



Australian Government
Department of Social Services

The Data Exchange Protocols

for the Commonwealth Home Support Program (CHSP)

Effective from 1 July 2026



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1 Introduction

1.1 Purpose of this document

This document provides operational guidance to users of the Data Exchange across the range of Commonwealth Home Support Program (CHSP) grant funded services, which are grant managed by the Community Grants Hub, and hosted by the Department of Social Services (DSS).

The Data Exchange Protocols for CHSP (the CHSP protocols) should be read in conjunction with the:

- Data Exchange Framework which outlines the principles and vision underpinning the Data Exchange
- [Program Specific Guidance for organisations](#), which outline specific reporting requirements for the program
- organisation's CHSP funding agreement with the Department of Health, Disability and Ageing (DHDA)
- task cards and e-Learning modules for users of the Data Exchange web-based portal
- Data Exchange technical specifications for all users submitting their data through system-to-system transfer or bulk upload from their own case management software.

The protocols are not intended to prescribe how organisations should run their business or collect data; they are intended to provide practical information for managers and front-line staff to help them integrate the Data Exchange data definitions and requirements into existing service and administrative practices. The protocols are periodically updated to provide current and accurate guidance.

1.2 The Data Exchange Framework

The Data Exchange Framework represents the program performance reporting approach for client facing funding agreements managed by the Community Grants Hub hosted by the Department of Social Services (DSS).

Collecting and reporting data about clients and services helps funding agencies and organisations to improve the well-being of Australians accessing our services.

- Data provides a comprehensive picture of the programs we deliver and helps us measure the impact we are making in Australian communities over time.
- Funding agencies use these insights to shape programs, ensuring they are resourced to better support vulnerable Australians and respond to emerging needs effectively.
- High-quality data helps funding agencies and organisations maintain a clear vision of the changes needed to achieve and track progress toward those goals.
- It enables funding agencies and organisations to identify what is working, address what is not, and foster accountability and collaboration.

The requirements of the Data Exchange are divided into two parts: a small set of mandatory priority requirements that all organisations report, and an extended data set, known as the partnership approach. The collection of the Standard Client/Community Outcome Reporting (SCORE), which is a component of the partnership approach, is not required for clients receiving services under the CHSP.

This approach to reporting is streamlined, automated and includes a shift in focus of performance measurement from 'outputs' to more meaningful information about service delivery 'outcomes' through:

- **Streamlined reporting arrangements**—A standard client level data record (the priority requirements) applies across the broad suite of government funded client-based programs.
- **Free access to a web-based portal**— Organisations can access a free IT system to manually input client data. This helps record clients, service and outcomes data that meet funding agreement

performance data requirements and allows organisations to confidentially manage their core client and case information.

- **Bulk uploading and system-to-system transfers**—The Data Exchange supports organisations who have a compatible case management software to transfer information directly from their own systems through bulk uploading and system-to-system transfers.
- **Promoting a partnership approach to reporting**—Organisations participating in the partnership approach share client outcomes data with their funding agency in exchange for relevant reports. These reports are outcomes focused and include a rich set of added information to help inform service delivery using program performance, client survey and government data.

Go to the [Data Exchange website](#) for more information about the Data Exchange's policy principles and program specific guidance.

2 Data Exchange organisation and user responsibilities

Organisations reporting into the Data Exchange are responsible for implementing appropriate controls and processes to:

- promote awareness of, and compliance with, the Data Exchange Protocols by users within the organisation; and
- obtain accurate, complete, unbiased and secure collection and recording of client, service delivery and outcome (where relevant) data in the Data Exchange.

Taking obligations under the Commonwealth *Privacy Act 1988* (the Privacy Act) into account, organisations and users must make best endeavours to ensure data entered in the Data Exchange is, to the best of their knowledge:

- **Accurate** and up to date – it is the user's responsibility to correct or delete any incorrect data where possible, as soon as practicable, after becoming aware of any issues.
- **Complete** – organisations should make best efforts to collect required data from clients and ensure all collected data is correctly entered into the Data Exchange
- **Unbiased** – data entered should be objective, factual and free from observer bias (e.g. not based on the assessor's personal opinion).
- **Secure** – client information should be protected from unauthorised use or disclosure, in accordance with [Chapter 5](#) of the protocols.

Processes and controls implemented by organisations to ensure users meet their Data Exchange responsibilities may include (but are not limited to):

- Staff who use Data Exchange have read and agreed to adhere to the Data Exchange Protocols
- Staff who use Data Exchange have completed relevant online Data Exchange training.
- Data entry and access rights to Data Exchange (and any third-party software product used to transfer data to Data Exchange) are periodically reviewed and remain appropriate.
- Processes (e.g. written guidance to support how data is collected and recorded) have been established to ensure mandatory Data Exchange data is collected and accurately recorded (in any third-party software product or directly into the Data Exchange web-based portal)
- Processes (e.g. written guidance to support how data is collected and recorded) have been established to ensure partnership approach data is accurate, complete and unbiased when recorded in Data Exchange
- Quality assurance processes have been established to confirm data transfers/uploads into Data Exchange are completed successfully (and any upload errors rectified)

- Any other processes and controls relevant to promoting compliance with the Data Exchange Protocols and data integrity.

CHSP funded organisations may be required, upon request by DSS or DHDA, to provide evidence of processes and controls used to meet their Data Exchange responsibilities. DSS or DHDA may request to visit organisations' premises to observe these processes in practice. Funded organisations are responsible for ensuring any delivery partners (such as subcontractors, community partners, consortium members or brokers) using the Data Exchange also meet their Data Exchange responsibilities. This includes ensuring that they are complying with any applicable legislation such as the Privacy Act.

3 Recording client level data

This section describes the important concepts and terminology associated with collecting and reporting client level data. It is important that managers and front-line staff understand these concepts because they underpin the framework of the Data Exchange.

3.1 Client level data

Client level data refers to data collected and reported on each individual client rather than as summary (aggregate) data. The Data Exchange is designed to capture individual client level data. While aggregate (unidentified) reporting is accommodated by the system, all CHSP client data **MUST** be collected and reported at the individual level.

The main advantages of client level data are the:

- flexibility to analyse and report administrative data in multiple formats for different audiences, without burdening organisations with multiple data requests.
- improved reliability of administrative data, as all organisations collect the same raw data records without the need to apply complex counting rules.
- improved usefulness of administrative data, due to the use of a Statistical Linkage Key (SLK) allowing for the matching of de-identified data records across funded activities.
- improved capacity for reporting data back to organisations, as the de-identified administrative data is held within a common data repository.

Organisations must use best efforts to request collection of client-level data from clients directly receiving services. The organisation must then report the responses received to the Data Exchange in accordance with sections 5.2 and 5.3.

Client level data provided through the Data Exchange is de-identified so that no identifiable client information is used by an organisation's funding agency, except where required under the *Commonwealth Aged Care Act 2024* (Aged Care Act).

Data Exchange staff work with organisations to ensure clear information is available to clients to affirm that only de-identified data is captured as part of program performance reporting and used for the purposes of policy development, grants program administration, research and evaluation.

Go to the [Data Exchange website](#) and Section 5 of this document for more information about privacy. Program specific guidance on clients, support people and other client level data items is available on the [Department of Health, Disability and Ageing website](#).

3.2 Who is a client?

The Data Exchange uses a specific definition of 'client' to ensure comparable information is reported for the number of individuals that have received a service within a reporting period. This means that 'apples with apples' comparisons are possible within and across activities.

For the purposes of recording a 'client' record in the Data Exchange, a client is defined as:

An individual who receives a service as part of a funded activity that is expected to lead to a measurable outcome.

This definition includes a number of components that must be met in order to count a person as a client. These components are program and context specific and involve determining whether the individual in their own right is expected to achieve an outcome that is linked to a program specific objective.

Many different types of outcomes are achieved as part of service delivery. Outcomes are not limited to high-level, life changing events. Client outcomes can also be as simple as learning a new skill, receiving a service that is required, or gaining increased knowledge about other services that are appropriate and available.

3.3 Who is a support person?

At times, there may be other people present at a service who do not meet the definition of a client. This could include carers of clients, family members or children who attend to support the client. Paid employees of an organisation are not counted as support people. The support person is not expected to achieve a direct outcome through this service interaction and is *not* counted as a client.

There are no requirements to record the details of support people in the Data Exchange for CHSP, however if an organisation wants, they can create an individual record for these people and record them as support people at the session level.

3.4 Services for couples, families and households

The Data Exchange captures information about individual clients, however there are some funded activities where multiple individuals are assisted as part of the same 'case', 'family' or 'group'. In these instances, a client record should be created for each individual client and grouped together using a 'case' record.

Table 1. Example of a client and support person under the CHSP

Activity/Service Context	Who is the client?
A couple attends a Social Support Group activity run by the local senior citizen's club. Both persons are eligible to receive services under CHSP.	Both people in the couple are considered clients, as they are both receiving the service, benefit from that service, and meet the definition of a 'client' as per the program activity guidelines. Two client records should be created and used within the Data Exchange.
A person accesses CHSP transport services to attend a doctor's appointment and their carer travels in the vehicle as well, so they can assist the person during the appointment.	The person is counted as the client as they have received the service and will achieve an outcome. The carer is not recorded as a client as no measurable outcome is achieved on this occasion. The carer could be recorded as a support person; however, this is not mandatory.

3.5 Group session

A group session means a session where services are delivered directly to three or more clients who attend together. A measurable outcome is expected to be achieved for each of those clients.

A group session can be made up of a family group, clients that are known to each other, or strangers. This definition does not count a support person or practitioner as a member of that group.

Examples of group sessions may include centre-based group activities, allied health exercise groups, group excursions, or organised activity groups (such as a woodworking group in a for purpose facility etc).

Organisations must use best efforts to request collection of client-level data from clients attending group sessions and record data collected in the Data Exchange in accordance with section 5.2 and 5.3.

3.6 Recording unidentified clients

An unidentified client is a client for whom no client-level data is collected. Under the CHSP funding agreement, services can only be provided to clients who are assessed and approved for CHSP services. It is expected that all CHSP clients will provide client level data as their request for services must be matched with their approval record and/or referral codes from My Aged Care.

Where there has been a delay in entering a CHSP client's full details into the client record in DEX, a minimum record, sufficient to create the SLK, must be submitted by the due date for the relevant month of first service. The client record must be updated to provide all required details before the end of the next close-off period.

4 Linking client data to service delivery

4.1 What is a service?

The Data Exchange framework has a specific definition of a service based on service delivery concepts. These concepts ensure that an instance of service is consistently applied across varying funded activities and service delivery contexts that are reported in the Data Exchange. For the purposes of the Data Exchange, a service is defined as:

One or more individual instances or episodes of assistance (known as sessions) within a reporting period that are delivered within a distinct case.

The concept of a 'case' and 'session' are integral to the Data Exchange as they maintain a consistent way for organisations to record information about the different activities clients are accessing, how they are being delivered and the location from which they are being delivered. These concepts are discussed below and in further detail at Section 7 of this document.

Go to the [Department of Health, Disability and Ageing website](#) for the CHSP program specific guidance for more information on cases and sessions.

4.2 What is a case?

Cases act as containers, linking client and session data to location and program activity information. A case is defined as:

A method to capture one or more instances of service (known as sessions) received by a client or group of clients that is expected to lead to a distinct outcome. A case may contain between one and an unlimited number of sessions.

A case record helps understand what funded activity is being delivered, the location it is being delivered from, the reason clients came to the service and the number of clients receiving a service.

Each organisation can create cases in a format that best suits their needs. However, a case cannot exceed 1000 (one thousand) individual clients.

For users of the web-based portal, cases facilitate navigation and hold clients and sessions together.

- A case can operate over multiple reporting periods, for instance if a client returns to receive the same service.
- Depending on the nature of the service, a case can contain an individual, a couple, a family, or an unrelated group of individuals, such as a regular weekly or monthly group meeting.
- If a client attends a number of different funded activities, each of these is treated as a separate case.
- If a client receives the same services from a number of different locations (known as outlets) managed under the same program activity, each of these is treated as a separate case.
- To report a case, details are recorded about the activity, the location (or outlet) where the service occurred, and the client who will receive the service associated with that case record.

4.3 What is a session?

In the Data Exchange, a session is defined as:

An individual instance or episode of service, stored within a case, which is ‘related’ to other sessions (when/if they occur).

A session record includes the date the service occurred, the kind of service the client(s) received (known as service type) and which of the clients associated to the case were present. For organisations participating in the partnership approach, client pathways information (referrals out) is recorded at a session level. More information about the extended data set is found in Section 8 of this document.

4.4 Counting rules for clients, cases and sessions

A **client** is counted against a reporting period if the client was recorded as attending at least one session within that reporting period.

A **case** is counted against a reporting period if at least one session is recorded under the case within that reporting period.

A **session** is counted against a reporting period if the date of the session fell within the reporting period and at least one client is attached.

4.5 What is an outlet?

For the purposes of the Data Exchange, an outlet is defined as:

The physical location from where a service is primarily being delivered.

- The organisation identifies the program activities each outlet delivers.
- Each outlet can have different staff, service information, program activities, and contact details.
- Where the service is mobile in nature, the outlet used should be the nearest administrative premises where staff are based, and where they are likely to be travelling from to deliver the service.
- Creating multiple outlets for services delivered from the same address must be avoided.
- Post office boxes cannot be used in place of a physical location.
- An outlet should never be created for a client’s residential address, if a service is delivered in a client’s home, or a sensitive/protected location such as a refuge.
 - In the instance of service delivery at a residential address, the outlet should reflect where staff are based or travelling from. This information is captured with the session details under the service setting field.

- In the instance of service delivery at a protected address or refuge, the outlet can use an address of a non-identifiable public place nearby, such as a post office, police station or shopping centre.

4.6 Delivery partnerships and consortium arrangements

Organisations make different choices when it comes to setting up their delivery partners (Delivery Organisations) and outlets in DEX. As these decisions will affect who can enter, view and report data in the Data Exchange, set up needs to happen in agreement between the two parties, e.g. Lead organisation / Grant Recipient and delivery partners/ organisations. Particular attention needs to be paid to the naming of outlets, outlet addresses, the visibility of data and the protection of client privacy and personal information.

Go to the [Data Exchange website](#) training resources for guidance on partnerships and consortium arrangements.

4.6.1 Funding received from multiple sources

The Data Exchange Framework is intended to capture client outcomes from services funded through programs in scope for the Data Exchange. Where an organisation receives funding from multiple sources to help the delivery of an activity, the following guidance should be considered:

- Where organisations deliver CHSP activities over and above their funding allocation that are supported through other sources (e.g. donations, bequests), the data reported should only reflect the clients whose participation is funded by the CHSP grant.
- If Data Exchange related funding is only provided for a specific aspect of the service offering, such as in a certain location or to a specific client group, it is acceptable to only report on those clients or that specific outlet.

5 Protecting a client's personal information

Please note that this chapter (five) relates to the collection of personal information in the general client details record. The recording of a CHSP client's My Aged Care ID (MAC ID) in the MAC ID field, within the Program specific client details section, is handled separately to personal information supplied in the general client details section and is covered in Chapter 6.

The Data Exchange Framework is designed to keep client information safe and follow the rules of the Privacy Act, including the Australian Privacy Principles (APPs).

Under the Privacy Act, *personal information* is information or an opinion about an identified individual, or an individual who is reasonably identifiable:

- whether the information or opinion is true or not; and
- whether the information or opinion is recorded in a material form or not.

In the Data Exchange, a client's record is considered *personal information* if it includes their **name** (or **pseudonym**) and **street-level address** details. This information can only be stored if the client gives clear consent. It is important to note that organisations cannot make it mandatory for clients to provide personal information. Clients must provide consent for their personal information to be collected, used, disclosed or stored by an organisation and DSS.

Client consent to store their name and street-level address in their DEX client record is still required to be obtained from CHSP clients and recorded in the consent field regardless of MAC ID status. The relevant Privacy Notice templates are included at Section 6.3

5.1 Data Exchange privacy protocols

Everyone using the Data Exchange must follow the Privacy Act. This means:

- Staff should only access records if they have a real reason or ‘need to know’.
- Organisations must take reasonable steps to ensure client details are correct and up to date.
- Organisations must fix or delete incorrect information as soon as they become aware of the error or mistake.
- Organisations must keep records secure at all times.
- Organisations must seek client consent and provide a privacy collection notice before storing their name (or pseudonym) and/or street address.

If an organisation enters personal information, only that organisation can see it. Strict IT security protocols prevent DSS staff accessing personal information except to check that privacy rules are working properly, or when assisting organisations to understand error and warning messages received when entering data into Data Exchange. Staff from other funding agencies do not have access to personal information.

Funding agencies use anonymous (de-identified) data from the Data Exchange for program management, policy development, research, and evaluation. DSS uses strict methods to make sure clients cannot be re-identified with DEX sourced data.

For more details, visit the [Data Exchange website](#) to read the Privacy Impact Assessment by the Australian Government Solicitor.

5.2 Organisations’ obligations when storing personal information in the Data Exchange

If an organisation wants to store a client’s **name** (or **pseudonym**) and/or **street address** in the Data Exchange, they must:

- Tell the client how and why DSS collects their information (verbally or in writing) using the CHSP standard privacy notice (refer chapter 6) or their own.
- Get the client’s consent before entering the information.

Organisations can also refer clients to the “Information for clients on privacy” page on the [Data Exchange website](#), which explains privacy in plain English.

5.2.1 Consent to collect and store personal information

If an organisation wants to store a client’s name (or a pseudonym) and/or street address in the Data Exchange, the client must give consent first. DSS will not store this information without consent. This consent must be clear and obvious, either verbally or in writing. Importantly, for consent to be valid it must be informed, voluntary, specific and the individual must have *capacity*.

After giving the privacy notice, the organisation must:

- Get the client’s explicit consent (on behalf of DSS) to collect and store their personal information in the Data Exchange.
- Record the consent in the system by:
 - Ticking the consent box in the web portal, or
 - Indicating consent in a system-to-system transfer or bulk upload.
- Tell the client they can withdraw consent at any time.

If a client withdraws consent:

- Record this in the system by:
 - Unticking the consent box in the web portal, or
 - Indicating consent has been removed in a system-to-system transfer or bulk upload.

- DSS will then remove the client's name (or pseudonym) and/or street address from the Data Exchange.

For more details, organisations should check "Information for organisations about consent" on the [Data Exchange website](#) which explains consent in plain English.

5.2.2 Obtaining consent from individuals with compromised capacity

If a client may not be able to give consent (for example, because of a physical or mental disability), the organisation should take special steps.

This might include finding someone who can give consent on the client's behalf, such as:

- A legal guardian
- Someone with an enduring power of attorney
- A person recognised under relevant laws (e.g., a "person responsible" under the *Guardianship Act 1987 (NSW)*)
- Someone the client nominated in writing when they were able to give consent.

5.3 Organisations' obligations when NOT storing personal information in the Data Exchange

If an organisation chooses NOT to store a client's name (or pseudonym) and/or street address in the Data Exchange, the consent and notification requirements in section 5.2 do NOT apply.

In this case the organisation should:

- Leave the consent box unticked in the web portal, or
- Indicate consent has not been provided in a system-to-system transfer or bulk upload.

DSS will use the client's name (or pseudonym) to create a Statistical Linkage Key and then delete it. The client record stored in the Data Exchange will not include the client's name, pseudonym, or street address.

5.4 De-identified data

DSS protects client privacy when using DEX data for reporting purposes by removing identifying details and using a special code (called a statistical linkage key) to link data safely.

5.4.1 DSS Statistical Linkage Key (SLK)

The Data Exchange uses a Statistical Linkage Key (SLK) to remove personal details while still linking records that belong to the same person. This unique code lets DSS link a client with the services they received, even if those services came from different organisations.

The SLK combines part of a person's name, date of birth and gender:

- 2nd, 3rd, and 5th letters of the family name
- 2nd and 3rd letters of the given name
- Day, month, and year of birth
- Gender

For example, John Smith, a male born on 14th February 1971 has an SLK of: **MIHOH140219711**

Organisations cannot see the SLK in the Data Exchange. Only a very small number of DSS staff can see it, and only for technical tasks like system maintenance or data analysis.

For organisations using the web portal, the SLK is created automatically. For organisations using bulk uploads or system-to-system transfers, the SLK can be generated using the algorithm above. The SLK should not use nicknames, shortened names, or anything that could identify the client.

Go to [Data Exchange website](#) for help configuring systems to push the SLK across to the Data Exchange.

5.4.2 Client ID

Each client record in the Data Exchange includes a client ID that must remain unique to that client in all circumstances while connected to the funded organisation. This is different to the SLK described above.

The client ID is made up of a series of alphanumeric text, either inputted by the organisation or created by the Data Exchange web-based portal.

Where an organisation enters their own client ID (as described below), this should be alphanumeric or numeric text only. This Client ID **must not** include shortened versions of a client's name, nickname or any variations of their full name, **or any other information that could identify a client**, such as the client's My Aged Care ID, Centrelink Customer Reference Number (CRN), or DVA Card/ID number, under any circumstances

Web-based portal - Organisations have the option of:

- entering their own client ID (an ID used internally by the organisation), which must not include any information that could identify the client, or
- leave the field blank, where the portal will generate a client ID that is used by organisations to search for their record later.

Bulk upload or system-to-system transfer

- For organisations using their own client management system and uploading their data to the Data Exchange, the client ID becomes a mandatory field from their own system and used to cross-reference the record between the two systems in future interactions.
- Organisations are responsible for ensuring that any software created Client ID is distinct to each client and does not source the ID components from any personal or identifiable information, including the MAC ID.

Go to the [Data Exchange website](#) for technical specifications.

5.5 Consent for follow up research, surveys and evaluations

Funding agencies and universities may want to do research in the future to better understand client needs and improve services. Such research would involve contacting clients to seek an update on their situation. Getting client consent now will create a list of people who are willing to take part in these studies later.

As part of the priority requirements, organisations must:

- Get the client's consent to participate in follow up research, surveys and evaluation.
- Record the consent in the system by:
 - Ticking the future research consent box in the web portal, or
 - Indicating consent in a system-to-system transfer or bulk upload.
- Tell the client they can withdraw consent at any time.

If a client withdraws consent:

- Record this in the system by:
 - Unticking the future research consent box in the web portal, or
 - Indicating consent has been removed in a system-to-system transfer or bulk upload.

When there is a research project:

- The project will be approved by a recognised ethics committee
- Researchers will contact organisations before the project starts.
- The organisation will work with researchers to contact clients about the project and help them understand why research is important and what it means to participate.

5.6 Organisational privacy considerations

Once a client record is created, all Data Exchange users within the organisation can see it.

Organisations must have processes and controls in place to keep this information safe and prevent unauthorised access.

Records should only be accessed by authorised staff who need the information to deliver services to the client. Organisations must **never** share a client's personal information with DSS or funding agencies by phone or email (for example, when contacting the Data Exchange Helpdesk)

If an organisation becomes aware of a cyber security incident or a possible data breach, they must notify DSS and their funding agency as soon as possible.

5.6.1 Cyber Security Incidents

According to the Australian Cyber Security Centre's (ACSC) [Guidelines for Cyber Security Incidents](#), a Cyber Security incident is:

A cyber security incident is an unwanted or unexpected cyber security event, or a series of such events, that either has compromised business operations or has a significant probability of compromising business operations.

Unauthorised access to the Data Exchange system is a possible cyber security incident.

Organisations should have processes and controls in place to prevent and manage cyber security incidents for the Data Exchange. For example, ACSC's [Small Business Cyber Security Guide](#) recommends organisations:

- make an **emergency plan**, including processes for staff to report potential cyber security incidents.
- **educate employees** on cyber security issues, including:
 - encouraging employees to visit [cyber.gov.au/learn](https://www.cyber.gov.au/learn)
 - adding cyber security training or practices into the induction process
 - encouraging positive security habits in staff
- implement Data Exchange **access controls**, including ensuring:
 - users have the bare minimum permissions they need to perform their work.
 - revoking access from staff who leave the business.

All users with access to DSS IT resources have particular responsibilities in respect of:

- Password security. No-one is to attempt to bypass or defeat DSS' IT security system.
- Everyone is responsible for maintaining the integrity of software and hardware under their ownership and ensuring that its condition does not prejudice the integrity of DSS' propriety or licensed software or hardware.

The following resources may assist organisations in meeting their Data Exchange cyber security responsibilities:

- ACSC's [Resources for business and government](#) at <https://www.cyber.gov.au/>
- Australian Charities and not for Profit Commission's (ACNC) [Governance Toolkit: Cyber Security](#) at <https://www.acnc.gov.au/>.

5.6.2 Data Breaches

According to the Office of the Australian Information Commissioner (OAIC):

A data breach happens when personal information is accessed, disclosed without authorisation, or is lost.

If client's record in the Data Exchange is shared with or accessed by an unauthorised person, this is a possible data breach under the Privacy Act. A data breach may occur as part of a cyber security incident.

Organisations should have processes and controls in place to prevent and manage data breaches for the Data Exchange. For example, Office of the Australian Information Commissioner's (OAIC) [Protecting customers' personal information](#) recommends organisations:

- have personal information handling processes and procedures, and ensure staff undertake regular privacy training.
- ensure staff access personal information on a need-to-know basis.
- have policies on information security, including ICT security, physical security and access security take care when handling sensitive information.
- have a data breach response plan.

The following OAIC resources at <https://www.oaic.gov.au/privacy/> may assist organisations in meeting their Data Exchange privacy and data breach responsibilities:

- [Privacy guidance for organisations and government agencies](#)
- [Data breach preparation and response](#) guide.

6 Mandatory collection of clients My Aged Care ID

All organisations delivering the Commonwealth Home Support Program must collect and report the My Aged Care IDs (MAC ID) of the clients to whom they are providing CHSP services. The Department of Health, Disability and Ageing uses the MAC ID to assess provider compliance with the statutory funding conditions for home support grant funding (ss 266-267 of the Act).

The MAC ID must be reported to the Data Exchange (**in the MAC ID field** in the client record) and is not subject to client consent as it is required to monitor provider compliance. This is authorised under s 573(1) of the Act.

6.1 CHSP Organisations' Implementation Notice

CHSP-funded organisations are required to capture clients' My Aged Care IDs (MAC ID) against the services delivered. The functionality to record the MAC ID in the Program specific client details section of the client record became available 9 December 2025, with the inclusion of the MAC ID in client records required from 1 January 2026.

CHSP-funded organisations who deliver other programs should not enter the My Aged Care IDs of clients who only receive non-CHSP programs.

6.2 CHSP-specific Data Exchange privacy protocols

While the recording of the MAC ID in Data Exchange is mandatory, the MAC ID is categorised as *personal information* and must be treated in the same way as any other *personal information* in DEX (e.g. full name, street level address) in line with the Data Exchange privacy protocols (Chapter 5). Failure to do so is a breach of the CHSP funding agreement and compliance action may be applied.

In addition to the standard Data Exchange privacy protocols as detailed in Chapter 5, CHSP funded organisations must adhere to the following additional requirements in order to meet their obligations under the Privacy Act and the Aged Care Act.

- Organisations must notify their clients that their MAC ID will be entered into the Data Exchange for this purpose prior to entering the MAC ID in the system. Organisations may choose to incorporate either the mandatory Standard CHSP Privacy Notification or the mandatory components of the CHSP Alternative Privacy Notification.
- Organisations must ensure that no part of the client's MAC ID is visible in any other Data Exchange field.

- Organisations must ensure they still apply the Data Exchange consent and notification arrangements if they intend to store other *personal information* (client name/pseudonym and street-level address) in the Data Exchange (Section 5.2).

When organisations enter the MAC ID into Data Exchange, the system will automatically encrypt the ID. The organisation will only be able to see the last three digits of the ID displayed back to them. DSS will only store the full encrypted ID and the unencrypted last 3 digits.

DSS provides this encrypted information to DHDA periodically in order to monitor provider compliance with funding grant conditions (compliance purpose). This is authorised under s573(1) of the Act. The decryption of individual clients' My Aged Care ID does not occur within the Data Exchange.

DHDA will decrypt the My Aged Care ID in order to reidentify clients and verify information about CHSP services provided to them for compliance requirements. DHDA cannot undertake compliance monitoring activities without this information.

6.3 Organisations' obligations when storing personal information in the Data Exchange

To satisfy the notification requirements organisations must include the mandatory CHSP Standard Privacy Notification (paragraph 5.3.1 below) – and if applicable consent for *personal information* - on their registration forms. If organisations do not wish to use these words on their registration forms, organisations are required to notify the client of the matters outlined in [Australian Privacy Principle 5.2](#) (APP 5.2) or ensure that the client is aware of those matters.

In either case, organisations are required to provide the CHSP Standard Privacy Notification (or an alternative notification on privacy) before the time that the client's personal information is entered on the Data Exchange or, if that is not practicable, as soon as practicable after the client's personal information is entered on the Data Exchange.

6.3.1 CHSP Standard Privacy Notification

Drafters notes and explanatory text displayed as red text in table cells should be removed prior to the notification being included in Organisations' registration forms.

Mandatory:

The following 'CHSP Standard Privacy Notification', up until 'Conditional on consent' (unless using the CHSP Alternative Notification for Mandatory elements) must be included in Organisations' registration forms used for CHSP services.

The Mandatory standard notification is outlined below:

Collection of your My Aged Care ID

The information that we collect from you on this form includes your personal information. Your personal information is protected by law, including by the Commonwealth Privacy Act 1988.

The Department of Health, Disability and Ageing (DHDA) provide grant funding to providers of aged care services under the Commonwealth Home Support Program (CHSP).

CHSP providers must report on the delivery of CHSP services via the Data Exchange IT system (DEX). This system is hosted by the Australian Government Department of Social Services (DSS).

DSS on behalf of DHDA collects information about the CHSP services you receive, and an encrypted version of your 'My Aged Care ID', from your CHSP provider and stores this information as a de-identified record in DEX. This protected information is a mandatory requirement and is not used by DSS for any purpose.

Uses and disclosures of your My Aged Care ID in the Data Exchange

DSS discloses a subset of this information (including the encrypted MAC ID) to DHDA periodically in order to monitor provider compliance with funding grant conditions (the compliance purpose). This is authorised under s 573(1) of the Commonwealth *Aged Care Act 2024*.

DHDA will decrypt your My Aged Care ID in order to reidentify you and verify information about CHSP services provided to you for the compliance purpose. DHDA cannot undertake compliance monitoring activities without this information.

How DSS uses and discloses personal information other than My Aged Care ID in the Data Exchange

DSS uses your information in DEX to produce and share de-identified data and data visualisation reporting products to DHDA and providers, for reporting and research purposes.

DSS uses your information in the Data Exchange to produce information for policy development, grants program administration, and research and evaluation purposes. DSS also shares data with organisations and agencies for reporting and research purposes. DSS de-identifies all data before use or disclosure so that it cannot be used to re-identify you.

Further information

For more information about how DSS on behalf of DHDA will manage your personal information, including how you can request access or correction of your personal information or make a privacy complaint, see the [privacy policy](#) published on the DSS website.”

Conditional on consent:

In addition to the above which must always be provided to CHSP clients, Organisations using the Data Exchange as a client records system and/or wanting to include the name and street level address of a CHSP client in the Data Exchange must include the ‘Conditional on consent - CHSP Standard Privacy Notification’ on their registration forms. This is to enable DSS to store a client’s personal information (other than the My Aged Care ID) on the Data Exchange.

The Conditional on consent standard notification is outlined below:

Our use of the Data Exchange

We are also using the Data Exchange as a client record system to manage your details and the services we provide to you. DSS stores your personal information in the Data Exchange and (other than your My Aged Care ID) only shares it with us so we can manage your services.

DSS will only collect certain personal information with your consent.

Your client record in DEX can be set up to include your name and address, which helps us manage your details. You do not need to provide your name and address to DSS. If you do not consent to the collection of your personal information, this will not affect the services provided to you. You can ask for this information to be removed by DSS at any time.”

6.3.2 CHSP Alternative Privacy Notification

If organisations do not wish to include the CHSP Standard Privacy Notification on their registration forms, they may design and use their own forms to collect and store the mandatory, and where relevant, on consent, personal information in the Data Exchange. If organisations wish to follow this approach, they are required to notify the client or otherwise ensure that the client is aware of the following matters (as outlined in [APP 5.2](#)):

Mandatory: these elements must be included for all CHSP clients, in relation to the collection and reporting of their My Aged Care ID.

- a) The Department of Health, Disability and Ageing (DHDA) provide grant funding to providers of aged care services under the Commonwealth Home Support Program (CHSP).
- b) CHSP providers must report on the delivery of CHSP services to DHDA via the Data Exchange (DEX).
- c) the Data Exchange is an IT system that is hosted by the Australian Government Department of Social Services (DSS).
- d) DSS on behalf of DHDA collects information (including information about the services received and an encrypted version of a client's 'My Aged Care ID') from you and stores this information as a de-identified record in the Data Exchange.
- e) With the exception of My Aged Care ID, DSS de-identifies and aggregates personal information that is stored on the Data Exchange to produce information for policy development, grants program administration, research and evaluation purposes, and this will not include information that identifies the client, or re-identifies the client, in any way.
- f) DSS's privacy policy is published on its website. The website contains information about how the client may access or correct the personal information that is stored on the Data Exchange; complain about a breach of the Australian Privacy Principles by DSS, and how DSS will deal with the client's complaint. The privacy policy also contains information about the circumstances in which DSS may disclose personal information to overseas recipients.

Conditional on consent:

In addition to the above elements, the organisation must notify the client of the following conditional on consent elements if they are using the Data Exchange as a client record system i.e. intending to store the client's name/pseudonym and street level address on DEX.

- g) the organisation is using the Data Exchange for recording client information, and the client's personal information (with the exception of the encrypted version of the My Aged Care ID) is stored on the Data Exchange for this purpose only.
- h) the client's personal information, which is stored by DSS on the Data Exchange, is only visible to the organisation that collected the information for the purposes of managing the client's case.
- i) the consequences if personal information is not collected from the client.

This notification is necessary to enable the client's personal information to be stored on the Data Exchange by DSS in compliance with the Privacy Act. DSS will not review, approve or store an organisation's registration forms.

7 Collecting the priority requirements

The priority requirements are a small set of mandatory data items. These data items capture the demographics of clients accessing program activities, how often clients are attending, where they are attending and what program activities they are attending.

In summary, the priority requirements reflect the collection of information about client details, case and session details, and client consent to participate in follow-up research.

This section presents practical information about each of these concepts to support managers and frontline staff to consistently and accurately collect the required data.

Go to the [Data Exchange website](#) for more information on configuring systems and service delivery information such as how to use cases, sessions and service types. The data values are listed in Section 12 of this document.

7.1 Client level data

Client-level priority requirements capture client details and demographic characteristics. This provides an understanding of each client's pathways over time, on a de-identified basis.

Organisations must use best efforts to request collection of priority requirement client-level data from clients directly receiving services. The organisation must then report the responses received to the Data Exchange in accordance with sections 5.2 and 5.3.

Organisations must seek a client's consent to collect, use, disclose or store their personal information.

A client record only needs to be created once. It can then be maintained, updated and edited at any time.

Client records are the basic 'building blocks' of the Data Exchange Framework and are used to answer standard questions such as:

- how many clients were assisted?
- how many clients were assisted in previous reporting periods?
- how many clients received assistance under different funded activities?
- how many clients received assistance from a funded activity delivered by a different organisation?
- how many clients receiving assistance were from vulnerable target population groups?

Answers to these questions will help tell the broader story about the outcomes being achieved, by providing an understanding of **who** these outcomes are being achieved for and **when**.

7.1.1 Collecting client given and family names

Collecting a client's name would typically occur the first time that a client accesses any funded activity from an organisation, either in a registration form or in an intake interview. Organisations are free to gather this information in accordance with their standard practices.

A client's given name and family name are recorded because they form part of the SLK used to uniquely identify clients without disclosing personal information. **Given name** is typically a client's first name, but it may include one or more middle names. Ideally, the given name should be recorded exactly as it is on key identification documents such as a passport or driver's license.

Family name is typically the client's last name, or surname, and ideally should be recorded exactly as it is spelled on key identification documents.

Where clients are known by more than one name, or prefer to be called by a particular name, for example Joe rather than Joseph, their given and family names should reflect the name the client offers.

Where a client does not have identification documentation or chooses not to disclose their identifying information, the organisation should record the given and family name that is most commonly used or preferred to be used by the client.

Where a client does not wish to disclose their 'real' name, the organisation should indicate that a pseudonym is being used and record a pseudonym that ideally is used again if the client returns for other services.

Where a client only has one name, this would be entered as their first and last name.

7.1.2 Date of birth

A client's date of birth is recorded for two reasons: it forms part of the SLK and provides a direct means of calculating the client's age.

Age groups demonstrate part of the standard demographic profile for clients required by many government programs and is of particular importance to programs that target age-specific cohorts.

Where a client does not know their date of birth or does not wish to disclose it, it is acceptable for an estimated date of birth to be used. An estimated date of birth indicator is in the Data Exchange and should

be used to flag when this occurs. For example, if a client thinks they are approximately 70 years old (and it is 2025), the estimated date of birth indicator is flagged, and the year of birth is recorded as 1955.

7.1.3 Gender

A client's gender is recorded because it forms part of the SLK and is recorded based upon how the client self-identifies. Please note that gender is different to sexuality and sexual orientation, which are not recorded in the Data Exchange.

The Data Exchange uses standard data definitions for gender developed by the Australian Bureau of Statistics (ABS) under the [Standard for Sex, Gender, Variations of Sex Characteristics and Sexual Orientation Variables, 2020](#), with five options:

- Man or Male
- Woman or Female
- Non-binary
- Different term [Free text field up to 100 characters]
- Prefer not to answer

The 'Non-binary' response is used where a client does not identify as male or female. Should a client use a term that does not align with the term listed, the term can be described under 'Different term'. If a client chooses not to disclose their gender, it is acceptable to record 'Prefer not to answer'.

7.1.4 Residential address

Information about where clients live can assist with understanding if services are located in the right area.

A client's residential address can also be compared to an outlet address to understand how far the client may be travelling to access a service, or how far staff may be travelling to deliver a service to a client.

A client's residential address can also be linked to other useful information to help understand a client's circumstances, such as the Socio-Economic Indexes for Areas (SEIFA) rankings and the Australian Bureau of Statistics (ABS) community profiles.

Within the Data Exchange, there is the capacity to record a full residential address for each client (street level, suburb, state and postcode). At a minimum, a client's state, suburb and postcode are considered part of the priority requirements and must be recorded to create the client record.

The identity of clients consenting to the reporting of their full residential address is protected by converting the data to the Australian Statistical Geography Standard. This means that a geography code is recorded in place of the client's address, which de-identifies the record.

In exceptional circumstances, it may not be appropriate to record the client's full residential address, such as where the client is experiencing domestic violence and does not wish to provide even their suburb, state and postcode due to fears for their personal safety. In these circumstances, the service outlet suburb, state and postcode should be recorded instead.

7.1.5 Recording a homeless client's residential address

If a client is homeless or of no fixed address, the client or organisation can determine the most appropriate address to be recorded. This may be the suburb, state and postcode of where the client usually spends the night, or suburb, state and postcode of the outlet where the client is seeking assistance. A flag to indicate the client is currently homeless is in the extended demographics section of the Data Exchange.

7.1.6 Indigenous status

A client's Indigenous status is recorded to provide an important understanding of whether clients who identify as Aboriginal or Torres Strait Islander origin are accessing services. Under standard data collection definitions used by the AIHW, five options are available to record a client's Indigenous status:

- No
- Aboriginal
- Torres Strait Islander
- Aboriginal and Torres Strait Islander
- Not stated/inadequately described

Indigenous status is part of the standard demographic profile for clients of many government programs and is of particular importance in ensuring Indigenous people and communities have appropriate access to funded services.

Where a client chooses not to disclose their Indigenous status, it is acceptable to record 'Not stated/inadequately described'.

7.1.7 Cultural and Linguistic Diversity (CALD)

A client's CALD background is recorded to provide an important understanding of whether CALD clients are accessing services. Under standard data collection definitions used by the Australian Institute of Health and Welfare (AIHW), two questions are used to record a client's CALD status:

(a) Country of birth

- Record the country of birth indicated by the client
- A list of values is based on the Australian Bureau of Statistics [Standard Australian Classification of Countries \(SACC\), 2016](#)

(b) Main language spoken at home

- Record the main language spoken at home indicated by the client.
- A list of values is based on the Australian Bureau of Statistics [Australian Standard Classification of Languages \(ASCL\), 2016](#)

More detailed information about a client's CALD background such as ancestry is collected in the extended demographics section of the Data Exchange.

CALD status is part of the standard demographic profile for clients of many government programs and is of particular importance to ensure CALD clients and communities have appropriate access to funded services.

This information can also be beneficial for organisations in determining whether the engagement of translating services or bilingual staff may assist in better service delivery for their clients. Where a client chooses not to disclose their CALD status, it is acceptable to record 'Not stated/inadequately described'.

7.1.8 Disability, impairment or condition

Clients are asked to self-identify whether they have a disability, impairment or condition because it is important for organisations and funding agencies to know whether clients with disability are accessing services.

Under standard data collection definitions used by the AIHW, disability is recorded in groupings that most clearly express the experience of disability by a person. Disability groupings constitute a broad categorisation of disabilities in terms of the underlying health condition, impairment, activity limitations, participation restrictions, environmental factors and support needs. Categories in the Data Exchange include:

- **Intellectual/learning:** associated with impairment of intellectual functions which limit a range of daily activities and restrict participation in a range of life areas, for example, but not limited to; dyscalculia, dysgraphia, dyslexia.
- **Psychiatric:** associated with clinically recognisable symptoms and behaviour patterns frequently associated with distress that may impair personal functioning in normal social activity, for example, but not limited to; Asperger syndrome, attention deficit hyperactivity disorder, autism, behavioural disorders, bipolar, **depression, anxiety disorders**, eating disorders, epilepsy, manias, phobias, schizophrenia, somnias.
- **Sensory/speech:** including vision disability (blindness, vision impairment); hearing disability (deafness, hearing impairment that cause severe restrictions in communication); deaf-blind (dual sensory impairments causing severe restrictions in communication); speech disability (speech loss, impairment which causes severe restrictions in communication).
- **Physical/diverse:** associated with the presence of an impairment, which may have diverse effects within and among individuals, including effects on physical activities such as mobility. This grouping includes physical disability, for example, paraplegia, quadriplegia, muscular dystrophy, motor neurone disease, neuromuscular disorders, cerebral palsy, absence or deformities of limbs, acquired brain injury, neurological disability (including epilepsy, **dementias**, multiple sclerosis and Parkinson disease).
- **None:** no disability, or no disability, impairment or condition are identified by the client.
- **Not stated/inadequately described.**

When recording data about disability, impairments or conditions clients should self-identify, and can identify with more than one group, for example physical/diverse and intellectual/learning.

Data about disability status is part of the standard demographic profile for clients of many government programs and is of particular importance to ensure people with a disability have appropriate access to funded services. Where a client chooses not to disclose if they have a disability, impairment or condition, it is acceptable to record 'Not stated/inadequately described'.

7.2 Service delivery information

The concept of a case and session are integral to the Data Exchange as they maintain a consistent way to link a client with instances of service and to help tell the 'story' about outcomes achieved for clients.

Once a client record is created in the Data Exchange, it must be linked to the program and activities the client is participating in. This is captured using the case and session records. A case is the first step in recording service delivery information within the Data Exchange.

7.2.1 Case details

The second tier of the priority requirements is a case record, which includes a case ID, program activity, and outlet information. A case record is only created once for each unique case and is used over multiple reporting periods.

Each case record includes:

- **Case ID:** an alphanumeric code or title that uniquely identifies the case, and which is named in a way that is meaningful to the user. The case ID business rules are the same as those for the client ID: the case ID must be unique within the organisation and not include any identifiable information, such as a client's name, MAC ID or Centrelink CRN. Users of the Data Exchange web-based portal may leave the field blank, in which a case ID is automatically generated (numeric only). The field is mandatory for those uploading data through the bulk upload or system-to-system methods.
- **Program activity:** the funded activity that the case is being delivered under.
- **Outlet:** the location where the case is primarily being delivered. A case cannot have more than one outlet.
- **One or more client records:** links one or more clients to a case (or in limited circumstances an aggregate number of unidentified clients).

The number of case records an organisation creates will depend on the type of funded activity(ies) they deliver and the way these services are delivered. For example, if providing a formal digital education and support program to several Individual social support clients, it would make sense to create a case for each participant of the program. This would allow a user to see and reflect on the composition of the participants, easily navigate the portal for efficient data entry, and potentially count the total number of cases as the number of participants accessing the program.

In contrast, for organisations delivering centre-based services, it may be better suited to create a case for each of the locally run activities delivered in the community, such as a Group social support or exercise programs.

For organisations using the bulk upload or system-to-system method, the concept of a case is a node that allows all three tiers of the Data Exchange data (clients, cases and sessions) to be effectively uploaded.

7.2.2 Session details

The third tier of the priority requirements is a session record. A session record captures the types of services being delivered under the relevant case, which clients attended, and the dates of service. Sessions also indicate that a case was active within a reporting period. Each session record consists of:

- **Session ID:** a numeric code or title that identifies a particular instance/ episode of service. The session ID must be unique within the case and cannot include identifiable client information. Users of the Data Exchange web-based portal may leave the field blank, and a session ID is automatically generated (numeric only). The field is mandatory for those uploading data through the bulk upload or system-to-system methods.
- **Session date:** the date the instance/episode of service occurred.
- **Service type:** the main focus for the session delivered. If a session covered multiple service types, the most relevant one should be chosen, either based on the majority of time spent or the main way an outcome was achieved.
- **Client attendance:** recorded for each client that was present at the session.
- **Unidentified client attendance:** This field should not be utilised for CHSP clients due to the overarching Aged Care Act responsibilities of the funded organisation.

When recording a session, organisations should select the service type which best reflects the nature of service delivery in that particular session. Different service types are associated with different funded activities. Within the Data Exchange web-based portal, only the relevant service types are available for a user to choose.

For organisations using the bulk upload or system-to-system method, sessions are a node that complete all three tiers of Data Exchange data (clients, cases and sessions) being effectively uploaded.

7.3 CHSP specific mandatory fields

The Data Exchange Framework establishes streamlined and standardised program performance reporting to inform priority requirements. CHSP funded activities require additional mandatory data items to be reported, as listed below. Go to Section 12 of this document for a comprehensive list of the field values.

Please note that this version of the Protocols includes the Stage 3 requirements, which became mandatory to collect from 1 July 2026, and mandatory to record in DEX from 11 August 2026.

7.3.1 Program specific fields in the client record for CHSP

The following items are required and will only present if the client is participating in a Commonwealth Home Support Program activity:

- **Accommodation setting:** organisations are asked to record the accommodation setting category that best describes that of the client.
- **Living arrangements:** this is required for this program activity as it provides important information about a client's presenting context. Living arrangements and its categories are adapted from the data collection definitions used by the AIHW. This information can also be collected as 'household composition' in the partnership approach.
- **DVA card status:** a client's Department of Veterans' Affairs (DVA) card status is collected.
- **Existence of a Carer:** this field is required to determine how many clients have care arrangements in place. This question is a yes/no response.
- **Is the Client Registered for My Aged Care (MAC)?** This field is required to confirm if the client is registered in the My Aged Care system. This question is a yes/no response.
- **MAC ID** - An Alphanumeric field to input the unique My Aged Care identifier for the CHSP client. The field will only be accessible when the [Is the Client Registered for My Aged Care (MAC)?] field has a "Yes" response.

7.3.2 Program specific fields in the session record for CHSP

An additional 15 program specific session level data items were introduced from 1 July 2026 as part of the 2025-2027 CHSP Grant Agreement, aligning the program with the *Aged Care Act 2024*. The update to include the fields was completed on 11 August 2026.

The items are mandatory and will only present if the session is attached to a case that has a Commonwealth Home Support Program activity.

The full list of program specific session level data items is included in section 12, tables 11 and 11a.

Please refer to the [CHSP Data Exchange Guide 2026-27](#) for specific details for each data item.:

8 Collecting partnership approach data

The partnership approach is a collection of extended data items as well as Standard Client/Community Outcomes Reporting (SCORE) data items. Organisations participating in the partnership approach report an extended data set, in exchange for access to additional self-service reports.

The partnership approach and/or collection of SCORE is not required to be utilised for CHSP funded activities. Where organisations choose to opt in (e.g. where they are reporting values for the same client under a different program, or utilise the additional reports in the portal), there is a subset of the extended data items that are more relevant to CHSP than others. This section presents practical information about collecting and reporting the extended data items relevant to CHSP funded activities under the partnership approach. Go to Section 12 for a list of data values.

For details regarding the full extended data set and SCORE, users will need to refer to sections 7 and 8 of the standard Data Exchange Protocols.

8.1 Case level extended data items

The extended data items at the case level relate to the client record attached and can be accessed in the user portal through the icon in the referral source and reasons column.

8.1.1 Referral source

In the drop-down box for Referral source, CHSP providers can select “My Aged Care Gateway” if the field has not defaulted to this selection.

8.1.2 Reasons for seeking assistance

For each client, data is recorded about the main reason for seeking assistance. Relevant categories for CHSP clients include:

- **Physical health:** where the client is seeking to change the impact of their physical health on their independence, participation and wellbeing.
- **Mental health, wellbeing and self-care:** where the client is seeking to change the impact of mental health issues and self-care issues on their independence, participation and wellbeing.
- **Community participation and networks:** where the client is seeking to change the impact of poor community participation and networks on their independence, participation and wellbeing.
- **Housing (for Hoarding and squalor supports):** where the client is seeking to improve their housing stability or address the impact of poor housing on their independence, participation and wellbeing.

8.1.3 Exit Reason

This data provides information about the circumstances surrounding the ending of a client’s relationship with a case. This contributes to a general understanding of the patterns of client interaction with a program and gives indications as to reason a client might disengage with a service. The Exit Reason categories in the Data Exchange are:

- **Client no longer requires assistance:** the client is now able to manage without any formal assistance. For example, if the client is managing on their own, or with the help of family or friends, or if they only needed temporary assistance. This may be used where a client’s circumstances have improved to the point that they no longer require assistance, but not necessarily because the service met their needs.
- **Service unable to provide assistance:** the organisation has ceased delivering services to the client because of the organisation’s resource limitations, or because the organisation no longer considers it safe or appropriate for staff or volunteers to continue to assist the client.
- **Client now requires higher level of care:** the client’s increasing dependency or need for assistance has reached the point where the organisation can no longer provide the necessary assistance, and the client is referred to a more appropriate source of care.
- **Client has moved out of area:** the organisation is no longer able to assist the client because their residential location has changed and is out of the geographic area of coverage of the organisation.
- **Client terminated the service:** the client chose to cease services or refuse further assistance from the organisation.
- **Client died**
- **Client no longer eligible:** the client no longer meets the eligibility criteria of the program to receive the service.

- **Client needs have been met:** the client no longer needs assistance from the organisation because their circumstances have improved as a result of the reason they sought assistance and the service they received.
- **None of the above:** the circumstances do not reasonably fit any of the above.

8.2 Session level extended data items

8.2.1 Service setting

Data is reported to help differentiate where services are provided. The service setting categories in the Data Exchange relevant to CHSP include:

- **Organisation outlet/office:** the organisation's outlets as recorded in the Data Exchange
- **Client's residence:** the client's usual place of residence. Please refer to the section residential address for more information
- **Community venue:** a venue that is available to the general public and is hired away from the organisation's usual offices. Examples include community halls, public libraries or parks.
- **Healthcare facility:** doctor's office, hospital, mental health facility, aged care facility
- **Telephone:** person-to-person contact provided to clients via telephone or voice chat that are interactive and have two-way engagement between the client and practitioner.
- **Video:** person-to-person contact provided to clients via a video service such as FaceTime, Zoom, Skype, etc. and have two-way engagement between the client and practitioner.

A fact sheet has been developed to provide information to assist organisations on how to record telephone, virtual or remote service delivery in the Data Exchange. Detailed examples of the different types of alternate service delivery methods, along with recommendations on how to record these into the Data Exchange if appropriate have been included.

8.2.2 Interpreter present

Data is reported on whether an interpreter was present for the instance of service to assist with translation and facilitation. This could be an interpreter provided by the organisation or someone the client has brought along to help them. This field is optional.

8.3 Client level extended data items

8.3.1 Homeless indicator

Data is reported about a client's housing situation. Noting the values for the homeless indicator are Yes, No or At Risk, a person is homeless if they do not have suitable accommodation alternatives and their current living arrangement:

- is in a dwelling that is inadequate.
- has no tenure, or if their initial tenure is short and not extendable; or
- does not allow them to have control of, and access to space for social relations.

A person may be at risk of homelessness in a number of situation including living in housing with major structural problems, residents are in constant threat of violence, living in crowded or improvised dwellings, or persons who are marginally housed in caravan parks.

The response should be based solely on what is reported by the client. This field is optional.

8.3.2 Highest level of education/qualification

Data is reported about highest educational achievement a person has attained. It lists qualifications and other educational attainments regardless of the particular field of study or the type of institution in which the study was undertaken. This field is optional.

8.3.3 Expanded CALD indicators - Ancestry

Data is reported about a client's ancestry if relevant. This may be useful where the client's country of birth and/or main language at home do not reflect the client's self-identified CALD background.

The list of values is drawn from the Australian Bureau of Statistics [Australian Standard Classification of Cultural and Ethnic Groups \(ASCCEG\), 2016](#).

8.3.4 Is client a Carer

Data is reported on the client's self-report status as a carer. A carer is defined as a person who provides unpaid care and support to family members and friends who have a disability, mental illness, chronic condition, terminal illness, an alcohol or other drug issue or who are frail aged. Data in this field is based on the client's reported caring situation. This field is optional.

9 Program specific surveys

As the host of the Data Exchange, DSS is looking at additional ways to better understand how funded services are achieving outcomes for individuals and communities.

Asking clients if they would like to participate in follow-up research, such as surveys and evaluation, forms part of the Data Exchange priority requirements—the standardised core set of mandatory reporting that applies to all Data Exchange in-scope programs.

10 Data Exchange reports

As part of the Data Exchange, all organisations that use the Data Exchange will have access to their own set of reports, which reflect the information submitted by their organisation. All available reports are accessed via the Data Exchange web-based portal. The ability to access the data and run reports will reflect the level of user access within the organisation.

Go to the [Data Exchange website](#) for detailed information on this topic and access to related information.

10.1 Report types

Standard self-service reports

These reports cover the mandatory priority data submitted by the organisation during a particular reporting period. For a current open reporting period the report will refresh every 24 hours to allow near real-time access to the information transmitted.

Partnership approach reports

Organisations participating in the partnership approach have access to a sophisticated suite of additional reports. Using both priority requirement data and extended partnership data, combined with government and population data sets, these reports provide valuable insights into service delivery and client outcomes.

10.2 Benefits of reports

Reports make the data entered visible and enables verification of data quality and integrity. They also provide organisations with an evidence base for evaluation and to inform best practice. The Data Exchange uses de-identified, aggregate information to look at both short- and long-term outcomes achieved for clients across the broad suite of in-scope programs. The reports allow for an understanding of the collective impact of service provided and what combinations of services deliver the best outcomes for clients.

10.3 Access and visibility of reports

Within the Data Exchange, access and visibility of reports will depend on the way organisations set up their outlets and delivery partners.

By default, organisations cannot see a delivery partner's data. However, the 'handshake' allows the sharing of reports data in the form of de-identified, aggregate information. The handshake is a virtual agreement between a lead organisation and their delivery partner(s), to share data from the delivery partner to the lead organisation for their activity. Under a handshake, a lead organisation can only access data reported by the delivery partner for the agreed program(s).

11 Administrative matters

11.1 In-scope program activities for the Data Exchange

A list of program activities in-scope for the Data Exchange can be found in the program specific guidance material located on the [Data Exchange website](#). This list is updated on a regular basis as new program activities start using the Data Exchange.

For a complete list of in-scope CHSP programs refer to the [Department of Health, Disability and Ageing's CHSP Data Exchange Guide from 1 July 2026](#).

11.2 Access and set-up

In order to use the Data Exchange, an organisation must complete a number of access and set-up steps before client and session information is entered into the system. Organisations are strongly encouraged to complete these steps as early as possible in the reporting period.

They include:

- applying for Digital ID online
- submitting a User Access Request to the Data Exchange Helpdesk
- accessing the Data Exchange web-based portal to set up their organisation
- create Outlets
- add program activities to Outlets
- add delivery partner details (if required)
- create additional users (if required)
- setting up bulk uploads (if required).

Go to the 'Quick Start Guide' on the [Data Exchange website](#).

Completing access and set-up steps in a timely manner is the responsibility of the organisation as part of their funding agreement obligations.

If these steps are completed too close to the end of a reporting period, DSS may not be able to process access and set-up requests with sufficient time remaining for the organisation to complete their data reporting before the due date.

11.3 Reporting periods and deadlines

The Data Exchange has two standardised six-monthly performance reporting periods each year:

1 January 30 June
30 day close-off period – ends 30 July

1 July 31 December
30 day close-off period – ends 30 January

Users of the Data Exchange have an extra 30 days at the end of each reporting period, known as the 'close-off period', to allow time to quality check their data and make amendments to reported data. After the 30-day close-off period the Data Exchange automatically closes and no longer accepts uploads for that reporting period.

Organisations can enter data at any time within a reporting period and are encouraged to do so regularly to make best use of the self-service reports and avoid unnecessary backlog or 'crunch' periods. Organisations new to the Data Exchange, in particular, need to plan for and allow sufficient time for access, set-up and other lead times, in order to meet reporting deadlines.

Once a reporting period has closed, data relating to that period of time will no longer be able to be recorded. Data outside of a reporting period may only be entered if an organisation has sought and is granted a system re-opening.

11.4 Compliance issues and system re-open requests

If an organisation experiences a crisis or event outside of their control that will impact their ability to meet performance reporting requirements, they can request a re-opening of the system.

System re-opening requests are submitted via the 'Request to re-open the Data Exchange form' on the [Data Exchange website](#), however organisations should also consult with their Funding Arrangement Manager or funding agency contact.

System re-openings will only be granted under exceptional circumstances following consultation with Funding Arrangement Managers. Submission of a request does not guarantee a system re-opening will be granted.

11.5 Flexible ways to transmit data

Users can transmit their data to the Data Exchange in one of three ways; system-to-system transfer, bulk file upload, or manual entry into the web-based portal. It is recommended to select one of these as the main transmission method for the longer term. However, in some circumstances, such as the period of initial transition into the Data Exchange, manual entry may need to be used in combination with another transmission method.

Digital ID is a safe, secure and convenient way for Australians to prove who they are online. You can also link your Digital ID to an Australian business to act on its behalf. Digital ID allows you to verify your identity, much like a digital version of a 100-point ID check.

Once set up your Digital ID, you can reuse it whenever you are asked to prove who you are to access a range of government online services for both personal and business matters. More information about Digital ID can be found on the [Data Exchange website](#).

At least one person within each organisation will need to complete and submit the Data Exchange User Access Request Form to have Org Administrator access to the Data Exchange. We recommend multiple employees of each organisation hold a Digital ID. The User Access form is on the [Data Exchange website](#).

NOTE: Digital ID is DSS' preferred way to log into DEX. To discuss other options for accessing DEX, please email the Data Exchange Helpdesk.

11.5.1 System-to-system transfers

Organisations with their own client management software systems capable of pushing data via web services through to the Data Exchange can continue using this software to collect and transfer their performance data. Organisations will need to make a one-off adjustment (or 'enhancement') to their application in accordance with the Data Exchange Web Service technical specifications. The technical specifications are updated periodically to reflect enhancements to the Data Exchange system and are on the [Data Exchange website](#).

11.5.2 Bulk File Upload

Organisations with their own client management software systems capable of creating and exporting XML files can continue using this software to collect and transfer their performance data. Organisations will need to make a one-off adjustment (or 'enhancement') to their application in accordance with the Data Exchange bulk upload technical specifications. The technical specifications are updated periodically to reflect enhancements to the Data Exchange system and are on the [Data Exchange website](#).

11.5.3 Free web-based portal

Organisations can use the Data Exchange web-based portal to manually input their data. Once saved in the portal, data is automatically submitted to the Data Exchange. The web-based portal can be used to directly input client data that is relevant to performance reporting. This option is available for organisations who do not have a system or whose systems cannot accommodate the requirements to submit data through system-to-system transfers or bulk file upload.

The Data Exchange web-based portal collects the data requirements set out in this document and is available to all organisations funded to deliver in-scope program activities.

Organisations that already have their own case/client management system and submit their data by system-to-system transfers or bulk upload can access the web-based portal to use the Data Exchange functionality. For example, organisations who report information (consistent with the priority requirements) via a system-to-system transfer or bulk upload, may also use the web-based portal to record SCORE information about changes to their client's circumstances, goals and outcomes (consistent with the extended data items in the partnership approach). This approach is useful where the functionality for recording and reporting the extended data items is not available within an organisation's existing client management system.

Organisations who choose to report using both their client management systems (i.e. via a system-to-system transfer or bulk upload) and the web-based portal are able to view the records of their clients from the web-based portal to monitor and manage the services they provide to these clients.

11.6 Organisations no longer reporting via the Data Exchange

Organisations that report performance data in the Data Exchange are able to receive self-service reports on the data submitted for that period. They will not be able to enter any additional data for a period that has closed or for any periods where they do not have an active funding agreement.

If an organisation is continuing to report on other active activities in the Data Exchange, they will have access to Data Exchange reports for all activities they are funded to deliver. Organisations retain access to the Data Exchange portal and self-service reports for at least one full reporting period (six months) after their last activity has ceased.

11.7 Training materials and help

Users of the Data Exchange web-based portal can access self-guided training material on the [Data Exchange website](#).

Task cards

Task cards take users step-by-step through the processes required to create and manage records in the Data Exchange web-based portal.

e-Learning modules

Users of the Data Exchange can also access a suite of training videos known as e-Learning modules. These videos are on the [Data Exchange website](#).

The Data Exchange Helpdesk

The Helpdesk is available to provide technical help to users of the Data Exchange.

You can email the [Data Exchange Helpdesk](#) or via their [online contact form](#).

12 List of data values.

Table 2. Priority requirements: client level data

Data Field	Protocols Section	Field Values
Client ID	5.4.2	Free text limit of 50 characters. If left blank a system generated number is assigned in the web-based portal, beginning at 001.
Given name	7.1.1	Free text limit of 30 characters
Family name	7.1.1	Free text limit of 30 characters
Pseudonym used	7.1.1	Tick box
Date of birth	7.1.2	Date format of dd/mm/yyyy
Estimated date of birth	7.1.2	Tick box
Gender	7.1.3	Man or male Woman or female Non-binary [I/They] use a different term (please specify) Not stated
Residential address	7.1.4	Residential address line 1 (optional) Address line 2 (optional) Suburb (mandatory) State (mandatory) Post code (limit of 4 digits) (mandatory)
Indigenous status	7.1.6	No Aboriginal Torres Strait Islander Aboriginal and Torres Strait Islander Not stated/inadequately described
Cultural and Linguistic Diversity: Country of Birth	7.1.7	Drop-down list of values based on the Australian Bureau of Statistics Standard Australian Classification of Countries (SACC), 2016
Cultural and Linguistic Diversity: Main language spoken at home	7.1.7	Drop-down list of values based on the Australian Bureau of Statistics Australian Standard Classification of Languages (ASCL), 2016

Data Field	Protocols Section	Field Values
Disability, impairment or condition indicator	7.1.8	Intellectual/learning Psychiatric Sensory/speech Physical/diverse None (no disability) Not stated/inadequately described
Consent to have personal information stored in the web-based portal	5.2.1	Tick box
Consent to participate in follow up research, surveys and evaluation	5.5	Tick box

Table 3. Priority requirements: case level data

Data Field	Protocols Section	Field Values
Case ID	7.2.1	Free text limit of 50 characters. If left blank a system generated number is assigned.
Outlet	4.5	In the web-based portal: to be selected from a list of options in the drop-down.
Program Activity	4.2	In the web-based portal: to be selected from a list of options in the drop-down. The drop-down will only display program activities that are assigned to the outlet selected.
Unidentified client count	3.6	Free text number only with limit of 999
Attach clients	3.2	In the web-based portal: to be selected from a list of options in the drop-down. The drop-down provides a mechanism to associate one or more client records to the case.

Table 4. Priority requirements: session level data

Data Field	Protocols Section	Field Values
Session ID	7.2.2	Free text limit of 50 characters. If left blank a system generated number is assigned.
Session date	7.2.2	Date format of dd/mm/yyyy
Unidentified clients attending this session (optional)	7.2.2	Number field. The default value is 0, maximum 999 (however cannot exceed the value specified at the Case level).
Client attendance	7.2.2	Record for each case clients present at the session.
Service type	7.2.2	The number and variety of service types will depend on the program activity selected. The full list of values relevant to the CHSP is in the CHSP Data Exchange Guide document on the Health website.

Table 5. Commonwealth Home Support Program client level data

Data Field	Protocols Section	Field Values
Accommodation setting	7.3.1	Boarding house Crisis, emergency or transition Independent living unit Indigenous community/settlement Institutional setting (i.e. residential aged care, hospital) Private residence—client or family owned/purchasing Private residence—private rental Private residence—public rental Public shelter Supported accommodation Other Not stated
Living arrangements	7.3.1	Single (person living alone) Sole parent with dependant(s) Couple Couple with dependant(s) Group (related adults) Group (unrelated adults) Homeless/no household Not stated or inadequately described

Data Field	Protocols Section	Field Values
DVA card status	7.3.1	DVA Gold Card DVA White Card DVA Orange Card or other No DVA entitlement
Existence of Carer	7.3.1	Yes No
Is the Client Registered for My Aged Care (MAC)?	7.3.1	Yes No
MAC ID	7.3.1	ID format of ACXXXXXXXX

Table 11. Commonwealth Home Support Program: session level data

Data Field	Protocols Section	Field Values
Amount of assistance provided	7.3.2	The information required for this field will depend on the service type selected. Go to the CHSP Data Exchange Guide on the Health website to determine which fields apply to each service type: - Hours/minutes - Quantity - Cost - Type
Fees charged	7.3.2	Number field (whole dollars only) appears where applicable
Home Modification Type	7.3.2	Toileting products Bathroom products Light fixtures Supporting rails and grab bars Construction elements in homes Vertical accessibility Safety equipment for homes and other premises Furniture for storage Mechanical products for operation and controlling devices Gate, door, window and curtain openers/closers Electronic products for operation and controlling devices

The following additional fields came into effect for CHSP funded organisations from 1 July 2026, released into Data Exchange production 11 August 2026.

Table 11a. Commonwealth Home Support Program: session level data 1 July 2026

Data Field	Protocols Section	Field Values
Session delivered by a sub-contractor	7.3.2	Yes No
Session Location	7.3.2	Home Community
Session includes overnight support	7.3.2	Yes No
Volunteer involved in direct service delivery	7.3.2	Yes No
Meals cooked offsite	7.3.2	Yes No
Meals provided during session	7.3.2	Yes No
Texture modified items	7.3.2	Yes No
Engagement time spent with client	7.3.2	Number field (whole minutes only) appears where applicable
Trip distance (km)	7.3.2	Number field (whole number only) appears where applicable
Trip travel time	7.3.2	Number field (whole minutes only) appears where applicable
Main meal	7.3.2	Number field (whole number only) appears where applicable
Light meal	7.3.2	Number field (whole number only) appears where applicable
Dessert	7.3.2	Number field (whole number only) appears where applicable
Beverage	7.3.2	Number field (whole number only) appears where applicable
Snack	7.3.2	Number field (whole number only) appears where applicable

Table 16. Partnership approach: client level data

Data Field	Protocols Section	Field Values
Homeless indicator	8.3.1	Yes No At Risk
Household composition	8.3	Single (person living alone) Sole parent with dependant(s) Couple Couple with dependant(s) Group (related adults) Group (unrelated adults) Homeless/No household Not stated or inadequately described
Highest level of education/qualification	8.3.2	Pre-primary education Primary education Secondary education Certificate level Advanced diploma and diploma level Bachelor's degree level Graduate diploma and graduate certificate level Postgraduate degree level Other education
Employment status	8.3	Paid work full-time Paid work part-time Unpaid work (includes volunteering) Not working and not looking for work Unemployed (not working but looking for work) Studying full-time Studying part-time Caring Parenting
Main source of income	8.3	Nil income Employee salary/wages Other income including superannuation and investments Self-employed (unincorporated business income) Government payments/pensions/allowances Not stated/Inadequately described

Data Field	Protocols Section	Field Values
Income frequency	8.3	Weekly Fortnightly Monthly Annually
Approximate gross income	8.3	Number field (whole dollars only)
Month of first arrival in Australia	8.3	Drop-down menu of twelve-month calendar year
Year of first arrival in Australia	8.3	Drop-down menu of year in chronological order
Visa type	8.3	Humanitarian Family Skilled Other
Ancestry	8.3.3	Select from the list of values which is based on the Australian Bureau of Statistics Australian Standard Classification of Cultural and Ethnic Groups (ASCCEG), 2016
Is client a carer	8.3.4	Yes No
NDIS eligibility	8.3	NDIS in-progress access request NDIS eligible NDIS ineligible

Table 17. Partnership approach: case level data

Data Field	Protocols Section	Field Values
Attendance profile	8.1	Family Community event Peer support group Couple Cohabitants

Data Field	Protocols Section	Field Values
Reason for seeking assistance	8.1.2	Physical health Mental health, wellbeing and self-care Personal and family safety Age-appropriate development Community participation and networks Family functioning Financial resilience Employment Education and skills training Material wellbeing and basic necessities Housing
Referral source	8.1.1	Health agency Community services agency Educational agency Internal Legal agency Employment/job placement agency Lender/financial agency Accounting agency Centrelink/Department of Human Services (DHS) Other Agency Self Family Friends General Medical Practitioner My Aged Care Gateway Linkages Package Continuity of Support (CoS) Programme Humanitarian Settlement Program LAC Referral NDIS referral Other party Not stated/inadequately described

Data Field	Protocols Section	Field Values
Client exit reason	8.1.3	Client no longer requires assistance Service unable to provide assistance Client now requires higher level of care Client has moved out of area Client terminated the service Client died Client no longer eligible Client needs have been met None of the above

Table 18. Partnership approach: session level data

Data Field	Protocols Section	Field Values
Service setting	8.2.1	Organisation outlet/office Clients' residence Community venue Partner organisation Telephone Video Online service Healthcare facility Education facility Justice facility
Interpreter present	8.2.2	Yes No
Referral type	8.2	Internal - made to another service offered within the same organisation External - made to a service that is provided by a different organisation

Data Field	Protocols Section	Field Values
Referral purpose	8.2	Physical health Mental health, wellbeing & self-care Personal and family safety Age-appropriate development Community participation & networks Financial Resilience Family functioning Employment Education and skills training Material wellbeing and basic necessities Housing Support to caring role Other

Version history

Version 2, Effective from 1 July 2026

DSS released version 2 to clarify reporting requirements for client-level data, explain privacy protocols in plain English and improve understanding of partnership approach data.

- **Chapter 1 – Introduction**
 - Outlines the benefits of DEX data collection and reporting
- **Chapter 2 – Data Exchange organisation and user responsibilities**
 - Requires organisations and users to comply with applicable legislation, including the Commonwealth *Privacy Act 1988*
- **Chapter 3 – Recording Client Level Data**
 - **Section 3.1** – Clarifies requirement for organisations to collect client-level data, noting aggregate data is not appropriate for CHSP service reporting.
 - **Section 3.2** – Clarifies definition of client within Data Exchange
 - **Section 3.5** - Definition of group session and requirements for collecting and reporting client-level data clarified
 - **Section 3.6** - Clarifies circumstances in which unidentified clients may be reported.
- **Chapter 4 – Linking client data to service delivery**
 - Updates throughout to align with the standard DEX protocols information.
 - **Section 4.6.1** – Clarification of reporting requirements when non-CHSP grant funds are used in delivering CHSP services.
- **Chapter 5 - Protecting a client's personal information**
 - Split into two chapters to better articulate between collecting personal information under the Privacy Act 1988 and the collection of MAC IDs under the Aged Care Act 2024.
 - Updates throughout aim to explain privacy protocols in plain English. Reordering of sections to improve flow.
 - **Section 5.4.2** – Clarified that the Client Id should not contain identifying information, such as the My Aged Care Id
 - **Section 5.5** – Clarified consent requirements for follow up research
- **Chapter 6 - Mandatory collection of clients My Aged Care ID**
 - New Chapter created to clarify requirements for the collection of MAC IDs under the Aged Care Act 2024.
 - Updates throughout aim to explain privacy protocols in plain English. Reordering of sections to improve flow.
 - **Section 6.3** – Updated CHSP Specific Privacy Notice and CHSP Alternative Privacy Notice
- **Chapter 7 – Collecting the priority requirements**
 - Content moved from Chapter 6 to accommodate new chapter on MAC ID
 - Updates throughout to align with the standard DEX protocols information.
 - **Section 7.2.1** – Clarified that the Case ID should not contain identifying information, such as the My Aged Care ID
 - **Section 7.3** – Updated to include additional CHSP detail requirements as part of Stage 2 and 3 of the CHSP DEX changes required for the 2025 2027 CHSP Grant Agreement).
- **Chapter 8 – Collecting partnership approach data**
 - Content moved from Chapter 7 to accommodate new chapter on MAC ID
 - Expanded chapter to include details of partnership approach data items that are relevant to CHSP should a funded organisations wish to report them for access to the additional report set.
- **Chapter 9 – Program specific surveys**
 - Chapter reinstated to align with standard DEX Protocols.
- **Chapter 10 – Data Exchange reports**
 - Content moved from Chapter 8 to accommodate new chapters.
- **Chapter 11 – Administrative matters**
 - Content moved from Chapter 9 to accommodate new chapters.
 - Updates throughout to align with the standard DEX protocols information.
- **Chapter 12 – List of data values**
 - Updated Table 5 to include MAC ID fields

Version 1

DSS released version 1 of the CHSP Protocols in July 2025 to advise funded providers of CHSP activities of requirements specific to their program including:

- The requirement to collect My Aged Care IDs from their clients.
- Notification requirements for the Mandatory collection of My Aged Care IDs
- Clarify the requirements around conditional on consent storage of personal information (other than My Aged Care ID) in DEX.