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#### Indicator Review

Attn: Indicator Review Project Officer  
National Health Performance Authority  
MDP 158, GPO Box 9848  
Sydney NSW 2001

Dear Sir/Madam

#### **Re: National Health Performance Authority's review of the Performance and Accountability Framework indicators**

The Australian Indigenous Doctors' Association (AIDA) has considered the consultation paper for the review of the Performance and Accountability indicators (the review) and we are grateful for the opportunity to offer input into this process. Please find below some broad comments from AIDA regarding how the review may impact on the health needs of Aboriginal and Torres Strait Islander people and communities. We are particularly interested in data collection issues for Aboriginal and Torres Strait Islander patients, access and equity to primary health care services, rates of hospitalisation including discharge against medical advice and how the health care system addresses the disproportionate burden of disease faced by Aboriginal and Torres Strait Islander people.

AIDA is the nation's professional association for Aboriginal and Torres Strait Islander doctors and medical students, and advocates for improvements in Indigenous health in Australia. We are working towards improving the health of Aboriginal and Torres Strait Islander people and reaching parity of Indigenous health professionals across the entire health sector. We also seek to create a health system that is culturally safe, high quality, reflective of need, and respects and integrates Aboriginal and Torres Strait Islander cultural values.

#### **AIDA's commitment to facilitating culturally safe specialist care**

It is well known that Aboriginal and Torres Strait Islander people are more likely to access, and will experience better outcomes from, services that are culturally safe. AIDA strongly advocates for efforts to strengthen cultural safety through:

- the leadership of Aboriginal and Torres Strait Islander people and national professional health organisations;
- genuine partnerships between governments, institutions and other key stakeholders with Aboriginal and Torres Strait Islander organisations and communities;
- the ongoing accumulation of knowledge of past and current Aboriginal and Torres Strait Islander values, principles and norms; and
- accountability mechanisms to ensure awareness of Aboriginal and Torres Strait Islander values, principles and norms are applied appropriately.

AIDA notes that input into this review process is an opportunity to make the case for greater awareness of cultural safety across the health system. We note that multi-lateral policy frameworks such as this have the

potential to influence change in the way health care is delivered and reported on. We are particularly interested in advocating for change across the health care system that leads to improved service delivery and health outcomes for Aboriginal and Torres Strait Islander people.

### **Improved data collection for patients who identify as Aboriginal and/or Torres Strait Islander**

AIDA notes that one of the key policy objectives of the Performance and Accountability Framework (the framework) is “...ensuring efficiency and sustainability through a rigorous data collection, monitoring and reporting system”<sup>1</sup>. It is important to note that the poor recording of patients who identify as Aboriginal and/or Torres Strait Islander across the primary health care and hospital systems in Australia has adverse impacts on relevant data collection, reporting and monitoring. This in turn has far reaching consequences for the delivery of culturally appropriate health care and for informing evidence based policy that aims to close the gap on health disparities between Indigenous and non-Indigenous Australians.

AIDA notes that this issue is clearly articulated in *The Health Performance Framework 2014* (HPF 2014) which states that under-identification of Aboriginal and Torres Strait Islander people is the main issue in most administrative data collections. The HPF 2014 notes that under-identification is a major problem in hospital and mortality data collections, particularly for some states and territories and is due to various factors, including:

- whether the question about Indigenous status is asked in the first instance;
- issues about consistency in the way the question is asked and recorded; and
- differing responses by the person involved depending on the situation.

AIDA is concerned that this issue is not adequately reflected in the framework indicators, and we advocate for measures that would encourage improved practice in this area. We note that page 10 of the framework states that “...where statistically possible, all indicators will be reported by Indigenous and non-Indigenous status”. We would be interested in learning more about how this will be put into practice, given that it is not a specific indicator. AIDA is also interested in opportunities the framework may present in improving the existing status quo around data collection for people who identify as Aboriginal and/or Torres Strait Islander.

### **Access and equity to primary health care and rates of hospitalisation**

We note that Indicator number 23 focuses on equity and access for special needs groups and states that “Indicators might consider health services which are targeted to specific population groups (for example Aboriginal and Torres Strait Islander people, women) or use of mainstream services by specific population groups”<sup>2</sup>. AIDA notes that this is the only specific reference to the Aboriginal and Torres Strait Islander population throughout the consultation document and that it sits within the ‘to be developed’ category of indicators. Given the disproportionate burden of disease that affects Aboriginal and Torres Strait Islander people, and evidence around how the health system does not adequately respond to this (see examples below), AIDA believes that the framework has significantly more scope to redress these imbalances than it currently does.

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<sup>1</sup> Page 6 of 43 in *Review of the Performance and Accountability Framework indicators Consultation paper*

<sup>2</sup> Page 38 of 43 in *Review of the Performance and Accountability Framework indicators Consultation paper*

The HPF 2014 notes that in 2012–13, 44% of Aboriginal and Torres Strait Islander people reported accessing health care in the previous two weeks (or 12 months for hospital admissions). This rate is lower than expected given the greater burden of illness experienced by Aboriginal and Torres Strait Islander people. AIDA advocates for improved and culturally safe health care, including diagnosis and patient follow up to ensure that Aboriginal and Torres Strait Islander patients with chronic illness and/or serious medical conditions access the appropriate treatment and care.

The HPF 2014 also notes that between July 2011 and June 2013, there were 17,494 hospitalisations of Aboriginal and Torres Strait Islander people where they left hospital against medical advice or were discharged at their own risk. This represented around 5% of all hospitalisations for Aboriginal and Torres Strait Islander peoples compared with 0.5% for non-Indigenous Australians.

AIDA has cited these statistics to illustrate the importance of national policy development that aims to reduce inequity in the health system and enhance culturally appropriate access to health care for Aboriginal and Torres Strait Islander people and communities. We recommend that prospective changes to the framework through this consultation process closely consider more detailed incorporation of the health needs of Aboriginal and Torres Strait Islander people.

AIDA is grateful for the opportunity to input into this consultation and will follow the review of the framework with interest. We would be happy to further engage with you regarding any of the above issues should this be useful. Please direct further queries to Ms Kate Thomann, Chief Executive Officer, AIDA on (02) 6273 5013 or [Kate.Thomann@aida.org.au](mailto:Kate.Thomann@aida.org.au).

Yours sincerely

A handwritten signature in black ink, appearing to be 'Kali Hayward', written in a cursive style.

Dr Kali Hayward  
President AIDA

7 December 2015