First Nations-specific primary health care: PI07a-Number of First Nations regular clients with a chronic disease who have a Chronic Disease Management Plan prepared, December 2023

Exported from METEOR (AIHW's Metadata Online Registry)

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Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Output measure
Short name:	PI07a-Number of First Nations regular clients with a chronic disease who have a Chronic Disease Management Plan prepared, December 2023
METEOR identifier:	787959
Registration status:	Indigenous, Standard 25/02/2024
Description:	Number of **First Nations regular clients** who have a chronic disease and for whom a Chronic Disease Management Plan was prepared within the previous 24 months.
Rationale:	Preventable chronic diseases are responsible for a significant burden of disease for First Nations people and if poorly controlled increase hospitalisations, complications and the cost of health care. Care plans are the foundation for providing appropriate long-term care.
Indicator set:	Aboriginal and Torres Strait Islander specific primary health care national key performance indicators December 2023 Indigenous, Standard 25/02/2024

Collection and usage attributes

Computation description:	Count of First Nations regular clients who have a chronic disease (type 2 diabetes) and for whom a Chronic Disease Management Plan was prepared within the previous 24 months. Count is of people, not plans. Consider only the most recent plan. Presented as a number. Chronic Disease Management Plan: The Chronic Disease Management (CDM) Medicare items on the Medicare Benefits Schedule (MBS) enable GPs to plan and coordinate the health care of patients with chronic or terminal medical conditions. It includes MBS-rebated Chronic Disease Management Plans (MBS items: 721; 229; 92024; or 92055).
Computation:	Numerator only.
Numerator:	Calculation A: Number of First Nations regular clients who have type 2 diabetes and for whom an in-person MBS-rebated Chronic Disease Management Plan (MBS items: 721 or 229) was prepared within the previous 24 months. Calculation B: Number of First Nations regular clients who have type 2 diabetes and for whom a Telehealth MBS-rebated Chronic Disease Management Plan (MBS items: 92024 or 92055) was prepared within the previous 24 months.
Numerator data elements:	**Data Element / Data Set** Person—diabetes mellitus status, code NN **Data Source** Aboriginal and Torres Strait Islander specific primary health care national Key Performance Indicators (nKPI) data collection

NMDS / DSS

Aboriginal and Torres Strait Islander specific primary health care NBEDS December 2023

Guide for use

Type 2 diabetes only.

Data Element / Data Set

Person—Indigenous status, code N

Data Source

Aboriginal and Torres Strait Islander specific primary health care national Key Performance Indicators (nKPI) data collection

NMDS / DSS

Aboriginal and Torres Strait Islander specific primary health care NBEDS December 2023

Guide for use

First Nations only.

Data Element / Data Set

Person—regular client indicator, yes/no code N

Data Source

Aboriginal and Torres Strait Islander specific primary health care national Key Performance Indicators (nKPI) data collection

NMDS / DSS

Aboriginal and Torres Strait Islander specific primary health care NBEDS December 2023

Guide for use

Regular clients only.

Data Element / Data Set

Person—chronic disease management plan type, code N

Data Source

Aboriginal and Torres Strait Islander specific primary health care national Key Performance Indicators (nKPI) data collection

NMDS / DSS

Aboriginal and Torres Strait Islander specific primary health care NBEDS December 2023

Guide for use

In-person and telehealth MBS-rebated Chronic Disease Management Plans only.

Disaggregation:

1. Sex:
a) Male
b) Female.

2. Age group:
a) 0–4 years
b) 5–14 years
c) 15–24 years
d) 25–34 years
e) 35–44 years
f) 45–54 years
g) 55–64 years
h) 65 years and over.

3. Type of Chronic Disease Management Plan:
a) In-person MBS-rebated Chronic Disease Management Plan
b) Telehealth MBS-rebated Chronic Disease Management Plan.

Disaggregation data elements:

Data Element / Data Set

Person—age, total years N[NN]

Data Source

Aboriginal and Torres Strait Islander specific primary health care national Key Performance Indicators (nKPI) data collection

NMDS / DSS

Aboriginal and Torres Strait Islander specific primary health care NBEDS December 2023

Data Element / Data Set

Person—sex, code X

Data Source

Aboriginal and Torres Strait Islander specific primary health care national Key Performance Indicators (nKPI) data collection

NMDS / DSS

Aboriginal and Torres Strait Islander specific primary health care NBEDS December 2023

Guide for use

Male and female only.

Data Element / Data Set

Person—chronic disease management plan type, code N

Data Source

Aboriginal and Torres Strait Islander specific primary health care national Key Performance Indicators (nKPI) data collection

NMDS / DSS

Aboriginal and Torres Strait Islander specific primary health care NBEDS December 2023

Guide for use

In-person and telehealth MBS-rebated Chronic Disease Management Plans only.

Comments:

Census date for reporting is 31 December 2023.

Representational attributes

Representation class: Count

Data type: Real

Unit of measure: Person

Format: N[N(6)]

Indicator conceptual framework

Framework and dimensions: Continuous

Data source attributes

Data sources:

Data Source

Aboriginal and Torres Strait Islander specific primary health care national Key Performance Indicators (nKPI) data collection

Frequency

6 monthly

Data custodian

Australian Institute of Health and Welfare.

Accountability attributes

Reporting requirements: Funding agreements between the Department of Health and Aged Care and the organisations funded under the Indigenous Australians' Health Programme (IAHP).

Organisation responsible for providing data: First Nations-specific primary health care organisations or maternal and child health programs/services funded by the Department of Health and Aged Care under its IAHP, referred to as **funded organisations**.

Accountability: Australian Institute of Health and Welfare/Department of Health and Aged Care

Further data development / collection required: Further work is required to reach agreement on national definitions for other chronic diseases including cardiovascular disease, chronic obstructive pulmonary disease and chronic kidney disease.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Origin: Department of Health and Aged Care (2014) *Chronic Disease Management Patient Information*, Department of Health and Aged Care website, accessed 5 September 2023.

Relational attributes

Related metadata references:

Supersedes Indigenous-specific primary health care: PI07a-Number of Indigenous regular clients with a chronic disease who have a Chronic Disease Management Plan prepared, June 2023
Indigenous, Superseded 25/02/2024

Has been superseded by First Nations-specific primary health care: PI07a-Number of First Nations regular clients with a chronic disease who have a Chronic Disease Management Plan prepared, June 2024
Indigenous, Qualified 17/04/2024

See also First Nations-specific primary health care: PI07b-Proportion of First Nations regular clients with a chronic disease who have a Chronic Disease Management Plan prepared, December 2023
Indigenous, Standard 25/02/2024