



Australian Government

Department of Health, Disability and Ageing

QI Program Reporting via GPMS – Additional Guidance



1. GPMS Troubleshooting

I am having trouble with dates when using the bulk upload function.

The formula for dates does not allow leading zeros for either day or month. For example, for 1 January 2025, you must reflect the date as 1/1/2025 and not 01/01/2025.

In the data recording template, the various data I am inputting into Table 2 is not totalling correctly in Table 1.

Please ensure all data fields are entered, including a name for each care recipient (noting names will not be provided to or received by the Department and are for internal collection purposes only). The data recording template is formulated to only calculate data totals once all fields have a value added.

My bulk upload is not working or is giving me errors for a few of my services.

Please ensure you are using the correct NAPS service ID when completing the file upload template for your bulk upload.

My bulk upload is not working but my data is correct and complete.

There is a character limit of 1,000 characters in the 'comments' sections. Please note the character limit includes spaces and new lines.

My data relating to total care recipients offered to complete a survey does not look correct in the Quality of Life and Consumer Experience tabs of the data recording template.

After inputting all care recipient names and their information in Table 2, the **Total number of care recipients offered a consumer experience assessment** listed in Table 1 will only equal the total number of care recipients that completed the survey via one of the three collection methods. This field will not include care recipients that were offered the survey but chose not to complete it or were absent from the service on the date of collection. For example, if you have 22 care recipients who were offered a survey, 3 did not provide consent and 6 were absent, the 'Total number of care recipients offered a consumer experience assessment through self-completion, interviewer facilitated completion or proxy-completion' will be equal to 13.

I am having issues submitting my data through GPMS.

Please contact the My Aged Care Service Provider and Assessor helpline on 1800 836 799. We encourage you to raise your concerns as early as possible as there is no provision within the legislation to extend the QI submission due date.

2. Comments reporting

What information should I include in comments?

Providers may include comments with their quality indicator program data. It is important that information included in the comments field is meaningful.

Effective comments:

- include information that helps interpret the reported data, such as care recipients:
 - refusing to use recommended strategies or aids for falls prevention
 - refusing to receive recommended services delivered by an allied health care professional
 - who are recommended to receive an allied health service in a reporting quarter and the service is scheduled to be received in the following reporting quarter
 - who have made informed choices about their care that may lead to risk, including refusal of assessments, and these are documented according to Dignity of Risk principles in care plans.
- are concise
- do not state null values (e.g. N/A, nil, no comment)
- do not include descriptions of information already provided in the quality indicator data, such as restating figures in the comments field
- do not include personal or identifiable information about care recipients or workers.

Note: A comments field for the allied health quality indicator will be available from 3 November 2025. In the meantime, any comments for allied health can be included in the workforce comments field.

Which comments are mandatory?

Comments are mandatory for the following 2 quality indicators when care recipients are excluded from reporting because they did not have the required quality indicator data collected:

- **unplanned weight loss** (both significant and consecutive) – where care recipients did not have weights recorded, e.g. previous, starting, middle and/or finishing weights
- **activities of daily living** – where care recipients did not have an assessment total score recorded for the previous quarter.

What information should I include in the mandatory comments?

Mandatory comments must explain why the data was not collected. Valid mandatory comments:

- concisely explain the reason for the absent record e.g. new admission
- quantify care recipients under each reason e.g. 15 new admissions
- address exclusions that are due to absent records.