National Health Performance Authority, Healthy Communities: Accessing a preferred GP, 2013–14

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National Health Performance Authority, Healthy Communities: Accessing a preferred GP, 2013–14

Identifying and definitional attributes

Metadata item type: Indicator Indicator type: Indicator

Short name: Accessing a preferred GP, 2013–14

METEOR identifier: 611262

Registration status: National Health Performance Authority (retired), Retired 01/07/2016

Description: Percentage of people over 15 years of age who could not access a preferred GP in

the preceding 12 months.

Indicator set: National Health Performance Authority: Healthy Communities: 2011–

National Health Performance Authority (retired), Retired 01/07/2016

Collection and usage attributes

Population group age

from:

For this indicator an adult is defined as a person aged 15 years and over

Computation description:

Participants in the Australian Bureau of Statistics (ABS) Patient Experience Survey 2013–14 who reported they could not access their preferred GP on at least one occasion.

The numerator was calculated as the sum of calibrated sample weights for adults who responded they could not access their preferred GP in the preceding 12 months and who were enumerated within the particular Primary Health Network catchment.

Population is limited to persons aged 15 years and over.

The denominator was calculated as the sum of calibrated sample weights for persons aged 15 years and over and who saw a GP and reported having a preferred GP and who were enumerated within the Primary Health Network catchment

Person level survey weights were calibrated to independent estimates of the population of interest, referred to as 'benchmarks'. Weights calibrated against population benchmarks ensure that the survey estimates conform to independently estimated distributions of the population, rather than to the distribution within the sample itself. These benchmarks account for the distribution of people across state and territory, age group, and sex categories. Note: These benchmarks have not been calibrated for Primary Health Network geography.

Analysis by remoteness and Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-Economic Disadvantage (IRSD) is based on usual residence of the person.

The measure is presented as a percentage.

95% confidence intervals and relative standard errors are calculated for rates.

The National Health Performance Authority developed a suppression protocol to ensure robust reporting of these data at small areas.

• These suppression rules are based on limits for Relative Standard Error¹ and Confidence Interval width of 30%, with additional cross-validation for estimates close to these limits, that is plus or minus 3% of the limits. If an estimate was marginal² with respect to Relative Standard Error, the Confidence Interval width was used as the deciding factor. If an estimate was marginal² with respect to Confidence Interval width, then Relative Standard

Error is used as the deciding factor

- Data were supressed based on the following rules:
 - Relative Standard Error of 33% or greater, or
 - Confidence Interval (95%) width of 33% or greater, or
 - Relative Standard Error between 27% and 33%, with significantly wider Confidence Interval width than the average for that indicator, or
 - Confidence Interval width between 27% and 33%, with significantly wider Relative Standard Error than the average for that indicator.
- 1. For a dichotomous proportion, Relative Standard Error can be defined as the ratio of the standard error and the minimum of the estimate and its complement (100%–estimate).
- 2. In this context, marginal is defined as within 10% of the 30% limit, or +/- 3%
- 3. In this context, statistical significance is defined as at least two standard deviations above average.

The ABS Patient Experience survey does not include individuals living in discrete indigenous communities. As a result, estimates derived for Northern Territory may not be adequately representative. Results for Northern Territory have been excluded from the tables and maps on the www.MyHealthyCommunities.gov.au website. Data for Northern Territory (excluding discrete indigenous communities) are available in the excel downloads available via the www.MyHealthyCommunities.gov.au website.

Computation: (Numerator ÷ Denominator) x 100

Numerator: Number of persons aged 15 years and over who reported they could not access a

preferred GP in the preceding 12 months.

Numerator data elements:

-Data Element / Data Set-

Person—age, total years N[NN]

Data Source

ABS Patient Experience Survey (PEx)

Guide for use

Data source type: Survey

Data Element / Data Set

Person—self-reported having a preferred GP, yes/no code N

Data Source

ABS Patient Experience Survey (PEx)

Guide for use

Data source type: Survey

Denominator: Total number of persons aged 15 years who saw a GP for their own health in the

preceding 12 months and reported having a preferred GP.

Denominator data elements:

-Data Element / Data Set

Person—age, total years N[NN]

Data Source

ABS Patient Experience Survey (PEx)

Guide for use

Data source type: Survey

Disaggregation: By Primary Health Network catchments.

Disaggregation data

elements:

-Data Element / Data Set-

Administrative health region—Primary Health Network identifier, code

AAANNN

Representational attributes

Representation class: Percentage

Data type:RealUnit of measure:PersonFormat:N[NN].N

Indicator conceptual framework

Framework and dimensions:

PAF-Equity of access

Data source attributes

Data sources: —Data Source

ABS Patient Experience Survey (PEx)

Frequency
Annual

Data custodian

Australian Bureau of Statistics

Accountability attributes

Reporting requirements: National Health Performance Authority - Performance and Accountability

Framework

Organisation responsible

for providing data:

Australian Bureau of Statistics

Accountability: National Health Performance Authority

Release date: 01/10/2015

Source and reference attributes

Submitting organisation: National Health Performance Authority

Origin: Healthy Communities

Reference documents: National Health Performance Authority - Performance and Accountability

Framework