

Confidential Data Management Policy

September 2023

Confidential Data Management Policy – Version 5.0 September 2023

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# Table of contents

Acronyms and abbreviations 5

Definitions 6

1. Executive summary 7

2. Management of confidential jurisdictional information 9

3. Compliance 12

# Acronyms and abbreviations

|  |  |
| --- | --- |
| **CEO** | Chief Executive Officer |
| **DLM** | Dissemination Limiting Marker |
| **IHACPA** | Independent Health and Aged Care Pricing Authority |
| **The Addendum** | Addendum to the National Health Reform Agreement 2020–25 |
| **The NHR Act** | *National Health Reform Act 2011* (Cwlth) |
| **This Policy** | *Confidential Data Management Policy* |

# Definitions

|  |  |
| --- | --- |
| **Confidential jurisdictional information** | Any economic and financial projections of jurisdictions related to Australian public hospital services or aged care services and provided to the Independent Health and Aged Care Pricing Authority (IHACPA) by the Commonwealth or a state or territory (a jurisdiction); or where there is mutual understanding and agreement between IHACPA and the jurisdiction that the information has been provided in confidence.If confidential jurisdictional information is delivered orally, such as through discussions, there should be mutual understanding and agreement between IHACPA representatives and the jurisdictional representative that the information is being provided in confidence.This excludes data relating to applications regarding refundable accommodation deposits and extra service fees for residential aged care, which is classified as protected information under the *Aged Care Act 1997* and is not in-scope for this Policy.  |
| **Economic and financial projections** | Forward financial data relating to jurisdictional policies regarding the delivery of public hospital and residential aged care services, for example: * block-funding expenditure amounts required to determine the National Efficient Cost
* proposed expenditure amounts required to assess innovative models of care and innovative funding models
* aged care data required to develop residential aged care costing and pricing advice.
 |
| **IHACPA representatives** | The Chief Executive Officer of IHACPA, members of the Pricing Authority, IHACPA staff, contractors and consultants. |
| **Jurisdictions** | The Commonwealth and states and territories. |
| **Pricing Authority** | The governing body of IHACPA established under the *National Health Reform Act 2011* (Cwlth). |

# Executive summary

## Background

The *National Health Reform Act 2011* (Cwlth) (the NHR Act) and the Addendum to the National Health Reform Agreement 2020–25 (the Addendum) outline the Independent Health and Aged Care Pricing Authority’s (IHACPA) functions as they relate to public hospital services, health care pricing or costing matters and aged care services. These include determining the national efficient price (NEP) and national efficient cost (NEC) for public hospital services, developing projections of the NEP for a four year period on an annual basis and providing confidential reports on these projections to the jurisdictions, and the provision of advice on health care pricing and aged care pricing and costing. To undertake these functions, IHACPA relies on the provision of confidential jurisdictional information from the Commonwealth and states and territories.

Clauses B66–B81 of the Addendum stipulate that IHACPA will develop rolling three year data plans to indicate its future data needs, and that jurisdictions must provide IHACPA with the data required to carry out its functions in accordance with its data plans.

IHACPA has a comprehensive approach to data and information protection informed by national and international standards and best practice, and advances in technology. This approach ensures:

* compliance with legislation and contractual arrangements
* that personnel are screened and trained
* processes and analysis methods are robust
* data and information management is safe and secure
* de-identified data is used within the scope of the legislative requirements
* output is safe.

Based on this approach, IHACPA has developed a system of continuously updating and improving safeguards to protect information and to meet evolving organisational and technical demands.

Confidential jurisdictional information provided to IHACPA is protected by provisions in Australian legislation and frameworks, policies and contracts. Legislative protections include the:

* NHR Act
* Addendum
* *Aged Care Act 1997* (Cwlth)
* *Public Governance Performance and Accountability Act 2013* (Cwlth)
* *Archives Act 1983* (Cwlth)
* *Privacy Act 1988* (Cwlth)
* *Data Availability and Transparency Act 2022* (Cwlth)
* Australian Government’s *Protective Security Policy Framework*
* Australian Government’s *Building trust in the public record: managing information and data for government and community* policy.

IHACPA also elects to comply with state and territory data and information protection legislation.

## Purpose

The purpose of the *Confidential Data Management Policy* (this Policy) is to advise jurisdictions of the processes and controls adopted by IHACPA in managing confidential jurisdictional information. This Policy outlines the limited and prescribed purpose for which IHACPA can collect and analyse confidential jurisdictional information and the controls in place to prevent unauthorised access to confidential jurisdictional information and disclosure to unauthorised parties. This includes the processes and controls for requests, access, handling, use, classification, storage, release and disposal of confidential jurisdictional information.

This Policy applies to all confidential jurisdictional information received from jurisdictions by IHACPA representatives, including the Chief Executive Officer (CEO) of IHACPA, Pricing Authority Members, IHACPA staff, contractors and consultants.

## Review

The Pricing Authority and CEO of IHACPA will review this Policy, including associated documentation, annually or as required.

This Policy was last reviewed in September 2023.

# Management of confidential jurisdictional information

Confidential jurisdictional information provided to IHACPA is an important asset. IHACPA is committed to providing the best possible safeguards to protect this asset and ensuring that stakeholders are aware of the nature and scope of these safeguards. This Policy contributes to these safeguards by providing a specific focus on managing confidential jurisdictional information.

Serious penalties may apply for inadvertent or deliberate breaches to legislation, contracts and IHACPA policies relating to the protection and use of confidential jurisdictional information. These include criminal and civil penalties, and loss of the social licence to operate. For individual personnel, including current and former IHACPA officials, penalties may include disciplinary action, termination of employment, and criminal and civil penalties.

Detailed below is a summary of the processes and controls in place to ensure the effective management of confidential jurisdictional information held by IHACPA.

## Requests

Where a jurisdiction provides confidential information to IHACPA, the jurisdiction must identify the information by using the relevant classification schema specified in the request. Further details of classification schema that may be used can be found in IHACPA’s Three Year Data Plan.

## Access, handling and use

IHACPA takes all reasonable steps to ensure that confidential jurisdictional information remains confidential. IHACPA only discloses confidential jurisdictional information to external agencies or individuals as permitted under legislation, contract consent or policy. IHACPA does not copy or record confidential jurisdictional information other than for the purpose of carrying out its functions under the NHR Act and the Addendum. Confidential jurisdictional information is only used for the purposes for which the jurisdiction provided the information, unless agreed otherwise.

IHACPA only discloses confidential jurisdictional information to its officers and employees on a need-to-know basis for the purpose of carrying out IHACPA’s functions. IHACPA ensures its officers, employees, consultants and third parties are aware of the legislative and policy requirements for confidential jurisdictional information. The requirements for IHACPA’s officers, employees, consultants and third parties pertaining to access, handling and use of confidential information are underpinned by the secrecy provisions of Part 4.14 of the NHR Act and outlined in the IHACPA [*Privacy Policy*](https://www.ihacpa.gov.au/about-ihacpa/who-we-are/corporate-information/policies/privacy), available on the IHACPA website, and other internal policies.

## Classification

IHACPA is required to classify information it receives and, where necessary, ensure that information is handled by staff with the appropriate security clearance in line with the *Protective Security Policy Framework*. This policy sets out the system for the control and handling of security classified information and the details of the documents received and copies retained.

In the event of classified material being stored at IHACPA, it will open and maintain a classified document register for all ‘TOP SECRET’ and ‘SECRET’ materials produced or received.

To ensure compliance, there is a register, maintained by the Department of Health and Aged Care, of the security vetting clearances held by staff.

### Dissemination Limiting Marker

IHACPA identifies confidential jurisdictional information by labelling it with the appropriate Dissemination Limiting Marker (DLM).

DLMs are markings for information where disclosure may be limited or prohibited by legislation, or where it may otherwise require special handling. As outlined in the *Protective Security Policy Framework*, IHACPA is responsible for determining the appropriate protections to be applied to information bearing DLMs (other than ‘Sensitive: Cabinet’), whilst ensuring that the principles of information security practice are applied. The following four categories of DLMs are used:

* Unofficial
* Official
* Official: Sensitive
* Protected.

IHACPA selects DLMs (other than ‘Sensitive: Cabinet’) on a case-by-case basis. In most cases confidential jurisdictional information is marked ‘Official: Sensitive’.

## Storage

IHACPA uses authorised systems and processes for managing information and records in all formats, aiming to manage digital records in an electronic format in alignment with the *Building trust in the public record: managing information and data for government and community* policy issued by the National Archives of Australia in 2021.

All information received from jurisdictions is stored securely electronically on the Secure Data Management System, IHACPA’s secure access controlled cloud based data storage network and on IHACPA’s Electronic Document and Records Management System, Content 9 (CM9), commonly known as TRIM.

Physical copies of documents provided to IHACPA are scanned into TRIM and the physical copy is then securely disposed of in accordance with IHACPA’s Record Authority or relevant General Record Authorities issued by the National Archives of Australia.

Where physical storage is required, information will be stored in locked cabinets in the IHACPA office.

## Release

IHACPA has developed a *Data Access and Release Policy*, which outlines its principles and processes to release information. The *Data Access and Release Policy* is reviewed regularly and published on the IHACPA website.

Sections 220 and 221 of the NHR Act state that IHACPA may release certain public hospital data to an agency, body or person if the Chair of the Pricing Authority, or their Delegate, is satisfied that the information will assist the agency, body or person to perform or exercise any of the functions or powers of the agency, body or person, or if the information will assist the agency, body or person to conduct research.

Under section 220A of the NHR Act, IHACPA may release health care pricing and costing information that is collected under clause 131(1A) of the NHR Act and aged care information to the Australian Institute of Health and Welfare or the Australian Statistician under limited conditions.

Section 221 of the NHR Act prohibits IHACPA from releasing health care pricing and costing information that is collected under clause 131(1A) of the NHR Act and aged care information under any circumstances.

## Disposal

When the confidential jurisdictional information is no longer required, it is stored or disposed of in accordance with IHACPA’s Record Authority or relevant General Record Authorities issued by the National Archives of Australia.

# Compliance

## Internal controls

IHACPA proactively manages the confidential information provided by jurisdictions with risk mitigation. In addition to the controls outlined in Chapter 2 of this Policy, IHACPA:

* documents policies, plans and procedures for the management of confidential jurisdictional information and records
* provides security awareness training to staff at their induction and at regular intervals, as well as to contractors and consultants before they can access data and information
* ensures consultants and contractors provide a signed Deed of Confidentiality and valid National Police Check not greater than six months old, prior to accessing any confidential information
* in line with IHACPA’s *Privacy Policy*, undertakes a written Privacy Impact Assessment for all projects that involve new or changed ways of handling personal information that, if their data was breached would be likely to have a significant impact on the privacy of individuals
* has established an Audit, Risk and Compliance Committee that meets quarterly to discuss a number of matters including risk, governance and compliance matters, with a Chairperson independent to IHACPA
* arranges regular internal and external security audits of its operations
* regularly reports on compliance to the CEO of IHACPA, the Pricing Authority, Audit, Risk and Compliance Committee and internal committees.

There is also a ‘Designated Security Assessed Position Register’, maintained by the Department of Health and Aged Care, which details IHACPA staff and representatives granted a security clearance by the Australian Government Security Vetting Agency.

## Assurance

IHACPA assesses the effectiveness of internal controls by undertaking regular compliance monitoring through:

* routine verification of compliance with the IHACPA policies, plans and procedures through internal audits
* internal monitoring of compliance with internal controls by the CEO of IHACPA
* annual reporting of compliance with mandatory *Protective Security Policy Framework* requirements through the Minister for Health and Aged Care to the Minister for Finance
* conducting regular data assurance audits.



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