

Proportion of carers of people with disability accessing support services to assist in their caring role, 2011 QS

Exported from METEOR (AIHW's Metadata Online Registry)

© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at <https://creativecommons.org/licenses/by/4.0/>.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

Proportion of carers of people with disability accessing support services to assist in their caring role, 2011 QS

Identifying and definitional attributes

| | |
|-----------------------------|--|
| Metadata item type: | Data Quality Statement |
| METEOR identifier: | 453700 |
| Registration status: | Community Services (retired) , Superseded 05/03/2012 |

Data quality

| | |
|--|--|
| Data quality statement summary: | <p>1. The quality of data about carers varies substantially between jurisdictions; caution should be exercised when interpreting these data. It is recommended that the data be viewed in close conjunction with data quality information, particularly response rates.</p> <p>2. CSTDA NMDS data are generated by processes that deliver services to people. It is assumed that these processes involve the assessment of disability support needs following broadly consistent principles and practices across jurisdictions. However, this assumption is untested.</p> <p>3. The interim indicator is a proxy measure of carer access to support services based on a restricted carer population: carers of specialist disability service users. The data do not measure access to support services within the entire population of carers of people with disability and it is not known how well it approximates access to services in the wider carer population. Any marked differences across the states and territories in carer access to the disability service system will reduce the usefulness of this interim measure for comparison purposes (i.e. there may be vastly different proportions of carers outside the service system).</p> |
|--|--|

| | |
|-----------------------------------|---|
| Institutional environment: | <p>The AIHW is an Australian Government statutory authority accountable to Parliament and operates under the provisions of the Australian Institute of Health and Welfare Act 1987.</p> <p>The AIHW provides expert analysis of data on health, housing and community services. More information about the AIHW is available on the AIHW website.</p> <p>For general issues relating to the CSTDA NMDS, refer to the CSTDA NMDS Data Quality Statement.</p> |
|-----------------------------------|---|

| | |
|--------------------|--------------------------------|
| Timeliness: | CSTDA NMDS 2007–08 and 2008–09 |
|--------------------|--------------------------------|

| | |
|-----------------------|--|
| Accessibility: | The AIHW provides a variety of products that draw upon the CSTDA NMDS. Published products available on the AIHW website are: |
|-----------------------|--|

- Disability support services (annual report)
- Interactive disability data cubes
- Ad hoc data are available on request (charges apply to recover costs)
- METeOR – online metadata repository
- National Community Services Data Dictionary.

Interpretability: Information to assist in interpretation of the performance indicator is contained in the NDA performance indicator glossary, which accompanies these Data Quality Statements.

Supporting information on the quality and use of the CSTDA NMDS are published annually in 'Disability support services' available in hard copy or on the AIHW website (<www.aihw.gov.au>).

Relevance: CSTDA NMDS data are generated by processes that deliver services to people. It is assumed that these processes involve the determination of eligibility and the assessment of disability support needs following broadly consistent principles across jurisdictions. However, this assumption is untested.

For general issues relating to the CSTDA NMDS, refer to the CSTDA NMDS Data Quality Statement.

The interim indicator is sourced from the 2007–08 and 2008–09 NMDS and provides information about the informal carers of people who use specialist disability services. The data collected in the NMDS is a subset of the entire population of carers of people with disability. It should be noted that the CSTDA NMDS counts people with informal carers; it does not count carers. Limited data on carers is available, and the NMDS count of people with carers may not be an accurate measure of the number of individual carers.

For the numerator, services other than those provided under the National Disability Agreement (i.e. outside the CSTDA NMDS) may also assist carers of people with disability in their caring role, such as those provided by the Home and Community Care (HACC) program. These are not included in this interim indicator.

The scope of services provided under the CSTDA/NDA varied across jurisdictions. In Victoria, Queensland and Western Australia (in some cases), specialist psychiatric disability services were provided under the CSTDA/NDA. In all other jurisdictions specific mental health services were funded and provided under health, rather than disability, portfolios. To facilitate comparability of data, specialist psychiatric disability services in Victoria, Queensland and Western Australia are excluded from the NDA performance indicators.

That is, the data excludes those who only receive specialist psychiatric disability services, but does not exclude those people with a psychiatric condition who receive other specialist disability services. In addition, the predominant service models vary across jurisdictions, and this may affect comparability of data. For example, differences across the states and territories in the predominant model of accommodation support lead to differences in the number of people accessing those services. Caution is recommended in the use or interpretation of performance at the service type level.

There is a risk when service type level data is interpreted in isolation as various service types are complementary and the emphasis on different services reflects jurisdictional policy directions. For more information, see Disability support services 2007–08 and Disability support services 2008–09 (forthcoming).

| | |
|-------------------|--|
| Accuracy: | <p>A potential source of error in the CSTDA NMDS is people for whom carer information is not stated or not collected. Carer identification has improved over time: the not stated/not collected rate for the existence of a carer has decreased from approximately twenty percent for the 2003-04 to 2005-06 NMDS to the current levels of 9.3% for the 2007-08 NMDS and 8.5% for the 2008-09 NMDS.</p> <p>However, not stated/not collected rates for carer data items vary substantially across jurisdictions, with, for example, rates above thirty percent for Queensland in 2007-08 and below five percent for Tasmania.</p> <p>The overall not stated/not collected rates for the carer data items were: 19.3% in 2008-09 for carer primary status (11.6% in 2007-08); 18.4% in 2008-09 for carer residency status (12.5% in 2007-08); 16.1% in 2008-09 for carer relationship to service user (8.4% in 2007-08); and 23.9% in 2008-09 for carer age group (19.1% in 2007-08).</p> <p>See the accompanying appendix for further details. Not stated or not collected carer information may introduce bias into the results affecting both the accuracy of estimates and the comparability of estimates across jurisdictions. In addition, a coding audit of carer data items has not been undertaken, thus the accuracy of the carer information in the NMDS is not known.</p> |
| Coherence: | <p>Issue of scope: any marked differences across the states and territories in carer access to the disability service system will reduce the usefulness of this interim measure for comparison purposes (i.e. there may be vastly different proportions of carers outside the service system).</p> <p>For general issues relating to the CSTDA NMDS, refer to the CSTDA NMDS Data Quality Statement.</p> |

Data products

Implementation start date: 06/07/2011

Relational attributes

| | |
|--|---|
| Related metadata references: | <p>Has been superseded by National Disability Agreement: (h) interim-Proportion of carers of people with disability accessing support services to assist in their caring role, 2012 QS</p> <p>Community Services (retired), Standard 05/03/2012</p> |
| Indicators linked to this Data Quality statement: | <p>National Disability Agreement: h-Proportion of carers of people with disability accessing support services to assist in their caring role (h-interim), 2011</p> <p>Community Services (retired), Superseded 05/03/2012</p> |