

Service provider organisation—number of service contacts, total N[NNNNN]

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Service provider organisation—number of service contacts, total N[NNNNN]

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Number of service contacts
METEOR identifier:	483060
Registration status:	Health , Standard 13/11/2014 Indigenous , Standard 16/09/2014
Definition:	The total number of service contacts provided to individual clients by a service provider organisation.
Data Element Concept:	Service provider organisation—number of service contacts
Value Domain:	Total contacts N[NNNNN]

Value domain attributes

Representational attributes

Representation class:	Total
Data type:	Number
Format:	N[NNNNN]
Maximum character length:	6
Unit of measure:	Service contact

Data element attributes

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
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Relational attributes

Implementation in Data Set Specifications:	Aboriginal and Torres Strait Islander primary health-care service individual client contacts cluster
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[Indigenous](#), Standard 07/12/2017

DSS specific information:

This data element is used to collect the number of individual client contacts made by Aboriginal and Torres Strait Islander primary health-care service workers.

[Aboriginal and Torres Strait Islander primary health-care services individual client contacts cluster](#)

[Indigenous](#), Standard 07/12/2017

DSS specific information:

This data element is used to collect the number of individual client contacts made by Aboriginal and Torres Strait Islander primary health-care service workers.

[Aboriginal and Torres Strait Islander primary health-care services individual client contacts cluster](#)

[Indigenous](#), Standard 16/09/2014

DSS specific information:

This data element is used to collect the number of individual client contacts made by Aboriginal and Torres Strait Islander primary health-care service' workers.

[Aboriginal and Torres Strait Islander specific primary health care NBEDS December 2023](#)

[Indigenous](#), Standard 25/02/2024

Implementation start date: 01/07/2023

Implementation end date: 31/12/2023

Conditional obligation:

Data are only provided to the AIHW for babies born during the preceding 12 months up to the census date. In the case of multiple births, data should be recorded for each baby born.

Data are provided to the AIHW for [live births](#) only.

DSS specific information:

In the ATSI SPHC NBEDS babies are included in the indicator if they had more than one service contact.

Attendance is counted using the baby's client record only.

A visit/service contact is defined as a clinical interaction between a client and the service, that leads to either the creation of a new client record or the updating of an existing client record in the Clinical Information System (CIS). This could include clinical interactions by virtual care (telehealth).

Visits/service contacts do not include:

- group contacts (e.g., group antenatal classes, men's groups, support groups)
- administration activities (e.g., sending SMS reminder, non-clinical phone calls)
- transport that does not involve the direct provision of health care
- participation in programs subcontracted to other organisations and funded externally
- routine care of clients in residential homes run by the service (where regular progress notes may be recorded in the residential aged care facility CIS).

Multiple visits/service contacts may occur on a single day.

Where the CIS includes a 'visit type' field, the following exclusions apply, unless specifically defined within the indicator:

Counted as a visit	Not counted as a visit
Home visit consultation	Email
Hostel	Non-visit
Locum service	Out of office
Nursing home consultation	Practice admin
RACF (residential aged care facility) consultation	SMS
Surgery consultation	Telephone (non-clinical)
Telehealth (clinical)	
Other	
Hospital consultation	

[Aboriginal and Torres Strait Islander specific primary health care NBEDS June 2024](#)

[Indigenous](#), Qualified 17/04/2024

Implementation start date: 01/01/2024

Implementation end date: 30/06/2024

Conditional obligation:

Data are only provided to the AIHW for babies born during the preceding 12

months up to the census date. In the case of multiple births, data should be recorded for each baby born.

Data are provided to the AIHW for [live births](#) only.

DSS specific information:

In the ATSI/PHC NBEDS babies are included in the indicator if they had more than one service contact.

Attendance is counted using the baby's client record only.

A visit/service contact is defined as a clinical interaction between a client and the service, that leads to either the creation of a new client record or the updating of an existing client record in the Clinical Information System (CIS). This could include clinical interactions by virtual care (telehealth).

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Locum service	Out of office
Nursing home consultation	Practice admin
RACF (residential aged care facility) consultation	SMS
Surgery consultation	Telephone (non-clinical)
Telehealth (clinical)	
Other	
Hospital consultation	

[Bringing Them Home/Link Up Counselling Program client contacts cluster](#)
[Indigenous](#), Superseded 07/12/2017

DSS specific information:

This data element is used to collect the number of individual client contacts made by Bringing Them Home/Link Up Counsellors.

[Bringing Them Home/Link Up Counselling Program individual client contacts cluster](#)
[Indigenous](#), Standard 07/12/2017

DSS specific information:

This data element is used to collect the number of individual client contacts made by Bringing Them Home/Link Up Counsellors.

[Care coordination mental health service type cluster](#)
[Health](#), Standard 13/11/2014

DSS specific information:

A service contact must involve at least two persons, one of whom must be from a [mental health-related non-government organisation](#).

Service contacts are not restricted to in person communication but can include telephone, video link or other forms of direct communication.

Service contacts can either be with a client, or with a third party such as a carer or family member, other professional or mental health worker or other service provider.

A service contact should be recorded for each client for whom the service is provided, regardless of the number of clients or third parties participating.

There may be multiple service contacts on any one day for a client, including contacts involving third parties. If multiple service providers deliver a service contact to the same client concurrently a single service contact should be recorded. If multiple service providers deliver a service contact to the same client sequentially, a service contact should be recorded for each service provider.

Services of an administrative nature are excluded. Examples include telephone contact to schedule an appointment; noting receipt of test results that require no further action; and noting a patient/client did not attend a planned service contact. These instances would not be regarded as service contacts.

In instances where documenting the client's service contact details is separated in time from the service provision, the documenting of the contact details is not counted as a separate service contact.

Travel to or from the location at which the service is provided, for example to or from outreach facilities or private homes, is not to be reported as a service contact.

[Education, employment and training mental health service type cluster](#)

[Health](#), Standard 13/11/2014

DSS specific information:

A service contact must involve at least two persons, one of whom must be from a [mental health-related non-government organisation](#).

Service contacts are not restricted to in person communication but can include telephone, video link or other forms of direct communication.

Service contacts can either be with a client, or with a third party such as a carer or family member, other professional or mental health worker or other service provider.

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Travel to or from the location at which the service is provided, for example to or from outreach facilities or private homes, is not to be reported as a service contact.

[Indigenous-specific primary health care NBEDS December 2022](#)

[Indigenous](#), Superseded 18/12/2023

Implementation start date: 01/07/2022

Implementation end date: 31/12/2022

Conditional obligation:

Data are only provided to the AIHW for babies born during the preceding 12 months up to the census date. In the case of multiple births, data should be recorded for each baby born.

Data are provided to the AIHW for [live births](#) only.

DSS specific information:

In the ISPHC NBEDS babies are included in the indicator if they had more than one service contact.

Attendance is counted using the baby's client record only.

A visit/service contact is defined as a clinical interaction between a client and the service, that leads to either the creation of a new client record or the updating of an existing client record in the Clinical Information System (CIS). This could include clinical interactions by virtual care (telehealth).

Visits/service contacts do not include:

- group contacts (e.g. group antenatal classes, men's groups, support groups)
- administration activities (e.g. sending SMS reminder, non-clinical phone calls)
- transport that does not involve the direct provision of health care
- participation in programs subcontracted to other organisations and funded externally
- routine care of clients in residential homes run by the service (where regular progress notes may be recorded in the residential aged care facility CIS).

Multiple visits/service contacts may occur on a single day.

Where the CIS includes a 'visit type' field, the following exclusions apply, unless specifically defined within the indicator:

Counted as a visit	Not counted as a visit
Home visit consultation	Email
Hostel	Non-visit
Locum service	Out of office
Nursing home consultation	Practice admin
RACF (residential aged care facility) consultation	SMS
Surgery consultation	Telephone (non-clinical)
Telehealth (clinical)	
Other	
Hospital consultation	

[Indigenous-specific primary health care NBEDS June 2022](#)

[Indigenous](#), Superseded 27/08/2023

Implementation start date: 01/01/2022

Implementation end date: 30/06/2022

Conditional obligation:

Data are only provided to the AIHW for babies born during the preceding 12 months up to the census date. In the case of multiple births, data should be recorded for each baby born.

Data are provided to the AIHW for [live births](#) only.

DSS specific information:

In the ISPHC NBEDS babies are included in the indicator if they had more than one service contact.

Attendance is counted using the baby's client record only.

A visit/service contact is defined as a clinical interaction between a client and the service, that leads to either the creation of a new client record or the updating of an existing client record in the Clinical Information System (CIS). This could include clinical interactions by virtual care (telehealth).

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Locum service	Out of office
Nursing home consultation	Practice admin
RACF (residential aged care facility) consultation	SMS
Surgery consultation	Telephone (non-clinical)
Telehealth (clinical)	
Other	
Hospital consultation	

[Indigenous-specific primary health care NBEDS June 2023](#)

[Indigenous](#), Superseded 25/02/2024

Implementation start date: 01/01/2023

Implementation end date: 30/06/2023

Conditional obligation:

Data are only provided to the AIHW for babies born during the preceding 12 months up to the census date. In the case of multiple births, data should be recorded for each baby born.

Data are provided to the AIHW for [live births](#) only.

DSS specific information:

In the ISPHC NBEDS babies are included in the indicator if they had more than one service contact.

Attendance is counted using the baby's client record only.

A visit/service contact is defined as a clinical interaction between a client and the service, that leads to either the creation of a new client record or the updating of an existing client record in the Clinical Information System (CIS). This could include clinical interactions by virtual care (telehealth).

Visits/service contacts do not include:

- group contacts (e.g., group antenatal classes, men's groups, support groups)
- administration activities (e.g., sending SMS reminder, non-clinical phone calls)
- transport that does not involve the direct provision of health care

- participation in programs subcontracted to other organisations and funded externally
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Nursing home consultation	Practice admin
RACF (residential aged care facility) consultation	SMS
Surgery consultation	Telephone (non-clinical)
Telehealth (clinical)	
Other	
Hospital consultation	

[Individual advocacy mental health service type cluster](#)

[Health](#), Standard 13/11/2014

DSS specific information:

A service contact must involve at least two persons, one of whom must be from a [mental health-related non-government organisation](#).

Service contacts are not restricted to in person communication but can include telephone, video link or other forms of direct communication.

Service contacts can either be with a client, or with a third party such as a carer or family member, other professional or mental health worker or other service provider.

A service contact should be recorded for each client for whom the service is provided, regardless of the number of clients or third parties participating.

There may be multiple service contacts on any one day for a client, including contacts involving third parties. If multiple service providers deliver a service contact to the same client concurrently a single service contact should be recorded. If multiple service providers deliver a service contact to the same client sequentially, a service contact should be recorded for each service provider.

Services of an administrative nature are excluded. Examples include telephone contact to schedule an appointment; noting receipt of test results that require no further action; and noting a patient/client did not attend a planned service contact. These instances would not be regarded as service contacts.

In instances where documenting the client's service contact details is separated in time from the service provision, the documenting of the contact details is not counted as a separate service contact.

Travel to or from the location at which the service is provided, for example to or from outreach facilities or private homes, is not to be reported as a service contact.

[Online Services Report \(OSR\) DSS 2020–21](#)

[Indigenous](#), Standard 07/04/2024

Implementation start date: 01/07/2020

Implementation end date: 30/06/2021

DSS specific information:

In the OSR DSS only aggregate data on the number of client contacts for the

[funded organisation](#) during the financial year are provided to the AIHW. Data are disaggregated by:

- [Person—Indigenous status, code N](#)
 - Aboriginal and/or Torres Strait Islander (CODE 1, CODE 2 or CODE 3)
 - Non-Indigenous (CODE 4)
 - Indigenous status not stated (CODE 9).
- [Service provider organisation—contact worker type, Aboriginal and Torres Strait Islander primary health care code N\[N\]](#)
 - CODE 1–CODE 40 only.
- [Person—sex, code X](#)
 - Male (CODE 1)
 - Female (CODE 2)
 - Gender not recorded (CODE 9) (Although reporting may vary, it is possible that in some funded organisations CODE 3 'Other' is included in this category for reporting).

For data collection, recording practices may vary between funded organisations so that:

- Although the term gender is used in the Health Data Portal for data collection, either sex or gender may be collected, with both variables reported together as 'sex'.
- Either 'Sex recorded at birth' or 'Sex reported at the time of collection' may be collected, with both variables reported together as 'sex'. It is likely that 'Sex reported at the time of collection' is most commonly collected.

Health care activities to include as a client contact:

- Contacts with staff and visiting health professionals whether or not they were paid by the funded organisation;
- All contacts involving transport.

Health care activities not to be included as a client contact:

- Residential care;
- Groups (e.g. antenatal classes, men's groups, support groups);
- Administrative contacts with clients (e.g. receptionist making a booking, arranging transport for a hospital clinic).

Where an Aboriginal Health Worker (AHW) provides health care and transport as part of the one contact, this should be recorded as an AHW contact.

[Personalised support—linked to housing mental health service type cluster Health](#), Standard 13/11/2014

DSS specific information:

A service contact must involve at least two persons, one of whom must be from a [mental health-related non-government organisation](#).

Service contacts are not restricted to in person communication but can include telephone, video link or other forms of direct communication.

Service contacts can either be with a client, or with a third party such as a carer or family member, other professional or mental health worker or other service provider.

A service contact should be recorded for each client for whom the service is provided, regardless of the number of clients or third parties participating.

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Services of an administrative nature are excluded. Examples include telephone contact to schedule an appointment; noting receipt of test results that require no further action; and noting a patient/client did not attend a planned service contact.

These instances would not be regarded as service contacts.

In instances where documenting the client's service contact details is separated in time from the service provision, the documenting of the contact details is not counted as a separate service contact.

Travel to or from the location at which the service is provided, for example to or from outreach facilities or private homes, is not to be reported as a service contact.

[Personalised support—other mental health service type cluster](#)

[Health](#), Standard 13/11/2014

DSS specific information:

A service contact must involve at least two persons, one of whom must be from a [mental health-related non-government organisation](#).

Service contacts are not restricted to in person communication but can include telephone, video link or other forms of direct communication.

Service contacts can either be with a client, or with a third party such as a carer or family member, other professional or mental health worker or other service provider.

A service contact should be recorded for each client for whom the service is provided, regardless of the number of clients or third parties participating.

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Travel to or from the location at which the service is provided, for example to or from outreach facilities or private homes, is not to be reported as a service contact.

Implementation in Indicators:

Used as Numerator

[First Nations-specific primary health care: PI01a-Number of First Nations babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, December 2023](#)

[Indigenous](#), Standard 25/02/2024

[First Nations-specific primary health care: PI01a-Number of First Nations babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, June 2024](#)

[Indigenous](#), Qualified 17/04/2024

[First Nations-specific primary health care: PI01b-Proportion of First Nations babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, December 2023](#)

[Indigenous](#), Standard 25/02/2024

[First Nations-specific primary health care: PI01b-Proportion of First Nations babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, June 2024](#)

[Indigenous](#), Qualified 17/04/2024

[First Nations-specific primary health care: PI02a-Number of First Nations babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, December 2023](#)

[Indigenous](#), Standard 25/02/2024

[First Nations-specific primary health care: PI02a-Number of First Nations babies born within the previous 12 months who attended the organisation more than once,](#)

[and who have a birthweight result within a specified category, June 2024](#)

[Indigenous, Qualified 17/04/2024](#)

[First Nations-specific primary health care: PI02b-Proportion of First Nations babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, December 2023](#)

[Indigenous, Standard 25/02/2024](#)

[First Nations-specific primary health care: PI02b-Proportion of First Nations babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, June 2024](#)

[Indigenous, Qualified 17/04/2024](#)

[Indigenous-specific primary health care: PI01a-Number of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, December 2022](#)

[Indigenous, Superseded 18/12/2023](#)

[Indigenous-specific primary health care: PI01a-Number of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, June 2022](#)

[Indigenous, Superseded 27/08/2023](#)

[Indigenous-specific primary health care: PI01a-Number of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, June 2023](#)

[Indigenous, Superseded 25/02/2024](#)

[Indigenous-specific primary health care: PI01b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, December 2022](#)

[Indigenous, Superseded 18/12/2023](#)

[Indigenous-specific primary health care: PI01b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, June 2022](#)

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[Indigenous-specific primary health care: PI01b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, June 2023](#)

[Indigenous, Superseded 25/02/2024](#)

[Indigenous-specific primary health care: PI02a-Number of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, December 2022](#)

[Indigenous, Superseded 18/12/2023](#)

[Indigenous-specific primary health care: PI02a-Number of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, June 2022](#)

[Indigenous, Superseded 27/08/2023](#)

[Indigenous-specific primary health care: PI02a-Number of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, June 2023](#)

[Indigenous, Superseded 25/02/2024](#)

[Indigenous-specific primary health care: PI02b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, December 2022](#)

[Indigenous, Superseded 18/12/2023](#)

[Indigenous-specific primary health care: PI02b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, June 2022](#)

[Indigenous, Superseded 27/08/2023](#)

[Indigenous-specific primary health care: PI02b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, June 2023](#)

[Indigenous, Superseded 25/02/2024](#)

Used as Denominator

[First Nations-specific primary health care: PI01b-Proportion of First Nations babies](#)

[born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, December 2023](#)

[Indigenous](#), Standard 25/02/2024

[First Nations-specific primary health care: PI01b-Proportion of First Nations babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, June 2024](#)

[Indigenous](#), Qualified 17/04/2024

[First Nations-specific primary health care: PI02b-Proportion of First Nations babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, December 2023](#)

[Indigenous](#), Standard 25/02/2024

[First Nations-specific primary health care: PI02b-Proportion of First Nations babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, June 2024](#)

[Indigenous](#), Qualified 17/04/2024

[Indigenous-specific primary health care: PI01b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, December 2022](#)

[Indigenous](#), Superseded 18/12/2023

[Indigenous-specific primary health care: PI01b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, June 2022](#)

[Indigenous](#), Superseded 27/08/2023

[Indigenous-specific primary health care: PI01b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have birthweight recorded, June 2023](#)

[Indigenous](#), Superseded 25/02/2024

[Indigenous-specific primary health care: PI02b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, December 2022](#)

[Indigenous](#), Superseded 18/12/2023

[Indigenous-specific primary health care: PI02b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, June 2022](#)

[Indigenous](#), Superseded 27/08/2023

[Indigenous-specific primary health care: PI02b-Proportion of Indigenous babies born within the previous 12 months who attended the organisation more than once, and who have a birthweight result within a specified category, June 2023](#)

[Indigenous](#), Superseded 25/02/2024