Health Workforce Information Programme (HWIP)

Data Access Protocols

January 2020

Introduction

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The DHB Workforce Information Programme (HWIP) manages the collection and use of the DHB employed workforce data on behalf of the 20 DHBs.

It is intended that this collection be used as widely as possible to help inform the understanding of the New Zealand health workforce. This is balanced with maintaining the appropriate privacy and security of the collection.

As the collection has expanded and improved over time there is wider interest in accessing the data for strategic and operational workforce planning and analysis.

This paper outlines the data protocol and release matrix for information from the collection.

Background

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The HWIP data has been collected from the 20 DHBs since 2006. A total of 29 variables (see Appendix 1) are captured on a quarterly basis, based on a national workforce information standard, including a number of standard code sets.

A privacy impact assessment was carried out in 2006 providing advice on the collection, storage and access to the data. From this the data and analysis has been provided at an aggregated level via quarterly reports made available on the TAS website. Outside of these regular reports, the process for accessing data is based on a receive request, process/analyse, validate with the DHBs/relevant DHBs, obtain sign off, as required, and release.

Current Activities

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- DHB Employed Workforce Information Quarterly Reports, a snapshot of DHB HR and Payroll data taken at the end of each quarter providing workforce demographics by DHB and seven workforce groupings – Senior Medical Officer (SMO), Resident Medical Officer (RMO), Nursing, Midwifery, Allied & Scientific, Care and Support and Corporate and Other.
- Quarterly Reports uploaded onto the TAS website and notice sent to DHBs, MoH/Workforce Directorate and DHB regional support agencies.
- Customised information requests – data taken from already published quarterly data, still aggregated and non-identifiable.
- OIAs – follow the OIA guidelines and processes.
- Ad hoc requests processed as received.

Data Protocol and Data Release Matrix

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All data requests received are treated as OIAs and as such are processed in line with the Official Information Act (1982).

Data Protocol

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To ensure HWIP maintains integrity around the release of data the following protocols apply:

- Best endeavours will be made to release HWIP data to requestors.
- All requests for information will be managed and responded to by HWIP in alignment with the agreed matrix levels.
- HWIP will release data to a level that is useful without losing the trust of the sector.
- Assistance with the correct interpretation of the data/information will be provided.
- Decisions on the release of data will be consistent with the current legislation including the Privacy Act 1993 and the Health Information Privacy Code 1994.
- Any requests (including requests under the Official Information Act (OIA)) which are deemed to be outside of the agreed matrix levels will be agreed with the DHBs.
- HWIP will maintain ongoing safety and security of data held and released.
- Relevant stakeholders, where appropriate, will be kept informed of the information being requested and released under the OIA and appropriate approval will be given before release.

Data Release Matrix

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When a request for data is received the following matrix is used to determine the data to be released, at what level and the approval required.

Request	Requested Data Level				
	Unit level/Line level data				
	Own data	Following DHB GMsHR approval	Following DHB and GMsHR group approval	Quarterly Reports	Customised Reports
DHB	Yes	Yes	Yes	Yes	Yes
MoH	No	Yes	Yes	Yes	Yes
Researchers	No	No	Yes	Yes	Yes
Public	No	No	Yes	Yes	Yes
Timeframe (maximum working days)	5	5 following approval	5 following approval	3 monthly report	20 (OIA process)

Risk Mitigation

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As indicated in the data protocols section HWIP will maintain ongoing safety and security of the data held and released. There is very low risk within the collection as all the data is non-identifiable.

The two areas that may be of concern to identify a person are their name and date of birth, neither of which are captured in the collection. HWIP captures unique employee ID rather than name and year of birth rather than date of birth. Even with these small measures in place, if numbers are low (head counts between one and four) in a particular workforce they will not be released as they are deemed as identifiable.

The criteria of the data extraction and any caveats relating to suppressed data are always provided to the requestor.

Health Workforce Information Programme – Base Data Template (variables) Appendix 1

Unique Employee Identifier	Facility of Usual Employment	Entry Source	Employment Start Date	Exit Source	Employment End Date	Reason for Leaving	Birth Year	Registration Authority Membership Number	Practitioner Scope of Practice	Job Title	DHB Common Chart of Accounts Occupation	Gender	Ethnicity	Paid Employment Status
DHB Specific format			Format: dd/mm/yyyy		Format: dd/mm/yyyy		Numeric format: yyyy (e.g: 1972)			DHB Specific format				

Union Membership	Iwi Affiation	Total Contracted Hours (annum)	Total Paid Hours (calculated over previous 3 months)	Total Accrued Hours (calculated over previous 3 months)	ANZSCO	Country of first professional qualification	Year of first professional qualification	Annualized Base Salary	Pay Derived Document	Annual Leave Entitlement	Annual Leave Balance	Sick Leave hours (calculated over previous 3 months)	Primary area of work
Which union are they a member of?		The total number of hours this employee is required to work this year (eg. Full-time for 5 days a week = 2086 pa, full time for 3 days a week = 1252)	Number of hours based on payroll history transactions aggregated for Ordinary and Penals (where ordinary not included) such as overtime.	Number of Hours defined according to the MOH Standard FTE from 1 July 2006 (1/1/06 for DAP purposes)				The base salary figure for union derived salaries if the employee was to work 2086 hours (1.0 FTE) per year or nearest $10k (capped at $100,000) for IEAs. Multiple hourly rate by 2086	The union (or IEA) led document from which their pay is derived	The total basic pro-rata annual leave entitlement (hours)	The total basic annual leave balance as at reporting date (hours)	Total number of hours taken as sick leave over the previous 3 months (regardless of how or if paid)	

Further information on the HWIP data variables can be found in the HWIP Base Data – Dataset Standard and the HWIP Base Data – Code Set available on the TAS website at - https://tas.health.nz/employment-and-capability-building/workforce-information-and-projects/health-workforce-information-programme-hwip

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