Reports

Health Data Standards Committee meeting report

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The Health Data Standards Committee (HDSC) is responsible for ‘coordinating the development and endorsement of national data standards used for administrative reporting and research in the health sector’ (Australian Institute of Health and Welfare 2005). The committee also works closely with the National E-Health Transition Authority (NEHTA) and other health bodies on standards used in a clinical environment. The HDSC is managed by the Australian Institute of Health and Welfare, reporting to the National Health Information Group (NHIG).

The February 2006 meeting focused on updates to the new metadata register — METeOR. METeOR training will be conducted around Australia this year so HIMs should keep their eyes open for these sessions. Make sure to update to the new way of accessing and relating to the national health data dictionary.

Australia has decided to join with the USA, the UK and Canada as founding members of the new standards development organisation for clinical terminologies (SNOMED). This new organisation will own SNOMED and be responsible for the ongoing development of the terminology system. It is likely that additional countries will join the core group over the next year or two. It is also possible that the World Health Organization will join as a member to support relationships and mapping to the ICD family of classifications.

NEHTA is developing a health information standards plan to coordinate Standards Australia and HL7 activities, as well as other health data standards organisations, to ensure consistency, maximum benefits and reduction of repetition of effort.

The Australian Health Ministers’ Advisory Committee has approved a new national chronic diseases strategy which will replace the National Health Priority Areas. This strategy excludes injuries and mental health. The national services improvement framework includes indicators with sometimes significant implications for clinical services, population health information or disability oriented services, to support service provision review. Approval has also been given for a blueprint for disease surveillance (looking for risk factors in the community), and these data will also have to be specified and may need appropriate terminology in the data domains. Approval has also been given for a framework for action on dementia identifying the impact on services and care requirements relative to this disability.

National Health Data Dictionary version 13 will be published soon but not in paper form, which would be too big to be practical. The new approach includes a book that identifies changes and provides information on the new structure represented in METeOR, and a CD which will hold the core of the data dictionary and all metadata items and their descriptions. The documentation will also explain the structures and attributes of ISO standard 11179 on the metadata registry. Specific data sets with active work programs include:

- Admitted Patient Data:
  - clarification of overseas patients and funding source data
  - finalising the content of data for reporting of functionality and disability data

- Emergency Department Data:
  - admitted/non admitted episode emergency boundary
  - Presenting Problem code set is being pilot tested.

- Rehabilitation Data elements are being established with a view to collection from mid-2007.

- Outpatient Care:
  - A national minimum data set for outpatient care is being developed.
  - Allied health data set work plan is to be established.

- Establishment Framework:
  - Coordination of this work with NEHTA provider identification work is being undertaken.

- NHIG have endorsed changes to language groups and interpreter data collection.

Reference


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