

8 Future directions

The National Health Performance Committee (NHPC) was formed at the request of AHMC to develop and maintain a national performance measurement framework for the health system. The NHPC is also required to establish and maintain appropriate national performance indicators within the national performance measurement framework for the purpose of its reporting. Its objective is to provide information on the Australian health system to show trends and patterns, and to inform decision making and evaluation of efforts to address health challenges.

The NHPC released the *National Health Performance Framework Report* in 2001 (NHPC 2001). The report outlined the performance of the Australian health system in relation to the three tiers of the framework: health status and outcomes, determinants of health, and health system performance, and provided a rational structure for national reports that followed. The 2001 and 2003 national reports based on the national health performance framework provide information on national health system performance and support benchmarking for health system improvement (NHPC 2002).

After release of the 2001 national report, the NHPC discussed its future direction and how best it might fulfil its terms of reference within its available resources, and decided to focus on the terms of reference relating to the review of indicator development and benchmarking throughout the remainder of 2002. A workshop to identify a set of indicators for inclusion in national reporting was held in the second half of 2002. The output of this workshop was a report identifying a set of indicators for inclusion in national health performance committee reports, and where further research and development was required. Two workshops on benchmarking were also held in the latter part of 2002 to develop the NHPC's plan for benchmarking. Recommendations included indicator and data development, for example for primary care and access to core services, and development of benchmarking practices.

The NHPC's reporting role also includes maintenance of the national health performance framework. When the *National Health Performance Framework Report* was published in August 2001 (NHPC 2001) feedback was sought on the use of the framework as well as further measures that could be included, both current and still to be developed.

The NHPC decided to review the framework after a period of three years. Relevant issues for review are the appropriateness of the 18 dimensions under the framework and its compatibility with international frameworks. With respect to the latter issue, a proposed International Organization for Standardization (ISO) health indicators conceptual framework has been adopted by ISO as a technical specification. This will have implications for the national health performance framework in terms of international reporting of data and linking to a standard form of metadata representation of indicators. The next review of the national health performance framework is due in mid-2004.

The NHPC has also decided that reporting on indicators within the framework would best be done every two years. In some data sets, changes in performance are more obvious over longer time periods than one year. In other cases, data for certain subject matter are only available for irregular time periods. In the light of the minor changes that occur between annual reports, and the available resource constraints, the NHPC plans to produce these general reports only every two years after production of this 2003 report, and additionally release resources for reports on special interest topics. The selection of special interest areas, for inclusion in published output, would be guided by direction from Ministers.

The list of special interest areas for possible consideration by Health Ministers includes:

- mental health
- National Health Priority Areas e.g. Cardiovascular disease, Diabetes, Cancer, Asthma, Injury, Mental health
- primary health and community care
- public health
- Aboriginal and Torres Strait Islander health
- care of older Australians
- health and health care in rural and remote areas
- safety and quality
- health and health care of children and young people
- private sector health care
- inequalities in health within the Australian population
- arthritis/musculoskeletal conditions/osteoporosis.

Work on such special interest areas could be undertaken in any combination of ways. It could be:

- undertaken by the NHPC as a stand-alone piece of work, possibly in the form of an occasional paper; or
- undertaken by the NHPC in conjunction with other groups.

The NHPC seeks feedback from stakeholders as to what priority special interest areas should be given for reporting in 2004. The next general report will be due in 2005. Work will also be continuing on data development activities relating to primary health and access to core services, within budget constraints.