

National Healthcare Agreement: PI 09-Immunisation rates for vaccines in the national schedule (Australian Childhood Immunisation Register), 2012 QS

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Identifying and definitional attributes

Metadata item type:	Data Quality Statement
METEOR identifier:	500950
Registration status:	Health , Retired 14/01/2015

Data quality

Data quality statement summary:

- The data used to calculate this indicator are from an administrative data collection—the Australian Childhood Immunisation Register (ACIR)—for which there is an incentive payment for notification, and there are further incentives for parents to have their child's vaccination status up to date. The Register is linked to the Medicare enrolment register, and approximately 99 per cent of children are registered with Medicare by 12 months of age.
- Data has been reported using the ACIR definition of fully-immunised children; that is, children who have received all age appropriate immunisations.

Institutional environment:

The ACIR is administered and operated by Medicare Australia for the Australian Government Department of Health and Ageing (DoHA). Medicare Australia provides DoHA with quarterly coverage reports at the national and state level.

Immunisations are notified to Medicare Australia by a range of immunisation providers including General Practitioners, Councils, Aboriginal Medical Services, State and Territory Health departments.

For information on the institutional environment of the ACIR, including the legislative obligations of the ACIR, financing and governance arrangements, and mechanisms for scrutiny of ACIR operations, please see www.medicareaustralia.gov.au/public/services/acir/index.jsp.

The tables for this indicator were prepared by Medicare Australia and quality-assessed by DoHA and the AIHW. DoHA drafted the initial data quality statement (including providing input about the methodology used to extract the data and any data anomalies) and then further comments were added by the AIHW, in consultation with DoHA. The AIHW did not have the relevant datasets required to independently verify the data tables for this indicator. For further information see the AIHW website.

Timeliness:

ACIR data are reported quarterly. The data presented are for children born between 1 January 2006 and 31 March 2006. Data were processed on 30 June 2011 as a minimum 3-month lag period is allowed for late notification of immunisations to ACIR.

Accessibility:

Information contained within the indicator for disaggregations by Indigenous, Socio-Economic Indexes for Areas (SEIFA) and Remoteness are not currently publicly accessible. Current total percentage and total numbers however can be viewed on Medicare Australia's web site.

Medicare Australia publishes current immunisation coverage from the ACIR on its web site, www.medicareaustralia.gov.au. Authorised immunisation providers can access detailed reports via a secured area of the Medicare Australia web site.

Immunisation coverage data derived from the ACIR have been reported in *Communicable Disease Intelligence* since early 1998. Data for 3 key milestone ages (12 months, 24 months and 5 years (6 years prior to 2008)), nationally and by jurisdiction are published quarterly.

Interpretability:	<p>Further information on the ACIR can be found at: www.medicareaustralia.gov.au/public/services/acir/index.jsp.</p> <p>Information on the National Immunisation Program and vaccinations can be found at www.immunise.health.gov.au/.</p>
Relevance:	<p>The ACIR records details of vaccinations given to children under seven years of age who live in Australia, however reporting for the Australian Healthcare Agreement is only for those children aged five years, which for this report, are those children born between 1 January 2006 and 31 March 2006.</p> <p>A child is assessed as fully immunised at five years of age if they have received age appropriate immunisations against diphtheria, tetanus, pertussis, polio, measles, mumps and rubella.</p> <p>There are possible gaps in coverage due to unknown vaccination status of children less than 5 years migrating to Australia. The extent of this is not currently quantifiable.</p> <p>The analyses by State/Territory remoteness and socioeconomic status are based on postcode of residence of the child as recorded on ACIR. As children may receive vaccinations in locations other than where they live, this data does not necessarily reflect the location in which services were received.</p> <p>Indigenous status in the ACIR can be notified in three ways:</p> <ul style="list-style-type: none"> • When the child is registered with Medicare if the parent/guardian had marked the Medicare enrolment form. • The immunisation provider can provide this information through the Record Encounter screen on the ACIR secure site or on the Immunisation encounter form. • A parent/guardian can submit a Voluntary Indigenous Identifier to update their child's Medicare record which will then update their ACIR record.
Accuracy:	<p>Vaccination coverage rates calculated using ACIR data are believed to underestimate actual vaccination rates because of under-reporting by immunisation providers. However, the extent of any under-reporting has not been estimated.</p> <p>Programs, such as the General Practice Immunisation Incentive (GPII), and provider incentive payments have helped minimise under-reporting by providing a financial incentive to report clean and accurate data.</p> <p>The data contains minimal if any duplication of immunisations, as children are identified via their Medicare number. Approximately 99 per cent of children are registered with Medicare by 12 months of age.</p> <p>The ACIR covers virtually all children, particularly because participation in the ACIR is via an 'opt-out' arrangement.</p> <p>ACIR is considered to have high levels of Indigenous identification (estimated to be 95 per cent in 2005).</p> <p>Medicare Australia used tables and concordance files prepared by the AIHW to construct rates by remoteness and socioeconomic status.</p>
Coherence:	<p>The definitions of numerators and denominators have been consistent since the inception of the ACIR in 1996.</p>

Relational attributes

Related metadata references:	<p>Supersedes National Healthcare Agreement: PI 09-Immunisation rates for vaccines in the national schedule (Australian Childhood Immunisation Register), 2011 QS Health, Superseded 04/12/2012</p>
Indicators linked to this Data Quality statement:	<p>National Healthcare Agreement: PI 09-Immunisation rates for vaccines in the national schedule, 2012 Health, Retired 25/06/2013</p>