

From: [REDACTED]
To: [Health and Environment Committee](#)
Cc: [REDACTED]
Subject: Inquiry into the provision of primary, allied and private health care, aged care and NDIS care services and its impact on the Queensland public health system - Health and Environment Committee [SEC=OFFICIAL]
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Health and Environment Committee

Inquiry into the Provision of Primary, Allied and Private Health Care, Aged Care and NDIS Care Services and its Impact on the Queensland Public Health System

The Australian Institute of Health and Welfare (AIHW) acknowledges the opportunity to make a submission to the Health and Environment Committee. While the AIHW will not be making a submission to the committee, we would like to draw the committee secretariat's attention to our organisation's remit and some potentially relevant work.

The AIHW is the national agency established to provide information and statistics on Australia's health and welfare. It is a corporate Commonwealth entity accountable to the Australian Parliament, and is governed by the AIHW Board. AIHW's work informs debate and decisions on policy and services. We have a strong commitment to providing independent and objective information and advice in all our work. The AIHW has a long history in providing data, information and reporting on health and welfare issues and as an accredited data integrating authority has an audited ability to uphold the highest standards in the appropriate handling of sensitive and personal data. This is of particular import in the handling of health and welfare data which can be considered to be of a particularly sensitive nature.

We collect data and manage national data collections in these areas, producing over 200 information products each year. Our work is frequently referenced by the media. We also provide information to other government bodies and cross-jurisdictional councils, to external researchers and also directly back to data providers. We report in formats that suit their purposes and allow them to place their service provision in a wider context.

Recent years have seen a rapid evolution in the ability to efficiently handle large amounts of data and produce meaningful insight through analysis of big data resources. Advances in technical opportunities to use data must continue to move in line with and be constrained by the ability to appropriately and ethically access available data resources. As a Commonwealth Integrating Authority we safely link data on a range of topics, offering new insights on how Australians interact with the health and welfare systems.

We have work programs and data holdings relating to a wide range of health and welfare issues. This includes work programs on primary health care, disability and aged care. Some example reports follow, focusing on data linkage studies where we integrate state and commonwealth administrative data. These illustrative pieces of work highlight the important role of data linkage in understanding the interface between service systems from a person centred point of view, including identifying service gaps.

Aged Care

The potential for linked administration data to inform understanding of the interaction between the aged care and health care services is well illustrated in a short series of reports published by the AIHW over the past couple of years: [Interfaces between the aged care and health systems in Australia](#). For these studies, hospitals data from Victoria and Queensland were linked with Commonwealth aged care program data from the National Aged Care Data Clearinghouse as well as data on claims made under the Medical Benefits Scheme, prescriptions dispensed under the Pharmaceutical Benefits Scheme and data on deaths from the National Death Index.

Dementia

Dementia is a significant and growing health and aged care issue in Australia. In addition to providing statistical summary reports, such as [Dementia in Australia: 2021 Summary](#), the AIHW links datasets to undertake detailed studies such as a [recent study](#) that aimed to identify whether early dementia could be predicted from primary and secondary care service utilisation, as recorded in Medicare claims data, in the absence of diagnosis information.

Disability

People with disability interact with every aspect of social policy and programs in Australia. They access both specialist and mainstream services across a wide variety of areas. The AIHW report on [Mortality patterns among people using disability support services: 1 July 2013 to June 2018](#) used linked data to examine deaths among people with disability who used disability support services funded under the National Disability Agreement (NDA).

Primary health care

The primary health care data landscape is disparate and disjointed, with little comprehensive or comparable data for national reporting. AIHW is working to develop an enduring National Primary Health Care Data Collection as an accessible, value-added evidence base on health status, interventions and outcomes, collated from general practice, nursing and allied health. The development of the Data Collection includes foundational work to facilitate cross-sectoral linkage, prioritising aged care and disability data. This presents opportunities to improve understanding of the use of primary health care services by, for example older Australians and people with a disability, the interfaces and transitions between the sectors and the role of primary health care in aged care and disability settings.

I trust these illustrative pieces of work are of interest to the committee secretariat as they highlight the important role of data linkage in understanding the interface between service systems from a person centred point of view.

If you would like further information from the AIHW, please contact Louise York, Senior Executive, Community Services Group, on [REDACTED] or [REDACTED].

Australian Institute of Health and Welfare