



Government Provider Management System

User Guide: Quality Indicators application

National Aged Care Mandatory Quality Indicator Program (QI Program) Manual 4.0 - Part C

April 2025

Version 1.4

This Government Provider Management System (GPMS) User Guide provides instructions to submit data and access reports using the Quality Indicators application.

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1. Introduction

The Department of Health and Aged Care released a Government Provider Management System (GPMS) portal to make it easier for providers to access and report information.

The GPMS Quality Indicators application supports submission of quarterly data as required by the National Aged Care Mandatory Quality Indicator Program (QI Program).

In accordance with the legislation, all residential aged care services must collect quarterly quality indicator data consistently using the methods prescribed in the [QI Program Manual 4.0 – Part A](#) for submission via GPMS.

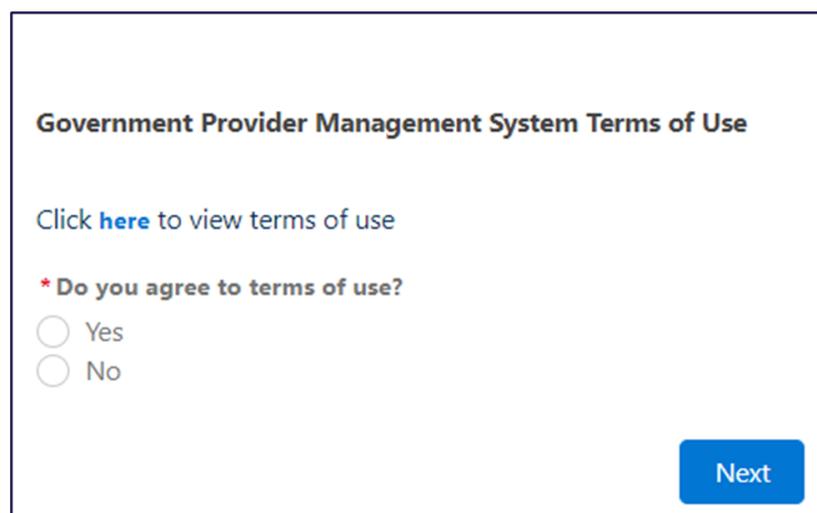
1.1 Purpose

This User Guide has been designed to support residential aged care providers and organisations submitting quality indicator data on behalf of providers, with the following actions:

- accessing the QI Program tile in the GPMS Portal
- submitting quality indicator data
- accessing QI Program dashboard and reports, where authorised.

1.2 Before proceeding

The Department of Health and Aged Care will keep records of your access to GPMS and when prompted, you must accept the *GPMS Terms of Use* to be able to access the system.



The screenshot shows a web interface for the Government Provider Management System. At the top, it says "Government Provider Management System Terms of Use". Below that, it says "Click [here](#) to view terms of use". Then, there is a question: "* Do you agree to terms of use?". There are two radio buttons: "Yes" and "No". At the bottom right, there is a blue button labeled "Next".

1.3 Login to the GPMS portal

To log into the GPMS portal please visit [Log In Using | Service Provider Portal](#).

If you require assistance logging into the GPMS portal, please refer to the [GPMS Logging in to the Aged Care Systems](#).

2. Further information and support

To view additional QI Program resources, please visit the [QI Program website](#).

For more information on GPMS please refer to the [Government Provider Management System](#) webpage.

If you require further assistance to login to GPMS please contact the My Aged Care service provider and assessor helpline on **1800 836 799**, Monday to Friday (8am to 8pm) and Saturday (10am to 2pm) local time across Australia.

For translating and interpreting services, call 131 450 and ask for My Aged Care service provider and assessor helpline on **1800 836 799**.

To use the National Relay Service, visit [About the National Relay Service \(NRS\) | Access Hub](#) or call **1800 555 660**.

To access sign language interpreting and captioning services through Deaf Connect, call **1300 773 803** or email interpreting@deafconnect.org.au.

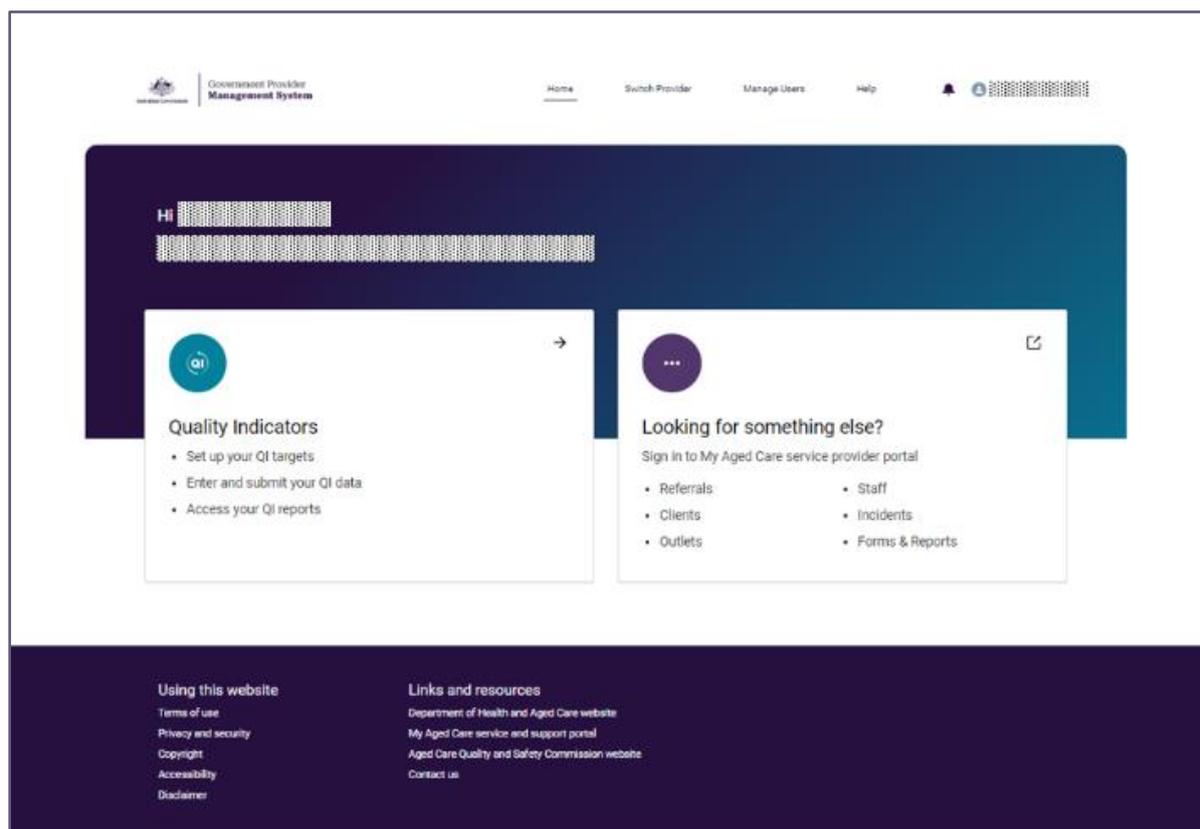
3. Accessing GPMS and the Quality Indicator application

To log into the GPMS portal please visit [Log In Using | Service Provider Portal](#).

When you log into GPMS, you will be taken to the home page.

You will only be able to see the tiles that you, as an assigned user, have access to.

Select the **Quality Indicators** tile by selecting the arrow in the top right-hand corner of the tile.



Please note:

If you cannot see the Quality Indicators tile, please speak to your Organisation Administrator to get access.

4. Quality Indicator Data Entry & Submission home page

When you select the **Quality Indicators** tile, you will be taken to the Quality Indicator Data Entry & Submission home page.

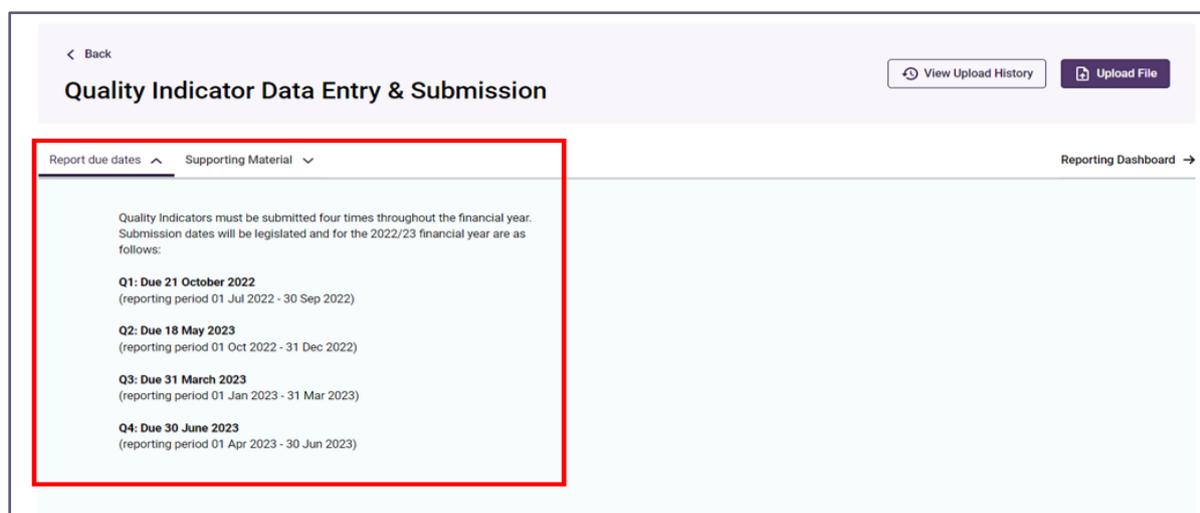
On this page you will see a number of tabs and buttons, including the:

- Report due dates tab
- Supporting material tab
- Search and display filters
- Start and View buttons
- Upload file button
- Submission status notifications

Each of these sections, and the corresponding functions are described below.

4.1 Report due dates tab

Select the **Report due dates** tab to see a list of the reporting due dates for the QI Program across the current financial year.



The screenshot shows the 'Quality Indicator Data Entry & Submission' page. At the top, there is a navigation bar with a '< Back' link, the page title, and two buttons: 'View Upload History' and 'Upload File'. Below the navigation bar, there are two tabs: 'Report due dates' (selected and highlighted with a red box) and 'Supporting Material'. To the right of the tabs is a 'Reporting Dashboard' link with a right-pointing arrow. The main content area under the 'Report due dates' tab contains the following text:

Quality Indicators must be submitted four times throughout the financial year. Submission dates will be legislated and for the 2022/23 financial year are as follows:

- Q1: Due 21 October 2022**
(reporting period 01 Jul 2022 - 30 Sep 2022)
- Q2: Due 18 May 2023**
(reporting period 01 Oct 2022 - 31 Dec 2022)
- Q3: Due 31 March 2023**
(reporting period 01 Jan 2023 - 31 Mar 2023)
- Q4: Due 30 June 2023**
(reporting period 01 Apr 2023 - 30 Jun 2023)

4.2 Supporting Material tab

Select the **Supporting Material** tab to access various resources to help you collect and report quality indicator data.

Resources include:

- National Aged Care Mandatory Quality Indicator Program Manual 4.0 - Part A.
- National Aged Care Mandatory Quality Indicator Program Manual 4.0 - Part B.
- User Guide: Quality Indicators Application.
- National Aged Care Mandatory Quality Indicator Program FAQs.
- QI Program quick reference guides.
- QI Program interactive modules.

Please note:

The below **Supporting Material** tab will display the Manual as 3.0 Part A and 3.0 Part B. When you select the relevant manual, it will re-direct you to the updated 4.0 version.

The screenshot shows a web interface for 'Quality Indicator Data Entry & Submission'. At the top left, there is a '< Back' link. At the top right, there are two buttons: 'View Upload History' and 'Upload File'. Below the title, there is a navigation bar with 'Report due dates' and 'Supporting Material' (which is highlighted with a red box). To the right of the navigation bar is a 'Reporting Dashboard' link with a right-pointing arrow. The main content area is divided into two columns. The left column contains a list of links to various manuals and guides, each with a brief description. The right column contains a 'Need Help?' section with contact information for the My Aged Care service provider and assessor helpline.

< Back

View Upload History Upload File

Quality Indicator Data Entry & Submission

Report due dates Supporting Material Reporting Dashboard →

National Aged Care Mandatory Quality Indicator Program Manual 3.0 - Part A
This manual includes definitions of each quality indicator and how to collect and submit quality indicator data. The physical restraint quality indicator now aligns with new restrictive practice legislation in the Aged Care Legislation Amendment (Royal Commission Response No. 1) Principles 2021.

National Aged Care Mandatory Quality Indicator Program Manual 3.0 - Part B
This manual is for government subsidised residential aged care providers. Part B includes a range of tools and resources to support continuous quality improvement for each of the QI Program quality indicators.

National Aged Care Mandatory Quality Indicator Program Manual 3.0 - Part C
This manual is a guide for government subsidised residential aged care providers. Part C includes information for approved providers to access and use the QI Application in the My Aged Care provider portal as well as submit quality indicator data and access QI Program reports.

National Aged Care Mandatory Quality Indicator Program FAQs
This document is for government subsidised residential aged care providers. The documents details a range of frequently asked questions and answers to support residential aged care providers to understand and meet requirements of the QI Program.

QI Program quick reference guides
These guides are for approved providers of residential aged care services. The quick reference guides provides an overview of each of the quality indicators and include examples of recoding data.

QI Program interactive modules
These interactive modules are for approved providers of residential aged care services. The module will support providers of residential aged care to understand the requirements of the QI program.

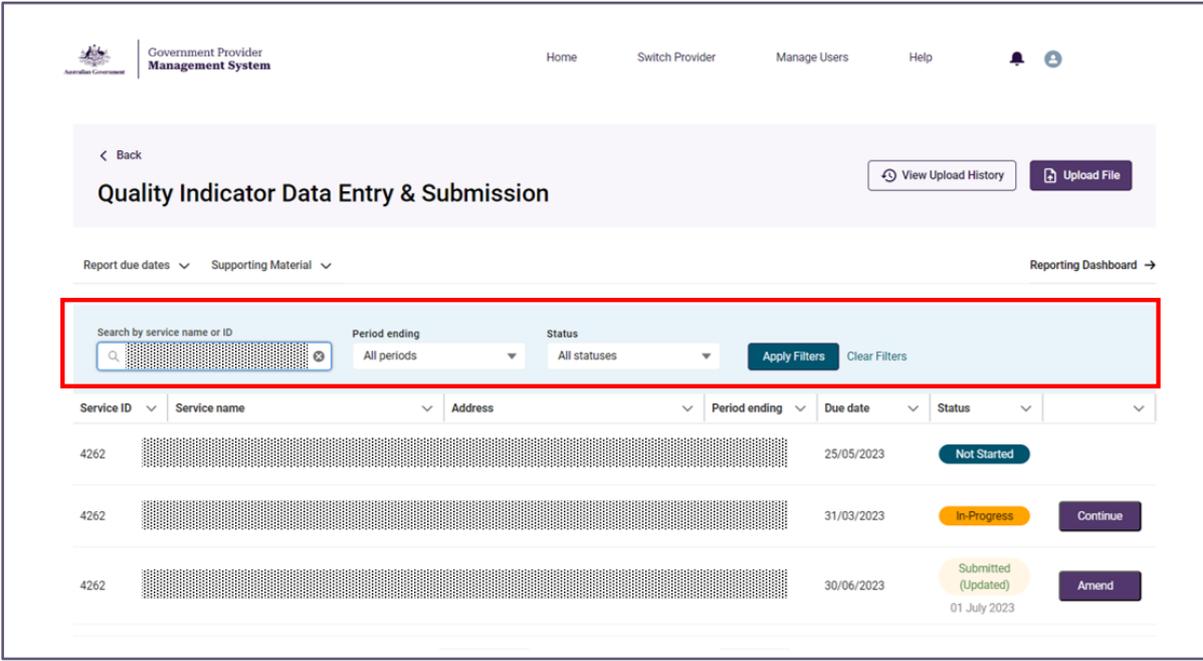
Need Help?
If you have any questions in relation to quality indicators, please contact the My Aged Care service provider and assessor helpline on 1800 836 799. The helpline is open Monday to Friday between 8am-8pm and Saturday between 10am-2pm.

4.3 Search and display filters

To find a service, enter the service name or service ID in the Search by service name or ID field.

You can also search by Period ending and Status of your quality indicator data submission (Status) by selecting from the drop down menus and clicking **Apply Filters**.

For more details of the 'Status' of a service, refer to [Submission status](#).



The screenshot shows the 'Quality Indicator Data Entry & Submission' page. At the top, there is a navigation bar with the Government Provider Management System logo and links for Home, Switch Provider, Manage Users, and Help. Below the navigation bar, there is a 'Back' button and two buttons: 'View Upload History' and 'Upload File'. The main heading is 'Quality Indicator Data Entry & Submission'. Below the heading, there are two dropdown menus: 'Report due dates' and 'Supporting Material'. On the right, there is a 'Reporting Dashboard' link. A search and filter section is highlighted with a red box, containing a search input field labeled 'Search by service name or ID', a 'Period ending' dropdown menu set to 'All periods', a 'Status' dropdown menu set to 'All statuses', and 'Apply Filters' and 'Clear Filters' buttons. Below this section is a table with columns: Service ID, Service name, Address, Period ending, Due date, Status, and an empty column. The table contains three rows of data for Service ID 4262. The first row has a 'Not Started' status. The second row has an 'In-Progress' status and a 'Continue' button. The third row has a 'Submitted (Updated)' status with a date of '01 July 2023' and an 'Amend' button.

4.4 Starting a quality indicator data submission

From the Quality Indicator Data Entry & Submission page a quality indicator data submission can be started or updated using the:

- Manual data entry function (see [Manual data entry submission page](#)) by selecting:
 - **Start** to start a new submission,
 - **Continue** to continue a submission in progress,
 - **Amend** to make changes to a previous submission, or
 - **View** to see a read only version of a previous submission.
- File upload function (see [File upload/bulk data entry submission page](#)) by selecting the **Upload File** button.

Government Provider Management System

Home Switch Provider Manage Users Help

Quality Indicator Data Entry & Submission

View Upload History Upload File

Report due dates Supporting Material Reporting Dashboard

Search by service name or ID

Search service name or ID All periods All statuses Apply Filters Clear Filters

Service ID	Service name	Address	Period ending	Due date	Status	
			31/03/2023	21/04/2023	Not Started	Start
			31/03/2023	21/04/2023	Not Started	Start
			31/03/2023	21/04/2023	Not Started	Start
			31/03/2023	21/04/2023	Not Started	Start
			31/03/2023	21/04/2023	Not Started	Start
			31/03/2022		Late Submission	View
			30/09/2024	30/06/2024	Submitted (Updated)	View
			30/09/2021		Submitted	View
			31/12/2021		Submitted	View
			31/03/2022		Submitted	View

Please note:

‘Start’ and ‘Continue’ will only be available prior to the submission due date for the quarter.

‘Amend’ and ‘View’ will only be available after the submission due date for the quarter.

4.5 Submission status

The Quality Indicator Data Entry & Submission page provides information on the status of your quality indicator submissions.

Submission statuses are explained in the table below.

Status	Definition
Not started	No quality indicator data has been entered or saved for the quarter.
In-Progress	Quality indicator data has been entered and has not been submitted for the quarter.
Submitted	Quality indicator data has been submitted for the quarter.
Submitted (Updated)	Quality indicator data has been submitted on time and updates have made after the submission due date for the quarter.
Not submitted	Quality indicator data has not been submitted, and the quarterly due date has passed.
Late submission	Quality indicator data was submitted after the quarterly due date. Note: Amendments to a late submission will remain as a late submission following the update.
Offline	Service has been offline for the whole quarter and is not required to submit quality indicator data as they are not providing care.

You can **start** or **continue** quality indicator data submissions for the current quarter, as detailed in the screenshot below.

The data for the previous quarter can be amended.

View only access is available for quality indicator data recorded in earlier quarters.

Quality Indicator Data Entry & Submission

Report due dates ▾ Supporting Material ▾ Reporting Dashboard →

Search by service name or ID
Search service name or ID

Period Ending: All periods ▾ Status: All statuses ▾ Apply Filters Clear Filters

Service ID ▾	Service name ▾	Address ▾	Period ending ▾	Due date ▾	Status ▾	▾
			30/06/2023	21/07/2023	Not Started	Start
			31/03/2023	21/04/2023	Not Started	Start
			30/06/2023	21/07/2023	Not Started	Start
			31/03/2023	21/04/2023	Not Started	Start
			30/06/2023	21/07/2023	Not Started	Start
			31/03/2023	21/04/2023	Not Started	Start
			30/06/2023	21/07/2023	Not Started	Start
			31/03/2023	21/04/2023	In Progress	Continue
			30/06/2023	21/07/2023	In Progress	Continue
			31/03/2023	21/04/2023	In Progress	Continue

Please note:

The data for the enrolled nursing, lifestyle officer and allied health care minutes data points will be pulled from Quarterly Financial Report (QFR) and does not need to be submitted through the QI Program application.

As QFR reporting due dates are a few weeks after QI Program due dates, you will not see your enrolled nursing, lifestyle officer and allied health care minutes data until you have submitted your QFR.

5. Manual data entry submission page

This section in the user guide provides introductory information on manually entering quality indicator data in GPMS.

Quality indicator data should be collected and reported consistently using the methods prescribed in the [QI Program Manual 4.0 – Part A](#).

The below screenshot shows an example of the manual data entry submission page.

The screenshot shows a web interface for setting up Quality Indicator (QI) targets. At the top, a dark blue header contains the reporting period: "Reporting on: Quarter 3 FY 24 - 25 (1 January 2025 - 31 March 2025)", along with "Save" and "Close" buttons. Below the header, the "Service ID:" field is followed by "Reporting period due date: 21 April 2025 | Status: In Progress". A timestamp "Last updated by SAM UAT on 25 Mar 2025, 13:06" is in the top right.

A vertical sidebar on the left lists various reports, with "Set up QI Target/s" highlighted in a red box. The main content area is titled "Set up QI Target/s" and includes a note: "All fields marked with an asterisk must be completed before submission".

The "Pressure injuries targets" section contains the following items:

- 1. Number of care recipients with one or more pressure injuries (input field)
- 2. Number of care recipients with one or more pressure injuries reported against each of the six pressure injury stages:
 - Stage 1 pressure injury (input field)
 - Stage 2 pressure injury (input field)
 - Stage 3 pressure injury (input field)
 - Stage 4 pressure injury (input field)
 - Unstageable pressure injury (input field)
 - Suspected deep tissue injury (input field)

The "Restrictive practices targets" section contains:

- 3. Number of care recipients who were subject to the use of a restrictive practice (excluding chemical restraint) (once or more and including the use of secure facilities) on any occasion during the three-day assessment period (input field)

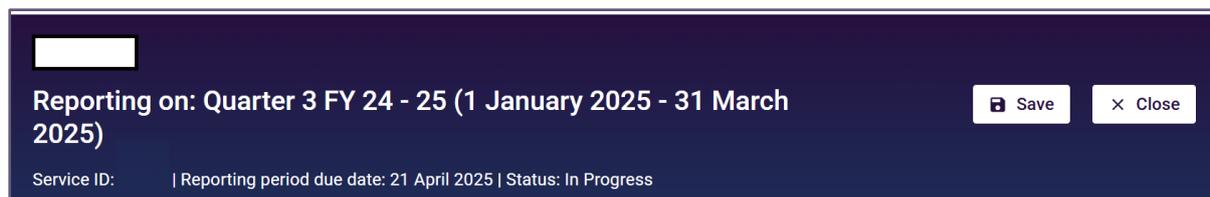
The "Unplanned weight loss targets" section is partially visible at the bottom.

Additional resources to support data collection and reporting can be found in the **Supporting material** tab on the Quality Indicator Data Entry & Submission home page.

If you need to access the **Supporting material** while completing the forms, be sure to first save your data (accessing the **Supporting material** will take you outside the data entry form).

5.1 Banner

This banner appears at the top of every page on each data entry form.



It indicates the name of the aged care provider (top left), service ID, reporting period due date and the Status of the form (such as In Progress).

At the top right of the banner you can save your data entry by selecting the **Save** button.

5.2 Data entry stepper

On the left-hand side of Data Entry Submission page, is a stepper for the data entry form for each quality indicator, including:

- Set up QI Target/s
- Pressure injuries
- Restrictive practices
- Unplanned weight loss
- Falls and major injury
- Medication management
- Activities of daily living (ADLs)
- Incontinence care
- Hospitalisation
- Workforce
- Consumer experience
- Quality of life
- Allied Health
- Submission

The data entry stepper is a useful navigation tool and will highlight whether the data entry forms have been completed correctly for each quality indicator.

The screenshot of the data entry stepper is shown on the following page:



You can move between sections in the stepper in any order, but you will not be able to navigate to the **Submission** section until data for all quality indicators is entered.

Within the data entry stepper, there are a number of icons, as explained below:

Icon	Name and Meaning
	Blue circle with white tick confirms the section is complete.

Icon	Name and Meaning
	Blue circle with white centre shows that you are currently in this section.
	Grey circle shows the section has not yet been started.
	Red circle warns the section is incomplete and contains quality indicator data errors (this means data submission cannot proceed).
	Yellow warning symbol shows quality indicator data may contain errors and review is suggested (however, data submission can still proceed).
	If any of the Sections are not completed the Submit button will be greyed out.

Once all required data forms are complete the **Submission** icon will unlock allowing the user to proceed to the Submission page.

5.3 Back button

The **Back** button will take you to the previous quality indicator data entry form as noted in the data entry stepper.

The quality indicator data entered in the data entry form will be saved when clicking the **Back** button.



5.4 Check Complete Data button

The **Check Complete Data** button applies the validations built into each data entry form against your quality indicator data.

This will notify you of any quality indicator data that may have been entered incorrectly within each form (see [Manual entry of quality indicator data](#) and [Error messages whilst entering quality indicator data](#)).



5.5 Next button

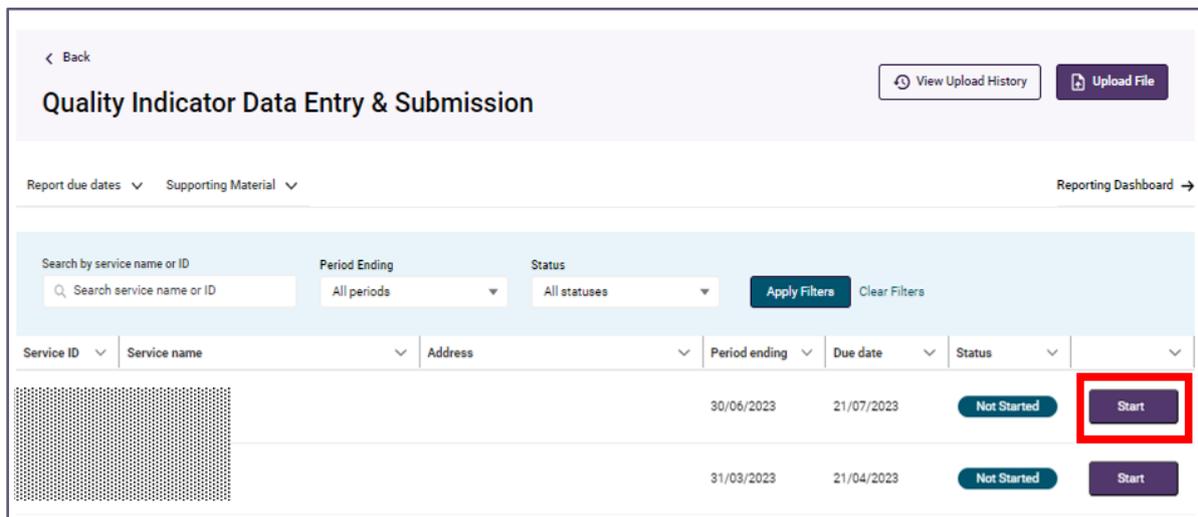
The **Next** button will take you to the quality indicator data entry form as noted in the data entry stepper.

The quality indicator data entered in the data entry form will be saved when clicking the **Next** button.



Setting quality indicator targets

After Selecting the **Start** button in the Data Entry & Submission home page, the Set up QI Target/s page will appear, where you can enter aspirational targets for a service.



Set up targets by entering data against each quality indicator in the form and selecting **Save**. Setting targets is optional.

If you previously entered quality indicator targets these will be displayed.

Select **Next** to go to the first quality indicator data recording form. Alternatively, navigate to the relevant data form by selecting the quality indicator from the data entry stepper on the left-hand side.

Reporting on: Quarter 3 FY 24 - 25 (1 January 2025 - 31 March 2025)

Save

Close

Service ID: | Reporting period due date: 21 April 2025 | Status: In Progress

Last updated by SAM UAT on 25 Mar 2025, 13:06

Reports

Set up QI Target/s

Set up QI Target/s

All fields marked with an asterisk must be completed before submission

Pressure injuries targets

- 1 Number of care recipients with one or more pressure injuries
- 2 Number of care recipients with one or more pressure injuries reported against each of the six pressure injury stages:
Stage 1 pressure injury

Stage 2 pressure injury

Stage 3 pressure injury

Stage 4 pressure injury

Unstageable pressure injury

Suspected deep tissue injury

Restrictive practices targets

- 3 Number of care recipients who were subject to the use of a restrictive practice (excluding chemical restraint) (once or more and including the use of secure facilities) on any occasion during the three-day assessment period

Unplanned weight loss targets

5.6 Manual entry of quality indicator data

An example screenshot of entering quality indicator data is after these instructions:

1. Select the quality indicator you wish to enter data for in the data entry stepper.

Reports

Set up QI Target/s

Set up QI Target/s

All fields marked with an asterisk must be completed before submission

Pressure injuries targets

1 Number of care recipients with one or more pressure injuries

2 Number of care recipients with one or more pressure injuries reported against each of the six pressure injury stages:

Stage 1 pressure injury

Stage 2 pressure injury

Stage 3 pressure injury

Stage 4 pressure injury

Unstageable pressure injury

Suspected deep tissue injury

Restrictive practices targets

3 Number of care recipients who were subject to the use of a restrictive practice (excluding chemical restraint) (once or more and including the use of secure facilities) on any occasion during the three-day assessment period

Unplanned weight loss targets

2. Enter the relevant quality indicator data into the fields within the form.

All fields marked with an asterisk must be completed.

3. Once data is entered for the given quality indicator, you can select **Next** to move onto the subsequent quality indicator form to continue entering data for your submission.

The data entry stepper will show your location and progress within the submission with bold text and colour coded notifications (see the [Data entry stepper](#) section).

4. Select **Save** to save your data after entering data in each page.

Please note:

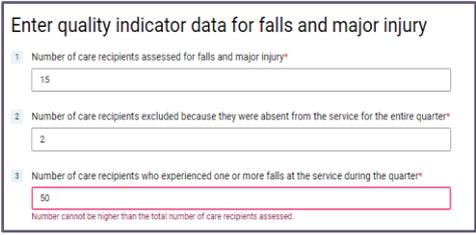
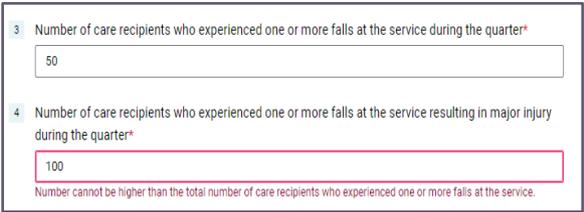
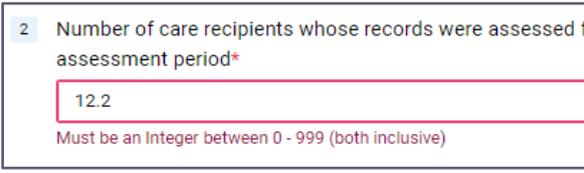
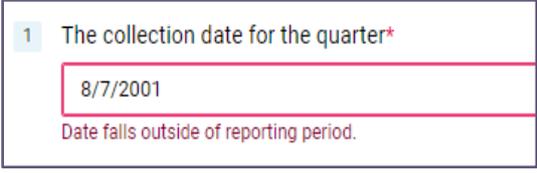
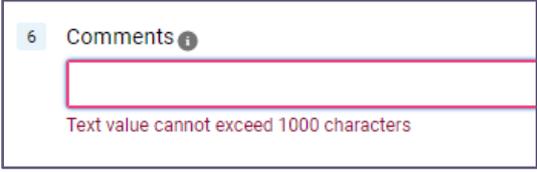
If you need to exit the data forms or access the supporting material at any stage, be sure to first save your data by selecting the **Save** button, as these resources will take you outside of the data entry form.

5.7 Error messages whilst entering quality indicator data

When entering quality indicator data, if required fields are not completed, error messages will appear.

You may not be able to submit the data without resolving these error messages.

Errors will also be highlighted in the [Data entry stepper](#).

Error	Correction	Example
<i>This is required</i>	This is mandatory, please provide an entry. If the response is zero, please ensure you enter 0.	
<i>Number cannot be higher than your total number of care recipients assessed.</i>	Please ensure the number you have entered is correct. Data entered for quality indicator reporting must be less than or equal to the number of care recipients assessed.	
<i>Number of {quality indicator question A} cannot exceed {quality indicator question B}.</i>	Please ensure the number you have entered is correct. Some questions ask for a subset of data from earlier questions.	
<i>Must be an Integer between 0 – 999 (both inclusive)</i>	Please ensure the number you have entered is correct. The number must be a whole number (integer) between 0 and 999.	
<i>Date falls outside of reporting period.</i>	Please ensure the date you have entered is correct. The collection date must fall inside of the quarter being reported on.	
<i>Text value cannot exceed 1000 characters</i>	Please ensure the comments made are fewer than 1000 characters and do not contain personal information about any of the care recipients, as defined by the <i>Privacy Act 1988</i> .	

5.8 Data entry ready for submission

By selecting **Check Complete Data**, the entered data will be checked against the in-built validations in each quality indicator data entry form.

(See image in [Post Submission](#)).

The screen below shows data for all quality indicators is entered correctly and ready for submission.

In the left-hand data entry stepper, this is represented by blue circle icons next to each quality indicator and an unlocked icon next to Submission.

Quality Indicator File Upload

Close

Upload your quality indicator data

- Select the reporting quarter**

The quality indicator file upload allows the submission of quality indicator data for a single reporting quarter.

Quarter 3 FY 24 - 25
- Download the QI Program file upload template**

The QI Program file upload template allows you to bulk upload your quality indicator data.

Download and complete the QI Program file upload template below.

Download the QI Program file upload template
- Upload the QI Program file upload template**

Please upload the completed QI Program file upload template for the selected reporting quarter in the nominated section below. The file will be examined by the system to confirm the quality indicator data for each service is valid. Validation may take up to 2 hours.

If an invalid entry is identified, the quality indicator data for the service will not be submitted. You will receive an email notification to assist in identifying and amending the quality indicator data to support submission.

Each service with valid quality indicator data will be successfully submitted.

Upload Files Or drop files
- By submitting quality indicators data you...**
 - Confirm that you have collected, and are reporting, the quality indicator data in accordance with National Aged Care Mandatory Quality Indicator Program Manual 3.0 and all applicable laws, in accordance with the Aged Care Act 1997, Records Principles 2014 and Accountability Principles 2014.
 - Confirm that any information you have provided does not contain any personal information as defined under Privacy Act 1988.

This quality indicator data will overwrite all previously entered data.

Submit

You can continue to the Submission page by selecting the relevant button in the data entry stepper or by clicking the **Next** button at the bottom of the quality indicator data entry form.

Please note:

Red circles in the stepper will prevent you from submitting the quality indicator data. Review and update the relevant data before continuing to submission.

5.9 Submission

This page is where you submit the quality indicator data.

1. Read the Submission Declaration Statement.
2. Select **Submit** to formally submit your quality indicator data.

Reporting on: Quarter 3 FY 24 - 25 (1 January 2025 - 31 March 2025) [Save] [Close]

Service ID: | Reporting period due date: 21 April 2025 | Status: In Progress

Last updated by SAM UAT on 25 Mar 2025, 15:24

Reports

- Set up QI Targets/s
- Pressure injuries**
- Restrictive practices
- Unplanned weight loss
- Falls and major injury
- Medication management
- Activities of daily living (ADLs)
- Incontinence care
- Hospitalisation
- Workforce
- Consumer experience
- Quality of life
- Allied health

You are submitting data for

By submitting quality indicators data you:

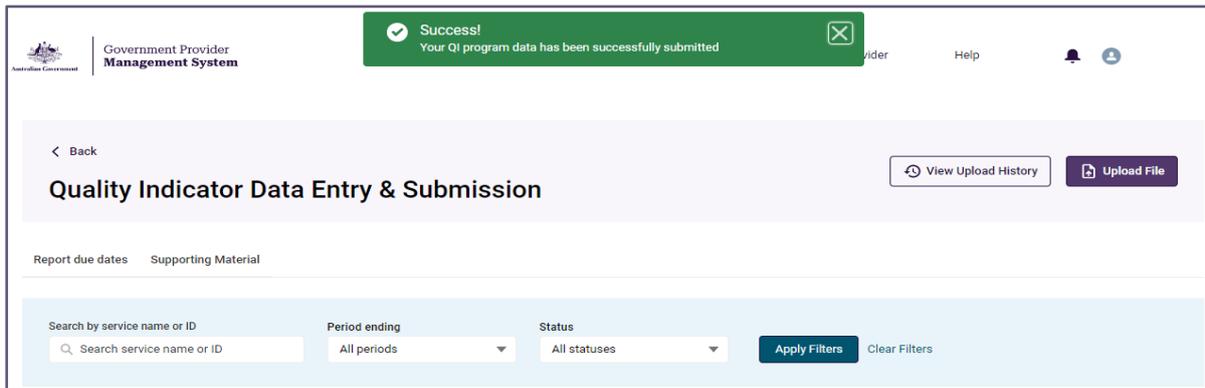
- Confirm that you have collected, and are reporting, the quality indicator data in accordance with National Aged Care Mandatory Quality Indicator Program Manual 3.0 and all applicable laws, in accordance with the Aged Care Act 1997, Records Principles 2014 and Accountability Principles 2014.
- Confirm that any information you have provided does not contain any personal information as defined under Privacy Act 1988.

[Back] [Submit]

Submission

5.10 Post submission

You will be redirected to your Quality Indicator Data Entry & Submission page with a message displayed on your screen to let you know that your quality indicator data entry has been successfully submitted.



6. File upload/bulk data entry submission page

This section in the user guide provides introductory information on entering quality indicator data for multiple services using the file upload function in GPMS.

Quality indicator data should be collected and reported consistently using the methods prescribed in the [QI Program Manual 4.0 – Part A](#).

Additional resources to support data collection and reporting can be found in the **Supporting material** tab on the Quality Indicator Data Entry & Submission home page.

6.1 QI Program file upload template page

1. Return to the Quality Indicator Data Entry & Submission home page. Then select **Upload File** in the top right-hand corner.
2. A new page will open QI Program file upload template.

Upload your quality indicator data

1 Select the reporting quarter

The quality indicator file upload allows the submission of quality indicator data for a single reporting quarter.

Quarter 3 FY 24 - 25

2 Download the QI Program file upload template

The QI Program file upload template allows you to bulk upload your quality indicator data.

Download and complete the QI Program file upload template below.

Download the QI Program file upload template

3 Upload the QI Program file upload template

Please upload the completed QI Program file upload template for the selected reporting quarter in the nominated section below. The file will be examined by the system to confirm the quality indicator data for each service is valid. Validation may take up to 2 hours.

If an invalid entry is identified, the quality indicator data for the service will not be submitted. You will receive an email notification to assist in identifying and amending the quality indicator data to support submission.

Each service with valid quality indicator data will be successfully submitted.

Upload Files Or drop files

4 By submitting quality indicators data you...

- Confirm that you have collected, and are reporting, the quality indicator data in accordance with National Aged Care Mandatory Quality Indicator Program Manual 3.0 and all applicable laws, in accordance with the Aged Care Act 1997, Records Principles 2014 and Accountability Principles 2014.
- Confirm that any information you have provided does not contain any personal information as defined under Privacy Act 1988.

This quality indicator data will overwrite all previously entered data.

Submit

6.2 Downloading and completing the file upload template

1. To begin, go to the QI Program file upload template page.
2. Select the quarter being reported against
3. Select Download the QI Program file upload template.

Quality Indicator File Upload

× Close

Upload your quality indicator data

- Select the reporting quarter**

The quality indicator file upload allows the submission of quality indicator data for a single reporting quarter.

Quarter 3 FY 24 - 25
- Download the QI Program file upload template**

The QI Program file upload template allows you to bulk upload your quality indicator data.

Download and complete the QI Program file upload template below.

Download the QI Program file upload template

4. Fill out the QI Program file upload template with quality indicator data for the relevant services for the given quarter.

To ensure successful submission of your quality indicator data please ensure:

- you are using the most up to date file upload template
- the template is saved as a Microsoft Excel file (xlsx)
- all required data fields are completed.

The formula for dates does not allow leading zeros for the day of the month. For example, for 1 January 2023, you must reflect the date as 1/01/2023 and not 01/01/2023.

6.3 Submitting the file upload template

Progress through the fields on the page by following these steps:

1. Select the reporting quarter by pressing Choose reporting quarter - only current and previous are available.
2. Upload the file by pressing **Upload File** and selecting the relevant file, or by dragging and dropping the file into the box (example pictured below).

Quality Indicator File Upload Close

Upload your quality indicator data

- 1 Select the reporting quarter**

The quality indicator file upload allows the submission of quality indicator data for a single reporting quarter.

Quarter 3 FY 24 - 25
- 2 Download the QI Program file upload template**

The QI Program file upload template allows you to bulk upload your quality indicator data.

Download and complete the QI Program file upload template below.

Download the QI Program file upload template
- 3 Upload the QI Program file upload template**

Please upload the completed QI Program file upload template for the selected reporting quarter in the nominated section below. The file will be examined by the system to confirm the quality indicator data for each service is valid. Validation may take up to 2 hours.

If an invalid entry is identified, the quality indicator data for the service will not be submitted. You will receive an email notification to assist in identifying and amending the quality indicator data to support submission.

Each service with valid quality indicator data will be successfully submitted.

Upload Files Or drop files
- 4 By submitting quality indicators data you...**
 - Confirm that you have collected, and are reporting, the quality indicator data in accordance with National Aged Care Mandatory Quality Indicator Program Manual 3.0 and all applicable laws, in accordance with the Aged Care Act 1997, Records Principles 2014 and Accountability Principles 2014.
 - Confirm that any information you have provided does not contain any personal information as defined under Privacy Act 1988.

This quality indicator data will overwrite all previously entered data.

Submit

3. Read the Submission Declaration Statement.
4. Submit the file by selecting the **Submit** button.

Please note:

The Submit button at the bottom of the page will be locked until the file is uploaded.

6.4 File upload post-submission page

After selecting submit, the post submission page will appear, showing the status of the upload. File upload statuses are displayed below and defined accordingly:

- **Submitted** ('Submitted' in green text) = Successful (no error file)
- **Pending** ('Pending' in yellow text) = Waiting for processing (no error file)
- **Failed** ('Failed' in red text) = Not Uploaded (no error file), OR all rows have errors (error file)
- **Partial** ('Partial' in black text) = Some successful and some failed (error file)

6.5 File upload success message

When the file upload status is **Submitted**, the **Success** banner will appear.

This signals that the uploaded file was successfully submitted, and no further action is needed.

You can return to the home page via the **Back to main page** button in the bottom right.

Quality Indicator Program file upload Close

Uploaded file status

Success
Your QI Program file upload has been successfully submitted. This means data has been received for all services in accordance with the National Aged Care Mandatory Quality Indicator Program Manual 3.0 - Part A. An email confirmation of this submission will be sent to your nominated email address.

Quarter 4 FY 22 - 23 (Current)

ID	
Uploaded by	
File name	
Total number of rows	1
Number submitted	1
Number Failed	0
Date submitted	06/06/2023 Original File
Status	Submitted

Success
Your QI Program file upload was submitted successfully. No additional action is required.

[Back to main page](#)

6.6 File upload pending message

When the file upload status is **Pending**, the banner will be titled **Pending**, meaning that the file is still undergoing validation.

Pending files can take up to two hours to be validated.

Whilst this is occurring, the **Re-upload** button in the bottom right is locked until the file validation is complete.

Once the file validation is complete, the pending status will update to Submitted, Failed or Partial.

The screenshot shows a web interface for a 'QI Program file upload'. At the top, there is a dark blue header with the title 'QI Program file upload' and a 'Close' button. Below the header, the section is titled 'Uploaded file status'. A prominent orange banner with a warning icon and the word 'Pending' contains the following text: 'The QI Program file upload is currently being validated. This means the file has not yet been submitted and is still processing. Please return later to view the finalised result of your submission. An email notification will be sent once the submission is finalised.' Below this banner is a white box titled 'Quarter 4 FY 22 - 23 (Current)' containing a table of upload details. At the bottom right of the interface, a 'Re-upload' button is highlighted with a red rectangle.

Quarter 4 FY 22 - 23 (Current)	
ID	[Redacted]
Uploaded by	[Redacted]
File name	Pending
Total number of rows	-
Number submitted	-
Number Failed	-
Date submitted	
Status	Pending

We are validating your QI Program file upload. This may take up to 2 hours. An email notification will be sent once validation is complete.

Re-upload

6.7 Failed upload error message

When the file upload status is **Failed**, the banner will be titled **Error**, meaning there was an error whilst processing the file and the submission is unsuccessful.

There are two scenarios where this is possible:

6.7.1 Scenario 1 - No error file produced

This could be because of a processing fail, system outage, file corruption or having a pending status greater than 24 hours.

No error file is produced, but the **Re-upload** button unlocks and is activated.

Go to the [re-uploading file template](#) section for detailed instructions on re-uploading your file.

The screenshot displays the 'Quality Indicator Program file upload' interface. At the top, there is a dark blue header with the title 'Quality Indicator Program file upload' and a 'Close' button. Below the header, the section 'Uploaded file status' is visible. A prominent red error banner contains the following text: 'Error. Validation has found quality indicator data for all services is either incomplete, incorrect or missing. This may be due to the QI Program file upload containing invalid data, duplicate records or incorrect service record numbers. Please review the error log using the link below to identify and amend these errors before re-uploading the file to successfully submit your data.' Below the error banner, a white box titled 'Quarter 4 FY 22 - 23 (Current)' provides details about the upload: ID, Uploaded by, File name, Total number of rows, Number submitted (0), Number Failed (1), Date submitted (06/06/2023), and Status (Failed). A link 'Download error file' is provided. At the bottom right of the interface, a 'Re-upload' button is highlighted with a red box.

Quarter 4 FY 22 - 23 (Current)	
ID	[Redacted]
Uploaded by	[Redacted]
File name	[Redacted]
Total number of rows	
Number submitted	0
Number Failed	1
Date submitted	06/06/2023 Original File
Status	Failed Download error file

6.7.2 Scenario 2 - Error file produced

This will be because all the service lines within the file have errors.

This will produce an **error file**, which is found next to the **Failed** status.

The **Re-upload** button unlocks and is activated.

For further instructions, refer to the links for [Error files](#) and [Re-uploading file template](#).

The screenshot displays the 'Quality Indicator Program file upload' interface. At the top, there is a dark blue header with the title 'Quality Indicator Program file upload' and a 'Close' button. Below the header, the section 'Uploaded file status' is visible. A prominent red error message box contains the following text: 'Error. Validation has found quality indicator data for all services is either incomplete, incorrect or missing. This may be due to the QI Program file upload containing invalid data, duplicate records or incorrect service record numbers. Please review the error log using the link below to identify and amend these errors before re-uploading the file to successfully submit your data.' Below this, a white box titled 'Quarter 4 FY 22 - 23 (Current)' provides details for the upload: ID, Uploaded by, File name, Total number of rows (1), Number submitted (0), and Number Failed (1). A red box highlights the 'Date submitted' (06/06/2023) with a link to 'Original File', and the 'Status' (Failed) with a link to 'Download error file'. Below this, another red error message box states: 'We have found errors in your QI Program file upload. Please review the error file using the link above and amend your quality indicator data before uploading the file again.' At the bottom right of the interface, a 'Re-upload' button is visible.

6.8 File upload partial success message

When the file upload status is Partial, the banner will be titled Partial Success, meaning there were some errors found within the file upload.

This will produce an **error file**, which is found next to the **Partial** status.

The **Re-upload** button unlocks and becomes selectable.

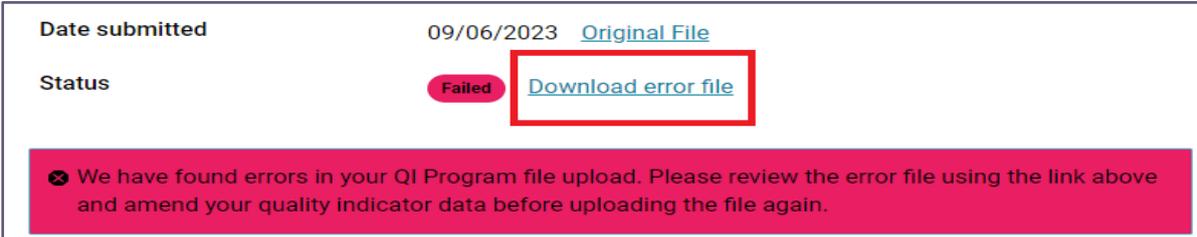
For further instructions, refer to the links for [Error files](#) and [Re-uploading file template](#).

The screenshot displays the 'Quality Indicator Program file upload' interface. At the top, there is a dark blue header with the title 'Quality Indicator Program file upload' and a close button. Below the header, the section 'Uploaded file status' is visible. A green banner with a warning icon indicates 'Partial Success' and provides a message: 'Validation has found quality indicator data for some services data is either incomplete, incorrect or missing. This may be due to the QI Program file upload containing invalid data, duplicate records or incorrect service record numbers. Please review the error log using the link below to identify and amend these errors before re-uploading the file to successfully submit your data.' Below this, a summary table for 'Quarter 4 FY 22 - 23 (Current)' is shown. The table includes fields for ID, Uploaded by, File name, Total number of rows (2), Number submitted (1), Number Failed (1), Date submitted (06/06/2022), and Status (Partial). A red box highlights the table content. At the bottom of the table, there is a link for 'Download error file'. Below the table, a green banner with a warning icon states: 'We have found errors in your QI Program file upload. Please review the error file using the link above and amend your quality indicator data before uploading the file again.' At the bottom right of the interface, there is a 'Re-upload' button.

Quarter 4 FY 22 - 23 (Current)	
ID	[Redacted]
Uploaded by	[Redacted]
File name	[Redacted]
Total number of rows	2
Number submitted	1
Number Failed	1
Date submitted	06/06/2022 Original File
Status	Partial Download error file

6.9 Error files

1. After selecting the error file for a [Failed \(Error file produced\)](#) or [Partial submission](#), click **Download error file**.



The screenshot shows a submission status card. At the top, it says 'Date submitted 09/06/2023' with a link for 'Original File'. Below that, the 'Status' is 'Failed' in a red pill, and there is a blue link 'Download error file' which is highlighted with a red box. A red error message box at the bottom reads: '⊗ We have found errors in your QI Program file upload. Please review the error file using the link above and amend your quality indicator data before uploading the file again.'

2. This will open another tab, with the header allowing you to **Download**.



The screenshot shows a dark grey header bar with two buttons: 'Download' (with a download icon) and 'Download as PDF' (with a PDF icon). The 'Download' button is highlighted with a red box. Below the header, a table of data is visible with columns for 'NAPS SerReporting' and various 'PI' (Pressure Indicator) categories.

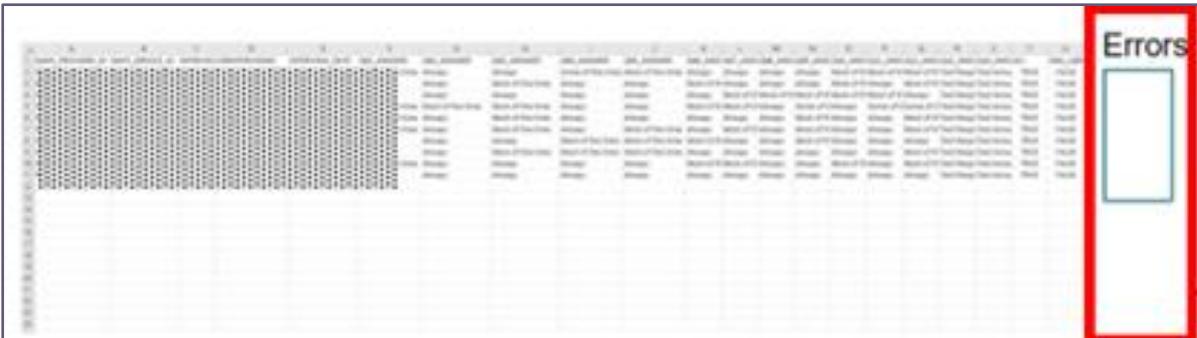
Please note:

Select Download to access an easy to review Microsoft Excel spreadsheet.

3. The error column will display all the errors and their specific location in the last/far right column of the Microsoft Excel spreadsheet.

The errors could include:

- invalid data,
- service not found
- record duplication (partially)
- 'user not authorized' to submit data for this service.



The screenshot shows a Microsoft Excel spreadsheet with many columns. The rightmost column is labeled 'Errors' and is highlighted with a red box. The spreadsheet contains data for various services and pressure indicators.

4. Correct the errors. Once completed, save the file locally and re-upload.

6.10 Re-uploading file template

After amending the quality indicator data errors found in the file upload, select the **Re-upload** button on the relevant status screen. Progress through the Submission page by following these steps:

1. Select the reporting quarter by pressing **Choose reporting quarter**, this should be preselected.
2. Upload the updated file by pressing **Upload File** and select the relevant file, or by dragging and dropping the file into the box, as pictured below.
3. Read the **Submission Declaration Statement**.
4. Submit the file by pressing the **Submit** button.

Please note:

The Submit button at the bottom of the screen will be locked until the file is uploaded successfully.

Quality Indicator File Upload Close

Upload your quality indicator data

1 Select the reporting quarter
The quality indicator file upload allows the submission of quality indicator data for a single reporting quarter.

Quarter 3 FY 24 - 25

2 Download the QI Program file upload template
The QI Program file upload template allows you to bulk upload your quality indicator data.
Download and complete the QI Program file upload template below.

Download the QI Program file upload template

3 Upload the QI Program file upload template
Please upload the completed QI Program file upload template for the selected reporting quarter in the nominated section below. The file will be examined by the system to confirm the quality indicator data for each service is valid. Validation may take up to 2 hours.
If an invalid entry is identified, the quality indicator data for the service will not be submitted. You will receive an email notification to assist in identifying and amending the quality indicator data to support submission.
Each service with valid quality indicator data will be successfully submitted.

Upload Files Or drop files

4 By submitting quality indicators data you...

- Confirm that you have collected, and are reporting, the quality indicator data in accordance with National Aged Care Mandatory Quality Indicator Program Manual 3.0 and all applicable laws, in accordance with the Aged Care Act 1997, Records Principles 2014 and Accountability Principles 2014.
- Confirm that any information you have provided does not contain any personal information as defined under Privacy Act 1988.

This quality indicator data will overwrite all previously entered data.

Submit

For more information for the messages following the re-upload, please see [File upload post-submission page](#) and following sections.

6.11 Viewing upload history

On the Quality Indicator Data Entry & Submission page select the **View Upload History** button to see all the earlier files uploaded.



6.12 File upload history page

All files uploaded will be displayed on this page. Within this page, you can find a specific upload searching by **service name** or **ID**, reporting quarter (**period ending**) or **Status** by selecting the fields and clicking **Apply Filters**.

The various statuses of file uploads below include:

- **Submitted** ('Submitted' in green text) = The file upload was successfully submitted
- **Failed** ('Failed' in red text) = The file upload was not uploaded correctly or has errors in every row
- **Pending** ('Pending' in yellow text) = The file upload is being processed
- **Partial** ('Partial' in black text) = The file upload had some successful and some failed rows

For further information, refer to [Error files](#).

Information on the status of the file upload is shown in the **Total**, **Submitted** and **Failed** fields in the screenshot below.

The screenshot displays the 'Quality Indicator File Upload History' page. It features a search bar with filters for 'Search by upload ID or file name', 'Reporting quarter' (set to 'Quarter 4 FY 22 - 23'), and 'Status' (set to 'All statuses'). Below the search bar is a table with columns: Upload ID, File name, Reporting quarter, Submitted date, Total, Submitted, Failed, Status, and a 'View' button. Two rows are highlighted with red boxes and labeled 'Example 1' and 'Example 2'.

Upload ID	File name	Reporting quarter	Submitted date	Total	Submitted	Failed	Status	View
vbenc 25/5/2023, 4:43 pm	201693+TC+04+Vinali+Ben... Example 1	Quarter 4 FY 22 - 23	25/05/2023	2	1	1	Partial	View
vbenc 25/5/2023, 4:42 pm	Current+Successful	Quarter 4 FY 22 - 23	25/05/2023				Failed	View
obenc 25/5/2023, 4:40 pm	TC25+bulk+notif_3	Quarter 4 FY 22 - 23	25/05/2023	1	1	0	Submitted	View
vbenc 25/5/2023, 4:33 pm	201693+TC+04+Vinali+Ben... Example 2	Quarter 4 FY 22 - 23	25/05/2023	2	0	2	Failed	View
obenc 14/6/2023, 4:32 pm	qi-program-file-upload-temp...	Quarter 4 FY 22 - 23	14/06/2023				Pending	View

Example 1: User submitted a file upload containing 2 records on 25/05/23. There are 2 files in the Total column, 1 in the Submitted column and 1 in the Failed column, with the submission status being Partial.

Example 2: User submitted a file upload file on 14/06/23. The submission is still processing so the status is Pending. This will update automatically once processing is completed.

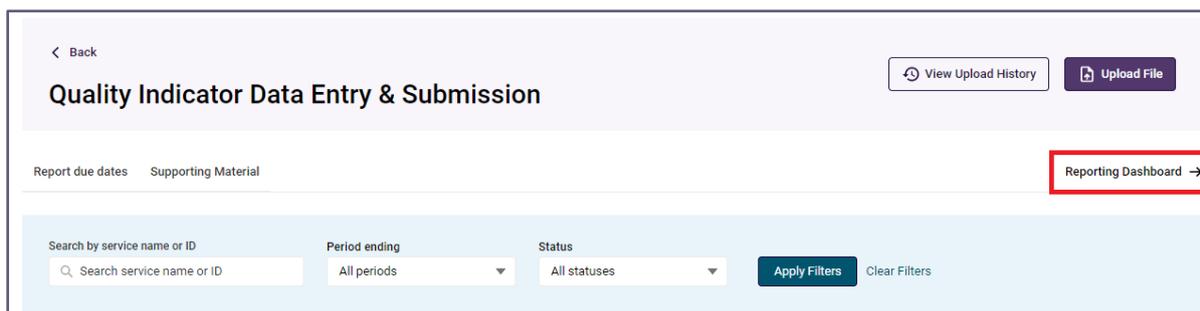
7. Reporting Dashboard

This section provides information on the Quality Indicator Reporting Dashboard and associated reporting capabilities.

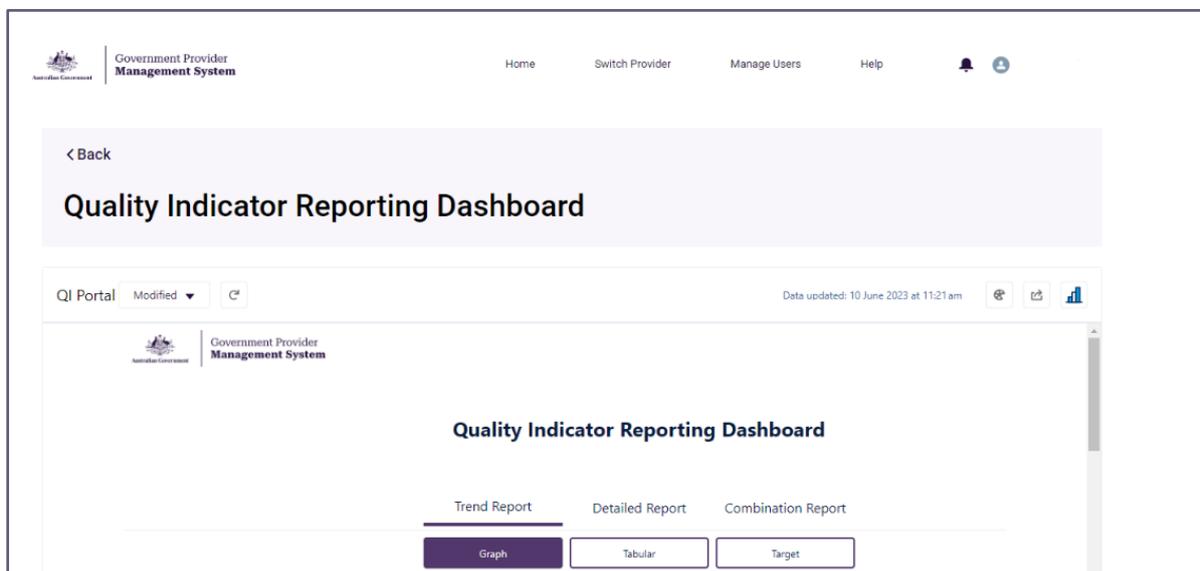
These functions are available to residential aged care providers with access to the Quality Indicators application. These functions are not available for organisations submitting quality indicator reporting on behalf of providers.

7.1 Accessing the Quality Indicator Reporting Dashboard

1. On the Quality Indicator Data Entry & Submission page, select the **Reporting Dashboard** button in the top-right hand section.

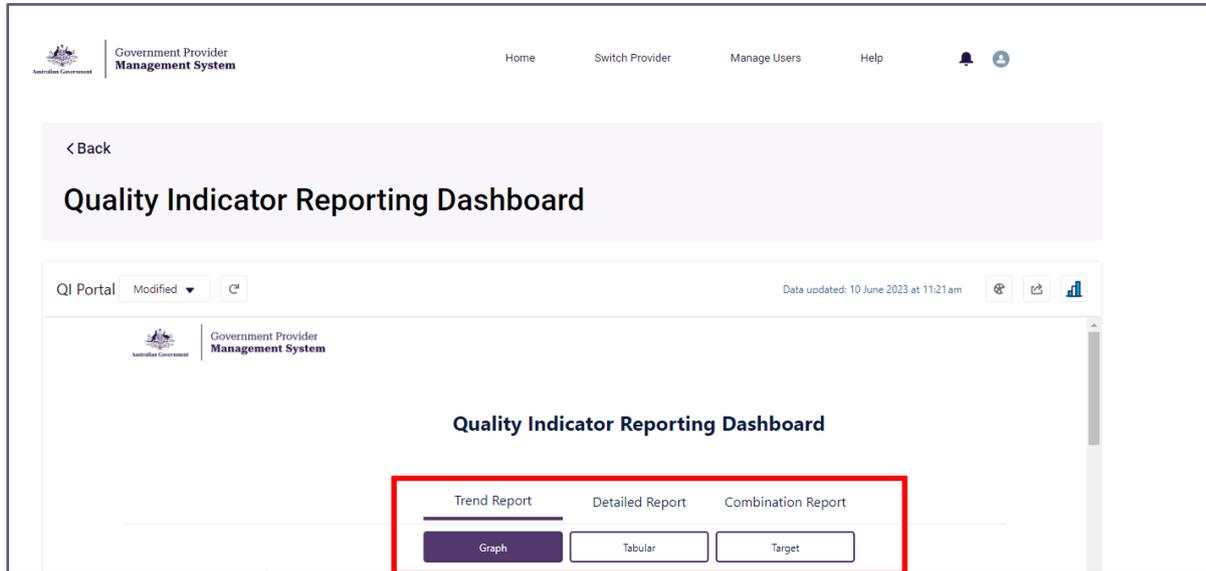


2. A new tab will open in Analytics Studio with the Quality Indicator Reporting Dashboard page.



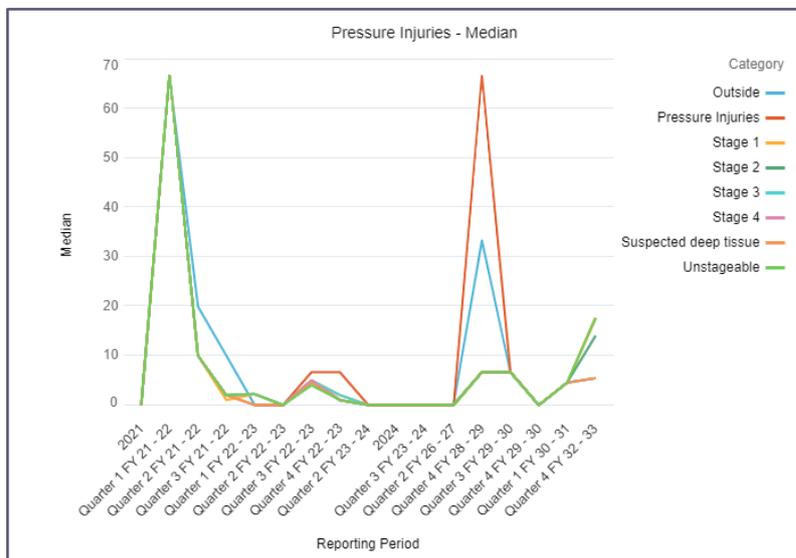
7.2 Overview of report types and display formats

The Quality Indicator Reporting Dashboard allows you to create three key reports (trend, detailed and combination) with three key report displays (graph, tabular and target).

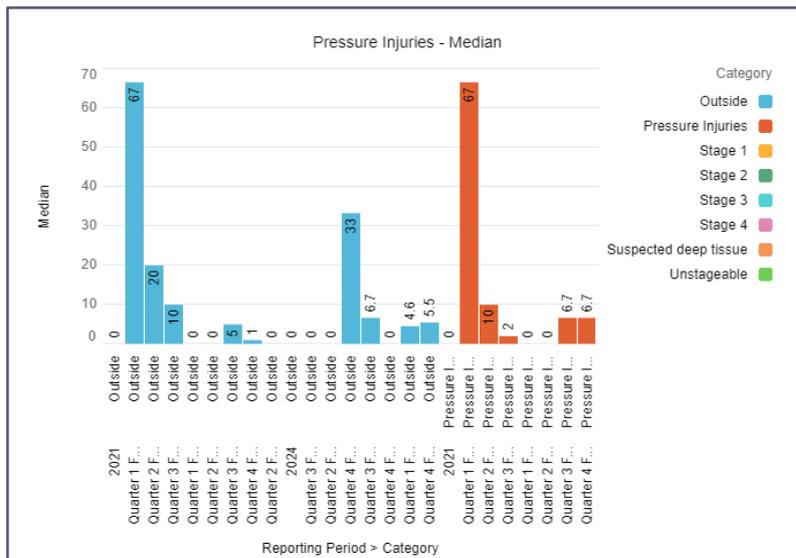


7.2.1 Key reports

1. **Trend Report:** Displays data trends and patterns over time to provide high level insights into quality indicator data.



- Detailed Report:** Displays an in-depth view of quality indicator data from a service, focusing on individual outcomes rather than progress over time.

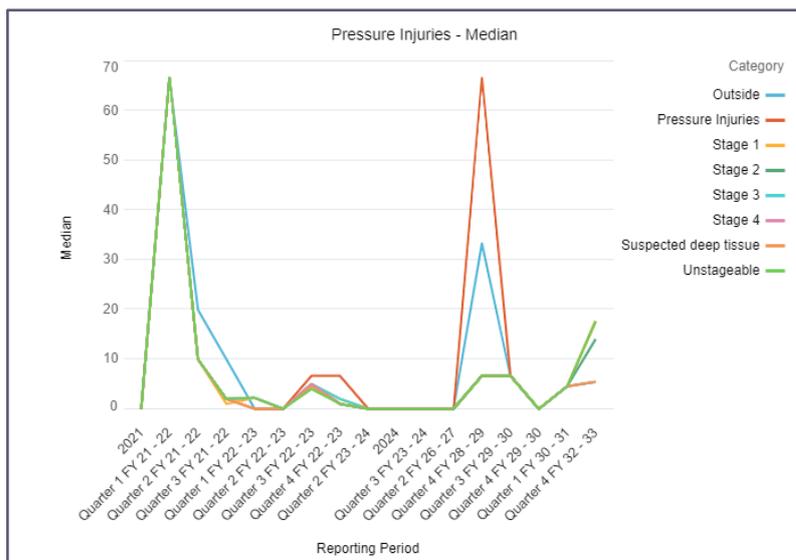


- Combination Report:** Displays trends and an in-depth view of quality indicator data, merging the two previous report formats to provide a comprehensive view of different data in a unified format.

This report will not have benchmark options.

7.2.2 Key displays

- Graph:** Displays quality indicator data for a service in a line (displayed below) and bar chart format. The Graph View provides visual representation of your data to support easier analysis and interpretation, enables you to identify patterns, spot anomalies, and understand the overall trajectory of data.



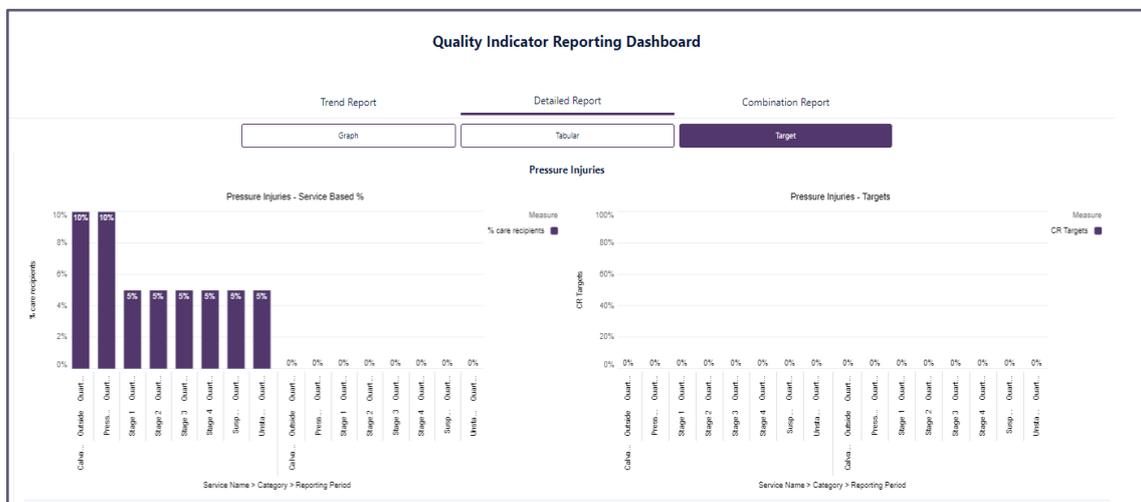
2. Tabular: Displays quality indicator data for a service in a table.

The Tabular View provides a comprehensive and structured representation of data, organised tabular format, making it easier for you to export your data.

Service Name ↑	Quality Indicator ↑	Category ↑	Reporting Period	Median
11022002_Epping	Pressure injuries	Outside	Quarter 2 FY 22 - 23	0
			Quarter 2 FY 26 - 27	0
		Pressure Injuries	Quarter 2 FY 22 - 23	0
			Quarter 2 FY 26 - 27	0
		Stage 1	Quarter 2 FY 22 - 23	0
			Quarter 2 FY 26 - 27	0
		Stage 2	Quarter 2 FY 22 - 23	0
			Quarter 2 FY 26 - 27	0
		Stage 3	Quarter 2 FY 22 - 23	0
			Quarter 2 FY 26 - 27	0
		Stage 4	Quarter 2 FY 22 - 23	0
			Quarter 2 FY 26 - 27	0
		Suspected deep tissue	Quarter 2 FY 22 - 23	0

3. Target: Displays quality indicator data against the targets set by the service in a graphical format.

The Target View is designed to help you understand and evaluate your quality indicator data against your service targets (see [Setting quality indicator targets](#)).



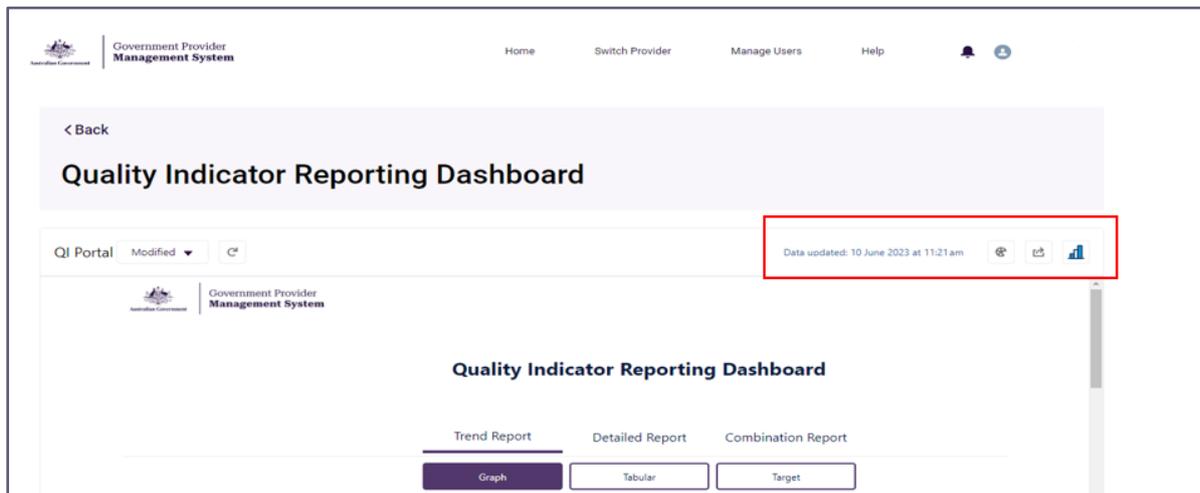
Please note:

In the Reporting Dashboard, scroll down to view data for all quality indicators in your selected format and display.

7.3 Functionality of the Quality Indicator Reporting Dashboard

You can download, share reports and access the Analytics Studio from the Quality Indicator Reporting Dashboard.

An explanation of the icons available are below.



High Contrast

The colour palette icon is the high contrast button which is an accessibility feature allowing users of all abilities to view the dashboard more effectively.

Please note:

To support accessibility, adjust the colour palate of your reports using the High Contrast icon.



Share

The share button allows you to download and share the reports you are viewing.

This can be used for the entire dashboard report or for singular reports.

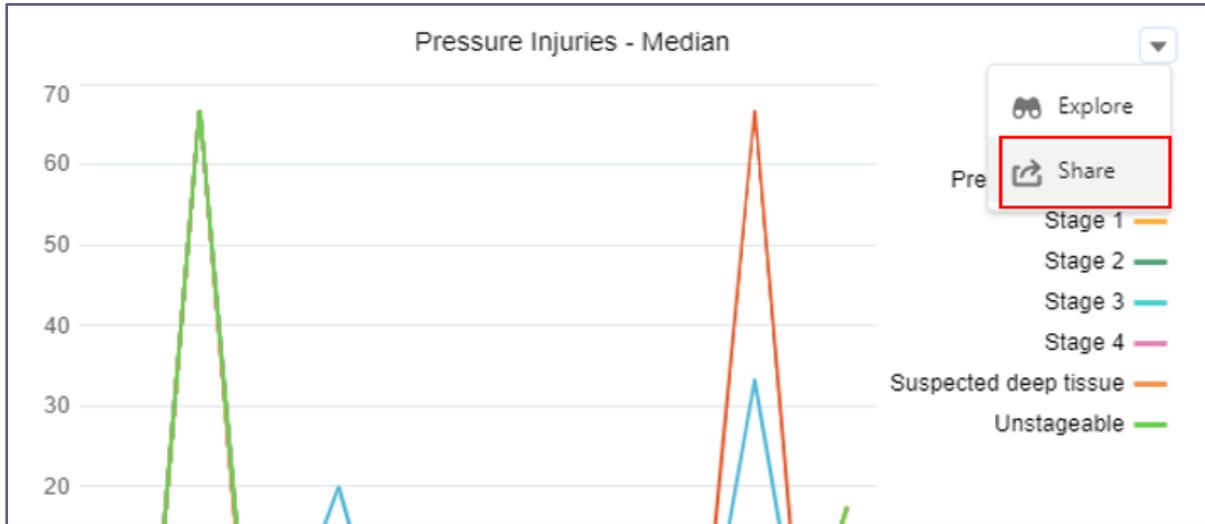
The entire dashboard report can be downloaded to view and share as an image. This image reflects the dashboard wide view found on the home screen of the Quality Indicators Reporting Dashboard.

7.3.1 Sharing the entire dashboard report

1. Select the **Share** button in the top right hand corner (shown above).
2. A pop-up will appear displaying an image preview of the report.
3. Select **download** button in the top right hand corner.
4. Select **download as image** to view the .PNG file to save locally.

7.3.2 Sharing a singular report graph or table

1. Hover your mouse over the graph you want to export.
2. Click on the small arrow that appears on the right-hand side of the graph.
3. Select the **Share** button.



4. Select your preferred file type. A preview of the file will appear and will be automatically downloaded on your local device.

The available file types are:

- .PNG - Image file
- .XML - Excel format
- .CSV - Text-file structured data format.

DOWNLOAD

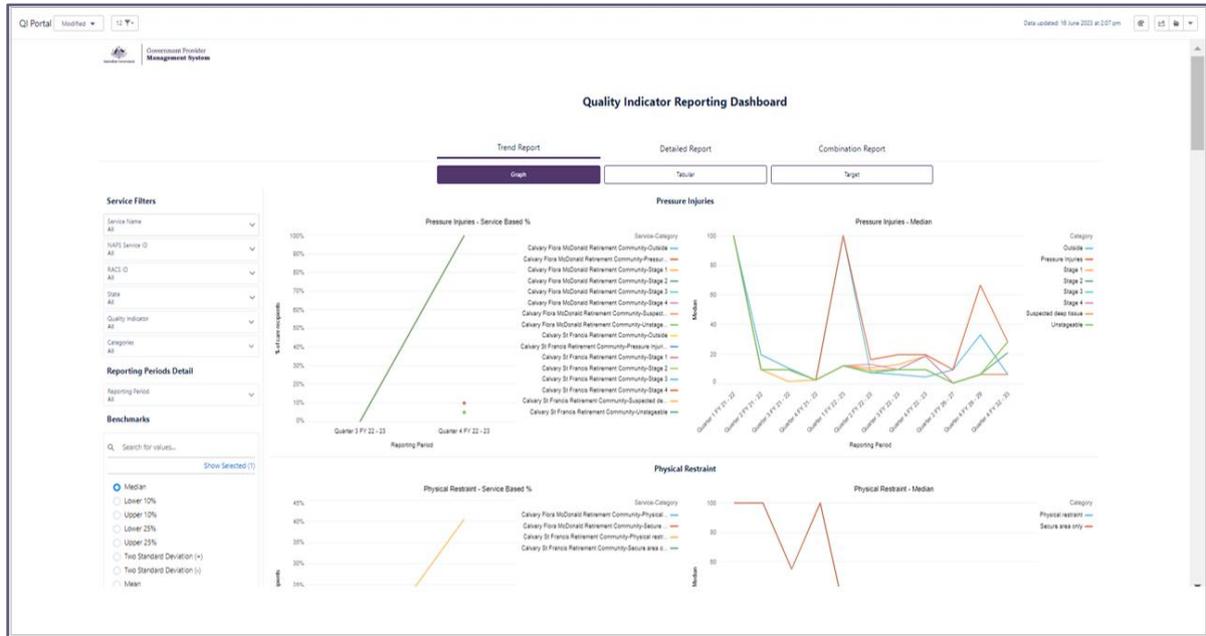
Choose a method of downloading this asset:

- DOWNLOAD AS IMAGE**
- DOWNLOAD IN EXCEL FORMAT**
- DOWNLOAD IN CSV FORMAT**

Analytics Studio

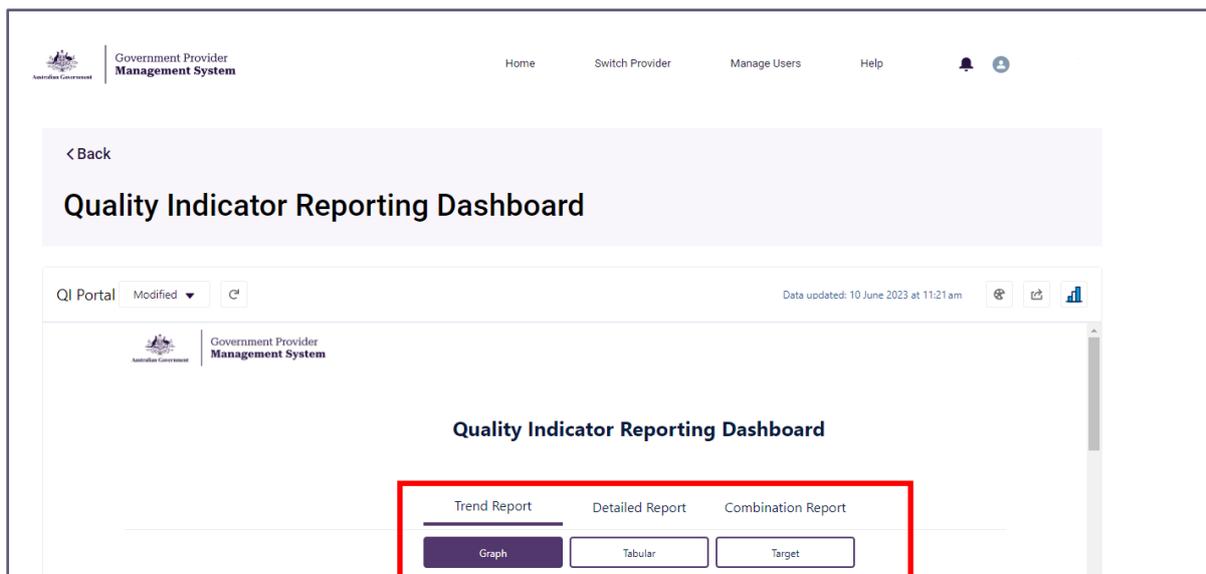
The **Analytics Studio button** in the top right hand corner allows you to display data and navigate reports using the analytics studio function.

It has the same functionality as the Quality Indicator Reporting Dashboard but it opens a new page to better display the data providing a user friendly layout.



7.4 Navigating the Quality Indicator Reporting Dashboard

From the Quality Indicators Reporting Dashboard, select your preferred reporting type and display.



This should automatically generate a report in your selected format and display.

7.4.1 Using Filters

Filters are found on the left-hand side of the Quality Indicator Reporting Dashboard. These will allow you to refine your reports to support further analysis of your quality indicator data.

The **Quality Indicator Reporting Dashboard** has four types of filters.

1. **Service Filters:** Allows you to filter your reports by **Service Name**, **NAPS Service ID**, **RACS ID**, **State**, **Quality Indicator** and **Categories** of the specific fields within the selected quality indicator.

Service Filters

- Service Name
All
- NAPS Service ID
All
- RACS ID
All
- State
All
- Quality Indicator
All
- Categories
All

2. **Reporting Periods Detail:** Allows you to filter your reports by quarterly reporting periods.

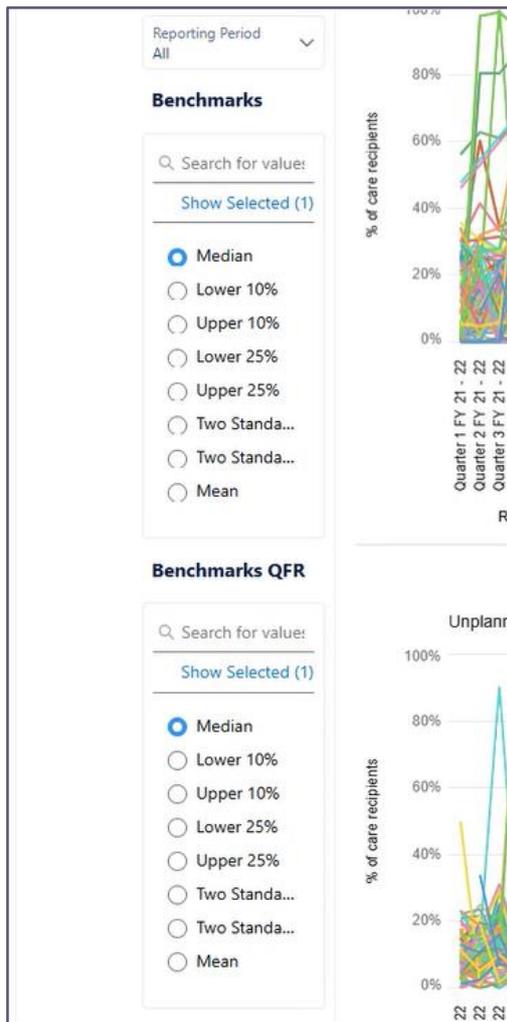
Service Filters

- Service Name
All
- NAPS Service ID
All
- RACS ID
All
- State
All
- Quality Indicator
All
- Categories
All

Reporting Periods Detail

- Reporting Period
All

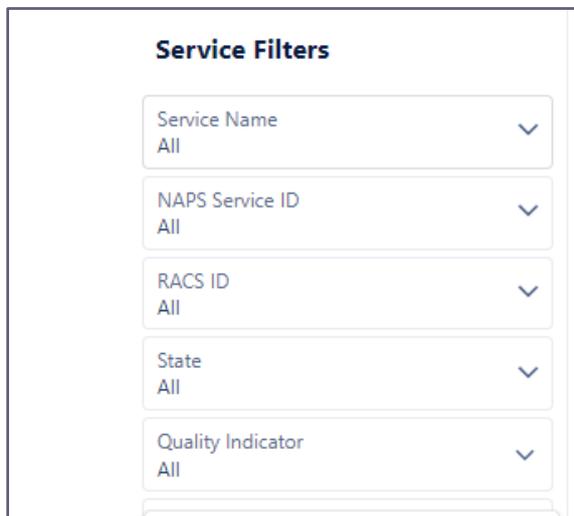
3. Benchmarks: Allows you to compare your quality indicator data against aggregated national results.



These filters have single and multiple section options.

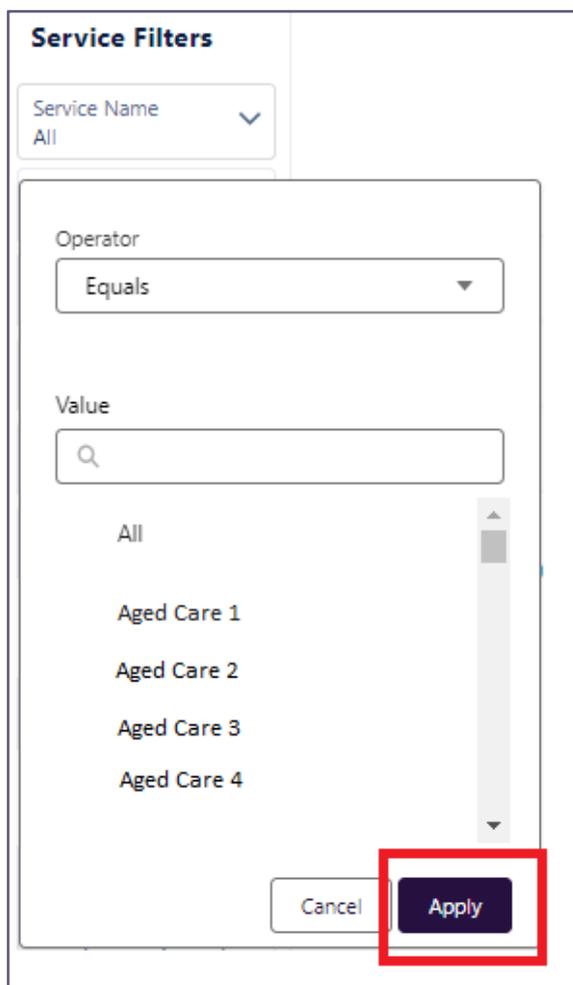
Single-select filters: These filters allow you to select a specific value / item (for example, filtering by specific quality indicators) To use these filters:

1. Click on the relevant category you wish to filter by.



The screenshot shows a panel titled "Service Filters" with five dropdown menus. Each menu has a label and a current selection of "All". The labels are "Service Name", "NAPS Service ID", "RACS ID", "State", and "Quality Indicator".

2. Select the preferred option in the drop down list.
3. Click **Apply** to update your report with the required filters applied.



The screenshot shows the "Service Filters" panel with the "Quality Indicator" dropdown menu open. The menu lists the following options: "All", "Aged Care 1", "Aged Care 2", "Aged Care 3", and "Aged Care 4". Below the menu are two buttons: "Cancel" and "Apply". The "Apply" button is highlighted with a red rectangular box.

Multi-select filters: These filters allow you to select multiple values or items (for example, filtering by service sizes). To use this filter:

1. Select the relevant category you wish to filter by.
2. Select the **Operator** drop down menu.
3. Select whether the data you require needs to **Equal, Does Not Equal, Contains, Is Null, Is Not Null** the fields within the filter.

State
All

Region
All

MMM
All

Service Size
All

Operator
Equals

- ✓ Equals
- Does Not Equal
- Contains
- Is Null
- Is Not Null

Medium

Small

Cancel Apply

4. Select or search the value field.
5. Select the **Show Selected** blue text and to return, select **Show all**.
6. Select **Apply** to update your report with the required filters applied.

Operator
Equals

Value [Show Selected \(2\)](#)

Search icon

All

- ✓ Large
- ✓ Medium

Small

Cancel Apply