

**Data Collection Guidelines**

**ACT DATA COLLECTION**

**for**

**Alcohol and Other Drug**

##### Treatment Services

**Version**

**1 July 2019**

**Preventive and Population Health Branch**

**Health Improvement Projects Unit**

# Abbreviations

ABS - Australian Bureau of Statistics

AODTS - Alcohol and Other Drug Treatment Service

AIHW - Australian Institute of Health and Welfare

NMDS - National Minimum Data Set

NGO - Non-Government Agency

SLK-581 - Statistical Linkage Key 581

###### *Acknowledgments*

*ACT Health Directorate, Preventive and Population Health Branch would like to acknowledge the Alcohol and Other Drug Treatment Services (AODTS) National Minimum Data Set (NMDS) Data Collection Manual developed by the Australian Institute of Health and Welfare and former NSW Data Dictionary and Collection Guidelines as documents utilised for the development of the ACT Data Collection Guidelines for Alcohol and Other Drug Treatment Services.* **Contents**

[Introduction](#_Introduction)

[Why do we need this data collection?](#_Why_do_we)

[Background](#_Background)

Collection guidelines

[What is a treatment episode for alcohol and other drugs?](#WhatisaTreatmentEpisode)

[Commencement of a treatment episode for alcohol and other drugs](#CommencementofaTreatmentEpisode)

[Cessation of a treatment episode for alcohol and other drugs](#CessationOfaTreatmentEpisode)

[What clients?](#ClientsIncludedOrExcluded)

Collecting data, quality and validation

[Treatment agency responsibilities](#Treatmentagencyresponsibilities)

[Data collection times](#Datacollectiontimes)

[Data collection tool](#Datacollectiontool)

[Data quality](#Dataquality)

[Data quality logic checks to be carried out by the treatment agency](#Dataqualitylogiccheks)

[Date accuracy indicator](#dateaccuracyindicator)

[NMDS Validata tool](#NMDSValidatatoo)

[Data transmission timetable](#datatransmissiontimetable)

[Collection data elements](#CollectionDataElements)

[Collection process summary](#collectionprocesssummary)

[Data analysis guide for treatment agencies](#_Analysis)

[ACT data collection elements defined](#_ACT_MDS_AODTS_1)

[Appendix 1: Standard Australian Classification of Countries (SACC 2011)](#Appendix1SACC2011)

[Appendix 2: Australian Standard Classification of Drugs of Concern (ASCDC 2011)](#Appendix2ASCD2011)

[Appendix 3: Australian Standard Classification of Languages (ASCL 2011)](#Appendix3ASCL2011)

**Introduction**

These guidelines have been prepared for the workers from AODTS involved in the collection and reporting of the ACT Data Collection for AODTS.

This publication is intended to:

* Provide some history on the collection’s development and outline the overall collection process;
* Provide information about changes and variations made to the collection;
* Provide collection guidelines to ensure the best quality data is received;
* Provide definitions of all data elements included in the collection; and
* Provide an up-to-date reference to ensure that the collection can run in a coordinated and timely fashion.

#### Why do we need this data collection?

This data collection has been developed in order to provide ACT and nationally consistent information about the clients and activities of ATOD treatment services. The collection ultimately aims to contribute standardised ACT and national data that will be used to inform planning and policy developments designed to reduce drug-related harm.

This data collection will make it possible to compare and aggregate information on drug problems, service utilisation and treatment programs for a variety of clients, communities and service settings. It will also provide agencies with access to data relating to particular types of clients, their drug problems and treatment responses. The data derived from this collection will be considered in conjunction with other information sources to inform debate, policy decisions and strategies that occur within the AOD treatment sector.

#### 

#### Background

The data elements collected under the ACT Data Collection for AODTS is a combination of ACT and NMDS data elements.

The NMDS is a set of standard data elements that the Australian Government and state and territory health authorities have agreed to collect. All health authorities have custodianship of their data collections.

There is a 2-staged online publication release for the annual NMDS collection:

* Stage 1 - presenting high level key findings aggregated at a national level with selected state and territory data visualisations and data cubes; and
* Stage 2 - detailed report with accompanying supplementary tables, state and territory summaries, and thematic data visualisations.

Agencies in the ACT have been reported at the service delivery outlet level since the 2013-14 NMDS collection. This changed from reporting at the organisation administration level.

In the ACT, 16 treatment service delivery outlets currently contribute data to the ACT NMDS collection (2 government and 14 non-government service delivery outlets).

**Collection Guidelines**

#### What is a treatment episode for alcohol and other drugs?

A treatment episode is defined as the period of contact between a client and a treatment provider or team of treatment providers:

* It must have a defined date of commencement and date of cessation;
* During the period of contact there has been no change in:
  + The principal drug of concern
  + The treatment delivery setting
  + The main treatment type
    - A treatment episode is deemed to have terminated in the event that there has been no (service) contact between the client and the treatment provider/s for a period of three months, unless the period of non-contact was planned between the client and the treatment provider.

###### Commencement of treatment episode for alcohol and other drugs

Commencement of a treatment episode is the first service contact between a client and a treatment provider when assessment and/or treatment occur.

###### Cessation of treatment episode for alcohol and other drugs

Cessation of a treatment episode occurs when treatment is completed or discontinued; or there has been a change in the principal drug of concern, the maintreatmenttype or the treatment delivery setting.

**Example and guide for use regarding pre-treatment support**

When a comprehensive alcohol, tobacco and other drug (ATOD) assessment is undertaken, a client may need to wait weeks or months before a place is available for them to access the treatment recommended.

For example, a client may be assessed as suitable for residential drug rehabilitation however a less intensive treatment option may be offered such as counselling until a place is available in the residential rehabilitation program.

This treatment is collected as two separate treatment episodes as shown in the example in the table below.

Analysis of the SLK-581 and treatment commencement and cessation dates will indicate that pre-treatment support was likely to have been provided.

|  |  |  |
| --- | --- | --- |
| **Main treatment type** | **Commencement date** | **Cessation date** |
| Counselling | 01092017 | 15102017 |
| Rehabilitation | 17102017 | 30032018 |

The standard collection guidelines apply (refer above to *What is a treatment episode for alcohol and other drugs?*).

**What clients?**

**Included:**

* Clients who are assessed and / or accepted for treatment for their own or another person’s alcohol or other drug problem **and** are aged 10 or older at the start of the treatment episode.

**Excluded:**

* Clients who are in an opioid pharmacotherapy program and not receiving any other form of treatment that falls within the scope of the collection.
* People who seek advice or information but have not been formally assessed or accepted for treatment where an assessment is required for the type of treatment.
* Clients aged less than 10 years at the start of the treatment episode.

**Collecting data, quality and validation**

**Treatment agency responsibilities**

Agencies are responsible for ensuring that:

* Client information is accurately recorded and should inform ACT Health if there is difficulty collecting the information.
* Clients are aware of the purpose for which the information is being collected, the fact the collection of the information is authorised or required, and if any personal information will be passed on to another agency.
* Data collection and storage methods comply with the standards outlined in the Australian Privacy Principles for private sector organisations. In particular, agencies are responsible for maintaining the confidentiality of their clients and need to ensure that their procedures comply with the *Health Records (Privacy and Access) Act 1997.* This Act applies to all health records kept by health service providers in the ACT, and includes both the public and private sector.

<http://www.oaic.gov.au/privacy/privacy-act/australian-privacy-principles>

It is the responsibility of the treatment agency to inform each client that data about them will be sent to ACT Health and then on to the AIHW to become part of the NMDS - AODTS. It is important that the clients are also made aware that these data will be used only for statistical purposes.

Treatment agencies are responsible for ensuring that all clients whose data are included in the collection are informed of their rights.

**AIHW - privacy and data principles**

Those providing AODTS NMDS data to the AIHW are expected to familiarise themselves with the AIHW privacy of data information page and undertake their role in the collection in accordance with these principles.

<http://www.aihw.gov.au/privacy-of-data/>

These privacy and data principles are designed to apply to health and welfare data, including that collected for the AODTS NMDS collection. That is, the principles apply to data collected by alcohol and other drug treatment agencies, transmitted to health authorities, and to the AIHW for national collation and analysis.

#### Data transmission security

Please ensure the data that you provide to ACT Health does not include the names of the clients.

**Data collection times**

#### 

#### Table 1: Data element collection times

Commencement of Treatment Episode

Administrative Data Elements

Establishment ID

Person (client) identifier unique within the agency

Statistical linkage key 581 (SLK-581)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Client Data Elements

Date of birth

Date accuracy indicator (records the level of accuracy of each component of the client’s date of birth)

Sex

Country of birth

Indigenous status

Preferred language

Postcode (Australian) of last known home address at commencement of treatment episode

Living arrangement

Usual accommodation type (prior to treatment episode)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Drug Data Elements

Client type

Principal drug of concern

Method of use for principal drug of concern

Other drugs of concern

Injecting drug status

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Treatment Data Elements

Treatment delivery setting

Date of commencement of treatment episode for alcohol and other drugs

Source of referral

Main treatment type

Other treatment types

Previous alcohol and other drug treatment received

Mental health (Diagnosed with a mental illness)

During the treatment Episode

Treatment Data Elements

Medicine received alongside the main treatment type for alcohol and other drugs – **opioid overdose reversal**

Medicine received alongside the main treatment type for alcohol and other drugs – **nicotine replacement therapy**

Medicine received alongside the main treatment type for alcohol and other drugs – **hepatitis C treatment**

#### Part of Table 1: Data element collection times

Cessation of Treatment Episode

Treatment Data Elements

Date of cessation of treatment episode for alcohol and other drugs

Reason for cessation of treatment episode for alcohol and other drugs

**Data collection tool**

ACT Health funded AOD treatment agencies are provided with an Excel Spreadsheet collection tool to assist with the entry and maintenance of the ACT data collection.

Agencies that change the formatting and order of the data elements in the ACT data collection tool to carry out in-house analysis must ensure the original formatting and order is re-established before data is submitted to ACT Health.

Those agencies with developed databases for the management of their client information must submit their data using the collection tool provided.

#### 

#### Data Quality

Data quality is essential to any data collection. To achieve good quality data it is important for agencies to clean (edit) their data before submitting it to ACT Health.

The following table provides some basic data quality checks that agencies are required to undertake to ensure good quality data.

**Table 2: Data Quality logic checks to be carried out by the treatment agency**

1. *Date of birth* must be equal to, or prior to, *the Date of commencement of treatment episode* and not greater than the date of data entry.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. *Date of commencement of treatment episode* must be equal to, or prior to, the *Date of cessation of treatment episode* and not greater than the date of data entry.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. When *injecting drug use* = ‘Never injected’, *Method of use for Principal drug of concern* cannot = ‘inject’.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. *Other drugs of concern* cannot be duplicated or equal to *Principal drug of concern.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. *Other treatment type* provides cannot be duplicated or equal to *the Main treatment type.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. *Method of use* for the principal drug of concern must be concordant with *Principal drug of concern* e.g. ‘alcohol’ should not equal ‘smoke’.
2. *Preferred language* should be reasonably concordant with *Country of birth*. For example, if the preferred language is an ‘Australian indigenous language’, it would normally be logical for the *Country of birth* to be ‘Australia’.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If Client type 2 (Other’s alcohol or other drug use), the following data elements should not be coded (i.e. leave blank): *Drug of concern (Principal), Drug of concern (Other 1- 5),* Client *Injecting drug use status* and client *Method of drug use (Principal drug of concern).*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. *Date of birth*, *Date of commencement of treatment episode* and *Date of cessation of treatment episode* data elements are all formatted DDMMYYYY. E.g. for *Date of birth* February eight 1997 = ‘08021977’**.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. The ‘Sex’character of the *SLK-581* must match the coding of the *Sex* element*.*
2. The ‘Date of birth’ characters of the *SLK-581* must match the *Date of birth* element.

**Date accuracy indicator**

The *Date accuracy indicator* element is a three character code that indicates the extent to which the recorded date of birth is accurate, estimated or unknown. This will assist in assessing the accuracy and reliability of the SLK-581. The indicator has many possible combinations depending on whether the day, month or year of birth is estimated or unknown.

**AIHW NMDS Validata tool**

The AIHW NMDS Validata tool is used by the state and territory health authorities to validate the NMDS collection. This tool is a web based portal which enables the health authority to upload agency data files and have them validated against the rules set for the NMDS and get direct feedback on any issues with it.

The Validata tool provides a “WARNING” where episode duration for:

* *Main treatment type* 7 (Assessment only) is >90 days
* *Main treatment type* 6 (Information and education) is >100 days
* *Main treatment type* 1 (Withdrawal management (detoxification) is 14 days or more
* *Treatment setting* is 2 (Residential treatment facility) AND the *Main treatment type* is 5 (Support and case management), 6 (Information and education) and 7 (Assessment only)

Explanations will need to be provided to the AIHW for these episode occurrences.

#### Data transmission timetable

All ACT Health Directorate funded non-government AOD agencies are to submit their data collections to Preventive and Population Health Branch via AODPolicy@act.gov.au on a half yearly basis annually, by 28 February and 31 August.

#### ACT Data Collection Elements

|  |  |  |  |
| --- | --- | --- | --- |
| Data Element | Data Domains | ‘Not stated’  Response | NMDS requirement/ACT item |
| Establishment identifier | Preventive and Population Health Branch to assign. | ‘Not stated’ response  **Not permitted** | NMDS |
| [Person identifier](#Personidentifier) (unique within agency) | Person identifier unique within the agency. Used for editing at the agency or collection authority level. | ‘Not stated’ response  **Not permitted** | NMDS |
| [SLK-581](#SLK581) (person identifier) | XXXXXDDMMYYYYX  Consisting of (in order): second, third and fifth letter of a person’s family name; second and third letters of a person’s given name; date of birth of the person, sex of the person |  | NMDS |
| [Sex](#Sex) | 1. Male   2 Female  3 Other  9 Not stated |  | NMDS |
| [Date of birth](#Dateofbirth) | DDMMYYYY |  | NMDS |
| [Date accuracy indicator for client’s reported date of birth](#DateaccuracyindicatorforDOB) | Any combination of the values A (accurate), E (estimated), U (unknown) representing the corresponding level of accuracy of each date component (DDMMYYYY) of the reported date of birth | ‘Not stated’ response  **Not permitted** | NMDS |
| [Country of birth](#Countryofbirth) | See *Standard Australian Classification of Countries 2016* (SACC 2016) - [Appendix 1](#Appendix1SACC2011) |  | NMDS |

|  |  |  |  |
| --- | --- | --- | --- |
| Data Element | Data Domains | ‘Not stated’  Response | NMDS requirement/ACT  item |
| [Indigenous status](#Indigenousstatus) | 1. Aboriginal but not Torres Strait Islander origin 2. Torres Strait Islander but not Aboriginal origin 3. Both Aboriginal and Torres Strait Islander origin 4. Neither Aboriginal nor Torres Strait Islander origin   9 Not stated/inadequately described | ‘Not stated’ response is not available as valid answer to the questions unless the client refuses to answer. | NMDS |
| [Preferred language](#Preferredlanguage) | See *Australian Standard Classification of Languages 2016* (ASCL 2016) – [Appendix 3](#Appendix3ASCL2011) |  | NMDS |

|  |  |  |  |
| --- | --- | --- | --- |
| Data Element | Data Domains | ‘Not stated’  Response | NMDS requirement/ACT item |
| [Postcode (Australian)- geographical postcode of client’s last known home address at commencement of treatment](#Postcode) | Geographical Postcodes provided by  Australia Post. For the full list of postcodes visit the Australia Post website:<<http://auspost.com.au/>>  **Supplementary codes:**  0055 Overseas  0088 Other  0097 No fixed address (or not applicable)  0098 Unknown  0099 Not stated/inadequately described |  | NMDS  NMDS Supplementary codes |
| [Living arrangement](#Livingarrangements) | 1. Alone 2. Spouse/partner 3. Alone with child(ren) 4. Spouse/partner and child(ren) 5. Parent(s) 6. Other relative(s) 7. Friend(s) 8. Friend(s)/parent(s)/relative(s) and child(ren)   98 Other  99 Not known/inadequately described |  | ACT |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Data Element | Data Domains | | ‘Not stated’  Response | NMDS requirement/ACT item |
| [Usual accommodation](#Usualaccommodation) type prior to treatment episode | **Independent residential**  11 Private residence  12 Boarding house/private hotel  13 Informal housing  14 None/homeless/public place  **Supported Independent living**  21 Domestic-scale supported living facility  22 Supported accommodation facility  23 Short term crisis, emergency or transitional accommodation facility  **Residential care**  **Hospital**  31.1 Acute hospital  31.2 Psychiatric hospital  31.3 Rehabilitation hospital  31.8 Other hospital  **Special-purpose residential setting**  32.1 Residential aged care facility  **Community care residential unit**  33.1 Mental health  33.2 Alcohol and other drugs  33.8 Other specialised community residential  **Custodial**  34 Prison/remand centre/youth training centre  **Other**  88 Other  **Supplementary values**  98 Unknown  99 Not stated/inadequately described |  | | NMDS |
| Data Element | 1. Data Domains | ‘Not stated’  Response | | NMDS requirement/ACT item |
| [Client type](#Clienttype) | 1 Own alcohol or other drug use  2 Other’s alcohol or other drug use | ‘Not stated’ response  **Not permitted** | | NMDS |
| [Source of referral](#Sourceofreferral) | 1. Self 2. Family member/friend 3. Medical practitioner 4. Hospital 5. Mental health care service 6. Alcohol and other drug treatment service 7. Other community/health care service 8. Correctional service 9. Police diversion 10. Court diversion   98 Other  99 Not stated/inadequately |  | | NMDS |
| [Date of commencement of treatment episode for alcohol and other drugs](#Dateofcommencement) | DDMMYYYY | ‘Not stated’ response  **Not permitted** | | NMDS |
| [Date of cessation of treatment episode for alcohol and other drugs](#Dateofcessation) | DDMMYYYY | ‘Not stated’ response  **Not permitted** | | NMDS |

|  |  |  |  |
| --- | --- | --- | --- |
| Data Element | Data Domains | ‘Not stated’  Response | NMDS requirement/ACT item |
| [Reason for cessation of treatment episode](#Reasonforcessation) | 1. Treatment completed 2. Change in main treatment type 3. Change in delivery setting 4. Change in the principal drug of concern 5. Transferred to another service provider 6. Ceased to participate against advice 7. Ceased to participate without notice 8. Ceased to participate involuntary (non-compliance) 9. Ceased to participate at expiation 10. Ceased to participate by mutual agreement 11. Drug court and/or sanctioned by court diversion service 12. Imprisoned, other than drug court sanctioned 13. Died   98 Other  99 Not stated/inadequately described |  | NMDS |
| [Treatment delivery setting for alcohol and other drugs](#Treatmentdeliverysetting) | 1. Non-residential treatment facility 2. Residential treatment facility 3. Home 4. Outreach setting 5. Other | ‘Not stated’ response  **Not permitted** | NMDS |
| [Method of use for principal drug of concern](#Methodofuseforprinicpaldrugofconcern) | 1. Ingests 2. Smokes 3. Injects 4. Sniffs (Powder) 5. Inhales (Vapour) 6. Other 7. Not Stated/inadequately described |  | NMDS |

|  |  |  |  |
| --- | --- | --- | --- |
| Data Element | Data Domains | ‘Not stated’  response | NMDS requirement/ACT item |
| [Injecting drug use status](#Injectingdrugusestatus) | 1. Last inject three months ago or less 2. Last injected more than three months ago but less than or equal to twelve months ago 3. Last injected more than twelve months ago 4. Never injected   9 Not stated/inadequately described |  | NMDS |
| [Principal drug of concern](#Principaldrugofconcern) | See *Australian Standard Classification of Drugs of*  *Concern* 2011 (ASCDC 2011) - [Appendix 2](#Appendix2ASCD2011) | **‘Not stated’ response**  **Not permitted for client type 1 (own AOD use)**  **Leave blank for client type 2** (other’s AOD use) | NMDS |
| [Other drug of concern (1)](#Othedrugofconcern) | See *Australian Standard Classification of Drugs of*  *Concern* 2011 (ASCDC 2011) - Appendix 2 |  | NMDS |
| Other drug of concern (2) | See *Australian Standard Classification of Drugs of*  *Concern* 2011 (ASCDC 2011) - Appendix 2 |  | NMDS |
| Other drug of concern (3) | See *Australian Standard Classification of Drugs of*  *Concern* 2011 (ASCDC 2011) - Appendix 2 |  | NMDS |
| Other drug of concern (4) | See *Australian Standard Classification of Drugs of*  *Concern* 2011 (ASCDC 2011) - Appendix 2 |  | NMDS |
| Other drug of concern (5) | See *Australian Standard Classification of Drugs of*  *Concern* 2011 (ASCDC 2011) - Appendix 2 |  | NMDS |

|  |  |  |  |
| --- | --- | --- | --- |
| Data Element | Data Domains | ‘Not stated’  response | NMDS requirement/ACT item |
| [Main treatment type for alcohol and other drugs](#Maintreatmenttype) | 1. Withdrawal management (detoxification) 2. Counselling 3. Rehabilitation 4. Pharmacotherapy 5. Support and case management 6. Information and education 7. Assessment only   88 Other | ‘Not stated’ response  **Not permitted** | NMDS |
| [Medicine received alongside the main treatment type for alcohol and other drugs – **opioid overdose reversal**](#Opioidoverdosereversal) | 1. No 2. Yes | ‘Not stated’ response  **Not permitted** | ACT  While this data element was implemented 1 July 2018, it is recognised that some agencies will only collect and report this data element when over time, changes are made to their services’ data collection systems. |
| Data Element | Data Domains | ‘Not stated’  response | NMDS requirement/ACT item |
| [Medicine received alongside the main treatment type for alcohol and other drugs - **nicotine replacement therapy**](#NRTmedicine) | 1. No 2. Yes | ‘Not stated’ response  **Not permitted** | ACT  While this data element was implemented 1 July 2018, it is recognised that some agencies will only collect and report this data element when over time, changes are made to their services’ data collection systems. |
| [Medicine received alongside the main treatment type for alcohol and other drugs - **hepatitis C treatment**](#HepCtreatmentmedicine) | 1. No 2. Yes   Ye | ‘Not stated’ response  **Not permitted** | ACT  While this data element was implemented 1 July 2018, it is recognised that some agencies will only collect and report this data element when over time, changes are made to their services’ data collection systems. |

|  |  |  |  |
| --- | --- | --- | --- |
| Data Element | Data Domains | ‘Not stated’  response | NMDS requirement/ACT item |
| [Other treatment type (1)](#Othertreatmentytpe) | 1. Withdrawal management (detoxification) 2. Counselling 3. Rehabilitation 4. Pharmacotherapy 5. Support and case management\* 6. Information and education\*   88 Other\*  \*Note the coding of Other has changed from 5 (Other) to \*88 (Other)  Note the inclusion of \*5 (Support and case management) and \*6 (information and education as accepted code in the AODTS collection |  | NMDS |
| Other treatment type (2) | 1. Withdrawal management (detoxification) 2. Counselling 3. Rehabilitation 4. Pharmacotherapy 5. Support and case management 6. Information and education   88 Other |  | NMDS |
| Other treatment type (3) | 1. Withdrawal management (detoxification) 2. Counselling 3. Rehabilitation 4. Pharmacotherapy 5. Support and case management 6. Information and education   88 Other |  | NMDS |
| Data Element | Data Domains | ‘Not stated’  response | NMDS requirement/ACT item |
| Other treatment type (4) | 1. Withdrawal management (detoxification) 2. Counselling 3. Rehabilitation 4. Pharmacotherapy 5. Support and case management 6. Information and education   88 Other |  | NMDS |
| [Previous alcohol and other drug treatment received](#Previoustreatmentreceived) | 1. Withdrawal management (detoxification) 2. Counselling 3. Rehabilitation 4. Pharmacotherapy 5. Support and case management 6. Information and education 7. Assessment only   88 Other  99 No previous treatment received |  | ACT |
| [Mental health](#Mentalillness) (diagnosed with a mental illness) | 1. Diagnosed three months ago or less 2. Diagnosed more than three months ago but less than or equal to twelve months ago 3. Diagnosed more than twelve months ago 4. Never been diagnosed   9 Not stated/inadequately described |  | ACT |

#### Collection process summary

**Stage 3 (Annual timeline, by mid-November)**

**Health Improvement Projects, Preventive and Population Health Branch**

* Data submitter UPLOADS the finalised ACT NMDS collection files to Validata (episode and establishment data files).
* Validata PROCCESSES the ACT data files
* Data submitter checks results.
* Data submitter obtains Branch delegate approval to SUBMIT ACT data files and provide SIGN-OFF once the ACT files are accepted by the AIHW.

**Stage 2 (Annual timeline, 1 September & October)**

###### Health Improvement Projects, Preventive and Population Health Branch

* Validate agency NMDS data collections utilising the AIHW AOTDS Validata tool.
* Liaise with agency in relation to any errors.
* Repeat the process (dot points 1 & 2) until agency data is clear of errors.

**Stage 4 (Annual timeline, by 31 December)**

###### AIHW

* Reviews ACT NMDS collection files, checks for consistency with previous years and looks for trends that may require further explanation.
* Notifies ACT data submitter that the collection files are allowed to be signed off.
* Data submitter signs off the ACT collection files.
* Final national database is collated and stored by AIHW.

**Stage 1 (Annual timeline– by 28 February and 31 August)**

###### Treatment Agency

* Forward cleaned (quality checked) data to Preventive and Population Health Branch via AODPolicy@act.gov.au

### Data analysis guide for treatment agencies

#### Using the following guide, agencies have the ability to analyse their ACT data collection in Excel.

#### Duration of treatment episodes using commencement and cessation dates

Insert a column next to *Commencement date* element column

Label this new column ‘Duration of treatment’;

In second cell of this new column type in the following formula… =INT(J2-I2)

Press enter and copy down formula.

NOTE: In this example *Commencement date* is cell I2 and *Cessation date* is cell J2**.**

**Age derived from date of birth**

Insert column next to *Date of birth* element column

Label this new column ‘Age’

In second cell of this new column type in the following formula…=INT(J2-G2)/365.25

NOTE: In this example *Date of birth* is in G2 and *Cessation date* is in J2

**Bed occupancy rate**

For withdrawal and rehabilitation you can work out the bed occupancy rate.

Using the *Duration of treatment* column add up total number of days in treatment

(In this case it equaled 1387 for a year)

If the facility is a 10 bed facility times 10 by 365 days = 3650 available bed days

Divide occupied bed days by available bed days (1387/3650) = 0.38

Times by 100 to convert into a percentage = 38% bed occupancy

**ACT data collection elements defined**

This section details each of the data elements collected in the ACT Data Collection for AODTS.

= **National data elements (22 items)**

**NMDS**

**ACT MDS**

= **ACT data elements (6 items)**

### NMDS

### Client type – alcohol and other drug treatment services

#### Definition

The status of a person in terms of whether the treatment episode concerns their own alcohol and/or other drug use or that of another person.

#### Classification

1 Own alcohol or other drug use

2 Other’s alcohol or other drug use

**Missing values**

Missing values are not permitted for this data item.

**Guide for use**

* Code 1 (Own alcohol or other drug use): a client who receives treatment or assistance concerning their own alcohol and/or other drug use.
* Code 2 (Other’s alcohol or other drug use): a client who receives support and/or assistance in relation to the alcohol and/or other drug use of another person (e.g. a parent, spouse, child).
* This data item should be collected on commencement of a treatment episode with a service.
* Use code 1 (Own alcohol or other drug use) where a client is receiving treatment or assistance for both, their own alcohol and/or other drug use and the alcohol and/or other drug use of another person.
* Where *client type* is coded 2 (Other’s alcohol or other drug use), do not collect (leave blank) the following data elements: *Drug of concern (Principal*), *Drug of concern (Other)*, client *Injecting drug use status* and client *Method of drug use (Principal drug of concern)*.

#### Why is this data item collected?

This data item is collected to get an understanding of whether clients are accessing AOD treatment for assistance for their own drug use or assistance with issues relating to another person’s drug use.

### NMDS

### Country of birth

#### Definition

The country in which the client was born.

#### Classification

NNNN (Code using the ABS Standard Australian Classification of Countries 2011 (ABS cat. no. 1269.0)). [See Appendix 1](#Appendix1SACC2011).

#### Missing values

Use code 0000 inadequately described.

Use code 0003 for missing values.

#### Why is this data item collected?

This data item is collected to get an understanding of the countries of birth of clients accessing alcohol and other drug treatment services. *Country of birth* is used in demographic analysis of clients in the collection.

### NMDS

### Date accuracy indicator for date of birth

#### Definition

An indicator of the accuracy of a client’s reported date of birth.

#### Missing values

Missing values are not permitted for this data item.

#### Classification

AAA Day, month and year are accurate

AAE Day and month are accurate, year is estimated

AAU Day and month are accurate, year is unknown

AEE Day is accurate, month and year are estimated

AEU Day is accurate, month is estimated, year is unknown

AUU Day is accurate, month and year are unknown

AUA Day is accurate, month is unknown, year is accurate

AUE Day is accurate, month is unknown, year is estimated

AEA Day is accurate, month is estimated, year is accurate

EAA Day is estimated, month and year are accurate

EAE Day is estimated, month is accurate, year is estimated

EAU Day is estimated, month is accurate, year is unknown

EEA Day and month are estimated, year is accurate

EEE Day, month and year are estimated

EEU Day and month are estimated, year is unknown

EUA Day is estimated, month is unknown, year is accurate

EUE Day is estimated, month is unknown, year is estimated

EUU Day is estimated, month and year are unknown

UAA Day is unknown, month and year are accurate

UAE Day is unknown, month is accurate, year is estimated

UAU Day is unknown, month is accurate, year is unknown

UEA Day is unknown, month is estimated, year is accurate

UEE Day is unknown, month and year are estimated

UEU Day is unknown, month is estimated, year is unknown

UUA Day and month are unknown, year is accurate

UUE Day and month are unknown, year is estimated

UUU Day, month and year are unknown

#### Guide for use and validation checks

* This data element contains positional fields (DMY) that reflect the order of the date components of the reported date of birth.
  + Field 1 (D) – refers to the accuracy of the day component
  + Field 2 (M) – refers to the accuracy of the month component
  + Field 3 (Y) – refers to the accuracy of the year component
* Any combination of the values A, E, U representing the corresponding level of accuracy of each date component of the reported date of birth

|  |  |  |  |
| --- | --- | --- | --- |
|  | **(D)ay** | **(M)onth** | **(Y)ear** |
| **Accurate** | A | A | A |
| **Estimated** | E | E | E |
| **Unknown** | U | U | U |

#### Why is this data item collected?

To mark episodes where the date of birth is anything than entirely accurate so that they can be accounted for in the client number derivation processes carried out using the *SLK-581.*

### NMDS

### Date of birth

#### Definition

The day, month and year when the person seeking treatment was born.

#### Classification

DDMMYYYY

#### Missing values

Use code 01011900 for missing values. Where 01011900 is used, the *Date accuracy indicator* must be UUU

#### Guide for use and validation checks

* Must be formatted DDMMYYYY. For example, a client born on February eight 1997 would read ‘08021977’
* Where the *Date of birth* is accurately recorded *Date accuracy indicator* should be AAA (accurate day, accurate month, accurate year).
* Where the *Date of birth* is not provided directly by the client, other records such as referral documents may be used to establish or estimate the *Date of birth*.
* Where the *Date of birth* is estimated *Date accuracy indicator* should be ‘EEE’ (estimate day, estimate month, estimate year).
* Where the day and/or month of birth is unknown, estimate the year of birth and enter ‘0101’ as the day and month. (Please do not use 0107 or 3006 of the relevant year to estimate the date of birth. These codes are not used for AOTDS-NMDS date estimation purposes). The corresponding *Date accuracy indicator* for this scenario would be ‘UUE’ (unknown day, unknown month, estimated year).
* Where the *Date of birth* is unknown, and the year of birth cannot be estimated, enter ‘01011900’. If this date is used, *Date accuracy indicator* should be ‘UUU’ (unknown day, unknown month, unknown year).
* Date of birth is also used to create the *SLK-581*. The *Date of birth* element must match the ‘date of birth’ characters of the *SLK-581*.
* For privacy reasons, ‘age in years’ will be the output data item rather than ‘date of birth’.
* The *Date of birth* should be before the date of commencement and before the date of cessation.
* There should be no clients where the date of birth for the client equates to the client being aged less than 10 years (when age is calculated using *Date of birth* and *Date of cessation*).

#### Why is this data item collected?

*Date of birth* is required to derive the age of clients for demographic analyses, and for analysis by age (or age group) at a point in time. Age is used for analysis of service utilisation, and comparison with population data.

### NMDS

### Date of cessation of treatment episode for alcohol and other drugs

#### Definition

The day, month and year when a treatment episode for alcohol and other drugs ceases.

#### Classification

DDMMYYYY

#### Missing values

Missing values are not permitted for this data item.

#### Guide for use and validation checks

* Must be formatted DDMMYYYY. For example, February eight 2013 would read ‘08022013’
* The *Date of cessation* must fall within the financial year of the collection.
* The *Date of cessation* should be later than or the same as the *Date of commencement* and later than the *Date of birth*.
* Where there has been no contact between the client and the service provider for more than three months and there is no plan for further contact, the date of last service contact should be used.
* Months with less than 31 days should not have *Date of cessation* recorded as the 31st.
* No *Date of cessation* should be recorded as 30 or 31 February.
* There should be no *Date of cessation* recorded as 29 February in a non-leap year.

#### Why is this data item collected?

*Date of cessation* is required to derive the duration of treatment episodes. This duration can then be related to other variables, including demographics, principal drug of concern and treatment type.

### NMDS

### Date of commencement of treatment episode for alcohol and other drugs

#### Definition

The day, month and year when a treatment episode for alcohol and other drugs commences.

#### Classification

DDMMYYYY

#### Missing values

Missing values are not permitted for this data item.

#### Guide for use and validation checks

* Must be formatted DDMMYYYY. For example, February eight 2013 would read ‘08022013’
* The *Date of commencement* should be earlier than or the same as the *Date of cessation* and later than the *Date of birth*.
* Months with less than 31 days should not have *Date of commencement* recorded as the 31st.
* No *Date of commencement* should be recorded as 30 or 31 February.
* There should be no *Date of commencement* recorded as 29 February in a non-leap year.

#### Why is this data item collected?

*Date of commencement* is used together with *Date of cessation* to derive the duration of treatment episodes. This duration can then be related to other variables, including demographics, principal drug of concern and treatment type.

### NMDS

### Indigenous status

#### Definition

*Indigenous status* is a measure of whether a person identifies as being of Aboriginal or Torres Strait Islander origin.

#### Classification

1 Aboriginal but not Torres Strait Islander origin

2 Torres Strait Islander but not Aboriginal origin

3 Both Aboriginal and Torres Strait Islander origin

4 Neither Aboriginal nor Torres Strait Islander origin

9 Not stated/inadequately described

#### Missing values

The not stated/inadequately described category is not to be available as a valid answer to the questions but may be used when the client refuses to answer.

#### Guide for use and validation checks

* This data element is based on the Australian Bureau of Statistics’ (ABS) standard for Indigenous status. For detailed advice on its use and application please refer to the ABS publication in the reference document section.
* The classification for Indigenous status has a hierarchical structure comprising two levels. There are four categories at the detailed level of the classification which are grouped into two categories at the broad level. There is one supplementary category for ‘not stated’ responses. The classification is as follows:

Indigenous:

* Aboriginal but not Torres Strait Islander origin
* Torres Strait Islander but not Aboriginal origin
* Both Aboriginal and Torres Strait Islander origin

Non-Indigenous:

* Neither Aboriginal nor Torres Strait Islander origin

The standard question for Indigenous Status is as follows:

Are you of Aboriginal or Torres Strait Islander origin?

(For persons of both Aboriginal and Torres Strait Islander origin, mark both ‘Yes’ boxes.)

No...............

Yes, Aboriginal.............

Yes, Torres Strait Islander..............

This question must be asked regardless of the data collectors’ perceptions based on appearance or other factors.

The Indigenous status question allows for more than one response. The procedure for coding multiple responses is as follows:

* If the respondent marks ‘No’ and either ‘Aboriginal’ or ‘Torres Strait Islander’, then the response should be coded to either Aboriginal or Torres Strait Islander as indicated (i.e. disregard the ‘No’ response).
* If the respondent marks both the ‘Aboriginal’ and ‘Torres Strait Islander’ boxes, then their response should be coded to ‘Both Aboriginal and Torres Strait Islander origin’.
* If the respondent marks all three boxes (‘No’, ‘Aboriginal’ and ‘Torres Strait Islander’), then the response should be coded to ‘Both Aboriginal and Torres Strait Islander origin’ (i.e. disregard the ‘No’ response).

For more information on collecting and recording accurately the Indigenous status of clients refer to the *National Best Practice Guidelines for Collecting Indigenous Status in Health Data Sets* found at the below link:

<http://www.aihw.gov.au/publication-detail/?id=6442468342&tab=2>

#### Why is this data item collected?

This data item is an essential demographic component to the AODTS–NMDS, along with items such as age and sex. This data item is used to explore the relationship between the Indigenous status of clients and other data items in the AODTS–NMDS.

### NMDS

### Injecting drug use status

#### Definition

The client’s history of injection as a method of administering drugs; including intravenous, intramuscular and subcutaneous forms of injection.

This element should be asked of everyone who is seeking treatment for their own drug use. This element is not asking about injecting drug use for the principal drug of concern.

#### Classification

1 Last injected three months ago or less

2 Last injected more than three months ago but less than or equal to twelve months ago

3 Last injected more than twelve months ago

4 Never injected

9 Not stated/inadequately described

#### Missing values

Use code 9 for missing values.

#### Guide for use and validation checks

* Where *Injecting drug use* is coded 4 (Never injected), check that *Method of use* is not coded 3 (Injects).

#### Why is this data item collected?

This data item is collected to explore the levels of injection/needle use associated with drug treatment clients.

### ACT data element

### Living arrangement

#### Definition

The people with whom the client is/was living just prior to the start of the treatment episode.

#### Classification

1 Alone

2 Spouse/partner

3 Alone with child(ren)

4 Spouse/partner and child(ren)

5 Parent(s)

6 Other relatives(s)

7 Friend(s)

8 Friend(s)/parent(s)/relative(s) and child(ren)

1. Other
2. Not known/inadequately described

#### Guide for use and validation checks

* Code 3: Alone with child(ren): a sole parent living with one or more dependent children.
* Code 4: Spouse/partner and child(ren): living with a spouse or partner and one or more dependent children
* Code 6: Other relative(s): living in an extended family without a spouse or partner
* Code 8: Friend(s)/parent(s)/relative(s) and child(ren): living in an extended family, with or without a spouse or partner, and with any combination of friends, parents, relatives and dependent children.
* Code 98: Other: for people in an institutional living arrangement.

#### Why is this data item collected?

This data item is collected to ascertain the level of support to which a person may have access. The type of relationships, responsibilities and support within a persons living situation are significant for their well-being and could influence the outcomes of service received. Living arrangements may be relevant when deciding between different service and support options for clients.

### NMDS

### Main treatment type for alcohol and other drugs

#### Definition

The main activity determined at assessment by the treatment provider to treat the client’s alcohol and/or drug problem for the principal drug of concern.

#### Classification

1 Withdrawal management (detoxification)

2 Counselling

3 Rehabilitation

4 Pharmacotherapy

5 Support and case management

6 Information and education

7 Assessment only

88 Other

#### Missing values

Missing values are not permitted for this data item.

#### Guide for use and validation checks

* The *Main treatment type* is the principal focus of a single treatment episode, as judged by the treatment provider, for the principal drug of concern. Consequently, each treatment episode will only have one main treatment type.
* When using these codes please follow the rule that the code which should be allocated for main treatment will be that for the largest proportion of the treatment provided for the client. For example, if a client receives both a counselling session and an information and education session, but the proportion of their overall treatment dedicated to counselling is greater than that dedicated to information and education, the appropriate coding for this client would be:
  + Main treatment type: *Code 2 Counselling*
  + Other treatment type: *Code 6 Information and education*
* If *Main treatment type* is coded 7 (Assessment only), then *Other treatment type* 1–4 must be blank.
* If *Main treatment type* is coded 1 (Withdrawal management (detoxification)), 3 (Rehabilitation) or 4 (Pharmacotherapy), then *Client type* must be coded 1 (Own alcohol or other drug use).
* If *Main treatment type* is coded 1 (Withdrawal management (detoxification)), 2 (Counselling), 3 (Rehabilitation), 4 (Pharmacotherapy), 5 (Support and case management), 6 (Information and education) and 7 (assessment only), then *Other treatment types 1 – 4* must not contain the same value as the *Main treatment type.*
* If *Main treatment type* is coded to 4 (Pharmacotherapy), *Other treatment type 1* must be recorded.
* If pharmacotherapy is the main treatment type coded as 88 (Other), then an (additional) ‘other treatment type’ must be recorded.
* A single client record cannot have the same *Main treatment type* code recorded more than once, with the exception of code 88 (Other).
* For brief interventions, the main treatment type may apply to as few as one contact between the client and agency staff.
* The AIHW will continue to monitor *Main treatment type:*
  + Code 7 (Assessment only) and duration is greater than 90 days
  + Code 1 (Withdrawal management (detoxification) and treatment duration is 14 days or more
  + Code 6 (Information and education) and treatment duration is greater than 100 days
* Code 1 (Withdrawal management (detoxification)): refers to any form of withdrawal management, including medicated and non-medicated, in any delivery setting.
* Code 2 (Counselling): refers to any method of individual or group counselling directed towards identified problems with alcohol and/or other drug use or dependency. This code excludes counselling activity that is part of a rehabilitation program as defined in code 3.
* Code 3 (Rehabilitation): refers to an intensive structured treatment program that can occur in residential and non-residential settings and integrates a range of services and therapeutic activities that may include counselling, behavioural treatment approaches, recreational activities, social and community living skills, group work and relapse prevention. Rehabilitation treatment can provide a high level of support (i.e. up to 24 hours a day) and tends towards a medium to longer-term duration. Counselling that is included within an overall rehabilitation program should be coded to code 3 for Rehabilitation, not to code 2 as a separate treatment episode for Counselling.
* Code 4 (Pharmacotherapy): refers to pharmacotherapies that include those used as maintenance therapies (e.g. buprenorphine, and methadone treatment) and those used as relapse prevention (e.g. acamprosate, naltrexone or disulfiram). Use code 1 (withdrawal management) where a pharmacotherapy is used solely for withdrawal. Note collection exclusions: excludes treatment episodes for clients who are on an opioid pharmacotherapy program and are not receiving any other form of treatment.
* Code 5 (Support and case management): refers to when the type of treatment provided to the client is support and case management (e.g. treatment planning and monitoring, case conferences, advocacy or facilitated referral).
* Code 6 (Information and education): refers to when the type of treatment provided to the client is information and education (e.g. written information or a psycho-educational intervention).
* Code 7 (Assessment only): refers to when there is no treatment provided to the client other than an overall assessment of the extent and nature of their drug and alcohol problem. An assessment encompasses treatment planning and referral.
* Code 88 (Other): refers to other main treatment types such as nicotine replacement therapy or outdoor therapy.

#### Why is this data item collected?

This data item is collected to explore the types of treatments being accessed by clients. Main treatment type is then analysed with reference to other dataset variables.

### ACT data element

### Medicine received alongside the main treatment type for alcohol and other drugs – opioid overdose reversal

While this data element was implemented 1 July 2018, it is recognised that some agencies will only collect and report this data element when over time, changes are made to their services’ data collection systems.

**Definition**

Opioid overdose reversal medicine that the client received alongside the main treatment type.

**Classification**

1. No
2. Yes

#### Missing values

Missing values are not permitted for this data item.

#### Guide for use

* This data item must be completed regardless of the client receiving treatment medicine alongside the main treatment type for alcohol and other drugs.
* This data item should be collected over the duration of the treatment episode.

**Why is the data item collected?**

This data item is collected to explore the levels of access to opioid overdose reversal medicine by clients and to support agencies in their reporting of interventions.

### ACT data element

### Medicine received alongside the main treatment type for alcohol and other drugs – nicotine replacement therapy

While this data element was implemented 1 July 2018, it is recognised that some agencies will only collect and report this data element when over time, changes are made to their services’ data collection systems.

**Definition**

Nicotine replacement therapy medicine that the client received alongside the main treatment type.

**Classification**

1. No
2. Yes

#### Missing values

Missing values are not permitted for this data item.

#### Guide for use

* This data item must be completed regardless of the client receiving treatment medicine alongside the main treatment type for alcohol and other drugs.
* This data item should be collected over the duration of the treatment episode.

**Why is the data item collected?**

This data item is collected to explore the levels of access to nicotine replacement therapy medicine by clients and to support agencies in their reporting of interventions.

### ACT data element

### Medicine received alongside the main treatment type for alcohol and other drugs – hepatitis C treatment

While this data element was implemented 1 July 2018, it is recognised that some agencies will only collect and report this data element when over time, changes are made to their services’ data collection systems.

**Definition**

Hepatitis C treatment Medicine that the client received alongside the main treatment type.

**Classification**

1. No
2. Yes

#### Missing values

Missing values are not permitted for this data item.

#### Guide for use

* This data item must be completed regardless of the client receiving treatment medicine alongside the main treatment type for alcohol and other drugs.
* This data item should be collected over the duration of the treatment episode.

**Why is the data item collected?**

This data item is collected to explore the levels of access to hepatitis C treatment medicine by clients and to support agencies in their reporting of interventions.

### ACT data element

### Mental Illness - Have you been diagnosed with a mental illness

#### Definition

Where the client states that they have been previously diagnosed with a mental illness.

#### Classification

1 Diagnosed three months ago or less

2 Diagnosed more than three months ago but less than or equal to twelve months ago

3 Diagnosed more than twelve months ago

4 Never been diagnosed

#### 9 Not stated/inadequately described

#### Missing values

Use code 9 for missing values.

#### Why is this data item collected?

This data item is collected to get an understanding of the prevalence of mental health diagnosis amongst clients undergoing alcohol and other drug treatment.

### NMDS

### Method of use for principal drug of concern

#### Definition

The client’s usual method of administering the *Principal drug of concern* as stated by the client.

#### Classification

1 Ingests

2 Smokes

3 Injects

4 Sniffs (powder)

5 Inhales (vapour)

6 Other

9 Not stated/inadequately described

#### Missing values

Use code 9 for missing values.

#### Guide for use and validation checks

* Where *Method of use* is coded 3 (Injects), check that *Injecting drug use status* is not coded 4 (Never injected).
* Code 1 (Ingests) refers to eating or drinking as the method of administering the Principal drug of concern.

#### Why is this data item collected?

This data item is collected to get an understanding of the prevalence of the different methods of drug use. This is then related to many other data items in the dataset.

### NMDS

### Other drug of concern

#### Definition

A drug apart from the principal drug of concern which the client states as being a concern.

#### Classification

NNNN (Code using the ABS Australian Standard Classification of Drugs of Concern 2011 (ASCDC 2011), ABS cat. no. 1248.0) - **See Appendix 2**.

#### Missing values

For a ‘not stated’ response, leave this item blank.

#### Guide for use and validation checks

* Two additional supplementary codes that are not already specified in theASCDC are used in the AOTS NMDS:
  + **Code 0005 (**Opioid analgesics not further defined) - used when it is known that the client’s *Principal drug of concern* is an opioid but the specific opioid used is not known.
  + **Code 0006** (Psychostimulants not further defined) - used when it is known that the client’s *Principal drug of concern* is a psychostimulant but not which type.
* Code 7102 (cannabinoid agonists) to be used for coding synthetic cannabinoid.
* Code 3999 (other stimulants and hallucinogens) to be used for emerging psychoactive substancs that cannot be coded elsewhere.
* Code 1499 (Non Opioid Analgesics, n.e.c.) to be used for Pregabalin/Lyrica
* Broader category codes xx00 can also be used to capture an *Other drug of concern* when more detailed information about the drug is not known. For example, code 1300 would be used when the *Other drug of concern* was a synthetic opioid analgesic, but information about the specific type of synthetic opioid analgesic is not known.
* Check that the code chosen for *Principal drug of concern* is not repeated for *Other drug of concern* 1–5. A single client record cannot have the same drug code recorded more than once, with the exception of 9000 (Miscellaneous drugs of concern nfd).
* If O*ther drug* 1 is coded ‘0000 (Inadequately Described)’ or ‘0001 (Not Stated)’ then *Other drugs* 2–5 must be blank.
* Where client type is coded 2, *Other drug* 1 - 5 must be blank.

#### Why is this data item collected?

This data item is collected to get an understanding of the range of drugs that are of concern to clients.

### MDS

### Other treatment type for alcohol and other drugs

#### Definition

All other forms of treatment provided to the client in addition to the *Main treatment type* for alcohol and other drugs.

#### Classification

1 Withdrawal management (detoxification)

2 Counselling

3 Rehabilitation

4 Pharmacotherapy

5 Support and case management

6 Information and education

88 Other

#### Missing values

For a ‘not stated’ response, leave this item blank.

#### Guide for use and validation checks

* A single client record cannot have the same *Main treatment type* code recorded more than once, with the exception of code 88 (other).
* There are a maximum of four other (additional) treatment types that can be entered.
* *Other treatment type* 1 should be blank if *Main treatment type* is coded 7 (Assessment only)
* *Other treatment type* 1 must not be blank if Main treatment type is coded 4 (Pharmacotherapy)
* If *Other treatment type* 1 is blank, then *Other treatment type* 2–4, must also be blank.
* *Other treatment type* 1 - 4 should not be coded to 1 (Withdrawal management (detoxification)), 3 (Rehabilitation) or 4 (Pharmacotherapy), if *Client type* is code 2 (Other’s alcohol or other drug use).
* To be completed at cessation of treatment episode.
* Only report treatment recorded in the client’s file that is in addition to, and not a component of, the Main treatment type for alcohol and other drugs. Treatment activity reported here is not necessarily for *Principal drug of concern* in that it may be treatment for *Other drugs of concern*.
* Code 1 (Withdrawal management (detoxification)): refers to any form of withdrawal management, including medicated and non-medicated, in any delivery setting.
* Code 2 (Counselling): refers to any method of individual or group counselling directed towards identified problems with alcohol and/or other drug use or dependency. This code excludes counselling activity that is part of a rehabilitation program as defined in code 3.
* Code 3 (Rehabilitation): refers to an intensive structured treatment program that can occur in residential or non-residential settings and integrates a range of services and therapeutic activities that may include counselling, behavioural treatment approaches, recreational activities, social and community living skills, group work and relapse prevention. Rehabilitation treatment can provide a high level of support (i.e. up to 24 hours a day) and tends towards a medium to longer-term duration. Counselling that is included within an overall rehabilitation program should be coded to code 3 for Rehabilitation, not to code 2 as a separate treatment episode for Counselling.
* Code 4 (Pharmacotherapy): refers to pharmacotherapies that include those used as maintenance therapies (e.g. buprenorphine, and methadone treatment) and those used as relapse prevention (e.g. acamprosate, naltrexone or disulfiram). Use code 1 (Withdrawal management (detoxification)) where a pharmacotherapy is used solely for withdrawal. Note collection exclusions: excludes clients who are on an opioid pharmacotherapy program and are not receiving any other form of treatment.
* Code 5 (Support and case management): refers to when the type of treatment provided to the client is support and case management (e.g. treatment planning and monitoring, case conferences, advocacy or facilitated referral).
* Code 6 (Information and education): refers to when the type of treatment provided to the client is information and education (e.g. written information or a psycho-educational intervention).
* Code 88 (Other): refers to other main treatment types such as nicotine replacement therapy or outdoor therapy.

#### Why is this data item collected?

This data item is collected to get an understanding of the range of treatments that clients are undergoing.

### NMDS

### Person identifier

#### Definition

Person identifier unique to the establishment or agency.

#### Classification

Alphanumeric

#### Missing values

Missing values are not permitted for this data item.

#### Guide for use and validation checks

* This identifier is not unique across agencies but must be unique within an agency.
* The identifier should not include apostrophes, hyphens, inflections, dashes or spaces.
* The name of the client should not be used as their person identifier.

#### Why is this data item collected?

This data item could be used for editing at the agency or collection authority level and, potentially, for episode linkage. This item is not available beyond collection authority level.

### NMDS

### Postcode (Australian) - geographical postcode of the client’s last known home address at commencement of treatment

#### Definition

The postcode of the client’s last known home address at the commencement of the treatment episode.

#### Classification

NNNN

#### Values

For a full list of postcodes visit the Australian Post website: *Find a postcode*

<http://auspost.com.au/postcode>

#### Guide for use and validation checks

* Use actual geographical postcodes provided by Australia Post. Postcodes for post office boxes or other administrative centres should not be used.

**The following codes** **supplement the Australian postcodes** and are used to indicate the following:

0055 Overseas

0088 Other

0097 No fixed address\*

0098 Unknown

0099 Not stated/inadequately described

\*Please note that 0097 is classified/coded as ‘Not applicable’ in order to retain its use across other collections. For this collection it means ‘no fixed address’.

#### Why is this data item collected?

This data item is collected for planning service delivery.

Client postcode information collected will be used to analyse geographic locations of clients against other variables such as agency location to look at travelling distances.

This data element may be used in the analysis of data on a geographical basis which involves a conversion from postcodes to the Australian Bureau of Statistics (ABS) postal areas. This conversion results in some inaccuracy of information as postcodes do not have a geographic definition and boundaries are not well defined. However, in some data sets postcode is the only geographic identifier, therefore the use of other more accurate indicators (e.g. statistical areas – SA) is not always possible.

When dealing with aggregate data, postal areas, converted from postcodes, can be mapped to Australian Statistical Geography Standard (ASG) codes using ABS concordance, for example to determine SA2s.

### NMDS

### Preferred language

#### Definition

The language (including sign language) most preferred by the person for communication. This may be a language other than English even where the person can speak fluent English.

#### Classification

NNNN (Code using the Australian Standard Classification of Languages 2016

(ASCL 2016) – **See Appendix 3**

#### Missing values

Use code 0002 for missing values.

#### Why is this data item collected?

This data item is collected to get an understanding of the preferred language of clients accessing alcohol and other drug treatment services. *Preferred language* is used in demographic analysis of clients in the collection.

### ACT data element

### Previous alcohol and other drug treatment received

#### Definition

Any alcohol and other drug treatment type that the client has previously received from any agency that is also the same treatment type for this current episode.

#### Classification

1 Withdrawal management (detoxification)

2 Counselling

3 Rehabilitation

4 Pharmacotherapy

5 Support and case management

6 Information and education

1. Assessment only
2. Other
3. No previous treatment received

#### Why is this data item collected?

Used to discriminate episodes where the client has received the same treatment type from any agency previously.

### NMDS

### Principal drug of concern

#### Definition

The main drug, as stated by the client that has led them to seek treatment from the service.

#### Classification

NNNN (Code using the ABS Australian Standard Classification of Drugs of Concern 2011 (ASCDC 2011), ABS cat. no. 1248.0) - **See Appendix 2.**

#### Missing values

Missing values are not permitted for this data item, unless *Client type* is coded 2 (other’s alcohol or other drug use), which must be left blank.

#### Guide for use and validation checks

* Two additional supplementary codes that are not already specified in theASCDC are used in the AOTS NMDS:
  + **Code 0005 (**Opioid analgesics, not further defined) - used when it is known that the client’s *Principal drug of concern* is an opioid but the specific opioid used is not known.
  + **Code 0006** (Psychostimulants not further defined) - used when it is known that the client’s *Principal drug of concern* is a psychostimulant but not which type.
* Code 7102 (cannabinoid agonists) to be used for coding synthetic cannabinoid.
* Code 3999 (other stimulants and hallucinogens) to be used for emerging psychoactive substances that cannot be coded elsewhere.
* Code 1499 (Non Opioid Analgesics, n.e.c.) to be used for Pregabalin/Lyrica
* Broader category codes xx00 can also be used to capture *Principal drug of concern* when more detailed information about the drug is not known. For example, code 1300 would be used when the *Other drug of concern* was a synthetic opioid analgesic, but information about the specific type of synthetic opioid analgesic is not known.
* Check that the code chosen for *Principal drug of concern* is not the same as a code chosen for *Other drugs of concern* 1–5 (with exception of ‘0001’ (Not stated) coded as *Principal drug of concern* and 1st *Other drug of concern* and ‘9000’ (Miscellaneous drugs nfd).
* For drug diversion treatment episodes (*Source of referral* codes 09 (Police diversion), 10 (Court diversion), 99 (Not stated/inadequately described), information about the *Principle drug of concern* is sometimes not collected directly from the client. In such cases, *Principle drug of concern* should be recorded 0000 (Inadequately Described)
* *Principal drug of concern* is left blank where Client type is coded 2 (Other’s alcohol or other drug use).

#### Why is this data item collected?

This data item is collected to get an understanding of the types of drugs of concern to clients. *Principal drug of concern* is then analysed with reference to other dataset variables.

### NMDS

### Reason for cessation of treatment episode for alcohol and other drug

#### Definition

The reason for the client ending the treatment episode from an alcohol and other drug treatment service.

#### Classification

1 Treatment completed

2 Change in main treatment type

3 Change in the delivery setting

4 Change in the principal drug of concern

5 Transferred to another service provider

6 Ceased to participate against advice

7 Ceased to participate without notice

8 Ceased to participate involuntary (non-compliance)

9 Ceased to participate at expiation

10 Ceased to participate by mutual agreement

11 Drug court and/or sanctioned by court diversion service

12 Imprisoned, other than drug court sanctioned

13 Died

1. Other

99 Not stated/inadequately described

#### Missing values

Use code 99 for missing values.

#### Guide for use and validation checks

* Code 1 (Treatment completed): is to be used when all of the immediate goals of the treatment have been completed as planned. Includes situations where the client, after completing this treatment, either does not commence any new treatment, commences a new treatment episode with a different main treatment or principal drug, or is referred to a different service provider for further treatment.
* Code 2 (Change in main treatment type): a treatment episode will end if, prior to the completion of the existing treatment, there is a change in the Main treatment type for alcohol and other drugs. See also Code 10.
* Code 3 (Change in the delivery setting): a treatment episode may end if, prior to the completion of the existing treatment, there is a change in the Treatment delivery setting for alcohol and other drugs. See also Code 10.
* Code 4 (Change in the principal drug of concern): a treatment episode will end if, prior to the completion of the existing treatment, there is a change in the Principal drug of concern. See also Code 10 and Guide for use section in Data element ‘Treatment episode for alcohol and other drugs’.
* Code 5 (Transferred to another service provider): includes situations where the service provider is no longer the most appropriate and the client is transferred or referred to another service. For example, transfers could occur for clients between non-residential and residential services or between residential services and a hospital. Excludes situations where the original treatment was completed before the client transferred to a different provider for other treatment (Code 1).
* Code 6 (Ceased to participate against advice): refers to situations where the service provider is aware of the client’s intention to stop participating in treatment, and the client ceases despite advice from staff that such action is against the client’s best interest.
* Code 7 (Ceased to participate without notice): refers to situations where the client ceased to receive treatment without notifying the service provider of their intention to no longer participate.
* Code 8 (Ceased to participate involuntary (non-compliance)): refers to situations where the client’s participation has been ceased by the service provider due to non-compliance with the rules or conditions of the program.
* Code 9 (Ceased to participate at expiation): refers to situations where the client has fulfilled their obligation to satisfy expiation requirements (e.g. participated in a treatment program to avoid having a criminal conviction being recorded against them) as part of a police or court diversion scheme and chooses not to continue with further treatment.
* Code 10 (Ceased to participate by mutual agreement): refers to situations where the client ceases participation by mutual agreement with the service provider even though the treatment plan has not been completed. This may include situations where the client has moved out of the area. Only to be used when code 2, 3 or 4 is not applicable.
* Code 11 (Drug court and/or sanctioned by court diversion service): applies to drug court and/or court diversion service clients who are sanctioned back into jail for non-compliance with the program.
* Code 12 (Imprisoned, other than drug court sanctioned): applies to clients who are imprisoned for reasons other than code 11.

#### Why is this data item collected?

This data item is collected to get an understanding of the reasons that episodes of treatment end. *Reason for cessation* is then analysed with reference to other dataset variables.

### NMDS

### Sex

#### Definition

The distinction between male, female, and others who do not have biological characteristics typically associated with either male or female.

#### Classification

1 Male

2 Female

3 Other

9 Not stated

#### Missing values

Use code 9 for missing values.

#### Guide for use and validation checks

* Code 1 Male: Persons who have male or predominately masculine biological characteristics, or male assigned at birth.
* Code 2 Female: Persons who have female or predominately feminine biological characteristics, or female sex assigned at birth.
* Code 3 Other: Persons who have mixed or non-binary biological characteristics (if known), or a non-binary sex assigned at birth.
* Terms such as ‘indeterminate’, ‘intersex’ ‘non-binary’, and ‘unspecified’ are variously used to describe the ‘Other’ category of sex. The label ‘Other’ is used because a more descriptive term has not been widely agreed within the general community.
* The Australian Bureau of Statistics 2016 Standard for Sex and Gender Variables, 2016 (Cat no.1200.0.55.012) was developed in consideration of the Australian Government Guidelines on the Recognition of Sex and Gender.
* The term ‘sex’ refers to the biological differences between males and females, while the term ‘gender’ refers to the socially expected/perceived dimensions of behaviour associated with males and females—masculinity and femininity.
* The Australian Government Guidelines on the Recognition of Sex and Gender recommends the preferred Australian Government approach of collecting and using gender information, with sex only being collected where there is a legitimate need to know the biological characteristics of the target population. It should be recognised that in some cases and individual may choose to report their gender when sex is requested.
* This data item is also used to create the *SLK-581*. The coding of this element must match the person ‘Sex’ (X) character of the *SLK-581*.

#### Why is this data item collected?

This data element may be used in the future to capture any further (optional) specifications of sex descriptors. The future inclusion in the AODTS NMDS of a write-in facility where the ‘Other’ code 3 has been selected for person-sex, allows respondents the opportunity to describe their sex using a term they are conformable with, whilst also maximising the potential for analysis of the responses provided. For example, respondents could report terms such as ‘indeterminate’, ‘intersex’, ‘non-binary’ and ‘unspecified’ for sex.

### NMDS

### Source of referral to alcohol and other drug treatment service

#### Definition

The source from which the person was transferred or referred to the alcohol and other drug treatment service.

#### Classification

01 Self (include in this code referrals from solicitors)

02 Family member/friend

03 Medical practitioner

04 Hospital

05 Mental health care service

06 Alcohol and other drug treatment service

07 Other community / health care service

08 Correctional service

09 Police diversion

10 Court diversion

98 Other

99 Not stated / inadequately described

#### Missing values

Use code 99 for missing values.

#### Guide for use and validation checks

* Code 03 (Medical practitioner): Includes medical specialists, vocationally registered general practitioners, vocationally registered general practitioner trainees and other primary-care medical practitioners in private practice.
* Code 04 (Hospital): Includes public and private hospitals, hospitals specialising in dental, ophthalmic aids and other specialised medical or surgical care, satellite units managed and staffed by a hospital, emergency departments of hospitals, and mothercraft hospitals. Excludes psychiatric hospitals, psychiatric units and alcohol and other drug units located within or operating from hospitals, and outpatient clinics (see codes 5–7).
* Code 05 (Mental health care service): Includes both residential and non-residential services. Includes psychiatric hospitals and psychiatric units within and outside of hospitals.
* Code 06 (Alcohol and other drug treatment service): Includes both residential and non-residential services. Includes alcohol and other drug units within and outside of hospitals.
* Code 07 (Other community / health care service): Includes outpatient clinics and aged care facilities.
* Code 09 (Police diversion): This code should be used when a person detained for a minor drug offence is formally referred to treatment by the police in order to divert the offender from the criminal justice pathway.
* Code 10 (Court diversion): This code refers to the diversion of an offender into drug education, assessment and treatment at the discretion of a magistrate. This may occur at the point of bail or prior to sentencing.
* Code 98 (Other): Includes persons referred under a legislative act (other than Drug Diversion Act) e.g. state and territory Mental Health Acts. This code may also include persons referred to treatment through community services, government departments, remand or prison, education (through teachers and schools), and the Australian Community Service Organisation/Community Offenders Advice and Treatment Service.

#### Why is this data item collected?

This data item is collected to get an understanding of the avenues through which clients are referred to alcohol and other drug treatment services.

### NMDS

### Statistical linkage key 581(SLK-581)

#### Definition

*SLK-581* is a code consisting of: the second, third and fifth characters of a client’s family name; the second and third letters of the client’s given name; the day, month and year of the client’s birth; and sex of the client, concatenated in that order.

#### Classification

XXXXXDDMMYYYYX

#### Missing values

Missing values are permitted for this element only if there are no missing values in the following elements:

* Letters of the family name
* Letters of the given name

#### Guide for use and validation checks

**[XXX]**XXDDMMYYYYX - Letters of the family name

* The first three characters of the *SLK-581*, the agency should record the second, third and fifth letters of the client’s family name.
* If the client’s family name includes non-alphabetic characters – for example hyphens (as in Lee-Archer), apostrophes (as in O’Mara) or blank spaces (as in De Vries) – these non-alphabetic characters should be ignored when counting the position of each character.
* Regardless of the length of a person’s family name, the reported value should always be three characters long. If the legal family name is not long enough to supply the requested letters (i.e. a legal family name is less than five letters) then substitute the number ‘2’ to reflect the missing letters. The placement of the number ‘2’ should always correspond to the same space that the missing letter would have within the 3-digit field. For example: if a person’s family name is Farr, then the value reported would be AR2; if a person’s family name is Lo, then the value reported would be O22.
* If a client’s family name is missing altogether, record the number 999 for all three spaces associated with the family name.
* In some cultures it is traditional to state the family name first. To overcome discrepancies in recording/reporting that may arise as a result of this practice, agencies should always ask the client to specify their first given name and their family name separately. These should then be recorded as first given name and family name as appropriate regardless of the order the client usually states them.

XXX**[XX]**DDMMYYYX – Letters of the given name

* The fourth and fifth characters of the *SLK-581*, the agency should record the second and third letters of the client’s given name.
* If a client’s given name includes non-alphabetic characters – for example hyphens (as in Jo-Anne) or apostrophes (as in D’Arcy), these non-alphabetic characters should be ignored when counting the position of each character.
* Regardless of the length of a person’s given name, the reported value should always be two characters long. If the person’s given name is not long enough to supply the requested letters (i.e. a given name is less than three letters) then substitute the number ‘2’ to reflect the missing letters. The placement of the number ‘2’ should always correspond to the same space that the missing letter would have within the 2-digit field. For example: if a person’s legal name is Jo, then the value reported would be O2.
* If a client’s given name is missing altogether, record the number 99 for the two spaces associated with the given name.
* In some cultures it is traditional to state the family name first. To overcome discrepancies in recording/reporting that may arise as a result of this practice, agencies should always ask the client to specify their first given name and their family name separately. These should then be recorded as first given name and family name as appropriate regardless of the order the client usually states them.

XXXXX**[DDMMYYYY]**X - Date of birth

* The sixth through to the thirteenth characters of the *SLK-581* represents the person’s date of birth.
* The required format is DDMMYYYY e.g. a client born on February eight, 1977 would read ‘08021977’.
* Collect or estimate the date of birth, as per the instructions in the *Date of birth* element and the *Date accuracy indicator* element
* These characters must match the *Date of Birth* element.

XXXXXDDMMYYYY**[X]** – Sex

* The fourteenth character in the *SLK-581* reports the sex of the person.
* 1 = male, 2 = female, 3 = Other, 9 = not stated or missing value
* This character must match the coding of the *Sex* element.

#### Why is this data item collected?

*SLK-581* allows for the identification of records belonging to the same client but not the identification of individual clients. This will allow reporting on client numbers, rather than episode numbers, and clients’ movements in and out of multiple alcohol and other drug treatment services and across time.

### NMDS

### Treatment delivery setting for alcohol and other drugs

#### Definition

The main physical setting in which the type of treatment that is the principal focus of the client’s alcohol and other drug treatment episode is actually delivered to a client, irrespective of whether or not this is the same as the usual location of the service provider.

#### Classification

1 Non-residential treatment facility

2 Residential treatment facility

3 Home

4 Outreach setting

8 Other

#### Missing values

Missing values are not permitted for this data item.

#### Guide for use and validation checks

* Only one code is to be selected at the end of the alcohol and other drug treatment episode. Agencies should report the setting in which most of the main type of treatment (as reported in Main treatment type for alcohol and other drugs) was received by the client during the treatment episode.
* Code 1 (Non-residential treatment facility): refers to any non-residential centre that provides alcohol and other drug treatment services, including hospital outpatient services and community health centres.
* Code 2 (Residential treatment facility): refers to community-based settings in which clients reside either temporarily or long-term in a facility that is not their home or usual place of residence to receive alcohol and other drug treatment. This does not include ambulatory situations, but does include therapeutic community settings.
* Code 3 (Home): refers to the client’s own home or usual place of residence.
* Code 4 (Outreach setting): refers to an outreach environment, excluding a client’s home or usual place of residence, where treatment is provided. An outreach environment may be any public or private location that is not covered by codes 1–3. Mobile/outreach alcohol and other drug treatment service providers would usually provide treatment within this setting (e.g. at a mutually agreed public space).
* Code 8 (Other): refers to other treatment delivery settings not covered in codes 1-4.

#### Why is this data item collected?

This data item is collected to get an understanding of the kinds of settings in which clients are receiving treatment.

### NMDS

### Usual accommodation type prior to treatment episode

#### Definition

The client’s usual type of physical accommodation lived in prior to the start of the treatment episode.

#### Classification

**Independent residential**

11 Private residence

12 Boarding house/private hotel

13 Informal housing

14 None/homeless/public place

**Supported independent living**

21 Domestic-scale supported living facility

22 Supported accommodation facility

23 Short term crisis, emergency or transitional accommodation facility

**Residential care**

**Hospital**

31.1 Acute hospital

31.2 Psychiatric hospital

31.3 Rehabilitation hospital

31.8 Other hospital

**Special-purpose residential setting**

32.1 Residential aged care facility

**Community care residential unit**

33.1 Mental health

33.2 Alcohol and other drugs

33.8 Other specialised community residential

**Custodial**

34 Prison/remand centre/youth training centre

**Other**

88 Other

**Supplementary values**

98 Unknown

99 Not stated/inadequately described

#### Guide for use and validation checks

‘Usual’ is defined as the type of accommodation the person has lived in predominately prior to the start of the treatment episode.

**Independent residential**

**Independent living accommodation in a private setting**

**Code 11 Private residence**

A largely self-contained dwelling intended for occupation by one or more usual residents, regardless of whether the dwelling is owned, being purchased or being rented privately, publicly or through a community organisation.

Includes: Dwellings in public housing estates, caravans, mobile homes, cabins, other permanent structures located in caravan parks, dwellings at marinas, houseboats, independent living units within a retirement village.

**Code 12 Boarding house/private hotel**

Residence of the person living independently in a dwelling receiving services only if these are provided independently of the accommodation.

Includes: Hotel, motel, boarding house, private hotel.

Excludes: Aged persons’ hostel.

**Code 13 Informal housing**

Residence occupied outside legal tenure arrangement, improvised and makeshift dwellings.

Includes: Squat, humpy, tent.

**Code 14 None/homeless/public place**

Includes: Public places such as streets and parks, as well as temporary shelters such as bus shelters or camps or other settings where the client would be considered to be living rough or homeless.

**Supported independent living**

**Residential setting is owned or provided by a service provider.**

**Code 21 Domestic-scale supported living facility**

Community living settings in which service users reside in a facility that provides support in some way by staff or volunteers. This category includes group homes, cluster apartments where a support worker lives on site, community residential apartments, congregate care arrangements, etc. Domestic-scale supported living settings may or may not have 24-hour supervision and care.

Includes: Smaller domestic-scale supported accommodation facilities (less than 7 people) which may or may not have 24-hour supervision or care.

Excludes: Independent living units in retirement villages and community psychiatric facilities.

**Code 22 Supported accommodation facility**

Settings in which service users reside in an accommodation facility which provides board or lodging for a number of people. Residents are generally responsible for their own provisions, but may be provided with domestic assistance. Support services are usually provided on a 24-hour basis by rostered care workers.

Includes: apartments, flats or unit where support is provided by a carer; and special purpose hostels for young people.

Excludes: Smaller supported accommodation facilities (less than 7 people) which may or may not have 24-hour supervision or care; residential facilities for people with a disability, mental health and/or drug and alcohol.

**Code 23 Short term crisis, emergency or transitional accommodation facility**

Settings in which clients in a crisis or emergency receive immediate and/or short-term accommodation or a special purpose facility providing accommodation and support as part of the transition between a supported living environment and independent living.

Includes: Night shelters, refuges, hostels for the homeless, women’s' shelters.

**Residential care**

Settings in which persons receive care in a health care facility as either an admitted or non-admitted patient, secure detention centre for persons on remand, in the custody of the relevant State or Territory authority for correctional services, or in police detention. Also included are residential facilities providing personal care, regular basic nursing care and health care to chronically ill, frail, disabled or convalescent people or hospitals in-patient with an age-related illness of condition.

**Hospital**

A health-care facility established under Commonwealth, state or territory legislation as a hospital or a free-standing day procedure unit and authorised to provide treatment and/or care to patients.

**Code 31.1 Acute hospital**

An establishment that provides at least minimal medical, surgical or obstetric services for inpatient treatment and/or care, and which provide round-the-clock comprehensive qualified nursing service as well as other necessary professional services. They must be licensed by the state health department, or controlled by government departments. Most of the patients have acute conditions or temporary ailments and the average stay per admission is relatively short.

Includes: Hospitals and other health care facilities but not specialised prison health facilities or psychiatric hospitals.

**Code 31.2 Psychiatric hospital**

Establishments devoted primarily to the treatment and care of inpatients with psychiatric, mental, or behavioural disorders.

Includes: Mental health units and forensic health units of corrective services systems.

**Code 31.3 Rehabilitation hospital**

An establishment that provides care in which the primary clinical purpose or treatment goal is improvement in the functioning of a patient with an impairment, activity limitation or participation restriction due to a health condition. The patient will be capable of actively participating.

Rehabilitation care is always:

* delivered under the management of or informed by a clinician with specialised expertise in rehabilitation, and
* evidenced by an individualised multidisciplinary management plan, which is documented in the patient’s medical record that includes negotiated goals within specified time frames and formal assessment of functional ability.

**Code 31.8 Other hospital**

Includes: Multi-purpose services

**Special-purpose residential setting**

A residential facility providing personal care, regular basic nursing care and health care to chronically ill, frail, disabled or convalescent people with an age-related illness or condition. Usually permanent/long term arrangement.

**Code 32.1 Residential aged care facility**

Includes: Aged care hostels, nursing homes.

**Community care residential unit**

Usually a temporary accommodation unit proving support, non-acute care and other services to people with a particular personal or social difficulty.

**Code 33.1 Mental health**

An establishment that provides specialised mental health care on an overnight basis in a domestic-like environment.

**Code 33.2 Alcohol and other drugs**

Includes: Facilities that cater for drug and alcohol rehabilitation. Excludes rehabilitation in prisons and correctional facilities.

**Code 33.8 Other specialised community residential**

**Custodial**

Secure detention centre for persons on remand, in the custody of the relevant state or territory for correctional services, or in police detention.

**Code 34 Prison/remand centre/youth training centre**

Includes: Prisons, remand centres, police centres, youth training centres and juvenile justice centres.

**Other**

**Code 88 Other**

Includes: Children under a court or guardianship order with no usual address.

#### Why is this data item collected?

The setting in which the client usually lives can have a bearing on the type of service and support required by the client, and the outcomes that may result from their service.

Furthermore, the inclusion of accommodation type will enable the exploration of the links between alcohol and other drug treatment and homelessness.

### Appendix 1: Standard Australian Classification of Countries (2016)

(SACC 2016) ABS cat. no.1269.0

**SACC 2016 Supplementary codes**

|  |  |
| --- | --- |
| 0000 | Inadequately Described |
| 0001 | At Sea |
| 0003 | Not Stated |

**SACC 2016 – Index (alphabetical)**

|  |  |
| --- | --- |
| 1601 | Adelie Land (France) |
| 7201 | Afghanistan |
| 2408 | Aland Islands |
| 3201 | Albania |
| 4101 | Algeria |
| 3101 | Andorra |
| 9201 | Angola |
| 8401 | Anguilla |
| 8402 | Antigua and Barbuda |
| 8201 | Argentina |
| 1602 | Argentinian Antarctic Territory |
| 7202 | Armenia |
| 8403 | Aruba |
| 1101 | Australia |
| 1603 | Australian Antarctic Territory |
| 1199 | Australian External Territories, nec |
| 2301 | Austria |
| 7203 | Azerbaijan |
| 8404 | Bahamas |
| 4201 | Bahrain |
| 7101 | Bangladesh |
| 8405 | Barbados |
| 3301 | Belarus |
| 2302 | Belgium |
| 8301 | Belize |
| 9101 | Benin |
| 8101 | Bermuda |
| 7102 | Bhutan |
| 8202 | Bolivia |
| 8433 | Bonaire, Sint Eustatius and Saba |
| 3202 | Bosnia and Herzegovina |
| 9202 | Botswana |
| 8203 | Brazil |
| 1604 | British Antarctic Territory |
| 5201 | Brunei Darussalam |
| **SACC 2016** | **Index (alphabetical)** |
| 3203 | Bulgaria |
| 9102 | Burkina Faso |
| 9203 | Burundi |
| 5102 | Cambodia |
| 9103 | Cameroon |
| 8102 | Canada |
| 9104 | Cape Verde |
| 8406 | Cayman Islands |
| 9105 | Central African Republic |
| 9106 | Chad |
| 8204 | Chile |
| 1605 | Chilean Antarctic Territory |
| 6101 | China (excludes SARs and Taiwan) |
| 8205 | Colombia |
| 9204 | Comoros |
| 9108 | Congo, Democratic Republic of |
| 9107 | Congo, Republic of |
| 1501 | Cook Islands |
| 8302 | Costa Rica |
| 9111 | Cote d'Ivoire |
| 3204 | Croatia |
| 8407 | Cuba |
| 8434 | Curacao |
| 3205 | Cyprus |
| 3302 | Czech Republic |
| 2401 | Denmark |
| 9205 | Djibouti |
| 8408 | Dominica |
| 8411 | Dominican Republic |
| 8206 | Ecuador |
| 4102 | Egypt |
| 8303 | El Salvador |
| 2102 | England |
| 9112 | Equatorial Guinea |
| 9206 | Eritrea |
| 3303 | Estonia |
| 9207 | Ethiopia |
| 8207 | Falkland Islands |
| 2402 | Faroe Islands |
| 1502 | Fiji |
| 2403 | Finland |
| 2303 | France |
| **SACC 2016** | **Index (alphabetical)** |
| 8208 | French Guiana |
| 1503 | French Polynesia |
| 9113 | Gabon |
| 9114 | Gambia |
| 4202 | Gaza Strip and West Bank |
| 7204 | Georgia |
| 2304 | Germany |
| 9115 | Ghana |
| 3102 | Gibraltar |
| 3207 | Greece |
| 2404 | Greenland |
| 8412 | Grenada |
| 8413 | Guadeloupe |
| 1401 | Guam |
| 8304 | Guatemala |
| 2107 | Guernsey |
| 9116 | Guinea |
| 9117 | Guinea-Bissau |
| 8211 | Guyana |
| 8414 | Haiti |
| 3103 | Holy See |
| 8305 | Honduras |
| 6102 | Hong Kong (SAR of China) |
| 3304 | Hungary |
| 2405 | Iceland |
| 7103 | India |
| 5202 | Indonesia |
| 4203 | Iran |
| 4204 | Iraq |
| 2201 | Ireland |
| 2103 | Isle of Man |
| 4205 | Israel |
| 3104 | Italy |
| 8415 | Jamaica |
| 6201 | Japan |
| 2108 | Jersey |
| 4206 | Jordan |
| 7205 | Kazakhstan |
| 9208 | Kenya |
| 1402 | Kiribati |
| 6202 | Korea, Democratic People's Republic of (North) |
| 6203 | Korea, Republic of (South) |
| **SACC 2016** | **Index (alphabetical)** |
| 3216 | Kosovo |
| 4207 | Kuwait |
| 7206 | Kyrgyzstan |
| 5103 | Laos |
| 3305 | Latvia |
| 4208 | Lebanon |
| 9211 | Lesotho |
| 9118 | Liberia |
| 4103 | Libya |
| 2305 | Liechtenstein |
| 3306 | Lithuania |
| 2306 | Luxembourg |
| 6103 | Macau (SAR of China) |
| 9212 | Madagascar |
| 9213 | Malawi |
| 5203 | Malaysia |
| 7104 | Maldives |
| 9121 | Mali |
| 3105 | Malta |
| 1403 | Marshall Islands |
| 8416 | Martinique |
| 9122 | Mauritania |
| 9214 | Mauritius |
| 9215 | Mayotte |
| 8306 | Mexico |
| 1404 | Micronesia, Federated States of |
| 3208 | Moldova |
| 2307 | Monaco |
| 6104 | Mongolia |
| 3214 | Montenegro |
| 8417 | Montserrat |
| 4104 | Morocco |
| 5101 | Myanmar |
| 9216 | Mozambique |
| 9217 | Namibia |
| 1405 | Nauru |
| 7105 | Nepal |
| 2308 | Netherlands |
| 1301 | New Caledonia |
| 1201 | New Zealand |
| 8307 | Nicaragua |
| 9123 | Niger |
| 9124 | Nigeria |
| **SACC 2016** | **Index (alphabetical)** |
| 1504 | Niue |
| 1102 | Norfolk Island |
| 2104 | Northern Ireland |
| 1406 | Northern Mariana Islands |
| 2406 | Norway |
| 4211 | Oman |
| 7106 | Pakistan |
| 1407 | Palau |
| 8308 | Panama |
| 1302 | Papua New Guinea |
| 8212 | Paraguay |
| 8213 | Peru |
| 5204 | Philippines |
| 1513 | Pitcairn Islands |
| 3307 | Poland |
| 1599 | Polynesia (excludes Hawaii), nec |
| 3106 | Portugal |
| 8421 | Puerto Rico |
| 4212 | Qatar |
| 1606 | Queen Maud Land (Norway) |
| 9218 | Reunion |
| 3211 | Romania |
| 1607 | Ross Dependency (New Zealand) |
| 3308 | Russian Federation |
| 9221 | Rwanda |
| 1505 | Samoa |
| 1506 | Samoa, American |
| 3107 | San Marino |
| 9125 | Sao Tome and Principe |
| 4213 | Saudi Arabia |
| 2105 | Scotland |
| 9126 | Senegal |
| 3215 | Serbia |
| 9223 | Seychelles |
| 9127 | Sierra Leone |
| 5205 | Singapore |
| 8435 | Sint Maarten (Dutch part) |
| 3311 | Slovakia |
| 3212 | Slovenia |
| 1303 | Solomon Islands |
| 9224 | Somalia |
| 9225 | South Africa |
| 8299 | South America, nec |
| **SACC 2016** | **Index (alphabetical)** |
| 4111 | South Sudan |
| 9299 | Southern and East Africa, nec |
| 3108 | Spain |
| 4108 | Spanish North Africa |
| 7107 | Sri Lanka |
| 8431 | St Barthelemy |
| 9222 | St Helena |
| 8422 | St Kitts and Nevis |
| 8423 | St Lucia |
| 8432 | St Martin (French part) |
| 8103 | St Pierre and Miquelon |
| 8424 | St Vincent and the Grenadines |
| 4105 | Sudan |
| 8214 | Suriname |
| 9226 | Swaziland |
| 2407 | Sweden |
| 2311 | Switzerland |
| 4214 | Syria |
| 6105 | Taiwan |
| 7207 | Tajikistan |
| 9227 | Tanzania |
| 3206 | The former Yugoslav Republic of Macedonia |
| 5104 | Thailand |
| 5206 | Timor-Leste |
| 9128 | Togo |
| 1507 | Tokelau |
| 1508 | Tonga |
| 8425 | Trinidad and Tobago |
| 4106 | Tunisia |
| 4215 | Turkey |
| 7208 | Turkmenistan |
| 8426 | Turks and Caicos Islands |
| 1511 | Tuvalu |
| 9228 | Uganda |
| 3312 | Ukraine |
| 4216 | United Arab Emirates |
| 8104 | United States of America |
| 8215 | Uruguay |
| 7211 | Uzbekistan |
| 1304 | Vanuatu |
| 8216 | Venezuela |
| 5105 | Vietnam |
| 8427 | Virgin Islands, British |
| **SACC 2016** | **Index (alphabetical)** |
| 8428 | Virgin Islands, United States |
| 2106 | Wales |
| 1512 | Wallis and Futuna |
| 4107 | Western Sahara |
| 4217 | Yemen |
| 9231 | Zambia |
| 9232 | Zimbabwe |

### 

### The current version of Standard Australian Classification of Countries (2016) is available from the ABS webpage link provided below:

<http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/1269.0Main+Features202016?OpenDocument>

### Appendix 2: Australian Standard Classification of Drugs of Concern 2011 (ASCDC 2011), ABS cat. no. 1248.0

The main classification structure is presented below. For detailed information, supplementary codes and the full version of the coding index, see ASCD (ABS 2011a).

Please note that codes 0000 (Inadequately described) and 0001 (Not stated) should not be used for Client type 1 (Own alcohol or other drug use).

The AODTS NMDS also use code:

* 0005 (Opioid analgesics not further defined)
* 0006 (Psychostimulants not further defined) where no more detailed information can be obtained
* 7102 (cannabinoid agonists) for coding synthetic cannabinoid
* 3999 (other stimulants and hallucinogens) for coding emerging psychoactive substances that cannot be coded elsewhere
* 1499 (Non Opioid Analgesics, n.e.c.) for Pregabalin/Lyrica

**Supplementary codes include:**

0000 Inadequately Described

0001 Not Stated

###### 1 ANALGESICS

###### 11 Organic Opiate Analgesics

1101 Codeine

1102 Morphine

1199 Organic Opiate Analgesics, n.e.c.

**12 Semisynthetic Opioid Analgesics**

1201 Buprenorphine

1202 Heroin

1203 Oxycodone

1299 Semisynthetic Opioid Analgesics, n.e.c.

**13 Synthetic Opioid Analgesics**

1301 Fentanyl

1302 Fentanyl analogues

1303 Levomethadyl acetate hydrochloride

1304 Meperidine analogues

1305 Methadone

1306 Pethidine

1307 Tramadol

1399 Synthetic Opioid Analgesics, n.e.c.

###### 1 ANALGESICS (Contd.)

**14 Non Opioid Analgesics**

1401 Acetylsalicylic acid

1402 Paracetamol

1403 Ibuprofen

1499 Non Opioid Analgesics

**2** **SEDATIVES AND HYPNOTICS**

###### 21 Alcohols

2101 Ethanol

2102 Methanol

2199 Alcohols, n.e.c.

###### 22 Anaesthetics

2202 Ketamine

2203 Nitrous oxide

2204 Phencyclidine

2205 Propofol

2299 Anaesthetics, n.e.c.

###### 23 Barbiturates

2301 Amylobarbitone

2302 Methylphenobarbitone

2303 Phenobarbitone

2399 Barbiturates, n.e.c.

###### 24 Benzodiazepines

2401 Alprazolam

2402 Clonazepam

2403 Diazepam

2404 Flunitrazepam

2405 Lorazepam

2406 Nitrazepam

2407 Oxazepam

2408 Temazepam

2499 Benzodiazepines, n.e.c.

**25 GHB-Type Drugs and Analogues**

2501 Gamma-hydroxybutyrate

2502 Gamma-butrolactone

2503 1,4-butanediol

2599 GHB type Drugs and Analogues, n.e.c.

**2 SEDATIVES AND HYPNOTICS (Contd.)**

###### 29 Other Sedatives and Hypnotics

2901 Chlormethiazole

2902 Kava lactones

2903 Zopiclone

2904 Docylamine

2905 Promethazine

2906 Zolpidem

2999 Other Sedatives and Hypnotics, n.e.c.

**3 STIMULANTS AND HALLUCINOGENS**

###### 31 Amphetamines

3101 Amphetamine

3102 Dexamphetamine

3103 Methamphetamine

3104 Amphetamine analogues

3199 Amphetamines, n.e.c.

###### 33 Ephedra Alkaloids

3301 Ephedrine

3302 Norephedrine

3303 Pseudoephedrine

3399 Ephedra Alkaloids, n.e.c.

###### 34 Phenethylamines

3401 DOB

3402 DOM

3403 MDA

3404 MDEA

3405 MDMA

3406 Mescaline

3407 PMA

3408 TMA

3411 DOI

3412 PMMA

3413 2C-B

3414 Phenethylamine analogues

3499 Phenethylamines, n.e.c.

**3 STIMULANTS AND HALLUCINOGENS (Contd.)**

###### 35 Tryptamines

3501 Atropinic alkaloids

3502 Diethyltryptamine

3503 Dimethyltryptamine

3504 Lysergic acid diethylamide

3505 Psilocybin or Psilocin

3506 Tryptamine anologues

3599 Tryptamines, n.e.c.

**36 Volatile Nitrates**

3601 Amyl nitrate

3602 Butyl nitrate

3699 Volatile Nitrates, n.e.c.

**37 Cathinones**

3701 Cathinone

3702 Methcathinone

3703 Cathinone analogues

3799 Cathinones, n.e.c.

**38 Piperazines**

3801 1-Benzylpiperazine

3802 1-(3-Trifluoromethylphenyl)-piperazine

3803 1-(3-Chlorophenyl)-piperazine

3804 Phenylipiperazine analogues

3899 Piperazines, n.e.c.

**39 Other Stimulants and Hallucinogens**

3901 Caffeine

3903 Cocaine

3905 Methylphenidate

3906 Nicotine

3999 Other Stimulants and Hallucinogens, n.e.c.

###### 4 ANABOLIC AGENTS AND SELECTED HORMONES

###### 41 Anabolic Androgenic Steroids

4101 Boldenone

4102 Dehydroepiandrosterone

4103 Fluoxymesterone

4104 Mesterolone

4105 Methandriol

4106 Methenolone

4107 Nandrolone

4108 Oxandrolone

4111 Stanozolol

4112 Testosterone

4199 Anabolic Androgenic Steroids, n.e.c.

###### 42 Beta2 Agonists

4201 Eformoterol

4202 Fenoterol

4203 Salbutamol

4299 Beta2 Agonists, n.e.c.

###### 43 Peptide Hormones, Mimetics and Analogues

4301 Chorionic gonadotrophin

4302 Corticotrophin

4303 Erythropoietin

4304 Growth hormone

4305 Insulin

4399 Peptide Hormones, Mimetics and Analogues, n.e.c.

**49 Other Anabolic Agents and Selected Hormones**

4901 Sulfonylurea hypoglycaemic agents

4902 Tamoxifen

4903 Thyroxine

4999 Other Anabolic Agents and Selected Hormones, n.e.c.

###### 5 ANTIDEPRESSANTS AND ANTIPSYCHOTICS

###### 51 Monoamine Oxidase Inhibitors

5101 Moclobemide

5102 Phenelzine

5103 Tranylcypromine

5199 Monoamine Oxidase Inhibitors, n.e.c.

###### 52 Phenothiazines

5201 Chlorpromazine

5202 Fluphenazine

5203 Pericyazine

5204 Thioridazine

5205 Trifluoperazin

5299 Phenothiazines, n.e.c.

###### 53 Serotonin Reuptake Inhibitors

5301 Citalopram

5302 Fluoxetine

5303 Paroxetine

5304 Sertraline

5399 Serotonin Reuptake Inhibitors, n.e.c.

###### 54 Thioxanthenes

5401 Flupenthixol

5402 Thiothixene

5499 Thioxanthenes, n.e.c.

**55 Tricyclic Antidepressants**

5501 Amitriptyline

5502 Clomipramine

5503 Dothiepin

5504 Doxepin

5505 Nortriptyline

5599 Tricyclic Antidepressants, n.e.c.

**56 Atypical Antipsychotics**

5601 Amisulpride

5602 Aripriprazole

5603 Clozapine

5604 Olanzapine

5605 Quetiapine

5606 Risperidone

5607 Ziprasidone

5699 Atypical Antipsychotics, n.e.c.

###### 5 ANTIDEPRESSANTS AND ANTIPSYCHOTICS (Contd.)

**59 Other Antidepressants and Antipsychotics**

5901 Butyrophenones

5902 Lithium

5903 Mianserin

5999 Other Antidepressants and Antipsychotics, n.e.c.

###### 6 VOLATILE SOLVENTS

###### 61 Aliphatic Hydrocarbons

6101 Butane

6102 Petroleum

6103 Propane

6199 Aliphatic Hydrocarbons, n.e.c.

###### 62 Aromatic Hydrocarbons

6201 Toluene

6202 Xylene

6299 Aromatic Hydrocarbons, n.e.c.

###### 63 Halogenated Hydrocarbons

6301 Bromochlorodifluoromethane

6302 Chloroform

6303 Tetrachloroethylene

6304 Trichloroethane

6305 Trichloroethylene

6399 Halogenated Hydrocarbons, n.e.c.

###### 69 Other Volatile Solvents

6901 Acetone

6902 Ethyl acetate

6999 Other Volatile Solvents, n.e.c.

**7 CANNABINOIDS AND RELATED DRUGS**

###### 71 Cannabinoids and Related Drugs

7101 Cannabinoids

7102 Cannabinoid agonists

7199 Cannabinoids and Related Drugs, n.e.c.

###### 9 MISCELLANEOUS DRUGS OF CONCERN

###### 91 Diuretics

9101 Antikaliuretics

9102 Loop diuretics

9103 Thiazides

9199 Diuretics, n.e.c.

###### 92 Opioid Antagonists

9201 Naloxone

9202 Naltrexone

9299 Opioid Antagonists, n.e.c.

**93 Laxatives**

1. Laxatives

###### 99 Other Drugs of Concern

9999 Other Drugs of Concern

**Appendix 3: Australian Standard Classification of Languages 2016 (ASCL 2016), ABS cat. no. 1267.0**

**ASCL 2016 - Supplementary codes:**

|  |  |
| --- | --- |
| 0000 | Inadequately Described |
| 0001 | Non Verbal, so described |
| 0002 | Not Stated |
| 8000 | Australian Indigenous Languages, nfd |
| 9000 | Other Languages, nfd |

**ASCL 2016 – index (alphabetical order):**

|  |  |
| --- | --- |
| 6513 | Acehnese |
| 9201 | Acholi |
| 9299 | African Languages, nec |
| 1403 | Afrikaans |
| 9203 | Akan |
| 3901 | Albanian |
| 9101 | American Languages |
| 9214 | Amharic |
| 9241 | Anuak |
| 4202 | Arabic |
| 4901 | Armenian |
| 3903 | Aromunian (Macedo-Romanian) |
| 5213 | Assamese |
| 4206 | Assyrian Neo-Aramaic |
| 4302 | Azeri |
| 6514 | Balinese |
| 4104 | Balochi |
| 9242 | Bari |
| 2901 | Basque |
| 9243 | Bassa |
| 3401 | Belarusian |
| 9215 | Bemba |
| 5201 | Bengali |
| 6515 | Bikol |
| 8516 | Bililuna Dialect |
| 6501 | Bisaya |
| 9402 | Bislama |
| 3501 | Bosnian |
| 3502 | Bulgarian |
| 6101 | Burmese |
| 6199 | Burmese and Related Languages, nec |
| 7101 | Cantonese |
| 2301 | Catalan |
| **ASCL 2016 contd.** | **Index (alphabetical order)** |
| 6502 | Cebuano |
| 1199 | Celtic, nec |
| 4207 | Chaldean Neo-Aramaic |
| 6102 | Chin Haka |
| 7199 | Chinese, nec |
| 3503 | Croatian |
| 3507 | Croatian Serbian |
| 3601 | Czech |
| 3604 | Czechoslovakian, so described |
| 9244 | Dan (Gio-Dan) |
| 1501 | Danish |
| 4105 | Dari |
| 5214 | Dhivehi |
| 9216 | Dinka |
| 5199 | Dravidian, nec |
| 1401 | Dutch |
| 1201 | English |
| 1601 | Estonian |
| 9217 | Ewe |
| 9301 | Fijian |
| 5217 | Fijian Hindustani |
| 6512 | Filipino |
| 1602 | Finnish |
| 1699 | Finnish and Related Languages, nec |
| 2101 | French |
| 1402 | Frisian |
| 9245 | Fulfulde |
| 9218 | Ga |
| 1101 | Gaelic (Scotland) |
| 4902 | Georgian |
| 1301 | German |
| 9302 | Gilbertese |
| 2201 | Greek |
| 5202 | Gujarati |
| 7102 | Hakkah |
| 9221 | Harari |
| 9222 | Hausa |
| 9403 | Hawaiian English |
| 4107 | Hazaraghi |
| 4204 | Hebrew |
| 5203 | Hindi |
| 6201 | Hmong |
| 6299 | Hmong-Mien, nec |
| **ASCL 2016 contd.** | **Index (alphabetical order)** |
| 3301 | Hungarian |
| 6516 | Iban |
| 2399 | Iberian Romance, nec |
| 1502 | Icelandic |
| 9223 | Igbo |
| 6503 | IIokano |
| 6517 | Ilonggo (Hiligaynon) |
| 5299 | Indo-Aryan, nec |
| 6504 | Indonesian |
| 4199 | Iranic, nec |
| 1102 | Irish |
| 2401 | Italian |
| 7201 | Japanese |
| 6518 | Javanese |
| 5101 | Kannada |
| 6103 | Karen |
| 5215 | Kashmiri |
| 6301 | Khmer |
| 9224 | Kikuyu |
| 9246 | Kinyarwanda (Rwanda) |
| 9247 | Kirundi (Rundi) |
| 9502 | Kiwai |
| 5204 | Konkani |
| 7301 | Korean |
| 9248 | Kpelle |
| 9251 | Krahn |
| 9225 | Krio |
| 4101 | Kurdish |
| 6401 | Lao |
| 2902 | Latin |
| 3101 | Latvian |
| 1302 | Letzeburgish |
| 9252 | Liberian (Liberian English) |
| 3102 | Lithuanian |
| 9253 | Loma (Lorma) |
| 9226 | Luganda |
| 9254 | Lumun (Kuku Lumun) |
| 9227 | Luo |
| 3504 | Macedonian |
| 9255 | Madi |
| 6505 | Malay |
| 5102 | Malayalam |
| 2501 | Maltese |
| **ASCL 2016 contd.** | **Index (alphabetical order)** |
| 4208 | Manaean (Mandaic) |
| 7104 | Mandarin |
| 9256 | Mandinka |
| 9257 | Mann |
| 9303 | Maori (Cook Island) |
| 9304 | Maori (New Zealand) |
| 5205 | Marathi |
| 9205 | Mauritian Creole |
| 4299 | Middle Eastern Semitic Languages, nec |
| 7107 | Min Nan |
| 6303 | Mon |
| 7902 | Mongolian |
| 6399 | Mon-Khmer, nec |
| 9258 | Moro (Nuba Moro) |
| 9503 | Motu (Hiri Motu) |
| 9306 | Nauruan |
| 9228 | Ndebele |
| 5206 | Nepali |
| 9307 | Niue |
| 1503 | Norwegian |
| 9231 | Nuer |
| 9232 | Nyanja (Chichewa) |
| 9499 | Oceanian Pidgins and Creoles, nec |
| 5216 | Oriya |
| 9206 | Oromo |
| 7999 | Other Eastern Asian Languages, nec |
| 3999 | Other Eastern European Languages, nec |
| 6999 | Other Southeast Asian Languages |
| 5999 | Other Southern Asian Languages |
| 2999 | Other Southern European Languages, nec |
| 4999 | Other Southwest and Central Asian Languages, nec |
| 9399 | Pacific Austronesian Languages, nec |
| 6521 | Pampangan |
| 9599 | Papua New Guinea Languages, nec |
| 4102 | Pashto |
| 4106 | Persian (excluding Dari) |
| 9404 | Pitcairnese |
| 3602 | Polish |
| 2302 | Portuguese |
| 5207 | Punjabi |
| 6104 | Rohingya |
| 3904 | Romanian |
| 3905 | Romany |
| **ASCL 2016 contd.** | **Index (alphabetical order)** |
| 9312 | Rotuman |
| 3402 | Russian |
| 9308 | Samoan |
| 1599 | Scandinavian, nec |
| 3505 | Serbian |
| 3507 | Serbo-Croatian/Yugoslavian, so described |
| 9238 | Seychelles Creole |
| 9233 | Shilluk |
| 9207 | Shona |
| 9799 | Sign Languages, nec |
| 5208 | Sindhi |
| 5211 | Sinhalese |
| 3603 | Slovak |
| 3506 | Slovene |
| 9405 | Solomon Islands Pijin |
| 9208 | Somali |
| 6599 | Southeast Asian Austronesian Languages, nec |
| 2303 | Spanish |
| 9211 | Swahili |
| 1504 | Swedish |
| 6511 | Tagalog |
| 6499 | Tai, nec |
| 5103 | Tamil |
| 4303 | Tatar |
| 5104 | Telugu |
| 6507 | Tetum |
| 6402 | Thai |
| 9261 | Themne |
| 7901 | Tibetan |
| 9234 | Tigre |
| 9235 | Tigrinya |
| 6508 | Timorese |
| 9504 | Tok Pisin (Neomelanesian) |
| 9313 | Tokelauan |
| 9311 | Tongan |
| 9236 | Tswana |
| 5105 | Tulu |
| 4399 | Turkic, nec |
| 4301 | Turkish |
| 4304 | Turkmen |
| 9314 | Tuvaluan |
| 3403 | Ukrainian |
| 5212 | Urdu |
| **ASCL 2016 contd.** | **Index (alphabetical order)** |
| 4305 | Uygur |
| 4306 | Uzbek |
| 6302 | Vietnamese |
| 1103 | Welsh |
| 7106 | Wu |
| 9237 | Xhosa |
| 9315 | Yapese |
| 1303 | Yiddish |
| 9212 | Yoruba |
| 9213 | Zulu |

The current version is the Australian Standard Classification of Languages (2016) is available from the ABS webpage link provided below.

<http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/1267.02016?OpenDocument>