



# Dorset

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 Dorset local government area.

**Community Health Check 2025** 



# **About us**



	Dorse	t LGA	Tasm	nania
Our population		6,829	55	57,571
Aboriginal population	4.1%		5.4%	
Population by age	16% 9% 0-14 15-24 25-4		26 17% 11% 0-14 15-24 25-	21%
Population by gender	50% Male	50% Female	51% Male	49% Female
Median age in years	48		42	
Born outside Australia	17%		2	1%

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, Dorset

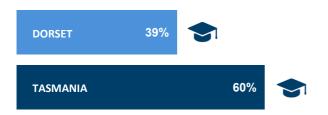
# Social and economic conditions



#### **Education**

The proportion of people in the Dorset LGA who have completed Year 12 and over is less than the proportion for Tasmania overall.

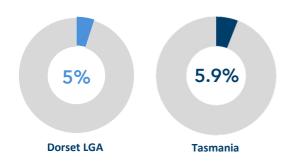
PER CENT OF ELIGIBLE POPULATION WHO HAVE COMPLETED YEAR 12 AND OVER



Higher education levels are associated with better health outcomes.

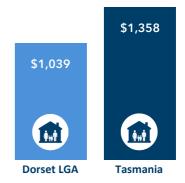
### **Unemployment rates**

The rate of people in the Dorset LGA who are unemployed is lower than the rate in Tasmania.



## Median weekly income

Weekly income per household is less in the Dorset LGA than in the rest of Tasmania.



#### **Motor vehicles**

Ninety-four percent (94%) of households in the Dorset LGA have one or more motor vehicles.



### Home ownership

More people in the Dorset LGA own their homes outright compared to the rest of Tasmania.

	Dorset	Tasmania
Owned outright	44%	37%
Owned with mortgage	29%	33%
Rented	20%	26%

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

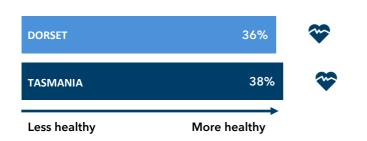
# Healthy living



## Self-reported health

Thirty-six per cent (36%) of Dorset residents rated their health as "excellent" or "very good". This is lower than the rate for Tasmania overall.

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



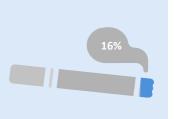
How people feel about their own health, their state of mind and their life in general is a common measure of health. (Australia's Health 2018. AIHW)

#### **Risk factors**

Risk factors are conditions or behaviours that make it more likely people will get a chronic condition or health problem.

		Dorset	Tasmania
•	Overweight/obese body mass index (BMI)	<b>79%</b>	62%
9	Current smoker	16%	15%
	Daily/occasional vaping	2%	3%
	Single occasion risky drinking (>4 alcoholic standard drinks)*	31%	37%
<b>决</b>	Insufficient moderate/vigorous activity <sup>+</sup>	16%	24%
	Did not meet recommended daily vegetable intake <sup>^</sup>	85%	91%
Ŏ	Did not meet recommended daily fruit intake <sup>^</sup>	67%	61%

In the Dorset LGA, around 16% of people aged 18 years and over, are daily and current smokers, which is lower 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

<sup>\*2014</sup> National Health and Medical Research Council physical activity guidelines

<sup>^2013</sup> National Health and Medical Research Council dietary guidelines

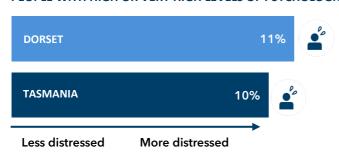
# **Healthy living**



## **Psychological distress**

More adults in the Dorset 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**

Eighty-nine per cent (89%) of children in the Dorset LGA are fully immunised by the age of five, which is lower than the rate for Tasmania.



CHILDREN FULLY IMMUNISED AT 5 YEARS OF AGE

# **GP and emergency department encounters**



In 2022, 85% of people from the Dorset LGA visited a general practitioner for their own health in the previous twelve months\*.



On average each year during 2021-2023, 694 individuals from the Dorset LGA visited an emergency department (99 people per 1,000 population<sup>^</sup>), with an average of 1,196 presentations per year (170 ED presentations per 1,000 population<sup>^</sup>).

^Estimated population for June 2022=7,022

Sources: Psychological distress: Tasmanian Population Health Survey 2022 Local Government Areas (LGA) Supplementary Data Tables. 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. GP encounters: Primary Health Information Network (PHIN) dataset (General Practice dataset), Analysed by Primary Health Tasmania; accessed October 2022.

Emergency department encounters: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; accessed March 2025.

\*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.

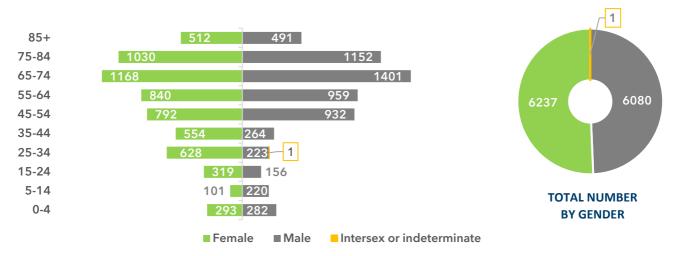
## **Health outcomes**



## **Public hospital admissions**

During the five years from 2019-20 to 2023-24 there were 12,318 admissions to Tasmanian public hospitals from the Dorset LGA area, with 6,416 overnight stays.

#### NUMBER OF PUBLIC HOSPITAL ADMISSIONS BY AGE GROUP AND GENDER 2019-20 TO 2023-24



TOP 10 PRIMARY HOSPITAL DIAGNOSIS*^	TOP 10 CHARLSON COMORBIDITIES^^	TOP 10 POTENTIALLY PREVENTABLE HOSPITALISATIONS
Care involving dialysis	Renal disease	Iron deficiency anaemia
Iron deficiency anaemia	Any malignancy, including lymphoma and leukaemia except malignant neoplasm of skin	Chronic obstructive pulmonary disease (COPD)
Other cataract	Chronic pulmonary disease	Diabetes complications
Other chronic obstructive pulmonary disease	Rheumatic disease	Cellulitis
Abdominal and pelvic pain	Cerebrovascular disease	Congestive heart failure
Live born infants according to place of birth	Congestive heart failure	Type 2 diabetes
Multiple sclerosis	Myocardial infarction	Urinary tract infections
Single spontaneous delivery	Diabetes with chronic complication	Angina
Other symptoms and signs involving the digestive system and abdomen	Metastatic tumour	Convulsions epilepsy
Pain in throat and chest	Diabetes without chronic complication	Dental conditions

<sup>\*</sup>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**



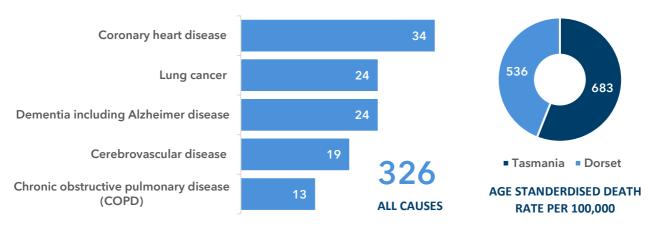
^The primary hospital diagnosis is the diagnosis established after study (for example, at the completion of the episode of care) to be chiefly responsible for causing the episode of admitted patient care. It is essentially the main reason someone needed to be admitted to hospital.

^^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 2018-2022 coronary heart disease (10%), lung cancer (7%), dementia including Alzheimer disease (7%), cerebrovascular disease (6%), and chronic obstructive pulmonary disease (4%) were the leading causes of the 326 deaths in the Dorset LGA area. The age standardised death rate in 2022 was 536 per 100,000 compared with the overall age standardised rate of 683 for Tasmania.

#### **TOP CAUSES OF DEATH 2018-2022, BY NUMBER**



Sources: Public hospital admissions: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; Accessed March 2025; 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, 2018-2022, accessed March 2025.

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 2025. For the most current information, please go to www.phnexchange.com.au.