

How can we implement a more data-rich and data driven health system – observations from mixed professional round table discussions in Australia, 2016

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Attendees and purpose

- Two roundtables
 - Melbourne
 - Sydney
- Chatham House rules
- Data-rich and data-driven health system in Australia – are we there yet?
- Attendees
 - policymakers
 - international experts
 - senior representatives of public and private providers
 - clinicians
 - insurers
 - legal and data privacy experts

Background reading materials on 4 topics of discussion:

- Data is not just a purely transactional thing
- Data Quality
- Privacy
- Security



Data is not just a purely transactional thing

- More fundamental
- Solution to cost quality crunch
- Benchmarking makes health care more effective
- Safe and quality health care is driven by information and expertise and professionalism of the workforce*

*Commission on Safety and Quality of Health Care

- Technical quality – data fidelity
 - Are the codes reliably filled-in
 - Do the codes reflect what is happening?
- Does it make sense?
 - Choice of what we code and record

- Health information is highly personal
- Respect for privacy gives confidence to use services

- Moving to digital platforms – security is priority
- Cybersecurity becomes a top threat
- Healthcare sector 26.9% of all breaches

Urgent need

- capture and use
- high quality data
- improve health outcomes and health system efficiency

Conclusions

- There is wide variation in clinical processes and outcomes between comparable organisations unrelated to case-mix
- Processes are difficult to analyze and improve
- The public wants:
 - immediacy of data
 - transparency of data
 - informed choices

Conclusions

- Chance to discuss
- Open
- Confidential
- In a neutral setting
- More debates needed

When? Not if.

- Data and outcomes transparent
- Reward for outcome and value
- Competitive advantage gained by early adoption of:
 - Transparency
 - Value-based care
- Cost of pulling all the systems together is investment