Summary of data issues and recommendations from clinical leaders

Transforming Health - Review of Business Systems and Enablers

December 2014

1	There is a disconnect between knowledge of the quality and safety information and data that clinicians want and need and what is provided.
2	Safety and quality support to units was limited.
3	In absence of available data and systems, passionate clinicians have created and developed own systems to collect and monitor outcomes with resultant lack of connection to information systems, statewide implementation nor broader accountability or reporting to SA Health.
4	Benchmarking is reliant on individual unit leads facilitating occurrence rather than there being a systematic, statewide approach that could facilitate whole of system change.
5	There is a significant lack of analytic capacity of data and information for clinical areas across both the clinical information and quality and safety areas.
6	Suggested that the clinical audit function in EPAS be enabled to provide a positive immediate outcome for clinicians transitioning to the new system.

Clinical Senate - Data Collection and Management

August 2014

1	SA Health engage with key external agencies such as the proposed Health Performance and Productivity Commission to develop a strategy for how comparative healthcare data can be presented, shared, and made more accessible to frontline health care professionals within the state.
2	The ability for health services to measure and analyse data, and subsequently draw conclusions is limited.
3	In collaboration with SA Health Data and Reporting Services, facilitate further discussion amongst SA Health clinicians about what information they require at a service/unit level and how it is best accessed across the system.
4	Local Health Networks review and analyse how they can promote a shift in analytical capacity and resources from 'financial' to 'clinical' departments, encouraging employment of persons such as health economists, bio-statisticians or behaviour scientists across the system.
5	Local Health Networks develop internal mechanisms and accountability frameworks for managing poor performance of health services/units, as measured against state, national and international benchmarks.
6	SA Health commission a project which explores what health service data consumers want access to, and how, within the public domain.

Clinical Senate - Safety and Quality Metrics: Connecting Clinical Outcomes and Consumer Experience

February 2014:

1	Comprehensively review current data and reporting arrangements to ensure information collected is: patient centred; relevant and informed by and accessible to clinical care delivery staff at a local level.
2	Reduce the amount of current data collection activity by eliminating process-orientated metrics, duplication and obsolescence.
3	Measure new parameters that support quality improvement such as organisational culture, teamwork, staff satisfaction and clinician engagement.
4	Identify areas where gaps may exist such as paediatrics, indigenous health, prisons, and culturally and linguistically diverse population cohorts.
5	Extend successful data collection strategies across the entire system and patient experience.
6	Ensure teaching of the competencies of clinical measurement, audit and data interpretation to all SA Health clinical staff.
7	Communicate through modern modalities and visually intelligent methods to close the information loop with healthcare workers and the community.
8	Compare healthcare delivery organisations at multiple levels with the understanding that such comparisons are predicated on high levels of data integrity and analytic accuracy.
9	Create data linkage IT architecture in safety and quality reporting systems.

For more information

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