

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Additional Estimates 2010-11, 23 February 2011

Question: E11-057

OUTCOME 0: Whole of Portfolio

Topic: IMPROVING CONSISTENCY OF DATA COLLECTIONS

Written Question on Notice

Senator Sue Boyce asked:

In the Australian Institute of Health and Welfare latest *Review of the Alcohol and Other Drug Treatment Services National Minimum Data Set* on page 43 there is a reference to the, 'increasing differences between the state and territory collections and the national collection', and in the Summary on page viii, it says that there was 'no consensus on which concepts were most important'.

Given that inconsistent data in the national minimum data sets in the alcohol and other drugs area has been a problem that has allegedly been worked on for the last 10 years:

- a) Could the AIHW please detail what progress has been made in the last ten years?
- b) Has the situation regarding the consistency of data across jurisdictions become worse?
- c) What difficulties does this create for the creation of sound public policy decisions?
- d) Does this inconsistency of data collections and methods also exist when quantifying the degree of national 'unmet need' in disability services?

Answer:

- a) The Alcohol and Other Drug Treatment Services National Minimum Data Set (AODTS NMDS) collection commenced its pilot year on 1 July 2000. The AIHW is now the custodian of nine years of data from the collection and is currently compiling data from the tenth collection period (2009–10). Since the collection began, the AIHW has worked with relevant federal, state and territory agencies and other experts to ensure that the data received by the AIHW complies with the rules of the national collection.

Specific activities performed by the AIHW to support data quality improvement include:

- development of an annual specifications and collection manual to assist those responsible for collecting and reporting AODTS NMDS data;
- implementing data validation practices, such as edit and logic checks, to ensure that the data provided to the AIHW are consistent with the specific definitions of the collection; and
- providing feedback to jurisdictions each year on the quality of data received.

Collectively these activities and other related work conducted by jurisdictions and the AIHW have resulted in a sustained increase in the quality of the national collection.

Some of the other specific quality improvements made to the collection include:

- the introduction of information about the geographic location where treatment was provided;
- improvement (decline) in the proportion of 'not stated' responses over time; and
- improvement in the coverage of the collection, for example, by increasing the number of non-government organisations in Queensland which collect and report information.

b and c)

As discussed in response to part a, the quality of the national AODTS NMDS data has continued to improve over time. Jurisdictional data are reported to the AIHW in accordance with the broad concepts and definitions comprising the national collection to ensure that AODTS NMDS data are consistent.

The recently released Review report has been provided to jurisdictions for consideration, including to the Department of Health and Ageing which funds the collection. There are a number of other initiatives underway, such as the release of the new *National Drug Strategy 2010–2015* that, in addition to the findings of the Review, may influence the future scope and content of the AODTS NMDS collection.

Jurisdictions also have the flexibility to collect other information for their own internal purposes, and to report that information separately through their own reporting arrangements. This reflects the need of respective jurisdictions to collect other information that is particular to their circumstances, which can support jurisdictional policy decision making while not compromising the consistency of the national collection.

d) The answer to this question is included in the answer to the written question on notice about Unmet Need (E11-077).