# Immunisation rates for children, 2014–15



### © Australian Institute of Health and Welfare 2024

This product, excluding the AlHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AlHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at https://creativecommons.org/licenses/by/4.0/.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

# Immunisation rates for children, 2014–15

# Identifying and definitional attributes

Metadata item type: Indicator Indicator type: Indicator

**Short name:** Immunisation rates for children, 2014–15

**Synonymous names:** Vaccination rates for children

**METEOR identifier:** 630476

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

• The percentage of children fully immunised.

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

Birth

from:

Population group age to: 63 months

**Computation description:** The percentage of children, from birth to age 63 months, who are fully immunised

according to the National Immunisation Program Schedule.

Computation:

(Numerator/Denominator) x 100

#### Numerator:

Number of children who are fully immunised in the Australian Childhood Immunisation Register (ACIR), for each age group.

1 year of age

Children aged 12 months to less than 15 months between 1 April 2014 and 31 March 2015 who, prior to the age of 12 months received their third vaccination for diphtheria, tetanus, whooping cough (DTPa) and polio (IPV), and either their second or third vaccination for hepatitis B (hepB), haemophilus influenza type b (Hib) and the pneumococcal vaccine.

### 2 years of age

Children aged 24 months to less than 27 months between 1 April 2014 and 31 March 2015 who, prior to the age of 24 months received their third or fourth vaccination for DTPa and Hib, their third vaccination for IPV and hepB, and their first vaccination for measles, mumps and rubella (MMR).

#### 5 years of age

Children aged 60 months to less than 63 months between 1 April 2014 and 31 March 2015 who, prior to the age of 60 months received their fourth or fifth vaccination\* for DTPa, their fourth vaccination for IPV and their second vaccination for MMR.

\* dependent on the type of vaccine used

For each age it is assumed that earlier vaccinations in the series have been given. A change in the definition of fully immunised for 2 year olds occurred from 31 December 2014 when meningococcal C vaccination (given at 12 months), dose 2 measles, mumps, rubella (MMR), and dose 1 varicella vaccination were included in the definition of 'fully immunised'. The inclusion of these three additional vaccines has caused a decrease in the reported immunisatuion coverage rates which are measured at 2 years of age.

### Numerator data elements:

Data Element / Data Set-

Service contact—service contact date, DDMMYYYY

Data Source

Australian Childhood Immunisation Register (ACIR)

Data Element / Data Set-

Person—date of birth, DDMMYYYY

**Data Source** 

Australian Childhood Immunisation Register (ACIR)

**Denominator:** 

Number of children who turned 1, 2 or 5 years between 1 April 2014 and 31 March 2015 in the eligible population i.e. those children who are registered with Medicare on the ACIR

# Denominator data elements:

#### Data Element / Data Set

Service contact—service contact date, DDMMYYYY

**Data Source** 

Australian Childhood Immunisation Register (ACIR)

#### Data Element / Data Set

Person—date of birth, DDMMYYYY

**Data Source** 

Australian Childhood Immunisation Register (ACIR)

### Disaggregation:

By Aboriginal and Torres Strait Islander status and by Primary Health Network catchments, Statistical Areas Level 4, Statistical Areas Level 3 and postcode which have been derived from <u>Address—Australian postcode</u>, code (Postcode datafile) {NNNN}.

Primary Health Networks are primary health care organisations established to improve responsiveness, coordinate primary health care delivery and tackle local health care needs and service gaps. A Primary Health Network catchment refers to the geographical area of a Primary Health Network.

Statistical Areas Level 4 (SA4s) and Statistical Areas Level 3 (SA3s) are geographic areas defined in the ABS Australian Statistical Geography Standard (ASGS).

The aim of SA4s is to provide a sub-state breakdown of Australia and SA4s are built from whole SA3s. There are 88 spatial SA4s covering the whole of Australia without gaps or overlaps. In regional areas, SA4s tend to have populations of between 100,000 to 300,000 people and in metropolitan areas, SA4s tend to have larger populations of between 300,000 and 500,000 people.

The aim of SA3s is to create a standard framework for the analysis of ABS data at the regional level through clustering groups of SA2s that have similar regional characteristics. There are 333 spatial SA3s covering the whole of Australia without gaps or overlaps. They are designed to provide a regional breakdown of Australia. SA3s generally have a population of between 30,000 and 130,000 people. There are approximately 50 with fewer than 30,000 people and 35 with more than 130,000 as at 30 June 2011. For further information see the ABS publication, Australian Statistical Geography Standard (ASGS): Volume 1 – Main Structure and Greater Capital City Statistical Areas, July 2011 (cat. no. 1270.0.55.001).

Geographic correspondences (sometimes referred to as concordances or mapping files) can be used where the location information in an original survery, census or administrative data is not available at the geographic area required for analysis and reporting. Geographic correspondences are a mathematical method for reassigning data from one geographic area (e.g. a postcode of a patient's address in a PHN record) to a new geographic area (e.g. PHN area or SA3).

In 2015, the Department of Health commissioned the ABS to compile several correspondences to convert data from defined geographic levels to PHN areas using PHN boundaries and ABS Estimated Resident Population (ERP). These concordance files were used in the report.

# Disaggregation data elements:

### Data Element / Data Set-

Person-Indigenous status, code N

**Data Source** 

Australian Childhood Immunisation Register (ACIR)

### Data Element / Data Set

Address—Australian postcode, Australian postcode code (Postcode datafile) {NNNN}

**Data Source** 

Australian Childhood Immunisation Register (ACIR)

### Data Element / Data Set

Address—statistical area, level 3 (SA3) code (ASGS 2011) NNNNN

### Data Element / Data Set-

Address-statistical area, level 4 (SA4) code (ASGS 2011) NNN

### 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 PAF-Effectiveness of access dimensions:

PAF-Equity of access

### **Data source attributes**

Data sources: — Data Source

Australian Childhood Immunisation Register (ACIR)

Frequency

Quarterly (register 'snapshot')

Data custodian

Department of Health and Ageing

## **Accountability attributes**

Reporting requirements: National Health Performance Authority-Performance and Accountability Framework

Organisation responsible for providing data:

Department of Human Services

**Accountability:** National Health Performance Authority

**Release date:** 18/02/2016

## Source and reference attributes

**Submitting organisation:** National Health Performance Authority

Origin: Healthy Communities

Reference documents: National Health Performance Authority-Performance and Accountability Framework

Healthy Communities: Immunisation rates for children in 2014–15, Technical Note.

### Relational attributes

Related metadata references:

Supersedes National Health Performance Authority, Healthy Communities: Immunisation rates for children, 2012

National Health Performance Authority (retired), Superseded 27/03/2014

See also <u>Australian Health Performance Framework: PI 2.1.1-Immunisation rates</u>

for vaccines in the national schedule, 2019 Health!, Standard 17/04/2020

See also Australian Health Performance Framework: PI 2.1.1-Immunisation rates

for vaccines in the national schedule, 2020

Health!, Standard 01/12/2020