A photograph of a group of people in a workshop or classroom setting. In the foreground, two adults are seated at a table, looking down at papers. In the background, a child is playing with a toy truck on a ramp. A woman is standing behind the child, smiling. The scene is lit with warm, golden light.

Chapter 3—Work group reports

The following reporting information follows the structure of work groups that were in place for 11 months of the year up to 1 June 2008. The AIHW organisation chart on page 27 shows the new structure of the work groups as at 30 June 2008.

This chapter also includes a list of collaborating units, with reports from units with agreed work plans with the AIHW.

Staff supporting worthy causes

In 2007–08 AIHW staff donated their time and talents (and in some cases their hair) to raise money for a number of health and welfare charities that were close to their hearts.

In March five brave men and women went under the razor and shaved their heads to raise money for cancer research by participating in the World's Greatest Shave, a fundraising event that supports the Leukaemia Foundation.

More than a dozen men at the Institute went the other way and threw away their razors for the month of 'Movember' to grow a moustache and help raise awareness of men's health issues, specifically prostate cancer and depression.

Another ongoing tradition at the AIHW is the Christmas giving tree for Salvation Army. Each year employees' generosity results in a large pile of gifts making Christmas a more joyful time for many children.

The personal experience of one Institute staff member has driven an annual Legacy fundraiser for the last three years.

Employees' efforts to support these worthy causes are fully supported and encouraged by the AIHW.



World's Greatest Shave



Movember

Information and Strategy Group

Group head

Ms Julie Roediger

What we do

The Information and Strategy Group develops and maintains much of the technical and governance infrastructure that underpins the AIHW's work on health and welfare statistics. The group is responsible for coordinating the AIHW's work on informatics (including data standards, classifications and other metadata), statistical methods, and privacy and ethics; providing secretariat services and other support to national information committees in the health, community services and housing fields; and providing executive support to the AIHW Board, Director and Deputy Director. It is also responsible for gathering, analysing and disseminating information about the health and welfare of Aboriginal and Torres Strait Islander peoples.

Overview of units

- Executive Unit and Committee Secretariat
- Data and Information Technology
- Aboriginal and Torres Strait Islander Health and Welfare
- National Data Development and Standards, incorporating METeOR Management

Executive Unit and Committee Secretariat

Unit head

Ms Margaret Blood

What we do

The Executive Unit and Committee Secretariat provides support services to the Director, the AIHW Board, the Executive and the Ethics Committee.

During 2007–08, the unit provided services to the:

- National Community Services Information Management Group
- National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data

- Statistical Information Management Committee
- Housing Data Standards Committee
- Population Health Information Development Group
- National Committee on Housing Information.

The unit also provides support for the development and maintenance of the Australian Family of Health and Related Classifications, and the AIHW's role as a WHO Collaborating Centre and its participation in the WHO Family of International Classifications.

Data and Information Technology Unit

Unit head

Mike McGrath

What we do

The Data and Information Technology Unit is responsible for enabling secure, efficient and effective use of and access to AIHW computing and data resources, and for developing the AIHW's computing infrastructure. It provides the services and specialised computing

expertise needed to support users; data capture, transformation, analysis, publication and information dissemination processes; the design, management and use of databases; and the development and maintenance of client-server and Web-based applications.

See **Chapter 4 Business management** on page 110 for further discussion on the unit's achievements for 2007–08.

Aboriginal and Torres Strait Islander Health and Welfare Unit

Unit head

Dr Fadwa Al-Yaman

What we do

The Aboriginal and Torres Strait Islander Health and Welfare Unit produces statistics and information on the health and welfare of Indigenous Australians to inform public discussion and policy decision making. Its work spans the health, housing and community services fields.

At the end of the financial year, plans were put in place to convert the Aboriginal and Torres Strait Islander Health and Welfare Unit to a cluster of two units to tackle the volume and increasing complexity of projects.

Objectives

- Collect data on primary health care clients.
- Build capacity of primary health care service providers.
- Analyse data on health status by remoteness.
- Analyse mortality and life expectancy estimates using data linkage and indirect estimation methods.
- Analyse Indigenous patients who discharge themselves from hospital against medical advice and the rate at which Indigenous patients receive recommended procedures in hospitals.

Performance against planned unit outputs in 2007–08

Produce, with the Australian Bureau of Statistics, a report on the health and welfare of Aboriginal and Torres Strait Islander peoples.	Achieved
Prepare input on Indigenous issues for <i>Australia's welfare 2007</i> and <i>Australia's health 2008</i> .	Achieved
Prepare a draft report on the multi-measure needs of Indigenous housing.	Report moved to Housing Unit
Report on the 2005–06 <i>Indigenous housing indicators</i> .	Achieved
Produce data cubes for the Fixing Houses for Better Health program.	Achieved
Publish a report on <i>Prisoner health in Australia</i> .	Achieved
Provide data for the Productivity Commission in relation to the production of the Overcoming Disadvantage report.	Achieved
Produce a draft statistical report on the Aboriginal and Torres Strait Islander Health Performance Framework.	Achieved <i>Following release, states and territories have contracted AIHW for further work in 2008–09</i>
Publish a report on the evaluation of the social and emotional wellbeing and mental health module from the National Aboriginal and Torres Strait Islander Health Survey.	Substantially achieved <i>Draft under review</i>
Publish a report on Aboriginal and Torres Strait Islander mothers and babies (in collaboration with the National Perinatal Statistics Unit).	Achieved
Publish the national best practice guidelines for collecting Indigenous status information (for selected health data sets).	Substantially achieved

(continued)

Publish data specifications for prisoner health indicators and related data set.	Substantially achieved <i>Currently being pilot tested</i>
Calculate and produce a report on the under-identification factors to support the analysis of expenditure data; report on the level of under-identification of Aboriginal and Torres Strait Islander people in hospital data.	Substantially achieved
Produce a draft report on differences in health status by region.	Substantially achieved <i>Examines differentials in health status and use of services by remoteness classification using a number of administrative and survey data sets</i>
Produce a report on indirect estimates of mortality (in collaboration with the Australian National University).	Work in progress <i>Project involves linking of a number of data sets to produce an enhanced mortality data set that will be used for the analyses of mortality</i>
Produce a report on the 2006 International Group for Indigenous Health Measurement meeting held in Canberra, Australia.	Substantially achieved <i>Draft under review</i>
Produce a report on key differentials in hospital access by Aboriginal and Torres Strait Islander peoples and discharge against medical advice.	Achieved <i>Internal report only</i>
Produce a draft report on developmental work in the social and emotional wellbeing area arising from the Social and Emotional Wellbeing of Indigenous People workshop held in Canberra in late 2006.	Deferred to 2008–09
Produce and update data cubes for the Fixing Houses for Better Health program.	Achieved

Additional projects

- Data management, analysis and reporting for the Northern Territory Emergency Response Child Health Check Initiative
- Evaluation of the Improving Sexual Health in Aboriginal and Torres Strait Islander Youth Demonstration Projects

- Improved primary health care data for Aboriginal and Torres Strait Islander peoples
- Capacity building of primary health care service providers

(See Case study on page 51 for more information on these projects.)

Fast facts

Infant mortality for Indigenous Australians in the Northern Territory, South Australia and Western Australia declined significantly (47%) between 1991 and 2006, and the gap between Indigenous and non-Indigenous infants is narrowing.

The rate of discharge against medical advice for Indigenous Australians has increased from 16.6 per 1,000 in 1998–99 to 20.1 per 1,000 in 2005–06. The respective rates for non-Indigenous Australians were 0.9 and 1.0 per 1,000.

Committees

- Prisoner Health Information Group (secretariat)

Data collections managed

- Healthy for Life

- Northern Territory Emergency Response Child Health Check Initiative data management, analysis and reporting
- National Prisoner Health Information System

Innovative Indigenous health programs

The AIHW's role in innovative Indigenous health programs is directly helping health services on the ground while building an important evidence base for the future.

Northern Territory emergency response child health check initiative—data management, analysis and reporting

This project involves the data management, analysis and reporting of information gathered during the Australian Government's Northern Territory Emergency Response Child Health Checks.

The Aboriginal and Torres Strait Islander Health and Welfare Unit has been involved in developing a data entry application and data analysis, providing the DoHA with a suite of reports. In addition, the unit will be managing three data collections—audiology, dental and chart review. Work is also progressing in the area of transmitting Child Health Check data from services undertaking these checks to the AIHW in an electronic format.

Evaluation of the Improving Sexual Health in Aboriginal and Torres Strait Islander Youth Demonstration Projects

A number of health services are undertaking demonstration projects aimed at increasing the number of Aboriginal and Torres Strait Islander young people accessing testing and treatment services for sexually transmitted infections (including HIV/AIDS). The demonstration projects also aim to reduce risk behaviours among the target group and contribute to the development of best practice approaches.

AIHW as the lead agency will work with the National Centre in HIV Epidemiology and Clinical Research at the University of New South Wales to evaluate both the individual organisations against their stated objectives and outcomes, and an overall evaluation of the demonstration projects to determine which were successful and why. It is anticipated that the evaluation process will involve an analysis of qualitative and quantitative indicators reported by the participating organisations and a number of other data sources and case studies.

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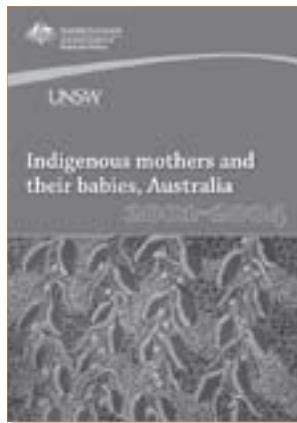
Improved primary health care data for Aboriginal and Torres Strait Islander peoples

Currently there is little information available on Aboriginal and Torres Strait Islander clients who access primary health care services. As part of the Healthy for Life program, the AIHW is leading the development of indicators, data standards and analyses and reporting to services. While the main areas covered by the current indicators and reports are maternal and child health, and chronic disease management, additional work is being undertaken for an expanded set of indicators that will help in streamlining service reporting.

Capacity building of primary health care service providers

Part of the Healthy for Life—Support, Collection, Analyses and Reporting Functions is capacity building of primary health care service providers in collecting and interpreting data. The AIHW is providing support that will lead to improved primary health care services to Indigenous Australians through training on how to use and interpret data. This is done in collaboration with service support officers who support services through visits.

The AIHW is also developing a Reconciliation Action Plan that has three main components, one of which focuses on attracting, developing and building capability of Aboriginal and Torres Strait Islander people and organisations in data and statistical areas.



National Data Development and Standards Unit incorporating METeOR Management Unit

Unit head

Mr Gordon Tomes

What we do

The National Data Development and Standards Unit aims to improve the comparability, consistency, relevance and availability of national health and community services information. The unit manages Australia's national health and community services data definitions and standards, and works to support the national standards governance committees.

The functions and programs of the METeOR Management Unit were transferred to the National Data Developments and Standards Unit in September 2007. METeOR is a sophisticated, web-based data standard

management system. This system enables the online creation and dissemination of shared data standards that are the basis of consistent, comparable and linkable data collections.

Objectives

- Increase the availability and use of national data standards within national data collections.
- Ensure accessibility of up-to-date national data standards for the health and community services sectors.
- Provide effective data standard and metadata management technologies that are responsive to changing users needs and are up to date with emerging trends.
- Provide high-quality training, advice and support for users of these technologies.

Performance against planned unit outputs in 2007–08

Report on the 2006 national palliative care performance indicators survey.	Achieved <i>Deferred from 2006–07</i>
Report on the 2007 national palliative care performance indicators survey.	Achieved
Report on the pilot test of the community-based palliative care data collection.	Achieved
Provide helpdesk service and training workshops for the large pool of users and stakeholders distributed across Australia.	Achieved
Collate user feedback and implement priority enhancements to ensure that data standard and metadata management systems evolve with changing user requirements.	Achieved <i>Increased METeOR's user-friendliness</i>
Utilise emerging technologies for greater automation in production of a range of data dictionary products.	Achieved <i>e-Data Dictionary for Health 2007–08 and e-Data Dictionary for Community Services 2007–08 updated</i>

(continued)

Continue to develop facilities that enable the automated supply of electronic metadata to data collection, validation and cataloguing systems as well as other data standard registries.	Not achieved <i>Standards for Government Information Exchange were still being defined by the Australian Government Information Management Office. There were also no resources</i>
Support external organisations in their linking to the AIHW's new electronic metadata transmission facility.	Achieved <i>A number of external organisations are now successfully accessing electronic metadata transmission for their information systems to directly use the data standards within METeOR</i>

Additional projects

- NDDSU delivered a 10% increase in the number of data development groups (118 work groups, up from 106).
- In 2007–08, 43 persons from the states, territories and non-government organisations were trained as data developers in METeOR.

Collaborations

- National e-Health Transition Authority on e-Health and Statistics

Committees

- Palliative Care Outcomes Collaboration—Scientific and Advisory Committee
- Palliative Care Australia—National Standards Assessment Program Reference Group
- Palliative Care Data Working Group (AIHW provided secretariat)—subcommittee of Palliative Care Intergovernmental Forum
- Health Data Standards Committee
- Community Services Data Standards Committee

Data collections managed

- Palliative Care National Minimum Data Set

Economics and Health Services Group

Group head

Ms Jenny Hargreaves

What we do

The Economics and Health Services Group provides statistical leadership, develops and compiles data, undertakes analyses and disseminates policy-relevant statistical information about the financial and human resources used in health and welfare, and about key health services. Areas of subject matter within the group's scope include health and welfare economics (health expenditure, welfare expenditure, health system expenditures on disease and injury, health labour force, community services labour force and medical indemnity), and health services (hospitals, mental health services, other health services and the quality and safety of health care).

Overview of units

- Expenditure and Economics
- Health Care Safety and Quality
- Hospitals
- Labour Force
- Mental Health Services

Expenditure and Economics Unit

Unit head

Mr John Goss

What we do

The Expenditure and Economics Unit reports on Australian health and welfare services expenditure. Expenditure is analysed by disease, service provider, funder, age and sex groups, veteran and non-veteran status, Indigenous status, and states and territories, and is compared with other countries' expenditure.

Objectives

- Make expenditure data more accessible, more policy-relevant and more timely through liaison with advisory groups.
- Produce a more complete and consistent set of definitions to achieve more policy-relevant and timely expenditure outputs.
- Analyse health sector efficiency and productivity using expenditure and burden of disease data to illuminate the effects of health policy.

Performance against planned unit outputs in 2007–08

Publish report on the impact of changing disease prevalence in last decade on working-age deaths, and workforce participation.	Deferred to 2008–09
Produce projections of health expenditure by disease to 2031.	Achieved
Prepare estimates for inclusion in the OECD's international health and social expenditure databases.	Achieved
Prepare health system expenditures for diseases and injuries, 2004–05.	Substantially achieved <i>Summary published</i> <i>Report to be published 2008–09</i>
Prepare health system costs of risk factors.	Work in progress
Update health expenditure data cubes.	Achieved
Install new Cognos cubes for welfare expenditure.	Substantially achieved
Install new Cognos cubes for disease expenditure.	Work in progress
Report on methods for measuring health sector efficiency.	Substantially achieved <i>Report to be published 2008–09</i>
Contribute to <i>Australia's health 2008</i> .	Achieved
Contribute to <i>Australia's welfare 2007</i> .	Achieved
Publish <i>Health expenditure Australia: 2005–06</i> .	Achieved
Publish <i>Welfare expenditure Australia: 2004–05</i> and <i>Welfare expenditure Australia: 2005–06</i> .	Achieved <i>2004–05 data was included in the 2005–06 report</i>
Contribute to Aboriginal and Torres Strait Islander health and welfare biennial report.	Achieved
Publish <i>National public health expenditure report 2005–06</i> .	Achieved
Publish <i>Expenditures on health for Aboriginal and Torres Strait Islander peoples 2004–05</i> .	Achieved

Additional projects

- The Government Health Expenditure National Minimum Data Set was endorsed by the National Health Information Management Principal Committee on 5 December 2007 for implementation from 1 July 2008. This will improve the reporting of health expenditure statistics through the use of national data standards.
- A guide for interactive health expenditure data users was produced and made available on the AIHW website to assist users of expenditure data cubes.
- Contract with the OECD to be one of five case study countries to test the feasibility of implementing the *Draft Guidelines for Estimating Expenditure by Disease, Age and Gender under the System of Health Accounts*.
- Contributor to the OECD Task Force for the Development of Health-Specific Purchasing Power Parities 2008.
- Participated in the development of performance indicators for the next Australian Health Care Agreements.

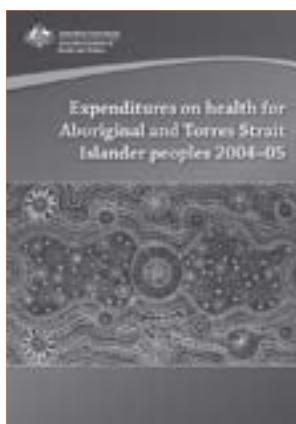
- Contract with Commonwealth Grants Commission to provide a national-level hospital morbidity database of separations, bed days and expenditure for a set of specified variables.

Committees

- Health Expenditure Advisory Committee (secretariat)
- Government Health Expenditure NMDS Subcommittee (secretariat)
- Public Health Expenditure Technical Advisory Group (secretariat)
- Technical Advisory Group for Indigenous Expenditures Report 2004–05

Data collections managed

- Health expenditure database
- Public health expenditure database
- Welfare expenditure database
- Aboriginal and Torres Strait Islander health expenditure database
- Disease expenditure database



Fast fact

In 2004–05 cardiovascular disease was the most expensive disease group in Australia (\$5.9 billion, or 11% of allocatable health expenditure).

Health Care Safety and Quality Unit

Unit head

Ms Vicki Bennett

What we do

The Health Care Safety and Quality Unit develops, compiles and analyses data relevant to the safety and quality of Australia's health-care services. The unit focuses on medical indemnity information, and working in partnership with the Australian Commission on Safety and Quality in Health Care. The unit also works with the National Health Performance Committee, and is responsible for the provision of safety and quality information in international forums.

Objectives

- Work closely with the Australian Commission on Safety and Quality in Health Care to

develop national information that will inform the policy debate regarding safety and quality in health care in Australia.

- A review of the national (public and private) medical indemnity collection will be undertaken in 2007–08 to inform the future of that work.
- Explore the use of data cubes for the provision of medical indemnity data.
- Expand into projects which make extensive use of mapping technology to display results of issues relating to safety and quality.
- Explore opportunities to creatively use web-based information in the safety and quality arena.
- Examine possibilities for web-based communication and presentation of information.

Performance against planned unit outputs in 2007–08

Contribute to <i>Australia's health 2008</i> .	Achieved
Publish Medical indemnity public sector report 2006–07.	Substantially achieved <i>Report to be released in 2008–09</i>
Publish A national picture of medical indemnity claims 2005–06.	Substantially achieved <i>Report to be released in 2008–09</i>
Provide states with medical indemnity data tables.	Achieved
Publish sentinel events report.	Achieved
Develop reports of a range of demonstration projects exploring the suitability of existing administrative data as indicators of safety and quality, including the geographic mapping of some information and the development of web-based information to present results.	Substantially achieved <i>Reports to be released in 2008–09</i>

Additional projects

- Contracted work for the Australian Commission on Safety and Quality in Health Care: Project 3.1 National Safety and Quality Indicators; Project 4.1 National Data Sets and Standards
- Contracted work to provide Australian 2005–06 rates and background information for the patient safety indicators compared internationally by the OECD Health Care Quality Indicator Project

Committees

- National Health Performance Committee
- National Indicator Advisory Group
- OECD Health Care Quality Indicator Patient Safety Indicator Pilot Group
- Medical Indemnity Data Working Group
- Medical Indemnity National Collection Coordinating Committee
- Medical Indemnity National Collection Working Group

Data collections managed

- Medical Indemnity National Collection

Fast fact

General surgery, obstetrics and emergency medicine were the most commonly recorded specialties of clinicians involved in allegations of harm that led to medical indemnity claims in 2005–06.



Hospitals Unit

Unit head

Mr George Bodilsen

What we do

The Hospitals Unit produces the annual *Australian hospital statistics* report and accompanying internet-based electronic data resources to improve the quality and usefulness of Australian hospitals data. It promotes appropriate data analysis and dissemination to inform community discussion and decision making.

Objectives

- Identify the scope for providing a broader range of products such as bulletins on areas of interest to policy makers and service planners.
- Continue to liaise with stakeholders to ensure the ongoing development and policy relevance of *Australian hospital statistics* and other products provided by the unit.
- Increase access to data while protecting privacy through the provision of additional data cubes in the key area of public hospital establishments data.
- Build upon the unit's capacity to provide timely and accurate information through the ongoing development of data extraction and reporting processes.

Performance against planned unit outputs in 2007–08

Contribute to <i>Australia's health 2008</i> .	Achieved
Publish <i>Australian hospital statistics 2006–07</i> .	Achieved
Prepare a paper on data linkage within the National Hospital Morbidity Database, and between it and the National Death Index.	Substantially achieved <i>To be completed in 2008–09</i>
Prepare a paper on linkage of codes within admitted patient records.	Substantially achieved <i>To be combined with paper on linking strategies for national hospital morbidity database</i>
Develop public hospital establishments data cube.	Substantially achieved <i>Draft under review</i>
Produce bulletin on funding and provision of selected procedures across public and private sectors over time.	Achieved <i>Changed to new report on access to elective surgery</i>
Report on differences between hospitals' admission boundaries.	Work in progress <i>Ongoing liaison with working group</i>
Carry out Indigenous identification audit in hospitals.	Substantially achieved <i>Audit completed. Preliminary report for review by stakeholders being drafted for publication in 2008–09</i>

(continued)

Report on evaluation of Elective Surgery Waiting Times National Minimum Data Set.	Substantially achieved <i>Incorporating stakeholder comments. To be published 2008–09</i>
Contribute to comparison project on Australian hospital statistics and State of Our Public Hospitals report.	Achieved

Additional projects

- Published new online interactive data for Elective Surgery Waiting Times

Committees

- Health Data Standards Committee
- Coding Standards Advisory Committee

Data collections managed

- National Hospital Morbidity Database
- National Public Hospital Establishments Database
- Elective Surgery Waiting Times Data Collections
- National Non-admitted Patient Emergency Department Care Database
- National Outpatient Care Database



Fast fact

The overall rate of elective surgery (including private elective surgery) for Indigenous Australians (48.9 per 1,000 persons) was markedly lower than for other Australians (85.5 per 1,000). However, Indigenous patients were admitted from public hospital waiting lists for cardiothoracic surgery, vascular surgery and ophthalmology at about twice the corresponding rates for other patients.

Labour Force Unit

Unit head

Mr David Braddock

What we do

The Labour Force Unit provides information relating to the health and community services occupations and industries in Australia. A major focus is the collation of national data collections and the production of reports on the medical and nursing labour forces.

Objectives

- Continue to liaise with stakeholders about data and information issues for the national registration system for health professionals to be implemented in July 2008.

- Ensure that the work of the unit complements and contributes to the work of Australian Health Ministers' Advisory Council's Health Workforce Principal Committee, including its workforce planning projects, work to implement Council of Australian Governments health workforce reforms, and work under the National Health Workforce Strategic Framework.
- Review the content of the annual medical and nursing workforce reports with advice from the Health Workforce Principal Committee.

Performance against planned unit outputs in 2007–08

Contribute to <i>Australia's health 2008</i> .	Achieved
Contribute to <i>Australia's welfare 2007</i> .	Achieved
Contribute to <i>The health and Welfare of Australia's Aboriginal and Torres Strait Islander peoples 2008</i> .	Achieved
Publish <i>Nursing and midwifery labour force, Australia, 2005</i> .	Achieved
Publish <i>Nursing and midwifery labour force, Australia, 2006</i> .	Not achieved Funding redirected to NMDS data development project
Carry out labour force survey data enhancement and national minimum data set data development project.	Achieved
Publish <i>Medical labour force, Australia, 2005</i> .	Achieved
Publish report on medical labour force 2006.	Work in progress
Publish report on health and community services labour force 2006.	Work in progress

Additional projects

- Began development of new national minimum data set for health labour force.
- Undertook pharmacy labour force data provision and information development activities for the Pharmacy Guild.
- Developed two new data sets:
 - 2006 medical practitioner data set built
 - 2006 nursing and midwifery data set built.

Collaborations

- Participation in consortium led by Human Capital Alliance for Pharmacy labour force tender.

Committees

- The Community and Disability Services Ministers' Advisory Council's Structural Issues in the Workforce
- Australian Health Ministers' Advisory Council's Health Workforce Principal Committee's Jurisdiction Workforce Planners Working Group

Data collections managed

- National Health Labour Force Data Collections for medicine, nursing, psychology, occupational therapy, physiotherapy, podiatry and pharmacy

Fast fact

In 2005 there were an estimated 60,252 employed medical practitioners, an increase of 25% since 1997. However, the full-time equivalent (FTE) supply of practitioners increased by just over 4% in the same period, from 275 FTE practitioners per 100,000 population in 1997 to 287 in 2005. The smaller increase in the FTE rate for medical practitioners over this period, despite the large increase in their numbers, is due to the growth in the population and declining average hours worked (by 4 hours from 48 to 44). Both male and female medical practitioners reduced their average working week, by 4 and 2 hours respectively.



Mental Health Services Unit

Unit head

Mr Gary Hanson

What we do

The Mental Health Services Unit compiles, develops and reports on the AIHW's national mental health services databases. It reports on mental health-related health and community services in Australia and provides leadership for the development and refinement of mental health services data.

Objectives

- Work closely with the Mental Health Information Strategy Subcommittee of the Australian Health Ministers' Advisory Council

to enhance the usefulness of the mental health information products supporting the National Mental Health Information Priorities.

- Improve the usefulness and relevance of its work to the objectives of the National Action Plan on Mental Health 2006–11 agreed to by the Council of Australian Governments in 2006.
- Keep under review the content, presentation and relevance of its annual series of reports on mental health services in Australia, in collaboration with the Department of Health and Ageing and the Mental Health Information Strategy Sub-committee.

Performance against planned unit outputs in 2007–08

Produce data cubes for admitted patient mental health services.	Not achieved, <i>Deferred to 2008–09</i>
Contribute to <i>Australia's health 2008</i> .	Achieved
Publish a report on the mental health services in Australia 2005–06.	Substantially achieved <i>To be published in 2008–09</i>
Publish a report on the review of Australian housing and mental health data.	Not achieved, <i>Deferred to 2008–2009</i>
Report on the scope of the residential mental health care data set.	Not achieved, <i>Deferred to 2008–2009</i>

Additional projects

- Re-appraisal of the mental health intervention classification work and draft report produced for review.
- Refined data elements are in the process of being developed for the Mental Health Establishment National Minimum Data Set.

Committees

- Mental Health Information Strategy National Minimum Dataset Sub-Committee
- Palliative Care Data Working Group

Data collections managed

- Mental Health Establishment Database
- National Community Mental Health Care Database
- National Residential Mental Health Care Database

Health and Functioning Group

Group head

Ms Susan Killion

What we do

The Health and Functioning Group develops and maintains national data to support monitoring and reporting on the health and functioning of Australians (including health status, outcomes and related quality of life), determinants of health and health services. The group reports on the health of populations, rural health, cancer, disabilities and disability services, veterans' health, alcohol and other drugs use and treatment services, and chronic disease monitoring, including cardiovascular disease, diabetes, arthritis and asthma.

The group works to enhance the relevance and timeliness of reports and other statistical outputs, and put information in the public domain for use by decision makers, health care consumers, researchers, the media and the general public.

Overview of units

- Asthma, Arthritis and Environmental Health
- Cardiovascular Disease and Diabetes
- Functioning and Disability
- Health Registers and Cancer Monitoring

Population Health Cluster

- Population Health Data and Information Services
- Population Health

Asthma, Arthritis and Environmental Health Unit

Unit head

Dr Kuldeep Bhatia

What we do

The Asthma, Arthritis and Environmental Health Unit monitors and reports on asthma, arthritis, osteoporosis and obstructive respiratory diseases such as chronic obstructive pulmonary disease. The unit manages the Australian System for Monitoring Asthma and the National Centre for Monitoring Arthritis and Musculoskeletal Conditions. The unit also reports on environmental health issues in Australia.

Objectives

- Be a reliable source of information on the national health priority areas of asthma, arthritis and osteoporosis.
- Develop suitable information on environmental health risk factors.
- Contribute to the development of primary health care data sources including electronic collection of general practice data.
- Develop methodology and statistics for monitoring the use of prescription medicines in Australia.

Performance against planned unit outputs in 2007–08

Contribute a chapter to CSIRO publication <i>Urban environmental health</i> .	Achieved
Contribute to <i>Australia's health 2008</i> .	Achieved
Prepare a journal article on polypharmacy among chronic respiratory disease medication users.	Substantially achieved <i>Paper presented at national meetings</i>
Report on Pharmaceutical Benefits Scheme support of arthritis management.	Work in progress
Publish report on asthma in Australia 2008.	Substantially achieved <i>Draft completed</i>
Report on work-related asthma in Australia.	Achieved
Lead an occupational asthma workshop.	Substantially achieved <i>Workshop in August 2008</i>
Prepare discussion paper, <i>Occupational asthma in Australia</i> .	Achieved
Report on air pollution and asthma.	Substantially achieved <i>Draft under review</i>
Report on respiratory diseases in Australia.	Work in progress <i>Delayed due to staff movement</i>
Arthritis and osteoporosis in Australia 2007.	Substantially achieved <i>Draft under review</i>
Juvenile arthritis in Australia.	Substantially achieved <i>Report to be published 2008–09</i>
Publish <i>Impairments and disability associated with arthritis and osteoporosis</i> .	Achieved

(continued)

Produce a series of booklets on health information for consumers: <i>A picture of osteoarthritis in Australia</i> <i>A picture of osteoporosis in Australia</i> <i>A picture of rheumatoid arthritis in Australia.</i>	Achieved Achieved Substantially achieved <i>Draft under review</i>
Publish an evaluation report on primary health care data collections.	Achieved
Develop a discussion paper on electronic collection of GP data.	Substantially achieved <i>Draft under review</i>

Additional projects

- Importation of Pharmaceutical Benefits Scheme data for analysis of people with lung disease
- Assessment of electronic collection of general practice data
- Analysis of various data collections to generate information on arthritis, osteoporosis, hip fractures, asthma, chronic obstructive pulmonary disease and other issues
- Funding and managing the Bettering the Evaluation and Care of Health data collection

Committees

- Steering Committee for the National Centre for Monitoring Arthritis and Musculoskeletal Conditions
- Steering Committee for the Australian System for Monitoring Asthma
- Quality Use of Medicines Project Steering Committee

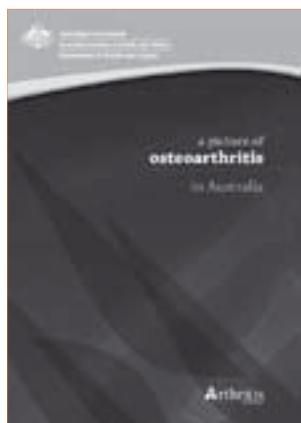
Data collections managed

- Bettering the Evaluation and Care of Health database

Fast facts

Osteoporotic hip fractures are on the decline in Australia.

Up to 300 new cases of occupational asthma occur in Australia each year.



Cardiovascular Disease and Diabetes Unit

Unit head

Ms Lynelle Moon

What we do

The Cardiovascular Disease and Diabetes Unit, with the National Centre for Monitoring Cardiovascular Disease, the National Centre for Monitoring Diabetes and the National Centre for Monitoring Chronic Kidney Disease, analyses incidence and prevalence, mortality, morbidity, functioning, disability, risk factors and health services associated with cardiovascular disease and diabetes.

Objectives

- Continue to provide high-quality, novel, policy-relevant analysis of existing cardiovascular disease and diabetes data, including on health inequalities and meeting the information needs of the Council of Australian Governments' diabetes initiative where possible.
- Produce a broader range of products to better meet the varied needs of our audiences, including short summaries of our publications, better use of our website, and presentations at relevant conferences.
- Build on the solid base of the National Diabetes Register to extend its scope and use.

Performance against planned unit outputs in 2007–08

Contribute to Australia's health 2008.	Achieved
Publish <i>Cardiovascular disease and its associated risk factors in Aboriginal and Torres Strait Islander People, 2004–05</i> .	Achieved
Publish <i>Diabetes facts 2008</i> .	Achieved
Publish <i>National Diabetes Register statistical profile 1999–2005</i> .	Achieved
Draft second report on comorbidities between cardiovascular disease, diabetes and chronic kidney disease.	Work in progress <i>Draft report to be released in 2008–09</i>
Publish <i>National indicators for monitoring diabetes</i> .	Achieved
Draft report on cardiovascular disease primary health services for Indigenous people (under negotiation with funder).	Not achieved <i>Awaiting supply of data on Medicare Benefits Schedule services and Pharmaceutical Benefits Scheme medicines.</i>
Draft other cardiovascular disease report.	Achieved
Draft report on diabetes incidence and prevalence.	Achieved <i>Scope changed to include more data sources, and only cover prevalence.</i>
Draft report on gestational diabetes.	Achieved
Publish bulletin on the first results from the National Diabetes Register 2006.	Achieved

Additional projects

- New National Centre for Monitoring Chronic Kidney Disease established
- New contract work commissioned by the National Heart Foundation of Australia

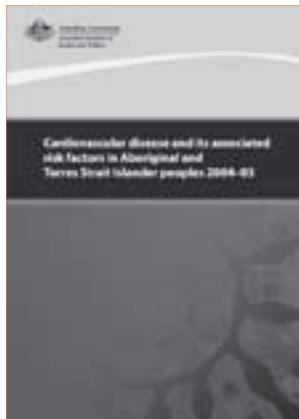
Committees

- National Diabetes Data Working Group (member and secretariat)
- National Heart, Stroke and Vascular Health Data Working Group (member and secretariat)
- National Chronic Kidney Disease Advisory Committee (member and secretariat)
- Data collections managed
- National Diabetes Register

Fast facts

Between 2002 and 2005, cardiovascular death rates in Indigenous Australians were 3 times as high as in non-Indigenous Australians.

Between 1989–90 and 2004–05, the proportion of people with diagnosed diabetes more than doubled from 1.3% to 3.6%.



Functioning and Disability Unit

Unit head

Ms Cathy Hales

What we do

Functioning and Disability Unit manages the Commonwealth State/Territory Disability Agreement (CSTDA) National Minimum Data Set, the Younger People in Residential Aged Care minimum data set and the Alcohol and Other Drug Treatment Services minimum data set. The unit analyses and reports on population disability in Australia, services to people with a disability, and alcohol and drug treatment services in Australia.

Objectives

- Develop data and indicators to support an outcomes focus and priorities for monitoring CSTDA-funded services as identified by Ministers during the renegotiation of the

Commonwealth State/Territory Disability Agreement.

- Carry out data development work to enhance the Alcohol and Other Drug Treatment Services minimum data set.
- Identify the scope to provide a broader range of products and better target the unit's products to the needs of policy analysts and the broader community.
- Explore ways to raise the profile of the unit's data and products among stakeholders and the broader community, including presentations at stakeholder-organised conferences and publications in selected, relevant academic journals.
- Further the integration of the health perspective and the functioning perspective in the work of the Health and Functioning Group.

Performance against planned unit outputs in 2007–08

Publish AIHW annual report on the 2005–06 Commonwealth State/Territory Disability Agreement National Minimum Data Set collection.	Achieved
Create on-line data cubes for 2005–06 Commonwealth State/Territory Disability Agreement National Minimum Data Set collection.	Achieved
Analyse Survey of Disability and Carers data, with output planned as a series of bulletins.	Achieved
Produce journal articles on disability population data.	Substantially achieved <i>Staffing constraints limited output to one journal article</i>
Write chapter on disability and disability services for <i>Australia's welfare 2007</i> .	Achieved
Write chapter on welfare indicators for <i>Australia's welfare 2007</i> .	Achieved
Contribute to Chapter 2 in <i>Australia's health 2008</i> .	Achieved
Prepare the annual report on the 2005–06 Alcohol and Other Drug Treatment Services National Minimum Data Set collection.	Achieved
Produce national, state and territory bulletins using Alcohol and Other Drug Treatment Services annual data.	Achieved

(continued)

Create online data cubes for the Alcohol and Other Drug Treatment Services National Minimum Data Set.	Achieved
Draft National Opioid Pharmacotherapy Statistics Annual Data Collection: 2007 (for inclusion in the Alcohol and Other Drug Treatment Services annual report).	Achieved
Publish the data guide <i>National Opioid Pharmacotherapy Statistics Annual Data Collection: 2007</i> .	Substantially achieved <i>To be published 2008–09</i>
Develop 2007–08 Alcohol and Other Drug Treatment Services National Minimum Data Set data guide.	Achieved

Publish report *The effectiveness of Illicit Drug Diversion Initiative in rural and remote Australia.*

Achieved

Additional projects

- The AIHW, in collaboration with the Alcohol and Other Drug Treatment Services National Minimum Data Set Working Group, has used METeOR to develop draft data standards to pilot the introduction of a statistical linkage key and mental health questions into the collection.
- Increased efforts in monitoring and improving data quality for the Commonwealth State/Territory Disability Agreement National Minimum Data Set, including the development of a data quality framework. This new framework sets targets for data quality in a range of areas.
- Collection and management of 2006–07 data for Younger People in Residential Aged Care Program. METeOR was used to ensure that data in the minimum data set conform to national data standards. The data item definitions can be readily incorporated into METeOR should the metadata for this collection be endorsed as national standards.
- The unit contributed to the United Nations Office on Drugs and Crime *World drug report 2008* (26 June 2008) and is collaborating on a forthcoming major WHO report, *Disability and rehabilitation*.

The invitation to participate in these projects recognises the AIHW's leadership and capacity for producing high-quality information on population disability, and on tobacco, alcohol and other drug use and treatment in Australia, suitable for an international readership.

- Review of the estimation of the potential population for disability services (on behalf of the Disability Services Working Group of the Steering Committee for the Review of Government Service Provision).

Committees

- Commonwealth State/Territory Disability Agreement National Minimum Data Set Data Network (member and secretariat)
- Advisory Committee for Functioning and Disability Data (deputy chair and secretariat)
- Disability Policy and Research Working Group (observer)
- Steering Committee for the Review of Government Service Provision Disability Services Working Group (working group member)
- Alcohol and Other Drug Treatment Services National Minimum Data Set Working Group (member and secretariat)

- National Opioid Pharmacotherapy Statistics
Annual Data Working Group (member
and secretariat)

Data collections managed

- Commonwealth State/Territory Disability
Agreement National Minimum Data Set
- Younger People in Residential Aged Care
National Minimum Data Set
- Alcohol and Other Drug Treatment Services
National Minimum Data Set
- National Opioid Pharmacotherapy Statistics
Annual Data collection

Fast fact

Among people who use disability services funded under the Commonwealth State/Territory Disability Agreement, the proportion that reported a primary disability of psychiatric disability has increased from around 8% in 2003–04 to 15% in 2006–07.



Health Registers and Cancer Monitoring Unit

Unit head

Ms Christine Sturrock

What we do

The Health Registers and Cancer Monitoring Unit reports on cancer incidence, mortality and survival, and cancer-screening indicators. It sets standards for the National Cancer Statistics Clearing House in collaboration with the Australasian Association of Cancer Registries, and undertakes record linkage.

Objectives

- Prepare more comprehensive and more timely national cancer statistics to support the national cancer data strategy and national cancer control research and planning.
- Produce analyses to support the Department of Health and Ageing's evaluations of the BreastScreen Australia program and the National Bowel Cancer screening Program.

Performance against planned unit outputs in 2007–08

Publish overview of cancer in Australia, 2007.	Substantially achieved <i>Data was put onto the website following a decision by the AIHW Board to make this a biennial publication</i>
Publish overview of cancer in Australia, 2008.	Substantially achieved <i>Report to be published 2008–09</i>
Publish Australian cancer incidence data cubes 1982–2004.	Achieved
Publish Australian cancer incidence data cubes 1982–2005.	Substantially achieved <i>Report to be published 2008–09</i>
Contribute to <i>Australia's health 2008</i> and <i>The health and welfare of Australia's Aboriginal and Torres Strait Islander peoples 2008</i> .	Achieved
Publish Australian cancer incidence and mortality books, edition 2.	Achieved
Publish Australian cancer incidence and mortality books, edition 3.	Substantially achieved <i>Report to be published 2008–09</i>
Publish <i>Cervical cancer screening in Australia 2005–2006</i> .	Achieved
Publish <i>BreastScreen Australia monitoring report 2004–2005</i> .	Achieved
Publish <i>National Bowel Cancer Screening Program monitoring report 2007</i> .	Achieved
Produce 'The Australian Bowel Cancer Screening Program: nine-month monitoring report' (internal report for Department of Health and Ageing).	Achieved
Produce 'The Australian Bowel Cancer Screening Program: 18-month monitoring report' (internal report for Department of Health and Ageing).	Achieved
Publish <i>Breast cancer survival by size and nodal status</i> .	Achieved
Publish <i>Cancer survival and prevalence in Australia</i> .	Achieved

Additional projects

- The unit is working with the National Breast and Ovarian Cancer Centre to develop data specifications in relation to breast cancer using METeOR.
- The *Cervical screening standardised data dictionary* has developed significantly over the previous year. This includes the addition of subset two—histology and subset three—algorithms for national data supply. The original document has also been significantly improved following a consultative process with stakeholders.
- Expansion of the memorandum of understanding with the Department of Health and Ageing for cancer screening.

Collaborations

- Cancer Australia
- National Breast and Ovarian Cancer Centre
- Australasian Association of Cancer Registries
- National Cervical Screening Program
- BreastScreen Australia

Committees

- National Bowel Cancer Screening Program Advisory Group
- AIHW Ethics Committee
- Australasian Association of Cancer Registries: Coding and Reporting Committee, Indigenous Cancer Committee and a member of AACR Executive
- National Breast and Ovarian Cancer Data Advisory Group
- National Cervical Screening Monitoring Indicators Working Group
- National Cervical Screening Data Managers Working Group

Data collections managed

- National Bowel Cancer Screening Register
- National Death Index
- National Cancer Statistical Clearing House
- BreastScreen Australia National Database

Fast fact

For a cohort of women diagnosed with breast cancer in 1997 the 5-year relative survival was 98% for women with tumours 10 mm in size or smaller.

Population Health Cluster

The Population Health Cluster was established in early 2007 to provide more strategic management of population health issues, particularly as they relate to the Population Health Information Development Group (a subcommittee of the Australian Population Health Development Principal Committee).

The cluster comprises the Population Health Unit and the AIHW Data and Information Services Unit (outposted to the Department of Health and Ageing).

Cluster head

Mr Mark Cooper-Stanbury

Population Health Unit

Unit head

Mr Mark Cooper-Stanbury

What we do

The Population Health Unit develops and provides information on the health of the Australian population and priority subpopulations, and covers health inequalities and international health. The unit undertakes specific projects in the areas of veterans' health and rural health. The unit also takes a 'population health' approach to its work in monitoring chronic diseases and associated determinants of health, in management of the National Mortality Database, and in support of the AIHW's use of demographic data.

Objectives

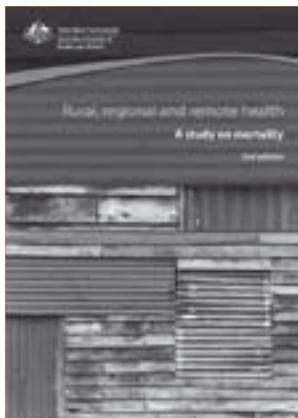
- Assist the development of Australia's capacity to undertake national surveillance of chronic diseases and associated determinants.
- Support AIHW work on health inequalities and the health of specific populations.
- Support the health-related statistics needs of the Department of Veterans' Affairs.
- Contribute to improved national understanding of significant rural health issues through monitoring, analysis and dissemination of rural health data.
- Provide support and expert input to relevant information committees and working groups.

Performance against planned unit outputs in 2007–08

Prepare General Record of Incidence of Mortality books for 2006 year of registration (national) and year of death (state and territory) (set of Excel workbooks).	Achieved
Contribute to <i>Australia's health 2008</i> , <i>Australia's welfare 2007</i> and other AIHW flagship publications.	Achieved
Publish report on <i>Indicators for chronic diseases and their determinants</i> .	Achieved
Publish bulletin on chronic diseases and productive participation.	Substantially achieved
Publish <i>Rural, regional and remote health: a study on mortality</i> , 2nd edition (2002–04).	Achieved
Publish <i>Rural, regional and remote health: indicators of health status and determinants of health</i> .	Achieved
Publish <i>Rural, regional and remote health: indicators of health system performance</i> .	Substantially achieved <i>Vol. 1 published</i> <i>Vol. 2 to be published 2008–09</i>
Draft specific rural health reports (content to be finalised, under negotiation with funders).	Not achieved <i>No funding available</i>
Build proof of concept website for chronic disease surveillance hub.	Achieved
Develop set of 'headline' chronic disease indicators.	Substantially achieved
Publish Multiple risk factors and productive participation (bulletin).	Substantially achieved <i>Work in progress</i>
Publish (jointly with the Department of Veterans' Affairs) a report on the health effects of exposure to Dapsone.	Substantially achieved <i>Draft under review</i>
Draft (jointly with the Department of Veterans' Affairs) a report on the Study of Health Outcomes of Aircraft Maintenance Personnel.	Substantially achieved <i>Draft under review</i>

Additional projects

- Provided a data set for the OECD Health Data 2008 and contributed to the OECD publication *Health at a glance 2007*.
- The unit established the new National Monitoring Centre for Folate and Iodine Fortification, to coordinate monitoring activities related to introduction of mandatory fortification of food with folic acid and iodine in September 2009.
- The unit also established a new work program on eye health information, comprising a set of reports on various aspects of eye health in the Australian population.
- Minor enhancements applied to the Chronic Diseases Indicator Database and the General Record of Incidence of Mortality books, and the content of the unit's web pages was revised and updated.



Committees

- National Public Health Information Working Group
- Australasian Mortality Data Interest Group
- Australian Bureau of Statistics Health Reference Group
- Australian Bureau of Statistics Mortality Reference Group
- Australian Bureau of Statistics Demography Reference Group
- Public Health Information Development Unit Management Advisory Committee
- DrinkWise Australia Research Advisory Group
- National Drug Strategy Household Survey Technical Advisory Group

Data collections managed

- National Mortality Database
- AIHW population database
- Female Vietnam Veteran and Civilian Health Register
- Australian Bureau of Statistics Confidentialised Unit Record File contact

Fast fact

Life expectancy decreases with increasing remoteness: compared with major cities, the life expectancy in regional areas is 1–2 years lower and in remote areas is up to 7 years lower.

Population Health Data and Information Services Unit

Unit head

Dr Paul Meyer

What we do

The Population Health Data and Information Services Unit is outposted to the Population Health Division of the Department of Health and Ageing. Its role is to be an on-site consultancy for statistical information and services, and to be a preliminary liaison point for the AIHW in the department. The unit is the locus of the AIHW's international health work, and is also responsible for managing the National Drug Strategy Household Survey.

This unit was merged into Drug Surveys and Services on 1 July 2008.

Objectives

- Support the information and statistics needs of the Population Health Division of the Department of Health and Ageing.
- Manage the development, collection, analysis and reporting of the National Drug Strategy Household Survey and related collections.
- Manage the development, collection, analysis and reporting of the Adult Vaccination Survey and related collections.
- Maintain AIHW's international liaison on health data, notably with the OECD and the WHO.

Data collections managed

- National Drug Strategy Household Survey

Performance against planned unit outputs in 2007–08

Contribute to the OECD publication <i>Health at a glance 2007</i> .	Not achieved <i>Moved to Population Health Unit</i>
Provide a data set for OECD Health Data 2008.	Not achieved <i>Moved to Population Health Unit</i>
Contribute to <i>Australia's health, Australia's welfare</i> and other AIHW flagship publications.	Achieved
Publish 2007 <i>National Drug Strategy Household Survey: First results</i> .	Achieved
Draft 2007 <i>National Drug Strategy Household Survey: Detailed findings</i> .	Achieved
Draft Statistics on Drug Use in Australia 2008.	Deferred until 2008–09

Fast fact

The proportion of daily smokers among Australians aged 14 years and older declined to 16.6% in 2007, from a peak of 25.0% in 1993.

Welfare and Housing Group

Group head

Dr Diane Gibson

What we do

The Welfare and Housing Group is responsible for producing statistics, analysis and information on ageing and aged care; the health and welfare of children, youth and families; housing (both long-term and crisis accommodation); and homelessness. The group also has the function of developing data linkage and integration capacity in relation to housing, community services and associated health services data sets, and undertaking analyses on cross-program information issues in keeping with the current recognition of whole-of-government policy agendas.

Overview of units

- Ageing and Aged Care
- Children, Youth and Families
- Community Services Integration and Linkage

Housing and Homelessness Cluster

- Housing Data Analysis
- Housing Assistance
- SMART 6 Implementation team
- Supported Accommodation and Crisis Services

Ageing and Aged Care Unit

Unit head

Ms Ann Peut

What we do

The Ageing and Aged Care Unit aims to inform community debate and public policy in the areas of ageing and aged care through a variety of statistical reporting, research, evaluation and data development projects in relation to the wellbeing, health and service use patterns of older Australians.

Objectives

- Contribute data and information that supports the Government's monitoring of the goal of ageing well and ageing productively under the National Research Priority of Promoting and Maintaining Good Health.

- Begin work to expand the information base on carers through more integrated use of relevant data.
- Engage more strongly with the policy agenda by ensuring that our evidence review of service use by people with dementia identifies practical implications for service planning and delivery that will improve the quality of life for people with dementia and/or their carers, which is one of the key policy goals of the current Dementia Initiative.
- Develop better ways of presenting aged care statistics to more clearly identify key findings.
- Develop our capacity to fill information gaps about the aged care system as a whole and patterns of use by different groups of older people through the analysis of linked aged care data.

Performance against planned unit outputs in 2007–08

Draft the Ageing and Aged Care chapter of <i>Australia's welfare 2007</i> and prepare conference presentation.	Achieved
Draft contributions to chapters 3 and 4 of <i>Australia's health 2008</i> .	Achieved
Contribute to the Community services chapter of the <i>Health and welfare of Australia's Aboriginal and Torres Strait Islander peoples 2008</i> .	Achieved
Aged care packages in Australia 2006–07.	Substantially achieved <i>Report to be published 2008–09</i>
Residential aged care system dynamics.	Substantially achieved
Write journal article on aged care services drawing on some work related to evaluation projects.	Not achieved <i>Project withdrawn due to resource constraints.</i>
Deliver presentations and papers at two key conferences in 2007–08.	Achieved
Publish <i>Residential aged care in Australia 2006–07</i> .	Achieved
Publish <i>Older Australians at a glance</i> (4th edition).	Achieved
Dementia Transitions in Care – review of evidence and node leadership within Primary Dementia Collaborative Research Centre.	Substantially achieved <i>Draft under review</i>

(continued)

Care pathways of older Australians (joint project with Community Services and Integration Linkage Unit).	Work in progress <i>This project is being undertaken over three years. Data linkage, consultations and preliminary analysis were completed in 2007–08</i>
Prepare bulletin on older Indigenous people (under negotiation with funder).	Not achieved <i>Project withdrawn due to lack of funding</i>

Additional projects

- The Transitions in Care node of the Primary Dementia Collaborative Research Centre, led by the AIHW, successfully applied for funding to analyse the take up of residential respite care by people with dementia who have the relevant Aged Care Assessment Teams approval. This project is being conducted jointly with Community Services Integration and Linkage Unit.
- The unit, together with the Community Services Integration and Linkage Unit, collaborating researchers from the Dementia Collaborative Research Centre and the Dementia Transitions in Care node, and other stakeholders was successful in its application to the NHMRC for a Dementia Research Grant. The project is titled 'The impact of hospital-based aged care and dementia services on outcomes for people with dementia admitted to hospital—a regional analysis'. Work has begun on obtaining appropriate Ethics Committee and data custodian approvals.
- The unit received funding from the Department of Health and Ageing to undertake a scoping study into the feasibility and value of a Carers National Data Repository. The project involves

extensive stakeholder consultation, indicative data analysis and research into possible options for a repository.

- The Department of Health and Ageing has provided funding to refine and further develop linked aged care data sets incorporating data from the Aged Care Assessment Program, residential aged care, aged care packages in the community, Veterans' Home Care, and Home and Community Care.
- Funding was also provided to support a range of analyses of particular policy interest to DoHA.

Collaborations

- The University of New South Wales
- The University of Queensland
- The Lincoln Centre for Research on Ageing, La Trobe University
- The Australian National University
- Alzheimer's Australia
- Australian Association of Gerontology
- Australian Research Council/NHMRC Research Network in Ageing Well
- NSW Health

Committees

- Report on Government Services Aged Care Working Group
- Dementia Cooperative Research Centre Steering Committee
- Dementia Cooperative Research Centre Advisory Committee
- Australian Bureau of Statistics National Ageing Statistics Unit Advisory Board
- Australian Bureau of Statistics Survey of Disability, Ageing and Carers Advisory Committee
- Advisory Committee for Functioning and Disability Data
- DYNOPTA project Steering Committee
- Australian Association of Gerontology National Council
- Australian Association of Gerontology Australian Capital Territory Committee

Data collections managed

- The unit does not collate any data collections, but maintains, documents and analyses national data held at AIHW on residential aged care, Community Aged Care Packages, Extended Aged Care at Home, Extended Aged Care at Home Dementia, and Home and Community Care.



Fast facts

About 29% of people aged 65 or over live alone in private dwellings. This proportion increases with age so that around 39% of people aged 85 or over live alone.

Less than a quarter (23.7%) of people aged 85 or over lives in permanent residential aged care.

In 2003 there were 239,400 primary carers assisting someone aged 65 or over. A large majority (84%) provided assistance with mobility tasks, over half (55%) assisted with self-care activities and 42% provided help with communication.

Children, Youth and Families Unit

Unit heads (job-share)

Ms Cynthia Kim

Ms Sushma Mathur

What we do

The Children, Youth and Families Unit works in the following areas of community services statistics: child protection services, adoptions, family support services, child and youth health and wellbeing, and children's services (child care and preschools).

The unit aims to contribute to informed community discussion and to support the development of public policy in the area of children, youth and families by collecting, coordinating, developing, and disseminating relevant and timely national statistics and analysis.

Objectives

Establish new national collections in the following areas:

- foster carers and family support services in the context of child protection
- examining the options for implementation for the Children's Services National Minimum Data Set
- reporting and data development for the headline indicators of children's health, development and wellbeing
- longitudinal analyses on the educational outcomes of children on guardianship or custody orders.

The unit also undertakes regular reporting on national child protection and adoptions statistics and produces indicator-based reports on children's and young people's health, development and wellbeing.

Performance against planned unit outputs in 2007–08

Draft chapter on Australia's children, youth and families for <i>Australia's welfare 2007</i> and paper conference presentation.	Achieved
Contribute information on children and youth for <i>Australia's health 2008</i> .	Achieved
Contribute to the community services chapter of the <i>Health and welfare of Australia's Aboriginal and Torres Strait Islander peoples 2008</i> .	Achieved
Deliver presentations and papers at two key conferences in 2007–08.	Achieved
Plan and draft <i>A picture of Australia's children</i> report and bulletin.	Achieved
Produce <i>Adoptions Australia 2006–07</i> .	Achieved
Produce <i>Child protection Australia 2006–07</i> .	Achieved
Publish bulletin <i>Injury among young Australians</i> .	Achieved
Children's headline indicators (data development and status report)	Achieved

Additional projects:

The unit also commenced a number of new projects in 2007–08 for which work will continue in 2008–09:

- development of a structure and format for the release of headline indicators in electronic format as part of the reporting for the headline indicators for children's health, development and wellbeing
- improvements to the project specifications for Stage 2 of educational outcomes for children on guardianship or custody orders project, resulting in more consistent and comparable collection of data
- development work for a national data collection for foster carers
- a feasibility study for the implementation of the Children's Services National Minimum Data Set
- a feasibility study for a national data collection on family support services in the context of child protection.

Committees

- Children's Services Data Working Group
- Children's Services Working Group
- Longitudinal Study of Australian Children/ The Household, Income and Labour Dynamics in Australia steering committee
- Children and Youth Statistics Advisory Group

- Department of Families, Housing, Community Services and Indigenous Affairs Youth Statistics working group
- National Child Information Advisory Group
- National Child Protection and Support Services data group
- Protection and Support Services Working Group
- Intercountry adoptions managers' meetings
- Early Childhood Data Mapping Project Working Group
- National Data Network/ Child and Youth Portal Reference Group
- Family Statistics Advisory Group
- Childhood Education and Care Survey Reference Group

Data collections managed

- Child Protection and Family Support Services
- Adoptions Australia
- Headline Indicators for Children's Health, Development and Wellbeing
- Educational outcomes for children on guardianship or custody orders

Fast fact

The intentional self-harm hospitalisation rate increased by 43% among young people aged 12–24 years between 1996–97 and 2005–06. The increase was greater for young women (51%) than for young men (27%).

Community Services Integration and Linkage Unit

Unit head

Dr Phil Anderson

What we do

The Community Services Integration and Linkage Unit develops and analyses person-centred data (rather than program-centred data) that support whole-of-government and whole-of-life approaches to policy in the community services arena. The linkage work adheres to strict ethical and privacy provisions.

Objectives

- Enhance whole-of-government and life transition views of older Australians by analysis of linked data that provides information relevant to policy makers.

- Develop our capacity to fill information gaps through the continued enhancement of data linkage methodology for different types of information.
- Protect privacy while increasing confidence in and acceptance of data linkage by explaining its benefits, while publicising the AIHW Data Linkage Protocol and privacy regime.
- Examine the potential for data linkage to help fill information gaps in areas where data linkage is currently not utilised.
- Improve information and products from the Juvenile Justice National Minimum Data Set to enhance their relevance to government policy and programs.
- Develop better ways of presenting statistics from the analysis of linked data which more clearly identify key findings.

Performance against planned unit outputs in 2007–08

Contribute to the ageing and aged care and children, youth and families chapters of <i>Australia's welfare 2007</i> .	Achieved
Contribute to the community services chapter of the <i>Health and welfare of Australia's Aboriginal and Torres Strait Islander peoples 2008</i> .	Achieved
Investigate the characteristics of people who move from hospitals to residential aged care.	Achieved <i>Project involved the linkage of seven aged care data sets</i>
Develop data linkage and analysis of Care Pathways of Older Australians (joint project with the Ageing and Aged Care unit)—also includes data development.	Work in progress <i>Data linkage completed and data analysis commenced</i>
Publish <i>Juvenile justice in Australia 2005–06</i> .	Achieved
Publish <i>Veterans' use of health services</i> .	Achieved
Publish report on veterans in residential aged care: current trends (in conjunction with staff of Ageing and Aged Care Unit).	Substantially achieved <i>First report published on the comparison of the use of health services by veterans in residential aged care with those living the community. Second report delayed due to problems with data supply</i>

(continued)

Publish bulletin on modelling the future: a policy flight simulator at the acute–aged care interface.	Achieved <i>Bulletin published on older people in hospital</i>
Develop data linkage methods, techniques and protocols additional to specific projects.	Achieved <i>Linking SAAP, child protection and juvenile justice data collections: a feasibility study released</i>
Deliver presentations and papers at two key conferences in 2007–08.	Achieved
Prepare one journal article.	Achieved

Additional projects

An NHMRC Dementia Research Grant was awarded to the AIHW for the project 'The impact of hospital-based aged care and dementia services on outcomes for people with dementia admitted to hospital', submitted together with the Ageing and Aged Care Unit and researchers from The University of New South Wales. Work has begun on this project, which will explore the effect of different types of hospital services on outcomes for people with dementia, in particular the likelihood and timing of entry into residential aged care.

Following on from the report *Characteristics of people who move from hospitals to residential aged care*, the unit is working on a prototype publication to demonstrate the analyses that can be done with linked data, for release in 2008–09.

New funding was received from the Department of Health and Ageing for two projects:

- examining the take-up of residential respite care by people with dementia
- an aged care research program—further development and building of linked aged care databases.

Using linked data the unit has also carried out analyses of people who receive aged care assessments but do not then receive the services for which they are assessed.

Collaborations

- Alzheimer's Australia
- Health Information Linkage Branch, Department of Health, Western Australia
- NSW Health
- The Lincoln Centre for Research on Ageing, La Trobe University
- The University of New South Wales
- The University of Queensland
- The University of Sydney

Committees

- Juvenile Justice Data Working Group (secretariat)

Data collections managed

- Juvenile Justice National Minimum Data Set

Fast fact

More people are admitted for the first time to residential aged care directly from hospital than from the community.

Housing and Homelessness Cluster

The Housing and Homelessness Cluster works with the housing and homelessness units in the AIHW to bring together the common issues facing these two sectors. It has facilitated the exploration of the AIHW's rich data holdings in housing and homelessness.

Cluster head

Mr Justin Griffin

Housing Data Analysis Unit

Unit head

Mr David Wilson

What we do

The Housing Data Analysis Unit works with other AIHW units to develop and improve policy-relevant information on housing assistance and its relationship to other health, welfare and income support issues using administrative data as well as census and survey information.

Objectives

- Improve the awareness and application of the National Housing Assistance Data Repository information in relevant policy and program work and housing research.
- Develop information on the interface between housing and homelessness to better describe how housing and homelessness assistance contributes to health, welfare and income support issues.
- Develop and promote the use of housing and homelessness assistance information with other health and welfare work within the AIHW.
- Provide technical and expert advice on housing assistance information issues to other agencies and to other units in the AIHW.
- Promote the use of housing information and standards in data collection and analysis activities externally and with other areas of the AIHW.

Performance against planned unit outputs in 2007–08

Produce bulletin Commonwealth Rent Assistance June 2006: A profile of recipients.	Not achieved <i>Deferred to 2008–09</i>
Produce bulletin <i>Community housing data collection 2006–07</i> .	Achieved
Publish <i>Australia's housing at a glance</i> .	Achieved
Produce report on rent-setting modelling work done for 2008 Commonwealth State Housing Agreement.	Not achieved <i>Deferred to 2008–09</i>
Draft the housing assistance chapter of <i>Australia's welfare 2007</i> and prepare conference presentation.	Achieved
Deliver presentations and papers at two key conferences in 2007–08.	Achieved
Produce eight jurisdictions-specific unit record files based on the Australian Government Housing Data Set in the National Housing Assistance Data Repository.	Achieved
Report of clients of SAAP and public housing.	Not achieved <i>Moved to the Supported Accommodation and Crisis Services Unit</i>
Report on identifying high and complex needs in housing and homelessness data.	Not achieved <i>Moved to the Supported Accommodation and Crisis Services Unit</i>
Examine housing data sets regarding the housing and homelessness interface.	Not achieved <i>Moved to the Supported Accommodation and Crisis Services Unit</i>

Additional projects

- Peer review of Indigenous housing costing study: 2008–09 to 2013–14 undertaken for FaHCSIA
- Input to Australian Government Green Paper on Homelessness, *Which way home? A new approach to homelessness*

Committees

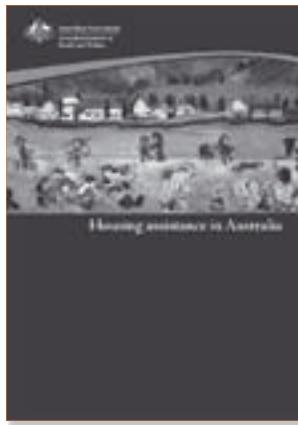
- Australian Housing Urban Research Institute Research Panel

Data collections managed

- Australian Government Housing Data Set

Fast fact

In 2006 there were 84,000 renters in Australia who were paying more than 50% of their income in rent even after receiving Commonwealth Rent Assistance.



Housing Assistance Unit

Unit head

Ms Tracie Ennis

What we do

The Housing Assistance Unit works with housing agencies, the Australian government and peak bodies to produce policy-relevant national housing information. It also develops national data standards, identifies items for collection, collects and analyses national housing data and produces reports on housing assistance.

Objectives

- Strengthen the unit's engagement with policy makers at both state and Commonwealth levels, to ensure that data development and analysis activities are of maximum relevance.
- Maintain and build on the unit's position as the Australian experts in the development of housing assistance performance indicator

frameworks and associated performance-reporting activities.

- Promote the national housing assistance data repository, in particular the extensive nature of the data held, the high quality of this data and its application for policy-relevant analysis.
- Build on the early achievements of the Housing and Homelessness Cluster and use this to develop the careers and job satisfaction of staff through such mechanisms as cross-unit projects and opportunities to work on newly emerging areas.
- Build a highly skilled and flexible team, to ensure that the unit continues to meet existing commitments but is also able to take on new opportunities that are likely to arise as a result of the new National Affordable Housing Agreement and the implementation of the Housing and Disability Group.

Performance against planned unit outputs in 2007–08

Produce bulletin on public housing in Australia.	Substantially achieved <i>Report to be published in 2008–09</i>
Produce bulletin on the 2007 Public Housing National Social Housing Survey.	Substantially achieved <i>Data provision was delayed</i>
Produce bulletin on the 2007 Community Housing National Social Housing Survey.	Substantially achieved <i>Data provision was delayed</i>
Contribute to the housing chapter of <i>Australia's welfare 2007</i> .	Achieved
Contribute to the housing chapter of <i>The health and welfare of Australia's Aboriginal and Torres Strait Islander peoples 2007</i> .	Achieved
Provide to the Department of Families, Housing, Community Services and Indigenous Affairs the 2006–07 national performance information for the six 2003 Commonwealth State Housing Agreement program areas.	Achieved
Report on 2006–07 public rental housing data.	Achieved
Report on 2006–07 state owned and managed Indigenous housing data.	Achieved

(continued)

Report on 2006–07 mainstream Commonwealth State Housing Agreement community housing data.	Achieved
Report on 2006–07 Crisis Accommodation Program data.	Achieved
Report on 2006–07 private rent assistance data	Achieved
Reports on 2006–07 mainstream Commonwealth State Housing Agreement home purchase assistance data.	Achieved
Report on the 2006–07 community housing trial unit record collection on dwellings and organisations.	Achieved
Produce fact sheets on results from 2006–2007 Commonwealth State Housing Agreement community housing data collection.	Achieved
Report on the development and collection of data on the access by Indigenous households to mainstream housing assistance for the 2003 Commonwealth State Housing Agreement.	Substantially achieved Draft under review
Deliver presentation and papers at two key conferences in 2007–08.	Achieved

Additional projects

- The addition of Indigenous community housing work to the unit's responsibilities has allowed for a much greater alignment of this collection to mainstream community housing and targeted Indigenous public housing. This will be further improved in subsequent collections.
- Through the unit's representation on both the Northern Centre for Healthcare Improvement and the Financial Technical Working Group of the Health Ministers' Advisory Council, the AIHW has been able to facilitate an alignment of financial reporting standards across the Commonwealth State Housing Agreement financial and performance reporting frameworks. These had previously been collected separately and with different definitions and standards. Data for both collections now comes from the one source that conforms to the International Financial Reporting Standards.
- The Housing Assistance Unit also made a significant contribution to the 2008 publication *Housing assistance in Australia*.
- The unit has continued to work with the National Committee on Housing Information to ensure national standards are defined and met in the Commonwealth State Housing Agreement data collections. For example, this year's public housing collection will trial the use of the Canadian Occupancy Standard to determine the levels of overcrowding.
- The unit has continued to implement the strategy for improving the quality, coverage and consistency of community housing data under the 2003 Commonwealth State Housing Agreement. Specific progress includes the agreement to upgrade the national collection of Commonwealth State Housing Agreement community housing administrative data from an aggregate collection to a unit record collection. Some jurisdictions will also provide household data at the unit record level for 2007–08 onwards.
- Previous analysis undertaken by the AIHW has resulted in an agreement to undertake the first national reporting of dwelling condition for Indigenous Community

Housing across all jurisdictions. This methodology may also be applicable across other forms of social housing.

Committees

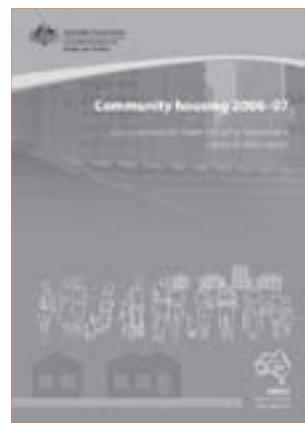
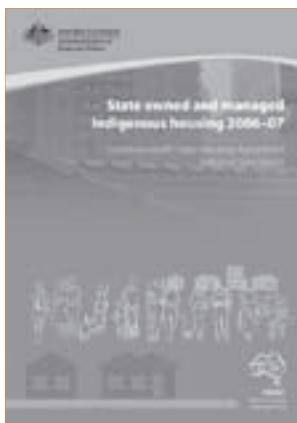
- National Committee for Housing Information (member, secretariat)
- Report on Government Services Steering Committee Housing Working Group (member)
- Financial Technical Working Group of the Housing Ministers' Advisory Committee (member)

Data collections managed

- Commonwealth State Housing Agreement public rental housing
- Commonwealth State Housing Agreement state owned and managed Indigenous housing
- Commonwealth State Housing Agreement community housing
- Commonwealth State Housing Agreement home purchase assistance
- Commonwealth State Housing Agreement private rent assistance
- Commonwealth State Housing Agreement Crisis Accommodation Program
- Indigenous community housing

Fast fact

Households in public housing given priority allocation due to homelessness were equally as likely as non-priority households to still be housed in the same dwelling after 2 years.



SMART 6 Implementation Team

Unit head

Ms Heather Logie

What we do

The team successfully piloted SMART Version 6 in a small number of agencies in July 2007. The evaluation of this pilot revealed the unexpectedly high costs associated with installation and support of the application in a diverse technological environment. Without a large commitment of resources to the rollout and support of SMART 6, a decision was taken in September 2007 by the SAAP Coordination and Development Committee to suspend development of SMART Version 6.

Supported Accommodation and Crisis Services Unit

Unit head

Ms Heather Logie

What we do

The Supported Accommodation and Crisis Services Unit produces national and state/territory reports that describe the need for and provision of supported accommodation and crisis services to people who are homeless and/or in crisis, using surveys and census data.

The unit is undergoing a review of its structure and working procedures with a view to better positioning the AIHW to respond to the growing policy interest in homelessness and the increasing need for timely, responsive evidence to support the policy development process.

Objectives

- Carry out data development activities that will revise the SAAP Administrative Data collection and the SAAP Demand for Accommodation collection, and develop a referrals collection.
- Implement the Victorian Homelessness Data Collection. This was a Victorian Office of Housing initiative to integrate reporting across the three major programs of the Victorian Homelessness Strategy. This project incorporated work by the SMART 6 Implementation Team (see **SMART 6 Implementation Team** on page 93).

Performance against planned unit outputs in 2007–08

Develop new weighting system for SAAP data.	Work in progress
Write journal articles for <i>Parity</i> .	Achieved
Write journal article for <i>Family Matters</i> .	Not achieved <i>Deferred to 2008–09</i>
Draft the Homelessness chapter of <i>Australia's welfare 2007</i> and prepare conference presentation.	Achieved
Contribution to the community services chapter of the <i>Health and Welfare of Australia's Aboriginal and Torres Strait Islander peoples 2008</i> .	Achieved
Deliver presentations and papers at two key conferences in 2007–08.	Achieved
Apply new weighting system for SAAP data (including analysis of differences using old weighting system with 2005–06 data).	Not achieved <i>Pending data changes and revised strategic directions</i>
Produce half yearly (July to December) agency reports for each agency providing SAAP services.	Achieved
Produce 2006–07 agency reports for each agency providing SAAP services.	Achieved
Produce <i>Demand for SAAP assistance by homeless people 2005–06</i> .	Achieved
Produce bulletin <i>Demand for SAAP accommodation by homeless people 2005–06</i> .	Achieved

(continued)

Produce bulletin on Aboriginal and Torres Strait Islander SAAP clients.	Substantially achieved <i>Combined with SAAP client group bulletin. To be published 2008–09</i>
Produce bulletin with SAAP client group.	Substantially achieved <i>Combined with Aboriginal and Torres Strait Islander SAAP clients. To be published 2008–09</i>
Produce confidentialised unit record files.	Achieved
Provide an ad hoc data request service to SAAP stakeholders.	Achieved
SAAP V Evaluation—pilot and manage the Strategic Priority Survey.	Achieved
SAAP V Evaluation—Performance Indicator Analysis Project.	Substantially achieved <i>Pending external decision to complete SAAP V Evaluation</i>
Develop and produce unit record files for the Victorian Homelessness Data Collection.	Not achieved <i>Deferred to 2008–09</i>
Produce quarterly agency reports for all agencies participating in the Victorian Homelessness Data Collection (SAAP, Housing Information Referral and Tenancy Administration agencies).	Not achieved <i>Deferred to 2008–09</i>

Additional projects

- The High and Complex Needs Census, a new project jointly funded by Mission Australia and the Department of Families, Housing, Community Services and Indigenous Affairs, examines the extent of needs of clients receiving SAAP assistance in a specified week with a view to identifying those who have high and complex needs. The report is scheduled for release in 2008–09.
- The unit produced *Housing assistance in Australia*, the first publication to comprehensively describe housing and homelessness assistance in Australia.
- The pilot evaluation report for the Victorian Homelessness Data Collection project (unpublished) was completed in February 2008 and the full collection commenced in all Victorian SAAP and Transitional Housing Management agencies on 1 July 2008.

- The unit was asked to contribute to the Australian Government Green Paper on Homelessness, *Which way home? A new approach to homelessness*, and provided a large number of detailed tables for the report.
- In June 2008, the unit completed development of, and released, Version 5.2 of the SMART data collection tool that is used by SAAP agencies to record client and service information and electronically provide securely encrypted data to the AIHW.

Collaborations

- Mission Australia
- Department of Families, Housing, Community Services and Indigenous Affairs

Committees

- SAAP Co-ordination and Development Committee
- SAAP Information Sub-Committee
- Performance Indicators Working Group
- Administrative Data Collection Working Group
- High and Complex Needs Census Project Steering Committee

Data collections managed

- SAAP Client Collection
- SAAP Administrative Data Collection
- SAAP Demand for Accommodation Collection
- Victorian Homelessness Data Collection
- High and Complex Needs Census Data (one-off) Collection

Fast fact

On an average day during the 2005–06 collection period, around 355 people (consisting of 225 adults and unaccompanied children, and 130 accompanying children) were turned away from a SAAP agency without receiving SAAP accommodation.



Collaborations and partnerships

The AIHW has work plans and data-sharing agreements with a number of organisations to facilitate collaboration. In effect, this creates AIHW units at various universities. Such collaborations extend the range of skills available to the AIHW and enhance its capacity to perform its functions across a broader range of subject matter.

In addition to the data-sharing collaborations, the AIHW also works with other government agencies. These include the Australian Safety and Quality in Healthcare Commission and the Australian Institute of Family Studies.

Collaborating units with agreed work plans and data-sharing agreements

Australian Centre for Asthma Monitoring

The AIHW has an agreement with the Woolcock Institute of Medical Research for the management of the Australian Centre for Asthma Monitoring for the period 1 July 2006 to 30 June 2009. The AIHW collaborates with the centre in the development and dissemination of asthma-related information as part of the Australian System for Monitoring Asthma.

Australian General Practice Statistics and Classification Centre

The AIHW has an agreement with The University of Sydney for the period 1 July 2005 to 30 June 2010. The AIHW, in collaboration with the Australian General Practice Statistics

and Classification Centre, collects and makes available information about characteristics of patients of general practitioners in Australia, and the medical services and pharmaceutical prescriptions provided to such patients.

Dental Statistics and Research Unit

The AIHW has an agreement with The University of Adelaide for the operation of the AIHW Dental Statistics and Research Unit at the university for the period 1 July 2002 to 30 June 2008. The unit was established for the purposes of collecting, collating and analysing statistics relating to dental care and oral health, and on dental services and service providers, and for initiating and undertaking associated research studies.

National Injury Surveillance

The AIHW has an agreement with Flinders University for the operation of the National Injury Surveillance Unit for the period 1 July 2002 to 30 June 2008. An additional schedule to the agreement exists between the Australian Government Department of Health and Ageing and the AIHW for the National Injury Surveillance Unit for the period 1 July 2005 to 30 June 2008. The unit was developed for the purposes of informing community discussion and supporting policy making on the prevention and control of injury in Australia by developing, coordinating, interpreting and disseminating relevant information, research and analysis.

National Perinatal Statistics Unit

The AIHW has an agreement with The University of New South Wales for the operation of the National Perinatal Statistics Unit at the university for the period 1 July 2002 to 30 June 2008. The unit was established for the purposes of providing national leadership in the development and study of statistics relating to perinatal health; collecting, collating and analysing statistics relating to perinatal health; and initiating and undertaking associated research studies.

Public Health Information Development Unit

The AIHW has an agreement with Adelaide Research and Innovation Pty Ltd (a wholly owned company of The University of Adelaide) for the operation of the Public Health Information Development Unit from 1 October 2004 to 30 June 2010. The unit was established to collect, collate and analyse statistics relating to public health, and to initiate and undertake associated research studies.

Collaborating units with data-sharing agreements

National Centre for Classification in Health

The AIHW has an agreement with the Queensland University of Technology and the Australian Bureau of Statistics for the operation of the National Centre for Classification in Health (Brisbane) for the period 1 July 2003 to 30 June 2008. The centre supports the use of health classifications in mortality, hospitals and other data sets, and associated international work.

The AIHW also has an agreement in place for the National Centre for Classification in Health (The University of Sydney) for the period 22 November 2004 to 30 June 2008. The agreement provides a basis for AIHW and the centre to cooperate to ensure adequate resourcing for the updating and implementation of the ICD-10-AM (Australian version of the International Classification of Diseases).

National Centre in HIV/AIDS Epidemiology and Clinical Research

The AIHW has an agreement with The University of New South Wales for cooperation on information and research on human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS) diagnoses under a national HIV/AIDS strategy from 1 January 2004 to 31 December 2007. The AIHW collaborates with the university in the collection, development and dissemination of care reporting on HIV and AIDS diagnoses, and ensures that the compilation and interpretation of HIV/AIDS surveillance data provided by the Department of Health and Ageing and state and territory health departments is appropriate, secure and efficient.

National Centre for Immunisation Research and Surveillance of Vaccine-Preventable Diseases

The AIHW is currently in negotiations with the Royal Alexandra Hospital for Children to renew their agreement for the operation of the Vaccine-Preventable Diseases Research Unit at the hospital. The AIHW collaborates with the Royal Alexandra Hospital for Children in undertaking analysis and dissemination of information on vaccine-preventable diseases and immunisation in Australia.

Reports from collaborating units with agreed work plans

National Injury Surveillance Unit

Unit head

Associate Professor James Harrison

What we do

The National Injury Surveillance Unit operates as part of the Research Centre for Injury Studies at the Flinders University of South Australia. The unit undertakes public health surveillance of injury at the national level to support injury prevention and control. The largest program of the research centre is operating the AIHW National Injury Surveillance Unit.

Achievements

- The unit contributed to the development and maintenance of national data standards relevant to injury. Activities in 2007–08 included the assessment of misclassification of external causes of death, and participation in a project to study quality of external cause coding of hospital records.
- Demand for the unit's services for purposes beyond the core program increased, compared with the previous year.
- Review of quality of suicide data—AIHW (Department of Health and Ageing).
- In-hospital mortality demonstration project—AIHW (Australian Council for Safety and Quality in Health Care).
- Eye injuries bulletin—AIHW (Department of Health and Ageing).

Publications

- *Spinal cord injury, Australia, 2005–06*
- *Venomous bites and stings in Australia to 2005*
- *Deaths and hospitalisations due to drowning, Australia 1999–00 to 2003–04*
- *Hospitalised football injuries 2004–05*
- *Ladder-related fall injuries*
- *Use of multiple causes of death data for identifying and reporting injury mortality*
- *Serious injury due to land transport accidents, Australia, 2003–04*
- *Serious injury due to transport accidents involving a railway train, Australia, 1999–00 to 2003–04*
- *Serious injury due to transport accidents, Australia, 2003–04*
- *Injury Issues Monitor 39*
- *Injury Issues Monitor 40*

Committees

- Member, WHO ICD Revision Steering Committee and Chair, Technical Advisory Group for injury and external causes
- ICECI Coordination and Development Group: executive group member responsible for development

- International Collaborative Effort on Injury Statistics. US National Center for Health Statistics Steering group member
- National Injury Prevention Working Group
- National Coroners Information System Committee
- Australian Injury Prevention Network Executive Committee
- National Child Information Advisory Group
- Australian Bureau of Statistics Mortality Statistics Advisory Group
- Australasian Mortality Data Interest Group
- IARP data subgroup of the National Marine Safety Committee

Data collections managed

- Australian Spinal Cord Injury Register

Fast fact

Despite the notoriety of Australia's venomous snakes, more than twice as many people are admitted to a hospital each year from spider bites than snake bites. Bee stings also account for more admissions than snake bites.



National Perinatal Statistics Unit

Unit head

Dr Elizabeth Sullivan

What we do

The National Perinatal Statistics Unit aims to contribute to the health and wellbeing of mothers and babies in Australia through the collection, analysis and reporting of national reproductive and perinatal health information. The unit collaborates with state and territory perinatal data groups and other professional and consumer groups in developing national reproductive and perinatal health statistics and information systems.

Achievements

- Development of the congenital anomalies chapter of the ICD-10-AM classification. A series of teleconferences and two national workshops on congenital anomalies were conducted.
- Preparation of a report on neural tube defects in Australia to provide baseline prevalence before mandatory fortification of bread flour by folic acid.
- Development of a national minimum data set for congenital anomalies.
- Development of smoking in pregnancy data (funded by the Australian Health Ministers' Advisory Council and reporting to the Department of Health and Ageing).
- Investigation into the need for and feasibility of national reporting on newborn and prenatal screening (funded by the Statistical Information Management Committee).
- Perinatal National Minimum Data Set Compliance Evaluation.

- Three national maternal mortality workshops were held to develop options for future maternal death reporting in Australia. The workshops comprised National Advisory Committee on Maternal Mortality committee representatives.

Publications

- *Australia's mothers and babies 2005*
- *Indigenous mothers and their babies, Australia 2001–2004*
- *Assisted reproduction technology in Australia and New Zealand 2005*
- *Maternal deaths in Australia 2003–2005*
- *Congenital anomalies in Australia 1998–2001*
- *Congenital anomalies in Australia 2002–2003*

Committees

- National Perinatal Data Development Committee (secretariat)
- National Congenital Anomalies Steering Committee (secretariat)
- AIHW National Advisory Committee on Maternal Mortality (secretariat)
- State and Territory Implementation Committee for Congenital Anomalies (secretariat)
- AIHW National Perinatal Statistics Unit Management Advisory Committee
- ICD-10-AM classification development committee (congenital anomalies)

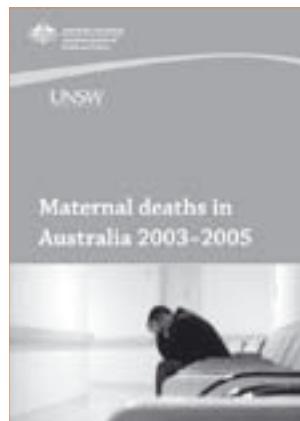
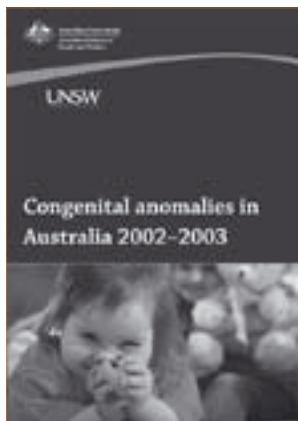
Data collections managed

- National perinatal data collection 1991–ongoing (current 2005, from states and territories)
- Australian congenital anomalies data collection 1998–2003 from states and territories
- Congenital Malformation Data System 1981–1997 (ceased collection)
- Australia and New Zealand Assisted Reproduction 2002–ongoing (current 2005, from all assisted reproductive technology units in Australia and New Zealand)
- Assisted Conception Data Collection 1979–2001 (ceased collection)
- National Maternal Deaths Data Collection 1994–2005 from states and territories

Fast facts

Maternal mortality rates for Aboriginal and Torres Strait Islander women were more than two and a half times as high as for other women. This high rate is consistent with previous reports, indicating that further work measures are needed to improve pregnancy outcomes for Aboriginal and Torres Strait Islander women.

The proportion of women who had induced or no labour, and the proportion who had an instrumental delivery or caesarean section, increased with socioeconomic advantage.



Dental Statistics and Research Unit

Unit head

Professor Gary Slade

What we do

The Dental Statistics and Research Unit 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.

Achievements

The unit was actively involved in conferences and writing journal articles including:

- presenting 38 conference papers and journal articles
- publishing 25 papers
- presenting at 28 national and international conferences including in the United Kingdom, Canada, the United States of America and Finland.



Publications

AIHW Dental statistics and research series

- Oral health of Aboriginal and Torres Strait Islander children. Dental statistics and research series no. 35.
- Water fluoridation and children's dental health: The Child Dental Health Survey, Australia 2002. Dental statistics and research series no. 36.
- Geographic distribution of the Australian dental labour force, 2003. Dental statistics and research series no. 37.

AIHW DSRU research report

- Dental service patterns by patient and visit characteristics. DSRU research report no. 32.

Committees

- Monitoring Group for National Oral Health Plan

Data collections managed

- Child Dental Health Survey
- Adult Dental Programs Survey
- Dental Labour Force Data Collection
- National Dental Telephone Interview Survey

Fast fact

Complete tooth loss in the Australian population is unrelated to people's age, but depends entirely on the decade in which they were born.

Australian General Practice Statistics and Classification Centre

Unit head

Associate Professor Helena Britt

What we do

The Australian General Practice Statistics and Classification Centre is a collaborating unit of the Family Medicine Research Centre of the University of Sydney and the AIHW. The unit is responsible for conducting the Bettering the Evaluation and Care of Health study and the development of primary care classification systems.

Achievements

- The centre has developed 90 new data elements to be entered in METeOR, and has arranged access to put forward the drafts, but no funding is available to do the work.
- The centre was actively involved in conferences and writing journal articles including 6 refereed and 10 non-refereed articles in recognised journals, 18 published conference abstracts, and 16 Bettering the Evaluation and Care of Health SAND abstracts.

Publications

- Patient-based substudies from BEACH: abstracts and research tools 1999–2006. General practice series no. 20
- General practice activity in Australia 2006–07. General practice series no. 21

Committees

- International Classification Committee of the World Organisation of Family Doctors
- International Health Terminology Standards Development Organisation Primary Care Working Group
- Standards Australia Committee IT14 Health Informatics
- Federal Privacy Commissioner Health Privacy Forum
- Law Reform Commission Medical Advisory Group on Privacy Law Reform

Data collections managed

- Bettering the Evaluation and Care of Health—a continuous national study of general practice activity in Australia

Fast fact

The introduction of Medicare rebates for psychologist consultations for patients referred by GPs resulted in a significant decrease in GP provision of counselling for depression. Referrals to psychologists significantly increased and those to psychiatrists decreased.

Public Health Information Development Unit

Unit head

Mr John Glover

What we do

The Public Health Information Development Unit was established by the Australian Government Department of Health and Ageing in 1999 to assist in the development of public health data, data systems and indicators. The unit is located at The University of Adelaide and is a collaborating unit of the AIHW in relation to its work for the Department of Health and Ageing.

Achievements

- Online, interactive atlases of population health of Aboriginal and Torres Strait Islander peoples published.

Committees

- Australian Bureau of Statistics Australian Health Statistics
- Australian Bureau of Statistics General Social Survey Advisory Committee
- Mapping Group (chair), Technical Reference Group, Australian Early Development Index
- Australian Bureau of Statistics Mortality Statistics Advisory Group

Fast fact

The 'Monitoring inequality' site launched to highlight socioeconomic variations across the population: pilot site published for South Australia in 2007–08, with Australia-wide data to be published in 2008–09.

Australian Centre for Asthma Monitoring

Unit head

Professor Guy Marks

What we do

The Australian Centre for Asthma Monitoring forms part of the Australian System for Monitoring Asthma, which was established as a component of the National Health Priority Area plan for asthma. ACAM aims to assist in reducing the burden of asthma in Australia by developing, collating and interpreting data relevant to asthma prevention, management and health policy.

Asthma indicators developed by the AIHW cover the areas of prevalence; health care utilisation; comorbidities; quality of life, disability, disease severity and mortality; risk factors; and management practices.

Achievements

- The Australian Centre for Asthma Monitoring released a detailed statistical manual on the methods used for monitoring asthma in Australia, which has contributed to the forthcoming production of a similar document from the AIHW as a whole.
- Dr Anne Chang collaborated with the centre to prepare the focus chapter of the upcoming 'Asthma in Australia 2008' report.

Publications

- *Australian asthma indicators: Five-year review of asthma monitoring in Australia*
- *Statistical methods for monitoring asthma*

Committees

- Australian System for Monitoring Asthma Steering Committee

Fast fact

Hospital admissions for anaphylaxis have recently tripled in Australia with children most at risk of being hospitalised for adverse reactions to food.

