APPENDIX 2

LEGISLATION

Australian Institute of Health and Welfare Act 1987

Act No. 41 of 1987 as amended
This compilation was prepared on 5 November 2001
taking into account amendments up to Act No. 159 of 2001
The text of any of those amendments not in force
on that date is appended in the Notes section
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An Act to establish an Australian Institute of Health and Welfare, and for related purposes

PART I—PRELIMINARY

1 SHORT TITLE [see Note 1]
This Act may be cited as the Australian Institute of Health and Welfare Act 1987.

2 COMMENCEMENT [see Note 1]
This Act shall come into operation on a day to be fixed by Proclamation.

3 INTERPRETATION
(1) In this Act, unless the contrary intention appears:

appoint includes re-appoint.

Chairperson means the Chairperson of the Institute.

Director means the Director of the Institute.

Ethics Committee means the Australian Institute of Health and Welfare Ethics Committee.

health-related information and statistics means information and statistics collected and produced from data relevant to health or health services.

Institute means the Australian Institute of Health and Welfare.

member means a member of the Institute.

production means compilation, analysis and dissemination.

State Health Minister means:
(a) the Minister of the Crown for a State;
(b) the Minister of the Australian Capital Territory; or
(c) the Minister of the Northern Territory;
who is responsible, or principally responsible, for the administration of matters relating to health in the State, the Australian Capital Territory or the Northern Territory, as the case may be.

State Housing Department means the Department of State of a State or Territory that deals with matters relating to housing in the State or Territory.

State Housing Minister means:
(a) the Minister of the Crown for a State; or
(b) the Minister of the Australian Capital Territory; or
(c) the Minister of the Northern Territory;
who is responsible, or principally responsible, for the administration of matters relating to housing in the State or Territory, as the case may be.
State Welfare Minister means:
(a) the Minister of the Crown for a State; or
(b) the Minister of the Australian Capital Territory; or
(c) the Minister of the Northern Territory;
who is responsible, or principally responsible, for the administration of matters relating to welfare in the State or Territory, as the case may be.

trust money means money received or held by the Institute on trust.

trust property means property received or held by the Institute on trust.

welfare-related information and statistics means information and statistics collected and produced from data relevant to the provision of welfare services.

welfare services includes:
(a) aged care services (including services designed to encourage or support participation by parents in educational courses, training and the labour force); and
(c) services for people with disabilities; and
(d) housing assistance (including programs designed to provide access to secure housing in the long term and programs to provide access to crisis accommodation in the short term); and
(e) child welfare services (including, in particular, child protection and substitute care services); and
(f) other community services.

(2) A reference in this Act to the Chairperson, the Director or a member, in relation to a time when a person is acting in the office of Chairperson, Director, or a member, includes a reference to that person.

Note: For the manner in which the Chairperson may be referred to, see section 18B of the Acts Interpretation Act 1901.

PART II—AUSTRALIAN INSTITUTE OF HEALTH AND WELFARE

Division 1—Establishment, functions and powers of Institute

4 ESTABLISHMENT OF INSTITUTE

(1) There is hereby established a body to be known as the Australian Institute of Health and Welfare.

(2) The Institute:
(a) is a body corporate with perpetual succession;
(b) shall have a common seal; and
(c) may sue and be sued in its corporate name.
Note: The Commonwealth Authorities and Companies Act 1997 applies to the Institute. That Act deals with matters relating to Commonwealth authorities, including reporting and accountability, banking and investment, and conduct of officers.

(3) All courts, judges and persons acting judicially shall take judicial notice of the imprint of the common seal of the Institute affixed to a document and shall presume that it was duly affixed.

5 FUNCTIONS OF THE INSTITUTE

[Institute to have health-related and welfare-related functions]

(1AA) The functions of the Institute are:

(a) the health-related functions conferred by subsection (1); and
(b) the welfare-related functions conferred by subsection (1A).

[Health-related functions]

(1) The Institute’s health-related functions are:

(a) to collect, with the agreement of the Australian Bureau of Statistics and, if necessary, with the Bureau’s assistance, health-related information and statistics, whether by itself or in association with other bodies or persons;
(b) to produce health-related information and statistics, whether by itself or in association with other bodies or persons;
(c) to co-ordinate the collection and production of health-related information and statistics by other bodies or persons;
(d) to provide assistance, including financial assistance, for the collection and production of health-related information and statistics by other bodies or persons;
(e) to develop methods and undertake studies designed to assess the provision, use, cost and effectiveness of health services and health technologies;
(f) to conduct and promote research into the health of the people of Australia and their health services;
(g) to develop, in consultation with the Australian Bureau of Statistics, specialised statistical standards and classifications relevant to health and health services, and advise the Bureau on the data to be used by it for the purposes of health-related statistics;
(h) subject to section 29, to enable researchers to have access to health-related information and statistics held by the Institute or by bodies or persons with whom contracts or arrangements have been entered into by the Institute;
(j) to publish methodological and substantive reports on work carried out by or in association with the Institute under this subsection;
(k) to make recommendations to the Minister on the prevention and treatment of diseases and the improvement and promotion of the health and health awareness of the people of Australia; and

(m) to do anything incidental to any of the foregoing.

[Welfare-related functions]

(1A) The Institute's welfare-related functions are:

(a) to collect, with the agreement of the Australian Bureau of Statistics, and, if necessary, with the Bureau’s assistance, welfare-related information and statistics (whether by itself or in association with other bodies or persons); and

(b) to produce welfare-related information and statistics (whether by itself or in association with other bodies or persons); and

(c) to co-ordinate the collection and production of welfare-related information and statistics by other bodies or persons; and

(d) to provide assistance (including financial assistance) for the collection and production of welfare-related information and statistics by other bodies or persons; and

(e) to develop, in consultation with the Australian Bureau of Statistics, specialised statistical standards and classifications relevant to welfare services; and

(f) subject to section 29, to enable researchers to have access to welfare-related information and statistics held by the Institute or by bodies or persons with whom contracts or arrangements have been entered into by the Institute; and

(g) to publish methodological and substantive reports on work carried out by or in association with the Institute under this subsection; and

(h) to do anything incidental to the functions conferred by paragraphs (a) to (g).

[Functions of Australian Bureau of Statistics not limited by this section]

(3) This section is not intended to limit the functions of the Australian Bureau of Statistics.

6 POWERS OF INSTITUTE

The Institute has power to do all things necessary or convenient to be done for or in connection with the performance of its functions and, in particular, has power:

(a) to enter into contracts or arrangements, including contracts or arrangements with bodies or persons to perform functions on behalf of the Institute;

(b) to acquire, hold and dispose of real or personal property;

(c) to occupy, use and control any land or building owned or held under lease by the Commonwealth and made available for the purposes of the Institute;

(d) to appoint agents and attorneys and act as an agent for other persons;
(e) to accept gifts, grants, devises and bequests made to the Institute, whether on trust or otherwise, and to act as trustee of money or other property vested in the Institute on trust;
(f) subject to section 29, to:
(i) release data to other bodies or persons; and
(ii) publish the results of any of its work; and
(g) to do anything incidental to any of its powers.

7 DIRECTIONS BY MINISTER

(1) The Minister may, by notice in writing delivered to the Chairperson, give a direction to the Institute with respect to the performance of its functions or the exercise of its powers.

(1A) The Minister must consult the Chairperson before giving any direction to the Institute.

(1B) The Minister must consult each State Health Minister before giving the direction if the direction relates to the Institute’s health-related functions.

(1C) The Minister must consult each State Welfare Minister before giving the direction if the direction:

(a) relates to the Institute’s welfare-related functions; and
(b) does not concern housing matters.

(1D) The Minister must consult each State Housing Minister before giving the direction if the direction:

(a) relates to the Institute’s welfare-related functions; and
(b) concerns housing matters.

(2) The Institute shall comply with any direction given under subsection (1).

(3) This section does not affect the application of section 28 of the Commonwealth Authorities and Companies Act 1997 in relation to the Institute.

Division 2—Constitution and meetings of Institute

8 CONSTITUTION OF INSTITUTE

(1) Subject to subsection (2), the Institute shall consist of the following members:

(a) the Chairperson;
(b) the Director;
(c) a member nominated by the Australian Health Ministers’ Advisory Council;
(ca) a member nominated by the Standing Committee of Social Welfare Administrators;
(cb) a representative of the State Housing Departments nominated in the manner determined by the Minister;
(d) the Australian Statistician;
(e) the Secretary to the Department;
(f) a person nominated by the Minister who has knowledge of the needs of consumers of health services;
(fa) a person nominated by the Minister who has knowledge of the needs of consumers of welfare services;
(fb) a person nominated by the Minister who has knowledge of the needs of consumers of housing assistance services;
(fc) a person nominated by the Minister who has expertise in research into public health issues;
(g) 3 other members nominated by the Minister;
(h) a member of the staff of the Institute elected by that staff.

(1AA) Without limiting the persons who may be nominated by the Minister, the Minister must:

(a) before nominating the member referred to in paragraph (1)(f), seek recommendations from such bodies (if any) representing consumers of health services as are prescribed for the purpose; and
(b) before nominating the member referred to in paragraph 8(1)(fa), seek recommendations from such bodies (if any) representing consumers of welfare services as are prescribed for the purpose; and
(c) before nominating the member referred to in paragraph 8(1)(fb), seek recommendations from such bodies (if any) representing consumers of housing assistance services as are prescribed for the purpose; and
(d) before nominating the member referred to in paragraph 8(1)(fc), seek recommendations from such peak public health research bodies (if any) as are prescribed for the purpose.

(1A) A recommendation for the purposes of paragraph (1)(f), (fa), (fb) or (fc):

(a) may be made by one or more bodies; and
(b) may contain one or more names.

(2) If the person referred to in paragraph (1)(d) or (e) is not available to serve as a member of the Institute, that person shall nominate a person to be a member of the Institute in lieu of himself or herself.

(3) The performance of the functions, or the exercise of the powers, of the Institute is not affected by reason only of:
(a) a vacancy in the office of a member referred to in paragraph (1)(a), (b), (f), (fa), (fb), (fc) or (h);
(b) the number of members referred to in paragraph (g) falling below 3 for a period of not more than 6 months;
(ba) a vacancy of not more than 6 months duration in the office of a member referred to in paragraph (1)(c), (ca) or (cb);
(c) a vacancy in the office of the member referred to in paragraph (1)(d) or (e) or the member (if any) nominated in lieu of that member under subsection (2).

(4) The following subsections have effect in relation to a member other than a member referred to in paragraph (1)(b), (d) or (e).

(5) Subject to this section, a member shall be appointed by the Governor-General.

(5A) Subject to this Act, a member referred to in paragraph (1)(a), (c), (ca), (cb), (f), (fa), (fb), (fc) or (g) may be appointed on a full-time or a part-time basis and holds office for such period, not exceeding 3 years, as is specified in the instrument of appointment.

(5B) Subject to this Act, a member elected under paragraph (1)(h) holds office on a part-time basis for a period of one year commencing on:

(a) the day on which the poll for the election of the member is held; or
(b) if that day occurs before the expiration of the term of office of the person whose place the member fills—the day after the expiration of that term.

(7) A member holds office on such terms and conditions (if any) in respect of matters not provided for by this Act as are determined by the Governor-General.

(8) The appointment of a member is not invalid because of a defect or irregularity in connection with the member’s nomination or appointment.

9 ACTING MEMBERS

(1) The Minister may appoint a person to act in the office of Chairperson, of Director, or of member (other than the Chairperson or Director):

(a) during a vacancy in the office, whether or not an appointment has previously been made to the office; or
(b) during any period, or during all periods, when the holder of the office is absent from duty or from Australia or is, for any other reason, unable to perform the functions of the office;

but a person appointed to act during a vacancy shall not continue so to act for more than 12 months.

(2) A person may resign appointment under this section by instrument in writing delivered to the Minister.
(3) An appointment may be expressed to have effect only in such circumstances as are specified in the instrument of appointment.

(4) The Minister may:
   (a) determine the terms and conditions of appointment, including remuneration and allowances, if any, of a person acting under subsection (1); and
   (b) terminate such an appointment at any time.

(5) Where a person is acting in an office and the office becomes vacant while that person is so acting, then, subject to subsection (3), the person may continue so to act until the Minister otherwise directs, the vacancy is filled or a period of 12 months from the date on which the vacancy occurred expires, whichever first happens.

(6) While a person is acting in an office, the person has and may exercise all the powers, and shall perform all the functions and duties, of the holder of the office.

(7) Anything done by or in relation to a person purporting to act under this section is not invalid by reason only that:
   (a) the occasion for the appointment of the person had not arisen;
   (b) there was a defect or irregularity in or in connection with the appointment;
   (c) the appointment had ceased to have effect; or
   (d) the occasion for the person to act had not arisen or had ceased.

10 REMUNERATION AND ALLOWANCES
(1) Unless otherwise prescribed, a member shall be paid such remuneration as is determined by the Remuneration Tribunal.

(2) A member shall be paid such allowances as are prescribed.

(3) This section has effect subject to the Remuneration Tribunal Act 1973.

11 LEAVE OF ABSENCE
(1) A full-time member has such recreation leave entitlements as are determined by the Remuneration Tribunal.

(2) The Minister may:
   (a) grant a full-time member leave of absence, other than recreation leave, on such terms and conditions as to remuneration or otherwise as the Minister determines; and
   (b) grant a part-time member leave of absence on such terms and conditions as to remuneration or otherwise as the Minister determines.

12 RESIGNATION
A member may resign by instrument in writing delivered to the Governor-General.
13 TERMINATION OF APPOINTMENT

(1) The Governor-General may terminate the appointment of a member because of misbehaviour or physical or mental incapacity.

(2) If a member:
   (a) becomes bankrupt, applies to take the benefit of any law for the relief of bankrupt or insolvent debtors, compounds with creditors or assigns remuneration for their benefit;
   (b) without reasonable excuse, contravenes section 27F or 27J of the Commonwealth Authorities and Companies Act 1997;
   (c) being a full-time member who is paid remuneration under this Part:
      (i) engages in paid employment outside his or her duties without the consent of the Minister; or
      (ii) is absent from duty, without leave of absence for 14 consecutive days or for 28 days in any period of 12 months; or
   (d) being a part-time member, is absent, without leave by the Minister, from 3 consecutive meetings of the Institute;

the Governor-General may terminate the appointment of the member.

(3) Where:
   (a) a member has been appointed under paragraph 8(1)(c), (ca) or (cb) or subsection 8(2) on the nomination of a body or person referred to in that paragraph or subsection, as the case may be, and the body or person notifies the Minister in writing that the nomination is withdrawn; or
   (b) a member has been appointed under paragraph 8(1)(g) on the nomination of the Minister and the Minister withdraws his or her nomination of the member; or
   (c) a member has been elected under paragraph 8(1)(h) and the member ceases to be a member of the staff of the Institute;

the Governor-General shall terminate the appointment of the member.

14 DISCLOSURE OF INTERESTS

(3) Sections 27F and 27J of the Commonwealth Authorities and Companies Act 1997 do not apply to an interest of a member referred to in paragraph 8(1)(c), (ca), (cb) or (h) or a member nominated under subsection 8(2), being an interest that the member has by reason only of having been nominated by a body or person referred to in that paragraph or subsection.

15 MEETINGS

(1) Subject to this section, meetings of the Institute shall be held at such times and places as the Institute determines.

(2) The Institute shall meet at least once every 4 months.
(3) The Chairperson:
   (a) may at any time convene a meeting; and
   (b) shall convene a meeting on receipt of a written request signed by not fewer
       than 3 members.

(4) The Minister may convene such meetings as the Minister considers necessary.

(5) At a meeting:
   (a) if the Chairperson is present, the Chairperson shall preside;
   (b) if the Chairperson is absent, the members present shall appoint one of their
       number to preside;
   (c) a majority of the members for the time being constitute a quorum;
   (d) all questions shall be decided by a majority of the votes of the members present
       and voting; and
   (e) the member presiding has a deliberative vote and, if necessary, also has a
       casting vote.

(6) The Institute shall keep minutes of its proceedings.

(7) The Institute shall regulate the procedure of its meetings as it thinks fit.

**Division 3—Committees of Institute**

16 COMMITTEES

(1) The Institute shall appoint a committee to be known as the Australian Institute of
    Health and Welfare Ethics Committee.

(2) The functions and composition of the Ethics Committee shall be as prescribed.

(3) Regulations for the purpose of subsection (2) must not be inconsistent with
    recommendations of the National Health and Medical Research Council.

(4) The Institute may appoint such other committees as it thinks fit to assist it in
    performing its functions.

(5) The functions and composition of a committee appointed under subsection (4) shall
    be as determined from time to time in writing by the Institute.

(6) The succeeding subsections of this section apply in relation to a committee appointed
    under subsection (1) or (4).

(7) The members of a committee may include members of the Institute.

(8) A member of a committee holds office for such period as is specified in the
    instrument of appointment.

(9) A member of a committee may resign by instrument in writing delivered to
    the Institute.
(10) Except where the Minister otherwise directs in writing, a member of a committee shall be paid such remuneration as is determined by the Remuneration Tribunal.

(11) A member of a committee (other than a member of the Institute) shall be paid such allowances as are prescribed.

(12) Subsections (9) and (10) have effect subject to the Remuneration Tribunal Act 1973.

(13) A member of a committee must disclose at a meeting of the committee any pecuniary or other interest:

(a) that the member has directly or indirectly in a matter being considered, or about to be considered by the committee; and

(b) that would conflict with the proper performance of the member’s functions in relation to the consideration of the matter.

The member must make the disclosure as soon as practicable after he or she knows of the relevant facts.

(14) The disclosure must be recorded in the minutes of the meeting.

(15) Subsection (13) does not apply to an interest held by a member described in paragraph 8(1)(c), (ca), (cb) or (h) or subsection 8(2) merely because the member was nominated by a body or person mentioned in that paragraph or subsection.

**Division 4—Director of Institute**

**17 DIRECTOR OF INSTITUTE**

(1) There shall be a Director of the Institute.

(2) The Director shall be appointed by the Minister on the recommendation of the Institute.

(3) The Director shall be appointed on a full-time or part-time basis for such period, not exceeding 5 years, as is specified in the instrument of appointment.

(5) The Director holds office on such terms and conditions (if any) in respect of matters not provided for by this Act as are determined by the Minister.

(6) The appointment of the Director is not invalid because of a defect or irregularity in connection with the appointment or the recommendation by the Institute.

(7) The Director shall not be present during any deliberation, or take part in any decision, of the Institute with respect to the appointment of the Director.

(8) Sections 11 and 14 apply to the Director.

(9) Sections 12 and 13 apply to the Director as if references in those sections to the Governor-General were references to the Minister.
FUNCTIONS OF DIRECTOR

(1) The Director shall manage the affairs of the Institute subject to the directions of, and in accordance with policies determined by, the Institute.

(2) All acts and things done in the name of, or on behalf of, the Institute by the Director shall be deemed to have been done by the Institute.

Division 5—Staff

STAFF

(1) The staff required for the purposes of this Act shall be:

(a) persons engaged under the Public Service Act 1999; and
(b) persons appointed or employed by the Institute.

(2) For the purposes of the Public Service Act 1999:

(a) the Director and the APS employees assisting the Director together constitute a Statutory Agency; and
(b) the Director is the Head of that Statutory Agency.

(3) The Institute may engage as advisers or consultants persons having suitable qualifications and experience.

(4) The terms and conditions of appointment or employment of members of the staff referred to in paragraph (i)(b) are such as are determined by the Institute.

(5) The terms and conditions of engagement of advisers or consultants are such as are determined by the Institute.

PART III—FINANCE

MONEY TO BE APPROPRIATED BY PARLIAMENT

(1) There is payable to the Institute such money as is appropriated by the Parliament for the purposes of the Institute.

(2) The Minister for Finance may give directions as to the means in which, and the times at which, money referred to in subsection (i) is to be paid to the Institute.

MONEY OF INSTITUTE

(1) The money of the Institute consists of:

(a) money paid to the Institute under section 20; and
(b) any other money, other than trust money, paid to the Institute.

(2) The money of the Institute shall be applied only:

(a) in payment or discharge of the expenses, charges, obligations and liabilities incurred or undertaken by the Institute in the performance of its functions and the exercise of its powers;
(b) in payment of remuneration and allowances payable under this Act; and
(c) in making any other payments required or permitted to be made by the Institute.

(3) Subsection (2) does not prevent investment of surplus money of the Institute under section 18 of the Commonwealth Authorities and Companies Act 1997.

23 CONTRACTS
The Institute shall not, except with the written approval of the Minister:
(a) enter into a contract involving the payment or receipt by the Institute of an amount exceeding $200,000 or such higher amount as is prescribed; or
(b) enter into a lease of land for a period of 10 years or more.

24 EXTRA MATTERS TO BE INCLUDED IN ANNUAL REPORT
(2) A report on the Institute under section 9 of the Commonwealth Authorities and Companies Act 1997 must, in respect of each direction given under subsection 7(1) that is applicable to the period to which the report relates, include:
(a) particulars of the direction; or
(b) where the Institute considers that the particulars contain information concerning a person or are of a confidential nature—a statement that a direction was given.

25 TRUST MONEY AND TRUST PROPERTY
(1) The Institute:
(a) shall pay trust money into an account or accounts referred to in subsection 18(2) of the Commonwealth Authorities and Companies Act 1997 containing no money other than trust money;
(b) shall apply or deal with trust money and trust property only in accordance with the powers and duties of the Institute as trustee; and
(c) may only invest trust money:
   (i) in any manner in which the Institute is authorised to invest the money by the terms of the trust; or
   (ii) in any manner in which trust money may be lawfully invested.

26 EXEMPTION FROM TAXATION
The income, property and transactions of the Institute are not subject to taxation (including taxation under the Bank Account Debits Tax Act 1982) under any law of the Commonwealth or of a State or Territory.
PART IV—MISCELLANEOUS

27 DELEGATION BY INSTITUTE

(1) The Institute may, either generally or as otherwise provided by the instrument of delegation, by writing under its common seal:

(a) delegate to a member;
(b) delegate to a member of the staff of the Institute; and
(c) with the approval of the Minister—delegate to any other person or body;

all or any of the Institute’s powers or functions under this Act, other than this power of delegation.

(2) A power or function so delegated, when exercised or performed by the delegate, shall, for the purposes of this Act, be deemed to have been exercised or performed by the Institute.

(3) A delegation does not prevent the exercise of a power or performance of a function by the Institute.

28 DELEGATION BY DIRECTOR

(1) The Director may, either generally or as otherwise provided by the instrument of delegation, by instrument in writing:

(a) delegate to a member;
(b) delegate to a member of the staff of the Institute; or
(c) with the approval of the Minister—delegate to any other person or body;

all or any of the Director’s powers and functions under this Act, other than this power of delegation.

(2) A power or function so delegated, when exercised or performed by the delegate, shall, for the purposes of this Act, be deemed to have been exercised or performed by the Director.

(3) A delegation does not prevent the exercise of a power or performance of a function by the Director.

29 CONFIDENTIALITY

(1) Subject to this section, a person (in this subsection called the informed person) who has:

(a) any information concerning another person (which person is in this section called an information subject), being information acquired by the informed person because of:

(i) holding an office, engagement or appointment, or being employed, under this Act;
(ii) performing a duty or function, or exercising a power, under or in connection with this Act; or
(iii) doing any act or thing under an agreement or arrangement entered into by the Institute; or

(b) any document relating to another person (which person is in this section also called an information subject), being a document furnished for the purposes of this Act;

shall not, except for the purposes of this Act, either directly or indirectly:

(c) make a record of any of that information or divulge or communicate any of that information to any person (including an information subject);
(d) produce that document to any person (including an information subject); or
(e) be required to divulge or communicate any of that information to a court or to produce that document in a court.

Penalty: $2,000 or imprisonment for 12 months, or both.

(2) Subject to subsections (2A) and (2B), nothing in this section prohibits:

(a) a person from divulging or communicating information, or producing a document, to the Minister if it does not identify an information subject;
(b) a person from divulging or communicating information, or producing a document, to a person specified in writing by the person (in this subsection called the information provider) who divulged or communicated the information, or produced the document, directly to the Institute;
(c) a person from divulging or communicating information, or producing a document, to a person specified in writing by the Ethics Committee if to do so is not contrary to the written terms and conditions (if any) upon which the information provider divulged or communicated the information, or produced the document, directly to the Institute; or
(d) the publication of conclusions based on statistics derived from, or of particulars of procedures used in, the work of the Institute, if:

(i) to do so is not contrary to the written terms and conditions (if any) upon which an information provider divulged or communicated information relevant to the publication, or produced a document relevant to the publication, directly to the Institute; and

(ii) the publication does not identify the information subject.

(2A) Paragraph (2)(c) applies only to information that is health-related or welfare-related information and statistics.

(2B) Paragraph (2)(c) applies to a document only to the extent to which the document contains health-related or welfare-related information and statistics.
(3) A person to whom information is divulged or communicated, or a document is produced, under paragraph (2)(a), (b) or (c), and any person under the control of that person is, in respect of that information or document, subject to subsection (1) as if the person were a person exercising powers, or performing duties or functions, under this Act and had acquired the information or document in the exercise of those powers or the performance of those duties or functions.

(4) In this section:

(a) court includes any tribunal, authority or person having power to require the production of documents or the answering of questions;

(b) person includes a body or association of persons, whether incorporated or not, and also includes:
   (i) in the case of an information provider—a body politic; or
   (ii) in the case of an information subject—a deceased person;

(c) produce includes permit access to;

(d) publication, in relation to conclusions, statistics or particulars, includes:
   (i) the divulging or communication to a court of the conclusions, statistics or particulars; and
   (ii) the production to a court of a document containing the conclusions, statistics or particulars; and

(e) a reference to information concerning a person includes:
   (i) a reference to information as to the whereabouts, existence or non-existence of a document concerning a person; and
   (ii) a reference to information identifying a person or body providing information concerning a person.

30 RESTRICTED APPLICATION OF THE EPIDEMIOLOGICAL STUDIES (CONFIDENTIALITY) ACT 1981

(1) The Epidemiological Studies (Confidentiality) Act 1981 (in this section called the Confidentiality Act) does not apply to anything done in the exercise of a power or performance of a function under this Act.

(2) Notwithstanding the Confidentiality Act, a person who has assisted, or is assisting in, the conduct of a prescribed study or an epidemiological study may, at the written request of the Institute:
   (a) communicate to the Institute any information acquired by the person because of having assisted, or assisting, in the conduct of that study; and
   (b) give the Institute access to documents prepared or obtained in the conduct of that study.
(3) It is a defence to a prosecution under the Confidentiality Act if it is established that the information was communicated or access to a document was given, as the case may be, in accordance with a written request by the Institute.

(4) In this section:

(a) *epidemiological study* has the same meaning as in the Confidentiality Act; and

(b) *prescribed study* has the same meaning as in the Confidentiality Act.

31 PERIODICAL REPORTS

(1) The Institute shall prepare and, as soon as practicable, and in any event within 6 months:

(a) after 31 December 1987—shall submit to the Minister a health report for the period commencing on the commencement of this Act and ending on that date; and

(b) after 31 December 1989 and every second 31 December thereafter—shall submit to the Minister a health report for the 2 year period ending on that 31 December.

(1A) The Institute must submit to the Minister:

(a) as soon as practicable after (and in any event within 6 months of) 30 June 1993, a welfare report prepared by the Institute for the period:

(i) beginning on the day on which the Australian Institute of Health Amendment Act 1992 commences; and

(ii) ending on 30 June 1993; and

(b) as soon as practicable after (and in any event within 6 months of) 30 June 1995 and every second 30 June thereafter, a welfare report for the 2 year period ending on that 30 June.

(2) The Institute may at any time submit to the Minister:

(a) a health or welfare report for any period; or

(b) a report in respect of any matter relating to the exercise of the powers, or the performance of the functions, of the Institute or its committees under this Act.

(3) A health report shall provide:

(a) statistics and related information concerning the health of the people of Australia; and

(b) an outline of the development of health-related information and statistics by the Institute, whether by itself or in association with other persons or bodies; during the period to which the report relates.
(3A) A welfare report must provide:

(a) statistics and related information concerning the provision of welfare services to the Australian people; and

(b) an outline of the development of welfare-related information and statistics by the Institute, whether by itself or in association with other persons or bodies; during the period to which the report relates.

(4) The Minister shall cause a copy of a report submitted under subsection (1) or (1A) to be laid before each House of the Parliament within 15 sitting days of that House after the day on which the Minister receives the report.

(5) The Minister may cause a copy of a report submitted under subsection (2) to be laid before each House of the Parliament.

32 REGULATIONS

The Governor-General may make regulations, not inconsistent with this Act, prescribing matters required or permitted by this Act to be prescribed

NOTES TO THE AUSTRALIAN INSTITUTE OF HEALTH AND WELFARE ACT 1987

Note 1

The Australian Institute of Health and Welfare Act 1987 as shown in this compilation comprises Act No. 41, 1987 amended as indicated in the Tables below.

All relevant information pertaining to application, saving or transitional provisions prior to 28 June 2001 is not included in this compilation. For subsequent information see Table A.
### Table of Acts

<table>
<thead>
<tr>
<th>Act</th>
<th>Number and year</th>
<th>Date of Assent</th>
<th>Date of commencement</th>
<th>Application, saving or transitional provisions</th>
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<tr>
<td>Health Legislation Amendment Act (No. 2) 2001</td>
<td>59, 2001</td>
<td>28 June 2001</td>
<td>Schedule 3 (items 7–10): 15 Dec 1998 (see s. 2) Schedule 3 (item 12): 1 Jan 1999 Remainder: Royal Assent</td>
<td>Sch 1 (items 4, 9) [see Table A]</td>
</tr>
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</table>
| Abolition of Compulsory Age Retirement (Statutory Officeholders) Act 2001 | 159, 2001       | 1 Oct 2001     | 29 Oct 2001 | Sch 1 (item 97) [see Table A] |}

(a) The Australian Institute of Health and Welfare Act 1987 was amended by Part III (sections 7–9) only of the Community Services and Health Legislation Amendment Act 1988, subsection 2(1) of which provides as follows:

(i) Sections 1, 2, 7, 8, 9, 10, 13, 15 and 17 and paragraph 20(b) commence on the day on which this Act receives the Royal Assent.

(b) The Australian Institute of Health and Welfare Act 1987 was amended by Part 2 (sections 3–6) only of the Community Services and Health Legislation Amendment Act 1989, subsection 2(1) of which provides as follows:

(i) Subject to subsections (2), (3), (4), (5), (6), (7), (8), (9) and (10), this Act commences on the day on which it receives the Royal Assent.
The *Australian Institute of Health and Welfare Act 1987* was amended by Schedule 2 (items 324–337) only of the *Audit (Transitional and Miscellaneous) Amendment Act 1997*, subsection 2(2) of which provides as follows:

(2) Schedules 1, 2 and 4 commence on the same day as the *Financial Management and Accountability Act 1997*.

The *Australian Institute of Health and Welfare Act 1987* was amended by Schedule 1 (items 195–197) only of the *Public Employment (Consequential and Transitional) Amendment Act 1999*, subsections 2(1) and (2) of which provide as follows:

(1) In this Act, *commencing time* means the time when the *Public Service Act 1999* commences.

(2) Subject to this section, this Act commences at the commencing time.

The *Australian Institute of Health and Welfare Act 1987* was amended by Schedule 10 (items 35–37) only of the *Corporate Law Economic Reform Program Act 1999*, subsection 2(2)(c) of which provides as follows:

(2) The following provisions commence on a day or days to be fixed by Proclamation:

The items in Schedules 10, 11 and 12.

**Table of Amendments**

<table>
<thead>
<tr>
<th>Provision affected</th>
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<td>am. No. 95, 1989; No. 16, 1992; No. 152, 1997; No. 59, 2001</td>
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<td>am. No. 16, 1992; No. 152, 1997</td>
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<td>S. 5</td>
<td>am. No. 16, 1992</td>
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<td>S. 7</td>
<td>am. No. 95, 1989; No. 16, 1992; No. 152, 1997</td>
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<td>am. No. 16, 1992; Nos. 59 and 159, 2001</td>
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<td>am. No. 16, 1992</td>
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<td>S. 11</td>
<td>rs. No. 122, 1991</td>
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<td>am. No. 146, 1999</td>
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<td>am. No. 122, 1991; No. 16, 1992; No. 152, 1997; No. 156, 1999</td>
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<td>am. No. 79, 1988; No. 16, 1992; No. 152, 1997; No. 156, 1999</td>
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<td>S. 16</td>
<td>am. No. 16, 1992; No. 152, 1997; No. 59, 2001</td>
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<tr>
<td>S. 17</td>
<td>am. No. 16, 1992</td>
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<td>S. 19</td>
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<td>rep. No. 152, 1997</td>
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<td>S. 22</td>
<td>am. No. 152, 1997</td>
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<td>S. 23</td>
<td>am. No. 231, 1997</td>
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<td>rs. No. 152, 1997</td>
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<td>am. No. 79, 1988; No. 152, 1997</td>
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<tr>
<td>S. 25</td>
<td>am. No. 152, 1997</td>
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<tr>
<td>S. 29</td>
<td>am. No. 95, 1989; No. 16, 1992; No. 59, 2001</td>
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</tbody>
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Table A

APPLICATION, SAVING OR TRANSITIONAL PROVISIONS

Health Legislation Amendment Act (No. 2) 2001 (No. 59, 2001)

SCHEDULE 1

4 Application

The amendments made by this Part apply to appointments made after the commencement of this Part.

9 Transitional provision

(1) Immediately after the commencement of this item, the Institute is taken to have appointed each member of the former Ethics Committee as a member of the Australian Institute of Health and Welfare Ethics Committee.

(2) The appointment of each such member is taken to end at the time when the member’s term of appointment as a member of the former Ethics Committee would have ended under the instrument appointing the person as a member of that Committee.

(3) In this item:

former Ethics Committee means the Health Ethics Committee of the Australian Institute of Health and Welfare, within the meaning of the Australian Institute of Health and Welfare Act 1987 as in force immediately before the commencement of this item.

Abolition of Compulsory Age Retirement (Statutory Officeholders) Act 2001 (No. 159, 2001)

SCHEDULE 1

97 Application of amendments

The amendments made by this Schedule do not apply to an appointment if the term of the appointment began before the commencement of this item.
APPENDIX 3

ETHICS COMMITTEE REGULATIONS

Australian Institute of Health and Welfare Ethics Committee Regulations 1989

Statutory Rules 1989 No. 118 as amended
made under the

Health Act 1987

This compilation was prepared on 5 April 2002
taking into account amendments up to SR 2002 No. 62

Prepared by the Office of Legislative Drafting,
Attorney-General’s Department, Canberra
## CONTENTS

1. Name of Regulations [see Note 1] 107
2. Definition 107
3. Functions 107
4. Composition 107

Notes 108
1 Name of Regulations [see Note 1]
These Regulations are the *Australian Institute of Health and Welfare Ethics Committee Regulations 1989*.

2 Definition
In these Regulations:

*identifiable data* means data from which an individual can be identified.

3 Functions
The functions of the Ethics Committee are:

(a) to form an opinion, on ethical grounds, about the acceptability of, and to impose any conditions that it considers appropriate on:
   (i) activities that are being, or are proposed to be, engaged in by the Institute in the performance of its functions; and
   (ii) activities that are being, or are proposed to be, engaged in by other bodies or persons in association with, or with the assistance of, the Institute in the performance of its functions; and
   (iii) the release, or proposed release, of identifiable data by the Institute for research purposes;

   having regard to any relevant ethical principles and standards formulated or adopted by the National Health and Medical Research Council and to any other matters that the Ethics Committee considers relevant;

(b) where appropriate, to revise an opinion so formed or to form another opinion;

(c) to inform the Institute from time to time of the opinions so formed or as revised and its reasons for forming or revising those opinions; and

(d) to provide a written annual report of the Ethics Committee’s operations to the Institute.

4 Composition
The Ethics Committee is to consist of the following members:

(a) a chairperson;

(b) the Director of the Institute or a nominee of the Director;

(c) a person with knowledge of, and current experience in, the professional care, counselling or treatment of people;

(d) a person with knowledge of, and current experience in, the areas of research that are regularly considered by the Ethics Committee;

(e) a nominee of the person in each State and Territory who is responsible for registering births, deaths and marriages in that State or Territory;
(f) a minister of religion or a person who performs a similar role in a community;
(g) a lawyer;
(h) at least 1 person of each gender who is able to represent general community attitudes, is not affiliated with the Institute and is not currently involved in medical, scientific or legal work.

Examples for paragraph (c)
A medical practitioner, a clinical psychologist, a social worker or a nurse.

Example for paragraph (f)
An Aboriginal elder.

Notes to the Australian Institute of Health and Welfare Ethics Committee Regulations 1989

NOTE 1

Table of Statutory Rules

<table>
<thead>
<tr>
<th>Year and number</th>
<th>Date of notification in Gazette</th>
<th>Date of commencement</th>
<th>Application, saving or transitional provisions</th>
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<td>2002 No. 62</td>
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<td>5 Apr 2002</td>
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Table of Amendments

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<th>R. 3</th>
<th>R. 4</th>
</tr>
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<td>Provision affected</td>
<td>How affected</td>
<td>rs. 2002 No. 62</td>
<td>am. 2002 No. 62</td>
<td>rs. 2002 No. 62</td>
</tr>
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</table>
AUSTRALIAN CENTRE FOR ASTHMA MONITORING (ACAM)
(Woolcock Institute of Medical Research, Sydney)
ACAM aims to help reduce the burden of asthma in Australia by developing, collating, interpreting and disseminating data relevant to asthma prevention, management and health policy.

DENTAL STATISTICS AND RESEARCH UNIT (DSRU)
(University of Adelaide, Adelaide)
DSRU aims to improve the oral health of Australians through the collection, analysis and reporting of dental statistics and through research on dental health status, dental practices and use of dental services, and the dental labour force.

AUSTRALIAN GENERAL PRACTICE STATISTICS AND CLASSIFICATION CENTRE (AGPSCC)
(Westmead Hospital, Sydney)
AGPSCC provides information about activities in general practice, develops primary care classification systems and conducts the BEACH (Bettering the Evaluation and Care of Health) study.

NATIONAL INJURY SURVEILLANCE UNIT (NISU)
(Flinders University, Adelaide)
NISU analyses and reports on existing data, assesses needs and opportunities for new information sources and mechanisms, and develops and improves information sources and other relevant infrastructure.

NATIONAL PERINATAL STATISTICS UNIT (NPSU)
(University of New South Wales, Sydney)
NPSU analyses and reports on reproductive and perinatal health, birth anomalies and assisted conception.

PUBLIC HEALTH INFORMATION DEVELOPMENT UNIT (PHIDU)
(University of Adelaide, Adelaide)
PHIDU assists in the development and presentation of public health data determinants.
**NATIONAL CENTRE FOR CLASSIFICATION IN HEALTH (NCCH)**
(University of Sydney, Sydney and Queensland University of Technology, Brisbane)
NCCH furthers the AIHW work program by supporting the use of health classifications in mortality, hospitals and other data sets, and associated international work.

**NATIONAL CENTRE FOR IMMUNISATION RESEARCH AND SURVEILLANCE OF VACCINE PREVENTABLE DISEASES (NCIRS)**
(Westmead Children’s Hospital, Sydney)
AIHW assists NCIRS to monitor vaccine preventable diseases.

**NATIONAL CENTRE IN HIV/AIDS EPIDEMIOLOGY AND CLINICAL RESEARCH (NCHECR)**
(University of New South Wales, Sydney)
AIHW assists NCHECR to monitor HIV/AIDS and viral hepatitis.

**CENTRE FOR BURDEN OF DISEASE AND COST EFFECTIVENESS**
(University of Queensland)
AIHW assists the Centre in Burden of Disease analysis and related work.
## Board members’ qualifications, current positions and details of meetings attended from 1 July 2004 to 30 June 2005

<table>
<thead>
<tr>
<th>Board member</th>
<th>Number of meetings attended</th>
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<tbody>
<tr>
<td><strong>Attended</strong></td>
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<tr>
<td>The Hon. Peter Collins, AM, QC, BA, LLB</td>
<td>3</td>
</tr>
<tr>
<td>Board Chair</td>
<td></td>
</tr>
<tr>
<td>Professor Heather Gardner, BA (Hon), MA</td>
<td>3</td>
</tr>
<tr>
<td>Ministerial appointee</td>
<td></td>
</tr>
<tr>
<td>Mr Ian Spicer, AM, LLB, FAIM, FICM, AICS</td>
<td>3</td>
</tr>
<tr>
<td>Ministerial appointee</td>
<td></td>
</tr>
<tr>
<td>Associate Professor Kerry Kirke, AM, MD, FAFPHM, (RACP) FRIPH</td>
<td>3</td>
</tr>
<tr>
<td>Ministerial appointee</td>
<td></td>
</tr>
<tr>
<td>Ms Jane Halton, BA (Hon), FAIM</td>
<td>0 *</td>
</tr>
<tr>
<td>Secretary, Department of Health and Ageing</td>
<td></td>
</tr>
<tr>
<td>Mr Dennis Trewin, BSc (Hon), BEc, MSc</td>
<td>2 *</td>
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<tr>
<td>Australian Statistician, Australian Bureau of Statistics</td>
<td></td>
</tr>
<tr>
<td>Ms Linda Apelt, BEd, GradDip (Counselling), MEd Studies</td>
<td>2</td>
</tr>
<tr>
<td>Director-General, Queensland Department of Communities and Disability Services, Representative of the Community Services Ministers’ Advisory Council</td>
<td></td>
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<tr>
<td>Mr Peter Allen, BA, Dip Journalism</td>
<td>3</td>
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<tr>
<td>Under Secretary, Policy and Strategic Projects, Victoria. Dept of Human Services, Representative of the Australian Health Ministers’ Advisory Council</td>
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<tr>
<td>Dr Owen Donald, BA, PhD,</td>
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<tr>
<td>Director of Housing, Victoria, and Executive Director of Housing and Community Building, Representative of the state housing departments</td>
<td></td>
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<tr>
<td>Ms Justine Boland, BA</td>
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<tr>
<td>Staff representative</td>
<td></td>
</tr>
<tr>
<td>Dr Richard Madden, BSc, PhD, FIA, FIAA</td>
<td>3</td>
</tr>
<tr>
<td>Director, Australian Institute of Health and Welfare</td>
<td></td>
</tr>
</tbody>
</table>

*Where the member was not present his or her representative attended on each occasion.

**Note:** A representative of the Secretary, Department of Family and Community Services, attended and participated in Board meetings.

The National Health and Medical Research Council (NHMRC) and the AIHW have reciprocal arrangements to observe Institute Board and NHMRC Council meetings respectively.
APPENDIX 6

AUDIT AND FINANCE COMMITTEE MEMBERS
Audit and Finance Committee members’ qualifications, current positions and details of meetings attended from 1 July 2004 to 30 June 2005

<table>
<thead>
<tr>
<th>Committee member</th>
<th>Number of meetings attended</th>
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<tbody>
<tr>
<td>Ms Linda Apelt, BEd, GradDip (counselling), M Ed Studies</td>
<td>3</td>
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<tr>
<td>Director-General, Queensland Department of Communities and Disability Services (Chair)</td>
<td></td>
</tr>
<tr>
<td>The Hon. Peter Collins, AM, QC, BA, LLB Board Chair</td>
<td>3</td>
</tr>
<tr>
<td>Mr Ian Spicer, AM, LLB, FAIM, FICM, AICS Ministerial appointee</td>
<td>3</td>
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</tbody>
</table>

*Three meetings were held in this year.
APPENDIX 7

FREEDOM OF INFORMATION
FREEDOM OF INFORMATION STATEMENT

As required by s. 8 of the Freedom of Information Act 1982, the following information is published regarding the organisation and functions of the AIHW, and how members of the public can gain access to documents maintained in the possession of the AIHW.

Organisation and functions of the Australian Institute of Health and Welfare

Chapter 1 of this report provides details of the organisation and functions of the AIHW.

POWERS

The AIHW is a body corporate subject to the Commonwealth Authorities and Companies Act 1997. Powers exercised by the Chairperson of the Board and the AIHW’s Director are in accordance with delegations determined under that Act.

CONSULTATIVE ARRANGEMENTS

The composition of the AIHW Board, prescribed in s. 8 of the Australian Institute of Health and Welfare Act 1987 (see Appendix 2), enables participation on the Board by a broad range of bodies or persons outside the Commonwealth administration.

The AIHW consults with a wide range of constituents through its membership of national committees (see Appendix 10).

The AIHW has established a number of topic-specific steering committees which include bodies and persons from outside the Commonwealth administration, to advise the AIHW regarding its major reports.

CATEGORIES OF DOCUMENTS IN POSSESSION OF THE AUSTRALIAN INSTITUTE OF HEALTH AND WELFARE

Documents available to the public upon payment of a fee

The AIHW does not hold any documents of this type.

Documents available for purchase or available free of charge

The majority of AIHW reports are available free of charge on its website (www.aihw.gov.au), or can be purchased through the AIHW website or from its contracted distributor CanPrint.

Australian Institute of Health and Welfare data

The AIHW makes available through its website unidentifiable aggregated data on a series of data ‘cubes’. (See Chapter 2.)

Data collected under the Australian Institute of Health and Welfare Act 1987 are protected by the confidentiality provisions (s. 29) of that Act.
**Australian Institute of Health and Welfare seminar program**
Documents describing topics included on the AIHW seminar program conducted for staff of the AIHW and, for some seminars, open to invited guests.

**Government and Parliament**
Some ministerial briefings, ministerial correspondence, replies to Parliamentary questions and tabling documents.

**Meeting proceedings**
Agenda papers and records of proceedings of internal and external meetings and workshops.

**Business management**
Documents related to development of the AIHW’s work program, business and personnel management, and general papers and correspondence related to management of the AIHW’s work program.

**Privacy**
The AIHW supplies information on the extent and nature of its holdings of personal information for inclusion in the *Personal Information Digest* published by the Office of the Federal Privacy Commissioner.

**Freedom of Information requests**
There were no requests made under the *Freedom of Information Act 1982* during 2002–03.

**Freedom of Information enquiries**
All enquiries concerning access to documents under the *Freedom of Information Act 1982* may be directed to the Freedom of Information Contact Officer, Australian Institute of Health and Welfare, GPO Box 570, Canberra, ACT 2601; telephone (02) 6244 1174.
APPENDIX 8

STAFFING
Staff numbers at the AIHW have remained relatively constant in the 2004–05 year, following an increase of 8.4% the previous year.

**Table 1: Staff by category of employment at 30 June 2005**

<table>
<thead>
<tr>
<th>Status</th>
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<th>Male</th>
<th>Total 30 June 2005</th>
<th>Total 30 June 2004</th>
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<td>Full-time</td>
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<td>Part-time</td>
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<td>Leave without pay</td>
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<tr>
<td><strong>Total</strong></td>
<td>149</td>
<td>68</td>
<td>217</td>
<td>218</td>
</tr>
</tbody>
</table>

**Table 2: Staff by level at 30 June 2005**

<table>
<thead>
<tr>
<th>Status</th>
<th>Female</th>
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<th>Total 30 June 2005</th>
<th>Total 30 June 2004</th>
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<tr>
<td><strong>Total</strong></td>
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<td>68</td>
<td>217</td>
<td>218</td>
</tr>
</tbody>
</table>

*Note: This information is based on substantive positions.*

**Notes**

‘Ongoing staff’ refers to staff employed an ongoing basis by the AIHW, including ongoing staff on transfer from other APS agencies.

‘Non-ongoing staff’ refers to staff employed by the AIHW on contracts of employment for specified terms and specified tasks.
APPENDIX 9

UNIT HEADS
AIHW—UNIT HEADS (as at 30 June 2005)

Executive Unit
Margaret Fisher, GradDipTandDM, MBus (CSU)

Medical Advisor
Paul Magnus, MB, BS (UWA)

Business and Information Management Division

Business Promotion and Media
Nigel Harding, BA (Qld)

Data and Information Technology
Mike McGrath, BA (CCAE)

Finance and Commercial Services
Karen Melton, BCom (UNSW), CPA, (acting)

Information Services and Publishing
Judith Abercromby, BA (Hons) (Tas), DipLib (UNSW)

Metadata Management
David Braddock, BSc (Hons) (UQ), (acting)

People
Lyn Elliott, BA (CCAE)

Health Division

Cardiovascular Disease and Diabetes
Lynelle Moon, BMath (Wollongong), GradDipStats, GradDipPopulation Health (ANU)

Health Registers and Cancer Monitoring
John Harding, BA (Macquarie)

National Data Development and Standards
Trish Ryan, BA (Hons) (UNE)

National Health Priorities and Environmental Health
Kuldeep Bhatia, PhD (ANU), PhD (Panjab)

Population Health Data and Information Services
Mark Cooper-Stanbury, BSc (ANU)

Population Health
Paul Magnus, MB, BS (UWA)
Resources Division

Aboriginal and Torres Strait Islander Health and Welfare
Fadwa Al-Yaman, BSc (Kuwait), MA (Population Studies), PhD (ANU)

Expenditure
Tony Hynes, BAppSc (Canberra)

Hospitals and Mental Health Services
Jenny Hargreaves, BSc (Hons), GradDip Population Health (ANU)

Labour Force and Rural Health
Glenice Taylor, BSc (Wollongong)

Summary Measures
John Goss, BEc, BSc (ANU), GradDip Nutr Diet (QIT)

Welfare Division

Ageing and Aged Care
Ann Peut, BA (Hons), MA (Sociology) (UTAS), GradDip Applied Science, Library and Information Management

Children, Youth and Families
Cynthia Kim, BEc (Hons) (Sydney), M PubPolicy (ANU), GradCert Management (Canberra)

Community Services Integration and Linkage
Ruel Abello, MEc (ANU)

Functioning and Disability
Ros Madden, BSc (Hons), MSc (Sydney)

Housing Assistance
David Wilson, BEc (Hons) (Flinders)

Supported Accommodation and Crisis Services
Justin Griffin, BEc (James Cook)
HEADS OF COLLABORATING UNITS

Australian Centre for Asthma Monitoring
Guy B Marks, BMedSc, MB, BS (UNSW), PhD (Sydney), MRCP, FRACP, FAFPHM

Dental Statistics and Research Unit
Gary Slade, BDSc (Melb), Dip DPH (Toronto), PhD (Adelaide)

Australian General Practice Statistics and Classification Centre
Helena Britt, BA (UNSW), PhD (Sydney)

National Injury Surveillance Unit
James Harrison, MB, BS (Melb), MPH (Sydney), FAFPHM

National Perinatal Statistics Unit
Elizabeth Sullivan, MB, BS, MPH, MMed (Sexual Health) (Sydney), FAFPHM
APPENDIX 10

PUBLICATIONS
1 July 2004 – 30 June 2005
BOOKS

AIHW publications


Aboriginal and Torres Strait Islander health and welfare


Ageing and aged care

Carers in Australia: Assisting Frail Older People and People with a Disability. AIHW. AIHW Cat. No. AGE 41. Canberra: AIHW, 2004 (Aged Care Series No. 8).


Alcohol and other drugs

Alcohol and Other Drug Treatment Services in Australia 2002–03. AIHW. AIHW Cat. No. HSE 33. Canberra: AIHW, 2004 (Drug Treatment Series No. 3).


**Cancer**


**Cardiovascular disease**


The Relationship Between Overweight, Obesity and Cardiovascular Disease. AIHW. AIHW Cat. No. CVD 29. Canberra: AIHW, 2004 (Cardiovascular Disease Series No. 23).

**Children, youth and families**


**Data standards**


**Dental health**


Oral Health of Older Adults with Dementia, The. Chalmers JM, Carter KD, Spencer AJ. AIHW Cat. No. DEN 111. Canberra: AIHW, 2005 (Dental Statistics and Research Series No. 29).

**Functioning and disability**


**General practice**


**Health and welfare expenditure**


**Health and welfare labour force**


**Health and welfare services and care**


Mental Health Services in Australia 2002–03. AIHW. AIHW Cat. No. HSE 35. Canberra: AIHW, 2005 (Mental Health Series No. 6).

**Housing and homelessness**


**Injury**


**National health and welfare information**


**Perinatal health**


**Population health**


APPENDIX 10 PUBLICATIONS

Rural, Regional and Remote Health: Indicators of Health. AIHW. AIHW Cat. No. PHE 59. Canberra: AIHW, 2005 (Rural Health Series No. 5).


BULLETINS

Aboriginal and Torres Strait Islander health and welfare

Rheumatic Heart Disease: All but Forgotten in Australia Except Among Aboriginal and Torres Strait Islander Peoples. AIHW. AIHW Cat. No. AUS 48. Canberra: AIHW, 2004 (AIHW Bulletin No. 16).

Ageing and aged care


Alcohol and other drugs


Cardiovascular disease


Children, youth and families


Diabetes

Health and welfare labour force

Housing and homelessness

Perinatal health

Population health

PERIODICALS
AIHW Access

Alcohol and other drugs
Alcohol and Other Drug Treatment Services in South Australia (2002–03). AIHW. Canberra: AIHW, 2004 (Drug Treatment Data Briefing).
Alcohol and Other Drug Treatment Services in the Australian Capital Territory (2002–03). AIHW. Canberra: AIHW, 2004 (Drug Treatment Data Briefing).
Alcohol and Other Drug Treatment Services in the Northern Territory (2002–03). AIHW. Canberra: AIHW, 2004 (Drug Treatment Data Briefing).

Alcohol and Other Drug Treatment Services in Western Australia (2002–03). AIHW. Canberra: AIHW, 2004 (Drug Treatment Data Briefing).

Cardiovascular disease

Health Care Expenditure on Cardiovascular Diseases 2000–01. AIHW. Canberra: AIHW, 2004 (Cardiovascular Disease Data Briefing No. 1).

Dental health


Injury


WORKING PAPERS


COLLABORATIVE PUBLICATIONS (WITH NON-AIHW DATA PROVIDER)

Data standards


Population oral health

STAFF OTHER

Abstracts


AUSTRALIAN INSTITUTE OF HEALTH AND WELFARE ANNUAL REPORT 2004–05
APPENDIX 10
PUBLICATIONS

Australian Institute of Health and Welfare
Annual Report 2004–05


Journal articles


**Major conference papers and presentations**


NATIONAL COMMITTEES CHAIRED BY AIHW

Australian Birth Defects Society
Information Strategy Committee NMDS Sub-committee
Health Data Standards Committee
National Community Services Data Committee
National Housing Data Development Committee

NATIONAL COMMITTEES OF WHICH AIHW IS A MEMBER AND PROVIDES THE SECRETARIAT

Advisory Committee on Australian and International Disability Data (replaces DDRAG)
Advisory Committee on Maternal Mortality and Morbidity
AHMAC Mental Health Working Group Information Strategy Committee—NMDS Sub-committee
Australasian Association of Cancer Registries
Commonwealth State/Territory Disability Agreement National Minimum Data Set Network
Computer Assisted Telephone Interview Technical Reference Group
Health Data Standards Committee
Information Strategy Committee NMDS Sub-committee
Intergovernmental Committee on Drugs Alcohol and Other Drug Treatment Services
National Minimum Data Set Working Group
Juvenile Justice Data Working Group
Medical Indemnity Data Working Group
National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data
National Burden of Disease Advisory Committee
National Cardiovascular Monitoring System Advisory Committee
National Child Protection and Support Services Data Group
National Community Services Data Committee
National Community Services Information Management Group
National Diabetes Register Management Committee
National Housing Data Agreement Management Group
National Housing Data Development Committee
National Indigenous Housing Information Implementation Committee
National Perinatal Data Development Committee
National Public Health Information Working Group
Population Health Taskforce on Performance
Rural Health Information Advisory Committee
Statistical Information Management Committee
APPENDIX 12

ACTIVITIES FUNDED BY OUTSIDE BODIES FOR 2004–05 FINANCIAL YEAR
The projects below represent the contracted work the AIHW undertook in 2004–05 for other entities. These entities are shown as the funding body.

**Project:** Aboriginal and Torres Strait Islander Health and Welfare  
Funding body: Department of Health and Ageing

**Project:** Aboriginal and Torres Strait Islander Health Performance Indicators Jurisdictional Summary Report  
Funding body: Australian Health Ministers’ Advisory Council

**Project:** Admitted Patient Care National Minimum Data Set  
Funding body: Australian Health Ministers’ Advisory Council

**Project:** Admitted Patient Care National Minimum Data Set  
Funding body: Department of Health and Ageing

**Project:** Ageing Research Capacity Building Project  
Funding body: Department of Health and Ageing

**Project:** AIHW–WA Linkage Comparison between Residential Aged Care and Hospital Data  
Funding body: Australian Health Ministers’ Advisory Council

**Project:** Alcohol and other Drug Treatment Services National Minimum Data Set  
Funding body: Department of Health and Ageing

**Project:** Analysing Veterans in Residential Aged Care  
Funding body: Department of Veterans’ Affairs

**Project:** Analysis of Data Quality in Five Health Services Data Collections  
Funding body: Australian Health Ministers’ Advisory Council

**Project:** Analysis of Veterans’ Use of Community Aged Care Packages  
Funding body: Department of Veterans’ Affairs

**Project:** Arthritis and Musculoskeletal Conditions  
Funding body: Department of Health and Ageing

**Project:** Assessing Linking Strategies for the National Hospital Morbidity Database  
Funding body: Australian Health Ministers’ Advisory Council
<table>
<thead>
<tr>
<th>Project</th>
<th>Funding body</th>
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<tbody>
<tr>
<td>Asthma Monitoring</td>
<td>Department of Health and Ageing</td>
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<tr>
<td>Cancer Incidence Projections</td>
<td>Department of Health and Ageing</td>
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<td>Cancer Screening</td>
<td>Department of Health and Ageing</td>
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<tr>
<td>Central Processing Contract for Nurses</td>
<td>State and Territory Health Departments</td>
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<td>Child and Youth Health</td>
<td>Department of Health and Ageing</td>
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<tr>
<td>Child Welfare</td>
<td>State and Territory Departments of Community Services</td>
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<td>Childrens Services National Minimum Data Set Pilot Test 2002</td>
<td>Community Services Ministers’ Advisory Council</td>
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<tr>
<td>Chronic Disease and Behavioural Risk Factor Surveillance</td>
<td>Department of Health and Ageing</td>
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<td>Commonwealth/State Territory Disability Agreement Data Agency</td>
<td>Department of Family and Community Services</td>
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<td>Community Care Program Interfaces</td>
<td>Department of Health and Ageing</td>
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<td>Council of the Ageing</td>
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<td>Current Longitudinal Studies relevant to Ageing in Australia</td>
<td>Department of Health and Ageing</td>
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<td>Data Development and Analysis in relation to Dementia</td>
<td>Department of Health and Ageing</td>
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<td>Project:</td>
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<td>Developing a National Minimum Data Set for Public Sector Funding of Health Goods and Services</td>
<td>Australian Health Ministers’ Advisory Council</td>
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<td>Development and Administration of DVA’s Online Research Register</td>
<td>Department of Veterans’ Affairs</td>
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<td>Diabetes Register Data Providers</td>
<td>Department of Health and Ageing</td>
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<td>Drug Survey Public Health Information</td>
<td>Department of Health and Ageing</td>
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<td>Educational Outcomes for Children on Care and Protection Orders</td>
<td>Community Services Ministers’ Advisory Council</td>
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<td>Enhance Continence Program Data and analyse available National Data on Incontinence</td>
<td>Department of Health and Ageing</td>
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<td>Environmental Health Information Development</td>
<td>Department of Health and Ageing</td>
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<td>Epidemiology of Culturally and Linguistically Diverse ‘High Risk’ Communities</td>
<td>Diabetes Australia</td>
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<td>Expenditure on Health Care for Aboriginal and Torres Strait Islander Peoples (Third Report)</td>
<td>Department of Health and Ageing</td>
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<td>Extended Aged Care at Home- Data Development and Analysis and Community Aged Care Package Census Support</td>
<td>Department of Health and Ageing</td>
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<tr>
<td>Female Vietnam Veterans Health Register</td>
<td>Department of Veterans’ Affairs</td>
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<td>Functional Outcome of Data Modules</td>
<td>Australian Health Ministers’ Advisory Council</td>
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<td>HACC Data Dependency Workshop</td>
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Project: Health System Expenditures on Cancer in Australia 2000–01  
Funding body: Department of Health and Ageing

Project: Health Wiz Hospital Use Dataset Provision  
Funding body: Department of Health and Ageing

Project: HealthConnect Exploratory Project  
Funding body: Department of Health and Ageing

Project: Hospital Morbidity and Adverse Events Project  
Funding body: Department of Health and Ageing

Project: Housing Data Repository—S1  
Funding body: State and Territory Housing Departments

Project: Housing Data Standards—S3  
Funding body: State and Territory Housing Departments

Project: Housing Performance Reporting—S2  
Funding body: State and territory housing departments

Project: Indigenous Housing  
Funding body: Housing Ministers’ Advisory Council

Project: Indigenous Identification in Hospital Separations Data  
Funding body: Australian Health Ministers’ Advisory Council

Project: Influenza Vaccine Survey  
Funding body: Department of Health and Ageing

Project: Informatics and Data Standards  
Funding body: Department of Health and Ageing

Project: Integration of Data Standards  
Funding body: Australian Health Ministers’ Advisory Council

Project: Joint Information Models  
Funding body: Australian Health Ministers’ Advisory Council

Project: Juvenile Justice National Minimum Data Set—Australia  
Funding body: Australasian Juvenile Justice Administrators
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<td>Community Services Ministers’ Advisory Council</td>
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<td>Australian Health Ministers’ Advisory Council</td>
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<th>National Opioid Pharmacotherapy Statistics Annual Data Collection</th>
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Project: National Public Health Information
Funding body: Department of Health and Ageing

Project: National Public Health Information Working Group
Funding body: Department of Health and Ageing

Project: National Sentinel Events Report
Funding body: Department of Health and Ageing

Project: National Social Housing Survey
Funding body: State and territory departments with responsibility for Housing

Project: National Community Services Information Management Group Project—Development of National Minimum Data Set for Juvenile Justice and Youth Welfare
Funding body: Community Services Ministers’ Advisory Council

Project: National Heart Foundation of Australia’s Overweight/Obesity and Cardiovascular Disease Project
Funding body: National Heart Foundation

Project: Overcoming Indigenous Disadvantage—Key Indicators
Funding body: Productivity Commission

Project: Palliative Care Data Development
Funding body: Department of Health and Ageing

Project: Problem Gambling
Funding body: Department of Family and Community Services

Project: Program Management Data Dictionary
Funding body: Department of Health and Ageing

Project: Projects to Support Aboriginal Reconciliation
Funding body: Community Services Ministers’ Advisory Council

Project: Public Hospital Establishments National Minimum Data Set Evaluation
Funding body: Australian Health Ministers’ Advisory Council

Project: Residential Aged Care Projections
Funding body: Department of Veterans’ Affairs
Residential Aged Care Publications
Funding body: Department of Health and Ageing

Resolving Complex Data definitional Problems
Funding body: Australian Health Ministers’ Advisory Council

Review Coexisting Substance use
Funding body: Department of Health and Ageing

Review of Innovative Care Rehabilitation Service Pilot
Funding body: Department of Health and Ageing

Rural Health Information Project
Funding body: Department of Health and Ageing

SAAP National Data Collection Agency
Funding body: Department of Family and Community Services
(on behalf of state and territory departments of community services)

SAAP National Data Collection Agency Training
Funding body: State and Territory Departments of Community Services

Scoping Paper for Evaluation of Transition Care Program
Funding body: Department of Health and Ageing

Scoping Study of the Evaluation of Aged Care Innovative Pool
Funding body: Department of Health and Ageing

Secretariat Support for the Terminology and Classifications Work Group
Funding body: Department of Health and Ageing

Statistical Analysis Related to Healthy Ageing
Funding body: Department of Health and Ageing

Statistical Support Services to Department of Veterans Affairs
Funding body: Department of Veterans’ Affairs

Statistics on Drug Use in Australia
Funding body: Department of Health and Ageing
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<th>Project: Study of Mortality and Cancer Incidence in Australian Participants of the British Nuclear Tests in Australia</th>
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COLLABORATING UNITS

AUSTRALIAN CENTRE FOR ASTHMA MONITORING
Project: Australian Centre for Asthma Monitoring
Funding body: Department of Health and Ageing

NATIONAL PERINATAL STATISTICS UNIT
Project: Data Development for the Perinatal and Birth Anomalies Collections
Funding body: Australian Health Ministers' Advisory Council

DENTAL STATISTICS AND RESEARCH UNIT
Project: Dental Statistics and Research Unit
Funding body: Department of Health and Ageing

AUSTRALIAN GENERAL PRACTICE STATISTICS AND CLASSIFICATION CENTRE
Project: Australian General Practice Statistics and Classification Centre
BEACH Data Collection
Funding body: Department of Health and Ageing

NATIONAL INJURY SURVEILLANCE UNIT
Project: Injury Information and Statistics
Funding body: Department of Health and Ageing

Project: Alcohol and Workplace Culture and Safety
Funding body: Department of Health and Ageing

Project: Study of Injury Due to Transport Incidents
Funding body: Department of Transport and Regional Services
APPENDIX 13

AIHW CHARTER OF CORPORATE GOVERNANCE
INTRODUCTION

The Australian Institute of Health and Welfare (AIHW) exists to describe the Australian health and welfare systems. Reflecting the scope of those systems, the operating environment of the Australian Institute of Health and Welfare Board, created by legislation (the Australian Institute of Health and Welfare Act 1987 (AIHW Act)) as the Institute itself, is complex.

The AIHW is an Australian Government statutory authority within the Health and Ageing portfolio, reporting direct to the portfolio Minister. The Institute is defined as a body corporate subject to the Commonwealth Authorities and Companies Act 1997 (CAC Act). The Institute, as provided for by the AIHW Act, has delegated management of the Institute’s affairs to the AIHW Director.

The AIHW Charter of Corporate Governance has been prepared to provide guidance for members and potential members of the AIHW Board to ensure the Institute operates effectively as an independent agency of government. It defines the roles and responsibilities of individual members, and provides guiding principles to support members through the range of operational and legal issues they encounter in their direction of the Institute.

PURPOSE

This Charter outlines the framework for the corporate governance of the AIHW.

The AIHW is a statutory authority of the Australian Government and must take into account relevant governing laws. A clear set of instructions and processes outlining the Board’s responsibilities is designed to enable the Board to work effectively within its legislative requirements and in response to the requirements of the organisation. This paper outlines the corporate governance responsibilities of the Board and the structures established to support it.

AIHW’S MISSION AND VALUES

The AIHW is guided in all its undertakings by its Mission and Values.

AIHW Mission

Better health and wellbeing for Australians through better health and welfare statistics and information.

We inform community discussion and decision making through national leadership and collaboration in developing and providing health and welfare statistics and information.
Values

Accessibility    making our work available to all Australians
Expertise       applying specialised knowledge and high standards to our products and services
Independence    ensuring our work is objective, impartial and reflects our mission
Innovation      showing curiosity, creativity and resourcefulness in our work
Privacy         respecting and safeguarding the privacy of individuals and the confidentiality of those who provide the information we use.
Responsiveness  seeking and responding to the needs of all those who supply or use our data and information.

ROLES, POWERS AND RESPONSIBILITIES

1. Governing laws

ENABLING LEGISLATION
The Australian Institute of Health and Welfare was established as a statutory authority in 1987 by the then Australian Institute of Health Act 1987. In 1992 the AIHW’s role and functions were expanded to include welfare related information and statistics. The Act is now entitled the Australian Institute of Health and Welfare Act 1987.

Under the AIHW Act, AIHW Board members are collectively also referred to as ‘the Institute’.

The Board may appoint committees as it thinks fit to assist it in performing its functions (section 16).

As a statutory authority, the AIHW is defined in its Act as a body corporate subject to the CAC Act. Directors (members) are subject to legislation that specifies their duties and responsibilities under the CAC Act.

RESPONSIBLE MINISTER
The Minister for Health and Ageing is the Minister responsible for the AIHW and the Institute is therefore an agency within the Health and Ageing portfolio.
2. Constitution

Section 8(i) of the AIHW Act specifies the constitution of the Board.

The following members are appointed for a term of three years, by the Governor-General on the advice of the Minister:

- a Chairperson
- a member nominated by the Australian Health Minister’s Advisory Council
- a member nominated by the Community Services Minister’s Advisory Council
- a representative of the Housing Ministers’ Advisory Council;
- three members nominated by the Minister
- a person nominated by the Minister who has knowledge of the needs of consumers of health services
- a person nominated by the Minister who has knowledge of the needs of consumers of welfare services
- a person nominated by the Minister who has knowledge of the needs of consumers of housing assistance services
- a person nominated by the Minister who has expertise in research into public health issues.

Directors holding office by virtue of the position they hold (therefore not appointed) are:

- the Director
- the Australian Statistician
- the Secretary of the Department of Health and Ageing.

The Australian Bureau of Statistics and Department of Health and Ageing members may formally designate a representative to attend meetings on their behalf.

A member of staff of the Institute, elected by its staff, is also a member of the Board. The member is appointed annually through a staff ballot. This position is independent of the official appointment process.

Note: The Secretary of the Department of Family and Community Services and the Chief Executive Officer, National Health and Medical Research Council, or their nominees, attend and participate as observers with the agreement of the Board.

Board members who are Australian Government or state/territory officers (other than the Director and staff member) are referred to in this document as departmental representatives.
3. Conduct of Board members

As a statutory authority, the conduct of members of the AIHW Board is prescribed by the CAC Act. Members are bound by the Conduct of Directors, specified in the Act. (See Appendix 2.)

Directors are expected to ensure that they understand their responsibilities under both the CAC and AIHW Acts, and to uphold the Institute’s values.

4. Roles of Board members

Key responsibilities of the AIHW are to:

- provide biennial reports to the Minister and to Parliament on Australia’s health and Australia’s welfare
- establish data standards for health and welfare statistics
- develop knowledge, intelligence and statistics to better inform policy makers and the community.

ROLE OF BOARD

The Board has broad responsibilities in:

- setting the Institute’s mission and values and its strategic goals and directions, including endorsement of the Institute’s Corporate Plan and Business Plan
- maintaining the independence of the Institute
- ensuring that the Institute complies with legislative and administrative requirements
- meeting its statutory requirements, including making recommendations to the Minister to appoint a Director of the AIHW
- overseeing the financial viability of the Institute
- endorsement of the Annual Report and the audited financial statements (as required by the CAC Act) at a Board meeting
- advocacy and promotion of the contribution of information to improve health and welfare outcomes
- identifying and managing the risks that might impact on the Institute
- monitoring the performance of the organisation against its Corporate Plan and Business Plan
- securing feedback from stakeholders on the use of Institute products
- setting remuneration for, and assessing performance of, the Director
- review its own performance, including whether it has the appropriate skills among members to fulfil its functions.
ROLE OF CHAIRPERSON (IN ADDITION TO THE ROLE OF THE BOARD)

• Chair meetings of the Board and endorse associated processes.
• Extended role in managing the formal relationship between the Institute and the Minister.
• Manage significant issues between meetings of the Board.
• Manage the relationship between the Board and the Director of the AIHW.

ROLE OF DIRECTOR

• Provide leadership to the Institute in policy and statistical issues across the scope of the Institute’s functions.
• Manage the affairs of the Institute in accordance with the AIHW Act and the CAC Act.
• Establish and maintain appropriate working relationships with the portfolio Minister and other Ministers whose portfolios include activities within the scope of the Institute.
• Establish and maintain appropriate working relationships with the portfolio department, other relevant Australian Government, state and territory agencies, and associated Australian Government/state forums.
• Liaise as required with non-government bodies associated with the functions of the Institute.
• Ensure the Institute provides, either directly or through collaborations with others, high quality, timely information across the health and welfare sectors, and arrange the necessary financial resources to enable this.
• Ensure that the Board is properly advised on all matters.
• Ensure the security of data provided to the Institute, and protect confidentiality and privacy in accordance with legislative and ethical standards.
• Develop the Corporate Plan and the Business Plan.
• Maintain a strong financial position of the Institute.
• Attract and retain the committed, skilled staff needed to carry out the Institute’s functions.

ROLE OF STAFF–ELECTED BOARD MEMBER

• A staff–appointed representative is a member of the Board.
• The staff member is a full member, with the same responsibilities as other members.

ROLE OF OTHER MEMBERS

• Act in the best interests of the Institute. If nominated by a stakeholder group, a member may act as a channel for that stakeholder’s interests, but must act in the interests of the Institute. (See also ‘Conflicts of interests’.)

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• Support the Chair and Director of the Institute in decision making.
• Participate on Board Committees established under s. 16(4) of the AIHW Act.
• Provide input to the Board based on their knowledge and background.

ROLE OF SECRETARY
• The Secretary provides advice and support to the Board.
• The Secretary is independent of the Director of the Institute and staff when dealing with sensitive matters related to the Director’s employment.

5. Relationships

WITH MANAGEMENT
Management representatives are invited to attend Board meetings to inform discussion, while having no formal responsibilities.

WITH STAKEHOLDERS
Stakeholders are important to the prosperity of the Institute. The Institute has responsibility to a wide range of stakeholders, from the Minister to the whole community. Board members have an important role in establishing and nurturing sound relationships with the Institute’s stakeholders.

WITH STAFF
The Chair participates in key AIHW activities, notably the launch of *Australia’s Health* and *Australia’s Welfare*, and in developing the Corporate Plan and the Business Plan.

The AIHW Act places the employment and terms and conditions of staff under the control of the Director. The Board seeks to ensure the development and welfare of staff, and provides advice to the Director when considered appropriate.

6. Delegation of powers and actions

The Institute has established itself as a Board and delegated powers for the day-to-day operations of the Institute to the Director (s. 27).

7. Board processes

MEETINGS
The AIHW Act stipulates that the Board shall meet at least once every four months.

To enable the Board to guide the work of the Institute, to fit in with the launch of biennial publications, and to approve the financial statements, the Annual Report, and meet other deadlines, meetings are usually scheduled for March/April, June, September and December of each year.

On occasion, where issues are to be discussed by independent members only, for example commercially or personally sensitive issues, the Chair may excuse from discussion the Director, the staff member, and departmental representatives.
AGENDA AND PAPERS
The Director, in consultation with the Chair, formulates the agenda. Any Board members may submit items.

The Secretary of the Board sets a standard format for papers. Papers are developed by the Director of the Institute in consultation with Division Heads, sourced from the Institute. Division Heads are responsible for providing papers to the Secretary two weeks prior to the meeting date.

Papers are distributed electronically and in hard copy to members at least one week prior to the meeting date.

The Board will consider late papers with the approval of the Chair.

CONFIDENTIALITY
All papers for Board meetings are considered to be ‘Board in Confidence’ unless otherwise decided by the Board. Members and staff attending meetings, or having access to papers, are responsible for maintaining the confidentiality of discussions and papers.

While Departmental members may be supported by seeking adequate briefings from their departmental staff officers, to protect their confidentiality the full set of papers is not to be distributed throughout the Department. Where members require briefings on certain items, only the paper covering the item in question may be forwarded to relevant staff within their respective agencies. These papers may not be used for any purpose other than that for which they are intended.

The Institute will make available records of endorsed minutes to its staff.

The staff–elected member may make available notes on the outcome of issues following a Board meeting, in accordance with agreed release practices.

MINUTES
The secretariat’s notes on the meeting are provided to the Chair directly following the meeting.

The Board Secretary and secretariat staff are responsible for taking the minutes and producing a draft document for clearance by the Chair before circulation to all members. The minutes should primarily reflect the major decisions from the meeting. Where it is appropriate to do so, a brief background or notes from the discussion may be recorded to provide a more accurate picture of the proceedings.

The minutes of each meeting are endorsed at the subsequent meeting of the Board. Following endorsement, the Chair signs the minutes to be retained for the official record and are subject to audit scrutiny.
CONFLICTS OF INTERESTS

The CAC Act requires Directors to disclose their interests relevant to AIHW’s functions, and not participate in decisions where a conflict is declared. A member who considers that he or she may have an interest in the matter shall:

(i) disclose the existence and the nature of the interest as soon as the member becomes aware of the conflict

(ii) provide details of the interest as requested by other members to determine the nature and extent of the interest

(iii) remove themselves physically from the room, if appropriate, while the discussion takes place unless the Board determines otherwise.

In some cases Board members could be representing potential purchasers or competitors of the Institute with regard to contract work. In such a case a member should declare his or her interest with regard to particular agenda items. The member may be present for discussion of the item with the agreement of the Board, but not for the decision making.

CONFLICT OF ROLES

The Auditor-General has identified that the presence of government officers on the boards of statutory authorities may give rise to a conflict of roles, and has issued advice as follows (adapted to AIHW circumstances):

The portfolio Secretary, as a member of the Board, is simultaneously:

- chief policy adviser to the Minister for Health and Ageing and can be expected to oversee the Institute’s compliance with government policy objectives;
- a customer of the Institute as service provider
- a Board member expected to pursue the interests of the Institute.

If considered necessary for the portfolio Secretary to be excluded from sensitive discussions, such as those concerning forthcoming budget strategy, the Secretary may offer advice and then leave. Relevant papers should not be forwarded on such items.

Concerns by the portfolio secretary as a customer of the AIHW will be pursued through an outside stakeholder–consultation process and brought to the attention of the Board as necessary.

In relation to the Australian Statistician, it has been agreed with the Statistician that his agreement to an AIHW survey at the Board will constitute his agreement under s. 5(1)(a) of the AIHW Act, provided he has had adequate notice of the proposal.
DECISIONS TAKEN
Decisions of the Board are reached generally on a consensus basis. Decisions are recorded in the minutes.

Sections (5)(d) and (e) of the AIHW Act stipulate that ‘all questions shall be decided by a majority of the votes of the members present’, and ‘the member presiding has a deliberative vote and, if necessary, also has a casting vote’.

QUORUM
A quorum is the majority of members at the time of the meeting (s. 15(5)(c)).

Members may provide the Chair with their endorsement or otherwise of a recommendation if they are absent for discussion of a particular item.

If the Chair is absent, the members present shall appoint one of their number to preside.

REMUNERATION AND TRAVEL
In accordance with the AIHW Act, members who are not Australian Government, state or territory employees will be paid remuneration as determined by the Remuneration Tribunal.

The Institute makes all travel and accommodation arrangements where necessary. Flights are booked according to the best fare available.

The Institute will pay for accommodation and meals where members are required to stay overnight. The Institute will pay for any appropriate and necessary incidental expenses.

ENSURING CONTINUOUS IMPROVEMENT
The Board will review its performance each year. Issues reviewed may include its success in pursuing AIHW’s objectives, procedural matters, protocol and clarity of roles and individual performance.

INDUCTION
New members will be provided with a package including instructions and operations of the Board, and various relevant reading materials published by the Institute.

PROFESSIONAL DEVELOPMENT
The Chair may seek professional development opportunities relevant to the operations of the Board.

INDEMNITY OF MEMBERS
The AIHW provides appropriate indemnity for Board members.

COMPLAINTS AND DISPUTE RESOLUTION
Complaints, including complaints about decisions of the Ethics Committee, are to be referred to the Secretary to the Board in the first instance. The Director will advise the Chair on effort to resolve the complaint by mediation. If the complaint cannot be resolved in this way, the Chair may decide on an appropriate mediator to determine the complaint or dispute. The Chair shall advise the Board of any such actions, and the outcome. Disputes remaining unresolved after such a process will be referred to the Board for resolution.
8. Board committees

ETHICS COMMITTEE

The AIHW Ethics Committee is established under the AIHW Act and has the power to release identifiable data for research purposes. The AIHW is keen to fulfil its function to assist research and analysis of the data which it collects. It recognises that an unduly restrictive data release policy is contrary to the public interest. In recognising these issues the Institute is also aware of its legislative responsibility to protect the confidentiality of the information it receives, to respect the privacy and sensitivity of those to whom it relates, to maintain high-level data security procedures and, where appropriate, to incorporate the requirements of its information providers in those procedures.

The Committee considers the ethical acceptability of proposed applications and advises the Institute as to whether projects satisfy the criteria developed by the Committee. Through the Committee Secretary, it monitors existing projects annually, and maintains a register of applications for projects. The Committee provides a yearly report of its operation to both the Institute for inclusion in the Annual Report and also to the NHMRC for its reporting purposes.

The outcomes of meetings are reported to Board meetings by way of a written summary. At least once a year the Ethics Committee Chair is invited to a Board meeting to discuss issues related to the work of the Committee.

Committee membership is prescribed by legislation and is consistent with the guidelines established by the NHMRC for Human Research Ethics Committees.

Members of the Committee are appointed by the Board for a period of three years.

AUDIT AND FINANCE COMMITTEE

The Audit and Finance Committee is established to:

• ensure the Internal Auditor fulfils the responsibilities required
• approve the strategic, financial and data internal audit plans and annual audit work programs
• consider issues arising from audit reports and monitor and evaluate management’s response and action on those reports and recommendations
• review the Institute’s financial position and review quarterly financial reports in a form specified by the Committee
• ensure the timely tabling of the Annual Report before the Board
• report to the Board on any matters arising from either the Internal Audit or the External Audit functions that it is considered necessary that the Board be informed about
• carry out, or cause to be carried out, any investigation of any matter referred to it by the Board
• meet with the external auditor annually
• advise the Board on delegations and performance
• oversights the risk management strategy and advises the Board accordingly.

Membership comprises the Institute Chair and three non-executive members of the Board, one of whom is appointed as Chair of this Committee. Members are appointed for a term fixed by the Board, but for a period of not more than three years.

The Institute’s Director and relevant staff attend meetings by invitation.

Although the Committee is only required to report to the Board on its activities every six months, the accepted practice is that a meeting is held prior to each Board meeting. This ensures that the Board is fully briefed on the financial and budgetary issues before it considers each quarterly financial report.

**REMUNERATION COMMITTEE**

The Remuneration Committee advises the Board on the remuneration of the Director.

The Remuneration Committee provides performance feedback to the AIHW Director and considers an annual review of remuneration; that is, an appropriate percentage increase in total remuneration and an appropriate level of performance pay. The Committee works within guidelines issued from time to time by the Remuneration Tribunal.

Membership currently comprises the Chairperson, the Chair of the Audit and Finance Committee and one other Board member.
ABBREVIATIONS
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>ACAM</td>
<td>Australian Centre for Asthma Monitoring</td>
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<td>AGPSCC</td>
<td>Australian General Practice Statistics and Classification Centre</td>
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<td>AHMAC</td>
<td>Australian Health Ministers’ Advisory Council</td>
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<td>AIHW</td>
<td>Australian Institute of Health and Welfare</td>
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<tr>
<td>AIHW Act</td>
<td><em>Australian Institute of Health and Welfare Act 1987</em></td>
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<td>APS</td>
<td>Australian Public Service</td>
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<td>ARCPOH</td>
<td>Australian Research Centre for Population Oral Health</td>
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<td>ART</td>
<td>assisted reproductive technology</td>
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<td>BEACH</td>
<td>Bettering the Evaluation and Care of Health</td>
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<td>CAC Act</td>
<td><em>Commonwealth Authorities and Companies Act 1997</em></td>
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<td>CSHA</td>
<td>Commonwealth–State Housing Agreement</td>
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<td>CSMAC</td>
<td>Community Services Ministers’ Advisory Council</td>
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<td>CSTDA</td>
<td>Commonwealth–State/Territory Disability Agreement</td>
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<tr>
<td>DSRU</td>
<td>Dental Statistics and Research Unit</td>
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<td>GP</td>
<td>general practitioner</td>
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<td>HDSC</td>
<td>Health Data Standards Committee</td>
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<tr>
<td>HMAC</td>
<td>Housing Ministers’ Advisory Council</td>
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<tr>
<td>ICD-10-AM</td>
<td>International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification</td>
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<tr>
<td>ICF</td>
<td>International Classification of Functioning, Disability and Health</td>
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<tr>
<td>ISO</td>
<td>International Standards Organization</td>
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<tr>
<td>MoU</td>
<td>Memorandum of Understanding</td>
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<tr>
<td>NCHECR</td>
<td>National Centre in HIV/AIDS Epidemiology and Clinical Research</td>
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<td>NCIRS</td>
<td>National Centre for Immunisation Research and Surveillance of Vaccine Preventable Diseases</td>
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<td>NCSIMG</td>
<td>National Community Services Information Management Group</td>
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<td>NEHTA</td>
<td>National E-Health Transition Authority</td>
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<tr>
<td>Abbreviation</td>
<td>Full Form</td>
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<tr>
<td>NHDA</td>
<td>National Housing Data Agreement</td>
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<td>NHDAMG</td>
<td>National Housing Data Agreement Management Group</td>
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<td>NHDDC</td>
<td>National Housing Data Development Committee</td>
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<td>NHIG</td>
<td>National Health Information Group</td>
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<td>NHMRC</td>
<td>National Health and Medical Research Council</td>
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<td>NIHIIC</td>
<td>National Indigenous Housing Information Implementation Committee</td>
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<td>NISU</td>
<td>National Injury Surveillance Unit</td>
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<td>NMDS</td>
<td>national minimum data set</td>
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<td>NPHIWG</td>
<td>National Public Health Information Working Group</td>
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<td>NPSU</td>
<td>National Perinatal Statistics Unit</td>
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<tr>
<td>OECD</td>
<td>Organisation for Economic Co-operation and Development</td>
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<td>OH&amp;S</td>
<td>occupational health and safety</td>
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<td>OOS</td>
<td>occupational overuse syndrome</td>
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<tr>
<td>PBS</td>
<td>Pharmaceutical Benefits Scheme</td>
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<td>PDF</td>
<td>Portable Document Format</td>
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<tr>
<td>PHIDU</td>
<td>Public Health Information Development Unit</td>
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<td>PRWG</td>
<td>Policy and Research Working Group</td>
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<td>RTF</td>
<td>Rich Text Format</td>
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<tr>
<td>SAAP</td>
<td>Supported Accommodation Assistance Program</td>
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<tr>
<td>SAND</td>
<td>Supplementary Analysis of Nominated Data</td>
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<tr>
<td>SCIH</td>
<td>Standing Committee on Indigenous Housing</td>
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<tr>
<td>SIMC</td>
<td>Statistical Information Management Committee</td>
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<tr>
<td>Wonca</td>
<td>World Organization of Family Doctors</td>
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