

# National Healthcare Agreement (2016)

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# National Healthcare Agreement (2016)

## Identifying and definitional attributes

<b>Metadata item type:</b>	Indicator Set
<b>Indicator set type:</b>	COAG IGA
<b>METEOR identifier:</b>	598643
<b>Registration status:</b>	<a href="#">Health</a> , Superseded 31/01/2017
<b>Description:</b>	<p>The National Healthcare Agreement affirms the agreement of all governments that Australia's health system should:</p> <ol style="list-style-type: none"><li>1. be shaped around the health needs of individual patients, their families and communities;</li><li>2. focus on the prevention of disease and injury and the maintenance of health, not simply the treatment of illness;</li><li>3. support an integrated approach to the promotion of healthy lifestyles, prevention of illness and injury, and diagnosis and treatment of illness across the continuum of care; and</li><li>4. provide all Australians with timely access to quality health services based on their needs, not ability to pay, regardless of where they live in the country.</li></ol> <p>The objective of the Agreement is: 'Through this Agreement, the Parties commit to improve health outcomes for all Australians and ensure the sustainability of the Australian health system' (clause 12).</p> <p>The outcomes of the Agreement are:</p> <ol style="list-style-type: none"><li>1. Australians are born and remain healthy;</li><li>2. Australians receive appropriate high quality and affordable primary and community health services;</li><li>3. Australians receive appropriate high quality and affordable hospital and hospital related care;</li><li>4. Older Australians receive appropriate high quality and affordable health and aged care services;</li><li>5. Australians have positive health and aged care experiences which take account of individual circumstances and care needs;</li><li>6. Australians have a health system that promotes social inclusion and reduces disadvantage, especially for Indigenous Australians; and</li><li>7. Australians have a sustainable health system.</li></ol>

## Relational attributes

<b>Related metadata references:</b>	Supersedes <a href="#">National Healthcare Agreement (2015)</a> <a href="#">Health</a> , Superseded 08/07/2016
	Has been superseded by <a href="#">National Healthcare Agreement (2017)</a> <a href="#">Health</a> , Superseded 30/01/2018

**Outcome areas linked to this Indicator set:**

[Aged Care](#)  
[Health](#), Standard 07/07/2010

[Hospital and Related Care](#)  
[Health](#), Standard 07/07/2010  
[National Health Performance Authority \(retired\)](#), Retired 01/07/2016

[Patient Experience](#)  
[Health](#), Standard 07/07/2010

[Prevention](#)  
[Health](#), Standard 07/07/2010

[Primary and Community Health](#)  
[Health](#), Standard 07/07/2010

[Sustainability](#)  
[Health](#), Standard 07/07/2010

**Indicators linked to this Indicator set:**

[National Healthcare Agreement: PB a–Better health: close the life expectancy gap for Indigenous Australians within a generation, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PB b–Better health: halve the mortality gap for Indigenous children under five by 2018, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PB c–Better health: reduce the age-adjusted prevalence rate for Type 2 diabetes to 2000 levels \(equivalent to a national prevalence rate \(for 25 years and over\) of 7.1 per cent\) by 2023, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PB d–Better health: by 2018, increase by five percentage points the proportion of Australian adults and children at a healthy body weight, over the 2009 baseline, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PB e–Better health: by 2018, reduce the national smoking rate to 10 per cent of the population and halve the Indigenous smoking rate over the 2009 baseline, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PB f–By 2014–15, improve the provision of primary care and reduce the proportion of potentially preventable hospital admissions by 7.6 per cent over the 2006-07 baseline to 8.5 per cent of total hospital admissions, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PB g–Better health services: the rate of Staphylococcus aureus \(including MRSA\) bacteraemia is no more than 2.0 per 10,000 occupied bed days for acute care public hospitals by 2011–12 in each state and territory, 2016](#)  
[Health](#), Superseded 04/08/2016

[National Healthcare Agreement: PI 01–Proportion of babies born of low birth weight, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 02–Incidence of selected cancers, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 03–Prevalence of overweight and obesity, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 04–Rates of current daily smokers, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 05–Levels of risky alcohol consumption, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 06–Life expectancy, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 07–Infant and young child mortality rate, 2016](#)  
[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 08–Major causes of death, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 09–Incidence of heart attacks \(acute coronary events\), 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 10–Prevalence of Type 2 diabetes, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 11–Proportion of adults with very high levels of psychological distress, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 12–Waiting times for GPs, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 13–Waiting times for public dentistry, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 14–People deferring access to selected healthcare due to financial barriers, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 15–Effective management of diabetes, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 16–Potentially avoidable deaths, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 17–Treatment rates for mental illness, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 18–Selected potentially preventable hospitalisations, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 19–Selected potentially avoidable GP-type presentations to emergency departments, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 20a–Waiting times for elective surgery: waiting times in days, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 20b–Waiting times for elective surgery: proportion seen on time, 2016](#)  
Health, Superseded 04/08/2016

[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: Proportion seen on time, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 21b–Waiting times for emergency hospital care: proportion of patients whose length of emergency department stay is less than or equal to four hours, 2016](#)  
Health, Superseded 04/08/2016

[National Healthcare Agreement: PI 22–Healthcare associated infections: Staphylococcus aureus bacteraemia, 2016](#)  
Health, Superseded 04/08/2016

[National Healthcare Agreement: PI 23–Unplanned hospital readmission rates, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 24–Survival of people diagnosed with notifiable cancers, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 25–Rate of community follow up within first seven days of discharge from a psychiatric admission, 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 26–Residential and community aged care places per 1,000 population aged 70+ years \(and Aboriginal and Torres Strait Islander people aged 50–69 years\), 2016](#)  
Health, Superseded 31/01/2017

[National Healthcare Agreement: PI 27–Number of hospital patient days used by those eligible and waiting for residential aged care, 2016](#)

[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 28–Proportion of residential aged care services that are three year re-accredited, 2016](#)

[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 29–Proportion of residential aged care days on hospital leave due to selected preventable causes, 2016](#)

[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 30–Elapsed time for aged care services, 2016](#)

[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 31–Proportion of aged care recipients who are full pensioners relative to the proportion of full pensioners in the general population, 2016](#)

[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 32–Patient satisfaction/experience, 2016](#)

[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 33–Full time equivalent employed health practitioners per 1,000 population \(by age group\), 2016](#)

[Health](#), Superseded 31/01/2017

## Source and reference attributes

**Reference documents:** Standing Council on Federal Financial Relations, 2012. Canberra. National Healthcare Agreement 2012. Viewed 12 March 2013,  
<http://www.federalfinancialrelations.gov.au/content/npa/healthcare/national-agreement.pdf>