



Glamorgan Spring Bay

LOCAL GOVERNMENT AREA

Health is closely tied to our daily environment. This Community Health Check presents information about the environmental, social and economic state of the Glamorgan Spring Bay local government area.

Community Health Check 2024



About us



	Glamorgan Spring Bay	Tasmania	
Our population	5,012	557,571	
Aboriginal population	4.4%	5.4%	
Population by age	31% 20% 19% 6% 0-14 15-24 25-44 45-64 65+	26% 26% 21% 11% 0-14 15-24 25-44 45-64 65+	
Population by gender	51% 49% Male Female	51% 49% Male Female	
Median age in years	57	42	
Born outside Australia	23%	21%	

Sources: Our population, Aboriginal population, Population by age, Population by gender, Born outside Australia, and Median age in years: Australian Bureau of Statistics, 2021 Census All persons QuickStats, Local Government Areas, Glamorgan Spring Bay

Social and economic conditions



Education

The proportion of people in the Glamorgan Spring Bay LGA who have completed Year 12 and above is less than the proportion for Tasmania overall.

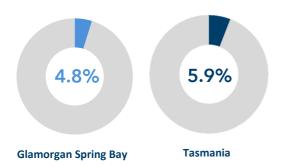
PER CENT OF ELIGIBLE POPULATION WHO HAVE COMPLETED YEAR 12 AND ABOVE



Higher education levels are associated with better health outcomes.

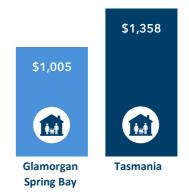
Unemployment rates

The rate of people in the Glamorgan Spring Bay LGA who are unemployed is less than the rate in Tasmania overall.



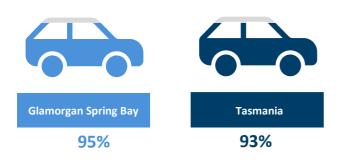
Median weekly income

Weekly income per household is less in the Glamorgan Spring Bay LGA than in the rest of Tasmania.



Motor vehicles

Ninety five per cent (95%) of households in the Glamorgan Spring Bay LGA have one or more motor vehicles.



Home ownership

More people in the Glamorgan Spring Bay LGA own their homes outright when compared to the rest of Tasmania.

Glamorgan Spring Bay	Tasmania
53%	37%
22%	33%
20%	26%
	Spring Bay 53% 22%

Source: Education, Unemployment rates, Median weekly income, Motor vehicles, Home ownership: Australian Bureau of Statistics 2021, Census All persons QuickStats, Local Government Areas, Glamorgan Spring Bay

Healthy living



Self-reported health

Thirty-seven per cent (37%) of Glamorgan Spring Bay residents rated their health as "excellent" or "very good". This is lower than the rate for Tasmania.

ADULTS REPORTING THEIR OWN HEALTH AS 'EXCELLENT' OR 'VERY GOOD'



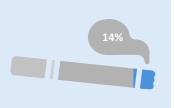
How people feel about their own health, their state of mind and their life in general is a common measure of health. (Australia's Health 2018. AIHW)

Risk factors

Risk factors are conditions or behaviours that make it more likely people will get a chronic condition or health problem. Some data not available for Glamorgan Spring Bay.

		Glamorgan Spring Bay	Tasmania
•	Overweight/obese body mass index (BMI)	70%	62%
9	Current smoker	14%	15%
	Daily/occasional vaping		3%
	Single occasion risky drinking (>4 alcoholic standard drinks)*	38%	37%
決	Insufficient moderate/vigorous activity ⁺		24%
	Did not meet recommended daily vegetable intake [^]	92%	91%
Ğ	Did not meet recommended daily fruit intake^	59%	61%

In the Glamorgan Spring Bay LGA, around 14% of people aged 18 years and over, are daily and current smokers, which is higher than the rate for Tasmania.



Source: Self-reported health and Risk factors: Tasmanian Population Health Survey 2022 Local Government Areas (LGA) Supplementary Data Tables *2009 National Health and Medical Research Council alcohol guidelines

⁺2014 National Health and Medical Research Council physical activity guidelines

^{^2013} National Health and Medical Research Council dietary guidelines

Healthy living



Psychological distress

Fewer adults in the Glamorgan Spring Bay LGA are likely to experience high or very high levels of psychological distress compared with Tasmania overall.

PEOPLE WITH HIGH OR VERY HIGH LEVELS OF PSYCHOLOGICAL DISTRESS



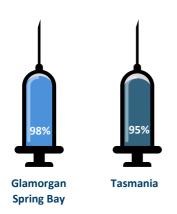
Psychological distress is a term used to describe unpleasant feelings or emotions that can influence how we function in daily life.

Health care



Immunisations

Ninety-seven percent (98%) of children in the Glamorgan Spring Bay LGA are fully immunised by the age of five, which is higher than the rate for Tasmania.



CHILDREN FULLY IMMUNISED AT 5 YEARS OF AGE

GP and emergency department encounters



In 2022, 84% of people from the Glamorgan Spring Bay LGA visited a general practitioner for their own health in the previous twelve months*.



On average each year during 2020-2022, 430 individuals from the Glamorgan Spring Bay LGA visited an emergency department (83 people per 1,000 population[^]), with an average of 683 ED presentations per year (132 ED presentations per 1,000 population[^]).

^Estimated population for June 2022=5,187

Sources: Psychological distress and GP encounters: Tasmanian Population Health Survey LGA Supplementary Data Tables 2022 Immunisations: Primary Health Information Development Unit, Social Health Atlas of Australia: Local Government Areas; Compiled based on data provided by Australian Childhood Immunisation Register, Medicare Australia, 2021

Emergency department encounters: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; accessed November 2023

*Individual totals may be higher due to patients potentially visiting more than one practice outside an LGA area or possible de-identification linkage errors from patient administration extraction software.

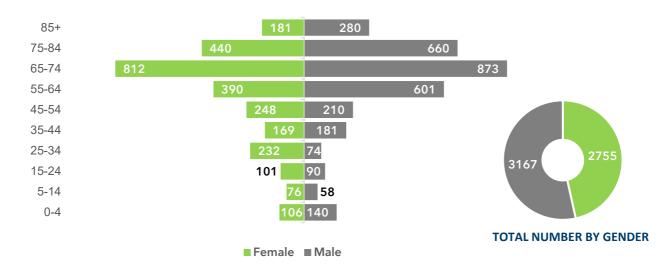
Health outcomes



Public hospital admissions

During the five years from 2018-2019 to 2022-2023 there were 5,922 admissions to Tasmanian public hospitals from the Glamorgan Spring Bay LGA, with 3,171 overnight stays.

NUMBER OF PUBLIC HOSPITAL ADMISSIONS BY AGE GROUP AND GENDER 2018-19 TO 2022-23



TOP 10 PRIMARY HOSPITAL DIAGNOSIS*^	TOP 10 CHARLSON COMORBIDITIES^^	TOP 10 POTENTIALLY PREVENTABLE HOSPITALISATIONS
Other cataract	Any malignancy, including lymphoma and leukaemia, except malignant neoplasm of skin	Diabetes complications
Pain in throat and chest	Renal disease	Chronic obstructive pulmonary disease
Care involving dialysis	Cerebrovascular disease	Type 2 diabetes
Abdominal and pelvic pain	Chronic pulmonary disease	Cellulitis
Atrial fibrillation and flutter	Diabetes with chronic complication	Congestive heart failure
Myelodysplastic syndromes	Myocardial infarction	Urinary tract infections
Recurrent depressive disorder	Metastatic tumour	Iron deficiency anaemia
Liveborn infants according to place of birth	Congestive heart failure	Type 1 diabetes
Other anaemias	Dementia	Convulsions epilepsy
Other symptoms and signs involving the digestive system and abdomen	Diabetes without chronic complication	Angina

^{*}Excludes diagnoses coded as "persons encountering health services in other circumstances" and "other medical care" which cover a wide range of diverse categories and are as such less useful in understanding reasons for hospitalisations.

Health outcomes



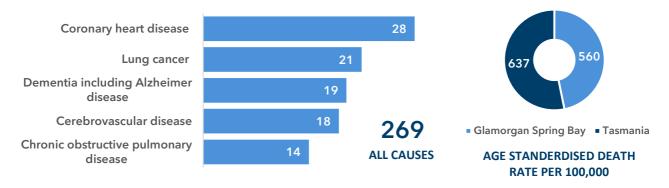
The primary hospital diagnosis is the diagnosis established after study (for example, at the completion of the episode of care) to be chiefly responsible for causing the episode of admitted patient care. It is essentially the main reason someone needed to be admitted to hospital.

^^Patients admitted to hospital often have other comorbid conditions, which may or may not be related to their diagnosis. *The Charlson Comorbidities Index* classifies 17 comorbid conditions which may influence mortality risk.

Causes of death

During 2017-2021 coronary heart disease (10%), lung cancer (8%), dementia including Alzheimer disease (7%), cerebrovascular disease (7%) and chronic obstructive pulmonary disease (5%), were the leading causes of the 269 deaths in the Glamorgan Spring Bay LGA. The age standardised death rate in 2021 was 559.8 compared with the overall aged standardised rate of 636.7 for Tasmania.

TOP CAUSES OF DEATH 2017-2021, BY NUMBER



Sources: Public hospital admissions: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; Accessed March 2024; Charlson Comorbidities: Charlson, Mary E., et al. "A new method of classifying prognostic comorbidity in longitudinal studies: development and validation." Journal of chronic diseases 40.5 (1987): 373-383

Causes of death: Mortality over Regions and Time (MORT) book, LGA, 2017-2021, accessed November 2023.

The Tasmanian Community Health Checks feature information about the 29 Local Government Areas (LGAs) in Tasmania. For reports on the other 28 LGAs, please visit primaryhealthtas.com.au and search for Community Health Checks or email info@primaryhealthtas.com.au.

This data is sourced as part of Primary Health Tasmania's ongoing provider support activity. While extensive efforts have been made to ensure this information is as accurate as possible, the data is gleaned from multiple public and private organisations via visits and web searches, and Primary Health Tasmania cannot attest to the continued veracity of this dataset as practice and practitioner details change continually. The information presented is accurate as of March 2024. For the most current information, please go to www.phnexchange.com.au.