

Australian Health Performance Framework

Objective: to improve health outcomes for all Australians and ensure the sustainability of the Australian health system

EQUITY

Determinants of health:

Are the factors that influence good health changing for the better? Where and for who are these factors changing? Is it the same for everyone?

Socioeconomic factors

Income, employment, housing, education and social inequalities

Health behaviours

Attitudes, beliefs, knowledge and behaviours such as patterns of eating, physical activity, smoking & alcohol consumption

Personal biomedical factors

Genetic-related susceptibility to disease & other factors such as blood pressure, cholesterol levels and body weight

Environmental factors

Physical, chemical & biological factors such as water, food and soil quality

Health system

Is the health system (by itself, and with others) working to prevent illness, injury and disease? Is it delivering safe, effective, and accessible coordinated care appropriate for each individual? Is the health system efficient and sustainable?

Effectiveness

Care, intervention or action achieves the desired outcome from both the clinical and patient perspective, including as patient reported outcomes (PROMs).

Care provided is based on evidence-based standards.

Safety

The avoidance or reduction to acceptable limits of actual or potential harm from health care management or the environment in which health care is delivered.

Includes aspects of the safety of care delivered to health care providers and patients, including patient reported incidents (PRIMs).

Appropriateness

Service is person centred and culturally appropriate. Consumers are treated with dignity, confidentiality and encouraged to participate in choices related to their care.

Consumers report positive experiences (PROMs & PREMs).

Continuity of care

Ability to provide uninterrupted care or service across programs, practitioners and levels over time.

Coordination mechanisms work for health care providers and the patient.

Accessibility

People can obtain health care at the right place and right time, taking account of different population needs and the affordability of care.

Efficiency and sustainability

The right care is delivered at minimum cost *and* human and physical capital and technology are maintained and renewed *while* innovation occurs to improve efficiency and respond to emerging needs.

Health status:

How healthy are Australians? Is it the same for everyone? What are the best opportunities for improvement?

Health conditions

Incidence and prevalence of disease, disorder, injury or trauma or other health related states

Human function

Alterations to body structure or function (impairment), activity limitations and restrictions in participation

Wellbeing

Measures of physical, mental and social wellbeing of individuals

Deaths

Mortality rates and life expectancy measures

Health system context

Demographics

Community and social capital

Governance and structure

Financing

Workforce

Infrastructure

Information, research and evidence

Australian Health Performance Framework – initial set of core indicators

EQUITY

Determinants of health:

Socioeconomic factors

1. Proportion of people with low income
2. Educational attainment for selected school years & adults

Health behaviours

1. Rates of current daily smokers
2. Children exposed to tobacco smoke in the home
3. Levels of risky alcohol consumption
4. Inadequate fruit & vegetable intake
5. Insufficient physical activity
6. Unsafe sharing of needles

Personal biomedical factors

1. Prevalence of overweight & obesity

Environmental factors

Health system					
Effectiveness	Safety	Appropriateness	Continuity of care	Accessibility	Efficiency & sustainability
<ol style="list-style-type: none"> 1. Immunisation rates for vaccines in the national schedule 2. Females with an antenatal visit in the first trimester of pregnancy 3. Cancer screening rates 4. Selected potentially preventable hospitalisations 5. Survival of people diagnosed with cancer 6. Potentially avoidable deaths 	<ol style="list-style-type: none"> 1. Adverse events treated in hospitals 2. Healthcare-associated <i>Staphylococcus aureus</i> blood infections 3. Sentinel events 4. Rate of seclusion 		<ol style="list-style-type: none"> 1. Unplanned hospital readmission rates 	<ol style="list-style-type: none"> 1. Bulk-billing for non-referred (GP) attendances 2. Waiting times for elective surgery: waiting times in days 3. Waiting times for elective surgery: proportion admitted within clinically recommended time 4. Waiting times for elective surgery: percentage waited more than 365 days 5. Waiting times for emergency department care: proportion seen on time 6. Waiting times for emergency department care: waiting times to commencement of clinical care 7. Waiting times for emergency department care: percentage of patients whose length of emergency department stay is 4 hours or less 8. Waiting times for emergency department care: time spent in the emergency department 	<ol style="list-style-type: none"> 1. Cost per weighted separation & total case weighted separations 2. Net growth in health workforce

Health status:

Health conditions

1. Incidence of heart attacks (acute coronary events)
2. Incidence of selected cancers
3. Incidence of sexually-transmissible infections & blood-borne viruses
4. Incidence of end-stage kidney disease
5. Hospitalisation for injury & poisoning
6. Proportion of babies born with low birthweight
7. Prevalence of type 2 diabetes
8. Notifications of selected childhood diseases

Human function

1. Severe or profound core activity limitation

Wellbeing

1. Proportion of adults with psychological distress
2. Self-assessed health status

Deaths

1. Infant & young child mortality rate
2. Life expectancy
3. Major causes of death
4. Mortality due to suicide

Health system context

- Demographics
- Community & social capital
- Governance & structure
- Financing
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- Information, research & evidence