

# National Healthcare Agreement (2022)

## Identifying and definitional attributes

**Metadata item type:** Indicator Set

**Indicator set type:** COAG IGA

**METEOR identifier:** 740910

**Registration status:**

- [Health](#), Standard 24/09/2021

**Description:** The National Healthcare Agreement affirms the agreement of all governments that Australia's health system should:

1. be shaped around the health needs of individual patients, their families and communities;
2. focus on the prevention of disease and injury and the maintenance of health, not simply the treatment of illness;
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
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.

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).

The outcomes of the Agreement are:

1. Australians are born and remain healthy;
2. Australians receive appropriate high quality and affordable primary and community health services;
3. Australians receive appropriate high quality and affordable hospital and hospital related care;
4. Older Australians receive appropriate high quality and affordable health and aged care services;
5. Australians have positive health and aged care experiences which take account of individual circumstances and care needs;
6. Australians have a health system that promotes social inclusion and reduces disadvantage, especially for Indigenous Australians; and
7. Australians have a sustainable health system.

## Relational attributes

**Related metadata references:** Supersedes [National Healthcare Agreement \(2021\)](#)

- [Health](#), Standard 19/11/2020

**Outcome areas linked to this Indicator set:** [Aged CareHealth](#), Standard 07/07/2010

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

[Patient ExperienceHealth](#), Standard 07/07/2010

[PreventionHealth](#), Standard 07/07/2010

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

[SustainabilityHealth](#), Standard 07/07/2010

**Indicators linked to this Indicator set:** [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, 2022 Health, Standard 24/09/2021](#)

[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, 2022 Health, Standard 24/09/2021](#)

[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, 2022 Health, Standard 24/09/2021](#)

[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, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PB g–Better health services: the rate of Staphylococcus aureus \(including MRSA\) bacteraemia is no more than 1.0 per 10,000 occupied bed days for acute care public hospitals by 2020–21 in each state and territory, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 01–Proportion of babies born of low birth weight, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 02–Incidence of selected cancers, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 03–Prevalence of overweight and obesity, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 04–Rates of current daily smokers, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 05–Levels of risky alcohol consumption, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 06–Life expectancy, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 07–Infant and young child mortality rate, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 08–Major causes of death, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 09–Incidence of heart attacks \(acute coronary events\), 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 10–Prevalence of Type 2 diabetes, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 11–Proportion of adults with very high levels of psychological distress, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 12–Waiting times for GPs, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 13–Waiting times for public dentistry, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 14–People deferring access to selected healthcare due to financial barriers, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 15–Effective management of diabetes, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 16–Potentially avoidable deaths, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 17–Treatment rates for mental illness, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 18–Selected potentially preventable hospitalisations, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 19–Selected potentially avoidable GP-type presentations to emergency departments, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 20a–Waiting times for elective surgery: waiting times in days, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 20b–Waiting times for elective surgery: proportion seen on time, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: proportion seen on time, 2022 Health, Standard 24/09/2021](#)

[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, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 22–Healthcare associated infections: Staphylococcus aureus bacteraemia, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 23–Unplanned hospital readmission rates, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 24–Survival of people diagnosed with notifiable cancers, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 25–Rate of community follow up within first seven days of discharge from a psychiatric admission, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 26–Residential and community aged care places per 1,000 population aged 70+ years \(and Aboriginal and Torres Strait Islander people aged 50–69 years\), 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 27–Number of hospital patient days used by those eligible and waiting for residential aged care, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 28–Proportion of residential aged care services that are three year re-accredited, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 29–Proportion of residential aged care days on hospital leave due to selected preventable causes, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 30a–Elapsed time for aged care services: residential aged care, 2022 Health, Standard 24/09/2021](#)

[National Healthcare Agreement: PI 30b–Elapsed time for aged care services: Home Care Packages, 2022](#)  
[Health](#), Standard 24/09/2021

[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, 2022](#)  
[Health](#), Standard 24/09/2021

[National Healthcare Agreement: PI 32–Patient satisfaction/experience, 2022](#)  
[Health](#), Standard 24/09/2021

[National Healthcare Agreement: PI 33–Full time equivalent employed health practitioners per 1,000 population \(by age group\), 2022](#)  
[Health](#), Standard 24/09/2021

## Source and reference attributes

**Reference documents:** Standing Council on Federal Financial Relations, 2012. Canberra. National Healthcare Agreement 2012. Viewed 1 May 2019,  
[http://www.federalfinancialrelations.gov.au/content/npa/health/\\_archive/healthcare\\_national-agreement.pdf](http://www.federalfinancialrelations.gov.au/content/npa/health/_archive/healthcare_national-agreement.pdf)