Health Service Directive

Enterprise Information, Communications and Technology (ICT) Governance

Purpose

Under the *Hospital and Health Boards Act 2011 (*the Act*),* the Director-General as the system manager, may issue binding health service directives to Hospital and Health Services (HHSs).

The purpose of this Health Service Directive (HSD) is to define Queensland Health's Digital Policy Framework. This framework is intended to support the federated Queensland public health system while ensuring that Queensland Health's information, communications and technology (ICT) environment is fit for purpose (safe, effective and optimised).

This HSD fulfils criteria 5 in section 47 (1) of the Act*:* supporting the application of public sector policies, State and Commonwealth Acts, and agreements entered into by the State.

Scope

This HSD applies to all Hospital and Health Services.

Note: Queensland Health digital policies will apply to all HHSs and the Department of Health.

Principles

The following principles provide broad direction to ensure the health system, as it increasingly goes digital, has the ICT capabilities that support care and health system performance regardless of the care setting or organisational boundary:

- **Patient centricity:** Patients do not distinguish between care settings, organisational or jurisdictional boundaries. To the extent permitted by law, neither should Queensland Health. All policies, standards, and any local procedures and guidance must therefore ensure ICT capabilities:

  o   allow patients to be better connected and engaged in their care

  o   support the timely and safe transfer of care

  o   support a patient's longitudinal record being able to be accessed, viewed, updated, and shared wherever the patient is located (i.e. regardless of care setting, organisation or specific application that may contain their information).

- **Unified:** Queensland's public health system is federated. Multiple care providers and care settings means that any specific digital and ICT investments must focus not just on individual needs, but also on the collaboration between providers and

organisations. This is to be achieved by appropriate policy and consistent application of standards as well as improved transparency on changes occurring within Queensland Health's digital and ICT portfolios.

- **Equitable:** All initiatives should consider how we can make it easier for Queenslanders to access digital and ICT enabled services, by addressing accessibility, regardless of geographic or economic situations, capability building, and digital inclusion. The impact that our investments and digital transformation has on our workforce, and ensuring our people are not left behind, should be considered.

- **Managed:** Investments and assets are proactively planned and managed to solve the right problem, deliver value and support our direction. Decisions to invest in, and to continue spending on ICT should be made by fully considering the factors that will determine success.

- **Trustworthy:** Our digital and ICT services cultivate trust by embracing transparency, reliability and empathy, whilst still maintaining the security, privacy and confidentiality of our patients. The increased ability to share data in a more connected, digital world will be balanced by authorised and appropriate measures, to restrict access to, and use of, patient information. Subject to these limitations Queensland Health will, to the extent possible, share information and enable big data.

- **Collaborate:** Collaborate with each other, our customers and stakeholders, to co-design solutions. The effective partnering between the Department and HHSs, and between HHSs, to develop practical solutions will ensure whole of system benefits.

- **Information as a health system asset:** Information is a valuable asset that must be effectively managed and maintained. The need to share information appropriately, increase access, manage its quality, and subject it to appropriate governance and lifecycle management processes, is essential for decision making and service delivery. Timely and accurate information regardless of source is essential for population health management, integrated care, and for appropriate secondary use.

Outcomes

As outlined in the Handbook for Queensland Hospital and Health Boards May 2018, this HSD supports the role of:

- HHSs as statutory bodies within a federated health system

- eHealth Queensland as the provider for enterprise ICT across the health system; notably its role in the development and implementation of information management and digital strategies, policies and standards across Queensland Health.

In implementing this HSD, HHSs can be confident that they have:

- greater visibility of the entire suite of planned and active digital and ICT-enabled initiatives occurring across Queensland Health for increased transparency,

collaboration and improved interoperability, pipeline planning and dependency management

- clarity on their rights and obligations within a broader information security environment / Information Security Management System (ISMS); protecting patient, staff and commercial data

- clarity on individual and HHS's rights and obligations with regard to email and internet monitoring and use

- improved software management, supporting local provision while ensuring maximum value from any software sourcing arrangements - including confidence that software can operate effectively and safely on Queensland Health's technological infrastructure, and that any software used by Queensland Health is in line with third party software licensing arrangements

- appropriate data and application custodianship to ensure that data and applications are fit-for-purpose and are managed effectively throughout their lifecycle

- improved traceability of local policies, standards and procedures to both health system and local requirements

- consistent and comprehensive application of Queensland Government's Chief Information Office compliance requirements to mitigate system wide risk

- consistent ICT governance across Queensland Health supporting a common language, clearly defined roles and responsibilities and a minimum set of performance and conformance requirements.

Mandatory requirements

- Queensland Health digital policy will be developed to support the implementation of digital and ICT capabilities that mitigate risk or provide benefit to the health system.

- All Queensland Health digital policies will be developed using co-design processes in full consultation with HHSs and the Department of Health and align to the principles above.

- The endorsement and approval of Queensland Health digital policy will follow the process outlined in Schedules 1 and 2.

- Queensland Health digital policies will define compliance requirements based on statutory obligations and administrative controls. Appropriate application of any Queensland Health digital policies and standards and/or amplification of local requirements is the responsibility of the Department of Health or HHS.

- Digital policies, standards and procedures developed with application to Queensland Health, the Department of Health or HHSs will operate in a hierarchy as defined in the Queensland Health Digital Policy Framework in Schedule 3.

- New Queensland Health digital policy will be communicated to all HHSs, and the Department, following the Communication Plan outlined in Schedule 4 and published on the Health Service Directive website and the Department of Health Policy site.

- HHS Chief Executives will be requested to provide an annual attestation demonstrating compliance with this HSD and subsequent approved policies and standards.

Related or governing legislation, policy and agreements

- *Financial Accountability Act 2009*
- *Financial and Performance Management Standard 2019*
- *Hospital and Health Boards Act 2011*
- *Human Rights Act 2019*
- *Information Privacy Act 2009*
- *Public Records Act 2002*
- *Right to Information Act 2009*
- Support Service Agreement for the provision of Enterprise ICT Services
- Queensland Government Enterprise Architecture
- DIGITAL 1st: Advancing our DigITal future. The Queensland Government digital strategy for 2017–2021

Supporting documents

- Health System Risk Management Framework
- Delivering a High Performing Health System for Queenslanders: Performance Framework July 2019

Business area contact

Digital Policy and Governance, eHealth Queensland

Review

This HSD will be reviewed at least every three years.

Date of last review: 16/12/2020

Supersedes: v1.0

Approval and Implementation

Directive Custodian

Deputy Director-General, eHealth Queensland

Approval by Chief Executive

Director-General, Queensland Health

Approval date:

4 May 2020

Issued under section 47 of the *Hospital and Health Boards Act 2011*

Definitions of terms used in this directive

Term	Definition / Explanation / Details
Queensland Health	Queensland Health comprises of the Department of Health and the 16 independent Hospital and Health Services (HHSs).
Big data	Large, diverse, and rapidly increasing datasets that contain information in various formats and which require novel methods to be processed. The increased supply of health-related data from multiple sources ("big data") has the potential to change the face of health care and provide added value for all health care system stakeholders.
Custodian	The recognised officer assigned responsibility for implementing and maintaining information and physical assets according to the rules set by the owner – to ensure proper quality, security, integrity, correctness, consistency, privacy, confidentiality and accessibility throughout its lifecycle.
Cyber security	Cybersecurity is a key element of information security centred on the protection of information from unauthorised use or accidental modification, loss or release in Internet connected systems.
Data	The representation of facts, concept 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. The format and presentation of data may vary with the context in which it is used. 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 licence number; Population of QLD; Official picture of a minister in jpeg format.
Digital	Digital means more than just ICT / technology. It's the use of ICT / technology that innovates, transforms and disrupts services, processes, information, people, industries and society with the purpose of offering customers new ways of interacting with organisations.
Digital and ICT-enabled initiatives	ICT-enabled initiatives focus on delivering improvements to the existing way of doing business, using ICT as a key element. Any initiative requiring ICT/technologies to effect change and realise outputs, outcomes and/or benefits is considered ICT-enabled. However digital-enabled initiatives have a broader impact, where ICT and technologies create innovative, transformative and disruptive change to services, processes, information, people, industries and society.
Information and Communication Technology (ICT)	Information and communication technology (ICT), also commonly referred to as Information Technology (IT) includes software, hardware, network, infrastructure, communications, devices and software systems (applications) that not only support business processes of an agency, but which enable the digital use and management of information and enable people to connect in a digital environment. Typically, ICT covers both the Application and Technology layers of the QGEA. Also see the Application and Technology QGEA classification framework domains for further examples.

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Information	Information is any collection of data that is processed, analysed, interpreted, classified or communicated in order to serve a useful purpose, present fact or represent knowledge in any medium or form. This includes presentation in electronic (digital), print, audio, video, image, graphical, cartographic, physical sample, textual or numerical form. Information may also be a public record or an information asset if it meets certain criteria.
Information asset	An identifiable collection of data stored in any manner and recognised as having value for the purpose of enabling an agency to perform its business functions thereby satisfying a recognised agency requirement. Data or information that is referenced by an agency, but which is not intended to become a source of reference for multiple business functions is not considered to be an information asset of the agency. This is merely information. Information assets are considered to be associated with one of four standard types: transactional; analytical; authored; publication. It should be noted that information content may appear in more than one asset. For example, customer details may exist as a transactional asset, but also be represented in a second analytical asset. In this case there are two assets. It is important to note that an Information Asset may also be considered to be a Public Record if it meets certain criteria. However, not all of an agency's Information Assets will necessarily be Public Records. Information Assets within the Information Architecture that are technology dependent are implemented in accordance with the Application and Technology Architectures of an agency or the government. Examples included: Record, Document, Electronic message, Row in a database, Table or figure within a document, Whole database table, Collection of data objects about a single logical entity or concept such as 'customer', Content identified through a URL or URI and Metadata about other information assets.
Information security	Information security activities are concerned with the protection of information from unauthorised use or accidental modification, loss or release. Information security is based on three elements: * confidentiality – ensuring that information is only accessible to those with authorised access; * integrity – safeguarding the accuracy and completeness of information and processing methods; * and availability – ensuring that authorised users have access to information when required. While it is recognised that 'Cyber Security' and 'Information Security' are defined differently, 'Cyber Security' is usually taken to imply 'Information Security' and 'Technology Security' in departmental policy and supporting standards.

Schedule 1: Queensland Health Digital Policy Approval Process

- Approval to develop a Queensland Health digital policy must be sought from the Deputy Director-General, eHealth Queensland, as custodian for Queensland Health Digital Policy.

- The Deputy Director-General, eHealth Queensland will seek endorsement from all Health Services Chief Executives (HSCEs) and Deputy Director-General's to develop a Queensland Health digital policy and request nominations to participate in a working group to co-design the proposed artefact.

- Intention to develop a Queensland Health digital policy will be tabled at the Architecture and Standards Committee (ASC).

- Following the development of a Queensland Health digital policy, a draft will be distributed to all HHSs and the Department for a formal consultation period of no less than 15 working days.

- Feedback received during this consultation period will be submitted to the relevant codesign working group for consideration and incorporation, where required.

- Final drafts will be forwarded to HSCE's for endorsement.

- Appropriate subcommittee clearance should be sought prior to final drafts being tabled at ASC for formal endorsement.

- Endorsed Queensland Health digital policy will be submitted to the Director-General, as the policy owner, for approval. The HSCE endorsement log and any other relevant supporting documentation should also be provided.

- All approved Queensland Health digital policy will be published on the Department of Health policy website and the Health Service Directive website.

- Following the publishing of the Queensland Health digital policy, the Queensland Health Digital Policy Communication Plan will be implemented, as outlined in Schedule 3.

Schedule 2: Queensland Health Digital Policy Review Process

All Queensland Health digital policies and standards are subject to a major review cycle at a minimum of every three years. A major review will follow the Queensland Health policy approval process outlined in Schedule 1.

Where a minor review is required the following process is to be followed:

- The marked-up draft Queensland Health digital policy be provided to HSCEs by the Deputy Director-General, eHealth Queensland seeking endorsement that the proposed amendments:
  - o Are minor in nature
  - o Do not change the intent or requirements of the Queensland Health digital policy
  - o Are accepted and do not require further consultation.
- Appropriate subcommittee clearance should be sought prior to final drafts being tabled at ASC for formal endorsement.
- Endorsed Queensland Health digital policy will be submitted to the Director-General, as the policy owner, for approval. The HSCE endorsement log and any other relevant supporting documentation should also be provided.
- All approved Queensland Health digital policy will be published on the Department of Health policy website and the Health Service Directive website.
- If the majority of HSCEs do not agree to the proposed amendment, the major review process should be followed as per Schedule 1.

Schedule 3: Queensland Health Digital Policy Framework

Queensland Health Digital Policy documents operate within a hierarchy, with the requirement that documents lower in the hierarchy must be consistent with the documents higher in the hierarchy. Standards and guidelines must support a policy, whereas, a policy can be a standalone document.

The policy document hierarchy for Queensland Health digital policies is as follows:

a) Legislation

b) Queensland Government Policies and Standards

c) Health Service Directives

d) Queensland Health Digital Policy

e) Queensland Health Digital Policy Standards

f) Queensland Health Digital Guidelines.

Where a Queensland Health digital policy or standard does not mitigate local risk, a Department or HHS policy, standard or procedure can be established to address these requirements.

Schedule 4: Queensland Health Digital Policy Communication Plan

- A Communication Plan will be developed for each new or revised Queensland Health digital policy artefact, outlining communication pathways and channels.

- At a minimum the following communication will occur following the publishing of a new or revised policy:
  - A notification of the publishing of the new or revised policy will be sent to:
    - all stakeholders who provided feedback
    - all CIOs or equivalents across the state
    - all subject matter experts involved in drafting the policy
  - A notification will be published as an E-Alert, in eHealth Queensland Staff Download and on QHEPS Spotlight and *News* section.

Version Control

Version	Date	Prepared by	Comments
1.0	30 July 2019	Digital Policy	Approved Director General
2.0	13 May 2021	Digital Policy	Minor review undertaken with agreement from HHSs Updates to consultation and approval process including: • an additional schedule included that outlines the process for minor review • an increase in the consultation period from 10 to 15 days for new Queensland Health policies and major reviews • seeking appropriate subcommittee clearance prior to final drafts being tabled at the Architecture and Standards Committee for formal endorsement. Endorsed ASC March 2021

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