

17	Icelandic
18	Bulgarian
19	Czech
20	Danish
21	Estonian
22	Finnish
23	French
24	German
25	Greek
26	Hungarian
27	Italian
28	Latvian
29	Lithuanian
30	Maltese
31	Dutch/Flemish
32	Norwegian
33	Polish
34	Portuguese
35	Romanian
36	Spanish
38	Slovenian
39	Ukrainian
40	Russian
41	Serbo-Croatian
42	Arabic
43	Armenian
44	Burmese
45	Khmer/Cambodian
46	Mandarin
47	Cantonese
48	Hokkien
49	Teochew
50	Georgian
51	Hindi
52	Indonesian (Bahasa)
53	Iranian/Persian/Farsi
54	Assyrian
55	Hebrew
56	Japanese
57	Bengali
58	Korean
59	Lao
60	Lebanese
61	Malay
62	Pakistani/Urdu

63	Filipino/Tagalog
64	Tamil
65	Sinhalese/Sri Lankan
66	Telegu
67	Tetum
68	Thai
69	Punjabi
70	Turkish
71	Vietnamese
72	other Asian language not elsewhere classified
73	Dari
75	Croatian
76	Serbian
77	Slovak
78	Yiddish
79	other European language not elsewhere classified
80	Central American Indian language
81	South American Indian language
82	North American Indian language
85	Bantu language
86	Ethiopian
87	Sudanese
88	Swahili
90	Afrikaans
91	other African language (unspecified)
92	Chinese (dialect specified but not elsewhere classified)
93	Chinese (dialect unspecified)
96	sign language
97	other language not elsewhere classified
98	inadequately described
99	not known

Guide For Use: All sign languages are to be coded 96.

Code 97 is only to be used where there is no indication of even the continent in which it is spoken. It should only appear in exceptional circumstances.

Code 98 means that the respondent has not been able to communicate the name of the language which he or she prefers.

Code 99 means that information could not be obtained about the preferred language.

The data domain is that used by the New South Wales

Department of Health. It is based on the ABS 2-digit classification of country of birth. Matching codes are used for languages and countries where possible. The major Chinese dialects and Indian languages are separately coded.

Collection Methods: The nursing homes patient database maintained by the Commonwealth Department of Health and Family Services (derived from the NH5 form) contains the following language-related data item:

What is your preferred language? (including sign language)

- English
- Other (please specify)

The New South Wales hospital morbidity collection contains an item language used at home. New South Wales introduced their language item because in some areas of Sydney up to 70 per cent of patients speak a non-English language at home. Proficiency in English was considered less important because, although they may speak English well, they may prefer the language used at home in a stressful situation.

Acute hospital and private psychiatric hospitals

The National Health Data Committee decided that a language-related item should not be included in the National Minimum Data Set - Institutional Health Care, but recommended that the preferred form for language-related data items in hospital morbidity collections should be that of the ABS Census questions:

17. Does the person speak a language other than English at home?

- No, speaks only English
- Yes

If yes, please print language spoken.....

18. Answer Question 18 for each person who speaks a language other than English at home.

How well does the person speak English?

- Very well
- Well
- Not very well
- Not at all

Public psychiatric hospitals

The National Health Data Committee agreed to endorse this item as being desirable to collect, as psychiatric patients often regressed to their preferred language. However, it was more of a long-term goal and might take some time to implement.

Nursing homes

The National Health Data Committee felt that nursing home needs were different from acute hospital needs as migrant long-stay elderly residents may tend to revert to their original language, thus providing an argument for including this item in the data set. In addition, the Commonwealth Department of Community Services and Health has a strong interest in this area and will continue to collect it on the NH5.

Note: The Commonwealth Department of Health and Family Services has introduced a new Aged Care Application and Approval form which replaces the NH5 form. In the light of this and other changes to the nursing home and hostel sector, this data element will be reviewed in 1998.

Related metadata: has been superseded by Preferred language version 2

Administrative Attributes

Source Document:

Source Organisation: National minimum data set working parties

Comments: Preferred language is an important indicator of ethnicity, especially for persons born in non-English-speaking countries. It is also a surrogate measure for English language proficiency, which is an important determinant of access to health and welfare services and of effective communication between health professionals and consumers.

A four digit classification system has been developed by the Australian Bureau of Statistics (ABS Standard Classification of Languages, Catalogue number 1267.0 (1996)). A two digit classification is to be developed to facilitate collection and use for interpreter services. ABS is working with a range of Commonwealth and State agencies to develop a standard set of indicators for cultural background which will replace the NESB concept.

This data element is subject to review during 1998 in the light of recent structural reforms to the nursing homes sector.

Data Element Links

Information Model Entities linked to this Data Element

NHIM

Social characteristic

Data Agreements which include this Data Element

NMDS - Admitted patient palliative care From 01-Jul-89 to 30-Jun-98

NMDS - Alcohol and other drug treatment From 01-Jul-98 to 30-Jun-02
services
