Overview

PART A INTRODUCTION

The aim of this Report is to publish ongoing comparisons, across jurisdictions, of government performance in the provision of services. Performance is defined as how well a service meets its objectives. This fourth *Report on Government Services* contains performance information on a wide range of services covering education and training, health, justice, emergency management, community services and housing.

The scope of the Report has been extended this year to include medical general practice, mental health and Commonwealth Rent Assistance (although data are not yet available for rent assistance). Performance information is also now available for the first time for emergency management and breast cancer control.

Given the number of services and performance indicators covered, this overview does not summarise all results; rather, it highlights some information. However, it is important that any assessment of performance considers all performance indicators presented, so readers are encouraged to read the appropriate chapters and attachments (and prefaces, where presented) as well as the caveats contained in notes to tables. The Steering Committee's approach to performance reporting is discussed in chapter 1.

Why measure comparative performance?

Government services are important to the community and they absorb significant government expenditure, so governments should be accountable for their services' performance. Reporting on a comparative basis can also facilitate ongoing performance improvements.

The services covered in the Report accounted for about \$50 billion in 1997-98 (see chapter 1). This represented around 26 per cent of government expenditure in that year and was equivalent to about 9 per cent of gross domestic product.

Comparative performance information can help jurisdictions identify potential benchmark partners, strengthen incentives to improve performance, and inform governments about the tradeoff between providing various services (for example, the mix of prevention or early detection services relative to treatment services for breast cancer management).

Approach to reporting performance of services

Governments typically have a number of objectives for the services they fund, with many objectives being similar across jurisdictions. The Steering Committee's approach to performance reporting is to focus on the extent to which each shared objective has been met. To this end, the Steering Committee has developed a general framework for performance indicators which assesses performance in terms of effectiveness and efficiency (figure 1). Effectiveness relates to how well a service achieves its desired outcomes, and efficiency relates to how well governments use their resources to produce units of services.

In addition to performance information, each chapter also includes descriptive information about services and the context of their delivery, a discussion of future directions in performance indicators, and comments from each jurisdiction. This year the Report also includes a descriptive appendix of data on each State and Territory to aid analysis (appendix A).

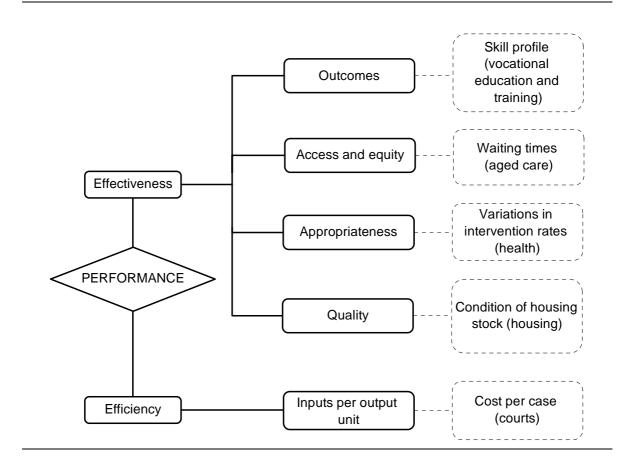
Developments in performance measurement

Developments in performance measurement in 1998 occurred in:

- the scope of some services the scope was broadened for health and housing;
- *the quality and comparability of the data* data were improved for vocational education and training, health, courts, corrective services, aged care, children's services and housing;
- *new indicators* new indicators were added in children's services (and reporting for those indicators), and a consultancy was undertaken to further develop outcome indicators for child protection and supported placements; and
- *developing existing indicators* a consultancy was undertaken to help obtain client satisfaction information from people with disabilities;
- reporting on existing indicators for the first time data are included for emergency management and breast screening in health, and there is also additional re-

- porting for public acute care hospitals, police services, courts, corrective services, public housing and community housing; and
- contextual information there is significantly more information on the policy environment in the health and housing chapters, and descriptive statistics are included to provide contextual information (see appendix A) for interpreting performance indicators for all chapters.

Figure 1 A general framework and examples of performance indicators



Interpreting performance indicators

The Report aims to present indicators that allow users to assess performance. Many objectives of government involve tradeoffs, such as choosing whether to improve the average level of service or to better target services to those most in need. Further, service provision can involve a balancing of effectiveness and efficiency — for example, a service may cost less to produce because less effort has been put into delivering it to those in need.

Each government's priorities, tradeoffs or targets can differ and may change over time. Presenting performance indicators as a suite encourages users to assess performance on all indicators collectively, rather than individual indicators. Moreover, each user is left to judge the appropriate tradeoffs between objectives.

The broader environment in which a service operates affects the performance of each service in each jurisdiction. And when comparing performance information across jurisdictions, users also need to consider the effect of different data collection methods. Differences in data collection methods or definitions are highlighted in notes to tables or figures.

PART B EDUCATION AND TRAINING

Performance indicators are presented in this report for government funding of education operations including government primary and secondary schools and government funded private schooling, technical and further education (TAFE) centres and government funded private vocational education and training (VET) (but not universities).

Information is reported on a range of areas including consumer satisfaction and access and equity, but there is still only limited information available on comparable learning outcomes. The Steering Committee is eager to obtain data on the net contribution of education to learning and skills development, as collected through longitudinal testing. It continues to seek publication of comparable school learning outcomes data across jurisdictions.

Chapter 2 School education

The focus of this Report is on the performance of government funded schooling in States and Territories. Government funded school education is reported at two levels:

- government primary and secondary schools; and
- systemwide (government and non-government primary and secondary schools).

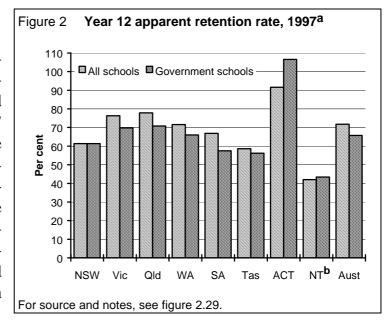
Comparable learning outcome information for assessing the relative performance of school systems across jurisdictions is limited. However, in April 1998, the Ministerial Council on Education, Employment, Training and Youth Affairs (MCEETYA) approved years 3 and 5 national literacy benchmarks and agreed to State and Territory trials of national numeracy benchmarks. Literacy outcomes for year 3 students

are likely to become available in 1999, with year 3 numeracy outcomes and year 5 outcomes to be available some time in the future.

Jurisdiction specific data on learning outcomes are reported for a range of achievement, but it is understood that the MCEETYA data will be reported as a simple proportion of students achieving the national benchmark in each jurisdiction. This will limit the usefulness of the information. The Steering Committee is working with MCEETYA to encourage broader reporting of performance.

Apparent retention rates

Systemwide, apparent retention rates (that is, the proportion of students who remained in school) to year 12 in 1997 ranged from 42 per cent in the NT to 77.9 per cent in Queensland, 76.3 per cent in Victoria and 91.6 per cent in the ACT (figure 2). However, apparent retention rates are subject to many influences and need to be interpreted with care.



Social objectives of schooling

The social development of young people has long been an objective of schools. The former Commonwealth Department of Employment, Education, Training and Youth Affairs, on behalf of MCEETYA, commissioned a national sample study, *Schools and the Social Development of Young Australians*, which clarified some of the social objectives behind broadly stated purposes of schools in this area and investigated the extent to which Australia's schools pursue and achieve social objectives.

The study collected valuable information on the extent to which students think social outcomes are important to them, and a great deal of detailed information is reported at the national level. However, similarly detailed information is not provided for individual States and Territories, even though school policy is largely determined at a State and Territory level. Students' views on social outcomes (by jurisdiction) are summarised into seven aggregate 'T scores' (one for each of six

broad social outcomes and one for school environment). More detailed information at the jurisdiction level is planned for future reporting (table 1).

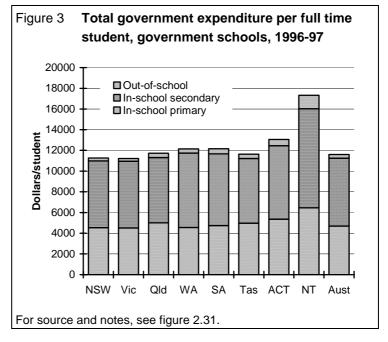
Table 1 Students' importance ratings for social objectives, 1997 (T scores)^a

				<u> </u>		<u>, </u>	
NSW	Vic	Qld	WA	SA	Tas	NT	ACT
50.8	51.3	50.8	50.3	52.5	53.1	50.9	50.9
49.4	49.8	48.5	47.3	49.5	49.4	47.6	48.3
52.7	52.0	52.6	51.9	53.1	53.1	53.2	52.2
47.8	48.5	47.7	46.3	48.7	47.6	47.3	48.3
conventions	;						
53.8	53.1	54.4	52.9	53.9	55.3	54.3	53.0
47.2	46.2	47.4	45.4	47.3	47.5	46.7	45.9
52.2	51.1	51.9	50.7	51.4	52.6	53.1	49.3
48.6	48.8	49.3	46.8	48.8	48.5	49.2	48.8
51.5	50.3	51.2	51.2	51.6	50.5	50.4	51.1
48.8	48.8	49.5	48.9	49.5	50.2	49.5	48.8
54.8	54.5	55.3	55.3	56.4	55.2	55.8	54.3
45.5	46.3	45.4	45.3	46.4	44.2	45.3	45.4
	50.8 49.4 52.7 47.8 conventions 53.8 47.2 52.2 48.6 51.5 48.8	50.8 51.3 49.4 49.8 52.7 52.0 47.8 48.5 conventions 53.8 53.1 47.2 46.2 52.2 51.1 48.6 48.8 51.5 50.3 48.8 48.8 54.8 54.5	50.8 51.3 50.8 49.4 49.8 48.5 52.7 52.0 52.6 47.8 48.5 47.7 conventions 53.8 53.1 54.4 47.2 46.2 47.4 52.2 51.1 51.9 48.6 48.8 49.3 51.5 50.3 51.2 48.8 48.8 49.5 54.8 54.5 55.3	50.8 51.3 50.8 50.3 49.4 49.8 48.5 47.3 52.7 52.0 52.6 51.9 47.8 48.5 47.7 46.3 conventions 53.8 53.1 54.4 52.9 47.2 46.2 47.4 45.4 52.2 51.1 51.9 50.7 48.6 48.8 49.3 46.8 51.5 50.3 51.2 51.2 48.8 48.8 49.5 48.9 54.8 54.5 55.3 55.3	50.8 51.3 50.8 50.3 52.5 49.4 49.8 48.5 47.3 49.5 52.7 52.0 52.6 51.9 53.1 47.8 48.5 47.7 46.3 48.7 conventions 53.8 53.1 54.4 52.9 53.9 47.2 46.2 47.4 45.4 47.3 52.2 51.1 51.9 50.7 51.4 48.6 48.8 49.3 46.8 48.8 51.5 50.3 51.2 51.2 51.6 48.8 48.8 49.5 48.9 49.5 54.8 54.5 55.3 55.3 56.4	50.8 51.3 50.8 50.3 52.5 53.1 49.4 49.8 48.5 47.3 49.5 49.4 52.7 52.0 52.6 51.9 53.1 53.1 47.8 48.5 47.7 46.3 48.7 47.6 conventions 53.8 53.1 54.4 52.9 53.9 55.3 47.2 46.2 47.4 45.4 47.3 47.5 52.2 51.1 51.9 50.7 51.4 52.6 48.6 48.8 49.3 46.8 48.8 48.5 51.5 50.3 51.2 51.2 51.6 50.5 48.8 48.8 49.5 48.9 49.5 50.2 54.8 54.5 55.3 55.3 56.4 55.2	50.8 51.3 50.8 50.3 52.5 53.1 50.9 49.4 49.8 48.5 47.3 49.5 49.4 47.6 52.7 52.0 52.6 51.9 53.1 53.1 53.2 47.8 48.5 47.7 46.3 48.7 47.6 47.3 conventions 53.8 53.1 54.4 52.9 53.9 55.3 54.3 47.2 46.2 47.4 45.4 47.3 47.5 46.7 52.2 51.1 51.9 50.7 51.4 52.6 53.1 48.6 48.8 49.3 46.8 48.8 48.5 49.2 51.5 50.3 51.2 51.2 51.6 50.5 50.4 48.8 48.8 49.5 48.9 49.5 50.2 49.5 54.8 54.5 55.3 55.3 56.4 55.2 55.8

For source and notes, see table 2.4.

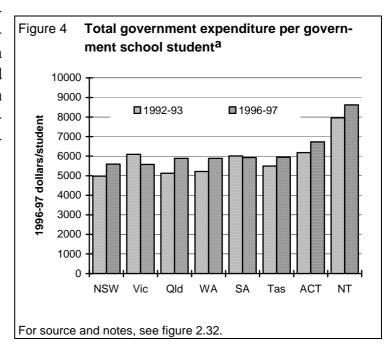
Government expenditure per student

Government inputs per unit of output (unit cost) is a proxy indicator of efficiency. In-school government expenditure per student in government primary schools ranged from \$4510 Victoria to \$6458 in the NT in 1996-97. In-school government expenditure per student in government secondary schools ranged from \$6247 in Tasmania to \$9563 in the NT. Out-of-school departmental overheads per student in government schools ranged from



\$268 in Victoria to \$1304 in the NT (figure 3).

Total government expenditure per student in government schools increased in real terms (that is, adjusted for the effect of inflation) in all jurisdictions except Victoria and SA between 1992-93 and 1996-97 (figure 4).



Chapter 3 Vocational education and training

This report focuses on government funded vocational education and training (VET) services supplied by technical and further education (TAFE) institutes and universities with TAFE divisions, selected adult community education providers and for-profit providers.

The sector conducts two large surveys: the Employer Satisfaction Survey and the Graduate Destination Survey. The results provide useful performance information, but likely sampling errors mean that small differences in results should be treated cautiously (see detailed information on sampling error in attachment 3A).

Publicly funded for-profit and not-for-profit private providers

The proportion of government funding allocated to private providers and adult and community providers varied across jurisdictions in 1997 — Queensland and the NT had the highest proportions (8.1 per cent and 5.2 per cent respectively) and Tasmania and NSW had the lowest (2.7 per cent and 3.4 per cent respectively). All jurisdictions except the NT reported a real increase in government funding of these providers for the delivery of VET services between 1996 and 1997, although the NT remained above the national average for funding purposes (table 2).

Table 2 Government funding to private and adult and community providers of VET, 1997^a

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
1997 government funding	\$m	47.2	35.6	50.0	15.3	14.1	2.6	3.7	3.4	171.9
Proportion of State total	%	3.4	3.8	8.1	4.1	4.9	2.7	4.3	5.2	4.3
Real increase be- tween 1996 and 1997	%	13	40	122	110	70	134	83	- 9	53

For source and notes, see table 3.1.

Completion rates

Three equity target groups (designated by the Australian National Training Authority) reported module completion rates in 1997 that were higher than the national average of 82.4 per cent — people from remote areas (84.6 per cent); people from rural areas (83.3 per cent) and females (82.7 per cent). Tasmania reported the highest module completion rate for indigenous people (87.5 per cent). SA reported the highest module completion rates for people from non-English speaking backgrounds (90.2 per cent), people with a disability (89.4 per cent) and people from rural and remote areas (93.8 per cent and 94.9 per cent respectively) (table 3). Comparisons should be made with care because there are jurisdictional variations in average module durations and competencies achieved by students.

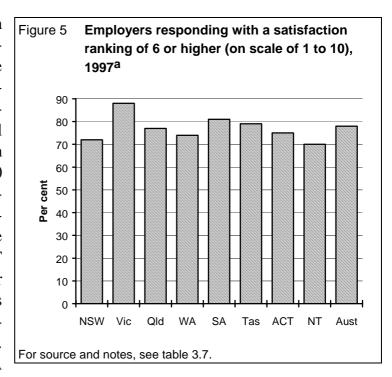
Table 3 Module load completion rate, 1997 (per cent)^a

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Male	80.4	79.7	83.8	89.0	89.9	87.6	80.1	77.9	82.1
Female	80.8	81.4	83.3	88.1	91.6	89.0	81.0	78.7	82.7
All people	80.6	80.5	83.6	88.6	90.6	88.3	80.6	78.2	82.4
Specific needs groups									
Students who reported being indigenous	63.4	66.8	70.0	79.2	86.1	87.5	71.4	71.1	70.1
Students who reported having a disability	76.6	75.9	78.6	84.9	89.4	84.1	74.9	74.4	77.6
Students who reported coming from a non-English speaking background	78.4	76.6	79.9	87.7	90.2	72.2	69.6	77.5	78.6
Rural area students	80.6	82.6	82.7	88.7	93.8	91.1	88.9 b	80.8	83.3
Remote area students	74.6	87.9	85.9	88.6	94.9	88.6	С	80.9	84.6

For source and notes, see table 3.6.

Employer overall satisfaction with VET providers

Employer satisfaction with VET providers is a key performance indicator for these services. The Employer Satisfaction Survey asked employers to rate their 'overall satisfaction' on a scale from 1 (very dissatisfied) to 10 (very satisfied). Of employers surveyed in 1997, Victorian employers were the most satisfied with VET providers. Nationally 78 per cent of surveyed employers reported an overall satisfaction score of 6 or more. Victoria (89 per cent), SA



(81 per cent) and Tasmania (79 per cent) had the highest proportions of employers with a satisfaction ranking of 6 or more (figure 5).

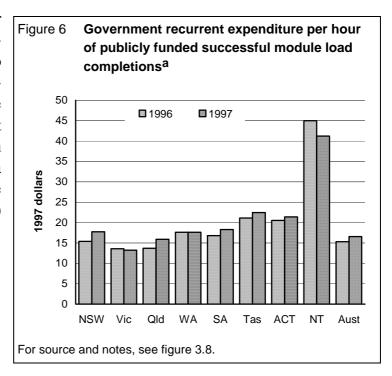
Achievement of main reason for undertaking VET course

The proportion of TAFE insti- Table 4 Whether the VET course helped graduates tute graduates who reported that their course helped or partly helped them to achieve their main reason for doing the course ranged from 76 per cent in the ACT to 82 per cent in both Tasmania and the NT (table 4).

achieve their main reason for doing the course, 1996 (per cent)											
	NSW	Vic	Qld	WA	SA	Tas	ACT	NT.	Aust		
Course helped to achieve main reason	62	62	61	66	66	71	61	69	63		
Course partly helped to achieve main reason	16	16	17	14	15	11	15	13	16		
Course did not help to achieve main reason	7	7	10	8	9	5	8	4	8		
Did not know yet	13	13	11	10	8	10	15	11	12		
For source and notes, see table 3.11.											

Government expenditure per publicly funded module completion

Government expenditure per publicly funded module completion measures the cost to government of each successfully completed VET module (that is, the cost per output produced). The unit cost in 1997 was lowest in Victoria (\$13.22) and highest in the Northern Territory (\$41.20) (figure 6).



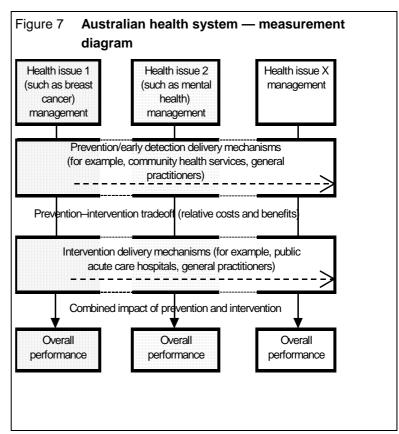
PART C HEALTH

Health care services in Australia are delivered by a range of providers in a range of settings. This Report has now been expanded to include general practitioners and to examine the interactions between different service types in dealing with particular health issues (mental health and breast cancer) as well as continuing to report on the performance of public acute care hospitals (the largest component of government spending on health).

The lack of generally accepted indicators of the quality of Australia's health care services continues to be a major concern. The Steering Committee still reports all available information (despite both the indicators and the underlying data being far from ideal) pending the development of better quality indicators.

Performance measurement in health

Measuring performance in the health system is a complex task; success requires that the appropriate mix of service providers (such as hospital based and community based providers) offer the appropriate mix of service types (such as prevention and intervention services), and that all service provision is efficient and effective. The measurement approach adopted in this Report is to break the health system into smaller components and measure their individual performance (figure 7).



Aboriginal and Torres Strait Islander access to mainstream health care services

In May 1997, the Prime Minister requested that the Steering Committee give priority to developing indicators that measure the performance of mainstream services in meeting the needs of indigenous Australians.

Most data on health care services are obtained via administrative collections, of which few distinguish between indigenous and non-indigenous users. Further, the definition of indigenous people varies across jurisdictions, as does the approach to self identification. The Report has not yet been able to include any health performance indicators for indigenous Australians.

Chapter 4 Health delivery mechanisms

The performances of public acute care hospitals and general practitioners are presented separately, and at this stage there is no attempt to explore the links between these two service types. The framework and data for general practitioners are reported here for the first time, along with new data on the appropriateness of public acute care hospital services.

Public acute care hospitals

Public acute care hospitals provide a range of health services, including acute, non-acute and outpatient services. The data presented largely relate to acute care services provided to admitted patients. These services comprise the bulk of public hospital services, although public acute care hospitals also provide services to non-acute patients. Thus, the data in this Report also relate to some non-acute care services because most jurisdictions are currently unable to separately identify all acute and non-acute care services.

Reporting of quality information

The Steering Committee is committed to reporting comparable public acute care hospital quality information for all jurisdictions. Currently, no comparable information is available, thus the Report contains noncomparable 'jurisdiction specific' information. Further, there has been little change in the extent of non-comparable information available since the first Report in 1995 (table 5).

Table 5 Quality of care data provided by jurisdictions for public acute care hospitals

	Patient sa tio		Unplanı re-admiss hospit	ion to	Unplanned re		Hospital acquired infection rates		
Report year:	1995	1999	1995	1999	1995	1999	1995	1999	
NSW	✓	×	×	×	×	×	×	×	
Vic	\checkmark	\checkmark	\checkmark	\checkmark	*	×	×	×	
Qld	\checkmark	×	×	×	*	×	×	×	
WA	\checkmark	×	×	\checkmark	×	×	×	\checkmark	
SA	×	×	\checkmark	\checkmark	×	×	×	\checkmark	
Tas	×	\checkmark	✓	\checkmark	✓	×	✓	✓	
ACT	✓	\checkmark	✓	\checkmark	✓	×	✓	✓	
NT	×	\checkmark	\checkmark	\checkmark	\checkmark	×	\checkmark	✓	

For source and notes, see table 4.2.

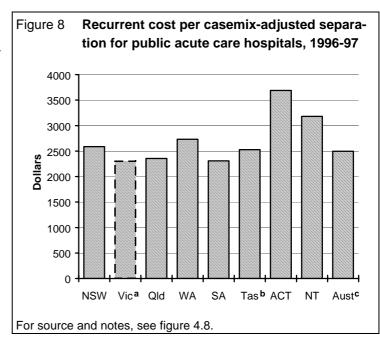
Emergency department waiting times

This indicator measures the proportion of patients treated within the time limits set for each 'triage' category (level of urgency). Jurisdictions reported the following results for 1996-97:

- in NSW, the proportions of patients treated on time were: 92 per cent of category 1 patients (those needing resuscitation); 73 per cent of category 2 (emergency) patients; 68 per cent of category 3 (urgent) patients; 73 per cent of category 4 (semi-urgent) patients; and 93 per cent of category 5 (non-urgent) patients;
- in Victoria, for the largest 20 hospitals combined, the proportions of patients treated on time were: 100 per cent of category 1 patients; 78 per cent of category 2 patients; and 76 per cent of category 3 patients; and
- in Queensland, the proportions of patients treated on time for two metropolitan hospitals were: 98 per cent of category 1 patients; 74 per cent of category 2 patients; and 74 per cent of category 3 patients.

Recurrent costs per casemix-adjusted separation

The estimated cost per casemix-adjusted separation for Victoria was \$2304. If Victoria's mainstreamed psychiatric and other non-acute services were included, then the cost per casemix-adjusted separation for that jurisdiction was \$2353 (see Box 4.2 for a discussion of the Victorian data). Estimates for the other iurisdictions ranged from \$2309 in SA to \$3689 in the ACT (figure 8).



General practice

General practitioners provide important primary care services by acting as the main port of entry to the health care system, coordinating and integrating health care services on behalf of clients, and providing continuity of care.

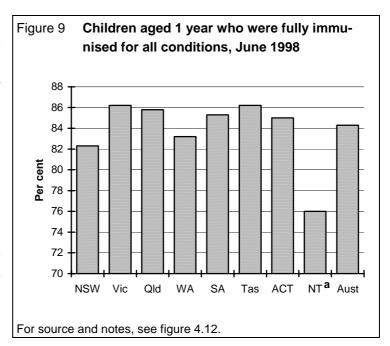
General practitioners in Australia fulfil a broad range of medical functions such as diagnosing and treating illness (both chronic and acute), maintaining long term health, maintaining continuity of care and acting as a gatekeeper for other health care services. The most common reasons for visiting a general practitioner were to obtain a check-up (8.3 per cent of reasons), coughs (6.2 per cent) and to obtain a prescription (5.7 per cent)

The performance indicators framework for general practice (included for the first time) reports the effectiveness and efficiency with which general practitioners deliver primary health care services (figure 10). Effectiveness indicators relate to four broad categories: outcomes, appropriateness, quality, and access and equity. Efficiency is measured in terms of unit cost.

Child immunisation

Child immunisation rates are one outcome indicator for the performance of general practitioners in providing primary care, given that most children are immunised in doctors' surgeries (ABS 1995).

Based on the Australian Childhood Immunisation Register across Australia, 84.3 per cent children aged 1 year were fully immunised at June 1998 (figure 9). Across Australia, the proportion of children who were



fully immunised rose by 7.6 percentage points between September 1997 and June 1998. The largest rise (21.0 percentage points) was recorded in the NT, followed by WA (12.7 percentage points).

INDICATORS Immunisation coverage Disease Outcomes prevention Cervical cancer screening rates for target population Acute illness Standardised separation ratios management selected short term illnesses Standardised separation ratios - selected chronic illnesses Chronic illness management Prescribing rates for mental illness Standardised separation ratios - selected conditions often requiring secondary treatment Gatekeeping to Appropriateness secondary care Standardised separation ratios - selected conditions often not requiring secondary treatment Effectiveness Per capita benefits paid for nonspecialist ordered pharmaceuticals Per capita benefits paid for Prescribing and nonspecialist ordered diagnosis pathology Per capita benefits paid for nonspecialist ordered diagnostic imaging Continuity and Proportion of practices with coordination of electronic information care management systems Proportion of FTE GPs with PERFORMA NCE Quality vocational registration Patient satisfaction Proportion of nonspecialist attendances bulk billed FTE nonspecialist medical Access and practitioners in rural/remote equity areas Proportion of FTE GPs w ho are female Efficiency Cost per occasion of service Unit cost Key to indicators Provided on a comparable basis for this Report Incomplete or not strictly comparable Yet to be developed or not collected for this Report

Figure 10 Performance indicators for general practice and primary care

Chapter 5 Health management

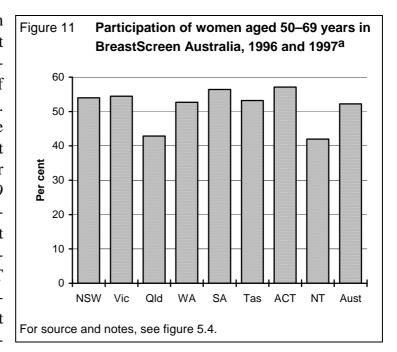
The ability of health care providers to offer integrated services is best measured by concentrating on particular health issues. The health management issues discussed in this chapter are breast cancer management and mental illness management.

Breast cancer control

Breast cancer was the most common cancer afflicting Australian women in 1996, with over 9800 new cases diagnosed. Breast cancer was also responsible for 2602 deaths in 1997, making it the most common cause of cancer deaths among females (ABS 1999). The focus of breast cancer control is on screening and early detection, because cancers detected early are much easier to treat and patients have a higher likelihood of a full recovery.

Participation rate in breast cancer screening

The participation of women in the target group in breast cancer screening is an indicator of the effectiveness of detection early programs. Participation of women in the target age group was highest in the ACT (where 57.1 per cent of women aged 50-69 years were involved) followed by SA (56.4 per cent of the target group). By contrast, Queensland and the NT recorded the lowest participation rates (42.9 per cent and 42.0 per cent respectively) (figure 11).

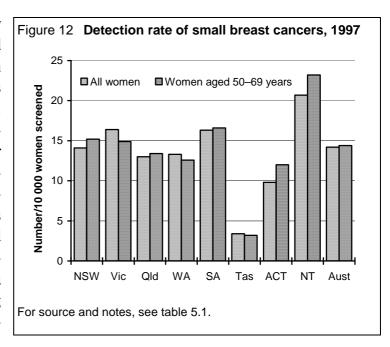


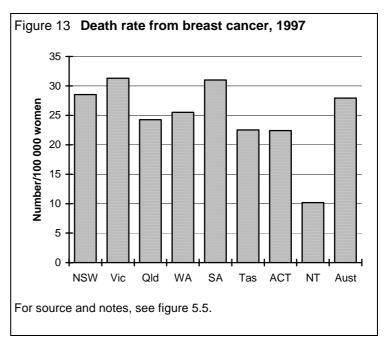
Detection rate

Small cancers are generally associated with increased survival rates and thus are an indicator of the effectiveness of early detection programs. There was significant variation in the small cancer detection rate across jurisdictions in 1997. The number of small invasive cancers per 10 000 women screened was 23.2 in the NT, compared with 3.2 in Tasmania (figure 12). The remaining jurisdictions recorded detection rates of 12 to 17 small cancers for every 10 000 women screened.

Deaths from breast cancer

The number of deaths from breast cancer per 100 000 women for Australia was 27.9 in 1997 (figure 13). Across jurisdictions, Victoria and SA recorded the highest rates of deaths from breast cancer (31.3 and 31.0 deaths per 100 000 women respectively) and the NT recorded the lowest rate (10.2 deaths per 100 000 women).





Mental health

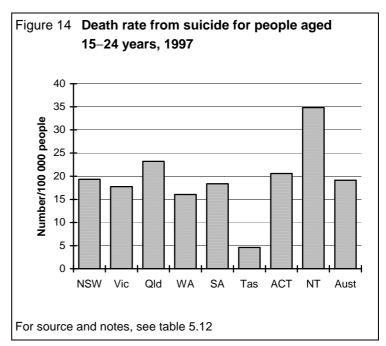
Mental illness refers to a group of illnesses such as depression, mania, eating disorders (anorexia and bulimia), anxiety, phobias, schizophrenia and other psychoses, and drug and alcohol addiction. It is estimated that mental illness will affect one in five Australians at some stage of their lives and 10–15 per cent of young people in any one year. Episodes range from mild or temporary for some people, to severe and prolonged for others, with most requiring some form of treatment (such as counselling and/or pharmacotherapy) (DHFS 1998).

New framework for mental health

The framework of performance indicators for mental health services builds on the objectives for the National Mental Health Strategy. The framework measures the effectiveness (in terms of quality, appropriateness, access and outcomes) and efficiency (in terms of unit cost) of mental health services (figure 15). It covers a number of service delivery types (institutional and community based services) and indicators of systemwide performance.

Death rate from suicide

The high proportion of deaths of people aged 15–24 years (especially males) attributable to suicide prompted governments to establish specific mental illness and suicide prevention programs for this group. The NT recorded the highest death rates from suicide in 1997 (34.8 deaths per 100 000 people) while Tasmania recorded the lowest (4.6 deaths per 100 000 people) (figure 14).



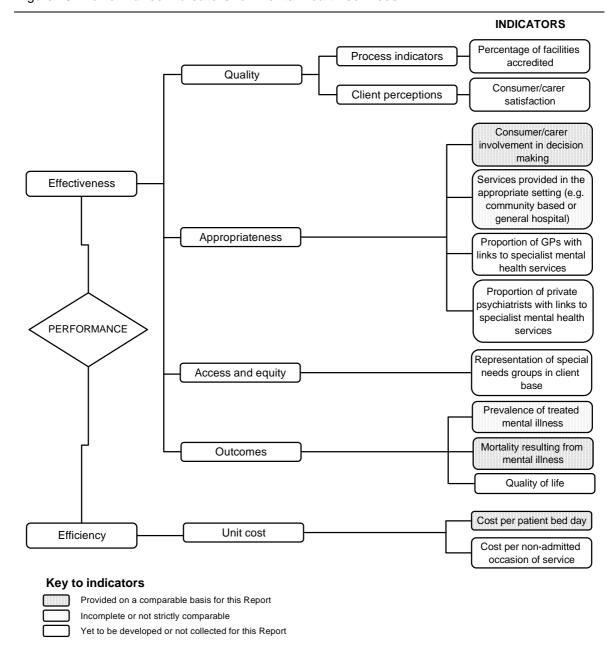


Figure 15 Performance indicators for mental health services

PART D JUSTICE

The justice system comprises services and agencies dealing with crime and civil disputes, including crime detection and prevention, law enforcement, judicial processes and dispute resolution, offender containment and rehabilitation services. The focus here is on the core services of police, court administration and corrective services.

Individuals who pass through the criminal justice system generally interact in succession with police, courts and corrections. Given the integrated nature of the justice system, some aspects of performance cannot be attributed to any one agency and some performance indicators reflect the combined influence of many services. Recidivism — the extent to which persons passing through the criminal justice system re-offend — is such an indicator.

Recidivism

The preferred indicator of recidivism is the return to any form of correctional services supervision within two years of release from prison (for prison recidivism) or within two years of completing a community corrections order or program (for community corrections recidivism). However, not all jurisdictions were able to report on this definition in 1997-98. Tasmania reported the lowest rate of return to prisons by prisoners that year (23.0 per cent) and WA reported the highest rate (37.0 per cent). Of the four jurisdictions able to provide data on prisoner returns to corrections as a whole, Queensland reported the lowest rate (32.9 per cent) and SA reported the highest rate (40.9 per cent) (table 6).

Table 6 Recidivism — proportion of prisoners/offenders re-offending within two years of release or order completion, 1997-98 (per cent)

		,	(,				
	NSW	Vic	Qld	WA	SA	Tas	ACT	NT
Prisoners returning to corrections	na	36.0	32.9	na	40.9	na		35.3
Prisoners returning to prisons only	35.1	27.6	25.8	37.0	29.4	23.0		na
Community corrections offenders returning to corrections	na	na	12.9	na	35.1	na	14.8	12.2
Community corrections offenders returning to community corrections only	na	na	6.7	25.6	29.6	na	na	na

For source and notes, see table D.1.

Chapter 6 Police

State and Territory Governments provide police services to pursue their law enforcement objectives: to protect, help and reassure the community; to prevent crime; and to enforce the law.

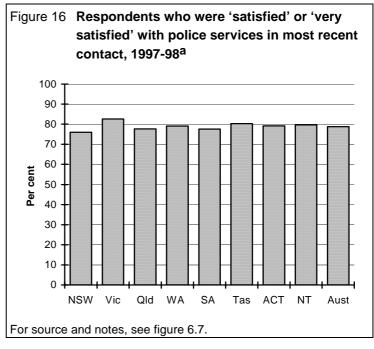
Some information reported in this section is based on sample data. The results provide useful performance information, but likely sampling errors mean that small differences in results should be treated cautiously (see attachment 6A).

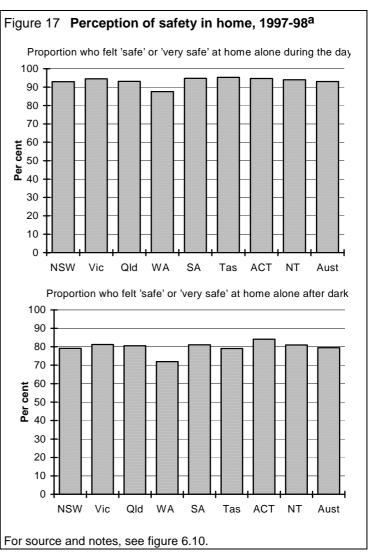
Satisfaction with police

Nationally, of persons aged 18 years and over who had contact with police in 1997-98, 79 per cent were 'satisfied' or 'very satisfied' with the service they received during their last contact with police. This proportion ranged from 83 per cent in Victoria to 76 per cent of persons in NSW (figure 16).

Perceptions of safety

Perceptions of safety ranged from 95 per cent of persons aged 18 years or over who felt 'safe' or 'very safe' at home during the day alone Victoria, SA, Tasmania and the ACT, to 88 per cent in WA (figure 17). Nationally 80 per cent of persons felt 'safe' or 'very safe' at home alone after dark. Across jurisdictions, this proportion ranged from 84 per cent in the ACT to 72 per cent in WA (figure 17).





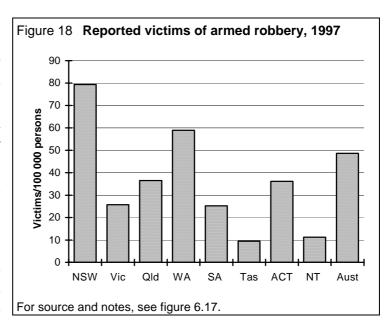
Armed robbery

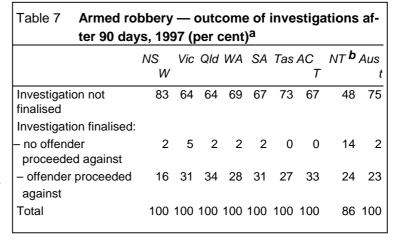
Nationally, there were 48.6 reported victims of armed robberies per 100 000 people in 1997. This ranged from 79.3 reported victims per 100 000 in NSW to 9.5 reported victims per 100 000 in Tasmania (figure 18).

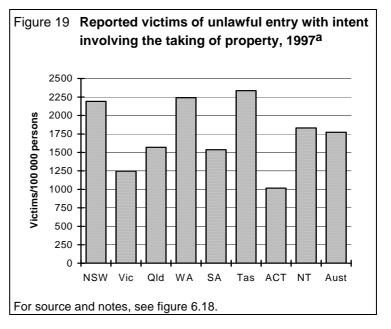
Nationally 25 per cent of investigations into reported armed robbery were finalised within 90 days of the offence becoming known to police in 1997. The rate of finalisation of investigations ranged from 38 per cent in the NT to 18 per cent in NSW. Across Australia, proceedings against an alleged offender occurred within 90 days in 23 per cent of cases. Across jurisdictions, 34 per cent of proceedings in Queensland commenced within 90 days compared with 16 per cent in NSW (table 7).

Unlawful entry

Nationally, there were 1775 reported victims per 100 000 persons of unlawful entry with intent involving the taking of property in 1997. The incidence in that year varied from 2336 recorded victims per 100 000 persons in Tasmania, to 1018 in the ACT (figure 19).







Across Australia, 8 per cent of investigations into reported unlawful entry with intent involving the taking of property were finalised within 90 days of the offence becoming known to police. The rate of finalisation of investigations varied from 14 per cent in the NT to 6 per cent in NSW.

Table 8	Unlawful entry with intent involving the taking of
	property — outcome of investigations after 90
	days, 1997 (per cent) ^a
	•

	NS W	Vic	Qld	WA	SA	Tas	AC T	NT b	Aus t
Investigation not finalised	94	90	89	91	91	93	93	78	92
Investigation finalised:									
no offender proceeded against	1	1	1	1	1	0	1	1	1
offender pro- ceeded against	5	10	10	7	8	7	6	13	7
T	400	400	400	400	400	400	400	00	400
Total	100	100	100	100	100	100	100	92	100

Nationally, proceedings against an alleged offender

For source and notes, see table 6.9.

commenced within 90 days in 7 per cent of cases. Proceedings commenced within 90 days in 13 per cent of investigations in the NT compared with 5 per cent in NSW (table 8).

Chapter 7 Court administration

Court administration agencies work with the judiciary to provide a court system that allows for the prompt resolution of disputes and appropriate access to justice for the community.

Lodgments

The majority of matters initiated in the lower courts were criminal cases, while civil cases outnumbered criminal prosecutions in the superior courts. Victoria and Tasmania had the highest proportion of criminal matters in their magistrates' courts (99.1 per cent), followed by SA (98.9 per cent). Tasmania had the highest proportion of civil cases in its Supreme Court (20.9 per cent), followed by the ACT (10.3 per cent) (table 9).

Table 9 Proportion	Table 9 Proportion of court lodgments, by court level, 1997-98 (per cent) ^a												
	NSW	Vic	Qld	WA	SA	Tas	ACT ^b	NT	Cwlth	Total			
Criminal													
Magistrates' courts	97.4	99.1	97.1	98.8	98.9	99.1	97.8	98.6		98.3			
District/county courts	2.4	0.8	2.6	1.1	8.0					1.5			
Supreme court	0.2	0.1	0.4	0.2	0.3	0.9	2.2	1.4		0.3			
All courts	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0		100.0			
Civil													
Magistrates' courts	91.9	92.3	92.6	88.4	92.4	79.1	89.7	91.2		90.8			
District/county courts	4.9	5.1	6.2	8.5	4.5					5.2			
Supreme court	3.1	2.6	3.9	3.1	3.1	20.9	10.3	8.8		4.5			
All courts	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0		100.0			

For source and notes, see table 7.2

Timeliness

Timeliness is the duration between the lodgment of a matter with the court and its finalisation. The criminal jurisdiction of the magistrates' courts in all States and Territories finalised at least 96 per cent of cases within six months in 1997-98. The finalisation rate ranged from 98 per cent of cases in Victoria to 70 per cent in the ACT. The civil jurisdiction of the magistrates' courts in all States and Territories finalised at least 88 per cent of cases within six months in 1997-98. The finalisation rate ranged from 98 per cent of cases in Victoria to 80 per cent in the ACT. Case finalisation times were longer in the civil jurisdiction, reflecting the different case flow management practices and the priority given to criminal matters.

District/county courts in all States and Territories finalised 68 per cent of criminal cases within six months. This ranged from 83 per cent of cases in Queensland to 40 per cent in NSW. District/county courts in all States and Territories finalised 18 per cent of civil cases within six months. This finalisation rate ranged from 38 per cent of cases in SA to 8 per cent in NSW (table 10).

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Cwlt h	Avg
Criminal									 -	
Magistrates' court										
<6 months	97	98	97	92	94	88	70	87		96
6-12 months	2	1	1	6	4	11	20	8		3
12-18 months	0	0	1	1	1	1	5	2		1
>18 months	0	0	1	1	1	0	5	3		1
District/county court										
<6 months	40	70	83	67	67					68
6-12 months	33	20	11	17	23					19
12-18 months	13	7	4	13	5					8
>18 months	14	3	2	4	4					5
Civil										
Magistrates' court										
<6 months	87	98	83	na	83	na	80	82		88
6-12 months	9	1	10	na	10	na	11	8		7
12-18 months	2	0	3	na	4	na	4	3		2
>18 months	2	0	4	na	3	na	5	7		2
District/county court										
<6 months	8	19	25	30	38					18
6-12 months	31	22	15	19	24					24
12-18 months	17	37	15	12	14					20
>18 months	45	23	46	40	24					37

For source and notes, see table 7.7

Efficiency indicators

Nationally, real expenditure per lodgment in the criminal jurisdiction decreased by 23 per cent in real terms between 1994-95 and 1997-98, and unit costs in the civil jurisdiction rose by 4 per cent. There were significant changes to the unit costs of individual courts. Expenditure per criminal case fell in the Victorian and Tasmanian supreme courts, for example. Expenditure per criminal case also fell in the WA district courts while expenditure per civil case increased in the NSW district court and the Federal Court (table 11). (The scope of the Federal Court's jurisdiction changed over this period.).

Table 11 Change in real expenditure per lodgment, 1994-95 to 1997-98 (per cent)^a

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Cwlth	Avg
Criminal										
Magistrates' courts	-20	-17	-10	-21	-26	-39	26	6		-18
District/county courts	-18	-9	-15	-33	31					-15
Supreme court	-12	-31	5	16	-11	-36	22	-24		-11
All courts	-22	-11	-15	-35	-29	-42	39	-15		-21
Civil										
Magistrates' courts	0	61	-14	-35	-6	-25	35	-30		2
District/county courts	184	22	-15	-23	-27					37
Supreme/federal court	35	11	-32	-3	82	72	-7	-72	250	59
All courts	20	33	-16	-20	-1	32	31	-38	250	10
Family Court				-22					-8	-10
Criminal and civil										
Magistrates' courts	-15	3	-8	-28	-21	-28	33	-11		-12
District/county courts	24	7	-15	-27	-4					3
Supreme court	27	12	-22	-1	54	26	4	-55	254	48

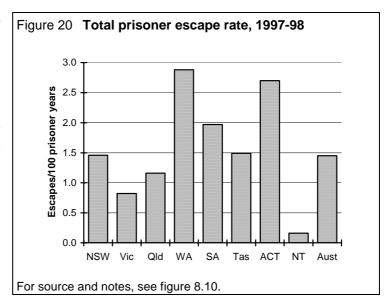
For source and notes, see table 7.10

Chapter 8 Corrective services

The private sector in many jurisdictions delivers some correctional services. However, governments are clearly responsible for the overall management of the corrective services system, whether corrective services are actually delivered by private contractors or government operated corrective facilities. The framework of performance indicators adopted in this Report reflects governments' responsibilities both as managers of the corrections systems and as operators of correctional facilities.

Escapes

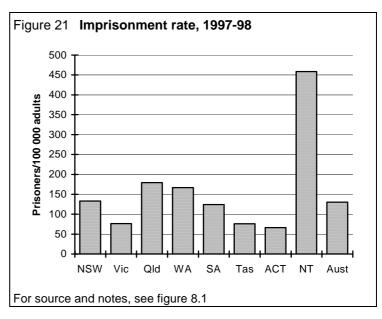
The NT reported the lowest rate of total prisoners escaping or absconding (0.16 prisoners escaping or absconding per 100 prisoner years) in 1997-98, and WA reported the highest rate (2.88) (figure 20).

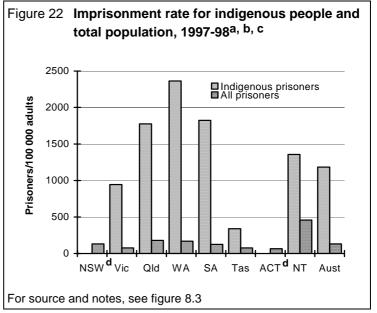


Imprisonment rates

The rate of imprisonment (that is, the number of prisoners excluding periodic detainees per 100 000 of the general population aged over 17 years) in 1997-98 ranged from 66.5 in the ACT to 458.6 in the NT (figure 21).

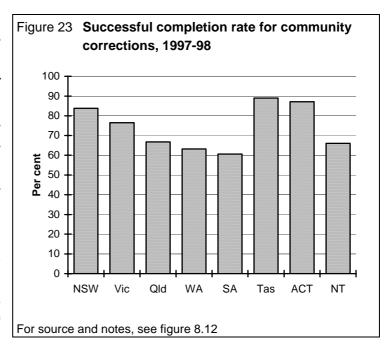
The imprisonment rate per 100 000 Aboriginal Torres Strait Islander adult population was between three times (the NT) and 15 times (SA) the rate for the total population. NSW and the ACT were unable to report on indigenous prisoner numbers in 1997-98 (figure 22). However, the relatively high proportion of indigenous people in the NT meant that the number of indigenous prisoners strongly influenced the 'all prisoner' imprisonment rate.





Completion of community orders

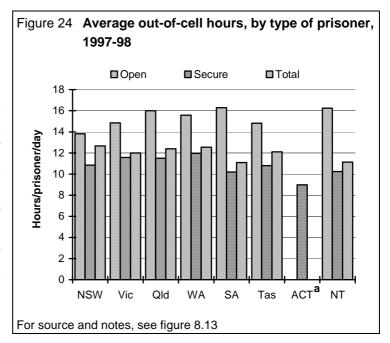
The key indicator of containment and supervision for community corrections successful completion community orders. However, because 100 per cent order completion could mean either exceptionally high compliance or a failure to detect or act on breaches of compliance, jurisdictional comparisons should be made with caution. For total orders, completion rates ranged from 60.6 per cent in SA to 89.0 per cent in Tasmania in 1997-



98 (figure 23). For supervision orders, successful completion rates ranged from 62.2 per cent in Victoria to 92.9 per cent in Tasmania.

Out-of-cell hours

This is an indicator of offender care. The lowest number of average daily out-ofcell hours for all prisons in 1997-98 was reported by SA and the NT (11.1 hours)and the highest was reported by (12.7 hours) NSW (figure 24). Out-of-cell hours for secure custody ranged from 9.0 in the ACT to 12.0 in WA. The hours for open custody ranged from 13.8 in NSW to 16.3 in both SA and the NT.



PART E EMERGENCY MANAGEMENT

Chapter 9 Emergency management

Emergency management encompasses the services provided by or on behalf of governments for a wide range of emergencies. However, at this stage, Report coverage is confined to two common forms of emergencies: structural fires and medical emergencies. This is the first year that performance information has been reported for a number of indicators, so the results of these indicators should be treated with caution. It is anticipated that differences between definitions and counting rules

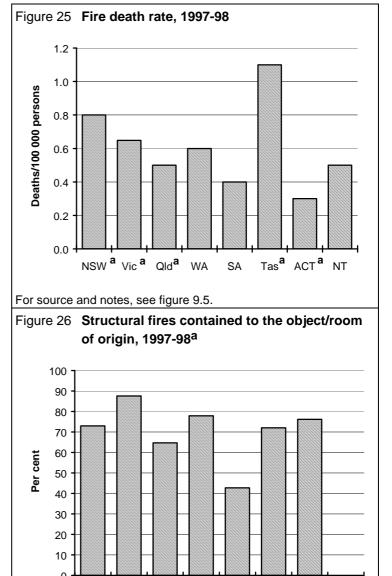
across jurisdictions will be reduced for future Reports.

Fire death rate

The fire death rate is an indicator of the effect of fire on human life. The fire death rate was highest in Tasmania, with 1.1 deaths per 100 000 persons in 1997-98, and lowest in the ACT, with 0.3 deaths per 100 000 persons (figure 25).

Response

The proportion of structural fires contained to the object or room of origin was highest in 1997-98 in Victoria (metropolitan fire services only, with 88 per cent) and lowest in SA (metropolitan fire services only, with 43 per cent) (figure 26).



NSW a Vic b

For source and notes, see figure 9.15.

Qld c

WAC

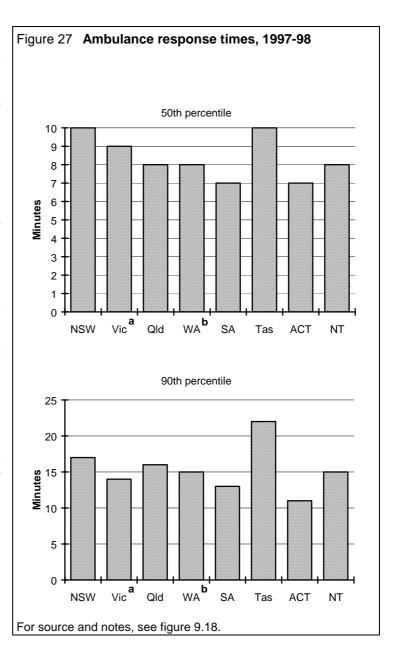
Tas e ACT f

 $_{\mathsf{SA}}\textbf{d}$

Ambulance response times

The 50th percentile response time refers to the time within which 50 per cent of first ambulance resources attending the scene actually responded. This response time in 1997-98 was highest in NSW and Tasmania (10 minutes) and lowest in the ACT and SA (both 7 minutes) (figure 27).

The 90th percentile response time refers to the time within which 90 per cent of first ambulance resources attending the scene actually responded. This response time in 1997-98 was highest in Tasmania (22 minutes) and lowest in the ACT (11 minutes) (figure 27).



PART F COMMUNITY SERVICES

Government community services supplement support provided by the non-government sector or informally through family, friends and the community as a whole. Community services covered in this Report are child care services, aged care services, disability support, and protection and support services (encompassing child protection, supported placements, and supported accommodation and assistance).

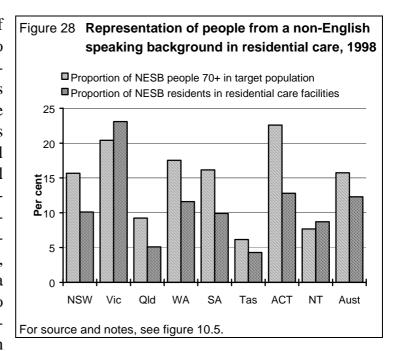
Chapter 10 Aged care services

The Report's coverage of the aged care sector focuses on services provided to frail older people. The main services include residential services (for clients in nursing homes and hostels), respite services, community services and assessment services.

The ACT and the NT have the lowest proportions of older people in their populations and SA has the highest proportion. Other jurisdictions have reasonably similar population age distributions.

Disadvantaged groups

A key national objective of the aged care system is to provide equal access to appropriate support services for all people who require those services. Indigenous people were generally well represented in residential care facilities in 1998. However, people from non-**English** speaking backgrounds were, on average, underrepresented. Victoria was the only jurisdiction to report a proportion of resinon-English from



speaking backgrounds that was above the population share of this target group (figure 28).

Waiting times

Measuring waiting times is a complex task. An understanding of the complexities (such as what the time period actually measures) facilitates correct interpretation of the data (see chapter 10, box 10.4).

Waiting times between assessment and placement averaged 31 days for a nursing home place in 1996-97, with 92 per cent of these people being placed within 90 days of assessment. Seventy-nine per cent of people in NSW were placed within 30 days, compared with 46 per cent in the NT (table 12).

Table 12 Waiting times — permanent nursing home residents, 1996-97

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Share placed in	under:									
2 days	%	34	14	22	24	25	25	16	13	25
30 days	%	79	66	78	74	72	64	52	46	74
60 days	%	88	81	90	87	87	81	76	58	86
90 days	%	93	88	96	92	92	88	86	75	92
120 days	%	95	92	97	94	94	91	89	79	94
Average wait	days	26	41	22	31	32	42	57	82	31

For source and notes, see table 10.8.

Waiting time for hostel places averaged 108 days — more than three times longer than people waiting for nursing home places. Eighty-six per cent of people in the NT waiting for hostel places were placed within 90 days, compared with 49 per cent in the ACT (table 13).

Table 13 Waiting times — permanent hostel residents, 1996-97

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Share placed in	under:									
2 days	%	9	9	10	7	6	12	4	16	9
30 days	%	52	49	39	50	43	43	24	58	47
60 days	%	66	64	54	66	56	57	40	79	61
90 days	%	73	72	61	75	64	63	49	86	69
120 days	%	77	77	67	80	71	73	61	86	75
Average wait	days	94	98	145	91	123	103	146	58	108

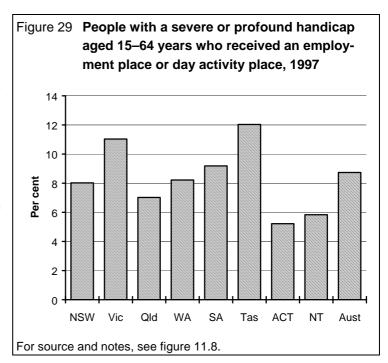
For source and notes, see table 10.9.

Chapter 11 Disability services

Reporting for disability services focuses on services provided under the Common-wealth/State Disability Agreement (CSDA). A primary objective for government services for people with a disability is to enhance clients' quality of life.

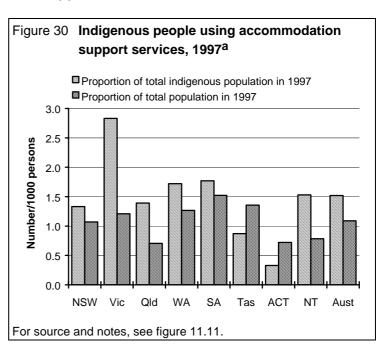
Day activities

Nationally 28 707 people with a severe or profound handicap aged 15–64 years (or 9 per cent) received either an employment place or a day activity each day in 1997. Tasmania had the highest proportion of recipients (12 per cent) on the snapshot day, and the ACT had the lowest (5 per cent) (figure 29).



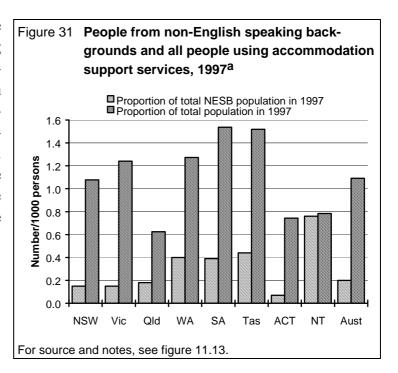
Indigenous use of accommodation support

In 1997, a higher proportion of the indigenous population than of the general population used accommodation support services in all jurisdictions except Tasmania and the ACT. The proportion of the indigenous population using accommodation support services was highest in Victoria (2.8 per 1000 persons) and lowest in the ACT (0.3 per 1000 persons) (figure 30).



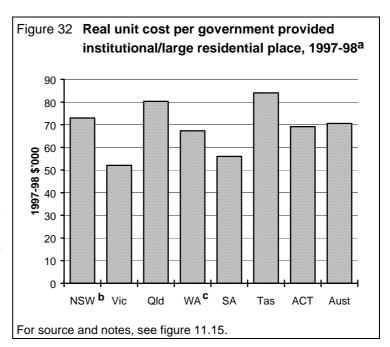
Use of accommodation support by clients from non-English speaking backgrounds

The proportion of people from non-English speaking backgrounds using accommodation support services in 1997 was lower than the proportion of the general population for all jurisdictions. The largest differences were in Victoria and SA and the smallest difference was in the NT (figure 31).



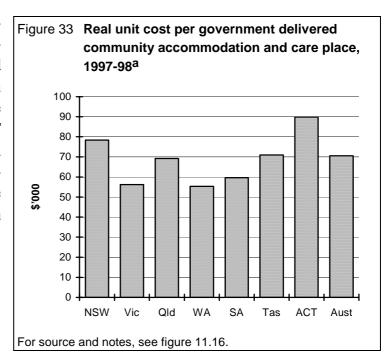
Unit cost of government institutional care

The average cost to government of delivering institutional/large residential commodation was \$70 575 per place in 1997-98. Across jurisdictions, the highest expenditure instituper tional/large residential commodation place was in Tasmania (\$84 078) and the lowest expenditure was in the Victoria (\$52 099). The NT Government did not provide this type of accommodation. (figure 32).



Unit cost of government community accommodation and care

Nationally, the cost per government delivered community accommodation and care place was \$70 521 in 1997-98. The cost per place was highest in the ACT (\$89 874) and lowest in WA (\$55 320). The NT Government did not directly provide community accommodation and care places (figure 33).

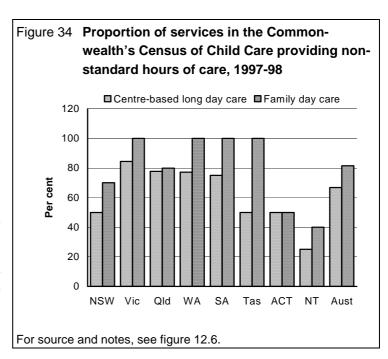


Chapter 12 Children's services

Government services provided for children include formal child care (such as before school hours care and vacation care) and preschool. These services seek to provide appropriate care to children, and to foster their educational and social development.

Extent to which children's services meet family needs

The proportion of centre based long day care services offering nonstandard hours of care in 1997-98 ranged from 25.0 per cent (the NT) to 84.4 per cent (Victoria); the proportion of family day care services offering nonstandard hours ranged from 40 per cent (the NT) to 100 per cent (Victoria, WA, SA and Tasmania) (figure 34).



Chapter 13 Protection and support services

Protection and support services are provided to individuals and families, with the aim of alleviating difficulties and reducing the potential for recurrence. The specific services covered in this Report are child protection, supported placement (or out-of-home care), and supported accommodation and assistance.

Developments in outcome measures for child protection and supported placements

The Steering Committee commissioned in May 1998 an international literature review and critical analysis of child protection and supported placement outcome measures.

The literature review noted that development and implementation of outcome indicators are still in their infancy. The general consensus in the literature is that a range of indicators and a range of data collection strategies are required to adequately describe the effectiveness of an intervention program. The literature review will assist the development of improved outcome indicators for child protection and supported placement services. It is anticipated that data may be available for reporting on some new indicators for the 2000 Report.

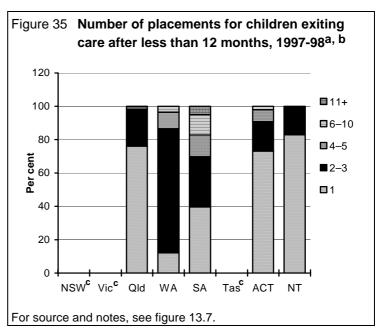
Supported placements

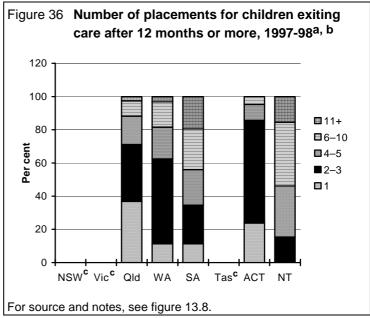
Placements in out-of-home care

Stability of placement for children placed away from their families is an important indicator of service quality, particular for those children who require long term placements. Data were collected on the number of placements for children who had exited out-of-home care in 1997-98. Data were grouped according to the length of time in care.

Most children in Queen-sland, the ACT and the NT who exited out-of-home care in 1997-98 and who had been in such care for less than 12 months had only one placement. In SA, 40 per cent of children had more than one placement. In WA, 74 per cent of children had two or three placements (figure 35).

In WA and the ACT, most children who had been in out-of-home care for 12 months or more had two or placements (51 per three cent and 62 per cent respectively). In SA and the NT, most children had six to 10 placements (25 per cent and 38 per cent respectively). The proportion of children who had been in out-ofhome care for 12 months or more with six placements or more ranged from 5 per cent in the ACT to 54 per cent in the NT (figure 36).



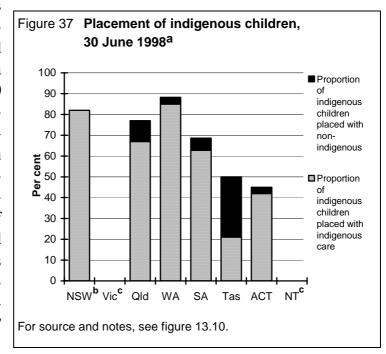


Placement of indigenous children

The Aboriginal Child Placement Principle has the following order of preference for placement of Aboriginal children: with the child's extended family; within the child's Aboriginal community; or with other Aboriginal people (NSW Law Reform Commission 1997).

All jurisdictions have adopted this principle either in legislation or policy.

The proportion of indigenous children placed with indigenous care providers ranged from 21 per cent in Tasmania to 85 per cent in WA at 30 1998. June Placing digenous children with nonindigenous relatives or kin also complies with the Aboriginal Child Placement Prin-The proportion indigenous children placed with non-indigenous relatives or kin was highest in Tasmania (29 per cent) and lowest in WA and the ACT (3 per cent) (figure 37).



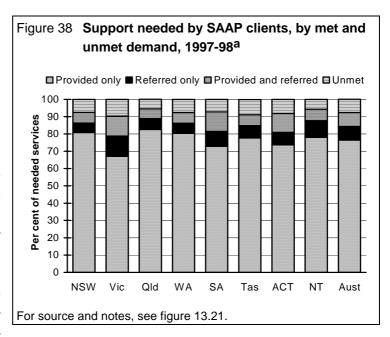
Supported accommodation and assistance

The Supported Accommodation and Assistance Program (SAAP) aims to assist people who are homeless or at imminent risk of becoming homeless.

Provision of appropriate services

The proportion of clients receiving services they need is an indicator of appropriateness. Data are collected on which services were needed by clients, and whether these services were provided or clients were referred to another SAAP agency.

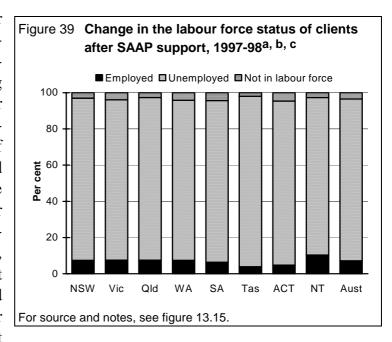
The proportion of clients who received needed services or were referred to another



SAAP agency for needed services was 92 per cent in 1997-98. The proportion ranged from 90 per cent in Victoria to 94 per cent Queensland and the NT.

Change in labour force status

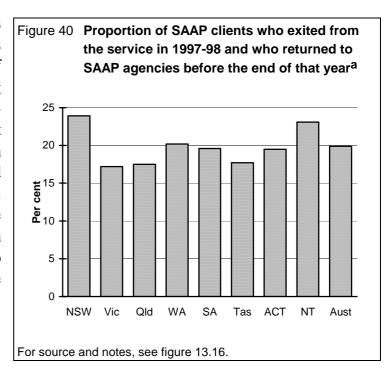
An important outcome for SAAP is clients' achievement of self reliance and independence. Gaining employment is an indicator of this achievement. Nationally, only 46 per cent of people in a support period were participating in the workforce in 1997-98. For clients who were unemployed when entering SAAP, 7 per cent were employed at the end of the support period (3 per cent full time, 2 per cent part time and 2 per cent



on a casual basis), 89 per cent remained unemployed and 4 per cent were not in the labour force. Across jurisdictions, the proportion of clients who achieved employment ranged from 4 per cent in Tasmania to 10 per cent in the NT (figure 39).

Returns to supported accommodation

The proportion of clients who return to SAAP services indicator another whether clients are achieving self reliance and independence. Nationally 20 per cent of clients who exited from SAAP in 1997-98 returned before the end of the year. jurisdictions, Across proportion ranged from 17 per cent in Victoria to 24 per cent in NSW (figure 40).



PART G HOUSING

Chapter 14 Housing

Commonwealth, State and Territory Governments fund and deliver a range of housing assistance services which aim to provide choice for low income individuals and families and to assist those who are unable to access the private rental market for reasons such as discrimination or special needs. The two main types of assistance are housing programs and Commonwealth Rent Assistance.

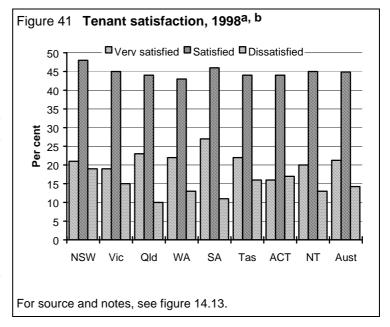
New framework for Commonwealth Rent Assistance

A framework of performance indicators for Commonwealth Rent Assistance is included for the first time (figure 42). The suite of performance indicators outlined combines those indicators previously reported within the Commonwealth Department's annual report and proposed indicators that may be adopted. It is anticipated that performance data will be presented in the 2000 Report.

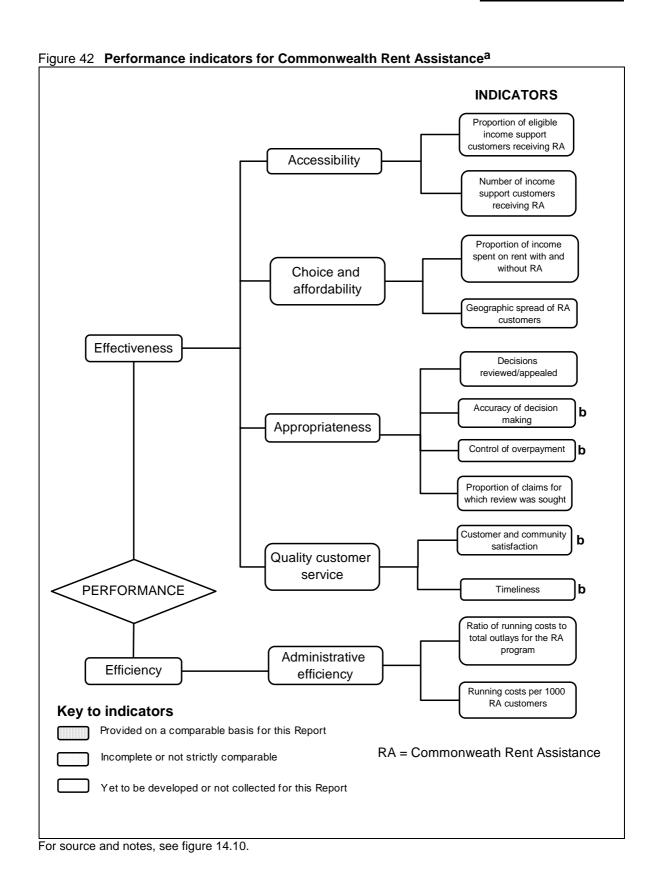
General customer satisfaction

Results of the tenant satisfaction survey included the following:

- the proportion of public housing tenants surveyed who were very satisfied was above the national average in Queensland, WA, SA and Tasmania in 1998;
- the proportion of public housing tenants surveyed who were satisfied was above the national average in NSW and SA in 1998; and



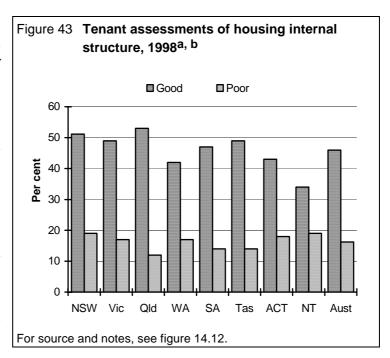
 the proportion of public housing tenants surveyed who were dissatisfied was above the national average in NSW, Victoria, Tasmania and the ACT in 1998 (figure 41).



Tenant assessments

Tenant's assessments of the condition of their homes are reported as an indicator of housing stock condition.

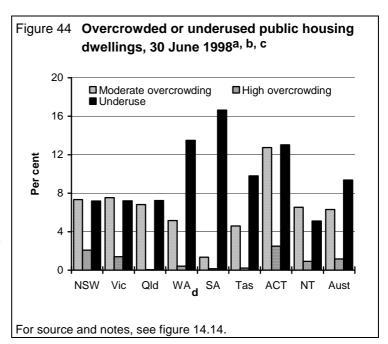
The proportion of public housing tenants surveyed who rated the internal structure of their dwellings as good in 1998 was higher than the national average in NSW, Victoria, Queensland, SA and Tasmania. The proportion who rated the internal structure as poor was higher than the national average in NSW, Victoria, WA, the ACT and the NT (figure 43).



Appropriateness — extent of overcrowding and underuse

The criteria used by authorities to match households to dwelling types may differ, affecting interpretation of this indicator.

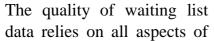
The NT had the highest proportion of households residing in 'appropriate sized' dwellings at 30 June 1998, using a proxy occupancy standard based on the size of the dwelling and family structure (table 14.1). The ACT had the highest proportion of moderately over-

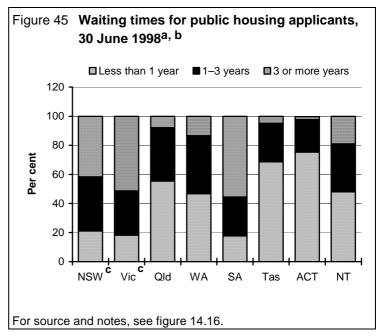


crowded dwellings (13 per cent), while SA had the highest proportion of underused dwellings (17 per cent). Highly overcrowded dwellings made up 2.5 per cent or less of dwellings in all jurisdictions (figure 44).

Timeliness

A household's length of time on a waiting list is an indicator of the time taken by housing authorities to meet current demand for housing assistance. However, waiting times may also reflect (a) applicants' willingness to wait for public housing dwellings in particular locations and differences in waiting list management practices.





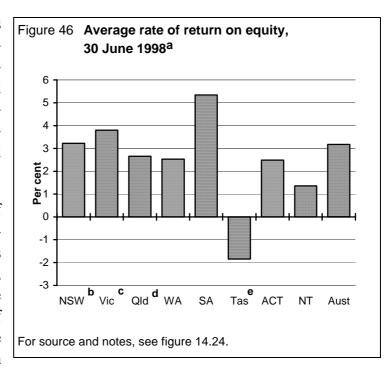
the waiting list being up-to-date, including priority and wait-turn applicants. Further, the waiting list for public housing in some jurisdictions may be used for multiple purposes, such as for applicants for Aboriginal rental housing, community housing or private rent assistance. This may also affect the consistency and quality of data.

At 30 June 1998, 75 per cent of ACT households and 69 per cent of Tasmanian households seeking public housing had been waiting for less than one year, while 18 per cent had been waiting for the same period in SA and Victoria. Approximately 2 per cent of households in the ACT had been waiting for three or more years, compared with 56 per cent in SA (figure 45).

Rate of return on equity

The rate of return on equity is calculated for each jurisdiction as the property manager net surplus (potential market rental income less operating expenses) as a proportion of average total equity (assets less liabilities).

The national average rate of return on equity held in public housing stock was 3.2 per cent at 30 June 1998, and most jurisdictions were within 2 percentage points of this rate. SA received the highest average rate of return



on equity (5.3 per cent) and Tasmania received the lowest (-1.8 per cent) (figure 46).

Differences in the treatment of some data items — including depreciation policies, and approaches to asset valuation — may affect the reported results of this indicator.