

# DHS Information Management Strategy



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# What's the problem?

DHS data requirements of funded organisations place undue cost and burden on funded organisations, systems suppliers and DHS itself

- ongoing proliferation of DHS data & report requirements
- duplication of data collection requirements
- inconsistent terminology across data collections
- inconsistent information management practices
- poor and inconsistent utilisation of data collected
- limited feedback of 'value add' information to organisations collecting data

# What's DHS doing about it?

Two Phase Department-wide Strategy to reform data collection and reporting requirements of DHS funded organisations:

Phase 1 – Health & Aged Care IM Strategy initiated in 2005

- Rural and Regional Health and Aged Care Services (RRHACS)
- Metropolitan Health and Aged Care Services (MHACS)
- Mental Health and Drugs (MHD)

Phase 2 – Department-wide IM Strategy

With success of Phase 1, Strategy expanded in mid-2007 to cover:

- Children, Youth and Families (CYFD)
- Office of Housing and Community Building (HCB)
- Disability Services (DSD)

# DHS IM Strategy Objectives

- strengthen governance arrangements across DHS program data collection and reporting requirements
- review data collection and reporting requirements and make recommendations for reform
- ensure completion and evaluation of approved reform initiatives
- establish common data sets across program data collections
- promote data collection technology improvement
- improve use and dissemination of collected information (including feedback to funded organisations)
- document data collection business cycles
- support DHS programs to improve IM practice
- enhance and increase use of data standards and a common metadata

# Strengthened governance

Exec Directors have strengthened governance

- From now on, DHS programs in all six Divisions must secure ED approval, annually, to continue, change or introduce new data collection/reporting requirements of funded organisations, including ad hoc requests, surveys and questionnaires
- DHS programs must prepare a business case for each existing or new data collection/reporting requirement

In Health & Aged Care only (i.e. RRHACS, MHACS & MHD)

- all data reform activity (incl. business case analysis and process) managed by Managers, IM Strategies (MIMS) RRHACS and MHACS
- a Data Management Advisory Committee (DMAC) consisting of DHS and funded organisation members, reviews and advises EDs on data reform, including recommendations re: business cases
- a Project Board is being established to oversee implementation of the IM Strategy across Health and Aged Care

# Reform guided by Information Management Principles

- Principle 1 ensure the information we collect meets business needs and priorities
- Principle 2 minimise the cost and burden of information capture
- Principle 3 get the best value from our information
- Principle 4 produce quality information
- Principle 5 protect and preserve information
- Principle 6 enable good practices – Competencies
- Principle 7 enable good practices - Governance

# Major achievements

- established strengthened IM Governance infrastructure across Health & Aged Care (commenced in other Divisions)
- developed a single register of all DHS data collection and reporting requirements of funded organisations - DHS Data Collection Register (DCR) - and registered all known data collection requirements of funded organisations (162)
- reviewed all Health & Aged Care data collections and reports for 2006-07, 2007-08 and 2008-09
- reduced and rationalised requirements - in excess of 130 H&AC data collections reduced to 112 data collections and reducing ...
- reducing number of new (roughly halved) and ad hoc data requirements
- developed snapshot of metadata associated with all DHS data requirements of funded organisations – DHS Metadata Repository (MDR)
- developing common metadata glossary and practice
- established a DHS IM Community of Practice (IM CoP) including new forums open to people in funded organisations
- 20 H&AC programs use common client demographic requirements by July 2008  
All H&AC programs agree on Common Client Data Dictionary spec by Dec 2008

# Common Data Dictionaries

DHS data requirements of funded organisations fall into eight categories. Developing Common Data Dictionaries for seven of them.

Category	Common Data Dictionary
Client/Demographic	Client CDDv2.1 live in 20 H&AC programs by 1/7/08 Agreement across H&AC on Client CDD spec by Dec 08
Service	Agreement across HACC, A&D, C&WH, DH, MH & HealthCollect on Service CDD spec by Dec 08
Workforce	Agreement across DHS on Workforce CDD spec by Dec 08
Incident	Agreement across DHS on Incident CDD spec by Dec 08
Quality of Practice	Project Brief to be developed
Organisation	Project Brief to be developed
Capital/Assets	Project Brief to be developed

# 2008 Work Plan Health & Aged Care

- continuation of work program based on the IM Strategy objectives
- directive business case review for 2009-2010
- streamlining data collections based on eight broad data categories: client, service delivery, financial, incident, quality of practice, workforce, organisation/transmission, capital/asset
- applying more broadly the data model provided by the Victorian Integrated Non-Admitted Health (VINAH)
- implementation of specific data collection reforms identified in 2008-2009 business case review
- establishment of a corporate metadata repository and tool
- implementation of recommendations arising from the evaluation of the IM strategy

# 2008 Work Plan

## Housing & Community Services

Roll-out of DHS IM Strategy into Child, Youth & Family, Housing & Community Building and Disability Services Divisions commenced September 2007

Each division is

- establishing an IM governance process
- registering data collection/reporting requirements in DCR
- adopting common metadata and analytical practices
- Identifying and implementing reform opportunities

Progress to date

- all H&CB collections documented
- majority of Disability SD collections documented
- documentation of CYF collections underway
- commenced discussions regarding governance processes

# Where to longer term?

Longer term the DHS IM Strategy is working to establish:

- ongoing governance across all data collections across all divisions
- common metadata and IM practices across all divisions
- integrated data requirements and collection processes for funded organisations across all program Divisions
- support for sector organisations to reform own data management
- continue to influence the National standards and datasets agenda
- DHS to value add to data received and improve feedback to funded organisations and access to data by Regions

# Implications for SCTT vendors?

## The impact on SCTT data....

### More predictable change / development requests

- 18 month cycle for 2009/2010 data collections: review start '08, advise vendors early '09, implement July '09
- data dictionaries linked to stable national/accepted standards
- Increasing use of common meta descriptions

### More 'joined up' change / development requests data

- dictionaries encouraging standardised metadata (client, service, incident) - client management/SCTT/accountability data alignment, where appropriate
- strategic alignment of data collections which describe similar clients or service types, or those utilising a particular technical initiative, e.g. report to RRHACS Data Repository)
- harmonised implementation, e.g. SCTT 2006, HACCV2, CCDSv1.2
- reduced volatility of data requirements, duplication, burden

# Contact and Further Information

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