Dear Productivity Commission

Data Availability and Use

The Health Services Research Association of Australia & New Zealand (HSRAANZ) welcomes the opportunity to provide feedback on the Productivity Commission Issues Paper on Data Availability and Use.

The HSRAANZ supports and promotes the conduct and dissemination of applied research to improve the delivery and organisation of health services in Australia and New Zealand. We have 250 individual members and 23 corporate members, covering universities, research centres, government departments, independent government agencies, and consumer groups. The Association bridges the gap between research and policy, as well as reflecting consumer issues.

The goals of health services research (HSR) are to identify effective and efficient ways to organise, manage, finance, and deliver safe and high quality care. With the current concern about the quality and sustainability of our health care system health services research is urgently needed to inform and guide health care reform. A major contributor to necessary infrastructure for health services research is data. Health services researchers require open, low-cost access to national data sets, including administrative, survey and panel data. Large volumes of such data are generally needed in order to assemble unbiased samples from which health researchers can draw meaningful conclusions that are representative of populations. Clinical trials are only one, and an increasingly expensive, way to deliver evidence on what works. There’s an urgent need for better collection and access to observational data, including routinely collected health systems data and registries.

Health services researchers have been early adopters of linked data, which significantly improves the potential value of health services research. Ideally, data describing health service use across sectors (e.g. primary care, hospitals and aged care) would be linked to mortality data.
Supplementary linkages would capture more detailed measures of health status, e.g. collected by longitudinal studies and registries.

There are currently significant barriers to accessing linked data, as the extraction and linkage process is costly and time consuming. One approach to improving access to linked data would be for data custodians to collaborate to generate regular random samples of linked data that could be used by multiple research teams.

Attached are the results of a survey conducted by Health Services Research Association of Australia and New Zealand (HSRAANZ) to gain views from HSRAANZ mailing list recipients about their experiences with respect to accessing existing datasets that add, or could add, value to health services research. Forty-three people responded to the survey.

Overall, key messages from HSRAANZ survey respondents were:

- Imperative to improve the speed and ease in accessing data, to provide more up-to-date and relevant information for policy and practice to improve health and wellbeing.
- Need to improve timeliness for approval and delivery of data, both for non-linked and linked datasets.
- Potential to improve streamlining of processes to reduce delays and prevent duplication of effort, by researchers and data custodians.
- Suggestions to improve standardisation and centralisation for cross-jurisdictional data linkage, to reduce duplication of same requirements with multiple gatekeepers.
- Acknowledgment that access to linked data has been steadily improving.
- Many examples provided by HSRAANZ survey participants of research projects with high impact and benefits, which highlights why access and use of data is important.

Also we refer you to this Croakey article “Are we making the best use of data to improve healthcare” https://croakey.org/are-we-making-the-best-use-of-data-to-improve-healthcare/ from our 2015 Health Services and Policy Research Conference where presenters demonstrated new and innovative ways of using data to challenge commonly held assumptions about the health system and to generate solutions to challenging problems.

Yours sincerely

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