

# **Data Linkage Policy**

#### 1. Purpose

The WA health system is committed to ensuring the highest standards are upheld when using personal information for data linkage, to protect the privacy of individuals. The purpose of this policy is to establish minimum data linkage standards for WA health entities creating linkage keys to enable the integration of WA health system information.

The policy ensures that, where WA health system information is used to create linkage keys and produce integrated datasets using data linkage keys, it is done so in accordance with applicable standards and industry best practice such as adopting the <u>National best practice</u> <u>guidelines when dealing with data linkage activities related to Aboriginal people</u> when developing Aboriginal and Torres Strait Islander flags.

This policy applies to the creation of linkage keys. Linkage keys are a unique identifier generated via approved data linkage methodologies to facilitate the integration of linked datasets.

This policy has been established to ensure compliance with Accredited Data Service Provider requirements so that best practice protocols and the separation principle are adopted when undertaking linkage activities using Commonwealth data.

This policy aligns with the Australian Privacy Principles, as set out in the *Privacy Act 1988*.

This policy is a mandatory requirement for Health Service Providers under the *Information Management Policy Framework* pursuant to section 26(2)(k) of the *Health Services Act 2016.* 

This policy is also a mandatory requirement for the Department of Health pursuant to section 29 of the *Public Sector Management Act 1994*.

Methods of data integration which do not utilise linkage keys, such as data matching processes, fall outside the scope of this policy. The policy does not apply to data matching activities that generate integrated data using existing variables, or any unique identifiers that have not been generated via data linkage methodologies utilising specialised software-driven probabilistic processes.

### 2. Applicability

This policy is applicable to WA health entities.

The requirements contained within this policy are applicable to the services purchased from contracted health entities where it is explicitly stated in the contract between the

contracted health entity and the State of Western Australia or Health Service Provider. The State of Western Australia or Health Service Provider contract manager is responsible for ensuring that any obligation to comply with this policy by the contracted health entity is accurately reflected in the relevant contract and managed accordingly.

#### 3. Policy Requirements

- 3.1 WA health entities must seek approval via the submission of the Data Linkage Approval Form prior to creating data linkage keys to generate integrated datasets. Further information may be requested, as required, to support consideration of the application.
- 3.2 WA health entities when creating data linkage keys to generate integrated data from WA health system information assets must:
  - a. establish roles, processes and procedures in strict adherence to the separation principle to maintain confidentiality across all personal information
  - b. protect information from misuse and inappropriate access and disclosure
  - c. use an ISO 27001 certified information security management system.
- 3.3 WA health entities must access, use, disclose and share information to generate data linkage keys to integrate datasets only when it is lawful to do so.

#### 4. Compliance Monitoring

WA health entities must comply with this policy by undertaking Information Management Maturity Assessments as prescribed in the <u>Information Management Governance Model</u>.

The System Manager, through the Information and System Performance Directorate requires that Health Service Providers provide the System Manager with the results of their two yearly self-assessed Information Management Maturity Assessment. These results are subject to review for assurance purposes. In addition, Heath Service Providers must provide all related local documentation, including policies, processes, procedures and/or protocols, to the System Manager upon request.

All divisions within the Department of Health are required to conduct two yearly Information Management Maturity Assessments. These results are subject to review for assurance purposes.

#### 5. Related Documents

The following documents are mandatory pursuant to this policy:

Data Linkage Approval Form

#### 6. Supporting Information

The following information is not mandatory but informs and/or supports the implementation of this policy:

- Data Linkage Policy Information Compendium
- WA Health Minimum Requirements for Data Linkage
- Limitations and Suitable Use of Linked Data

• National best practice guidelines when dealing with data linkage activities related to Aboriginal people

## 7. Definitions

The following definition(s) are relevant to this policy.

Term	Definition		
Data	The term 'data' generally refers to unprocessed numbers, facts or statistics, while the term 'information' refers to data that has been processed in such a way as to be meaningful to the person who receives it.		
	The terms 'data' and 'information' are often used interchangeably and should be taken to mean both data and information.		
Data integration	The action of combining two or more datasets including, but not limited to, utilising data linkage keys.		
Data linkage	The establishment of data linkage keys that enable data integration of two or more datasets.		
Data linkage key	A unique identifier generated via data linkage methodologies, utilising a specialised software-driven probabilistic process.		
Data matching	A process which involves bringing together at least two datasets, based on a unique identifier which is not a data linkage key.		
Information	The term 'information' generally refers to data that has been processed in such a way as to be meaningful to the person who receives it. Information can be personal or non-personal in nature.		
	The terms 'data' and 'information' are often used interchangeably and should be taken to mean both data and information in this policy.		
Information asset	A collection of information that is recognised as having value for the purpose of enabling the WA health system to perform its clinical and business functions, which include supporting processes, information flows, reporting and analytics.		
Personal information	As defined within the <i>Freedom of Information Act 1992</i> (WA), means information or an opinion, whether true or not, and whether recorded in a material form or not, about an individual, whether living or dead —		

	<ul> <li>(a) whose identity is apparent or can reasonably be ascertained from the information or opinion; or</li> </ul>
	(b) who can be identified by reference to an identification number or other identifying particular such as a fingerprint, retina print or body sample.
	The separation principle is a mechanism to protect the identities of individuals and organisations in datasets, applied as part of the data linkage and data integration process used to form the integrated dataset.
Separation principle	This means that:
	<ul> <li>(a) A person with access to content data is prevented from accessing demographic data which is used for data linkage; and</li> </ul>
	(b) A person with access to demographic data for the purpose of linkage is prevented from accessing content data for the relevant service record.
WA health entities	WA health entities include the Department of Health and Health Service Providers.
WA health system	<ul> <li>The WA health system is comprised of:</li> <li>(i) the Department;</li> <li>(ii) Health Service Providers (North Metropolitan Health Service, South Metropolitan Health Service, Child and Adolescent Health Service, WA Country Health Service, East Metropolitan Health Service, PathWest Laboratory Medicine WA, Quadriplegic Centre and Health Support Services); and</li> <li>(iii) contracted health entities, to the extent they provide health services to the State.</li> </ul>

## 8. Policy Contact

Enquiries relating to this policy may be directed to:Title:DirectorDirectorate:Information and Performance GovernanceEmail:RoyalSt.PSPInfoManagement@health.wa.gov.au

#### 9. Document Control

Version	Published date	Review date	Amendment(s)
MP 0184/24	9 May 2024	May 2027	Original version

Note: Mandatory policies that exceed the scheduled review date will continue to remain in effect.

## 10. Approval

	Sash Tomson, A/Assistant Director General, Strategy and Governance Division, Department of Health
Approval date	7 May 2024

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