

National Disability Agreement: (h) interim-Proportion of carers of people with disability accessing support services to assist in their caring role, 2012 QS

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Identifying and definitional attributes

Metadata item type:	Data Quality Statement
METEOR identifier:	478582
Registration status:	Community Services (retired) , Standard 05/03/2012

Data quality

Data quality statement summary:

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.
2. DS/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, although it is known that differing assessment tools are in use across jurisdictions. This assumption is untested.
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).

Institutional environment: 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. The AIHW provides expert analysis of data on health, housing and community services. More information about the AIHW is available on the [AIHW website](#).

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

Timeliness: CSTDA NMDS 2008–09 and DS NMDS 2009–10.

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

- Disability support services (annual report)
- Australia's Welfare
- 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 DS/CSTDA NMDS are published annually in 'Disability support services' available in hard copy or on the AIHW website (<www.aihw.gov.au>).

Relevance: DS/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, although it is known that differing assessment tools are in use across jurisdictions. This assumption is untested.

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

The interim indicator is sourced from CSTDA NMDS 2008–09 and DS NMDS 2009–10 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 DS/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 DS/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 2008–09](#) and [Disability support services 2009–10](#).

Accuracy: A potential source of error in the DS/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 7.7% for the 2009–10 DS NMDS and 8.5% for the 2008–09 CSTDA NMDS. However, not stated/not collected rates for carer data items vary substantially across jurisdictions, with, for example, rates above twenty five per cent for Victoria in 2009–10 and below five percent for Tasmania. The overall not stated/not collected rates for the carer data items were: 11.7% in 2009–10 for carer primary status (11.6% in 2008–09); 11.9% in 2009–10 for carer residency status (12.5% in 2008–09); 9.9% in 2009–10 for carer relationship to service user (8.4% in 2008–09); and 16.8% in 2009–10 for carer age group (19.1% in 2008–09). 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.

Coherence: The AIHW provides a variety of products that draw upon the DS/CSTDA NMDS. Published products available on the AIHW website are:

- Disability support services (annual report)
- Australia's Welfare
- Interactive disability data cubes
- Ad hoc data are available on request (charges apply to recover costs)
- METeOR – online metadata repository
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Relational attributes

Related metadata references:

Supersedes [Proportion of carers of people with disability accessing support services to assist in their caring role, 2011 QS](#)
[Community Services \(retired\)](#), Superseded 05/03/2012

Indicators linked to this Data Quality statement:

[National Disability Agreement: h-Proportion of carers of people with disability accessing support services to assist in their caring role \(h-interim\), 2012](#)
[Community Services \(retired\)](#), Superseded 23/05/2013