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**LOCALISED DATA SOURCES
FOR COMMUNITY HEALTH
INDICATORS**

**IPSWICH LOCAL
GOVERNANCE AREA**

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Abbreviations

ICC	Ipswich City Council
LGA	Local government area
IHF	Ipswich Hospital Foundation
HCRC	Healthy Communities Research Centre
HPR	Health, Parks and Recreation
FOI	Freedom of Information
QH	Queensland Health
ABS	Australian Bureau of Statistics
OESR	Office of Economic and Social Research
HPIN	Health Performance Information Needs

Localised Data Sources for Community Health Indicators

There is national and international interest in understanding, assessing and promoting community wellbeing. Traditionally, this interest has been pursued in a number of ways including the collection of population level health (epidemiological), poverty, and crime data as well as national data on economic activity. These data have been collated to produce indicators of wellbeing – often at a national level. Changes in indicator levels over time are used to show whether wellbeing is improving.

Communities are also defined in more local terms, as cities, or towns – or more generally, as local government areas (LGA). Statewide community indicator projects (with indicators developed at the LGA level) have been conducted in Tasmania (Tasmania Together) and Victoria (Community Indicators Victoria: CIV); and a similar project is under development for Queensland (Community Indicators Queensland).

Community indicators developed at the LGA level are valuable for inter-community comparisons. However, one of the findings of the CIV project is that communities want information on what is happening within the community, that is, indicators that will allow intra-community comparisons. At a more general level, this reflects the fact that local government, and community-based strategies do not operate at the level at which national and regional indicators provide information. Conversely, national and regional level indicators (e.g., burden of disease statistics) do not change in response to local health and wellbeing initiatives, at least in the short to medium term. Nor do they typically spur community-level change.

A related concern with current indicator practice is that it is often based on large-scale data collections (e.g., census data). While this data is typically highly reliable, in the case of census data, it is only collected every five years and it is often not accessible until well after it has been collected.

An alternative source for more regularly collected information is survey data. Cost considerations mean that such surveys are typically also conducted on a large-scale level (national or statewide). As a consequence, sampling at the community level is typically so sparse that error margins become too large for reliable measurement. This type of data is also often not available until well after it has been collected.

A potential alternative to using large-scale data collections (census or survey) to inform indicators is to use local data sources. Local data sources are an underexplored area for valid, low-cost information that is more responsive to local health and wellbeing initiatives, and which could also spur community-level change.

Rationale and purpose

The Healthy Communities Research Centre (HCRC) undertook a small-scale innovative project to locate and identify data collected within the Ipswich region that has the potential to contribute to health and wellbeing in the area. The data of interest were information gathered on a routine basis by organisations and groups outside the mainstream of public health. That is, grassroots data collection that currently “flies under the radar” either because the information is not public, the potential for data use is not recognised or for some other reason.

People and organisations collect a great deal of data in their day-to-day activities. This information is potentially underused because local organisations often do not have a research culture or a protocol for using these data.

The goal of the project was to find data sources that are valid, reoccurring and geographically bound, which can be used over time to help improve health in a local area. Thus, this project started at the bottom with what could be called a “field investigation” or exploration of data collection in the Ipswich area.

Information that is provided and consolidated at local level has a value that is very different from, and serves different functions from larger-scale, institutionally collected aggregated data. Such things as local physical assets, social structures and participation are not part of these larger broader-based datasets. Local datasets potentially exist in a space that relates to wellness and prevention activities because local space is more amenable to local action and change.

Two important questions driving this study are:

- What can locally collected datasets tell us about health?
- How can local organisations play a part in promoting health as part of their everyday activities?

This project is a first step in trying to find out what data are available and to examine whether these data can be used in a meaningful way.

Framework

Indicators are often incorporated into “baskets” or categories. While there is no definitive framework for grouping indicators, the following set of indicator categories is typical of many current frameworks, including CIV and CIQ.

- Personal wellbeing – health (physical, mental, social); are people happy and/or content?
- Community connectedness – how involved are people with their community e.g. social groups, volunteering, involvement with not-for-profit groups, social sports activities.
- Safety – how safe is the community in terms of, for example, crime, road safety, street lights, police patrols.
- Lifelong learning – are there educational opportunities at multiple levels including pre-school, primary, secondary, tertiary, TAFE, adult education, senior learning?
- Economic activity – Are businesses being started? Are businesses flourishing? Is housing being built? Are people spending money on consumables? Are shops available?
- Transport – are there roads, footpaths, public transport, taxi services, bike paths?
- Environment – Are there recreational facilities? Good housing? What is the built environment like? What is the natural environment like?
- Cultural activities – are cultural activities available and made use of? Do people attend concerts, plays, organised events, festivals? Is there local, state or business support of cultural activities?

A model for community indicators

An assumption of this project is that the health of communities is determined by social determinants such as socio-economic status, the environment in which we live, and educational levels. Rather than replicate standard indicator frameworks, a model that incorporates social determinants and relates more closely to the kinds of information that are relevant at a local community level formed the basis for this project. This three-part model comprises the following elements:

1. Physical assets: what physical things exist that support wellbeing, e.g., a walking trail.
2. Participation: who uses the asset, usage frequency, and how it is used.
3. Social structure: the social structure that supports participation and the physical assets e.g. ‘Friends of ...’, or a local walking group.

Progress can be measured at one or more of the steps. For example, an increase in physical assets could mean the increased availability of walking trails. Progress could come with

increased usage of an asset or different usage of an asset e.g. an innovative use of already existing space. Or the social structure that supports participation may indicate progress e.g. a Mums and Bubs groups regularly meeting to walk, or a group organising itself to pick up rubbish along the route.

Measurement of all of these steps will be required to create a comprehensive set of progress indicators. This project will not, however, develop indicators. Instead it is about locating data sources that might usefully contribute to the development of indicators.

This project was structured as a two-step process. In the first step, a set of health topic areas on which to focus was chosen. In the second step, a template for collecting information about available data, including information about the data source and an evaluation of the value of the data was developed.

The selection of topic areas was guided by input from Queensland Health, who indicated what information they currently had available to them – and which need not therefore be sought in this project. This information is summarised in Appendix A. Queensland Health also provided documentation, which listed gaps in their current knowledge of health and wellbeing in the community. This information is summarised in Appendix B. It was determined that most of the localised data of interest fall into the categories of physical activity, eating and healthy ageing. In a way, it can be said that the main focus of interest is finding out what people do. That is, a focus on behaviour. Information about people's behaviour patterns is often difficult to gather in broader-scale data collections and it is here that localised data sources might prove to be of greatest use.

With input from Queensland Health's West Moreton Public Health Unit a series of questions were developed surrounding the topics of interest: *physical activity*; *healthy eating*; and *healthy ageing*. These questions are organised below by topic area and also by possible source of information. For example, information potentially gathered or held by Ipswich City Council, is indicated. These questions guided the search for local data sources.

The questions

Physical Activity: What physical activity do people in Ipswich do? What activities are available? Who participates? How often? What resources are there to encourage physical activity? How are these measured? Where are people active?

Ipswich City Council

- How many footpaths/bicycle paths/kilometres? How connected are these?
- Number of parks, use of parks, locations, facilities, suitability for physical activity?
- Availability and use of walking trails?
- Availability and usage of public transport? (Mode and number)
- Bicycle parking spots/lockups in Ipswich?
- Maintenance schedule for major parks/records of maintenance/requests by public?
- Number and type of requests for maintenance/mowing/fixing.
- Land use mix
- Number of residents living within walking distance of city centre or transport hubs?
- CCTV data on use of public spaces (e.g. mall, parks)
- Pedometer loans from library.

IHF

- SNAP
- Sun safety trailer loan figures, QT, Bendigo Bank marquees.

Air force

- What data do they collect as to the physical activity of their members?

Clubs/sporting groups

- Sports groups (do they track by post code, gender etc?)
- Umbrella physical activity organisations
- Clubs (football, cycling, rec sport, gardening)
- Fitness clubs
- How many bicycles are sold each year in Ipswich?

Healthy Eating: How do people in Ipswich eat? What is available to eat?

Vendors and Support Organisations

- Fast food outlets
- Health food stores
- Sales of fruit and vegetables
- Cost of fruit and vegetables compared to other regions.
- Sales of fruit and vegetable seeds, seedlings, etc.
- Cooking schools
- Demand for organic products
- School lunch/breakfast programmes
- Organisations focusing on healthy eating/teaching about food
- Ipswich markets – produce vendors.

Australian Breastfeeding Association

- List of local organisations that provide childcare/breastfeeding rooms.
(www.breastfeeding.asn.au/products/babycare)

Ipswich City Council

- Local food production/land use mix (zoning for rates)
- Inventory of food sold at Council-owned venues (canteens/vending machines)

Healthy Ageing: Where do seniors live in Ipswich? What kind of housing do they live in? Do they attend clubs or groups? How many participate in physical activity? How many are employed? How many volunteer?

Seniornet (<http://www.seniornet.com.au>)

- Membership info (gender/age/location)

Senior Card

- Ipswich membership.
- Business participation and usage.

Ipswich City Council

- Seniors Consultative Committee
- Participation in council sponsored seniors activities.

U3A/Probus etc.

- Membership details by gender/location

Nursing homes/day respite

- HACCC Minimum Data Set (MDS)

Meals on Wheels

- Use in Ipswich

The task for the project was to identify and locate these data sources, arrange access, and to identify these data in a way that would make a meaningful contribution to public health. Conditions for access were also identified.

Method

Different organisations collect data differently and each organisation has their own procedures for dealing with data that they collect. The characteristics of data collections will therefore vary, both in terms of accessibility and quality.

A template was created to standardise information collection about local data sources. This provides a way to organise the information gathered about organisations and the data that they collect. This includes an evaluation of the potential usefulness of data sets. To evaluate usefulness, judgements were made as to the validity of the data, requirements for obtaining the data, and whether the data were fit for the purpose of contributing to the development of indicators. Finally, the template allows different data sets to be compared.

Template Structure

The template for each data source begins by listing the indicator topic area to which the data could potentially be applied (*Physical activity, Healthy eating, or Healthy ageing*). A heading for the name of the dataset follows. The third template heading shows to which of the three elements of the community indicator model the dataset applies (*Physical assets, Participation, or Social structure*). This is followed by a brief description of the dataset.

The central component of the template is a table, which describes key features of the data (*The data Owner; Geographical level at which it is collected; How it is collected; How often it is collected; How access to the data is gained; Costs involved in obtaining the data; and the Size of the dataset*), as well as providing two columns evaluating the validity of the data in the dataset and the utility of the data for indicator development.

Below the template table is a heading that lists the results for the four criteria on which the validity assessment in the table was based. These criteria include:

Representativeness: did data represent all similar types of information?

Comprehensiveness: did the database include all information/people in the field?

Bias: was the database unrepresentative or not comprehensive in particular defined ways? Did data collection structurally affect the data?

Collection check: is there any way of verifying the data collected?

Following the criteria for validity assessment is a heading for data collection requirements, which describes what would need to be done to extract and use the data.

The term “fit for purpose” was used to summarise the conjunction of data collection requirements, validity, and cost to obtain. That is, given the nature of the data set, is it going to be worthwhile to pursue as a resource for the construction of health and well-being indicators?

The final template heading provides an overall narrative assessment of the dataset including relevant supporting factors and caveats.

Results

50 organisations were identified as potentially gathering information about physical activity, healthy ageing and diet in the Ipswich region. Within this group, some organisations had many sub-groups that collect and use information about Ipswich. For example, the Ipswich City Council would be one of the largest data-gathering organisations within the area. Of the 50 groups contacted, 33 organisations or sub-groups within organisations shared information about data that they collect. These data are summarised in the table in Appendix C.

Access ranged from open “come and look” through willingness to allow database access to a researcher to extract and de-identify data; public access (e.g. web-based database); to no access.

The validity of the data was evaluated as high in 14 cases, medium in 6 cases, low in 7 cases and unknown in 6 cases. Validity was evaluated on the basis of representativeness, comprehensiveness, bias and whether there was a collection check.

16 databases were suitable for use in developing indicators (good fit for purpose). 11 databases were judged as medium fit for purpose, that is, they could be used but had some features that could make it difficult to use, such as intermittent data gathering or lack of representativeness. Some of those databases in the category of “medium” have potential to be developed to be used in indicator research, e.g. Ipswich City Council park maintenance schedules could be useful if the schedule could be linked to actual performance of maintenance figures. 6 databases had low or no fit for purpose, that is, they would not be useful at this point.

The primary opportunity cost for most of the databases would be salary costs for a researcher to access the databases to extract and de-identify data. In a few cases, costs would need to be paid for the organisation to extract the data themselves. For example, some sports clubs don’t allow outside access to their database. Most of the information gathered by the local council is accessible under FOI requests, but it would be expedient for interested parties to arrange direct access to the data (as allowed) as council is often overwhelmed by information requests. In many cases, council would facilitate researcher access to data.

The attached templates (Appendix C) provide the details of collection, validity, access, opportunity cost, size of dataset and fit for need of all the organisations that provided information for this exploratory study

Table 1: Summary of database value for indicator development

Databases suitable for use in developing indicators
ICC Parks (1)*; ICC Footpaths, recreation pathways, cycleways (4); Ipswich Civic Centre (8); Ipswich Walking Trails (9); Sun Safety Trailer Loans (10); Bus routes and usage (12); U3A (14); Public swimming pool usage (16); Heart Foundation Walking (18); Meals on Wheels (19); Ipswich Little Athletics (20); Ipswich Hockey Association (21); Ipswich Junior Rugby League (22); Qld Christian Soccer Assoc (23); SNAP (29); Average Produce Sales Coles Supermarkets in LGA (33)
Databases with potential to be used in developing indicators
ICC Park Maintenance Schedules (2); Ipswich Community Online (3); Cycleway usage (5); Park usage (6); ICC Customer Service (7); Ipswich Healthy4Life (11); Active After Schools Community (17); Ipswich Basketball Assoc. (26); Queensland Kids Freshnet (30); Fast Food Outlets (31); Liquor Outlets (32)
Databases that are not useful at this point
Babycare Australia (13); Safe City (15); Ipswich-based gyms (24); Cycling – The Yellow jersey (25); Ipswich Cycling Club (27); Ipswich Central Markets (28)

* Number in parentheses indicates database number as shown in Appendix C.

Some observational results

Gyms are happy to share information about their membership as long as you can reach the manager who starts work at 5.30am and finishes early. According to figures, plenty of people belong to gyms in Ipswich (7,500 across the three gyms that responded). Whether people actually exercise is another question. Most gyms will not allow access to their databases for reasons of contractual privacy. One gym (Healthworks) would allow a researcher to extract de-identified gender and postcode information from their database.

In general, sporting clubs and organisations are happy to share information about their membership. Many already break down membership numbers by gender and date of birth. Groups like Little Athletics, the Ipswich Junior Rugby League, the Ipswich Hockey Association, Basketball Ipswich, the Ipswich Cycling Club and the Queensland Christian Soccer Association have a combined membership of approximately 5,860 and are willing to share information with researchers.

Not for profit organisations are, in general, open and willing to share information. The Heart Foundation, Meals on Wheels, U3A, Ipswich Healthy4Life and the Ipswich Hospital Foundation were all forthcoming on membership and willingness to allow access to databases, provided data were de-identified.

Commercial entities varied in their willingness to share information. Aggregated or summarised information was not an issue but specific details of sales, for example, were not forthcoming. Indeed several business people were eager to share their perspectives on the health or otherwise of people in Ipswich.

Government organisations were willing to share what information they had, but had a formal procedure for requesting information. Information on SeniorsCard and bus routes/usage fell into this category.

Some organisations were impossible to contact. Others could be contacted but so far have not vouched any information. Two things come into play here. The first is the need to take the time to build contacts and repeatedly making contact. The other is waiting for organisations to make decisions about protocol. The more junior the initial contact, the less likely one is to obtain information. The more senior the contact, the more likely that they have authority to make a decision and/or a grasp of the protocols involved.

Discussion

The ethics of place-based research

Consideration needs to be made of the end uses of place-based research. Questions arise around issues of validity and reliability for small sample sizes. Conclusions from data need to be drawn in an intellectually valid way. One geographical area cannot be directly compared to another without consideration of context. This may seem self-evident, but recent media coverage of Ipswich as Queensland's "fattest place" illustrates the inherent problems of drawing conclusions from unreliable data.

Thought must also be given to how information supplied by local organisations will be used. Will funding decisions be based on conclusions drawn from these data sources? If this is the case, will sources such as local governments or non-government organisations want to participate in localised data projects if it puts funding at risk? There needs to be a clear understanding of what benefits and potential negative impacts might arise from data-sharing with a state government organisation.

On the other hand, with the move towards partnerships between all kinds of organisations, it is vital that organisations establish policies and protocols for information sharing. If the common goal is improved health for the community, then all organisations need to find ways to work together towards these goals.

Processes to determine accessibility of data include whether admission can be made of the types of data collected. Decisions need to be made as to levels of transparency (which can vary according to the partner organisation) and access.

Organisations vary widely in their transparency and levels of development as an organisation. A benchmark for policy would be an organisation like the Australian Bureau of Statistics. It has policies in place that ensure access to aggregated data that have been de-identified, release data without interpretation and have conditions for use.

If the ABS is at one end of the scale, the middle of the scale is occupied by the organisation that does not have policies and protocols in place regarding information sharing and may inadvertently release information that has privacy or other legal implications. They are willing to share information but have not thought through the implications of this.

At the opposite end of the scale to an organisation such as the ABS, is the organisation that defensively holds onto its data and does not even have policies in place regarding sharing information about what data they collect. This is not necessarily an indication of a need for secrecy, but rather a less mature organisation that has not yet thought through policies and protocols for appropriate sharing of information to benefit the local community.

Any researcher trying to examine localised data sources will encounter each of these categories of organisation. Category is not determined by type of organisation. In general however, federal level government organisations and higher-level non-government organisations have already established protocols for information gathering and reportage. A

high level of transparency is essential in these organisations and the implications of sharing information have been thought through and protocols established.

Case Study on Using Local Data Sources: Brisbane City Council and HABITAT

HABITAT (**How Areas in Brisbane Influence health And acTivity**) is a study of life and recreation amongst people aged 40 years or more and living in Brisbane (Australia). It looks at lifestyle, health and well being, and the facilities and services available in local areas.

Important aspects of HABITAT include the mailing of questionnaires to selected people, looking at the features and facilities in selected neighbourhoods, and producing maps of the features of selected local areas in Brisbane. HABITAT currently includes over 11,000 Brisbane residents from 200 neighbourhood areas.

HABITAT was launched in 2007, and will run for at least five years. The goal of HABITAT is to study changes in people's lifestyle, health and wellbeing, and to determine the most important influences on these changes.

HABITAT will provide valuable information about living in Brisbane. This knowledge can be used by local and state governments to make Brisbane a better and healthier place to live. HABITAT will also contribute to international understanding about the health and well being of people aged 40 years or more.

HABITAT is conducted by Queensland University of Technology (QUT) and the University of Queensland (UQ). It is funded by the National Health and Medical Research Council of Australia.

Brisbane City Council has provided a great deal of the environmental data used within the HABITAT Study. There is an agreement between Council and HABITAT that data will be provided on an ongoing basis (generally once every two years) for the duration of the project.

Data provided includes the following:

- Bike paths
- Cadastre – including creek and street polygons, house numbers, parcels, property boundaries, property holding, river and creek names, street names.
- Bus stops and route data
- Facilities database
- Cityplan and Land use data
- Parks
- Railway
- Traffic – including traffic ellipses, traffic lines, kerb channels, pavement marking etc.
- Tree coverage from aerial photography

In return for the provision of this data, council have invited representatives from HABITAT to come to council to present preliminary results and discuss applications for the findings from HABITAT. A preliminary report outlining baseline findings and the implications has also been supplied to council.

<http://www.habitat.qut.edu.au>

Conclusion

What have we learnt about:

- Organisations that gather data in Ipswich?
- Trying to obtain localised data?

Key learnings about organisations that gather data in Ipswich

- State government organisations that collate data about Ipswich have protocols for sharing this information and are willing to do so. e.g. Translink.
- State offices of non-government organisations that collect information about Ipswich are usually willing to share this information as long as data are de-identified. e.g. Heart Foundation, Meals on Wheels.
- Area umbrella organisations that collect data about Ipswich are usually willing to share this information as long as data are de-identified. e.g. Ipswich Hockey, Ipswich Heart Foundation, Ipswich Basketball.
- Individual non-profit organisations vary in their approach to sharing data from complete openness to unwillingness to share information.
- Many not-for-profit organisations need to take requests for information to committee or membership meetings. This adds to the time required for data collection.
- Most commercial enterprises do not want to share data.
- Against expectations, some commercial enterprises are willing to share data that they collect about Ipswich. e.g. Coles Supermarket.
- The Ipswich City Council does not yet have established protocols in place for data sharing with outside organisations.

In addition to the practical considerations described above, the question of whether validated local data sources should be pursued for the purpose of developing community health and wellbeing indicators rests heavily on the evidence showing that indicators developed in this way are indeed reflective of a community's health and wellbeing; that they can be developed in a cost-effective manner; and that they are more responsive to local health development strategies than other types of information. There is a burgeoning field of research demonstrating the relationship between local community factors and health. While this work supports the role of local data sources, little research has shown how well the resultant indicators operate in their function of demonstrating intra-community differences in health and wellbeing, and of responsiveness to local strategies to improve health and wellbeing.

Key learnings about obtaining and using localised data

- It is easier to gather information about physical activity than about how/what people eat.
- Contacts and knowledge of the local infrastructure and community is vital to building up a picture of what is happening in a community.
- Repeated contacts need to be made.
- Many organisations do not have protocols in place that govern release and sharing of information.
- The researcher needs to be able to give organisations enough information to help them in the process of developing these protocols (and sometimes to even realise that protocols are needed).
- Attitudes to information sharing by organisations depend on the maturity of that organisation.
- Organisations that are mature have structures in place to share information.
- Some organisations are willing to share information that they shouldn't under privacy laws and similar considerations.
- Some organisations have not yet begun on the process of developing protocols to share information.
- Many organisations do not realise the value to health researchers of the information that they hold.
- Local governments collect a large proportion of the data relevant to a geographical area.
- If a local government has established protocols in place for data sharing, it can be a valuable source of information.
- If such protocols have not yet been established, locating and obtaining data can be very frustrating.
- Although much council data is available under FOI requests, it is better to build a relationship with a local council based on clear understanding of the uses of the data and what added-value research can provide to the council, rather than the "blunderbuss" approach.
- Many not-for-profit organisations need to take requests for information to committee or membership meetings. This adds to the time required for data collection.

- Most commercial enterprises do not want to share data.
- Some commercial enterprises are willing to share data when they realise the potential value of doing so.
- Access to data relies heavily on finding the right person within the organisation to approach.
- Localised data research needs to have an educative component by which organisations can learn about the value of information they collect and its use in health and community research.
- One important value of localised data sets is that data are collected year in and out as part of the routine activities of an organisation. A secondary result is a low-cost dataset.

Indicator Examples

Physical Activity

An indicator of physical activity could be constructed using ICCs database of footpaths, recreational pathways and cycleways (Template 4, Appendix C).

A basic indicator could be constructed using a simple count of the amount of pathways in Ipswich. The amount in the first year would serve as a benchmark. Based on the relationship between pathways and physical activity, changes in the amount of pathways over time could be used to indicate changes in physical activity.

This indicator could be improved by using geocoding to map the connectedness of the pathways and the proportion of the population with access to a well-maintained footpath or cycleway. This would use additional research evidence to produce an indicator with a stronger link to healthy behaviour.

Combining evidence from such an indicator with evidence from indicators constructed around park access, park use, and the activities of organised walking or cycling groups would produce a comprehensive set of indicators around physical activity in Ipswich.

Healthy Eating

An indicator of healthy eating could be constructed using data on produce sales in Coles supermarkets in Ipswich (Template 33, Appendix C). While the data are likely to be highly accurate from year to year, additional work would be required before they could be used in a valid indicator. In particular, it would be necessary to determine the relationship between produce sales at Coles and total produce sales in Ipswich. It would also be necessary to know the number of people responsible for the amount of produce sold in any given period. This information could be combined with information about the proportion of produce sold that is eaten. The resulting indicator would be supported by research evidence on the relationship between eating fruit and vegetables and health.

Appendix A: Information currently available to Queensland Health (or what we don't need to be looking for)

<p>Ipswich City Council Profile Office of Economic & Statistical Research 19.7.10 (based on 2006 census)</p>	<p>Common Websites and Tools for Accessing Regional Statistics (OESR)</p>	<p>Queensland Health Data</p>
<p>Resident population, population by age</p>	<p>CPI & SPI (Spatial Price Index)</p>	<p>Self-reported Adult Health Status (2009 by HSD)</p>
<p>Population (urban centres & localities), population projections, indigenous population</p>	<p>SEIFA</p>	<p>Data Hub (Demography, Society, Economy, Industry & Development, Environment, Census)</p>
<p>Migration (1 year ago and 5 years ago), Country of birth and English proficiency</p>	<p>Tourism</p>	
<p>Family composition</p>	<p>Crime (police regions & districts)</p>	<p>Alcohol consumption, Cancers, Injury, Assault, Asthma, Avoidable deaths, Back pain, Blood-borne diseases, Burden of Disease (BOD), Breast cancer, Breteau index, cervical cancer, coronary heart disease, chronic disease, colorectal cancer, communicable disease program evaluation, COPD, demography, diabetes, drowning, expenditure, falls, fire burns & scalds, fluoridation, gastrointestinal diseases, governance, heart failure, HIV, homicide, illicit drug use, incident follow-up, infant health, infant mortality, infant nutrition, interpreter services, invasive disease, life expectancy, lung cancer, maternal health, median age of death, melanoma, multicultural data, mycobacterial diseases, osteoarthritis, osteoporosis, other diseases, other vaccine-preventable diseases, partnerships, perinatal, physical activity, poisoning, potentially avoidable hospitalisations, premature deaths, prostate cancer, resources, rheumatoid arthritis, road transport, school readiness, sexually transmissible infections, smoking, social marketing, special needs populations, stroke, suicide, sunsafe environments, vaccinations, vector-borne diseases, workforce, zoonotic diseases.</p>
<p>School students, highest level of schooling, post-school qualifications</p>	<p>Median rents (by postcode)</p>	<p>National Aboriginal & Torres Strait Islander Social Survey (NATSISS) – 1994, 2002, 2008/09, planned every six years.</p>

Small area labour markets. Employment by industry Business counts by employment size/turnover range.	Rental housing vacancy rates	National Health Risk Survey (2011)
Building approvals	Petrol prices	Self-Reported Adult Health Status: Darling Downs-West Moreton Health Service District (2009)
Socio-economic index of disadvantage	Australian Institute for Health & Welfare (AIHW) – 30 health subject data areas	
Value of agricultural production		
Need for assistance		
Volunteers		
Internet connection		
Individual weekly income		

Appendix B: Identified Knowledge Gaps

According to the Health Performance Information Needs 2009-2012 (HPIN 2009) report from the Division of the Chief Health Officer there are six known gaps in the HPIN. These are:

- Sun safety (lack of clarity on indicators to measure).
- Mental health promotion ((lack of clarity on indicators to measure).
- Environmental health (indicators for health protection).
- Communicable disease epidemiology reporting.
- CALD populations population health indicators.
- Activity level or health system performance indicators.

There are 80 indicators required to meet state and federal endorsed reporting requirements that do not have a sustainable source. These include the following areas:

Asthma, back pain, blood pressure, BMI , cholesterol, diabetes, falls, food behaviour (general), food safety, food security, fruit and vegetables, health and wellbeing, infant nutrition, micronutrients, physical activity, psychological distress, radiation, resources, sedentary, self rated health, sun burn, sun protective behaviours and vaccination.

Many of these categories are highly specific while others are extremely broad. It is not the purpose of this project to “solve” the knowledge and data collection gap problem, but to identify within the Ipswich City Council area some potential sustainable data sources based on some of the priorities identified within the HPIN.

One of the ways to do this is think about health-related questions, or groups of questions around a subject, that will drive a ground level investigation.

See Appendix A for the list of common datasets available to Queensland Health (supplied by QH). Other common datasets relevant to a demographic profile of an area are available through the ABS and the Office of Economic and Social Research (OESR).

Appendix C: LOCALISED DATA SOURCES – DATA TEMPLATES

(1)

Potential Indicator Area: Physical activity, healthy ageing, community connections

Dataset: Ipswich City Council Parks Database

Category (see pp.4-5 for Model of Community Indicators categories): Physical Asset

Brief description: The ICC maintains a database of parks and reserves in the LGA. This can be searched by suburb or by facilities. Searchable facilities include: Sports field and courts (AFL, Athletics, Baseball/Softball, basketball, cricket, cricket nets, equestrian, lawn bowls, netball, pools, rugby union/league, soccer, tennis, touch, volleyball; Recreation facilities (BBQs, Bush chapel, car parking, church, disabled access, dog off leash area, drinking water, gazebos, rotundas, shelters, hall/clubhouse/function room, monument/memorial, natural or constructed lookout, picnic facilities, seats, benches, pond/waterfall/water feature, power, public toilets); Other facilities (BMX track, boat ramps, bush walking, half court, horse riding tracks, open kick around area, playground equipment, recreational pathways, skate park, strength and agility stations; Location use (sporting, wedding); Capacity (up to 50, up to 100, up to 300, over 300).

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
ICC	LGA with neighbourhood level data.	Council records.	Once only updated as new facilities are built.	Open through website. Discuss access to main database with Operations Manager, Health, Parks and Recreation (HPR), David Baker 3810 6582	Person to access database and count facilities.	540 parks: "5000 hectares of open space".	High	Good because baseline measure of physical assets.

Validity:

- Representativeness - high because council owns all parks in Ipswich and this is a simple count of owned assets.
- Comprehensiveness - high because complete listing of parks in Ipswich LGA.
- Bias - low.
- Collection check - none but database expected to be accurate.

Data collection requirements: Count and record. Access to main parks/reserves database. A list of parks and reserves itemised by facility and capacity. Regular updates of this list.

Assessment: Very useful dataset for information about physical assets that support physical activity and healthy ageing and can contribute to indicators of community connectness.

* http://www.ipswich.qld.gov.au/about_ipswich/parks_reserves_precincts/parks_search/

(2)

Potential Indicator Area: Community, physical activity

Dataset: Ipswich City Council Park Maintenance Schedules

Category: Social Structure

Brief description: ICC operational plan categorises parks by level. Each level has specifications for lawn mowing and maintenance. Parks are categorised as strategic, district, local or settings (e.g. College's Crossing/riverside). Strategic parks are mown 30 times per year, local parks, 16.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
ICC	Neighbourhood	From ICC operational plan.	Annual	Operational plan is accessible through ICC website. http://www.ipswich.qld.gov.au/about_council/corporate_publications/operational_plan/	Low	100+ page operational plan.	High for information, low for performance i.e. Know how many times a park should be mown but not how many times done.	Medium (potential if linked to performance of maintenance).

Validity:

- Representativeness - high because listing of all schedules for maintenance.
- Comprehensiveness - high.
- Bias - lists of schedules but not list of actual maintenance.
- Collection check - no.

Data collection requirements: Data extraction.

Assessment: Has potential especially if can be linked to actual maintenance performed (council in process of implementing this).

(3)

Potential Indicator Area: Physical activity, healthy ageing, community linkage.

Dataset: Ipswich Community Online (<http://www.ipswich.qld.gov.au/community/directories/community/>)

Category: Social structure

Brief description: An online directory of Ipswich community organizations, listed by the following categories: Aboriginal and Torres Strait Islander; advocacy; carers; child care; children; churches and religious groups; community centres and halls; competitions/awards; counselling; disability; education and training; emergency services; employment; families; festivals/events; fundraising/funding opportunities; health services; home care/assistance; housing and accommodation; information and referral services; justice of the peace; mediation services; migrant services; multicultural services; recreation and leisure; respite services; seniors; service clubs; sports and fitness; support groups/services; transportation; veterans; youth.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Data needs	Size of dataset	Validity	Fit for Purpose
Ipswich City Council	LGA with some neighbourhood-level data.	Online self-service database; entries can be modified.	At will.	Open	Person to access and count/itemise.	Routine monitoring (6 monthly intervals).	1071 groups, some repeats, some outside area of interest.	Partial	Medium

Validity:

- **Representativeness** - issue of self-selection. Any community group can enter information but limited by motivation, internet access, comfort with online resources. Targeting specific groups could increase representation.
- **Comprehensiveness** - high on public organisations, lower on community organisations. Some overlap into neighbouring LGAs e.g. Lowood, Laidley, Scenic Rim. Also services provided centrally e.g. Brisbane.
- **Bias** - towards groups interested in self-promotion and able to access an internet database.
- **Collection check** - does ICC specifically target groups for inclusion? How widely was the invitation to participate disseminated?

Data collection requirements: Routine monitoring. Request access to master list for ease of use, avoidance of duplicate listings. Simple count and categorise.

Assessment: A moderately useful listing of community organisations that is limited by self-selection.

(4)

Potential Indicator Area: Physical activity, healthy ageing

Dataset: Footpaths, recreational pathways, cycleways

Category: Physical Asset

Brief description: Council listing of these physical assets by length and facilities.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
ICC	Local	By ICC.	As asset constructed, added to existing database.	Access & Open Space Planning, Strategic Planning & Partnerships, Health, Parks & Recreation Dept. Geographic and asset management map available for viewing.	Person to access map and count assets.	8,193 records, 617 kms of pathway.	High because simple measure of physical asset.	Good especially as would provide a baseline measure for change.

Validity:

- Representativeness - high because physical assets owned and managed by council.
- Comprehensiveness - expected to be high because simple count of physical asset.
- Bias - may not include state or federally funded pathways that are not maintained by council.
- Collection check – yes, all records tagged with whether data digitalised, field inspected, surveyed etc.

Data collection requirements: Access to map and ability to count and categorise physical assets.

Assessment: Good dataset that could be used to provide baseline measures for provision of physical assets that support physical activity.

(5)

Potential Indicator Area: Physical activity

Dataset: Cycleway usage

Category: Participation

Brief description: Ipswich City Council monitoring of cycleway usage (traffic counting)

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
ICC	Local	Electronic (pressure sensors)	Intermittent	Engineering Services Dept.	Request through Eng. Services under FOI.	Unknown	Unknown	Has potential.

Validity:

- Representativeness - low because usage of cycleways varies.
- Comprehensiveness - low because not all cycleways monitored.
- Bias – unknown because it is not known what criteria ICC uses to choose which cycleways to monitor and for what periods of time.
- Collection check - no.

Data collection requirements: If ICC counts, then data need will be simply access to these counts. If not, footage will need to be watched and cycleway users counted.

Assessment: Potentially a useful database especially if ICC provides usage data.

Supplementary Question: Does state government monitor Ipswich motorway cycle path? If so, potential data for Ipswich may be available.

(e)

Potential Indicator Area: Physical activity, healthy ageing, community

Dataset: Park Usage

Category: Participation

Brief description: Ipswich City Council data collection on council owned park usage

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
ICC	Local	Cameras rotated through parks.	Unknown	Health, Parks, Recreation Dept.	Request data through Operations Manager, HPR.	Unknown	Unknown	Potentially high

Validity:

- Representativeness - low because individual park usage varies by location, time of year and facilities.
- Comprehensiveness - low because not all parks monitored.
- Bias - unknown because it is not known what criteria ICC uses to choose which parks to monitor and for what periods of time.
- Collection check - no.

Data collection requirements: If ICC counts, then data need will simply be access to these counts. If not, footage will need to be watched and park users counted.

Assessment: Potentially a useful database especially if ICC provides usage data.

(7)

Potential Indicator Area: Infrastructure, physical activity, community

Dataset: Ipswich City Council Customer Service Database

Category: Physical asset, Social Structure

Brief description: ICC customer service maintains a database of calls to council and responses. All items have a matrix of information attached that includes the timeframe for response, e.g. if a park is mown every 21 days, then that is the max response time. They do not yet have actual dates that maintenance is performed incorporated into records but hope to do for future. Reports can be produced as to maintenance requests, graffiti, issues of concern to public etc.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
ICC	LGA	Through public calls to ICC switchboard.	Daily during working hours.	By request through Operations Manager. Health, Parks and Recreation. David Baker 3810 6582	Data extraction and de-identification.	Unknown	High	High potential especially with regard to graffiti/complaints etc.

Validity:

- Representativeness - high because all incoming requests logged and assigned.
- Comprehensiveness - high.
- Bias - towards people who call council to complain i.e. activists, active citizens.
- Collection check - no.

Data collection requirements: Some arrangement with council as to data extraction. Potentially have to pay for time to extract reports. Annual reports have counts of some items of interest such as graffiti so some data is already extracted and reported.

Assessment: Good potential but need for negotiation over access.

(8)

Potential Indicator Area: Community, ageing

Dataset: Ipswich Civic Centre

Category: Participation, Social Structure

Brief description: Auditorium managed by Ipswich City Council that hosts community and arts events.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Ipswich City Council Manager – Vinay 0457 100 563	Local	Tally of events and attendance.	Cumulative through year.	ICC will pass on information about type of event and tickets sold on an annual basis.	Routine phone call.	Approximately 60 commercial and 20 community events per year.	High	Good

Validity:

- Representativeness - of large-scale events requiring an auditorium in Ipswich.
- Comprehensiveness - good because straight count of events and attendance.
- Bias – council sponsored or supported events.
- Collection check - no.

Data collection requirements: Annual phone call to record tallies.

Assessment: Good source of information to construct measures of participation, community and social structure.

(9)

Potential Indicator Area: Physical activity

Dataset: Ipswich Walking Trails

Category: Physical Asset

Brief description: Online trail guides for five Ipswich walking trails including length and facilities: Denmark Hill (5 trails, 2.4km total), Flinders-Goolman (9 trails, 52.96km), Haig Street Quarry (2 trails, 1.8km) , Purga Nature Reserve (2 trails, 850m), White Rock-Spring Mountain (8 trails, 34.2km).

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
ICC	Neighbourhood	Online	Intermittent updates.	Open access through ICC website.	Good	5 areas: 92.21km maintained trails.	High	Good if can be linked to usage data.

Validity:

- Representativeness - representative of council-owned and maintained hiking trails in LGA.
- Comprehensiveness - simple listing of physical asset.
- Bias - towards maintained walking trails.
- Collection check - no.

Data collection requirements: Counting and possible access to usage data.

Assessment: Useful database of physical assets that support physical activity.

(10)

Potential Indicator Area: Physical activity, healthy ageing

Dataset: Sun Safety Trailer Loans

Category: Physical Asset, Social Structure

Brief description: Database of loans of trailer

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Ipswich Hospital Foundation	LGA	Booking forms at time of booking. Back forms being gradually added to database.	Program run since 2005. Only records in database since 2009.	Open to discussion of use based on privacy issues.	Access to database and extraction/counting.	2 years approx. 80 loans plus 160 getting sunscreen sachets and 1L bottles of sunscreen.	Medium	Good

Validity:

- Representativeness - there are several other organisations in Ipswich that loan sun safety trailers
- Comprehensiveness – comprehensive for two years to date, but back data missing.
- Bias - represents organisations involved with IHF and may not be representative of the general population.
- Collection check - no.

Data collection requirements: Access to database and extraction and classification of data.

Assessment: Moderately useful source of information about sun safe behaviour and participation in physical activity. Could be used to examine community connections and social infrastructure.

(11)

Potential Indicator Area: Physical activity

Dataset: Ipswich Health4Life

Category: Social Structure

Brief description: Online campaign website to coordinate and encourage physical activity in Ipswich.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Ipswich Hospital Foundation	Mostly LGA.	Voluntary membership, information collected online with signup for membership.	On signup.	Need access to website backend. IHF willing to discuss this within bounds of privacy concerns.	Access to database and extraction/ counting.	Approx. 400 listings (organisations, people, non-profit groups).	Medium	Has potential to contribute to physical activity indicator.

Validity:

- Representativeness - uncertain because a wide range of groups access this service and because membership is self-selected.
- Comprehensiveness - fairly high of "official" groups involved in physical activity in Ipswich, uncertain if comprehensive collection of groups.
- Bias - membership self-selected and those actively looking to work with other organisations in Ipswich.
- Collection check - no.

Data collection requirements: extraction/counting/classification.

Assessment: Potentially a good source for looking at umbrella social structures underpinning organised group physical activity in Ipswich.

(12)

Potential Indicator Area: Physical activity, community connectedness

Dataset: Ipswich Bus Routes and Usage

Category: Physical Asset

Brief description: Ipswich bus routes, timetables and usage

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Translink collects data and makes available on behalf of Westside Buses.	LGA	Westside buses monitors usage and routes and reports to Translink.	Ongoing	Formal letter to request access must be sent to: Group Manager, Translink GPO Box 50 Brisbane QLD 4001 Outlining proposed use of data and research study. Informally was told that Westside could provide info if necessary but prefer access through Translink.	Unknown – low unless Translink charges for data access.	23 routes in Ipswich, 5 in Springfield.	High	Good because important measure of physical capital.

Validity:

- Representativeness - of formal bus services in Ipswich because only public bus service. Not representative of charter and other services.
- Comprehensiveness - high because mandated reporting.
- Bias - low
- Collection check - no.

Data collection requirements: Data extraction, correlation of routes and usage.

Assessment: Potentially a good measure of community health and activity levels as well as structures supporting these.

(13)

Potential Indicator Area: Physical health

Dataset: Babycare Australia

Category: Physical Asset, Social Structure.

Brief description: Online database of breastfeeding friendly businesses in Ipswich (www.breastfeeding.asn.au/products/babycare.html)

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Australian Breastfeeding Association	LGA	Online listing.	Annual updates.	Public access through online database.	Good	80 listings in Qld 3 in LGA	Low	Low

Validity:

- Representativeness - high of businesses that consider public support of breastfeeding important. Low of businesses in general. Self-nomination or nomination by others through local ABA group which inspects and awards Baby Care Room symbol.
- Comprehensiveness - unlikely to be a comprehensive listing of breastfeeding friendly businesses because most would not apply for accreditation unless they are aware of and supportive of the programme.
- Bias - self-selection of activist business support of breastfeeding.
- Collection check - yes because nominated facilities checked by ABA.

Data collection requirements: Collection and comparison across areas.

Assessment: Weak measure of physical health and facilities to support this.

(14)

Potential Indicator Area: Healthy ageing

Dataset: University of the Third Age (U3A)

Category: Participation, Social Structure

Brief description: Membership database of organisation for continuing education for seniors.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
U3A	Mostly local.	At membership.	As people join.	An incorporated organisation therefore required committee meeting to make decision regarding access. Willing as of September 2010 to allow access to database to extract postcode and gender de-identified information.	Time to access database and extract data.	Approx. 250 people.	Medium	Good

Validity:

- Representativeness - of older people who are actively interested in adult education, not of older people in general.
- Comprehensiveness - low.
- Bias - self-selected group of people actively seeking further education.
- Collection check - no.

Data collection requirements: Extraction and de-identification.

Assessment: Useful dataset of social structure and participation by older people.

(15)

Potential Indicator Area: Physical activity

Dataset: Safe City

Category: Participation

Brief description: CCTV coverage of Ipswich public areas.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
ICC	LGA	Network of CCTV cameras.	24 hour video surveillance.	ICC publicity says very transparent. Security consultant (Stacey Kirmos) concerned about privacy issues. Would consider access if Safe City staff were paid to count and pass on information. Only allow access with agreement of ICC (privacy and not for public issues). Generally hostile to idea of sharing information.	High if have to pay Safe City staff to access data.	Unknown	Unknown	Can only be assessed if a clearer picture of location and usage of cameras.

Validity:

- Representativeness - unknown.
- Comprehensiveness - unknown.
- Bias - towards areas deemed in need of monitoring by council e.g. Ipswich City Mall.
- Collection check - no.

Data collection requirements: High.

Assessment: Currently not a useful database for building indicators around participation.

(16)

Potential Indicator Area: Physical activity

Dataset: Public Swimming Pool Usage

Category: Physical Asset, Participation

Brief description: Public usage of swimming pools in Leichardt, Rosewood, Bundamba, Goodna.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
ICC	LGA	Gate count and report to ICC.	Contemporaneous collection, reported annually.	Through Operations Manager, Health, Parks and Recreation David Baker, 3810 6582.	Good because already monitored by council.	Unknown	High – simple tally.	Good because count of people taking part in physical activity.

Validity:

- **Representativeness** - of all council owned pools. Not representative of all pools in LGA e.g. Springfield has a pool that isn't ICC owned.
- **Comprehensiveness** - good because monitoring of usage for business practices/
- **Bias** - only represents usage of public pools. Counts spectators as well as swimmers.
- **Collection check** - no.

Data collection requirements: Access to council usage data.

Assessment: Good measure of physical activity in swimming season.

(17)

Potential Indicator Area: Physical activity

Dataset: Active After Schools Community

Category: Participation, Social Structure

Brief description: Federal government run program to promote sports and activity by primary school aged children.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Ausport	Participant schools in local area.	1. acquittal reports by schools. 2. independent consultants 360° research (interviews with parents, kids, schools).	End of each term. Currently waiting to hear if program will continue – hope for baseline funding.	Open to discussing access based on specific research agenda. Contact for this area: Katie Macleod 3031 8007	Unknown	13 schools in West Moreton, 5 in Ipswich although this includes Western Brisbane	Self-selected (i.e. schools have to apply to be part of program so are more interested in physical activity).	Good if access can be arranged to data.

Validity:

- Representativeness - of schools interested in promoting fitness and successful in applying to be part of the program.
- Comprehensiveness - good.
- Bias - schools have to apply for and be accepted into this program as well as participate in the evaluation. Schools have to meet certain criteria to be accepted and have to wait for a position to be open.
- Collection check - no.

Data collection requirements: Arranging access through Ausport.

Assessment: Potentially a useful measure of participation.

(18)

Potential Indicator Area: Physical activity

Dataset: Heart Foundation Walking

Category: Participation, Social structure

Brief description: Locally organised, Heart Foundation sponsored walking groups.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Heart Foundation	LGA	Registration forms: Name, address, date of birth, contact details, gender, occupation, language, ATSI, admin details, dog ownership.	On registration annually.	Open to use of de-identified data as long as Heart Foundation is acknowledged.	Good because HF already collate data.	4000 in Qld, 12,000 nationally. Unknown numbers in LGA.	Medium	Good

Validity:

- Representativeness - of walking groups affiliated with the Heart Foundation.
- Comprehensiveness - good within limits of representation.
- Bias - towards formalised walking groups.
- Collection check - yes, collected by local groups and tabulated by Heart Foundation.

Data collection requirements: Extraction, de-identification.

Assessment: Good contribution to measures of physical activity.

(19)

Potential Indicator Area: Healthy ageing

Dataset: Meals on Wheels – Ipswich, Redbank Plains (Woogaroo), Rosewood.

Category: Physical Asset, Social Structure

Brief description: Ipswich handles up to Bundamba, Redbank Plains takes care of Wacol, Goodna, Ebbw Vale, Springfield Lakes, Rosewood covers country areas of Ipswich.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Meals on Wheels	LGA	On sign up: Name Address Date of birth Dietary needs	On joining (people can sign up for as long as they need meal supports so the number of members fluctuates weekly).	Will allow researcher to access database to extract postcode, location, date of birth information. Rosewood – not willing to speak to researcher. Central office will supply figures regarding usage and meal costs.	Person to access and extract data.	As of 10/2010 Ipswich 182/day Redbank Plains 55/day Rosewood (figures from Qld central office) 37/day LGA 274/day Qld 10,500 daily to 15,000 clients	High	Good measure of people in LGA who are not in care but need assistance as they age.

Validity:

- Representativeness - probably of elderly people who need meals, not of older people in general.
- Comprehensiveness - probably covers most people who need meal help who do not live in care.
- Bias - represents people who can't provide their own meals but not older people in general.
- Collection check - yes. Data from individual groups cross-checked with Queensland office.

Data collection requirements: Extraction of data from individual databases. Probably ethics clearance.

Assessment: Potentially useful contribution to healthy ageing indicator.

(20)

Potential Indicator Area: Physical activity

Dataset: Ipswich Little Athletics

Category: Participation, Social Structure

Brief description: Organised track and field events and training for 5-16 year olds.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Ipswich Little Athletics Robert Dixon, Registrar 3812 0498	LGA	On signup (annually): Contact details of parents, gender, date of birth, allergies.	Annually	Private (no outside access). Contact to arrange generation of data. Easy to access gender and age. Postcodes more difficult and might require compensation for time.	Good	As of Sept. 2010, 302 in LGA.	High	Good

Validity:

- Representativeness - covers formalised junior athletics in Ipswich.
- Comprehensiveness - good because all participants required to sign up.
- Bias - children and parents interested in athletics.
- Collection check - no.

Data collection requirements: Possible compensation for time to extract data because no public access to dataset.

Assessment: Good measure of formal/organised junior physical activity.

(21)

Potential Indicator Area: Physical activity

Dataset: Ipswich Hockey Association

Category: Participation, Social Structure

Brief description: Umbrella organisation for hockey in Ipswich area.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Ipswich Hockey Association	LGA	On registration: Name Address Telephone Email Blue card First aid qualification	Annual	Open: "come and count."	Person to extract data.	Sept. 2010 1,020 players If officials included: 1,040	High	Good

Validity:

- Representativeness - of hockey players in Ipswich.
- Comprehensiveness - high because registration required.
- Bias - towards people interested in organised and competitive hockey.
- Collection check - no.

Data collection requirements: Extraction and de-identification.

Assessment: Good measure of physical activity and participation in organised sports.

(22)

Potential Indicator Area: Physical activity

Dataset: Ipswich Junior Rugby League

Category: Participation, Social Structure

Brief description: Ipswich Junior Rugby League is owned by the ARL Development Group and falls under the control of the Queensland Rugby League, Southeast Queensland Division.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
ARL Development Group	LGA plus Brisbane Valley	On registration: Name Date of birth and birth certificate Address Ethnicity (as of 2010) Previous playing experience	Annual	Private but open to discussion based on specific research needs. Contact: Michael Pease, SEQ Division 3367 6060 QRL 3367 6000	Good	2,616 participants (13 clubs)	High	Good

Validity:

- Representativeness - of organised competitive rugby league in Ipswich.
- Comprehensiveness - high because registration required.
- Bias - towards juniors interested in competitive sport.
- Collection check - yes, data collected by clubs and centrally collated.

Data collection requirements: Willing to freely share gender and age information. Need to discuss other access based on specific research project.

Assessment: Good measure of organised junior physical activity in Ipswich.

Ipswich Junior Rugby League Notes

13 clubs in Ipswich and Brisbane Valley area. 15% growth in 2009. Up to age 12 90% male players playing in mixed teams. After age 12, teams have to be single sex. Currently no female teams in Ipswich but they expect to start one next year.

Breakdown of players 2010:

Total	2,616
Under 6	209
Under 7	212
Under 8	240
Under 9	242
Under 10	274
Under 11	273
Under 12	282
Under 13	253
Under 14	276
15-16 yo	355

(Between 100 and 150 girls playing in under 12 age group)

(23)

Potential Indicator Area: Physical activity

Dataset: Queensland Christian Soccer Association

Category: Participation

Brief description: Runs seven soccer clubs in the Ipswich area.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
QCSA	Local	Individual clubs collect different information. Centrally collected is: Name Address Age	Annual at registration.	Through Registrar Shirley Thompson 0431 625 990 Or website: qcsa.org.au	Good because willing to provide data.	Approx. 800 players U7-U15 majority male. 52 clubs in Qld. Approx. 3-4000 U15 players.	High	Good

Validity:

- Representativeness - of people playing competitive junior soccer in one of two associations in Ipswich area.
- Comprehensiveness - high because registration required.
- Bias - towards juniors interested in competitive sport.
- Collection check - yes because data collected at club level and collated centrally.

Data collection requirements: Can provide some data based on specific research project.

Assessment: Good measure of organised junior physical activity in Ipswich.

(24)

Potential Indicator Area: Physical activity

Dataset: Ipswich Based Gyms

Category: Participation

Brief description: Membership of private gyms in Ipswich.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Lifestyle Health	Local	On membership	As people join throughout year.	Private. Contact through manager.	n/a	3,000	High.	No
Healthworks	Local, majority with 4305 postcode	On membership	As people join throughout year.	Willing to allow access to extract de-identified gender and postcode data.	Person to extract data.	1,000	High	Low
Goodlife	Local	On membership	As people join throughout year.	Private because states in contract that information won't be shared.	n/a	3,500	High	No

Validity:

- Representativeness - no conclusions can be drawn as to representativeness of gym membership.
- Comprehensiveness - no.
- Bias - gym members are people who are interested in exercising. Membership does not equate to exercise as reportedly many more people join gyms than use them.
- Collection check - no.

Data collection requirements: Difficult to access data and difficult to use as a measure of activity.

Assessment: Not a good source for measures of physical activity in Ipswich.

(25)

Potential Indicator Area: Physical activity

Dataset: Cycling – The Yellow Jersey

Category: Participation

Brief description: Not a database as such but some anecdotal information about Ipswich.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
The Yellow Jersey	Local	Sales	Annual	Private	N/A	No datasets: Proprietor estimates that across LGA independent bike shops about 2,000 bikes sold p.a. This would be about 20% of bikes sold annually in Ipswich.	Low – anecdotal.	Low

Validity:

- Representativeness - low (80% of bicycles in Ipswich sold in major retailers like Kmart, Target etc.)
- Comprehensiveness - no.
- Bias - Anecdotal evidence. Suggestion that cyclists who purchase a bike in a bike shop would be more likely to use it compared to someone who bought a bicycle in Kmart.
- Collection check - no.

Data collection requirements: No access.

Assessment: Useful anecdotal evidence but not valid to create measure of participation in physical activity.

(26)

Potential Indicator Area: Physical activity

Dataset: Ipswich Basketball Association

Category: Participation, Social structure

Brief description: Junior and senior competitive and social basketball fixtures.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Ipswich Basketball Association	Local	At membership.	Annually	Open to access of database to extract de-identified data such as gender and postcode.	Person to extract data.	(2010) 836 participants	Unknown	Medium

Validity:

- Representativeness - of competitive and social basketball players in Ipswich.
- Comprehensiveness – high because registration required..
- Bias – towards people interested in competitive sports.
- Collection check - no.

Data collection requirements: Data extraction and de-identification.

Assessment: Potentially good source for constructing measures of participation and social structures.

(27)

Potential Indicator Area: Physical activity

Dataset: Ipswich Cycling Club

Category: Participation, Social Structure

Brief description: "Riders of all ages and abilities from children to masters, and novices to champions. We hold road races, criteriums and time trials throughout the year, the highlight being the Ipswich Open in May... affiliated with Cycling Australia and Cycling Queensland which means our members are covered for personal accident and public liability insurance."

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Ipswich Cycling Club	Local	At membership: Name Contact details Interests	Annually	Open to de-identified data being used once taken to club meeting for approval.	Person to extract data.	Approx. 100.	Low for all cyclists, high for competitive road racers.	Low

Validity:

- Representativeness - of cyclists interested in road racing but not recreational or trail cyclists.
- Comprehensiveness - unknown.
- Bias - towards cyclists interested in road competitions.
- Collection check - no.

Data collection requirements: Data extraction and de-identification.

Assessment: Small database of cyclists interested in road racing that doesn't represent all cyclists.

(28)

Potential Indicator Area: Food consumption

Dataset: Ipswich Central Markets

Category: Participation, Physical Asset

Brief description: Some anecdotal evidence about markets in Ipswich.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
David Bostock & Sons 0418 739 136	Ipswich CBD.	Stall registration, market attendance.	Twice monthly (2 nd and 4 th Sunday of the month).	Yes	Phone call.	Started with 14 farmers, now down to 3 produce vendors. Spent \$29,000 and considers it a failure because Ipswich people "won't buy fresh produce."	Low – anecdotal.	Low

Validity:

- Representativeness - not representative of markets in Ipswich or produce sales.
- Comprehensiveness – N/A
- Bias - anecdotal evidence
- Collection check - no

Data collection requirements: Phone call.

Assessment: Low value in creating measures of fruit and vegetable consumption in Ipswich.

(29)

Potential Indicator Area: Physical activity, health

Dataset: SNAP (Screening, Nutrition, Activity Program)

Category: Participation, Social Structure

Brief description: “The SNAP Program is a workplace based health promotion program. It is all about becoming your own private health ambassador, promoting your own health and well being with a little help from the SNAP team. The SNAP team provide businesses with individual private health screenings of participants. Participants set targets for lifestyle changes such as drinking less alcohol, smoking fewer cigarettes, eating more fruit or improving their cholesterol levels.”

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
IHF	Individual Business Mainly LGA, some Brisbane & Gation.	1. Biometric 2. survey/questionnaire Blood pressure Cholesterol Height Weight Stress Physical exercise Alcohol use Smoking Self-reported physical/mental health Demographics	Approx 6 monthly. Reality as needed. Approx 1000 collected each year, some new some repeat.	Through data custodian (HCRC) – data could be de-identified for QH.	Negotiated through HCRC.	7000 records for 4000 people.	Indiv. Good – change over time. Group – self selected therefore issues of validity for change over time.	High

Validity:

- Representativeness – self-selected proportion of businesses in Ipswich area interested in promoting health of employees.
- Comprehensiveness - high, because repeated measures.
- Bias - voluntary workplace program.
- Collection check - some with repeated measures.

Data collection requirements: Data extraction and negotiation with IHF over conditions of use.

Assessment: Potentially useful for measures of individual health and participation in physical activity.

(30)

Potential Indicator Area: Behaviour, healthy eating

Dataset: Queensland Kids Freshnet

Category: Social Structure

Brief description: An initiative of the Brisbane markets to help schools promote consumption of fruit and vegetables and healthy eating in general (www.brisbanemarkets.com.au/cms/bpm-queensland-kids-fresh-net.html).

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Brisbane Markets Ltd. Contact Evan Barea, ebarea@ brisbanemarkets.com.au	Regional	On membership – school details.	On joining (annually).	Have provided master list of schools.	Request for info.	824 schools, 36 in Ipswich LGA.	Low – self-selected.	Has potential.

Validity:

- Representativeness - unknown.
- Comprehensiveness – 36 of all schools in Ipswich.
- Bias - self-selected schools interested in promoting good nutrition and food education.
- Collection check - no.

Data collection requirements: Simple to access database. Could contact schools in LGA if interested in what benefits they get from participation in programme.

Assessment: Has potential for information about social structures supporting healthy eating but would need work to make good use of information.

(31)

Potential Indicator Area: Behaviour, healthy eating

Dataset: Fast Food Outlets in Ipswich LGA

Category: Social structure, Participation.

Brief description: Yellow Pages search for "takeaway food" postal codes: 4300, 4301-4306, 4340, 4346

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
N/A	Postal code area.	Online search.	As needed.	Public through Yellow Pages business listings.	Low, online access.	112 outlets in LGA	High for businesses advertising in Yellow Pages. Low for all businesses.	Has potential.

Validity:

- Representativeness - only of businesses in Yellow Pages.
- Comprehensiveness - for businesses that advertise in Yellow Pages.
- Bias - towards businesses able to advertise.
- Collection check - no.

Data collection requirements: Annual postcode and area searches in Yellow Pages.

Assessment: Has potential as some way of measuring eating patterns.

(32)

Potential Indicator Area: Behaviour, health, eating patterns.

Dataset: Liquor Stores, Pubs/Hotels in Ipswich LGA

Category: Social structure, Participation

Brief description: Yellow Pages search for "liquor stores-retail," "pubs," "hotels-accommodation," "restaurants-licensed," "restaurant-bar," "nightclub," "RSL" postal codes: 4300, 4301-4306, 4340, 4346.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
N/A	Local by postcode	As needed.	As needed.	Public through Yellow Pages business listings.	Low, online access.	21 liquor stores, 11 pubs, 31 hotels, 5 licensed restaurants, 3 restaurants with bars, 1 nightclub, 6 RSLs TOTAL: 77 with some overlap	High of businesses that advertise in Yellow Pages. Low for all businesses.	Has potential.

Validity

- Representativeness - only of businesses in Yellow Pages.
- Comprehensiveness - of businesses that advertise in Yellow Pages.
- Bias - towards businesses able to advertise.
- Collection check - no.

Data collection requirements: Annual postcode and area searches in Yellow Pages.

Assessment: Has potential to contribute to measures of general health.

(33)

Potential Indicator Area: Healthy eating

Dataset: Average Produce Sales Coles Supermarkets in Ipswich LGA

Category: Participation, Physical Asset.

Brief description: Coles has four stores in Ipswich LGA: Springfield, Riverlink, Ipswich CBD and Redbank Plains.

Owner	Data level	How collected	How often	Access	Cost to Obtain	Size of dataset	Validity	Fit for Purpose
Coles	By store in LGA.	From sales.	Coles collects weekly produce data. Can provide annually average weekly data.	Debbie Clancy Lead Buyer - Fruit/VA Old Fresh Produce Ph 07 3361 5586 Mob 0411 023 860 email: Debbie.Clancy@coles.com.au	Contacting Coles.	One week's average amount/value for each store. Riverlink: 15,380 kgs/ \$50,500 Ipswich: 13,505kgs/ \$42,800 Redbank: 9,558 kgs/ \$30,500 Springfield: 15,757kgs/ \$50,014	Medium	Good

Validity:

- **Representativeness** - Coles only represents part of the market for supermarket groceries. Woolworths has 9 stores in Ipswich LGA (Booval, Brassall, Collingwood Park, Goodna, Ipswich, Riverlink, Karalee, Redbank Plains and Springfield). In addition, proportion of LGA-wide produce sold in supermarkets is not known.
- **Comprehensiveness** - based on aggregated weekly data of a "normal week."
- **Bias** - probable but can be used as an indication of area variance
- **Collection check** - no.

Data collection requirements: Regular contact with Coles to update figures.

Assessment: A good source for information that can potentially assist to develop indicators around healthy eating. Healthy eating is very difficult to gather information about and use must be made of whatever sources that can be accessed.