Aboriginal and Torres Strait Islander Health Services Data Advisory Group Communique #7

November 2022

The Aboriginal and Torres Strait Islander Health Services Data Advisory Group (HS DAG) Communique keeps Aboriginal and Torres Strait Islander primary health care services up to date about outcomes regarding the National Key Performance Indicator (nKPI) and Online Services Report (OSR) data collections. This Communique also provides information about the work of the group more broadly regarding Indigenous health data. This is the seventh HS DAG Communique. Previous Communiques can be found on the [HS DAG website](https://www.health.gov.au/committees-and-groups/aboriginal-and-torres-strait-islander-health-services-data-advisory-group?utm_source=health.gov.au&utm_medium=callout-auto-custom&utm_campaign=digital_transformation#communiques).

On 24 October 2022, the HS DAG met face-to-face and via teleconference.

If you would like to submit an item for consideration by the HS DAG, please send your submission using a [submission template](https://www.health.gov.au/resources/publications/health-services-data-advisory-group-submission-template) to the HS DAG Secretariat at: hs.data.advisory.group@health.gov.au. All submissions will be reviewed for inclusion by the co-chairs for appropriateness.

# Outcomes of 24 October 2022 meeting

## nKPI PI17 AUDIT-C

The HS DAG agreed to retire the nKPI PI17 AUDIT C indicator for reporting rounds from June 2023 onwards. Departmental consultations on the use of AUDIT C have shown limited adoption nationally and infrequent use by key stakeholders, limiting the quality of data for the purpose of monitoring alcohol status, burden and use in First Nations people. Retiring the mandatory reporting for the indicator does not prevent services from continuing to use the AUDIT C screening tool if they wish to do so.

## July 2022 nKPI and OSR reporting round

The most recent nKPI and OSR Health Data Portal reporting round saw 100 per cent of services reporting on nKPIs and 98 per cent reporting on OSR.

The main reporting issues for the nKPIs centred on the revised nKPI PI18 and PI19 (kidney function screening and results).

This was the first collection to include the pilot STI screening indicator (PI25). While most organisations reported against the indicator, AIHW noted a number of organisations had 0s in the numerators. Because there is no validation rule for numerators of 0, it cannot be determined whether the 0s were due to the screening not occurring or an inability of the screening to be extracted from the CIS.

The Committee discussed the data captured and reported in the OSR. It was noted that the there was a new data item asking organisations with multiple sites to allocate their client numbers across the sites (where a client could only be counted once), which generated a high number of validation issues for these organisations.

The June 2022 nKPI and 2021-22 OSR results will be released in January 2023. AIHW has had an initial conversation with NACCHO about additional analyses of changes in selected nKPI indicators and OSR items prior to and during COVID, to be published after the January release.

## Activity Work Plan / Performance Report move to Health Data Portal

The HS DAG noted that for the first time the Indigenous Australians Health Programme (IAHP) PHC Performance Report were being submitted online through the Health Data Portal. Submissions closed on **31 October 2022**.

The development team is also finalising the specifications for the first version of the Activity Work Plan and the associated Risk Plan to be reported through the Health Data Portal in June 2023. New features and refinement to the activity workplan will be made in the following year. Pre-population of data from the Activity Work Plan to the Performance Report will be done in thethird year.

### Post-AHMAC committee structure of the HS DAG under the Health Chief Executives forum and Indigenous Health Identifier (VII)

The committee discussed how HS DAG’s functions might be expanded in light of post-COAG governance arrangements to further contribute to broader key data issues arising from Closing the Gap – notably Priority Reform 4, the Health Plan, and Indigenous data sovereignty – through adding a governance function to the HS DAG to provide oversight of implementation of Indigenous data sovereignty principles for health data collections held by the Department.

The committee further considered potential steps for HS DAG to incorporate this proposed function, including:

* Mapping of existing data assets and governance frameworks within the Department
* Commissioning an Indigenous consultancy to develop a national best practice framework for Indigenous data sovereignty/governance
* Expanding Indigenous membership of HS DAG
* Determining the appropriate committee structure for the governance function

The group also discussed the role of HS DAG in the current and future governance arrangements for VII, consistent with the Indigenous data governance discussion.

### Next meeting

The next HS DAG meeting is scheduled for March 2023.