# 10 Primary and community health

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### Attachment tables

Attachment tables are identified in references throughout this chapter by a '10A' prefix (for example, table 10A.1) and are available on the website www.pc.gov.au/rogs/2017.

This chapter reports on the performance of primary and community health services which include general practice, pharmaceutical services, dentistry, allied health services, maternal and child health, alcohol and other drug treatment and other services. This chapter does not include:

- public hospital emergency departments and outpatient services (reported in chapter 12, 'Public hospitals')
- community mental health services (reported in chapter 13, 'Mental health management')
- Home and Community Care program services (reported in chapter 14, 'Aged care' and chapter 15, 'Services for people with disability').

All abbreviations used in this Report are available in a complete list in volume A: Approach to performance reporting.

#### 10.1 Profile of primary and community health

# Roles and responsibilities

The primary and community health sector is the most frequently used part of Australia's healthcare system. Primary and community healthcare services are delivered by a range of health and allied health professionals in various private, not-for-profit and government service settings. Definitions for common health terms are provided in section 10.4.

### General practice

General practice is a major provider of primary healthcare in Australia. General Practice services include preventative care and the diagnosis and treatment of illness and injury, through direct service provision and/or referral to acute (hospital) or other healthcare services, as appropriate.

The Australian Government provides the majority of general practice income, through DHS Medicare — mainly as fee-for-service payments via the Medicare Benefits Schedule (MBS) — and the Department of Veterans Affairs (DVA). Additional Australian Government funding is provided to influence the supply, regional distribution and quality of general practice services, through initiatives such as the Practice Incentives Program (PIP) and Primary Health Networks (PHNs) (Australian Government DHS 2015). State and Territory governments also provide some funding for such programs, particularly in relation to regional distribution of general practices (to influence the availability of GPs in rural and remote areas). The remainder comes mainly from insurance schemes and patient contributions.

### Pharmaceutical services

The Australian Government funded Pharmaceutical Benefits Scheme (PBS) aims to provide affordable, reliable and timely access to prescription medicines for all Australians. Around 80 per cent of prescription medicines are subsidised through the PBS (Department of Health 2010). Users make a co-payment and the Australian Government pays the remaining cost of medicines eligible for the subsidy (Department of Health 2016). Co-payments are subject to a safety net threshold.

The Repatriation Pharmaceutical Benefits Scheme (RPBS) provides subsidised pharmaceutical medicines, dressings and other items to war veterans and war widows. The RPBS is administered by the DVA.

### Dental services

Australia has a mixed system of public and private dental healthcare. State and Territory governments have the main responsibility for funding and delivery of major public dental programs, with public dental services primarily available to children and disadvantaged adults. The private sector receives funding to provide some public dental services, from the Australian Government through the DVA and the Dental Benefits Schedule, and from State and Territory governments through dental voucher systems. The Australian Government also supports private dental services through the private health insurance rebate.

#### Allied health services

Allied health services include, but are not limited to, physiotherapy, psychology, occupational therapy, audiology, podiatry and osteopathy. They are delivered mainly in the private sector. Some government funding of private allied health services is provided through insurance schemes and the private health insurance rebate. The Australian Government makes some allied health services available under the MBS to patients with particular needs — for example, people with chronic conditions and complex care needs. Employment data for occupational therapists and psychologists working in the public sector are presented in table 10A.26.

# Community health services

Community health services generally comprise multidisciplinary teams of health and allied health professionals and aim to protect the health of people who experience barriers that impede access to private sector primary and community health services. Governments (including local governments) provide services directly or indirectly through funding of service provision by a local health service or community organisation. There is no national strategy for community health services and there is considerable variation in the services provided across jurisdictions.

State and Territory governments are responsible for most community health services. Those serving Aboriginal and Torres Strait Islander communities are mainly the responsibility of the Australian Government (State and Territory governments provide some funding).

# Maternal and child health

Maternal and child health services are funded by State and Territory governments. They provide services including: parenting support (including antenatal and postnatal programs); early childhood nursing programs; disease prevention programs (including childhood immunisations); and early intervention and treatment programs related to child development and health. Some jurisdictions also provide specialist programs through child health services, including hearing screening programs, and mothers and babies residential programs.

# Alcohol and other drug treatment

Alcohol and other drug treatment activities range from a brief intervention to long-term residential treatment. Types of treatment include detoxification, pharmacological treatment, counselling and rehabilitation.

# **Funding**

In 2014-15, government recurrent expenditure on primary and community health services (excluding public health) was \$29.9 billion, of which State, Territory and local governments provided 23.9 per cent and the Australian Government 76.1 per cent (table 10.1).

Table 10.1 Estimated funding on primary healthcare, 2014-15 (\$ million)a,

	Australian Government				_			
	DVA	Department of Health and other	Premium rebates	Total	State, Territory and local government	Total government	Non- government	Total government and non- government
Unreferred medical services	840	8 376		9 216		9 216	1 814	11 031
Dental services	96	788	681	1 565	713	2 279	7 285	9 564
Other health practitioners	235	1 355	317	1 907	8	1 915	3 638	5 552
Community health and other	1	1 242	-	1 243	6 419	7 662	469	8 131
Benefit-paid medications	363	7 899		8 262		8 262	1 513	9 775
All other medications		566	19	585		585	9 459	10 044
Total	1 535	20 226	1 017	22 778	7 140	29 919	24 178	54 097

a See table 10A.1 for detailed footnotes and caveats. b Totals may not add due to rounding. - Nil or rounded to zero. .. Not applicable.

Source: AIHW (Australian Institute of Health and Welfare) (2016), Health Expenditure Australia 2014-15, Cat. no. HWE 67; table 10A.1.

# General practice

Australian Government total expenditure on general practice in 2015-16 was \$8.7 billion, or \$365 per person (table 10A.2), of which 93.4 per cent was fee-for-service expenditure through DHS Medicare and the DVA.

State and Territory governments contribute funding to general practice mainly through support programs such as assistance with housing and relocation, education programs and employment assistance for spouses and family members of doctors in rural areas. Non-government sources also contribute through insurance schemes (such as, workers compensation and third party insurance) and private individuals.

### Pharmaceutical services

Australian Government expenditure through the PBS and RPBS on prescription medicines filled at pharmacies was around \$8.3 billion in 2015-16 (tables 10A.3-4) - 96.2 per cent through the PBS. PBS expenditure per person was \$332, representing a continued decrease from the 10-year peak in 2009-10 (table 10A.3). The proportion of PBS expenditure that is concessional fell from 80.4 to 76.0 per cent in the period 2006-07 to 2015-16 (table 10A.3).

The Australian Government separately funds the supply of PBS medicines to Aboriginal and Torres Strait Islander primary healthcare services in remote and very remote areas. In 2015-16, this was \$27.9 million down from \$30.1 million in 2014-15 (table 10A.5).

#### Dental services

Australian Government expenditure on dental services was \$1.6 billion in 2014-15, of which 56.5 per cent was through DVA and the Department of Health, and 43.5 per cent through private health insurance premium rebates (tables 10.1 and 10A.1). State, Territory and local government expenditure on dental services was \$713 million in 2014-15. Dental expenditure data by State and Territory are provided in table 10A.6.

### Community health services

In 2014-15, government expenditure on community health services was \$7.6 billion, of which State, Territory and local governments provided 83.8 per cent and the Australian Government 16.2 per cent (tables 10.1 and 10A.1). Australian Government expenditure on Aboriginal and Torres Strait Islander primary health care services was \$603.4 million in 2015-16 (table 10A.7).

# Size and scope

# General practice

There were 34 605 GPs — 23 170 on a Full Service Equivalent (FSE) basis — billing Medicare Australia for around 153.5 million services, in 2015-16 (Department of Health and DVA unpublished; see section 10.4 for a definition of FSE). This equated to 96.8 FSE GPs per 100 000 people delivering around 6416 services per 1000 population. Nationally, rates have increased from 2011-12 to 2015-16, for GP availability and services provided (figures 10.1 and 10.2).

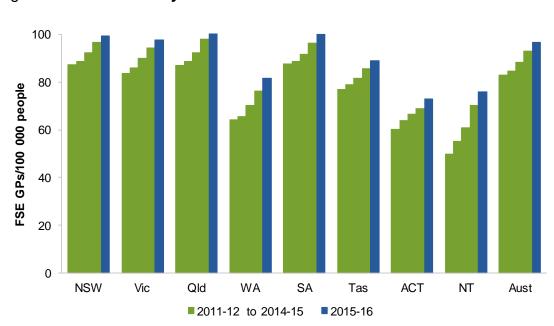


Figure 10.1 Availability of GPs<sup>a</sup>

Source: Department of Health (unpublished) MBS Statistics; table 10A.8.

a See table 10A.8 for detailed footnotes and caveats.

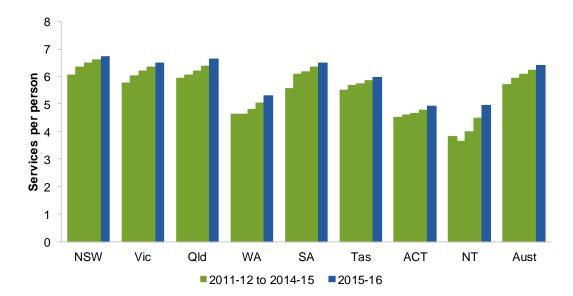


Figure 10.2 GP type service usea

Source: Department of Health (unpublished) MBS Statistics; DVA (unpublished) DVA data collection; ABS (unpublished) Australian demographic statistics, Cat. no. 3101.0; table 10A.9.

# Pharmaceutical Benefits Scheme and Repatriation Pharmaceutical Benefits Scheme

Around 208 million services — 91.7 per cent of which were concessional — were provided under the PBS in 2015-16, equating to 8.7 per person (tables 10A.10-11). A further 10.5 million services were provided under the RPBS in the same period.

### Public dental services

Nationally, 97.8 per 1000 people accessed public dental services in 2013. Of these, around 23 per cent accessed emergency services (AIHW, unpublished).

### Community health services

There is no national data collection for community health services other than Aboriginal and Torres Strait Islander primary health care services. In 2014-15, there were 203 Aboriginal and Torres Strait Islander primary healthcare services with 45.8 per cent located in remote or very remote areas (table 10A.14). Of the 3.5 million episodes of healthcare provided, 45.6 per cent were provided in remote or very remote areas (table 10A.14). Staffing numbers are reported in table 10A.17.

a See table 10A.9 for detailed footnotes and caveats.

# Alcohol and other drug treatment services

Data for a total of 843 alcohol and other drug treatment agencies were reported for 2014-15, with 41.8 per cent identified as government providers (table 10A.12). There were 170 367 reported closed treatment episodes in 2014-15 (table 10A.12) (see section 10.4 for a definition of a closed treatment episode).

# 10.2 Framework of performance indicators

The performance indicator framework is based on common objectives for primary and community health (box 10.1).

# Box 10.1 **Objectives for primary and community health**

Primary and community health services aim to promote health and prevent illness, and to manage illness and injury effectively in the community, by providing universal access to primary healthcare that is:

- · timely, affordable and accessible
- appropriate and responsive to meet the needs of individuals throughout their lifespan and communities
- high quality and safe
- well co-ordinated to ensure continuity of care where more than one service type, and/or ongoing service provision is required
- sustainable in terms of workforce, infrastructure, innovation and capacity to respond to emerging needs.

Governments aim for primary and community health services to meet these objectives in an equitable and efficient manner.

The performance indicator framework provides information on equity, efficiency and effectiveness, and distinguishes the outputs and outcomes of primary and community health services (figure 10.3). The performance indicator framework shows which data are complete and comparable in the 2017 Report.

For data that are not considered directly comparable, text includes relevant caveats and supporting commentary. Chapter 1 discusses data comparability, data completeness and information on data quality from a Report wide perspective.

In addition to section 10.1, the Report's statistical context chapter (chapter 2) contains data that may assist in interpreting the performance indicators in this chapter.

Improvements to performance reporting for Primary and Community Health are ongoing and will include identifying indicators to fill gaps in reporting against key objectives, improving the comparability and completeness of data and reviewing proxy indicators to see if more direct measures can be developed.

Availability of PBS medicines Equity of access to **GPs** Availability of public Access Equity Early detection and early treatment for Aboriginal and Child Torres Strait Islander immunisation **Australians** coverage Developmental health Objectives checks Notifications of selected childhood diseases inancial barriers to Access Participation PBS medicines PERFORMANCE for women in breast cancer Public dentistry screening waiting times Effectiveness Chronic disease Participation for women in Appropriateness cervical Use of pathology tests screening and diagnostic imaging Influenza vaccination registration coverage for older people General practices with Safety accreditation Electronic health information systems Quality Responsiveness Patient satisfaction Continuity of chronic Continuity disease management Sustainability Efficiency Cost to government of person Key to indicators\* Outputs Outcomes Text Most recent data for all measures are comparable and complete Most recent data for at least one measure are comparable and complete Most recent data for all measures are either not comparable and/or not complete Text No data reported and/or no measures yet developed

Figure 10.3 Primary and community health performance indicator framework

<sup>\*</sup> A description of the comparability and completeness of each measure is provided in indicator interpretation boxes within the chapter

# 10.3 Key performance indicator results

Different delivery contexts, locations and client factors may affect the equity, effectiveness and efficiency of primary and community health services.

# **Outputs**

Outputs are the services delivered (while outcomes are the impact of these services on the status of an individual or group) (see chapter 1). Output information is also critical for equitable, efficient and effective management of government services.

# **Equity**

Access — Availability of PBS medicines

'Availability of PBS medicines' is an indicator of governments' objective to provide access to PBS medicines in an equitable manner (box 10.2).

# Box 10.2 Availability of PBS medicines

'Availability of PBS medicines' is defined by three measures:

- Access to PBS medicines by region, defined as the ABS census population divided by the number of approved providers of PBS medicines, by Pharmacy Access/Remoteness Index of Australia (PhARIA) area
- PBS expenditure per person by region, defined as expenditure on PBS medicines, divided by the ABS estimated resident population (ERP), in urban and rural regions
- Proportion of PBS prescriptions filled at a concessional rate, defined as the number of PBS
  prescriptions filled at a concessional rate, divided by the total number of prescriptions filled.

Care should be taken in interpreting results. For all three measures, a low or decreasing proportion may indicate improved availability of PBS medicines/prescriptions filled. It is also important that there are not large discrepancies by region in these measures.

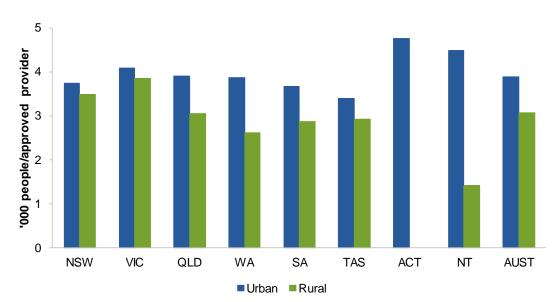
This indicator does not provide information on whether the services are appropriate for the needs of the people receiving them.

Data reported for this indicator are:

- · comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required data are available
  for all jurisdictions for 2016 for the Access to PBS medicines by region measure and for
  2015-16 for the other two measures.

Across Australia in the period 2012 to 2016, the number of people per pharmacy decreased in urban areas (from 4082 to 3884) and rural areas (from 4148 to 3615) (table 10A.19).

Taking into account the 19 medical practitioners and 162 Aboriginal and Torres Strait Islander primary health care services also approved to provide PBS medicines to the community in remote/very remote areas, there were 3065 people per PBS approved provider in rural areas in 2016 (figure 10.4 and table 10A.18). Nationally, PBS expenditure per person was highest in inner regional areas and lowest in remote/very remote areas (table 10A.20).



People per approved PBS provider, 2016a, b Figure 10.4

Source: Department of Health (unpublished) derived from DHS Medicare, ABS (unpublished) 2011 Census of Population and Housing and the University of Adelaide's Australian Population and Migration Research Centre; table 10A.18.

# Access — Equity of access to GPs

'Equity of access to GPs' is an indicator of governments' objective to provide access to primary healthcare services in an equitable manner (box 10.3).

<sup>&</sup>lt;sup>a</sup> See box 10.2 and table 10A.18 for detailed definitions, footnotes and caveats. <sup>b</sup> The ACT has no rural areas under the classification used.

# Box 10.3 Equity of access to GPs

Equity of access to GPs' is defined by two measures:

- Availability of GPs by region, defined as the number of FSE GPs per 100 000 people, by region
- Availability of GPs by sex, defined as the number of FSE GPs per 100 000 population, by sex.

High or increasing availability of GPs can indicate improved access to GP services. Low availability of GPs by region can be associated with an increase in distance travelled and waiting times to see a GP, and increased difficulty in booking long consultations. Reduced competition for patients can also reduce bulk billing rates.

High or increasing availability of GPs of each sex means it is more likely that patients who prefer to visit GPs of their own sex will have their preference met. Low availability of GPs of each sex can be associated with increased waiting times to see a GP, for patients who prefer to visit GPs of their own sex.

This indicator does not provide information on whether people are accessing GP services or whether the services are appropriate for the needs of the people receiving them.

Data reported for this indicator are:

- comparable (subject to caveats) across jurisdictions and over time for both measures, but a
  break in time series means that data from 2012-13 onwards are not comparable to data for
  the 'Availability of GPs by region' measure
- complete (subject to caveats) for the current reporting period. All required 2015-16 data are available for all jurisdictions.

In most jurisdictions in 2015-16, there were more FSE GPs per 100 000 people available in major cities and inner regional areas than in outer regional, remote and very remote areas (figure 10.5). The bulk-billed proportion of non-referred attendances was higher in very remote areas than in major cities, where the proportion was in turn higher than in all other areas (table 10A.32).

In 2015-16, 36.2 per cent of Australia's FSE GPs were female (table 10A.22). There were 69.6 FSE female GPs per 100 000 females and 124.3 FSE male GPs per 100 000 males in 2015-16 (figure 10.6).

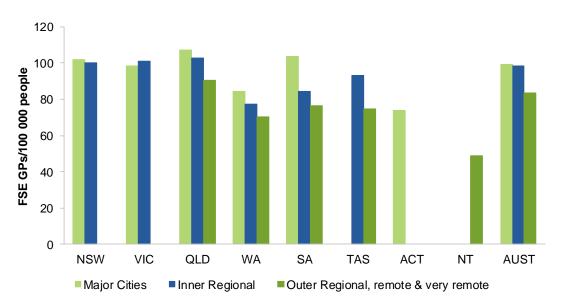


Figure 10.5 Availability of GPs by region, 2015-16<sup>a, b</sup>

Source: Department of Health (unpublished) MBS Statistics; table 10A.21.

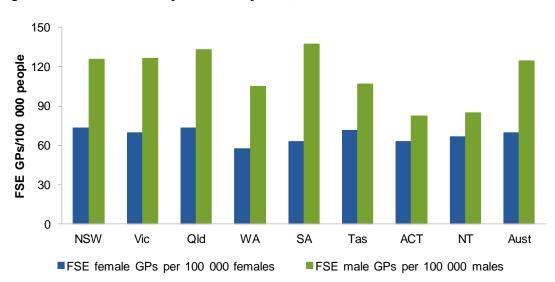


Figure 10.6 Availability of GPs by sex, 2015-16<sup>a, b</sup>

<sup>a</sup> See box 10.3 and tables 10A.22 and 10A.23 for detailed definitions, footnotes and caveats. <sup>b</sup> There are no major cities in Tasmania; no outer regional or remote areas in the ACT; no major cities or inner regional areas in the NT. Major cities and inner regional areas are combined for the ACT.

Source: Department of Health (unpublished) MBS Statistics; tables 10A.22 and 10A.23.

<sup>&</sup>lt;sup>a</sup> See box 10.3 and table 10A.21 for detailed definitions, footnotes and caveats. <sup>b</sup> There are no major cities in Tasmania; no outer regional or remote areas in the ACT; no major cities or inner regional areas in the NT. Major cities and inner regional areas are combined for the ACT.

# Access - Availability of public dentists

'Availability of public dentists' is an indicator of governments' objective to provide access to dental services in an equitable manner (box 10.4).

# Box 10.4 Availability of public dentists

'Availability of public dentists' is defined as the number of full time equivalent (FTE) public dentists per 100 000 people by region, based on clinical hours worked in the public sector.

High or increasing availability of public dentists can indicate improved access to public dental services. The availability of public dentists by region may affect people's access to public dental services, particularly in rural and remote areas. Low availability can result in increased travel distance to a dentist and increased waiting times to see a dentist.

This indicator does not provide information on whether people are accessing the service or whether the services are appropriate for the needs of the people receiving them.

Data reported for this indicator are:

- comparable (subject to caveats) across jurisdictions but a break in series means that data for 2014 are not comparable to data for 2013 and previous years
- complete (subject to caveats) for the current reporting period. All required 2014 data are available for all jurisdictions.

Nationally in 2014, there were 6.6 FTE public dentists per 100 000 people (figure 10.7). Data for FTE dental hygienists and dental therapists are presented in table 10A.25.

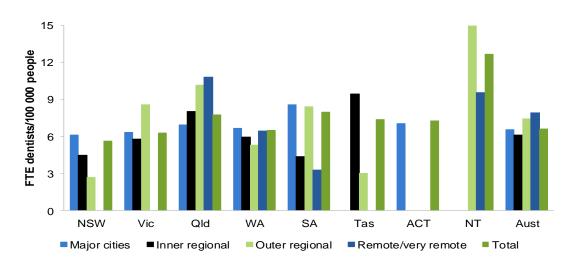


Figure 10.7 Availability of public dentists, 2014<sup>a, b</sup>

Source: AIHW (unpublished) National Health Workforce Data Set; table 10A.24.

<sup>&</sup>lt;sup>a</sup> See box 10.4 and table 10A.24 for detailed definitions, footnotes and caveats. <sup>b</sup> There were no public dentists in remote or very remote areas in Victoria. Tasmania has no major cities. The ACT has no outer regional, remote or very remote areas. The NT has no major cities or inner regional areas.

# Access – Early detection and early treatment for Aboriginal and Torres Strait Islander Australians

'Early detection and early treatment for Aboriginal and Torres Strait Islander Australians' is an indicator of governments' objective to provide access to primary and community healthcare in an equitable manner (box 10.5).

#### Box 10.5 Early detection and early treatment for Aboriginal and Torres Strait Islander Australians

Three measures of early detection and early treatment for Aboriginal and Torres Strait Islander Australians are reported:

- Proportion of older people who received a health assessment under DHS Medicare by Indigenous status
  - older people are defined as Aboriginal and Torres Strait Islander Australians aged 55 years or over and other Australians aged 75 years or over, excluding hospital inpatients and people living in aged care facilities
  - health assessments are MBS items that allow comprehensive examinations of patient health, including physical, psychological and social functioning
- Proportion of older Aboriginal and Torres Strait Islander Australians who received a health assessment under DHS Medicare in successive years of a five-year period
- · Proportion of Aboriginal and Torres Strait Islander Australians who received a health assessment or check under DHS Medicare by age group — health assessment/checks are available for Aboriginal and Torres Strait Islander children (0-14 years), adults (15-54 years) and older people (55 years or over).

A low or decreasing gap between the proportion of Aboriginal and Torres Strait Islander and other Australians who received a health assessment can indicate more equitable access to early detection and early treatment services for Aboriginal and Torres Strait Islander Australians. An increase over time in the proportion of older Aboriginal and Torres Strait Islander Australians who received a health assessment is desirable as it indicates improved access to these services. A low or decreasing gap between the proportion of Aboriginal and Torres Strait Islander Australians in different age groups who received a health assessment/check can indicate more equitable access to early detection and treatment services within the Aboriginal and Torres Strait Islander population.

This indicator provides no information about health assessments provided outside DHS Medicare (predominantly used by Aboriginal and Torres Strait Islander people in remote and very remote areas). Accordingly, this indicator understates the proportion of Aboriginal and Torres Strait Islander people who received early detection and early treatment services.

Data reported for this indicator are:

- comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required 2015-16 data are available for all jurisdictions.

Nationally in 2015-16, the proportion of older people receiving a health assessment was 35.5 per cent for Aboriginal and Torres Strait Islander people and 31.9 per cent for other Australians (figure 10.8).

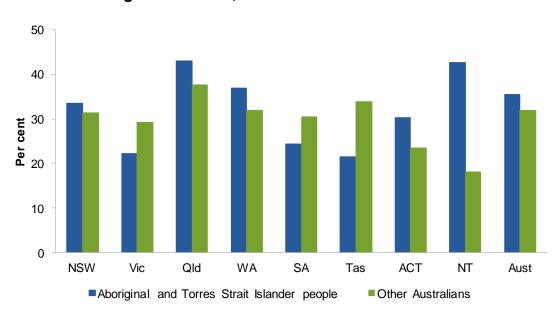


Figure 10.8 Older people who received a health assessment by Indigenous status, 2015-16<sup>a</sup>

Source: Derived from Department of Health (unpublished) MBS Statistics, ABS (2014) Experimental estimates and projections, Aboriginal and Torres Strait Islander Australians 2001 to 2026, Cat. no. 3238.0; ABS (various years) Australian demographic statistics, Cat. no. 3101.0; table 10A.27.

Nationally, over the five years to 2015-16, the proportion of older Aboriginal and Torres Strait Islander people who received an annual health assessment increased by 13.5 percentage points to 35.5 per cent, compared to an increase of 4.4 percentage points to 32 per cent for all older Australians (albeit from a lower base) (table 10A.27). Time series data for Aboriginal and Torres Strait Islander people are presented in table 10A.28 and for all Australians in table 10A.30.

The proportion of the eligible Aboriginal and Torres Strait Islander population who received a health assessment or check in 2015-16 was highest for older people in all jurisdictions, and lowest for children aged 0–14 years in most jurisdictions (table 10A.29).

### Access – Developmental health checks

'Developmental health checks' is an indicator of governments' objective to provide access to early detection and intervention services for children in an equitable manner (box 10.6).

<sup>&</sup>lt;sup>a</sup> See box 10.5 and table 10A.27 for detailed definitions, footnotes and caveats.

# Box 10.6 **Developmental health checks**

'Developmental health checks' is defined as the proportion of children who received a fourth year developmental health assessment under DHS Medicare, by health assessment type.

A high or increasing proportion of children receiving a fourth year developmental health assessment is desirable as it suggests improved access to these services.

The 'Healthy Kids Check' MBS health assessment item is available to all children aged 3 or 4 years, while the 'Aboriginal and Torres Strait Islander Peoples Health Assessment' item is available to Aboriginal and Torres Strait Islander people of all ages. The proportion of Aboriginal and Torres Strait Islander children aged 3 to 5 years who received the Aboriginal and Torres Strait Islander Peoples Health Assessment is reported as a proxy for the proportion of Aboriginal and Torres Strait Islander children who received a fourth year developmental health assessment. The proportion of other children who received either a Healthy Kids Check (at the age of 3 or 4 years), or a Health assessment at the age of 5 years, is reported as a proxy for the proportion of other children who received a fourth year developmental health assessment. Children are counted once only.

Fourth year developmental health assessments are intended to assess children's physical health, general wellbeing and development. Early identification provides the opportunity for timely prevention and intervention measures that can ensure children are healthy, fit and ready to learn when they start schooling.

This indicator provides no information about developmental health checks for children that are provided outside DHS Medicare, as comparable data for such services are not available for all jurisdictions. Accordingly, this indicator understates the proportion of children who receive a fourth year developmental health check.

Data reported for this indicator are:

- comparable (subject to caveats) across jurisdictions but a break in series means that data from 2012-13 onwards are not comparable to data for previous years
- · not available for the current reporting period.

Updated data were not available for the 2017 Report. The Healthy Kids Check service was removed from the MBS, effective from 1 November 2015. Historic data are reported in table 10A.31.

### **Effectiveness**

Access – Effectiveness of access to GPs

'Effectiveness of access to GPs' is an indicator of governments' objective to provide timely, affordable and accessible primary healthcare services (box 10.7).

### Box 10.7 Effectiveness of access to GPs

Four measures of effectiveness of access to GPs are reported:

- Bulk billing rates, defined as the proportion of non-referred attendances by GPs and practice nurses that were bulk billed.
- People deferring visits to GPs due to cost, defined as the proportion of people who delayed seeing or did not see a GP at any time in the previous 12 months due to cost.
- GP waiting times, defined as the proportion of people who, in the previous 12 months, saw a GP for urgent medical care within specified times from making the appointment. Specified waiting time categories are: less than 4 hours; 4 to less than 24 hours; 24 hours or more.
- Potentially avoidable presentations to emergency departments (interim measure), defined as the number of selected 'GP-type presentations' to emergency departments, where selected GP-type presentations are emergency presentations:
  - allocated to triage category 4 (semi-urgent) or 5 (non-urgent)
  - not arriving by ambulance, with police or corrections
  - not admitted or referred to another hospital
  - who did not die.

#### For the first three measures above:

- A high or increasing bulk billing rate can indicate more affordable access to GP services.
   This measure does not provide information on whether the services are appropriate for the needs of the people receiving them.
- A low or decreasing proportion of people deferring visits to GPs due to financial barriers indicates more widely affordable access to GPs.
- A high or increasing proportion of people who saw a GP within 4 hours for urgent medical care indicates more timely access to GPs.

Data reported for these three measures are:

- comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required 2015-16 data are available for all jurisdictions.

The Patient Experience Survey does not include people living in discrete Indigenous communities, which affects the comparability of the NT results for the measures people deferring visits to GPs due to financial barriers and GP waiting times.

Potentially avoidable presentations to emergency departments (fourth measure) are presentations for conditions that could be appropriately managed in the primary and community health sector. In some cases, this can be determined only retrospectively and presentation to an emergency department is appropriate. A low or decreasing proportion of potentially avoidable presentations to emergency departments can indicate better access to primary and community health care.

Data reported for this measure are:

- comparable (subject to caveats) within some jurisdictions over time but not comparable within other jurisdictions over time or across jurisdictions (see caveats in attachment tables for specific jurisdictions)
- complete (subject to caveats) for the current reporting period. All required 2015-16 data are available for all jurisdictions.

# Effectiveness of access to GPs — bulk billing rates

Where bulk billing is used, patients incur no out-of-pocket expense and, for most GP services, the GP receives the full Schedule fee from DHS Medicare. Nationally in 2015-16, 85.4 per cent of non-referred attendances were bulk billed, with the proportion highest in very remote areas and lowest in inner regional, outer regional and remote areas (table 10A.32). Non-referred attendances for children under 16 years and older people were bulk billed at higher rates than people aged 16 to 64 years in 2015-16 (table 10A.33) For most states and territories, the proportion increased from 2011-12 to 2015-16 (figure 10.9).

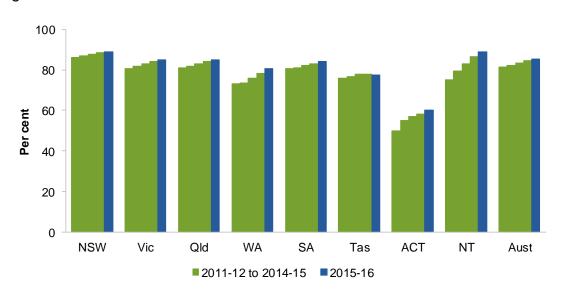


Figure 10.9 GP visits that were bulk billeda

Effectiveness of access to GPs — people deferring visits to GPs due to financial barriers

Nationally in 2015-16, 4.1 per cent of the population reported that they delayed or did not visit a GP in the previous 12 months because of cost (figure 10.10). Data for Aboriginal and Torres Strait Islander Australians are sourced from a different data collection to the data for the general population and are not directly comparable (table 10A.35).

<sup>&</sup>lt;sup>a</sup> See box 10.7 and table 10A.33 for detailed definitions, footnotes and caveats.
Source: Department of Health (unpublished) MBS Statistics; table 10A.33.

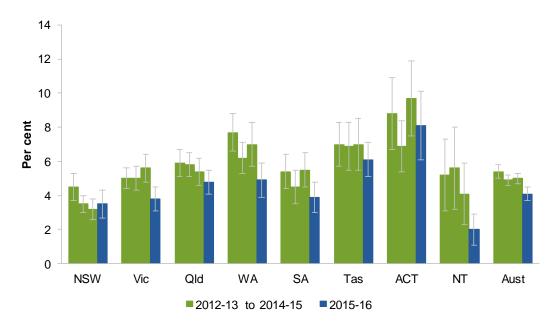


Figure 10.10 People deferring visits to GPs due to costa, b

Source: ABS (unpublished) Patient Experience Survey (various years), Cat. no. 4839.0; table 10A.34.

# Effectiveness of access to GPs — GP waiting times

Nationally in 2015-16, for people who saw a GP for urgent care:

- 63.6 per cent waited less than 4 hours
- 11.9 per cent waited from 4 to less than 24 hours
- 24.5 per cent waited for 24 hours or more (table 10A.36).

Overall, 18.9 per cent of people who saw a GP for any reason waited longer than they felt was acceptable to get an appointment (table 10A.37).

# Effectiveness of access to GPs — GP-type presentations to emergency departments

Factors contributing to GP-type presentations at emergency departments include perceived or actual lack of access to GP services, the proximity of emergency departments and trust in emergency department staff. Nationally, there were around 2.8 million GP-type presentations to public hospital emergency departments in 2015-16 (table 10A.38).

<sup>&</sup>lt;sup>a</sup> See box 10.7 and table 10A.34 for detailed definitions, footnotes and caveats. 
<sup>b</sup> Error bars represent the 95 per cent confidence interval associated with each point estimate.

### Access – Financial barriers to PBS medicines

'Financial barriers to PBS medicines' is an indicator of governments' objective to ensure access to prescribed medicines is affordable and accessible (box 10.8).

#### Box 10.8 Financial barriers to PBS medicines

'Financial barriers to PBS medicines' is defined as the proportion of people who delayed getting or did not get a prescription filled at any time in the previous 12 months due to cost.

A low or decreasing proportion of people deferring treatment due to financial barriers indicates more widely affordable access to medications.

Data reported for this indicator are:

- comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required 2015-16 data are available for all jurisdictions.

The PExS does not include people living in discrete Aboriginal and Torres Strait Islander communities, which affects the comparability of the NT results. Data for Aboriginal and Torres Strait Islander Australians are sourced from a different data collection to the data for the general population and are not directly comparable.

Nationally in 2015-16, 7.6 per cent of respondents delayed or did not purchase prescribed medicines due to cost in the previous 12 month period (figure 10.11). Data for Aboriginal and Torres Strait Islander Australians are presented in table 10A.40. These data are sourced from a different data collection to the data for the general population and are not directly comparable.

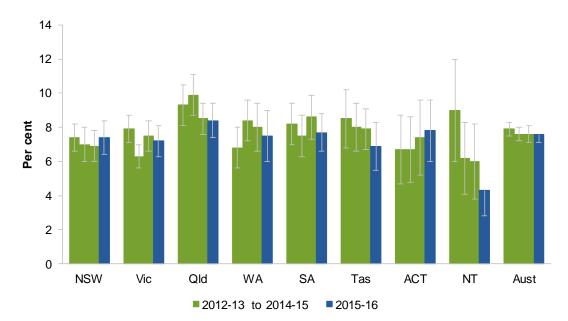


Figure 10.11 People deferring buying prescribed medicines due to costa, b

Source: ABS (unpublished) Patient Experience Survey (various years), Cat. no. 4839.0; table 10A.39.

# Access – Public dentistry waiting times

'Public dentistry waiting times' is an indicator of governments' objective to ensure timely access to public dental services for eligible people (box 10.9).

### Box 10.9 **Public dentistry waiting times**

'Public dentistry waiting times' is defined as the median time waited between being placed on a public dentistry waiting list and receiving dental care (or, if data not available, being offered dental care).

A shorter median time waited to see a dental professional indicates more timely access to public dental services.

Data reported for this indicator are:

- comparable (subject to caveats) within jurisdictions over time but are not comparable across jurisdictions
- incomplete for the current reporting period. All required 2015-16 data were not available for NSW and the NT.

Data for the median time waited by people on a public dental waiting list are presented for states and territories in tables 10A.41–48.

<sup>&</sup>lt;sup>a</sup> See box 10.8 and table 10A.39 for detailed definitions, footnotes and caveats. <sup>b</sup> Error bars represent the 95 per cent confidence interval associated with each point estimate.

# Appropriateness – Chronic disease management

'Chronic disease management' is an indicator of governments' objective to ensure that management of chronic disease is appropriate and responsive to individual needs (box 10.10).

# Box 10.10 Chronic disease management

'Chronic disease management' is defined by three measures:

- Management of diabetes PIP diabetes incentive, defined as the proportion of general practices enrolled in the PIP that are registered for the PIP diabetes incentive
- Management of diabetes HbA1c, defined as the proportion of people with diabetes with HbA1c (glycosolated haemoglobin) below 7 per cent (the number of people with diabetes with HbA1c below 7 per cent, divided by the estimated number of people with diabetes)
- Management of asthma, defined as the proportion of people with asthma who have a written asthma action plan

A high or increasing proportion for each measure is desirable.

Data reported against this indicator are:

- comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required data are available for all jurisdictions for: management of diabetes PIP diabetes incentive (2016); management of diabetes HbA1c (2011-12); and, management of asthma (2014-15).

The total and non-Indigenous components of the Australian Health Survey 2011–13 did not include people living in discrete Aboriginal and Torres Strait Islander communities or very remote areas, which affects the comparability of the NT results for the measures management of diabetes — HbA1c and management of asthma.

### Chronic disease management — diabetes

Type 2 diabetes is the most common form of diabetes and is largely preventable. The PIP diabetes incentive provides incentives to eligible practices to improve management of patients with diabetes. In order to register for the PIP Diabetes incentive, general practices are required to maintain an active patient register and recall and reminder system for all known patients with diabetes mellitus, and to agree to implement an annual cycle of care for patients with diabetes mellitus. The annual cycle of care is generally based on the RACGP's clinical guidelines for the management of Type 2 diabetes in general practice, which represent the minimum required level of care.

Nationally, the proportion of PIP practices registered for the PIP diabetes incentive increased from 51.5 per cent in May 2015 to 55.8 per cent in May 2016, with similar increases in all states and territories (figure 10.12).

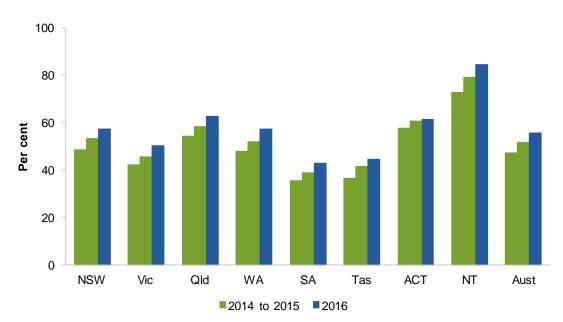


Figure 10.12 PIP practices registered for the PIP diabetes incentive<sup>a</sup>

HbA1c provides a measure of the average blood glucose level for the preceding three months. A HbA1c level at or below 7 per cent indicates appropriate management. Nationally, 77.5 per cent of people with known diabetes in 2011-12 had a HbA1c test in the previous 12 months (table 10A.54) and 50.5 per cent of people with known diabetes had a HbA1c level at or below 7 per cent (figure 10.13).

<sup>&</sup>lt;sup>a</sup> See box 10.10 and table 10A.53 for detailed definitions, footnotes and caveats.
Source: Department of Health (unpublished) MBS and PIP data collections; table 10A.53.



Figure 10.13 People with known diabetes with HbA1c level 7 per cent or less, 2011-12a, b

Source: ABS (unpublished) Australian Health Survey, 2011-13 (2011-12 National Health Measures Survey component), Cat. No. 4364.0; table 10A.55.

### Chronic disease management — asthma

Written asthma action plans enable people with asthma to recognise and respond quickly and appropriately to deteriorating asthma symptoms, thereby preventing or reducing the severity of acute asthma episodes (ACAM 2008).

Nationally, the age standardised proportion of people with asthma reporting that they have a written asthma action plan was 28.4 per cent for people of all ages in 2014-15, compared to 22.9 per cent in 2004-05 (figure 10.14). In all jurisdictions, the proportion was higher for children aged 0–14 years than for other age groups (table 10A.56).

Nationally in 2011-13, the proportion of Aboriginal and Torres Strait Islander people with asthma reporting that they have a written asthma action plan was 29.4 per cent for people of all ages and 50.9 per cent for children aged 0–14 years (table 10A.57). Data for people of all ages are reported by Indigenous status for 2004-05 and 2011-13 in table 10A.58.

a See box 10.10 and table 10A.55 for detailed definitions, footnotes and caveats. b Error bars represent the 95 per cent confidence interval associated with each point estimate.

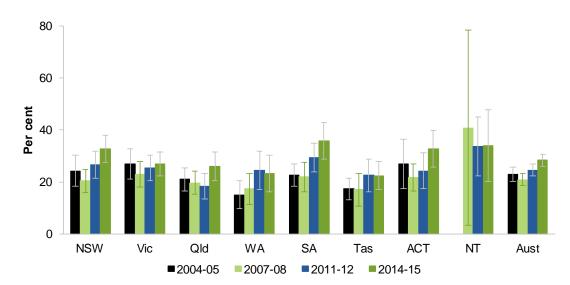


Figure 10.14 People with asthma who have a written asthma action plana, b, c

<sup>a</sup> See box 10.10 and table 10A.56 for detailed definitions, footnotes and caveats. <sup>b</sup> NT data not published for 2004-05. <sup>c</sup> Error bars represent the 95 per cent confidence interval associated with each point estimate.

Source: ABS (unpublished) Australian Health Survey, 2011–2013 (2011-12 NHS component), Cat. No. 4364.0; ABS (unpublished) National Health Survey, 2014-15, 2007-08, 2004-05, Cat. No. 4364.0; table 10A.56.

# Appropriateness - Use of pathology tests and diagnostic imaging

'Use of pathology tests and diagnostic imaging' is an indicator of governments' objective to ensure that primary healthcare services are appropriate (box 10.11).

## Box 10.11 Use of pathology tests and diagnostic imaging

'Use of pathology tests and diagnostic imaging' is defined by four measures:

- MBS items rebated through DHS Medicare for pathology tests requested by vocationally registered GPs and OMPs, per person
- Diagnostic imaging services provided on referral from vocationally registered GPs and OMPs and rebated through DHS Medicare, per person
- DHS Medicare benefits paid per person for pathology tests
- · DHS Medicare benefits paid per person for diagnostic imaging.

(continued next page)

### Box 10.11 (continued)

This indicator needs to be interpreted with care as appropriate levels of use of pathology tests and diagnostic imaging cannot be determined. A high or increasing level of use can reflect overreliance on tools to support the diagnostic process. A low or decreasing level of use can contribute to misdiagnosis of disease and to relatively poor treatment decisions. Pathology tests and diagnostic imaging are important tools used by GPs in the diagnosis of many diseases, and in monitoring response to treatment. Pathology and diagnostic imaging services performed at the request of vocationally registered GPs and OMPs and rebated through DHS Medicare is used as a proxy in reporting against this indicator.

Data reported for this indicator are:

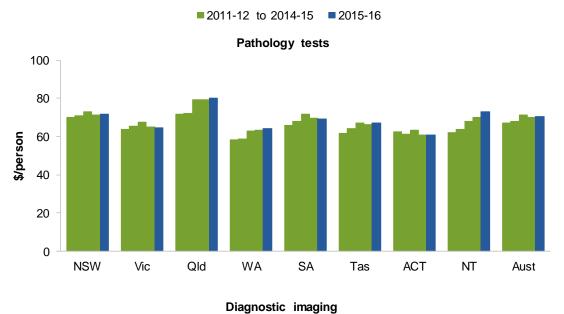
- comparable (subject to caveats) across jurisdictions and over time but a break in time series means that data from 2012-13 onwards are not comparable to data for previous years
- complete (subject to caveats) for the current reporting period. All required 2015-16 data are available for all jurisdictions.

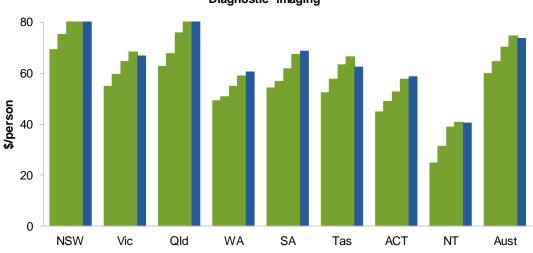
Available data from DHS Medicare reflect only those services provided and rebated. For example, rebates are provided for a maximum of three MBS pathology items — any additional pathology tests are excluded from the data because rebates are not provided.

# Nationally in 2015-16:

- there were 92.4 million rebated MBS items for pathology tests requested by GPs and eligible nurse practitioners, costing \$1.7 billion (table 10A.60). This translated to 3.9 MBS items per person at a cost of \$70 per person (table 10A.60 and figure 10.15)
- there were 15.2 million rebated MBS items for diagnostic imaging performed on referral from GPs and eligible nurse practitioners, costing \$1.8 billion (table 10A.61). This translated to 0.7 MBS items per person at a cost of around \$74 per person (table 10A.61 and figure 10.15).

Figure 10.15 Benefits paid for GP-referred pathology tests and diagnostic imaging rebated through DHS Medicare<sup>a</sup>





<sup>&</sup>lt;sup>a</sup> See box 10A.11 and tables 10A.60-61 for detailed definitions, footnotes and caveats.
Source: Department of Health (unpublished) MBS and DVA data collections; tables 10A.60-61

# Quality — Safety — GPs with vocational registration

'GPs with vocational registration' is an indicator of governments' objective to ensure the GP workforce has the capability to deliver high quality and safe services (box 10.12).

# Box 10.12 **GPs with vocational registration**

'GPs with vocational registration' is defined as the proportion of FSE GPs with vocational registration. Vocationally registered GPs are considered to have the values, skills and knowledge necessary for competent unsupervised general practice within Australia (RACGP 2014).

A high or increasing proportion of FSE GPs with vocational registration can indicate an improvement in the capability of the GP workforce to deliver high quality services. Data reported for this indicator are:

- comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required 2015-16 data are available for all jurisdictions.

Nationally in 2015-16, the proportion of FSE GPs with vocational registration was 80.1 per cent, with the proportion highest in major cities and lowest in outer regional and remote areas (table 10A.49). From 2013-14 to 2015-16, the proportion decreased from 82.5 to 80.1 per cent (figure 10.16).

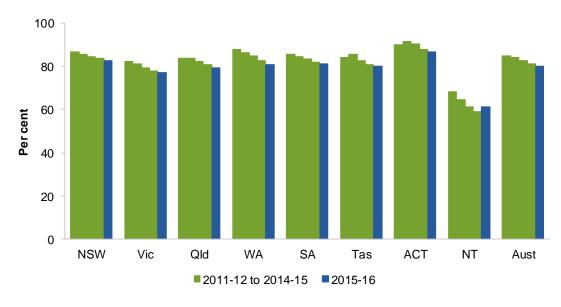


Figure 10.16 FSE GPs with vocational registration<sup>a</sup>

## General practices with accreditation

'General practices with accreditation' is an indicator of governments' objective to ensure the GP workforce has the capability to provide high quality and safe services (box 10.13).

<sup>&</sup>lt;sup>a</sup> See box 10.12 and table 10A.50 for detailed definitions, footnotes and caveats. *Source*: Department of Health (unpublished) MBS Statistics; table 10A.50.

# Box 10.13 General practices with accreditation

'General practices with accreditation' is defined as the proportion of general practices in Australia that are accredited. Accreditation is a voluntary process of independent third-party peer review that assesses general practices against a set of standards developed by the RACGP.

A high or increasing proportion of practices with accreditation can indicate an improvement in the capability of general practice to deliver high quality services. However, general practices without accreditation may deliver services of equally high quality. For a particular general practice, the decision to seek accreditation might be influenced by perceived costs and benefits unrelated to its quality standards.

Data reported for this indicator are:

- · comparable (subject to caveats) across jurisdictions and over time
- not available for the current reporting period as data for the number of general practices are not available.

Data for the number of accredited practices and the available historical data for the proportion of practices with accreditation are reported in table 10A.51.

The proportion of patients attending PIP practices (proxy for accredited practices) provides useful additional information relating to accreditation. Nationally, the proportion of general practice patient care provided by PIP practices has increased slightly in all jurisdictions from 2010-11 to 2014-15 (table 10A.52).

### Electronic health information systems

'Electronic health information systems' is an indicator of governments' objective that primary and community health services are high quality and safe (box 10.14).

### Box 10.14 Electronic health information systems

'Electronic health information systems' is defined as the proportion of general practices enrolled in the PIP that are registered for the PIP eHealth incentive.

A high or increasing proportion can indicate that patient health information at the point of care and coordination of care across multiple providers and services are desirable or are improved, minimising the likelihood of patient harm due to information gaps.

The PIP does not include all practices in Australia. PIP practices provided around 84.6 per cent of general practice patient care in 2014-15 (Department of Health unpublished; table 10A.52).

Data reported against this indicator are:

- comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required 2016 data are available for all jurisdictions.

The PIP eHealth Incentive aims to encourage general practices to keep up to date with the latest developments in electronic health information systems. Current eligibility requirements require practices to:

- integrate healthcare identifiers into electronic practice records
- have a secure messaging capability
- use data records and clinical coding of diagnoses
- send prescriptions electronically to a prescription exchange service
- participate in the eHealth record system and be capable of creating and uploading Shared Health Summaries and Event Summaries using compliant software.

Nationally, the proportion of PIP practices using electronic health systems was 91.0 per cent in May 2016 (figure 10.17). The proportion of PIP practices using electronic health systems increased in all areas between May 2013 and May 2016, remaining lower in remote and very remote areas than in other areas (table 10A.63).

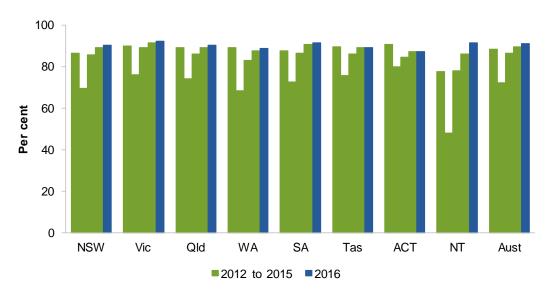


Figure 10.17 PIP practices using electronic health systems<sup>a</sup>

### Quality — Responsiveness — Patient satisfaction

'Patient satisfaction' is an indicator of governments' objective that primary and community health services are high quality and account for individual patient needs (box 10.15).

a See box 10.14 and table 10A.62 for detailed definitions, footnotes and caveats.
Source: Department of Health (unpublished) MBS and PIP data collections; table 10A.62.

### Box 10.15 Patient satisfaction

'Patient satisfaction' is defined as the quality of care as perceived by the patient. It is measured as patient experience of aspects of care that are key factors in patient outcomes and can be readily modified. Two measures of patient experience of communication with health professionals — a key aspect of care — are reported:

- the proportion of people who saw a GP in the previous 12 months where the GP always or often: listened carefully to them; showed respect; and spent enough time with them
- the proportion of people who saw a dental professional in the previous 12 months where the dental professional always or often: listened carefully to them; showed respect; and spent enough time with them.

High or increasing proportions can indicate improved satisfaction with communication with health professionals. Data reported against this indicator are:

- · comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required 2015-16 data are available for all jurisdictions.

The PExS does not include people living in discrete Aboriginal and Torres Strait Islander communities, which affects the comparability of the NT results.

Nationally in 2015-16, the majority of respondents reported that the GP always or often:

- listened carefully to them (91.6 per cent)
- showed respect (94.0 per cent)
- spent enough time with them (90.3 per cent) (figure 10.18).

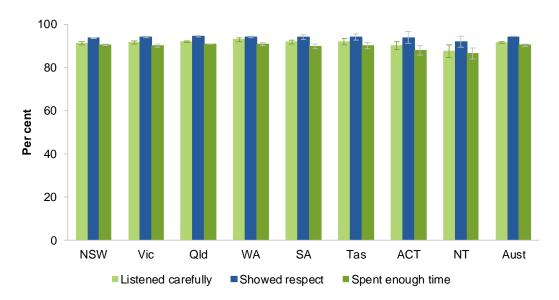
Data for Aboriginal and Torres Strait Islander Australians are not comparable to the data presented here (table 10A.66).

Nationally in 2015-16, the majority of respondents reported that dentists always or often:

- listened carefully to them (95.5 per cent)
- showed respect (96.3 per cent)
- spent enough time with them (96.6 per cent) (figure 10.19).

Data for both measures are presented by remoteness area in tables 10A.67-68.

Figure 10.18 People whose GP always or often listened carefully, showed respect, spent enough time, 2015-16a, b



a See box 10.15 and tables 10A.64-65 for detailed definitions, footnotes and caveats. b Error bars represent the 95 per cent confidence interval associated with each point estimate.

Source: ABS (unpublished) Patient Experience Survey 2015-16, Cat. no. 4839.0; tables 10A.64-65

Figure 10.19 People whose dental professional always or often listened carefully, showed respect, spent enough time, 2015-16a, b



a See box 10.15 and tables 10A.67-68 for detailed definitions, footnotes and caveats. b Error bars represent the 95 per cent confidence interval associated with each point estimate.

Source: ABS (unpublished) Patient Experience Survey 2015-16, Cat. no. 4839.0; tables 10A.67-68.

# Quality — continuity — Continuity of chronic disease management

Continuity of chronic disease management is an indicator of government's objective that services are well co-ordinated to ensure continuity of care where more than one service type, and/or ongoing service provision is required (box 10.16).

# Box 10.16 Continuity of chronic disease management

Continuity of chronic disease management is defined as the proportion of GPs who used the MBS chronic disease management items for care planning or case conferencing at least once during a 12 month period.

A high or increasing proportion of GPs who use chronic disease management items is desirable.

Chronic disease management items in the MBS allow for the preparation and regular review of care plans for individuals with complex, multidisciplinary care needs due to chronic or terminal medical conditions, through GP managed or multidisciplinary team based care. Individual compliance with management measures is also a critical determinant of the occurrence and severity of complications for patients with chronic disease.

Data reported against this indicator are:

- · comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required data are available for all jurisdictions up to 2015-16.

Nationally, the proportion of GPs who used chronic disease management MBS items for care planning or case conferencing remained steady over the five years to 2015-16 (97.2 per cent in 2015-16) (table 10A.59).

# **Efficiency**

### Sustainability

The Steering Committee has identified the sustainability of primary and community health as a key area for development in future reports.

### Cost to government of general practice per person

'Cost to government of general practice per person' is an indicator of governments' objective to provide primary healthcare services in an efficient manner (box 10.17).

#### Box 10.17 Cost to government of general practice per person

'Cost to government of general practice per person' is defined as the cost to government of general practice per person in the population.

This indicator needs to be interpreted with care. A low or decreasing cost per person can indicate higher efficiency, provided services are equally or more effective. It can also reflect service substitution between primary healthcare and hospital or specialist services — potentially at greater expense.

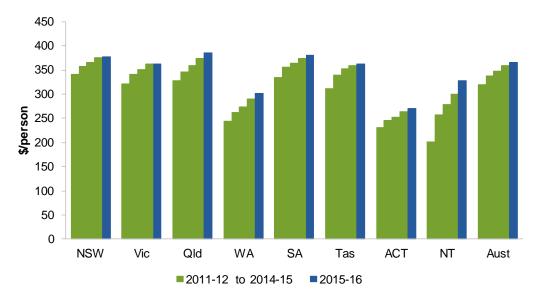
Cost to government of general practice does not capture costs of salaried GP service delivery models, used particularly in rural and remote areas, where primary healthcare services are provided by salaried GPs in community health settings, through emergency departments, and Aboriginal and Torres Strait Islander primary healthcare services. So, costs are understated for jurisdictions where a large proportion of the population live in rural and remote areas.

Data reported for this indicator are:

- comparable (subject to caveats) across jurisdictions and over time but a break in time series means that data from 2012-13 onwards are not comparable to data for previous years
- complete (subject to caveats) for the current reporting period. All required 2015-16 data are available for all jurisdictions.

Nationally in 2015-16, total expenditure on general practice was \$8.7 billion, translating to a rate of \$365 per person (figure 10.20).





<sup>&</sup>lt;sup>a</sup> See box 10A.17 and table 10A.2 for detailed definitions, footnotes and caveats. Source: Department of Health (unpublished) MBS Statistics; DVA (unpublished), DVA data collection; table 10A.2.

## **Outcomes**

Outcomes are the impact of services on the status of an individual or group (see chapter 1).

# Child immunisation coverage

'Child immunisation coverage' is an indicator of governments' objective to prevent illness (box 10.18).

# Box 10.18 Child immunisation coverage

'Child immunisation coverage' is defined by three measures:

- the proportion of children aged 12 months to less than 15 months who are fully immunised (at this age, immunised against diphtheria, tetanus, pertussis (whooping cough), polio, hepatitis b, *Haemophilus influenzae* type b and pneumococcal)
- the proportion of children aged 24 months to less than 27 months who are fully immunised (at this age, against diphtheria, tetanus, whooping cough, polio, *Haemophilus influenzae* type b, hepatitis B, measles, mumps and rubella and meningococcal C and varicella [chickenpox])
- the proportion of children aged 60 months to less than 63 months who are fully immunised (at this age, against diphtheria, tetanus, whooping cough, polio, and measles, mumps and rubella).

A high or increasing proportion of children who are fully immunised indicates a reduction in the risk of children contracting a range of vaccine preventable diseases.

Data reported against this indicator are:

- comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required 2015-16 data are available for all jurisdictions.

The proportion of children fully immunised in 2015-16 was:

- For children aged 12 to less than 15 months, 93.0 per cent
- For children aged 24 to less than 27 months, 90.7 per cent
- For children aged 60 to less than 63 months, 92.9 per cent (figure 10.21).

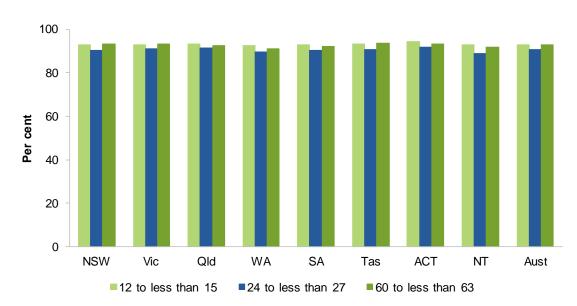


Figure 10.21 Children who were fully immunised, by age (months) 2015-16<sup>a</sup>

#### Notifications of selected childhood diseases

'Notifications of selected childhood diseases' is an indicator of governments' objective to manage illness (box 10.19).

#### Box 10.19 Notifications of selected childhood diseases

Notifications of selected childhood diseases' is defined as the number of notifications of measles, pertussis and invasive *Haemophilus influenzae* type b reported to the National Notifiable Diseases Surveillance System (NNDSS) by State and Territory health authorities for children aged 0–14 years, per 100 000 children in that age group.

A low or reducing notification rate for the selected diseases indicates that the immunisation program is more effective.

Measles, pertussis (whooping cough) and invasive *Haemophilus influenzae* type b are nationally notifiable vaccine preventable diseases, and notification to the relevant State or Territory authority is required on diagnosis.

Data reported against this indicator are:

- comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required 2015-16 data are available for all jurisdictions.

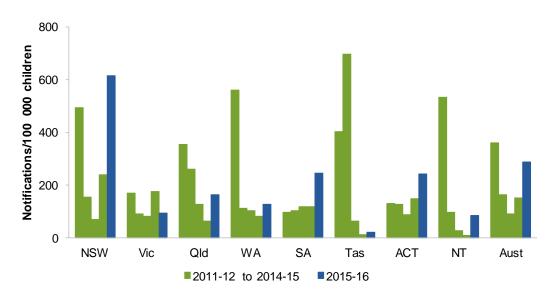
<sup>&</sup>lt;sup>a</sup> See box 10.18 and tables 10A.70–72 for detailed definitions, footnotes and caveats. *Source*: Department of Health (unpublished) ACIR data collection; tables 10A.70–72.

Nationally in 2015-16, the rate of notifications for children aged 0–14 years was:

- 0.2 per 100 000 for *Haemophilus influenzae* type b (table 10A.75)
- 0.5 per 100 000 for measles (table 10A.73)
- 288.4 per 100 000 for pertussis (whooping cough) (figure 10.22 and table 10A.74).

Historical data for ten years of reporting are in tables 10A.73–75.

Figure 10.22 Notifications of pertussis (whooping cough) per 100 000 children aged 0–14 years<sup>a</sup>



<sup>&</sup>lt;sup>a</sup> See box 10.19 and table 10A.74 for detailed definitions, footnotes and caveats.
Source: Department of Health (unpublished) NNDSS, ABS (various years) Population by Age and Sex, Australian States and Territories, Cat. no. 3201.0; table 10A.74.

#### Participation for women in breast cancer screening

'Participation for women in breast cancer screening' is an indicator of governments' objective to prevent illness through the provision of early detection services (box 10.20).

#### Box 10.20 Participation for women in breast cancer screening

Participation for women in breast cancer screening' is defined as the number of women aged 50-74 years who are screened in the BreastScreen Australia Program over a 24 month period, divided by the estimated population of women aged 50-74 years and reported as a rate.

A high or increasing participation rate is desirable.

Data reported against this indicator are:

- comparable (subject to caveats) across jurisdictions and over time. A break in series with the change of target age group from 50-69 years to 50-74 years means that data from 2014-2015 onwards are not comparable to earlier time periods
- complete (subject to caveats) for the current reporting period. All required data for the 24-month period 2014–2015 are available for all jurisdictions.

The national age standardised participation rate for women aged 50-74 years for the 24 month reference period 2014–2015 was 53.2 per cent (figure 10.23).





<sup>&</sup>lt;sup>a</sup> See box 10.20 and table 10A.76 for detailed definitions, footnotes and caveats.

Source: State and Territory governments (unpublished); ABS (various years) Population by Age and Sex, Australian States and Territories, Cat. no. 3201.0; table 10A.76.

Aboriginal and Torres Strait Islander women, women from non-English speaking backgrounds (NESB) and women living in outer regional, remote and very remote areas can experience particular language, cultural and geographic barriers to accessing breast cancer screening. Participation rates for community groups at or close to those for the total population indicate equitable access to early detection services. Data are not directly comparable within or across community groups as Indigenous and NESB status identification in administrative records varies.

For the 24-month period 2014–2015, the participation rate for women aged 50–74 years was 37.1 per cent for Aboriginal and Torres Strait Islander women and 49.1 per cent for NESB women (tables 10A.77-78). State and Territory data by remoteness area showed that participation rates were highest in outer regional areas (58.2 per cent) and the major cities (56.6 per cent) (table 10A.79).

#### Participation for women in cervical screening

'Participation for women in cervical screening' is an indicator of governments' objective to prevent illness through the provision of early detection services (box 10.21).

#### Box 10.21 Participation for women in cervical screening

'Participation for women in cervical screening' is defined as the proportion of the estimated eligible population of women aged 20–69 years who are screened over a 24 month period, reported as a rate. Eligible women are those who have not had a hysterectomy.

A high or increasing proportion of eligible women aged 20–69 years who have been screened is desirable.

Data reported against this indicator are:

- · comparable (subject to caveats) across jurisdictions and over time
- complete (subject to caveats) for the current reporting period. All required data for the 24-month period 2014–2015 are available for all jurisdictions.

For the 24 month period 2014–2015, the national age-standardised participation rate for women aged 20–69 years in cervical screening was 56.9 per cent, a slight decrease from 57.3 per cent for the 24-month period 2010–2011 (figure 10.24). Data are presented for a ten year time series in table 10A.80.

Nationally in 2012-13, the age standardised proportion of Aboriginal and Torres Strait Islander women aged 20–69 years responding to the National Aboriginal and Torres Strait Islander Health survey who reported having a Pap smear at least every 2 years was 53.4 per cent (table 10A.81).

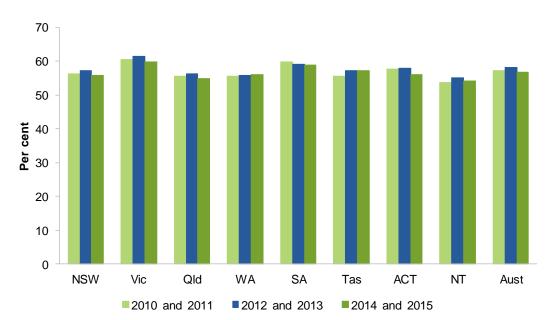


Figure 10.24 Participation rate for women aged 20–69 years in cervical screening (24 month period)<sup>a</sup>

#### Influenza vaccination coverage for older people

'Influenza vaccination coverage for older people' is an indicator of governments' objective to prevent illness (box 10.22).

#### Box 10.22 Influenza vaccination coverage for older people

'Influenza vaccination coverage for older people' is defined as the proportion of people aged 65 years or over who have been vaccinated against seasonal influenza.

A high or increasing proportion of older people vaccinated against influenza is desirable.

Data reported for this indicator are:

- comparable (subject to caveats) across jurisdictions and over time
- not available for the current reporting period.

Updated data were not available for the general population for the 2017 Report — historical data are presented in table 10A.82. Nationally in 2012-13, an estimated 25.3 per cent Aboriginal and Torres Strait Islander aged 50 years or over were fully vaccinated against influenza and pneumococcal disease (table 10A.83).

<sup>&</sup>lt;sup>a</sup> See box 10.21 and table 10A.80 for detailed definitions, footnotes and caveats.
Source: AIHW (unpublished) State and Territory Cervical Cytology Registry data collections; table 10A.80.

#### Selected potentially preventable hospitalisations

'Selected potentially preventable hospitalisations' is an indicator of governments' objective to prevent and to manage illness and injury effectively in the community (box 10.23).

### Box 10.23 Selected potentially preventable hospitalisations

'Selected potentially preventable hospitalisations' is defined as hospital admissions that may be avoided by effective management of illness and injury in the primary and community healthcare sector or, in some cases, by preventing illness and injury altogether. Three measures of selected potentially preventable hospitalisations are reported by jurisdiction of residence:

- Potentially preventable hospitalisations for selected vaccine preventable, acute and chronic conditions
- Potentially preventable hospitalisations for diabetes
- Potentially preventable hospitalisations of older people for falls.

Low or decreasing separation rates for selected potentially preventable hospitalisations can indicate more effective management of selected conditions in the primary and community healthcare sector and/or more effective preventative programs. Factors outside the control of the primary and community healthcare sector also influence hospitalisation rates for these conditions. For example, the underlying prevalence of conditions, patient compliance with management and older people's access to aged care services and other support.

Data reported for this indicator are:

- comparable (subject to caveats) across jurisdictions and over time, except for the diabetes measure
- complete (subject to caveats) for the current reporting period except for the diabetes measure for which data are not published for Tasmania, the ACT and the NT. All other required 2014-15 data are available for other jurisdictions.

Potentially preventable hospitalisations for selected vaccine preventable, acute and chronic conditions

Nationally, the age-standardised hospital separation rate for the selected vaccine preventable, acute and chronic conditions was 25.2 per 1000 people in 2014-15 (table 10.2). Of these, 48.4 per cent were for acute and 45.2 per cent for chronic conditions (table 10A.84).

The age-standardised hospital separation rate was higher for Aboriginal and Torres Strait Islander Australians than for other Australians in all jurisdictions for the five years 2010-11 to 2014-15 and, for the three previous years, in all jurisdictions for which Indigenous status data are of sufficient quality for statistical reporting purposes (table 10A.85).

Table 10.2	Separations for selected potentially preventable
	hospitalisations per 1000 people, 2014-15 (ASR)a

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Vaccine preventable conditions	1.6	1.6	1.9	1.4	2.3	0.8	1.4	8.4	1.8
Selected acute conditions	11.0	10.9	14.9	12.4	13.1	11.3	9.4	21.3	12.2
Selected chronic conditions	10.3	11.6	13.2	10.6	11.6	10.5	8.4	22.4	11.4
Total	22.7	23.9	29.8	24.3	26.6	22.5	19.0	50.2	25.2

<sup>&</sup>lt;sup>a</sup> See box 10.23 and table 10A.84 for detailed definitions, footnotes and caveats.

Source: AIHW (unpublished) Admitted patient care 2014-15: Australian hospital statistics; table 10A.84.

#### Potentially preventable hospitalisations for diabetes

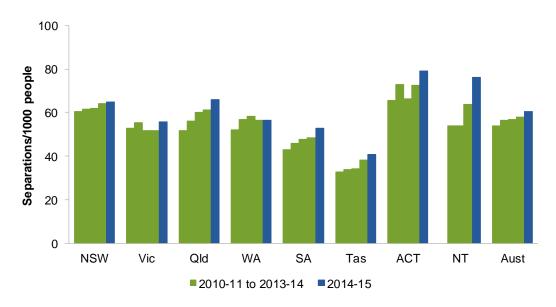
Nationally in 2014-15, the age standardised hospital separation rate for Type 2 diabetes mellitus as principal diagnosis was 111.2 separations per 100 000 people (table 10A.92). Of these, 27.3 per cent were same day separations (table 10A.93). The age standardised separation rate for diabetes (excluding separations for diabetes complications as an additional diagnosis) for Aboriginal and Torres Strait Islander people was almost four times the rate for all Australians (table 10A.91).

The three complications of Type 2 diabetes most commonly leading to hospitalisation in 2014-15 were circulatory ophthalmic, and renal complications. Across almost all jurisdictions for which data are published, the highest age standardised hospital separation rates were for circulatory complications (table 10A.92). Serious circulatory complications of diabetes can necessitate lower limb amputation. In 2014-15, there were 17.2 age standardised hospital separations per 100 000 people for lower limb amputations where Type 2 diabetes mellitus was a principal or additional diagnosis (table 10A.94).

#### Potentially preventable hospitalisations of older people for falls

The age standardised rate of hospital separations for older people with a reported external cause of falls per 1000 older people increased from 54.0 in 2010-11 to 60.5 in 2014-15 (figure 10.25).

Figure 10.25 Separations for older people with a reported external cause of falls (ASR)<sup>a, b</sup>



<sup>&</sup>lt;sup>a</sup> See box 10.23 and table 10A.95 for detailed definitions, footnotes and caveats. <sup>b</sup> Data for the NT are not available for 2010-11 and are not included in the Australian total.

Source: AIHW (unpublished) National Hospital Morbidity Database; table 10A.95.

#### **Definitions of key terms** 10.4

Age standardised Removing the effect of different age distributions (across jurisdictions or

over time) when making comparisons, by weighting the age-specific rates

for each jurisdiction by the national age distribution.

Annual cycle of care for people with diabetes mellitus within general practice

The annual cycle of care comprises the components of care, delivered over the course of a year, that are minimum requirements for the appropriate management of diabetes in general practice. based on RACGP guidelines.

MBS items can be claimed on completion of the annual cycle of care according to MBS requirements for management, which are based on but

not identical to the RACGP guidelines.

Asthma Action Plan An asthma action plan is an individualised, written asthma action plan

> incorporating information on how to recognise the onset of an exacerbation of asthma and information on what action to take in response to that exacerbation, developed in consultation with a health professional.

> Source: ACAM (Australian Centre for Asthma Monitoring) 2007, Australian asthma indicators: Five-year review of asthma monitoring in Australia.

Cat. no. ACM 12, AIHW.

A closed treatment episode is a period of contact between a client and an Closed treatment episode

alcohol and other drug treatment agency. It has defined dates of commencement and cessation, during which the principal drug of concern, treatment delivery setting and main treatment type did not change. Reasons for cessation of a treatment episode include treatment completion, and

client non-participation in treatment for 3 months or more. Clients may have more than one closed treatment episode in a data collection period.

Health services for individuals and groups delivered in a community setting, Community health services rather than via hospitals or private facilities.

Comparability Data are considered comparable if (subject to caveats) they can be used to

inform an assessment of comparative performance. Typically, data are considered comparable when they are collected in the same way and in accordance with the same definitions. For comparable indicators or measures, significant differences in reported results allow an assessment of differences in performance, rather than being the result of anomalies in the

Completeness Data are considered complete if all required data are available for all

jurisdictions that provide the service.

Consultations The different types of services provided by GPs.

Cost to government of general practice per

Cost to the Australian Government of total non-referred attendances by

non-specialist medical practitioners per person.

FSE (Full Service Equivalent) is an estimated measure of medical Full time service equivalents (FSE) workforce based on Medicare claims information. Although Medicare claims

data does not include information on hours worked it does have sufficient time-based items to estimate a proxy for hours worked. The FSE

methodology models total hours worked for each practitioner based on the number of days worked, volume of services, and schedule fees. One FSE is approximately equivalent to a workload of 7.5 hours per day, five days per

week. The FSE for each practitioner is capped at 2.5.

General practice The organisational structure with one or more GPs and other staff such as practice nurses. A general practice provides and supervises healthcare for

a 'population' of patients and may include services for specific populations, such as women's health or Aboriginal and Torres Strait Islander health.

General practitioner (GP) Vocationally registered GPs — medical practitioners who are vocationally

registered under s.3F of the Health Insurance Act 1973 (Cwlth), hold Fellowship of the RACGP or the Australian College of Rural and Remote Medicine (ACRRM) or equivalent, or hold a recognised training placement. From 1996 vocational registration is available only to GPs who attain Fellowship of the RACGP or (from April 2007) the ACRRM, or hold a

person

recognised training placement.

Other medical practitioners (OMP) — medical practitioners who are not vocationally registered GPs.

**GP-type services** 

Non-referred attendances by vocationally registered GPs and OMPs, and practice nurses.

Haemophilus influenzae type b

A bacterium which causes bloodstream infection, meningitis, epiglottitis, and pneumonia (Department of Health 2013a).

Non-referred attendances

GP services, emergency attendances after hours, other prolonged attendances, group therapy and acupuncture. All attendances for specialist services are excluded because these must be 'referred' to receive DHS Medicare reimbursement.

Nationally notifiable disease

A communicable disease that is on the Communicable Diseases Network Australia's endorsed list of diseases to be notified nationally (Department of Health 2013b). On diagnosis of these diseases, there is a requirement to notify the relevant State or Territory health authority.

Other medical practitioner (OMP)

A medical practitioner other than a vocationally registered GP who has at least half of the schedule fee value of his/her DHS Medicare billing from non-referred attendances. These practitioners are able to access only the lower A2 DHS Medicare rebate for general practice services they provide, unless the services are provided through certain Departmental incentive programs.

Pap smear

A procedure for the detection of cancer and pre-cancerous conditions of the female cervix.

PBS doctor's bag

Emergency drug supplies provided without charge to prescribers for use in medical emergencies in the clinic or the community at no charge to the patient.

Per person benefits paid for GP ordered pathology

Total benefits paid under DHS Medicare for pathology tests requested by GPs, divided by the population.

Per person benefits paid for GP referred diagnostic imaging Total benefits paid for diagnostic imaging services performed on referral by GPs, divided by the population.

Practice Incentives Program (PIP)

The Practice Incentives Program (PIP) aims to support general practice activities through providing incentives. These activities include continual improvements, quality care, enhanced capacity, and improved access and health outcomes for patients.

Primary healthcare

The primary and community healthcare sector includes services that:

- provide the first point of contact with the health system
- have a particular focus on illness prevention or early intervention
- are intended to maintain people's independence and maximise their quality of life through care and support at home or in local community settings.

Primary Health Networks

Primary Health Networks (PHNs) are a national network of independent primary health care organisations (replacing Medicare Locals (MLs) from 1 July 2015) with the objective to improve the efficiency and effectiveness of medical services for patients at risk of poor health outcomes and to improve coordination of care, particularly for those with chronic and complex conditions.

Prevalence

The proportion of the population suffering from a disorder at a given point in time (point prevalence) or given period (period prevalence).

Public health

The organised, social response to protect and promote health and to prevent illness, injury and disability. The starting point for identifying public health issues, problems and priorities, and for designing and implementing interventions, is the population as a whole or population subgroups. Public health is characterised by a focus on the health of the population (and particular at-risk groups) and complements clinical provision of healthcare

services. Recognised immunisation A provider recognised by DHS Medicare as a provider of immunisation to provider children. Recognised specialist A medical practitioner classified as a specialist by the Medical Board of Australia and on the DHS Medicare database earning at least half of his or her income from relevant specialist items in the schedule, having regard to the practitioner's field of specialist recognition. Screening The performance of tests on apparently well people to detect a medical condition earlier than would otherwise be possible. Triage category The urgency of the patient's need for medical and nursing care: • category 1 — resuscitation (immediate within seconds) • category 2 — emergency (within 10 minutes) • category 3 — urgent (within 30 minutes) • category 4 — semi-urgent (within 60 minutes)

Vocationally registered general practitioner

A medical practitioner who is vocationally registered under s.3F of the *Health Insurance Act 1973* (Cwlth), holds Fellowship of the RACGP, ACRRM, or equivalent, or holds a recognised training placement, and who has at least half of the schedule fee value of his/her DHS Medicare billing from non-referred attendances.

#### 10.5 References

ACAM (Australian Centre for Asthma Monitoring) 2008, Asthma in Australia 2008, Cat. no. ACM 14, AIHW (Australian Institute of Health and Welfare) Asthma Series 3, Canberra.

• category 5 — non-urgent (within 120 minutes).

Australian Government DHS (Department of Human Services) 2015, Practice Incentives Program (PIP) (http://www.humanservices.gov.au/health-professionals/services/practice-incentives-programme/, accessed 16 November 2015).

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immunisatio	on, 5th edn,	www.he	alth.go	v.au/inte	rnet/im	munise	e/pul	blishing	.nsf/	Content
/uci-myths-	guideprov (ad	ecessed 8.	Januar	y 2014).						
— 2013b,	Australian	national	notif	iable di	seases	list	and	case	defi	initions,
www.health	n.gov.au/inter	net/main/r	oublish	ning.nsf/C	Content	/cda_si	urve	il-nndss	s-disl	ist.htm

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GP (Royal Austra http://www.rac			n Australia

# 10A Primary and community health — attachment

Definitions for the indicators and descriptors in this attachment are in section 10.5 of the chapter. Unsourced information was obtained from the Australian, State and Territory governments.

Data in this Report are examined by the Health Working Group, but have not been formally audited by the Secretariat.

Data reported in the attachment tables are the most accurate available at the time of data collection. Historical data may have been updated since the last edition of RoGS.

This file is available on the web page (www.pc.gov.au/rogs/2017).

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			Gove	rnment		Non-government					
		Australian G	overnment								
Area of expenditure	DVA	Department of Health and other	Health insurance premium rebates	Total	State, Territory and local government	Total government	Private health insurance funds	Individuals	Other (d)	Total non- government	<i>Total</i> (b)
Unreferred medical services	840.0	8 376.0		9 216.0		9 216.0		701.0	1 113.0	1 814.0	11 031.0
Dental services	96.0	788.0	681.0	1 565.0	713.0	2 279.0	1 676.0	5 521.0	88.0	7 285.0	9 564.0
Other health practitioners	235.0	1 355.0	317.0	1 907.0	8.0	1 915.0	781.0	2 509.0	347.0	3 638.0	5 552.0
Community health and other (e)	1.0	1 242.0	_	1 243.0	6 419.0	7 662.0	1.0	258.0	211.0	469.0	8 131.0
Benefit-paid pharmaceuticals	363.0	7 899.0		8 262.0		8 262.0		1 513.0		1 513.0	9 775.0
All other medications		566.0	19.0	585.0		585.0	46.0	9 323.0	90.0	9 459.0	10 044.0
Total	1 535.0	20 226.0	1 017.0	22 778.0	7 140.0	29 919.0	2 504.0	19 825.0	1 849.0	24 178.0	54 097.0

- (a) Excludes expenditure on public health and taxation rebates for medical expenses.
- (b) Data are for funding provided by the Australian Government, State and Territory governments, local government authorities and major non-government health care funding sources. Data do not represent total expenditure on health goods and services.
- (c) Components may not add to totals due to rounding.
- (d) Expenditure on health goods and services by workers compensation and compulsory third-party motor vehicle insurers, as well as other sources of income (for example, rent, interest earned) for service providers.
- (e) 'Other' denotes 'other recurrent health services not elesewhere classified'.
  - Nil or rounded to zero... Not applicable

Source: AIHW 2016, Health Expenditure Australia 2014-15, Health and Welfare Expenditure Series no. 57, Cat. no. HWE 67.

Table 10A.2 Australian Government total expenditure on GPs and expenditure per person (crude rates) (2015-16 dollars) (a), (b), (c), (d), (e), (f)

	(**), (*)	, (/, (-/, (-/								
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Expenditure										
2010-11	\$m	2 439.7	1 773.3	1 446.6	583.7	552.2	158.2	84.2	45.4	7 083.5
2011-12	\$m	2 474.7	1 791.8	1 483.4	580.9	550.7	159.3	85.7	46.9	7 173.4
2012-13	\$m	2 624.6	1 934.1	1 597.5	647.4	590.9	173.8	93.4	60.8	7 722.6
2013-14	\$m	2 731.4	2 035.0	1 684.4	696.6	610.9	181.4	96.8	67.7	8 104.0
2014-15	\$m	2 847.8	2 132.8	1 780.1	748.1	633.9	184.7	102.4	73.2	8 503.0
2015-16	\$m	2 900.5	2 176.1	1 856.0	784.1	647.3	187.7	106.2	80.1	8 738.2
Expenditure pe	r person (cr	rude rates) (b)								
2010-11	\$	339.8	322.7	326.0	251.7	338.3	310.1	230.8	197.1	319.5
2011-12	\$	341.4	321.4	328.7	243.3	334.8	311.3	231.2	201.8	319.0
2012-13	\$	357.1	340.5	346.5	261.8	355.5	339.2	246.1	256.7	337.1
2013-14	\$	365.9	351.4	359.1	273.1	364.2	352.9	252.0	279.1	347.5
2014-15	\$	376.4	362.3	374.7	289.8	374.8	358.5	264.2	299.7	359.9
2015-16	\$	378.1	362.9	386.0	301.1	380.1	362.8	270.2	328.2	365.0

<sup>(</sup>a) Time series financial data are adjusted to 2015-16 dollars using the General Government Final Consumption Expenditure (GGFCE) chain price deflator (2015-16 = 100) (table 10A.96). See chapter 2 for details.

(d) DVA data include expenditure on specialist GPs. Other data include expenditure on vocationally registered GPs and other medical practitioners (OMPs).

<sup>(</sup>b) Rates are derived using the ABS estimated resident population (ERP) for December 31 of the reference year. The ERP is final rebased to the 2011 Census for 2010-11 and is the first preliminary ERP based on the 2011 Census for subsequent years.

<sup>(</sup>c) For 2012-13 to 2014-15, total expenditure data include core operational expenditure on Medicare Locals. From 2015-16 total expenditure data includes core and flexible expenditure on Primary Health Networks. The funding provided to Primary Health Networks is not limited to the provision of General Practice support, they are also required to direct their funding to a number of other activities. The funding to PHNs covers core administrative functions, conducting regional needs assessments and associated population health planning; the establishment and maintenance of Clinical Councils and Community Advisory Committees; and purchasing/commissioning of required services in response to identified national and local priorities which may include further support to GPs.

Table 10A.2 Australian Government total expenditure on GPs and expenditure per person (crude rates) (2015-16 dollars) (a), (b), (c), (d), (e), (f)

Unit NSW Vic Qld WA SA Tas ACT NT Aust

(f) Historical data have been revised and may differ from previous reports. This is due to a change in methodology used to identify GPs.

Source: Department of Health unpublished, MBS, PIP, GPII, DGPP, ML and DVA data collections; table 10A.96.

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<sup>(</sup>e) Some primary care services are provided by salaried GPs in community health services, particularly in rural and remote areas, through emergency departments and Aboriginal community controlled health services (ACCHSs). Consequently, expenditure will be understated in jurisdictions with larger proportions of rural and remote populations.

Table 10A.3 Australian Government expenditure on the Pharmaceutical Benefits Scheme (2015-16 dollars) (a), (b), (c)

	(0), (0)									
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (b)	Aust
PBS Total (d)										
2006-07	\$m	2 407.7	1 740.2	1 324.0	606.0	591.5	186.7	86.5	24.8	6 967.5
2007-08	\$m	2 497.6	1 807.8	1 374.8	632.5	619.5	196.3	89.1	26.3	7 244.1
2008-09	\$m	2 677.3	1 918.4	1 476.4	682.2	652.8	209.1	94.7	27.9	7 738.7
2009-10	\$m	2 785.9	1 999.4	1 547.0	701.6	674.9	218.9	99.3	28.5	8 055.5
2010-11	\$m	2 766.5	1 972.5	1 529.6	709.6	658.3	219.9	98.5	29.3	7 984.1
2011-12	\$m	2 750.9	1 974.3	1 546.7	746.5	663.8	222.2	97.9	28.8	8 031.1
2012-13	\$m	2 540.0	1 833.0	1 437.0	671.9	621.3	201.8	94.1	26.7	7 425.8
2013-14	\$m	2 592.0	1 879.7	1 444.7	696.4	621.0	207.8	95.7	28.5	7 565.8
2014-15 (c)	\$m	2 501.0	1 822.9	1 391.9	674.2	574.4	201.4	95.4	26.9	7 287.9
2015-16	\$m	2 679.3	2 021.9	1 585.1	703.6	609.7	217.1	102.8	29.5	7 949.1
RPBS Total (e)										
2006-07	\$m	196.4	122.8	126.2	43.7	43.7	16.8	8.1	1.1	558.9
2007-08	\$m	192.0	117.6	123.8	43.3	42.1	16.5	8.3	1.1	544.8
2008-09	\$m	193.2	115.3	124.8	43.3	42.0	16.4	8.4	1.1	544.3
2009-10	\$m	191.2	112.8	125.4	41.6	42.3	16.2	8.3	1.0	538.8
2010-11	\$m	176.6	102.3	118.7	39.1	37.2	15.0	7.8	0.9	497.6
2011-12	\$m	166.4	94.5	115.4	38.1	35.7	14.5	7.2	0.9	472.8
2012-13	\$m	146.2	81.2	102.6	32.4	30.0	12.6	6.8	0.8	412.7
2013-14	\$m	131.7	74.1	94.1	30.7	26.3	11.2	6.2	0.8	375.1
2014-15 (c)	\$m	117.9	66.4	85.7	27.6	22.2	10.4	5.9	0.7	336.8
2015-16	\$m	109.9	60.6	83.5	25.9	21.3	9.8	5.7	0.7	317.5
PBS and RPBS TOTAL										
2006-07	\$m	2 604.1	1 863.0	1 450.2	649.8	635.2	203.5	94.6	25.9	7 526.4
2007-08	\$m	2 689.6	1 925.4	1 498.6	675.8	661.6	212.9	97.5	27.4	7 788.8
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Table 10A.3 Australian Government expenditure on the Pharmaceutical Benefits Scheme (2015-16 dollars) (a), (b), (c)

	(~), (~)									
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (b)	Aust
2008-09	\$m	2 870.5	2 033.7	1 601.1	725.5	694.8	225.4	103.1	29.0	8 283.1
2009-10	\$m	2 977.1	2 112.2	1 672.4	743.2	717.2	235.1	107.7	29.5	8 594.3
2010-11	\$m	2 943.1	2 074.7	1 648.3	748.7	695.5	234.9	106.3	30.2	8 481.7
2011-12	\$m	2 917.3	2 068.8	1 662.0	784.6	699.5	236.7	105.1	29.7	8 503.9
2012-13	\$m	2 686.2	1 914.2	1 539.7	704.2	651.3	214.4	100.9	27.5	7 838.5
2013-14	\$m	2 723.7	1 953.8	1 538.8	727.2	647.3	219.0	101.9	29.4	7 940.9
2014-15 (c)	\$m	2 618.9	1 889.3	1 477.6	701.8	596.5	211.7	101.2	27.6	7 624.7
2015-16	\$m	2 789.1	2 082.5	1 668.7	729.5	630.9	227.0	108.6	30.2	8 266.6
PBS total expenditure per person (f), (g)										
2006-07	\$	350.52	336.26	319.71	290.82	374.77	379.06	256.52	116.44	333.49
2007-08	\$	359.71	343.86	324.29	296.29	388.39	395.27	260.93	120.65	341.24
2008-09	\$	379.39	356.83	338.55	308.93	404.16	417.11	271.57	125.66	356.76
2009-10	\$	386.65	363.06	345.09	308.52	412.33	432.42	279.42	124.88	362.89
2010-11	\$	379.72	352.44	335.47	305.75	398.18	431.09	271.59	126.98	354.52
2011-12	\$	378.92	353.54	342.05	312.26	402.87	433.60	263.57	123.63	356.56
2012-13	\$	344.93	322.04	310.91	271.23	373.08	393.26	247.52	112.25	323.51
2013-14	\$	346.42	323.87	307.24	272.49	369.51	403.59	248.53	117.24	323.73
2014-15 (c)	\$	329.85	308.95	292.35	261.51	338.83	390.07	245.47	110.30	307.92
2015-16	\$	349.29	337.19	329.63	270.21	358.05	419.68	261.61	121.00	332.04
Proportion of PBS expenditure that is concessional										
2006-07	%	80.8	80.8	80.0	77.2	82.4	84.9	66.8	68.6	80.4
2007-08	%	79.9	80.1	78.6	75.0	81.8	84.7	65.5	66.8	79.3
2008-09	%	78.7	78.8	76.8	73.0	80.8	82.6	63.7	64.1	77.9
2009-10	%	78.9	78.8	76.8	72.6	81.0	82.0	62.7	63.7	77.9

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Table 10A.3 Australian Government expenditure on the Pharmaceutical Benefits Scheme (2015-16 dollars) (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (b)	Aust
2010-11	%	78.7	78.4	76.9	71.7	80.6	81.8	62.3	62.1	77.7
2011-12	%	79.0	78.2	77.6	71.3	80.8	81.9	62.5	62.7	77.8
2012-13	%	79.7	78.8	78.8	71.3	81.2	83.2	63.2	64.1	78.5
2013-14	%	79.4	78.2	78.8	70.5	80.7	83.0	63.1	63.4	78.1
2014-15 (c)	%	78.7	77.2	78.4	69.5	80.3	82.0	62.4	61.0	77.4
2015-16	%	77.3	75.3	77.1	69.5	79.7	80.3	61.8	58.4	76.0

- (a) Time series financial data are adjusted to 2015-16 dollars using the General Government Final Consumption Expenditure (GGFCE) chain price deflator (2015-16 = 100) (table 10A.96). See chapter 2 for details.
- (b) State and Territory level data are only available on a cash basis for general, concessional and doctor's bag categories. These figures are not directly comparable to those published in the Department of Health annual report which are prepared on an accrual accounting basis and also include other categories administered under special arrangements (such as medicines supplied in bulk to remote and very remote areas under s.100 of the *National Health Act 1953* [Cwlth] costing \$27.8 million for 2015-16, of which the NT accounted for 50.7 per cent [table 10A.5]).
- (c) A DHS reconciliation process may result in some variance in data for 2014-15.
- (d) PBS total includes PBS general ordinary, general safety net, concessional ordinary, concessional safety net and doctor's bag.
- (e) RPBS includes RPBS general ordinary and RPBS general safety net.
- (f) PBS expenditure per person exclude RPBS and doctor's bag.
- (g) Rates from 2012-13 are derived using ERPs based on the 2011 Census. Rates for previous years are derived using ERPs based on earlier Censuses. Rates based on different Censuses are not comparable.
- (h) PBS Data includes expenditure on Section 85 drugs only. Expenditure under Section 100 programs is excluded (such as Highly Specialised Drug Program and Efficient funding of Chemotherapy).

Source: Department of Health unpublished, PBS Statistics; table 10A.96.

Table 10A.4 Australian Government expenditure on the Pharmaceutical Benefits Scheme, by type of service (2015-16 dollars) (a), (b), (c), (d)

uoliais) (a), (k	<i>)),</i> ( <i>C),</i> (	u)								
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (b)	Aust
2011-12										
PBS General Ordinary	\$m	499.3	371.8	299.0	189.5	111.2	35.7	31.6	10.0	1 548.2
PBS General Safety Net	\$m	74.3	54.5	43.9	23.8	15.4	4.2	4.9	0.7	221.7
PBS General total	\$m	573.6	426.3	342.9	213.3	126.6	40.0	36.6	10.7	1 769.9
PBS Concessional Ordinary	\$m	1 651.4	1 173.7	911.7	418.5	408.0	139.2	48.6	15.8	4 766.9
PBS Concessional Free Safety Net	\$m	521.3	370.8	289.1	113.6	128.1	42.7	12.5	2.3	1 480.5
PBS Concessional total	\$m	2 172.7	1 544.5	1 200.8	532.1	536.1	181.9	61.1	18.1	6 247.4
PBS Doctors Bag (d)	\$m	4.6	3.5	3.0	1.1	1.1	0.3	0.2	0.1	13.8
PBS Total (e)	\$m	2 750.9	1 974.3	1 546.7	746.5	663.8	222.2	97.9	28.8	8 031.1
RPBS Total (f)	\$m	166.4	94.5	115.4	38.1	35.7	14.5	7.2	0.9	472.8
PBS and RPBS TOTAL	\$m	2 917.3	2 068.8	1 662.0	784.6	699.5	236.7	105.1	29.7	8 503.9
PBS total expenditure per person (g), (h)	\$	378.9	353.5	342.1	312.3	402.9	433.6	263.6	123.6	356.6
Proportion of PBS expenditure that is concessional	%	79.0	78.2	77.6	71.3	80.8	81.9	62.5	62.7	77.8
2012-13										
PBS General Ordinary	\$m	449.0	343.6	266.7	172.9	102.6	30.3	30.3	9.0	1 404.2
PBS General Safety Net	\$m	61.7	41.8	34.2	18.9	13.0	3.3	4.1	0.5	177.4
PBS General total	\$m	510.6	385.3	300.8	191.8	115.6	33.6	34.4	9.5	1 581.6
PBS Concessional Ordinary	\$m	1 524.2	1 091.9	854.6	372.1	380.1	126.9	47.3	14.9	4 412.0
PBS Concessional Free Safety Net	\$m	500.1	351.8	278.1	106.8	124.4	41.0	12.2	2.2	1 416.7
PBS Concessional total	\$m	2 024.3	1 443.7	1 132.8	478.9	504.5	168.0	59.5	17.1	5 828.7
PBS Doctors Bag (d)	\$m	5.1	3.9	3.4	1.2	1.2	0.3	0.2	0.1	15.5

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Table 10A.4 Australian Government expenditure on the Pharmaceutical Benefits Scheme, by type of service (2015-16 dollars) (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (b)	Aust
PBS Total (e)	\$m	2 540.0	1 833.0	1 437.0	671.9	621.3	201.8	94.1	26.7	7 425.8
RPBS Total (f)	\$m	146.2	81.2	102.6	32.4	30.0	12.6	6.8	0.8	412.7
PBS and RPBS TOTAL	\$m	2 686.2	1 914.2	1 539.7	704.2	651.3	214.4	100.9	27.5	7 838.5
PBS total expenditure per person (g), (h)	\$	344.9	322.0	310.9	271.2	373.1	393.3	247.5	112.2	323.5
Proportion of PBS expenditure that is concessional	%	79.7	78.8	78.8	71.3	81.2	83.2	63.2	64.1	78.5
2013-14										
PBS General Ordinary	\$m	473.4	368.3	272.5	186.3	106.5	32.0	31.4	9.9	1 480.2
PBS General Safety Net	\$m	55.3	37.6	30.5	17.5	12.0	3.0	3.7	0.5	160.1
PBS General total	\$m	528.7	405.9	303.0	203.8	118.5	35.0	35.1	10.4	1 640.3
PBS Concessional Ordinary	\$m	1 550.7	1 112.9	855.3	381.7	377.3	130.1	47.7	15.8	4 471.4
PBS Concessional Free Safety Net	\$m	506.9	356.8	282.9	109.6	124.0	42.3	12.7	2.3	1 437.5
PBS Concessional total	\$m	2 057.5	1 469.7	1 138.3	491.2	501.3	172.5	60.4	18.1	5 908.9
PBS Doctors Bag (d)	\$m	5.8	4.1	3.5	1.3	1.2	0.3	0.2	0.1	16.6
PBS Total (e)	\$m	2 592.0	1 879.7	1 444.7	696.4	621.0	207.8	95.7	28.5	7 565.8
RPBS Total (f)	\$m	131.7	74.1	94.1	30.7	26.3	11.2	6.2	0.8	375.1
PBS and RPBS TOTAL	\$m	2 723.7	1 953.8	1 538.8	727.2	647.3	219.0	101.9	29.4	7 940.9
PBS total expenditure per person (g), (h)	\$	346.4	323.9	307.2	272.5	369.5	403.6	248.5	117.2	323.7
Proportion of PBS expenditure that is concessional	%	79.4	78.2	78.8	70.5	80.7	83.0	63.1	63.4	78.1

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Table 10A.4 Australian Government expenditure on the Pharmaceutical Benefits Scheme, by type of service (2015-16 dollars) (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	<i>NT</i> (b)	Aust
PBS General Ordinary	\$m	480.2	379.2	272.7	189.1	102.1	33.3	32.6	10.0	1 499.2
PBS General Safety Net	\$m	45.9	31.7	24.3	15.0	9.7	2.6	3.1	0.4	132.7
PBS General total	\$m	526.1	410.9	297.1	204.1	111.8	35.9	35.7	10.4	1 631.9
PBS Concessional Ordinary	\$m	1 469.0	1 055.5	813.9	360.0	342.0	123.4	46.7	14.4	4 224.9
PBS Concessional Free Safety Net	\$m	500.1	352.3	277.4	108.7	119.3	41.7	12.8	2.0	1 414.4
PBS Concessional total	\$m	1 969.1	1 407.8	1 091.3	468.8	461.3	165.1	59.5	16.4	5 639.2
PBS Doctors Bag (d)	\$m	5.8	4.3	3.5	1.4	1.2	0.4	0.2	0.1	16.7
PBS Total (e)	\$m	2 501.0	1 822.9	1 391.9	674.2	574.4	201.4	95.4	26.9	7 287.9
RPBS Total (f)	\$m	117.9	66.4	85.7	27.6	22.2	10.4	5.9	0.7	336.8
PBS and RPBS TOTAL	\$m	2 618.9	1 889.3	1 477.6	701.8	596.5	211.7	101.2	27.6	7 624.7
PBS total expenditure per person (g), (h)	\$	329.8	309.0	292.3	261.5	338.8	390.1	245.5	110.3	307.9
Proportion of PBS expenditure that is concessional	%	78.7	77.2	78.4	69.5	80.3	82.0	62.4	61.0	77.4
2015-16 (c)										
PBS General Ordinary	\$m	566.9	471.5	341.7	201.4	115.0	40.4	36.6	11.9	1 785.4
PBS General Safety Net	\$m	41.6	28.2	21.6	13.4	8.6	2.4	2.7	0.4	118.8
PBS General total	\$m	608.5	499.7	363.4	214.8	123.6	42.8	39.3	12.3	1 904.2
PBS Concessional Ordinary	\$m	1 573.5	1 174.6	941.6	377.8	365.9	132.4	50.4	15.0	4 631.0
PBS Concessional Free Safety Net	\$m	497.3	347.7	280.2	111.0	120.3	42.0	13.2	2.3	1 413.9
PBS Concessional total	\$m	2 070.8	1 522.3	1 221.7	488.8	486.1	174.3	63.6	17.2	6 044.9
PBS Doctors Bag (d)	\$m	5.3	4.3	3.3	1.3	1.2	0.3	0.2	0.1	15.9
PBS Total (e)	\$m	2 679.3	2 021.9	1 585.1	703.6	609.7	217.1	102.8	29.5	7 949.1

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Table 10A.4 Australian Government expenditure on the Pharmaceutical Benefits Scheme, by type of service (2015-16 dollars) (a), (b), (c), (d)

		•								
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (b)	Aust
RPBS Total (f)	\$m	109.9	60.6	83.5	25.9	21.3	9.8	5.7	0.7	317.5
PBS and RPBS TOTAL	\$m	2 789.1	2 082.5	1 668.7	729.5	630.9	227.0	108.6	30.2	8 266.6
PBS total expenditure per person (g), (h)	\$	349.3	337.2	329.6	270.2	358.1	419.7	261.6	121.0	332.0
Proportion of PBS expenditure that is concessional	%	77.3	75.3	77.1	69.5	79.7	80.3	61.8	58.4	76.0

- (a) Time series financial data are adjusted to 2015-16 dollars using the General Government Final Consumption Expenditure (GGFCE) chain price deflator (2015-16 = 100) (table 10A.96). See chapter 2 for details.
- (b) State and Territory level data are only available on a cash basis for general, concessional and doctor's bag categories. These figures are not directly comparable to those published in the Department of Health annual report which are prepared on an accrual accounting basis and also include other categories administered under special arrangements (such as medicines supplied in bulk to remote and very remote areas under s.100 of the *National Health Act 1953* [Cwlth] costing \$27.8 million for 2015-16, of which the NT accounted for 50.7 per cent [table 10A.7]).
- (c) A DHS reconciliation process may result in some variance in data for 2014-15.
- (d) Doctor's bag' refers to supplies provided to GPs for use in a medical emergency.
- (e) PBS total includes PBS general ordinary, general safety net, concessional ordinary, concessional safety net and doctor's bag.
- (f) RPBS includes RPBS general ordinary and RPBS general safety net.
- (g) PBS expenditure per person exclude RPBS and doctor's bag.
- (h) Rates from 2012-13 are derived using ERPs based on the 2011 Census. Rates for previous years are derived using ERPs based on earlier Censuses. Rates based on different Censuses are not comparable.

Source: Department of Health unpublished, PBS Statistics; table 10A.96.

Table 10A.5 Australian Government expenditure on PBS medicines supplied to Aboriginal Health Services in remote areas (2015-16 dollars) (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (d)
2012-13	\$'000	109.2	_	6 957.6	10 953.8	841.1	92.5	_	19 734.4	38 688.7
2013-14	\$'000	97.0	_	7 086.2	10 727.8	937.5	114.8	_	20 905.6	39 868.9
2014-15	\$'000	53.9	_	4 527.0	8 580.0	1 289.2	79.4	_	15 539.7	30 069.3
2015-16	\$'000	35.2	_	4 479.9	7 965.4	1 191.3	75.3	_	14 110.4	27 857.6

<sup>(</sup>a) Time series financial data are adjusted to 2015-16 dollars using the General Government Final Consumption Expenditure (GGFCE) chain price deflator (2015-16 = 100) (table 10A.96). See chapter 2 for details.

- (b) Includes expenditure on PBS medicines supplied in bulk under s.100 of the *National Health Act 1953* (Cwlth) to Aboriginal Health Services in remote and very remote areas.
- (c) This program seeks to address identified barriers to accessing essential medicines experienced by Aboriginal and Torres Strait Islander people living in remote areas (see http://www.health.gov.au/internet/main/publishing.nsf/Content/health-pbs-indigenous-faq, accessed 15 December 2015).
- (d) Allocation to state and territory is based on location of the Aboriginal Health Service. Clients are not necessarily resident in the same state or territory.

   Nil or rounded to zero.

Source: Department of Health unpublished, PBS Statistics; table 10A.96.

Table 10A.6

## Expenditure on dental services (2014-15 dollars) (\$ million)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
2014-15									
Government									
Australian Government									
DVA	29	16	31	9	8	2	1		96
Department of Health and other (a)	316	199	150	38	62	13	6	4	788
Insurance premium rebates (b)	213	134	139	108	59	13	12	4	681
Total	557	348	320	155	129	28	19	9	1 565
State, Territory and Local Government	199	157	199	72	50	9	12	16	713
Total government	756	505	519	227	179	38	31	25	2 279
Non-government	2 086	2 425	989	1 128	316	118	145	79	7 285
Total government and non-government	2 842	2 929	1 508	1 355	494	156	176	104	9 564

**DVA** = Department of Veterans' Affairs

- (a) 'Department of Health and other' comprises Department of Health funded expenditure such as on MBS and PBS, and other Australian Government expenditure such as for the SPP associated with the National Healthcare Agreement and health-related NP payments, capital consumption, estimates of the medical expenses tax offset, and health research not funded by Department of Health.
- (b) Includes the 30–40 per cent rebate on health insurance premiums that can be either claimed directly from the Australian Government through the taxation system or may involve a reduced premium being charged by the private health insurance fund.
  - Nil or rounded to zero.

Source: AIHW 2016, Health Expenditure Australia 2014-15, Health and Welfare Expenditure Series no. 57, Cat. no. HWE 67.

Table 10A.7 Australian Government funding of Aboriginal and Torres Strait Islander Primary Health Care Services (2015-16 dollars) (a), (b), (c), (d)

	Unit	NSW/ ACT (d)	Vic	Qld	WA	SA	Tas	<i>ACT</i> (d)	NT	Aust
2011-12	\$m	110.1	43.1	106.8	97.7	44.3	10.5	np	150.9	563.5
2012-13	\$m	113.7	45.2	98.8	94.5	47.3	10.2	np	147.0	556.6
2013-14	\$m	132.8	45.3	129.3	100.8	47.2	15.3	np	132.2	602.9
2014-15	\$m	121.4	41.7	127.2	85.7	30.0	10.1	np	165.7	581.8
2015-16	\$m	120.6	43.9	132.3	90.5	36.6	11.4	np	168.1	603.4

- (a) Time series financial data are adjusted to 2015-16 dollars using the General Government Final Consumption Expenditure (GGFCE) chain price deflator (2015-16 = 100) (table 10A.96). See chapter 2 for details.
- (b) Data reflect funding provided to all organisations with a primary function of primary health care and/or substance use and/or mental health services (excludes GST). Excludes funding to Peak bodies.
- (c) Funding for Capital Works is not included.
- (d) Data for NSW and the ACT have been combined in order to avoid the identification of individual services.

#### np Not published.

Source: Department of Health unpublished, table 10A.96.

Table 10A.8 Availability of GPs (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
GP numbers										
2006-07	no.	7 566	5 751	4 705	2 258	1 952	627	361	318	23 540
2007-08	no.	7 706	5 903	4 906	2 307	2 055	652	368	344	24 244
2008-09	no.	7 881	6 098	5 199	2 411	2 103	667	371	387	25 116
2009-10	no.	8 135	6 313	5 421	2 448	2 163	697	381	417	25 975
2010-11	no.	8 435	6 564	5 666	2 574	2 220	708	408	468	27 044
2011-12	no.	8 766	6 905	6 076	2 684	2 303	752	433	489	28 410
2012-13	no.	9 296	7 264	6 485	2 903	2 398	798	444	530	30 118
2013-14	no.	9 760	7 683	6 822	3 159	2 513	836	461	598	31 834
2014-15	no.	10 245	8 033	7 108	3 381	2 607	846	489	566	33 276
2015-16	no.	10 587	8 329	7 506	3 534	2 697	868	523	560	34 605
FSE GPs										
2006-07	no.	5 473	3 790	3 220	1 335	1 231	337	189	86	15 662
2007-08	no.	5 728	4 039	3 455	1 417	1 307	357	200	96	16 601
2008-09	no.	5 844	4 141	3 582	1 440	1 340	362	202	99	17 009
2009-10	no.	6 008	4 320	3 744	1 495	1 394	378	207	110	17 656
2010-11	no.	6 168	4 510	3 827	1 514	1 422	387	214	116	18 158
2011-12	no.	6 337	4 662	3 926	1 533	1 441	394	223	116	18 632
2012-13	no.	6 520	4 882	4 092	1 623	1 473	405	242	131	19 369
2013-14	no.	6 900	5 215	4 336	1 791	1 535	419	256	148	20 601
2014-15	no.	7 306	5 564	4 651	1 971	1 629	442	267	172	22 003
2015-16	no.	7 618	5 853	4 945	2 122	1 701	460	286	185	23 170
FSE GPs per 100	0 000 people (e)									
2006-07	per 100 000 people	80.6	74.3	79.4	64.3	78.8	68.6	55.9	40.8	75.9
2007-08	per 100 000 people	83.2	77.7	83.1	66.4	82.8	72.0	58.1	44.3	79.0
2008-09	per 100 000 people	83.5	77.9	83.8	65.2	83.9	72.1	57.5	44.5	79.2

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Table 10A.8 Availability of GPs (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2009-10	per 100 000 people	84.6	79.7	85.7	66.0	86.1	74.6	57.8	48.3	80.7
2010-11	per 100 000 people	85.9	82.1	86.3	65.3	87.1	75.8	58.7	50.4	81.9
2011-12	per 100 000 people	87.4	83.6	87.0	64.2	87.6	77.0	60.2	49.9	82.9
2012-13	per 100 000 people	88.7	86.0	88.7	65.6	88.6	79.0	63.8	55.3	84.6
2013-14	per 100 000 people	92.4	90.1	92.4	70.2	91.5	81.5	66.6	61.0	88.3
2014-15	per 100 000 people	96.6	94.5	97.9	76.4	96.3	85.8	68.9	70.4	93.1
2015-16	per 100 000 people	99.3	97.6	102.8	81.5	99.9	88.9	72.8	75.8	96.8

**FSE** = Full Service Equivalent. 1 FSE is approximately equivalent to a 37.5 hour working week.

- (a) Data include vocationally registered GPs and other medical practitioners (OMPs).
- (b) GP numbers are based on doctors' major practice postcodes as at the last quarter of the reference period. The major practice postcode is the location at which a doctor rendered the most services. FSE numbers are based on doctors' practice location postcodes at which services were rendered within the reference period.
- (c) Historical data have been revised and may differ from previous reports. This is due to a change in methodology used to compute the number of GPs (associated with a small reduction in historical data for the number of GPs) and use of a new proxy measure for hours worked (FSE) in place of the previously used 'Full time Workload Equivalents' (FWE).
- (d) Full Service Equivalent (FSE) is an estimated measure of medical workforce based on Medicare claims information. FSE models total hours worked for each practitioner based on the number of days worked, volume of services, and schedule fees. One FSE is approximately equivalent to a workload of 7.5 hours per day, five days per week. The FSE for each practitioner is capped at 2.5.
- (e) Rates are derived using the ABS ERP for 31 December. For 2011-12 and subsequent years, the first preliminary ERP based on the 2011 Census is used. For 2010-11 and previous years, the final 2011 Census rebased ERP is used.

Source: Department of Health unpublished, MBS Statistics.

Table 10A.9 Number of GP-type services used per 1000 people (a), (b), (c), (d)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2011-12	6 367.9	5 987.5	6 081.6	4 667.8	5 974.2	6 086.3	4 408.7	3 408.1	5 936.7
2012-13	6 358.1	6 039.2	6 063.8	4 639.9	6 083.7	5 679.2	4 593.7	3 656.1	5 941.2
2013-14	6 491.3	6 210.6	6 210.6	4 797.0	6 188.8	5 738.1	4 680.2	3 993.2	6 084.8
2014-15	6 620.4	6 348.1	6 387.6	5 030.1	6 342.4	5 866.6	4 771.2	4 477.4	6 242.3
2015-16	6 731.3	6 494.4	6 632.4	5 304.9	6 508.8	5 979.7	4 923.0	4 961.6	6 416.3

<sup>(</sup>a) Includes non-referred attendances by vocationally registered GPs and OMPs, practice nurses and, for 2013-14 and subsequent years, nurse practitioners.

Source: Department of Health unpublished, MBS Statistics; DVA unpublished, DVA data collection.

<sup>(</sup>b) DVA data are included.

<sup>(</sup>c) Rates are derived using the ABS 2011-census based first preliminary estimated resident population (ERP) for December 31 of the reference year.

<sup>(</sup>d) Historical data have been revised and may differ from previous reports. This is due to a change in methodology used to identify GPs.

Table 10A.10	PBS services (a), (b), (c)
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		(4), (4	-); (-)							
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (a)	Aust
PBS Total (d)										
2006-07	'000	58 050.4	42 583.8	32 008.2	14 571.3	14 144.5	4 723.0	1 881.9	572.6	168 535.5
2007-08	'000	58 467.4	43 649.9	32 693.8	14 593.3	14 537.4	4 864.0	1 897.3	592.9	171 296.0
2008-09	'000	62 123.6	46 221.7	34 874.5	15 602.7	15 319.6	5 089.4	1 990.4	614.1	181 836.1
2009-10	'000	62 716.4	46 882.6	35 292.2	15 531.6	15 727.3	5 115.7	2 024.2	621.5	183 911.5
2010-11	'000	64 112.6	47 935.7	36 242.5	15 976.2	15 837.6	5 296.6	2 106.1	635.0	188 142.3
2011-12	'000	65 896.3	49 189.6	37 910.2	17 107.8	16 445.8	5 563.3	2 112.7	647.4	194 873.1
2012-13	'000	66 639.3	49 861.2	38 932.6	16 735.9	16 821.3	5 494.5	2 156.6	664.1	197 305.4
2013-14	'000	70 984.7	53 297.9	40 920.3	18 041.8	17 752.1	5 856.6	2 238.5	724.1	209 816.0
2014-15 (c)	'000	71 741.0	54 279.0	41 547.0	18 054.0	17 505.0	5 936.0	2 302.0	720.0	212 086.0
2015-16	'000	70 092.0	52 108.0	41 660.0	17 869.0	17 492.0	5 787.0	2 251.0	731.0	207 991.0
RPBS Total (e)										
2006-07	'000	5 172.0	3 321.8	3 312.7	1 168.2	1 143.4	479.5	197.6	27.6	14 822.8
2007-08	'000	4 915.7	3 177.8	3 234.6	1 123.5	1 116.8	461.9	197.2	28.6	14 256.1
2008-09	'000	4 936.2	3 160.3	3 298.2	1 136.7	1 122.3	454.3	199.2	28.9	14 336.1
2009-10	'000	4 768.4	3 047.3	3 213.5	1 073.9	1 097.4	438.0	197.5	27.8	13 863.9
2010-11	'000	4 572.5	2 900.6	3 111.1	1 032.3	1 020.5	419.1	194.2	26.3	13 276.7
2011-12	'000	4 403.5	2 784.2	3 108.2	1 036.7	1 004.3	410.1	186.5	27.1	12 960.6
2012-13	'000	4 177.1	2 655.0	3 030.2	975.2	942.7	374.7	189.3	27.0	12 371.3
2013-14	'000	4 118.8	2 649.6	3 038.8	1 007.8	932.5	371.7	190.9	28.1	12 338.3
2014-15 (c)	'000	3 855.0	2 481.0	2 930.0	959.0	854.0	351.0	192.0	28.0	11 650.0
2015-16	'000	3 436.0	2 162.0	2 758.0	872.0	789.0	316.0	186.0	28.0	10 547.0
PBS and RPBS Total										
2006-07	'000	63 222.3	45 905.6	35 320.9	15 739.5	15 287.9	5 202.5	2 079.4	600.2	183 358.3
2007-08	'000	63 383.1	46 827.7	35 928.4	15 716.9	15 654.2	5 325.9	2 094.5	621.5	185 552.2
2008-09	'000	67 059.8	49 382.0	38 172.8	16 739.4	16 441.9	5 543.7	2 189.6	643.0	196 172.2
2009-10	'000	67 484.8	49 929.9	38 505.8	16 605.6	16 824.6	5 553.8	2 221.7	649.3	197 775.4

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Table 10A.10	PBS services (a), (b), (c)										
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (a)	Aust	
2010-11	'000	68 685.0	50 836.3	39 353.6	17 008.5	16 858.1	5 715.8	2 300.3	661.3	201 418.9	
2011-12	'000	70 299.8	51 973.8	41 018.4	18 144.4	17 450.1	5 973.4	2 299.3	674.5	207 833.7	
2012-13	'000	70 816.4	52 516.1	41 962.8	17 711.1	17 764.1	5 869.2	2 345.9	691.1	209 676.6	
2013-14	'000	75 103.5	55 947.5	43 959.2	19 049.6	18 684.6	6 228.3	2 429.4	752.2	222 154.3	
2014-15 (c)	'000	75 596.0	56 760.0	44 477.0	19 013.0	18 359.0	6 287.0	2 494.0	748.0	223 736.0	
2015-16	'000	73 528.0	54 270.0	44 418.0	18 741.0	18 281.0	6 103.0	2 437.0	759.0	218 538.0	
PBS total services per person (f)											
2006-07	no.	8.5	8.2	7.7	7.0	9.0	9.6	5.6	2.7	8.1	
2007-08	no.	8.4	8.3	7.7	6.8	9.1	9.8	5.6	2.7	8.1	
2008-09	no.	8.8	8.6	8.0	7.1	9.5	10.2	5.7	2.8	8.4	
2009-10	no.	8.7	8.5	7.9	6.8	9.6	10.1	5.7	2.7	8.3	
2010-11	no.	8.8	8.6	8.0	6.9	9.6	10.4	5.8	2.8	8.4	
2011-12	no.	9.1	8.8	8.4	7.2	10.0	10.9	5.7	2.8	8.7	
2012-13	no.	9.1	8.8	8.4	6.8	10.1	10.7	5.7	2.8	8.6	
2013-14	no.	9.5	9.2	8.7	7.1	10.6	11.4	5.8	3.0	9.0	
2014-15 (c)	no.	9.5	9.2	8.7	7.0	10.3	11.5	5.9	3.0	9.0	
2015-16	no.	9.1	8.7	8.6	6.9	10.3	11.2	5.7	3.0	8.7	
Proportion of PBS services that are concessional											
2006-07	%	85.4	85.6	84.8	83.0	87.2	88.8	72.5	74.4	85.2	
2007-08	%	86.0	86.3	85.2	83.0	87.7	89.6	73.2	75.5	85.7	
2008-09	%	85.6	86.1	84.7	82.2	87.6	88.9	72.1	74.4	85.3	
2009-10	%	86.0	86.4	85.0	82.3	87.9	89.0	72.3	75.1	85.7	
2010-11	%	86.4	86.7	85.6	82.4	88.2	89.3	72.9	75.6	86.0	
2011-12	%	86.9	87.0	86.2	82.7	88.6	89.8	73.8	75.9	86.5	

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Table 10A.10 PBS services (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (a)	Aust
2012-13	%	88.2	88.5	87.6	83.9	89.5	91.0	76.3	77.7	87.8
2013-14	%	89.7	89.9	89.1	85.6	90.8	92.2	79.2	79.7	89.3
2014-15 (c)	%	90.9	91.3	90.4	87.4	92.1	93.0	82.0	79.7	90.7
2015-16	%	91.8	92.2	91.6	89.0	93.1	93.7	83.7	81.0	91.7

- (a) Data do not capture medicines supplied by Aboriginal Health services in remote and very remote areas to their clients under s.100 of the *National Health Act 1953* (Cwlth). Care should be taken in using data for the NT as around 43 per cent of the population live in remote and very remote areas.
- (b) Rates for 2012-13 and subsequent years are derived using ERPs based on the 2011 Census. Rates for previous years are derived using ERPs based on earlier Censuses. Rates based on different Censuses are not comparable.
- (c) A DHS reconciliation process may result in some variance in data for 2014-15.
- (d) Includes PBS general ordinary, general free safety net, concessional ordinary, concessional free safety net and doctor's bag.
- (e) Includes RPBS general ordinary and RPBS general safety net.
- (f) PBS services per person exclude RPBS and doctor's bag.

Source: Department of Health unpublished, PBS Statistics.

Table 10A.11

## PBS services, by service type ('000), (a), (b)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (a)	Aust
2011-12										
PBS General Ordinary	'000	6 867	5 130	4 232	2 445	1 514	465	447	139	21 239
PBS General Safety Net	'000	1 682	1 175	926	484	341	94	104	15	4 821
PBS General total	'000	8 549	6 305	5 158	2 929	1 855	559	550	155	26 060
PBS Concessional Ordinary	'000	43 912	33 102	25 259	11 300	11 296	3 885	1 256	433	130 442
PBS Concessional Free Safety Net	'000	13 329	9 700	7 421	2 853	3 270	1 112	303	58	38 047
PBS Concessional total	'000	57 240	42 802	32 681	14 153	14 565	4 997	1 559	491	168 489
PBS Doctors Bag	'000	107	83	72	26	25	7	3	1	324
PBS Total (c)	'000	65 896	49 190	37 910	17 108	16 446	5 563	2 113	647	194 873
RPBS Total (d)	'000	4 404	2 784	3 108	1 037	1 004	410	187	27	12 961
PBS and RPBS TOTAL	'000	70 300	51 974	41 018	18 144	17 450	5 973	2 299	674	207 834
PBS total services per person (e), (f)	no.	9.1	8.8	8.4	7.2	10.0	10.9	5.7	2.8	8.7
Proportion of PBS services that are concessional	%	86.9	87.0	86.2	82.7	88.6	89.8	73.8	75.9	86.5
2012-13										
PBS General Ordinary	'000	6 229	4 608	3 902	2 223	1 415	405	410	133	19 324
PBS General Safety Net	'000	1 535	1 037	849	442	317	81	97	14	4 371
PBS General total	'000	7 763	5 645	4 750	2 664	1 732	486	506	146	23 695
PBS Concessional Ordinary	'000	44 882	34 074	26 304	11 119	11 629	3 858	1 326	454	133 647
PBS Concessional Free Safety Net	'000	13 880	10 051	7 798	2 925	3 432	1 142	321	62	39 612
PBS Concessional total	'000	58 762	44 125	34 102	14 045	15 061	5 001	1 647	516	173 259
PBS Doctors Bag	'000	114	91	80	26	28	8	4	2	352

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## PBS services, by service type ('000), (a), (b)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (a)	Aust
PBS Total (c)	'000	66 639	49 861	38 933	16 736	16 821	5 495	2 157	664	197 305
RPBS Total (d)	'000	4 177	2 655	3 030	975	943	375	189	27	12 371
PBS and RPBS TOTAL	'000	70 816	52 516	41 963	17 711	17 764	5 869	2 346	691	209 677
PBS total services per person (e), (f)	no.	9.1	8.8	8.4	6.8	10.1	10.7	5.7	2.8	8.6
Proportion of PBS services that are concessional	%	88.2	88.5	87.6	83.9	89.5	91.0	76.3	77.7	87.8
2013-14										
PBS General Ordinary	'000	5 783	4 325	3 600	2 155	1 312	375	370	131	18 050
PBS General Safety Net	'000	1 414	966	782	415	295	76	92	14	4 053
PBS General total	'000	7 197	5 290	4 382	2 569	1 606	451	462	145	22 103
PBS Concessional Ordinary	'000	48 971	37 286	28 182	12 288	12 500	4 178	1 425	511	145 340
PBS Concessional Free Safety Net	'000	14 695	10 628	8 277	3 156	3 619	1 219	348	67	42 009
PBS Concessional total	'000	63 667	47 914	36 459	15 444	16 119	5 397	1 772	577	187 349
PBS Doctors Bag	'000	121	94	80	29	27	8	4	2	364
PBS Total (c)	'000	70 985	53 298	40 920	18 042	17 752	5 857	2 238	724	209 816
RPBS Total (d)	'000	4 119	2 650	3 039	1 008	933	372	191	28	12 338
PBS and RPBS TOTAL	'000	75 104	55 947	43 959	19 050	18 685	6 228	2 429	752	222 154
PBS total services per person (e), (f)	no.	9.5	9.2	8.7	7.1	10.6	11.4	5.8	3.0	9.0
Proportion of PBS services that are concessional	%	89.7	89.9	89.1	85.6	90.8	92.2	79.2	79.7	89.3
2014-15 (b)										
PBS General Ordinary	'000	5 158	3 746	3 239	1 863	1 094	340	330	132	15 903

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## PBS services, by service type ('000), (a), (b)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (a)	Aust
PBS General Safety Net	'000	1 230	855	671	374	255	68	80	12	3 545
PBS General total	'000	6 388	4 601	3 910	2 237	1 349	408	410	144	19 448
PBS Concessional Ordinary	'000	49 746	38 312	28 850	12 438	12 371	4 239	1 517	506	147 980
PBS Concessional Free Safety Net	'000	15 481	11 266	8 706	3 348	3 757	1 281	371	68	44 278
PBS Concessional total	'000	65 227	49 578	37 556	15 786	16 128	5 520	1 888	574	192 258
PBS Doctors Bag	'000	126	100	81	31	28	8	4	2	380
PBS Total (c)	'000	71 741	54 279	41 547	18 054	17 505	5 936	2 302	720	212 086
RPBS Total (d)	'000	3 855	2 481	2 930	959	854	351	192	28	11 650
PBS and RPBS TOTAL	'000	75 596	56 760	44 477	19 013	18 359	6 287	2 494	748	223 736
PBS total services per person (e), (f)	no.	9.5	9.2	8.7	7.0	10.3	11.5	5.9	3.0	9.0
Proportion of PBS services that are concessional	%	90.9	91.3	90.4	87.4	92.1	93.0	82.0	79.7	90.7
2015-16										
PBS General Ordinary	'000	4 506	3 179	2 825	1 596	951	295	294	126	13 771
PBS General Safety Net	'000	1 109	757	601	340	231	61	70	11	3 181
PBS General total	'000	5 615	3 936	3 426	1 936	1 182	356	364	137	16 952
PBS Concessional Ordinary	'000	48 927	37 032	29 420	12 481	12 493	4 156	1 505	517	146 530
PBS Concessional Free Safety Net	'000	15 424	11 033	8 733	3 421	3 788	1 267	378	75	44 120
PBS Concessional total	'000	64 351	48 065	38 153	15 902	16 281	5 423	1 883	592	190 650
PBS Doctors Bag	'000	126	107	81	31	29	8	4	2	389
PBS Total (c)	'000	70 092	52 108	41 660	17 869	17 492	5 787	2 251	731	207 991
RPBS Total (d)	'000	3 436	2 162	2 758	872	789	316	186	28	10 547

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Table 10A.11

#### PBS services, by service type ('000), (a), (b)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (a)	Aust
PBS and RPBS TOTAL	'000	73 528	54 270	44 418	18 741	18 281	6 103	2 437	759	218 538
PBS total services per person (e), (f)	no.	9.1	8.7	8.6	6.9	10.3	11.2	5.7	3.0	8.7
Proportion of PBS services that are concessional	%	91.8	92.2	91.6	89.0	93.1	93.7	83.7	81.0	91.7

- (a) Data do not capture medicines supplied by Aboriginal Health services in remote and very remote areas to their clients under s.100 of the *National Health Act* 1953 (Cwlth). Care should be taken in using data for the NT as around 43 per cent of the population live in remote and very remote areas.
- (b) A DHS reconciliation process may result in some variance in data for 2014-15.
- (c) Includes PBS general ordinary, general free safety net, concessional ordinary, concessional free safety net and doctor's bag.
- (d) Includes RPBS general ordinary and RPBS general safety net.
- (e) PBS services per person exclude RPBS and doctor's bag.
- (f) Rates from 2012-13 are derived using ERPs based on the 2011 Census. Rates for previous years are derived using ERPs based on earlier Censuses. Rates based on different Censuses are not comparable.

Source: Department of Health unpublished, PBS Statistics.

Table 10A.12 Alcohol and other drug treatment services, 2014-15 (number) (a), (b)

	Unit	NSW	Vic	Qld	WA (c)	SA	Tas	ACT	NT	Aust
Treatment services by sector										
Government	no.	223	_	62	10	42	8	2	5	352
Non-government (c), (d)	no.	74	140	119	74	47	11	13	13	491
Total	no.	297	140	181	84	89	19	15	18	843
Closed treatment episodes by	sector									
Government	no.	26 100	_	23 481	1 881	5 376	2 051	2 740	1 017	62 646
Non-government (c), (d)	no.	10 498	45 855	15 442	21 661	7 102	1 190	2 482	3 491	107 721
Total	no.	36 598	45 855	38 923	23 542	12 478	3 241	5 222	4 508	170 367
Closed treatment episodes for	client's ow	n drug use by s	ex							
Male	no.	23 064	28 143	26 310	14 636	8 425	2 021	3 232	2 807	108 638
Female	no.	12 160	14 492	11 608	7 460	3 856	951	1 868	1 183	53 578
Total (e)	no.	35 233	42 683	37 943	22 096	12 283	2 972	5 100	3 993	162 303

- (a) Data are sourced from an annual report on the Alcohol and Other Drug Treatment Services National Minimum Data Set (AODTS-NMDS) a collection of data from publicly funded government and non-government treatment services. Treatment activities are excluded from that collection if the agencies provide medication for dependence on opioid drugs such as heroin (opioid pharmacotherapy treatment) where no other treatment is provided, are located within prisons or detention centres, or in acute care and psychiatric hospitals providing treatment only to admitted patients. While in scope, the majority of primary healthcare services for Aboriginal and Torres Strait Islander Australians that are funded by the Australian government do not report to the AODTS-NMDS.
- (b) Includes only services that receive public funding.
- (c) WA has a number of integrated services that include both government and non-government providers.
- (d) Includes agencies funded by Department of Health under the Non-Government Organisation Treatment Grants Program.
- (e) Total includes episodes for people of unknown sex.
  - Nil or rounded to zero.

Source: AlHW 2016, Alcohol and Other Drug Treatment Services in Australia 2014–15, Cat. no. HSE 173, Drug treatment series no. 27.

Table 10A.13 Aboriginal and Torres Strait Islander primary healthcare services and episodes of healthcare (number) (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Aboriginal and	Forres Strait Isl	lander primary he	althcare service	es						
2010-11	no.	56	25	37	35	15	11	1	55	235
2011-12	no.	52	25	37	35	13	9	1	52	224
2012-13	no.	45	24	28	31	14	7	1	55	205
2013-14	no.	45	23	28	28	13	7	1	58	203
2014-15	no.	43	23	29	30	14	7	1	56	203
Episodes of hea	althcare provide	ed (d)								
2010-11	'000	522	201	310	473	222	38	30	704	2 498
2011-12	'000	516	234	475	462	216	44	34	641	2 621
2012-13	'000	622	238	575	583	217	53	38	743	3 068
2013-14	'000	646	216	690	543	177	59	42	897	3 269
2014-15	'000	738	263	757	638	251	51	45	800	3 543

- (a) Includes only Aboriginal and Torres Strait Islander primary healthcare services that report data for the Online Services Report (OSR; previously the OATSIH Services Report).
- (b) Data are for Aboriginal and Torres Strait Islander primary healthcare services funded or partially funded by the Australian Government to facilitate access to primary health care. Data for these services are collected through the Online Services Report (OSR) questionnaire. Many receive additional funding from State and Territory governments and other sources. OSR data reported here represent funding from all sources.
- (c) The number of services that provide OSR data can change each year. Changes can be due to a number of reasons including: new Australian government funded primary health care services opening; existing services gaining Australian government funding; previously excluded Australian government funded services commencing OSR data reporting where changes to the types of services provided and/or to reporting arrangements are made.
- (d) An episode of care involves contact between an individual client and service staff for the provision of health care. Group work is not included. Transport is included only if it involves provision of health care/information by staff. Outreach provision, for example episodes at outstation visits, park clinics, satellite clinics, is included. Episodes of health care delivered over the phone are included.

Source: AIHW 2016 and previous issues, Aboriginal and Torres Strait Islander health organisations: Online Services Report – key results, 2010-11, 2011-12, 2012-13 2013-14 and 2015-16, Cat. no. IHW 79, 104, 139, 152, 168.

Table 10A.14 Aboriginal and Torres Strait Islander primary healthcare services and episodes of healthcare, by remoteness category (number) (a), (b), (c), (d), (e), (f)

	Unit	Maior cities	Inner regional	Outer regional	Remote	Very remote	Total
Aboriginal and T	orres Stra	•					
2010-11	no.	33	52	59	29	62	235
2011-12	no.	32	48	53	28	63	224
2012-13	no.	22	43	47	27	66	205
2013-14	no.	21	43	45	26	68	203
2014-15	no.	20	43	47	26	67	203
Episodes of hea	Ithcare pro	ovided (e)					
2010-11	'000	396	413	496	508	685	2 498
2011-12	'000	436	460	493	531	701	2 621
2012-13	'000	552	557	563	619	778	3 068
2013-14	'000	496	569	670	622	911	3 269
2014-15	'000	557	641	731	686	928	3 543

- (a) Includes only Aboriginal and Torres Strait Islander primary healthcare services that report data for the Online Services Report (OSR; previously the OATSIH Services Report).
- (b) Data are for Aboriginal and Torres Strait Islander primary healthcare services funded or partially funded by the Australian Government to facilitate access to primary health care. Data for these services are collected through the Online Services Report (OSR) questionnaire. Many receive additional funding from State and Territory governments and other sources. OSR data reported here represent funding from all sources.
- (c) The number of services that provide OSR data can change each year. Changes can be due to a number of reasons including: new Australian government funded primary health care services opening; existing services gaining Australian government funding; previously excluded Australian government funded services commencing OSR data reporting where changes to the types of services provided and/or to reporting arrangements are made.
- (d) Remoteness categories are defined using the Australian Standard Geographical Classification (AGSC), based on the ABS 2006 Census of population and housing.
- (e) An episode of care involves contact between an individual client and service staff for the provision of health care. Group work is not included. Transport is included only if it involves provision of health care/information by staff. Outreach provision, for example episodes at outstation visits, park clinics, satellite clinics, is included. Episodes of health care delivered over the phone are included.
- (f) In 2014-15, there were 3 services that had their remoteness category changed. To enable comparisons overtime this change has been applied to previous years data as well. Therefore, totals in this table prior to 2014-15 may be different to what was reported in previous ROGs reports.

Source: AIHW 2016 and previous issues, Aboriginal and Torres Strait Islander health organisations: Online Services Report – key results, 2010-11, 2011-12, 2012-13, 2013-14 and 2014-15, Cat. no. IHW 79, 104, 139, 152, 168.

Table 10A.15 Proportion of Aboriginal and Torres Strait Islander primary healthcare services that undertook selected health related activities (per cent) (a), (b), (c), (d)

	2012-13	2013-14	2014-15
Diagnosis and treatment of chronic illness/diseases	88.8	92.1	91.6
Transport	89.3	88.2	91.1
24 hour emergency care	40.0	44.3	42.4
Child immunisation	85.4	88.7	88.7
Women's groups	51.7	53.2	62.6
Housing	82.9	83.7	86.7
Dental assessment/treatment	51.2	54.7	55.7
Regional health planning processes	87.3	86.2	86.2
Dialysis service on site	5.4	8.9	8.4

- (a) Includes only Aboriginal and Torres Strait Islander primary healthcare services that report data for the Online Services Report (OSR; previously the OATSIH Services Report).
- (b) Data are for Aboriginal and Torres Strait Islander primary healthcare services funded or partially funded by the Australian Government to facilitate access to primary health care. Data for these services are collected through the Online Services Report (OSR) questionnaire. Many receive additional funding from State and Territory governments and other sources. OSR data reported here represent funding from all sources.
- (c) Some services in the OSR are funded for and provide a full range of comprehensive primary health care activities, while others focus on specific elements of primary health care such as health promotion.
- (d) The health related activities section of the OSR data collection instrument was extensively revised for the 2012-13 collection period and data are not comparable with data for previous years. From 2012-13, data are collected for a smaller range of health related activities. This does not indicate that activities undertaken by services in previous years are no longer provided. Data for previous years are provided in table 10A.16.

Source: AIHW 2016 and previous issues, Aboriginal and Torres Strait Islander health organisations: Online Services Report – key results, 2012-13, 2013-14 and 2014-15, Cat. no. IHW 139, 152, 168.

Table 10A.16 Proportion of Aboriginal and Torres Strait Islander primary healthcare services that undertook selected health related activities, 2008-09 to 2011-12 (per cent) (a), (b), (c), (d)

	2008-09 (f)	2009-10	2010-11	2011-12
Diagnosis and treatment of illness/disease	85.0	82.1	81.2	80.4
Management of chronic illness	89.0	87.0	85.0	86.2
Transportation to medical appointments	86.0	87.0	88.5	90.2
Outreach clinic services	55.0	55.6	52.6	60.7
24 hour emergency care	31.0	27.8	23.5	28.1
Monitoring child growth	64.0	76.2	71.8	79.0
School-based activities	68.0	70.4	74.4	79.0
Hearing screening	72.0	74.9	70.9	76.3
Pneumococcal immunisation	76.0	74.9	70.9	69.6
Influenza immunisation	82.0	81.6	78.2	81.3
Child immunisation	81.0	81.6	76.9	80.8
Women's health group	77.0	76.2	78.2	78.1
Support for public housing issues	58.0	67.7	59.0	71.0
Community development work	60.0	66.8	65.4	75.0
Legal/police/prison/advocacy services	42.0	43.1	44.9	46.0
Dental services	52.0	48.9	45.3	53.1
Involvement in steering groups on health	77.0	81.2	79.5	86.2
Participation in regional planning forums	57.0	57.9	59.0	67.0
Dialysis services	4.0	6.3	4.7	3.6

- (a) Includes only Aboriginal and Torres Strait Islander primary healthcare services that report data for the Online Services Report (OSR; previously the OATSIH Services Report).
- (b) Data are for Aboriginal and Torres Strait Islander primary healthcare services funded or partially funded by the Australian Government to facilitate access to primary health care. Data for these services are collected through the Online Services Report (OSR) questionnaire. Many receive additional funding from State and Territory governments and other sources. OSR data reported here represent funding from all sources.
- (c) Some services in the OSR are funded for and provide a full range of comprehensive primary health care activities, while others focus on specific elements of primary health care such as health promotion.
- (d) The health related activities section of the OSR data collection instrument was extensively revised for the 2012-13 collection period and data for 2008-09 to 2011-12 are not comparable with data for 2012-13. From 2012-13, data are collected for a smaller range of selected health related activities (see table 10A.13). This does not indicate that particular activities are no longer undertaken by services.

Source: AlHW 2013 and previous issues, Aboriginal and Torres Strait Islander health organisations: Online Services Report – key results, 2008-09, 2009-10, 2010-11 and 2011-12, Cat. no. IHW 31, 56, 79, 104.

Table 10A.17 Full time equivalent (FTE) health staff employed by Aboriginal and Torres Strait Islander primary healthcare services which provide data for Online Services Reporting (OSR) as at 30 June (number) (a), (b), (c), (d)

(4), (5), (6), (4)					
	2011	2012	2013	2014	2015
Aboriginal and Torres Strait Islander staff					
Aboriginal and Torres Strait Islander					
health workers	899.4	896.5	1 414.0	894.9	791.5
Aboriginal and Torres Strait Islander			74.0	440.5	450.0
health practitioners (e)	na	na	74.0	118.5	159.6
Doctors	26.0	20.7	26.8	33.1	35.2
Nurses/midwives	72.9	101.3	119.6	120.9	156.0
Specialists	0.2	0.3	_	_	_
Counsellors/social workers	59.2	33.4	69.5	57.3	54.9
Other social and emotional wellbeing staff (f)	220.8	203.7	164.3	162.3	159.7
Allied health professionals (g)	31.8	58.1	6.1	8.8	17.3
Dentists	7.4	4.6	6.8	5.8	8.9
Dental assistants	43.9	46.2	52.4	58.7	57.4
Traditional healers	10.8	4.7	12.0	8.0	2.0
Sexual health workers	38.7	43.3	33.9	30.5	17.7
Substance misuse workers	101.2	104.7	100.3	81.2	107.5
Tobacco workers/coordinators (e)	na	na	66.0	120.1	78.7
Health promotion/prevention workers (e)	na	na	98.3	105.1	121.2
Environmental health workers	23.8	32.7	33.0	27.0	28.7
Driver/field officers	255.6	250.0	274.6	295.5	308.1
Other health staff (h)	142.3	145.8	349.7	358.3	418.3
<b>Total Aboriginal and Torres Strait</b>					
Islander staff (i)	1 933.9	1 946.0	2 385.8	2 486.0	2 522.5
Non-Indigenous staff					
Aboriginal and Torres Strait Islander					
health workers	14.0	34.3	11.5	12.0	8.2
Aboriginal and Torres Strait Islander					
health practitioners (e)	na	na	2.0	10.0	2.4
Doctors	335.4	331.8	347.8	418.1	440.5
Nurses/midwives	710.7	681.8	711.8	868.4	959.6
Specialists	13.0	12.1	16.9	24.2	15.5
Counsellors/social workers	89.1	40.6	213.7	115.1	108.3
Other social and emotional wellbeing staff (f)	97.6	82.5	85.5	96.8	117.0
Allied health professionals (g)	144.2	115.9	115.8	161.6	189.5
Dentists	48.7	55.8	60.7	64.4	71.4
Dental assistants	35.1	31.0	30.9	47.1	50.3
Traditional healers	3.1	0.5	_	_	_
Sexual health workers	16.6	11.7	12.7	11.0	10.7
Substance misuse workers	50.7	54.3	49.4	39.5	45.3

Table 10A.17 Full time equivalent (FTE) health staff employed by Aboriginal and Torres Strait Islander primary healthcare services which provide data for Online Services Reporting (OSR) as at 30 June (number) (a), (b), (c), (d)

	2011	2012	2013	2014	2015
Tobacco workers/coordinators (e)	na	na	25.9	37.5	25.0
Health promotion/prevention workers (e)	na	na	47.9	51.7	52.5
Environmental health workers	10.3	8.5	6.0	6.3	7.2
Driver/field officers	39.4	36.7	46.6	42.6	41.2
Other health staff (h)	67.5	25.4	173.0	112.0	135.8
Total non-Indigenous staff (i)	1 675.2	1 522.9	1 958.0	2 118.1	2 280.4
Total health staff (i), (j)					
Aboriginal and Torres Strait Islander					
health workers	913.4	930.8	910.1	906.9	799.7
Aboriginal and Torres Strait Islander			70.0	400 =	400.0
health practitioners (e)	na	na	76.0	128.5	162.0
Doctors	361.4	352.5	374.6	451.2	475.7
Nurses/midwives	787.6	783.1	831.4	989.3	1 115.6
Specialists	13.2	12.3	16.9	24.3	15.5
Counsellors/social workers	148.3	74.0	283.2	172.4	163.2
Other social and emotional wellbeing staff (f)	319.4	286.2	249.8	259.1	276.7
Allied health professionals (g)	176.0	174.0	121.9	170.4	206.7
Dentists	56.1	60.5	67.5	70.2	80.3
Dental assistants	79.1	77.2	83.3	105.8	107.7
Traditional healers	13.9	5.2	12.0	8.0	2.0
Sexual health workers	55.3	55.0	46.6	41.5	28.4
Substance misuse workers	151.9	159.0	149.7	120.7	152.8
Tobacco workers/coordinators (e)	na	na	91.9	157.6	103.7
Health promotion/prevention workers (e)	na	na	146.2	156.7	173.7
Environmental health workers	34.1	41.2	39.0	33.3	35.9
Driver/field officers	294.9	286.7	321.2	338.1	349.3
Other health staff (h)	209.7	171.2	522.7	470.3	554.1
Total health staff (i), (j)	3 614.4	3 468.9	4 343.8	4 604.1	4 802.9

<sup>(</sup>a) Includes only Aboriginal and Torres Strait Islander primary healthcare services that report data for the Online Services Report (OSR; previously the OATSIH Services Report).

<sup>(</sup>b) Data are for Aboriginal and Torres Strait Islander primary healthcare services funded or partially funded by the Australian Government to facilitate access to primary health care. Data for these services are collected through the Online Services Report (OSR) questionnaire. Many receive additional funding from State and Territory governments and other sources. OSR data reported here represent funding from all sources.

<sup>(</sup>c) Data may differ from data presented in the national OSR report which excludes drivers/field officers reported here.

Table 10A.17

Full time equivalent (FTE) health staff employed by Aboriginal and Torres Strait Islander primary healthcare services which provide data for Online Services Reporting (OSR) as at 30 June (number) (a), (b), (c), (d)

2011 2012 2013 2014 2015

- (d) The number of services that provide OSR data can change each year. Changes can be due to a number of reasons including: new Australian government funded primary health care services opening; existing services gaining Australian government funding; previously excluded Australian government funded services commencing OSR data reporting where changes to the types of services provided and/or to reporting arrangements are made.
- (e) Data for Aboriginal health practitioners, Tobacco workers/coordinators and Health promotion/ prevention workers were first collected for 2013.
- (f) Other social and emotional wellbeing staff includes: Bringing Them Home and Link Up support workers, psychologists, mental health workers and other social and emotional wellbeing staff.
- (g) Allied health professionals include diabetes educators and other patient educators, health program coordinators, nutrition workers, community care workers, child and family health workers, child protection workers, welfare workers, pharmacy assistants/technicians, Brighter Futures Program caseworkers, foster carers, Healthy for Life workers, sports and recreation workers, youth workers, and masseurs.
- (h) Other health staff include: outreach workers, special program support workers, patient liasion officers, and other health-related positions.
- (i) Totals may not add due to rounding and cell suppression.
- (j) Totals include health staff for whom Indigenous status was not provided.
  - na Not available. Nil or rounded to zero.

Source: AIHW 2016 and previous issues, Aboriginal and Torres Strait Islander health organisations: Online Services Report – key results, 2010-11, 2011-12, 2012-13 2013-14 and 2014-15, Cat. no. IHW 79, 104, 139, 152, 168.

Table 10A.18 Approved providers of PBS medicines by PhARIA area at 30 June 2016 (a), (b)

2016 (a),	(D)							
NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (c)
approved PB	S provide	er counting	g pharma	cies, GPs	and Abor	iginal Me	dical Ser	vices
3 745	4 097	3 911	3 866	3 674	3 391	4 756	4 491	3 882
4 415	3 895	4 118	5 662	4 409	2 891	_	5 044	4 171
3 325	4 042	3 388	3 473	3 376	3 669	_	3 115	3 545
3 698	3 524	3 660	2 603	2 391	6 164	_	_	3 438
2 579	2 744	3 396	2 103	2 392	1 627	_	2 372	2 596
1 734	1 334	1 147	2 077	1 539	700	_	736	1 331
3 486	3 855	3 049	2 619	2 876	2 919	_	1 423	3 065
3 708	4 065	3 737	3 576	3 502	3 210	4 756	1 892	3 730
oharmacy								
3 747	4 097	3 911	3 874	3 674	3 391	4 756	4 491	3 884
4 415	3 895	4 235	5 662	4 810	2 891	_	5 044	4 216
3 325	4 042	3 439	3 602	3 376	3 669	_	3 115	3 565
3 698	3 524	3 660	2 603	2 391	6 164	_	_	3 512
2 948	2 927	3 736	2 243	2 392	1 877	_	6 325	3 000
2 312	1 334	3 142	3 966	2 737	1 749	_	17 174	3 797
3 594	3 811	3 643	3 361	3 097	3 131	_	7 429	3 615
1 593	1 141	923	478	357	95	75	17	4 679
60	49		8	11	16	_	7	186
114	84	66	27	35	20	_	2	348
42	27	31	15	21	4	_	_	140
35	15	40	30	15	13	_	6	154
9	1	23	33	9	2	_	3	81
260	176	195	113	91	55	_	18	909
Ps (d)								
_	_	_	_	_	_	_	_	_
_	_	_	_	_	_	_	_	_
_	_	_	_	_	_	_	_	_
3	_	_	_	_	_	_	_	3
3	1	1	2	_	2	_	_	9
1	_	2	2	1	1	_	_	7
7	1	3	4	1	3	_	_	19
ublic hospital	s (e)							
·	` ,	29	13	11	4	_	1	111
· _					_	_	_	12
_		7	1		_	_	_	18
_	1		1	_	_	_	_	5
_			_	_	_	_	2	
	•	J					_	J
	NSW approved PB 3 745 4 415 3 325 3 698 2 579 1 734 3 486 3 708 approved PB 3 747 4 415 3 325 3 698 2 948 2 312 3 594  1 593 60 114 42 35 9 260 Ps (d)  Ps (d)  3 3 3 1 7	NSW Vic approved PBS provide 3 745  4 097 4 415  3 895 3 325  4 042 3 698  3 524 2 579  2 744 1 734  1 334 3 486  3 855 3 708  4 065  Oharmacy 3 747  4 097 4 415  3 895 3 325  4 042 3 698  3 524 2 948  2 927 2 312  1 334 3 594  3 811  1 593  1 141 60  49 114  84 42  27 35  15 9  1 260  176  Ps (d)  Ps (d)  3  - 3  1 1  1 - 7  1 ublic hospitals (e)  1  52 - 6 - 8	NSW         Vic         Qld           approved PBS provider counting         3 745         4 097         3 911           4 415         3 895         4 118           3 325         4 042         3 388           3 698         3 524         3 660           2 579         2 744         3 396           1 734         1 334         1 147           3 486         3 855         3 049           3 708         4 065         3 737           oharmacy         3 747         4 097         3 911           4 415         3 895         4 235           3 325         4 042         3 439           3 698         3 524         3 660           2 948         2 927         3 736           2 312         1 334         3 142           3 594         3 811         3 643           1 593         1 141         923           60         49         35           114         84         66           42         27         31           35         15         40           9         1         23           260         176         195 <t< td=""><td>NSW Vic Qld WA approved PBS provider counting pharma 3 745</td><td>NSW Vic Qld WA SA approved PBS provider counting pharmacies, GPs 3 745</td><td>  NSW   Vic   Qld   WA   SA   Tas   Tas  </td><td>  NSW   Vic   Qid   WA   SA   Tas   ACT   Approved PBS provider counting pharmacies, GPs and Aboriginal Me   3 745   4 097   3 911   3 866   3 674   3 391   4 756   4 415   3 895   4 118   5 662   4 409   2 891   - 3 698   3 524   3 660   2 603   2 391   6 164   - 2 579   2 744   3 396   2 103   2 392   1 627   - 1 734   1 334   1 147   2 077   1 539   700   - 3 486   3 855   3 049   2 619   2 876   2 919   - 3 708   4 065   3 737   3 576   3 502   3 210   4 756   3 747   4 097   3 911   3 874   3 674   3 391   4 756   3 325   4 042   3 439   3 602   3 376   3 669   - 3 325   4 042   3 439   3 602   3 376   3 669   - 3 325   4 042   3 439   3 602   3 376   3 669   - 3 325   4 042   3 439   3 602   3 376   3 669   - 3 3698   3 524   3 660   2 603   2 391   6 164   - 2 948   2 927   3 736   2 243   2 392   1 877   - 2 312   1 334   3 142   3 966   2 737   1 749   - 3 3594   3 811   3 643   3 361   3 097   3 131   - 4 2 2 7   3 1 15   21   4   - 4   - 4   4 2 27   3 1 15   21   4   - 4   - 4   4 2 27   3 1 15   21   4   - 4   - 4   4   - 4   4   4   6   6   27   35   20   - 4   4   2 27   3 1 15   21   4   - 4   - 4   2 27   3 1 15   21   4   - 4   - 4   2 27   3 1 15   21   4   - 4   - 4   2 27   3 1 15   21   4   - 4   - 4   2 27   3 1   15   21   4   - 4   - 4   2 27   3 1   15   21   4   - 4   - 4   2 27   3 1   15   21   4   - 4   - 4   2 27   3 1   3 4   3 142   3 96   2 737   7 1 7 3   - 4   - 4   2 2   - 4   - 4   - 4   2 2   - 4</td><td>  NSW   Vic   Qid   WA   SA   Tas   ACT   NT   Approved PBS provider counting pharmacies, GPs and Aboriginal Medical Ser   3 745   4 097   3 911   3 866   3 674   3 391   4 756   4 491   4 415   3 895   4 118   5 662   4 409   2 891   -   5 044   3 325   4 042   3 388   3 473   3 376   3 669   -   3 115   3 698   3 524   3 660   2 603   2 391   6 164   -   -   2 579   2 744   3 396   2 103   2 392   1 627   -   2 372   1 734   1 334   1 147   2 077   1 539   700   -   736   3 486   3 855   3 049   2 619   2 876   2 919   -   1 423   3 708   4 065   3 737   3 576   3 502   3 210   4 756   1 892   3 747   4 097   3 911   3 874   3 674   3 391   4 756   4 491   4 415   3 895   4 235   5 662   4 810   2 891   -   5 044   3 325   4 042   3 439   3 602   3 376   3 669   -   3 115   3 698   3 524   3 660   2 603   2 391   6 164   -   -   -   2 948   2 927   3 736   2 243   2 392   1 877   -   6 325   2 312   1 334   3 142   3 966   2 737   1 749   -   17 174   3 594   3 811   3 643   3 361   3 097   3 131   -   7 429   4 42   2 7   31   15   21   4   -   -     3 594   3 811   3 643   3 361   3 097   3 131   -   7 429   4 7 6   1 89   1</td></t<>	NSW Vic Qld WA approved PBS provider counting pharma 3 745	NSW Vic Qld WA SA approved PBS provider counting pharmacies, GPs 3 745	NSW   Vic   Qld   WA   SA   Tas   Tas	NSW   Vic   Qid   WA   SA   Tas   ACT   Approved PBS provider counting pharmacies, GPs and Aboriginal Me   3 745   4 097   3 911   3 866   3 674   3 391   4 756   4 415   3 895   4 118   5 662   4 409   2 891   - 3 698   3 524   3 660   2 603   2 391   6 164   - 2 579   2 744   3 396   2 103   2 392   1 627   - 1 734   1 334   1 147   2 077   1 539   700   - 3 486   3 855   3 049   2 619   2 876   2 919   - 3 708   4 065   3 737   3 576   3 502   3 210   4 756   3 747   4 097   3 911   3 874   3 674   3 391   4 756   3 325   4 042   3 439   3 602   3 376   3 669   - 3 325   4 042   3 439   3 602   3 376   3 669   - 3 325   4 042   3 439   3 602   3 376   3 669   - 3 325   4 042   3 439   3 602   3 376   3 669   - 3 3698   3 524   3 660   2 603   2 391   6 164   - 2 948   2 927   3 736   2 243   2 392   1 877   - 2 312   1 334   3 142   3 966   2 737   1 749   - 3 3594   3 811   3 643   3 361   3 097   3 131   - 4 2 2 7   3 1 15   21   4   - 4   - 4   4 2 27   3 1 15   21   4   - 4   - 4   4 2 27   3 1 15   21   4   - 4   - 4   4   - 4   4   4   6   6   27   35   20   - 4   4   2 27   3 1 15   21   4   - 4   - 4   2 27   3 1 15   21   4   - 4   - 4   2 27   3 1 15   21   4   - 4   - 4   2 27   3 1 15   21   4   - 4   - 4   2 27   3 1   15   21   4   - 4   - 4   2 27   3 1   15   21   4   - 4   - 4   2 27   3 1   15   21   4   - 4   - 4   2 27   3 1   3 4   3 142   3 96   2 737   7 1 7 3   - 4   - 4   2 2   - 4   - 4   - 4   2 2   - 4	NSW   Vic   Qid   WA   SA   Tas   ACT   NT   Approved PBS provider counting pharmacies, GPs and Aboriginal Medical Ser   3 745   4 097   3 911   3 866   3 674   3 391   4 756   4 491   4 415   3 895   4 118   5 662   4 409   2 891   -   5 044   3 325   4 042   3 388   3 473   3 376   3 669   -   3 115   3 698   3 524   3 660   2 603   2 391   6 164   -   -   2 579   2 744   3 396   2 103   2 392   1 627   -   2 372   1 734   1 334   1 147   2 077   1 539   700   -   736   3 486   3 855   3 049   2 619   2 876   2 919   -   1 423   3 708   4 065   3 737   3 576   3 502   3 210   4 756   1 892   3 747   4 097   3 911   3 874   3 674   3 391   4 756   4 491   4 415   3 895   4 235   5 662   4 810   2 891   -   5 044   3 325   4 042   3 439   3 602   3 376   3 669   -   3 115   3 698   3 524   3 660   2 603   2 391   6 164   -   -   -   2 948   2 927   3 736   2 243   2 392   1 877   -   6 325   2 312   1 334   3 142   3 966   2 737   1 749   -   17 174   3 594   3 811   3 643   3 361   3 097   3 131   -   7 429   4 42   2 7   31   15   21   4   -   -     3 594   3 811   3 643   3 361   3 097   3 131   -   7 429   4 7 6   1 89   1

Table 10A.18 Approved providers of PBS medicines by PhARIA area at 30 June 2016 (a), (b)

	(- //								
	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (c)
PhARIA 6	_	_	4	3	_	_	_	2	9
PhARIA 2-6	_	16	20	6	4	_	_	4	50
Number of approved pri	vate hospita	ls (e)							
PhARIA 1	37	35	30	4	9	1	4	1	121
PhARIA 2	_	_	_	_	_	_	_	_	_
PhARIA 3	_	_	_	_	_	_	_	_	_
PhARIA 4	_	1	_	_	_	_	_	-	1
PhARIA 5	_	_	_	_	_	_	_	-	_
PhARIA 6	_	_	_	_	_	_	_	-	_
PhARIA 2-6	_	1	_	_	_	_	_	_	1
Number of Aboriginal Mo	edical Servic	es opera	ting under	Section 1	100 of the	Act (f)			
PhARIA 1	1	_	_	1	_	_	_	_	2
PhARIA 2	_	_	1	_	1	_	_	_	2
PhARIA 3	_	_	1	1	_	_	_	_	2
PhARIA 4	_	_	_	_	_	_	_	_	_
PhARIA 5	2	_	3	_	_	_	_	10	15
PhARIA 6	2	_	38	28	6	2	_	67	143
PhARIA 2-6	4	-	43	29	7	2	-	77	162

(a) Geolocation based on the Pharmacy Access/Remoteness Index of Australia (PhARIA). PhARIA is a composite index of accessibility that incorporates measures of remoteness and measures of professional isolation (represented by the average road distance to the five closest pharmacies). The PhARIA classification categories are:

Category 1 - Highly Accessible

Category 2 - Accessible (Group A)

Category 3 - Accessible (Group B)

Category 4 - Moderately Accessible

Category 5 - Remote

Category 6 - Very Remote

PhARIA 1 represents 'urban' and PhARIA 2-6 'rural' for the purpose of these data.

- (b) Rates are derived using 2011 Census population data.
- (c) Includes other territories.
- (d) A GP can obtain approval under S92 of the *National Health Act 1953* (Cwlth) to supply PBS medicines to people in the area in which they practise if it is deemed to be an area that lacks a convenient and efficient pharmaceutical service.
- (e) PBS approved private hospitals supply medicines to patients of the hospital (inpatients and outpatients), while public hospitals provide medicines only to patients on discharge.
- (f) Aboriginal Medical Services in remote and very remote areas can obtain approval to supply PBS medicines to patients under S100 of the *National Health Act 1953* (Cwlth). Remote and very remote areas are as defined in the Rural, Remote and Metropolitan Areas Classifications (RRMA), 1991 Census Edition.
  - Nil or rounded to zero.

Table 10A.18 Approved providers of PBS medicines by PhARIA area at 30 June 2016 (a), (b)

NSW Vic Qld WA SA Tas ACT NT Aust (c)

Source:

Department of Health unpublished, derived from Department of Human Services, ABS unpublished *2011 Census of Population and Housing* and the University of Adelaide's Australian Population and Migration Research Centre.

Table 10A.19 Approved providers of PBS medicines by geolocation, at 30 June (a), (b)

(a), (b)									
	NSW (c)	Vic (c)	Qld	WA	SA	Tas	ACT	NT (d)	Aust (e)
Number of people per pharmacy	1								
Urban									
2012	3 891	4 363	4 059	4 116	3 921	3 445	5 243	4 861	4 082
2013 (f)	3 855	4 319	4 065	4 066	3 775	3 440	4 952	4 254	4 034
2014	3 803	4 199	4 002	3 970	3 754	3 368	4 952	4 504	3 963
2015	3 793	4 152	3 963	3 906	3 759	3 391	4 820	4 491	3 933
2016	3 747	4 097	3 911	3 874	3 674	3 391	4 756	4 491	3 884
Rural									
2012	4 051	4 344	4 381	4 202	3 287	3 593		9 374	4 148
2013 (f)	3 811	4 077	3 904	3 776	3 332	3 288		8 898	3 887
2014	3 735	3 981	3 821	3 531	3 147	3 288		8 342	3 771
2015	3 636	3 877	3 759	3 452	3 131	3 189		7 866	3 688
2016	3 594	3 811	3 643	3 361	3 097	3 131	_	7 429	3 615
Number of pharmacies									
Urban									
2012	1 462	1 047	844	441	320	84	68	20	4 286
2013 (f)	1 546	1 082	887	455	347	93	72	18	4 500
2014	1 567	1 113	901	466	349	95	72	17	4 580
2015	1 574	1 126	911	474	349	95	74	17	4 620
2016	1 593	1 141	923	478	357	95	75	17	4 679
Rural									
2012	300	179	204	99	103	57		12	955
2013 (f)	248	165	183	101	85	53		15	851
2014	253	169	187	108	90	53		16	877
2015	257	173	189	110	90	54		17	891
2016	260	176	195	113	91	55	_	18	909
		170	100	110	01	00		10	000
Number of approved GPs — Ru		_	_						
2012	11	9	5	11	1	4		_	41
2013	10	1	5	11	1	5			33
2014	8	1	4	7	1	3		_	24
2015	7	1	4	5	1	3		_	21
2016	7	1	3	4	1	3	-	_	19
Number of approved hospitals –	– Urban (h)								
Public									
2012	_	53	27	12	8	3	_	1	104
2013	1	52	30	12	10	4		1	110
2014	1	52	29	13	10	4	_	1	110
2015	1	52	29	13	11	4	_	1	111
2016	1	52	29	13	11	4	_	1	111
Private				,		·		·	

Table 10A.19 Approved providers of PBS medicines by geolocation, at 30 June (a), (b)

(4), (5)									
	NSW (c)	Vic (c)	Qld	WA	SA	Tas	ACT	NT (d)	Aust (e)
2012	22	29	25	5	4	1	4	1	91
2013	26	29	25	4	6	1	3	1	95
2014	31	28	26	3	9	2	4	1	104
2015	36	32	28	3	9	2	4	1	115
2016	37	35	30	4	9	1	4	1	121
Number of approved hospitals –	– Rural (h)								
Public									
2012	_	18	22	6	_	1		4	51
2013		16	20	6	3			4	49
2014	_	16	20	6	3	_		4	49
2015	_	16	20	6	4	_		4	50
2016	_	16	20	6	4	_	-	4	50
Private									
2012	_	_	_	_	_	_		_	_
2013									
2014	_	_	_	_	_	_		_	_
2015	_	1	_	_	_	_		_	1
2016	_	1	_	_	_	_	_	_	1

(a) Geolocation based on the Pharmacy Access/Remoteness Index of Australia (PhARIA). PhARIA is a composite index of accessibility that incorporates measures of remoteness and measures of professional isolation (represented by the average road distance to the five closest pharmacies). The PhARIA classification categories are:

Category 1 - Highly Accessible

Category 2 - Accessible (Group A)

Category 3 - Accessible (Group B)

Category 4 - Moderately Accessible

Category 5 - Remote

Category 6 - Very Remote

PhARIA 1 represents 'urban' and PhARIA 2-6 'rural' for the purpose of these data.

- (b) Rates are derived using 2011 Census population data for 2012 and subsequent years and 2006 Census population data for 2011 and previous years.
- (c) For 2013, one public hospital in NSW is a campus of a Victorian hospital participating in the Pharmaceutical Reforms.
- (d) Care should be taken using data for the NT, as around 43 per cent of the population live in remote and very remote areas and data exclude Aboriginal Medical Services that supply medications in these areas under s.100 of the *National Health Act 1953* (Cwlth).
- (e) Includes other territories.
- (f) 118 pharmacies classified as rural at 30 June 2012 were reclassified as urban at 30 June 2013.
- (g) A GP can obtain approval under S92 of the *National Health Act 1953* (Cwlth) to supply PBS medicines to people in the area in which they practise if they are able to demonstrate that the area lacks a convenient and efficient pharmaceutical service. This criterion cannot be met in 'urban' areas.

# Table 10A.19 Approved providers of PBS medicines by geolocation, at 30 June (a), (b)

NSW (c) Vic (c) Qld WA SA Tas ACT NT (d) Aust (e)

- (h) The number of approved hospitals is reported by private/public status. Approved public hospitals provide PBS medicines to patients on discharge and outpatients, as well as PBS chemotherapy medicate for day-admitted and non-admitted patients. Approved private hospitals provide PBS medicines to all hospital patients.
  - .. Not applicable. Nil or rounded to zero.

Source:

Department of Health unpublished, derived from Department of Human Services, ABS unpublished 2006/2011 Census of Population and Housing and the University of Adelaide's Australian Population and Migration Research Centre.

**Table 10A.20** 

## PBS expenditure per person, by remoteness area (2015-16 dollars) (a), (b), (c), (d), (e)

	Unit	2012-13	2013-14	2014-15	2015-16
Total expenditure					
Major cities	\$m	4 998.6	5 097.6	4 890.8	5 337.8
Inner regional	\$m	1 598.0	1 628.9	1 578.3	1 723.6
Outer regional	\$m	714.7	722.2	701.2	779.5
Remote	\$m	70.1	72.3	71.2	75.8
Very remote	\$m	25.6	26.0	26.1	29.9
Unknown	\$m	2.4	2.2	3.4	2.5
Australia (f)	\$m	7 410.4	7 549.2	7 271.2	7 949.1
Expenditure per person					
Major cities	\$	313.2	312.4	294.4	316.5
Inner regional	\$	385.0	386.3	370.0	400.6
Outer regional	\$	349.2	349.4	336.9	373.8
Remote	\$	221.9	224.2	220.1	235.9
Very remote	\$	122.7	124.0	125.4	146.5
Australia (f)	\$	326.7	326.3	309.5	334.3

- (a) Time series financial data are adjusted to 2015-16 dollars using the General Government Final Consumption Expenditure (GGFCE) chain price deflator (2015-16 = 100) (table 10A.96). See chapter 2 for details.
- (b) Includes PBS general ordinary, general safety net, concessional ordinary, concessional free safety net and unknown free safety net. Excludes RPBS and doctor's bag.
- (c) Locality level data are only available on a cash accounting basis for general and concessional categories. These figures may differ from those published in the Department of Health annual report which are prepared on an accrual accounting basis and also include doctor's bag and other categories administered under special arrangements (such as medicines supplied in bulk to remote and very remote areas under s.100 of the National Health Act 1953 [Cwlth].) Expenditure on medications dispensed to remote and very remote areas under s.100 was \$29.4 million in 2014-15 (table 10A.7).
- (d) Remoteness areas are based on the Australian Statistical Geography Standard 2011 (ASGS) classification and are not comparable with data for previous years which were based on a different classification.
- (e) Rates are derived using the final ABS 2011 Census based estimated resident population (ERP). Rates in this table use the 30 June ERP preceding the reference year and differ from rates reported in tables 10A.3 and 10A.4 which use the 31 December ERP for the reference year.
- (f) Data for Australia includes Other Territories and expenditure that could not be allocated to a remoteness area.

Source: Department of Health unpublished, PBS Statistics; ABS 2013, Regional Population Growth, Australia, 2012, Cat. no. 3218.0; table 10A.96.

Table 10A.21 Availability of GPs by region (a), (b), (c), (d), (e), (f)

				<u> </u>	<i>,,</i> , ,, ,	,, , ,, ,	,, , ,		
	NSW	Vic	Qld	WA	SA	Tas A	ACT (g)	NT	Aust
Number of GPs									
2012-13									
Major cities	6 745	5 459	3 812	2 057	1 712		444		20 230
Inner regional	1 967	1 488	1 193	267	256	569	np		5 740
Outer regional	np	np	1 117	247	321	194		181	2 863
Remote	np	np	147	184	np	np		np	622
Very remote	np		216	148	np	np		np	664
Outer regional, remote and very remote	np	np	1 480	579	321	194		181	4 149
Total	9 296	7 264	6 485	2 903	2 398	798	444	530	30 118
Number of FSE GPs									
2012-13									
Major cities	4 966	3 773	2 652	1 275	1 113		242		14 021
Inner regional	1 230	908	798	149	136	279	np		3 500
Outer regional	np	np	575	120	179	118		77	1 562
Remote	np	np	36	54	np	np		np	185
Very remote	np		30	24	np	np		np	101
Outer regional, remote and very remote	np	np	641	198	179	118		77	1 848
Total	6 520	4 882	4 092	1 623	1 473	405	242	131	19 369
Number of FSE GPs pe	or 100 000	noonlo							
2012-13	1 100 000	people							
Major cities	92.0	87.9	93.9	68.5	91.8		64.7		87.9
Inner regional	87.1	84.0	86.4	68.6	75.9	83.1	np		84.3
Outer regional	np	np	85.5	65.0	88.5	71.3		58.5	76.3
Remote	np	np	45.1	53.1	np	np		np	57.8
Very remote	np		50.3	36.2	np	np		np	48.3
Outer regional,	'				•	•		•	
remote and very remote	np	np	78.9	56.2	68.1	66.9		32.8	71.8
Total	89.4	86.8	89.7	66.8	89.0	79.1	64.6	55.8	85.4
Number of GPs									
2013-14									
Major cities	7 067	5 740	3 988	2 273	1 786		461		21 316
Inner regional	2 062	1 611	1 300	269	272	597	np		6 113
Outer regional	np	np	1 156	269	335	202		207	3 029
Remote	np	np	161	197	np	np		np	681
Very remote	np		217	150	np	np		np	695

Table 10A.21 Availability of GPs by region (a), (b), (c), (d), (e), (f)

				<u> </u>	<i>,,</i> , ,, ,	<i>,,</i> , ,, ,	,, , ,		
	NSW	Vic	Qld	WA	SA	Tas A	A <i>CT</i> (g)	NT	Aust
Outer regional, remote and very remote	np	np	1 534	616	335	202		207	4 405
Total	9 760	7 683	6 822	3 159	2 513	836	461	598	31 834
Number of FSE GPs 2013-14									
Major cities	5 226	4 028	2 810	1 408	1 162		256		14 889
Inner regional	1 326	981	860	160	143	288	np		3 758
Outer regional	np	np	597	139	183	122		88	1 648
Remote	np	np	39	60	np	np		np	200
Very remote	np		30	24	np	np		np	106
Outer regional,									
remote and very remote	np	np	666	223	183	122		88	1 954
Total	6 900	5 215	4 336	1 791	1 535	419	256	148	20 601
Number of FSE GPs pe	er 100 000	people							
2013-14									
Major cities	95.1	91.7	97.3	72.8	94.7		67.2		91.2
Inner regional	92.8	89.5	91.1	70.2	78.9	85	np		89.1
Outer regional	np	np	87.2	73.9	90.5	74		65	79.7
Remote	np	np	48.8	57.8	np	np		np	62.0
Very remote	np		50.7	35.9	np	np		np	50.6
Outer regional, remote and	np	np	80.9	62.2	69.6	69.2		36.6	75.2
very remote <b>Total</b>	93.1	90.9	93.1	71.1	91.9	81.7	67.1	61.5	89.0
Number of GPs									
2014-15									
Major cities	7 469	5 996	4 159	2 443	1 859		489		22 415
Inner regional	2 136	1 684	1 340	279	281	618	np		6 339
Outer regional	np	np	1 189	281	345	195		218	3 131
Remote	np	np	161	219	np	np		np	685
Very remote	np		258	158	np	np		np	705
Outer regional, remote and very remote	np	np	1 608	658	345	195		218	4 521
Total	10 245	8 033	7 108	3 381	2 607	846	489	566	33 276
Number of ESE CDs									

Number of FSE GPs

2014-15

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Table 10A.21 Availability of GPs by region (a), (b), (c), (d), (e), (f)

	NSW	Vic	Qld	WA	SA	Tas	ACT (g)	NT	Aust
Major cities	5 521	4 275	2 995	1 557	1 235		267		15 849
Inner regional	1 409	1 075	934	168	150	305	np		4 042
Outer regional	np	np	646	155	193	127		106	1 782
Remote	np	np	44	66	np	np		np	218
Very remote	np		33	25	np	np		np	112
Outer regional,									
remote and very remote	np	np	723	246	193	127		106	2 112
Total	7 306	5 564	4 651	1 971	1 629	442	267	172	22 003
Number of FSE GPs pe	er 100 000	people							
2014-15									
Major cities	98.8	95.3	102.0	78.7	99.7		69.5		95.4
Inner regional	97.6	97.2	97.6	71.5	81.8	90.2	np		94.8
Outer regional	np	np	93.4	82.1	95.2	76.5		75.5	85.6
Remote	np	np	55.3	62.9	np	np		np	67.3
Very remote	np		55.5	38.1	np	np		np	53.8
Outer regional,									
remote and very remote	np	np	87.0	68.5	73.3	72.0		43.3	80.8
Total	97.2	95.2	98.5	76.6	96.6	85.9	69.2	70.2	93.7
Number of GPs									
2015-16									
Major cities	7 773	6 253	4 511	2 591	1 945		523		23 595
Inner regional	2 178	1 727	1 349	313	274	635	np		6 477
Outer regional	np	np	1 241	276	347	199		229	3 197
Remote	np	np	149	207	np	np		np	647
Very remote	np		255	148	np	np		np	689
Outer regional,									
remote and	np	np	1 645	631	347	199		229	4 533
very remote <b>Total</b>	10 587	8 329	7 506	3 534	2 697	868	523	560	34 605
iotai	10 507	0 329	7 500	3 534	2 091	000	523	300	34 605
Number of FSE GPs									
2015-16									
Major cities	5 776	4 514	3 200	1 687	1 294		286		16 757
Inner regional	1 458	1 126	989	185	156	317	np		4 233
Outer regional	np	np	676	159	201	132		119	1 845
Remote	np	np	47	67	np	np		np	223
Very remote	np		33	24	np	np		np	112
Outer regional,									
remote and very remote	np	np	756	250	201	132		119	2 180
voly romote									

Table 10A.21 Availability of GPs by region (a), (b), (c), (d), (e), (f)

	NSW	Vic	Qld	WA	SA	Tas A	ACT (g)	NT	Aust
Number of FSE GPs pe	er 100 000	people							
2015-16									
Major cities	101.8	98.6	107.3	84.5	103.5		73.9		99.4
Inner regional	100.1	101.2	102.6	77.5	84.2	93.2	np		98.4
Outer regional	np	np	97.2	84.3	99.4	79.5		83.7	88.5
Remote	np	np	59.3	64.5	np	np		np	69.4
Very remote	np		56.0	37.7	np	np		np	54.9
Outer regional, remote and very remote	np	np	90.7	70.2	76.4	74.8		48.7	83.5
Total	100.0	98.6	103.5	81.9	100.1	89.0	73.2	75.7	97.4

**FSE** = Full Service Equivalent. 1 FSE is approximately equivalent to a a 37.5 hour working week.

- (a) Remoteness areas are based on the Australian Statistical Geography Standard 2011 (ASGS) classification and are not comparable with data for previous years, which are based on a different classification.
- (b) There are no very remote areas in Victoria; no major cities in Tasmania; no outer regional or remote areas in the ACT; and no inner regional or major cities in the NT.
- (c) Data include vocationally registered GPs and other medical practitioners (OMPs).
- (d) GP numbers are based on doctors' major practice postcodes as at the last quarter of the reference period. The major practice postcode is the location at which a doctor rendered the most services. FSE numbers are based on doctors' practice location postcodes at which services were rendered within the reference period.
- (e) Historical data have been revised and may differ from previous reports. This is due to a change in methodology used to compute the number of GPs (associated with a small reduction in historical data for the number of GPs) and use of a new proxy measure for hours worked (FSE) in place of the previously used 'Full time Workload Equivalents' (FWE).
- (f) Full Service Equivalent (FSE) is an estimated measure of medical workforce based on Medicare claims information. FSE models total hours worked for each practitioner based on the number of days worked, volume of services, and schedule fees. One FSE is approximately equivalent to a workload of 7.5 hours per day, five days per week. The FSE for each practitioner is capped at 2.5.
- (g) For the ACT, inner regional area data are not reported for confidentiality reasons, but are included in major cities data.
  - .. Not applicable. **np** Not published.

Source: Department of Health unpublished, MBS Statistics.

Table 10A.22 Availability of female GPs (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Female GPs										
2006-07	no.	2 909	2 213	1 811	852	715	265	178	150	9 095
2007-08	no.	2 978	2 324	1 915	876	765	278	185	167	9 489
2008-09	no.	3 112	2 430	2 071	964	799	288	188	191	10 043
2009-10	no.	3 272	2 534	2 174	1 000	824	302	187	195	10 488
2010-11	no.	3 481	2 679	2 299	1 075	867	315	212	229	11 156
2011-12	no.	3 689	2 880	2 528	1 116	917	350	228	241	11 951
2012-13	no.	4 009	3 059	2 769	1 220	966	369	231	269	12 890
2013-14	no.	4 260	3 331	2 938	1 350	1 049	386	247	301	13 864
2014-15	no.	4 547	3 532	3 079	1 469	1 101	411	260	293	14 694
2015-16	no.	4 799	3 715	3 275	1 547	1 162	425	276	285	15 486
Female FSE GPs										
2006-07	no.	1 581	1 068	932	362	312	108	70	31	4 463
2007-08	no.	1 706	1 170	1 036	390	340	117	75	38	4 871
2008-09	no.	1 768	1 226	1 104	414	359	122	76	42	5 111
2009-10	no.	1 861	1 303	1 167	443	385	128	77	47	5 412
2010-11	no.	1 968	1 380	1 218	455	395	134	88	48	5 686
2011-12	no.	2 083	1 468	1 288	464	411	137	94	51	5 995
2012-13	no.	2 212	1 597	1 370	498	434	143	99	55	6 408
2013-14	no.	2 409	1 764	1 494	581	464	152	111	62	7 037
2014-15	no.	2 632	1 949	1 630	661	508	171	116	70	7 736
2015-16	no.	2 838	2 103	1 768	740	542	185	124	77	8 378
Female FSE GPs as	a proportion of all	FSE GPs								
2006-07	%	28.9	28.2	28.9	27.1	25.3	32.0	37.0	36.0	28.5
2007-08	%	29.8	29.0	30.0	27.5	26.0	32.8	37.5	39.6	29.3
2008-09	%	30.3	29.6	30.8	28.8	26.8	33.7	37.6	42.4	30.0

Table 10A.22 Availability of female GPs (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2009-10	%	31.0	30.2	31.2	29.6	27.6	33.9	37.2	42.7	30.7
2010-11	%	31.9	30.6	31.8	30.1	27.8	34.6	41.1	41.4	31.3
2011-12	%	32.9	31.5	32.8	30.3	28.5	34.8	42.2	44.0	32.2
2012-13	%	33.9	32.7	33.5	30.7	29.5	35.3	40.9	42.0	33.1
2013-14	%	34.9	33.8	34.5	32.4	30.2	36.3	43.4	41.9	34.2
2014-15	%	36.0	35.0	35.0	33.5	31.2	38.7	43.4	40.7	35.2
2015-16	%	37.3	35.9	35.8	34.9	31.9	40.2	43.4	41.6	36.2
Female FSE GP	Ps (e)									
2006-07	per 100 000 females	46.2	41.4	45.9	35.2	39.5	43.4	40.9	30.6	43.0
2007-08	per 100 000 females	49.2	44.6	49.7	36.8	42.5	46.7	43.2	36.6	46.1
2008-09	per 100 000 females	50.1	45.7	51.6	37.8	44.4	48.2	43.0	39.5	47.4
2009-10	per 100 000 females	52.1	47.7	53.4	39.4	47.1	50.2	42.8	43.3	49.3
2010-11	per 100 000 females	54.4	49.7	54.8	39.5	47.9	52.3	48.0	43.9	51.1
2011-12	per 100 000 females	57.0	52.1	56.9	39.1	49.4	53.3	50.4	46.2	53.0
2012-13	per 100 000 females	59.8	55.7	59.3	40.7	51.7	55.7	51.9	49.0	55.7
2013-14	per 100 000 females	64.1	60.3	63.5	46.1	54.9	58.9	57.5	54.1	60.1
2014-15	per 100 000 females	69.1	65.5	68.4	51.8	59.5	66.1	59.4	60.8	65.2
2015-16	per 100 000 females	73.4	69.4	73.2	57.4	63.1	71.2	62.6	66.8	69.6

**FSE** = Full Service Equivalent. 1 FSE is approximately equivalent to a a 37.5 hour working week.

<sup>(</sup>a) Data include vocationally registered GPs and other medical practitioners billing DHS Medicare.

<sup>(</sup>b) GP numbers are based on doctors' major practice postcodes as at the last quarter of the reference period. The major practice postcode is the location at which a doctor rendered the most services. FSE numbers are based on doctors' practice location postcodes at which services were rendered within the reference period.

<sup>(</sup>c) Historical data have been revised and may differ from previous reports. This is due to a change in methodology used to compute the number of GPs (associated with a small reduction in historical data for the number of GPs) and use of a new proxy measure for hours worked (FSE) in place of the previously used 'Full time Workload Equivalents' (FWE).

Table 10A.22 Availability of female GPs (a), (b), (c), (d)

Unit NSW Vic Qld WA SA Tas ACT NT Aust

- (d) Full Service Equivalent (FSE) is an estimated measure of medical workforce based on Medicare claims information. FSE models total hours worked for each practitioner based on the number of days worked, volume of services, and schedule fees. One FSE is approximately equivalent to a workload of 7.5 hours per day, five days per week. The FSE for each practitioner is capped at 2.5.
- (e) Rates are derived using the ABS female ERP for 31 December of the reference year. From 2011-12, the first preliminary ERP based on the 2011 Census is used. For 2010-11 and previous years, the final 2011 Census rebased ERP is used.

Source: Department of Health unpublished, MBS Statistics.

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Table 10A.23 Availability of male GPs (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Male GPs										
2006-07	no.	4 657	3 538	2 894	1 406	1 237	362	183	167	14 445
2007-08	no.	4 727	3 579	2 991	1 431	1 289	375	183	178	14 755
2008-09	no.	4 768	3 667	3 128	1 447	1 304	379	183	196	15 073
2009-10	no.	4 863	3 779	3 247	1 448	1 339	395	194	222	15 487
2010-11	no.	4 954	3 886	3 367	1 499	1 353	394	196	239	15 888
2011-12	no.	5 077	4 025	3 548	1 567	1 386	402	205	248	16 459
2012-13	no.	5 287	4 206	3 717	1 683	1 431	429	214	261	17 228
2013-14	no.	5 501	4 352	3 884	1 810	1 464	450	213	297	17 970
2014-15	no.	5 698	4 501	4 028	1 912	1 506	435	229	273	18 582
2015-16	no.	5 787	4 614	4 231	1 987	1 535	443	246	275	19 119
Male FSE GPs										
2006-07	no.	3 892	2 723	2 289	974	919	229	119	55	11 198
2007-08	no.	4 022	2 869	2 419	1 028	966	240	126	59	11 730
2008-09	no.	4 076	2 915	2 478	1 026	981	241	126	57	11 898
2009-10	no.	4 148	3 018	2 576	1 052	1 009	250	129	63	12 244
2010-11	no.	4 200	3 129	2 610	1 059	1 026	254	126	68	12 472
2011-12	no.	4 254	3 193	2 639	1 069	1 030	257	129	66	12 636
2012-13	no.	4 308	3 285	2 722	1 125	1 039	263	143	75	12 961
2013-14	no.	4 490	3 452	2 842	1 210	1 072	267	145	87	13 564
2014-15	no.	4 675	3 615	3 021	1 310	1 121	271	151	102	14 267
2015-16	no.	4 780	3 750	3 176	1 382	1 159	275	161	109	14 793
Male FSE GPs as a	proportion of all F	SE GPs								
2006-07	%	71.1	71.8	71.1	73.0	74.7	68.0	63.0	64.0	71.5
2007-08	%	70.2	71.0	70.0	72.5	73.9	67.2	63.0	61.5	70.7
2008-09	%	69.7	70.4	69.2	71.3	73.2	66.6	62.4	57.6	70.0

Table 10A.23 Availability of male GPs (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2009-10	%	69.0	69.9	68.8	70.4	72.4	66.1	62.3	57.3	69.3
2010-11	%	68.1	69.4	68.2	69.9	72.2	65.6	58.9	58.6	68.7
2011-12	%	67.1	68.5	67.2	69.7	71.5	65.2	57.8	56.9	67.8
2012-13	%	66.1	67.3	66.5	69.3	70.5	64.9	59.1	57.3	66.9
2013-14	%	65.1	66.2	65.5	67.6	69.8	63.7	56.6	58.8	65.8
2014-15	%	64.0	65.0	65.0	66.5	68.8	61.3	56.6	59.3	64.8
2015-16	%	62.7	64.1	64.2	65.1	68.1	59.8	56.3	58.9	63.8
Male FSE GPs (e	e)									
2006-07	per 100 000 males	115.8	107.8	113.1	93.0	119.2	94.4	71.1	50.2	109.3
2007-08	per 100 000 males	117.8	111.4	116.5	95.5	123.9	97.8	74.0	52.3	112.3
2008-09	per 100 000 males	117.3	110.7	116.0	92.1	124.2	96.9	72.3	49.0	111.3
2009-10	per 100 000 males	117.6	112.4	118.1	92.2	126.0	99.4	72.5	52.8	112.5
2010-11	per 100 000 males	117.8	115.0	117.9	90.7	127.0	100.1	69.5	56.2	113.0
2011-12	per 100 000 males	118.3	115.9	117.3	89.0	126.6	100.9	70.0	54.1	113.0
2012-13	per 100 000 males	118.1	116.9	118.3	90.1	126.2	102.9	75.7	60.2	113.7
2013-14	per 100 000 males	121.1	120.5	121.6	93.8	128.9	104.3	75.9	68.0	116.9
2014-15	per 100 000 males	124.5	124.1	127.7	100.4	133.7	105.6	78.4	79.0	121.4
2015-16	per 100 000 males	125.6	126.5	132.8	105.1	137.4	106.7	82.6	84.7	124.3

**FSE** = Full Service Equivalent. 1 FSE is approximately equivalent to a a 37.5 hour working week.

- (a) Data include vocationally registered GPs and other medical practitioners billing DHS Medicare.
- (b) GP numbers are based on doctors' major practice postcodes as at the last quarter of the reference period. The major practice postcode is the location at which a doctor rendered the most services. FSE numbers are based on doctors' practice location postcodes at which services were rendered within the reference period.
- (c) Historical data have been revised and may differ from previous reports. This is due to a change in methodology used to compute the number of GPs (associated with a small reduction in historical data for the number of GPs) and use of a new proxy measure for hours worked (FSE) in place of the previously used 'Full time Workload Equivalents' (FWE).

Table 10A.23 Availability of male GPs (a), (b), (c), (d)

Uni	it NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust

- (d) Full Service Equivalent (FSE) is an estimated measure of medical workforce based on Medicare claims information. FSE models total hours worked for each practitioner based on the number of days worked, volume of services, and schedule fees. One FSE is approximately equivalent to a workload of 7.5 hours per day, five days per week. The FSE for each practitioner is capped at 2.5.
- (e) Rates are derived using the ABS male ERP for 31 December of the reference year. From 2011-12, the first preliminary ERP based on the 2011 Census is used. For 2010-11 and previous years, the final 2011 Census rebased ERP is used.

Source: Department of Health unpublished, MBS Statistics.

Table 10A.24 Availability of public dentists (per 100 000 people) (a), (b), (c), (d), (e)

	NSW	Vic	Qld	WA	SA	Tas (f)	ACT (f)	NT (f)	Aust (g)
E dentists per 100 000 population (h)									
2011									
Major cities	4.9	4.8	6.6	6.1	8.6	**	7.2		5.6
Inner regional	3.5	4.7	6.3	3.7	3.5	5.4	_		4.6
Outer regional	1.9	4.1	7.4	3.2	5.6	np		13.2	5.0
Remote and very remote	np	_	np	10.0	np	_		8.9	6.1
Total	4.4	4.7	6.5	5.8	7.6	3.7	7.2	11.3	5.4
2012 (i)									
Major cities	5.6	4.5	5.6	5.9	6.5		7.0		5.5
Inner regional	4.4	3.3	6.0	4.3	2.5	5.6	_		4.5
Outer regional	1.8	3.2	7.9	3.3	4.4	np		8.0	4.7
Remote and very remote (j)	np	_	3.4	6.3	np	_		8.3	5.1
Total (k)	5.1	4.2	6.0	5.6	5.7	3.9	7.0	8.1	5.2
2013 (I)									
Major cities	6.1	4.8	6.3	6.0	8.1		3.8		5.9
Inner regional	4.8	4.9	7.1	5.7	3.7	6.4	np		5.5
Outer regional	2.6	5.4	11.6	3.6	6.9	np		10.7	6.8
Remote and very remote (j)	np	_	6.4	8.8	_	_		9.0	6.9
Total (k)	5.7	4.8	7.3	6.0	7.2	4.4	4.1	10.0	5.9
2014 (m)									
Major cities	6.1	6.3	6.9	6.7	8.6		7.0		6.6
Inner regional	4.5	5.8	8.0	6.0	4.4	9.5	np		6.1
Outer regional	2.7	8.6	10.1	5.3	8.4	3.0		15.0	7.4
Remote and very remote (j)	np	_	10.8	6.5	3.3	np		9.6	7.9
Total (k)	5.6	6.3	7.8	6.5	8.0	7.4	7.3	12.7	6.6

Table 10A.24 Availability of public dentists (per 100 000 people) (a), (b), (c), (d), (e)

NSW Vic Qld WA SA Tas (f) ACT (f) NT (f) Aust (g)

FTE = Full Time Equivalent. FTE based on a 40-hour week.

- (a) Data include dentists employed in the dentist workforce, on extended leave and looking for work in the dentist workforce.
- (b) For 2014, data are based on all clinical hours worked in the public sector, including by those who also work in the private sector. For 2013 and previous years, data are for dentists working in the public sector only in public dental hospitals, school dental services, general dental services, defence forces, tertiary education and 'other public' areas; hours worked by dentists working in both public and private sectors are excluded. This constitutes a break in time series. Data for 2014 are not comparable with data for previous years.
- (c) Remoteness areas for 2012 and subsequent years are defined using the Australian Statistical Geography Standard (ASGS), based on the ABS 2011 Census of population and housing. Remoteness areas for 2011 are defined using the Australian Standard Geographical Classification (ASGC), based on the ABS 2006 Census of population and housing.
- (d) Allocation to State or Territory is derived from state and territory of main job where available; otherwise, state and territory of principal practice is used as a proxy. If principal practice details are unavailable, state and territory of residence is used. Where none of these is available, location is coded 'unstated'. Data for Australia include location unstated.
- (e) Allocation to region is based on postcode of main job where available; otherwise, postcode of principal practice is used as a proxy. If principal practice details are unavailable, postcode of residence is used. Where none of these is available, location is coded 'unstated' and data are included in 'Total'.
- (f) There are no major cities in Tasmania; no outer regional, remote or very remote areas in the ACT; and no major cities or inner regional areas in the NT.
- (g) Data for Australia include those with location 'unstated'.
- (h) FTE based on a 40-hour week.
- (i) Data for 2011 are for total hours worked by dentists employed in the public sector and include provisional registrants. Dentists working in both the public and the private sector are excluded.
- (j) Remote and very remote includes Migratory areas.
- (k) Total includes those with remoteness area unstated.
- (I) Data for 2012 and 2013 are for clinical hours worked by dentists employed in the public sector and exclude provisional registrants. Dentists working in both the public and the private sector are excluded.
- (m) Data for 2014 and subsequent years are for clinical hours worked in the public sector by dentists working some hours in the public and/or the private sector. This constitutes a break in time series; data for 2014 are not comparable with data for previous years. Data for 2014 exclude provisional registrants.

na Not available... Not applicable. - Nil or rounded to zero. np Not published.

Source: AIHW unpublished, National Health Workforce Data Set.

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Table 10A.25 Availability of public dental hygienists and dental therapists (per 100 000 people) (a), (b), (c), (d), (e)

	NSW	Vic	Qld	WA	SA	Tas (f)	ACT (f)	NT (f)	Aust (g)
2011							Ç	. ,	(3)
FTE dental hygienists per 100 000	population								
Major cities	0.1	np	0.2	0.7	0.6		np		0.2
Inner regional	_	_	_	_	_	_	_		_
Outer regional	_	np	np	_	_	_		_	0.1
Remote and very remote	_	_	_	_	_	_		_	_
Total	0.1	-	0.1	0.5	0.5	_	0.3	_	0.1
FTE dental therapists per 100 000	population								
Major cities	1.7	1.3	5.3	5.2	3.8		2.5		2.8
Inner regional	3.3	2.2	6.4	5.4	7.8	6.5	_		4.3
Outer regional	2.5	1.5	6.0	7.6	7.0	8.8		9.5	5.4
Remote and very remote	np	_	3.6	6.8	6.7	_		4.7	5.0
Total	2.1	1.5	5.6	5.6	4.8	7.2	2.5	7.4	3.4
2012 (h)									
FTE dental hygienists per 100 000	population								
Major cities	0.2	0.1	np	0.4	0.8	••	np		0.2
Inner regional	np	np	_	_	_	_	_		_
Outer regional	_	np	np	_	_	_		_	0.1
Remote and very remote (i)	_	_	_	_	_	_		np	0.3
Total (j)	0.1	0.1	0.1	0.3	0.6	-	0.2	0.7	5.2
FTE dental therapists per 100 000	population								
Major cities	1.7	1.4	5.1	5.2	4.0		2.7		2.8
Inner regional	3.7	2.2	6.2	5.8	5.0	5.9	np		4.2
Outer regional	2.9	0.9	6.3	7.8	8.7	6.0		8.7	5.4
Remote and very remote (i)	_	_	3.3	4.2	5.1	np		5.7	4.2
Total (j)	2.1	1.5	5.4	5.4	4.7	6.1	3.0	7.4	3.3

Table 10A.25 Availability of public dental hygienists and dental therapists (per 100 000 people) (a), (b), (c), (d), (e)

	NSW	Vic	Qld	WA	SA	Tas (f)	ACT (f)	NT (f)	Aust (g)
2013 (k)							` '		
FTE dental hygienists per 100 000	population								
Major cities	0.1	np	-	0.3	0.5		_		0.1
Inner regional	_	np	-	_	_	_	_		_
Outer regional	_	_	_	_	np	_		np	0.1
Remote and very remote (i)	np	_	_	_	_	_		_	_
Total (j)	0.1	-	-	0.3	0.4	_	-	0.2	0.1
FTE dental therapists per 100 000	population								
Major cities	1.8	2.0	4.7	5.2	4.0		3.3		3.0
Inner regional	3.7	2.0	6.0	6.1	4.2	np	_		4.1
Outer regional	2.5	1.8	5.7	6.6	8.6	8.1		8.7	5.3
Remote and very remote (i)	_	_	4.4	4.4	5.6	7.5		7.0	4.7
Total (j)	2.2	2.0	5.1	5.3	4.7	7.2	3.3	7.9	3.4
2014 (I)									
FTE dental hygienists per 100 000	population								
Major cities	0.1	0.1	_	0.4	0.2		np		0.1
Inner regional	_	np	_	_	_	_	_		_
Outer regional	_	-	np	_	-	_		np	0.1
Remote and very remote (i)	_	-	-	np	-	_		-	0.2
Total (j)	0.1	0.1	-	0.4	0.2	-	0.3	0.4	0.1
FTE dental therapists per 100 000	population								
Major cities	1.8	2.3	4.3	5.4	5.0		3.9		3.1
Inner regional	3.5	2.4	6.0	4.7	4.9	7.4	_		4.1
Outer regional	2.5	1.6	6.5	6.9	7.4	8.4		8.5	5.5
Remote and very remote (i)	_	_	2.9	4.7	3.3	np		7.6	4.1
Total (j)	2.1	2.2	4.9	5.4	5.2	7.8	3.9	8.2	3.5

Table 10A.25 Availability of public dental hygienists and dental therapists (per 100 000 people) (a), (b), (c), (d), (e)

NSW Vic Qld WA SA Tas (f) ACT (f) NT (f) Aust (g)

FTE = Full Time Equivalent. FTE based on a 40-hour week.

- (a) Data include dental hygienists and dental therapists who are employed, on extended leave and looking for work, in the dental hygiene and dental therapy workforces, respectively. Dual registered practitioners (those registered as both dental therapists and dental hygienists) are included in dental therapists data and are excluded from dental hygienists data.
- (b) For 2014, data are based on all clinical hours worked in the public sector, including by those who also work in the private sector. For 2013 and previous years, data are for those working in the public sector only in public dental hospitals, school dental services, general dental services, defence forces, tertiary education and 'other public' areas; those working in both public and private sectors are excluded. This constitutes a break in time series. Data for 2014 are not comparable with data for previous years.
- (c) Remoteness areas for 2012 and subsequent years are defined using the Australian Statistical Geography Standard (ASGS), based on the ABS 2011 Census of population and housing. Remoteness areas for 2011 are defined using the Australian Standard Geographical Classification (ASGC), based on the ABS 2006 Census of population and housing.
- (d) Allocation to State or Territory is derived from state and territory of main job where available; otherwise, state and territory of principal practice is used as a proxy. If principal practice details are unavailable, state and territory of residence is used. Where none of these is available, location is coded 'unstated'. Data for Australia include location unstated.
- (e) Allocation to region is based on postcode of main job where available; otherwise, postcode of principal practice is used as a proxy. If principal practice details are unavailable, postcode of residence is used. Where none of these is available, location is coded 'unstated' and data are included in 'Total'.
- (f) There are no major cities in Tasmania; no outer regional, remote or very remote areas in the ACT; and no major cities or inner regional areas in the NT.
- (g) Data for Australia include those with location 'unstated'.
- (h) Data for 2011 are for total hours worked by dental hygienists and dental therapists employed in the public sector and include provisional registrants. Those working in both the public and the private sector are excluded.
- (i) Remote and very remote includes Migratory areas.
- (j) Total includes those with remoteness area unstated.
- (k) Data for 2012 and 2013 are for clinical hours worked by those employed in the public sector and exclude provisional registrants. Those working in both the public and the private sector are excluded.
- (I) Data for 2014 and subsequent years are for clinical hours worked in the public sector by those working some hours in the public and/or the private sector. This constitutes a break in time series; data for 2014 are not comparable with data for previous years. Data for 2014 exclude provisional registrants.

na Not available. .. Not applicable. – Nil or rounded to zero. np Not published.

Source: AIHW unpublished, National Health Workforce Data Set.

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Table 10A.26 Availability of public Occupational Therapists and Psychologists (per 100 000 people) (a), (b), (c), (d), (e), (f), (g), (h), (i), (j)

	NSW	Vic	Qld (k)	WA (k)	SA (k)	Tas (I)	ACT (I)	NT (I)	Aust (m)
2011 (g), (i)									
FTE psychologists per 100 000 p	opulation (k)								
Major cities	35.7	29.6	27.1	35.4	24.6		68.4		32.4
Inner regional	27.0	15.1	20.7	23.0	7.0	31.2	_		21.8
Outer regional	18.2	7.5	25.7	23.3	4.4	11.2		43.8	19.5
Remote and very remote	17.2	_	10.4	21.1	6.0	_		17.6	14.9
Total (k)	32.9	25.8	25.1	32.4	19.6	24.1	68.3	32.3	28.9
2012									
FTE occupational therapists per	100 000 populatio	on (k)							
Major cities	23.5	29.7	na	na	na		np		na
Inner regional	21.9	26.9	na	na	na	np	np		na
Outer regional	np	20.5	na	na	na	np		36.4	na
Remote/very remote	np	_	na	na	na	np		14.5	na
Total	22.4	28.7	na	na	na	19.1	27.3	26.8	na
FTE employed psychologists per	100 000 populati	on (c)							
Major cities	26.5	19.2	19.2	23.9	18.1		41.6		22.7
Inner regional	21.9	12.2	13.8	10.8	4.7	29.4	_		16.8
Outer regional	13.3	5.3	17.8	14.5	np	np		34.7	14.1
Remote/very remote (n)	10.5	_	12.3	15.0	np	np		11.0	11.9
Total (o)	24.7	17.3	17.7	21.4	14.3	23.2	41.5	25.6	20.6
2013 (i)									
FTE employed occupational thera	apists per 100 00	0 population	(b), (k)						
Major cities	23.9	30.5	25.0	28.1	31.9		26.6		27.0
Inner regional	23.0	28.4	17.7	16.7	17.0	28.9	_		23.1
Outer regional	np	21.2	27.7	24.2	20.1	np		34.6	22.0

Table 10A.26 Availability of public Occupational Therapists and Psychologists (per 100 000 people) (a), (b), (c), (d), (e), (f), (g), (h), (i), (j)

	NSW	Vic	Qld (k)	<i>WA</i> (k)	SA (k)	Tas (I)	ACT (I)	NT (I)	Aust (m)
Remote/very remote (n)	np	_	15.6	15.3	18.7	np		15.3	14.5
Total (o)	23.0	29.7	23.7	25.9	28.3	22.4	26.6	26.2	25.6
FTE employed psychologists per	100 000 populati	on (c)							
Major cities	33.0	25.8	23.7	32.4	22.0		60.4		29.1
Inner regional	26.7	18.7	17.1	16.0	6.5	27.5	np		21.1
Outer regional	18.4	5.8	25.1	19.0	4.7	13.0		45.6	19.2
Remote/very remote (n)	19.3	_	7.6	18.3	7.6	np		19.3	14.0
Total (o)	30.9	23.6	22.1	28.9	17.7	22.4	60.5	34.2	26.5
2014									
FTE employed occupational thera	apists per 100 00	0 population (	(b)						
Major cities	22.3	29.4	25.3	26.1	30.6	••	26.3	••	25.9
Inner regional	22.3	29.9	17.5	14.9	13.6	26.0	_		22.7
Outer regional	np	np	28.9	28.1	29.6	np		34.2	24.0
Remote/very remote (n)	np	np	18.0	16.4	16.5	np		22.0	17.3
Total (o)	21.7	29.3	24.1	24.6	28.2	22.1	26.2	29.0	25.0
FTE employed psychologists per	100 000 populati	on (c)							
Major cities	30.5	26.1	22.0	29.3	21.1		50.7		27.5
Inner regional	25.5	18.0	15.5	14.9	6.5	31.0	117.0		20.4
Outer regional	16.1	8.6	18.1	19.1	np	np		37.0	16.1
Remote/very remote (n)	12.7	_	7.2	17.6	np	np		16.2	12.8
Total (o)	28.6	23.8	19.7	26.4	17.1	24.7	51.0	28.2	24.9

**FTE** = Full Time Equivalent

<sup>(</sup>a) For 2014, data are based on hours worked in a clinical role (occupational therapists) or direct client services role (psychologists) in the public sector, including by those who also work in the private sector. For 2013 and previous years, data are for practitioners working in the public sector only and exclude practitioners who work in both the public and private sectors. This constitutes a break in time series. Data for 2014 are not comparable with data for previous years.

Table 10A.26 Availability of public Occupational Therapists and Psychologists (per 100 000 people) (a), (b), (c), (d), (e), (f), (g), (h), (i), (j)

NSW Vic Qld (k) WA (k) SA (k) Tas (l) ACT (l) NT (l) Aust (m)

- (b) For Occupational Therapists, data for 2013 and previous years are for clinical hours worked by occupational therapists employed in the public sector and exclude practitioners who work in both the public and private sectors.
- (c) For Psychologists:
  - data for 2011 are based on total hours worked only by practitioners employed in the public sector
  - data for 2012 are based on clinical hours worked only by practitioners employed in the public sector
  - data for 2013 are based on hours worked in a direct client service role only by practitioners employed in the public sector.
- (d) Data exclude provisional registrants.
- (e) Historical data have been revised and may differ from prevous reports.
- (f) Occupational therapists joined the National Registration and Accreditation Scheme (NRAS) 1 July 2012. Data are not available for previous years.
- (g) Remoteness areas are defined using the Australian Statistical Geography Standard (ASGS), based on the ABS 2011 Census of population and housing.
- (h) Allocation to State or Territory is by location of main job where available. Otherwise, location of principal practice is used as a proxy. If that is also not available, location of residence is used. If none of these are available, location is coded 'unstated' and data are included for Australia.
- (i) Allocation to region is based on postcode of main job where available; otherwise, postcode of principal practice is used as a proxy. If principal practice details are unavailable, postcode of residence is used. Where none of these is available, location is coded 'unstated' and data are included in 'Total'.
- (j) FTE based on a 38-hour week.
- (k) Occupational therapist workforce data are not available for 2012 for Queensland, WA or SA. Due to transitional arrangements to the National Registration and Accreditation Scheme, many occupational therapists were not required to renew their registration and so did not complete a workforce survey.
- (I) There are no major cities in Tasmania; no outer regional, remote or very remote areas in the ACT; and no major cities or inner regional areas in the NT.
- (m) Data for Australia include those with location 'unstated'.
- (n) Remote/very remote includes Migratory areas.
- (o) Total includes those with remoteness area unstated.

**na** Not available. .. Not applicable. – Nil or rounded to zero. **np** Not published.

Source: AIHW unpublished, National Health Workforce Data Set.

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Table 10A.27 Annual health assessments for older people by Indigenous status (per cent) (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2009-10										
Indigenous older people										
Number of people assessed (g)	no.	1 652	337	2 053	1 021	153	36	46	1 186	6 484
Target population (h)	no.	18 646	4 092	14 257	6 674	3 141	2 278	328	5 360	54 807
Proportion of target population assessed	%	8.9	8.2	14.4	15.3	4.9	1.6	14.0	22.1	11.8
Non-Indigenous older people										
Number of people assessed (i)	no.	116 756	77 946	65 087	24 451	28 049	9 151	2 724	292	324 456
Target population (j)	no.	467 220	350 473	237 999	119 044	122 469	35 271	15 843	2 666	1 351 013
Proportion of target population assessed	%	25.0	22.2	27.3	20.5	22.9	25.9	17.2	11.0	24.0
2010-11										
Aboriginal and Torres Strait Islander	older peop	le								
Number of people assessed (g)	no.	3 216	422	3 149	1 509	450	109	36	1 574	10 465
Target population (h)	no.	19 654	4 312	15 114	7 068	3 303	2 399	376	5 609	57 868
Proportion of target population assessed	%	16.4	9.8	20.8	21.3	13.6	4.5	9.6	28.1	18.1
Non-Indigenous older people										
Number of people assessed (i)	no.	130 114	90 493	74 576	29 865	31 394	10 976	3 169	302	370 889
Target population (j)	no.	478 253	358 105	244 178	122 815	123 854	35 826	16 360	2 825	1 382 248
Proportion of target population assessed	%	27.2	25.3	30.5	24.3	25.3	30.6	19.4	10.7	26.8
2011-12										
Aboriginal and Torres Strait Islander	older peop	le								
Number of people assessed (g)	no.	4 156	558	4 588	1 632	509	185	48	1 764	13 440

Table 10A.27 Annual health assessments for older people by Indigenous status (per cent) (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Target population (h)	no.	20 775	4 489	16 001	7 541	3 469	2 519	423	5 934	61 185
Proportion of target population assessed	%	20.0	12.4	28.7	21.6	14.7	7.3	11.4	29.7	22.0
Non-Indigenous older people										
Number of people assessed (i)	no.	137 445	96 176	79 933	31 879	32 887	11 499	3 271	314	393 404
Target population (j)	no.	487 126	365 944	250 898	126 677	125 660	36 643	16 919	3 023	1 412 742
Proportion of target population assessed	%	28.2	26.3	31.9	25.2	26.2	31.4	19.3	10.4	27.8
2012-13										
Aboriginal and Torres Strait Islander	older peop	le								
Number of people assessed (g)	no.	5 166	718	5 447	2 191	604	262	73	2 266	16 727
Target population (h)	no.	21 979	4 644	16 978	8 032	3 644	2 659	460	6 343	64 773
Proportion of target population assessed	%	23.5	15.5	32.1	27.3	16.6	9.9	15.9	35.7	25.8
Non-Indigenous older people										
Number of people assessed (i)	no.	146 182	101 897	87 240	35 745	35 332	12 887	3 818	373	423 474
Target population (j)	no.	499 610	375 719	258 431	130 987	127 857	37 541	17 635	3 268	1 450 718
Proportion of target population assessed	%	29.3	27.1	33.8	27.3	27.6	34.3	21.7	11.4	29.2
2013-14										
Aboriginal and Torres Strait Islander	older peop	le								
Number of people assessed (g)	no.	6 540	846	6 771	2 792	801	365	101	2 745	20 961
Target population (h)	no.	23 245	4 841	18 025	8 520	3 830	2 826	495	6 779	68 597
Proportion of target population assessed	%	28.1	17.5	37.6	32.8	20.9	12.9	20.4	40.5	30.6

Table 10A.27 Annual health assessments for older people by Indigenous status (per cent) (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Non-Indigenous older people										
Number of people assessed (i)	no.	157 080	112 061	95 169	41 646	39 774	13 764	4 282	547	464 323
Target population (j)	no.	510 562	385 295	266 773	135 602	130 089	38 318	18 316	3 481	1 488 095
Proportion of target population assessed	%	30.8	29.1	35.7	30.7	30.6	35.9	23.4	15.7	31.2
2014-15										
Aboriginal and Torres Strait Islander	older peo	ple								
Number of people assessed (g)	no.	7 565	1 006	7 614	3 158	957	544	128	2 774	23 746
Target population (h)	no.	24 555	5 078	19 076	9 033	4 021	2 991	531	7 224	72 548
Proportion of target population assessed	%	30.8	19.8	39.9	35.0	23.8	18.2	24.1	38.4	32.7
Non-Indigenous older people										
Number of people assessed (i)	no.	163 253	114 829	101 082	43 402	39 533	13 275	4 256	720	480 350
Target population (j)	no.	523 637	393 878	276 664	140 517	132 364	39 254	19 064	3 726	1 528 757
Proportion of target population assessed	%	31.2	29.2	36.5	30.9	29.9	33.8	22.3	19.3	31.4
2015-16										
Aboriginal and Torres Strait Islander	older peo	ple								
Number of people assessed (g)	no.	8 715	1 181	8 679	3 534	1 031	681	171	3 279	27 271
Target population (h)	no.	25 948	5 331	20 193	9 592	4 223	3 171	566	7 686	76 753
Proportion of target population assessed	%	33.6	22.2	43.0	36.8	24.4	21.5	30.2	42.7	35.5
Non-Indigenous older people										
Number of people assessed (i)	no.	167 734	118 321	107 727	46 269	41 102	13 660	4 689	733	500 235
Target population (j)	no.	535 255	404 442	286 705	145 428	134 531	40 314	19 895	4 033	1 570 242

Table 10A.27 Annual health assessments for older people by Indigenous status (per cent) (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Proportion of target population assessed	%	31.3	29.3	37.6	31.8	30.6	33.9	23.6	18.2	31.9

- (a) Older people are defined as Aboriginal and Torres Strait Islander people aged 55 years or over and non-Indigenous people aged 75 years or over, excluding people living in residential aged care facilities.
- (b) Indigenous status is determined by self-identification. Aboriginal and Torres Strait Islander people aged 75 years or over may have received a health assessment under the 'all older people' MBS items. This is considered unlikely to affect overall proportions significantly, due to the relatively low average life expectancy of Aboriginal and Torres Strait Islander people.
- (c) Data exclude health assessments provided outside DHS Medicare under service models used to increase access for people in remote areas and for Aboriginal and Torres Strait Islander Australians are therefore likely to understate the proportion who access health assessments.
- (d) Excludes services that qualify under the DVA National Treatment Account and services provided in public hospitals.
- (e) Allocation of patients to state or territory is based on the final claim processed for each patient in the reference period. Data are for number of patients receiving a health assessment rather than number of health assessments provided.
- (f) Rates have been revised to the ABS' final 2011 Census rebased estimates and projections and may differ from previous reports. See chapter 2 (tables 2A.1 and 2A.13-14) for details.
- (g) Includes claims for MBS items 704, 706 and 715, for Aboriginal and Torres Strait Islander people aged 55 years or over.
- (h) Derived population of Aboriginal and Torres Strait Islander people aged 55 years or over at 31 December, computed by averaging the estimates/projections at 30 June at each end of the reference year. Historical data have been revised to the ABS' final 2011 Census rebased estimates and projections and may differ from previous reports. See chapter 2 (tables 2A.1 and 2A.13-14) for details.
- (i) Includes claims for MBS items 700, 702, 701, 703, 705 and 707, for people aged 75 years or over.
- (j) Estimated population of non-Indigenous people aged 75 years or over as at 31 December, computed by subtracting the derived population of Aboriginal and Torres Strait Islander people aged 75 or over (see footnote (h)) from the December 31 ERP for all Australians aged 75 years or over. Historical data have been revised to the ABS' final 2011 Census rebased estimates and projections and may differ from previous reports. Non-Indigenous population estimates are available for census years only. For inter-censal years, experimental estimates and projections data for the Aboriginal and Torres Strait Islander population are derived using various assumptions. These can be used to derive denominators for calculating non-Indigenous rates for the inter-censal years. However, such figures have a degree of uncertainty and should be used with caution, particularly as the time from the base year of the projection series increases.

Source: Department of Health unpublished, MBS data collection; ABS various years, Australian Demographic Statistics, Cat. no. 3201.0; ABS 2014, Experimental estimates and projections, Aboriginal and Torres Strait Islander Australians 2001 to 2026, Cat. no. 3238.0.

Table 10A.28 Older Aboriginal and Torres Strait Islander people who received an annual health assessment (per cent) (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (g)
2008-09										
Number of people assessed	no.	1 466	265	1 544	798	140	23	24	993	5 253
Target population	no.	17 726	3 868	13 432	6 329	2 994	2 168	286	5 133	51 967
Proportion of target population assessed	%	8.3	6.9	11.5	12.6	4.7	1.1	8.4	19.3	10.1
2009-10										
Number of people assessed	no.	1 652	337	2 053	1 021	153	36	46	1 186	6 484
Target population	no.	18 646	4 092	14 257	6 674	3 141	2 278	328	5 360	54 807
Proportion of target population assessed	%	8.9	8.2	14.4	15.3	4.9	1.6	14.0	22.1	11.8
2010-11										
Number of people assessed	no.	3 216	422	3 149	1 509	450	109	36	1 574	10 465
Target population	no.	19 654	4 312	15 114	7 068	3 303	2 399	376	5 609	57 868
Proportion of target population assessed	%	16.4	9.8	20.8	21.3	13.6	4.5	9.6	28.1	18.1
2011-12										
Number of people assessed	no.	4 156	558	4 588	1 632	509	185	48	1 764	13 440
Target population	no.	20 775	4 489	16 001	7 541	3 469	2 519	423	5 934	61 185
Proportion of target population assessed	%	20.0	12.4	28.7	21.6	14.7	7.3	11.4	29.7	22.0
2012-13										
Number of people assessed	no.	5 166	718	5 447	2 191	604	262	73	2 266	16 727
Target population	no.	21 979	4 644	16 978	8 032	3 644	2 659	460	6 343	64 773
Proportion of target population assessed	%	23.5	15.5	32.1	27.3	16.6	9.9	15.9	35.7	25.8

Table 10A.28 Older Aboriginal and Torres Strait Islander people who received an annual health assessment (per cent) (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (g)
2013-14										
Number of people assessed	no.	6 540	846	6 771	2 792	801	365	101	2 745	20 961
Target population	no.	23 245	4 841	18 025	8 520	3 830	2 826	495	6 779	68 597
Proportion of target population assessed	%	28.1	17.5	37.6	32.8	20.9	12.9	20.4	40.5	30.6
2014-15										
Number of people assessed	no.	7 565	1 006	7 614	3 158	957	544	128	2 774	23 746
Target population	no.	24 555	5 078	19 076	9 033	4 021	2 991	531	7 224	72 548
Proportion of target population assessed	%	30.8	19.8	39.9	35.0	23.8	18.2	24.1	38.4	32.7
2015-16										
Number of people assessed	no.	8 715	1 181	8 679	3 534	1 031	681	171	3 279	27 271
Target population	no.	25 948	5 331	20 193	9 592	4 223	3 171	566	7 686	76 753
Proportion of target population assessed	%	33.6	22.2	43.0	36.8	24.4	21.5	30.2	42.7	35.5

- (a) Older Aboriginal and Torres Strait Islander people are defined as aged 55 years or over, excluding people living in residential aged care facilities.
- (b) Includes claims for MBS items 704, 706 and 715 for Aboriginal and Torres Strait Islander people aged 55 years or over. Indigenous status is determined by self-identification. Aboriginal and Torres Strait Islander people aged 75 years or over may have received a health assessment available to 'all older people'. This is considered unlikely to affect overall proportions significantly, due to the relatively low average life expectancy of Aboriginal and Torres Strait Islander people.
- (c) Data exclude health assessments provided outside DHS Medicare under service models used to increase access for people in remote areas and for Aboriginal and Torres Strait Islander people are therefore likely to understate the proportion who access health assessments.
- (d) Excludes services that qualify under the DVA National Treatment Account and services provided in public hospitals.
- (e) Allocation of patients to state or territory is based on the final claim processed for each patient in the reference period. Data are for number of patients receiving a health assessment rather than number of health assessments provided.

Table 10A.28 Older Aboriginal and Torres Strait Islander people who received an annual health assessment (per cent) (a), (b), (c), (d), (e), (f)

Unit NSW Vic Qld WA SA Tas ACT NT Aust (g)

(g) Includes Other Territories.

Source: Department of Health unpublished, MBS data collection; ABS 2014, Experimental estimates and projections, Aboriginal and Torres Strait Islander Australians Australians 2001 to 2026, Cat. no. 3238.0.

<sup>(</sup>f) Target population is the derived population of Aboriginal and Torres Strait Islander people aged 55 years of over at 31 December, computed by averaging the estimates/projections at 30 June at each end of the reference year. Historical data have been revised to the ABS' final 2011 Census rebased estimates and projections and may differ from previous reports. See chapter 2 (tables 2A.1 and 2A.13-14) for details.

Table 10A.29 Aboriginal and Torres Strait Islander people who received a health check or assessment, by age (per cent) (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (e)
2010-11										
Children 0–14 years										
Children assessed	no.	6 046	801	8 349	2 371	476	112	68	3 933	22 156
Target population	no.	75 671	16 789	70 518	30 932	13 013	8 629	1 987	22 616	240 239
Proportion assessed	%	8.0	4.8	11.8	7.7	3.7	1.3	3.4	17.4	9.2
Adults 15–54 years										
People assessed	no.	11 073	1 614	11 844	5 020	1 325	315	150	6 599	37 940
Target population	no.	111 226	25 545	101 122	49 543	20 673	12 912	3 680	40 361	365 202
Proportion assessed	%	10.0	6.3	11.7	10.1	6.4	2.4	4.1	16.4	10.4
Adults 55 years or over (f)										
People assessed	no.	3 216	422	3 149	1 509	450	109	36	1 574	10 465
Target population	no.	19 654	4 312	15 114	7 068	3 303	2 399	376	5 609	57 868
Proportion assessed	%	16.4	9.8	20.8	21.3	13.6	4.5	9.6	28.1	18.1
2011-12										
Children 0–14 years										
Children assessed	no.	8 520	1 150	12 133	2 436	800	137	197	5 270	30 643
Target population	no.	75 697	17 008	71 105	30 934	13 123	8 669	2 007	22 513	241 139
Proportion assessed	%	11.3	6.8	17.1	7.9	6.1	1.6	9.8	23.4	12.7
Adults 15–54 years										
People assessed	no.	14 933	2 148	18 475	5 355	1 767	449	286	7 229	50 642
Target population	no.	114 004	26 419	104 124	50 694	21 205	13 250	3 819	40 967	374 626
Proportion assessed	%	13.1	8.1	17.7	10.6	8.3	3.4	7.5	17.6	13.5
Adults 55 years or over (f)										
People assessed	no.	4 156	558	4 588	1 632	509	185	48	1 764	13 440

Table 10A.29 Aboriginal and Torres Strait Islander people who received a health check or assessment, by age (per cent) (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (e)
Target population	no.	20 775	4 489	16 001	7 541	3 469	2 519	423	5 934	61 185
Proportion assessed	%	20.0	12.4	28.7	21.6	14.7	7.3	11.4	29.7	22.0
2012-13										
Children 0–14 years										
Children assessed	no.	10 733	1 570	15 197	3 959	1 003	234	214	5 598	38 508
Target population	no.	75 863	17 171	71 812	31 038	13 205	8 733	2 006	22 498	242 410
Proportion assessed	%	14.1	9.1	21.2	12.8	7.6	2.7	10.7	24.9	15.9
Adults 15–54 years										
People assessed	no.	17 762	2 717	22 585	8 597	2 342	664	448	9 202	64 317
Target population	no.	116 702	27 292	107 067	51 912	21 734	13 598	3 961	41 703	384 118
Proportion assessed	%	15.2	10.0	21.1	16.6	10.8	4.9	11.3	22.1	16.7
Adults 55 years or over (f)										
People assessed	no.	5 166	718	5 447	2 191	604	262	73	2 266	16 727
Target population	no.	21 979	4 644	16 978	8 032	3 644	2 659	460	6 343	64 773
Proportion assessed	%	23.5	15.5	32.1	27.3	16.6	9.9	15.9	35.7	25.8
2013-14										
Children 0-14 years										
Children assessed	no.	13 112	1 912	18 287	5 200	1 536	236	211	6 747	47 241
Target population	no.	76 189	17 360	72 773	31 147	13 311	8 823	2 019	22 487	244 192
Proportion assessed	%	17.2	11.0	25.1	16.7	11.5	2.7	10.5	30.0	19.3
Adults 15–54 years										
People assessed	no.	21 413	3 540	26 689	11 040	3 368	847	493	11 153	78 543
Target population	no.	119 324	28 149	109 829	53 172	22 250	13 909	4 099	42 416	393 298
Proportion assessed	%	17.9	12.6	24.3	20.8	15.1	6.1	12.0	26.3	20.0

Table 10A.29 Aboriginal and Torres Strait Islander people who received a health check or assessment, by age (per cent) (a), (b), (c), (d)

(a), (b),	(-), (-)									
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (e)
Adults 55 years or over (f)										
People assessed	no.	6 540	846	6 771	2 792	801	365	101	2 745	20 961
Target population	no.	23 245	4 841	18 025	8 520	3 830	2 826	495	6 779	68 597
Proportion assessed	%	28.1	17.5	37.6	32.8	20.9	12.9	20.4	40.5	30.6
2014-15										
Children 0-14 years										
Children assessed	no.	15 245	2 389	22 104	6 011	2 017	337	396	6 702	55 201
Target population	no.	76 789	17 602	73 883	31 248	13 415	8 933	2 043	22 472	246 471
Proportion assessed	%	19.9	13.6	29.9	19.2	15.0	3.8	19.4	29.8	22.4
Adults 15–54 years										
People assessed	no.	24 278	4 068	31 203	11 828	3 912	1 127	869	11 239	88 524
Target population	no.	121 782	28 962	112 577	54 462	22 788	14 219	4 232	43 128	402 300
Proportion assessed	%	19.9	14.0	27.7	21.7	17.2	7.9	20.5	26.1	22.0
Adults 55 years or over (f)										
People assessed	no.	7 565	1 006	7 614	3 158	957	544	128	2 774	23 746
Target population	no.	24 555	5 078	19 076	9 033	4 021	2 991	531	7 224	72 548
Proportion assessed	%	30.8	19.8	39.9	35.0	23.8	18.2	24.1	38.4	32.7
2015-16										
Children 0-14 years										
Children assessed	no.	18 396	2 810	25 314	7 036	2 169	352	397	7 075	63 549
Target population	no.	77 639	17 920	74 959	31 378	13 543	9 053	2 076	22 434	249 089
Proportion assessed	%	23.7	15.7	33.8	22.4	16.0	3.9	19.1	31.5	25.5
Adults 15–54 years										
People assessed	no.	27 784	4 425	34 938	13 330	4 098	1 413	964	12 908	99 860

Table 10A.29 Aboriginal and Torres Strait Islander people who received a health check or assessment, by age (per cent) (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (e)
Target population	no.	124 064	29 731	115 442	55 725	23 315	14 522	4 362	43 850	411 161
Proportion assessed	%	22.4	14.9	30.3	23.9	17.6	9.7	22.1	29.4	24.3
Adults 55 years or over (f)										
People assessed	no.	8 715	1 181	8 679	3 534	1 031	681	171	3 279	27 271
Target population	no.	25 948	5 331	20 193	9 592	4 223	3 171	566	7 686	76 753
Proportion assessed	%	33.6	22.2	43.0	36.8	24.4	21.5	30.2	42.7	35.5

- (a) Excludes services that qualify under the DVA National Treatment Account and services provided in public hospitals.
- (b) Allocation of patients to state/territory based on the final claim processed for each patient in the reference period. Data are for number of patients receiving a health assessment/check rather than number of health assessments/checks provided. Indigenous status is determined by self-identification.
- (c) Data exclude health assessments provided outside DHS Medicare under service models used to increase access for people in remote areas and for Aboriginal and Torres Strait Islander people. Data are therefore likely to understate the proportion who access health assessments.
- (d) Target population is the derived population of Aboriginal and Torres Strait Islander people in the age group at 31 December, computed by averaging the estimates/projections at 30 June at each end of the reference year. Historical data have been revised to the ABS' final 2011 Census rebased estimates and projections and may differ from previous reports. See chapter 2 (tables 2A.1 and 2A.13-14) for details.
- (e) Includes Other Territories.
- (f) Aboriginal and Torres Strait Islander people aged 75 years or over may have received a health assessment available to 'all older people'. This is considered unlikely to affect overall proportions significantly, due to the relatively low average life expectancy of Aboriginal and Torres Strait Islander people.

Source: Department of Health unpublished, MBS data collection; ABS various years, Australian Demographic Statistics, Cat. no. 3201.0; ABS 2014, Experimental estimates and projections, Aboriginal and Torres Strait Islander Australians 2001 to 2026, Cat. no. 3238.0.

Table 10A.30 Annual health assessments for older people (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2007-08										
Older people assessed	no.	103 628	66 203	56 144	18 764	26 614	8 294	2 327	184	282 158
Older people	no.	466 836	340 221	241 060	119 456	122 578	36 154	15 228	7 409	1 348 993
Proportion assessed	%	22.20	19.46	23.29	15.71	21.71	22.94	15.28	2.48	20.92
2008-09										
Older people assessed	no.	112 810	73 403	64 260	22 796	27 563	9 509	2 454	1 276	314 071
Older people	no.	475 715	347 182	246 109	122 391	123 946	36 778	15 647	7 654	1 375 483
Proportion assessed	%	23.71	21.14	26.11	18.63	22.24	25.86	15.68	16.67	22.83
2009-10										
Older people assessed	no.	118 408	78 283	67 140	25 472	28 202	9 187	2 770	1 478	330 940
Older people	no.	485 866	354 565	252 255	125 718	125 610	37 549	16 171	8 026	1 405 819
Proportion assessed	%	24.37	22.08	26.62	20.26	22.45	24.47	17.13	18.42	23.54
2010-11										
Older people assessed	no.	133 330	90 915	77 725	31 374	31 844	11 085	3 205	1 876	381 354
Older people	no.	497 907	362 416	259 291	129 883	127 157	38 225	16 736	8 434	1 440 116
Proportion assessed	%	26.78	25.09	29.98	24.16	25.04	29.00	19.15	22.24	26.48
2011-12										
Older people assessed	no.	141 601	96 734	84 521	33 511	33 396	11 684	3 319	2 078	406 844
Older people	no.	507 900	370 433	266 899	134 218	129 129	39 162	17 341	8 957	1 473 927
Proportion assessed	%	27.88	26.11	31.67	24.97	25.86	29.84	19.14	23.20	27.60
2012-13										
Older people assessed	no.	151 348	102 615	92 687	37 936	35 936	13 149	3 891	2 639	440 201
Older people	no.	521 589	380 362	275 409	139 019	131 501	40 200	18 095	9 611	1 515 491
Proportion assessed	%	29.02	26.98	33.65	27.29	27.33	32.71	21.50	27.46	29.05
2013-14										
Older people assessed	no.	163 620	112 907	101 940	44 438	40 575	14 129	4 383	3 292	485 284
Older people	no.	533 806	390 136	284 798	144 121	133 919	41 144	18 811	10 259	1 556 691

Table 10A.30 Annual health assessments for older people (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Proportion assessed	%	30.65	28.94	35.79	30.83	30.30	34.34	23.30	32.09	31.17
2014-15										
Older people assessed	no.	170 818	115 835	108 696	46 560	40 490	13 819	4 384	3 494	504 096
Older people	no.	548 192	398 955	295 740	149 549	136 384	42 245	19 595	10 949	1 601 305
Proportion assessed	%	31.16	29.03	36.75	31.13	29.69	32.71	22.37	31.91	31.48
2015-16										
Older people assessed	no.	176 449	119 502	116 406	49 803	42 133	14 341	4 860	4 012	527 506
Older people	no.	561 202	409 773	306 898	155 020	138 754	43 485	20 461	11 719	1 646 994
Proportion assessed	%	31.44	29.16	37.93	32.13	30.37	32.98	23.75	34.24	32.03

<sup>(</sup>a) Older people are defined as Aboriginal and Torres Strait Islander people aged 55 years or over and non-Indigenous people aged 75 years or over, excluding people living in residential aged care facilities.

- (b) Excludes services that qualify under the DVA National Treatment Account and services provided in public hospitals.
- (c) Allocation to State/Territory is based on the final claim processed for each patient in the reference period. Data are for number of patients receiving a health assessment rather than number of health assessments provided.
- (d) Rates have been revised to the ABS' final 2011 Census rebased estimates and projections and may differ from previous reports. See chapter 2 (tables 2A.1 and 2A.13-14) for details.
- (e) Derived target populations as at 31 December are computed as the average of the population estimates / projections at June 30 at each end of the reference year. Historical data have been revised to the ABS' final 2011 Census rebased estimates and projections and may differ from previous reports. See chapter 2 (tables 2A.2 and 2A.13-14) for details.

Source: Department of Health unpublished, MBS data collection; ABS 2014, Experimental estimates and projections, Aboriginal and Torres Strait Islander Australians Australians 2001 to 2026, Cat. no. 3238.0; ABS unpublished, Australian Demographic Statistics, Cat. no. 3101.0.

Table 10A.31 Proportion of children receiving a fourth year developmental health check, by type of health check (per cent) (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld (g)	WA	SA	Tas (h)	ACT (h)	NT (g)	Aust (h)
2009-10 (h)										
Aboriginal and Torres Strait Islander Child Health Check (i)	%	27.8	21.7	35.2	35.5	17.3	np	np	45.5	31.0
Healthy Kids Check (j)	%	20.3	6.7	28.1	15.1	10.2	20.5	12.4	17.6	17.2
Total	%	20.6	6.9	28.5	16.3	10.5	19.2	12.3	29.2	17.8
2010-11										
Aboriginal and Torres Strait Islander Child Health Check (i)	%	37.7	23.2	47.7	36.2	17.9	5.2	9.9	63.6	40.1
Healthy Kids Check (j)	%	25.7	7.1	34.4	16.3	12.5	22.8	12.8	31.2	20.7
Total	%	26.3	7.3	35.2	17.5	12.7	21.5	12.8	44.6	21.7
2011-12 (a), (k)										
Aboriginal and Torres Strait Islander Child Health Check (i)	no.	2 326	338	3 198	774	204	47	61	1 367	8 315
Target population	no.	5 173	1 188	4 897	2 150	883	609	123	1 545	16 559
Proportion of target population assessed	%	45.0	28.5	65.3	36.0	23.1	7.7	49.8	88.5	50.2
Healthy Kids Check (j)	no.	46 372	16 885	37 595	12 480	7 201	3 219	1 218	805	125 775
Target population	no.	88 936	69 237	56 498	29 660	18 731	5 844	4 543	2 107	275 592
Proportion of target population assessed	%	52.1	24.4	66.5	42.1	38.4	55.1	26.8	38.2	45.6
Total (k)	no.	48 698	17 223	40 793	13 254	7 405	3 266	1 279	2 172	134 090
Target population (k)	no.	94 109	70 425	61 394	31 810	19 614	6 453	4 666	3 652	292 151
Proportion of target population assessed	%	51.7	24.5	66.4	41.7	37.8	50.6	27.4	59.5	45.9

Table 10A.31 Proportion of children receiving a fourth year developmental health check, by type of health check (per cent) (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld (g)	WA	SA	Tas (h)	ACT (h)	NT (g)	Aust (h)
2012-13 (a), (k)										
Aboriginal and Torres Strait Islander Child Health Check (i)	no.	2 864	403	3 791	1 106	271	64	48	1 489	10 036
Target population	no.	5 106	1 199	5 050	2 118	917	642	130	1 500	16 664
Proportion of target population assessed	%	56.1	33.6	75.1	52.2	29.6	10.0	37.1	99.3	60.2
Healthy Kids Check (j)	no.	56 223	21 201	42 969	14 021	9 502	3 668	1 823	931	150 338
Target population	no.	90 363	70 506	58 037	30 663	19 013	5 856	4 755	2 162	281 380
Proportion of target population assessed	%	62.2	30.1	74.0	45.7	50.0	62.6	38.3	43.1	53.4
Total (k)	no.	59 087	21 604	46 760	15 127	9 773	3 732	1 871	2 420	160 374
Target population (k)	no.	95 469	71 705	63 087	32 781	19 929	6 497	4 885	3 662	298 044
Proportion of target population assessed	%	61.9	30.1	74.1	46.1	49.0	57.4	38.3	66.1	53.8
2013-14 (a), (g), (k)										
Aboriginal and Torres Strait Islander Child Health Check (i)	no.	3 206	471	4 397	1 290	354	42	57	1 714	11 531
Target population	no.	5 182	1 191	5 131	2 103	919	625	142	1 450	16 746
Proportion of target population assessed (g)	%	61.9	39.5	85.7	61.3	38.5	6.7	40.3	118.2	68.9
Healthy Kids Check (j)	no.	59 486	19 662	45 372	15 377	10 169	3 578	2 063	858	156 565
Target population	no.	91 582	71 916	58 606	31 431	19 119	5 750	4 976	2 232	285 636
Proportion of target population assessed	%	65.0	27.3	77.4	48.9	53.2	62.2	41.5	38.4	54.8

Table 10A.31 Proportion of children receiving a fourth year developmental health check, by type of health check (per cent) (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld (g)	WA	SA	Tas (h)	ACT (h)	NT (g)	Aust (h)
Total (k)	no.	62 692.0	20 133.0	49 769.0	16 667.0	10 523.0	3 620.0	2 120.0	2 572.0	168 096.0
Target population	no.	96 763	73 107	63 737	33 534	20 038	6 375	5 117	3 682	302 381
Proportion of target population assessed	%	64.8	27.5	78.1	49.7	52.5	56.8	41.4	69.9	55.6
2014-15 (a), (g), (k)										
Aboriginal and Torres Strait Islander Child Health Check (i)	no.	3 772	641	5 029	1 458	512	81	94	1 718	13 305
Target population	no.	5 129	1 226	5 026	2 029	916	586	150	1 377	16 443
Proportion of target population assessed (g)	%	73.5	52.3	100.1	71.9	55.9	13.8	62.7	124.8	80.9
Healthy Kids Check (j)	no.	63 087	20 318	46 584	16 184	11 161	3 386	2 342	862	163 924
Target population	no.	89 206	71 971	59 658	31 044	19 316	5 918	4 787	2 481	284 403
Proportion of target population assessed	%	70.7	28.2	78.1	52.1	57.8	57.2	48.9	34.8	57.6
Total (k)	no.	66 859	20 959	51 613	17 642	11 673	3 467	2 436	2 580	177 229
Target population	no.	94 335	73 197	64 683	33 072	20 232	6 504	4 937	3 858	300 846
Proportion of target population assessed	%	70.9	28.6	79.8	53.3	57.7	53.3	49.3	66.9	58.9

a) Computed by the Secretariat for 2011-12 and subsequent years. Historical data were sourced from the National Healthcare Agreement and do not include underlying data. The considerable increase in proportion of target population assessed compared to previous years is associated with a considerable increase in the number of children receiving fourth year developmental health checks (Department of Health, pers. comm, 25 October 2012).

<sup>(</sup>b) Reference year is based on the date the service was provided. Data may differ from other reports in which reference year is based on the date the claim was processed.

Table 10A.31 Proportion of children receiving a fourth year developmental health check, by type of health check (per cent) (a), (b), (c), (d), (e), (f)

Unit	NSW	Vic	Qld (g)	WA	SA	Tas (h)	ACT (h)	NT (g)	Aust (h)
OTIL	14044	VIC	Qia (g)	VV /	0/1	1 43 (11)	AOI (II)	<i>ivi</i> (9)	743t (II)

- (c) Allocation to State/Territory is based on patient postcode at the date their last service was processed in the reference period. This is not necessarily where the service was received. Data are for number of patients receiving a health assessment/check rather than number of health assessments/checks provided.
- (d) Children are counted only once in the numerator.
- (e) From the 2010-11 reference period, children who received both a healthy kids check and an Aboriginal and Torres Strait Islander people's health assessment during the reference period are counted against the Aboriginal and Torres Strait Islander health assessment.
- (f) Target 4 year old population is as at 31 December of the reference year. For Aboriginal and Torres Strait Islander health checks, the target population is computed as the average of the 4 year old population estimates / projections at June 30 at each end of the reference year. For the Healthy Kids Check, the target non-Indigenous population is computed by subtracting the derived population of Aboriginal and Torres Strait Islander 4 year olds from the 4 year old ERP. Historical data are revised to the ABS' final 2011 Census rebased estimates and projections and may differ from previous reports. See chapter 2 (tables 2A.2 and 2A.13-14) for details.
- (g) For the NT for 2013-14 and 2014-15, and for Queensland for 2014-15, data for the proportion of Aboriginal and Torres Strait Islander children who received a health check exceeds 100 per cent. This is largely because numerator and denominator are not directly comparable children are eligible to receive this health assessment at the age of 3, 4 or 5 years. However, a child is eligible to receive it once only (children may also be eligible for other health checks) hence, the denominator uses population estimates and projections for a single year of age 4 years. Using this methodology, the total number of children aged 3, 4 and 5 years who received a check in 2013-14 exceeds the derived population of Aboriginal and Torres Strait Islander children aged 4 years.
- (h) Data for Aboriginal and Torres Strait Islander Child Health Checks are not published for Tasmania or the ACT for 2009-10 due to small numbers, but are included in the total for Australia.
- (i) Includes claims for Medicare Benefits Schedule (MBS) Item 708 (Aboriginal and Torres Strait Islander Child Health Check, available to 30 April 2010) and Item 715 (Aboriginal and Torres Strait Islander People's Health Assessment, available from 1 May 2010) for children aged 3, 4 or 5 years for 2012-13 and subsequent years, and aged 3 or 4 years for 2011-12 and previous years. Data exclude health assessments provided outside DHS Medicare under service models used to increase access for people in remote areas and for Aboriginal and Torres Strait Islander people. Data for Aboriginal and Torres Strait Islander people are therefore likely to understate the proportion who access health assessments.
- (j) Includes claims for MBS items 709 and 711 (Healthy Kids Check, available to 30 April 2010) and items 701, 703, 705, 707 and 10986 (Health Assessment, available from 1 May 2010) for children aged 3, 4 or 5 years for 2011-12 and subsequent years, and aged 3 or 4 years for 2010-11 and previous years. Data do not include developmental health check activity conducted outside Medicare, such as State and Territory early childhood health assessments in preschools and community health centres. This is known to be a particular issue for several jurisdictions. For example, in Victoria, the Victorian Maternal and Child Health Service provided a 3.5 year old Key Ages and Stages consultation to 47 638 children in the 2011-12 financial year. Data include Aboriginal and Torres Strait Islander children who received a Healthy Kids Check and did not also receive a health check under MBS items 708 or 715.

Table 10A.31	Proportion of children receiving a fourth year developmental health check, by type of health check (per cent)
	(a), (b), (c), (d), (e), (f)

Unit NSW Vic Qld (g) WA SA Tas (h) ACT (h) NT (g) Aust (h)

np Not published.

Source: Department of Health unpublished, MBS Statistics; ABS unpublished, Australian demographic statistics, Cat. no. 3101.0; ABS 2014, Experimental Estimates and Projections, Aboriginal and Torres Strait Islander Australians, 1996 to 2026, B series, Cat. no. 3238.0.

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<sup>(</sup>k) Data for 2011-12 and subsequent years include Aboriginal and Torres Strait Islander and non-Indigenous children aged 3, 4 or 5 years who received a health assessment under the specified MBS items, provided they had not received such a check in a previous reference year. This constitutes a break in time series for the data. Data from 2011-12 should not be compared with data for 2010-11 and previous years, which are limited to children aged 3 or 4 years.

Table 10A.32 Non-referred attendances that were bulk billed, by region and age (per cent) (a), (b), (c), (d), (e)

	Major cities	Inner regional	Outer regional	Remote	Very remote	Aust (f)
2012-13	major onico	mner regionar	Outer regionar	remote	very remote	71401 (1)
0–15 years	89.6	88.0	88.5	91.7	93.9	89.3
16–64 years	78.7	72.3	73.7	74.7	84.9	77.2
65 years or over	90.4	88.2	89.3	91.6	94.0	89.8
All ages	83.4	79.4	80.3	81.4	88.0	82.4
2013-14						
0–15 years	90.2	89.7	90.1	92.3	93.8	90.2
16–64 years	80.2	74.4	75.9	75.8	85.2	78.8
65 years or over	90.6	88.9	89.7	91.7	94.2	90.2
All ages (g)	84.4	81.1	81.9	82.2	88.3	83.6
2014-15						
0–15 years	91.0	91.4	91.7	92.9	94.2	91.2
16–64 years	81.4	75.9	77.4	76.6	85.5	80.1
65 years or over	90.8	89.3	89.9	91.9	94.2	90.4
All ages (g)	85.3	82.2	83.1	82.9	88.5	84.6
2015-16						
0–15 years	91.7	92.3	92.7	93.7	94.8	91.9
16–64 years	82.6	77.0	78.7	78.1	86.5	81.3
65 years or over	90.8	89.5	90.1	92.1	94.3	90.5
All ages (g)	86.1	83.1	84.1	84.0	89.3	85.4

<sup>(</sup>a) Remoteness areas are based on the Australian Statistical Geography Standard 2011 (ASGS) classification.

Source: Department of Health unpublished, MBS Statistics.

<sup>(</sup>b) Data include non-referred attendances undertaken by general practice nurses

<sup>(</sup>c) Patient age as at date of service.

<sup>(</sup>d) Allocation to remoteness area based on patients' Medicare enrolment postcode.

<sup>(</sup>e) Historical data have been revised and may differ from previous reports. This is due to a change in methodology used to identify GPs.

<sup>(</sup>f) Australia includes attendances where patient postcodes could not be allocated to a remoteness area.

<sup>(</sup>g) All ages includes attendances where patient age is unknown.

Table 10A.33 Non-referred attendances that were bulk billed by age (per cent) (a), (b), (c), (d), (e)

(a	1), (b), (c	), (a), (e	•)						
	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (f)
2006-07									
0–15 years	88.5	80.4	85.5	88.5	87.9	81.9	63.0	67.1	85.4
16–64 years	80.0	69.5	68.9	62.1	68.1	64.3	43.6	59.5	71.8
65 years or over	88.6	86.3	87.1	89.9	88.2	85.3	67.4	85.6	87.5
All ages	83.5	75.5	76.1	73.1	76.6	72.5	51.4	63.8	77.9
2007-08									
0–15 years	89.2	81.7	86.5	90.1	89.5	84.4	62.3	69.6	86.4
16–64 years	81.2	71.4	70.6	62.5	70.5	66.9	45.5	62.2	73.3
65 years or over	89.4	86.9	87.8	90.3	89.3	86.7	68.1	86.6	88.2
All ages	84.5	76.9	77.4	73.9	78.5	74.8	52.6	66.3	79.1
2008-09									
0–15 years	89.9	82.9	88.0	90.8	90.6	85.8	62.5	67.3	87.4
16–64 years	81.7	72.3	71.5	61.9	71.6	66.7	45.6	61.5	73.9
65 years or over	90.0	87.5	88.7	90.6	90.0	87.0	67.1	87.0	88.9
All ages	85.1	77.8	78.5	73.8	79.6	75.1	52.6	65.5	79.8
2009-10									
0–15 years	90.4	83.9	89.3	90.7	91.3	87.5	64.8	72.8	88.2
16–64 years	81.1	73.6	73.5	62.2	70.1	68.3	40.1	65.7	74.3
65 years or over	90.4	88.2	89.7	91.0	90.6	88.0	66.7	88.8	89.5
All ages	85.0	79.0	80.3	74.2	79.2	76.7	49.6	69.8	80.5
2010-11									
0–15 years	90.4	84.6	89.4	90.8	91.5	86.9	62.2	76.4	88.4
16–64 years	81.9	74.6	74.5	61.5	70.4	68.1	38.3	68.5	75.0
65 years or over	90.7	88.3	89.9	90.7	90.2	88.0	65.6	89.4	89.6
All ages	85.6	79.7	80.9	73.7	79.3	76.6	48.1	72.5	80.9
2011-12									
0–15 years	90.8	85.8	89.5	90.6	92.0	86.5	65.8	81.4	88.9
16–64 years	82.8	76.1	75.1	61.0	72.6	67.0	40.7	70.8	76.0
65 years or over	90.9	88.5	89.8	89.8	90.0	87.3	65.2	90.1	89.6
All ages	86.2	80.8	81.2	73.1	80.5	75.8	50.0	75.1	81.6
2012-13									
0–15 years	91.0	86.9	89.6	90.6	91.9	86.9	68.3	86.4	89.3
16–64 years	83.8	77.8	76.1	61.7	73.7	68.0	48.1	75.6	77.2
65 years or over	91.1	88.9	90.0	89.6	89.9	88.3	65.9	90.8	89.8
All ages	86.9	82.0	81.8	73.4	81.1	76.8	55.1	79.4	82.4
2013-14									
0–15 years	91.6	88.1	90.6	91.5	92.3	88.1	69.5	89.5	90.2
16–64 years	85.1	79.3	77.7	65.6	75.4	69.0	50.5	79.7	78.8
65 years or over	91.5	89.3	90.6	89.6	90.2	88.6	66.9	91.6	90.2
<u> </u>									

Table 10A.33 Non-referred attendances that were bulk billed by age (per cent) (a), (b), (c), (d), (e)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (f)
All ages	87.8	83.2	83.1	75.8	82.2	77.7	57.1	83.0	83.6
2014-15									
0–15 years	92.3	89.4	91.7	92.7	92.9	90.2	69.5	94.1	91.2
16–64 years	85.8	80.5	78.9	69.5	76.9	68.7	51.7	83.2	80.1
65 years or over	91.6	89.6	91.0	90.0	90.3	88.6	67.4	92.7	90.4
All ages	88.4	84.2	84.1	78.3	83.2	77.9	58.1	86.4	84.6
2015-16									
0–15 years	92.9	90.4	92.5	93.4	93.2	90.5	70.3	95.6	91.9
16–64 years	86.4	81.5	80.1	73.2	78.2	67.7	54.6	86.4	81.3
65 years or over	91.7	89.5	91.2	90.2	90.5	88.5	68.2	93.9	90.5
All ages	88.9	84.9	85.0	80.7	84.0	77.4	60.3	89.1	85.4

<sup>(</sup>a) Data include non-referred attendances undertaken by general practice nurses.

Source: Department of Health unpublished, MBS Statistics.

<sup>(</sup>b) Patient age as at date of service.

<sup>(</sup>c) Allocation to State/Territory based on patients' Medicare enrolment postcode.

<sup>(</sup>d) All ages includes attendances where patient age is unknown.

<sup>(</sup>e) Historical data have been revised and may differ from previous reports. This is due to a change in methodology used to identify GPs.

<sup>(</sup>f) Australia includes attendances where patient postcodes could not be allocated to a State/Territory.

Table 10A.34 People deferring access to GPs due to cost (per cent) (a), (b), (c), (d), (e), (f), (g), (h)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (f)	Aust
2012-13										
Proportion	%	4.5	5.0	5.9	7.7	5.4	7.0	8.8	5.2	5.4
RSE	%	8.7	6.3	7.0	7.4	9.5	9.6	12.1	20.5	3.3
95 per cent confidence interval	<u>+</u>	0.8	0.6	0.8	1.1	1.0	1.3	2.1	2.1	0.4
2013-14 (g)										
Proportion	%	3.5	5.0	5.8	6.2	4.5	6.9	6.9	5.6	4.9
RSE	%	7.6	6.9	6.2	7.5	11.7	10.4	11.3	21.8	2.9
95 per cent confidence interval	<u>+</u>	0.5	0.7	0.7	0.9	1.0	1.4	1.5	2.4	0.3
2014-15 (g)										
Proportion	%	3.2	5.6	5.4	7.0	5.5	7.0	9.7	4.1	5.0
RSE	%	9.0	7.3	7.9	9.2	9.3	11.3	11.7	22.5	3.1
95 per cent confidence interval	<u>+</u>	0.6	0.8	0.8	1.3	1.0	1.5	2.2	1.8	0.3
2015-16 (g)										
Proportion	%	3.5	3.8	4.8	4.9	3.9	6.1	8.1	2.0	4.1
RSE	%	11.4	10.1	7.3	10.3	11.8	8.6	12.8	22.9	4.4
95 per cent confidence interval	<u>+</u>	0.8	0.7	0.7	1.0	0.9	1.0	2.0	0.9	0.4

#### **RSE** = Relative standard error.

- (a) People aged 15 years or over who delayed or did not visit a GP at any time in the last 12 months due to cost.
- (b) Data are crude rates and may differ from data in previous reports in which rates were age-standardised.
- (c) Rates with RSEs between 25 per cent and 50 per cent should be used with caution.
- (d) Data for 2012-13 and subsequent years are not comparable to data for previous years due to a change in question sequencing/wording.
- (e) Data are not comparable to data for Aboriginal and Torres Strait Islander people that were sourced from the ABS 2012-13 Australian Aboriginal and Torres Strait Islander Health Survey due to differences in survey design and collection methodology.
- (f) Data for the NT should be interpreted with caution as the Patient Experience Survey excluded discrete Aboriginal and Torres Strait Islander communities, which comprise around 25 per cent of the estimated resident population of the NT living in private dwellings.
- (g) For 2013-14 and subsequent years, cells have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.
- (h) For more information on data quality, including collection methodologies and data limitations, see the Patient Experience Survey (cat. no. 4839.0) on the ABS website.

Source: ABS unpublished, Patient Experience Survey, various years, Cat. no. 4839.0.

Table 10A.35 Aboriginal and Torres Strait Islander people deferring access to GPs due to cost, 2012-13 (per cent) (a), (b), (c), (d), (e)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Proportion	%	11.1	12.3	13.0	13.8	7.7	16.3	20.7	11.0	12.2
RSE (c)	%	24.5	28.4	26.9	20.7	43.8	23.9	24.3	40.2	10.2
95 per cent confidence interval	<u>+</u>	5.3	6.9	6.8	5.6	6.6	7.6	9.9	8.7	2.4

#### **RSE** = Relative standard error.

- (a) Aboriginal and Torres Strait Islander people aged 15 years or over who reported needing to see a GP in the last 12 months and delayed doing so or did not do so because of cost, divided by the number of Aboriginal and Torres Strait Islander people aged 15 years or over who reported needing to see a GP in the last 12 months.
- (b) Rates are age-standardised to the 2001 Australian standard population using 5 year ranges.
- (c) Rates with RSEs greater than 25 per cent should be used with caution. Rates with RSEs greater than 50 per cent are considered too unreliable for general use.
- (d) Data are not comparable with data for all Australians that were sourced from the ABS Patient Experience Survey, due to differences in survey design and collection methodology.
- (e) Information on how to interpret and use the data appropriately is available from Explanatory Notes in Australian Aboriginal and Torres Strait Islander Health Survey: First Results, 2012-13 (Cat. no. 4727.0.55.001) and the Australian Aboriginal and Torres Strait Islander Health Survey: Users' Guide, 2012-13 (Cat. no. 4727.0.55.002).

Source: ABS (unpublished) Australian Aboriginal and Torres Strait Islander Health Survey, 2012-13 (National Aboriginal and Torres Strait Islander Health Survey component), Cat. no. 4727.0.

Table 10A.36 Waiting time for GPs for an urgent appointment (per cent) (a), (b), (c), (d), (e), (f), (g)

	(b),	(c), (d),	, (e), (f)	, (g)						
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (e)	Aust
2012-13										
Within four hours										
Proportion	%	63.9	63.7	66.2	61.5	65.2	53.9	60.0	51.9	63.8
RSE	%	2.5	3.1	3.2	4.5	2.5	6.3	7.6	10.0	1.3
95 per cent confidence interval	<u>+</u>	3.2	3.8	4.2	5.5	3.2	6.6	8.9	10.2	1.6
Four to less than 24 h	ours									
Proportion	%	9.5	11.7	11.2	11.8	13.5	15.4	13.2	13.8	11.2
RSE	%	11.1	11.8	13.8	15.3	10.8	12.9	21.3	25.3	5.1
95 per cent confidence interval	<u>+</u>	2.1	2.7	3.0	3.5	2.9	3.9	5.5	6.8	1.1
24 hours or more										
Proportion	%	26.5	24.5	22.6	26.8	21.2	30.7	26.9	34.3	25.0
RSE	%	5.4	7.5	7.5	9.0	8.1	10.4	13.0	13.9	3.1
95 per cent confidence interval	<u>+</u>	2.8	3.6	3.3	4.7	3.4	6.2	6.9	9.4	1.5
2013-14 (f)										
Within four hours										
Proportion	%	64.7	63.4	65.4	65.2	64.7	51.8	58.3	78.4	64.2
RSE	%	3.3	0.6	2.5	4.9	4.8	5.6	9.6	7.3	1.4
95 per cent confidence interval	<u>+</u>	4.1	0.7	3.2	6.2	6.0	5.7	11.0	11.2	1.7
Four to less than 24 h	ours									
Proportion	%	8.2	10.4	10.4	8.8	12.2	16.0	19.2	12.7	10.0
RSE	%	18.4	14.5	19.8	19.5	16.7	22.1	21.4	33.0	8.2
95 per cent confidence interval	<u>+</u>	2.9	3.0	4.0	3.4	4.0	6.9	8.1	8.2	1.6
24 hours or more										
Proportion	%	26.7	25.9	24.0	27.1	21.5	34.8	26.4	6.4	25.8
RSE	%	5.6	8.9	7.0	10.5	11.5	8.2	17.1	44.8	2.2
95 per cent confidence interval	<u>+</u>	2.9	4.5	3.3	5.6	4.9	5.6	8.8	5.6	1.1
2014-15 (f)										
Within four hours										
Proportion	%	67.2	65.7	61.7	58.1	58.2	53.3	53.2	74.1	63.9
RSE	%	2.5	3.0	6.5	6.7	7.4	8.2	10.1	5.1	1.9
95 per cent confidence interval	<u>+</u>	3.2	3.9	7.8	7.6	8.4	8.6	10.6	7.4	2.4
Four to less than 24 h	ours									
Proportion	%	10.0	9.7	12.4	11.3	13.9	13.5	20.5	9.2	11.1
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Table 10A.36 Waiting time for GPs for an urgent appointment (per cent) (a), (b), (c), (d), (e), (f), (g)

	(∼/,	(0), (4)	(0), (1)	, ( <del>9</del> /						
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (e)	Aust
RSE	%	12.1	15.2	12.4	20.4	17.8	12.4	18.1	37.9	5.5
95 per cent confidence interval	<u>+</u>	2.4	2.9	3.0	4.5	4.8	3.3	7.3	6.8	1.2
24 hours or more										
Proportion	%	22.1	25.6	26.6	30.6	26.7	32.7	25.9	14.9	25.0
RSE	%	10.7	6.4	9.3	10.5	5.8	5.1	14.2	39.8	3.8
95 per cent confidence interval	<u>+</u>	4.6	3.2	4.8	6.3	3.1	3.3	7.2	11.7	1.9
2015-16 (f)										
Within four hours										
Proportion	%	66.2	61.1	65.1	63.2	65.6	55.4	#40.4	89.5	63.6
RSE	%	3.5	5.9	3.9	5.0	5.3	0.7	16.8	4.9	2.7
95 per cent confidence interval	<u>+</u>	4.6	7.0	5.0	6.2	6.9	0.7	13.3	8.6	3.3
Four to less than 24 h	ours									
Proportion	%	11.1	10.6	13.9	9.8	14.1	11.7	19.5	*8.1	11.9
RSE	%	13.6	15.8	11.9	16.7	16.5	19.0	23.7	44.0	5.2
95 per cent confidence interval	<u>+</u>	3.0	3.3	3.3	3.2	4.6	4.4	9.1	7.0	1.2
24 hours or more										
Proportion	%	22.8	28.9	20.5	26.7	19.7	32.5	#42.0	*10.7	24.5
RSE	%	8.6	7.9	11.4	12.0	12.1	11.5	14.1	31.0	3.3
95 per cent confidence interval	<u>+</u>	3.8	4.5	4.6	6.3	4.7	7.3	11.6	6.5	1.6

**RSE** = relative standard error.

- (a) Time waited between making an appointment and seeing the GP for urgent medical care.
- (b) People aged 15 years or over who saw a GP for urgent medical care for their own health in the last 12 months. 'Urgent' as defined by respondent. Discretionary interviewer advice was to include health issues that arose suddenly and were serious (e.g. fever, headache, vomiting, unexplained rash).
- (c) Data are crude rates and may differ from data in previous reports in which rates were age-standardised.
- (d) Rates with RSEs greater than 25 per cent should be used with caution. Rates with RSEs greater than 50 per cent are considered too unreliable for general use.
- (e) Data for the NT should be interpreted with caution as the Patient Experience Survey excluded discrete Aboriginal and Torres Strait Islander communities, which comprise around 25 per cent of the estimated resident population of the NT living in private dwellings.
- (f) For 2013-14 and subsequent years, cells have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.
- (g) For more information on data quality, including collection methodologies and data limitations, see the Patient Experience Survey (cat. no. 4839.0) on the ABS website.

<sup>\*</sup> estimate has a relative standard error of 25% to 50% and should be used with caution

Table 10A.36 Waiting time for GPs for an urgent appointment (per cent) (a), (b), (c), (d), (e), (f), (g)

Unit NSW Vic Qld WA SA Tas ACT NT (e) Aust

# Proportion has a margin of error >10 percentage points which should be considered when using this information

Source: ABS unpublished, Patient Experience Survey, various years, Cat. no. 4839.0.

Table 10A.37 Proportion of people who saw a GP in the previous 12 months who waited longer than felt acceptable to get an appointment (per cent) (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (d)	Aust
2012-13										
Proportion	%	20.2	21.2	17.5	24.4	20.5	22.5	22.0	22.0	20.5
RSE	%	3.1	3.0	4.6	4.4	4.8	5.3	7.3	9.0	1.9
95 per cent confidence interva	. <u>+</u>	1.2	1.3	1.6	2.1	1.9	2.3	3.2	3.9	0.7
2013-14 (e)										
Proportion	%	23.9	22.6	19.2	24.5	21.9	23.4	25.1	26.5	22.6
RSE	%	2.6	3.0	3.7	4.7	3.7	4.8	6.3	8.4	1.5
95 per cent confidence interva	ı ±	1.2	1.3	1.4	2.3	1.6	2.2	3.1	4.3	0.7
2014-15 (e)										
Proportion	%	22.5	20.9	18.1	18.9	21.3	23.3	26.7	19.4	20.8
RSE	%	2.9	2.9	4.9	5.4	3.4	4.9	6.6	9.8	1.4
95 per cent confidence interva	ı <u>+</u>	1.3	1.2	1.7	2.0	1.4	2.2	3.4	3.7	0.6
2015-16 (e)										
Proportion	%	21.2	19.4	15.5	15.6	19.9	19.3	23.4	12.4	18.9
RSE	%	4.0	3.7	4.6	4.1	5.3	4.5	6.6	9.2	2.0
95 per cent confidence interva	. <u>+</u>	1.6	1.4	1.4	1.2	2.1	1.7	3.1	2.2	0.7

**RSE** = relative standard error.

- (a) Persons aged 15 years or over who saw a GP in the previous 12 months, excluding interviews by proxy.
- (b) Data are crude rates and may differ from data in previous reports in which rates were age-standardised.
- (c) Data from 2012-13 are not comparable to data for previous years due to a change in question sequencing.
- (d) Data for the NT should be interpreted with caution as the Patient Experience Survey excluded discrete Aboriginal and Torres Strait Islander communities, which comprise around 25 per cent of the estimated resident population of the NT living in private dwellings.
- (e) For 2013-14 and subsequent years, cells have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.
- (f) For more information on data quality, including collection methodologies and data limitations, see the Patient Experience Survey (cat. no. 4839.0) on the ABS website.

Source: ABS unpublished, Patient Experience Survey (various years), Cat. no. 4839.0.

Table 10A.38 Selected potentially avoidable GP-type presentations to emergency departments (number) (a), (b), (c), (d)

	NSW (e)	Vic (e)	Qld	WA	SA	Tas	ACT (f)	NT	Aust
2013-14	1 047 230	625 844	450 179	314 196	172 423	61 577	53 325	57 483	2 782 257
2014-15	1 060 202	615 857	435 856	331 795	166 003	61 079	55 753	54 832	2 781 377
2015-16	1 112 191	626 545	429 665	337 224	160 670	58 843	49 429	54 374	2 828 941

- (a) 'GP-type' emergency department presentations are defined as presentations for which the type of visit was reported as emergency presentation, which did not arrive by ambulance or by police or other correctional vehicle, with a triage category of 4 (semi-urgent) or 5 (non-urgent), and where the episode end status was not: admitted to the hospital, referred to another hospital, or died. This is an interim definition, pending development of new methodology to more closely approximate the population that could receive services in the primary care sector. Data include appropriate presentations to emergency departments that can only retrospectively be categorised as 'GP-type'.
- (b) Data are presented by the state/territory of usual residence of the patient, not by the state/territory of the hospital.
- (c) Includes all hospitals reporting to the Non-admitted patient emergency department care (NAPEDC) NMDS. Data are not comparable with data in previous reports which were limited to Peer Group A and B hospitals and the Mersey Community Hosital.
- (d) For more information on data quality, including collection methodologies and data limitations, see METeOR on the AIHW website.
- (e) Data for the Albury Base Hospital in NSW are reported in Victorian hospital statistics.
- (f) 2015-16 data for the ACT were provided by ACT health and not validated by the AIHW.

Source: AIHW unpublished, National Non-admitted Emergency Department Care Database; ACT Health (unpublished) Emergency Department Care data

Table 10A.39 **People deferring access to prescribed medication due to cost (per cent) (a), (b), (c), (d), (e), (f)** 

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (g)	Aust
2012-13										
Proportion	%	7.4	7.9	9.3	6.8	8.2	8.5	6.7	9.0	7.9
RSE	%	5.3	5.3	6.5	9.4	7.8	10.0	15.4	17.1	2.5
95 per cent confidence interval	±	0.8	8.0	1.2	1.2	1.2	1.7	2.0	3.0	0.4
2013-14 (h)										
Proportion	%	7.0	6.3	9.9	8.4	7.5	8.0	6.7	6.2	7.6
RSE	%	7.0	5.9	6.3	7.6	8.3	9.0	14.7	17.4	2.7
95 per cent confidence interval	±	1.0	0.7	1.2	1.2	1.2	1.4	1.9	2.1	0.4
2014-15 (h)										
Proportion	%	6.9	7.5	8.5	8.0	8.6	7.9	7.4	6.0	7.6
RSE	%	6.4	5.8	5.2	8.8	7.4	7.7	15.2	19.0	3.3
95 per cent confidence interval	±	0.9	0.9	0.9	1.4	1.3	1.2	2.2	2.2	0.5
2015-16 (h)										
Proportion	%	7.4	7.2	8.4	7.5	7.7	6.9	7.8	4.3	7.6
RSE	%	7.2	6.7	6.3	10.6	7.3	10.7	11.6	17.6	3.1
95 per cent confidence interval	±	1.0	0.9	1.0	1.5	1.1	1.4	1.8	1.5	0.5

#### **RSE** = Relative standard error.

- (a) People aged 15 years and over who received a prescription for medication from a GP in the last 12 months and delayed using or did not get medication at any time in the last 12 months due to the cost.
- (b) Data are crude rates and may differ from data in previous reports in which rates were age-standardised.
- (c) Estimates with RSEs between 25 per cent and 50 per cent should be used with caution.
- (d) Data for 2010-11 and subsequent reference years are comparable over time, but are not comparable with data for 2009 due to a change in the sequencing and wording of the survey question.
- (e) Data are not comparable to data for Aboriginal and Torres Strait Islander people that were sourced from the ABS 2012-13 Australian Aboriginal and Torres Strait Islander Health Survey, due to differences in survey design and collection methodology.
- (f) For more information on data quality, including collection methodologies and data limitations, see the Patient Experience Survey (cat. no. 4839.0) on the ABS website.
- (g) Data for the NT should be interpreted with caution as the Patient Experience Survey excluded discrete Aboriginal and Torres Strait Islander communities, which comprise around 25 per cent of the estimated resident population of the NT living in private dwellings.
- (h) For 2013-14 and subsequent years, cells have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.

Source: ABS unpublished, Patient Experience Survey, various years, Cat. no. 4839.0.

Table 10A.40 Aboriginal and Torres Strait Islander people deferring access to prescribed medication due to cost, 2012-13 (per cent) (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Proportion	%	24.4	36.3	47.0	45.2	35.3	46.5	24.1	22.8	34.6
RSE (c)	%	19.7	14.8	15.0	19.3	26.0	14.9	37.2	34.1	8.4
95 per cent confidence interval	±	9.4	10.5	13.8	17.1	18.0	13.5	17.6	15.2	5.7

#### **RSE** = Relative standard error.

- (a) Aboriginal and Torres Strait Islander people aged 15 years and over who received a prescription for medication in the last 12 months and delayed getting or did not get the medication due to the cost, divided by the number of Aboriginal and Torres Strait Islander people who received a prescription for medication in the last 12 months.
- (b) Rates are age-standardised to the 2001 Australian standard population (10 year ranges).
- (c) Estimates with RSEs between 25 and 50 per cent should be used with caution.
- (d) Data are not comparable to data for all Australians that were sourced from the ABS Patient Experience Survey, due to differences in survey design and collection methodology.
- (e) Information on how to interpret and use the data appropriately is available from Explanatory Notes in Australian Aboriginal and Torres Strait Islander Health Survey: First Results, 2012-13 (Cat. no. 4727.0.55.001) and the Australian Aboriginal and Torres Strait Islander Health Survey: Users' Guide, 2012-13 (Cat. no. 4727.0.55.002).
- (f) Includes major cities, inner and outer regional areas only, as these survey questions were not asked in remote and very remote areas.

Source: ABS unpublished, Australian Aboriginal and Torres Strait Islander Health Survey, 2012-13 (National Aboriginal and Torres Strait Islander Health Survey component), Cat. no. 4727.0.

	Waiting to	ime for offer	of public			
	3.	dental care	,	Waiting	time for firs	t visit
	Days	Days		Days	Days	
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th percentile	Number of records	the 50th	the 90th	of records
	percentile	percentile	records	percentile	percentile	1600103
2013–14						
General dental care						
Jurisdiction total	na	na	na	na	na	na
Indigenous status						
Indigenous	na	na	na	na	na	na
Non-indigenous	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Remoteness of residence						
Major cities	na	na	na	na	na	na
Inner regional	na	na	na	na	na	na
Outer regional	na	na	na	na	na	na
Remote	na	na	na	na	na	na
Very remote	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
SEIFA of residence						
Quintile 1	na	na	na	na	na	na
Quintile 2	na	na	na	na	na	na
Quintile 3	na	na	na	na	na	na
Quintile 4	na	na	na	na	na	na
Quintile 5	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Denture care						
Jurisdiction total	na	na	na	na	na	na
Indigenous status						
Indigenous	na	na	na	na	na	na
Non-indigenous	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Remoteness of residence						
Major cities	na	na	na	na	na	na
Inner regional	na	na	na	na	na	na
Outer regional	na	na	na	na	na	na
Remote	na	na	na	na	na	na
Very remote	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
SEIFA of residence						
Quintile 1	na	na	na	na	na	na
Quintile 2	na	na	na	na	na	na
Quintile 3	na	na	na	na	na	na
Quintile 4	na	na	na	na	na	na
Quintile 5	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Assessment						
Jurisdiction total	na	na	na	na	na	na

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			ime for offer				
Maried at the Eboth the Subt			dental care				t visit
Indigenous status		-			-	-	
Indigenous status   Indigenous   Indigenou				Number			
Indigenous status   Indigenous							
Indigenous	Indigenous status	percentile	percentile	1660143	percentile	percentile	1600143
Non-indigenous         na							
Not stated	<del>-</del>						
Remoteness of residence   Major citites   na	<del>-</del>						
Major cities         na		na	na	na	na	na	na
Inner regional							
Outer regional         na	•						
Remote		na	na	na	na	na	na
Very remote         na	_	na	na	na	na	na	na
Not stated		na	na	na	na	na	na
SEIFA of residence   Quintile 1	•	na	na	na	na	na	na
Quintile 1         na		na	na	na	na	na	na
Quintile 2         na							
Quintile 3		na	na	na	na	na	na
Quintile 4         na	Quintile 2	na	na	na	na	na	na
Quintile 5         na	Quintile 3	na	na	na	na	na	na
Not stated         na	Quintile 4	na	na	na	na	na	na
2014-15   General dental care   Jurisdiction total   na	Quintile 5	na	na	na	na	na	na
General dental care   Jurisdiction total   na la la ladigenous status   Indigenous status   Indigenous   na	Not stated	na	na	na	na	na	na
Jurisdiction total na la lndigenous status Indigenous status Indigenous na Non-indigenous na	2014-15						
Indigenous status Indigenous na Non-indigenous na	General dental care						
Indigenous status Indigenous na Non-indigenous na	Jurisdiction total	na	na	na	na	na	na
Indigenous na							
Non-indigenous na Not stated na	=	na	na	na	na	na	na
Not stated na	_	na	na	na	na	na	na
Remoteness of residence  Major cities							
Major cities na na na na na na na na na la lnner regional na							
Inner regional na		na	na	na	na	na	na
Outer regional na Remote na	•						
Remote na Not stated na	<u> </u>						
Very remotenanananananaNot statednanananananaSEIFA of residenceQuintile 1nanananananaQuintile 2nanananananaQuintile 3nanananananaQuintile 4nanananananaQuintile 5nanananananaNot statednanananananaDenture careJurisdiction totalnanananananaIndigenous statusIndigenousnanananananana	ū						
Not stated na na na na na na na na na SEIFA of residence  Quintile 1 na Quintile 2 na							
SEIFA of residence Quintile 1	•						
Quintile 1nanananananaQuintile 2nanananananaQuintile 3nanananananaQuintile 4nanananananaQuintile 5nananananananaNot statednananananananaDenture careJurisdiction totalnananananananaIndigenous statusnanananananana		iid	Πα	na	na	IIu	na
Quintile 2 na Quintile 3 na Quintile 4 na		na	na	na	na	na	na
Quintile 3 na Quintile 4 na Quintile 5 na							
Quintile 4 na							
Quintile 5 na							
Not stated na na na na na na na  Denture care  Jurisdiction total na na na na na na na na na lndigenous status  Indigenous na							
Denture care  Jurisdiction total na la lindigenous status  Indigenous na							
Jurisdiction totalnananananaIndigenousnanananana		na	па	IIA	na	na	IIA
Indigenous status Indigenous na na na na na na			n-	20	-	<b>n</b> .c	nc
Indigenous na na na na na na		na	na	na	na	na	na
	=				·	·	·
		na	na	na	na	na	na

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	Waiting ti	me for offer	of public			
	_	dental care		Waiting	time for firs	t visit
	Days	Days		Days	Days	
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records	percentile	percentile	records
Non-indigenous	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Remoteness of residence						
Major cities	na	na	na	na	na	na
Inner regional	na	na	na	na	na	na
Outer regional	na	na	na	na	na	na
Remote	na	na	na	na	na	na
Very remote	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
SEIFA of residence						
Quintile 1	na	na	na	na	na	na
Quintile 2	na	na	na	na	na	na
Quintile 3	na	na	na	na	na	na
Quintile 4	na	na	na	na	na	na
Quintile 5	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Assessment						
Jurisdiction total	na	na	na	na	na	na
Indigenous status						
Indigenous	na	na	na	na	na	na
Non-indigenous	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Remoteness of residence						
Major cities	na	na	na	na	na	na
Inner regional	na	na	na	na	na	na
Outer regional	na	na	na	na	na	na
Remote	na	na	na	na	na	na
Very remote	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
SEIFA of residence	IIa	IIa	Па	Па	IIa	IIa
Quintile 1	na	na	no	na	20	no
Quintile 1 Quintile 2	na	na	na	na	na	na
	na	na	na	na	na	na
Quintile 3	na	na	na	na	na	na
Quintile 4	na	na	na	na	na	na
Quintile 5	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
2015-16						
General dental care						
Jurisdiction total	na	na	na	na	na	na
Indigenous status						
Indigenous	na	na	na	na	na	na
Non-indigenous	na	na	na	na	na	na
Not stated	na	na	na	na	na	na

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	Waiting to	me for offer						
		dental care		Waiting	Waiting time for first visit			
	Days	Days		Days	Days			
	waited at	waited at		waited at	waited at	Number		
	the 50th	the 90th	Number of	the 50th	the 90th	of		
	percentile	percentile	records	percentile	percentile	records		
Remoteness of residence								
Major cities	na	na	na	na	na	na		
Inner regional	na	na	na	na	na	na		
Outer regional	na	na	na	na	na	na		
Remote	na	na	na	na	na	na		
Very remote	na	na	na	na	na	na		
Not stated	na	na	na	na	na	na		
SEIFA of residence								
Quintile 1	na	na	na	na	na	na		
Quintile 2	na	na	na	na	na	na		
Quintile 3	na	na	na	na	na	na		
Quintile 4	na	na	na	na	na	na		
Quintile 5	na	na	na	na	na	na		
Not stated	na	na	na	na	na	na		
Denture care								
Jurisdiction total	na	na	na	na	na	na		
Indigenous status								
Indigenous	na	na	na	na	na	na		
Non-indigenous	na	na	na	na	na	na		
Not stated	na	na	na	na	na	na		
Remoteness of residence								
Major cities	na	na	na	na	na	na		
Inner regional	na	na	na	na	na	na		
Outer regional	na	na	na	na	na	na		
Remote	na	na	na	na	na	na		
Very remote	na	na	na	na	na	na		
Not stated	na	na	na	na	na	na		
SEIFA of residence	110	116	114		114			
Quintile 1	na	na	na	na	na	na		
Quintile 2	na	na	na	na	na	na		
Quintile 3	na	na	na	na	na	na		
Quintile 4	na	na	na	na	na	na		
Quintile 5	na	na	na	na	na	na		
Not stated	na	na	na	na				
Assessment	IIa	IIa	Па	IIa	na	na		
Jurisdiction total	na	na	na	na	na	na		
	na	na	na	na	na	na		
Indigenous status	<b></b> -			·-	·			
Indigenous	na	na	na	na	na	na		
Non-indigenous	na	na	na	na	na	na		
Not stated	na	na	na	na	na	na		
Remoteness of residence								
Major cities	na	na	na	na	na	na		
Inner regional	na	na	na	na	na	na		

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	•	me for offer	of public			
		dental care			time for firs	t visit
	Days	Days		Days	Days	
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records	percentile	percentile	records
Outer regional	na	na	na	na	na	na
Remote	na	na	na	na	na	na
Very remote	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
SEIFA of residence						
Quintile 1	na	na	na	na	na	na
Quintile 2	na	na	na	na	na	na
Quintile 3	na	na	na	na	na	na
Quintile 4	na	na	na	na	na	na
Quintile 5	na	na	na	na	na	na
Not stated	na	na	na	na	na	na

<sup>(</sup>a) Data for NSW were not available.

na not available

Source: AIHW (unpublished) Public dental waiting times data collection.

Table 10A.42

# Waiting time for public dental care, Victoria (days) (a), (b), (c), (d)

	Waiting t	ime for offer	of public	-			
		dental care			g time for firs	t visit	
	Days waited at	Days waited at		Days waited at	Days waited at	Number	
	the 50th percentile	the 90th percentile	Number of records	the 50th percentile	the 90th percentile	of records	
2013–14							
General dental care							
Jurisdiction total	151	364	80 312	161	420	40 159	
Indigenous status							
Indigenous							
Non-indigenous	151	364	78 441	161	420	39 342	
Not stated	np	np	1 871	np	np	817	
Remoteness of residence							
Major cities	166	377	51 584	180	427	25 484	
Inner regional	130	356	20 627	155	418	10 216	
Outer regional	66	346	7 196	49	392	4 078	
Remote	161	318	198	196	350	113	
Very remote	np	np	1	np	np	1	
Not stated	np	np	706	np	np	267	
SEIFA of residence (e)							
Quintile 1	132	358	18 924	145	421	9 057	
Quintile 2	109	350	21 420	122	404	10 673	
Quintile 3	161	402	16 969	166	446	8 418	
Quintile 4	174	371	14 962	198	418	7 867	
Quintile 5	179	320	7 327	205	383	3 875	
Not stated	np	np	710	np	np	269	
Denture care							
Jurisdiction total	37	638	13 817	116	756	8 933	
Indigenous status							
Indigenous							
Non-indigenous	36	622	13 459	115	735	8 706	
Not stated	np	np	358	np	np	227	
Remoteness of residence							
Major cities	59	700	6 534	130	819	4 265	
Inner regional	32	646	5 085	107	751	3 443	
Outer regional	6	271	2 023	104	343	1 129	
Remote	47	241	63	130	311	32	
Very remote	np	np	5	np	np	4	
Not stated	np	np	107	np	np	61	
SEIFA of residence (e)							
Quintile 1	41	582	3 875	109	686	2 438	
Quintile 2	33	526	4 110	121	684	2 581	
Quintile 3	44	699	2 839	124	841	1 925	
Quintile 4	25	730	2 079	105	832	1 388	
Quintile 5	49	686	807	112	771	540	
Not stated	np	np	107	np	np	61	
Assessment							

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Table 10A.42

	(5), (6), (4						
		ime for offer	of public	147 - "Co	Waiting time for first visit		
	Days	dental care Days			g time for firs Days	t VISIt	
	waited at	waited at		waited at	waited at	Number	
	the 50th	the 90th	Number of	the 50th	the 90th	of	
	percentile	percentile	records	percentile	percentile	records	
Jurisdiction total							
Indigenous status							
Indigenous							
Non-indigenous							
Not stated							
Remoteness of residence							
Major cities							
Inner regional							
Outer regional							
Remote							
Very remote							
Not stated							
SEIFA of residence (e)							
Quintile 1							
Quintile 2							
Quintile 3							
Quintile 4							
Quintile 5					••		
Not stated		••	••	••	••	••	
		••	••	••	••	••	
2014-15							
General dental care	005	040	05.700	050	005	05.004	
Jurisdiction total	265	612	65 703	252	625	35 801	
Indigenous status							
Indigenous							
Non-indigenous	267	612	64 495	253	625	35 230	
Not stated	np	np	1 208	np	np	571	
Remoteness of residence							
Major cities	327	623	41 223	279	636	21 793	
Inner regional	239	604	16 860	255	626	9 617	
Outer regional	79	516	6 235	95	514	3 829	
Remote	85	364	242	111	391	148	
Very remote	np	np	6	307	307	np	
Not stated	np	np	1 138	np	np	413	
SEIFA of residence (e)							
Quintile 1	292	624	15 870	255	645	8 510	
Quintile 2	218	601	16 457	200	608	9 295	
Quintile 3	309	614	13 949	278	623	7 508	
Quintile 4	309	619	12 554	277	625	6 878	
Quintile 5	309	586	5 729	278	554	3 192	
Not stated	np	np	1 144	np	np	418	
Denture care							
Jurisdiction total	165	625	9 271	183	677	5 820	

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Table 10A.42

	Waiting t	ime for offer	of public				
	vvaiting t	dental care	от ривпс	Waiting	Waiting time for first visit		
	Days	Days		Days Days			
	waited at	waited at		waited at	waited at	Number	
	the 50th	the 90th	Number of	the 50th	the 90th	of	
	percentile	percentile	records	percentile	percentile	records	
Indigenous status							
Indigenous							
Non-indigenous	167	624	9 095	184	675	5 707	
Not stated	np	np	176	np	np	113	
Remoteness of residence							
Major cities	223	688	4 610	246	765	2 830	
Inner regional	92	587	3 181	121	661	1 994	
Outer regional	82	385	1 342	133	436	906	
Remote	13	276	50	71	309	43	
Very remote			_	64	64	_	
Not stated	np	np	87	np	np	48	
SEIFA of residence (e)	·	·		•			
Quintile 1	163	617	2 408	184	659	1 552	
Quintile 2	133	525	2 796	151	557	1 724	
Quintile 3	209	677	1 865	207	740	1 161	
Quintile 4	174	738	1 586	189	786	1 013	
Quintile 5	229	764	527	266	805	320	
Not stated	np	np	89	np	np	50	
Assessment							
Jurisdiction total							
Indigenous status							
Indigenous							
Non-indigenous							
Not stated							
Remoteness of residence		••			••	••	
Major cities							
Inner regional							
Outer regional		••			••	••	
Remote		••				••	
	••						
Very remote Not stated							
SEIFA of residence (e)							
Quintile 1		••					
Quintile 2							
Quintile 3							
Quintile 4							
Quintile 5		••					
Not stated							
2015-16							
General dental care							
Jurisdiction total	383	672	80 593	364	704	43 727	
Indigenous status							
REPORT ON				I	PRIMARY AND	COMMUNIT	

REPORT ON GOVERNMENT SERVICES 2017 PRIMARY AND COMMUNITY HEALTH PAGE **3** of TABLE 10A.42

Table 10A.42

_						
	Waiting time for offer of public dental care			Waiting time for first visit		
	Days waited at the 50th percentile	Days waited at the 90th percentile	Number of records	Days waited at the 50th	Days waited at the 90th percentile	Number of records
Indigenous						
Non-indigenous	385	672	79 021	365	705	42 918
Not stated	np	np	1 572	np	np	809
Remoteness of residence	·	'		'	•	
Major cities	441	686	51 713	419	724	26 738
Inner regional	322	649	20 035	336	682	11 814
Outer regional	100	562	6 513	99	579	3 677
Remote	92	383	233	128	425	133
Very remote	np	np	3	np	np	4
Not stated	np	np	2 095	np	np	1 361
SEIFA of residence (e)	,	'		•	•	
Quintile 1	390	681	20 205	372	719	10 479
Quintile 2	327	659	19 154	327	700	10 623
Quintile 3	434	690	16 650	405	720	9 078
Quintile 4	399	668	15 239	377	695	8 447
Quintile 5	420	641	7 248	417	664	3 738
Not stated	np	np	2 097	np	np	1 362
Denture care						
Jurisdiction total	337	709	10 809	366	774	7 067
Indigenous status						
Indigenous						
Non-indigenous	337	708	10 675	367	773	6 991
Not stated	np	np	134	np	np	76
Remoteness of residence	'	'		'	'	
Major cities	377	744	5 921	392	824	3 570
Inner regional	347	675	3 596	413	728	2 598
Outer regional	100	585	1 100	175	606	758
Remote	61	224	38	106	256	28
Very remote			_			_
Not stated	np	np	154	np	np	113
SEIFA of residence (e)						
Quintile 1	328	724	2 680	345	760	1 759
Quintile 2	260	667	2 766	354	728	1 889
Quintile 3	404	726	2 373	447	806	1 536
Quintile 4	322	741	1 961	312	815	1 263
Quintile 5	392	741	875	410	812	507
Not stated	np	np	154	np	np	113
Assessment	p	٠.١٠		p	p	1.0
Jurisdiction total						
Indigenous status		••	••	••	••	••
Indigenous						
Non-indigenous		••	••			••
14011 IIIaigonoao			••			

REPORT ON GOVERNMENT SERVICES 2017 PRIMARY AND COMMUNITY HEALTH PAGE **4** of TABLE 10A.42

#### Table 10A.42

## Waiting time for public dental care, Victoria (days) (a), (b), (c), (d)

	of public						
		dental care			Waiting time for first visit		
	Days	Days		Days	Days		
	waited at	waited at		waited at	waited at	Number	
	the 50th	the 90th	Number of	the 50th	the 90th	of	
	percentile	percentile	records	percentile	percentile	records	
Not stated							
Remoteness of residence							
Major cities							
Inner regional							
Outer regional							
Remote							
Very remote							
Not stated	••				••		
SEIFA of residence (e)							
Quintile 1							
Quintile 2							
Quintile 3							
Quintile 4							
Quintile 5							
Not stated							

<sup>(</sup>a) Waiting times could not be calculated for some records for instance where a record had no date of offer or date of first visit.

- (b) The collection excludes people who are treated under jurisdictional priority client schemes.
- (c) The calculation of an Australian total is not appropriate given that jurisdictions are not comparable
- (d) Data are not comparable to that previously published due to the change in specifications.
- (e) SEIFA and remoteness are based on the usual residence of the person, not the location of the service provider.

Source: AIHW (unpublished) Public dental waiting times data collection.

<sup>..</sup> Not applicable. **np** Not published. – Nil or rounded to zero.

Table 10A.43

	Maiting t		of public					
	vvaiurig u	ime for offer dental care	от ривнс	Waiting	Waiting time for first visit			
	Days	Days			Days Days			
	waited at	waited at		waited at	waited at	Number		
	the 50th	the 90th	Number of	the 50th	the 90th	of		
	percentile	percentile	records	percentile	percentile	records		
2013–14								
General dental care								
Jurisdiction total	444	1 968	50 941	585	2 043	52 711		
Indigenous status								
Indigenous	116	835	1 502	270	1 173	1 172		
Non-indigenous	467	1 988	47 664	601	2 058	49 793		
Not stated	np	np	1 775	np	np	1 746		
Remoteness of residence								
Major cities	293	1 257	18 615	428	1 503	19 878		
Inner regional	879	2 382	18 713	982	2 423	19 713		
Outer regional	338	1 326	11 386	392	1 462	11 187		
Remote	188	1 033	1 053	275	1 212	981		
Very remote	42	450	1 173	95	538	951		
Not stated			_			_		
SEIFA of residence (e)								
Quintile 1	722	2 349	20 209	882	2 403	20 268		
Quintile 2	403	1 625	10 253	488	1 767	10 590		
Quintile 3	396	1 421	11 499	525	1 537	12 158		
Quintile 4	298	1 023	5 884	390	1 266	6 438		
Quintile 5	296	1 212	3 094	377	1 391	3 256		
Not stated	np	np	2	np	np	1		
Denture care	-							
Jurisdiction total	81	302	14 697	102	358	14 183		
Indigenous status								
Indigenous	70	298	333	98	401	324		
Non-indigenous	82	303	13 963	103	357	13 480		
Not stated	np	np	401	np	np	379		
Remoteness of residence								
Major cities	69	236	7 874	91	280	7 547		
Inner regional	104	337	4 656	125	410	4 469		
Outer regional	100	559	1 860	120	625	1 842		
Remote	84	660	193	94	708	202		
Very remote	150	959	114	168	924	121		
Not stated			_			_		
SEIFA of residence (e)								
Quintile 1	85	304	5 206	106	361	4 857		
Quintile 2	82	406	2 797	104		2 786		
Quintile 3	83	331	3 647	107		3 615		
Quintile 4	67	229	2 106	89	259	2 033		
Quintile 5	68	224	941	94	260	892		
Not stated			<del>-</del>			_		
Assessment								

REPORT ON GOVERNMENT SERVICES 2017 PRIMARY AND COMMUNITY HEALTH PAGE **1** of TABLE 10A.43

Table 10A.43

	waiting t	ime for offer dental care	or public	Waiting	Waiting time for first visit		
	Days	Days		Days	Days		
	waited at	waited at		waited at	waited at	Number	
	the 50th	the 90th	Number of	the 50th	the 90th	of	
	percentile	percentile	records	percentile	percentile	records	
Jurisdiction total							
Indigenous status							
Indigenous							
Non-indigenous							
Not stated					••		
Remoteness of residence							
Major cities							
Inner regional							
Outer regional							
Remote							
Very remote							
Not stated							
SEIFA of residence (e)							
Quintile 1							
Quintile 2		••					
Quintile 3		••					
Quintile 4							
Quintile 5							
Not stated							
2014-15							
General dental care							
Jurisdiction total	309	502	47 014	344	536	45 956	
Indigenous status	000	002	.,	011	000	10 000	
Indigenous	89	357	1 711	107	391	1 540	
Non-indigenous	315	506	43 915	348	540	43 015	
Not stated	np	np	1 388	np	np	1 401	
Remoteness of residence	пр	пр	1 300	пр	пр	1 401	
Major cities	305	534	23 251	348	567	22 131	
	343	474	13 198	363	515	13 368	
Inner regional	248	417	8 424	277	440		
Outer regional Remote	104					8 235	
		400	926	176	428	822	
Very remote	4	287	1 215	18	298	1 400	
Not stated		••	_		••	_	
SEIFA of residence (e)	204	407	40 005	225	500	45.000	
Quintile 1	294	497	16 385	335	533	15 666	
Quintile 2	325	517	8 796	354	548	8 850	
Quintile 3	315	438	11 730	348	487	11 625	
Quintile 4	296	487	6 840	332	533	6 618	
Quintile 5	337	557	3 262	364	594	3 195	
Not stated	np	np	1	np	np	2	
Denture care							
Jurisdiction total	76	330	16 544	113	373	16 019	
REPORT ON					PRIMARY AND	COMMUNITY	

REPORT ON GOVERNMENT SERVICES 2017 PRIMARY AND COMMUNITY HEALTH PAGE **2** of TABLE 10A.43

Table 10A.43

		ime for offer	Waiting time for first visit			
	Days	dental care Days			g time for firs Days	t VISIt
	waited at the 50th percentile	waited at the 90th percentile	Number of records	waited at the 50th	waited at the 90th percentile	Number of records
Indigenous status	,	<u>, , , , , , , , , , , , , , , , , , , </u>		<b>,</b>	<u>, , , , , , , , , , , , , , , , , , , </u>	
Indigenous	55	265	468	87	329	444
Non-indigenous	77	331	15 613	114	373	15 113
Not stated	np	np	463	np	np	462
Remoteness of residence	'	•		· ·	•	-
Major cities	69	295	8 485	103	343	8 007
Inner regional	92	352	5 226	139	398	5 281
Outer regional	71	321	2 545	119	364	2 438
Remote	97	441	205	116	496	207
Very remote	115	707	83	110	766	86
Not stated			_	110		_
SEIFA of residence (e)		••				
Quintile 1	93	350	6 486	139	391	6 394
Quintile 2	70	310	3 324	106	358	3 181
Quintile 3	70	307	3 719	105	348	3 508
Quintile 4	57	274	2 152	91	324	2 099
Quintile 5	53	318	863	90	356	837
	55	310	003	90	330	037
Not stated		•••	_		••	_
Assessment						
Jurisdiction total			••			
Indigenous status						
Indigenous			••			
Non-indigenous			••			
Not stated						
Remoteness of residence						
Major cities			••			
Inner regional			••			
Outer regional						
Remote						
Very remote						
Not stated						
SEIFA of residence (e)						
Quintile 1						
Quintile 2						
Quintile 3						
Quintile 4						
Quintile 5						
Not stated						
2015-16						
General dental care						
Jurisdiction total	339	560	59 691	365	580	52 592
Indigenous status	559	500	00 00 1	505	300	02 00Z
REPORT ON					PRIMARY AND	

REPORT ON GOVERNMENT SERVICES 2017 PRIMARY AND COMMUNITY
HEALTH
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Table 10A.43

	Maiting t		of public				
	_	me for offer dental care	or public	Waiting	Waiting time for first visit		
	Days	Days		Days	Days	t visit	
	waited at	waited at		waited at	waited at	Number	
	the 50th	the 90th	Number of	the 50th	the 90th	of	
	percentile	percentile	records	percentile	percentile	records	
Indigenous	42	384	2 694	193	418	1 752	
Non-indigenous	343	566	54 780	368	585	48 995	
Not stated	np	np	2 217	np	np	1 845	
Remoteness of residence							
Major cities	350	586	26 724	374	589	23 451	
Inner regional	336	580	18 826	363	609	17 065	
Outer regional	344	483	10 937	367	504	9 837	
Remote	176	417	1 352	258	453	986	
Very remote	_	325	1 853	26	362	1 253	
Not stated			_		**	_	
SEIFA of residence (e)							
Quintile 1	352	591	20 686	379	618	17 515	
Quintile 2	341	534	13 307	366	561	11 906	
Quintile 3	325	499	14 923	350	513	13 526	
Quintile 4	334	530	7 899	359	544	7 104	
Quintile 5	381	611	2 874	399	633	2 541	
Not stated	np	np	2			_	
Denture care	•	•					
Jurisdiction total	78	391	14 568	105	411	13 496	
Indigenous status							
Indigenous	71	370	435	86	352	358	
Non-indigenous	77	385	13 692	104	406	12 747	
Not stated	np	np	441	np	np	391	
Remoteness of residence	•	•		•	•		
Major cities	70	259	7 360	101	301	6 896	
Inner regional	96	646	4 704	115	656	4 349	
Outer regional	70	361	2 252	96	387	2 040	
Remote	165	504	180	191	568	153	
Very remote	322	628	71	322	594	57	
Not stated			_			_	
SEIFA of residence (e)							
Quintile 1	94	608	5 491	119	622	5 117	
Quintile 2	72	281	3 026	98	308	2 808	
Quintile 3	76	339	3 372	100	370	3 109	
Quintile 4	65	265	1 891	97	301	1 750	
Quintile 5	61	223	788	87	250	712	
Not stated			-				
Assessment	••			••			
Jurisdiction total							
Indigenous status					••	••	
Indigenous							
Non-indigenous	••		••				
14011 IIIalgellous			••		••	••	

REPORT ON GOVERNMENT SERVICES 2017 PRIMARY AND COMMUNITY HEALTH PAGE **4** of TABLE 10A.43

#### **Table 10A.43**

## Waiting time for public dental care, Queensland (days) (a), (b), (c), (d)

	Waiting t	ime for offer	of public				
		dental care		Waiting	Waiting time for first visit		
	Days	Days		Days		Number	
	waited at	waited at		waited at	waited at		
	the 50th	the 90th Number of	Number of	Number of the 50th	the 90th	of	
	percentile	percentile	records	percentile	percentile	records	
Not stated							
Remoteness of residence							
Major cities							
Inner regional							
Outer regional							
Remote							
Very remote							
Not stated							
SEIFA of residence (e)							
Quintile 1							
Quintile 2							
Quintile 3							
Quintile 4							
Quintile 5							
Not stated							

- (a) Waiting times could not be calculated for some records for instance where a record had no date of offer or date of first visit.
- (b) The collection excludes people who are treated under jurisdictional priority client schemes.
- (c) The calculation of an Australian total is not appropriate given that jurisdictions are not comparable
- (d) Data are not comparable to that previously published due to the change in specifications.
- (e) SEIFA and remoteness are based on the usual residence of the person, not the location of the service provider.
- .. Not applicable. np Not published. Nil or rounded to zero.

Source: AIHW (unpublished) Public dental waiting times data collection.

Table 10A.44

	Maiting t	ima far affar	of public			
	vvaiting t	ime for offer dental care	от ривнс	Waiting time for first visit		
	Days	Days		Days	Days	t visit
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records	percentile	percentile	records
2013–14						
General dental care						
Jurisdiction total	349	663	30 815	444	758	16 027
Indigenous status						
Indigenous	357	763	1 037	414	824	275
Non-indigenous	351	665	27 972	444	757	14 851
Not stated	np	np	1 806	np	np	901
Remoteness of residence	·	·		·	·	
Major cities	335	645	22 743	435	741	11 294
Inner regional	391	665	3 317	455	767	2 092
Outer regional	397	772	2 279	476	820	1 436
Remote	225	472	577	318	592	349
Very remote	381	609	56	np	np	19
Not stated	np	np	1 842	np	np	838
SEIFA of residence (f)		- 1				
Quintile 1	343	637	6 151	436	691	3 423
Quintile 2	356	717	8 087	455	804	4 202
Quintile 3	341	643	7 650	434	745	4 065
Quintile 4	356	644	4 110	453	753	2 066
Quintile 5	337	644	2 968	431	743	1 430
Not stated	np	np	1 849	np	np	841
Denture care	116	ΠP	1010	119	···ρ	011
Jurisdiction total	498	895	1 997	626	983	1 602
Indigenous status	400	000	1 007	020	000	1 002
Indigenous	407	1 001	21	np	np	19
Non-indigenous	504	895	1 869	626	975	1 506
Not stated	np	np	107	np	np	77
Remoteness of residence	ПР	пр	107	пр	пр	, ,
Major cities	501	873	1 614	621	960	1 293
Inner regional	665	979	97	723	1 022	79
Outer regional	463	996	190	592	1 078	139
Remote	np	np	19	np	np	14
Very remote	np	np	2	np	np	7
Not stated	np	np	75	np	np	70
SEIFA of residence (f)	ПР	пр	75	пр	пр	70
Quintile 1	577	998	243	721	1 137	188
Quintile 1 Quintile 2	482	906	550	622	983	436
Quintile 2 Quintile 3	509	893	489	648	966	392
Quintile 3  Quintile 4	509	859	469 346	633	942	392 281
Quintile 4  Quintile 5				547		
Not stated	477	846	294 75		918	235
	np	np	75	np	np	70
Assessment						

REPORT ON GOVERNMENT SERVICES 2017 PRIMARY AND COMMUNITY HEALTH PAGE **1** of TABLE 10A.44

Table 10A.44

	Waiting time for offer of public					
		dental care		Waiting time for first visit		
	Days waited at the 50th percentile	Days waited at the 90th percentile	Number of records	Days waited at the 50th percentile	Days waited at the 90th percentile	Number of records
Jurisdiction total						
Indigenous status						
Indigenous						
Non-indigenous						
Not stated						
Remoteness of residence						
Major cities						
Inner regional						
Outer regional						
Remote						
Very remote						
Not stated						
SEIFA of residence (f)						
Quintile 1						
Quintile 2						
Quintile 3						
Quintile 4						
Quintile 5						
Not stated						
2014-15						
General dental care						
Jurisdiction total	98	350	19 191	169	435	12 261
Indigenous status						
Indigenous	106	475	684	200	564	258
Non-indigenous	98	350	17 148	168	435	11 095
Not stated	np	np	1 359	np	np	908
Remoteness of residence						
Major cities	94	224	13 399	154	380	8 312
Inner regional	130	426	2 454	195	452	1 825
Outer regional	181	572	2 100	228	694	1 323
Remote	99	482	447	198	470	293
Very remote	293	548	78	203	478	30
Not stated	np	np	713	np	np	478
SEIFA of residence (f)						
Quintile 1	97	301	4 403	164	380	2 999
Quintile 2	103	425	5 120	181	503	3 166
Quintile 3	97	289	5 063	167	389	3 251
Quintile 4	98	356	2 291	163	448	1 412
Quintile 5	96	297	1 598	154	435	953
Not stated	np	np	716	np	np	480
Denture care	·			·	•	
Jurisdiction total	371	738	1 763	435	829	1 522
DEPORT ON						001414111

REPORT ON GOVERNMENT SERVICES 2017 PRIMARY AND COMMUNITY HEALTH PAGE **2** of TABLE 10A.44

Table 10A.44

		ime for offer	Waiting time for first visit			
	Days	dental care Days			g time for firs Days	t VISIt
	waited at the 50th percentile	waited at the 90th percentile	Number of records	waited at the 50th	waited at the 90th percentile	Number of records
Indigenous status						
Indigenous	343	517	33	np	np	16
Non-indigenous	378	738	1 631	440	829	1 427
Not stated	np	np	99	np	np	79
Remoteness of residence						
Major cities	380	728	1 415	439	831	1 263
Inner regional	356	665	68	443	705	49
Outer regional	357	789	192	408	862	145
Remote	np	np	13	np	np	9
Very remote	np	np	9	np	np	5
Not stated	np	np	65	np	np	50
SEIFA of residence (f)	·	·		•		
Quintile 1	452	761	293	490	830	261
Quintile 2	389	729	466	419	833	392
Quintile 3	369	728	409	437	821	357
Quintile 4	323	728	305	433	854	272
Quintile 5	303	695	225	382	782	190
Not stated	np	np	65	np	np	50
Assessment						
Jurisdiction total						
Indigenous status						
Indigenous						
Non-indigenous						
Not stated						
Remoteness of residence		•••		••		••
Major cities						
Inner regional			••	••		
Outer regional			••	••		
Remote		•••	**		••	••
Very remote		•••	••		••	••
Not stated					••	••
SEIFA of residence (f)		**			••	••
Quintile 1						
Quintile 2	••			••		••
Quintile 3			••	••		
				••		
Quintile 4						
Quintile 5						
Not stated	••			••		
2015-16						
General dental care						
Jurisdiction total	44	299	31 514	87	360	16 680
Indigenous status						
REPORT ON					PRIMARY AND	COMMUNIT

REPORT ON GOVERNMENT SERVICES 2017 RIMARY AND COMMUNITY
HEALTH
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Table 10A.44

	Waiting t	mo for offer	of public				
		me for offer dental care	or public	Waiting	Waiting time for first visit		
	Days	Days		Days	Days	t vioit	
	waited at	waited at		waited at	waited at	Number	
	the 50th	the 90th	Number of	the 50th	the 90th	of	
	percentile	percentile	records		percentile	records	
Indigenous	69	386	1 193	111	463	363	
Non-indigenous	43	294	27 923	88	361	15 041	
Not stated	np	np	2 398	np	np	1 276	
Remoteness of residence							
Major cities	36	146	22 584	77	239	11 827	
Inner regional	78	423	3 973	120	468	2 397	
Outer regional	173	644	3 398	161	681	1 670	
Remote	49	391	509	105	445	281	
Very remote	87	399	208	155	465	78	
Not stated	np	np	842	np	np	427	
SEIFA of residence (f)							
Quintile 1	41	293	6 336	80	335	3 684	
Quintile 2	52	388	8 595	102	432	4 418	
Quintile 3	42	221	7 980	85	289	4 332	
Quintile 4	42	260	4 574	87	343	2 278	
Quintile 5	37	190	3 179	81	282	1 538	
Not stated	np	np	850	np	np	430	
Denture care	•	•		•	•		
Jurisdiction total	287	627	2 011	331	675	1 522	
Indigenous status							
Indigenous	366	497	60	388	644	22	
Non-indigenous	286	631	1 852	334	673	1 426	
Not stated	np	np	99	np	np	74	
Remoteness of residence	•	•		•	•		
Major cities	283	640	1 517	341	676	1 212	
Inner regional	259	553	174	278	642	109	
Outer regional	309	468	215	320	716	128	
Remote	np	np	19	np	np	15	
Very remote	361	424	23	np	np	15	
Not stated	np	np	63	np	np	44	
SEIFA of residence (f)						• •	
Quintile 1	304	646	373	344	697	300	
Quintile 2	278	633	540	337	680	386	
Quintile 3	349	632	488	361	675	381	
Quintile 4	215	575	303	276	640	225	
Quintile 5	238	625	244	288	662	186	
Not stated	np	np	63	np	np	44	
Assessment	ПР	пр	03	ПР	пр	44	
Jurisdiction total							
Indigenous status	••	••	••		••		
<u> </u>							
Indigenous Non-indigenous					••		
Non-inalgenous	••				••		

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Table 10A.44

	Waiting time for offer of public						
		dental care			Waiting time for first visit		
	Days	Days	<u> </u>	Days	Days		
	waited at	waited at		waited at	waited at	Number	
	the 50th	the 90th	Number of	the 50th	the 90th	of	
	percentile	percentile	records	percentile	percentile	records	
Not stated							
Remoteness of residence							
Major cities							
Inner regional							
Outer regional							
Remote							
Very remote							
Not stated	••				••		
SEIFA of residence (f)							
Quintile 1							
Quintile 2							
Quintile 3							
Quintile 4							
Quintile 5							
Not stated							

- (a) Waiting times could not be calculated for some records for instance where a record had no date of offer or date of first visit.
- (b) The collection excludes people who are treated under jurisdictional priority client schemes.
- (c) The calculation of an Australian total is not appropriate given that jurisdictions are not comparable
- (d) Data are not comparable to that previously published due to the change in specifications.
- (e) Only includes data for Dental Health Services, the primary but not sole provider of public dental services in Western Australia.
- (f) SEIFA and remoteness are based on the usual residence of the person, not the location of the service provider.
- .. Not applicable. np Not published.

Source: AIHW (unpublished) Public dental waiting times data collection.

Table 10A.45

	Waiting time for offer of public						
		dental care		Waiting time for first visit			
	Days	Days		Days	Days		
	waited at	waited at	Monatara	waited at	waited at	Number	
	the 50th	the 90th	Number of	the 50th	the 90th	of	
	percentile	percentile	records	percentile	percentile	records	
2013–14							
General dental care							
Jurisdiction total	105	510	40 994	139	528	20 148	
Indigenous status							
Indigenous	161	590	703	149	548	293	
Non-indigenous	104	505	39 388	139	527	19 526	
Not stated	np	np	903	np	np	329	
Remoteness of residence							
Major cities	66	312	25 851	95	292	11 667	
Inner regional	170	455	6 360	203	458	3 601	
Outer regional	392	847	7 286	361	872	4 048	
Remote	270	661	1 218	275	545	683	
Very remote	112	413	204	96	450	119	
Not stated	np	np	74	np	np	30	
SEIFA of residence (e)	·	•		•	•		
Quintile 1	148	671	15 019	161	702	7 290	
Quintile 2	124	434	14 421	161	462	6 933	
Quintile 3	91	445	5 639	131	445	2 906	
Quintile 4	67	296	4 588	101	268	2 358	
Quintile 5	61	229	1 247	94	214	628	
Not stated	np	np	80	np	np	33	
Denture care	116	ΠP	00	· · · · ·	···β	00	
Jurisdiction total	120	636	1 975	72	397	416	
Indigenous status	120	000	1 070	12	001	410	
Indigenous	nn	nn	17	nn	nn	12	
=	np 30	np 337	526	np 72	np 397	393	
Non-indigenous Not stated			1 432				
	np	np	1 432	np	np	11	
Remoteness of residence	44	200	706	70	200	404	
Major cities	41	326	706	70	390	404	
Inner regional	219	613	477	np	np	11	
Outer regional	240	886	609	np	np	1	
Remote	127	549	168	••		_	
Very remote	np	np	15		••	_	
Not stated		••	_		••	_	
SEIFA of residence (e)							
Quintile 1	145	733	870	65	421	164	
Quintile 2	105	602	635	60	355	150	
Quintile 3	161	604	286	135	405	34	
Quintile 4	72	519	149	89	386	57	
Quintile 5	41	501	35	np	np	11	
Not stated			_		••	_	
Assessment							

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Table 10A.45

	Waiting time for offer of public					
		dental care			time for firs	t visit
	Days waited at	Days waited at		Days waited at	Days waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records		percentile	records
Jurisdiction total						
Indigenous status						
Indigenous						
Non-indigenous						
Not stated						
Remoteness of residence						
Major cities						
Inner regional						
Outer regional						
Remote						
Very remote						
Not stated						
SEIFA of residence (e)						
Quintile 1						
Quintile 2						
Quintile 3						
Quintile 4						
Quintile 5					••	••
Not stated			••	••	••	••
					••	
2014-15 General dental care						
Jurisdiction total	287	506	23 643	267	526	12 315
Indigenous status	207	300	23 043	207	320	12 3 13
· ·	116	006	242	275	755	106
Indigenous	446	926	342	275	755 533	126
Non-indigenous	285	499	22 829	266	523	12 038
Not stated	np	np	472	np	np	151
Remoteness of residence	000	444	45.044	000	444	7.045
Major cities	268	411	15 211	226	414	7 045
Inner regional	217	468	2 649	229	484	1 871
Outer regional	451	622	5 047	460	638	3 094
Remote	420	759	651	383	742	267
Very remote	262	476	38	294	488	20
Not stated	np	np	48	np	np	18
SEIFA of residence (e)						
Quintile 1	335	539	8 539	356	593	4 280
Quintile 2	278	499	8 698	249	491	4 555
Quintile 3	276	470	2 786	265	487	1 537
Quintile 4	236	427	2 883	219	432	1 578
Quintile 5	238	379	689	217	383	347
Not stated	np	np	48	np	np	18
Denture care						
Jurisdiction total	350	638	1 448	56	290	321
DEDORT ON						

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Table 10A.45

	Waiting time for offer of public			Waiting time for first visit		
	Days	dental care Days		Waiting time for first visit  Days  Days		
	waited at the 50th percentile	waited at the 90th percentile	Number of records	waited at the 50th	waited at the 90th percentile	Number of records
Indigenous status						
Indigenous	np	np	13	np	np	7
Non-indigenous	52	514	490	56	290	314
Not stated	np	np	945		••	_
Remoteness of residence						
Major cities	301	532	835	56	298	303
Inner regional	377	680	272	np	np	13
Outer regional	420	867	272	np	np	5
Remote	435	755	65			_
Very remote	np	np	3			_
Not stated			_			_
SEIFA of residence (e)						
Quintile 1	343	607	600	55	223	145
Quintile 2	359	647	541	56	331	103
Quintile 3	358	644	146	52	478	29
Quintile 4	315	517	137	56	273	37
Quintile 5	313	487	24	np	np	7
Not stated			_			_
Assessment						
Jurisdiction total						
Indigenous status						
Indigenous						
Non-indigenous						
Not stated						
Remoteness of residence						
Major cities						
Inner regional						
Outer regional						
Remote						
Very remote					••	
Not stated			••	••	••	••
SEIFA of residence (e)	••		••	••	••	••
Quintile 1						
Quintile 2			••	••	••	
Quintile 3				••	••	
Quintile 3  Quintile 4			••	••	••	
Quintile 5				••	••	
Not stated						
	••					
2015-16						
General dental care						
Jurisdiction total	359	495	38 626	388	539	19 011
Indigenous status						
REPORT ON					PRIMARY AND	COMMUNIT

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HEALTH
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Table 10A.45

	Waiting to	14/aitina	Waiting time for first visit			
	Days	dental care Days			time for firs Days	t visit
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records		percentile	records
Indigenous	353	802	230	408	637	98
Non-indigenous	359	493	37 579	387	539	18 641
Not stated	np	np	817	np	np	272
Remoteness of residence						
Major cities	358	460	25 642	386	511	11 418
Inner regional	325	616	4 241	332	515	2 620
Outer regional	399	557	7 660	428	599	4 351
Remote	340	552	790	413	588	460
Very remote	367	518	258	456	607	153
Not stated	np	np	35	np	np	9
SEIFA of residence (e)	•	•		·	•	
Quintile 1	389	518	14 735	411	566	6 905
Quintile 2	350	503	13 836	377	531	6 925
Quintile 3	356	477	4 070	381	518	2 148
Quintile 4	346	466	5 025	381	519	2 530
Quintile 5	350	474	922	382	514	492
Not stated	np	np	38	np	np	11
Denture care	ΠP	пр	00	ΠP	пр	
Jurisdiction total	467	629	2 154	36	153	261
Indigenous status	407	020	2 104	00	100	201
Indigenous	np	np	17	np	np	12
Non-indigenous	7	379	358	36	166	247
Not stated	np	np	1 779	np	np	2
Remoteness of residence	ΠP	пр	1773	пр	пр	
Major cities	408	565	890	36	154	250
Inner regional	491	607	438			230
Outer regional	491	685	676	np	np	2
Remote	516	789	142	np	np	2
				••		_
Very remote	np	np	8	••		_
Not stated			_	••		_
SEIFA of residence (e)	474	000	0.40	40	004	400
Quintile 1	474	636	949	42	234	100
Quintile 2	467	666	752	32	145	85
Quintile 3	487	625	227	25	294	28
Quintile 4	412	567	189	40	128	42
Quintile 5	420	615	37	np	np	6
Not stated	np	np	_			_
Assessment						
Jurisdiction total						
Indigenous status						
Indigenous						
Non-indigenous						

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**Table 10A.45** 

	Waiting to	ime for offer	of public				
		dental care			Waiting time for first visit		
	Days	Days		Days			
	waited at	waited at		waited at	waited at	Number	
	the 50th	the 90th	Number of	the 50th	the 90th	of	
	percentile	percentile	records	percentile	percentile	records	
Not stated					••		
Remoteness of residence							
Major cities							
Inner regional							
Outer regional							
Remote							
Very remote							
Not stated							
SEIFA of residence (e)							
Quintile 1							
Quintile 2							
Quintile 3							
Quintile 4							
Quintile 5							
Not stated							

- (a) Waiting times could not be calculated for some records for instance where a record had no date of offer or date of first visit.
- (b) The collection excludes people who are treated under jurisdictional priority client schemes.
- (c) The calculation of an Australian total is not appropriate given that jurisdictions are not comparable
- (d) Data are not comparable to that previously published due to the change in specifications.
- (e) SEIFA and remoteness are based on the usual residence of the person, not the location of the service provider.
- .. Not applicable. **np** Not published. Nil or rounded to zero.

Source: AIHW (unpublished) Public dental waiting times data collection.

Table 10A.46

	Waiting ti	me for offer	of public			
		dental care	·	Waiting	g time for firs	t visit
	Days	Days		Days	Days	
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records	percentile	percentile	records
2013–14						
General dental care						
Jurisdiction total	568	1 009	4 878	645	1 147	2 433
Indigenous status						
Indigenous	723	1 136	123	764	1 297	48
Non-indigenous	582	1 010	3 679	662	1 154	1 820
Not stated	np	np	1 076	np	np	565
Remoteness of residence						
Major cities			_			_
Inner regional	580	1 002	2 952	695	1 078	1 525
Outer regional	554	1 260	1 821	612	1 317	864
Remote	555	1 148	61	617	1 526	26
Very remote	498	847	25	np	np	16
Not stated	np	np	19	np	np	2
SEIFA of residence (g)						_
Quintile 1	567	1 107	2 952	637	1 241	1 432
Quintile 2	584	1 059	705	693	1 132	352
Quintile 3	533	871	769	617	980	393
Quintile 4	856	1 003	412	887	1 099	237
Quintile 5	949	1 008	21	np	np	17
Not stated			19			2
Denture care	np	np	19	np	np	2
Jurisdiction total	266	1 035	1 633	357	1 237	1 360
Indigenous status	200	1 000	1 000	337	1 231	1 300
· ·	183	1 433	37	432	1 435	25
Indigenous	293	1 590	1 146	413	1 326	25 980
Non-indigenous Not stated						
	np	np	450	np	np	355
Remoteness of residence						
Major cities			_			700
Inner regional	216	733	893	344	1 035	782
Outer regional	316	2 242	701	389	1 855	553
Remote	582	2 324	32	369	1 998	21
Very remote	np	np	5	np	np	4
Not stated	np	np	2			_
SEIFA of residence (g)						
Quintile 1	273	1 462	1 098	344	1 271	882
Quintile 2	264	1 799	248	337	1 117	205
Quintile 3	328	882	163	562	1 264	169
Quintile 4	126	580	116	176	774	99
Quintile 5	np	np	6	np	np	5
Not stated	np	np	2		••	_
Assessment						

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Table 10A.46

	Waiting t	ime for offer	of public			
		dental care		Waiting time for first visit		
	Days waited at the 50th percentile	Days waited at the 90th percentile	Number of records	Days waited at the 50th percentile	Days waited at the 90th percentile	Number of records
Jurisdiction total						
Indigenous status						
Indigenous						
Non-indigenous						
Not stated						
Remoteness of residence						
Major cities						
Inner regional						
Outer regional						
Remote		••				
Very remote						
Not stated						
SEIFA of residence (g)						
Quintile 1						
Quintile 2						
Quintile 3						
Quintile 4						
Quintile 5						
Not stated						
2014-15						
General dental care						
Jurisdiction total	958	1 575	8 031	1 002	1 934	4 740
Indigenous status						
Indigenous	952	1 517	189	993	1 931	103
Non-indigenous	974	1 605	5 454	1 021	1 957	2 786
Not stated	np	np	2 388	np	np	1 851
Remoteness of residence	·	•		•		
Major cities			_			_
Inner regional	952	1 458	4 591	1 001	1 969	2 748
Outer regional	998	1 632	3 245	1 007	1 872	1 888
Remote	1 006	1 455	112	1 108	2 147	70
Very remote	412	1 455	67	581	1 088	30
Not stated	np	np	15	np	np	4
SEIFA of residence (g)	·	·				
Quintile 1	971	1 612	5 119	1 021	1 982	2 946
Quintile 2	962	1 559	1 225	997	1 792	707
Quintile 3	399	1 395	1 000	496	1 764	668
Quintile 4	960	1 009	609	1 013	1 934	378
Quintile 5	969	1 039	63	1 009	1 488	37
Not stated	np	np	15	np	np	4
Denture care	- 1			٠٠۴		•
Jurisdiction total	185	452	1 776	365	2 547	1 836
DEPORT ON						

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Table 10A.46

	Waiting to	ime for offer	of public				
	3	dental care	,	Waiting	Waiting time for first visit		
	Days	Days		Days	Days		
	waited at	waited at		waited at	waited at	Number	
	the 50th percentile	the 90th percentile	Number of records	the 50th percentile	the 90th percentile	of records	
Indigenous status							
Indigenous	185	464	37	283	2 387	36	
Non-indigenous	245	463	1 039	386	2 730	1 105	
Not stated	np	np	700	np	np	695	
Remoteness of residence							
Major cities			_			_	
Inner regional	125	423	971	369	2 752	1 038	
Outer regional	232	570	759	357	2 388	758	
Remote	289	509	32	348	2 758	29	
Very remote	np	np	11	np	np	7	
Not stated	np	np	2	np	np	4	
SEIFA of residence (g)	•	•			•		
Quintile 1	193	455	1 173	353	2 512	1 167	
Quintile 2	209	442	266	388	2 568	290	
Quintile 3	254	462	207	395	2 829	237	
Quintile 4	50	361	120	179	2 124	130	
Quintile 5	np	np	8	np	np	8	
Not stated	np	np	2	np	np	4	
Assessment	ΠP	пр	2	пр	пр	7	
Jurisdiction total							
Indigenous status		••		••			
Indigenous							
Non-indigenous		••				••	
Not stated	••	••		••			
			••	••			
Remoteness of residence							
Major cities	••	••		••	••	••	
Inner regional	••	••		••		••	
Outer regional	••						
Remote				••			
Very remote	••		••	••			
Not stated	••		••	••			
SEIFA of residence (g)							
Quintile 1							
Quintile 2							
Quintile 3							
Quintile 4							
Quintile 5		••	**				
Not stated							
2015-16							
General dental care							
Jurisdiction total	680	1 010	7 287	916	2 852	5 923	
Indigenous status	_			_			
REPORT ON					PRIMARY AND	001414111	

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Table 10A.46

	(b), (c), (d		<u> </u>			
	-	ime for offer	of public	14/0:4:0	u tima a fau fiua	4:
	Days	dental care Days		Days	time for firs Days	t VISIt
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records	percentile	percentile	records
Indigenous	722	1 071	174	969	2 955	142
Non-indigenous	764	1 155	3 051	1 054	3 490	2 203
Not stated	np	np	4 062	np	np	3 578
Remoteness of residence						
Major cities			_			_
Inner regional	709	933	4 886	895	2 709	3 621
Outer regional	628	1 236	2 281	1 008	3 067	2 188
Remote	799	1 194	79	1 191	2 614	80
Very remote	281	972	28	518	1 674	30
Not stated	np	np	13	np	np	4
SEIFA of residence (g)	•	·			·	
Quintile 1	679	1 143	4 157	958	3 032	3 521
Quintile 2	713	959	1 088	910	2 549	903
Quintile 3	294	931	1 181	758	2 663	929
Quintile 4	797	928	783	903	2 134	516
Quintile 5	806	924	65	942	3 023	50
Not stated	np	np	13	np	np	4
Denture care			. •			
Jurisdiction total	129	395	1 697	450	3 840	2 485
Indigenous status	0				00.0	00
Indigenous	109	317	30	322	2 315	41
Non-indigenous	143	487	540	1 132	4 503	989
Not stated	np	np	1 127	np	np	1 455
Remoteness of residence	p	٠.٣		p		. 100
Major cities			_			_
Inner regional	95	372	867	685	4 253	1 326
Outer regional	169	446	788	350	3 291	1 108
Remote	125	261	40	224	2 878	44
Very remote	np	np	2	np		6
Not stated			2		np	U
SEIFA of residence (g)	••		_		••	_
Quintile 1	143	413	1 127	447	3 856	1 621
Quintile 2	100	358	255	361	3 790	368
Quintile 2  Quintile 3	111	361	255	430		
Quintile 3  Quintile 4					3 781	332
	85	377	89	761	4 060	152
Quintile 5	np	np	9	np	np	12
Not stated	••		_	••	**	_
Assessment						
Jurisdiction total						
Indigenous status						
Indigenous					••	
Non-indigenous					••	••

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#### **Table 10A.46**

## Waiting time for public dental care, Tasmania (days) (a), (b), (c), (d), (e), (f)

	Waiting to	ime for offer	of public			
		dental care		Waiting time for first visit		
	Days waited at the 50th percentile	Days waited at the 90th percentile	Number of records	Days waited at the 50th percentile	Days waited at the 90th percentile	Number of records
Not stated						
Remoteness of residence						
Major cities						
Inner regional						
Outer regional						
Remote						
Very remote						
Not stated						
SEIFA of residence (g)						
Quintile 1						
Quintile 2						
Quintile 3						
Quintile 4						
Quintile 5						
Not stated						

- (a) Waiting times could not be calculated for some records for instance where a record had no date of offer or date of first visit.
- (b) The collection excludes people who are treated under jurisdictional priority client schemes.
- (c) The calculation of an Australian total is not appropriate given that jurisdictions are not comparable
- (d) Data are not comparable to that previously published due to the change in specifications.
- (e) In Tasmania some people who receive denture care are instead recorded on the general dental care waiting list (see data quality statement).
- (f) In Tasmania, people who do not respond to offers of dental care but later present for care are restored to the waiting list in their original position, which can result in longer times between date of listing and date of offer or first visit.
- (g) SEIFA and remoteness are based on the usual residence of the person, not the location of the service provider.
  - .. Not applicable. **np** Not published. Nil or rounded to zero.

Source: AIHW (unpublished) Public dental waiting times data collection.

	Waiting t	ime for offer	of public		147 ''' '' '' '' '' ''		
		dental care			g time for firs	t visit	
	Days	Days		Days	Days		
	waited at	waited at	Ni wahawaf	waited at	waited at the 90th	Number	
	the 50th percentile	the 90th percentile	Number of records	the 50th percentile	percentile	of records	
	percentile	percentile	1600103	percentile	percentile	7600143	
2013–14							
General dental care							
Jurisdiction total	na	na	na	na	na	na	
Indigenous status							
Indigenous	na	na	na	na	na	na	
Non-indigenous	na	na	na	na	na	na	
Not stated	na	na	na	na	na	na	
Remoteness of residence							
Major cities	na	na	na	na	na	na	
Inner regional	na	na	na	na	na	na	
Outer regional	na	na	na	na	na	na	
Remote	na	na	na	na	na	na	
Very remote	na	na	na	na	na	na	
Not stated	na	na	na	na	na	na	
SEIFA of residence							
Quintile 1	na	na	na	na	na	na	
Quintile 2	na	na	na	na	na	na	
Quintile 3	na	na	na	na	na	na	
Quintile 4	na	na	na	na	na	na	
Quintile 5	na	na	na	na	na	na	
Not stated	na	na	na	na	na	na	
Denture care							
Jurisdiction total	na	na	na	na	na	na	
Indigenous status							
Indigenous	na	na	na	na	na	na	
Non-indigenous	na	na	na	na	na	na	
Not stated	na	na	na	na	na	na	
Remoteness of residence	TIG.	i i d	TIG.	na	na	iid.	
Major cities	na	na	na	na	na	na	
Inner regional	na	na	na	na	na	na	
Outer regional	na	na	na	na	na	na	
Remote	na	na	na	na	na	na	
Very remote							
Not stated	na na	na na	na na	na na	na na	na	
SEIFA of residence	IIa	IIa	IIa	IIa	IIa	na	
Quintile 1	no	no	no	no	no	no	
	na	na	na	na	na	na	
Quintile 2	na	na	na	na	na	na	
Quintile 3	na	na	na	na	na	na	
Quintile 4	na	na	na	na	na	na	
Quintile 5	na	na	na	na	na	na	
Not stated	na	na	na	na	na	na	
Assessment							
Jurisdiction total	na	na	na	na ———	na	na	

REPORT ON GOVERNMENT SERVICES 2017 PRIMARY AND COMMUNITY HEALTH PAGE **1** of TABLE 10A.47

	Waiting t	ime for offer	of public			
		dental care			time for firs	t visit
	Days	Days		Days	Days	
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records	percentile	percentile	records
Indigenous status						
Indigenous	na	na	na	na	na	na
Non-indigenous	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Remoteness of residence						
Major cities	na	na	na	na	na	na
Inner regional	na	na	na	na	na	na
Outer regional	na	na	na	na	na	na
Remote	na	na	na	na	na	na
Very remote	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
SEIFA of residence						
Quintile 1	na	na	na	na	na	na
Quintile 2	na	na	na	na	na	na
Quintile 3	na	na	na	na	na	na
Quintile 4	na	na	na	na	na	na
Quintile 5	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
2014-15						
General dental care						
Jurisdiction total	na	na	na	na	na	na
Indigenous status	TIG.	Πα	Πα	Πα	IIG	Πα
Indigenous	na	na	na	na	na	na
Non-indigenous	na		na	na		
Not stated		na			na	na
Remoteness of residence	na	na	na	na	na	na
	no	na	no	no	20	na
Major cities	na	na	na	na	na	na
Inner regional	na	na	na	na	na	na
Outer regional	na	na	na	na	na	na
Remote	na	na	na	na	na	na
Very remote	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
SEIFA of residence						
Quintile 1	na	na	na	na	na	na
Quintile 2	na	na	na	na	na	na
Quintile 3	na	na	na	na	na	na
Quintile 4	na	na	na	na	na	na
Quintile 5	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Denture care						
Jurisdiction total	na	na	na	na	na	na
Indigenous status						
Indigenous	na	na	na	na	na	na

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	Waiting t	ime for offer	of public			
		dental care		Waiting	time for firs	t visit
	Days	Days		Days	Days	
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records	percentile	percentile	records
Non-indigenous	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Remoteness of residence						
Major cities	na	na	na	na	na	na
Inner regional	na	na	na	na	na	na
Outer regional	na	na	na	na	na	na
Remote	na	na	na	na	na	na
Very remote	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
SEIFA of residence						
Quintile 1	na	na	na	na	na	na
Quintile 2	na	na	na	na	na	na
Quintile 3	na	na	na	na	na	na
Quintile 4	na	na	na	na	na	na
Quintile 5	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Assessment						
Jurisdiction total	na	na	na	na	na	na
Indigenous status						
Indigenous	na	na	na	na	na	na
Non-indigenous	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Remoteness of residence						
Major cities	na	na	na	na	na	na
Inner regional	na	na	na	na	na	na
Outer regional	na	na	na	na	na	na
Remote	na	na	na	na	na	na
Very remote	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
SEIFA of residence	IIa	IIa	IIa	IIa	IIa	IIa
Quintile 1	no	20	na	no	20	no
Quintile 1 Quintile 2	na	na	na	na	na	na
	na	na	na	na	na	na
Quintile 3	na	na	na	na	na	na
Quintile 4	na	na	na	na	na	na
Quintile 5	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
2015-16						
General dental care						
Jurisdiction total	160	173	3 867	195	1 176	2 702
Indigenous status						
Indigenous	161	173	109	287	1 825	72
Non-indigenous	160	173	3 209	194	1 000	2 284
Not stated	160	173	549	219	2 520	346

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	-	ime for offer dental care	of public	Waiting	g time for firs	t visit
	Days waited at the 50th percentile	Days waited at the 90th percentile	Number of records	Days waited at the 50th percentile	Days waited at the 90th percentile	Number of records
Remoteness of residence						
Major cities	160	173	3 789	195	1 163	2 635
Inner regional	np	np	17	np	np	15
Outer regional	np	np	_	np	np	_
Remote			_			_
Very remote			_			_
Not stated	164	174	61	224	1 639	52
SEIFA of residence						
Quintile 1	162	175	38	190	2 271	29
Quintile 2	161	173	92	196	939	69
Quintile 3	159	173	179	202	1 249	116
Quintile 4	160	173	1 572	194	1 082	1 093
Quintile 5	161	173	1 911	195	1 175	1 330
Not stated	162	174	75	236	1 639	65
Denture care						
Jurisdiction total	141	164	70	867	2 889	48
Indigenous status						
Indigenous	np	np	1			_
Non-indigenous	141	162	48	834	3 979	31
Not stated	139	165	21	np	np	17
Remoteness of residence						
Major cities	141	164	70	876	2 889	47
Inner regional			_			_
Outer regional			_			_
Remote			_			_
Very remote			_			_
Not stated			_	np	np	1
SEIFA of residence				•	'	
Quintile 1			_			_
Quintile 2	np	np	2	na	na	na
Quintile 3	np	np	1	np	np	5
Quintile 4	138	165	35	np	np	19
Quintile 5	145	162	32	857	2 889	23
Not stated			_	np	np	1
Assessment		-				
Jurisdiction total	na	na	na	na	na	na
Indigenous status	.70		114			
Indigenous	na	na	na	na	na	na
Non-indigenous	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
Remoteness of residence	i id	na	Πū	iiα	IId	IIU
Major cities	na	na	na	na	na	na
Inner regional	na	na	na	na	na	na
illioi regional	ila	iia	IId	ila	iia	iia

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	Waiting ti	of public				
		dental care			time for firs	t visit
	Days	Days		Days	Days	
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records	percentile	percentile	records
Outer regional	na	na	na	na	na	na
Remote	na	na	na	na	na	na
Very remote	na	na	na	na	na	na
Not stated	na	na	na	na	na	na
SEIFA of residence						
Quintile 1	na	na	na	na	na	na
Quintile 2	na	na	na	na	na	na
Quintile 3	na	na	na	na	na	na
Quintile 4	na	na	na	na	na	na
Quintile 5	na	na	na	na	na	na
Not stated	na	na	na	na	na	na

<sup>(</sup>a) Data for ACT were not available.

**na** Not available. .. Not applicable. np Not published. – Nil or rounded to zero.

Source: AIHW (unpublished) Public dental waiting times data collection.

	Waiting time for offer of public										
		dental care			g time for firs	t visit					
	Days	Days	_	Days	Days						
	waited at	waited at	N. C.	waited at	waited at	Number					
	the 50th percentile	the 90th percentile	Number of	the 50th	the 90th	of					
	регсепше	percentile	records	percentile	percentile	records					
2013–14											
General dental care											
Jurisdiction total	np	np	np	np	np	np					
Indigenous status											
Indigenous	np	np	np	np	np	np					
Non-indigenous	np	np	np	np	np	np					
Not stated	np	np	np	np	np	np					
Remoteness of residence											
Major cities	np	np	np	np	np	np					
Inner regional	np	np	np	np	np	np					
Outer regional	np	np	np	np	np	np					
Remote	np	np	np	np	np	np					
Very remote	np	np	np	np	np	np					
Not stated	np	np	np	np	np	np					
SEIFA of residence											
Quintile 1	np	np	np	np	np	np					
Quintile 2	np	np	np	np	np	np					
Quintile 3	np	np	np	np	np	np					
Quintile 4	np	np	np	np	np	np					
Quintile 5	np	np	np	np	np	np					
Not stated	np	np	np	np	np	np					
Denture care	•	·		•	•	·					
Jurisdiction total	np	np	np	np	np	np					
Indigenous status	•	·		•	•	·					
Indigenous	np	np	np	np	np	np					
Non-indigenous	np	np	np	np	np	np					
Not stated	np	np	np	np	np	np					
Remoteness of residence	·	'	·	'	'						
Major cities	np	np	np	np	np	np					
Inner regional	np	np	np	np	np	np					
Outer regional	np	np	np	np	np	np					
Remote	np	np	np	np	np	np					
Very remote	np	np	np	np	np	np					
Not stated	np	np	np	np	np	np					
SEIFA of residence	p	٠.٣		p							
Quintile 1	np	np	np	np	np	np					
Quintile 2											
Quintile 3	np np	np np	np np	np nn	np np	np nn					
Quintile 3  Quintile 4	-			np		np					
Quintile 5	np	np	np	np	np	np					
Not stated	np	np	np	np	np	np					
Assessment	np	np	np	np	np	np					
Jurisdiction total	nn	nn	nn	nn	nn	nn					
	np	np	np	np	np	np					

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	-	ime for offer dental care	of public	Waiting	g time for firs	t visit
	Days	Days		Days	Days	t visit
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records	percentile	percentile	records
Indigenous status						
Indigenous	np	np	np	np	np	np
Non-indigenous	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
Remoteness of residence						
Major cities	np	np	np	np	np	np
Inner regional	np	np	np	np	np	np
Outer regional	np	np	np	np	np	np
Remote	np	np	np	np	np	np
Very remote	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
SEIFA of residence						
Quintile 1	np	np	np	np	np	np
Quintile 2	np	np	np	np	np	np
Quintile 3	np	np	np	np	np	np
Quintile 4	np	np	np	np	np	np
Quintile 5	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
2014-15	·					•
General dental care						
Jurisdiction total	np	np	np	np	np	np
Indigenous status	•	•	·	'	•	·
Indigenous	np	np	np	np	np	np
Non-indigenous	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
Remoteness of residence	•	•	·	•	•	
Major cities	np	np	np	np	np	np
Inner regional	np	np	np	np	np	np
Outer regional	np	np	np	np	np	np
Remote	np	np	np	np	np	np
Very remote	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
SEIFA of residence	•	'	·	•	'	•
Quintile 1	np	np	np	np	np	np
Quintile 2	np	np	np	np	np	np
Quintile 3	np	np	np	np	np	np
Quintile 4	np	np	np	np	np	np
Quintile 5	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
Denture care		٠.٠٣		٠.٣	٠.٣	٠٠٣
Jurisdiction total	np	np	np	np	np	np
Indigenous status	- 34			٠٠۴		
Indigenous	np	np	np	np	np	np
DEPORT ON	r		•			

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	Waiting t	me for offer	of public			
	_	dental care	<b>-</b>	Waiting	time for firs	t visit
	Days	Days		Days	Days	
	waited at	waited at		waited at	waited at	Number
	the 50th	the 90th	Number of	the 50th	the 90th	of
	percentile	percentile	records	percentile	•	records
Non-indigenous	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
Remoteness of residence						
Major cities	np	np	np	np	np	np
Inner regional	np	np	np	np	np	np
Outer regional	np	np	np	np	np	np
Remote	np	np	np	np	np	np
Very remote	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
SEIFA of residence						
Quintile 1	np	np	np	np	np	np
Quintile 2	np	np	np	np	np	np
Quintile 3	np	np	np	np	np	np
Quintile 4	np	np	np	np	np	np
Quintile 5	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
Assessment						
Jurisdiction total	np	np	np	np	np	np
Indigenous status						
Indigenous	np	np	np	np	np	np
Non-indigenous	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
Remoteness of residence	•			·	·	•
Major cities	np	np	np	np	np	np
Inner regional	np	np	np	np	np	np
Outer regional	np	np	np	np	np	np
Remote	np	np	np	np	np	np
Very remote	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
SEIFA of residence						
Quintile 1	np	np	np	np	np	np
Quintile 2	np	np	np	np	np	np
Quintile 3	np	np	np	np	np	np
Quintile 4	np	np	np	np	np	np
Quintile 5	np	np	np	np	np	np
Not stated	np	np	np	np	np	np
	пр	пр	пр	пр	пр	пр
2015-16						
General dental care						
Jurisdiction total	na	na	na	na	na	na
Indigenous status						
Indigenous	na	na	na	na	na	na
Non-indigenous	na	na	na	na	na	na
Not stated	na	na	na	na	na	na

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	Waiting t	ime for offer	of public	147 77	Waiting time for first visit			
	Davis	dental care				t visit		
	Days	Days waited at		Days waited at	Days waited at	Number		
	waited at the 50th	the 90th	Number of	the 50th	the 90th	Number of		
	percentile	percentile	records	percentile	percentile	records		
Remoteness of residence	<i>p</i> = = = = = = = = = = = = = = = = = = =	<i>p</i>		μ στο	μουσου			
Major cities	na	na	na	na	na	na		
Inner regional	na	na	na	na	na	na		
Outer regional	na	na	na	na	na	na		
Remote	na	na	na	na	na	na		
Very remote	na	na	na	na	na	na		
Not stated	na	na	na	na	na	na		
SEIFA of residence								
Quintile 1	na	na	na	na	na	na		
Quintile 2	na	na	na	na	na	na		
Quintile 3	na	na	na	na	na	na		
Quintile 4	na	na	na	na	na	na		
Quintile 5	na	na	na	na	na	na		
Not stated	na	na	na	na	na	na		
Denture care								
Jurisdiction total	na	na	na	na	na	na		
Indigenous status								
Indigenous	na	na	na	na	na	na		
Non-indigenous	na	na	na	na	na	na		
Not stated	na	na	na	na	na	na		
Remoteness of residence								
Major cities	na	na	na	na	na	na		
Inner regional	na	na	na	na	na	na		
Outer regional	na	na	na	na	na	na		
Remote	na	na	na	na	na	na		
Very remote	na	na	na	na	na	na		
Not stated	na	na	na	na	na	na		
SEIFA of residence		114	114		114	114		
Quintile 1	na	na	na	na	na	na		
Quintile 2	na	na	na	na	na	na		
Quintile 3	na	na	na	na	na	na		
Quintile 4	na	na	na	na	na	na		
Quintile 5	na	na	na	na	na	na		
Not stated	na	na	na	na	na	na		
Assessment	TIG.	TIG.	TIG.	na	na	IIG		
Jurisdiction total	na	na	na	na	na	na		
Indigenous status	TIG.	Πα	na	na	na	Πü		
Indigenous	na	na	na	na	na	na		
Non-indigenous	na	na	na	na	na	na		
Not stated	na	na	na	na	na	na		
Remoteness of residence	ila	iia	IIa	iia	IId	IId		
Major cities	na	na	na	na	na	na		
Inner regional	na	na	na	na	na	na		
Title Teglorial	ila	IId	IIa	i i a	IId	ııa		

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	Waiting ti	me for offer	of public				
		dental care		Waiting	time for firs	t visit	
	Days	Days		Days	Days		
	waited at	waited at		waited at	waited at	Number	
	the 50th	the 90th	Number of	the 50th	the 90th	of	
	percentile	percentile	records	percentile	percentile	records	
Outer regional	na	na	na	na	na	na	
Remote	na	na	na	na	na	na	
Very remote	na	na	na	na	na	na	
Not stated	na	na	na	na	na	na	
SEIFA of residence							
Quintile 1	na	na	na	na	na	na	
Quintile 2	na	na	na	na	na	na	
Quintile 3	na	na	na	na	na	na	
Quintile 4	na	na	na	na	na	na	
Quintile 5	na	na	na	na	na	na	
Not stated	na	na	na	na	na	na	

<sup>(</sup>a) Data for NT were not available.

Source: AIHW (unpublished) Public dental waiting times data collection.

na Not available. np Not published

Table 10A.49 Proportion of FSE GPs with vocational registration by region (per cent) (a), (b), (c), (d)

	Major cities	Inner regional	Outer regional	Remote	Very remote	Aust
2013-14	87.5	70.2	68.3	66.1	75.8	82.5
2014-15	86.3	69.0	66.2	66.3	74.6	81.2
2015-16	84.9	68.1	66.1	66.4	76.6	80.1

FSE = Full Service Equivalent. 1 FSE is approximately equivalent to a 37.5 hour working week.

- (a) Remoteness areas are based on the Australian Statistical Geography Standard 2011 (ASGS) classification.
- (b) GP numbers are based on doctors' major practice postcodes as at the last quarter of the reference period. The major practice postcode is the location at which a doctor rendered the most services. FSE numbers are based on doctors' practice location postcodes at which services were rendered within the reference period.
- (c) Historical data have been revised and may differ from previous reports. This is due to a change in methodology used to compute the number of GPs (associated with a small reduction in historical data for the number of GPs) and use of a new proxy measure for hours worked (FSE) in place of the previously used 'Full time Workload Equivalents' (FWE).
- (d) Full Service Equivalent (FSE) is an estimated measure of medical workforce based on Medicare claims information. FSE models total hours worked for each practitioner based on the number of days worked, volume of services, and schedule fees. One FSE is approximately equivalent to a workload of 7.5 hours per day, five days per week. The FSE for each practitioner is capped at 2.5.

Source: Department of Health unpublished, MBS Statistics.

Table 10A.50 Number and proportion of full time service equivalent (FSE) GPs with vocational registration (a), (b), (c)

					(-)) (-)	/ · · · /				
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
FSE GPs with voc	cational re	gistration								
2006-07	no.	4 815	3 251	2 707	1 173	1 084	289	177	59	13 554
2007-08	no.	5 041	3 461	2 878	1 246	1 137	309	189	60	14 322
2008-09	no.	5 149	3 548	2 985	1 269	1 166	319	191	66	14 691
2009-10	no.	5 271	3 665	3 085	1 315	1 207	328	195	73	15 139
2010-11	no.	5 376	3 812	3 188	1 343	1 233	330	203	77	15 561
2011-12	no.	5 486	3 839	3 290	1 348	1 235	331	201	80	15 810
2012-13	no.	5 579	3 956	3 430	1 402	1 247	347	221	84	16 266
2013-14	no.	5 825	4 140	3 573	1 517	1 277	346	231	91	17 000
2014-15	no.	6 122	4 333	3 763	1 629	1 330	357	235	101	17 871
2015-16	no.	6 304	4 512	3 915	1 716	1 379	368	247	113	18 554
Proportion of FSE	GPs with	vocation	al registra	tion						
2006-07	%	88.0	85.8	84.1	87.8	88.1	85.7	93.7	68.1	86.5
2007-08	%	88.0	85.7	83.3	88.0	87.0	86.4	94.4	62.4	86.3
2008-09	%	88.1	85.7	83.3	88.1	87.0	88.0	94.4	66.3	86.4
2009-10	%	87.7	84.8	82.4	88.0	86.6	86.6	94.4	66.1	85.7
2010-11	%	87.2	84.5	83.3	88.7	86.7	85.2	95.0	66.7	85.7
2011-12	%	86.6	82.4	83.8	87.9	85.7	84.0	90.1	68.4	84.9
2012-13	%	85.6	81.0	83.8	86.4	84.6	85.7	91.3	64.6	84.0
2013-14	%	84.4	79.4	82.4	84.7	83.2	82.7	90.4	61.3	82.5
2014-15	%	83.8	77.9	80.9	82.6	81.7	80.7	87.9	58.9	81.2
2015-16	%	82.7	77.1	79.2	80.8	81.0	80.0	86.5	61.2	80.1

**FSE** = Full Service Equivalent. 1 FSE is approximately equivalent to a 37.5 hour working week.

- (a) GP numbers are based on doctors' major practice postcodes as at the last quarter of the reference period. The major practice postcode is the location at which a doctor rendered the most services. FSE numbers are based on doctors' practice location postcodes at which services were rendered within the reference period.
- (b) Historical data have been revised and may differ from previous reports. This is due to a change in methodology used to compute the number of GPs (associated with a small reduction in historical data for the number of GPs) and use of a new proxy measure for hours worked (FSE) in place of the previously used 'Full time Workload Equivalents' (FWE).
- (c) Full Service Equivalent (FSE) is an estimated measure of medical workforce based on Medicare claims information. FSE models total hours worked for each practitioner based on the number of days worked, volume of services, and schedule fees. One FSE is approximately equivalent to a workload of 7.5 hours per day, five days per week. The FSE for each practitioner is capped at 2.5.

Source: Department of Health unpublished, MBS Statistics.

Table 10A.51 General practices that are accredited at 30 June (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2010										
Accredited										
AGPAL	no.	1 346	883	753	330	330	98	40	38	3 818
GPA Accreditation plus	no.	329	284	197	86	44	32	19	3	994
Total	no.	1 675	1 167	950	416	374	130	59	41	4 812
General practices	no.	2 731	1 691	1 266	569	525	158	91	120	7 151
Proportion accredited	%	61.3	69.0	75.0	73.1	71.2	82.3	64.8	34.2	67.3
Registered for accreditation (b)										
AGPAL	no.	1 431	942	818	358	346	103	44	58	4 100
GPA Accreditation plus	no.	343	291	214	89	44	32	19	4	1 036
2011										
Accredited										
AGPAL	no.	1 318	871	735	327	323	86	38	41	3 739
Quality Practice Accreditation	no.	340	296	206	93	48	33	21	7	1 044
Total	no.	1 658	1 167	941	420	371	119	59	48	4 783
General practices	no.	2 712	1 687	1 241	573	537	158	84	105	7 097
Proportion accredited	%	61.1	69.2	75.8	73.3	69.1	75.3	70.2	45.7	67.4
Registered for accreditation (b)										
AGPAL	no.	1 399	926	784	350	339	92	40	57	3 987
Quality Practice Accreditation	no.	373	334	241	102	49	38	23	9	1 169
2012										
Accredited										
AGPAL	no.	1 308	865	719	323	323	85	39	52	3 714
Quality Practice Accreditation	no.	439	344	280	109	65	42	23	10	1 312
Total	no.	1 747	1 209	999	432	388	127	62	62	5 026

Table 10A.51 General practices that are accredited at 30 June (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
General practices	no.	na	na	na	na	na	na	na	na	na
Proportion accredited	%	na	na	na	na	na	na	na	na	na
Registered for accreditation (b)										
AGPAL	no.	1 403	932	781	345	337	87	41	58	3 984
Quality Practice Accreditation	no.	476	362	311	120	71	46	25	11	1 422
2013										
Accredited										
AGPAL	no.	1 284	892	742	333	331	85	38	52	3 757
Quality Practice Accreditation	no.	625	462	382	160	91	59	34	15	1 828
Total	no.	1 909	1 354	1 124	493	422	144	72	67	5 585
General practices (c)	no.	na	na	na	na	na	na	na	na	na
Proportion accredited	%	na	na	na	na	na	na	na	na	na
Registered for accreditation (b)										
AGPAL	no.	1 352	941	784	347	332	86	46	55	3 943
Quality Practice Accreditation	no.	659	485	407	168	98	62	36	19	1 934
2014										
Accredited										
AGPAL	no.	1 271	908	748	349	321	84	41	54	3 776
Quality Practice Accreditation	no.	622	460	415	154	107	55	30	26	1 869
Total	no.	1 893	1 368	1 163	503	428	139	71	80	5 645
General practices (c)	no.	na	na	na	na	na	na	na	na	na
Proportion accredited	%	na	na	na	na	na	na	na	na	na
Registered for accreditation (b)										
AGPAL	no.	1 321	946	786	370	337	87	42	57	3 946
Quality Practice Accreditation	no.	663	490	449	167	109	59	30	27	1 994

Table 10A.51 General practices that are accredited at 30 June (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2015 (c)										
Accredited										
AGPAL	no.	1 307	939	784	381	321	85	43	58	3 918
Quality Practice Accreditation	no.	684	517	468	158	94	56	40	18	2 035
Total	no.	1 991	1 456	1 252	539	415	141	83	76	5 953
General practices (c)	no.	na	na	na	na	na	na	na	na	na
Proportion accredited	%	na	na	na	na	na	na	na	na	na
Registered for accreditation (b)										
AGPAL	no.	1 368	982	815	403	337	87	44	58	4 094
Quality Practice Accreditation	no.	736	551	505	170	99	58	42	20	2 181
2016 (c)										
Accredited										
AGPAL	no.	1 325	979	788	400	323	87	46	60	4 008
Quality Practice Accreditation	no.	809	569	514	175	119	67	42	21	2 316
Total	no.	2 134	1 548	1 302	575	442	154	88	81	6 324
General practices (c)	no.	na	na	na	na	na	na	na	na	na
Proportion accredited	%	na	na	na	na	na	na	na	na	na
Registered for accreditation (b)										
AGPAL	no.	1 420	1 055	842	424	340	90	53	66	4 290
Quality Practice Accreditation	no.	841	602	531	183	121	67	42	23	2 410

<sup>(</sup>a) Includes practices accredited by either of Australia's two accrediting bodies. Quality Practice Accreditation manages the General Practice Australia ACCREDITATION plus accreditation program.

Source: AGPAL (Australian General Practice Accreditation Limited) unpublished; Quality Practice Accreditation Pty Ltd unpublished; PHCRIS, Department of Health unpublished, ASD (various years).

<sup>(</sup>b) Includes practices registered for accreditation but not yet accredited, in addition to accredited practices.

<sup>(</sup>c) Data (prior to 2012) was drawn from Annual Survey of Divisions which ceased with the transition of Divisions to Medicare Locals **na** Not available.

Table 10A.52 General practice activity in PIP practices (per cent)

	•				р. с		(100.00	,,,		
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Proportion of SWF	Es that a	re in PIP p	oractices (	(a)						
2005-06	%	77.2	84.3	80.1	82.2	85.2	88.5	83.4	55.1	80.9
2006-07	%	77.4	84.4	81.3	82.2	85.4	86.0	84.6	53.6	81.2
2007-08	%	77.9	85.0	81.4	82.6	85.1	88.7	86.1	54.9	81.6
2008-09	%	78.5	85.3	82.6	83.7	84.4	88.7	83.4	56.9	82.1
2009-10	%	79.1	85.9	84.0	83.6	84.8	88.4	88.1	59.8	82.9
2010-11	%	79.1	85.8	84.3	83.6	86.0	88.1	88.2	60.5	83.0
2011-12	%	80.6	86.4	85.8	84.8	87.3	89.3	88.3	64.1	84.2
2012-13	%	81.2	86.6	85.7	85.7	87.6	89.2	89.4	66.2	84.6
2013-14	%	81.5	86.9	86.0	86.1	87.3	89.4	89.8	68.8	84.9
2014-15	%	82.1	86.8	87.0	85.4	87.7	90.3	89.5	68.2	85.2
Proportion of servi	ces provi	ded by PIF	practice:	s (b)						
2005-06	%	75.2	82.7	80.2	81.7	84.8	88.4	82.7	56.6	79.6
2006-07	%	75.6	83.0	81.6	82.0	85.2	86.0	84.4	55.0	80.1
2007-08	%	76.3	83.9	81.8	82.9	85.3	88.8	85.4	56.2	80.8
2008-09	%	76.9	84.3	83.0	84.0	84.6	88.4	83.5	59.5	81.4
2009-10	%	77.9	85.0	84.7	84.0	85.3	88.5	88.1	61.7	82.4
2010-11	%	77.8	84.8	84.6	84.0	86.1	88.2	88.2	61.7	82.4
2011-12	%	79.1	85.4	86.0	84.5	87.3	89.3	88.3	65.6	83.4
2012-13	%	79.7	85.6	85.7	85.5	87.7	89.1	89.7	69.9	83.8
2013-14	%	80.1	86.2	86.0	86.1	87.4	89.1	90.0	73.2	84.2
2014-15	%	8.08	86.1	87.0	85.3	87.6	89.8	90.1	73.4	84.6

<sup>(</sup>a) A SWPE is an indicator of practice workload based on the number of patients seen. The SWPE value for a jurisdiction is the sum of the fractions of care provided by doctors in that jurisdiction to their patients, weighted for the age and sex of each patient in accordance with national ratios.

Source: Department of Health unpublished, MBS and PIP data collections.

<sup>(</sup>b) Services may vary in type and quality.

Table 10A.53 Uptake by Practices in the Practice Incentives Program (PIP) of the PIP Diabetes Incentive (a), (b)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
PIP practices (May 2014)	no.	1 812	1 255	1 077	452	367	121	71	55	5 210
SWPE (c)	no.	5 259	4 346	3 383	1 701	1 301	401	284	101	16 774
PIP Diabetes Incentive — uptake	no.	880	528	585	216	130	44	41	40	2 464
Share of PIP practices	%	48.6	42.1	54.3	47.8	35.4	36.4	57.7	72.7	47.3
PIP practices (May 2015)	no.	1 824	1 282	1 118	482	368	127	71	58	5 330
SWPE (c)	('000')	5 371	4 427	3 481	1 742	1 323	407	288	108	17 146
PIP Diabetes Incentive — uptake	no.	971	586	651	251	143	53	43	46	2 744
Share of PIP practices	%	53.2	45.7	58.2	52.1	38.9	41.7	60.6	79.3	51.5
PIP practices (May 2016)	no.	1 873	1 342	1 154	503	381	128	58	70	5 509
SWPE (c)	('000')	5 541	4 536	3 586	1 785	1 347	418	286	113	17 612
PIP Diabetes Incentive — uptake	no.	1 076	673	724	288	163	57	43	49	3 073
Share of PIP practices	%	57.4	50.1	62.7	57.3	42.8	44.5	61.4	84.5	55.8

<sup>(</sup>a) Not all practices are involved in PIP, and the proportion may vary across jurisdictions. Around 85 per cent of patient care is provided by practices enrolled in the PIP (table 10A.52).

Source: Department of Health unpublished, MBS and PIP data collections.

<sup>(</sup>b) In accordance with the purpose of the PIP Diabetes incentive to encourage general practices to provide earlier diagnosis and effective management of people with established diabetes mellitus, practices are required to maintain an active patient register and recall and reminder system for all known patients with diabetes mellitus, and to agree to implement a cycle of care for patients with diabetes mellitus.

<sup>(</sup>c) A SWPE is an indicator of practice workload based on the number of patients seen. The SWPE value for a jurisdiction is the sum of the fractions of care provided by doctors in that jurisdiction to their patients, weighted for the age and sex of each patient in accordance with national ratios.

Table 10A.54 Proportion of people with known diabetes who had a HbA1c test in the last 12 months, 2011-12 (per cent) (a), (b), (c), (d)

						, , , ,				
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (e)	Aust
Proportion of peop	le with kr	own diabe	etes who	had a Hb	A1c test	in last 12	months			
Males	%	86.4	72.1	74.7	81.6	84.8	88.2	73.3	84.7	80.4
Females	%	66.9	91.1	58.9	82.6	100.0	85.0	83.2	94.8	73.0
Persons	%	78.4	79.9	69.2	82.1	88.2	86.8	79.1	91.1	77.5
Relative Standard	Error (RS	SE)								
Males	%	12.1	31.7	11.6	15.9	13.2	15.1	42.5	26.7	5.9
Females	%	39.2	13.6	26.0	22.5	0.0	19.5	22.5	7.8	13.4
Persons	%	15.1	14.0	12.5	12.4	9.9	11.1	18.9	8.8	6.3
95% confidence in	terval									
Males	± %	20.6	44.8	17.0	25.4	22.0	26.1	61.1	44.2	9.2
Females	± %	51.4	24.2	30.0	36.3	_	32.6	36.7	14.5	19.1
Persons	± %	23.2	21.9	16.9	19.9	17.1	19.0	29.2	15.7	9.5

Estimates with RSEs between 25 percent and 50 percent should be used with caution.

- (a) Persons aged 18 years to 69 years. Includes pregnant women.
- (b) Known diabetes is derived using a combination of fasting plasma glucose test results and self-reported information on diabetes diagnosis and medication use. See data quality information for further detail.
- (c) Excludes people who did not fast for 8 hours or more prior to the blood test. For Australia in 2011-12, approximately 79% of people aged 18 years and over who participated in the National Health Measures Survey (NHMS) had fasted.
- (d) Rates are not age standardised.
- (e) Data for the NT should be interpreted with caution as the Australian Health Survey excluded discrete Aboriginal and Torres Strait Islander communities and very remote areas, which comprise around 30 per cent of the estimated resident population of the NT living in private dwellings.
  - Nil or rounded to zero.

Source: ABS unpublished, Australian Health Survey 2011 - 13 (2011-12 NHMS component).

Table 10A.55 Proportion of people aged 18 to 69 years with known diabetes who have a HbA1c (glycated haemoglobin) level less than or equal to 7.0 per cent, by sex, 2011-12 (per cent) (a), (b), (c), (d), (e), (f)

		•		•	<b>\1</b>	, , , , , , , ,	, , ,, , ,, ,,			
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (g)	Aust
					Pr	oportion				
Males	%	66.2	41.2	48.5	65.3	41.6	67.4	73.9	23.2	53.8
Females	%	44.9	19.1	43.0	55.6	84.6	72.2	26.5	71.9	45.0
Total	%	56.7	35.5	46.4	61.3	52.1	69.9	44.3	47.7	50.5
					Relative	standard error				
Males	%	14.1	51.5	22.1	19.5	39.5	19.3	27.9	61.8	11.1
Females	%	31.6	88.0	18.5	30.8	13.9	15.6	63.2	27.6	15.8
Total	%	13.4	46.5	15.3	16.7	28.5	11.4	31.0	31.4	8.8
					95 per cent d	confidence inte	erval			
Males	±	18.3	41.7	21.0	24.9	32.2	25.5	40.3	28.1	11.8
Females	±	27.8	32.9	15.6	33.6	23.1	22.1	32.8	38.8	13.9
Total	±	14.9	32.4	13.9	20.1	29.1	15.7	26.9	29.3	8.7

- (a) Estimates with a relative standard error (RSE) between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.
- (b) People aged 18 years to 69 years. Includes pregnant women.
- (c) Known diabetes is derived using a combination of fasting plasma glucose test results and self-reported information on diabetes diagnosis and medication use.
- (d) Excludes people who did not fast for 8 hours or more prior to the blood test. For Australia in 2011-12, approximately 79 per cent of people aged 18 years or over who participated in the National Health Measures Survey (NHMS) had fasted.
- (e) Rates are not age standardised (they are crude rates).
- (f) Denominator includes a small number of persons for whom test results were not reported.
- (g) Data for the NT should be interpreted with caution as the Australian Health Survey excluded discrete Aboriginal and Torres Strait Islander communities and very remote areas, which comprise around 30 per cent of the estimated resident population of the NT living in private dwellings.

Source: ABS (unpublished) Australian Health Survey 2011-13, (2011-12 NHMS component).

Table 10A.56 Proportion of people with asthma with a written asthma action plan, by age (per cent) (a)

		- "-		•						
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	<i>NT</i> (b), (c)	Aust (b)
2001									` ' ` '	
0–14 years										
Proportion	%	24.2	31.8	16.2	20.0	30.5	19.5	44.4	np	24.7
RSE	%	14.6	12.6	22.5	28.1	18.8	29.0	20.1	np	7.7
95 per cent confidence interval	±	± 6.9	± 7.9	± 7.1	± 11.0	± 11.2	± 11.1	± 17.5	np	± 3.7
15–64 years										
Value	%	19.6	12.7	13.2	np	16.1	np	19.1	np	15.0
RSE	%	12.6	13.7	14.9	np	18.0	np	15.8	np	6.5
95 per cent									- 1	
confidence interval	±	± 4.8	± 3.4	± 3.9	np	± 5.7	np	± 5.9	np	± 1.9
65 years or o	ver									
Proportion	%	14.6	7.7	11.8	np	19.0	np	23.8	np	12.1
RSE	%	32.3	44.6	48.9	np	49.7	np	46.3	np	22.1
95 per cent confidence interval	±	± 9.2	± 6.7	± 11.3	np	± 18.5	np	± 21.6	np	± 5.2
All ages (crud	le rate	s)								
Proportion	%	20.3	16.4	13.8	11.4	19.7	11.1	25.4	np	17.0
RSE	%	10.5	10.9	11.3	18.1	12.3	27.0	12.3	np	5.3
95 per cent confidence	±	± 4.2	± 3.5	± 3.1	± 4.0	± 4.7	± 5.9	± 6.1	np	± 1.8
interval	<u> </u>	± 4.2	1 0.0	± 0.1	± 4.0	± 4.7	1 0.9	± 0.1	пр	1.0
2004-05										
0–14 years										
Proportion	%	33.6	52.5	29.9	np	39.2	21.9	np	np	36.7
RSE	%	20.7	16.7	17.3	np	19.8	24.9	np	np	9.6
95 per cent confidence interval	±	± 13.6	± 17.2	± 10.1	np	± 15.2	± 10.7	np	np	± 6.9
15–64 years										
Proportion	%	22.6	21.6	18.2	14.5	17.1	15.6	24.6	np	19.7
RSE	%	14.2	16.0	15.8	19.8	14.3	16.6	18.7	np	6.9
95 per cent									·	
confidence interval	±	± 6.3	± 6.8	± 5.6	± 5.6	± 4.8	± 5.1	± 9.0	np	± 2.7
65 years or o	ver									
Proportion	%	17.1	7.6	18.5	np	20.6	19.7	np	np	14.2
RSE	%	29.1	54.1	39.0	np	22.3	32.1	np	np	17.5

Table 10A.56 Proportion of people with asthma with a written asthma action plan, by age (per cent) (a)

			-							
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (b), (c)	Aust (b)
95 per cent confidence interval	±	± 9.8	± 8.1	± 14.1	np	± 9.0	± 12.4	np	np	± 4.9
All ages (crud	e rate	s)								
Proportion	%	24.3	27.0	21.0	15.0	22.6	17.3	27.0	np	22.9
RSE	%	12.8	11.2	10.8	18.4	9.6	12.5	17.9	np	6.0
95 per cent confidence interval	±	± 6.1	± 5.9	± 4.4	± 5.4	± 4.3	± 4.2	± 9.5	np	± 2.7
2007-08										
0–14 years										
Proportion	%	46.5	61.6	41.4	29.0	56.1	41.6	47.3	np	47.8
RSE	%	16.3	9.8	17.1	28.1	17.1	20.6	17.1	np	7.6
95 per cent confidence interval	±	± 14.9	± 11.8	± 13.9	± 16.0	± 18.8	± 16.8	± 15.9	np	± 7.1
15–24 years										
Proportion	%	11.9	9.3	14.7	np	7.4	9.6	35.0	np	12.6
RSE	%	47.1	47.0	37.8	np	53.2	69.2	29.0	np	19.5
95 per cent confidence interval	±	± 11.0	± 8.6	± 10.9	np	± 7.7	13.0	± 19.9	np	± 4.8
25–44 years										
Proportion	%	13.8	6.1	14.1	17.0	8.1	11.8	11.3	np	11.5
RSE	%	27.3	35.6	32.6	36.7	35.9	36.8	26.4	np	15.7
95 per cent confidence interval	±	± 7.4	± 4.3	± 9.0	± 12.2	± 5.7	± 8.5	± 5.8	np	± 3.5
45–64 years										
Proportion	%	14.1	21.9	16.2	11.3	np	9.3	12.5	np	16.5
RSE	%	27.7	26.7	28.4	42.3	np	49.7	43.1	np	14.2
95 per cent confidence interval	±	± 7.7	± 11.5	± 9.0	± 9.4	np	± 9.1	± 10.6	np	± 4.6
65 years or ov	/er									
Proportion	%	20.0	18.8	13.9	np	np	12.1	15.1	np	17.9
RSE	%	26.0	33.9	35.3	np	np	47.9	53.2	np	15.9
95 per cent confidence interval	±	± 10.2	± 12.5	± 9.6	np	np	± 11.4	± 15.7	np	± 5.6
All ages (ASR	(d)									
Proportion	%	20.4	22.9	19.7	17.4	21.9	17.1	21.8	40.9	20.8

Table 10A.56 Proportion of people with asthma with a written asthma action plan, by age (per cent) (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	<i>NT</i> (b), (c)	Aust (b)
RSE	%	11.2	10.9	11.4	17.6	13.4	18.8	12.1	47.0	5.6
95 per cent confidence interval	±	± 4.5	± 4.9	± 4.4	± 6.0	± 5.7	± 6.3	± 5.2	± 37.7	± 2.3
2011-12										
0–14 years										
Proportion	%	35.1	46.9	32.6	48.4	58.3	36.6	37.4	65.5	40.9
RSE 95 per cent	%	20.0	14.0	20.8	21.6	13.2	26.1	18.9	18.9	7.8
confidence interval	±	± 13.7	± 12.9	± 13.3	± 20.5	± 15.1	± 18.7	± 13.9	± 24.2	± 6.2
15–24 years										
Proportion	%	15.5	20.4	np	31.0	27.2	np	np	np	18.6
RSE	%	47.3	35.9	np	32.4	38.7	np	np	np	18.8
95 per cent confidence interval	±	± 14.3	± 14.3	np	± 19.7	± 20.6	np	np	np	± 6.9
25–44 years										
Proportion	%	24.4	11.8	11.8	15.7	19.0	23.1	17.5	26.1	16.8
RSE	%	22.7	25.6	30.9	34.4	29.0	25.2	31.9	29.9	12.6
95 per cent confidence interval	±	± 10.8	± 5.9	± 7.2	± 10.6	± 10.8	± 11.4	± 10.9	± 15.3	± 4.1
45–64 years										
Proportion	%	22.6	27.9	21.9	15.7	20.5	15.7	19.0	16.5	22.6
RSE	%	23.9	20.8	23.1	33.4	26.7	32.9	30.9	40.6	10.8
95 per cent confidence interval	±	± 10.6	± 11.4	± 9.9	± 10.3	± 10.7	± 10.1	± 11.5	± 13.1	± 4.8
65 years or ov	/er									
Proportion	%	37.0	23.2	16.0	16.7	21.9	20.1	33.1	42.2	26.4
RSE	%	20.3	22.5	30.3	38.3	32.9	34.9	39.6	43.0	12.5
95 per cent confidence	±	± 14.7	± 10.2	± 9.5	± 12.6	± 14.1	± 13.7	± 25.6	± 35.6	± 6.5
interval					-					
All ages (ASR	(d)									
Proportion	%	26.6	25.3	18.4	24.5	29.3	22.6	24.3	33.7	24.6
RSE	%	9.7	9.9	13.8	15.2	9.5	14.2	14.6	17.0	4.5
95 per cent confidence interval	±	± 5.1	± 4.9	± 5.0	± 7.3	± 5.5	± 6.3	± 7.0	± 11.3	± 2.2

2014-15

Table 10A.56 Proportion of people with asthma with a written asthma action plan, by age (per cent) (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	<i>NT</i> (b), (c)	Aust (b)
0–14 years		-	-						· // /	
Proportion	%	62.8	57.9	48.0	45.2	68.0	47.7	73.3	84.4	57.3
RSE	%	12.6	12.2	14.0	26.9	16.6	19.7	11.2	20.9	6.5
95 per cent										
confidence interval	±	± 15.5	± 13.9	± 13.2	± 23.9	± 22.1	± 18.4	± 16.0	± 34.5	± 7.3
15–24 years										
Proportion	%	np	30.1	14.1	10.8	32.2	0.0	np	0.0	17.8
RSE	%	np	22.2	np	np	31.9	0.0	np	0.0	16.9
95 per cent										
confidence interval	±	np	± 13.1	np	np	± 20.1	0.0	np	0.0	± 5.9
25–44 years										
Proportion	%	17.1	12.1	17.9	19.0	17.8	18.0	34.3	np	16.5
RSE	%	34.2	31.2	26.2	28.2	36.2	25.2	19.8	np	13.4
95 per cent		34.2	31.2	20.2	20.2	30.2	25.2	19.0	пр	13.4
confidence interval	±	± 11.4	± 7.4	± 9.2	± 10.5	± 12.7	± 8.9	± 13.3	np	± 4.3
45–64 years										
Proportion	%	27.8	20.1	23.0	20.2	24.9	23.6	34.1	55.3	24.8
RSE	%	24.1	21.8	23.7	44.6	30.3	23.3	19.7	22.3	11.6
95 per cent										
confidence interval	±	± 13.1	± 8.6	± 10.7	± 17.7	± 14.8	± 10.8	± 13.2	± 24.2	± 5.6
65 years or o	ver									
Proportion	%	26.0	30.3	22.1	26.7	23.0	np	np	np	26.1
RSE	%	26.1	24.3	35.7	26.6	44.3	np	np	np	13.1
95 per cent										
confidence interval	±	± 13.3	± 14.5	± 15.5	± 13.9	± 20.0	np	np	np	± 6.7
All ages (ASF	R) (d)									
Proportion	%	32.8	26.9	26.0	23.2	35.8	22.4	32.8	34.0	28.4
RSE	%	7.9	8.9	10.8	15.5	10.2	12.3	10.8	20.7	4.1
95 per cent confidence	±	± 5.1	± 4.7	± 5.5	± 7.0	± 7.1	± 5.4	± 7.0	± 13.8	± 2.3
interval										

**ASR** = age standardised rate. **RSE** = relative standard error.

- (a) Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use and are not published. However, these data contribute to national estimates.
- (b) Data for the NT for 2011-12 are not comparable to data for previous years due to an increased sample size. Data for the NT are included in Australian totals but not published for 2001 or 2004-05 and published only for all ages for 2007-08, as sample sizes were insufficient to provide reliable estimates.

## Table 10A.56 Proportion of people with asthma with a written asthma action plan, by age (per cent) (a)

Unit NSW Vic Qld WA SA Tas ACT NT (b), (c) Aust (b)

- (c) Data for the NT should be interpreted with caution as the Australian Health Survey and National Health Survey excluded discrete Aboriginal and Torres Strait Islander communities and very remote areas, which comprise around 29 per cent of the estimated resident population of the NT living in private dwellings.
- (d) For 'all ages', 2007-08, 2011-12 and 2014-15 data are age standardised to the 2001 Australian standard population.

np Not published.

Source: ABS 2009, National Health Survey: Summary of Results, 2007-2008, Cat. no. 4364.0; ABS 2009, National Health Survey: Summary of Results; State Tables, 2007-08, Cat. no. 4362.0; ABS unpublished, National Health Survey 2001, 2004-05, 2007-08, 2014-15, Cat. no. 4364.0; ABS unpublished, Australian Health Survey 2011–13 (2011-12 NHS component), Cat. no. 4364.0.

Table 10A.57 Proportion of people with asthma with a written asthma plan, by Indigenous status, by age, 2011–13 (a), (b), (c), (d), (e)

Unit         NSW         Vic           Aboriginal and Torres Strait Islander people           0-14 years         \$6.5         58.0           Proportion         \$56.5         58.0           RSE         \$14.0         13.7           95 per cent confidence interval         \$15.5         15.6           15-34 years         \$11.2         28.2           RSE         \$31.0         26.3           95 per cent cent confidence interval         \$4.6         4.6	42.6 15.1 12.6 12.4 42.6 10.3	37.1 27.5 20.0 23.6 30.5 14.1	42.4 23.5 19.5 27.8 34.2 18.7	7as 43.5 19.0 16.2 19.3 31.2 11.8	51.7 27.0 27.4 22.2 42.4 18.5	NT (f) 55.7 32.3 35.2 26.4 69.7 36.1	50.9 8.7 8.7 16.3 14.1 4.5
0–14 years  Proportion	15.1 12.6 12.4 42.6 10.3	27.5 20.0 23.6 30.5 14.1	23.5 19.5 27.8 34.2	19.0 16.2 19.3 31.2	27.0 27.4 22.2 42.4	32.3 35.2 26.4 69.7	8.7 8.7 16.3 14.1
Proportion       %       56.5       58.0         RSE       %       14.0       13.7         95 per cent confidence interval       ±       15.5       15.6         15–34 years       Froportion       %       11.2       28.2         RSE       %       31.0       26.3         95 per cent       +       6.8       14.6	15.1 12.6 12.4 42.6 10.3	27.5 20.0 23.6 30.5 14.1	23.5 19.5 27.8 34.2	19.0 16.2 19.3 31.2	27.0 27.4 22.2 42.4	32.3 35.2 26.4 69.7	8.7 8.7 16.3 14.1
RSE	15.1 12.6 12.4 42.6 10.3	27.5 20.0 23.6 30.5 14.1	23.5 19.5 27.8 34.2	19.0 16.2 19.3 31.2	27.0 27.4 22.2 42.4	32.3 35.2 26.4 69.7	8.7 8.7 16.3 14.1
95 per cent ± 15.5 15.6  15–34 years  Proportion % 11.2 28.2  RSE % 31.0 26.3  95 per cent + 6.8 14.6	12.6 12.4 42.6 10.3	20.0 23.6 30.5 14.1	19.5 27.8 34.2	16.2 19.3 31.2	27.4 22.2 42.4	35.2 26.4 69.7	8.7 16.3 14.1
confidence interval ± 15.5 15.6  15–34 years  Proportion	12.4 42.6 10.3	23.6 30.5 14.1	27.8 34.2	19.3 31.2	22.2 42.4	26.4 69.7	16.3 14.1
Proportion % 11.2 28.2  RSE % 31.0 26.3  95 per cent + 6.8 14.6	42.6 10.3 19.0	30.5 14.1	34.2	31.2	42.4	69.7	14.1
RSE % 31.0 26.3 95 per cent + 6.8 14.6	42.6 10.3 19.0	30.5 14.1	34.2	31.2	42.4	69.7	14.1
95 per cent + 6.8 14.6	10.3	14.1					
. + 68 1/6	19.0		18.7	11.8	18.5	36.1	45
confidence interval							4.0
35–54 years							
Proportion % 21.9 26.3	20.7	11.4	39.2	np	np	29.5	21.1
RSE % 31.3 29.6	30.7	45.5	22.4	np	np	50.3	15.2
95 per cent confidence interval ± 13.4 15.2	11.4	10.2	17.2	np	np	29.1	6.3
55 yrs or over							
Proportion % 28.1 32.8	24.6	24.5	28.4	np	np	51.4	28.6
RSE % 33.8 30.4	55.5	56.2	48.8	np	np	26.3	19.0
95 per cent confidence interval ± 18.6 19.6	26.7	27.0	27.1	np	np	26.5	10.6
All ages (Crude rates)							
Proportion % 30.5 37.2	24.3	24.2	34.9	25.1	27.5	40.5	29.4
RSE % 13.3 12.1	16.7	18.4	14.1	15.7	21.9	19.3	7.3
95 per cent confidence interval ± 7.9 8.8	7.9	8.7	9.7	7.7	11.8	15.3	4.2
All ages (ASR) (e)							
Proportion % 26.6 34.8	23.4	22.9	34.0	22.6	21.6	36.9	27.3
RSE % 14.1 13.0	19.4	19.0	16.1	16.9	24.1	22.7	7.9
95 per cent confidence interval ± 7.3 8.8	8.9	8.5	10.8	7.5	10.2	16.4	4.2
Non-Indigenous people 0–14 years							
Proportion % 34.7 46.9	32.5	48.2	55.3	35.4	32.9	47.0	40.3
RSE % 20.9 14.0	20.9	22.8	14.6	27.4	23.5	40.0	8.3
95 per cent ± 14.2 12.9 confidence interval	13.3	21.5	15.8	19.0	15.1	36.9	6.5
15–34 years							
Proportion % 18.8 15.5	12.3	25.9	18.5	17.7	20.8	24.6	17.3
RSE % 23.2 24.7	40.0	30.0	38.4	43.0	31.3	43.9	14.5

Table 10A.57 Proportion of people with asthma with a written asthma plan, by Indigenous status, by age, 2011–13 (a), (b), (c), (d), (e)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (f)	Aust
95 per cent confidence interval	±	8.6	7.5	9.7	15.2	13.9	14.9	12.8	21.2	4.9
35–54 years										
Proportion	%	25.1	19.6	15.6	12.1	27.0	26.1	np	np	20.1
RSE	%	20.3	25.2	29.1	30.4	19.5	21.3	np	np	9.9
95 per cent confidence interval	±	10.0	9.7	8.9	7.2	10.3	10.9	np	np	3.9
55 yrs or over										
Proportion	%	30.4	23.8	16.7	18.8	20.4	11.4	np	np	23.8
RSE	%	16.5	19.1	23.9	29.9	26.7	35.6	np	np	9.0
95 per cent confidence interval	±	9.9	8.9	7.8	11.0	10.7	7.9	np	np	4.2
All ages (Crude rates)										
Proportion	%	26.6	24.4	18.1	21.7	27.3	22.3	23.5	20.6	23.7
RSE	%	9.9	9.9	14.7	17.1	11.2	14.2	15.0	24.8	4.6
95 per cent confidence interval	±	5.2	4.8	5.2	7.3	6.0	6.2	6.9	10.0	2.1
All ages (ASR) (e)										
Proportion	%	26.5	25.1	18.4	24.6	29.0	22.4	23.5	23.2	24.2
RSE	%	10.4	10.0	14.1	16.3	10.0	14.9	16.0	24.3	4.7
95 per cent confidence interval	±	5.4	4.9	5.1	7.9	5.7	6.5	7.4	11.0	2.2

- (a) Persons who have been told by a doctor they have asthma, and the asthma is current and long-term.
- (b) Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.
- (c) Excludes remote and very remote areas. Data on whether the respondent has a written asthma action plan was collected for non-remote respondents only in the National Aboriginal and Torres Strait Islander Health Survey.
- (d) Data for Aboriginal and Torres Strait Islander people and for non-Indigenous people use different survey questions to define asthma as current. However, data are comparable.
- (e) Rates are age standardised to the 2001 Australian standard population.
- (f) Data for the NT should be interpreted with caution as the Australian Health Survey excluded discrete Aboriginal and Torres Strait Islander communities and very remote areas, which comprise around 25 per cent of the estimated resident population of the NT living in private dwellings.

## np Not published

Source: ABS unpublished, Australian Aboriginal and Torres Strait Islander Health Survey, 2012-13 (National Aboriginal and Torres Strait Islander Health Survey component), Cat. no. 4727.0; ABS unpublished, Australian Health Survey 2011-13 (2011-12 NHS component).

Table 10A.58 Proportion of people with asthma with a written asthma plan, by Indigenous status (a), (b), (c)

maigenous status (a), (b)											
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (d)	Aust	
2004-05											
Aboriginal and Torres Strait Islander people											
Proportion	%	30.2	22.5	17.2	11.9	20.4	29.8	20.5	7.9	20.4	
RSE	%	15.6	43.3	28.9	21.0	24.1	30.5	39.7	19.9	9.7	
95 per cent confidence interval	±	± 9.2	± 19.1	± 9.8	± 4.9	± 9.6	± 17.8	± 16.0	± 3.1	± 3.9	
Non-Indigenous people	е										
Proportion	%	23.6	26.3	20.5	15.8	21.9	17.5	28.3	np	22.5	
RSE	%	11.8	9.2	10.7	15.8	10.2	12.6	15.6	np	5.4	
95 per cent confidence interval	±	± 5.5	± 4.8	± 4.3	± 4.9	± 4.4	± 4.3	± 8.6	np	± 2.4	
2011–13											
Aboriginal and Torres Strait Islander people											
Proportion	%	26.6	34.8	23.4	22.9	34.0	22.6	21.6	36.9	27.3	
RSE	%	14.1	13.0	19.4	19.0	16.1	16.9	24.1	22.7	7.9	
95 per cent confidence interval	±	7.3	8.8	8.9	8.5	10.8	7.5	10.2	16.4	4.2	
Non-Indigenous people	е										
Proportion	%	26.5	25.1	18.4	24.6	29.0	22.4	23.5	23.2	24.2	
RSE	%	10.4	10.0	14.1	16.3	10.0	14.9	16.0	24.3	4.7	
95 per cent confidence interval	±	5.4	4.9	5.1	7.9	5.7	6.5	7.4	11.0	2.2	

**RSE** = relative standard error.

- (a) Persons who have been told by a doctor they have asthma, and the asthma is current and long-term.
- (b) Estimates with RSEs between 25 per cent and 50 per cent should be used with caution.
- (c) Rates are age standardised to the 2001 Australian standard population.
- (d) Data for non-Indigenous people for the NT should be interpreted with caution as the Australian Health Survey and National Health Survey excluded discrete Aboriginal and Torres Strait Islander communities and very remote areas, which comprise around 29 per cent of the estimated resident population of the NT living in private dwellings.

## **np** Not published

Source:

ABS unpublished, *National Aboriginal and Torres Strait Islander Health Survey, 2004-05*, Cat. no. 4715.0; ABS unpublished, *National Health Survey, 2004-05*, Cat. no. 4364.0; ABS unpublished, *Australian Aboriginal and Torres Strait Islander Health Survey* (National Aboriginal and Torres Strait Islander Health Survey component), Cat. no. 4727.0; ABS unpublished, *Australian Health Survey 2011-13* (2011-12 NHS component), Cat. no. 4364.0.

Table 10A.59 GP use of chronic disease management Medicare items for care planning or case conferencing (a), (b), (c)

<u> </u>					`	, , ,				
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2009-10										
GPs using CDM items	no.	6 439	4 925	3 820	1 764	1 605	487	263	120	19 423
Total GPs	no.	6 617	5 061	4 064	1 858	1 683	511	286	135	20 215
GPs using CDM items	%	97.3	97.3	94.0	94.9	95.4	95.3	92.0	88.9	96.1
2010-11										
GPs using CDM items	no.	6 643	5 151	3 962	1 808	1 631	514	280	125	20 114
Total GPs	no.	6 806	5 277	4 168	1 875	1 712	526	299	132	20 795
GPs using CDM items	%	97.6	97.6	95.1	96.4	95.3	97.7	93.6	94.7	96.7
2011-12										
GPs using CDM items	no.	6 939	5 420	4 170	1 900	1 691	514	301	135	21 070
Total GPs	no.	7 084	5 538	4 378	1 963	1 761	531	319	143	21 717
GPs using CDM items	%	98.0	97.9	95.2	96.8	96.0	96.8	94.4	94.4	97.0
2012-13										
GPs using CDM items	no.	7 208	5 682	4 413	1 977	1 718	525	323	139	21 985
Total GPs	no.	7 354	5 818	4 601	2 055	1 794	543	349	148	22 662
GPs using CDM items	%	98.0	97.7	95.9	96.2	95.8	96.7	92.6	93.9	97.0
2013-14										
GPs using CDM items	no.	7 519	5 993	4 671	2 135	1 787	570	322	142	23 139
Total GPs	no.	7 705	6 149	4 874	2 203	1 859	578	340	154	23 862
GPs using CDM items	%	97.6	97.5	95.8	96.9	96.1	98.6	94.7	92.2	97.0
2014-15										
GPs using CDM items	no.	7 819	6 328	4 945	1 870	2 273	585	170	339	24 329
Total GPs	no.	7 996	6 481	5 123	1 940	2 337	591	178	353	24 999
GPs using CDM items	%	97.8	97.6	96.5	96.4	97.3	99.0	95.5	96.0	97.3
2015-16										
GPs using CDM items	no.	8 183	6 560	5 196	1 956	2 452	601	173	359	25 480
Total GPs	no.	8 377	6 725	5 390	2 027	2 520	611	181	380	26 211
GPs using CDM items	%	97.7	97.5	96.4	96.5	97.3	98.4	95.6	94.5	97.2

<sup>(</sup>a) The chronic disease management (CDM) items include GP only care plans, multidisciplinary care plans (A15 subgroup 1) and case conferences (A15 subgroup 2, excluding items relating to consultant physicians and psychiatrists). Services that qualify under the DVA National Treatment Account or are provided in public hospitals are not included.

Source: Department of Health unpublished, MBS Statistics.

<sup>(</sup>b) Additional chronic disease management MBS items are introduced from time-to-time and may impact on GP use of care planning or case conferencing MBS items.

<sup>(</sup>c) GPs are defined as those General Practitioners and Other Medical Practitioners who have claimed at least 1500 non-referred attendances in the relevant financial year. GPs are counted only in the state/territory where they claimed the most services — this prevents double counting.

Table 10A.60 Pathology tests requested by GPs, real benefits paid, 2010-11 to 2015-16 (2015-16 dollars) and number of rebated MBS pathology items (a), (b), (c), (d), (e), (f), (g)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2010-11	Offic	7,077	V10	Qiu	7771	<b>37</b> (	740	7.07	141	71001
Benefits paid										
Benefits paid	\$m	486.8	344.0	304.8	134.7	106.4	30.7	21.9	12.9	1442.4
Per person	\$	67.8	62.6	68.7	58.1	65.2	60.2	60.1	56.2	65.1
MBS pathology items			5-10							
Number	'000	25 364	18 372	15 940	7 201	6 026	1 669	1 098	676	76 347
Per person	no.	3.53	3.34	3.59	3.11	3.69	3.27	3.01	2.94	3.44
2011-12										
Benefits paid										
Benefits paid	\$m	507.5	356.1	322.5	139.5	108.6	31.5	23.2	14.4	1503.3
Per person	\$	70.0	63.9	71.5	58.4	66.0	61.6	62.5	61.9	66.9
MBS pathology item	s rebated									
Number	'000	26 520	19 235	16 900	7 487	6 217	1 733	1 172	748	80 012
Per person	no.	3.66	3.45	3.74	3.14	3.78	3.39	3.16	3.22	3.56
2012-13										
Benefits paid										
Benefits paid	\$m	519.8	372.8	332.4	145.0	113.0	33.0	23.3	15.1	1554.4
Per person	\$	70.7	65.6	72.1	58.6	68.0	64.3	61.3	63.7	67.9
MBS pathology items	s rebated									
Number	'000	26 573	19 711	16 949	7 685	6 316	1 772	1 143	773	80 922
Per person	no.	0.09	0.07	0.12	0.04	0.07	0.11	0.09	0.01	0.08
2013-14										
Benefits paid										
Benefits paid	\$m	545.1	391.2	372.0	160.5	119.9	34.4	24.3	16.5	1664.0
Per person	\$	73.0	67.6	79.3	62.9	71.5	67.0	63.4	67.9	71.4
DEDORT ON	•									

Table 10A.60 Pathology tests requested by GPs, real benefits paid, 2010-11 to 2015-16 (2015-16 dollars) and number of rebated MBS pathology items (a), (b), (c), (d), (e), (f), (g)

		. 55	` '' ` '	, , , , , , , ,						
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
MBS pathology item	s rebated									
Number	'000	28 397	21 257	19 067	8 569	6 809	1 935	1 231	858	88 124
Per person	no.	3.80	3.67	4.06	3.36	4.06	3.77	3.20	3.54	3.78
2014-15										
Benefits paid										
Benefits paid	\$m	538.2	382.4	376.4	162.8	117.9	34.1	23.6	17.1	1652.4
Per person	\$	71.1	65.0	79.2	63.1	69.7	66.1	60.9	69.9	69.9
MBS pathology item	s rebated									
Number	'000	28 485	21 209	19 248	8 794	6 861	1 944	1 231	895	88 666
Per person	no.	3.77	3.60	4.05	3.41	4.06	3.77	3.18	3.66	3.75
2015-16										
Benefits paid										
Benefits paid	\$m	548.6	387.8	385.4	167.1	118.0	34.7	23.8	17.8	1683.2
Per person	\$	71.5	64.7	80.2	64.2	69.3	67.1	60.7	72.8	70.3
MBS pathology item	s rebated									
Number	'000	29 823	22 040	20 123	9 199	6 978	2 004	1 291	943	92 402
Per person	no.	3.89	3.68	4.18	3.53	4.10	3.87	3.28	3.87	3.86

<sup>(</sup>a) Time series financial data are adjusted to 2015-16 dollars using the General Government Final Consumption Expenditure (GGFCE) chain price deflator (2015-16 = 100) (table 10A.110). See chapter 2 (sections 2.5-6) for details.

<sup>(</sup>b) GPs are defined as vocationally registered GPs and other medical practitioners (OMPs).

<sup>(</sup>c) Includes Department of Veterans' Affairs (DVA) data.

<sup>(</sup>d) From 2011-12, DVA data exclude tests ordered by local medical officers who are not specialist GPs. DVA data for previous years include all data for tests ordered by all local medical officers, including but not limited to specialist GPs.

<sup>(</sup>e) In general, Medicare benefits are payable for a maximum of three MBS pathology items per specimen (generally, the three most expensive items). Data do not include additional tests that are performed but not rebated.

Table 10A.60 Pathology tests requested by GPs, real benefits paid, 2010-11 to 2015-16 (2015-16 dollars) and number of rebated MBS pathology items (a), (b), (c), (d), (e), (f), (g)

Unit NSW Vic Qld WA SA Tas ACT NT Aust

(f) Includes Patient Episode Initiated (PEI) Items. From 1 November 2009 benefits for PEI Items were reduced and bulk billing incentives for PEI Items commenced. This contributed to a change in the mix and amount of benefits for tests ordered by GPs and OMPs.

Source: Department of Health unpublished, MBS and DVA data collections; table 10A.96.

<sup>(</sup>g) Population data used to derive rates are revised to the ABS' final 2011 Census rebased estimates. See chapter 2 (table 2A.2) for details.

Table 10A.61 Diagnostic imaging referred by GPs and rebated through Medicare, real benefits paid, 2010-11 to 2015-16 (2015-16 dollars) and number of rebated MBS imaging items (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2010-11										
Benefits paid										
Benefits paid	\$m	498.4	301.6	278.9	114.3	88.7	26.7	16.4	5.7	1330.7
Per person	\$	69.4	54.9	62.9	49.3	54.3	52.4	44.9	24.7	60.0
MBS diagnostic imag	ging items reba	ated								
Number	'000	4 096	2 660	2 384	981	796	235	140	53	11 344
Per person	no.	0.57	0.48	0.54	0.42	0.49	0.46	0.38	0.23	0.51
2011-12										
Benefits paid										
Benefits paid	\$m	529.6	321.7	301.6	121.0	91.4	27.7	17.6	6.2	1416.9
Per person	\$	73.1	57.7	66.8	50.7	55.6	54.1	47.5	26.8	63.0
MBS diagnostic imag	ging items reba	ated								
Number	'000	4 377	2 867	2 583	1 044	824	245	149	58	12 145
Per person	no.	0.60	0.51	0.57	0.44	0.50	0.48	0.40	0.25	0.54
2012-13										
Benefits paid	\$m	554.0	339.1	312.0	125.6	94.6	29.6	18.6	7.5	1481.0
Per person	\$	75.4	59.7	67.7	50.8	56.9	57.8	49.1	31.5	64.7
MBS diagnostic ima	ging items reba	ated								
MBS items	'000	4 613	3 037	2 692	1 095	860	263	160	69	12 789
Per person	no.	0.63	0.53	0.58	0.44	0.52	0.51	0.42	0.29	0.56
2013-14										
Benefits paid	\$m	605.6	373.8	355.4	139.9	103.8	32.7	20.2	9.5	1640.9
Per person	\$	81.1	64.5	75.8	54.8	61.9	63.5	52.6	39.0	70.4
MBS diagnostic ima	ging items reba	ated								
MBS items	'000	4 970	3 299	3 002	1 207	927	284	172	87	13 946

Table 10A.61 Diagnostic imaging referred by GPs and rebated through Medicare, real benefits paid, 2010-11 to 2015-16 (2015-16 dollars) and number of rebated MBS imaging items (a), (b), (c), (d), (e), (f)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
no.	0.67	0.57	0.64	0.47	0.55	0.55	0.45	0.36	0.60
\$m	642.2	402.9	383.8	152.3	114.0	34.3	22.4	9.9	1761.8
\$	84.9	68.4	80.8	59.0	67.4	66.6	57.8	40.7	74.6
ging items reba	ated								
'000	5 200	3 521	3 194	1 298	993	297	185	92	14 781
no.	0.69	0.60	0.67	0.50	0.59	0.58	0.48	0.38	0.63
\$m	639.3	400.5	388.3	158.0	117.2	32.3	23.1	9.9	1768.6
\$	83.3	66.8	80.8	60.7	68.8	62.3	58.7	40.4	73.9
ging items reba	ated								
'000	5 341	3 591	3 328	1 372	1 039	287	196	92	15 247
no.	0.70	0.60	0.69	0.53	0.61	0.56	0.50	0.38	0.64
	no.  \$m \$ging items rebaino.  \$m \$m \$ging items rebaino.	no. 0.67  \$m 642.2 \$ 84.9  ging items rebated '000 5 200 no. 0.69  \$m 639.3 \$ 83.3  ging items rebated '000 5 341	no. 0.67 0.57  \$m 642.2 402.9 \$ 84.9 68.4  ging items rebated '000 5 200 3 521 no. 0.69 0.60  \$m 639.3 400.5 \$ 83.3 66.8  ging items rebated '000 5 341 3 591	no. 0.67 0.57 0.64  \$m 642.2 402.9 383.8 \$ 84.9 68.4 80.8  ging items rebated '000 5 200 3 521 3 194 no. 0.69 0.60 0.67  \$m 639.3 400.5 388.3 \$ 83.3 66.8 80.8  ging items rebated '000 5 341 3 591 3 328	no.       0.67       0.57       0.64       0.47         \$m       642.2       402.9       383.8       152.3         \$       84.9       68.4       80.8       59.0         ging items rebated       '000       5 200       3 521       3 194       1 298         no.       0.69       0.60       0.67       0.50         \$m       639.3       400.5       388.3       158.0         \$       83.3       66.8       80.8       60.7         ging items rebated       '000       5 341       3 591       3 328       1 372	no. 0.67 0.57 0.64 0.47 0.55  \$m 642.2 402.9 383.8 152.3 114.0 \$ 84.9 68.4 80.8 59.0 67.4  ging items rebated '000 5 200 3 521 3 194 1 298 993 no. 0.69 0.60 0.67 0.50 0.59  \$m 639.3 400.5 388.3 158.0 117.2 \$ 83.3 66.8 80.8 60.7 68.8  ging items rebated '000 5 341 3 591 3 328 1 372 1 039	no. 0.67 0.57 0.64 0.47 0.55 0.55  \$m 642.2 402.9 383.8 152.3 114.0 34.3 \$ 84.9 68.4 80.8 59.0 67.4 66.6  ging items rebated '000 5 200 3 521 3 194 1 298 993 297 no. 0.69 0.60 0.67 0.50 0.59 0.58  \$m 639.3 400.5 388.3 158.0 117.2 32.3 \$ 83.3 66.8 80.8 60.7 68.8 62.3  ging items rebated '000 5 341 3 591 3 328 1 372 1 039 287	no.       0.67       0.57       0.64       0.47       0.55       0.55       0.45         \$m       642.2       402.9       383.8       152.3       114.0       34.3       22.4         \$       84.9       68.4       80.8       59.0       67.4       66.6       57.8         ging items rebated       '000       5 200       3 521       3 194       1 298       993       297       185         no.       0.69       0.60       0.67       0.50       0.59       0.58       0.48         \$m       639.3       400.5       388.3       158.0       117.2       32.3       23.1         \$       83.3       66.8       80.8       60.7       68.8       62.3       58.7         ging items rebated       '000       5 341       3 591       3 328       1 372       1 039       287       196	no. 0.67 0.57 0.64 0.47 0.55 0.55 0.45 0.36  \$m 642.2 402.9 383.8 152.3 114.0 34.3 22.4 9.9 \$ 84.9 68.4 80.8 59.0 67.4 66.6 57.8 40.7  ging items rebated '000 5 200 3 521 3 194 1 298 993 297 185 92 no. 0.69 0.60 0.67 0.50 0.59 0.58 0.48 0.38  \$m 639.3 400.5 388.3 158.0 117.2 32.3 23.1 9.9 \$ 83.3 66.8 80.8 60.7 68.8 62.3 58.7 40.4  ging items rebated '000 5 341 3 591 3 328 1 372 1 039 287 196 92

<sup>(</sup>a) Time series financial data are adjusted to 2015-16 dollars using the General Government Final Consumption Expenditure (GGFCE) chain price deflator (2015-16 = 100) (table 10A.96). See chapter 2 for details.

Source: Department of Health unpublished, MBS and DVA data collections; table 10A.96.

<sup>(</sup>b) GPs are defined as vocationally registered GPs and other medical practitioners (OMPs).

<sup>(</sup>c) Includes Department of Veterans' Affairs (DVA) data.

<sup>(</sup>d) From 2011-12, DVA data exclude tests ordered by local medical officers who are not specialist GPs. DVA data for previous years include all data for tests ordered by all local medical officers, including but not limited to specialist GPs.

<sup>(</sup>e) Data for 2012-13 exclude tests ordered by eligible midwives and nurse practitioners. Data for 2013-14 include tests ordered by eligible nurse practitioners.

<sup>(</sup>f) Population data used to derive rates are revised to the ABS' final 2011 Census rebased estimates. See chapter 2 (table 2A.2) for details.

Table 10A.62 Practices in the Practice Incentives Program (PIP) using computers for clinical purposes (a), (b)

				•	,	•	•	. ,	, , ,	
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
PIP practices (May 2011)	no.	1 664	1 178	957	409	338	123	66	46	4 781
SWPE (c)	no.	4 792 245	4 100 376	3 129 970	1 508 314	1 239 216	396 459	277 984	86 021	15 530 585
PIP eHealth Incentive — uptake	no.	1 412	1 050	856	364	299	109	62	37	4 189
Share of PIP practices	%	84.9	89.1	89.4	89.0	88.5	88.6	93.9	80.4	87.6
PIP practices (May 2012)	no.	1 710	1 211	1 005	424	353	126	66	54	4 949
SWPE (c)	no.	4 948 168	4 213 416	3 260 160	1 562 809	1 276 083	402 315	279 439	90 413	16 032 803
PIP eHealth Incentive — uptake	no.	1 481	1 087	897	378	310	113	60	42	4 368
Share of PIP practices	%	86.6	89.8	89.3	89.2	87.8	89.7	90.9	77.8	88.3
PIP practices (May 2013)	no.	1 798	1 229	1 046	433	363	127	65	56	5 117
SWPE (c)	no.	5 129 251	4 207 334	3 319 305	1 619 421	1 300 886	399 791	270 671	90 909	16 337 568
PIP eHealth Incentive — uptake	no.	1 247	937	776	296	264	96	52	27	3 695
Share of PIP practices	%	69.4	76.2	74.2	68.4	72.7	75.6	80.0	48.2	72.2
PIP practices (May 2014)	no.	1 812	1 255	1 077	452	367	121	71	55	5 210
SWPE (c)	no.	5 258 991	4 345 602	3 383 012	1 700 870	1 300 873	400 531	283 522	100 855	16 774 256
PIP eHealth Incentive — uptake	no.	1 553	1 117	926	375	318	104	60	43	4 496
Share of PIP practices	%	85.7	89.0	86.0	83.0	86.7	86.0	84.5	78.2	86.3
PIP practices (May 2015)	no.	1 824	1 282	1 118	482	368	127	71	58	5 330
SWPE (c)	no.	5 370 579	4 427 327	3 480 773	1 741 707	1 322 963	406 811	288 152	108 093	17 146 405
PIP eHealth Incentive — uptake	no.	1 628	1 173	996	422	334	113	62	50	4 778

Table 10A.62 Practices in the Practice Incentives Program (PIP) using computers for clinical purposes (a), (b)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Share of PIP practices	%	89.3	91.5	89.1	87.6	90.8	89.0	87.3	86.2	89.6
PIP practices (May 2016) (b)	no.	1 873	1 342	1 154	503	381	128	58	70	5 509
SWPE (c)	no.	5 540 721	4 536 363	3 586 447	1 784 571	1 346 679	417 673	286 307	112 873	17 611 644
PIP eHealth Incentive — uptake	no.	1 696	1 238	1 041	447	349	114	61	53	4 999
Share of PIP practices	%	90.5	92.3	90.2	88.9	91.6	89.1	87.1	91.4	91.0

- (a) Proportion of PIP practices registered for the PIP eHealth Incentive. Not all practices are involved in PIP, and the proportion may vary across jurisdictions. Around 85 per cent of patient care is provided by practices enrolled in the PIP (table 10A.52).
- (b) In accordance with the purpose of the PIP eHealth incentive to encourage general practices to keep up-to-date with the latest developments in eHealth, new eligibility requirements were introduced from 1 February 2013, requiring practices to: integrate healthcare identifiers into electronic practice records; have a secure messaging capability; use data records and clinical coding of diagnoses; send prescriptions electronically to a prescription exchange service; and, participate in the eHealth record system and be capable of creating and uploading Shared Health Summaries and Event Summaries using compliant software. A number of practices took time to meet these requirements, as reflected in the sharp decrease in the share of PIP practices registered as having taken up the eHealth incentive in May 2013 and the recovery in subsequent years.
  - Under the previous requirements, practices were required to: have a secure messaging capability provided by an eligible supplier; have (or have applied for) a location/site Public Key Infrastructure (PKI) certificate for the practice and each practice branch, and make sure that each medical practitioner from the practice has (or has applied for) an individual PKI certificate; and, provide practitioners from the practice with access to a range of key electronic clinical resources.
- (c) A SWPE is an indicator of practice workload based on the number of patients seen. The SWPE value for a jurisdiction is the sum of the fractions of care provided by doctors in that jurisdiction to their patients, weighted for the age and sex of each patient in accordance with national ratios.

Source: Department of Health unpublished, MBS and PIP data collections.

Table 10A.63 Practices in the Practice Incentives Program (PIP) using computers for clinical purposes, by region (a), (b), (c)

	Unit	Major cities	Inner regional	Outer regional	Remote	Very remote	Australia
PIP practices (May 2013)	no.	3 425	981	536	104	71	5 117
PIP eHealth Incentive uptake — share of PIP practices	%	72.3	77.5	68.8	55.8	43.7	72.2
PIP practices (May 2014)	no.	3 484	1 012	546	99	69	5 210
PIP eHealth Incentive uptake — share of PIP practices	%	86.9	88.9	82.8	72.7	62.3	86.3
PIP practices (May 2015)	no.	3 567	1 030	560	106	67	5 330
PIP eHealth Incentive uptake — share of PIP practices	%	90.6	90.9	85.5	79.3	70.2	90.0
PIP practices (May 2016)	no.	3 706	1 063	569	105	66	5 509
PIP eHealth Incentive uptake — share of PIP practices	%	91.5	91.9	87.5	81.9	71.2	91.0

- (a) Proportion of PIP practices registered for the PIP eHealth Incentive. Not all practices are involved in PIP, and the proportion may vary across jurisdictions. Around 85 per cent of patient care is provided by practices enrolled in the PIP (table 10A.52).
- (b) Remoteness areas are based on the Australian Statistical Geography Standard 2011 (ASGS) classification and are not comparable with data for previous years, which were based on a different classification.
- (c) In accordance with the purpose of the PIP eHealth incentive to encourage general practices to keep up-to-date with the latest developments in eHealth, new eligibility requirements were introduced from 1 February 2013, requiring practices to: integrate healthcare identifiers into electronic practice records; have a secure messaging capability; use data records and clinical coding of diagnoses; send prescriptions electronically to a prescription exchange service; and, participate in the eHealth record system and be capable of creating and uploading Shared Health Summaries and Event Summaries using compliant software.

Source: Department of Health unpublished, MBS and PIP data collections.

Table 10A.64 Client experience of GPs by remoteness, States and Territories (a), (b), (c), (d)

	(12), (1	c), (u)								
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (e)	Aust
2012-13										
GP always or oft	en liste	ned caref	ully							
Major cities										
Proportion	%	90.8	89.3	89.5	89.2	89.4		89.3		89.9
RSE	%	0.6	0.7	0.6	8.0	8.0		1.3		0.3
95% CI	± %	1.0	1.3	1.1	1.4	1.4		2.3		0.5
Other (f)										
Proportion	%	89.3	90.1	87.5	86.1	86.9	89.4	_	86.4	88.6
RSE	%	1.3	1.0	1.0	1.5	1.5	1.0	_	1.5	0.5
95% CI	± %	2.2	1.8	1.7	2.5	2.5	1.7	_	2.6	0.9
Total										
Proportion	%	90.4	89.5	88.8	88.5	88.8	89.4	89.3	86.4	89.5
RSE	%	0.5	0.6	0.5	0.6	0.8	1.0	1.3	1.5	0.2
95% CI	± %	0.8	1.1	0.9	1.1	1.3	1.7	2.3	2.6	0.4
GP always or oft	en sho	wed respe	ct							
Major cities										
Proportion	%	93.8	93.2	92.4	92.6	92.9		93.0		93.2
RSE	%	0.4	0.6	0.4	0.6	0.6		1.1		0.2
95% CI	± %	0.8	1.0	0.7	1.1	1.1		1.9		0.4
Other (f)										
Proportion	%	92.8	92.2	90.9	90.6	90.3	92.0	_	90.6	91.8
RSE	%	0.8	0.8	1.1	1.4	1.3	0.9	_	1.2	0.4
95% CI	± %	1.4	1.5	1.9	2.5	2.4	1.7	_	2.2	0.7
Total										
Proportion	%	93.5	93.0	91.8	92.2	92.3	92.0	93.0	90.6	92.8
RSE	%	0.3	0.5	0.4	0.5	0.6	0.9	1.1	1.2	0.2
95% CI	± %	0.6	0.9	0.8	1.0	1.0	1.7	1.9	2.2	0.4
GP always or oft	en spei	nt enough	time							
Major cities										
Proportion	%	89.8	88.0	88.4	87.5	88.1		85.9		88.6
RSE	%	0.7	0.8	0.7	0.8	1.1		1.5	••	0.3
95% CI	± %	1.2	1.3	1.2	1.3	1.9		2.5		0.6
Other (f)										
Proportion	%	89.9	88.2	85.5	86.2	88.0	88.0	_	84.7	87.8
RSE	%	1.0	1.3	1.5	2.1	1.4	0.9	_	1.7	0.6
95% CI	± %	1.8	2.2	2.6	3.6	2.5	1.6	_	2.8	1.0
Total		1.0		2.0	0.0	2.0	1.0		2.0	1.0
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Table 10A.64 Client experience of GPs by remoteness, States and Territories (a), (b), (c), (d)

		c), (u)		<u> </u>						
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (e)	Aust
Proportion	%	89.9	88.0	87.3	87.2	88.1	88.0	85.9	84.7	88.4
RSE	% • "	0.5	0.6	0.6	0.7	1.0	0.9	1.5	1.7	0.3
95% CI	± %	0.9	1.0	1.1	1.3	1.7	1.6	2.5	2.8	0.5
2013-14 (g)										
GP always or often	en liste	ned caref	ully							
Major cities										
Proportion	%	91.8	91.9	90.1	88.9	91.5		88.8		91.1
RSE	%	1.3	0.5	0.9	1.1	0.2		1.5		0.3
95% CI	± %	2.3	1.0	1.6	2.0	0.3		2.6		0.6
Other (f)										
Proportion	%	89.5	89.9	89.6	87.3	89.2	91.3	_	84.8	89.4
RSE	%	1.3	1.4	0.9	2.7	1.7	0.7	_	1.5	0.9
95% CI	± %	2.3	2.4	1.6	4.7	3.0	1.2	_	2.5	1.6
Total										
Proportion	%	91.2	91.3	89.8	88.6	90.9	91.3	89.1	84.8	90.6
RSE	%	0.5	0.7	8.0	0.9	0.5	0.7	1.5	1.5	0.3
95% CI	± %	0.9	1.3	1.3	1.5	8.0	1.2	2.6	2.5	0.6
GP always or ofte	en sho	wed respe	ect							
Major cities										
Proportion	%	94.2	94.6	92.9	91.8	94.9		92.3		93.7
RSE	%	1.2	0.6	0.7	8.0	1.5		1.0		0.3
95% CI	± %	2.2	1.0	1.4	1.5	2.8		1.7		0.5
Other (f)										
Proportion	%	91.2	93.0	92.7	90.6	92.3	93.5	_	89.6	92.1
RSE	%	1.2	1.1	0.9	2.2	1.5	0.6	_	1.0	0.6
95% CI	± %	2.2	2.0	1.6	3.8	2.8	1.1	_	1.8	1.2
Total										
Proportion	%	93.4	94.2	92.6	91.5	94.4	93.5	92.4	89.6	93.3
RSE	%	0.4	0.6	0.4	0.7	_	0.6	1.0	1.0	0.2
95% CI	± %	0.8	1.1	8.0	1.2	-	1.1	1.8	1.8	0.4
GP always or ofte	en spei	nt enough	time							
Major cities										
Proportion	%	91.0	89.3	89.6	87.3	90.7		87.2		89.7
RSE	%	1.3	0.8	0.6	1.0	0.6		1.9		0.5
95% CI	± %	2.3	1.4	1.1	1.8	1.2		3.2		0.8
Other (f)										
Proportion	%	88.2	88.1	88.0	88.7	89.3	89.7	_	86.3	88.3
DEDORT ON									MARY AND (	

Table 10A.64 Client experience of GPs by remoteness, States and Territories (a), (b), (c), (d)

		c), (u)								
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (e)	Aust
RSE	%	1.0	0.9	1.0	2.2	1.5	0.8	_	1.8	0.7
95% CI	± %	1.7	1.6	1.7	3.9	2.6	1.5	_	3.1	1.2
Total										
Proportion	%	90.3	89.1	88.9	87.6	90.3	89.7	87.2	86.3	89.3
RSE	%	0.5	8.0	0.5	8.0	0.6	8.0	1.9	1.8	0.4
95% CI	± %	8.0	1.4	0.8	1.4	1.0	1.5	3.2	3.1	0.7
2014-15 (g)										
GP always or ofte	en liste	ned carefu	ılly							
Major cities										
Proportion	%	91.1	90.3	89.9	89.8	91.2		90.5		90.5
RSE	%	0.4	0.5	0.7	0.7	0.5		1.5		0.2
95% CI	± %	0.7	0.9	1.2	1.3	0.9		2.6		0.3
Other (f)										
Proportion	%	90.6	90.5	89.3	89.0	88.7	88.6	68.6	89.2	89.9
RSE	%	0.8	1.8	0.7	2.5	1.6	1.0	25.1	1.2	0.5
95% CI	± %	1.4	3.2	1.2	4.3	2.8	1.7	33.7	2.0	1.0
Total										
Proportion	%	90.9	90.2	89.8	89.5	90.9	88.6	89.8	89.2	90.3
RSE	%	0.3	0.2	0.1	0.6	0.7	1.0	1.6	1.2	0.1
95% CI	± %	0.6	0.4	0.3	1.0	1.3	1.7	2.8	2.0	0.1
GP always or ofte	en shov	wed respe	ct							
Major cities										
Proportion	%	94.3	93.1	93.9	92.6	93.1		93.8		93.6
RSE	%	0.5	0.1	0.7	1.2	0.8		1.5		0.3
95% CI	± %	0.9	0.2	1.3	2.1	1.4		2.8		0.6
Other (e)										
Proportion	%	92.7	93.5	92.1	91.0	91.0	92.2	68.6	92.5	92.5
RSE	%	0.7	2.3	0.9	1.6	1.3	0.9	25.1	0.9	0.5
95% CI	± %	1.3	4.2	1.7	2.8	2.4	1.6	33.7	1.7	0.8
Total										
Proportion	%	93.8	93.2	93.3	92.4	93.0	92.2	93.1	92.5	93.3
RSE	%	0.2	0.2	0.3	0.7	0.2	0.9	1.6	0.9	0.3
95% CI	± %	0.4	0.3	0.6	1.3	0.3	1.6	2.9	1.7	0.5
GP always or ofte	en spei	nt enough	time							
Major cities	•	J								
Proportion	%	88.9	88.3	88.6	88.8	89.9		86.5		88.8
RSE	%	0.7	1.0	1.4	0.7	0.9		0.7		0.3
95% CI	± %	1.3	1.7	2.4	1.2	1.5		1.2		0.5
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Table 10A.64 Client experience of GPs by remoteness, States and Territories (a), (b), (c), (d)

	` // `	<i>,,</i> , ,								
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (e)	Aust
Other (f)										
Proportion	%	90.0	90.8	87.9	90.1	86.8	87.6	np	87.5	89.1
RSE	%	0.6	2.0	1.3	2.0	1.8	1.0	np	1.9	0.3
95% CI	± %	1.0	3.5	2.2	3.5	3.1	1.8	np	3.2	0.6
Total										
Proportion	%	89.3	88.8	88.4	89.1	89.3	87.6	86.6	87.5	88.9
RSE	%	0.5	0.3	8.0	0.5	0.3	1.0	0.6	1.9	0.2
95% CI	± %	0.9	0.5	1.4	0.9	0.6	1.8	0.9	3.2	0.3
2015-16 (g)										
GP always or oft	en liste	ned caref	ully							
Major cities										
Proportion	%	91.3	91.6	92.2	93.2	93.1		90.4		91.8
RSE	%	0.6	0.5	0.9	0.5	0.9		1.1		0.2
95% CI	± %	1.0	0.9	1.6	0.9	1.6		2.0		0.4
Other (f)										
Proportion	%	91.3	91.2	91.5	91.8	89.2	92.0	np	87.6	91.2
RSE	%	1.5	1.1	1.7	2.0	2.9	8.0	np	1.7	0.3
95% CI	± %	2.6	2.0	3.0	3.6	5.0	1.5	np	2.9	0.6
Total										
Proportion	%	91.2	91.5	91.9	92.9	91.9	92.0	90.1	87.6	91.6
RSE	%	0.4	0.5	0.2	0.5	0.5	8.0	1.1	1.7	0.2
95% CI	± %	0.7	8.0	0.3	8.0	0.9	1.5	1.9	2.9	0.4
GP always or oft	en shov	wed respe	ect							
Major cities										
Proportion	%	93.9	94.3	94.7	94.8	95.2		94.0		94.2
RSE	%	0.3	0.4	0.7	0.1	0.4		1.5		0.2
95% CI	± %	0.5	8.0	1.2	0.3	0.7		2.8		0.4
Other (f)										
Proportion	%	93.1	93.8	93.9	92.9	91.6	94.1	np	91.8	93.4
RSE	%	1.1	1.1	1.1	0.9	2.4	8.0	np	1.4	0.5
95% CI	± %	2.0	2.0	2.0	1.6	4.4	1.5	np	2.5	8.0
Total										
Proportion	%	93.7	94.0	94.4	94.2	94.2	94.1	93.8	91.8	94.0
RSE	%	0.1	0.2	0.1	0.2	0.6	0.8	1.5	1.4	0.2
95% CI	± %	0.2	0.4	0.3	0.3	1.1	1.5	2.7	2.5	0.3

GP always or often spent enough time

Major cities

Table 10A.64 Client experience of GPs by remoteness, States and Territories (a), (b), (c), (d)

	` '' '	,, , ,								
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (e)	Aust
Proportion	%	90.4	90.1	90.2	90.9	91.5		87.7		90.3
RSE	%	0.6	0.5	0.5	0.7	0.8		1.3		0.4
95% CI	± %	1.1	0.9	0.9	1.3	1.4		2.2		0.6
Other (f)										
Proportion	%	90.8	90.3	91.7	90.8	85.5	90.1	np	86.6	90.5
RSE	%	0.9	1.2	0.9	0.9	2.2	0.9	np	1.4	0.5
95% CI	± %	1.6	2.2	1.7	1.6	3.7	1.6	np	2.5	8.0
Total										
Proportion	%	90.6	90.1	90.8	90.7	89.9	90.1	87.8	86.6	90.3
RSE	%	0.2	0.4	0.1	0.4	0.6	0.9	1.3	1.4	0.3
95% CI	± %	0.4	0.6	0.1	0.7	1.1	1.6	2.2	2.5	0.5

**RSE** = Relative standard error. **CI** = confidence interval.

- (a) Estimates with a relative standard error (RSE) between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use and are marked with '\*\*'.
- (b) Proportion of people 15 years or over who saw a GP in the last 12 months for their own health (excluding interviews by proxy) reporting the GP always or often: listened carefully, showed respect, and spent enough time with them.
- (c) Data are crude rates and may differ from data in previous reports in which rates were age-standardised.
- (d) For more information on data quality, including collection methodologies and data limitations, see the Patient Experience Survey (cat. no. 4839.0) on the ABS website.
- (e) Data for the NT should be interpreted with caution as the Patient Experience Survey excluded discrete Aboriginal and Torres Strait Islander communities, which comprise around 26 per cent of the estimated resident population of the NT living in private dwellings.
- (f) 'Other' includes inner and outer regional, remote and very remote areas.
- (g) For 2013-14 and subsequent years, cells have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.
  - .. Not applicable. Nil or rounded to zero. np Not published.

Source: ABS unpublished, Patient Experience Survey, various years, Cat. no. 4839.0.

Table 10A.65 Client experience of GPs by remoteness, Australia (a), (b), (c), (d), (e), (f)

					Remote/Very	
	Unit	Major cities	Inner regional	Outer regional	remote	Tota
2012-13						
GP always or ofter	n listened ca	refully				
Proportion	%	89.9	88.9	88.4	85.4	89.
RSE	%	0.3	0.6	0.8	2.8	0.2
95% CI	± %	0.5	1.0	1.4	4.7	0.4
GP always or ofter	n showed re	spect				
Proportion	%	93.2	92.4	90.9	88.5	92.
RSE	%	0.2	0.5	0.7	1.8	0.:
95% CI	± %	0.4	0.9	1.2	3.1	0.4
GP always or ofter	n spent enou	ugh time				
Proportion	%	88.6	88.2	87.5	84.3	88.
RSE	%	0.3	0.7	1.0	2.6	0.
95% CI	± %	0.6	1.2	1.7	4.4	0.
2013-14 (d)						
GP always or ofter	n listened ca	refully				
Proportion	%	91.1	90.1	88.7	86.1	90.
RSE	%	0.3	0.9	0.7	3.4	0.
95% CI	± %	0.6	1.6	1.3	5.7	0.
GP always or ofter	n showed re	enact				
Proportion	%	93.7	92.7	91.7	88.7	93.
RSE	%	0.3	0.7	0.8	2.7	0.
95% CI	± %	0.5	1.2	1.5	4.8	0.
GP always or ofter		iah timo				
Proportion	" sperit eriot %	agir time 89.7	88.7	88.1	86.0	89.
RSE	%	0.5	0.7		4.5	0.
95% CI	± %	0.8	1.2	2.7	7.6	0.
	± 70				-	
2014-15 (d)						
GP always or ofter		•	00.6	00.4	02.2	00
Proportion	%	90.5	90.6	88.1	93.3	90.
RSE	%	0.2		0.8	3.6	0.
95% CI	± %	0.3	1.4	1.4	6.7	0.
GP always or ofter		•	00.0	04.5	05.4	00
Proportion	%	93.6		91.5	95.1	93.
RSE	%	0.3	0.9	1.2	2.8	0.
95% CI	± %	0.6	1.7	2.2	5.1	0.
GP always or ofter	•	-				
Proportion	%	88.8		87.7	93.5	88.
RSE	%	0.3		0.6	3.9	0.
95% CI	± %	0.5	1.2	1.0	7.2	0.
2015-16 (d)						

Table 10A.65 Client experience of GPs by remoteness, Australia (a), (b), (c), (d), (e), (f)

	Unit	Major cities	Inner regional	Outer regional	Remote/Very remote	Total
GP always or ofter	n listened ca	refully				
Proportion	%	91.8	91.8	89.8	92.2	91.6
RSE	%	0.2	0.4	1.3	3.6	0.2
95% CI	± %	0.4	0.8	2.3	6.5	0.4
GP always or ofter	n showed re	spect				
Proportion	%	94.2	93.6	92.5	94.7	94.0
RSE	%	0.2	0.4	1.4	2.6	0.2
95% CI	± %	0.4	0.7	2.5	4.8	0.3
GP always or ofter	n spent enou	ıgh time				
Proportion	%	90.3	91.2	88.8	92.1	90.3
RSE	%	0.4	0.6	1.8	4.2	0.3
95% CI	± %	0.6	1.1	3.1	7.6	0.5

RSE = Relative standard error. 95% CI = confidence interval.

- (a) Proportion of people 15 years or over who saw a GP in the last 12 months for their own health (excluding interviews by proxy) reporting the GP always or often: listened carefully, showed respect, and spent enough time with them.
- (b) Data are crude rates and may differ from data in previous reports in which rates were age-standardised.
- (c) Data are not comparable with data for Aboriginal and Torres Strait Islander people that were sourced from the ABS 2012-13 Australian Aboriginal and Torres Strait Islander Health Survey, due to differences in survey design and collection methodology.
- (d) For 2013-14 and subsequent years, cells have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.
- (e) Data for the NT should be interpreted with caution as the Patient Experience Survey excluded discrete Aboriginal and Torres Strait Islander communities, which comprise around 26 per cent of the estimated resident population of the NT living in private dwellings.
- (f) For more information on data quality, including collection methodologies and data limitations, see the Patient Experience Survey (cat. no. 4839.0) on the ABS website.

Source: ABS unpublished, Patient Experience Survey, various years, Cat. no. 4839.0.

Table 10A.66 Client experience of GPs by remoteness, Aboriginal and Torres Strait Islander people, Australia, 2012-13 (a), (b), (c), (d)

	Unit	Major cities	Inner regional	Outer regional	Total (e)
2012-13 (e)					
GP always or usua	ally listened ca	refully			
Proportion	%	89.8	88.8	86.4	88.5
RSE	%	1.4	1.9	2.3	1.0
95% CI	± %	2.5	3.3	3.9	1.8
GP always or usua	ally showed re	spect			
Proportion	%	90.5	88.0	87.5	89.0
RSE	%	1.7	1.9	1.4	1.0
95% CI	± %	3.0	3.3	2.4	1.7
GP always or usua	ally spent enou	ıgh time			
Proportion	%	86.2	85.0	83.2	85.0
RSE	%	1.8	2.1	2.3	1.1
95% CI	± %	3.0	3.4	3.7	1.9

RSE = Relative standard error. 95% CI = confidence interval.

- (a) Persons 15 years and over who saw a GP in the last 12 months for their own health (excluding interviews by proxy), reporting the GP always or usually listened carefully, showed respect, and spent enough time with them.
- (b) Rates are age standardised to the 2001 estimated resident population (5 year ranges).
- (c) Data are not comparable with data for all Australians that were sourced from the ABS 2012-13 Patient Experience Survey, due to differences in survey design and collection methodology.
- (d) Information on how to interpret and use the data appropriately is available from Explanatory Notes in Australian Aboriginal and Torres Strait Islander Health Survey: First Results, 2012-13 (Cat. no. 4727.0.55.001) and the Australian Aboriginal and Torres Strait Islander Health Survey: Users' Guide, 2012-13 (Cat. no. 4727.0.55.002).
- (e) Includes major cities, inner and outer regional areas only, as these survey questions were not asked in remote and very remote areas.

Source: ABS (unpublished) Australian Aboriginal and Torres Strait Islander Health Survey, 2012-13 (National Aboriginal and Torres Strait Islander Health Survey component), Cat. no. 4727.0.

Table 10A.67 Client experience of dental professionals by remoteness, States and Territories (a), (b), (c), (d)

	I errii	tories (a	i), (b), (c	c), (a)						
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (c)	Aust
2012-13										
Dental profession	ıal alwa	ys or ofter	n listened	carefully						
Major cities										
Proportion	%	96.3	94.6	94.5	95.5	95.3		95.1		95.3
RSE	%	0.5	0.6	0.5	0.6	0.6		0.9		0.3
95% CI	± %	1.0	1.1	1.0	1.1	1.1		1.7		0.5
Other (e)										
Proportion	%	94.0	92.7	93.1	95.3	91.9	94.5	_	92.4	93.5
RSE	%	0.9	1.3	0.8	1.3	2.5	8.0	_	1.6	0.5
95% CI	± %	1.6	2.3	1.5	2.3	4.5	1.4	_	2.8	0.9
Total										
Proportion	%	95.8	94.2	94.0	95.5	94.5	94.5	95.1	92.4	94.8
RSE	%	0.5	0.5	0.4	0.5	0.7	8.0	0.9	1.6	0.2
95% CI	± %	1.0	1.0	0.7	1.0	1.2	1.4	1.7	2.8	0.4
Dental profession	ıal alwa	ys or ofter	n showed	respect						
Major cities										
Proportion	%	97.0	96.3	95.6	96.5	96.8		96.0		96.5
RSE	%	0.4	0.5	0.6	0.5	0.5		0.8		0.3
95% CI	± %	8.0	1.0	1.2	1.0	1.0		1.5		0.6
Other (e)										
Proportion	%	95.4	93.6	95.2	96.9	94.9	96.1	_	94.8	95.1
RSE	%	0.6	1.2	8.0	1.1	1.5	0.5	_	1.3	0.3
95% CI	± %	1.2	2.2	1.5	2.1	2.7	1.0	_	2.3	0.7
Total										
Proportion	%	96.7	95.7	95.4	96.6	96.4	96.1	96.0	94.8	96.1
RSE	%	0.4	0.4	0.5	0.4	0.5	0.5	8.0	1.3	0.2
95% CI	± %	0.7	8.0	0.9	8.0	0.9	1.0	1.5	2.3	0.5
Dental profession	ıal alwa	ys or ofter	n spent er	nough tim	е					
Major cities										
Proportion	%	96.8	95.2	95.0	96.3	96.6		95.4		95.9
RSE	%	0.4	0.5	0.6	0.7	0.6		0.9		0.2
95% CI	± %	0.7	1.0	1.1	1.3	1.0		1.8		0.4
Other (e)										
Proportion	%	94.5	93.8	96.3	97.8	96.8	96.9	_	94.4	95.4
RSE	%	0.9	1.4	8.0	0.7	0.9	0.7	_	1.1	0.5
95% CI	± %	1.7	2.6	1.4	1.3	1.8	1.3	_	2.0	0.9

Table 10A.67 Client experience of dental professionals by remoteness, States and Territories (a), (b), (c), (d)

	Territ	ories (a	), (b), (c	c), (d)						
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (c)	Aust
Proportion	%	96.2	94.9	95.4	96.6	96.7	96.9	95.4	94.4	95.8
RSE	%	0.4	0.5	0.5	0.6	0.4	0.7	0.9	1.1	0.2
95% CI	± %	0.7	0.9	1.0	1.1	8.0	1.3	1.8	2.0	0.4
2013-14 (f)										
Dental profession	al alwa	ys or ofter	n listened	carefully						
Major cities										
Proportion	%	94.6	95.3	93.0	96.3	97.5		95.6		95.0
RSE	%	0.9	0.9	0.4	0.3	2.3		3.6		0.4
95% CI	± %	1.6	1.6	8.0	0.6	4.4		6.7		0.7
Other (e)										
Proportion	%	95.0	91.2	92.6	96.6	92.9	93.7	_	94.5	93.3
RSE	%	0.6	2.0	0.8	1.5	1.1	1.1	_	1.9	0.5
95% CI	± %	1.2	3.6	1.5	2.8	2.0	2.1	_	3.5	1.0
Total										
Proportion	%	94.8	94.5	92.9	96.5	96.5	93.7	95.4	94.5	94.6
RSE	%	0.6	0.7	0.8	0.6	1.6	1.1	3.6	1.9	1.0
95% CI	± %	1.2	1.3	1.4	1.1	3.0	2.1	6.8	3.5	1.9
Dental profession	al alwa	ys or ofter	n showed	respect						
Major cities										
Proportion	%	95.9	96.2	94.5	96.6	97.2		96.7		96.0
RSE	%	0.7	0.6	3.1	2.3	2.3		3.5		0.4
95% CI	± %	1.4	1.2	5.7	4.4	4.4		6.6		0.8
Other (e)										
Proportion	%	94.9	92.7	93.6	95.6	94.3	96.2	_	95.4	94.2
RSE	%	_	2.2	0.5	1.9	7.0	0.9	_	2.0	0.3
95% CI	± %	_	3.9	1.0	3.5	12.9	1.7	_	3.8	0.5
Total										
Proportion	%	95.8	95.3	94.2	96.7	96.5	96.2	96.3	95.4	95.5
RSE	%	0.6	0.6	0.5	0.3	1.6	0.9	3.5	2.0	0.2
95% CI	± %	1.1	1.1	0.9	0.5	3.0	1.7	6.6	3.8	0.5
Dental profession	al alwa	ys or ofter	n spent er	nough tim	е					
Major cities										
Proportion	%	95.6	96.9	94.0	96.9	98.1		96.6		96.0
RSE	%	0.6	0.7	3.2	2.3	0.2		3.6		0.3
95% CI	± %	1.1	1.3	5.9	4.4	0.4		6.8		0.5

Table 10A.67 Client experience of dental professionals by remoteness, States and Territories (a), (b), (c), (d)

	Territ	ories (a	), (b), (c	e), (d)						
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (c)	Aust
Other (d)										
Proportion	%	95.6	94.7	93.5	97.9	93.2	95.5	_	96.3	94.9
RSE	%	0.6	1.6	5.3	1.4	0.5	1.6	_	1.7	0.5
95% CI	± %	1.1	2.9	9.7	2.7	0.9	3.0	_	3.1	0.9
Total										
Proportion	%	95.7	96.3	93.9	97.1	97.0	95.5	97.1	96.3	95.7
RSE	%	0.5	0.6	0.5	0.4	1.7	1.6	3.6	1.7	0.1
95% CI	± %	1.0	1.1	0.9	0.8	3.2	3.0	6.9	3.1	0.2
2014-15 (f)										
Dental profession	al alwa	ys or ofter	n listened	carefully						
Major cities										
Proportion	%	94.9	94.7	94.7	95.2	94.1		94.2		94.7
RSE	%	0.9	0.7	0.4	0.8	0.5		1.3		0.3
95% CI	± %	1.6	1.4	8.0	1.4	0.9		2.3		0.6
Other (e)										
Proportion	%	94.1	93.1	94.8	94.7	92.1	94.2	_	95.6	93.7
RSE	%	1.3	2.7	2.7	2.1	1.7	0.4	_	0.8	1.1
95% CI	± %	2.4	4.8	5.1	3.9	3.0	0.7	_	1.5	2.0
Total										
Proportion	%	94.6	94.3	94.5	94.6	93.6	94.2	94.7	95.6	94.5
RSE	%	0.7	0.6	1.1	0.5	1.2	0.4	1.1	0.8	0.2
95% CI	± %	1.3	1.1	2.0	1.0	2.3	0.7	2.0	1.5	0.4
Dental profession	al alwa	ys or ofter	n showed	respect						
Major cities										
Proportion	%	96.5	96.3	95.3	96.3	95.5		94.7		96.0
RSE	%	0.5	1.0	0.5	0.9	8.0		1.5		0.3
95% CI	± %	0.9	1.8	1.0	1.8	1.5		2.7		0.5
Other (e)										
Proportion	%	94.2	94.9	95.9	94.9	95.1	95.8	_	97.9	94.9
RSE	%	1.7	2.9	2.6	2.3	1.6	0.3	_	1.0	1.3
95% CI	± %	3.2	5.4	4.9	4.3	3.0	0.6	_	1.8	2.4
Total										
Proportion	%	95.9	95.9	95.0	95.9	95.4	95.8	94.5	97.9	95.7
RSE	%	0.5	0.6	0.9	0.6	1.1	0.3	1.4	1.0	0.4
95% CI	± %	0.9	1.2	1.7	1.0	2.1	0.6	2.6	1.8	0.8
Dental profession	al alwa	ys or ofter	n spent er	nough tim	е					
Major cities										
Proportion	%	95.6	96.3	95.0	96.1	95.4		95.2		95.8
DEDORT ON										

Table 10A.67 Client experience of dental professionals by remoteness, States and Territories (a), (b), (c), (d)

	remi	ories (a	), (b), (c	,, (u)						
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (c)	Aust
RSE	%	0.6	1.1	0.7	1.2	1.1		1.2		0.4
95% CI	± %	1.2	2.0	1.2	2.2	2.0		2.2		0.8
Other (e)										
Proportion	%	94.6	96.6	95.7	96.3	93.0	95.9	_	97.7	95.4
RSE	%	1.4	2.3	2.0	2.0	2.6	0.8	_	1.2	0.9
95% CI	± %	2.6	4.3	3.8	3.8	4.8	1.5	_	2.4	1.7
Total										
Proportion	%	95.4	96.3	95.0	95.8	94.6	95.9	95.6	97.7	95.7
RSE	%	0.5	0.9	0.7	0.4	1.2	8.0	1.0	1.2	0.3
95% CI	± %	0.9	1.7	1.4	8.0	2.2	1.5	1.9	2.4	0.5
2015-16 (f)										
Dental profession	al alwa	ys or ofter	n listened	carefully						
Major cities										
Proportion	%	95.4	95.2	95.8	95.9	96.7		95.6		95.5
RSE	%	0.3	0.3	1.2	1.2	0.5		0.9		0.2
95% CI	± %	0.6	0.5	2.2	2.2	1.0		1.8		0.5
Other (e)										
Proportion	%	96.1	91.8	96.5	97.3	97.7	96.0	np	94.7	95.3
RSE	%	2.2	3.3	1.8	0.8	1.2	0.9	np	1.1	1.1
95% CI	± %	4.1	6.0	3.4	1.5	2.3	1.6	np	2.0	2.1
Total										
Proportion	%	95.7	94.6	96.1	96.1	96.6	96.0	95.6	94.7	95.5
RSE	%	0.6	0.6	0.7	1.0	0.3	0.9	0.9	1.1	0.3
95% CI	± %	1.1	1.1	1.4	1.9	0.5	1.6	1.7	2.0	0.6
Dental profession	al alwa	ys or ofter	n showed	respect						
Major cities										
Proportion	%	96.4	96.2	96.3	96.3	97.6		95.5		96.3
RSE	%	0.4	0.5	0.7	1.1	0.4		1.5		0.3
95% CI	± %	0.7	0.9	1.3	2.1	0.8		2.9		0.5
Other (e)										
Proportion	%	96.7	94.1	96.3	96.2	98.9	95.7	np	95.6	96.1
RSE	%	1.7	2.2	2.1	1.1	0.3	1.2	np	0.5	0.8
95% CI	± %	3.3	4.0	4.0	2.1	0.6	2.2	np	1.0	1.6
Total										
Proportion	%	96.4	95.9	96.5	96.4	97.4	95.7	95.3	95.6	96.3
RSE	%	0.3	0.5	0.6	1.0	0.5	1.2	1.5	0.5	0.1
95% CI	± %	0.5	0.9	1.1	2.0	1.0	2.2	2.9	1.0	0.3

Table 10A.67 Client experience of dental professionals by remoteness, States and Territories (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (c)	Aust
Major cities										
Proportion	%	96.6	95.8	96.4	97.4	97.5		97.2		96.5
RSE	%	0.1	0.4	1.0	1.1	0.4		0.7		0.2
95% CI	± %	0.1	0.8	1.9	2.0	0.8		1.3		0.5
Other (e)										
Proportion	%	97.4	94.6	98.0	97.3	96.9	96.2	np	96.8	96.6
RSE	%	1.3	1.9	1.3	2.4	1.1	0.7	np	1.0	0.6
95% CI	± %	2.4	3.4	2.4	4.5	2.1	1.4	np	2.0	1.1
Total										
Proportion	%	96.5	95.8	96.9	97.6	97.1	96.2	97.1	96.8	96.6
RSE	%	0.5	0.3	0.4	1.0	0.4	0.7	0.7	1.0	0.1
95% CI	± %	1.0	0.6	0.8	1.9	0.8	1.4	1.3	2.0	0.2

**RSE** = Relative standard error. **CI** = confidence interval.

- (a) Proportion of people who saw a dental professional for their own health in the last 12 months (excluding interviews by proxy) reporting the dental professional always or often: listened carefully, showed respect, and spent enough time with them.
- (b) Data are crude rates and may differ from data in previous reports in which rates were age-standardised.
- (c) Data for the NT should be interpreted with caution as the Patient Experience Survey excluded discrete Aboriginal and Torres Strait Islander communities, which comprise around 25 per cent of the estimated resident population of the NT living in private dwellings.
- (d) For more information on data quality, including collection methodologies and data limitations, see the Patient Experience Survey (cat. no. 4839.0) on the ABS website.
- (e) 'Other' includes inner and outer regional, remote and very remote areas.
- (f) For 2013-14 and subsequent years, cells have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.
  - .. Not applicable. Nil or rounded to zero. **np** Not published.

Source: ABS unpublished, Patient Experience Survey, various years, Cat. no. 4839.0.

Table 10A.68 Client experience of dental professionals by remoteness, Australia (a), (b), (c), (d)

		lia (a), (b), (	-,, (,		Remote/Very	
	Unit	Major CIties	Inner regional	Outer regional	remote	Total
2012-13						
Dental professio	nal alway	s or often listen	ed carefully			
Proportion	%	95.3	93.2	93.8	95.0	94.8
RSE	%	0.3	0.6	1.0	1.3	0.2
95% CI	± %	0.5	1.1	1.8	2.5	0.4
Dental professio					2.0	<b>.</b>
Proportion	%	96.5	94.6	96.0	96.8	96.1
RSE	%	0.3	0.5	0.6	1.2	0.2
95% CI	± %	0.6	0.9	1.1	2.3	0.5
Dental professio				1.1	2.0	0.0
Proportion	mai aiway: %	s or orteri speri 95.9	95.0	96.2	95.8	95.8
RSE	%	0.2	0.6	0.7	93.6	0.2
95% CI	± %	0.2	1.1	1.3	2.6	0.2
	_ /0	0.4	1.1	1.3	2.0	0.4
2013-14 (c)	nal alway	a ar aftan liatan	and parafully			
Dental professio	nai aiway: %		-	02.5	04.0	04.0
Proportion RSE	%	95.0	93.3	93.5	94.8	94.6
	± %	0.4 0.7	3.0	1.1	3.5	1.0
95% CI			5.5	2.1	6.5	1.9
Dental professio	=			04.0	05.0	05.5
Proportion	%	96.0	94.1	94.3	95.2	95.5
RSE	%	0.4	0.3	1.2	3.5	0.2
95% CI	± %	0.8	0.6	2.3	6.5	0.5
Dental professio	-	•	•			
Proportion	%	96.0	95.1	94.5	95.8	95.7
RSE	%	0.3	3.0	1.4	2.7	0.1
95% CI	± %	0.5	5.6	2.6	5.0	0.2
2014-15 (c)						
Dental professio	nal alway	s or often lister	ed carefully			
Proportion	%	94.7	94.4	92.9	95.5	94.5
RSE	%	0.3	1.0	1.3	4.3	0.2
95% CI	± %	0.6	1.8	2.3	8.1	0.4
Dental professio	nal alway	s or often show	ed respect			
Proportion	%	96.0	95.3	94.4	95.5	95.7
RSE	%	0.3	0.9	1.4	4.1	0.4
95% CI	± %	0.5	1.7	2.6	7.6	0.8
Dental professio	nal alway	s or often spen	t enough time			
Proportion	%	95.8	95.8	95.4	92.8	95.7
RSE	%	0.4	0.7	1.0	6.0	0.3
95% CI	± %	0.8	1.4	1.9	10.8	0.5
2015-16 (c)						

Table 10A.68 Client experience of dental professionals by remoteness, Australia (a), (b), (c), (d)

					Remote/Very	
	Unit	Major CIties	Inner regional	Outer regional	remote	Total
Dental professio	nal always	s or often lister	ned carefully			
Proportion	%	95.5	95.3	95.7	98.1	95.5
RSE	%	0.2	1.5	0.8	2.3	0.3
95% CI	± %	0.5	2.8	1.4	4.5	0.6
Dental professio	nal always	s or often shov	ved respect			
Proportion	%	96.3	96.4	95.8	98.0	96.3
RSE	%	0.3	1.1	0.9	2.7	0.1
95% CI	± %	0.5	2.0	1.7	5.1	0.3
Dental professio	nal always	s or often spen	it enough time			
Proportion	%	96.5	96.7	96.7	97.4	96.6
RSE	%	0.2	1.3	1.3	2.9	0.1
95% CI	± %	0.5	2.4	2.5	5.6	0.2

**RSE** = Relative standard error. **CI** = confidence interval.

- (a) Proportion of persons who saw a dental professional for their own health in the last 12 months (excluding interviews by proxy) reporting the dental professional always or often: listened carefully, showed respect, and spent enough time with them.
- (b) Data are crude rates and may differ from data in previous reports in which rates were age-standardised.
- (c) For 2013-14 and subsequent years, cells have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.
- (d) For more information on data quality, including collection methodologies and data limitations, see the Patient Experience Survey (cat. no. 4839.0) on the ABS website.

Source: ABS unpublished, Patient Experience Survey, various years, Cat. no. 4839.0.

Table 10A.69 Valid vaccinations supplied to children under seven years of age, by type of provider, 2011–2016 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (d)
Valid vaccinations provided										111()
GPs	no.	5 905 281	3 446 823	3 962 452	1 732 736	1 046 522	377 033	228 674	50 586	16 750 107
Council	no.	155 815	1 828 511	247 663	72 700	210 459	21 117	np	np	2 536 265
State or territory health department	no.	np	np	454	64 697	264	np	3 994	888	70 297
Public hospital	no.	56 928	74 305	123 157	27 575	8 366	1 884	1 108	17 004	311 529
Private hospital	no.	12	np	782	7	np	np	np	1 572	2 373
Aboriginal health service	no.	33 429	9 643	11 767	12 954	11 890	39	np	70 011	149 733
Community health centre	no.	390 360	13 810	261 899	572 095	86 567	384	131 750	175 284	1 632 930
Other (e)	no.	2 792	1 205	21 056	742	805	np	np	2 094	28 695
Total	no.	6 544 605	5 374 297	4 628 448	2 483 499	1 364 873	400 457	365 526	315 867	21 479 556
Proportion of total valid vaccina	ations									
GPs	%	90.2	64.1	85.6	69.8	76.7	94.2	62.6	16.0	78.0
Council	%	2.4	34.0	5.4	2.9	15.4	5.3	np	np	11.8
State or territory health department	%	np	np	_	2.6	_	np	1.1	0.3	0.3
Public hospital	%	0.9	1.4	2.7	1.1	0.6	0.5	0.3	5.4	1.5
Private hospital	%	<del>-</del>	np	_	<del>-</del>	np	np	np	0.5	_
Aboriginal health service	%	0.5	0.2	0.3	0.5	0.9	_	np	22.2	0.7
Community health centre	%	6.0	0.3	5.7	23.0	6.3	0.1	36.0	55.5	7.6
Other (e)	%	_	_	0.5	_	0.1	np	np	0.7	0.1
Total	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

<sup>(</sup>a) 1 July 2011 to 30 June 2016.

<sup>(</sup>b) Totals may not add as a result of rounding.

<sup>(</sup>c) Data reported by the State or Territory in which the immunisation provider is located.

Table 10A.69

Valid vaccinations supplied to children under seven years of age, by type of provider, 2011–2016 (a), (b), (c)

Unit NSW Vic Qld WA SA Tas ACT NT Aust (d)

Source: Department of Health unpublished, Australian Childhood Immunisation Register (ACIR) data collection.

<sup>(</sup>d) Includes data for unknown State or Territory.

<sup>(</sup>e) Other includes Flying Doctors Services, Aboriginal Health Workers, Community nurses, Private hospitals, Divisions of GP (for 2011) and unknown providers.

<sup>-</sup> Nil or rounded to zero. **np** Not published.

Table 10A.70 Children aged 12 months to less than 15 months who were fully immunised (per cent) (a), (b), (c), (d), (e)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (f)	Aust
Fully immunised (b)									
2007-08	91.6	91.9	91.1	89.4	91.0	92.3	93.6	90.7	91.3
2008-09	91.7	91.9	90.9	89.5	91.6	91.5	93.9	90.1	91.4
2009-10	91.8	92.1	91.8	89.7	91.2	92.5	93.1	89.9	91.6
2010-11	91.0	92.0	91.6	89.5	91.4	91.5	93.5	90.6	91.3
2011-12 (g)	91.6	92.6	91.6	90.3	92.3	92.5	93.2	91.8	91.8
2012-13	90.8	91.7	92.0	90.2	91.3	92.2	92.8	91.5	91.3
2013-14 (h)	89.7	90.8	91.2	90.1	90.2	89.8	93.0	90.8	90.4
2014-15 (h)	91.1	91.2	91.9	91.4	91.2	90.7	92.9	90.5	91.3
2015-16	92.9	93.0	93.2	92.6	93.0	93.5	94.5	93.0	93.0
Immunised against (2015-16)									
Diphtheria, tetanus and pertussis	93.8	94.0	93.8	93.4	93.7	93.9	95.3	93.7	93.8
Polio	93.8	94.0	93.8	93.4	93.7	93.9	95.2	93.6	93.8
Hepatitis B	93.7	93.8	93.8	93.1	93.6	94.0	95.1	94.0	93.7
Haemophilus influenzae type b	93.5	93.6	93.6	93.2	93.4	93.8	94.9	93.5	93.6
Pneumococcal	93.4	93.6	93.5	93.1	93.4	93.8	94.9	93.5	93.5

- (a) Coverage measured for all children immunised at the age of 12 months to less than 15 months, by the State or Territory in which the child resided.
- (b) Children assessed as fully immunised at 12 months are immunised against diphtheria, tetanus, pertussis (whooping cough), polio, hepatitis B, *Haemophilus influenzae* type b and, from the quarter ending 31 December 2013, pneumococcal.
- (c) The Australian Childhood Immunisation Register (ACIR) includes all children under 7 years of age who are registered with Medicare. By the age of 12 months, over 98 per cent of Australian children have been registered with Medicare (NCIRS 2000).
- (d) There may be some under-reporting by providers. Therefore, vaccine coverage estimates calculated using ACIR data are considered minimum estimates.
- (e) Reference periods comprise the complete financial year. Data may differ from other reports where a different reference period is used.
- (f) NT immunisation records differ from published ACIR data due to a review of a rule change implemented in 2009. As a result, all reports affected by the change were recalculated accounting for the anomaly.
- (g) Coverage rates were relatively low for the June 2011 quarter, associated with parents not receiving immunisation reminders due to administrative error. This may be reflected in relatively low coverage rates for 2010-11.
- (h) Immunisation against pneumococcal is included for assessment of children as fully immunised at 12 months from the quarter ending 31 December 2013.

Source: Department of Health unpublished, ACIR data collection.

Table 10A.71 Children aged 24 months to less than 27 months who were fully immunised (per cent) (a), (b), (c), (d), (e)

		<del>(.,, (,</del>	, (-), (	-,, (-,					
	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (f)	Aust
Fully immunised (b)									
2007-08	92.6	93.7	92.3	91.2	94.3	94.5	94.1	94.1	92.8
2008-09	92.6	93.7	92.1	90.9	92.6	93.7	94.2	93.8	92.6
2009-10	92.2	92.9	91.5	90.9	91.7	93.4	93.8	92.7	92.1
2010-11	92.4	93.5	92.9	91.0	92.6	94.2	93.5	94.1	92.7
2011-12	92.3	93.3	92.8	90.8	92.6	93.8	93.6	94.5	92.6
2012-13	92.3	93.1	92.6	90.6	92.5	94.2	93.2	93.4	92.4
2013-14 (g)	91.9	92.8	93.2	91.0	92.2	93.1	93.1	93.6	92.4
2014-15 (g)	88.8	89.6	90.4	87.7	87.9	87.5	91.4	89.3	89.2
2015-16	90.4	91.0	91.4	89.6	90.5	90.7	91.8	88.9	90.7
Immunised against (2015-16)									
Diphtheria, tetanus and pertussis	95.7	96.2	95.7	95.7	95.8	96.1	97.0	95.4	95.9
Polio	95.7	96.1	95.7	95.7	95.7	96.1	96.9	95.4	95.8
Hepatitis B	95.5	95.9	95.6	95.4	95.5	96.0	96.7	95.8	95.7
Haemophilus influenzae type b	94.7	95.3	95.0	94.7	94.8	95.1	95.9	94.4	95.0
Measles, mumps and rubella	92.2	92.6	92.6	91.2	92.4	93.0	93.4	91.5	92.3
Meningococcal C	94.6	94.9	94.9	94.1	94.5	95.0	95.5	94.3	94.7
Varicella	92.3	92.8	92.5	91.2	92.5	92.7	93.6	90.7	92.4

- (a) Coverage measured for children immunised at the age of 24 months to less than 27 months, by the State or Territory in which the child resided.
- (b) Children assessed as fully immunised at 24 months are immunised against diphtheria, tetanus, pertussis (whooping cough), polio, hepatitis B, *Haemophilus influenzae* type b, measles, mumps and rubella and, from the quarter ending 31 December 2014, meningococcal C and varicella (chickenpox).
- (c) The ACIR includes all children under 7 years of age who are registered with Medicare. By the age of 12 months, over 98 per cent of Australian children have been registered with Medicare (NCIRS 2000).
- (d) There may be some under-reporting by providers. Therefore, vaccine coverage estimates calculated using ACIR data are considered minimum estimates.
- (e) Reference periods comprise the complete financial year. Data may differ from other reports where a different reference period is used.
- (f) NT immunisation records differ from published ACIR data due to a review of a rule change implemented in 2009. As a result, all reports affected by the change were recalculated accounting for the anomaly.
- (g) A decrease in the proportion of children who were fully immunised from 2013-14 to 2014-15 is associated with the introduction of additional vaccines in the definition of fully immunised.

Source: Department of Health unpublished, ACIR data collection.

Table 10A.72 Children aged 60 months to less than 63 months who were fully immunised (per cent) (a), (b), (c), (d), (e)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (f)	Aust	
Fully immunised (b)									_	
2007-08	81.4	85.8	84.0	79.6	78.9	82.9	88.2	82.9	82.8	
2008-09	77.9	84.1	81.5	79.0	75.3	80.9	85.3	82.8	80.3	
2009-10	83.7	87.2	84.5	82.3	81.9	86.4	86.9	82.8	84.6	
2010-11	89.1	91.0	89.9	86.0	87.0	91.3	91.0	86.9	89.3	
2011-12	90.0	91.4	90.3	86.8	87.6	90.8	91.5	89.3	90.0	
2012-13	91.6	92.6	91.5	89.4	90.9	92.9	92.3	90.7	91.5	
2013-14	92.2	92.5	92.3	89.8	91.0	92.7	92.7	91.4	92.0	
2014-15	92.7	92.6	92.3	90.6	90.9	92.6	93.2	92.4	92.3	
2015-16	93.4	93.3	92.7	91.3	92.3	93.8	93.5	91.9	92.9	
Immunised against (2015-16)										
Diphtheria, tetanus and pertussis	94.0	93.9	93.3	92.0	93.0	94.5	94.1	92.7	93.5	
Polio	94.0	94.0	93.3	92.0	93.0	94.5	94.2	92.8	93.6	
Measles, mumps and rubella	94.0	94.0	93.2	92.2	93.0	94.5	94.3	93.1	93.6	

- (a) Coverage measured for children immunised at the age of 60 months to less than 63 months, by the State or Territory in which the child resided.
- (b) Children assessed as fully immunised at 60 months are immunised against diphtheria, tetanus, pertussis (whooping cough), polio and measles, mumps, rubella.
- (c) The ACIR includes all children under 7 years of age who are registered with Medicare. By the age of 12 months, over 98 per cent of Australian children have been registered with Medicare (NCIRS 2000).
- (d) There may be some under-reporting by providers. Therefore, vaccine coverage estimates calculated using ACIR data are considered minimum estimates.
- (e) Reference periods comprise the complete financial year. Data may differ from other reports where a different reference period is used.
- (f) NT immunisation records differ from published ACIR data due to a review of a rule change implemented in 2009. As a result, all reports affected by the change were recalculated accounting for the anomaly.

Source: Department of Health unpublished, ACIR data collection.

Table 10A.73 Notifications of measles, children aged 0–14 years (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Notifications										
2006-07	no.	np	_	np	np	_	_	_	_	4
2007-08	no.	18	np	4	np	np	_	_	np	27
2008-09	no.	3	18	20	np	_	np	_	_	44
2009-10	no.	5	np	np	np	np	_	_	_	11
2010-11	no.	37	6	7	5	_	_	np	np	58
2011-12	no.	20	np	_	np	_	_	4	_	27
2012-13	no.	86	np	np	3	3	_	_	np	96
2013-14	no.	28	26	19	10	10	_	_	18	111
2014-15	no.	5	22	14	9	_	3	6	np	60
2015-16	no.	4	11	np	_	5	_	_	_	21
Notifications per 1	00 000 children (0–14 years) (e)	)								
2006-07	per 100 000 children	np	_	np	np	_	_	_	_	0.1
2007-08	per 100 000 children	1.4	np	np	np	np	_	_	np	0.7
2008-09	per 100 000 children	np	1.8	2.3	np	_	np	_	_	1.1
2009-10	per 100 000 children	0.4	np	np	np	np	_	_	_	0.3
2010-11	per 100 000 children	2.7	0.6	8.0	1.1	_	_	np	np	1.4
2011-12	per 100 000 children	1.5	np	_	np	_	_	np	_	0.6
2012-13	per 100 000 children	6.2	np	np	np	np	_	_	np	2.2
2013-14	per 100 000 children	2.0	2.5	2.0	2.1	3.4	_	_	33.4	2.5
2014-15	per 100 000 children	0.4	2.0	1.5	1.8	_	np	8.2	np	1.4
2015-16	per 100 000 children	np	1.0	np	_	1.7	_	_	_	0.5

<sup>(</sup>a) Notification of the relevant State/Territory authority is required when measles is diagnosed. Available diagnostic tools make it uncommon for cases to go undiagnosed and therefore the 'notified fraction' for measles — the proportion of total cases for which notification is made — is expected to be high, with little variation between states and territories as well as over time.

<sup>(</sup>b) Cases defined based on Communicable Diseases Network Australia (CDNA) National Notifiable Diseases Surveillance System (NNDSS) case definitions.

Table 10A.73 Notifications of measles, children aged 0–14 years (a), (b), (c), (d)

Unit NSW Vic Qld WA SA Tas ACT NT Aust

- (c) Data are suppressed for number of notifications where number is less than 3 and for rates where numerator is less than 5.
- (d) Reference periods comprise the complete financial year. Data may differ from other reports that use a different reference period.
- (e) Rates are derived using the ERP as at December 31. Rates have been revised to the ABS' final 2011 Census rebased ERP and may differ from previous reports. See chapter 2 (table 2A.2) for details.
  - Nil or rounded to zero. **np** Not published.

Source: Department of Health unpublished, NNDSS; ABS unpublished, Australian Demographic Statistics, Cat. no. 3101.0.

Table 10A.74 Notifications of pertussis (whooping cough), children aged 0–14 years (a), (b), (c), (d), (e)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Notifications				·						
2006-07	no.	303	92	112	33	39	7	8	np	596
2007-08	no.	677	181	95	36	41	9	5	82	1 126
2008-09	no.	8 161	681	955	205	586	205	59	162	11 014
2009-10	no.	3 275	1 094	1 496	242	1 841	108	32	60	8 148
2010-11	no.	8 781	2 845	3 147	744	2 183	68	335	129	18 232
2011-12	no.	6 722	1 718	3 178	2 564	279	384	87	280	15 212
2012-13	no.	2 146	931	2 369	528	305	661	88	52	7 080
2013-14	no.	981	863	1 168	491	349	59	63	14	3 988
2014-15	no.	3 373	1 870	583	399	351	10	108	4	6 698
2015-16	no.	8 798	1 030	1 543	626	732	18	180	45	12 972
Notifications per 1	00 000 children (0-14 years) (f)									
2006-07	per 100 000 children	22.9	9.5	13.6	8.0	13.7	7.3	12.6	np	14.8
2007-08	per 100 000 children	50.8	18.5	11.3	8.6	14.3	9.3	7.8	158.2	27.7
2008-09	per 100 000 children	607.1	68.8	110.6	47.4	203.4	211.2	91.3	309.7	266.6
2009-10	per 100 000 children	241.6	109.3	170.6	55.0	635.6	111.4	48.8	113.9	195.0
2010-11	per 100 000 children	643.9	281.8	355.3	166.2	751.7	70.6	504.9	245.8	432.8
2011-12	per 100 000 children	493.0	169.2	355.1	561.1	96.1	403.5	129.3	534.2	359.1
2012-13	per 100 000 children	155.2	89.5	258.9	111.3	103.7	695.9	126.1	97.7	163.7
2013-14	per 100 000 children	69.7	81.5	125.7	100.9	117.9	62.2	88.3	26.0	90.7
2014-15	per 100 000 children	238.5	173.8	62.0	80.8	117.8	10.6	148.3	np	150.7
2015-16	per 100 000 children	613.7	94.1	162.8	125.2	244.6	19.2	242.3	83.6	288.4

<sup>(</sup>a) Notification of the relevant State/Territory authority is required when whooping cough is diagnosed. Diagnosis cannot always be confirmed using available tools. Therefore, the 'notified fraction' is likely to be only a proportion of the total number of cases. The notified fraction may vary between states and territories and over time.

<sup>(</sup>b) Cases defined based on Communicable Diseases Network Australia (CDNA) National Notifiable Diseases Surveillance System (NNDSS) case definitions.

Table 10A.74 Notifications of pertussis (whooping cough), children aged 0–14 years (a), (b), (c), (d), (e)

Unit NSW Vic Qld WA SA Tas ACT NT Aust

- (c) Epidemics of pertussis in Australia historically occur at regular intervals of approximately 4 years on a background of endemic circulation, resulting in large fluctuations in notification numbers over time. The large variations in pertussis notifications in states and territories during this reporting period are mainly due to a nationwide epidemic that commenced in 2008 and peaked in 2011. The timing of each jurisdiction's peak whooping cough activity varied during this time. They are currently experiencing increased levels of pertussis activity which began during 2014.
- (d) Data are suppressed for number of notifications where number is less than 3 and for rates where numerator is less than 5.
- (e) Reference periods comprise the complete financial year. Data may differ from other reports that use a different reference period.
- (f) Rates are derived using the ERP as at December 31. Rates have been revised to the ABS' final 2011 Census rebased ERP and may differ from previous reports. See chapter 2 (table 2A.2) for details.

np Not published.

Source: Department of Health unpublished, NNDSS; ABS unpublished, Australian Demographic Statistics, Cat. no. 3101.0.

Table 10A.75 Notifications of invasive Haemophilus influenzae type b, children aged 0-14 years (a), (b), (c), (d)

		•				_	_	. , ,	, , ,	
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Notifications										
2006-07	no.	4	3	8	np	_	_	-	_	17
2007-08	no.	7	_	np	_	np	np	_	np	12
2008-09	no.	3	np	3	np	_	_	_	np	11
2009-10	no.	np	_	np	np	np	_	_	np	6
2010-11	no.	6	np	np	np	_	_	_	_	12
2011-12	no.	_	_	np	np	np	_	_	np	7
2012-13	no.	np	3	3	_	_	_	_	_	8
2013-14	no.	5	np	5	np	_	_	_	np	13
2014-15	no.	4	np	3	_	_	_	_	np	9
2015-16	no.	np	np	3	3	np	_	_	np	11
Notifications per 1	100 000 children (0–14 years) (e)	)								
2006-07	per 100 000 children	0.3	0.3	1.0	np	_	_	_	_	0.4
2007-08	per 100 000 children	0.5	_	np	_	np	np	_	np	0.3
2008-09	per 100 000 children	np	np	np	np	_	_	_	np	0.3
2009-10	per 100 000 children	np	_	np	np	np	_	_	np	0.1
2010-11	per 100 000 children	0.4	np	np	np	_	_	_	_	0.3
2011-12	per 100 000 children	_	_	np	np	np	_	_	np	0.2
2012-13	per 100 000 children	np	np	np	_	_	_	_	_	0.2
2013-14	per 100 000 children	0.4	np	0.5	np	_	_	_	np	0.3
2014-15	per 100 000 children	np	np	np	_	_	_	_	np	0.2
2015-16	per 100 000 children	np	np	np	np	np	_	_	np	0.2

<sup>(</sup>a) Notification of the relevant State/Territory authority is required when invasive *Haemophilus influenzae* type b (Hib) is diagnosed. Available diagnostic tools make it uncommon for cases to go undiagnosed and therefore the 'notified fraction' for Hib — the proportion of total cases for which notification is made — is expected to be high, with little variation between states and territories as well as over time.

<sup>(</sup>b) Cases defined based on Communicable Diseases Network Australia (CDNA) National Notifiable Diseases Surveillance System (NNDSS) case definitions.

Table 10A.75 Notifications of invasive Haemophilus influenzae type b, children aged 0-14 years (a), (b), (c), (d)

Unit NSW Vic Qld WA SA Tas ACT NT Aust

- (c) Data are suppressed for number of notifications where number is less than 3 and for rates where numerator is less than 5.
- (d) Reference periods comprise the complete financial year. Data may differ from other reports that use a different reference period.
- (e) Rates are derived using the Estimated Resident Populations (ERP) as at December 31. Rates have been revised to the ABS' final 2011 Census rebased ERP and may differ from previous reports. See chapter 2 (table 2A.2) for details.
  - Nil or rounded to zero. **np** Not published.

Source: Department of Health unpublished, NNDSS; ABS unpublished, Australian Demographic Statistics, Cat. no. 3101.0.

Table 10A.76 Participation rates for women in BreastScreen Australia (24 month period) (a), (b), (c), (d), (e)

(24 monar period) (a), (b), (c), (d),											
	NSW	Vic (f)	Qld	WA	SA (g)	Tas	ACT (h)	NT	Aust (i)		
2010–2011											
40-44 years	5.8	5.0	21.4	9.9	8.6	22.4	7.4	2.7	9.7		
45–49 years	9.9	10.6	36.3	21.2	18.5	36.7	12.0	10.2	17.9		
50–54 years	43.8	51.3	53.6	53.5	53.2	50.0	42.1	35.0	49.3		
55–59 years	52.3	54.7	57.9	57.6	58.2	58.4	54.0	43.9	55.1		
60–64 years	56.2	59.0	61.3	61.3	62.4	63.9	60.1	47.8	59.1		
65–69 years	55.9	58.0	60.2	61.3	62.1	60.9	58.9	44.8	58.4		
70–74 years	16.0	17.4	54.7	21.4	25.5	16.8	21.1	9.0	24.9		
75–79 years	7.0	8.0	20.0	12.3	14.1	9.0	9.7	4.8	10.8		
80–84 years	2.7	2.9	5.7	4.9	6.0	3.6	3.0	2.9	3.8		
85+ years	0.6	0.6	1.4	1.2	1.1	0.7	0.7	0.7	0.8		
40+ years (ASR)	27.5	29.5	41.4	34.0	33.9	37.8	29.2	22.2	32.1		
Ages 50-69 (ASR)	50.9	55.1	57.6	57.7	58.1	57.2	52.1	41.9	54.6		
2011–2012											
40–44 years	6.1	6.3	20.8	10.1	9.0	22.5	8.7	2.5	10.1		
45–49 years	10.1	13.0	36.0	21.9	18.7	37.4	13.8	9.9	18.6		
50–54 years	43.1	50.6	52.6	53.5	54.3	50.5	42.8	36.1	48.9		
55–59 years	52.3	53.9	58.0	57.5	58.5	58.4	55.6	42.1	55.0		
60–64 years	57.2	59.2	62.0	62.1	63.5	64.5	63.0	47.5	59.9		
65–69 years	56.4	57.3	60.2	61.7	62.4	62.7	58.8	46.7	58.5		
70–74 years	16.4	20.1	54.6	22.0	26.3	17.2	21.5	10.2	25.9		
75–79 years	7.6	9.0	20.5	13.3	15.8	9.1	10.5	5.6	11.6		
80–84 years	2.9	3.5	5.8	5.4	6.8	3.6	3.3	2.0	4.1		
85+ years	0.6	0.7	1.5	1.4	1.3	0.6	0.9	0.9	0.9		
40+ years (ASR)	27.7	30.2	41.2	34.3	34.6	38.3	30.4	22.4	32.4		
Ages 50–69 (ASR)	51.0	54.5	57.4	57.9	58.8	57.8	53.4	42.0	54.6		
2012–2013											
40–44 years	6.8	8.9	21.8	11.2	9.6	24.2	10.9	8.7	11.5		
45–49 years	10.8	15.0	36.2	22.5	18.1	38.6	17.2	16.1	19.6		
50–54 years	44.7	51.4	52.9	52.9	49.2	51.1	44.7	37.2	49.3		
55–59 years	52.0	54.1	57.6	56.7	52.1	57.2	56.2	41.8	54.2		
60–64 years	57.5	59.1	62.7	61.3	57.5	64.4	63.9	45.8	59.5		
65–69 years	56.7	57.9	60.8	60.6	56.8	64.2	61.5	44.5	58.4		
70–74 years	25.7	25.4	54.4	22.9	28.1	19.0	28.1	15.4	30.8		
75–79 years	8.7	11.1	21.1	14.5	17.0	10.2	11.7	7.1	12.8		
80–84 years	3.1	4.4	6.1	6.1	7.2	4.0	3.8	3.1	4.6		
85+ years	0.7	1.0	1.6	1.4	1.5	0.6	0.8	1.1	1.1		
40+ years (ASR)	29.0	31.8	41.6	34.4	32.3	39.0	32.6	24.8	33.2		
To years (Aert)	_0.0										

Table 10A.76 Participation rates for women in BreastScreen Australia (24 month period) (a), (b), (c), (d), (e)

	NSW	Vic (f)	Qld	WA	SA (g)	Tas	ACT (h)	NT	Aust (i)
2013–2014 (j)									
40-44 years	6.9	9.8	22.5	11.4	9.7	24.6	12.5	10.7	12.0
45–49 years	10.7	14.3	36.2	21.6	18.6	36.7	18.4	17.7	19.3
50–54 years	44.1	51.5	52.1	49.2	48.5	50.1	44.7	35.0	48.5
55–59 years	50.6	52.7	57.1	53.6	53.6	55.5	54.5	41.4	53.0
60–64 years	56.5	58.5	62.0	58.3	61.1	62.3	62.2	42.6	58.7
65–69 years	56.4	57.9	61.4	58.9	61.7	62.7	62.1	42.7	58.6
70–74 years	37.4	33.5	54.5	46.6	38.3	41.5	40.9	19.6	40.8
75–79 years	9.3	11.7	21.5	15.8	17.2	9.9	12.2	9.8	13.5
80-84 years	3.2	4.5	6.2	6.5	7.4	3.9	4.2	3.3	4.7
85+ years	0.7	1.0	1.6	1.5	1.6	0.7	8.0	1.3	1.1
40+ years (ASR)	29.5	32.2	41.5	34.9	33.9	39.8	33.8	25.0	33.8
Ages 50-69 (ASR)	50.7	54.5	57.2	54.1	54.9	56.4	54.2	39.7	53.7
2014–2015 (j)									
40-44 years	6.4	8.2	22.0	11.2	9.5	24.0	11.5	7.6	11.2
45–49 years	9.9	12.7	35.5	21.4	19.7	35.8	16.1	13.9	18.5
50-54 years	44.6	51.2	51.7	49.7	52.5	50.9	48.1	32.8	48.9
55–59 years	50.9	51.7	56.8	53.5	57.6	56.6	54.9	38.3	53.1
60-64 years	56.8	57.3	61.0	58.9	63.6	62.3	61.3	41.1	58.6
65–69 years	57.7	57.7	61.6	60.4	65.2	65.2	63.0	42.0	59.5
70–74 years	46.6	42.7	55.1	56.3	51.9	52.1	48.7	24.8	48.7
75–79 years	9.9	11.8	21.6	16.1	18.1	7.9	12.3	10.6	13.8
80–84 years	3.3	4.5	6.2	6.8	7.5	2.9	4.2	2.3	4.8
85+ years	0.7	1.0	1.7	1.7	1.7	0.5	0.9	8.0	1.1
40+ years (ASR)	30.3	32.1	41.2	35.8	36.8	40.6	34.4	23.3	34.2
Ages 50–69 (ASR)	51.2	53.8	56.8	54.6	58.5	57.4	55.4	37.7	54.0
Ages 50-74 (ASR)	50.6	52.2	56.6	54.8	57.6	56.7	54.4	35.8	53.2

**ASR** = age standardised rate.

- (a) The participation rate is the number of women screened during the reference period as a percentage of the eligible female population, calculated as the average of the Australian Bureau of Statistics (ABS) ERP in each of the calendar years in the reference period. Reference periods are from 1 January at commencement to 31 December at end of the 24 month period.
  - Age standardised rates are standardised to the Australian population at 30 June 2001.
- (b) Participation rates for women 40 years or over and the target age group are age standardised to the 2001 Australian population standard.
- (c) BreastScreen Australia changed its target age group from 50–69 years to 50–74 years from July 2013; participation is reported for both the previous and current target age groups to allow comparision of trends with previously reported data.
- (d) Data include all women screened in the jurisdiction. Data may differ from previous reports, which included only participants resident in the jurisdiction in which screening took place. Data are sourced from the AIHW from the 2017 Report.
- (e) Reference periods are 2 calendar years, commencing 1 January of the first year and ending 31 December of the second year.

Table 10A.76

# Participation rates for women in BreastScreen Australia (24 month period) (a), (b), (c), (d), (e)

NSW Vic (f) Qld WA SA (g) Tas ACT (h) NT Aust (i)

- (f) Residents of Victorian postcodes allocated to the Albury/Wodonga catchment (NSW jurisdiction) are included in Victoria's population estimate, accounting for the slight decrease in participation rates compared to those published by BreastScreen Victoria.
- (g) The fall in the participation rate for SA in 2012–2013 reflects a temporary reduction in the total number of women screened, instigated to best manage a Digital Mammography System Wide Review and implementation of the review recommendations, concurrent with the introduction of a new client information system. The participation rates in ensuring years illustrate a return to forecasted participation rates.
- (h) In general, 99 per cent or more of women screened are residents of the jurisdiction in which screening took place. In the ACT, 2.0 per cent of women screened in the 24 months 2013–2014 were not ACT residents, a decline from 7–9 per cent of women screened in previous 24 month periods. The decline reflects a change in arrangements between the ACT and NSW, whereby from November 2013 a limited number of ACT screening appointments are available for NSW residents who work in the ACT. Previously, the ACT provided screening services to residents in some southern parts of NSW.
- (i) BreastScreen Australia services are not provided in some remote areas of the Northern Territory. This may affect the Northern Territory's participation.
- (j) Data for 2013--2014 and 2014--2015 are preliminary and are subject to revision.

Source: AIHW 2015 and 2016, Participation in BreastScreen Australia 2013–2014 and 2014–2015; AIHW various years, BreastScreen Australia monitoring report 2012-2013, Cancer series no. 95. Cat. no. CAN 93 and previous editions.

Table 10A.77 Participation rates for Aboriginal and Torres Strait Islander women screened by BreastScreen Australia (24 month period) (first and subsequent rounds)

	NSW	Vic (d)	Qld \	<i>NA</i> (e)	SA	Tas	ACT (f)	NT	Aust
2010–2011		/	·	` '					
Aged 40–49 years	5.8	4.6	19.3	12.1	6.7	16.1	6.9	3.0	10.4
Aged 50-59 years	25.2	22.7	38.8	27.9	26.8	29.9	29.2	25.4	29.4
Aged 60–69 years	33.1	29.2	45.5	34.3	28.8	43.0	52.4	28.1	36.0
Aged 70–79 years	8.7	8.4	32.0	13.5	12.4	19.8	33.3	6.1	15.3
Aged 80+ years	1.6	4.1	3.3	5.6	0.6	_	_	2.8	2.7
Age 40+ years (ASR)	16.1	14.5	30.0	20.1	16.6	24.1	24.3	14.1	20.3
Age 50-69 years (ASR)	28.3	25.2	41.4	30.4	27.6	35.1	38.3	26.5	32.0
2011–2012									
Aged 40–49 years	6.5	5.9	19.9	13.3	7.0	15.9	6.6	3.6	11.1
Aged 50-59 years	26.4	22.6	39.8	31.5	27.6	27.8	28.8	24.0	30.3
Aged 60-69 years	35.2	31.0	46.5	36.1	28.8	30.8	40.4	29.3	37.4
Aged 70–79 years	9.3	8.1	32.9	16.5	16.0	37.7	106.7	5.1	16.3
Aged 80+ years	2.4	2.6	4.0	6.0	0.6	_	_	2.3	3.0
Age 40+ years (ASR)	17.2	15.1	30.8	22.3	17.4	23.7	32.1	13.9	21.2
Age 50–69 years (ASR)	29.9	25.9	42.5	33.3	28.1	29.0	33.4	26.1	33.1
2012–2013									
Aged 40–49 years	7.2	7.4	22.3	13.6	6.7	18.1	8.6	10.5	12.9
Aged 50-59 years	27.9	26.8	41.8	32.2	25.3	30.5	27.9	27.3	32.0
Aged 60–69 years	36.6	36.0	49.9	37.8	30.5	26.2	28.7	31.1	39.7
Aged 70–79 years	12.8	12.9	33.8	16.8	15.1	2.9	4.6	10.3	18.7
Aged 80+ years	3.4	2.1	5.0	6.5	1.8	_	_	4.5	3.9
Age 40+ years (ASR)	18.7	18.2	33.0	23.0	16.9	19.6	16.3	18.4	23.1
Age 50–69 years (ASR)	31.3	30.4	45.0	34.4	27.4	28.8	np	28.8	35.1
2013–2014									
Aged 40–49 years	7.4	8.2	24.0	13.5	7.4	19.3	9.6	13.7	14.0
Aged 50-59 years	29.4	30.3	42.9	31.2	28.1	31.4	31.6	27.2	33.1
Aged 60-69 years	38.7	37.9	51.9	35.9	31.7	28.8	32.9	30.0	41.1
Aged 70–79 years	20.3	14.8	35.4	20.3	16.5	np	np	16.1	23.3
Aged 80+ years	3.7	3.3	5.6	6.0	2.9	np	np	5.6	4.4
Age 40+ years (ASR)	20.6	20.2	34.5	22.8	18.4	np	np	20.1	24.7
Age 50–69 years (ASR)	33.0	33.3	46.5	33.1	29.5	30.4	32.1	28.3	36.3
2014–2015									
Aged 40–49 years	7.8	8.0	24.9	12.2	6.9	18.8	10.0	11.7	13.9
Aged 50–59 years	31.1	30.9	44.8	30.6	31.0	33.7	35.9	24.7	34.2
Aged 60–69 years	41.9	40.3	51.8	33.1	35.8	30.7	35.2	28.7	42.1
Aged 70–79 years	25.2	19.8	38.4	25.8	23.2	np	np	17.9	27.5
Aged 80+ years	3.9	2.8	5.7	6.1	4.5	np	np	2.9	4.4
Age 40+ years (ASR)	22.4	21.3	35.7	22.4	20.8	np	np	18.6	25.7
Age 50–69 years (ASR)	35.4	34.6	47.6	31.6	32.9	32.5	35.7	26.3	37.3
Age 50–74 years (ASR)	35.3	33.3	47.6	31.6	32.5	np	np	25.7	37.1
<b>ASR</b> = age standardised rate.						•	•		

<sup>(</sup>a) Rates are derived using populations that are revised to the ABS 2011 Census rebased population estimates and projections and may differ from previous reports.

### Table 10A.77 Participation rates for Aboriginal and Torres Strait Islander women screened by BreastScreen Australia (24 month period) (first and subsequent rounds)

NSW Vic (d) Qld WA (e) SA Tas ACT (f) NT Aust

- (b) The participation rate is the number of women resident in the catchment area screened in the reference period, divided by the number of women resident in the catchment area in the reference period based on Australian Bureau of Statistics (ABS) ERP data. Where service boundaries cross State localised areas, calculation of resident women is made on a proportional basis. If a woman is screened more than once during the reference period then only the first screen is counted. Catchment area: a geographic region based on service size in relation to the population, accessibility and the location of other services. It is uniquely defined for each service based on postcode or Statistical Local Area (SLA). Reference periods are from 1 January at commencement to 31 December at end of the 24 month period.
- (c) Aboriginal and/or Torres Strait Islander women are women who self-identified as being of Aboriginal and/or Torres Strait Islander descent.
- (d) Residents of Victorian postcodes allocated to the Albury/Wodonga catchment (NSW jurisdiction) are included in Victoria's population estimate, accounting for the slight decrease in participation rates compared to those published by BreastScreen Victoria.
- (e) Data for WA may include some Aboriginal and/or Torres Strait Islander women usually resident in the NT in in WA catchment areas.
- (f) In general, 99 per cent or more of women screened are residents of the jurisdiction in which screening took place. In the ACT, 2.0 per cent of women screened in the 24 months 2013–2014 were not ACT residents, a decline from 7–9 per cent of women screened in previous 24 month periods. The decline reflects a change in arrangements between the ACT and NSW, whereby from November 2013 a limited number of ACT screening appointments are available for NSW residents who work in the ACT. Previously, the ACT provided screening services to residents in some southern parts of NSW.
  - Nil or rounded to zero. **np** Not published.

Source: State and Territory governments unpublished; ABS 2014, Experimental Estimates And Projections, Aboriginal And Torres Strait Islander Australians, 2001 to 2026, Cat. no. 3238.0.

Table 10A.78 Participation rates for NESB women screened by BreastScreen Australia (24 month period) (first and subsequent rounds) (per cent)

Australia	(24 11101	ıtıı per	iou) (ii	ist allu	Subs	equent	Tourius)	(hei	Centy
	NSW	Vic (d)	Qld	WA	SA	Tas (e)	ACT (f)	NT	Aust
2010–2011									
Aged 40–49 years	7.6	4.9	29.0	14.3	11.6	19.0	3.1	4.1	9.8
Aged 50–59 years	46.4	40.7	59.3	59.4	48.3	40.0	20.6	34.6	46.5
Aged 60–69 years	52.9	48.9	65.7	69.7	60.4	53.0	27.3	43.0	54.0
Aged 70–79 years	7.6	8.7	41.1	14.7	14.2	10.1	4.1	6.6	11.8
Aged 80+ years	1.1	0.9	2.8	2.2	1.8	2.1	0.7	2.7	1.3
Aged 40+ years (ASR)	25.9	22.8	43.7	35.8	30.1	28.4	12.2	19.7	27.5
Aged 50–69 years (ASR)	49.0	43.9	61.8	63.4	53.1	45.1	23.3	38.0	49.5
2011–2012									
Aged 40–49 years	6.9	7.3	29.4	15.2	12.2	19.1	3.5	4.6	10.5
Aged 50–59 years	43.3	47.8	59.6	59.2	48.2	39.3	21.3	34.7	47.4
Aged 60–69 years	51.9	55.0	65.9	71.3	57.8	51.2	28.3	42.1	55.6
Aged 70–79 years	7.3	10.6	40.3	15.2	13.6	9.8	4.4	6.2	12.3
Aged 80+ years	0.9	1.2	3.2	2.5	2.2	2.1	0.8	1.6	1.5
Aged 40+ years (ASR)	24.6	27.0	43.9	36.4	29.7	27.9	12.8	19.6	28.3
Aged 50–69 years (ASR)	46.7	50.6	62.1	64.0	52.0	44.0	24.0	37.7	50.6
2012–2013									
Aged 40–49 years	7.2	8.9	30.4	16.0	12.1	19.9	5.7	13.0	11.4
Aged 50–59 years	44.4	49.5	60.2	58.6	43.4	43.2	22.8	37.9	48.2
Aged 60–69 years	53.5	56.4	66.8	70.5	50.2	50.9	30.2	42.3	56.3
•		12.8	39.3	70.5 15.9	14.6	11.5	6.4	10.6	15.3
Aged 70–79 years	13.0								
Aged 80+ years	1.0	1.5	3.4	3.0	2.5	1.7		2.5	1.7
Aged 40+ years (ASR)	26.1	28.6	44.4	36.5	27.2	29.4		24.0	29.4
Aged 50–69 years (ASR)	48.0	52.2	62.8	63.3	46.1	46.2	25.7	39.6	51.4
2013–2014									
Aged 40–49 years	7.0	9.1	30.9	15.8	12.5	21.0	5.8	16.6	11.6
Aged 50–59 years	44.9	50.6	61.0	54.9	46.3	42.9	24.2	37.7	48.8
Aged 60–69 years	54.5	57.1	67.6	69.2	56.0	49.0	34.5	41.3	57.3
Aged 70–79 years	16.8	17.6	38.4	31.5	19.0	19.7	14.9	16.0	20.1
Aged 80+ years	1.0	1.6	3.3	3.4	2.6	1.7	0.6	3.3	1.8
Aged 40+ years (ASR)	26.8	29.8	44.8	37.4	29.8	30.5	16.9	25.8	30.5
Aged 50–69 years (ASR)	48.7	53.2	63.6	60.5	50.1	45.3	28.3	39.2	52.1
2014–2015									
Aged 40–49 years	6.7	8.5	31.2	16.5	14.2	22.2	6.4	14.4	11.4
Aged 50–59 years	46.2	49.9	62.3	56.9	53.7	42.8		37.8	49.9
Aged 60–69 years	56.5	56.1	68.5	72.1	62.4	51.4		42.0	58.5
Aged 70–79 years	21.3	21.6	38.2	37.5	26.1	23.2	na	18.8	20.6
Aged 80+ years	1.0	1.8	3.2	3.3	2.8	1.3	0.9	2.5	1.8
Aged 40+ years (ASR)	28.1	29.7	45.4	39.5	34.5	31.7		25.5	31.0
Aged 50–69 years (ASR)	50.3	52.3	64.7	62.9	57.1	46.2		39.4	53.3
Aged 50–74 years (ASR)	47.8	49.5	62.7	62.1	54.4	44.4		37.1	50.8
•									

### Table 10A.78 Participation rates for NESB women screened by BreastScreen Australia (24 month period) (first and subsequent rounds) (per cent)

NSW Vic (d) Qld WA SA Tas (e) ACT (f) NT Aus

**ASR** = age standardised rate. **NESB** = Non English speaking background.

- (a) The participation rate is the number of NESB women residents in the catchment area screened in the reference period, divided by the estimated number of NESB women resident in the catchment area in that period. The female NESB population estimate is derived by applying the NESB age distribution from the 2011 Census to the Australian Bureau of Statistics (ABS) female ERP data for the relevant year. Where service boundaries cross State localised areas, calculation of resident women is made on a proportional basis. If a woman is screened more than once during the reference period then only the first screen is counted. Catchment area: a geographic region based on service size in relation to the population, accessibility and the location of other services. It is uniquely defined for each service based on postcode or Statistical Local Area (SLA). Reference periods are from 1 January at commencement to 31 December at end of the 24 month period.
- (b) Estimated Resident Populations (ERPs) to June 2011 used to derive rates are revised to the ABS' final 2011 Census rebased ERPs and rates may differ from those published in previous reports. The final ERP replaces the preliminary 2006 Census based ERPs used in the 2013 Report. ERP data from June 2012 are first preliminary estimates based on the 2011 Census. See Chapter 2 (table 2A.1) for details.
- (c) NESB is defined as persons who speak a language other than English at home.
- (d) Residents of Victorian postcodes allocated to the Albury/Wodonga catchment (NSW jurisdiction) are included in Victoria's population estimate, accounting for the slight decrease in participation rates compared to those published by BreastScreen Victoria.
- (e) An apparent drop in participation of NESB women in Tasmania occurred from the 2005–2006 screening period and coincided with a significant reduction in self-reporting of NESB status that followed a change in the client registration form in 2006. Since revision of the form in May 2009, both self-reporting of NESB status and participation rates are returning to earlier levels. The observed drop in participation, therefore, appears to reflect the drop in self reporting of NESB status rather than reduced participation.
- (f) In general, 99 per cent or more of women screened are residents of the jurisdiction in which screening took place. In the ACT, 2.0 per cent of women screened in the 24 months 2013–2014 were not ACT residents, a decline from 7–9 per cent of women screened in previous 24 month periods. The decline reflects a change in arrangements between the ACT and NSW, whereby from November 2013 a limited number of ACT screening appointments are available for NSW residents who work in the ACT. Previously, the ACT na Not available.

Source: State and Territory governments unpublished; ABS various years, *Population by Age and Sex, Australian States and Territories*, Cat. no. 3201.0; ABS unpublished, *2011 Census of Population and Housing*.

Table 10A.79 Participation rates for women tested for Breast cancer in the last 2 years, by geographic location (a), (b), (c), (d), (e)

	iast	2 year	s, by g	jeogra	pnic ic	cation (	a), (b),	(c), (a	), (e)	
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
40 years+										
Major cities										
Proportion	%	39.4	45.1	51.7	44.9	40.2		36.7		43.6
RSE	%	5.8	5.2	5.4	5.7	5.0		7.8		2.9
95 per cent confidence interval	±	4.5	4.6	5.5	5.0	3.9		5.6		2.5
Inner Regional		1.0	1.0	0.0	0.0	0.0	••	0.0	••	2.0
Proportion	%	31.0	40.4	44.7	37.3	50.2	43.8			38.0
RSE	%	7.5	11.3	7.7	12.9	8.9	4.8			2.0
95 per cent confidence		7.0	11.0	, . ,	12.0	0.0	4.0	••	••	2.0
interval	±	4.6	8.9	6.8	9.5	8.8	4.1			1.5
Outer regional										
Proportion	%	57.2	41.0	46.2	26.9	39.4	51.0		36.2	43.5
RSE	%	9.5	24.6	11.7	27.4	7.6	9.5		13.8	8.3
95 per cent confidence interval	±	10.7	19.8	10.6	14.4	5.9	9.5		9.8	7.1
Remote										
Proportion	%			np	78.5	np	np		56.8	46.4
RSE	%			np	8.3	np	np		15.7	17.0
95 per cent confidence interval	±			np	12.0	np	np		17.5	15.5
Very remote				пр	12.0	ΠP	пр	••	17.5	10.0
Proportion	%									
RSE	%							••		
95 per cent confidence interval	±		••	••		••		••		••
5069 years		••	••	••	••		••	••	••	••
Major cities										
Proportion	%	50.0	50.0	00.5	50.0	50.0		40.7		50.0
•		52.2	58.6	63.5	56.2	56.8		48.7		56.9
RSE	%	6.1	5.8	6.8	6.3	5.4		8.9		3.2
95 per cent confidence interval	±	6.2	6.6	8.5	7.0	6.0		8.5		3.5
Inner Regional										
Proportion	%	38.3	52.0	62.8	38.2	76.2	51.5			50.6
RSE	%	9.7	16.4	10.6	32.7	21.9	6.5			5.5
95 per cent confidence interval	±	7.3	16.7	13.0	24.5	14.1	6.6			5.5
Outer regional										
Proportion	%	76.1	34.3	56.1	49.5	40.7	68.8		41.7	58.5
95 per cent confidence interval	±	20.1	30.8	14.2	22.8	14.7	10.9		14.6	8.8
Remote		20.1	55.5		0			••	1 1.0	0.0
Proportion	%			np	86.3	np	np		56.6	63.1
RSE	%			np	39.0	np	np		26.5	24.7
95 per cent confidence interval	±			np	23.3	np	np		29.4	25.4
		••	••	٠٠٣	_0.0	٠٠٣	٠.٣	••		

Table 10A.79 Participation rates for women tested for Breast cancer in the last 2 years, by geographic location (a), (b), (c), (d), (e)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
%									
%									
±									
%	52.1	58.7	64.7	55.8	56.3		48.3		56.6
±	6.1	6.3	7.9	6.9	5.5		7.8		3.5
%	39.3	55.8	62.7	56.5	67.2	55.1			51.2
%									4.2
	0.0	10.0	0. 1		0.0	1.0		••	
±	6.8	14.8	10.3	12.3	5.2	5.1			4.2
0.4									
									58.2
%	15.1	21.9	13.9	20.6	5.9	9.4		16.2	7.6
±	20.6	21.6	14.8	19.5	6.3	12.5		14.4	8.6
%			np	74.2	74.9	np		70.4	51.3
%			np	23.5	27.8	np		19.2	15.3
±			np	34.1	22.9	np		26.6	15.4
		-							
%									
%									
±		-	-		-				
					••				
%	24.0	28.8	30 1	31.2	23.0		2/ 1		29.0
									5.7
±									
	7.1	6.4	7.9	7.5	7.8		1.2		3.2
0/2	24.0	07.0	40.4	24.0		20.0			04.0
					-				21.3
70	23.0	29.2	28.8	39.1	np	22.4		••	15.2
±	14.0	15.6	10.4	26.3	np	12.4			6.3
%	38.8	np	31.4	np	29.8	41.6		24.9	31.8
%	37.3	np	37.2	np	34.3	20.5		28.8	18.2
±	28.4	np	22.9	np	20.1	16.7		14.0	11.4
	%% ± %% ± %% ± %% ± %% %	%  ½  ½  % 52.1  ½ 6.1  % 39.3  % 8.8  ½ 6.8  % 69.6  % 15.1  ½ 20.6  %  %  ½  %  ½  %  ½  %  ½  %  ½  %  ½  %  ½  %  ½  %  ½  %  ½  %  ½  %  ½  %  ½  %  ½  %  ½  %  ½  %  %  ½  %  ½  %  %  ½  %  %  %  ½  %  %  ½  %  %  ½  %  %  ½  %  %  ½  %  %  %  %  %  ½  %  %  %  %  ½  %	%  ½  ½  % 52.1 58.7  ½ 6.1 6.3  % 39.3 55.8  % 8.8 13.6  ½ 6.8 14.8  % 69.6 50.3  % 15.1 21.9  ½ 20.6 21.6  %  ½  %  ½  %  ½  %  ½  %  %  ½  %  ½  %  %  %	%	%	%	%	%	%

Table 10A.79 Participation rates for women tested for Breast cancer in the last 2 years, by geographic location (a), (b), (c), (d), (e)

	เลอเ	z yeai	s, by t	jeogra	pine io	cation (	(a), (D),	, (C), (u	), ( <del>e</del> )	
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Remote										
Proportion	%				np	71.7			33.6	39.4
RSE	%				np	36.1			48.8	44.9
95 per cent confidence interval	±				np	50.7			32.2	34.7
Very remote										
Proportion	%									
RSE	%									
95 per cent confidence interval	±									
5059 years										
Major cities										
Proportion	%	49.4	59.9	62.2	54.9	54.6		43.5		56.2
RSE	%	9.6	8.2	8.3	7.9	8.5		14.9		4.1
95 per cent confidence interval	±	9.3	9.7	10.1	8.5	9.1		12.7		4.6
Inner Regional										
Proportion	%	24.1	56.1	71.9	np	88.5	47.2			46.4
RSE	%	35.7	23.3	9.6	np	28.1	10.3			9.1
95 per cent confidence interval	±	16.8	25.6	13.6	np	18.4	9.6			8.3
Outer regional							0.0			0.0
Proportion	%	71.2	64.0	46.7	80.7	np	68.8		29.6	54.4
RSE	%	26.4	23.1	22.3	48.3	np	11.1		33.5	12.4
95 per cent confidence interval	±	36.9	29.0	20.4	35.5	np	15.0		19.4	13.2
Remote										
Proportion	%				66.2				46.4	60.2
RSE	%				31.2				31.2	14.4
95 per cent confidence interval	±				40.5				28.4	17.0
Very remote										
Proportion	%									
RSE	%									
95 per cent confidence interval	±									
6074 years Major cities										
Proportion	%	56.2	56.2	62.4	58.4	55.4		58.9		57.6
RSE	%	7.6	6.4	8.7	7.8	6.8		8.1		4.0
95 per cent confidence interval	±	8.4	7.1	10.6	9.0	7.4		9.4		4.5
Inner Regional		0.4	1.1	10.0	ð.U	1.4	••	9.4	••	4.3
Proportion	%	43.0	61.6	63.3	66.5	63.6	57.7			53.4
RSE	%	13.9	11.2	8.5	13.6	23.8	7.6	••		5.5
	,,	10.8	11.4	0.5	13.0	25.0	1.0			5.5

Table 10A.79 Participation rates for women tested for Breast cancer in the last 2 years, by geographic location (a), (b), (c), (d), (e)

	เลอเ	Z yeai	s, by g	jeogra	ibilic id	Jealion	(a), (b)	, (C), (u	ı), ( <del>e</del> )	
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
95 per cent confidence	±									
interval	1	11.7	13.5	10.5	17.7	29.6	8.6			5.7
Outer regional										
Proportion	%	68.9	61.0	73.6	55.2	71.4	77.7		58.3	63.5
RSE	%	15.8	25.1	11.9	27.6	13.6	11.8		17.8	7.4
95 per cent confidence interval	±	21.4	30.0	17.2	29.9	16.6	18.0		20.3	9.2
Remote										
Proportion	%				100.0	np	np		88.8	np
RSE	%				0.0	np	np		31.3	np
95 per cent confidence interval	±				0.0	np	np		54.4	np
Very remote					0.0				•	
Proportion	%									
RSE	%									
95 per cent confidence interval	±									
75+ years					••					
Major cities										
Proportion	%	15.6	24.2	21.2	21.1	12.6		19.6		19.9
RSE	%	34.1	26.6	32.9	26.5	31.0		43.3		12.2
95 per cent confidence interval	±	10.4	12.6	13.7	11.0	7.7		16.6		4.8
Inner Regional		10.4	12.0	10.7	11.0	1.1		10.0		4.0
Proportion	%	22.4	np	np	np	np	17.1			19.2
RSE	%	29.8	np	np	np	np	29.6			20.2
95 per cent confidence interval	±	13.1	-	-			9.9			7.6
Outer regional		13.1	np	np	np	np	9.9		••	7.0
Proportion	%	27.3	0.0	np	0.0	np	np		np	10.5
RSE	%	44.7	0.0	np	0.0	np	np		np	41.0
95 per cent confidence		77.7	0.0	пр	0.0	пр	пр		пр	41.0
interval	±	23.9	0.0	np	0.0	np	np		np	8.5
Remote				'		'	•		'	
Proportion	%								np	np
RSE	%								np	np
95 per cent confidence interval	±								np	np
Very remote				••					٠١٢	יוף
Proportion	%									
RSE	%							••		
95 per cent confidence			••	••	••	••	••		••	
interval	±									

<sup>(</sup>a) Rates are not aged standardised

<sup>(</sup>b) There are no very remote areas in Victoria; no major cities in Tasmania; no outer regional, remote or very remote areas in the ACT; and no inner regional or major cities in the NT.

Table 10A.79

# Participation rates for women tested for Breast cancer in the last 2 years, by geographic location (a), (b), (c), (d), (e)

Unit NSW Vic Qld WA SA Tas ACT NT Aust

- (c) Data were not collected for Very remote areas.
- (d) Data for the NT should be interpreted with caution as the National Health Survey excluded discrete Aboriginal and Torres Strait Islander communities and very remote areas, which comprise around 28 per cent of the estimated resident population of the NT living in private dwellings.
- (e) Cells in this table containing data have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.
  - .. Not applicable. np Not published.

Source: Australian Bureau of Stastics (ABS) unpublished, National Health Survey 2014-15, Cat. no. 4364.0.

Table 10A.80 Participation rates for women in cervical screening programs, by age group (per cent) (24 month period) (a), (b), (c), (d), (e)

ay							), (C), (U), (		
	NSW	Vic (e)	Qld	WA	SA	Tas	ACT (e)	NT	Aust
Target age group (20–6	69 years)	)							
Crude rates									
2006 and 2007	58.8	62.7	58.5	58.6	62.3	59.1	61.0	53.1	60.0
2007 and 2008	58.9	61.9	58.9	57.7	61.4	57.4	60.2	55.8	59.6
2008 and 2009	57.7	61.6	58.1	57.9	60.8	57.3	59.0	57.0	59.0
2009 and 2010	56.1	61.1	56.3	56.9	59.9	57.2	57.6	55.1	57.8
2010 and 2011	55.8	59.8	55.3	55.5	59.5	55.4	56.6	53.7	56.9
2011 and 2012	56.4	60.4	55.5	55.6	59.1	56.3	56.2	54.0	57.3
2012 and 2013	56.9	60.9	56.0	55.5	58.7	57.0	57.0	55.2	57.7
2013 and 2014	56.6	59.6	56.0	55.7	59.1	57.6	56.9	55.4	57.3
2014 and 2015	55.3	59.2	54.5	55.7	58.6	57.0	55.4	54.4	56.4
Age standardised rates	S								
2006 and 2007	58.9	63.0	58.5	58.5	62.5	59.3	61.3	52.3	60.1
2007 and 2008	59.1	62.2	59.0	57.6	61.6	57.6	60.6	55.1	59.8
2008 and 2009	58.0	62.1	58.3	57.9	61.1	57.5	59.6	56.5	59.3
2009 and 2010	56.5	61.7	56.6	57.1	60.2	57.4	58.5	54.9	58.2
2010 and 2011	56.2	60.5	55.6	55.7	59.9	55.6	57.7	53.6	57.3
2011 and 2012	56.8	61.1	55.8	55.9	59.4	56.6	57.2	53.8	57.7
2012 and 2013	57.4	61.6	56.4	55.9	59.0	57.4	58.0	55.1	58.2
2013 and 2014	57.0	60.3	56.4	56.1	59.4	57.9	57.9	55.2	57.8
2014 and 2015	55.8	59.9	54.8	56.1	58.9	57.3	56.2	54.3	56.9
By age group (years)									
2006 and 2007									
20–24	45.3	48.1	51.4	52.1	51.1	54.7	50.6	51.2	48.7
25–29	56.7	58.9	59.0	59.4	61.2	60.4	58.7	54.4	58.4
30–34	62.9	64.5	61.7	62.2	65.1	62.4	63.5	54.8	63.0
35–39	64.2	66.8	62.2	62.9	66.3	62.7	64.9	55.4	64.3
40–44	63.9	67.6	62.1	62.5	66.6	62.7	64.7	54.8	64.4
45–49	64.8	69.4	63.0	62.7	67.1	62.5	64.3	55.3	65.4
50–54	62.0	67.4	59.7	59.1	65.2	60.3	63.8	51.7	62.7
55–59	58.8	65.1	56.6	56.3	62.3	56.9	63.5	50.0	59.9
60–64	54.8	61.7	52.8	51.2	59.2	53.0	60.3	45.2	56.1
65–69	46.8	55.4	46.3	45.8	53.9	46.9	54.6	40.4	49.4
20–69 years	58.8	62.7	58.5	58.6	62.3	59.1	61.0	53.1	60.0
20–69 years (ASR)	58.9	63.0	58.5	58.5	62.5	59.3	61.3	52.3	60.1
2007 and 2008									
20–24	44.5	46.6	51.5	51.3	49.4	53.5	49.7	52.7	47.9
25–29	56.0	57.1	58.4	57.7	59.5	58.0	58.0	56.5	57.2
30–34	62.6	63.2	61.8	60.3	63.7	60.9	62.0	57.1	62.3

Table 10A.80 Participation rates for women in cervical screening programs, by age group (per cent) (24 month period) (a), (b), (c), (d), (e)

	c grou	p (per ce	111) (44		period	) (a), (b)	,, (c), (a), (	<del></del>	
	NSW	Vic (e)	Qld	WA	SA	Tas	ACT (e)	NT	Aust
35–39	64.3	66.1	62.3	61.8	64.8	61.8	64.6	59.0	64.0
40–44	64.2	67.1	62.5	61.5	65.7	60.6	63.4	57.7	64.2
45–49	65.0	68.7	63.6	61.6	66.8	61.0	64.3	57.7	65.2
50-54	62.6	67.0	61.0	59.0	65.1	57.8	63.4	56.0	63.0
55–59	59.8	65.3	58.0	55.9	62.6	55.7	64.4	53.7	60.5
60–64	55.8	61.8	54.1	52.0	59.1	51.5	59.2	48.5	56.7
65–69	47.1	54.8	47.4	45.2	53.8	44.5	52.5	41.2	49.4
20–69 years	58.9	61.9	58.9	57.7	61.4	57.4	60.2	55.8	59.6
20-69 years (ASR)	59.1	62.2	59.0	57.6	61.6	57.6	60.6	55.1	59.8
2008 and 2009									
20–24	42.1	44.2	48.8	50.2	47.4	51.6	46.6	52.4	45.6
25–29	53.5	55.5	56.2	56.8	57.8	56.2	55.3	56.5	55.3
30–34	61.1	63.3	60.9	60.6	62.8	60.5	60.8	58.6	61.6
35–39	63.2	66.2	61.7	62.1	64.9	61.2	62.7	59.3	63.6
40–44	63.2	67.3	62.1	62.3	65.4	60.5	63.5	61.2	64.0
45–49	64.0	69.0	63.1	62.1	66.3	61.5	64.0	60.0	64.9
50-54	61.9	67.8	61.2	60.1	65.2	59.1	62.8	59.1	63.2
55–59	59.9	66.3	58.4	56.7	62.8	57.0	63.9	53.8	61.0
60–64	56.1	63.2	54.7	53.5	59.8	53.0	61.1	50.4	57.6
65–69	47.9	55.5	47.8	45.4	53.5	45.7	52.8	43.3	50.0
20–69 years	57.7	61.6	58.1	57.9	60.8	57.3	59.0	57.0	59.0
20–69 years (ASR)	58.0	62.1	58.3	57.9	61.1	57.5	59.6	56.5	59.3
2009 and 2010									
20–24	39.8	42.8	46.3	48.4	45.9	50.5	43.4	50.2	43.6
25–29	51.0	53.9	53.8	55.2	56.0	55.3	53.8	53.5	53.2
30–34	58.8	62.2	58.1	59.3	61.3	59.9	60.0	56.4	59.8
35–39	61.0	65.2	59.4	60.6	64.2	60.5	60.4	57.3	61.9
40–44	61.7	67.0	60.3	61.1	64.4	60.7	62.6	58.8	62.8
45–49	62.8	69.2	61.6	61.9	65.7	61.5	62.4	58.8	64.1
50-54	61.1	68.4	60.4	59.7	64.4	59.5	62.6	57.2	62.8
55–59	59.4	66.3	57.8	57.0	62.7	57.7	63.1	54.0	60.7
60–64	56.4	64.1	54.9	53.9	60.4	54.3	61.7	50.9	58.1
65–69	48.2	55.8	47.3	45.5	53.1	46.8	54.0	43.4	50.0
20–69 years	56.1	61.1	56.3	56.9	59.9	57.2	57.6	55.1	57.8
20-69 years (ASR)	56.5	61.7	56.6	57.1	60.2	57.4	58.5	54.9	58.2
2010 and 2011									
20–24	39.3	41.7	44.9	46.9	45.0	49.8	40.9	49.0	42.6
25–29	50.4	52.3	52.1	53.2	55.1	54.6	52.9	52.2	52.0
30–34	57.9	59.8	56.3	57.1	61.3	57.6	57.7	54.6	58.2

Table 10A.80 Participation rates for women in cervical screening programs, by age group (per cent) (24 month period) (a), (b), (c), (d), (e)

ay	age group (per cent) (24 month period) (a), (b), (c), (d), (e)									
	NSW	Vic (e)	Qld	WA	SA	Tas	ACT (e)	NT	Aust	
35–39	60.1	63.4	57.8	58.6	63.1	58.4	60.0	56.3	60.4	
40–44	61.2	65.6	58.8	59.2	64.1	59.1	60.4	55.9	61.7	
45–49	62.3	68.2	60.8	60.7	65.6	58.6	61.8	57.6	63.4	
50–54	61.8	67.7	60.0	58.8	64.2	57.0	63.9	55.4	62.6	
55–59	59.4	65.8	57.6	56.5	63.1	56.4	62.4	54.8	60.5	
60–64	57.3	64.4	55.6	54.0	61.1	52.9	62.5	50.9	58.6	
65–69	48.9	55.7	47.5	45.8	53.3	44.7	55.2	42.7	50.3	
20–69 years	55.8	59.8	55.3	55.5	59.5	55.4	56.6	53.7	56.9	
20-69 years (ASR)	56.2	60.5	55.6	55.7	59.9	55.6	57.7	53.6	57.3	
2011 and 2012										
20–24	39.7	42.1	44.8	46.7	45.2	49.6	40.5	50.6	42.8	
25–29	50.6	52.6	52.4	53.2	55.0	56.1	52.3	52.4	52.2	
30–34	58.1	59.7	56.6	56.9	60.5	57.3	57.0	54.9	58.2	
35–39	60.4	63.7	58.1	58.4	62.1	59.4	59.8	55.0	60.6	
40–44	61.5	66.1	58.8	59.2	63.0	59.7	60.6	56.2	61.9	
45–49	63.0	68.8	61.1	61.1	65.2	60.8	62.1	58.4	63.9	
50–54	62.8	68.7	60.2	59.7	63.5	58.3	62.4	55.9	63.3	
55–59	60.2	66.8	58.2	56.7	62.8	57.4	61.6	54.1	61.2	
60–64	58.4	65.9	55.8	55.1	61.1	54.0	62.5	50.7	59.5	
65–69	50.6	57.1	48.0	47.0	53.2	46.4	54.7	43.5	51.5	
20–69 years	56.4	60.4	55.5	55.6	59.1	56.3	56.2	54.0	57.3	
20–69 years (ASR)	56.8	61.1	55.8	55.9	59.4	56.6	57.2	53.8	57.7	
2012 and 2013										
20–24	39.5	42.3	44.7	45.8	44.8	49.9	41.3	52.4	42.7	
25–29	50.6	52.4	52.4	52.7	54.1	56.5	51.3	53.0	52.0	
30–34	58.1	59.4	56.8	56.6	59.8	58.7	57.9	56.6	58.1	
35–39	61.2	63.7	58.6	58.7	61.5	60.6	60.7	55.7	61.0	
40–44	62.6	66.8	59.8	59.1	62.6	60.3	61.9	58.0	62.6	
45–49	63.8	69.5	61.9	61.3	64.5	61.3	63.4	59.6	64.5	
50–54	63.6	69.8	61.2	59.6	63.5	59.9	62.6	58.0	64.0	
55–59	61.0	67.8	59.1	57.0	62.6	57.2	63.5	55.3	61.9	
60–64	59.4	67.0	56.9	55.1	61.5	55.5	63.0	51.7	60.4	
65–69	51.7	59.0	49.5	47.7	53.9	47.0	56.5	43.0	52.7	
20–69 years	56.9	60.9	56.0	55.5	58.7	57.0	57.0	55.2	57.7	
20–69 years (ASR)	57.4	61.6	56.4	55.9	59.0	57.4	58.0	55.1	58.2	
2013 and 2014										
20–24	39.0	41.2	44.7	46.1	45.6	50.3	40.6	50.9	42.3	
25–29	49.9	51.1	51.8	52.7	54.0	57.2	51.0	53.6	51.4	
30–34	57.3	57.8	56.6	56.7	59.9	59.8	58.1	58.2	57.4	
00 0 <del>1</del>	01.0	57.0	50.0	50.1	55.5	55.0	50.1	JU.Z	57.4	

Table 10A.80 Participation rates for women in cervical screening programs, by age group (per cent) (24 month period) (a), (b), (c), (d), (e)

	NSW	Vic (e)	Qld	WA	SA	Tas	ACT (e)	NT	Aust
35–39	60.7	62.1	58.6	58.7	61.9	60.7	60.3	56.3	60.4
40–44	62.1	65.0	60.0	59.3	62.9	60.7	61.4	57.3	62.1
45–49	63.6	67.9	61.9	61.6	64.7	61.4	63.4	59.8	64.1
50–54	63.6	68.5	61.3	59.8	64.6	60.5	63.0	58.2	63.9
55–59	61.1	67.1	59.3	57.5	62.3	57.6	63.4	54.6	61.8
60–64	59.4	66.4	56.9	55.4	62.3	56.5	62.6	51.4	60.3
65–69	52.7	59.3	50.1	48.9	54.8	48.1	57.8	44.5	53.5
20–69 years	56.6	59.6	56.0	55.7	59.1	57.6	56.9	55.4	57.3
20–69 years (ASR)	57.0	60.3	56.4	56.1	59.4	57.9	57.9	55.2	57.8
2014 and 2015									
20–24	37.7	40.5	43.6	46.3	45.4	49.5	40.6	50.8	41.5
25–29	48.4	50.6	50.4	52.9	53.5	57.5	49.7	53.7	50.5
30–34	55.7	56.9	55.1	56.6	58.6	58.5	56.7	56.7	56.3
35–39	58.6	61.1	56.6	58.3	61.2	59.3	57.6	55.7	59.0
40–44	60.4	64.3	58.0	58.8	62.6	59.9	59.1	55.4	60.8
45–49	62.2	67.3	60.0	60.6	63.7	61.2	61.2	57.2	62.9
50–54	62.5	68.3	59.5	60.0	63.8	59.7	61.8	57.3	63.0
55–59	60.5	66.9	58.0	57.8	62.5	56.9	60.5	53.7	61.3
60–64	58.8	66.3	55.4	55.9	62.0	55.8	60.7	49.9	59.8
65–69	53.3	60.8	49.6	50.2	55.9	49.4	56.9	45.4	54.2
20–69 years	55.3	59.2	54.5	55.7	58.6	57.0	55.4	54.4	56.4
20–69 years (ASR)	55.8	59.9	54.8	56.1	58.9	57.3	56.2	54.3	56.9

#### **ASR** = age standardised rate.

- (a) Rates are the number of women screened as a proportion of the eligible female population calculated as the average of the Australian Bureau of Statistics estimated resident population based on the 2011 Census in each of the calendar years in the reference period. Age-standardised rates are standardised to the 2001 Australian standard population.
- (b) The eligible female population has been adjusted for the estimated proportion of women who have had a hysterectomy, using age-specific hysterectomy fractions derived from the AIHW National Hospitals Morbidity Database. Historical data may differ from data in previous reports for which hysterectomy fractions were estimated using a different methodology.
- (c) Data exclude women who have opted off the cervical cytology register.
- (d) Reference periods are from 1 January at commencement to 31 December at end of the 24 month period.
- (e) Number of women screened includes all women screened in each jurisdiction (not just those women resident in each jurisdiction) with the exception of: Victoria, for the reference periods 2005–2006 and 2007–2008, where only residents of the jurisdiction are included; the ACT, where only residents of the jurisdiction (and in some cases some immediate border residents) are included. Data may differ from data published elsewhere in which allocation of women to jurisdictions is by residential postcode.

Source: AIHW unpublished, State and Territory Cervical Cytology Registry data.

Table 10A.81 Cervical screening rates among Aboriginal and Torres Strait Islander women aged 20 to 69 years, who reported having a Pap smear at least every 2 years (per cent)

						•				
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2004-05										
Age standardised rate (a)	%	41.5	44.6	53.1	42.6	48.0	52.7	53.2	68.5	49.5
RSE	%	7.3	14.4	7.1	6.4	9.1	9.8	12.2	7.9	3.3
95 per cent confidence interval	%	± 8.9	± 16.5	± 6.8	± 7.6	± 9.7	± 9.5	± 11.7	± 5.9	± 3.4
2012-13										
Age standardised rate (a)	%	53.2	59.0	53.0	49.0	58.5	54.7	54.2	53.8	53.4
RSE	%	5.2	6.0	6.2	6.4	6.4	7.3	11.7	6.6	2.8
95 per cent confidence interval	%	± 5.5	± 6.9	± 6.5	± 6.2	± 7.4	± 7.9	± 12.4	± 7.0	± 2.9

**RSE** = Relative standard error.

Source: ABS unpublished, *National Aboriginal and Torres Strait Islander Health Survey, 2004-05*, Cat. no. 4715.0; ABS unpublished, *Australian Aboriginal and Torres Strait Islander Health Survey, 2012-13* (National Aboriginal and Torres Strait Islander Health Survey component), Cat. no. 4727.0.

<sup>(</sup>a) Rates are age standardised by State and Territory, to the 2001 Australian population standard.

Table 10A.82 Influenza vaccination coverage, people aged 65 years or over (a), (b)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2003										
People vaccinated	'000	663	499	328	172	186	52	23	5	1 928
Target population	'000	869	642	448	219	225	67	29	8	2 508
People vaccinated	%	76.3	77.7	73.1	78.4	82.8	76.7	80.7	68.1	76.9
2004										
People vaccinated	'000	716	541	353	181	188	53	24	6	2 062
Target population	'000	907	664	465	230	231	69	30	9	2 605
People vaccinated	%	78.9	81.6	75.8	78.7	81.4	77.3	80.0	67.5	79.1
2006										
People vaccinated	'000	710	565	364	194	200	57	25	6	2 121
Target population	'000	945	693	498	246	238	72	32	10	2 735
People vaccinated	%	75.1	81.4	73.1	78.7	83.9	79.2	77.8	63.3	77.5
2009										
People vaccinated	'000	720	550	410	200	200	60	28	8*	2,200
Target population	'000	990	740	550	270	250	77	36	12	2 900
People vaccinated	%	72.7	75.0	74.6	72.9	81.3	77.5	78.0	69.3*	74.6

<sup>(</sup>a) A '\*' indicates a relative standard error (RSE) of more than 25 per cent. Estimates with RSEs greater than 25 per cent should be used with caution.

Source: AIHW 2004, 2005, 2011, Adult Vaccination Survey: Summary Results, Cat. no. PHE 51, PHE 56, PHE 135; Department of Health unpublished, 2006 Adult Vaccination Survey.

<sup>(</sup>b) The Adult Vaccination Survey was not conducted in 2005, 2007, 2008 or 2010.

Table 10A.83 Proportion of Aboriginal and Torres Strait Islander people aged 50 years or over who were fully vaccinated against influenza and pneumococcal disease (a)

	•		•			` '				
	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2004-05										
Proportion	%	18.8	23.0	36.6	29.6	35.9	32.7	8.6	54.7	31.1
Relative standard error	%	19.7	23.8	11.1	13.1	19.8	14.9	54.0	8.9	6.2
2012-13										
Proportion	%	23.3	24.4	27.1	24.4	25.7	17.5	14.4	33.7	25.3
Relative standard error	%	11.9	16.6	13.6	14.7	18.4	20.5	41.3	14.5	6.3

<sup>(</sup>a) Vaccinations against influenza and pneumococcal disease have been available free to Aboriginal and Torres Strait Islander people aged 50 years or over since 1999.

Source: ABS unpublished, National Aboriginal and Torres Strait Islander Health Survey, 2004-05, Cat. no. 4715.0; ABS unpublished, Australian Aboriginal and Torres Strait Islander Health Survey, 2012-13 (National Aboriginal and Torres Strait Islander Health Survey, 2012-10.

<sup>(</sup>b) Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

Table 10A.84 Separations for selected potentially preventable hospitalisations, by State and Territory (per 1000 people) (a), (b), (c), (d)

	NSW	Vic	Qld	WA	SA	Tas (e)	ACT	NT	Aust (b)
Vaccine-preventable conditions	(f)								
2007-08	0.6	0.7	0.7	0.7	0.9	0.4	0.7	2.7	0.7
2008-09	0.6	0.7	0.6	0.6	0.7	0.5	0.5	2.8	0.6
2009-10	0.6	0.6	8.0	0.7	0.7	0.6	0.5	2.9	0.7
2010-11	0.5	0.7	0.7	0.6	8.0	0.4	0.3	3.0	0.7
2011-12	0.6	0.7	8.0	0.6	8.0	0.5	0.5	3.2	0.7
2012-13	0.7	8.0	1.1	1.0	1.1	1.0	8.0	3.7	0.9
2013-14	1.1	1.3	1.2	1.2	1.5	0.7	0.9	7.6	1.3
2014-15	1.6	1.6	1.9	1.4	2.3	0.8	1.4	8.4	1.8
Acute conditions									
2007-08	10.5	11.4	11.8	11.3	12.0	9.0	9.0	18.2	11.2
2008-09	10.2	11.2	12.2	11.3	11.9	8.2	9.7	20.2	11.2
2009-10	10.2	11.3	12.4	11.3	12.1	8.5	8.1	19.7	11.2
2010-11	10.7	11.9	12.9	12.7	12.6	8.3	9.1	20.2	11.8
2011-12	10.9	12.1	12.9	13.7	12.9	8.4	9.6	21.2	12.1
2012-13	10.8	10.2	13.8	13.6	13.6	9.9	9.3	20.5	11.8
2013-14	10.9	10.6	14.3	12.9	13.0	10.7	9.5	21.6	12.0
2014-15	11.0	10.9	14.9	12.4	13.1	11.3	9.4	21.3	12.2
Chronic conditions									
2007-08	12.6	14.6	15.6	13.3	14.6	13.6	9.4	24.6	14.0
2008-09	12.3	14.0	14.8	13.2	14.2	12.3	11.0	24.0	13.5
2009-10	12.2	14.1	14.5	13.3	13.4	11.8	9.8	23.7	13.4
2010-11	10.2	12.1	12.5	11.2	11.7	9.2	8.7	23.3	11.4
2011-12	10.5	11.9	12.7	11.1	11.5	9.2	8.6	21.6	11.4
2012-13	10.4	10.8	12.9	11.3	11.9	10.1	8.3	22.1	11.3
2013-14	10.5	11.1	12.6	10.7	11.4	10.8	8.1	21.3	11.2
2014-15	10.3	11.6	13.2	10.6	11.6	10.5	8.4	22.4	11.4
All notentially preventable bosp	italications (f)								

All potentially preventable hospitalisations (f)

Table 10A.84 Separations for selected potentially preventable hospitalisations, by State and Territory (per 1000 people) (a), (b), (c), (d)

	NSW	Vic	Qld	WA	SA	Tas (e)	ACT	NT	Aust (b)
2007-08	23.6	26.6	28.0	25.2	27.4	22.8	19.1	45.0	25.8
2008-09	23.0	25.9	27.6	25.0	26.7	20.9	21.1	46.6	25.3
2009-10	23.0	25.9	27.6	25.2	26.1	20.8	18.2	45.8	25.2
2011-12	22.0	24.6	26.3	25.4	25.1	18.0	18.7	45.6	24.1
2012-13	21.9	21.7	27.7	25.7	26.4	20.8	18.2	45.8	23.9
2013-14	22.4	22.9	27.9	24.6	25.6	22.0	18.5	48.9	24.4
2014-15	22.7	23.9	29.8	24.3	26.6	22.5	19.0	50.2	25.2

- (a) Rates are age-standardised to the 2001 Australian standard population.
- (b) Separation rates are based on state or territory of usual residence, not state or territory of hospitalisation. Separations for patients usually resident overseas are excluded. Totals include Australian residents of external Territories.
- (c) Caution should be used in comparing data over time as there have been changes between the International Statistical Classification of Diseases and Related Health Problems, Australian Modification (ICD-10-AM) editions and the associated Australian Coding Standards.
- (d) For more information on data quality, including collection methodologies and data limitations, see METeOR on the AIHW website.
- (e) Data for Tasmania are not comparable over time as 2008-09 data exclude two private hospitals that account for approximately one eighth of Tasmania's total hospital separations, while data for subsequent reference years include these hospitals.
- (f) Changes to the coding standard for Viral hepatitis in the 8th edition of ICD-10-AM may account for a proportion of the increase in the rate of vaccine preventable conditions. See Appendix A of AIHW 2015 Admitted patient care 2013–14: Australian hospital statistics for more details.

Source: AIHW unpublished, Admitted patient care 2014–15: Australian hospital statistics; ABS unpublished, Estimated Resident Population, 30 June preceding the reference period.

Table 10A.85 Separations for selected potentially preventable hospitalisations by Indigenous status (per 1000 people) (a), (b), (c), (d), (e)

	1000 μεσρίε) (α), (υ), (υ), (υ)									
	NSW	Vic	Qld	WA	SA	Tas (f), (g)	ACT (f)	NT	Aust (d)	
Vaccine preventable conditions (h)										
Aboriginal and Torres Strait Isl	ander people									
2007-08	1.1	1.1	1.6	3.7	3.0	0.6	1.4	7.2	2.3	
2008-09	1.1	1.1	1.4	2.8	2.8	0.2	1.0	7.3	2.1	
2009-10	1.4	1.0	3.1	4.5	3.0	0.6	0.1	8.3	3.0	
2010-11	1.1	1.1	2.5	3.2	2.8	0.3	0.4	9.4	2.7	
2011-12	1.1	1.5	2.0	3.8	2.9	0.4	1.3	9.6	2.7	
2012-13	1.4	1.3	2.8	4.7	3.7	1.4	3.3	11.6	3.4	
2013-14	2.9	3.5	4.8	13.2	8.6	1.0	1.8	26.5	7.5	
2014-15	3.9	5.1	9.2	11.5	10.5	np	np	30.7	9.4	
Other Australians (i)										
2007-08	0.6	0.7	0.7	0.6	0.9	0.4	0.7	1.1	0.7	
2008-09	0.6	0.7	0.6	0.5	0.6	0.5	0.5	1.0	0.6	
2009-10	0.6	0.6	0.7	0.6	0.7	0.6	0.5	0.9	0.6	
2010-11	0.5	0.7	0.7	0.5	8.0	0.4	0.3	0.9	0.6	
2011-12	0.6	0.7	8.0	0.5	8.0	0.5	0.5	1.1	0.7	
2012-13	0.7	0.8	1.1	0.9	1.0	0.9	0.7	1.3	0.9	
2013-14	1.1	1.3	1.1	0.9	1.3	0.7	0.9	2.2	1.2	
2014-15	1.5	1.6	1.7	1.1	2.2	0.8	1.4	2.0	1.6	
Acute conditions										
Aboriginal and Torres Strait Isl	ander people									
2007-08	17.2	13.4	25.8	39.4	27.7	6.1	12.7	38.0	24.4	
2008-09	16.4	14.3	26.0	35.4	27.0	5.6	12.4	43.0	24.2	
2009-10	16.2	14.3	24.9	35.0	27.6	7.5	8.9	43.3	23.9	
2010-11	18.0	18.0	27.2	40.3	29.3	7.6	12.4	42.9	26.2	
2011-12	19.6	19.6	27.2	42.0	31.4	7.9	17.4	45.1	27.4	
2012-13	20.8	13.9	28.8	41.5	30.7	6.5	19.7	43.1	27.5	

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Table 10A.85 Separations for selected potentially preventable hospitalisations by Indigenous status (per 1000 people) (a), (b), (c), (d), (e)

	rood people) (	<u>~/, (~/, (o/, </u>	(4), (4)						
	NSW	Vic	Qld	WA	SA	Tas (f), (g)	ACT (f)	NT	Aust (d)
2013-14	21.4	16.4	30.3	41.4	29.8	9.2	19.3	44.8	28.5
2014-15	20.9	17.3	30.2	40.1	29.4	10.8	19.7	43.9	28.2
Other Australians (i)									
2007-08	10.4	11.5	11.4	10.4	11.8	9.1	9.0	10.6	10.9
2008-09	10.2	11.3	11.8	10.5	11.8	8.3	9.6	10.8	10.9
2009-10	10.2	11.4	12.0	10.6	11.9	8.6	8.0	10.3	10.9
2010-11	10.6	11.9	12.4	11.8	12.4	8.3	9.0	11.2	11.5
2011-12	10.8	12.2	12.4	12.7	12.6	8.4	9.5	11.7	11.7
2012-13	10.7	10.3	13.3	12.7	13.4	10.0	9.1	11.4	11.4
2013-14	10.7	10.7	13.6	12.0	12.7	10.8	9.3	12.1	11.6
2014-15	10.8	11.0	14.3	11.5	12.9	11.4	9.2	12.3	11.8
hronic conditions									
Aboriginal and Torres Strait Isl	ander people								
2007-08	29.9	21.3	44.1	57.2	50.2	11.7	23.9	52.4	39.1
2009-10	28.2	25.0	41.2	50.5	39.1	10.9	16.6	57.7	37.1
2010-11	25.0	22.5	34.5	43.6	34.4	10.7	26.6	54.0	32.6
2011-12	29.3	26.7	35.2	43.0	35.3	14.3	24.3	54.0	34.8
2012-13	27.7	20.5	36.8	41.0	35.1	14.7	14.8	52.9	33.8
2013-14	30.6	22.9	33.4	42.2	39.8	13.6	27.8	50.6	34.4
2014-15	28.9	24.8	36.1	43.9	35.2	15.2	np	53.0	34.8
Other Australians (i)									
2007-08	12.5	14.8	15.0	12.4	14.5	13.6	9.3	16.6	13.7
2008-09	12.2	14.2	14.2	12.4	14.2	12.3	10.8	15.5	13.2
2009-10	12.1	14.2	13.9	12.4	13.3	11.8	9.6	13.8	13.1
2010-11	10.1	12.3	12.0	10.5	11.6	9.2	8.5	13.4	11.1
2011-12	10.3	12.0	12.1	10.4	11.5	9.1	8.5	11.9	11.1
2012-13	10.2	10.9	12.3	10.5	11.8	9.9	8.0	11.7	10.9
2013-14	10.2	11.1	12.0	9.9	11.2	10.6	7.9	10.9	10.8

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Table 10A.85 Separations for selected potentially preventable hospitalisations by Indigenous status (per 1000 people) (a), (b), (c), (d), (e)

	NSW	Vic	Qld	WA	SA	<i>Tas</i> (f), (g)	ACT (f)	NT	Aust (d)
2014-15	10.1	11.6	12.5	9.8	11.4	10.3	8.2	11.2	11.0
All potentially preventable hospita	ilisations (j)								
Aboriginal and Torres Strait I	slander people								
2007-08	48.0	35.7	70.9	98.8	80.3	18.2	38.0	95.8	65.2
2008-09	46.9	38.3	71.2	89.6	75.1	19.1	37.9	102.6	64.3
2009-10	45.6	40.0	68.4	88.9	69.2	18.7	25.6	107.4	63.3
2010-11	44.0	41.4	63.6	86.4	66.1	18.6	39.5	104.3	60.9
2011-12	49.9	47.5	63.8	88.2	69.0	22.4	43.1	107.0	64.4
2012-13	49.7	35.5	67.7	86.4	68.8	22.2	36.6	105.3	64.0
2013-14	54.5	42.2	67.5	94.4	76.8	23.5	48.9	115.1	68.8
2014-15	53.0	46.6	73.7	93.4	73.4	26.8	49.1	120.5	70.7
Other Australians (i)									
2007-08	23.5	26.9	27.0	23.4	27.1	23.0	18.9	28.2	25.2
2008-09	22.9	26.1	26.6	23.3	26.5	21.1	20.9	27.2	24.6
2009-10	22.8	26.1	26.5	23.6	25.8	20.9	18.0	24.8	24.5
2010-11	21.2	24.8	25.0	22.7	24.8	17.8	17.8	25.4	23.2
2011-12	21.7	24.7	25.1	23.6	24.8	17.9	18.4	24.6	23.4
2012-13	21.5	21.8	26.4	24.0	26.0	20.8	17.8	24.4	23.1
2013-14	21.9	23.0	26.5	22.7	25.1	22.1	18.0	25.0	23.5
2014-15	22.3	24	28.3	22.3	26.1	22.3	18.5	25.2	24.3

<sup>(</sup>a) Rates are age-standardised to the 2001 Australian standard population.

<sup>(</sup>b) Cells have been suppressed to protect confidentiality where a patient or service provider could be identified.

<sup>(</sup>c) Cell sizes are small for some categories and rates may be statistically volatile.

<sup>(</sup>d) Separation rates are based on state or territory of usual residence, not state or territory of hospitalisation. Separations for patients usually resident overseas are excluded. Totals include Australian residents of external Territories.

<sup>(</sup>e) Caution should be used in comparing data over time as there have been changes between the International Statistical Classification of Diseases and Related Health Problems, Australian Modification (ICD-10-AM) editions and the associated Australian Coding Standards.

**Table 10A.85** 

# Separations for selected potentially preventable hospitalisations by Indigenous status (per 1000 people) (a), (b), (c), (d), (e)

NSW Vic Qld WA SA Tas (f), (g) ACT (f) NT Aust (d)

- (f) For 2010-11 and subsequent years, Indigenous status data for Tasmania and the ACT are of sufficient quality for statistical reporting purposes. For 2009-10 and previous years, data for Tasmania and the ACT were not included in national totals and should be interpreted with particular caution.
- (g) Data for Tasmania are not comparable over time as 2008-09 data exclude two private hospitals that account for approximately one eighth of Tasmania's total hospital separations, while data for subsequent reference years include these hospitals.
- (h) Changes to the coding standard for Viral hepatitis in the 8th edition of ICD-10-AM may account for a proportion of the increase in the rate of vaccine preventable conditions. See Appendix A of AIHW 2015 Admitted patient care 2013–14: Australian hospital statistics for more details.
- Other Australians includes separations where Indigenous status was not stated.
- (j) More than one category may be reported during the same hospitalisation. Therefore, the total is not necessarily equal to the sum of the components.
- (k) For more information on data quality, including collection methodologies and data limitations, see Experimental Estimates and Projections, Aboriginal and Torres Strait Islander Australians, 2001 to 2026 (cat. No. 3238.0) on the ABS website and/or METeOR on the AIHW website.

np Not published.

Source: AIHW unpublished, National Hospital Morbidity Database; ABS unpublished, Estimated Resident Population, 30 June preceding the reference period. ABS 2014, Experimental Estimates and Projections, Aboriginal and Torres Strait Islander Australians, 2001 to 2026, Series B, Cat. no. 3238.0.

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Table 10A.86 Separations for selected potentially preventable hospitalisations by remoteness, 2014-15 (per 1000 people) (a), (b), (c), (d), (e), (f), (g), (h), (i)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (e)
Vaccine preventable conditions									
Major cities	1.8	1.9	2.2	1.3	2.3		1.4		1.9
Inner regional	1.1	1.0	1.3	0.8	1.6	8.0	_		1.1
Outer regional	1.1	1.0	1.3	1.4	2.4	0.7		3.3	1.4
Remote	np	np	1.8	2.5	np	np		9.5	3.0
Very remote	np		3.4	5.9	6.9	_	••	23.7	8.5
Acute conditions									
Major cities	10.3	10.7	13.9	11.4	12.5	••	9.4	••	11.3
Inner regional	12.4	11.7	15.4	12.4	13.1	11.5	np		12.8
Outer regional	13.5	13.4	17.0	14.6	16.0	10.9		13.3	14.6
Remote	20.5	np	20.7	19.4	13.9	np		29.0	20.2
Very remote	23.1		27.6	24.8	24.5	np		35.2	27.4
Chronic conditions									
Major cities	9.5	11.5	12.7	9.9	10.9		8.4		10.7
Inner regional	11.6	11.7	13.5	11.0	10.9	10.5	np		11.9
Outer regional	14.4	12.6	13.7	12.6	15.3	10.4		14.5	13.5
Remote	22.6	np	17.9	15.1	10.0	12.7		27.4	17.1
Very remote	22.5		23.2	17.6	19.8	np	••	40.2	25.0
All potentially preventable hospitalisation	tions (j)								
Major cities	21.4	23.8	28.6	22.4	25.4		19.0		23.7
Inner regional	25.0	24.2	29.9	24.1	25.5	22.7	np		25.7
Outer regional	29.0	27.0	31.7	28.4	33.4	21.9		30.4	29.3
Remote	44.4	32.9	40.0	36.6	25.4	24.2		63.9	39.8
Very remote	47.7		53.3	47.6	49.8	np		93.7	59.1

<sup>(</sup>a) Rates are age-standardised to the 2001 Australian standard population.

**Table 10A.86** 

# Separations for selected potentially preventable hospitalisations by remoteness, 2014-15 (per 1000 people) (a), (b), (c), (d), (e), (f), (g), (h), (i)

NSW Vic Qld WA SA Tas ACT NT Aust (e)

- (b) Remoteness areas are defined using the ABS 2011 Census based Australian Standard Geographical Classification (ASGS). Not all remoteness areas are represented in each state or territory. Caution should be used in comparing 2012-13 data with earlier years in which remoteness areas were defined using a different geographical classification.
- (d) Cells have been suppressed to protect confidentiality where a patient or service provider could be identified.
- (e) Cell sizes are small for some categories and rates may be statistically volatile.
- (f) Separation rates are based on state or territory and remoteness area of usual residence, not hospitalisation. Separations for patients usually resident overseas are excluded. Totals include Australian residents of external Territories.
- (g) Caution should be used in comparing data over time as there have been changes between the International Statistical Classification of Diseases and Related Health Problems, Australian Modification (ICD-10-AM) editions and the associated Australian Coding Standards.
- (h) Disaggregation by remoteness area is by the patient's usual residence, not the location of hospital. Hence, rates represent the number of separations for patients living in each remoteness area divided by the total number of people living in that remoteness area in the jurisdiction.
- (i) For more information on data quality, including collection methodologies and data limitations, see METeOR on the AIHW website.
- (j) More than one category may be reported during the same hospitalisation. Therefore, the total is not necessarily equal to the sum of the components.
  - Nil or rounded to zero. **np** Not published. .. Not applicable.

Source: AlHW unpublished, National Hospital Morbidity Database; ABS unpublished, Estimated Residential Population, 30 June; ABS 2014, Experimental Estimates and Projections, Aboriginal and Torres Strait Islander Australians, 2001 to 2026, Series B, Cat. no. 3238.0.

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Table 10A.87 Separations for selected potentially preventable hospitalisations by Indigenous status and remoteness, Australia (per 1000 people) (a), (b), (c), (d), (e), (f), (g), (h)

	Major cities	Inner regional/ Outer regional	Remote/ Very remote
Vaccine-preventable conditions (c)	. (q)		. ,
Aboriginal and Torres Strait Is	·= ·		
2012-13	2.2	2.4	7.2
2013-14	4.9	4.3	17.6
2014-15	7.7	5.2	20.7
Other Australians (f)			
2012-13	0.9	0.8	1.2
2013-14	1.3	0.8	1.1
2014-15	1.8	1.1	1.2
Acute conditions (c)			
Aboriginal and Torres Strait Is	lander people		
2012-13	18.5	23.3	49.3
2013-14	19.0	24.7	50.8
2014-15	19.2	25.1	48.6
Other Australians (f)			
2012-13	11.0	12.5	14.3
2013-14	11.1	12.6	14.3
2014-15	11.3	12.8	14.5
Chronic conditions (c)			
Aboriginal and Torres Strait Is	lander people		
2012-13	22.4	34.2	49.3
2013-14	25.8	32.4	50.6
2014-15	25.5	33.7	51.0
Other Australians (f)			
2012-13	10.5	11.8	12.8
2013-14	10.5	11.6	11.8
2014-15	10.7	11.7	12.2
All potentially preventable hospitali	sations (c), (i)		
Aboriginal and Torres Strait Is	lander people		
2012-13	42.7	59.5	104.4
2013-14	48.9	60.5	115.1
2014-15	51.4	62.9	115.6
Other Australians (f)			
2012-13	22.3	25.0	28.2
2013-14	22.7	24.9	27.1
2014-15	23.6	25.5	27.7

<sup>(</sup>a) Rates are age-standardised to the 2001 Australian standard population.

<sup>(</sup>b) Remoteness areas are based on the Australian Statistical Geography Standard 2011 (ASGS) classification.

<sup>(</sup>c) Caution should be used in comparing data over time as there have been changes between the International Statistical Classification of Diseases and Related Health Problems, Australian Modification (ICD-10-AM) editions and the associated Australian Coding Standards.

<sup>(</sup>d) Separation rates are based on patient's usual residence (not hospital location).

### Table 10A.87

## Separations for selected potentially preventable hospitalisations by Indigenous status and remoteness, Australia (per 1000 people) (a), (b), (c), (d), (e), (f), (g), (h)

Major cition	Inner regional/	Remote/
Major cities	Outer regional	Very remote

- (e) Separations for patients usually resident overseas are excluded.
- (f) Other Australians' includes separations where Indigenous status was not stated.
- (g) Changes to the coding standard for Viral hepatitis in the 8th edition of ICD-10-AM may account for a proportion of the increase in the rate of vaccine preventable conditions. See Appendix A of AIHW 2015 *Admitted patient care 2013–14: Australian hospital statistics* for more details.
- (h) For more information on data quality, including collection methodologies and data limitations, see Experimental Estimates and Projections, Aboriginal and Torres Strait Islander Australians, 2001 to 2026 (cat. No. 3238.0) on the ABS website and/or METeOR on the AIHW website.
- (i) More than one category may be reported during the same hospitalisation. Therefore, the total is not necessarily equal to the sum of the components.

Source: AIHW unpublished, National Hospital Morbidity Database; ABS unpublished, Estimated Residential Population, 30 June; ABS 2014, Experimental Estimates and Projections, Aboriginal and Torres Strait Islander Australians, 2001 to 2026, Series B, Cat. no. 3238.0.

Table 10A.88 Separations for selected vaccine preventable conditions by Indigenous status, 2014-15 (per 1000 people) (a), (b), (c), (d), (e), (f), (g)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (h)
Vaccine preventable conditions per 1000 Abor	iginal and Torre	es Strait Islar	nder people						
Pneumonia and Influenza (vaccine- preventable)	1.6	1.3	2.3	3.2	3.7	0.7	np	6.6	2.6
Other vaccine preventable conditions	1.6	3.9	6.9	8.3	7.1	0.7	11.2	24.4	6.9
Total	2.3	5.1	9.2	11.5	10.5	1.4	12.0	30.7	9.4
Vaccine preventable conditions per 1000 other	Australians (i)								
Pneumonia and Influenza (vaccine-									
preventable)	8.0	0.6	0.9	0.5	1.4	0.4	0.7	0.8	0.8
Other vaccine preventable conditions	8.0	1.0	0.9	0.7	8.0	0.3	0.6	1.2	0.8
Total	0.8	1.6	1.7	1.1	2.2	8.0	1.4	2.0	1.6

- (a) Conditions are defined by ICD-10-AM codes that are available on request.
- (b) Changes to the coding standard for Viral hepatitis in the 8th edition of ICD-10-AM may account for a proportion of the increase in the rate of Other vaccine preventable conditions. See Appendix A of AIHW 2015 Admitted patient care 2013–14: Australian hospital statistics for more details.
- (c) Excludes separations with a care type of Newborn without qualified days, and records for Hospital boarders and Posthumous organ procurement.
- (d) Separation rates are directly age standardised to the 2001 Australian standard population.
- (e) Separation rates are based on state or territory of usual residence.
- (f) Rates are derived using population estimates and projections based on the 2011 Census.
- (g) Indigenous status data for all states and territories are of sufficient quality for statistical reporting purposes from the 2011-12 reporting year.
- (h) Data for Australia include all States and Territories and Australian residents of external Territories.
- (i) Data for non-Indigenous Australians include separations where Indigenous status was not stated.
  - np Not published.

Table 10A.89 Separations for selected acute conditions by Indigenous status, 2014-15 (per 1000 people) (a), (b), (c), (d), (e), (f), (g)

(e), (i), (g)									
	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (h)
Acute conditions per 1000 Aborigi	nal and Torre	es Strait Islande	er people						
Pneumonia (not vaccine- preventable)	0.1	np	0.1	0.3	np	np	np	0.6	0.2
Cellulitis	4.9	3.7	7.8	10.0	4.4	2.3	3.6	10.7	6.8
Convulsions and epilepsy	4.9	3.2	5.8	7.7	9.2	1.5	5.3	8.3	5.9
Eclampsia	np	_	-	_	np	_	_	_	_
Dental conditions	2.8	2.7	3.6	4.0	4.3	1.9	4.3	5.1	3.5
Ear, nose and throat infections	2.6	1.9	3.2	4.6	3.0	0.9	2.2	5.6	3.2
Gangrene	0.5	1.3	1.5	3.2	0.9	0.6	np	4.0	1.6
Pelvic inflammatory disease	0.3	0.4	0.6	0.6	0.6	0.4	_	1.7	0.6
Perforated/bleeding ulcer Urinary tract infections,	0.2	0.3	0.3	0.4	0.2	np	np	0.2	0.3
including pyelonephritis (i)	4.6	3.8	7.3	9.3	6.6	3.0	2.7	7.8	6.3
Total	20.9	17.3	30.2	40.1	29.4	10.8	19.7	43.9	28.2
Acute conditions per 1000 other A	ustralians (j)								
Pneumonia (not vaccine- preventable)	0.1	0.1	0.1	0.1	0.2	_	0.1	0.1	0.1
Cellulitis	2.2	1.9	3.1	1.8	2.2	2.3	1.7	3.3	2.3
Convulsions and epilepsy	1.4	1.3	1.7	1.1	1.5	1.4	1.2	1.5	1.4
Eclampsia	_	_	_	_	_	np	np	np	_
Dental conditions	2.3	2.7	2.8	3.6	3.6	3.2	2.0	2.0	2.8

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Table 10A.89 Separations for selected acute conditions by Indigenous status, 2014-15 (per 1000 people) (a), (b), (c), (d), (e), (f), (g)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (h)
Ear, nose and throat infections	1.6	1.5	2.1	1.4	1.9	1.4	1.1	1.7	1.7
Gangrene	0.2	0.6	0.4	0.4	0.3	0.5	0.3	1.1	0.4
Pelvic inflammatory disease	0.1	0.2	0.3	0.2	0.2	0.2	0.2	0.2	0.2
Perforated/bleeding ulcer	0.2	0.2	0.2	0.2	0.2	0.2	0.2	0.2	0.2
Urinary tract infections, including pyelonephritis (i)	2.6	2.5	3.7	2.7	2.8	2.1	2.4	2.3	2.8
Total	10.8	11.0	14.3	11.5	12.9	11.4	9.2	12.3	11.8

- (a) Conditions are defined by ICD-10-AM codes that are available on request.
- (b) Excludes separations with a care type of Newborn without qualified days, and records for Hospital boarders and Posthumous organ procurement.
- (c) Separation rates are directly age standardised to the 2001 Australian standard population.
- (d) Separation rates are based on state or territory of usual residence.
- (e) Rates are derived using population estimates and projections based on the 2011 Census.
- (f) Indigenous status data for all states and territories are of sufficient quality for statistical reporting purposes from the 2011-12 reporting year.
- (g) Cell sizes are small for some categories and rates may be statistically volatile.
- (h) Data for Australia include all States and Territories and Australian residents of external Territories.
- (i) Pyelonephritis is kidney inflammation caused by bacterial infection.
- (j) Data for non-Indigenous Australians include separations where Indigenous status was not stated.
  - Nil or rounded to zero. **np** Not published.

Table 10A.90 Separations for selected chronic conditions by Indigenous status, 2014-15 (per 1000 people) (a), (b), (c), (d), (e), (f), (g)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (h)
Chronic conditions per 1000 Aboriginal	and Torres Strai	t Islander neo	ole.						
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Angina	3.1	2.4	4.3	4.8	4.2	1.1	2.3	5.3	3.8
Asthma	2.3	2.2	2.9	3.7	2.9	0.7	2.5	3.0	2.7
Chronic obstructive pulmonary disease	11.5	8.3	11.3	11.2	11.9	6.1	6.5	16.2	11.5
Congestive heart failure	4.2	2.7	5.3	9.4	4.9	2.0	np	7.8	5.4
Diabetes complications (i)	4.6	5.1	8.2	9.2	7.0	2.2	2.0	8.9	6.7
Hypertension	0.6	0.6	0.8	0.9	0.5	0.2	np	0.5	0.7
Iron deficiency anaemia	2.1	3.4	2.3	3.4	2.6	2.7	np	2.5	2.5
Nutritional deficiencies	_	_	np	np	_	np	_	0.2	0.0
Rheumatic heart disease (j)	0.2	0.2	0.6	0.7	0.5	np	np	3.6	0.7
Bronchiectasis	0.3	np	0.4	0.7	0.6	np	_	5.0	0.9
Total (i), (k)	28.9	24.8	36.1	43.9	35.2	15.2	17.7	53.0	34.8
Chronic conditions per 1000 other Austr	alians (I)								
Angina	1.3	1.0	1.8	1.4	1.4	1.0	1.0	2.6	1.3
Asthma	1.2	1.3	1.5	0.8	1.4	1.2	1.0	1.0	1.3
Chronic obstructive pulmonary disease	2.3	2.2	2.7	1.9	2.5	2.0	1.8	3.0	2.3
Congestive heart failure	1.9	2.1	2.0	1.9	2.0	1.8	1.7	1.7	2.0
Diabetes complications (i)	1.4	1.7	1.9	1.7	1.8	1.9	1.2	1.3	1.6
Hypertension	0.3	0.3	0.5	0.2	0.3	0.2	0.2	0.2	0.3
Iron deficiency anaemia	1.5	2.6	1.6	1.6	1.6	2.1	1.0	1.0	1.8

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Table 10A.90 Separations for selected chronic conditions by Indigenous status, 2014-15 (per 1000 people) (a), (b), (c), (d), (e), (f), (g)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (h)
Nutritional deficiencies	_	_	np	_	_	=	_	0.1	
Rheumatic heart disease (j)	0.1	0.1	0.1	0.1	0.2	0.1	0.1	0.2	0.1
Bronchiectasis	0.2	0.2	0.3	0.2	0.1	0.2	0.1	0.1	0.2
Total (i), (k), (l)	10.1	11.6	12.5	9.8	11.4	10.3	8.2	11.2	11.0

- (a) Conditions are defined by ICD-10-AM codes that are available on request.
- (b) Excludes separations with a care type of Newborn without qualified days, and records for Hospital boarders and Posthumous organ procurement.
- (c) Separation rates are directly age standardised to the 2001 Australian standard population.
- (d) Separation rates are based on state or territory of usual residence.
- (e) Rates are derived using population estimates and projections based on the 2011 Census.
- (f) Indigenous status data for all states and territories are of sufficient quality for statistical reporting purposes for 2011-12 and subsequent reporting years.
- (g) Cell sizes are small for some categories and rates may be statistically volatile.
- (h) Data for Australia include all States and Territories and Australian residents of external Territories.
- (i) Excludes separations with an additional diagnosis of diabetes complications.
- (j) Rheumatic heart disease includes acute rheumatic fever as well as the chronic disease.
- (k) Total may not sum to the individual categories as more than one chronic condition can be reported for a separation.
- (I) Data for non-Indigenous Australians include separations where Indigenous status was not stated.
  - Nil or rounded to zero. np Not published.

Table 10A.91 Ratio of separations for Aboriginal and Torres Strait Islander people to all Australians, diabetes, 2014-15 (a), (b), (c), (d), (e), (f)

	Unit	NSW	Vic	Qld	WA	SA	Tas (b)	ACT (b)	NT (b)	Aust
Diabetes as a principle	no.	732	194	1 226	544	220	46	19	667	3 648
diagnosis (g)	SHSR	3.43	3.06	4.60	5.48	3.49	1.20	2.75	7.00	4.32
All diabetes — excluding										
diabetes complications as	no.	4 643	991	5 630	3 843	1 438	248	104	2 656	19 553
an additional diagnosis (h)	SHSR	2.05	1.79	2.60	3.51	2.68	0.93	2.45	3.06	2.45
All diabetes (i)	no.	9 878	2 099	15 441	13 187	2 881	494	243	9 747	53 970
	SHSR	2.45	2.08	3.66	7.20	3.23	1.02	2.84	5.92	3.75

#### **SHSR** = Standardised Hospital Separation Ratio

- (a) Excludes separations with a care type of Newborn without qualified days, and records for Hospital boarders and Posthumous organ procurement.
- (b) Data are available for Tasmania and the ACT for the first time. NT data are for public hospitals only.
- (c) Caution should be used in the interpretation of these data because of jurisdictional differences in data quality.
- (d) Ratios are directly age standardised to the 2001 Australian standard population.
- (e) Separation rates are based on state of usual residence.
- (f) Changes to the Australian Coding Standards between ICD-10-AM editions have resulted in fluctuations in the reporting of diagnoses for diabetes over time. Therefore caution should be used in comparisons of these data with earlier periods.
- (g) Includes ICD-10-AM codes of Principal diagnosis in: 'E10', 'E11', 'E13', 'E14' or O24'.
- (h) Includes ICD-10-AM codes of Principal diagnosis in: 'E10', 'E11', 'E13', 'E14' or 'O24' or Additional diagnosis in 'E109', 'E119', 'E139' or 'E149'.
- (i) All diabetes refers to separations with either a principal or additional diagnosis of diabetes. Includes ICD-10-AM codes in: 'E10', 'E11', 'E13', 'E14' or O24'.

Table 10A.92 Separations for Type 2 diabetes mellitus as principal diagnosis by complication, all hospitals, 2014-15 (per 100 000 people) (a), (b), (c), (d), (e), (f), (g)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (f)
Circulatory	16.0	15.0	11.9	26.6	13.0	np	np	np	15.7
Renal	3.1	2.2	3.7	2.6	3.7	np	np	np	3.0
Ophthalmic	2.7	6.7	12.1	33.8	4.7	np	np	np	9.1
Other specified	39.0	42.8	52.0	36.4	56.2	np	np	np	43.9
Multiple	23.1	36.3	41.1	29.6	41.5	np	np	np	34.1
No complications	4.6	5.2	4.7	4.0	8.3	np	np	np	5.0
Total (h)	88.7	108.5	125.8	133.2	127.7	np	np	np	111.2

- (a) Rates are age standardised to the 2001 Australian standard population.
- (b) Excludes separations with a care type of Newborn without qualified days, and records for hospital boarders and posthumous organ procurement.
- (c) Results for individual complications may be affected by small numbers, and need to be interpreted with care.
- (d) Differences across jurisdictions in policy and practice relating to the admission of patients, the availability of outpatient services and the incentives to admit patients rather than treat them as outpatients will affect estimates of hospital separations.
- (e) Morbidity data are coded under coding standards that may differ over time and across jurisdictions.
- (f) Data for Tasmania, the ACT and the NT are not published separately (due to private hospital confidentiality arrangements) but are included in the total for Australia.
- (g) Changes to the Australian Coding Standards between ICD-10-AM editions have resulted in fluctuations in the reporting of diagnoses for diabetes over time. Therefore caution should be used in comparisons of these data with earlier periods.
- (h) Totals may not add as a result of rounding.
  - **np** Not published.

Table 10A.93 Proportion of separations for principal diagnosis of Type 2 diabetes mellitus that were same day by complication, all hospitals, 2014-15 (per cent) (a), (b), (c), (d), (e), (f), (g)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (f)
Circulatory	24.3	9.5	12.9	27.7	16.2	np	np	np	19.3
Renal	15.6	27.7	18.4	17.1	31.2	np	np	np	20.4
Ophthalmic	89.4	92.1	93.7	96.2	86.3	np	np	np	93.7
Other specified	11.9	19.5	24.8	11.3	19.4	np	np	np	17.9
Multiple	13.5	32.1	23.7	6.7	27.3	np	np	np	23.4
No complications	37.0	46.6	44.0	20.2	60.1	np	np	np	42.3
Total	18.4	28.4	30.6	36.1	27.1	np	np	np	27.3

- (a) Data are for the number of same day separations with the specified principal diagnosis, as a per cent of all separations with the specified principal diagnosis.
- (b) Excludes separations with a care type of Newborn without qualified days, and records for hospital boarders and posthumous organ procurement.
- (c) Results for individual complications may be affected by small numbers, and need to be interpreted with care.
- (d) Differences across jurisdictions in policy and practice relating to the admission of patients, the availability of outpatient services and the incentives to admit patients rather than treat them as outpatients will affect estimates of hospital separations.
- (e) Morbidity data are coded under coding standards that may differ over time and across jurisdictions.
- (f) Data for Tasmania, the ACT and the NT are not published separately (due to private hospital confidentiality arrangements) but are included in the total for Australia.
- (g) Changes to the Australian Coding Standards between ICD-10-AM editions have resulted in fluctuations in the reporting of diagnoses for diabetes over time. Therefore caution should be used in comparisons of these data with earlier periods.

np Not published.

Table 10A.94 Separations for lower limb amputation with principal or additional diagnosis of Type 2 diabetes, all hospitals, 2014-15 (a), (b), (c), (d), (e)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (d)
	Om	14377	VIC	Qlu	WA	- SA	1 45	ACI	IVI	Aust (d)
ASR	per 100 000 people	14.6	15.6	18.7	18.4	21.4	np	np	np	17.2
Separations	no.	1289	1045	961	490	458	np	np	np	4 579

### ASR = Age standardised rate

- (a) ASR rates are age standardised to the 2001 Australian standard population.
- (b) Includes unspecified diabetes. The figures are based on the ICD-10-AM classification. The codes used are ICD-10-AM diagnosis codes E11.x for diabetes, and ICD-10-AM procedure block 1533 and procedure codes 44370-00, 44367-00, 44367-01 and 44367-02 for lower limb amputation.
- (c) Excludes separations with a care type of Newborn without qualified days, and records for Hospital boarders and Posthumous organ procurement.
- (d) Data for Tasmania, the ACT and the NT are not published separately (due to private hospital confidentiality arrangements) but are included in the total for Australia.
- (e) Changes to the Australian Coding Standards between ICD-10-AM editions have resulted in fluctuations in the reporting of diagnoses for diabetes over time. Therefore caution should be used in comparisons of these data with earlier periods.

**np** Not published.

Table 10A.95 Separation rates for older people for injuries due to falls (a), (b), (c)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (d)
2005-06									
Separations per 1000 older people	48.5	46.2	40.6	43.3	34.6	32.0	48.8	45.7	44.3
Number	46 425	32 911	20 058	10 409	8 780	2 348	1 516	340	122 787
2006-07									
Separations per 1000 older people	51.6	48.5	43.0	43.8	35.8	32.7	52.2	47.8	46.7
Number of separations	50 938	35 649	22 078	10 954	9 358	2 455	1 697	375	133 504
2007-08									
Separations per 1000 older people	51.6	48.6	42.9	43.7	36.4	34.1	60.1	43.2	46.8
Number of separations	52 463	36 855	22 851	11 319	9 762	2 616	2 051	366	138 283
2008-09									
Separations per 1000 older people	52.4	47.6	45.7	44.6	39.0	32.9	65.0	43.2	47.7
Number of separations	54 998	37 337	25 092	12 009	10 759	2 580	2 318	383	145 476
2009-10									
Separations per 1000 older people	55.9	49.5	47.1	46.2	43.0	32.8	68.2	43.3	50.1
Number of separations	60 117	39 885	26 759	12 877	12 059	2 638	2 546	408	157 289
2010-11 (d)									
Separations per 1000 older people	60.4	53.0	51.7	52.1	43.0	32.7	65.6	np	54.0
Number of separations	np	np	np	np	np	np	np	np	np
2011-12									
Separations per 1000 older people	61.6	55.2	56.2	56.8	46.0	33.7	73.0	54.0	56.5
Number of separations	68 833	45 953	32 782	16 539	13 297	2 845	2 858	513	183 620
2012-13									
Separations per 1000 older people	62.1	51.8	60.1	58.2	47.8	34.3	66.5	53.9	56.8
Number of separations	71 946	44 709	36 424	17 719	14 261	2 992	2 757	575	191 383
2013-14									
Separations per 1000 older people	64.0	51.9	61.1	56.6	48.5	38.3	72.4	63.9	57.8

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Table 10A.95 Separation rates for older people for injuries due to falls (a), (b), (c)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (d)
Number of separations	76 152	46 180	38 342	17 870	14 750	3 407	3 108	691	200 500
2014-15									
Separations per 1000 older people	64.9	55.6	65.8	56.6	53.0	40.7	79.1	76.1	60.5
Number of separations	79 567	50 942	42 893	18 577	16 453	3 709	3 559	893	216 593

- (a) Excludes separations records for Hospital Boarders and Posthumous organ procurement.
- (b) Older people are defined as people aged 65 years or over.
- (c) Separation rates are age standardised to the the 2001 Australian standard population aged 65 years or over.
- (d) Data for Australia for 2010-11 do not include data for the NT.

np Not published.

Table 10A.96 General Government Final Consumption Expenditure (GGFCE) chain price deflator (index)

chain price defiator (macx)	
Years	2015-16 = 100.0
2006-07	78.6
2007-08	81.8
2008-09	85.0
2009-10	87.3
2010-11	91.9
2011-12	93.9
2012-13	95.4
2013-14	96.6
2014-15	97.6
2015-16	100.0

Source: Review calculations based on ABS (2016) Australian National Accounts: National Income, Expenditure and Product, June 2016, Cat. no. 5206.0, Canberra; table 2A.48.