

# The data and its limitations

## Introduction

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

CHIPS contains information gathered through a number of instruments. Among those instruments, the following three are directly relevant to this report:

- Hostel Care Assessment (HCA, form 197)—a form completed by persons applying for admission to a hostel or by someone (normally a carer) on behalf of the applicant.
- Personal Care Assessment Instrument (PCAI, form 199)—a form completed by the hostel to determine the resident's overall level of personal care needs and forwarded to Commonwealth State Offices.
- Hostel Claim Form (HCF)—a form completed by the hostel as part of the 28 day recurrent funding.

## Resident application information

All residents admitted to a hostel must have a positive and valid HCA form. This form is valid for one calendar year from the date of the approval decision. Aged Care Assessment Teams (ACATs) with delegation are authorised to approve HCA forms.

The information entered into the CHIPS from the HCA form is the major source for the following data items in the tables:

- Sex
- Date of birth
- Marital status
- Pension status
- Indigenous status
- Country of birth
- Preferred language
- Resident's usual residence (prior to admission)

- Resident's living arrangements (prior to admission).

Of the above only sex and date of birth are mandatory fields.

## **Personal Care Assessment Instrument (PCAI)**

The Personal Care Assessment Instrument (PCAI) form is forwarded to State/Territory offices of the Commonwealth Department of Health and Family Services by hostels for each resident who may be eligible for one of the three assessed levels of Personal Care (PC) subsidy. On the basis of the information provided, residents are assigned to one of three service need categories for the purpose of funding. The three categories are Personal Care High (PCH), Personal Care Intermediate (PCI), and Personal Care Low (PCL). The information provided on the PCAI form is the source of data on resident dependency.

## **Claim for Commonwealth Benefit (HCF)**

The Claim for Commonwealth Benefits form (HCF) is sent to approved hostels every 28 days as part of the recurrent payment cycle. It shows claim details for the previous period plus a 'forecast' schedule for the current period. The hostel checks the information and records separation and absence (hospital and social leave) data for current residents and details of any admissions to the hostel which occurred during the period.

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

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

The location and characteristics of these hostels are also recorded on CHIPS.

## **Populations used in tables**

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

### **Section 2: Hostel residents and hostel characteristics**

All tables in this section (except table 2.4) relate to the number of residents who were in hostels on 30 June 1997. This population includes all approved residents and totalled 60,122 persons (58,532 for permanent care and 1,950 for respite care). Table 2.4 shows the number of persons who had at least one stay in a hostel during the period from 1 July 1996 to 30 June 1997: this totalled 88,531.

### **Section 3: Hostel admissions and separations**

There were 19,900 admissions for permanent care (permanent admissions) and 23,507 admissions for respite care (respite admissions) over the period from 1 July 1996 to 30 June 1997. Tables 3.1 to 3.4 relate to these populations.

Tables 3.5 to 3.20 refer to populations of 19,678 (people admitted to hostels for permanent care) and 18,561 (people admitted to hostels for respite care) over the period from 1 July 1996 to 30 June 1997.

## **Section 4: Hostel separations**

This section refers to populations of 18,031 (separations of permanent residents) and 23,415 (separations of respite residents) over the period from 1 July 1996 to 30 June 1997.

## **Section 5: Resident characteristics (data from HCA)**

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

## **Section 6: Hostel resident dependency (data from PCAI)**

Residents receiving Personal Care (PC) are categorised according to the information from PCAI. The rest of residents are assumed to be receiving Hostel Care (HC) only. Tables 6.1 to 6.4 in this section relate to the number of permanent or respite hostel residents as at 30 June 1997 (the same as in the section 2 and 5). Respite residents are categorised as either Hostel Care (HC) or Personal Care (PC). Tables 6.5 to 6.10 relate to the number of people (19,678 for permanent care and 18,561 for respite care) who were admitted to a hostel for permanent care or respite care during the period from 1 July 1996 to 30 June 1997. Multiple admissions are excluded from these tables.

Tables 6.11 to 6.20 represent those permanent residents (17,599) or respite residents (18,557) who separated from the hostels during the period from 1 July 1996 to 30 June 1997. Multiple separations are also excluded from these tables.

## **Data limitations**

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

- **Death indicator**—Hostels generally are not equipped for terminally ill residents. Accordingly, some residents are transferred to acute-care institutions immediately prior to death. These cases may be recorded as discharges to hospital. Hence there is an under enumeration of discharges due to death.
- **Length of stay**—The length of stay of a resident is based upon the time between the date of admission and the date of separation in relation to completed stays, and between the date of admission and 30 June 1997 for current residents' incompleting stays. When a person is transferred from one hostel to another, the date of admission to the first hostel is the date from which the length of stay is calculated. The calculation of length of stay is also limited by the cut off date of admission for some residents who existed in hostels before the establishment of CHIPS. If the date of admission is 27 June 1990 then this record may be an existing record loaded from a previous system, and the real effective date was prior to 27 June 1990. In such cases, it is impossible to know the exact length of stay of the resident.