




POPULATION HEALTH PROFILE

Queensland

Issue number 5,
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**Together we
can build a
better health
system**

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Introduction

This profile was developed by General Practice Queensland (GPQ). *Queensland Profile*, Issue number 1. Produced November 2011.

Profile

This profile provides an overview of primary health care in Queensland and contains sections to reflect the key areas of focus and activity in primary care, including:

- Population Demographics – indicators of potential demand for health services.
- Disease Prevention – indicators associated with the prevention of chronic disease and the maintenance of population health.
- Chronic Disease Management – indicators of the prevalence of chronic conditions as well as activity associated with the management of patients with chronic conditions.

Data and data sources

Data in this profile has been compiled from a number of publicly available data sources.

Data sources have been selected based on the relevance and availability of data at the time of production.

Interpretation of the inconsistencies between data in this profile and similar data from other sources needs to be made with acknowledgement of different methodologies used to produce the data.

Division and Medicare Local profiles

In addition to the Queensland Profile, GPQ has developed 17 Division of General Practice Profiles and 11 Medicare Local Profiles to provide more targeted health information and data, specific to the division and Medicare Local catchment areas.

Due to the limited availability of Medicare Local data at this time, GPQ recommends that these profiles be read in conjunction with each other. Division Profiles provide additional data that is not yet available for the Medicare Local catchment areas e.g. Medical Benefits Schedule (MBS) item number update.

The table below outlines identifies the Medicare Locals and the corresponding divisions of general practice.

Medicare Local	Corresponding Division of General Practices
Central and North West Medicare Local	<ul style="list-style-type: none">▪ North and West Queensland Primary Health Care
Central Queensland Medicare Local	<ul style="list-style-type: none">▪ Central Queensland Rural Division of General Practice▪ Capricornia Division of General Practice
Darling Downs – South West Medicare Local	<ul style="list-style-type: none">▪ GP Connections▪ RHealth
Far North Medicare Local	<ul style="list-style-type: none">▪ Far North Queensland Rural Division of General Practice
Gold Coast Medicare Local	<ul style="list-style-type: none">▪ General Practice Gold Coast
Greater Metro South Brisbane Medicare Local	<ul style="list-style-type: none">▪ South East Alliance of General Practice▪ SouthEast Primary HealthCare Network▪ Brisbane South Division Limited
Metro North Brisbane Medicare Local	<ul style="list-style-type: none">▪ GPpartners▪ Moreton Bay General Practice Network
Sunshine Coast Medicare Local	<ul style="list-style-type: none">▪ Sunshine Coast Division of General Practice
Townsville-Mackay Medicare Local	<ul style="list-style-type: none">▪ Townsville General Practice Network▪ Mackay Division of General Practice▪ North and West Queensland Primary Health Care
West Moreton-Oxley Medicare Local	<ul style="list-style-type: none">▪ Ipswich and West Moreton Division of General Practice▪ Brisbane South Division Limited
Wide Bay Medicare Local	<ul style="list-style-type: none">▪ GP Links Wide Bay

Disclaimer: While the information contained in this document has been presented with all due care, General Practice Queensland does not represent that the information is free from errors or omissions.





Australian Government National Health Reform

Medicare Locals

A key component of the Australian Government's National Health Reform is the establishment of a new nation-wide network of Medicare Locals.

Medicare Locals are primary health care organisations established to coordinate primary health care delivery and manage local health care needs and service gaps. Medicare Locals will drive improvements in primary health care and ensure that services are better tailored to meet the needs of local communities.

There will be 11 Medicare Locals established in Queensland by 1 July 2012. Medicare Locals will have a number of key roles in improving primary health care services for local communities. Medicare Locals will:

- Improve patient access to the services they need, by linking local GPs, nursing and other health professionals, hospitals and aged care, and maintaining up to date local service directories.
- Work closely with Local Hospital Networks to make sure that primary health care services and hospitals are well integrated for their patients.
- Plan and support local after hours face to face GP services.
- Identify local community need and coordinate services to address those gaps.
- Support local primary care providers, such as GPs, practice nurses and allied health providers, to adopt and meet quality standards.
- Be accountable to local communities to make sure the services are effective and of high quality.

Medicare Local Announcements

On the 6 June 2011, Prime Minister Julia Gillard announced the first tranche of Medicare Locals throughout Australia. Medicare Locals will build upon the work of division of general practice. Five Medicare Locals were announced in the first tranche for Queensland, these include:

- Metro North Brisbane Medicare Local
- Greater Metro South Brisbane Medicare Local
- West Moreton-Oxley Medicare Local
- Townsville-Mackay Medicare Local
- Gold Coast Medicare Local

On 4 November 2011, Minister Nicola Roxon announced the second and third tranche of Medicare Locals for Queensland. Two Medicare Locals were announced in the second tranche for Queensland which will commence on 1 January 2012, these include:

- Darling Downs – South West Medicare Local
- Central and North West Medicare Local

Four Medicare Locals were announced in the third tranche for Queensland which will commence on 1 July 2012, these include:

- Central Queensland Medicare Local
- Wide Bay Medicare Local
- Sunshine Coast Medicare Local
- Far North Medicare Local

For further information on the Health Reform and Medicare Locals please visit the Australian Government Department of Health and Ageing, yourHealth website <http://www.yourhealth.gov.au> .





Local Health and Hospital Networks

An additional component of the Australian Government's National Health Reform is the establishment of new Local Health and Hospital Networks. The Networks are to be established as separate legal entities under State Government legislation in order to devolve operational management for public hospitals to the local level. Networks will be the direct managers of a single or small group of public hospitals, and will be held directly accountable for hospital performance under a Performance and Accountability Framework.

There will be 17 Local Health and Hospital Networks established in Queensland, including one state-wide Network with a focus on children's health. Each network will have an individual Governing Council who will provide. The Networks will be formed from the existing Queensland Health, Health Service Districts and will commence operation from 1 July 2012.

For further information on the development of Local Health and Hospital Networks, please go to the Queensland Health Reform Website at <http://www.health.qld.gov.au/health-reform/default.asp>





Queensland at a Glance ^{1, 2, 4, 5, 6, 7, 8}

The following section provides an overview of Queensland and the Queensland population.

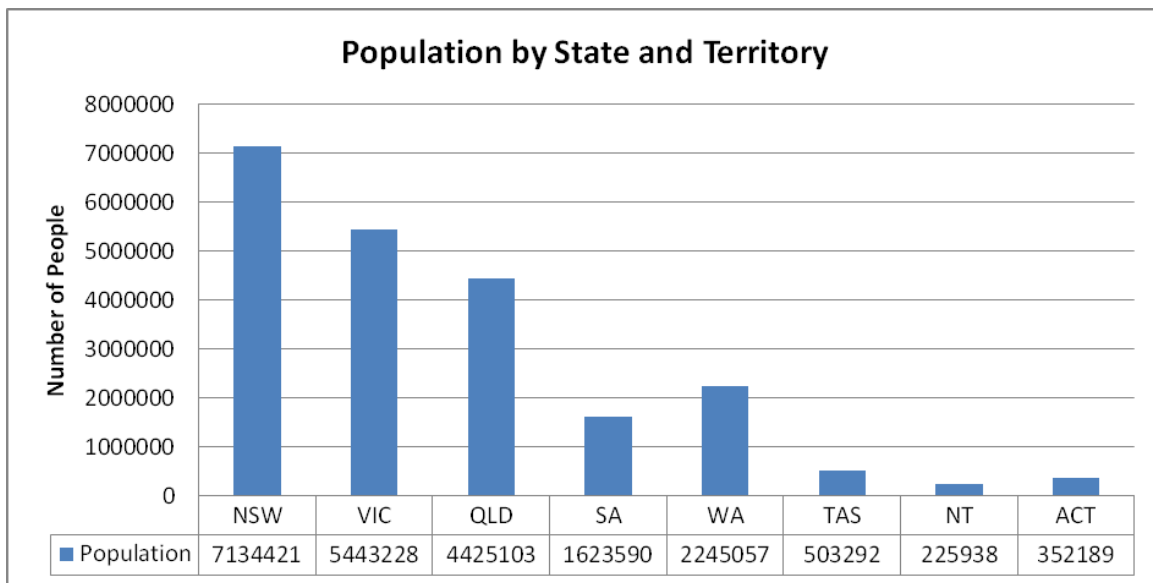
Queensland regional data

- Queensland is the second largest state (in land mass) in Australia, covering 1734157 km².
- Australian Standard Geographical Classification – Remoteness Areas (ASGC-RA): RA 1 - RA 5.

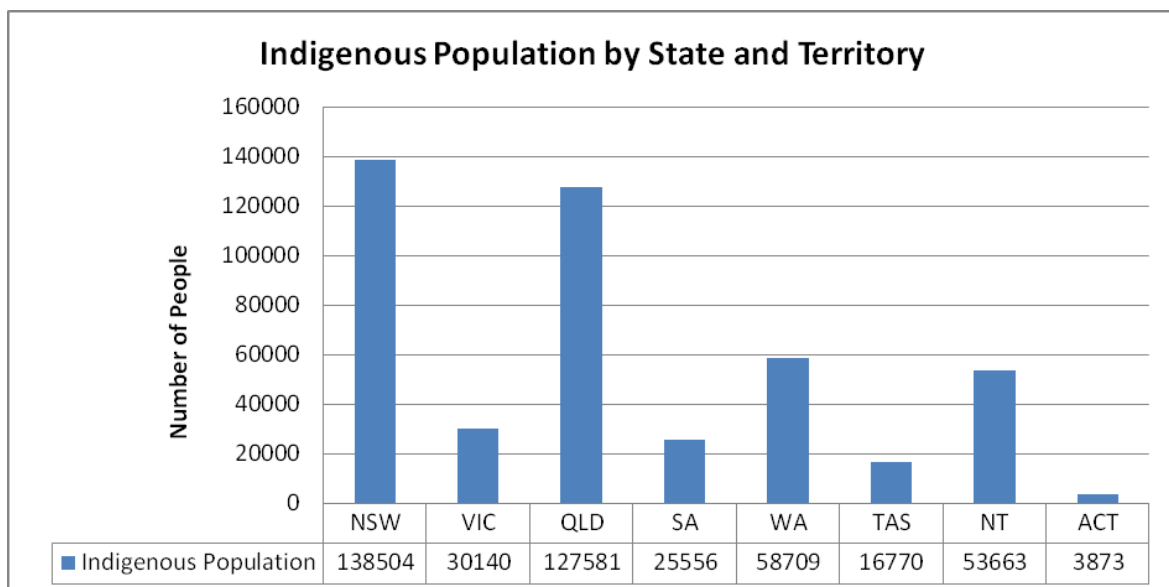
Population

- Queensland has the third largest population (4425103 people) in Australia, accounting for approximately 20.2% of Australia's total population.
- Queensland has the second largest population (127581 people) of Indigenous persons (New South Wales has the largest), accounting for approximately 2.9% of Australia's population.

The graph below shows the total population by State/ Territory in Australia.



The graph below shows the total indigenous population by State/ Territory in Australia.





Life expectancy

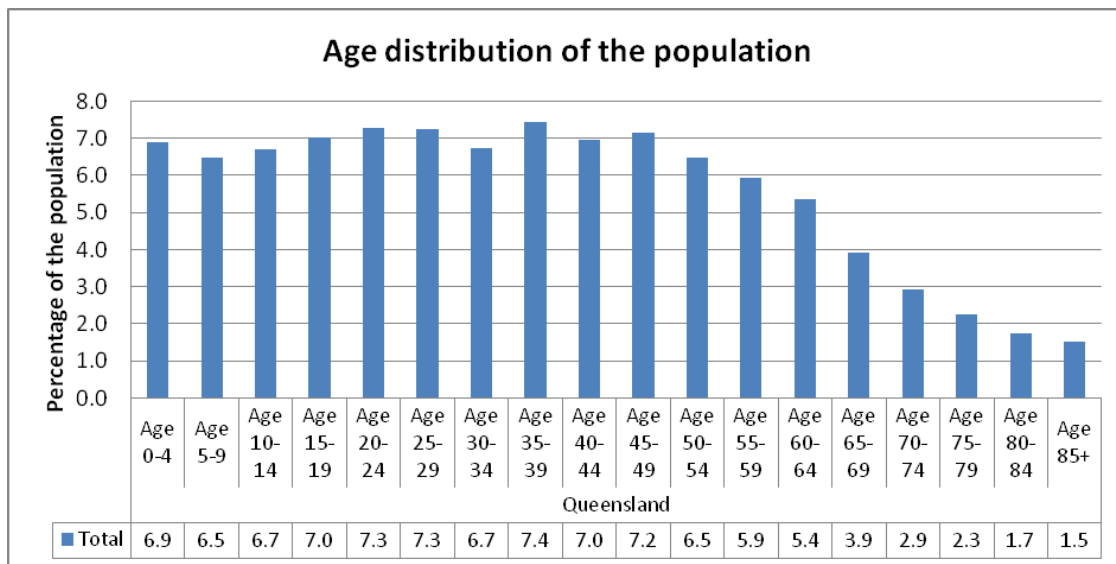
- In 2006-2008, life expectancy at birth for non-indigenous Australians was 78.9 years for males and 83.7 years for females.
- In 2005-2007, life expectancy at birth for indigenous Australians was 68.3 years for males and 73.6 years for females.
- In 2006-2008, approximately 39.5% of Queensland men and 56.5% of Queensland women lived to 85 years of age.
- In 2009, the median age in Queensland was 36.2 years, which is less than any other State or Territory in Australia. However, the median age of Queensland has risen 1.8 years since 1999.
- In 2006, the estimated median age of the Indigenous population in Queensland is 20.4 years.

Gender Distribution

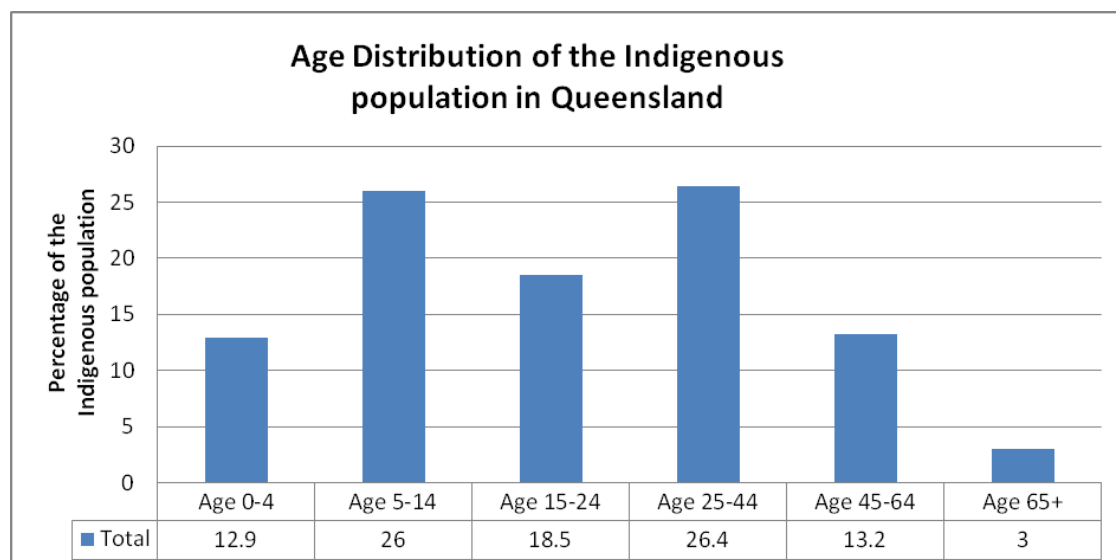
- In 2009, the Queensland population was 50% (2212224) male and 50% (2212879) female.

Age Distribution

- The graph below shows the age distribution of the Queensland population (2009).



- The graph below shows the age distribution of the Indigenous population in the Queensland (2006).





Birthplace

- In 2006, 10.0% of the Queensland population were born overseas in predominately English speaking countries (2006).
- In 2006, 7.9% of the Queensland population were born overseas in predominately non-English speaking countries (2006). Of these residents:
 - 6.0% have been residents in Australia for 5 years or more.
 - 1.5% of the population have been residents in Australia for less than 5 years.
 - 1.0% have poor proficiency in English and born in non-English speaking countries.

Families

In Queensland:

- 9.5% (98071) of families were single parent families with children aged less than 15 years.
- 14.0% (58643) of families had children aged less than 15 years.
- 14.3% (107616) of children aged less than 15 years are from jobless families (2006).

Income Support

In 2008,

- 70.1% of the eligible population (*males aged 65 years+ and females 63 years+*) received the aged pension.
- 5.0% of the eligible population (*males aged 16-64 years; females aged 16 -62 years*) received the disability support pension.
- 5.7% of females (*aged 15-54 years*) were female sole parent pensioners.
- 3.7% of the population (*aged 16-64*) received an unemployment benefit, 1.5% of the population had received the benefit for longer than 180 days.
- 5.8% of eligible young people (*aged 15-24*) received an unemployment benefit.
- 9.7% of families were welfare dependent and low income families with children.
- 19.4% of children (*aged 0-16 years*) were in welfare dependant low income families.

In 2009,

- 7.7% of the eligible population (*aged 0-64 years*) were health care card holders.
- 18.3% of the eligible population (*aged 15 years+*) were pensioner concession card holders.
- 21.4% of the population were total concession card holders.

Labour

In 2008,

- 4.4% of the population were unemployed.
- 66.6% of the population participated in the labour force.



Population Health Profile⁸

The following section provides an overview of Queensland and the Queensland population.

Immunisation

In September 2008,

- 90.8% (14330 of 15786 children) of the children aged between 12 to 15 months in Queensland were immunised.

Screening

- During 2007-2008, people (aged 50-69 years) participated in breast screening. Of the people screening, were diagnosed with breast cancer.

Self Reported Health status

During 2007-2008,

- 512811 of people (aged 15 and over) reported their health status as fair to poor.
- 2240488 of people (aged 15 and over) reported their health status as very good or excellent.

Chronic Diseases

In Queensland (2007-2008):

- 3.5% (140844) of the population had type 2 diabetes.
- 5.5% (223956) of the population had high cholesterol.
- 10.4% (217206) of the male population had mental and behavioural problems.
- 12.0% (250815) of the female population had mental and behavioural problems.
- 16.0% (650105) of the population had a circulatory system disease.
- 26.0% (1090728) of the population had a respiratory system disease.
- 30.4% (1253905) of the population had a musculoskeletal system disease.

Psychological Health

During 2007-2008, 377066 people aged 18 years and over had high or very high psychological distress level (K-10).

Risk Factors

In Queensland during 2007-2008,

- 8.4% (369620) of people were current smokers (aged 18 years and over).
- 3.9% (173647) of people (aged 18 years and over) consumed alcohol.
- 27.9% (1233514) of people (aged 18 years and over) were physical inactive.
- 12.8% (568042) of males (18 years and over) were overweight.
- 7.4% (328524) males (18 years and over) were obese.
- 8.4% (370326) females (18 years and over) were overweight.
- 6.2% (273912) females (18 years and over) were obese.
- 10.9% (480347) males (18 years and over) were within the normal weight range.
- 14.1% (626083) females (18 years and over) were within the normal weight range.





- 10.7% (471494) people (aged 5 to17) had a usual daily intake of two or more serves of fruit.
- 35.1% (1552859) people (18 years and over) had a usual daily intake of two or more serves of fruit.
- 41.8% (1850407) people (aged 18 years and over) had at least one of four of the following health risk factors - smoking, harmful use of alcohol, physical inactivity, obesity.

Premature Mortality

During 2003-2007,

- there were a total of 25403 premature deaths (aged 15-64 years). Of these, 16399 were males and 9004 were females.
- there were a total of 47262 premature deaths (aged 0-74 years). Of these, 30114 were males and 17148 were females.

Premature Mortality by Cause

During 2003-2007, the number and cause of premature deaths at ages 15-64 were,

- 10123 deaths from cancers
- 4680 deaths from circulatory diseases
- 1009 deaths from respiratory diseases
- 4925 deaths from external causes
- 4666 deaths from other causes.

During 2003-2007, the number and cause of premature deaths at ages 0-74 years were,

- 19130 deaths from cancers.
- 4680 deaths from circulatory diseases.
- 2816 deaths from respiratory diseases.
- 5725 deaths external causes.
- 9344 deaths other causes.
- 5567 deaths from cause unknown (not reported in the data).

Avoidable Mortality

During 2003-2007, there were 31421 avoidable deaths at ages 0-74 years. Of these deaths,

- 11667 were from cancer.
- 8517 were from cardiovascular disease.
- 1805 were from respiratory disease.
- 1351 were from road traffic injuries.
- 2289 were from suicide and self inflicted injuries.
- 5792 were from other causes.





Treatable Mortality

- During 2003-2007, 12714 deaths of people aged 0-74 years were classified as treatable deaths.

Preventable Mortality

- During 2003-2007, 18707 deaths of people aged 0-74 years were classified as preventable deaths.

MBS Services

- There were a total of 26360150 GP services (MBS and DVA) provided. Of these, 11327124 were to males and 15033027 to females.
- There were 6542, 45 year old health checks undertaken by GPs on males aged 45-49 years.
- There were a total of 13413 45 year old health checks provided by GPs. Of these, 6542 were on males and 6530 on females aged 45 to 49 years)

Aged Care

In 2010, there were 31755 (85 per 1,000 population) total residential aged care places in Queensland. Of these places:

- 14817 (40 per 1,000 population) were residential aged care - high care places.
- 16938 (45 per 1,000 population) were residential aged care - low level places.
- 8017 (22 per 1,000) were community care places.
- 372694 people were aged over 70 years and over.





Health Service Areas

Health Service Districts

There are 17 Health Service Districts in Queensland. These include:

- Cairns and Hinterland
- Cape York
- Central Queensland
- Central West
- Children's Health Services
- Darling Downs
- Gold Coast
- Mackay
- Metro North
- Metro South
- Mt Isa
- Sunshine Coast
- South West
- Torres Strait - Northern Peninsula
- Townsville
- West Moreton
- Wide Bay

For a map on the Health Service Districts in Queensland please visit <http://www.health.qld.gov.au/maps/default.asp>

Public Health Units

There are 14 Public Health Units in Queensland. These include:

- Brisbane North (Windsor)
- Brisbane South (Coopers Plains)
- Cairns
- Central Queensland (Rockhampton)
- Central West (Longreach)
- Darling Downs (Toowoomba)
- Gold Coast (Robina)
- Logan
- Moreton Bay (Redcliffe)
- South West (Charleville)
- Sunshine Coast (Maroochydore)
- Townsville
- West Moreton (Ipswich)
- Wide Bay-Hervey Bay-Bundaberg

Medicare Locals

As of July 2012, there will be 11 operational Medicare Locals in Queensland. These include:

- Central and North West Medicare Local
- Central Queensland Medicare Local
- Darling Downs – South West Medicare Local
- Far North Medicare Local
- Gold Coast Medicare Local
- Greater Metro South Brisbane Medicare Local
- Metro North Brisbane Medicare Local
- Sunshine Coast Medicare Local
- Townsville-Mackay Medicare Local
- West Moreton-Oxley Medicare Local
- Wide Bay Medicare Local

For a map of the Medicare Local boundaries please visit http://www.yourhealth.gov.au/internet/yourhealth/publishing.nsf/Content/MediLocBound_Review





Local Hospital Networks

As of July 2012, there will be 17 Local Hospital Networks in Queensland. These include:

- Cairns and Hinterland
- Cape York
- Central Queensland
- Central West
- Children's Health Services (statewide)
- Darling Downs
- Gold Coast
- Mackay
- Metro North
- Metro South
- Mt Isa
- Sunshine Coast
- South West
- Torres Strait - Northern Peninsula
- Townsville
- West Moreton
- Wide Bay

For a map of the Local Hospital Network boundaries please visit

<http://www.yourhealth.gov.au/internet/yourhealth/publishing.nsf/Content/lochospnetwork>





Outreach Services

General Practice Queensland coordinates the delivery of Outreach Services which aim to increase access to medical specialist, GP and allied health professional services for high need populations including those in rural and remote communities.

These statistics are for services delivered between 1 January 2011 and 30 June 2011.

▪ **Medical Specialist Outreach Assistance Program (MSOAP):**

The MSOAP was established in 2000 and provides funding to support medical specialist service delivery in rural and remote communities.

- 37 private medical specialists
- A total of 3914 patients have been seen over these six months and 881 (22.5%) of patients identified as being Aboriginal or Torres Strait Islander.
- 93 GPQ MSOAP services have been delivered across Queensland in this 6 month period.
- 281 occasions of service occurred between 1 January 2011 and 30 June 2011.

▪ **Medical Specialist Outreach Assistance Program – Indigenous Chronic Disease (MSOAP-ICD):**

The MSOAP-ICD is one of the programs under the Commonwealth government's "Closing the Gap" Indigenous Chronic Disease (ICD) package. Service delivery for this program commenced in 2010.

MSOAP-ICD provides support for medical specialists, GPs and Allied Health Professionals for the management and treatment of chronic disease for Aboriginal and Torres Strait Islander people in rural and remote communities.

- 15 private medical specialists, 2 General Practitioners, 16 Allied Health Professionals
- A total of 3619 patients received these services across Queensland, 3145 (86%) of patients identified as being Aboriginal or Torres Strait Islander
- 489 occasions of service were delivered between 1 January 2011 and 30 June 2011
- 106 MSOAP-ICD services were implemented across Queensland during this 6 month period.

▪ **Urban Specialist Outreach Assistance Program (USOAP):**

The USOAP seeks to improve access to medical specialist care for Aboriginal and Torres Strait Islander people in urban areas with a chronic disease. Service delivery commenced in 2011.

USOAP aims to supplement current service delivery gaps in urban locations, specifically Australian Standard Geographical Classification (ASGC) Remoteness Areas (RA) 1 and 2. The following statistics are applicable for the 1 January 2011 to 30 June 2011 period.

- 11 private medical specialists have been recruited over 9 different specialities
- A total of 101 patients received these services, 84 (83%) patients identified as being Aboriginal or Torres Strait Islander
- 25 occasions of service were delivered between 1 January 2011 and 30 June 2011
- 33 services are to be implemented in the 2011-2012 financial year.

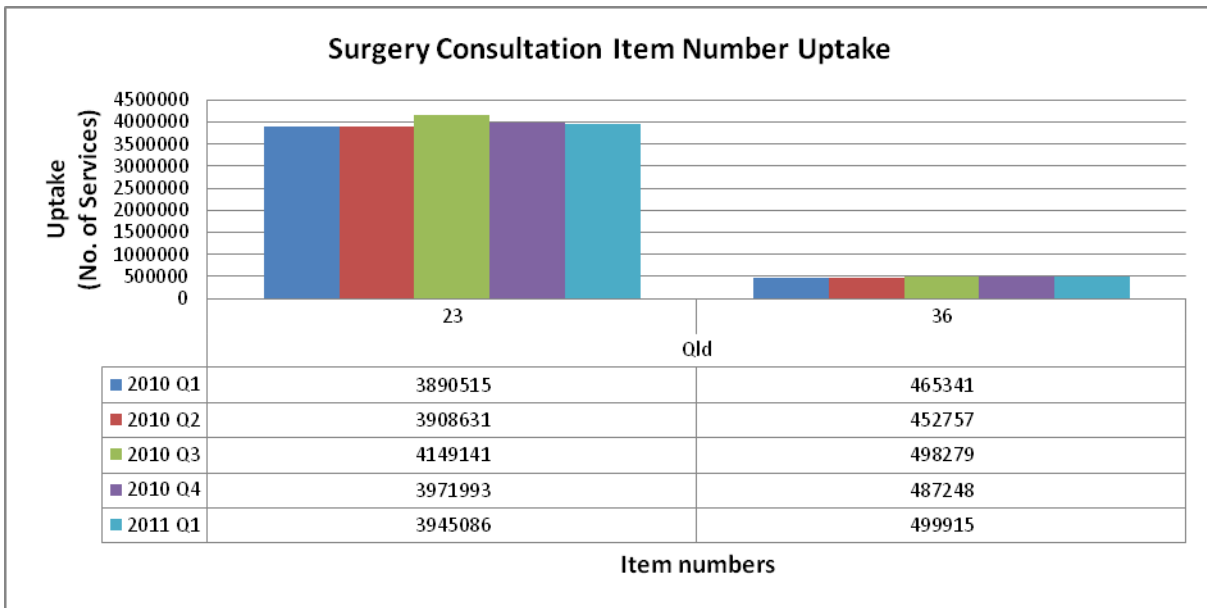
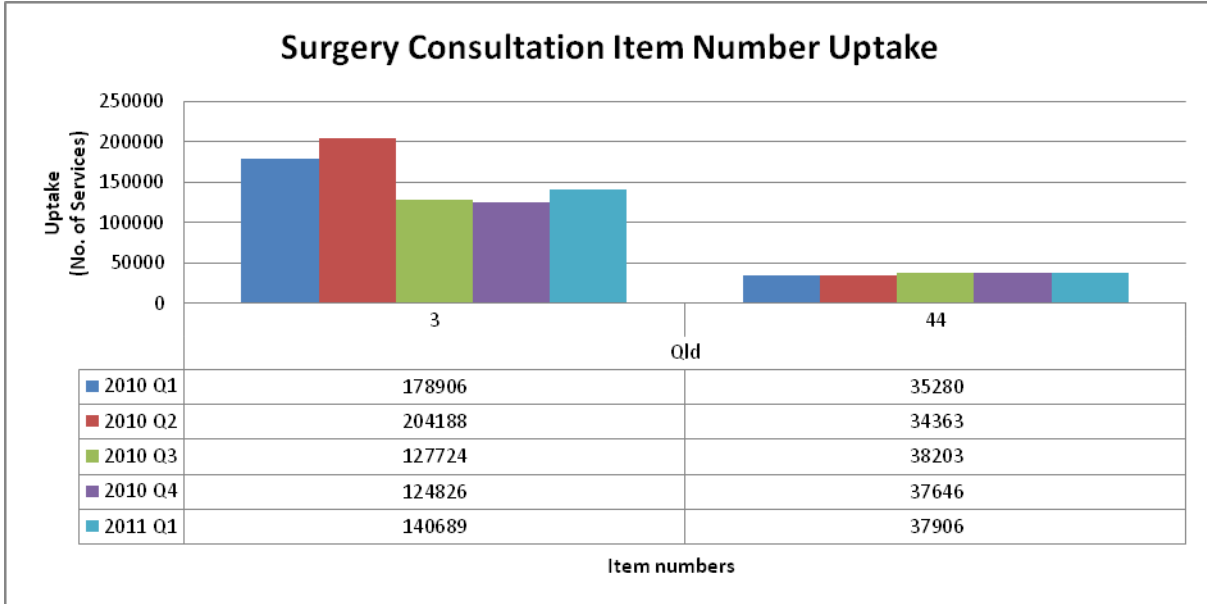
These programs are funded by the Australian Government Department of Health and Ageing.





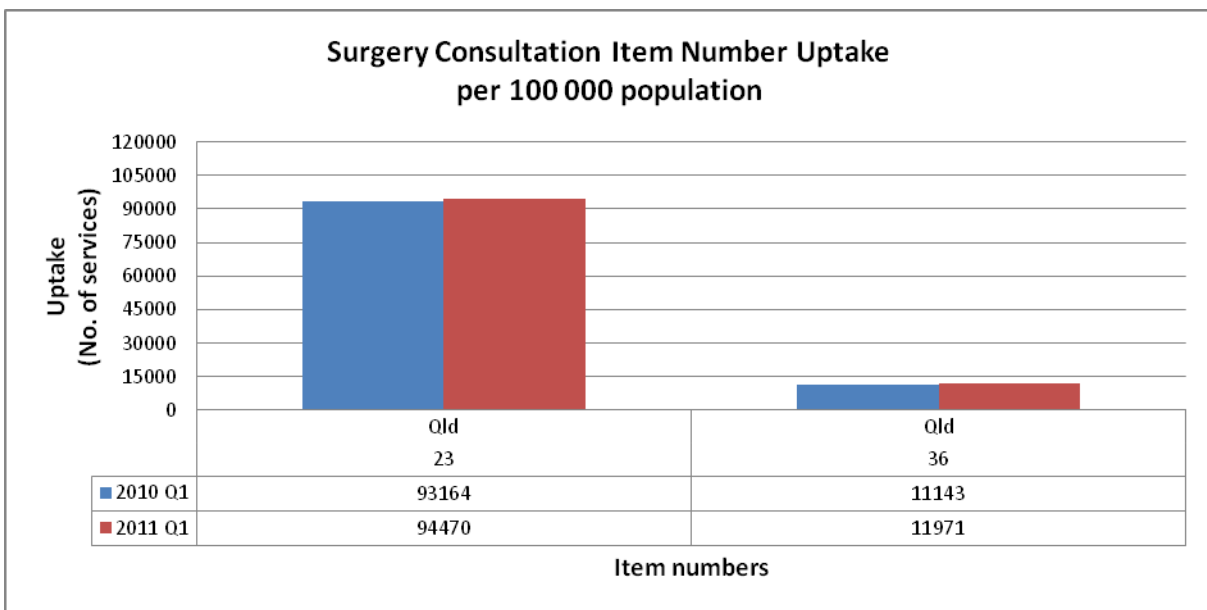
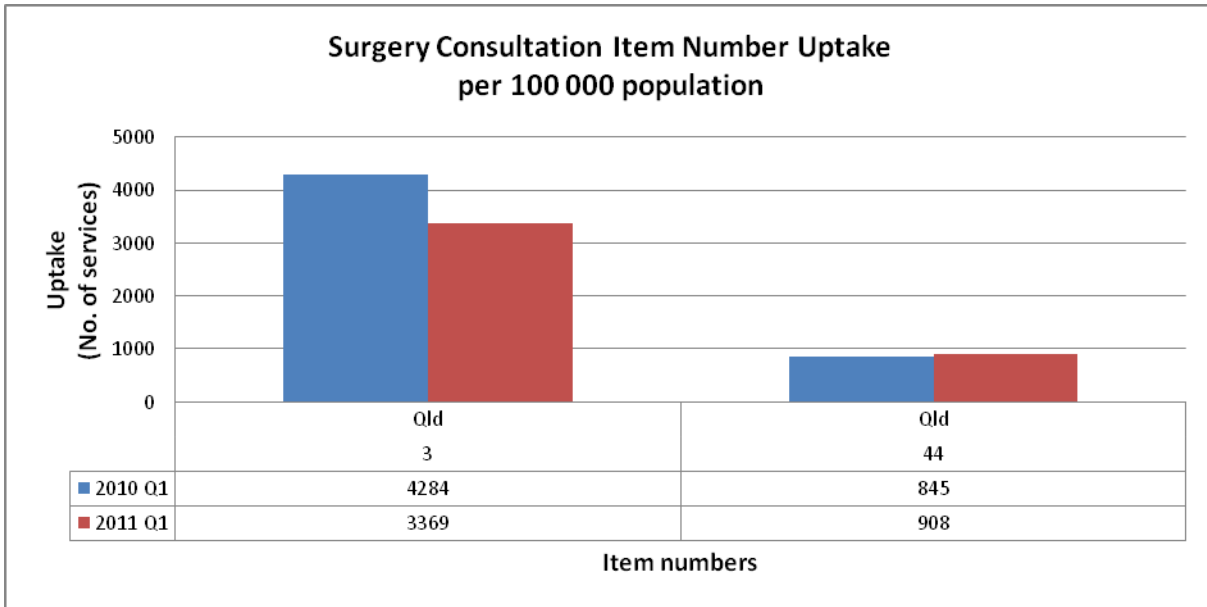
General practitioner surgery consultations

The graph below shows the uptake of GP consultation item number claims during the reporting period (2010 Quarter 1 - 2011 Quarter 1).





The graph below compares the uptake of GP consultation item number claims per 100,000 population for the division and Queensland during Quarter 1 in 2010 and 2011.



Commentary

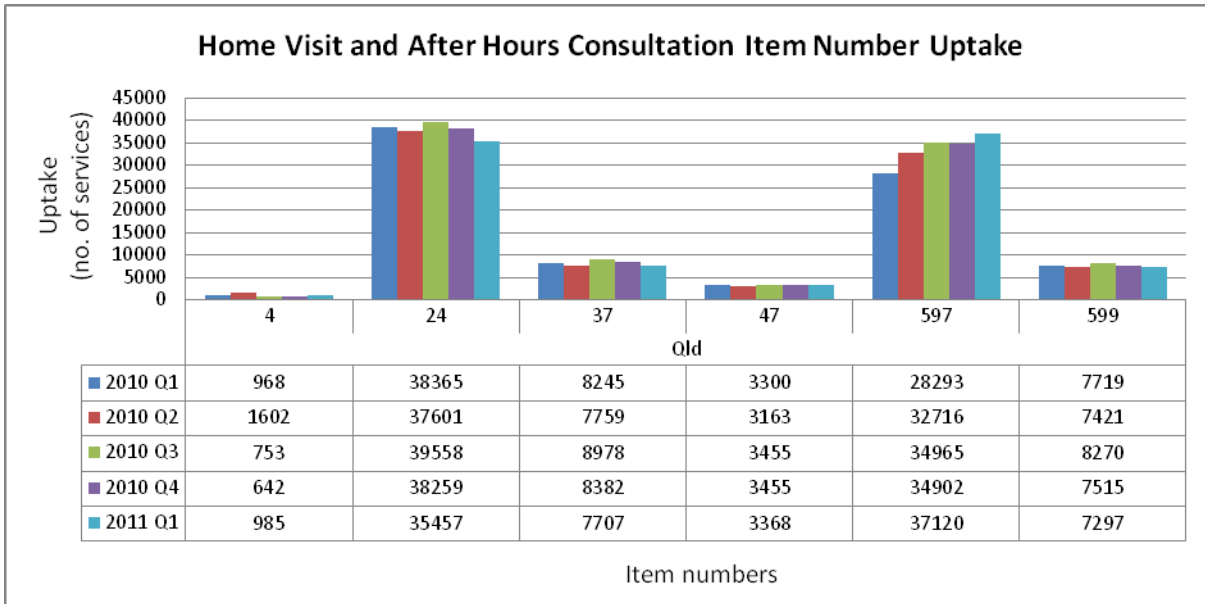
- Uptake for item number 3 noticeably decreased in quarter 3, 2011.
- Uptake for item numbers 44, 23 and 36 have increase in quarter 1, 2011 compared to the same quarter in 2010.



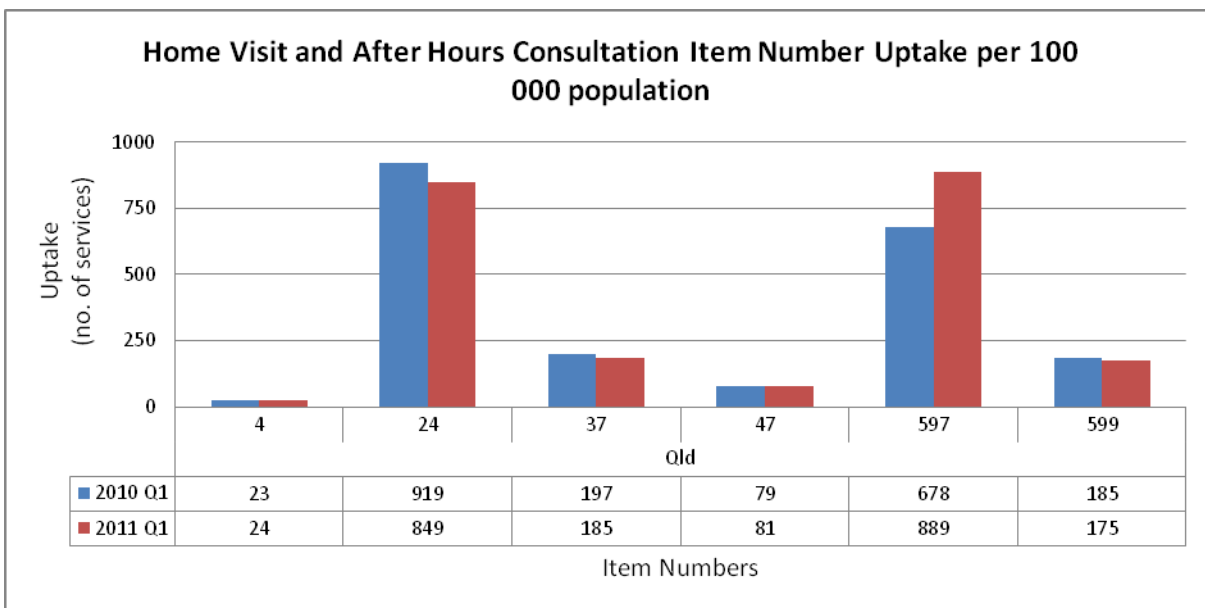


Home visits and after hours consultations

The quarterly uptake of GP home visit and after hours consultation item numbers claims during Quarter 1 in 2010 and 2011 are shown below.



The graph below compares the uptake of home visit and after hours consultation item number claims per 100,000 population for the division and Queensland during Quarter 1 in 2010 and 2011.



Commentary

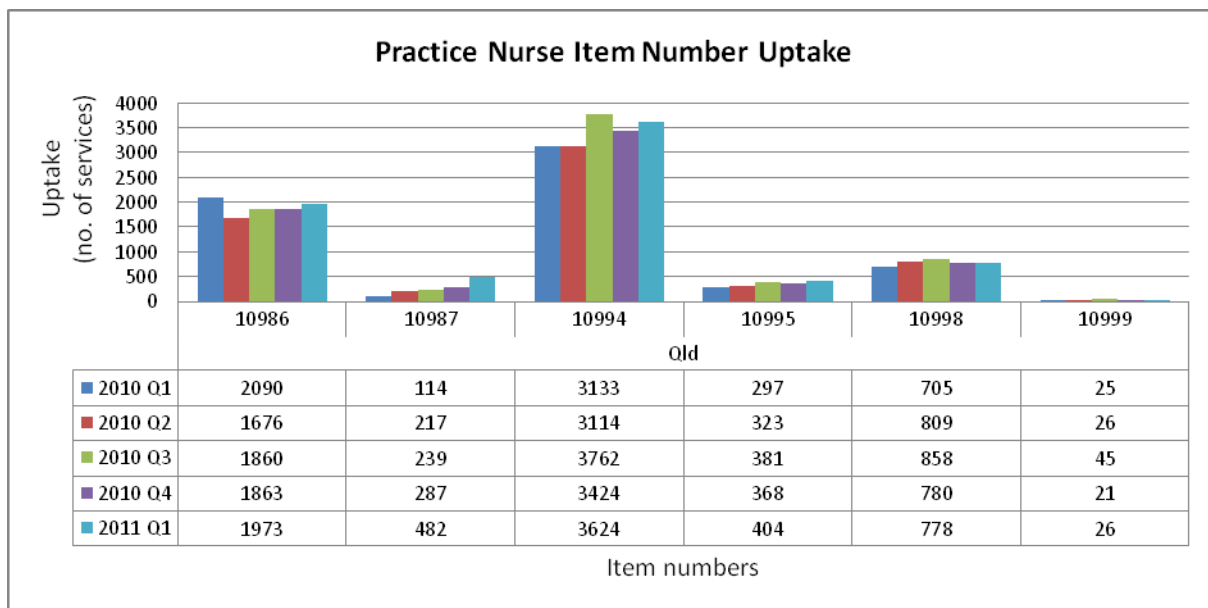
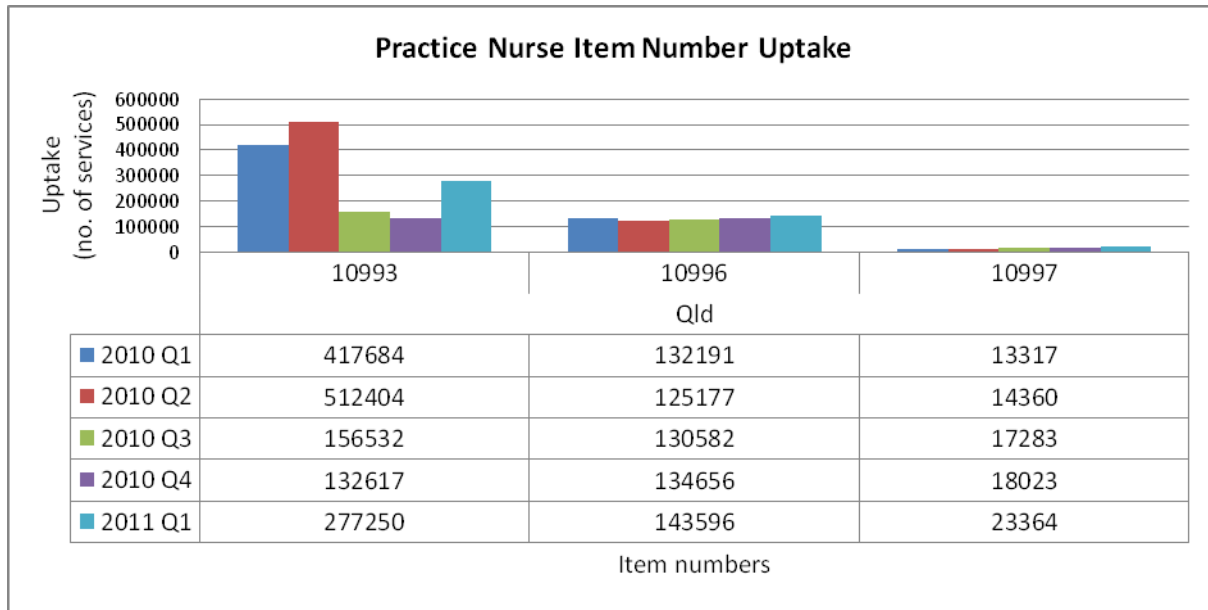
- Uptake for item number 24, 37, 47 and 599 has decreased in quarter 1, 2011.
- Uptake for item numbers 24, 37 and 599 has decrease in quarter 1, 2011 compared to the same quarter the previous year.





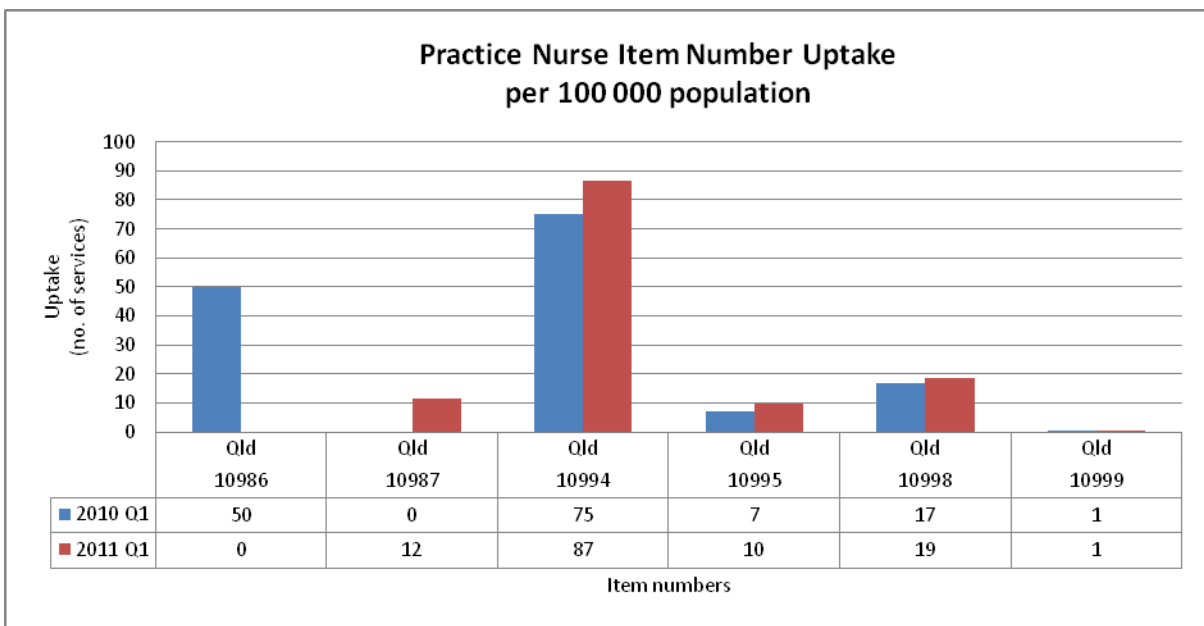
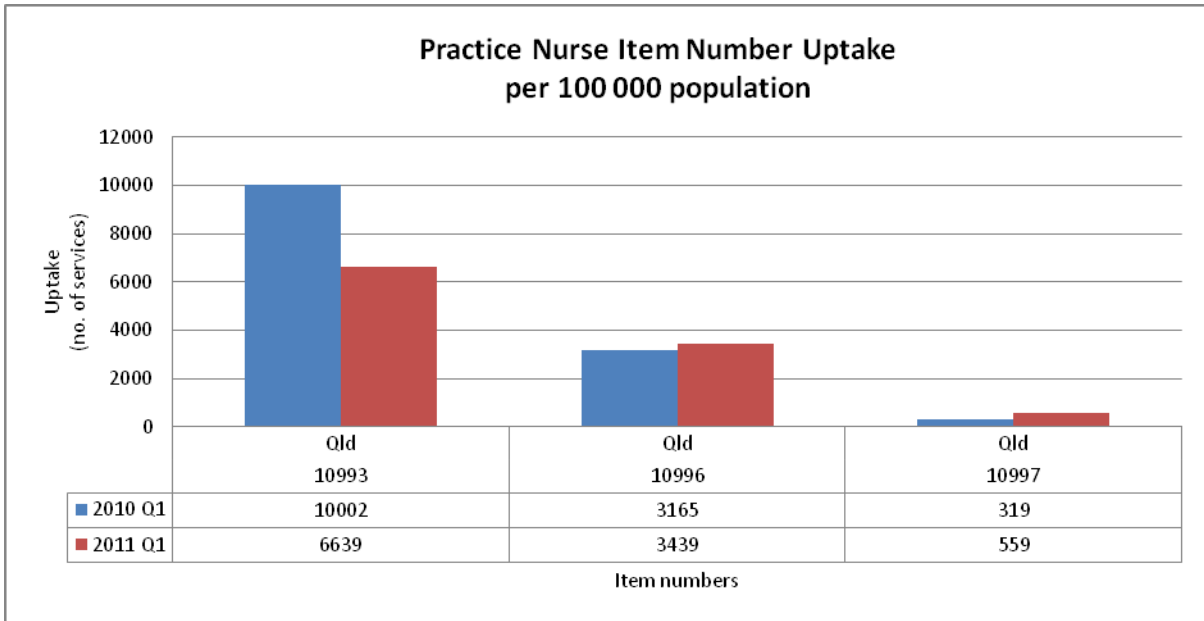
Services administered by practice nurses

The graph below shows the uptake of practice nurse item number claims per 100,000 population during Quarter 1 in 2010 and 2011.





The graph below compares the uptake of practice nurse item number claims per 100,000 population for the division and Queensland during Quarter 1 in 2010 and 2011.



Commentary

- Uptake for item number 10993 noticeably decreased in quarter 3, 2010. However uptake has increase significantly in quarter 1, 2011.
- Uptake for item number 10998 has decreased in quarter 1, 2011. All other item number have increased in this quarter.
- Uptake for item number 10993 and 10986 has decreased in quarter 1, 2011 when compared to the same quarter in 2010.





Public hospital activity

The Queensland Health Hospital Performance website provides up to date information on the activity and performance of Queensland Health public hospitals.

This data was obtained from the Queensland Health Hospital Performance website. There are currently 33 hospitals across Queensland who provide this data.

▪ **Hospital workforce**

As of October 2011, there were 7770 doctors and 32826 nurses and 10833 health practitioner/professional/technical staff working across Queensland hospitals.

Since June 2005,

- The number of doctors has increase by approximately 71%.
- The number of nurses has increase by approximately 50%.
- The number of health practitioner/professional/technical staff has increased by approximately 56%.

▪ **Emergency Departments**

In September 2011, 100217 patients attend the Emergency Departments across Queensland. The median wait time was 23 minutes.

▪ **Elective Surgery**

In September 2011, there were 10293 elective surgery operations. The median wait time for elective surgery was 30 days.

▪ **Hospital Admissions**

In the June 2011 quarter, 222547 people were admitted to Queensland hospitals.

Additional public hospital activity and performance data can be obtained from the Queensland Health Hospital Performance website available at <http://www.health.qld.gov.au/hospitalperformance/default.aspx>.

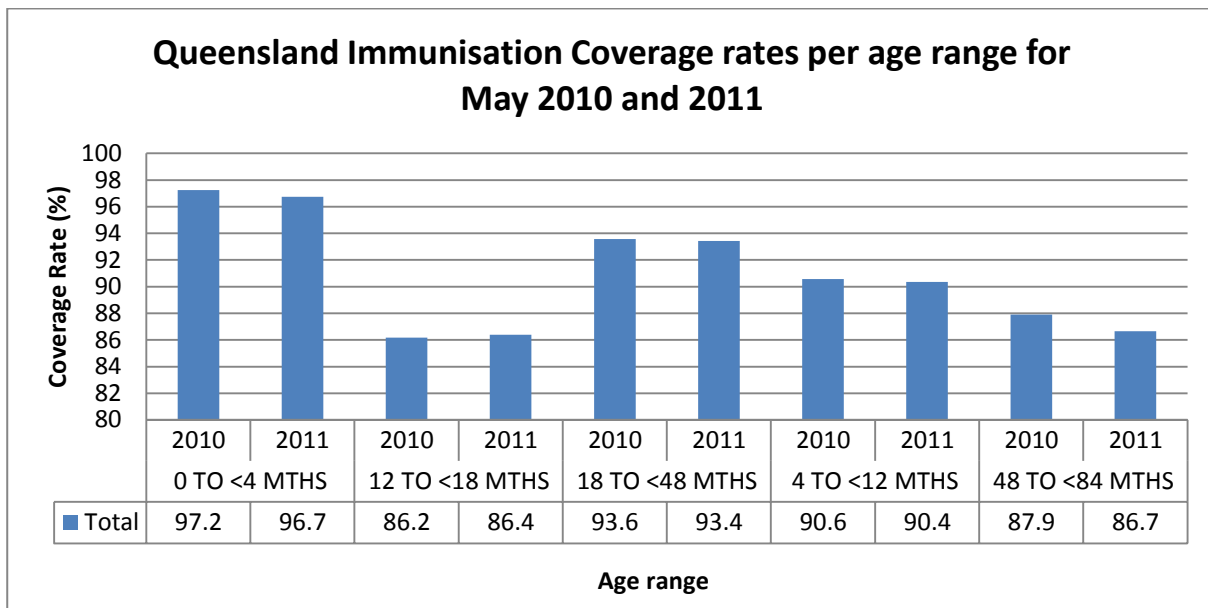




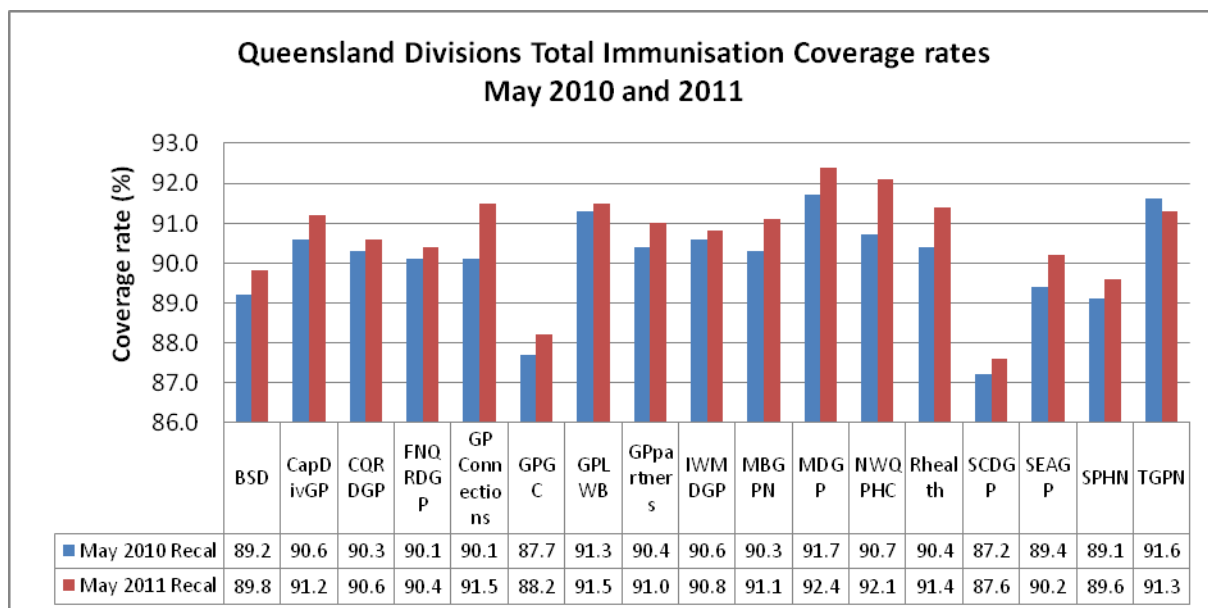
Immunisation Coverage

Division coverage rates are based on all children aged 0-7 years of age residing within the geographical boundaries of the division. The General Practice Immunisation Incentives (GPII) Scheme uses data from the Australian Childhood Immunisation Register (ACIR) to determine a child's immunisation status and then produces a GPII coverage report for all divisions nationally. These are provided quarterly as both 'preliminary calculation' and 'final recalculation' reports. Typically the recalculation data shows an increase in coverage over the calculation data as practices have reported new data to ACIR.

This is detailed in the graph below showing Immunisation coverage rates per age range for May 2011 compared with May 2010.



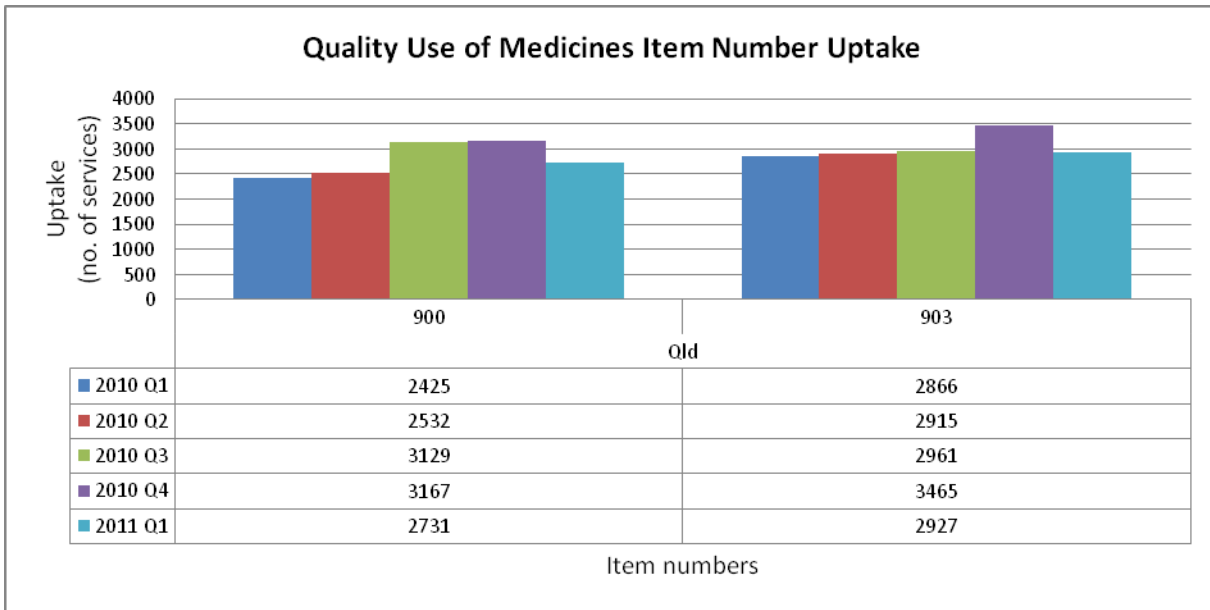
The graph below shows the total Immunisation coverage rates (recalculations) for all divisions for May 2011 compared with May 2010.



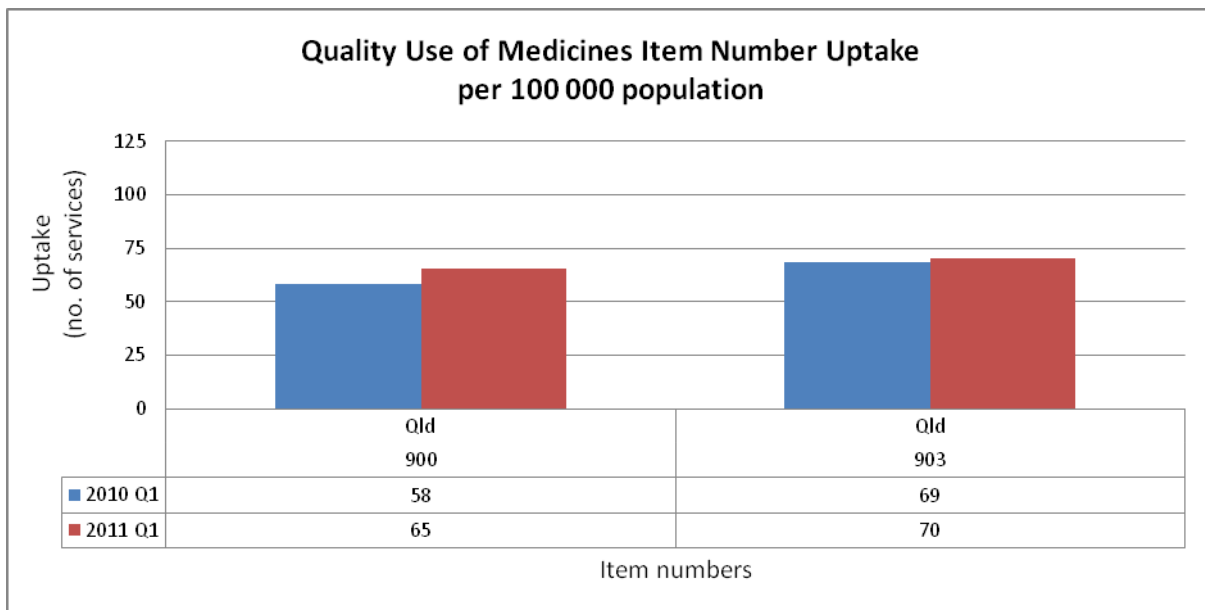


Medication Management Reviews

The quarterly uptake of the medication management review item number claim during Quarter 1 in 2010 and 2011 are shown below.



The graph below compares the uptake of medication management review item number claims per 100,000 population for the division and Queensland during Quarter 1 in 2010 and 2011.



Commentary

- Uptake for item numbers 900 and 903 has decreased in quarter 1, 2011.
- Uptake for item numbers 900 and 903 has increased in quarter 1, 2011 compared to the same quarter the previous year.

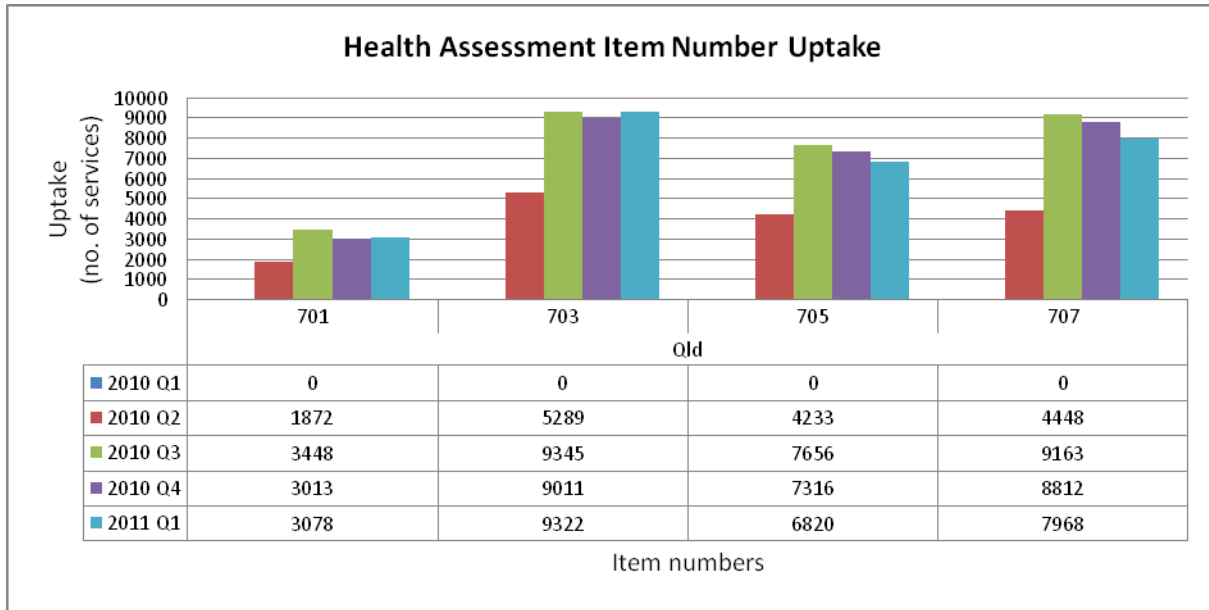




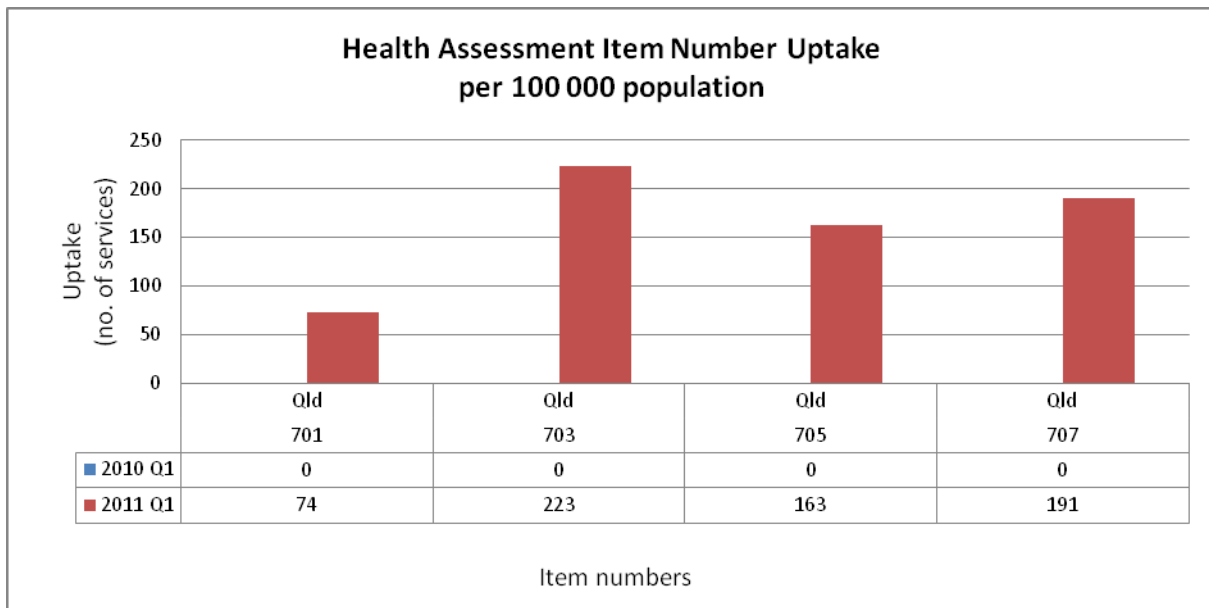
Health Assessments

In May 2010, Medicare changed the MBS Primary Care Item numbers including the health assessment item numbers. There are now four time-based health assessment item numbers that can be used for specific patient cohorts and general practitioners are to use their clinical judgement to decide which item number to claim (based on the complexity of the presentation and the type of health assessment).

The quarterly uptake of health assessment item number claims during Quarter 1 in 2010 and 2011 are shown below.



The graph below compares the uptake of health assessment item number claims per 100,000 population for the division and Queensland during Quarter 1 in 2010 and 2011.



Commentary

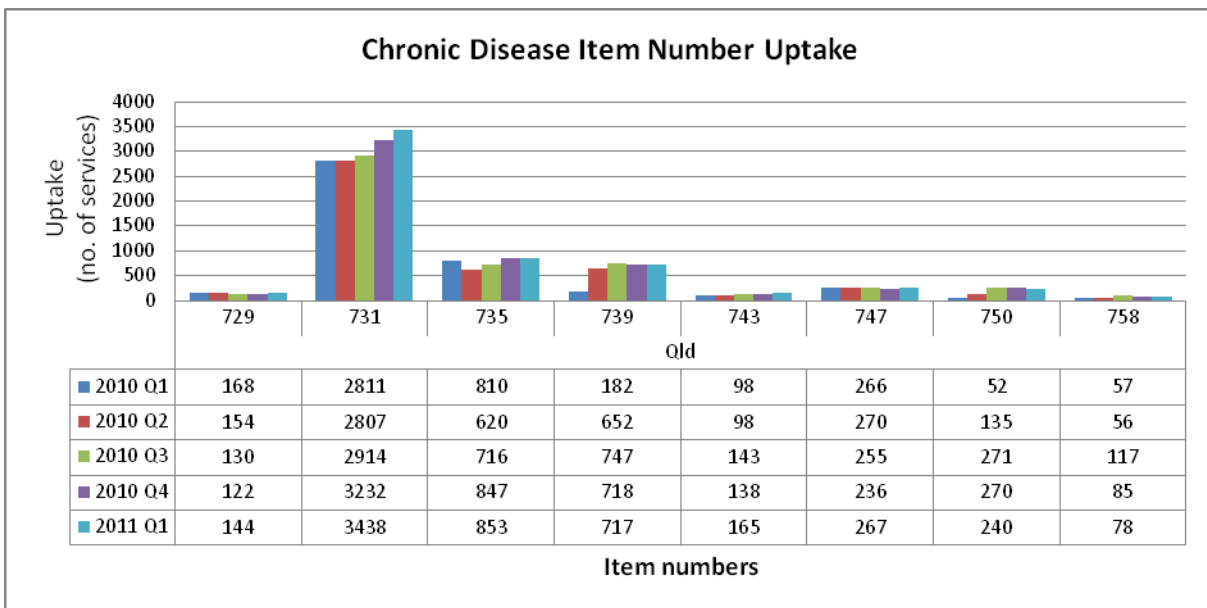
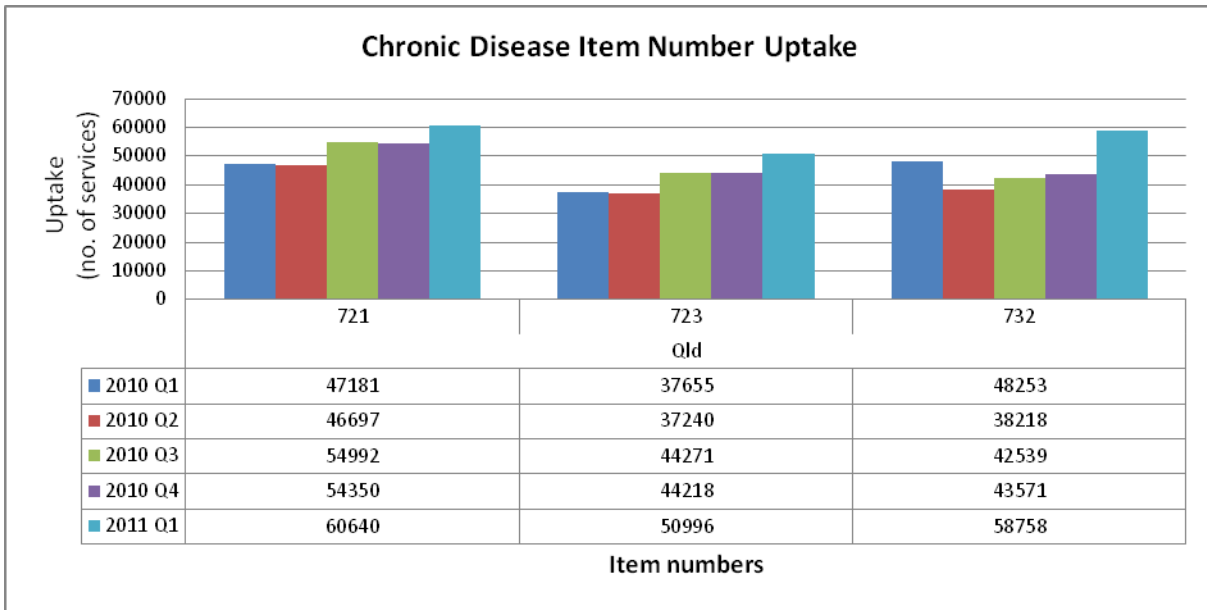
- Uptake for item number 705 and 707 has decreased in quarter 1, 2011.
- Uptake for all item number has only increase in quarter 1, 2011 compared to the same quarter in 2010.





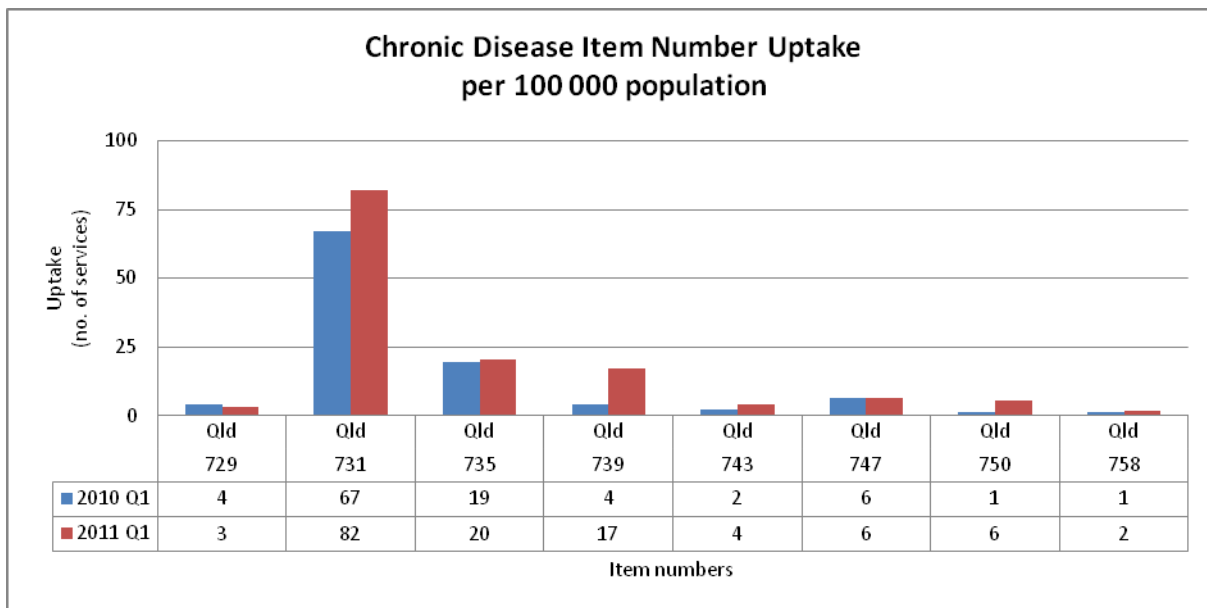
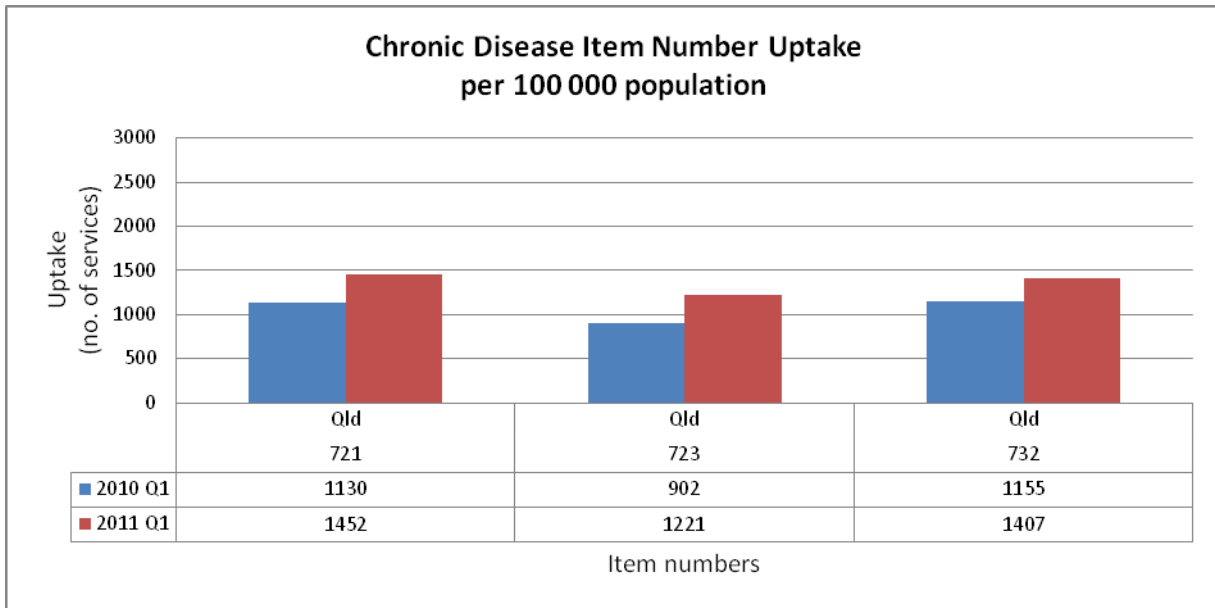
Chronic Disease Management

The quarterly uptake of chronic disease management related item number claims provided during Quarter 1 in 2010 and 2011 are shown below.





The graph below compares the uptake of chronic disease item number claims per 100,000 population for the division and Queensland during Quarter 1 in 2010 and 2011.



Commentary

- Uptake for item numbers 739, 750 and 758 has decreased in quarter 1, 2011. Uptake for all other item numbers has increased.
- Uptake for item number 729 has decreased in quarter 1, 2010 compared to the same quarter the previous year. Uptake for all other item numbers had increased.

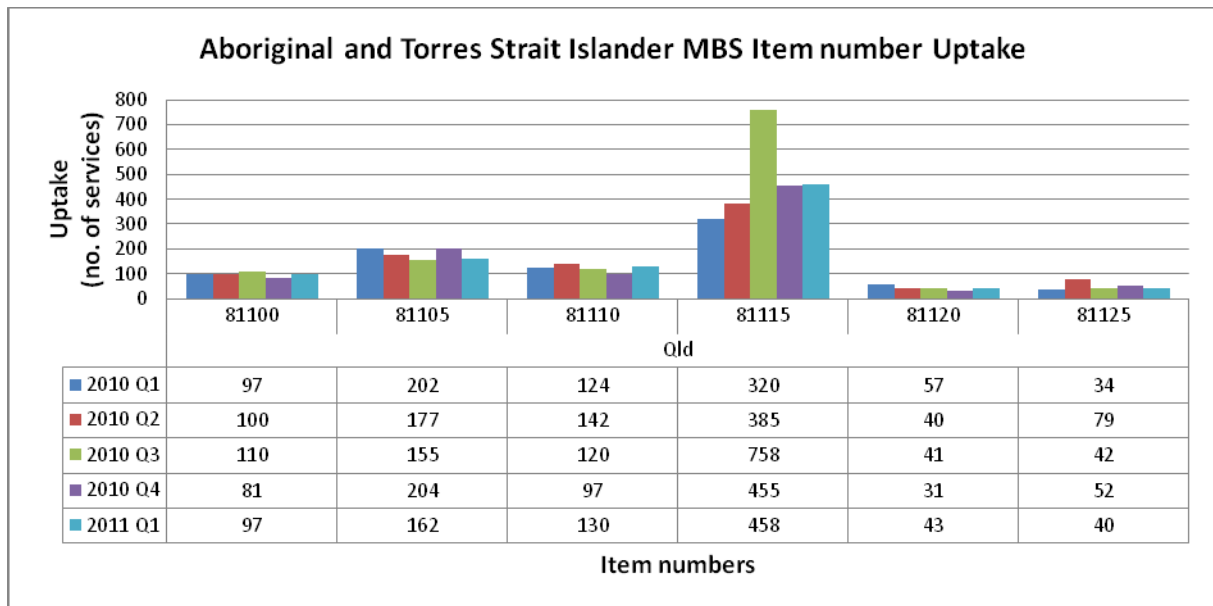
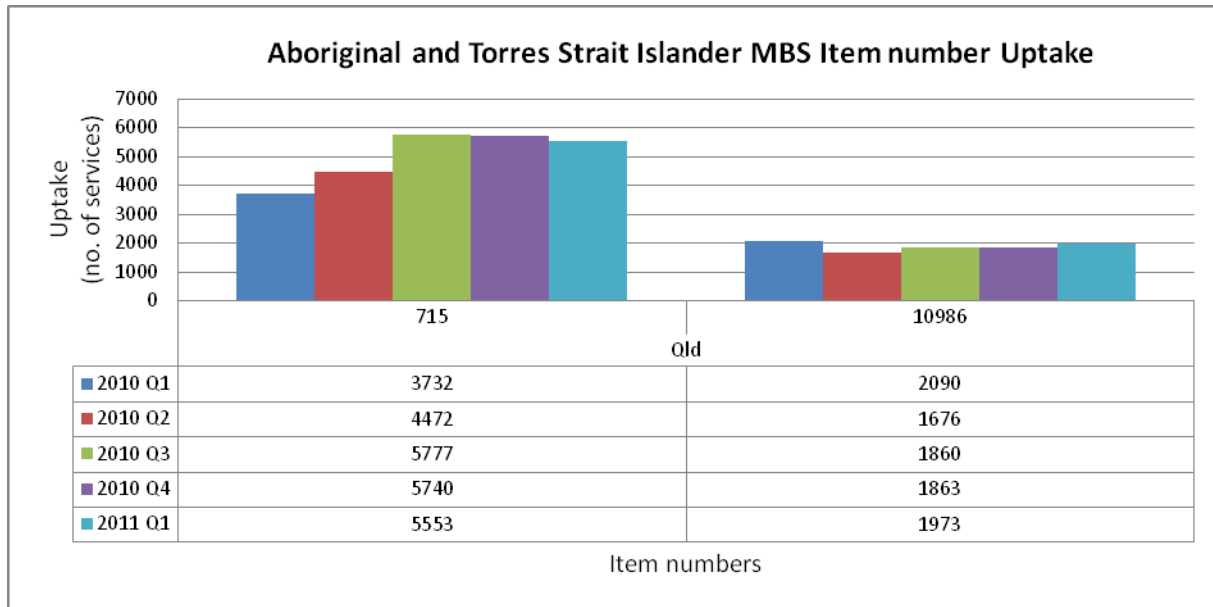




Aboriginal and Torres Strait Islander people

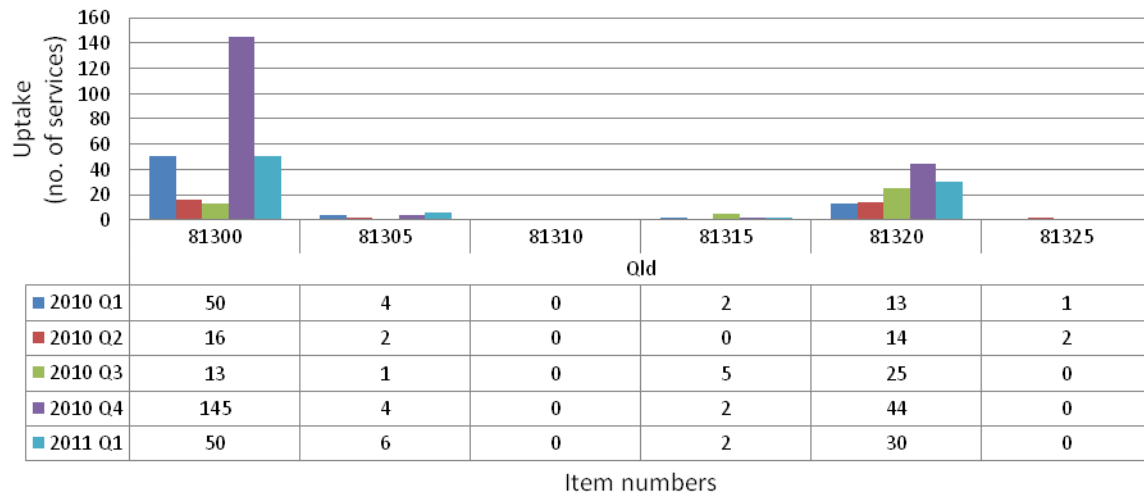
There has been no item number uptake between Quarter 1, 2010 and Quarter 1, 2011 for item numbers 10950 – 10970, 10987 – 10989, 81100 – 81125 and 81300 – 81360. Graphs have not been included for these item numbers, but will be included in subsequent issues of the profiles as uptake increases.

The quarterly uptake of Aboriginal and Torres Strait Islander related service item number claims during Quarter 1 in 2010 and 2011 are shown below.

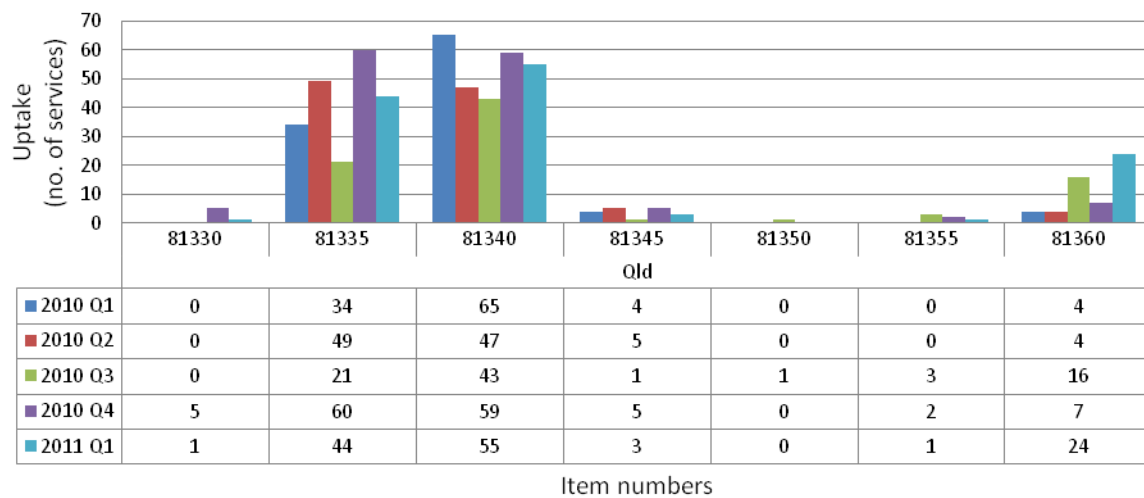




Aboriginal and Torres Strait Islander MBS Item number Uptake

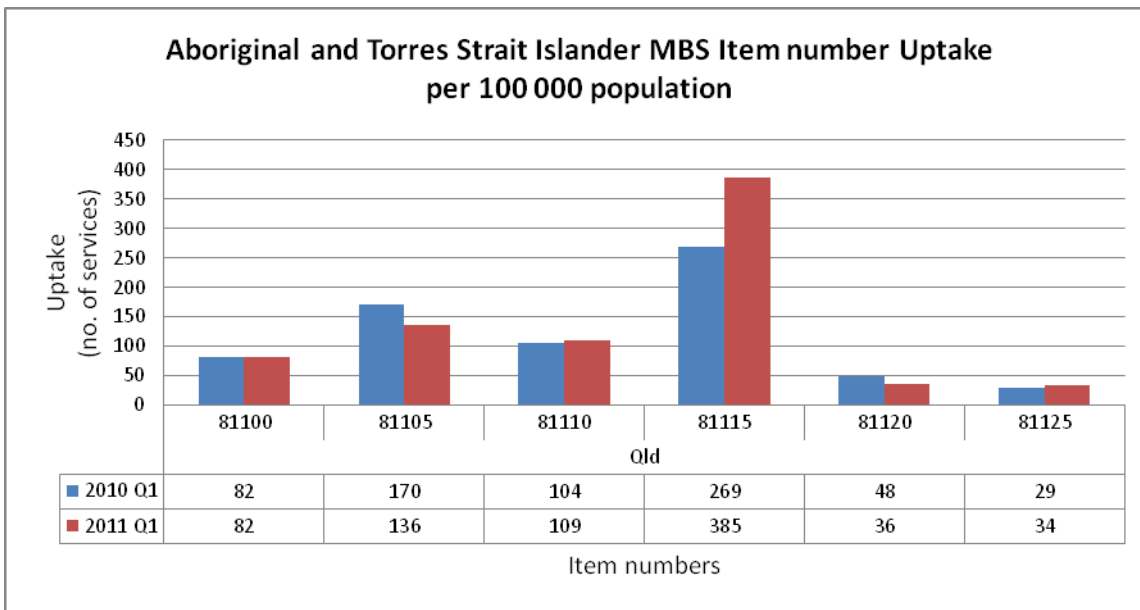
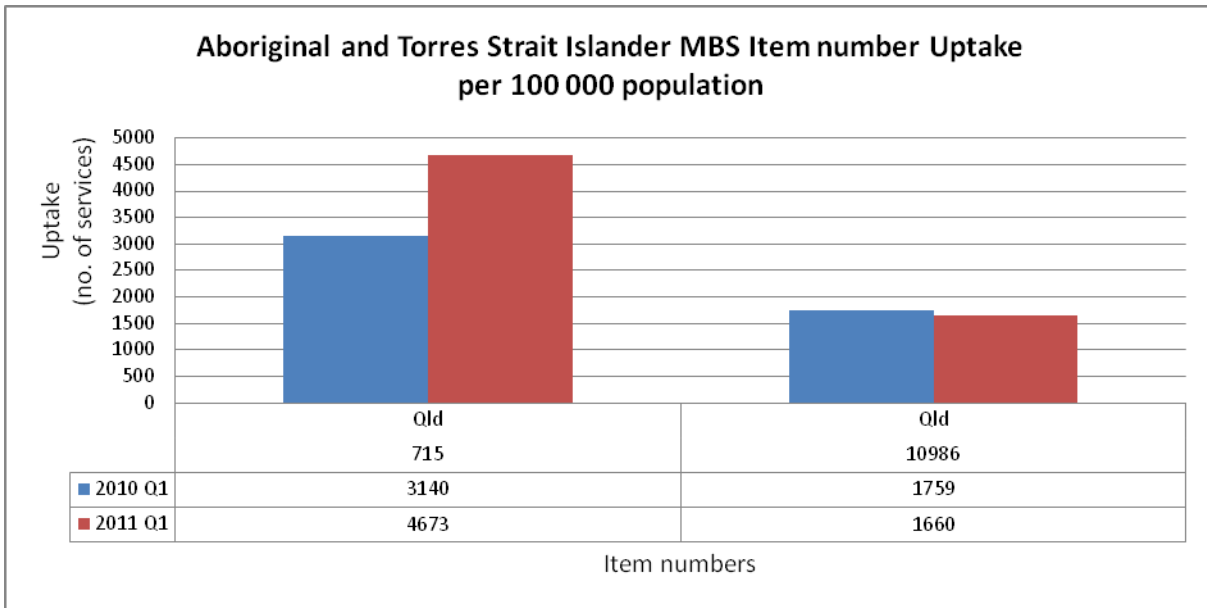


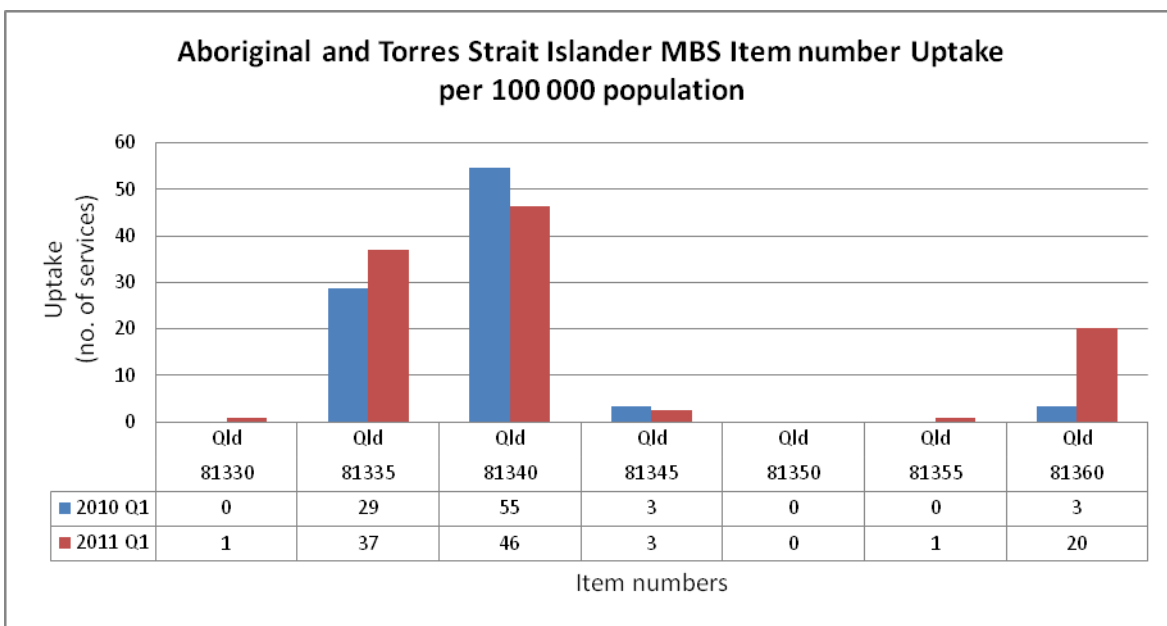
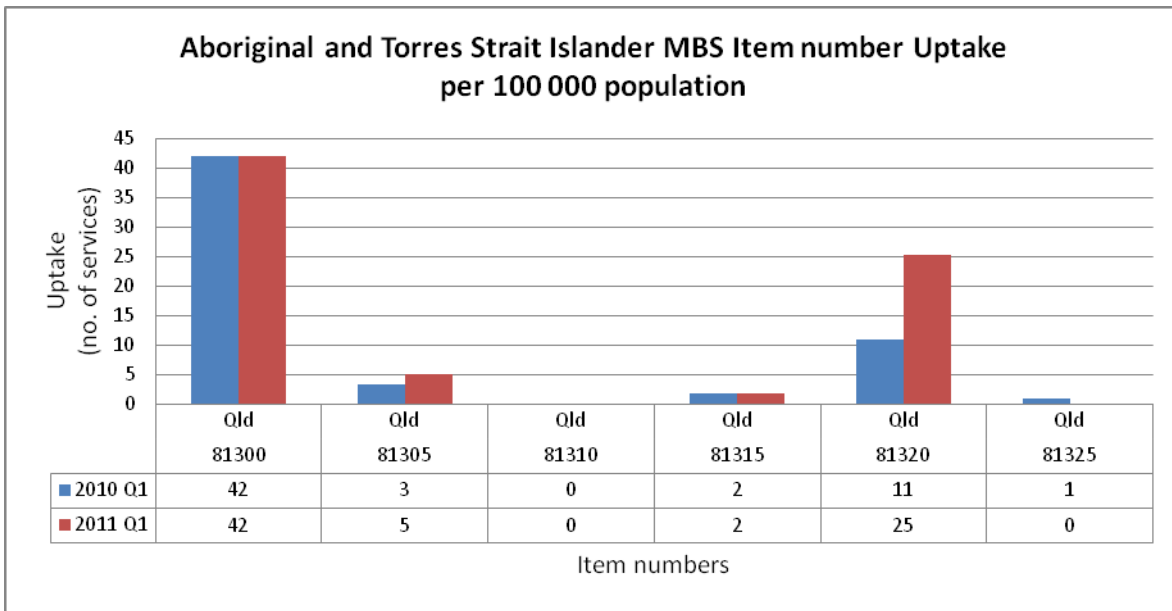
Aboriginal and Torres Strait Islander MBS Item number Uptake





The graph below compares the uptake of Aboriginal and Torres Strait Islander related service item number claims per 100,000 population for the division and Queensland during Quarter 1 in 2010 and 2011.





Commentary

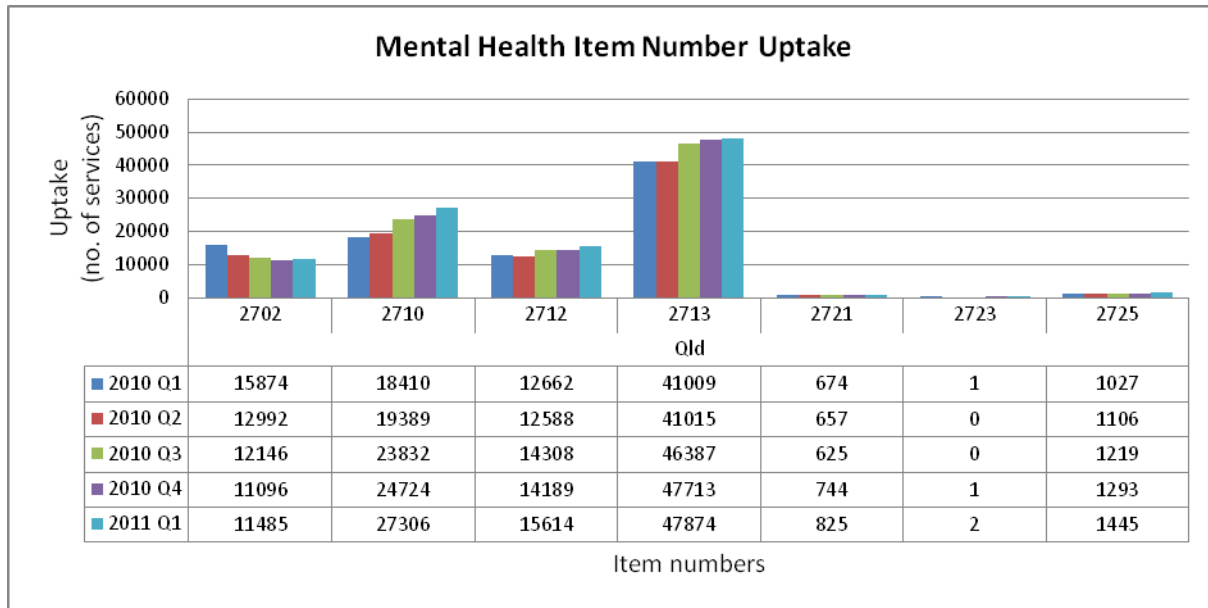
- Uptake for item numbers 10986, 81100, 81110, 81115, 81120, 81305 and 81360 has increased in quarter 1, 2011.
- Uptake for item number 81310, 81315, 81325 and 81350 has remained the same in quarter 1, 2011.
- Uptake for item numbers 715, 81105, 81125, 81300, 81340, 81345, 81320, 81330, 81335 and 81355 has decreased in quarter 1, 2011.
- Uptake for item numbers 10986, 81325, 81105, 81120 and 81340 in quarter 1, 2011 has decreased when compared to the same quarter the previous year.



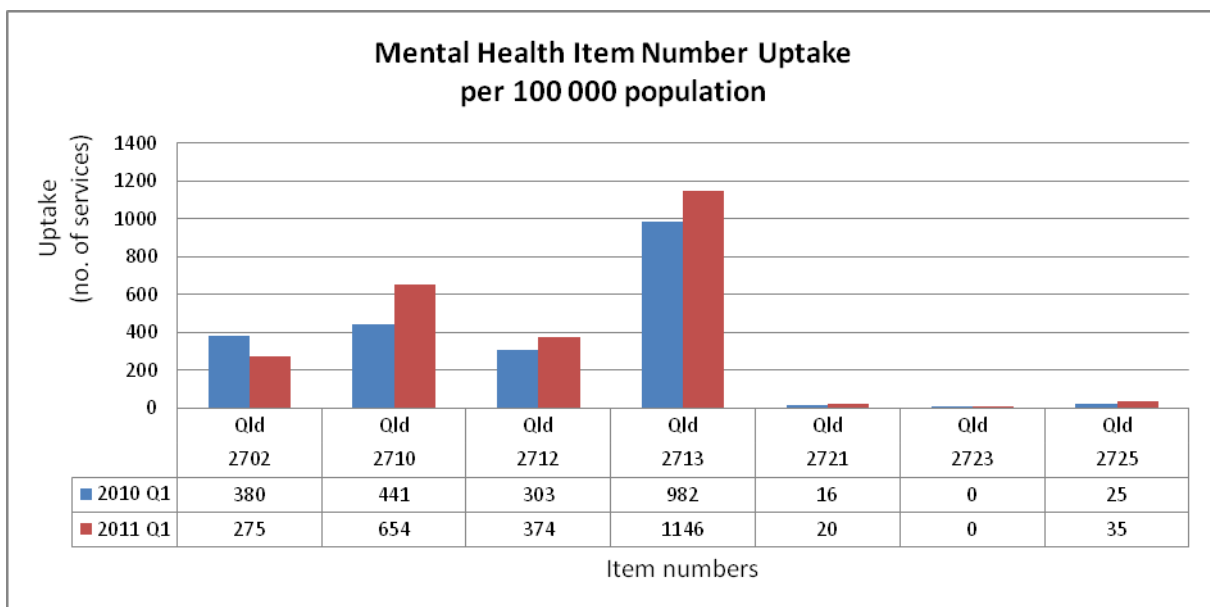


Mental Health Care Items

The quarterly uptake of mental health care related item number claims provided during Quarter 1 in 2010 and 2011 are shown below.



The graph below compares the uptake of mental health related item number claims per 100,000 population for the division and Queensland during Quarter 1 in 2010 and 2011.



Commentary

- Uptake for all item numbers has increased in quarter 1, 2011.
- Uptake for item number 2702 has decreased in quarter 1, 2011 when compared to the same quarter the previous year.





Appendices⁸

Appendix 1 - Medicare MBS item number descriptions

For full details on each item number please refer to the Medicare Care Benefits Schedule online
<http://www.health.gov.au/internet/mbsonline/publishing.nsf/Content/Medicare-Benefits-Schedule-MBS-1>

Surgery Consultations

3	LEVEL A Professional attendance for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management.
23	LEVEL B Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting less than 20 minutes
36	LEVEL C Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting at least 20 minutes
44	LEVEL C Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting at least 20 minutes

Home Visits/After Hours Consultations

4	LEVEL A - Professional attendance for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management. HOME VISIT OR CONSULTATION AT AN INSTITUTION (INCLUDING A HOSPITAL) OTHER THAN A RESIDENTIAL AGED CARE FACILITY
24	LEVEL B - Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting less than 20 minutes. HOME VISIT OR CONSULTATION AT AN INSTITUTION (INCLUDING A HOSPITAL) OTHER THAN A RESIDENTIAL AGED CARE FACILITY
37	LEVEL C - Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting at least 20 minutes. HOME VISIT OR CONSULTATION AT AN INSTITUTION (INCLUDING A HOSPITAL) OTHER THAN A RESIDENTIAL AGED CARE FACILITY
47	LEVEL D - Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting at least 40 minutes. HOME VISIT OR CONSULTATION AT AN INSTITUTION (INCLUDING A HOSPITAL) OTHER THAN A RESIDENTIAL AGED CARE FACILITY
597	Professional attendance by a general practitioner on not more than 1 patient on the 1 occasion - each attendance (<i>other than an attendance between 11pm and 7am</i>) in an after-hours period
599	Professional attendance, by a general practitioner on not more than 1 patient on the 1 occasion - each attendance between 11pm and 7am

Mental Health

2702	PREPARATION by a medical practitioner who has not undertaken mental health skills training of a GP MENTAL HEALTH TREATMENT PLAN for a patient
2710	PREPARATION by a medical practitioner who has undertaken mental health skills training of a GP MENTAL HEALTH TREATMENT PLAN for a patient
2712	Attendance by a medical practitioner to REVIEW a GP MENTAL HEALTH TREATMENT PLAN prepared by that medical practitioner to which item 2702 or 2710 applies or to REVIEW a PSYCHIATRIST ASSESSMENT & MANAGEMENT PLAN to which item 291 applies
2713	Professional ATTENDANCE by a medical practitioner involving taking relevant history, identifying presenting problem(s), providing treatment, advice &/or referral for other services or treatments & documenting the outcomes of the consultation, on a patient in relation to a mental disorder & lasting at least 20 minutes
2721	Medical Practitioner attendance associated with provision of focussed psychological strategies
2723	Out of Surgery Consultation





2725	Professional attendance for the purpose of providing focussed psychological strategies for assessed mental health disorders, by a medical practitioner registered with Medicare Australia as meeting the credentialing requirements for provision of this service, & lasting at least 40 minutes.
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Health Assessment

701	HEALTH ASSESSMENT - BRIEF Attendance by a medical practitioner to perform a brief health assessment, lasting not more than 30 minutes
703	HEALTH ASSESSMENT -STANDARD Attendance by a medical practitioner to perform standard health assessment, lasting more than 30 minutes but less than 45 minutes
705	HEALTH ASSESSMENT - LONG Attendance by a medical practitioner to perform a long health assessment, lasting at least 45 minutes but less than 60 minutes
707	HEALTH ASSESSMENT - PROLONGED Attendance by a medical practitioner to perform a prolonged health assessment, lasting at least 60 minutes

Chronic Disease

721	Attendance by a medical practitioner for the PREPARATION of a GP MANAGEMENT PLAN (GPMP) for a patient
723	Attendance by a medical practitioner to COORDINATE the development of TEAM CARE ARRANGEMENTS (TCAs) for a patient
729	CONTRIBUTION by a medical practitioner TO A MULTIDISCIPLINARY CARE PLAN prepared by another provider OR TO A REVIEW OF A MULTIDISCIPLINARY CARE PLAN prepared by another provider
731	CONTRIBUTION and/or REVIEW by a medical practitioner of a multidisciplinary care plan for a patient in A RACF prepared by that facility; or a multidisciplinary care plan prepared and/or REVIEWED for a resident by another provider before the resident is discharged from a hospital or an approved day-hospital facility.
732	Attendance by a medical practitioner to REVIEW A GP MANAGEMENT PLAN or COORDINATE A REVIEW OF TEAM CARE ARRANGEMENTS to which item 723 applies.
735	Attendance by a medical practitioner, as a member of a case conference team, to ORGANISE & COORDINATE A CASE CONFERENCE IN A RACF OR A COMMUNITY CASE CONFERENCE OR A DISCHARGE CASE CONFERENCE
739	Attendance by a medical practitioner, as a member of a case conference team, to ORGANISE & COORDINATE A CASE CONFERENCE IN A RACF OR A COMMUNITY CASE CONFERENCE OR A DISCHARGE CASE CONFERENCE
743	Attendance by a medical practitioner, as a member of a case conference team, to ORGANISE & COORDINATE A CASE CONFERENCE IN A RACF OR A COMMUNITY CASE CONFERENCE OR A DISCHARGE CASE CONFERENCE
747	Attendance by a medical practitioner, as a member of a case conference team, to PARTICIPATE IN A CASE CONFERENCE IN A RACF OR A COMMUNITY CASE CONFERENCE OR A DISCHARGE CASE CONFERENCE
750	Attendance by a medical practitioner, as a member of a case conference team, to PARTICIPATE IN A CASE CONFERENCE IN A RACF OR A COMMUNITY CASE CONFERENCE OR A DISCHARGE CASE CONFERENCE
758	Attendance by a medical practitioner, as a member of a case conference team, to PARTICIPATE IN A CASE CONFERENCE IN A RACF OR A COMMUNITY CASE CONFERENCE OR A DISCHARGE CASE CONFERENCE

Aboriginal and Torres Strait Islander

715	Attendance by a medical practitioner (Inc. a GP, but not including a specialist or consultant physician) at consulting rooms or in another place other than a hospital or RACF, for a health assessment of a patient who is of Aboriginal or Torres Strait Islander descent
10950	Aboriginal or Torres Strait Islander health service provided to a person by an eligible Aboriginal health worker
10951	Diabetes education health service provided to a person by an eligible diabetes educator





10952	Audiology health service provided to a person by an eligible audiologist
10953	Exercise physiology service provided to a person by an eligible exercise physiologist
10954	Dietetics health service provided to a person by an eligible dietician
10956	Mental health service provided to a person by an eligible mental health worker
10958	Occupational therapy health service provided to a person by an eligible occupational therapist
10960	Physiotherapy health service provided to a person by an eligible physiotherapist
10962	Podiatry health service provided to a person by an eligible podiatrist
10964	Chiropractic health service provided to a person by an eligible chiropractor
10966	Osteopathy health service provided to a person by an eligible osteopath
10968	Psychology health service provided to a person by an eligible psychologist
10970	Speech pathology health service provided to a person by an eligible speech pathologist
10986	Service provided by a practice nurse or registered Aboriginal health worker being the provision of a health assessment for a patient who is receiving or has received their four year old immunisation
10987	Follow up service provided by a practice nurse or registered Aboriginal health worker, on behalf of a medical practitioner, for an Indigenous person who has received a health assessment
10988	Immunisation provided to a person by a registered Aboriginal Health Worker
10989	Treatment of a person's wound provided by a registered Aboriginal Health Worker
81100	Diabetes education health service provided to a person by an eligible diabetes educator for the purposes of ASSESSING a person's suitability for group services for the management of type 2 diabetes
81105	Diabetes education health service provided to a person by an eligible diabetes educator, as a GROUP SERVICE for the management of type 2 diabetes
81110	Exercise physiology health service provided to a person by an eligible exercise physiologist for the purposes of ASSESSING a person's suitability for group services for the management of type 2 diabetes
81115	Exercise physiology health service provided to a person by an eligible exercise physiologist, as a GROUP SERVICE for the management of type 2 diabetes
81120	Dietetics health service provided to a person by an eligible dietician for the purposes of ASSESSING a person's suitability for group services for the mgmt. of type 2 diabetes
81125	Dietetics health service provided to a person by an eligible dietician, as a GROUP SERVICE for the management of type 2 diabetes
81300	ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH SERVICE provided to a person who is of Aboriginal and Torres Strait Islander descent by an eligible Aboriginal health worker
81305	DIABETES EDUCATION HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible diabetes educator
81310	AUDIOLOGY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible audiologist
81315	EXERCISE PHYSIOLOGY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible exercise physiologist
81320	DIETETICS HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible dietician
81325	MENTAL HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible mental health worker
81330	OCCUPATIONAL THERAPY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible occupational therapist
81335	PHYSIOTHERAPY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible physiotherapist
81340	PODIATRY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible podiatrist
81345	CHIROPRACTIC HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible chiropractor
81320	OSTEOPATHY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible osteopath
81355	PSYCHOLOGY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible psychologist
81360	SPEECH PATHOLOGY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible speech pathologist





Practice Nurse

10986	Service provided by a practice nurse or registered Aboriginal health worker being the provision of a health assessment for a patient who is receiving or has received their four year old immunisation
10987	Follow up service provided by a practice nurse or registered Aboriginal health worker, on behalf of a medical practitioner, for an Indigenous person who has received a health assessment
10993	Immunisation provided to a person by a practice nurse
10994	Services provided by a practice nurse, being the taking of a cervical smear AND preventative checks
10995	Services provided by a practice nurse being, a cervical smear from woman between the ages of 20 and 69 inclusive, who has not had a cervical smear in the last 4 years, AND preventative checks
10996	Treatment of a person's wound (other than normal aftercare) provided by a practice nurse
10997	Services provided to a person with a chronic disease by a practice nurse or registered Aboriginal Health Worker
10998	Services provided by a practice nurse, being the taking of a cervical smear from a person
10999	Service provided by a practice nurse, being the taking of a cervical smear from a woman between the ages of 20 and 60 inclusive, who has had a cervical smear in the last 4 years

Quality Use of Medicine

900	Participation by a medical practitioner (including a general practitioner, but not including a specialist or consultant physician) in a Domiciliary Medication Management Review (DMMR) for patients living in the community setting, where the medical practitioner
903	Participation by a medical practitioner (including a general practitioner, but not including a specialist or consultant physician) in a collaborative Residential Medication Management Review (RMMR) for a permanent resident of a residential aged care facility





Reference List

1. Australian Bureau of Statistics. (2006-2008). *Queensland Statistics, February 2010 - Deaths Queensland 2008*. Retrieved November 9, 2010, from Australian Bureau of Statistics: <http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/1318.3Feature%20Article14Feb%202010#BIBLIOGRAPHY>
2. Australian Bureau of Statistics. (2008, June 30). *National Regional Profile: Queensland - Population/People*. Retrieved November 9, 2010, from Australian Bureau of Statistics: <http://www.abs.gov.au/AUSSTATS/abs@.nsf/Latestproducts/3Population/People12004-2008?opendocument&tabname=Summary&prodno=3&issue=2004-2008>
3. Australian Government. (2008, April). *Glossary*. Retrieved February 2011 8, 2011, from Australian Government, Department of Health and Ageing: <http://www.health.gov.au/internet/main/publishing.nsf/Content/work-res-ruraud-toc-work-res-ruraud-glos>
4. Public Health Information Development Unit. (2009). *Divisions of General Practice data*. Adelaide: Public Health Information Development Unit (PHIDU), University of Adelaide.
5. Queensland Government. (2010, February 1). *About Queensland Health*. Retrieved November 11, 2010, from Queensland Government: <http://www.health.qld.gov.au/more-careers/aboutQH.asp>
6. Queensland Government. (2010). *Queensland Growth Management Summit: Background paper - Opportunities, challenges and choices*. Brisbane: Queensland Government.
7. Queensland Health. (2008). *The Health of Queenslanders 2008: Prevention of Chronic Disease. Second Report of the Chief Health Officer Queensland, Queensland Health*. Brisbane: Queensland Health.
8. University of Adelaide. (2011). *Medicare Locals Population Health atlas*. Retrieved September 1, 2011, from Public Health Information Development Unit : http://www.publichealth.gov.au/component/option,com_sobidata2/sobidata2Task,sobidata2Details/sobidata2Id,42/Itemid,50/

