

Aged care assessment—assessment result, Australian National Aged Care Classification code N[N]

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Aged care assessment—assessment result, Australian National Aged Care Classification code N[N]

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Australian National Aged Care Classification assessment result
Synonymous names:	ANN-AC assessment result
METEOR identifier:	775215
Registration status:	Aged Care , Standard 30/06/2023
Definition:	The outcome of an aged care assessment, as represented by a Australian National Aged Care Classification (AN-ACC) code.

Data Element Concept:	Aged care assessment—assessment result
Value Domain:	Australian National Aged Care Classification assessment result code N[N]

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Permissible values:	1	Admit for palliative care
	2	Independent without compounding factors
	3	Independent with compounding factors
	4	Assisted mobility, high cognition, without compounding factors
	5	Assisted mobility, high cognition, with compounding factors
	6	Assisted mobility, medium cognition, without compounding factors
	7	Assisted mobility, medium cognition, with compounding factors
	8	Assisted mobility, low cognition
	9	Not mobile, higher function, without compounding factors
	10	Not mobile, higher function, with compounding factors
	11	Not mobile, lower function, lower pressure sore risk
	12	Not mobile, lower function, higher pressure sore risk, without compounding factors
	13	Not mobile, lower function, higher pressure sore risk, with compounding factors
Supplementary values:	97	Not applicable

Collection and usage attributes

Guide for use:

The following codes - which relate to current or new aged care residents - reflect their characteristics and determine the associated variable subsidy. They are determined through Australian National Aged Care Classification (AN-ACC) assessment according to set criteria: see Reference documents below.

CODE 1 Admit for palliative care

This code is used where people have been admitted to non-respite (permanent) residential aged care for the purpose of receiving palliative care. This means:

- a life expectancy of 3 months or less, AND
- an Australia-Modified Karnofsky Performance1 (AKPS) score of 40 or less.

The life expectancy and AKPS scores must have been given prior to entry by a medical practitioner, or nurse practitioner who is independent of the residential aged care facility. This allows for planned entry of people for palliative care without a subsequent AN-ACC assessment.

CODE 2 Independent without compounding factors

This code is used where people on assessment meet the criteria for 'Independent without compounding factors' of the AN-ACC classifications.

CODE 3 Independent with compounding factors

This code is used where people on assessment meet the criteria for 'Independent with compounding factors' of the AN-ACC classifications.

CODE 4 Assisted mobility, high cognition, without compounding factors

This code is used where people on assessment meet the criteria for 'Assisted mobility, high cognition, without compounding factors' of the AN-ACC classifications.

CODE 5 Assisted mobility, high cognition, with compounding factors

This code is used where people on assessment meet the criteria for 'Assisted mobility, high cognition, with compounding factors' of the AN-ACC classifications.

CODE 6 Assisted mobility, medium cognition, without compounding factors

This code is used where people on assessment meet the criteria for 'Assisted mobility, medium cognition, without compounding factors' of the AN-ACC classifications.

CODE 7 Assisted mobility, medium cognition, with compounding factors

This code is used where people on assessment meet the criteria for 'Assisted mobility, medium cognition, with compounding factors' of the AN-ACC classifications.

CODE 8 Assisted mobility, low cognition

This code is used where people on assessment meet the criteria for 'Assisted mobility, low cognition' of the AN-ACC classifications.

CODE 9 Not mobile, higher function, without compounding factors

This code is used where people on assessment meet the criteria for 'Not mobile, higher function, without compounding factors' of the AN-ACC classifications.

CODE 10 Not mobile, higher function, with compounding factors

This code is used where people on assessment meet the criteria for 'Not mobile, higher function, with compounding factors' of the AN-ACC classifications.

CODE 11 Not mobile, lower function, lower pressure sore risk

This code is used where people on assessment meet the criteria for 'Not mobile, lower function, lower pressure sore risk' of the AN-ACC classifications.

CODE 12 Not mobile, lower function, higher pressure sore risk, without compounding factors

This code is used where people on assessment meet the criteria for 'Not mobile, lower function, higher pressure sore risk, without compounding factors' of the AN-ACC classifications.

CODE 13 Not mobile, lower function, higher pressure sore risk, with compounding factors

This code is used where people on assessment meet the criteria for 'Not mobile, lower function, higher pressure sore risk, with compounding factors' of the AN-ACC classifications.

CODE 97 Not applicable

This code is used where the assessment was not an AN-ACC assessment.

CODE 99 Not stated/inadequately described

This code is not to be used on primary collection forms.

Source and reference attributes

Submitting organisation: Department of Health and Aged Care

Reference documents: [AN-ACC resources | Australian Government Department of Health and Aged Care](#). Viewed 9 January 2023, <https://www.health.gov.au/resources/collections/an-acc-resources>

Data element attributes

Collection and usage attributes

Guide for use: This code (and associated class) reflects the amount of funding a residential aged care services will receive for the care of that person. The AN-ACC funding model includes 13 variable funding classes that reflect the different care needs of residents in each class. It includes separate funding classes for people who enter residential care for the purpose of receiving palliative care or care other than palliative care and those entering for respite care.

Each class represents persons:

- with similar needs and the cost of staff time to deliver consistent care
- whose daily care costs are similar with similar clinical risks and safety indicators.

After an AN-ACC assessment is completed and submitted to the Department of Health and Aged Care by an assessor, the Department processes the assessment data received and assigns the resident a classification level.

Reclassification can occur according to specific criteria.

Source and reference attributes

Submitting organisation: Department of Health and Aged Care

Reference documents: [AN-ACC resources | Australian Government Department of Health and Aged Care](#). Viewed 9 January 2023, <https://www.health.gov.au/resources/collections/an-acc-resources>

Relational attributes

Implementation in Data Set [Aged care assessment cluster](#)

Specifications: [Aged Care, Standard 30/06/2023](#)

Conditional obligation:

For the Aged Care NMDS, this data element is conditional on code 4 being selected for [Aged care assessment—assessment type, code N\[N\]](#).