



Australian Government

Department of Health, Disability and Ageing

Government Provider Management System

User Guide: Quality Indicators Application

National Aged Care Quality Indicator Program (QI Program) Manual

November 2025

Version 1.5

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

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1. Introduction

The Department of Health, Disability and Ageing 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 Quality Indicator Program (QI Program).

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

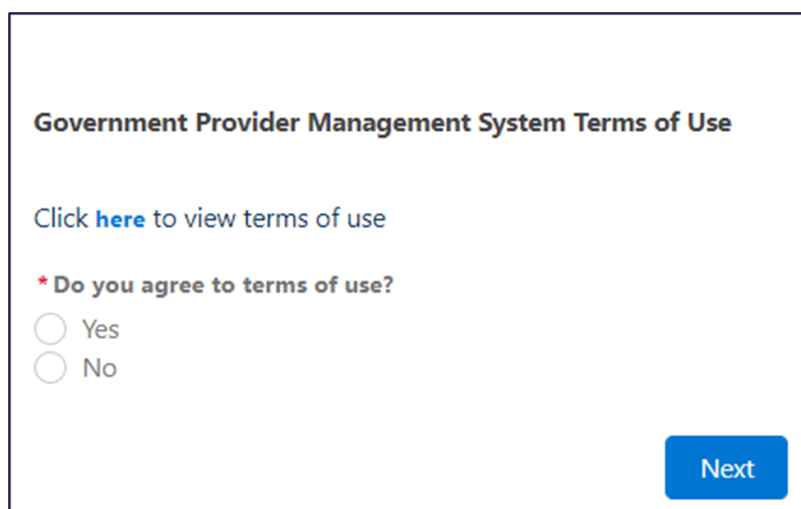
1.1 Purpose

This user guide has been designed to support registered providers (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, Disability and Ageing 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.

A screenshot of a web form titled "Government Provider Management System Terms of Use". The form contains a link "Click [here](#) to view terms of use", a required question "* Do you agree to terms of use?" with two radio button options: "Yes" and "No". A blue "Next" button is located at the bottom right of the form.

Government Provider Management System Terms of Use

Click [here](#) to view terms of use

*** Do you agree to terms of use?**

☐ Yes

☐ No

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](#).

From 3 November 2025 there will be two provider portals when logging in to GPMS. You will see options to report via the GPMS Approved Provider Portal and the GPMS Registered Provider Portal. Access the GPMS Approved Provider Portal for reporting and amending Quarter 1 2025-26 (July to September) QI Program reporting. Additionally, if any approved providers are operational in October 2025 but ceasing operation prior to 1 November 2025, they must use the Approved Provider Portal to report and amend Quarter 2 2025-26 (1-31 October 2025) QI Program reporting.

The GPMS Registered Provider Portal will be available from 3 November 2025 to commence reporting and amending QI Program data for Quarter 2 2025-26 (October to December) onwards.

GPMS Approved Provider Portal

Access this portal to view information about your Approved Provider entity, as it existed under the *Aged Care Act 1997*, up to 31 October 2025.

Here you can:

- View information about your organisation and personnel, as well as submit Approved Provider reporting:
 - Star Ratings
 - 24/7 Registered Nurse (RN) reports
 - Care Minutes Targets
 - Quality Indicator (QI) Program data
 - Provider Operations
 - Quarterly Financial Report (QFR) information
- Preview information before it is published for the next period:
 - Finance & Operations: Publication Preview
 - Star Ratings

[Log in to GPMS – Approved Provider](#)

GPMS Registered Provider Portal

Access this portal to view information about your Registered Provider entity, as it exists under the *Aged Care Act 2024*, from 3 November 2025.

Here you can:

- View and maintain the information about your organisation
- Submit Registered Provider reporting:
 - 24/7 Registered Nurse (RN) report
 - Quarterly Financial Report (QFR)
 - Quality Indicator (QI) Program data

As GPMS is enhanced, additional applications will be introduced through future updates.

[Log in to GPMS – Registered Provider](#)

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.

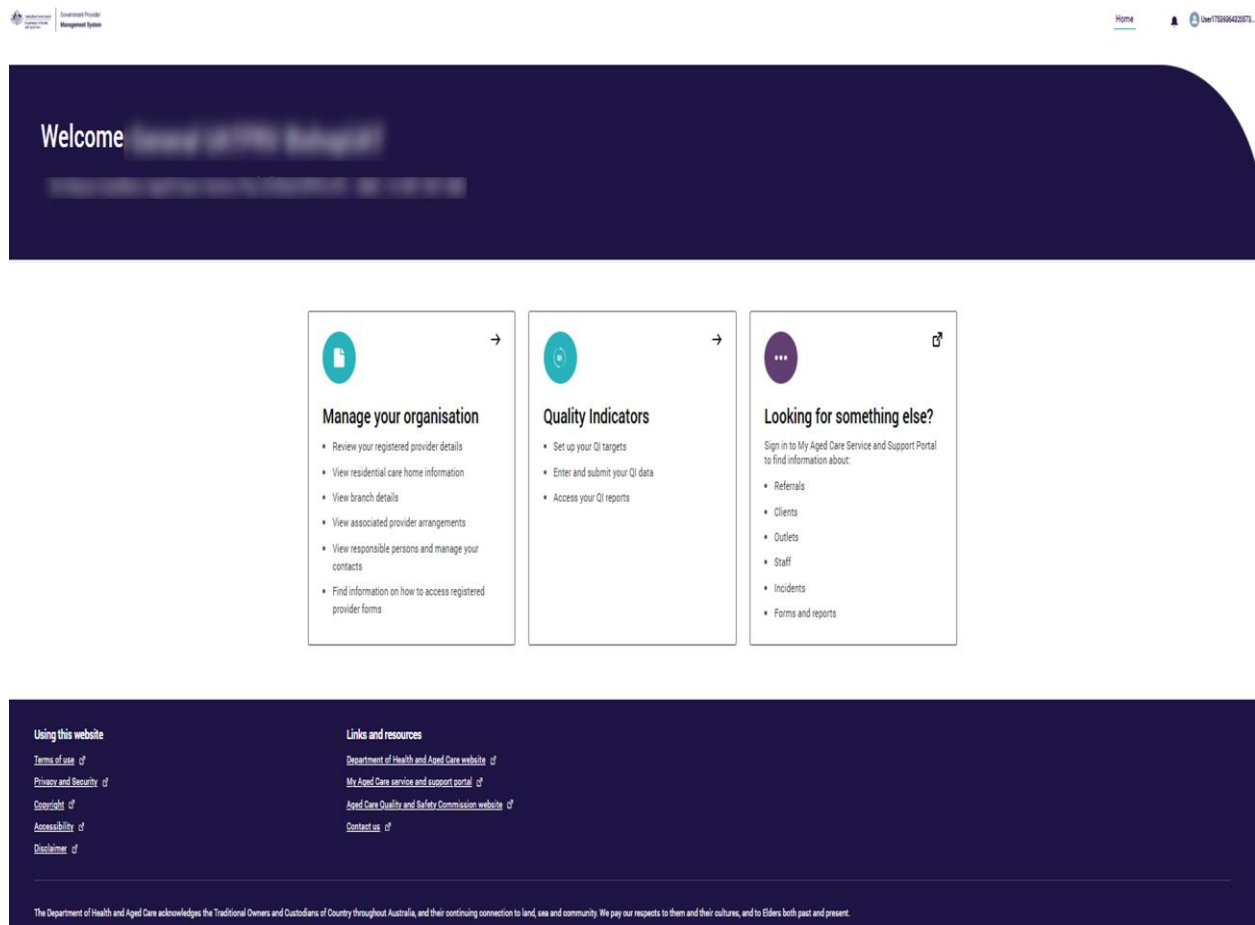
3. Accessing GPMS and the Quality Indicator Application

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, Continue, Amend and View buttons
- View Upload History 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.

[< Back](#)

Quality Indicator Data Entry & Submission

View Upload History

Upload File

Report due dates

Supporting Material

Reporting Dashboard

Quality Indicators must be submitted four times throughout the financial year. Submission dates will be legislated and for the 2025/26 financial year are as follows:

Q1: Due 21 October 2025
(reporting period 01 Jul 2025 - 30 Sep 2025)

Q2: Due 21 January 2026
(reporting period 01 Oct 2025 - 31 Dec 2025)

Q3: Due 21 April 2026
(reporting period 01 Jan 2026 - 31 Mar 2026)

Q4: Due 21 July 2026
(reporting period 01 Apr 2026 - 30 Jun 2026)

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 Quality Indicator Program Manual - Part A.](#)
- [National Aged Care Quality Indicator Program Manual - Part B.](#)
- [National Aged Care Quality Indicator Program FAQs.](#)
- [QI Program Quick Reference Guides.](#)
- [QI Program Interactive Modules.](#)
- [GPMS User Guide: Quality Indicators Application.](#)

 Report due dates ▲

 Supporting Material ▼

 **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.

- [National Aged Care Quality Indicator Program Manual – Part A](#) 

This manual is for Government subsidised registered providers of approved residential care homes and includes definitions of each quality indicator and how to assess, collect and submit Quality Indicator Program data across all 14 quality indicators.
- [National Aged Care Quality Indicator Program Manual – Part B](#) 

This manual is for Government subsidised registered providers of approved residential care homes and includes a range of tools and resources to support continuous quality improvement for each of the Quality Indicator Program quality indicators.
- [National Aged Care Quality Indicator Program FAQs](#) 

This document is for Government subsidised registered providers of approved residential care homes. The document details a range of frequently asked questions and answers, to support registered providers of approved residential care homes to understand and meet the reporting requirements of the Quality Indicator Program.
- [Quality Indicator Program Quick Reference Guides](#) 

These guides are for registered providers of approved residential care homes. The quick reference guides provide an overview of each of the quality indicators and include case studies as examples to support understanding of reporting requirements.
- [Quality Indicator Program Interactive Modules](#) 

These interactive modules are for registered providers of approved residential care homes. The modules support registered providers of approved residential care homes to understand the requirements of the Quality Indicator Program in an interactive and user-friendly manner. These modules also include a knowledge check to support understanding of the content.
- [Government Provider Management System – User Guide: Quality Indicators Application](#) 

This manual is a guide for Government subsidised registered providers of approved residential care homes and includes information to support providers to access and use the Quality Indicators application in the Government Provider Management System (GPMS) external portal. It also provides guidance to support registered providers of approved residential care homes to submit their Quality Indicator Program data and access Quality Indicator Program reports in GPMS.

4.3 Search and display filters

To find an approved residential care home (aged care home), enter the aged care home name or ID in the Search by service ID or Service name 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 an aged care home, refer to [Submission status](#).

Report due dates Supporting Material

View Upload History Upload File

Search by service ID or Service name

Period Ending

Status

Service ID	Service Name	Address	Period Ending	Due Date	Status	
			2025-06-30	2025-07-21	Not Submitted	
			2025-09-30	2025-10-21	In Progress	
			2025-06-30	2025-07-21	Not Submitted	
			2025-09-30	2025-10-21	In Progress	

1-4 of 4 records

Rows per page 10

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 the drop down function on the far right to:
 - 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.

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Quality Indicator Data Entry & Submission

[View Upload History](#)

[Upload File](#)

[Report due dates](#)

[Supporting Material](#)

[Reporting Dashboard](#)

Search by service ID or Service name			Period Ending	Status		
Search by service ID or Service name			All Periods	All Statuses		Clear filters Apply filters
Service ID	Service Name	Address	Period Ending	Due Date	Status	
			2025-06-30	2025-07-21	Not Submitted	▼
			2025-09-30	2025-10-21	In Progress	▼
			2025-06-30	2025-07-21	Not Submitted	▼
			2025-09-30	2025-10-21	In Progress	▼

1-4 of 4 records

1

Rows per page 10

Please note:

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

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

4.5 Submission status

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



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Quality Indicator Data Entry & Submission

[View Upload History](#)[Upload File](#)

[Report due dates](#) 

[Supporting Material](#) 

[Reporting Dashboard](#) 

Search by service ID or Service name

Period Ending

All Periods

Status

All Statuses

[Clear filters](#)

[Apply filters](#)

Service ID	Service Name ↑	Address	Period Ending	Due Date	Status	
			2025-06-30	2025-07-21	Not Submitted	
			2025-09-30	2025-10-21	In Progress	
			2025-06-30	2025-07-21	Not Submitted	
			2025-09-30	2025-10-21	In Progress	

1-4 of 4 records

1

Rows per page

10*

Submission statuses are explained in the table below.

Status	Definition
Not Started	No quality indicator data has been entered or saved for the reporting period.
In Progress	Quality indicator data has been entered and has not been submitted for the reporting period.
Submitted	Quality indicator data has been submitted for the reporting period.
Submitted (Updated)	Quality indicator data has been submitted on time and updates have made after the submission due date for the reporting period.
Not Submitted	Quality indicator data has not been submitted, and the reporting period due date has passed.
Late Submission	Quality indicator data was submitted after the reporting period due date. Note: Amendments to a late submission will remain as a late submission following the update.
Offline	Aged care home has been offline for the whole reporting period 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 reporting period, as detailed in the screenshot below.

The data for the previous reporting period can be amended.

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



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Management System

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Quality Indicator Data Entry & Submission

[View Upload History](#) [Upload File](#)

 Report due dates  Supporting Material

[Reporting Dashboard](#)

Search by service ID or Service name

Period Ending

All Periods



Status

All Statuses



[Clear filters](#) [Apply filters](#)

Service ID	Service Name ↑	Address	Period Ending	Due Date	Status	
			2025-06-30	2025-07-21	Not Submitted	
			2025-09-30	2025-10-21	In Progress	
			2025-06-30	2025-07-21	Not Submitted	
			2025-09-30	2025-10-21	In Progress	

1-4 of 8 records



1



Rows per page

10

Please note:

The data for the enrolled nursing, lifestyle officer and allied health care minutes data points will be pulled from the 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 – Part A](#).

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

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).

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Reporting on: Quarter 1 FY 25 - 26 (1 July 2025 - 30 September 2025)

Reporting period due date: 21 October 2025 Status: In Progress

Save Close

Last updated by

Reports

- 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

Set up QI Target/s

Fields marked with an * are mandatory

Pressure injuries targets

Number of individuals that have one or more pressure injuries

Number of individuals that have pressure injuries reported against:

Stage 1 Pressure Injury

Stage 2 Pressure Injury

Stage 3 Pressure Injury

Stage 4 Pressure Injury

Unstageable Pressure Injury

Suspected Deep Tissue Injury

5.1 Banner

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

The screenshot shows the top banner of the GPMS application. On the left, it features the Australian Government Department of Health and Aged Care logo, followed by the text 'Government Provider Management System'. On the right, there are links for 'Home', a notification bell, and a user profile icon labeled 'User1753...'. Below this, a light blue banner contains a '< Back' link, the text 'Reporting on: Quarter 1 FY 25 - 26 (1 July 2025 - 30 September 2025)', a blurred service ID field, and the text 'Reporting period due date: 21 October 2025 Status: In Progress'. At the bottom right of the banner are 'Save' and 'Close' buttons.

It indicates the name of the aged care home (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.

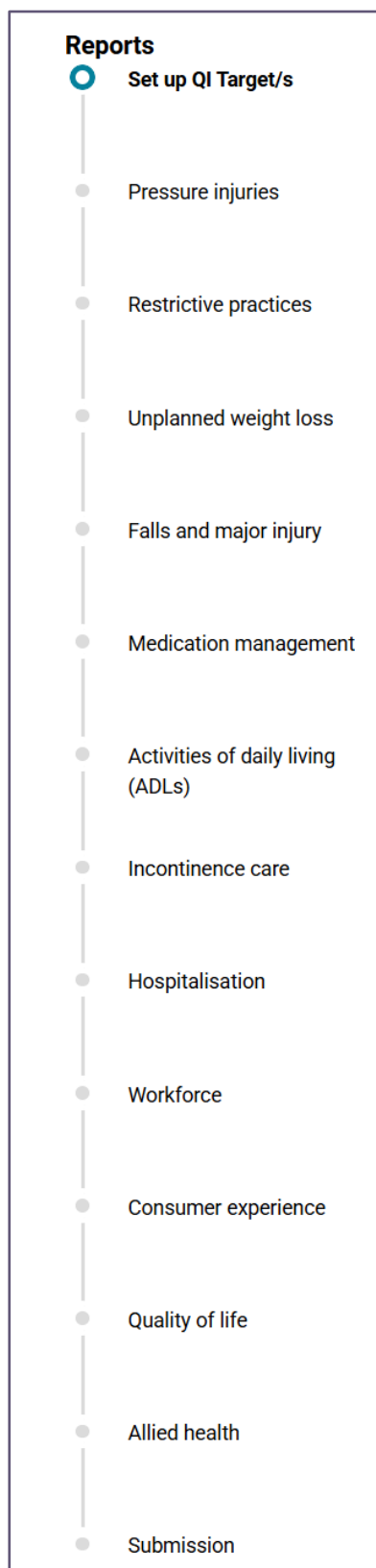
5.2 Data entry stepper

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 access the Submit button in 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
	Green circle with white tick confirms the section is complete.
	Blue circle with white center 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 Sections are incomplete the Submit button will not be accessible.

Once all required data forms are complete the **Submit** button will activate on the Submission step.

5.3 Previous button

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



5.4 Check Complete Data button

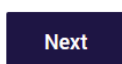
The **Check Complete Data** button applies the validations built into each data entry form against your quality indicator data.

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.



5.6 Setting quality indicator targets

After selecting the **Start** button in the Quality Indicator Data Entry & Submission home page, the Set up QI Target/s page will appear, where you can enter aspirational targets for an aged care home.

Quality Indicator Data Entry & Submission

Report due dates Supporting Material

Reporting Dashboard

Search by service ID or Service name

Period Ending: All Periods Status: All Statuses

Clear filters Apply filters

Service ID	Service Name	Address	Period Ending	Due Date	Status
			2025-06-30	2025-07-21	Not Submitted
			2025-09-30	2025-10-21	In Progress
			2025-06-30	2025-07-21	Not Submitted
			2025-09-30	2025-10-21	In Progress

1 of 4 records

Rows per page: 10

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.

< Back

Reporting on: Quarter 1 FY 25 - 26 (1 July 2025 - 30 September 2025)

Reporting period due date: 21 October 2025 Status: In Progress

💾 Save

✕ Close

Last updated by

Reports

0

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

Set up QI Target/s

Fields marked with an * are mandatory

Pressure injuries targets

Number of individuals that have one or more pressure injuries

Number of individuals that have pressure injuries reported against:

Stage 1 Pressure Injury

Stage 2 Pressure Injury

Stage 3 Pressure Injury

Stage 4 Pressure Injury

Unstageable Pressure Injury

Suspected Deep Tissue Injury

5.7 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.

< Back

Reporting on: Quarter 1 FY 25 - 26 (1 July 2025 - 30 September 2025)

Reporting period due date: 21 October 2025 Status: In Progress

Save

X Close

Last updated by

Reports

0

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

Set up QI Target/s

Fields marked with an * are mandatory

Pressure injuries targets

Number of individuals that have one or more pressure injuries

Number of individuals that have pressure injuries reported against:

Stage 1 Pressure Injury

Stage 2 Pressure Injury

Stage 3 Pressure Injury

Stage 4 Pressure Injury

Unstageable Pressure Injury

Suspected Deep Tissue Injury

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 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.

5.8 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.	*Number of individuals t  This is required
<i>Number cannot be higher than your total number of individuals 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 individuals assessed.	Error messages • Number of individuals that experienced one or more falls during the reporting period: Number of individuals reporting period cannot be higher than the total number of individuals assessed. Enter quality indicator data for falls and major injury • Number of individuals that were assessed for falls and falls resulting in major injury 15 • Number of individuals that were excluded because of an absence from receiving funded aged care services 2 • Number of individuals that experienced one or more falls during the reporting period 30 Number of individuals that experienced one or more falls during the reporting period cannot be higher than the total number of individuals assessed Error messages • Number of individuals that experienced one or more falls during the reporting period: Number of individuals reporting period cannot be higher than the total number of individuals assessed. Enter quality indicator data for falls and major injury • Number of individuals that were assessed for falls and falls resulting in major injury 15 • Number of individuals that were excluded because of an absence from receiving funded aged care services 2 • Number of individuals that experienced one or more falls during the reporting period 30 Number of individuals that experienced one or more falls during the reporting period cannot be higher than the total number of individuals 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.	• Number of individuals that experienced one or more falls resulting in major injury during the reporting period 40 Number of individuals that experienced one or more falls resulting in major injury cannot be higher than the total number of individuals who experienced one or more falls during the reporting period • Number of individuals that experienced one or more falls resulting in major injury during the reporting period 40 Number of individuals that experienced one or more falls resulting in major injury cannot be higher than the total number of individuals who experienced one or more falls during the reporting period
<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.	*Number of individuals assessed for the use  Must be an integer between 0 - 999 (both inclusive).

<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 reporting period being reported on.	 Error messages - The collection date in the collection period: The collection date falls outside of the reporting period Enter quality indicator data for restrictive practices - The collection date in the collection period 01/10/2025 The collection date falls outside of the reporting period.
<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 individuals, as defined by the <i>Privacy Act 1988</i>.	Comments  TestTestTestTestTestTe Text value cannot exceed 1000 characters

5.9 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.

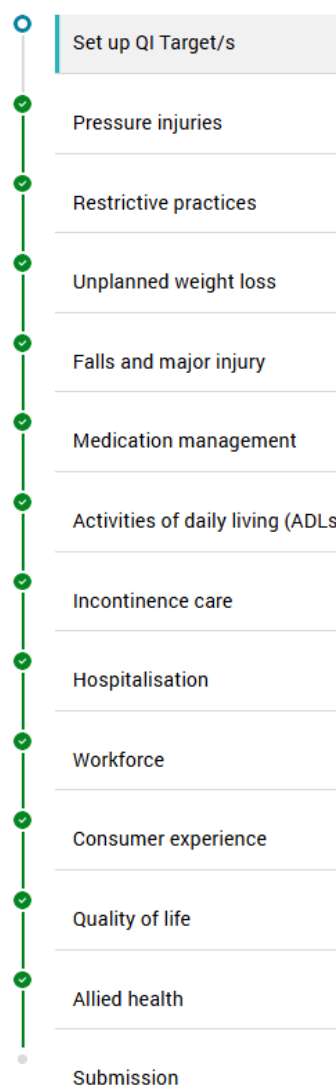
In the left-hand data entry stepper, this is represented by green circle icons with ticks next to each quality indicator.

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.

Reports



5.10 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.

You are submitting data for **Submitted Care Provider**

By submitting quality indicators data you:

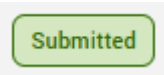
- Confirm that you have collected, and are reporting, the quality indicator data in accordance with National Aged Care Quality Indicator Program Manual and all applicable laws, in accordance with the Aged Care Act 2024.
- Confirm that any information you have provided does not contain any personal information as defined under Privacy Act 1988.

< Back

Submit >

5.11 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. The submission status will then update to reflect a green Submitted button.

A green rectangular button with rounded corners and a thin black border. The word "Submitted" is written in a bold, black, sans-serif font in the center of the button.

6. File upload/bulk data entry submission page

This section in the user guide provides introductory information on entering quality indicator data for multiple aged care homes 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 – 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 Downloading and completing the file upload template

1. To begin, click the Upload File button on the top-right of the screen to go to the Quality Indicator File Upload page.
2. Select the reporting period being reported against.
3. Select Download the QI Program file upload template.
4. Fill out the QI Program file upload template with quality indicator data for the relevant aged care homes for the given reporting period.

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.

Quality Indicator File Upload

Upload your quality indicator data

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

* Select the reporting period

Quarter 1 FY 25 - 26

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 period 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 Quality Indicator Program Manual and all applicable laws, in accordance with the Aged Care Act 2024.
- Confirm that any information you have provided does not contain any personal information as defined under Privacy Act 1988.

This Quality Indicator Program data will overwrite all previously entered data.

Cancel

Submit

6.2 Submitting the file upload template

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

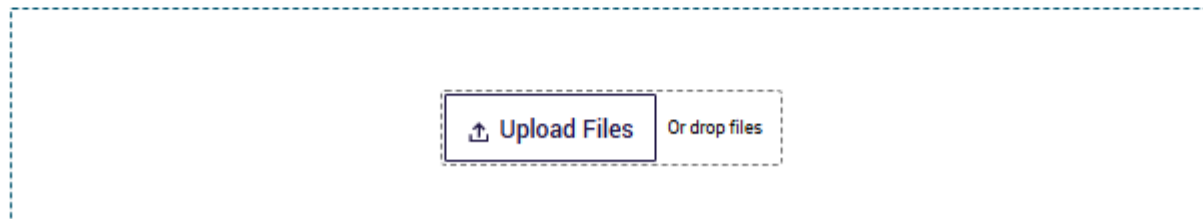
1. Select the reporting period using the dropdown option - only current and previous reporting periods are available.
2. Upload the file by pressing **Upload File** and selecting the relevant file, or by dragging and dropping the file into the box (example pictured below).

Upload the QI Program file upload template

Please upload the completed QI Program file upload template for the selected reporting period 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.



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.

6.3 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 teal 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)

6.4 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 corner.

Uploaded file status

✔ Your QI Program file upload was submitted successfully

We have received the quality indicator information for all Program Payment Entities in accordance with the Aged Care Act 2024 and the National Aged Care Quality Indicator Program Manual - Part A.

An email confirmation of this submission will be sent to your nominated email address.

Quarter 1 FY 25 - 26 (Current)

ID
Uploaded by
File name
Total number of rows
Number submitted
Number failed
Date submitted
Status

6.5 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.

Uploaded file status

 **Pending**

We are processing your QI Program file upload. This means the file has not yet been submitted and is still pending.

This may take up to 2 hours to view the finalised result of your submission. An email notification will be sent once the submission is finalised.

Quarter 4 FY 24 - 25 (Past)

ID
Uploaded by
File name
Total number of rows
Number submitted
Number failed
Date submitted
Status

6.6 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:

6.6.1 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.

Uploaded file status

Your QI Program file upload failed

An error has occurred and your QI Program file upload has not yet been submitted. The file might be corrupted or in the incorrect format. Try uploading the file again.

If the error persists, contact the My Aged Care Service Provider and Assessor Helpline on 1800 836 799, available Monday to Friday from 8am to 8pm and Saturday from 10am to 2pm.

Quarter 4 FY 24 - 25 (Past)

ID
Uploaded by
File name
Total number of rows
Number submitted
Number failed
Date submitted
Status

6.6.2 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](#).

Uploaded file status

Your QI Program file upload failed

We have found quality indicator information is either incomplete, incorrect or missing for the identified Program Payment Entities in the QI Program file upload. This may be due to the QI Program file upload containing invalid data, duplicate records or incorrect Program Payment Entity record numbers.

Review the error log by selecting the *Download error file* link next to the status before re-uploading the file.

Quarter 4 FY 24 - 25 (Past)

ID
Uploaded by
File name
Total number of rows
Number submitted
Number failed
Date submitted
Status

6.7 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](#).

Uploaded file status

Partial success

We have found quality indicator information is either incomplete, incorrect or missing for some Program Payment Entities. This may be due to the QI Program file upload containing invalid data, duplicate records or incorrect Program Payment Entity record numbers.

Review the error log by selecting the *Download error file* link next to the status before re-uploading the file.

Quarter 1 FY 25 - 26 (Current)

ID
Uploaded by
File name
Total number of rows
Number submitted
Number failed
Date submitted
Status

6.8 Error files

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

Date submitted	29/09/2025 Original File
Status	Failed Download error file

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



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.



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

6.9 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 relevant reporting period from the dropdown, 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

Upload your quality indicator data

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

* Select the reporting period

Quarter 1 FY 25 - 26

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 period 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 Quality Indicator Program Manual and all applicable laws, in accordance with the Aged Care Act 2024.
- Confirm that any information you have provided does not contain any personal information as defined under Privacy Act 1988.

This Quality Indicator Program data will overwrite all previously entered data.

Cancel

Submit

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

6.10 Viewing upload history

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



6.11 File upload history page

All files uploaded will be displayed on this page. Within this page, you can find a specific upload searching by **upload ID** or **file name**, **Reporting period** 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 teal 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.

Quality Indicator File Upload History

St Marys Gardens Aged Care Centre Pty Limited

Search by upload ID or file name

Q Search by upload ID or file name

All periods

All statuses

Clear filters

Apply filters

Upload ID	File name +	Reporting period	Submitted date	Total	Submitted	Failed	Status
		Quarter 4 FY 24 - 25	29/09/2025	1	0	1	Failed
		Quarter 4 FY 24 - 25	29/09/2025	1	0	1	Failed
		Quarter 4 FY 24 - 25	29/09/2025	1	0	1	Failed

1-3 of 3 records

1

Rows per page

7. Reporting Dashboard

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

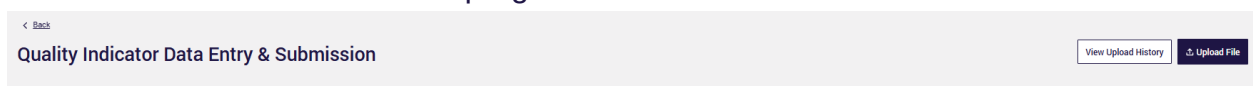
These functions are available to registered providers of approved residential care homes with access to the Quality Indicators Application. These functions are not available for organisations submitting quality indicator reporting on behalf of providers.

The included screenshots support navigating the functionality of the GPMS Registered Provider Portal for QI Program reporting for Quarter 2 2025-26 and onwards.

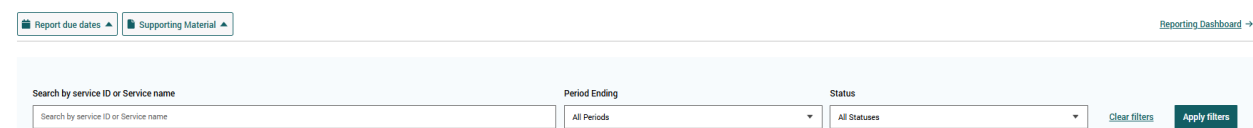
Dashboards for QI Program reporting for Quarter 1 2025-26 and prior will continue to be accessible via the GPMS Approved Provider Portal. This will continue to be the process to navigate across the two Portals where appropriate, until the GPMS Registered Provider Portal fully transitions to the new entity structure under the *Aged Care Act 2024*.

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.

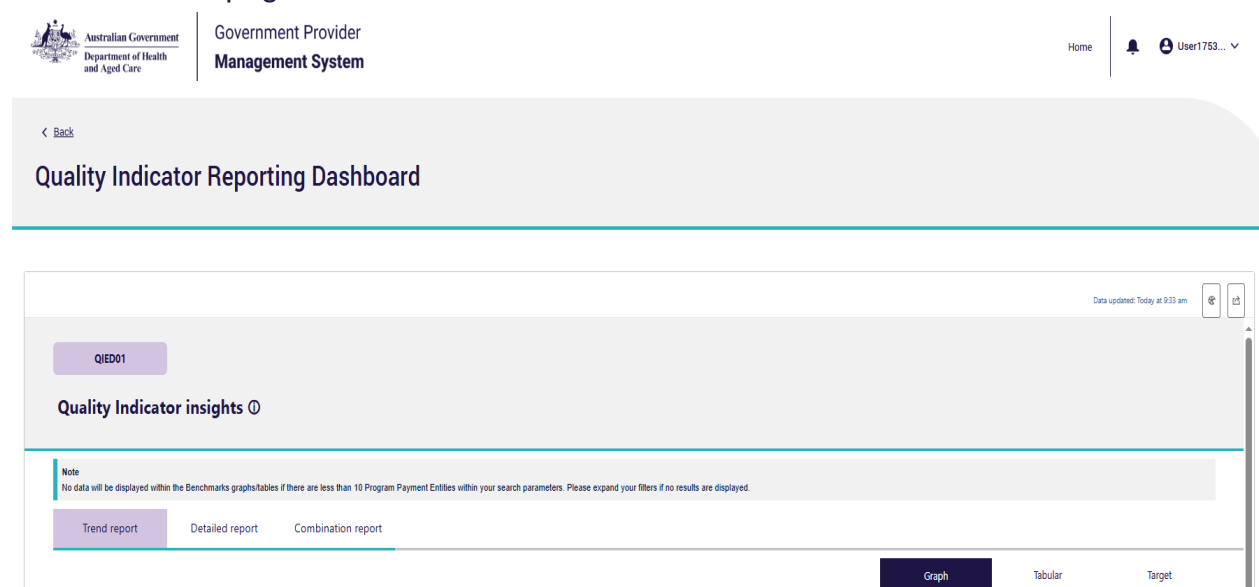


This screenshot shows the top section of the 'Quality Indicator Data Entry & Submission' page. It includes a '< Back' link on the left, the page title 'Quality Indicator Data Entry & Submission' in the center, and two buttons on the right: 'View Upload History' and 'Upload File'.



This screenshot shows the search and filter section of the 'Quality Indicator Data Entry & Submission' page. It features a 'Report due dates' button, a 'Supporting Material' button, and a 'Reporting Dashboard' link. Below these are search filters for 'Search by service ID or Service name', 'Period Ending' (set to 'All Periods'), and 'Status' (set to 'All Statuses'). There are also 'Clear filters' and 'Apply filters' buttons.

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



This screenshot shows the 'Quality Indicator Reporting Dashboard' page. At the top, there is a header with the Australian Government logo, 'Department of Health and Aged Care', 'Government Provider', and 'Management System'. On the right, there are links for 'Home', a notification bell, and a user profile 'User1753...'. Below the header is a '< Back' link and the page title 'Quality Indicator Reporting Dashboard'. The main content area shows a 'QIED01' tab, 'Quality Indicator insights', a note about data display, and three report options: 'Trend report', 'Detailed report', and 'Combination report'. At the bottom right, there are three tabs: 'Graph', 'Tabular', and 'Target'.

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).



Australian Government
Department of Health
and Aged Care

Government Provider
Management System

Home   User1753... 

< Back

Quality Indicator Reporting Dashboard

QIED01

Quality Indicator insights ⓘ

Note
No data will be displayed within the Benchmarks graphs/tables if there are less than 10 Program Payment Entities within your search parameters. Please expand your filters if no results are displayed.

Trend report

Detailed report

Combination report

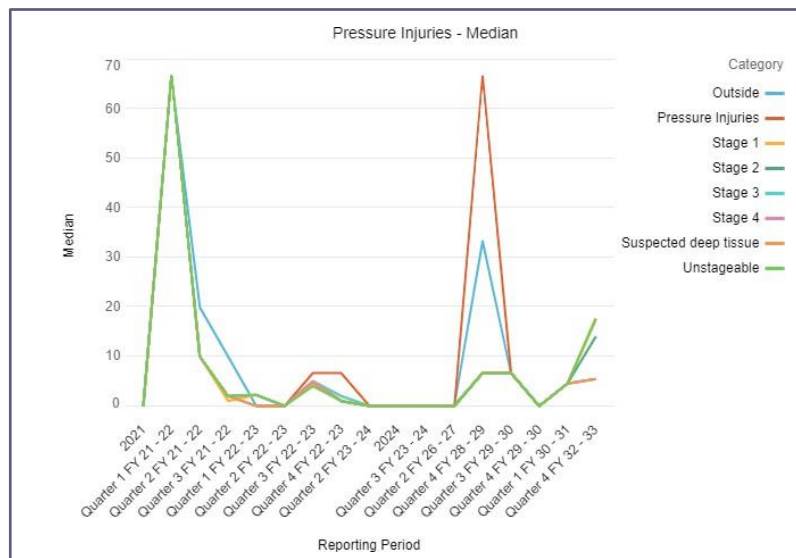
Graph

Tabular

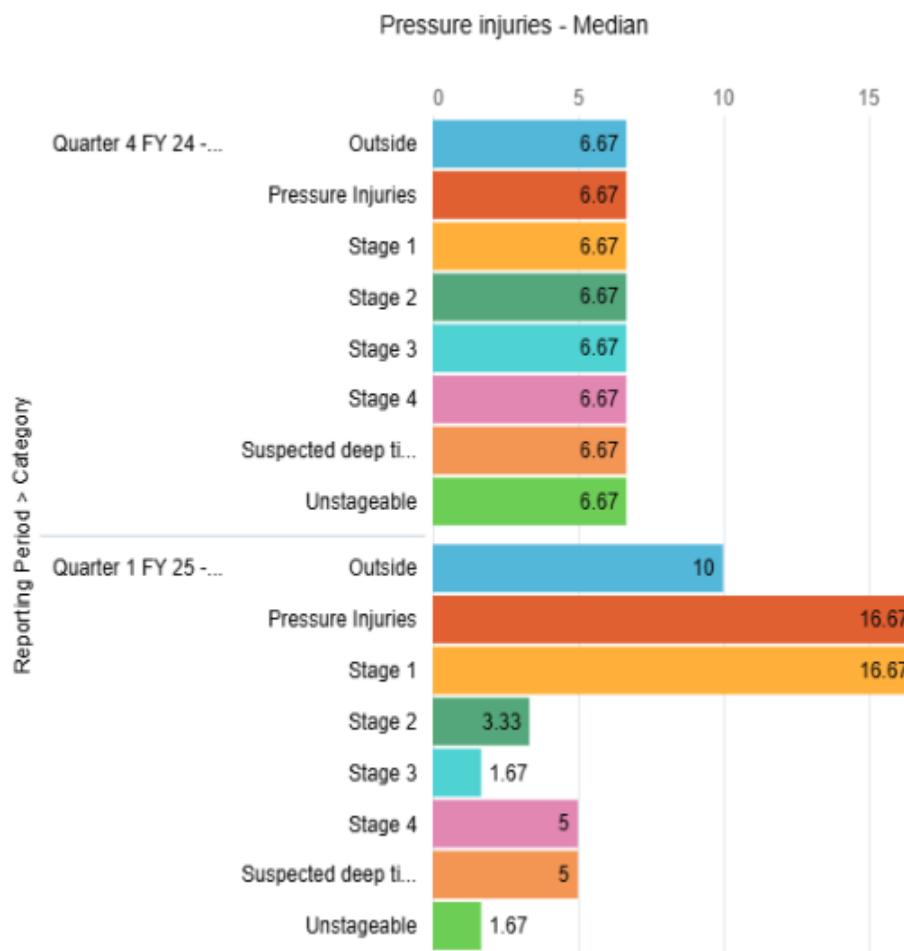
Target

7.2.1 Key reports

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

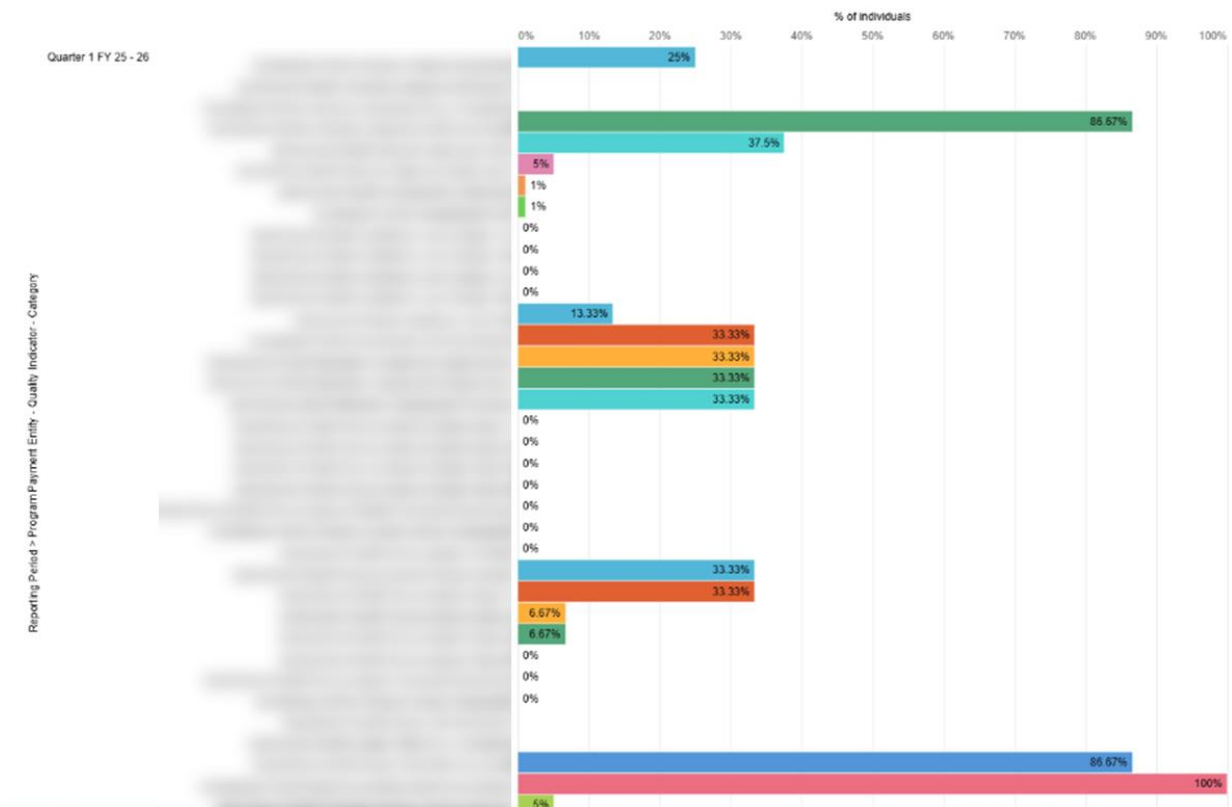


- Detailed Report:** Displays an in-depth view of quality indicator data from a service, focusing on individual outcomes rather than progress over time.



- 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.

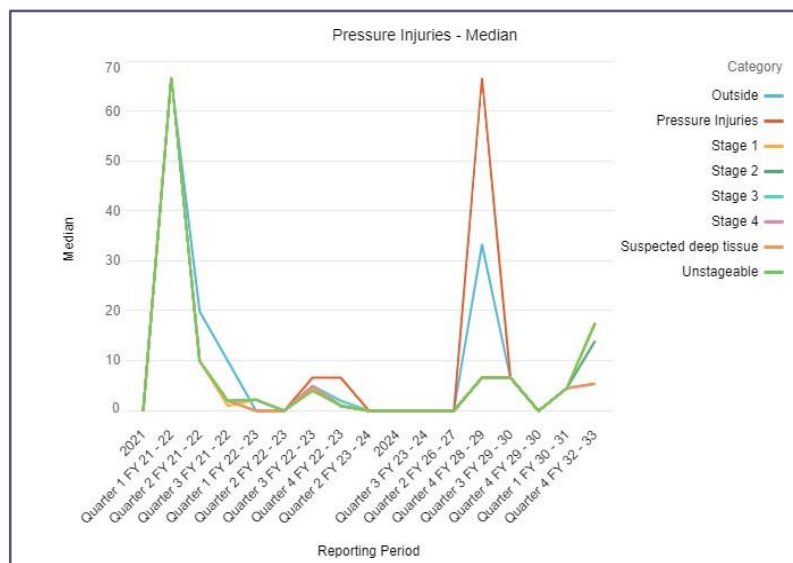
Combination detailed graph



This report will not have benchmark options.

7.2.2 Key displays

- 1. Graph:** Displays quality indicator data for an aged care home 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 an aged care home in a table.

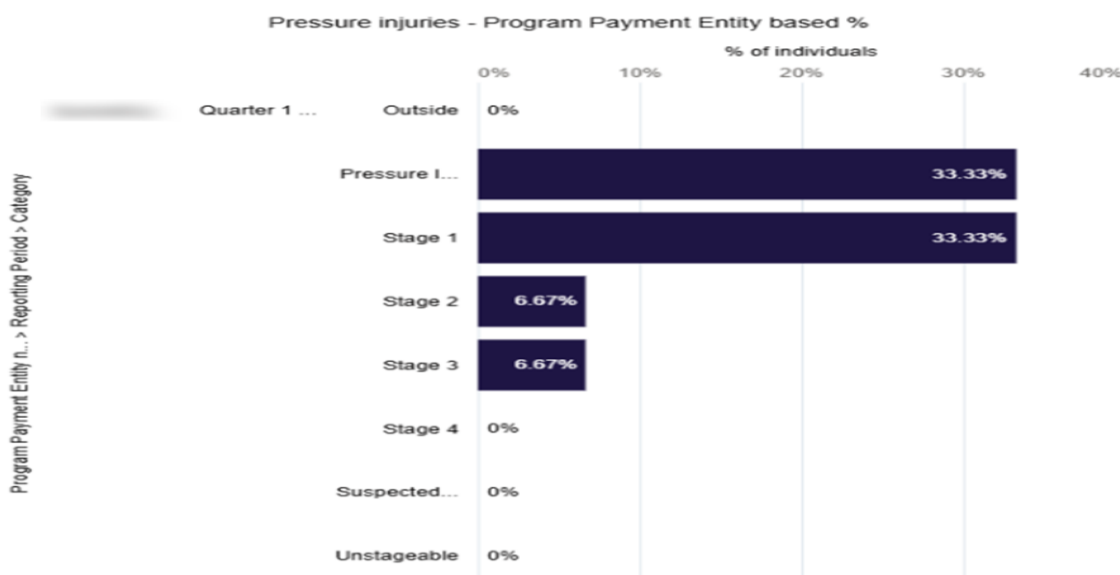
The Tabular view provides a comprehensive and structured representation of data, organised in a tabular format, making it easier for you to export your data.

Pressure injuries - Median

Quality Indicator	Category ↑	Reporting Period	Median
Pressure injuries	Outside	Quarter 4 FY 24 - 25	6.67
	Pressure Injuries	Quarter 4 FY 24 - 25	6.67
	Stage 1	Quarter 4 FY 24 - 25	6.67
	Stage 2	Quarter 4 FY 24 - 25	6.67
	Stage 3	Quarter 4 FY 24 - 25	6.67
	Stage 4	Quarter 4 FY 24 - 25	6.67
	Suspected deep tissue	Quarter 4 FY 24 - 25	6.67
	Unstageable	Quarter 4 FY 24 - 25	6.67
	Outside	Quarter 1 FY 25 - 26	10
	Pressure Injuries	Quarter 1 FY 25 - 26	16.67
	Stage 1	Quarter 1 FY 25 - 26	16.67
	Stage 2	Quarter 1 FY 25 - 26	3.33
	Stage 3	Quarter 1 FY 25 - 26	1.67

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

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

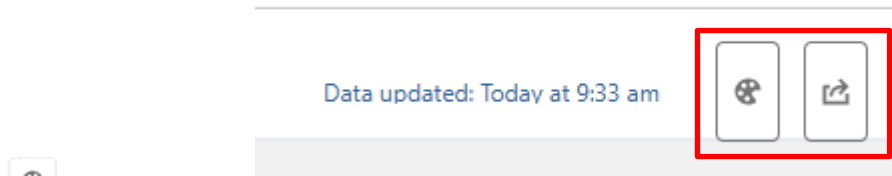


Please note:

In the QI 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 and share reports 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.

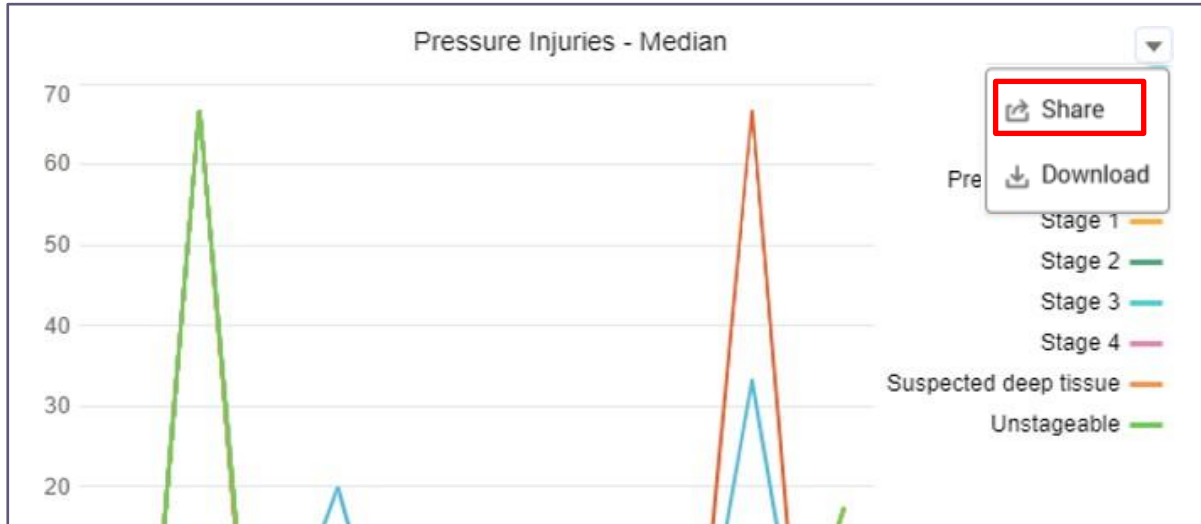
The entire dashboard report can be downloaded to view and share as an image. This image reflects the dashboard wide view found on the home screen of the Quality Indicators Reporting Dashboard.

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 left corner.
4. Select **download as image** to view the .PNG file to save locally.

7.3.2 Sharing a singular report graph or table

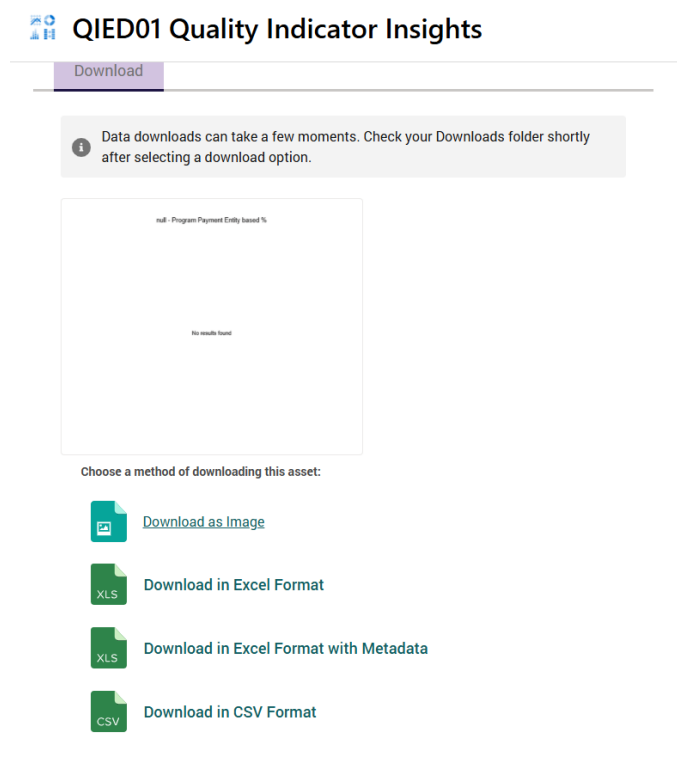
1. Hover your mouse over the graph you want to export.
2. Click on the small arrow that appears on the right-hand side of the graph.
3. Select the **Share** button.



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 – Download as Image
- .XLSX – Download in Excel Format
- .XML – Download in Excel Format with Metadata
- .CSV – Download in CSV Format.



7.4 Navigating the Quality Indicator Reporting Dashboard

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

The screenshot shows the 'Quality Indicator Reporting Dashboard'. At the top left is a '< Back' link. The main header is 'Quality Indicator Reporting Dashboard'. On the right, it says 'Data updated: Today at 1:42 pm' with a refresh icon and a language selector set to 'US'. Below this is a section for 'QIED01' with the title 'Quality Indicator insights'. A note states: 'No data will be displayed within the Benchmarks graphs/tables if there are less than 10 Program Payment Entities within your search parameters. Please expand your filters if no results are displayed.' There are three tabs: 'Trend report', 'Detailed report' (which is selected), and 'Combination report'. At the bottom right, there are three display format buttons: 'Graph', 'Tabular' (which is selected), and 'Target'.

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. **Program Payment Entity filters:** Allows you to filter your reports by **Program Payment Entity name**, **Payment ID**, **RACS ID**, **State**, and **Categories** of the specific fields within the selected quality indicator.

The screenshot shows the 'Program Payment Entity filters' section. It contains five filter boxes, each with a dropdown menu. The first box is 'Program Payment Entity name' with 'All' selected. The second box is 'Payment ID' with 'All' selected. The third box is 'RACS ID' with 'All' selected. The fourth box is 'State' with 'All' selected. The fifth box is 'Categories' with 'All' selected. Each box has a downward arrow icon on the right side.

2. **Reporting Period:** Allows you to filter your reports by reporting periods.

Reporting Period

Reporting Period
All

3. **Compare filters:** Allows you to compare your quality indicator data against sector median results. *Note: if the filters applied result in a comparison of less than 10 aged care homes, no data will appear.*

Compare filters

State
All

Region
All

MMM
All

Program Payment Entity size
All

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

Benchmarks

Q Search for values...

Show Selected (1)

☒ Median

☐ Lower 10%

☐ Upper 10%

☐ Lower 25%

☐ Upper 25%

☐ Two Standard Deviation (+)

☐ Two Standard Deviation (-)

☐ Mean

Benchmarks (QFR)

Q Search for values...

Show Selected (1)

☒ Median

☐ Lower 10%

☐ Upper 10%

☐ Lower 25%

☐ Upper 25%

☐ Two Standard Deviation (+)

☐ Two Standard Deviation (-)

☐ Mean