

References

- ABS (Australian Bureau of Statistics) 1990. Indexes of relative retail prices of food, Australian cities and towns. ABS Cat. No. 6404.0. Canberra: ABS.
- ABS (Australian Bureau of Statistics) 2001a. Occasional paper: Australian business register – a snapshot. ABS Cat. No. 1369.0. Canberra: ABS.
- ABS (Australian Bureau of Statistics) 2001b. Australian business register counts of single business locations, ANZIC Industry Division by postcode. ABS Cat. No. 8136.0.55.001. Canberra: ABS.
- ABS (Australian Bureau of Statistics) 2002. Experimental estimates, regional small business statistics, Australia. ABS Cat. No. 5675.0. Canberra: ABS.
- ABS (Australian Bureau of Statistics) & AIHW (Australian Institute of Health and Welfare) 1999. Assessing the quality of identification of Aboriginal and Torres Strait Islander people in hospital data. Canberra: Aboriginal and Torres Strait Islander Health and Welfare Information Unit, Australian Health Ministers' Advisory Council, Australian Institute of Health and Welfare & Australian Bureau of Statistics.
- AIHW (Australian Institute of Health and Welfare) 2003. Rural, regional and remote health – information framework and indicators – Version 1. AIHW Cat. No. PHE 44. Canberra: AIHW (Rural Health Series no. 1).
- AIHW (Australian Institute of Health and Welfare) 2004. Rural, regional and remote health: a guide to remoteness classifications. AIHW Cat. No. PHE 53. Canberra: AIHW.
- AIHW (Australian Institute of Health and Welfare) 2005. Rural, regional and remote health – indicators of health. AIHW Cat. No. PHE 59. Canberra: AIHW (Rural Health Series no. 5).
- AIHW (Australian Institute of Health and Welfare): Mathers C, Vos T & Stevenson C 1999. The burden of disease and injury in Australia. AIHW Cat. No. PHE 17. Canberra: AIHW.
- AMWAC (Australian Medical Workforce Advisory Council) 2000. The general practice workforce in Australia: supply and requirements 1999–2010, AMWAC report 2000.2. Sydney: AMWAC.
- US Health Department 2002. Healthy people 2010 volume 1 (2nd edition), chapter 11, Health Communication. Office of Disease Prevention and Health Promotion, US Health Department. Viewed 30 August 2002, <<http://www.health.gov/healthypeople/Document/Word/Volume1/11HealthCom.doc>>
- McMichael A 1993. Planetary overload. Cambridge: Cambridge University Press.
- NHPC (National Health Performance Committee) 2001. National health performance framework report. Brisbane: Queensland Health.
- Pollard AH, Farhat Yusuf & Pollard GN 1975. Demographic techniques. Pergamon: Rushcutters Bay.
- Public Health Services 2001. The 2000 healthy food access basket (HFAB) survey: full report. Brisbane: Queensland Health.
- Smith A, Kellett E & Schmerlaib Y 1998. The Australian guide to healthy eating. Canberra: Commonwealth Department of Health and Family Services.

World Bank 2002. The World Bank social capital homepage. Viewed 30 August 2002.
<<http://www.worldbank.org/poverty/scapital/index.htm>>

Appendix 1

Table A1: The National Health Performance Framework

Health status and outcomes How healthy are Australians? Is it the same for everyone? Where is the most opportunity for improvement?				
Health conditions	Human function	Life expectancy and wellbeing	Deaths	
Prevalence of disease, disorder, injury or trauma or other health-related states.	Alterations to body, structure or function (impairment), activities (activity limitation) and participation (restrictions in participation).	Broad measures of physical, mental and social wellbeing of individuals and other derived indicators such as disability-adjusted life expectancy (DALE).	Age- and/or condition-specific mortality rates.	
Determinants of health Are the factors determining health changing for the better? Is it the same for everyone? Where and for whom are they changing?				
Environmental factors	Socioeconomic factors	Community capacity	Health behaviours	Person-related factors
Physical, chemical and biological factors such as air, water, food and soil quality resulting from chemical pollution and waste disposal.	Socioeconomic factors such as education, employment, per capita expenditure on health, and average weekly earnings.	Characteristics of communities and families such as population density, age distribution, health literacy, housing, community support services and transport.	Attitudes, beliefs knowledge and behaviours, e.g. patterns of eating, physical activity, excess alcohol consumption and smoking.	Genetic related susceptibility to disease and other factors such as blood pressure, cholesterol levels and body weight.
Health system performance How well is the health system performing in delivering quality health actions to improve the health of all Australians? Is it the same for everyone?				
Effective	Appropriate		Efficient	
Care, intervention or action achieves desired outcome.	Care/intervention/action provided is relevant to the client's needs and based on established standards.		Achieving desired results with most cost-effective use of resources.	
Responsive	Accessible		Safe	
Service provides respect for persons and is client orientated and includes respect for dignity, confidentiality, participation in choices, promptness, quality of amenities, access to social support networks, and choice of provider.	Ability of people to obtain health care at the right place and right time irrespective of income, physical location and cultural background.		The avoidance or reduction to acceptable limits of actual or potential harm from health care management or the environment in which health care is delivered.	
Continuous	Capable		Sustainable	
Ability to provide uninterrupted, coordinated care or service across programs, practitioners, organisations and levels over time.	An individual's or service's capacity to provide a health service based on skills and knowledge.		System or organisation's capacity to provide infrastructure such as workforce, facilities and equipment, and be innovative and respond to emerging needs (research, monitoring).	

Appendix 2

Table A2: Development status of first tier indicators

Dimension	Issue	Indicator developed
1.1	Chronic diseases	1.1.1
	Injury	1.1.2
	Mental health	1.1.3
	Oral health	1.1.4
	Communicable diseases	1.1.5
	Birth outcomes	1.1.6
1.2	Severity and type of disability	1.2.1
	Effect of migration on regional prevalence of disability	
	Days off work or away from usual activity because of illness	1.2.2
1.3	Disability-adjusted life expectancy	
	Life expectancy	1.3.1
	Disability-adjusted life years	
	Years of life lost	1.4.3
	Self-assessed health	1.3.2
	Self-assessed happiness	1.3.3
1.4	Overall death rates	1.4.1
	Perinatal mortality	1.4.2
	Age-specific mortality	1.4.1
	Premature mortality	1.4.3
	Leading causes of death and 'excess' death	1.4.4

Table A3: Development status of second tier indicators

Dimension	Issue	Indicator developed
2.1	Water quality	
	Reticulated water with adequate fluoride	2.1.1
	Sewerage	
	Food	
	Housing tenure and crowding	2.3.7–8
	Housing quality and function	
	Recreational and cultural facilities	
	Workplace	
	Pollutants	
2.2	Education of adult population	2.2.1
	School retention & progression to university	2.2.2 & 2.2.3
	Employment	2.2.4
	Household income	2.2.5
	Gap between rich and poor	2.2.6
	Sources of income	2.2.7
	SEIFA	2.2.8
2.3	Demography	2.3.1
	Dependency ratio	2.3.2
	Internal migration	2.3.3
	Fertility	2.3.4
	Community safety (homicide rate)	2.3.5
	Other social issues and social capital	
	Social and commercial services	
	Health literacy	
	Individuals perception of risk	2.3.6
	Housing tenure	2.3.7
	Crowding in households	2.3.8
	Other aspects of suitability of housing	
	Car ownership	2.3.9
	Availability of other transport	
	Cost of living	2.3.10
	Health of the business sector	2.3.11
2.4	Smoking rates	2.4.1
	Harmful consumption of alcohol	2.4.2
	Illicit drug use	2.4.3
	Physical inactivity	2.4.4

	Nutrition	2.4.5
	Sexual practices	2.4.6
	Driving practices	
2.5	Rate of genetically determined diseases	2.5.1
	Rate of other birth defects	2.5.2
	High blood pressure	1.1.1
	High cholesterol	
	Overweight and obesity	2.5.3

Table A4: Development status of third tier indicators

Dimension	Issue	Indicator developed
3.1	Retrieval time for victims of trauma	
	STI education in promoting safe sex	
	Immunisation in reducing incidence of infectious disease	3.1.1
	Screening in reducing mortality due to breast and cervical cancer	3.1.2
	Medical and surgical misadventure	3.6.1
3.2	Prevalence of female GPs	3.2.1
	Rate of hospital specialist procedure	3.2.2
	Rate of non-hospital specialist consultation	3.2.3
	Quality of care after surgery	
	Options for aged care	3.2.4
	Accreditation of hospitals	3.8.1
	Waiting times for elective surgery	3.4.1
	Rates of GP consultation for a range of reasons	3.2.5
3.3	Per capita cost of GP, community health and hospital services in each area	
	Per capita cost of GP, community health and hospital services for people from each area	
	Cost of screening	
	Ratio of expenditure to positive health outcome	
3.4	Whether services are culturally appropriate for Indigenous people	
	Whether services are confidential	
	Choice of provider	
	Waiting times for elective surgery (see 3.2)	3.4.1
	ED response and waiting times	
	Bulk billing	3.4.2
	Waiting time for access to allied health workers	
	Waiting time for imaging and pathology results	
	Percentage of GPs with closed books	
	Satisfaction of residents with health services generally	
3.5	Road distance to primary health care, ED, chemist, hospital and aged care service	3.5.1
	Reduced access to service because of discrimination	
	Reduced access to service because of cost	
	Supply of health workers	3.5.2
	Level of hospital service available	
	Rate of hospital admission	3.5.3
	Rate of GP and primary medical care consultation	3.5.4
	Rate of dental consultation by reason	3.5.5

	Rate of GP consultation for mental health reasons	3.2.5
	Rate of prescription	3.5.6
	Access to disability services	3.5.7
	Continuity of service (24-hour availability)	
3.6	Rate of surgical and medical misadventure (see 3.1 & 3.8)	3.6.1
	Survival in intensive care units	
3.7	Rate of care planning and case conferencing	3.7.1
3.8	Accreditation of hospitals	3.8.1
	Rate of surgical and medical misadventure	3.6.1
3.9	Numbers of student health workers from rural areas	3.9.1
	Retention of GPs	3.9.2
	Retention of other health workers	
	Hours worked by health workers	3.9.3
	Age of health workers	3.9.3
	Demands of on call work	