aged care is provided as respite basis, that is, time-limited. Where residential aged care is provided on a permanent (ongoing) basis use code 1.

CODE 4 TRANSITION CARE PROGRAM

This code is used where the program type is Transition Care Program, consisting of time-limited care to help eligible people recover after a stay in hospital. Care may be provided in the home, a residential care home or in the community for up to 12 weeks, with the possibility of a 6 week extension.

CODE 6 SUPPORT AT HOME PROGRAM

This code is used where the program type is the Support at Home program, consisting of Australian Government funded support for people with complex care needs to live independently in their own homes through 8 classifications. The program includes a Restorative Care Pathway, Assistive Technology and Home Modifications (AT-HM) and End-of-Life Pathway.

CODE 7 COMMONWEALTH HOME SUPPORT PROGRAMME

This code applies where people are recommended for the Commonwealth Home Support Programme, consisting of entry-level support for eligible people who need some help to stay at home. Service providers receive Australian Government funding through grant agreements.

CODE 8 MULTI-PURPOSE SERVICES

This code applies where people are recommended for Multi-Purpose Services, consisting of integrated health and aged care services for eligible

people living in small communities in regional and remote areas. Care may be provided in the home, an aged care home or in the community; service delivery may be co-located with a hospital.

CODE 9 NATIONAL ABORIGINAL AND TORRES STRAIT ISLANDER FLEXIBLE AGED CARE PROGRAM

This code applies where people are recommended for the National Aboriginal and Torres Strait Islander Flexible Aged Care Program, consisting of culturally appropriate aged care delivered close to local communities. Care may be provided in the home, an aged care home or in the community as required to meet the needs of Aboriginal and Torres Strait Islander peoples and allow them to remain close to home and community.

CODE 88 OTHER

This code is used where the program type is Innovative Pool or other legacy aged care programs.

Comments:

Codes 3 and 5 are intentionally left blank. These codes are related to the Home Care Packages and Short-Term Restorative Care programs respectively being replaced by the Support at Home program (code 6) on 1 November 2025.

Please also note that in previous versions of this element, some permissible values appeared in a different order.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: For each episode of care, one program can only be selected. Multiple responses per person are permitted, as people can have multiple episodes of care from different programs over time (or at one time, in some cases).

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Aged care episode start date

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care episode—episode start date, DDMMYYYY
METEOR identifier:	808234
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The date on which an aged care episode commenced, expressed as DDMMYYYY.
Data Element Concept:	Aged care episode—episode start date
Value Domain:	Date DDMMYYYY

Value domain attributes

Representational attributes

Representation class:	Date
Data type:	Date/Time
Format:	DDMMYYYY
Maximum character length:	8

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	The first day of a person's aged care episode refers to the first day services were delivered to the person. For care delivered on a one-off or session basis, the end date may be the same as the start date.
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Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Aged care episode end date

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care episode—episode end date, DDMMYYYY
METEOR identifier:	808238
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The date on which an aged care episode is completed, expressed as DDMMYYYY.
Data Element Concept:	Aged care episode—episode end date
Value Domain:	Date DDMMYYYY

Value domain attributes

Representational attributes

Representation class:	Date
Data type:	Date/Time
Format:	DDMMYYYY
Maximum character length:	8

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	The end date refers to the last day services were delivered to the person. For care delivered on a one-off or session basis, the end date may be the same as the start date.
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It does not apply to periods of leave from care. For people who take leave from care who do not return, the episode end date is their last day of care, not the leave end date.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Aged care episode cessation reason

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care episode—cessation reason, code N[N]
Synonymous names:	Aged care episode reason for ending
METEOR identifier:	808256
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The reason for ending an aged care episode , as represented by a code.
Data Element Concept:	Aged care episode—cessation reason
Value Domain:	Aged care episode cessation reason code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Entered residential aged care
	2	Admitted to hospital
	3	Returned to family, home or community (no aged care)
	4	Commenced community-based, in-home or flexible aged care
	5	Died while using aged care
Supplementary values:	10	Other
	97	Not applicable
	98	Unknown/unable to be determined

Collection and usage attributes

Guide for use:

CODE 1 Entered residential aged care

This code is used where the aged care episode ends due to the person entering residential aged care. This includes people moving from one residential care home to another.

CODE 2 Admitted to hospital

This code is used where the aged care episode ends due to the person being admitted to hospital for any length of time. This excludes leave taken for hospital care where the episode has not ended.

CODE 3 Returned to family, home or community (no aged care)

This code is used where the aged care episode ends due to the person ceasing to use aged care (any aged care program including community-based care). The person is not receiving any formal aged care at the conclusion of the episode. This excludes leave taken for social reasons where the episode has not ended.

CODE 4 Commenced community-based, in-home or flexible aged care

This code is used where the aged care episode ends due to the person commencing using care based in the home or community. This includes people moving from one community, in-home or flexible aged care provider or branch to another of the same or different type, or from residential aged care to community, in-home or flexible aged care.

CODE 5 Died while using aged care

This code is used where the aged care episode ends due to the person dying while using aged care. This includes deaths that took place while the person took leave from care and died while away.

CODE 10 Other

This code is used where the aged care episode ends due to reasons other than those stated above. This includes reasons such as the aged care provider has ceased providing care; the provider can no longer provide suitable care or accommodation; or fees have not been paid.

CODE 97 Not applicable

This code is used where the aged care episode end reason is not required to be recorded.

CODE 98 Unknown/unable to be determined

This code is used where the aged care episode end reason is not known.

CODE 99 Not stated/inadequately described

This code is not to be used on primary collection forms.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: This information is recorded when a person ceases accessing services from an aged care provider or program payment entity. This does not apply to people taking authorised leave from care or to sessions conducted in Commonwealth Home Support Programme.

The reason is generally the person's destination on leaving an aged care program, to the extent that is known at the end of the episode. The reason for the end of a person's aged care episode is recorded by an aged care provider on the conclusion of the episode.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Relational attributes

Implementation in Data Set Specifications: [Aged care episode cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on code 7 **not** being selected for [Aged care episode—aged care program type, code N\[N\]](#). Commonwealth Home Support Programme (code 7) does not have an end reason as it is delivered on a one-off or session basis.

A persons aged care identifier

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Person—aged care identifier, XXXXXX[X(14)]
METEOR identifier:	775012
Registration status:	Aged Care , Standard 30/06/2023
Definition:	A sequence of characters which uniquely identifies a person in an aged care service setting, as represented by a string of alphanumeric characters.
Data Element Concept:	Person—aged care identifier
Value Domain:	Identifier XXXXXX[X(14)]

Value domain attributes

Representational attributes

Representation class:	Identifier
Data type:	String
Format:	XXXXXX[X(14)]
Maximum character length:	20

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	Each person seeking or accessing aged care is to have a unique identifier at the national level.
Comments:	The aged care identifier ensures a persons records can be matched accurately over time and across aged care providers, services and programs.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Aged care program payment entity identifier

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care program payment entity—identifier, X[X(19)]
METEOR identifier:	807547
Registration status:	Aged Care , Standard 31/10/2025
Definition:	A sequence of characters which uniquely identifies an aged care program payment entity , as represented by a string of alphanumeric characters.
Data Element Concept:	Aged care program payment entity—identifier
Value Domain:	Identifier X[X(19)]

Value domain attributes

Representational attributes

Representation class:	Identifier
Data type:	String
Format:	X[X(19)]
Maximum character length:	20

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	Each aged care program payment entity has a unique identifier at the national level.
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Each [residential care home](#) may be associated with one or more program payment entity identifier.

Each [aged care branch](#) is associated with only one program payment entity. Where a program payment entity is associated with an aged care branch, program payment entity identifier is identical with [Aged care branch—identifier, X\[X\(19\)\]](#). This information is collected and reported by the Australian Government.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Aged care assessment cluster

Identifying and definitional attributes

Metadata item type:	Data Set Specification
METEOR identifier:	807175
Registration status:	Aged Care , Standard 31/10/2025
DSS type:	Data Element Cluster
Scope:	The Aged care assessment cluster specifies the data to be collected for each aged care assessment .

Collection and usage attributes

Statistical unit:	An aged care assessment
Collection methods:	Note: where the response to Aged care assessment—assessment type, code N[N] is CODE 5 'AN-ACC', only the following data elements are required to be collected: <ul style="list-style-type: none">• Aged care assessment—identifier, X[X(19)]• Aged care assessment—assessment start date, DDMMYYYY• Aged care assessment—palliative care phase, code N• Aged care assessment—assessment result, Australian National Aged Care Classification code NNN• Aged care assessment—technical nursing care requirement type, code N[N]• Aged care assessment—assessment end date, DDMMYYYY

Source and reference attributes

Submitting organisation:	Department of Health, Disability and Ageing
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Aged care assessment identifier

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—identifier, X[X(19)]
METEOR identifier:	807584
Registration status:	Aged Care , Standard 31/10/2025
Definition:	A sequence of characters which uniquely identifies an aged care assessment , as represented by a string of alphanumeric characters.
Data Element Concept:	Aged care assessment—identifier
Value Domain:	Identifier X[X(19)]

Value domain attributes

Representational attributes

Representation class:	Identifier
Data type:	String
Format:	X[X(19)]
Maximum character length:	20

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	Each assessment type may have its own system for determining how identifiers are allocated and the format used. There is the potential for the same number sequence in different types of assessments.
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Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Relational attributes

Implementation in Data Set Specifications: [Aged care assessment cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on code 5 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

Aged care assessment type

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—assessment type, code N[N]
METEOR identifier:	807451
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The type of aged care assessment undertaken, as represented by a code.
Data Element Concept:	Aged care assessment—assessment type
Value Domain:	Aged care assessment type code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Screening
	2	Triage
	3	Home Support
	4	Comprehensive
	5	AN-ACC
	10	Other

Collection and usage attributes

Guide for use:

CODE 1 Screening

This code applies to screening aged care assessments. These include a brief, simple look over which can evaluate a person's need for an aged care assessment. Screening can be done over-the-phone by the My Aged Care contact centre, using the online tool in the My Aged Care portal, or as part of a web-referral by a health professional or GP e-referral.

CODE 2 Triage

This code applies to triage of assessment referrals received. The purpose of triage, and the triage section of the IAT, is for an assessment organisation to validate the appropriateness of a received assessment referral and to collect information relevant to assist with the assessment process.

CODE 3 Home Support

This code applies to home support aged care assessments. These assess a person's needs for ensuring they can live comfortably in a home or community setting and eligibility for the Commonwealth Home Support Programme (CHSP). Home support assessments are conducted by the Single Assessment System workforce from late 2024.

CODE 4 Comprehensive

This code applies to comprehensive aged care assessments. These assess a person's complex health needs and requirements and eligibility for aged care (in a residential care, or in a home or community setting). Comprehensive assessments are conducted by the Single Assessment System workforce from late 2024.

CODE 5 AN-ACC

This code applies to Australian National Aged Care Classification (AN-ACC) assessments. AN-ACC assessments determine funding for residential care homes, based on the care needs of a person needing or using care and a base care tariff. AN-ACC assessments are conducted by the Single Assessment System workforce from late 2024.

CODE 10 Other

This code applies to other types of assessment undertaken for a person.

Comments:

Note codes numbers for permissible values have been reassigned since the previous version of this element due to the inclusion of Triage.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: Aged care assessments seek to determine the physical, psychological, medical, restorative, cultural and social needs of a person seeking to, or using care. They are used to establish eligibility for care, care services needed or funding required. There are several main types of aged care assessments and these are carried out by trained staff using set assessment tools and processes.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Department of Health, Disability and Ageing (2025) [My Aged Care Assessment Manual](#), Department of Health, Disability and Ageing website, accessed 3 April 2025.

Department of Health, Disability and Ageing (2025) [My Aged Care – Integrated Assessment Tool \(IAT\) User Guide](#), Department of Health, Disability and Ageing website, accessed 3 April 2025.

Department of Health, Disability and Ageing (2025) [The Australian National Aged Care Classification \(AN-ACC\) funding guide](#), Department of Health, Disability and Ageing website, accessed 5 May 2025.

Australian National Aged Care Classification assessment result

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—assessment result, Australian National Aged Care Classification code N[N]
Synonymous names:	ANN-AC assessment result
METEOR identifier:	807459
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The outcome of an aged care assessment , as represented by an Australian National Aged Care Classification (AN-ACC) code.
Data Element Concept:	Aged care assessment—assessment result
Value Domain:	Australian National Aged Care Classification assessment result code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	3

	Value	Meaning
Permissible values:	1	Class 1 – Admit for palliative care
	2	Class 2 – Independent without compounding factors
	3	Class 3 – Independent with compounding factors
	4	Class 4 – Assisted mobility, high cognition, without compounding factors
	5	Class 5 – Assisted mobility, high cognition, with compounding factors

6	Class 6 – Assisted mobility, medium cognition, without compounding factors
7	Class 7 – Assisted mobility, medium cognition, with compounding factors
8	Class 8 – Assisted mobility, low cognition
9	Class 9 – Not mobile, higher function, without compounding factors
10	Class 10 – Not mobile, higher function, with compounding factors
11	Class 11 – Not mobile, lower function, lower pressure sore risk
12	Class 12 – Not mobile, lower function, higher pressure sore risk, without compounding factors
13	Class 13 – Not mobile, lower function, higher pressure sore risk, with compounding factors
98	Class 0 – Default class for residents entering permanent care to receive palliative care
99	Class 0 – Default class for residents entering for permanent care (other than entry for palliative care)
100	Respite Class 0 – Default class for residents entering for respite care)
101	Respite Class 1 – Independent mobility
102	Respite Class 2 – Assisted mobility
103	Respite Class 3 – Not mobile
Supplementary values: 997	Not applicable
999	Not stated/inadequately described

Collection and usage attributes

Guide for use: The following codes – which relate to current or new aged care residents – reflect their characteristics and determine the associated variable subsidy. They are determined through Australian National Aged Care Classification

(AN-ACC) assessment according to set criteria: see Reference documents below.

CODE 1 CLASS 1 – ADMIT FOR PALLIATIVE CARE

This code is used where people have been admitted to non-respite (permanent) residential aged care for the purpose of receiving palliative care. This means:

- a life expectancy of 3 months or less, AND
- an Australia-Modified Karnofsky Performance¹ (AKPS) score of 40 or less.

That life expectancy and the AKPS score must have been completed by a medical practitioner, or nurse practitioner who is independent of the residential care home. The provider must provide evidence within 14 days after entry. This allows for planned entry of people for palliative care without a subsequent AN-ACC assessment.

CODE 2 CLASS 2 – INDEPENDENT WITHOUT COMPOUNDING FACTORS

This code is used where people on assessment meet the criteria for ‘Independent without compounding factors’ of the AN-ACC classifications.

CODE 3 CLASS 3 – INDEPENDENT WITH COMPOUNDING FACTORS

This code is used where people on assessment meet the criteria for ‘Independent with compounding factors’ of the AN-ACC classifications.

CODE 4 CLASS 4 – ASSISTED MOBILITY, HIGH COGNITION, WITHOUT COMPOUNDING FACTORS

This code is used where people on assessment meet the criteria for ‘Assisted mobility, high cognition, without compounding factors’ of the AN-ACC classifications.

CODE 5 CLASS 5 – ASSISTED MOBILITY, HIGH COGNITION, WITH COMPOUNDING FACTORS

This code is used where people on assessment meet the criteria for ‘Assisted mobility, high cognition, with compounding factors’ of the AN-ACC classifications.

CODE 6 CLASS 6 – ASSISTED MOBILITY, MEDIUM COGNITION, WITHOUT COMPOUNDING FACTORS

This code is used where people on assessment meet the criteria for ‘Assisted mobility, medium cognition, without compounding factors’ of the AN-ACC classifications.

CODE 7 CLASS 7 – ASSISTED MOBILITY, MEDIUM COGNITION, WITH COMPOUNDING FACTORS

This code is used where people on assessment meet the criteria for 'Assisted mobility, medium cognition, with compounding factors' of the AN-ACC classifications.

CODE 8 CLASS 8 – ASSISTED MOBILITY, LOW COGNITION

This code is used where people on assessment meet the criteria for 'Assisted mobility, low cognition' of the AN-ACC classifications.

CODE 9 CLASS 9 – NOT MOBILE, HIGHER FUNCTION, WITHOUT COMPOUNDING FACTORS

This code is used where people on assessment meet the criteria for 'Not mobile, higher function, without compounding factors' of the AN-ACC classifications.

CODE 10 CLASS 10 – NOT MOBILE, HIGHER FUNCTION, WITH COMPOUNDING FACTORS

This code is used where people on assessment meet the criteria for 'Not mobile, higher function, with compounding factors' of the AN-ACC classifications.

CODE 11 CLASS 11 – NOT MOBILE, LOWER FUNCTION, LOWER PRESSURE SORE RISK

This code is used where people on assessment meet the criteria for 'Not mobile, lower function, lower pressure sore risk' of the AN-ACC classifications.

CODE 12 CLASS 12 – NOT MOBILE, LOWER FUNCTION, HIGHER PRESSURE SORE RISK, WITHOUT COMPOUNDING FACTORS

This code is used where people on assessment meet the criteria for 'Not mobile, lower function, higher pressure sore risk, without compounding factors' of the AN-ACC classifications.

CODE 13 CLASS 13 – NOT MOBILE, LOWER FUNCTION, HIGHER PRESSURE SORE RISK, WITH COMPOUNDING FACTORS

This code is used where people on assessment meet the criteria for 'Not mobile, lower function, higher pressure sore risk, with compounding factors' of the AN-ACC classifications.

CODE 98 CLASS 0 – Default class for residents entering permanent care to receive palliative care

This code is used where people have entered permanent residential aged care to receive palliative care, and have not yet undergone an AN-ACC assessment.

CODE 99 CLASS 0 – Default class for residents entering for permanent care (other than entry for palliative care)

This code is used where people have entered permanent residential aged care (other than for palliative care) and have not yet undergone an AN-ACC assessment.

CODE 100 RESPITE CLASS 0 – Default class for residents entering for respite care

This code is used where people have entered respite residential aged care and have not yet undergone an AN-ACC assessment.

CODE 101 RESPITE CLASS 1 – INDEPENDENT MOBILITY

This code is used where people on assessment meet the criteria for ‘Independent mobility’ of the AN-ACC classifications for respite.

CODE 102 RESPITE CLASS 2 – ASSISTED MOBILITY

This code is used where people on assessment meet the criteria for ‘Assisted mobility’ of the AN-ACC classifications for respite.

CODE 103 RESPITE CLASS 3 – NOT MOBILE

This code is used where people on assessment meet the criteria for ‘Not mobile’ of the AN-ACC classifications for respite.

CODE 997 NOT APPLICABLE

This code is used where the assessment was not an AN-ACC assessment.

CODE 999 NOT STATED/INADEQUATELY DESCRIBED

This code is not to be used on primary collection forms.

Comments:

Note code numbers for supplementary values have been reassigned since the previous version of this element, due to inclusion of additional permissible values.

Source and reference attributes

Submitting organisation:

Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: This code (and associated class) reflects the amount of funding a residential aged care provider will receive for the care of that person. The AN-ACC funding model includes 13 variable funding classes that reflect the different care needs of residents in each class. It includes separate funding classes for people who enter residential care for the purpose of receiving palliative care or care other than palliative care and those entering for respite care.

Each class represents persons:

- with similar needs and the cost of staff time to deliver consistent care
- whose daily care costs are similar with similar clinical risks and safety indicators.

After an AN-ACC assessment is completed and submitted to the Department of Health, Disability and Aged Care by an assessor, the Department processes the assessment data received and assigns the resident a classification level.

Reclassification can occur according to specific criteria.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Reference documents: Department of Health, Disability and Ageing (2025) [AN-ACC resources](#), Department of Health, Disability and Ageing website, accessed 3 April 2025.

Relational attributes

Implementation in Data Set Specifications: [Aged care assessment cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on code 5 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

Aged care technical nursing requirement type

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—technical nursing care requirement type, code N[N]
Synonymous names:	Australian National Aged Care Classification technical nursing requirement type; AN-ACC technical nursing requirement type
METEOR identifier:	807560
Registration status:	Aged Care, Standard 31/10/2025
Definition:	The type of professional nursing care identified in an aged care assessment as required in an aged care setting, as represented by a code.
Data Element Concept:	Aged care assessment—technical nursing care requirement type
Value Domain:	Aged care technical nursing care requirement type code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Transfers and locomotion
	2	Oxygen
	3	Use of respirator
	4	Enteral feeding
	5	Parenteral feeding
	6	Tracheostomy care
	7	Catheter care

	8	Stoma care
	9	Peritoneal dialysis
	10	Haemodialysis
	11	Hospital dialysis
	12	Daily injections
	13	Drip infusion in vein
	14	Complex wound management
	15	Pain
	16	Other
	17	None
Supplementary values:	97	Not applicable
	98	Unknown/unable to determine
	99	Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 1 Transfers and locomotion

This code is used where people require three or more people for transfers and locomotion due to weight.

CODE 2 Oxygen

This code is used where people require oxygen, such as monitoring usage and supply of oxygen and maintaining airways (suctioning).

CODE 3 Use of respirator

This code is used where people can no longer breathe on their own and require help with breathing (such as being on a mechanical ventilator).

CODE 4 Enteral feeding

This code is used where people require enteral feeding, such as care of the stoma for PEG tubes and J tubes; ensuring the feeding tube flows freely; monitoring of hydration and bowel movements

CODE 5 Parenteral feeding

This code is used where people require parenteral feeding, such as care for central venous catheters; and monitoring and assessing intake response.

CODE 6 Tracheostomy care

This code is used where people require tracheostomy care, such as care of the stoma, keeping it clean and removing discharge or mucous to reduce risk of infection; maintaining skin integrity around the stoma and under the tape; and ensuring the tube is correctly positioned and secured and free of obstruction.

CODE 7 Catheter care

This code is used where people require requiring catheter care such as ensuring urine is flowing freely (no kinks or blockages in tubing); maintaining catheter hygiene; changing the catheter; securing catheter to prevent pulling, breaking and blockage; and care of the stoma for suprapubic catheters.

CODE 8 Stoma care

This code is used where people require stoma care such as checking and maintaining skin integrity around the stoma; keeping the stoma area clean and dry; and ensuring that the appropriate sized bag has been fitted to reduce the risk of leakage and skin integrity issues

CODE 9 Peritoneal dialysis

This code is used where people require care relating to peritoneal dialysis in the home, such as taking regular observations (temperature, pulse, blood pressure); measuring weight and girth daily; monitoring hydration and nutritional intake and urinary output; and undertaking daily urinalysis. This code is not used where people require centre- or hospital-based peritoneal dialysis.

CODE 10 Haemodialysis

This code is used where people require care relating to haemodialysis in the home. This code is not used where people require centre- or hospital-based haemodialysis.

CODE 11 Hospital dialysis

This code is used where people require care relating to centre- or hospital-based dialysis services (such as renal units). This can include either peritoneal dialysis or haemodialysis.

CODE 12 Daily injections

This code is used where people require daily injections such as those that (depending on medication) require one or two staff to check medication and

oversee administration; monitor injection site/s and re-site if appropriate; and monitor the resident to detect any adverse reactions.

CODE 13 Drip infusion in vein

This code is used where people require care relating to intravenous therapy administering fluid, medication or nutrients in vein.

CODE 14 Complex wound management

This code is used where people require complex wound management such as management of a wound/s that is/are slow to heal due to exudate, comorbidities, infection or polypharmacy; provision of frequent wound care and additional monitoring of skin integrity for complex wounds; use of protective dressings and frames to promote healing; and ensuring nutrition levels are maintained to promote skin health.

CODE 15 Pain

This code is used where people require care relating to assessing or managing pain.

CODE 16 Other

This code is used where people have requirements not specified above.

CODE 17 None

This code is used where people have none of the above requirements.

CODE 97 Not applicable

This code is used where the assessment did not include assessment of technical nursing care requirements.

CODE 98 Unknown/Unable to be determined

This code is used where the assessor was unable to determine the technical nursing care requirements for the person.

CODE 99 Not stated/inadequately described

This code is not to be used on primary collection forms.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: More than one code can be recorded.

Eight complex nursing requirements have been addressed within the AN-ACC Assessment Tool due to their impact on cost of care. These are for medical conditions that would usually be undertaken by staff with nursing training. The complex nursing requirements are: need for oxygen; enteral feeding; tracheostomy, catheter and stoma care; peritoneal dialysis; daily injections; and, complex wound management. In some circumstances, personal care workers will undertake these tasks under the guidance of trained nursing staff and/or following a prescribed protocol. If this is the case, please include all that apply to the resident. However, do not include if only required by the resident occasionally. Include only if the resident requires the technical nursing case on a regular basis, i.e. most days.

An additional question is included regarding transfers and locomotion to address costs associated with bariatric residents.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Department of Health, Disability and Ageing (2025) [AN-ACC resources](#), Department of Health, Disability and Ageing website, accessed 3 April 2025.

Relational attributes

[Aged care assessment cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on code 5 being selected for [Aged care assessment—assessment type, code N\[N\]](#)

DSS specific information:

In the Aged care assessment cluster, this data element collects information on the type of professional nursing care identified as being required for a person during an [aged care assessment](#).

Aged care assessment start date

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—assessment start date, DDMMYYYY
METEOR identifier:	807565
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The date on which an aged care assessment commenced, expressed as DDMMYYYY.
Data Element Concept:	Aged care assessment—assessment start date
Value Domain:	Date DDMMYYYY

Value domain attributes

Representational attributes

Representation class:	Date
Data type:	Date/Time
Format:	DDMMYYYY
Maximum character length:	8

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	Start date refers to the date of first contact with the person (usually face-to-face) for the purposes of conducting an assessment. In most instances, it will be the current date.
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Start date applies for triage, home support and comprehensive assessments and AN-ACC assessments. Screening (a process which can commence before an assessment) is out of scope.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Relational attributes

Implementation in Data Set Specifications: [Aged care assessment cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on codes 2, 3, 4 or 5 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

Aged care assessment end date

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—assessment end date, DDMMYYYY
METEOR identifier:	807573
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The date on which an aged care assessment is completed, expressed as DDMMYYYY.
Data Element Concept:	Aged care assessment—assessment end date
Value Domain:	Date DDMMYYYY

Value domain attributes

Representational attributes

Representation class:	Date
Data type:	Date/Time
Format:	DDMMYYYY
Maximum character length:	8

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use:	The end date of a completed assessment will be recorded as DDMMYYYY by the assessor.
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Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Australian Institute of Health and Welfare (2002) [Aged care assessment program data dictionary version 1.0](#), AIHW, accessed 3 April 2025.

Relational attributes

Implementation in Data Set Specifications: [Aged care assessment cluster](#)
[Aged Care, Standard 31/10/2025](#)

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on codes 1, 2, 3, 4 or 5 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

Aged care assessment cessation reason

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—cessation reason, code N[N]
Synonymous names:	Aged care assessment reason for ending
METEOR identifier:	807577
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The reason for ending an aged care assessment , as represented by a code.
Data Element Concept:	Aged care assessment—cessation reason
Value Domain:	Aged care assessment cessation reason code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Completed – care recommended
	2	Completed – no care recommended
	3	Cancelled – person’s cultural considerations
	4	Cancelled – lost contact with person
	5	Cancelled – consent/application withdrawn
	6	Cancelled – person medically unstable
	7	Cancelled – person functionally unstable
	8	Cancelled – prior aged care approval

	9	Cancelled – person communication issues
	10	Cancelled – person deceased
	11	Cancelled – other reason
Supplementary values:	97	Not applicable
	98	Unknown/unable to be determined
	99	Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 1 COMPLETED – CARE RECOMMENDED

This code applies where the aged care assessment was completed and care was recommended for the person.

CODE 2 COMPLETED – NO CARE RECOMMENDED

This code applies where the aged care assessment was completed and care was not recommended for the person.

CODE 3 CANCELLED – PERSON’S CULTURAL CONSIDERATIONS

This code applies where a person's cultural beliefs or values (about the aged care assessment or service) affected the finalisation of the assessment.

CODE 4 CANCELLED – LOST CONTACT WITH PERSON

This code applies where the aged care assessment staff were unable to contact the person for 3 months.

CODE 5 CANCELLED – CONSENT/APPLICATION WITHDRAWN

This code applies where a person withdrew consent for the aged care assessment process to continue.

CODE 6 CANCELLED – PERSON MEDICALLY UNSTABLE

This code applies where a person's medical conditions were unstable to the extent the aged care assessment could not proceed.

CODE 7 CANCELLED – PERSON FUNCTIONALLY UNSTABLE

This code applies where a person’s functional abilities were unstable to the extent the assessment could not proceed.

CODE 8 CANCELLED – PRIOR AGED CARE APPROVAL

This code applies where a person had prior aged care approval (through an earlier assessment) and there was no reason to complete the aged care assessment.

CODE 9 CANCELLED – PERSON COMMUNICATION ISSUES

This code applies to challenges that hinder the effective exchange of information between an older person and My Aged Care assessors or service providers, impacting the accuracy of the assessment and the delivery of person-centred care.

CODE 10 CANCELLED – PERSON DECEASED

This code applies where a person has deceased prior to the assessment being completed.

CODE 11 CANCELLED – OTHER REASON

This code applies where an assessment is cancelled for a reason other than those specified for codes 1 to 10.

CODE 97 NOT APPLICABLE

This code applies where there was no end to an aged care assessment, or no assessment.

CODE 98 UNKNOWN/UNABLE TO BE DETERMINED

This code applies where the reason could not be specified or was not known to the assessor.

CODE 99 NOT STATED/INADEQUATELY DESCRIBED

This code applies where the reason is not stated or inadequately described. It is not to be used on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.

Comments:

Please note: in previous versions of this element the value label "Cancelled – prior aged care approval" used CODE 7.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: The reason for ending an assessment is generated from information provided by the source of information (e.g., the person being assessed, their carer or medical practitioner) and by the assessor.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Australian Institute of Health and Welfare (2002) [Aged care assessment program data dictionary version 1.0](#), AIHW, accessed 3 April 2025.

Relational attributes

Implementation in Data Set Specifications: [Aged care assessment cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on codes 2, 3 or 4 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

Aged care assessment setting

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—assessment setting, code N[N]
METEOR identifier:	807741
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The setting in which an aged care assessment took place, as represented by a code.
Data Element Concept:	Aged care assessment—assessment setting
Value Domain:	Aged care assessment setting code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Person's home
	2	Carer's home
	3	Other community setting
	4	Residential care home
	5	Private hospital
	6	Public hospital
	7	Other hospital inpatient setting – Private
	8	Other hospital inpatient setting – Public
	9	Clinic or other health setting not otherwise specified

	20	Other
Supplementary values:	97	Not applicable
	98	Unknown/unable to be determined
	99	Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 1 Person's home

This code applies to instances where assessments took place in the person's usual residence, where that is a private home.

CODE 2 Carer's home

This code applies to instances where assessments took place in the person's carer's home. It refers to the carer's usual place of residence where that is a private home and is different to the person's home. If the person lives in the same usual residence as the carer, report as Code 1.

CODE 3 Other community setting

This code applies to instances where assessments took place in a community setting. It includes outpatient clinics, retirement villages, independent living units and Aboriginal Medical Centres. It includes assessments in a private home which were not the usual residence of the person or their carer.

CODE 4 Residential care home

This code applies to instances where assessments took place in a residential care home, effective from 1 November 2025. This is a place of residence for people who can no longer reside in their own home and may require ongoing personal care.

CODE 5 Private hospital

This code applies to instances where assessments took place in a private hospital when the person was an inpatient or admitted patient. Private hospitals are those owned and managed by private for-profit and not-for-profit entities.

CODE 6 Public hospital

This code applies to instances where assessments took place in a public hospital when the person was an inpatient or admitted patient. A public hospital is owned and managed by the government.

CODE 7 Other hospital inpatient setting – private

This code applies to instances where assessments took place in other private hospital inpatient settings, such as specialised private outpatient services, rehabilitation centres and urgent care centres.

CODE 8 Other hospital inpatient setting – public

This code applies to instances where assessments took place in other public hospital inpatient settings such as walk-in medical centres, nursing inpatient clinics and public rehabilitation centres.

CODE 9 Clinic or other health setting not otherwise specified

This code applies to instances where assessments took place in a clinic (not part of a hospital) where a health service is provided. This includes general practitioner clinics and specialist medical officer's rooms. This code also applies to other health settings not otherwise specified.

CODE 20 Other

This code applies to a setting not covered by codes 1-19.

CODE 97 Not applicable

This code applies where there was no assessment.

CODE 98 Unknown/unable to be determined

This code applies where the setting could not be specified or was not known to the assessor.

CODE 99 Not stated/inadequately described

This code applies where the setting is not stated or inadequately described. This code is not to be used on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: The primary setting where the aged care assessment took place, as recorded by the assessor during the assessment. Where assessments took place in multiple settings, the main one is recorded. This may occur if an assessment is postponed/interrupted and continued at a different location. There are different response options for home support and comprehensive assessments. If the assessment is occurring over-the-phone or via tele-health, record the person's location at the time of the assessment. 'Other community setting' includes locations such as Aboriginal Medical Centres.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Department of Health, Disability and Ageing (2025) [My Aged Care – Integrated Assessment Tool \(IAT\) User Guide](#), Department of Health, Disability and Ageing website, accessed 3 April 2025.

Relational attributes

Implementation in Data Set Specifications: [Aged care assessment cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on codes 3 or 4 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

Reason for aged care assessment

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—reason for assessment, code N[N]
Synonymous names:	Aged care assessment trigger
METEOR identifier:	807672
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The reason an aged care assessment was undertaken, as represented by a code.
Data Element Concept:	Aged care assessment—reason for assessment
Value Domain:	Reason for aged care assessment code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Hospital admission or discharge
	2	Change in medical condition(s)
	3	Change in care needs
	5	Fall(s)
	6	Change in cognitive status
	7	Change in mental health status
	8	Change in caring arrangements
	9	Change in living arrangements

	11	Referral from a health professional
	12	Difficulties with activities of daily living
	13	Experiencing social isolation/loneliness
	20	Other
Supplementary values:	97	Not applicable
	98	Unknown/unable to be determined
	99	Not stated/inadequately described

Collection and usage attributes

Guide for use: CODE 1 HOSPITAL ADMISSION OR DISCHARGE

This code applies where a recent hospitalisation (within three months) results in the initiation of an aged care assessment. This relates to an inpatient stays or emergency department presentations, not an outpatient visit at e.g., a hospital clinic.

CODE 2 CHANGE IN MEDICAL CONDITIONS

This code applies where a change in the person's medical conditions (including mental health and disability) has led to the initiation of an aged care assessment. The medical conditions impact on the persons need for assistance with activities and can include e.g. changes in pain levels or ability to self-manage the condition(s). Use code 11 if the person has been referred by a health professional to undertake an assessment and/or to seek aged care services due to changes in medical condition(s).

CODE 3 CHANGE IN CARE NEEDS

This code applies where there is a change in care needs, such as the need for more assistance to complete everyday tasks, that trigger the need for an assessment. Use code 2 if the change in care needs is specific to a particular medical condition.

CODE 5 FALL(S)

This code applies to falls, including slips and trips that lead to the initiation of an assessment.

CODE 6 CHANGE IN COGNITIVE STATUS

This code applies where the assessment is triggered by a change in a person's memory and/or cognition. Changes may include declining memory,

forgetfulness and confusion, poor judgement and decision-making, and other cognitive changes that impact on every day activities.

CODE 7 CHANGE IN MENTAL HEALTH STATUS

This code applies where the assessment is triggered by a change in a person's mental health. Changes may include increased symptoms of depression, anxiety, withdrawal or lack of enjoyment that impact on every day activities.

CODE 8 CHANGE IN CARING ARRANGEMENT

This code applies where the assessment is triggered by a change in caring arrangements. This includes changes where a co-resident, non-resident carer or informal support network are no longer able to provide care for the person, e.g., due to the carer's death, hospitalisation or moving away.

CODE 9 CHANGE IN LIVING ARRANGEMENT

This code applies where the assessment is triggered by a change in a person's accommodation or housing situation. This includes changes where the person needs to relocate to alternative or new accommodation e.g., due to cost, availability or suitability of housing. Where an assessment is needed because of a change in the carer's living arrangements or loss of a carer, use code 8.

CODE 11 REFERRAL FROM A HEALTH PROFESSIONAL

This code applies where a person has been referred by a health professional to undertake an assessment and/or to seek aged care services.

CODE 12 DIFFICULTIES WITH ACTIVITIES OF DAILY LIVING

This code applies where a person is finding it difficult to undertake day-to-day activities.

CODE 13 EXPERIENCING SOCIAL ISOLATION/LONELINESS

This code applies where a person is experiencing feelings of loneliness (e.g. feeling lonesome, alone or deserted) or feelings of social isolation (e.g. isolation from family, friends, their community).

CODE 20 OTHER

This code applies for any triggers which are not categorised or defined in the above and warranted an assessment.

CODE 97 NOT APPLICABLE

This code is used where the assessment reason is not required.

CODE 98 UNKNOWN/UNABLE TO BE DETERMINED

This code is used where the assessor was not able to determine the reason for the assessment.

CODE 99 NOT STATED/INADEQUATELY DESCRIBED

This code is not to be used on primary collection forms.

Comments: Codes 4 and 10 are intentionally left blank as the former items (Concerns about increasing frailty and risk of vulnerability) are not included in the Integrated Assessment Tool.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: The "trigger" for an aged care assessment relates to the reason a person has been referred for an aged care assessment. It is used to identify whether the assessment is needed because of an event or change in the persons living and needs arrangements. These changes can determine whether an aged care service is suitable and which type of care is needed.

This data element collects information on the situation or trigger that has led the person to contact My Aged Care. The question is based on the information available, the assessor's judgement based on their conversation with the person, information on the inbound referral and/or information provided by another source such as a registered supporter, carer or friend.

This element applies to home support and comprehensive assessments.

One or more codes can be selected.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Department of Health, Disability and Ageing (2025) [My Aged Care – Integrated Assessment Tool \(IAT\) User Guide](#), Department of Health, Disability and Ageing website, accessed 3 April 2025.

Relational attributes

Implementation in Data [Aged care assessment cluster](#)
Set Specifications: [Aged Care, Standard 31/10/2025](#)

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on codes 3 or 4 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

Aged care assessment source of information

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—source of information, code N[N]
METEOR identifier:	807722
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The person acting as source from which information relevant to an aged care assessment originated or was obtained, as represented by a code.
Data Element Concept:	Aged care assessment—source of information
Value Domain:	Aged care assessment source of information code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Person
	2	Person's carer, family member and/or other
	3	Person's registered supporter
	4	Person's general practitioner
	5	Representative of service provider
	6	Health professional
	7	Aboriginal Liaison Officer
	8	Care finder
	9	Via interpreter

	10	Aged care connector and co-ordinator
	11	Agent
	20	Other
Supplementary values:	97	Not applicable
	98	Unknown/unable to be determined
	99	Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 1 PERSON

This code applies where the person who is the subject of the assessment is the source for or provides the information for the assessment.

CODE 2 PERSON'S CARER, FAMILY MEMBER AND/OR OTHER

This code applies where the person's primary carer, family member or friend or other person who knows the person and provides the answers to the assessment questions.

CODE 3 PERSON'S REGISTERED SUPPORTER

This code applies where a person with the status of a [registered supporter](#) is the source of the information but is not their carer, family member or other associate (which are to be reported as CODE 2).

CODE 4 PERSON'S GENERAL PRACTITIONER

This code applies where the person's regular doctor who has assessed the person in a clinical setting and is able to advocate on the person's behalf and/or provide answers to the assessment questions.

CODE 5 REPRESENTATIVE OF SERVICE PROVIDER

This code applies when a representative of a service provider provides details on the person for the assessment.

CODE 6 HEALTH PROFESSIONAL

This code applies where a health professional, such as a nurse or psychiatrist, provides details for the assessment on the person. General practitioners are to be reported as CODE 4.

CODE 7 ABORIGINAL LIAISON OFFICER

This code applies when an Aboriginal Liaison Officer supports the person by providing details required in the assessment.

CODE 8 CARE FINDER

This code applies when a care finder assists the person completing the assessment through support and/or providing information required for the assessment.

CODE 9 VIA INTERPRETER

This code applies when the assessment information comes via an interpreter. 'Via interpreter' recognises that an interpreter works with spoken language, often translating and mediating between two languages in both directions.

CODE 10 AGED CARE CONNECTOR AND CO-ORDINATOR

This code applies when an aged care connector and co-ordinator provides details for the assessment on the person.

CODE 11 AGENT

This code applies when the assessment information comes via an agent. An agent is a professional who can provide support to an older person, but they cannot make or convey decisions on an older person's behalf. From 1 November 2025, the agent must be an organisation. The individual agent role within My Aged Care no longer exists.

CODE 20 OTHER

This code applies when another information source is used to complete the assessment that are not covered in the above.

CODE 97 NOT APPLICABLE

This code is used where the assessment source of information is not required.

CODE 98 UNKNOWN/UNABLE TO BE DETERMINED

This code is used where the assessor was not able to determine the source of information for the assessment.

CODE 99 NOT STATED/INADEQUATELY DESCRIBED

This code is not to be used on primary collection forms.

Source and reference attributes

Submitting
organisation:

Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: The person(s) or entity(ies) information is collected from at the time of assessment. Multiple codes may be reported.

This may include the person, carer, family or health provider.

This applies to both home support and comprehensive assessments.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Reference documents: ABS (Australian Bureau of Statistics) [Occupation 421131 Aged Care Coordinator](#), ABS website, accessed 9 May 2025.

ACQSC (Aged Care Quality and Safety Commission) [Supporters](#), ACQSC website, accessed 9 May 2025.

Department of Health, Disability and Ageing (2025) [My Aged Care – Integrated Assessment Tool \(IAT\) User Guide](#), Department of Health, Disability and Ageing website, accessed 3 April 2025.

My Aged Care [Upcoming changes to support roles and relationships](#), My Aged Care website, accessed 12 May 2025.

Relational attributes

Implementation in Data Set Specifications: [Aged care assessment cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:
For the Aged Care NMDS, this data element is conditional on codes 3 or 4 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

Aged care assessment palliative care phase

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—palliative care phase, code N
METEOR identifier:	807725
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The palliative care phase that was recorded at the commencement of an aged care episode or during an aged care assessment , as represented by a code.
Data Element Concept:	Aged care assessment—palliative care phase
Value Domain:	Palliative care phase code N

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Stable
	2	Unstable
	3	Deteriorating
	4	Terminal
Supplementary values:	97	Not applicable
	98	Unknown/unable to be determined
	99	Not stated/inadequately described

Collection and usage attributes

Guide for use:	<p>The palliative care phase is the stage of the palliative care patient's illness.</p> <p>CODE 1 Stable</p> <p>Patient problems and symptoms are adequately controlled by an established plan of care and:</p> <ul style="list-style-type: none">• further interventions to maintain symptom control and quality of life have been planned and• family/carer situation is relatively stable and no new issues are apparent. <p>CODE 2 Unstable</p> <p>An urgent change in the plan of emergency treatment is required because:</p> <ul style="list-style-type: none">• the patient experiences a new problem that was not anticipated in the existing plan of care, and/or• the patient experiences a rapid increase in the severity of a current problem; and/or• the family/ carers circumstances change suddenly impacting on patient care. <p>CODE 3 Deteriorating</p> <p>The care plan is addressing anticipated needs but requires periodic review because:</p> <ul style="list-style-type: none">• the patient's overall functional status is declining and• the patient experiences a gradual worsening of an existing problem and/or• the patient experiences a new but anticipated problem and/or• the family/carers experience gradual worsening distress that impacts on the patient care. <p>CODE 4 Terminal</p> <p>Death is likely within days.</p> <p>CODE 97 Not applicable</p> <p>This code is used where the assessment does not include palliative care phase or it is not required in relation to the aged care episode.</p> <p>CODE 98 Unknown/unable to be determined</p> <p>This code applies when the phase of the illness has not been reported</p> <p>Palliative care phases are not sequential and a patient may move back and forth between phases.</p> <p>CODE 99 Not stated/inadequately described</p>
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This code applies where the setting is not stated or inadequately described.
This code is not to be used on primary collection forms.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Palliative Care Outcomes Collaboration 2014. Palliative care outcomes collaboration: Clinical manual. Wollongong: University of Wollongong.

Data element attributes

Collection and usage attributes

Guide for use: The phase of palliative care is to be recorded for each residential aged care episode a person receives.

Palliative care phases are not necessarily sequential and a patient may transit back and forth between phases. Palliative care phases provide a clinical indication of the type of care required and have been shown to correlate strongly with survival within longitudinal prospective studies.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Reference documents: IHACPA (Independent Hospital and Aged Care Pricing Authority) (2025) [Australian National Subacute and Non-Acute Patient Classification Version 5.0](#), IHACPA website, accessed 5 May 2025.

Relational attributes

Implementation in Data Set Specifications: [Aged care assessment cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:
For the Aged Care NMDS, this data element is conditional on code 5 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

DSS specific information:

For the purposes of the Aged Care NMDS, it is noted that CODE 1 STABLE and CODE 2 UNSTABLE do not currently apply to the aged care context.

Recommended care setting

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—recommended care setting, code N[N]
METEOR identifier:	807732
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The living environment considered most appropriate to the long-term care needs at the time of an aged care assessment , as represented by a code.
Data Element Concept:	Aged care assessment—recommended care setting
Value Domain:	Recommended long-term care setting code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Private residence
	2	Residential care home
	3	Independent living within a retirement village
	4	Other specialised/supported accommodation
	5	Hospital
	10	Other
Supplementary values:	97	Not applicable
	98	Unknown/unable to be determined

Collection and usage attributes

Guide for use:

CODE 1 PRIVATE RESIDENCE

This code is used where the most appropriate long-term setting for the person is determined to be a private place of residence, such as a house, flat or unit. It can also include other types of private, self-contained residences such as boats, caravans or mobile homes. The residence may be owned outright, mortgaged or rented (whether private rental or public rental), but does not include communal or transitory accommodation.

CODE 2 RESIDENTIAL CARE HOME

This code is used where the most appropriate long-term setting for the person is determined to be a [residential care home](#), effective from 1 November 2025 (commonly known as nursing homes or aged care homes). It does not include retirement villages or situations where people are expected to receive some care within a residential aged care setting but live in the community.

CODE 3 INDEPENDENT LIVING WITHIN A RETIREMENT VILLAGE

This code is used where the most appropriate long-term setting for the person is determined to be a self-care living unit within a retirement village (irrespective of the type of tenure held over the residence). Independent living are types of accommodation for older people who are actively independent and able to care for themselves, meaning that they do not rely on care services.

CODE 4 OTHER SPECIALISED/SUPPORTED ACCOMMODATION

This code is used where the most appropriate long-term setting for the person is determined to be supported community accommodation. This includes community living settings or accommodation facilities in which a person is provided with some kind of community support by staff or volunteers (i.e., they are not living independently). It includes people living in retirement villages who are not living independently.

CODE 5 HOSPITAL

This code is used where the most appropriate long-term setting for the person is determined to be care within a hospital setting. It can include mental health facilities or palliative care hospices associated with hospitals.

CODE 10 OTHER

This code is used where the most appropriate long-term setting for the person is determined to be another setting not covered by the codes listed above. This can include Indigenous communities and settlements, boarding houses and crisis or transitional housing.

CODE 97 NOT APPLICABLE

This code is used where the assessment does not include a recommendation for long-term care setting.

CODE 98 UNKNOWN/UNABLE TO BE DETERMINED

This code is used for care settings which are not one of those listed above and the description is either incomplete or missing.

CODE 99 NOT STATED/INADEQUATELY DESCRIBED

This code is not to be used on primary collection forms.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: The recommended care setting captures the setting considered most appropriate to meet a person's needs into the future. It may relate to the physical environment and care needs of the person. It does not refer to the person's current living arrangements or residence, and it may not be the same as the care setting they have been approved for following an aged care assessment.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Australian Institute of Health and Welfare (2002) [Aged care assessment program data dictionary version 1.0](#), AIHW, accessed 21 February 2023.

Relational attributes

Implementation in Data [Aged care assessment cluster](#)

Set Specifications: [Aged Care, Standard 31/10/2025](#)

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on codes 3 or 4 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

DSS specific information:

In the Aged care assessment cluster, this data element collects information on the long-term care setting recommended for a person as the result of an [aged care assessment](#).

Recommended formal aged care

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—recommended formal care, code N[N]
METEOR identifier:	807734
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The type of formal care program recommended for a person to receive on the basis of an aged care assessment , as represented by a code.
Data Element Concept:	Aged care assessment—type of care recommended
Value Domain:	Recommended formal care code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Residential aged care (permanent)
	2	Residential aged care (respite)
	4	Transition Care Program
	6	Support at Home program
	7	Commonwealth Home Support Programme
	8	Multi-Purpose Services
	9	National Aboriginal and Torres Strait Islander Flexible Aged Care Program
	10	Department of Veteran’s Affairs services

	11	National Disability Insurance Scheme services
	12	Housing/homelessness services
	13	Other
	14	None
Supplementary values:	97	Not applicable
	98	Unknown/unable to be determined
	99	Not stated/inadequately described

Collection and usage attributes

Guide for use:	CODE 1	RESIDENTIAL AGED CARE (PERMANENT)
		This code applies where people are recommended for permanent residential aged care.
	CODE 2	RESIDENTIAL AGED CARE (RESPITE)
		This code applies where people are recommended for respite residential aged care.
	CODE 4	TRANSITION CARE PROGRAM
		This code applies where people are recommended for the Transition Care Program, consisting of time-limited care to help eligible people recover after a stay in hospital. Care may be provided in the home, an aged care home or in the community for up to 12 weeks.
	CODE 6	SUPPORT AT HOME PROGRAM
		This code applies where people are recommended for a Support at Home at any classification and/or short-term supports.
	CODE 7	COMMONWEALTH HOME SUPPORT PROGRAMME
		This code applies where people are recommended for the Commonwealth Home Support Programme, consisting of entry-level support for eligible people who need some help to stay at home. Service providers receive Australian Government funding through grant agreements.
	CODE 8	MULTI-PURPOSE SERVICES
		This code applies where people are recommended for Multi-Purpose Services, consisting of integrated health and aged care services for eligible people living in small communities in regional and remote areas. Care may

be provided in the home, an aged care home or in the community; services may be co-located with a hospital.

CODE 9 NATIONAL ABORIGINAL AND TORRES STRAIT ISLANDER FLEXIBLE AGED CARE PROGRAM

This code applies where people are recommended for the National Aboriginal and Torres Strait Islander Flexible Aged Care Program, consisting of culturally appropriate aged care delivered close to local communities. Care may be provided in the home, an aged care home or in the community as required to meet the needs of Aboriginal and Torres Strait Islander peoples and allow them to remain close to home and community.

CODE 10 DEPARTMENT OF VETERANS AFFAIRS SERVICES

This code applies where people are recommended for DVA services, such as those provided through Community Nursing or other DVA-funded aged care services.

CODE 11 NATIONAL DISABILITY INSURANCE SCHEME SERVICES

This code applies where people are recommended for NDIS services.

CODE 12 HOUSING/HOMELESSNESS SERVICES

This code applies where people are recommended for formal housing and homelessness services, such as those offered by state/territory government or non-government operators.

CODE 13 OTHER

This code applies where people are recommended for other formal care as part of the aged care assessment.

CODE 14 NONE

This code applies where people are not recommended for any formal care as part of the aged care assessment.

CODE 97 NOT APPLICABLE

This code is used where the assessment does not include a recommendation for formal care.

CODE 98 UNKNOWN/UNABLE TO BE DETERMINED

This code is used where the assessor was not able to determine a recommendation.

CODE 99 NOT STATED/INADEQUATELY DESCRIBED

This code is not to be used on primary collection forms.

Comments: Code numbers for permissible values have been reassigned to align with [Aged care episode—aged care program type, code N\[N\]](#) and [Aged care assessment—approved program, code N\[N\]](#).

Codes 3 and 5 are intentionally left blank.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: This can include the aged care support and/or assistance that is required for the person based on the assessment outcome, as well as those outside of aged care.

The recommended care program follows the completion of an aged care assessment. More than one recommendation can be recorded for a person.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Australian Institute of Health and Welfare (2002) [Aged care assessment program data dictionary version 1.0](#), AIHW, accessed 3 April 2025.

Department of Health, Disability and Ageing (2025) [Features of the new Support at Home program](#), Department of Health, Disability and Ageing website, accessed 3 April 2025.

Relational attributes

Implementation in Data Set Specifications: [Aged care assessment cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:

For the Aged Care NMDS this data element is conditional on codes 3 or 4 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

DSS specific information:

In the Aged care assessment cluster, this data element collects information on the type of aged care recommended for a person as the result of an [aged care assessment](#).

Approved program

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—approved program, code N[N]
METEOR identifier:	807747
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The type of aged care program(s) a person has been approved to receive on the basis of an aged care assessment , as represented by a code.
Data Element Concept:	Aged care assessment—approved program
Value Domain:	Type of aged care program code N

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Residential aged care (permanent)
	2	Residential aged care (respite)
	4	Transition Care Program
	6	Support at Home Program
	7	Commonwealth Home Support Programme
	10	Other
	11	None
Supplementary values:	97	Not applicable

98	Unknown/unable to be determined
99	Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 1 RESIDENTIAL AGED CARE (PERMANENT)

This code is used where the program type is residential aged care, consisting of aged care delivered to people in residential care homes (commonly known as nursing homes or aged care homes) for people with complex care needs. This code applies where residential aged care is provided on a permanent or ongoing basis. Where residential aged care is provided as respite (time-limited) use code 2.

CODE 2 RESIDENTIAL AGED CARE (RESPITE)

This code is used where the program type is residential aged care, consisting of aged care delivered to people in residential care homes from 1 November 2025 (commonly known as nursing homes or aged care homes) for people with complex care needs. This code applies where residential aged care is provided as respite basis, that is, time-limited. Where residential aged care is provided on a permanent (ongoing) basis use code 1.

CODE 4 TRANSITION CARE PROGRAM

This code is used where the program type is Transition Care Program, consisting of time-limited care to help eligible people recover after a stay in hospital. Care may be provided in the home, an aged care home or in the community for up to 12 weeks, with the possibility of a 6 week extension.

CODE 6 SUPPORT AT HOME PROGRAM

This code is used where the program type is the Support at Home program, consisting of Australian Government funded support for people with complex care needs to live independently in their own homes through 8 classifications. The program also includes a Restorative Care Pathway, Assistive Technology and Home Modifications (AT-HM) and End-of-Life Pathway.

CODE 7 COMMONWEALTH HOME SUPPORT PROGRAMME

This code applies where people are recommended for the Commonwealth Home Support Programme, consisting of entry-level support for eligible people who need some help to stay at home. Service providers receive Australian Government funding through grant agreements.

CODE 10 OTHER

This code is used where the program type is Innovative Pool or other legacy aged care programs.

CODE 11 NONE

This code is used when no program type is applicable.

CODE 97 NOT APPLICABLE

This code is used where the assessment does not provide approval for programs.

CODE 98 UNKNOWN/UNABLE TO BE DETERMINED

This code is used where the assessor or delegate could not determine program approval.

CODE 99 NOT STATED/INADEQUATELY DESCRIBED

This code is not to be used on primary collection forms.

Comments: Codes 3 and 5 are intentionally left blank. These codes are related to the Home Care Packages and Short-Term Restorative Care programs respectively being replaced by the Support at Home program (code 6) on 1 November 2025.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Data element attributes

Collection and usage attributes

Guide for use: The type(s) of aged care programs a person is approved to receive are recorded in My Aged Care. Not all care programs require approval, some can be recommended.

Multiple codes are permitted as more than one type of care may be approved for each person. This information may change over time.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Reference documents: Department of Health, Disability and Ageing (2025) [Transition Care Programme](#), Department of Health, Disability and Ageing website, accessed 5 May 2025.

Relational attributes

Implementation in Data Set Specifications: [Aged care assessment cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on codes 3 or 4 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

DSS specific information:

In the Aged care assessment cluster, this data element collects information on the type of aged care program formally approved for a person as the result of an [aged care assessment](#).

Reported health condition (aged care)

Identifying and definitional attributes

Metadata item type:	Data Element
Technical Name	Aged care assessment—health condition reported, code (ICD-10-AM thirteenth Edition) ANN{.N[N]}
METEOR identifier:	807736
Registration status:	Aged Care , Standard 31/10/2025
Definition:	The health conditions (including mental health conditions or disabilities) a person experiences, which have an impact on their activities of daily living and social participation, according to the ICD-10-AM code.
Data Element Concept:	Aged care assessment—health condition reported
Value Domain:	Health condition code (ICD-10-AM Thirteenth Edition) ANN{.N[N]}

Value domain attributes

Representational attributes

Classification scheme:	International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification Thirteenth Edition
Representation class:	Code
Data type:	String
Format:	ANN{.N[N]}
Maximum character length:	6

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Data element attributes

Collection and usage attributes

Guide for use: Review information on the person’s health condition(s) (including mental health conditions or disabilities) that is provided by the person, their **registered supporter**, the referrer (such as a GP or other health professional), their case notes or other similar source. Document the health condition or conditions that have an impact on the person’s activities of daily living or social participation.

In instances that the person does not have any health condition that have an impact on their activities of daily living or social participation, select 'no health conditions present'.

Reported health condition is a multiple response item. These can be new or pre-existing conditions.

Health conditions are to be recorded at each assessment.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Origin: Department of Health, Disability and Ageing (2025) [My Aged Care – Integrated Assessment Tool \(IAT\) User Guide](#), Department of Health, Disability and Ageing website, accessed 3 April 2025.

Relational attributes

Implementation in Data Set Specifications: [Aged care assessment cluster](#)
[Aged Care](#), Standard 31/10/2025

Conditional obligation:
For the Aged Care NMDS, this data element is conditional on codes 3 or 4 being selected for [Aged care assessment—assessment type, code N\[N\]](#).

Aged care address cluster

Identifying and definitional attributes

Metadata item type: Data Set Specification

METEOR identifier: 812259

Registration status: [Aged Care](#), Standard 31/10/2025

DSS type: Data Element Cluster

Scope: The Address cluster defines the data elements needed to collect the components of an address, which is defined as a collection of information used for describing the location of an entity, and/or details describing how the entity can be contacted, for individuals or organisations.

The Aged care address cluster may be used to collect address information relating to the location where a person lives or receives care, or to the location of providers, residential care homes and aged care branches (this can include both their physical location, as well as their contact (postal) location).

Please note that when collected in these different contexts, some data elements in this cluster may be specified as mandatory for collection. Not all of the items are mandatory for collection within the aged care context, but where address information are collected for any of the items included in the Aged care address cluster, it should be done as per the data specifications.

Collection and usage attributes

Collection methods: The Aged care address cluster may be used to collect address information relating to the location where a person lives or receives care, or to the location of providers, residential care homes and aged care branches (this can include both their physical location, as well as their contact (postal) location).

Please note that when collected in these different contexts, some data elements in this cluster may be specified as mandatory for collection.

Source and reference attributes

Submitting organisation: Department of Health, Disability and Ageing

Reference documents: DOHAC (Department of Health and Aged Care) 2018. 2018 Aged Care Planning Region maps. Canberra: DOHAC, viewed 27 April 2023, <https://www.health.gov.au/resources/collections/2018-aged-care-planning-region-maps>

DOHAC (Department of Health and Aged Care) 2021. Modified Monash Model. Canberra: DOHAC, viewed 27 April 2023, <https://www.health.gov.au/topics/rural-health-workforce/classifications/mmm>

Metadata items in this Data Set Specification

Address—building/complex sub-unit type, code AA[AA]

Address—sub-dwelling unit number, identifier X[X(6)]

Address—floor/level type, code A[AAA]

Address—level number, identifier X[XXXX]

Address—secondary complex name, text X[X(49)]

Address—complex road number 1, road number XXXXXX

Address—complex road number 2, road number XXXXXX

Address—complex road name, text X[X(44)]

Address—complex road type, code AA[AA]

Address—complex road suffix, street suffix code A[A]

Address—address site name, text X[X(49)]

Address—location descriptor, text X[X(49)]

Address—road number 1, road number XXXXXX

Address—road number 2, road number XXXXXX

Address—lot number, identifier X[XXXXX]

Address—road name, text X[X(44)]

Address—road type, code AA[AA]

Address—road suffix, street suffix code A[A]

Address—postal delivery service type identifier, code AA[A(9)] **Address—postal delivery number, identifier X[X(10)]**

Address—postal delivery point identifier, identifier {N(8)}

Address—suburb/town/locality name, text X[X(45)]

Address—Australian state/territory identifier, code AA[A]

Address—Australian postcode, code (Postcode datafile) NNNN

Address—country identifier, country code (SACC 2016) NNNN

Address—address line, text X[X(179)]

Address—geocode latitude, decimal degrees XN[N][.N(9)]

Address—geocode longitude, decimal degrees XN[NN][.N(9)]

Address—physical address indicator, yes/no code N

Address—primary health network identifier, code AAANNN

Address—purpose of address, code AA[A]

Address—region identifier, aged care planning region code NNN

Address—remoteness classification, (ASGS edition 3) code N

Address—remoteness classification, Modified Monash Model code N

Address—statistical area, level 1 (SA1) code (ASGS Edition 3) N(11)

Address—statistical area, level 2 (SA2) code (ASGS Edition 3) N(9)

Address—statistical area, level 3 (SA3) code (ASGS edition 3) NNNNN

NMDS Glossary

<u>Address</u>	The referential description of a location where an entity is located or can be otherwise reached or found.
<u>Aged care assessment</u>	An evaluation of the physical, psychological, medical, restorative, cultural and social needs of a person seeking to, or using aged care. They are used to establish eligibility for care, need for care services or funding required. They may be initiated by the person seeking care, the residential care home or aged care registered provider .
<u>Aged care branch</u>	An aged care branch of a registered provider means a place of business through which the provider delivers funded aged care services to an individual in the older person's home or in the community.
<u>Aged care episode</u>	The period of time during which a person receives funded aged care from an aged care registered provider . It may relate to care received through any aged care program (whether the care received is one-off, session-based or for an ongoing period of time).
<u>Aged care person registered in the aged care system</u>	A person going through an aged care-related assessment process or currently using government-funded aged care services.
<u>Aged care program payment entity</u>	A program payment entity of a registered provider represents an agreement to deliver aged care services under a Commonwealth aged care funding program from an aged care branch , or one or more residential care homes .
<u>Aged care registered provider</u>	An entity registered with the Aged Care Quality and Safety Commission to provide Commonwealth funded aged care services. An individual provider may operate a number of aged care residential care homes or aged care branches , or none.
<u>Family</u>	Two or more people related by blood, marriage (registered or de facto), adoption, step or fostering who may or may not live together.
<u>Gender</u>	Gender is about social and cultural differences in identity, expression and experience as a man, boy, woman, girl, or non-binary person. Non-binary is an umbrella term describing gender identities that are not exclusively male or female.
<u>Geographic indicator</u>	A classification scheme that divides an area into mutually exclusive sub-areas based on geographic location.
<u>Informal carer</u>	An informal carer includes any person, such as a family member , friend or neighbour, who is giving regular, ongoing assistance to another person.
<u>Palliative care phase</u>	The palliative care phase identifies a clinically meaningful period in a patient's condition. The palliative care phase is determined by a holistic clinical assessment which considers the needs of the patients and their family and carers.
<u>Registered supporter</u>	A person registered as a supporter of an older person under section 37 of the Aged Care Act 2024. A supporter will be able to request, access or receive

	information, and assist the older person in communicating information and decisions.
<u>Residential care home</u>	A residential care home of a <u>registered provider</u> that has applied for or has been approved by the Aged Care Safety and Quality Commission for the delivery of Commonwealth funded residential aged care services. May also be referred to as a nursing home, residential aged care facility or residential aged care service.
<u>Sex</u>	Sex is understood in relation to sex characteristics, such as chromosomes, hormones and reproductive organs. Sex is often used interchangeably with <u>gender</u> , however they are distinct concepts and it is important to differentiate between them.
<u>Statistical Local Area</u>	The smallest level of geography contained in the <i>Australian Standard Geographical Classification (ASGC)</i> .
<u>Urban Centre and Locality</u>	An area of concentrated urban development with a population of 200 people or more.