Confidential Information

Confidentiality Provisions
Identifying data held by Queensland Health are protected by confidentiality legislation and this legislation stipulates the manner and circumstances in which confidential data can be released. While the legislation permits the release of confidential data in limited specific circumstances, the general requirement is that data can only be released in an abridged or summarised form such that it is no longer possible to identify individual persons or individual private facilities.

Confidential data comprises both identified and potentially identifiable data. Identified data includes information such as name, address, etc. Although not containing these particular data items, potentially identifiable data contains a range of data items that in combination with each other contain sufficient overall detail that it is possible that some individuals could be identified. A common question in the protection of confidentiality is what kind of information is considered to be potentially identifiable.

What leads to data being confidential?
When determining whether there are confidentiality issues with a particular set of data an examination is made to see if it contains data items that identify or can lead to identification. Examples of these data items include:

1. Names and addresses;

2. Contact details (eg; telephone numbers, fax numbers, electronic mail addresses);

3. Higher level geographic descriptors of patient's place of residence such as suburb, town/city, postcode, local government areas, statistical divisions;

4. Date-based data items, e.g. birth date, admission date, discharge date, date of death;

5. Demographic items (eg; age, age group, sex, Indigenous status, country of birth);

6. Facility (eg hospital name);

7. Identifying numbers (eg; Medicare numbers, medical record numbers, private health insurance numbers); and

8. Any other unique identifying number, code or characteristic (e.g. rare or unusual event) that could permit the data recipient to re-identify any records.

Examples of rare or unusual events that can lead to the identification of an individual would includes: only one person aged 109, one set of quintuplets, very long length of stay in hospital, very high or low birth weight, rare medical condition, etc.

What can be done to remove confidentiality issues from a dataset?
Uniquely identifying information, such as names, addresses, contact details and identifying numbers are removed and usually dates of birth, death or service delivery are either grouped or removed. Other data items that could identify a person are then cross-classified and examined for small cell sizes. If there are still confidentiality issues then either some of these data items will need to be removed and/or only released in broad categories (eg 10 year age groups rather than single year of age). We then aggregate or suppress data on rare diseases, procedures or uncommon

combinations of characteristics to ensure that individuals cannot be identified. (eg; for age the highest category is 85+, cap hospital length of stay at 30+ days).

National Perspective

All government health authorities are concerned with confidentiality in the release of statistical data. Guidelines for the use and disclosure of health data for statistical purposes were developed by the former national Statistical Information Management Committee (SIMC) in 2007.

The purpose of these guidelines is to document what are considered to be good practice that jurisdictions can use to guide decision-making about the disclosure of health statistical data. They are intended to provide general guidance to assist data custodians to manage some risks regarding the identification of individual patients and health service providers.