Online Services Report (OSR) Database, 2013–14; Quality Statement

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# Online Services Report (OSR) Database, 2013–14; Quality Statement

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| Identifying and definitional attributes | |
| Metadata item type: | Data Quality Statement |
| Synonymous names: | OATSIH Services Reporting |
| METEOR identifier: | 601336 |
| Registration status: | [AIHW Data Quality Statements](https://meteor.aihw.gov.au/RegistrationAuthority/5), Superseded 02/06/2021 |

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| Data quality | |
| Data quality statement summary: | The Online Services Report (OSR) database collects organisation-level information from Aboriginal and Torres Strait Islander health organisations that receive Australian Government funding. The main data quality issues identified in the 2013–14 collection were inaccurate recording and data discrepancies between two or more questions. Where needed, AIHW staff contacted organisations to clarify any data quality issues and request additional or corrected data.  In 2013-14, 269 organisations contributed to the OSR national report. Most of these, (87%) had all of their data included in national analyses; 13% (35 organisations), had 1 or more data items excluded from national analyses, due to remaining data quality issues. |
| Institutional environment: | The Australian Institute of Health and Welfare (AIHW) gets OSR data from health organisations through OCHREStreams, a secure web portal, hosted and managed by the Improvement Foundation on behalf of the Australian Government Department of Health. The Improvement Foundation (Australia) Ltd was established in Adelaide in 2006 as a not-for-profit organisation and a subsidiary of the UK Improvement Foundation. The Improvement Foundation provide expertise in the development and delivery of quality improvement techniques through specialist change management advice and IT systems.  The AIHW is a major national agency set up by the Australian Government under the Australian Institute of Health and Welfare Act 1987 to provide reliable, regular and relevant information and statistics on Australia's health and welfare. It is an independent corporate Commonwealth entity established in 1987, governed by a management Board, and accountable to the Australian Parliament through the Health portfolio.  The AIHW aims to improve the health and wellbeing of Australians through better health and welfare information and statistics. It collects and reports information on a wide range of topics and issues, ranging from health and welfare expenditure, hospitals, disease and injury, and mental health, to ageing, homelessness, disability and child protection.  The Institute also plays a role in developing and maintaining national metadata standards. This work contributes to improving the quality and consistency of national health and welfare statistics. The Institute works closely with governments and non-government organisations to achieve greater adherence to these standards in administrative data collections to promote national consistency and comparability of data and reporting.  One of the main functions of the AIHW is to work with the states and territories to improve the quality of administrative data and, where possible, to compile national datasets based on data from each jurisdiction, to analyse these datasets and disseminate information and statistics.  The Australian Institute of Health and Welfare Act 1987, in conjunction with compliance to the Privacy Act 1988, (Cth) ensures that the data collections managed by the AIHW are kept securely and under the strictest conditions with respect to privacy and confidentiality.  For further information see the AIHW website [www.aihw.gov.au](http://www.aihw.gov.au). The AIHW is responsible for undertaking the data management, analysis and reporting of information collected as part of the OSR. |
| Timeliness: | OSR collects data for each financial year period and has been ongoing since 2008–09.  In 2013-14, 273 organisations were in-scope for the OSR collection. They were required to submit initial data within two months of the census date (30th June). The due date was extended by the Department of Health to the 15th September. Most organisations (254 or 93%) had submitted data by this date; a further 6% (16 organisations) submitted data by the middle of October and 1% (3 organisations) did not submit any data. As data were submitted, the AIHW checked data for accuracy and consistency across reporting periods, and asked organisations to review and re-submit data where corrections were required. This process continued until 15 October 2014 when a finalised national dataset was obtained.  In 2013-14, data from 269 organisations were included in the OSR national report. Data from one primary health-care provider, reporting for the first time in 2013-14, was excluded from national analyses because their data were less Indigenous-specific than the other organisations in the collection. If their data had been included it would have had a large impact on national averages and the time-series analyses. |
| Accessibility: | National level data are available in AIHW publications. The most current report is the "Aboriginal and Torres Strait Islander health organisations, Online Services Report-key results 2013-14". This  publication is available in hard copy or on the AIHW website. |
| Interpretability: | Data were collected using a web-based reporting tool designed specifically to capture information on inputs and health services provided to Aboriginal and Torres Strait Islander clients attending primary health-care, New Directions mothers and babies services, substance-use, and social and emotional wellbeing or Link Up counselling services funded by the Australian Government. Data for a small number of non-Indigenous clients attending these services are included as well. The statistical analyses used in reports are mainly descriptive. Numbers and percentages are commonly used to show major trends. The annual publication also includes a range of information to assist interpretation of data, including a glossary of concepts, and an appendix on data limitations.  The number of organisations submitting data is likely to change slightly each year depending on whether they receive funding. This may impact on the time series data. |
| Relevance: | The database includes information on the activities of organisations from six reporting periods from 2008-09 to 2013-14. It provides an overview of Australian Government funded health organisations aimed at improving health outcomes for Aboriginal and Torres Strait Islander people. Most OSR organisations provided primary health-care services, either solely or in combination with the New Direction mothers and babies program, social and emotional wellbeing or Link Up counselling services and substance-use rehabilitation and treatment services.  Data presented in this report are generally reported by service providers at an aggregated level.  It provides general information about services offered at primary health-care and other organisations (for instance, continuity of care and antenatal care) and activities undertaken. The data can also be analysed at jurisdictional and regional level.  There were a number of questions that were not relevant to all organisations. There may also be instances where an organisation's data were not included for a question due to quality issues. The denominator used for percentage calculation is the number of services that provided valid data for each question. |
| Accuracy: | Some OSR data are electronically transferred from the Patient Information Recall System (PIRS) used by the organisation into OCHREStreams, a web-based portal built and maintained by the Improvement Foundation for the Department of Health. Most organisations use the CAT tool to extract data from their PIRS and load it into OCHREStreams. Once on OCHREStreams, organisations can overwrite their data if they choose, before the data are available to the AIHW for analysis. A variety of PIRS are used by organisations and not all PIRS are compatible with the CAT tool.  AIHW examined all data submissions to identify missing data and possible data quality issues and detected at least one query for 212 (79%) organisations. AIHW staff contacted these organisations for further clarification and review. Of these, 157 (74%) resubmitted affected data.  There were two major data quality issues identified in the 2013–14 collection: discrepancies between data provided for two or more questions (for example the number of clients exceeded the number of episodes of care); and inaccuracies in the data provided for some questions (for example, FTE staff were reported in terms of the number of people rather than full-time equivalent positions).  The two major reasons for missing data or data with quality issues were the lack of complete records of data and/or insufficient data management resources available at organisations to support the data collection. Some organisations also had problems with the electronic transfer of data from their organisation’s PIRS to the AIHW.  By the cut-off date for data submission and finalisation, most (87% or 234) organisations had provided data that could be included in national analyses. The remaining 13% or 35 organisations had a total of 48 data items excluded from national analyses due to remaining data quality issues (some organisations had more than one item excluded). Exclusion rates vary by data item. For example, primary health-care episodes of care data were excluded for 2% of organisations, while visiting staff data were excluded for 4% of organisations.  In addition, data on MBS rebateable (Item 715) activities were not included in the national report due to issues identified with the extraction of this data from some PIRS systems, affecting the quality of this data.  The denominator used for percentage calculation is the number of organisations that provided correct data for each item. |
| Coherence: | Data were collected and reported by the AIHW for the first time in 2008–09 using a new OSR questionnaire. This replaced the Service Activity Reporting, Drug and Alcohol Services Reporting, and Bringing Them Home and Link Up counselling data collections. These were previously collected by the Department of Health. It would not be appropriate to make time series comparisons with pre-2008–09 data due to differences in the collection methodology.  From 2012–13, use of a new online questionnaire commenced. It introduced a reporting module for maternal and child health care programs and activities. Major questions (e.g. episodes of care, clients and contacts) remained the same. Some other questions were revised or restructured. For example, the question on clinical and health related activities/programs from the previous collections was split into several new questions and some answer options were no longer available. Questions about substance-use issues that organisations provided treatment for were now collected for the top 5 issues rather than all applicable issues. Where such changes precluded time series analyses, these were not included in the national report. Additional questions on the gaps and challenges faced by organisations in providing health services were also included for the first time.  In the 2013–14 data collection, New Directions: Mothers and Babies services were in-scope for the collection for the first time. In 2013-14, there were 86 OSR organisations receiving Australian Government funding for these services. It should be noted that the number of organisations receiving New Directions funding that submitted OSR data are different to the number of New Directions funded organisations reported by the Department of Health, due to differences in how an organisation is defined. An organisation defined as a single entity for funding purposes may have multiple organisations reporting OSR data. For more information see the AIHW publication ['New Directions: Mothers and Babies Services—Assessment of the program using nKPI data December 2012 to December 2013. IHW 145.'](http://www.aihw.gov.au/publication-detail/?id=60129550006)  Most of the organisations receiving New Directions funding were already contributing to the OSR collection, because they also received primary health-care funding; however a small number of them (16) contributed to the OSR collection for the first time in 2013-14. |
| Data products | |
| Implementation start date: | 04/02/2015 |
| Source and reference attributes | |
| Submitting organisation: | AIHW |
| Relational attributes | |
| Related metadata references: | Supersedes [Online Services Report (OSR) Database, 2012–13, Data Quality Statement](https://meteor.aihw.gov.au/content/561251)  [AIHW Data Quality Statements](https://meteor.aihw.gov.au/RegistrationAuthority/5), Superseded 02/06/2021  Has been superseded by [Online Services Report (OSR) Database, 2014–15; Quality Statement](https://meteor.aihw.gov.au/content/623095)  [AIHW Data Quality Statements](https://meteor.aihw.gov.au/RegistrationAuthority/5), Superseded 31/05/2017 |