

Health-care incident—geographic remoteness, remoteness classification (ASGC-RA) N

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Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Geographic remoteness
Synonymous names:	Geographic remoteness of health-care incident
METEOR identifier:	466881
Registration status:	Health , Superseded 21/11/2013
Definition:	The remoteness of the location at which a health-care incident took place, based on the physical road distance to the nearest urban centre and its population size, as represented by a code.
Data Element Concept:	Health-care incident—geographic remoteness
Value Domain:	Remoteness classification (ASGC-RA) N

Value domain attributes

Representational attributes

Classification scheme:	Australian Standard Geographical Classification 2010	
Representation class:	Code	
Data type:	String	
Format:	N	
Maximum character length:	1	
Permissible values:	Value	Meaning
	1	Major cities of Australia
	2	Inner regional Australia
	3	Outer regional Australia
	4	Remote Australia
	5	Very remote Australia
Supplementary values:	6	Migratory
	9	Not stated/inadequately described

Collection and usage attributes

Guide for use:**CODE 1** Major cities of Australia

'Major cities of Australia' includes Census Collection Districts (CDs) with an average Accessibility/Remoteness Index of Australia (ARIA+) index value of 0 to 0.2.

CODE 2 Inner regional Australia

'Inner regional Australia' includes CDs with an average ARIA+ index value greater than 0.2 and less than or equal to 2.4.

CODE 3 Outer regional Australia

'Outer regional Australia' includes CDs with an average ARIA+ index value greater than 2.4 and less than or equal to 5.92.

CODE 4 Remote Australia

'Remote Australia' includes CDs with an average ARIA+ index value greater than 5.92 and less than or equal to 10.53.

CODE 5 Very remote Australia

'Very remote Australia' includes CDs with an average ARIA+ index value greater than 10.53.

CODE 6 Migratory

'Migratory' is composed of off-shore, shipping and migratory CDs.

Collection methods:

In this value domain, physical distance is defined in terms of ARIA+ codes, rather than a simple linear distance between points.

The list of permissible values for this value domain, i.e. codes 1 to 6, is intended to be directly mappable to the values used by the ABS to describe remoteness areas, i.e. codes 0 to 5.

Comments:

In its initial form, as developed by GISCA and the then Department of Health and Aged Care in 1999, ARIA scores ranged from 0 to 12 and were based on proximity to 4 points of reference.

A new version, ARIA+, was introduced in 2003, with ARIA+ scores now based on proximity to 5 points of reference. Also, changes were made to allow for more accurate estimation of the cost of travelling from Tasmania to the mainland, and to increase accuracy for locations at the urban fringe.

Source and reference attributes

Submitting organisation:

Australian Institute of Health and Welfare

Origin:

Information relating to remoteness is available from the Geography portal on the ABS website:

Australian Bureau of Statistics 2011. ABS Geography. Viewed 14 November 2011,

<http://www.abs.gov.au/websitedbs/D3310114.nsf/home/Geography>

Information relating to the development of the ARIA and ARIA+ scores by the National Centre for Social Applications of Geographic Information Systems (GISCA) is available from the GISCA website:

National Centre for Social Applications of Geographic Information Systems 2011. ARIA - Accessibility/Remoteness Index of Australia. Viewed 14 November 2011, http://gisca.adelaide.edu.au/projects/aria_project.html

Data element attributes

Collection and usage attributes

Guide for use:

The remoteness classification of an entity can be derived using characteristics of its physical location, e.g. its postcode or other address details.

The remoteness classification (RA1 to RA5) can be found by entering the postcode or other address details of the hospital or other health service provider at which the health-care incident occurred into the Department of Health and Ageing's Remoteness area locator, available on the DoctorConnect website. The website can be accessed via the following link:

<http://www.doctorconnect.gov.au/internet/otd/Publishing.nsf/Content/locator>

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Reference documents: Department of Health and Ageing 2012. DoctorConnect. Viewed 23 February 2012.

<http://www.doctorconnect.gov.au/internet/otd/Publishing.nsf/Content/locator>

Relational attributes

Related metadata references:

Has been superseded by [Health-care incident—geographic remoteness, remoteness classification \(ASGS-RA\) code N](#)
[Health](#), Superseded 06/09/2018

Implementation in Data Set Specifications:

[Medical indemnity DSS 2012-14](#)

[Health](#), Superseded 21/11/2013

Implementation start date: 01/07/2012

Implementation end date: 30/06/2014

DSS specific information:

When the health-care incident that gave rise to a medical indemnity claim involved a series of events that occurred in more than one location, the code recorded should reflect the location at which the primary incident or allegation type occurred.

Where a missed diagnosis was the main, dominant or primary cause giving rise to a medical indemnity claim, the code recorded should be the remoteness category of the place at which the diagnosis should first have been made, but was not, for example the general practitioner's surgery.

Code 6 'Migratory' is not a valid code for the Medical Indemnity National Collection.

Code 9 'Not stated/inadequately described' should be used only when the information is not currently available, but is expected to become available as the medical indemnity claim progresses.