# Specialised mental health service—residential service unit identifier, XXXXXX

## Exported from METEOR (AIHW's Metadata Online Registry)

# Specialised mental health service—residential service unit identifier, XXXXXX

## Identifying and definitional attributes

| | |
|---|---|
| **Metadata item type:** | Data Element |
| **Short name:** | Residential mental health service unit identifier |
| **METEOR identifier:** | 722711 |
| **Registration status:** | Health, Standard 16/01/2020 |
| **Definition:** | A unique identifier for a specialised mental health residential service unit, as represented by a combination of numeric and/or alphabetic characters. |
| **Data Element Concept:** | Specialised mental health service—residential service unit identifier |
| **Value Domain:** | Identifier XXXXXX |

# Value domain attributes

## Representational attributes

| | |
|---|---|
| **Representation class:** | Identifier |
| **Data type:** | String |
| **Format:** | XXXXXX |
| **Maximum character length:** | 6 |

# Data element attributes

## Collection and usage attributes

| | |
|---|---|
| **Guide for use:** | For the residential service setting, as a minimum, 24-hour staffed residential services that employ mental health trained staff on-site 24 hours per day and other services with less intensive staffing (but the trained staff on-site for a minimum of 6 hours a day and at least 50 hours per week) should be defined as separate service units. This applies to both government-operated residential services and government-funded residential services operated by non-government organisations. In addition, residential service units should be differentiated by target population. Residential services would be separately identifiable as service units using the Specialised mental health service—target population group, code N data element. For additional information, please refer to the glossary item **Residential mental health care service**. |
| | The complete identifier string, including State/Territory identifier, Region identifier, Organisation identifier, Service unit cluster identifier and Residential service unit identifier, should be a unique code for the service unit in that state/territory. Service unit reporting structures should be identical between all mental health collections (e.g., Mental Health National Minimum Data Sets and the Mental Health National Outcomes and Casemix Collection (NOCC)). |

## Relational attributes

| | |
|---|---|
| **Related metadata references:** | Supersedes Specialised mental health service—residential service unit identifier, XXXXXX<br>Health, Superseded 16/01/2020<br>Independent Hospital Pricing Authority, Qualified 23/11/2015 |
| | See also Specialised mental health service—target population group, code N<br>Health, Standard 25/01/2018 |

**Implementation in Data Set Specifications:**

[Activity based funding: Mental health care NBEDS 2020–21](#)
[Health,](#) Superseded 23/12/2020
*Implementation start date:* 01/07/2020
*Implementation end date:* 30/06/2021

[Activity based funding: Mental health care NBEDS 2021–22](#)
[Health,](#) Superseded 17/12/2021
*Implementation start date:* 01/07/2021
*Implementation end date:* 30/06/2022

[Activity based funding: Mental health care NBEDS 2022–23](#)
[Health,](#) Superseded 20/12/2022
*Implementation start date:* 01/07/2022
*Implementation end date:* 30/06/2023

[Activity based funding: Mental health care NBEDS 2023–24](#)
[Health,](#) Superseded 06/12/2023
*Implementation start date:* 01/07/2023
*Implementation end date:* 30/06/2024

[Activity based funding: Mental health care NBEDS 2024–25](#)
[Health,](#) Standard 06/12/2023
*Implementation start date:* 01/07/2024
*Implementation end date:* 30/06/2025

[Mental Health Carer Experience of Service NBEDS](#)
[Health,](#) Standard 10/06/2022
*Implementation start date:* 01/07/2022
*Conditional obligation:*

To be used when reporting records of the Mental Health Carer Experience Survey relating to residential service units.

*DSS specific information:*

This relates to the residential service unit recorded for collection location identification purposes.

[Mental health establishments NMDS 2020–21](#)
[Health,](#) Superseded 20/01/2021
*Implementation start date:* 01/07/2020
*Implementation end date:* 30/06/2021

[Mental health establishments NMDS 2021–22](#)
[Health,](#) Superseded 17/12/2021
*Implementation start date:* 01/07/2021
*Implementation end date:* 30/06/2022

[Mental health establishments NMDS 2022–23](#)
[Health,](#) Superseded 09/12/2022
*Implementation start date:* 01/07/2022
*Implementation end date:* 30/06/2023

[Mental health establishments NMDS 2023–24](#)
[Health,](#) Superseded 06/12/2023
*Implementation start date:* 01/07/2023
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[Mental health establishments NMDS 2024–25](#)
[Health,](#) Standard 06/12/2023
*Implementation start date:* 01/07/2024
*Implementation end date:* 30/06/2025

[National Outcomes and Casemix Collection NMDS 2023-24](#)
[Health,](#) Superseded 06/12/2023
*Implementation start date:* 01/07/2023
*Implementation end date:* 30/06/2024
*Conditional obligation:*

For use in the National Outcomes and Casemix Collection (NOCC), this data element applies when the service provision setting is **[Residential mental health care service](#)**.

Data must be collected for either this data element or one of [Specialised mental health service—admitted patient service unit identifier, XXXXXX](#) or [Specialised mental health service—ambulatory service unit identifier, XXXXXX.](#)

***DSS specific information:***

For the National Outcomes and Casemix Collection (NOCC), residential service units should be differentiated by target population (general, older persons, child and adolescent, youth, and forensic). Where possible, it is also desirable that residential service units identified in NOCC data correspond directly on a one-to-one basis to those reported in the [Residential mental health care NMDS 2023–24](#).

States and territories should ensure that the service unit identifiers are unique across all service unit types (i.e., admitted patient, ambulatory care, residential care services). Identifiers used to supply data to NOCC in respect of a particular service unit should be stable over time - that is, unless there has been a significant change to the unit, the same identifier should be used from year to year of reporting.

The service unit identifier is reported at each collection occasion.

Ideally, where a mental health service provides mixed service types (e.g., overnight inpatient care as well as ambulatory care), each component will be defined as a separate service unit and assigned a unique service unit identifier.

[National Outcomes and Casemix Collection NMDS 2024-25](#)
    [Health](#), Standard 06/12/2023
*Implementation start date:* 01/07/2024
*Implementation end date:* 30/06/2025
*Conditional obligation:*

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[Residential mental health care NMDS 2020–21](#)
    [Health](#), Superseded 20/01/2021
*Implementation start date:* 01/07/2020
*Implementation end date:* 30/06/2021

[Residential mental health care NMDS 2021–22](#)
    [Health](#), Superseded 17/12/2021
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[Residential mental health care NMDS 2022–23](#)
[Health](#), Superseded 09/12/2022
*Implementation start date:* 01/07/2022
*Implementation end date:* 30/06/2023

[Residential mental health care NMDS 2023–24](#)
[Health](#), Superseded 06/12/2023
*Implementation start date:* 01/07/2023
*Implementation end date:* 30/06/2024

[Residential mental health care NMDS 2024–25](#)
[Health](#), Standard 06/12/2023
*Implementation start date:* 01/07/2024
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