



Australian Government

Department of Health and Aged Care

National Aged Care Mandatory Quality Indicator Program (QI Program)

Quality indicator data elements summary to support QI Program expansion from 1 April 2023

September 2022





The following tables outline the data elements for each of the QI Program quality indicators for implementation from 1 April 2023.

This summary is intended to provide an outline of QI Program quality indicator data elements only. Adherence to the legislated requirements of the QI Program involves meeting the full requirements detailed in the QI Program Manual 3.0 Part A which will be made available on the Department of Health's [website](#) when published.

Table 1: Pressure injuries

Quality indicator	Percentage of care recipients with pressure injuries, reported against six pressure injury stages
Collection	<ul style="list-style-type: none"> A single observation assessment for each care recipient, around the same time every quarter
QI reporting	<ul style="list-style-type: none"> Care recipients with one or more pressure injuries Care recipients with one or more pressure injuries reported against each of the six pressure injury stages: <ul style="list-style-type: none"> Stage 1 Pressure Injury Stage 2 Pressure Injury Stage 3 Pressure Injury Stage 4 Pressure Injury Unstageable Pressure Injury Suspected Deep Tissue Injury
Additional reporting	<ul style="list-style-type: none"> Care recipients assessed for pressure injuries Care recipients with one or more pressure injuries acquired outside of the service during the quarter Care recipients with one or more pressure injuries acquired outside of the service during the quarter, reported against each of the six pressure injury stages: <ul style="list-style-type: none"> Stage 1 Pressure Injury Stage 2 Pressure Injury Stage 3 Pressure Injury Stage 4 Pressure Injury Unstageable Pressure Injury Suspected Deep Tissue Injury <p><i>Exclusions:</i></p> <ul style="list-style-type: none"> Care recipients who withheld consent to undergo an observation assessment for pressure injuries for the entire quarter Care recipients who were absent from the service for the entire quarter

Table 2: Physical restraint

Quality indicator	Percentage of care recipients who were physically restrained
Collection	<ul style="list-style-type: none"> A single three-day record review for each care recipient on a selected day every quarter
QI reporting	<ul style="list-style-type: none"> Care recipients who were physically restrained



Quality indicator	Percentage of care recipients who were physically restrained
Additional reporting	<ul style="list-style-type: none"> Care recipients assessed for physical restraint Care recipients who were physically restrained exclusively through the use of a secure area Collection date <p><i>Exclusions:</i></p> <ul style="list-style-type: none"> Care recipients who were absent from the service for the entire three-day assessment period

Table 3: Unplanned weight loss – significant

Quality indicator	Percentage of care recipients who experienced significant unplanned weight loss (5% or more)
Collection	<ul style="list-style-type: none"> The weight of each care recipient is collected in the last month (finishing weight) of the quarter and compared to their weight at the last month (finishing weight) of the previous quarter to determine percentage of weight loss
QI reporting	<ul style="list-style-type: none"> Care recipients who experienced significant unplanned weight loss (5% or more)
Additional reporting	<ul style="list-style-type: none"> Care recipients assessed for significant unplanned weight loss <p><i>Exclusions:</i></p> <ul style="list-style-type: none"> Care recipients who withheld consent to be weighed Care recipients who are receiving end-of-life care Care recipients who did not have the required weight records available and comments providing explanation as to why the weight recording/s are absent

Table 4: Unplanned weight loss – consecutive

Quality indicator	Percentage of care recipients who experienced consecutive unplanned weight loss
Collection	<ul style="list-style-type: none"> Three monthly weights are collected for each care recipient every quarter and are compared against each other, as well as the finishing weight from the previous quarter, to determine consecutive unplanned weight loss
QI reporting	<ul style="list-style-type: none"> Care recipients who experienced consecutive unplanned weight loss of any amount
Additional reporting	<ul style="list-style-type: none"> Care recipients assessed for consecutive unplanned weight loss <p><i>Exclusions:</i></p> <ul style="list-style-type: none"> Care recipients who withheld consent to be weighed at the starting, middle and/or finishing weight collection dates Care recipients who are receiving end-of-life care Care recipients who did not have their previous, starting, middle and/or finishing weight recorded and comments providing explanation as to why the weight recording/s are absent



Table 5: Falls and major injury

Quality indicator	Percentage of care recipients who experienced one or more falls Percentage of care recipients who experienced one or more falls resulting in major injury
Collection	<ul style="list-style-type: none"> A single review of the care records of each care recipient for the entire quarter
QI reporting	<ul style="list-style-type: none"> Care recipients who experienced one or more falls at the service during the quarter Care recipients who experienced one or more falls at the service resulting in major injury, or injuries, during the quarter
Additional reporting	<ul style="list-style-type: none"> Care recipients assessed for falls and major injury <p><i>Exclusions:</i></p> <ul style="list-style-type: none"> Care recipients who were absent from the service for the entire quarter

Table 6: Medication management – polypharmacy

Quality indicator	Percentage of care recipients who were prescribed nine or more medications
Collection	<ul style="list-style-type: none"> A single review of medication charts and/or administration records for each care recipient on a selected collection date every quarter
QI reporting	<ul style="list-style-type: none"> Care recipients who were prescribed nine or more medications
Additional reporting	<ul style="list-style-type: none"> Care recipients assessed for polypharmacy Collection date <p><i>Exclusions:</i></p> <ul style="list-style-type: none"> Care recipients admitted in hospital on the collection date

Table 7: Medication management – antipsychotics

Quality indicator	Percentage of care recipients who received antipsychotic medications
Collection	<ul style="list-style-type: none"> A seven-day medication chart and/or administration record review for each care recipient every quarter
QI reporting	<ul style="list-style-type: none"> Care recipients who received an antipsychotic medication
Additional reporting	<ul style="list-style-type: none"> Care recipients assessed for antipsychotic medications Care recipients who received an antipsychotic medication for a diagnosed condition of psychosis Collection date <p><i>Exclusions:</i></p> <ul style="list-style-type: none"> Care recipients who were admitted in hospital for the entire seven-day assessment period

Table 8: Activities of daily living

Quality indicator	Percentage of care recipients who experienced a decline in activities of daily living
Collection	<ul style="list-style-type: none"> A single assessment for each care recipient is completed around the same time every quarter and compared to their ADL assessment total score in the previous quarter to determine decline.
QI reporting	<ul style="list-style-type: none"> Care recipients who experienced a decline in their ADL assessment total score of 1 or more points



Quality indicator	Percentage of care recipients who experienced a decline in activities of daily living
Additional reporting	<ul style="list-style-type: none"> Care recipients assessed for ADL function Care recipients with an ADL assessment total score of 0 in the previous quarter <p><i>Exclusions:</i></p> <ul style="list-style-type: none"> Care recipients who are receiving end-of-life care Care recipients who were absent from the service for the entire quarter Care recipients who did not have an ADL assessment total score recorded for the previous quarter and comments providing explanation as to why recording is absent

Table 9: Incontinence care

Quality indicator	Percentage of care recipients who experienced incontinence associated dermatitis
Collection	<ul style="list-style-type: none"> A single assessment for each care recipient, around the same time every quarter as part of routine care
QI reporting	<ul style="list-style-type: none"> Care recipients with incontinence who experienced IAD Care recipients who experienced IAD, reported against each of the four sub-categories: <ul style="list-style-type: none"> 1A: Persistent redness without clinical signs of infection 1B: Persistent redness with clinical signs of infection 2A: Skin loss without clinical signs of infection 2B: Skin loss with clinical signs of infection
Additional reporting	<ul style="list-style-type: none"> Care recipients assessed for incontinence Care recipients with incontinence <p><i>Exclusions for incontinence care:</i></p> <ul style="list-style-type: none"> Care recipients who were absent from the service for the entire quarter <p><i>Exclusions for IAD assessment:</i></p> <ul style="list-style-type: none"> Care recipients who did not have incontinence

Table 10: Hospitalisation

Quality indicator	Percentage of care recipients who had one or more emergency department presentations
Collection	<ul style="list-style-type: none"> A single review of the care records for each care recipient for the entire quarter
QI reporting	<ul style="list-style-type: none"> Care recipients who had one or more emergency department presentations during the quarter
Additional reporting	<ul style="list-style-type: none"> Care recipients assessed for hospitalisation Care recipients who had one or more emergency department presentations or hospital admissions during the quarter <p><i>Exclusions:</i></p> <ul style="list-style-type: none"> Care recipients who were absent from the service for the entire quarter



Table 11: Workforce

Quality indicator	Percentage of staff turnover
Collection	<ul style="list-style-type: none"> A single review of staff records
QI reporting	<ul style="list-style-type: none"> Staff employed at the start of the quarter as: <ul style="list-style-type: none"> service managers nurse practitioners or registered nurses enrolled nurses personal care staff or assistants in nursing Staff who stopped working during the quarter as: <ul style="list-style-type: none"> service managers nurse practitioners or registered nurses enrolled nurses personal care staff or assistants in nursing
Additional reporting	<ul style="list-style-type: none"> Staff who worked any hours during the previous quarter as: <ul style="list-style-type: none"> service managers nurse practitioners or registered nurses enrolled nurses personal care staff or assistants in nursing

Table 12: Consumer experience

Quality indicator	Percentage of care recipients who report 'good' or 'excellent' experience of the service
Collection	<ul style="list-style-type: none"> A consumer experience assessment must be offered to each care recipient for completion, around the same time every quarter
QI reporting	<ul style="list-style-type: none"> Care recipients who reported consumer experience through each completion mode of the QCE-ACC (self-completion, interviewer facilitated completion or proxy-completion), scored against the categories: <ul style="list-style-type: none"> 'Excellent' (care recipients who score between 22–24) 'Good' (care recipients who score between 19–21)
Additional reporting	<ul style="list-style-type: none"> Care recipients who were offered a consumer experience assessment for completion Care recipients who reported consumer experience through each completion mode of the QCE-ACC (self-completion, interviewer facilitated completion or proxy-completion), scored against the categories: <ul style="list-style-type: none"> 'Moderate' (care recipients who score between 14–18) 'Poor' (care recipients who score between 8–13) 'Very poor' (care recipients who score between 0–7) <p>Exclusions:</p> <ul style="list-style-type: none"> Care recipients who were absent from the service for the entire quarter Care recipients who did not choose to complete the consumer experience assessment for the entire quarter



Table 13: Quality of life

Quality indicator	Percentage of care recipients who report 'good' or 'excellent' quality of life
Collection	<ul style="list-style-type: none">A quality of life assessment must be offered to each care recipient for completion, around the same time every quarter
QI reporting	<ul style="list-style-type: none">Care recipients who reported quality of life through each completion mode of the QOL-ACC (self-completion, interviewer facilitated completion or proxy-completion), scored against the categories:<ul style="list-style-type: none">'Excellent' (care recipients who score between 22–24)'Good' (care recipients who score between 19–21)
Additional reporting	<ul style="list-style-type: none">Care recipients who were offered a quality of life assessment for completionCare recipients who reported quality of life through each completion mode of the QOL-ACC (self-completion, interviewer facilitated completion or proxy-completion), scored against the categories:<ul style="list-style-type: none">'Moderate' (care recipients who score between 14–18)'Poor' (care recipients who score between 8–13)'Very poor' (care recipients who score between 0–7) <p><i>Exclusions:</i></p> <ul style="list-style-type: none">Care recipients who were absent from the service for the entire quarterCare recipients who did not choose to complete the quality of life assessment for the entire quarter