

Appendix 1: The Delphi survey initial questionnaire

Refining asthma indicators: Delphi survey

Initial questionnaire

Thank you for agreeing to participate in this Delphi survey on the priorities of national indicators for asthma data monitoring in Australia. The survey forms part of a review of asthma indicators used in national monitoring that is being carried out by the Australian Centre for Asthma Monitoring.

This questionnaire round is the first of up to three rounds of the survey. Please try to answer all questions, even though we do not expect you to have in depth knowledge of all of them. You will have the opportunity to revise your answers with subsequent rounds of the survey.

In these surveys, you will be asked to develop priorities among the current national asthma indicators. Most of the questions can be answered with only a single selection. Where appropriate, a space is also provided for you to comment on the underlying reasons for your responses.

- In formulating your responses, you are not expected to assess the feasibility or cost of data collection for the indicators.

Once we have received responses from all panellists, we will collate and summarise the findings and formulate the second questionnaire. You should receive this in the next month.

We assure you that your participation in the survey and your individual responses will be strictly confidential to the research team and will not be divulged to any outside party, including other panellists.

Username (email address)

Password (pre-registered):

1. Below, is a list of asthma indicators currently used to monitor asthma in Australia. Please rate each of the indicators in terms of its value in providing information to policy makers about the status of asthma in Australia, where 1 indicates it is *most important* and 5 indicates it is *least important* or redundant.

The following questions might be helpful in guiding your assessment of the value of each indicator:

- Is the indicator useful for guiding policy that aims to reduce the burden of asthma?
- Is the indicator helpful in prioritising strategies for the effective management of asthma?
- Does the indicator provide information about whether the policies to manage asthma are working?

In formulating your responses, you are not expected to assess the feasibility or cost of monitoring the indicators.

	INDICATOR NAME AND DESCRIPTION	Rating (1=most important-5=least important)				
		1	2	3	4	5
1	Ever asthma: Reporting ever having doctor-diagnosed asthma					
2	Current asthma: Reporting doctor-diagnosed asthma plus symptoms of or treatment for asthma in the last 12 months					
3	Current wheeze: Reporting wheeze in the preceding 12 months					
4	Airway hyperresponsiveness: Proportion of the population who are diagnosed with airway hyperresponsiveness					
5	Deaths (all ages): Deaths due to asthma in the population					
6	Deaths (age 5 to 34 years): Deaths due to asthma among people aged 5 to 34 years					
7	Hospitalisations: Episodes of hospitalisation for asthma					
8	Hospital days: Patient days (or “bed days”) in hospital for asthma					
9	Individual hospitalisations: People hospitalised for asthma					
10	Hospital re-admissions: Re-admissions to hospital for asthma within 28 days of a previous admission for asthma					
11	Emergency department attendances: Attendances at emergency departments in the population for asthma each year					
12	Re-attendances: Re-attendance at either hospital or an emergency department for asthma within 28 days of a previous attendance for asthma					
13	General practice encounters: General Practice encounters for asthma					
14	Urgent asthma visits: Total healthcare visits (hospital, emergency department and general practice) for asthma exacerbations or worsening asthma					
15	Cycle of Care uptake: Asthma Cycle of Care (formerly Asthma 3+ Visit Plan) Practitioner Incentive Program payments					
16	Asthma action plans: People with asthma who have a written asthma action plan					
17	Preventer use: People with asthma who use preventers (inhaled corticosteroids, leukotriene receptor antagonists or similar drugs) regularly					

	INDICATOR NAME AND DESCRIPTION	Rating (1=most important-5=least important)				
		1	2	3	4	5
18	Quality of life: People with asthma who report poor health-related quality of life					
19	Smoking: Current smoking among people with asthma					
20	Children residing with smokers: Smoking in households where children with asthma reside					
21	Spirometry: People with asthma who have had spirometry within the last 12 months					
22	Asthma control: A composite indicator developed from measures of symptoms and medication use to impute the proportion of people with asthma who have poor clinical control					
23	Occupational asthma: Asthma caused by occupational exposure					
24	Costs of asthma: An index derived from expenditure and burden of disease data to examine the costs of asthma to individuals					

2. If we had to limit the number of asthma indicators, which ones, from the previous list of 24, would you choose to keep? Please rank a minimum of 5 indicators, starting from the most important. You can rank up to 10 indicators that you think are important.

In making your decisions, please consider the guidelines provided in question 1:

- Is the indicator useful for guiding policy that aims to reduce the burden of asthma?
- Is the indicator helpful in prioritising strategies for the effective management of asthma?
- Does the indicator provide information about whether the policies to manage asthma are working?

A space is provided for you to briefly explain the reason for your ranking if you wish. This additional information is optional, and could help us understand the reasons some indicators are valued over others

1. Indicator (drop down menu).....

Reason: _____

2. Indicator (drop down menu).....

Reason: _____

3. Indicator (drop down menu).....

Reason: _____

4. Indicator (drop down menu).....

Reason: _____

5. Indicator (drop down menu).....

Reason: _____

6. Indicator (drop down menu).....

Reason: _____

7. Indicator (drop down menu).....

Reason: _____

8. Indicator (drop down menu).....

Reason: _____

9. Indicator (drop down menu).....

Reason: _____

10. Indicator (drop down menu).....

Reason: _____

3. Please list up to five indicators from the previous list of 24 that you believe could be excluded from the asthma data monitoring system. Once again, in making your decisions, please consider the guidelines provided in question 1:

- Is the indicator useful for guiding policy that aims to reduce the burden of asthma?
- Is the indicator helpful in prioritising strategies for the effective management of asthma?
- Does the indicator provide information about whether the policies to manage asthma are working?

1. Indicator (drop down menu).....

Reason: _____

2. Indicator (drop down menu).....

Reason: _____

3. Indicator (drop down menu).....,

Reason: _____

4. Indicator (drop down menu).....,

Reason: _____

5. Indicator (drop down menu).....,

Reason: _____

4. If you have any further suggestions for indicators that you believe could be important in monitoring the status of asthma in Australia, please list below (optional):
