

# Data management Policy

## Department of Health Policy

QH-POL-279:2014

### 1. Statement

The Department of Health values data and will ensure it is effectively collected, managed and maintained as a strategic asset to support the delivery of health services and organisational priorities.

### 2. Purpose

The intent of this policy is to:

- support the timely delivery of health services through the collection and management of data that is fit-for-purpose and enables integration, use, re-use and preservation
- improve the integrity, quality and consistency of data management, including through the use of standards
- maximise the value of data for health care
- align data management with relevant legislation, regulations, and standards
- support analysis and analytics.

### 3. Scope

This policy applies to all employees, volunteers, contractors, consultants, and managed service providers working for the Department of Health.

The scope of the policy includes data (clinical and non-clinical), in all mediums including electronic or non-electronic (physical and hybrid) created, collected, managed, stored, disseminated and disposed of.

This policy may be adopted by Hospital and Health Services (HHSs) and re-branded as a HHS policy or used as a basis for a local HHS specific policy.

### 4. Principles

- **Accessible** – Data can be readily identified, located, and accessed, by those with a legitimate need to know, when required.
- **Privacy, confidentiality and security** – Privacy, confidentiality and security requirements will be adhered to for data that is collected, used and disclosed, transmitted, stored and disposed of.

- **Managed** – Leadership and accountability regarding data management is defined, communicated, acknowledged and compliance is monitored, measured and reported, through governance.
- **Standardised** – the approach to data management is standardised and consistent.
- **Quality and integrity** – to preserve data quality and integrity, data collection and associated practices will be managed in an ethical, consistent and accountable manner, to ensure data is accurate, valid, reliable, timely, relevant and complete, and is used for the appropriate purpose. Integrity is maintained when undertaking integration, migration, conversion and/or transformation.
- **Valued** – data is recognised as a core strategic asset.
- **Transparent** – data that is not protected by legislative and regulatory requirements is proactively disclosed and accessible. The Principle extends to the exchange and sharing of data.

## 5. Requirements

Data management is concerned with valuing and managing data as a strategic asset of government with the same rigour as that applied to other strategic assets. Considerations for data management must include<sup>1</sup>:

### 5.1. Data modelling

5.1.1. Data modelling is a method used to define and analyse the data requirements needed to support processes and service delivery.

### 5.2. Data interoperability

5.2.1. Data interoperability is the exchange of information that preserves the meaning and relationship of the data exchanged. Data integration is the process of combining data residing at different sources and providing the user with a unified view.

### 5.3. Data quality and integrity

5.3.1. Data quality and integrity is concerned with ensuring methodical data collection and practices to enhance quality, and integrity with respect to accuracy and completeness. Data quality for the Department of Health means the data is 'fit for purpose' by demonstrating its accuracy, validity, reliability, timeliness, relevancy and completeness.

### 5.4. Data capture

---

<sup>1</sup> Data management domain names listed are sourced from the Queensland Government Enterprise Architecture, 2017, [Information management policy framework](#).

5.4.1. Data capture is concerned with the collection, possible manipulation and/or interpretation and storage of data. Data capture may be automated. Effective data capture can improve quality, coverage and reliability of data.

## 5.5. Data cleansing

5.5.1. Data cleansing is concerned with detecting and correcting or removing corrupt or inaccurate data.

## 5.6. Data de-duplication

5.6.1. Data de-duplication is concerned with the elimination of redundant data to reduce required storage capacity and establish a source of truth.

## 5.7. Data migration and transformation

5.7.1. Data migration is concerned with transferring data between either storage types, formats or computer systems. Data transformation converts data from a source data format into destination data.

## 5.8. Redress mechanisms

5.8.1. Redress mechanisms provide transparent complaints and appeals processes to ensure data is maintained and of high quality. An example of a redress mechanism is the provision of a means for amending one's personal information held by government.<sup>2</sup>

## 5.9. Data mining

5.9.1. Data mining is the process of analysing data from different perspectives and summarising it into useful information – information that can be used to make improvements and may also offer clinical benefits such as better patient outcomes. Technically, data mining is the process of finding correlations or patterns among dozens of fields in large relational databases. The practice is similar to data science.

## 5.10. Data warehousing

5.10.1. Data warehousing are systems used for reporting and data analysis, and are considered core components of business intelligence. Data warehouses are central repositories of integrated data from one or more disparate sources. They store current and historical data and are used for creating analytical reports for knowledge workers throughout the enterprise.

---

<sup>2</sup> This form of redress is not associated with redress via the National Redress Scheme.

## 5.11. Open data

5.11.1. Open data is data that anyone can access, use or share.

## 5.12. Data profiling

5.12.1. Data profiling is the process of examining data available from an existing information source (e.g. a database or a file) and collecting statistics or informative summaries about that data.

# 6. Legislation

- *Electronic Transactions (Queensland) Act 2001*
- *Evidence Act 1977 (Qld)*
- *Hospital and Health Boards Act 2011 (Qld)*
- *Human Rights Act 2019 (Qld)*
- *Information Privacy Act 2009 (Qld)*
- *Public Health Act 2005 (Qld)*
- *Public Records Act 2002 (Qld)*
- *Public Service Act 2008 (Qld)*
- *Right to Information Act 2009 (Qld)*

# 7. Supporting documents

## **Queensland Government:**

- General Retention and Disposal Schedule (GRDS)

## **Queensland Government Enterprise Architecture (QGEA):**

- Information access and use policy (IS33)
- Information asset custodianship policy (IS44)
- Information management policy framework
- Information security assurance and classification guideline
- Information security classification framework (QGISCF)
- Information security policy (IS18)
- Records governance policy
- Records governance policy implementation guide

## **Queensland Health:**

Data management Policy  
Health Informatics Services, eHealth Queensland  
Deputy Director General, eHealth Queensland  
18/12/2020

- Data and application custodianship roles and responsibilities
- Information Management Framework
- Information Security policy (QH-POL-468:2019)
- Information Standardisation Framework
- List of approved Data and Application Custodians
- Management and access to documents and records factsheet
- Queensland Health Data and application custodianship policy (QH-POL-469:2019)
- Queensland Health Data and application custodianship standard (QH-IMP-469-3:2019)
- Queensland Health Data Quality Framework
- S/4 HANA Master Data Governance Framework

**Department of Health:**

- Clinical data standardisation standard (QH-IMP-279-1:2014)
- Clinical records management policy (QH-POL-280:2014)
- Coronavirus (COVID-19) data and application custodianship policy (QH-POL-477:2020)
- Coronavirus (COVID-19) data and application custodianship guideline (QH-GDL-477:2020)
- Corporate records management policy (QH-POL-467:2019)
- Data supply requirements documentation standard (QH-IMP-469-2:2019)
- Display of date and time in electronic systems Data Set Specification (DateTime DSS)
- Display of date and time in electronic systems standard (QH-IMP-279-3:2014)
- Disposal of corporate records guideline (QH-GDL-476-2:2020)
- Documentation of date and time entry in the paper-based health record standard (QH-IMP-279-2:2013)
- Health Sector (Clinical Records) Retention and Disposal Schedule (QH-IMP-280-2:2012)
- Information security standard (QH-IMP-066-1:2015)
- Open Data Strategy 2020-2022
- Privacy breach management
- Privacy Impact Assessment (PIA)
- Research management policy (QH-POL-013:2015)
- Research management standard (QH-IMP-013-1:2015)
- Retention and disposal of clinical records standard (QH-IMP-280-1:2014)

- Statistical and corporate data standardisation standard (QH-IMP-469-1)

## 8. Definitions

| Term            | Definition   | Source  |
|-----------------|--|---|
| Clinical data   | Data to support direct client care and healthcare provider communications.   | Department of Health<br><i>Data Quality Framework</i> , version 1.0, April 2012.                            |
| Data            | <p>The representation of facts, concepts or instructions in a formalised (consistent and agreed) manner suitable for communication, interpretation or processing by human or automatic means. Typically comprised of numbers, words or images.</p> <p>The format and presentation of data may vary with the context in which it is used.</p> <p>Data is not information until it is utilised in a particular context for a particular purpose. Examples include: Coordinates of a particular survey point; Driver license number; Population of Queensland; Official picture of a minister in jpeg format.</p> | Data and application custodianship roles and responsibilities   |
| Data collection | <p>The systematic gathering of data designed to address a specific set of business needs which may be from various sources, including manual entry into application(s), questionnaire(s), interview(s), observation, existing record(s) and electronic device(s).</p> <p>A data collection is a type of data set for a specific named purpose.</p> <p>Supports clinical care, funding, management, planning, monitoring, improvement, research and evaluation of health and health services.</p>   | Data and application custodianship roles and responsibilities   |
| Data management | <p>Data management is concerned with valuing and managing data as a strategic asset of government with the same rigour as that applied to other strategic assets.</p> <p>Data management includes:</p>   | Queensland Government Enterprise Architecture (QGEA), <i>Information management policy framework</i> , Data |

| Term            | Definition  | Source  |
|-----------------|---|---|
|                 | <ul style="list-style-type: none"> <li>• data modelling</li> <li>• data interoperability</li> <li>• redress mechanisms</li> <li>• data quality and integrity</li> <li>• data cleansing</li> <li>• data de-duplication</li> <li>• data capture</li> <li>• data migration and transformation</li> <li>• data mining</li> <li>• data warehousing</li> <li>• open data and</li> <li>• data profiling.</li> </ul>  | management domain definition IM-6, 2017                                       |
| Data set        | <p>A set of data items that is collected for a specific purpose.</p> <p>A data set may comprise a smaller grouping (or subset) of data which, though limited by some constraint or feature type, is located physically within a larger data set.</p>  | Data and application custodianship roles and responsibilities                 |
| Fit-for-purpose | Data is accurate, valid, reliable, timely, relevant and complete.   | Department of Health <i>Data Quality Framework</i> , version 1.0, April 2012. |
| Governance      | The structured decision-making exercised by accountable and responsible persons to provide strategic direction and ensure operational or program objectives are achieved; manage risks and drive organisational improvement in an ethical, accountable, controlled, defensible and transparent manner.  | Queensland Government Enterprise Architecture (QGEA) glossary                 |
| Health Service  | <p>A health service includes:</p> <p>(a) an activity performed in relation to an individual that is intended or claimed, expressly or otherwise, by the individual or by a person performing the activity—</p> <ul style="list-style-type: none"> <li>i. to assess, record, preserve or improve the individual's health; or</li> <li>ii. to diagnose an illness or disability of the individual; or</li> <li>iii. to treat an illness or disability of the individual or a suspected illness or disability; or</li> </ul> | <i>Information Privacy Act 2009</i>   |

| Term            | Definition  | Source   |
|-----------------|---|--|
|                 | (b) the dispensing on prescription of a drug or medicinal preparation by a pharmacist.  |  |
| Standard        | Sets out the technical or other specifications necessary to ensure that a method or material will consistently do the job it is intended to do. In the context of information architecture standards may be applied to information assets. In many cases standards themselves may manifest as information assets. In the context of the Queensland Government Information Architecture a standard is merely one type of constraint. Some classifications also manifest as standards. Examples included, ISO 19115 Geographic Information - Metadata Standard and Queensland Government Information Security Classification Framework. | Queensland Government Enterprise Architecture (QGEA) glossary                              |
| Strategic Asset | An asset, or group of assets, that needs to be retained if the organisation is to maintain capacity to achieve or promote any outcomes that are important to the current or future wellbeing of the organisation.<br><br>Data is a valuable corporate asset.<br><br>Data needs to be managed, maintained and exploited in a manner similar to that of other more traditional assets of government (e.g. information systems, buildings, plant and equipment).   | Queensland Government Enterprise Architecture (QGEA), <i>Information Principles</i> , 2009 |

## Version Control

| Version | Date             | Comments  |
|---------|------------------|---|
| 3.0     | 09 May 2014      | Approved  |
| 3.1     | 12 June 2015     | Transferred information into new template and reviewed by Clinical Information Management |
| 4.0     | 18 December 2020 | Transferred information into new template, content reviewed and updated                   |