Public consultation on a draft Data strategy

Submission template

The Australian Health Practitioner Regulation Agency (Ahpra) is inviting feedback on our draft Data strategy. The Data strategy will guide how we use data that we collect and store.

We are inviting responses to specific questions about our future use of this data and general comments on the draft Data strategy.

In addition to the Data strategy on page 4 of the consultation paper, we are consulting on the future directions for three focus areas:

- the public register of health practitioners
- data sharing, and
- advanced analytics.

Publication of submissions

We publish submissions at our discretion. We generally publish submissions on our website to encourage discussion and inform the community and stakeholders about consultation responses. Please let us know if you do not want your submission published.

We will not place on our website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the subject of the consultation. Before publication, we may remove personally identifying information from submissions, including contact details.

We can accept submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal experiences or other sensitive information. A request for access to a confidential submission will be determined in accordance with the *Freedom of Information Act 1982* (Cth), which has provisions designed to protect personal information and information given in confidence. Please let us know if you do not want us to publish your submission or if you want us to treat all or part of it as confidential.

Published submissions will include the names of the individuals and/or the organisations that made the submission unless confidentiality is expressly requested.

Do you want your responses to be published?

☒ Yes I want my responses to be published

☐ No I do not want my responses to be published

Your contact details

Name: ▉▉▉▉▉▉▉▉▉▉

Organisation: National Rural Health Alliance

Contact email: ▉▉▉▉▉▉▉▉▉▉▉▉

How to give feedback

Please email your submission in a Word document (or equivalent) to AhpraConsultation@ahpra.gov.au by 31 January 2023.

Submission template

Please read the public [consultation paper](#) (including the draft Data strategy) before responding. The draft Data strategy can be found on page 7 of the consultation paper.

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Draft Data strategy

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1. Does the draft Data strategy cover the right issues?

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The following statements, domains and objectives are of particular relevance to the National Rural Health Alliance (the Alliance), as a member organisation and the peak body for the rural health sector, striving for healthy and sustainable rural, regional or remote (hereafter rural) communities across Australia. Our members traverse health professions and include service providers, the health education sector, health students, consumer organisations and the Aboriginal and Torres Strait Islander health sector.

Statements of intent

- **Our communities have trust and confidence in our data**

- **Our data is fit for purpose and protected**

  - **Trust and confidence:** *Data that is used for decision making or shared with external parties is fit for purpose to ensure appropriate decisions are made and improve organisation reputation*

  - **Insight generation:** *We analyse and access relevant datasets to support workforce planning for a sustainable health workforce*

  - **Shared data value:** *We obtain data from, and exchange data with, relevant organisations to better inform our work and understand risks and behaviours*

  - **Shared data value:** *We enable the expanded use of our data by providing data to organisations who can demonstrate value-add public benefits*

Maldistribution across most of the Ahpra registered health professions in rural, regional and remote (hereafter rural) Australia has existed and persisted for many years. Without adequate full time equivalent (FTE) of health professionals across the core professions required to provide a minimum standard of primary health care and hospital care in rural Australia, access to health services is reduced. This reduction in access to health services is key to the persistent poor health outcomes experienced by people living outside major cities over decades.

Data collected, held, analysed and distributed by Ahpra and its partner organisations is integral to development of the rural health sector's understanding of the state of the rural health workforce and therefore, the design of policies and advocacy strategies to improve its size, distribution and retention, with the ultimate aim of improving equity of health outcomes for rural people and communities.

Given the regulatory nature of Ahpra's functions and the associated high response rate to workforce surveys delivered by Ahpra, it has a crucial role in the collection, analysis and distribution of high-quality data about the regulated health professions. Taking into account the burden on health professionals of completing onerous workforce surveys and the finite resources available for allocation to the health sector, ensuring maximum utility is gained from Ahpra's data is important.

Hence we, at the Alliance, group our feedback on the *Draft Data Strategy* into the following two categories

- **Data quality:** that Ahpra work with organisations across the rural health sector (and those with an interest in rural health) to ensure data collection via workforce surveys meets their needs

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and is *fit for purpose* when it comes to understanding and making decisions about the status of the health workforce across the nation.

- **Data sharing:** That Ahpra prioritise obtaining data from and sharing data with relevant organisations across the rural health sector (or who have an interest in rural health) who can demonstrate *value-add public benefits* that maximise the utility to be gained from the data.

High quality data that meets the needs of stakeholders and is shared with all stakeholders who can demonstrate *value-add public* benefits can then be used to improve our understanding of the status of the rural health professional workforce and design and advocate for appropriate strategies to improve its size, distribution and retention. Ensuring maximum utility from data collected by a single source is important for the efficient and effective use of health funds.

These categories will be elaborated on below.

2. Do you think that anything should be added to or removed from the draft Data strategy?
No comment

Focus area 1: The public register

3. Do you agree with adding more information to the public register?   • If yes, what additional information do you think should be included? • If no, please share your reasons
No comment

4. Do you agree with adding health practitioners' disciplinary history to the public register?   • If yes, how much detail should be included? • If no, please share your reasons
No comment

5. How long should a health practitioner's disciplinary history be published on the public register?

☐ 0 to 1 year

☐ 1 to 4 years

☐ 5 to 10 years

☐ 10 to 20 years

☐ As long as the practitioner is a registered health practitioner

☐ Disciplinary history should not be published on the public register. Only current conditions or limits on practise should be published on the public register.

☐ Other, please describe: No comment

6. Who should be able to add additional information to the public register?
No comment

7. Are there other ways to enhance the effectiveness and value of the public register for the public and/or practitioners?
No comment

Focus area 2: Data sharing

8. The Health Practitioner Regulation National Law enables us to share data with some other organisations in certain situations. Do you have suggestions about how Ahpra could share data with and/or receive data from other organisations to benefit the public, practitioners and/or our regulatory work?
Data sharing The Alliance encourages Ahpra to maximise the utility of the data it holds by sharing it with various stakeholders within or related to the rural health sector for workforce planning purposes - for example the medical colleges.

Focus area 3: Advanced analytics

9. Do you have any suggestions about how Ahpra should approach using advanced analytics and machine learning technologies?
No comment

Other

10. Please describe anything else Ahpra should consider in developing the Data strategy.

Data quality
 	
The Alliance encourages Ahpra (and its partner organisations) to maximise the utility of the data it collects by working with various stakeholders within or related to the rural health sector to design its data collection methodology – for example the medical colleges. Pertinent improvements the Alliance is aware of include:
 	
• Tracking the geographic health practitioner journey over time
 	
    o linkage of student data with health practitioner data via a common identification number to give a continuous picture of the movement of professionals through the training pipeline, into professional practice and across their careers
 	
    o collection of data from students about their location of origin, university of enrolment and participation in/location of rural clinical placements.
 	
• Generating an understanding of the stability of the workforce
 	
    o ask questions about the length of time a professional has practiced in their primary or secondary locations and how long they intend to stay.
 	
• Provide more detail about additional locations of practice as this is important in rural areas where professionals may service more than two locations

      o   We understand this needs to be considered as a trade-off against the rate of survey completion.

These refinements, among others, would help to improve *trust and confidence* in Ahpra's data and ensure it is *fit for purpose*, in the context of Ahpra's role in workforce planning.

We appreciate the opportunity to provide comment on the *Draft Data Strategy* and would be happy to discuss anything mentioned in this submission in more detail.

Thank you

Thank you for participating in this consultation. Your feedback will support Ahpra and the National Boards to use data to improve public safety.

Please email your submission to AhpraConsultation@ahpra.gov.au by 31 January 2023.

Ahpra acknowledges the Traditional Owners of Country throughout Australia and their continuing connection to lands, waters and communities. We pay our respect to Aboriginal and Torres Strait Islander cultures and Elders past, present and emerging.