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NHMRC Centre of Research  
Excellence in Offender Health

The Kirby Institute

## **Submission to the Productivity Commission Inquiry into Data Availability and Use**

### ***Linking health and justice data***

Individuals who come into contact with the criminal justice system represent a marginalised group who often have complex health and social needs resulting in contact with multiple public sector agencies, including: corrections, police, health, disability, aged care, housing and Centrelink.

Ease and timeliness of access to linked data from such agencies will enable a more complete understanding of the interaction, or lack of, between health services, health conditions, disability, and criminal offending and open up the possibility of tailored and timely responses that may prevent offending in the first place, reoffending in the future, and improved health outcomes for this group.

The NHMRC Centre of Research Excellence in Offender Health (Kirby Institute, UNSW Australia) and Brain Injury Australia recently held a one day workshop to examine issues associated with Brain Injury and the Criminal Justice System. The high level gathering of individuals and organisations responsible for the management and care of people with an injury who are in the legal system - often inappropriately - and practitioners of the law shared common concerns.

This short submission identifies these concerns and provides area of intervention and mitigation. It would be valuable for the productivity commission to analyse the benefits of the availability of data across the states and territories and indeed the federal jurisdiction to gain information that would improve the health care and the fairness and indeed result in much more cost-effective interventions for society. It would fit to see people in the right place under the right systems supervision and remediation at the right time.

One specific outcome arising from one of the discussion groups was that access to data for both research and service use is becoming more difficult with multiple layers of approvals required and obstacles for agencies accessing health and justice data that can hamper service provision. While the discussion (detailed below) centred on the intersection between health and justice data collections in the context of brain injury, these issues readily apply to other health conditions.

### **Key issues and impediments in allowing data to be shared across the areas of health and justice in regard to Brain Injury**

- Ethical clearance procedures are important but fragmented across the health and justice sectors which mean researchers cannot streamline their access requests resulting in significant delays in gaining access to worthwhile data.
- Having to gain approval from multiple data custodians can also slow down access to information.

- Privacy concerns can hamper access to information for both research and service provision purposes.
- It is often unclear what data is actually available on a particular health issue, let alone who these data sources might be linked to.
- Ethical and intersecting legislative and privacy issues. Western Australia with its 'livelinks' data was seen as admirable, especially since each jurisdiction has different sets of rules.
- It was suggested that links between justice and health could be facilitated by the use of the unique individual health identifier which has existed since 2010 but is not being used. This untapped resource could easily be used across multiple sectors and assist linkages.
- This health identifier is potentially of considerable use given the high use of aliases among recidivist offenders.
- Separation and fragmentation of data holdings is an issue. For example, the National Disability Insurance Scheme (NDIS) is an example of an agency creating a new set of identifiers, assessments and rules independently of other groups.
- A cost-benefit analysis of access to comprehensive data, with regard both to better provision of services to users in general and also by fitting of individual users to particular services would be beneficial. Failure of some sectors to recognise a brain injury disadvantages the person and sharing their status (with appropriate safeguards) might help overcome this.
- A way forward would be to establish a working group that could straddle sectoral boundaries and encompass a range of service, legal, privacy and research topics. Mapping available information would benefit service providers and consumers alike. Having to reinvent the wheel for every such effort is nugatory and frustrating.

In summary, improved data linkage and cross-sectoral information sharing would be beneficial to enable timely access to data on health and disability that may lead to improved justice, welfare and health outcomes for this group. The establishment of a high level national working group to examine this issue would be a useful first step.

**Dr Mukesh Haikerwal (Brain Injury Australia)**

**Professor Tony Butler (Kirby Institute, UNSW)**

**A/Professor Peter Schofield (Hunter New England Health)**

**Professor Leanne Dowse (School of Social Sciences, UNSW)**

**Dr Adrienne Withall (UNSW School of Public Health and Community Medicine)**

**A/Professor Tom Turnbull (Correct Care Australasia)**

**Monica Cations (Flinders University)**

**Dr Melanie Simpson (Kirby Institute, UNSW)**