



Australian Government

Australian Institute of Health and Welfare



Australian Institute of Health and Welfare

Corporate Plan 2023–24



The AIHW is a Corporate Commonwealth entity producing authoritative and accessible information and statistics to inform and support better policy and service delivery decisions, leading to better health and wellbeing for all Australians.

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Foreword

This corporate plan is a key strategic planning document for the Australian Institute of Health and Welfare (AIHW). It sets out the key strategic priorities and the activities we will pursue to achieve our purpose.

Our corporate plan assists the Australian Government, the Australian Parliament and the people of Australia to assess how we are performing, how we use the public resources entrusted to us and how we cooperate with others to achieve wider objectives. It has been developed in accordance with the requirements of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act) and the Public Governance, Performance and Accountability Rule 2014.

Statement of preparation

On behalf of the AIHW Board, which is the accountable authority of the AIHW, I present the AIHW Corporate Plan 2023–24, which covers the period of 2023–24 to 2026–27, as required under paragraph 35(1)(b) of the PGPA Act.



Dr Erin Lalor
Acting AIHW Board Chair

A handwritten signature in purple ink, which appears to read 'Erin Lalor'.

31 August 2023



About us

The Australian Institute of Health and Welfare (AIHW) is an independent corporate Commonwealth entity that has been in operation for more than 35 years, established in accordance with section 4 of the *Australian Institute of Health and Welfare Act 1987* (AIHW Act).

We are committed to creating data and statistics on a range of health and welfare topics, as well as preparing data, analysis, and information for various purposes.

The AIHW is dedicated to making data and information accessible to researchers, non-governmental organisations, frontline healthcare providers, journalists, educators, consumers, and government policymakers while upholding strict privacy, confidentiality, and security requirements. The independence of the AIHW is central to maintaining the credibility and relevance of the evidence base generated by the AIHW.

How we operate

The AIHW is focused on turning data into useful information and telling the broader story. Our key activities include:

- developing nationally consistent health and welfare data standards and classifications
- collecting information and creating quality data from multiple sources on a range of health and welfare topics
- publishing more than 250 statistical products each year, providing a holistic picture of health and welfare in Australia and how this is changing over time
- linking data from multiple sources, to deliver new insights and better understand complex interactions Australians have with health and welfare services
- providing customised data extracts for researchers, consumers, service providers, and other organisations
- managing controlled access to Australia's most comprehensive collection of health and welfare data

We are supported by numerous data holdings and unmatched knowledge of data and information related to the Australian health and welfare sectors.

Our governance arrangements are robust. These include strong privacy and confidentiality controls, effective business processes and infrastructure, and we have access to a network of government, research, and private sector collaborators from Australia and overseas.

We work with a broad range of stakeholders – with some of our relationships dating back to our establishment in 1987. We convene or participate in committees with experts from many different subject areas, meaning we are informed by contemporary best practice and a wide range of perspectives.

We are committed to ensuring the National Agreement on Closing the Gap priority reforms are embedded in our approaches and processes.

Our partners, collaborators and clients include:

- Australian, and state and territory government agencies
- international organisations, such as World Health Organization (WHO) and Organisation for Economic Co-operation and Development (OECD)
- universities and research centres, non-government organisations including First Nations organisations, health and welfare service providers, and clinicians.

The AIHW embraces diversity and we provide a workplace that is inclusive and free of discrimination.



Our purpose

As an information agency, our purpose is to produce high quality data sets and analysis to support improvements in health and welfare.

Our strategic directions

The AIHW strategic directions 2022-26 sets out our vision, strategic goals and values.

Our vision

Stronger evidence, better decisions, improved health and welfare.

Our strategic goals

We have 4 key strategic goals and supporting objectives that continue to shape our direction for the next 4 years. We will be:

1. A trusted leader in health and welfare data and analysis



To achieve this we will:

- 1.1 Proactively inform and respond to emerging policy issues.
- 1.2 Build our reputation as an authoritative source of health and welfare data and analysis.
- 1.3 Lead the adoption of best practice in data collection, presentation, and analysis.

2. Innovative producers of data sets and analysis



To achieve this we will:

- 2.1 Invest in capability and systems to respond quickly to emerging issues and deliver an innovative approach to data and analysis to meet stakeholder needs.
- 2.2 Identify and fill priority data gaps.
- 2.3 Facilitate sustainable and secure access to timely, relevant and fit-for-purpose data and analysis.

3. A strong strategic partner



To achieve this we will:

- 3.1 Expand and deepen our partnerships.
- 3.2 Enhance our engagement and communications to increase the impact of our work.

4. Recognised for our organisational excellence



To achieve this we will:

- 4.1 Grow our capability and support a high-performing and adaptable workforce.
- 4.2 Expand our program of renewal to ensure provision of high-quality technology and tools to deliver our data and analysis.

Our values

We uphold the following Australian Public Service values of impartial, committed to service, accountable, respectful and ethical (I CARE) (see Figure 2.1).

Figure 2.1: Our values



Impartial

We are apolitical and provide the government with advice that is frank, honest, timely and based on the best available evidence.



Committed to service

We are professional, objective, innovative and efficient, and work collaboratively to achieve the best results for the Australian community and the government.



Accountable

We are open and accountable to the Australian community under the law and within the framework of Ministerial responsibility.



Respectful

We respect all people, including their rights and their heritage.



Ethical

We demonstrate leadership, are trustworthy, and act with integrity, in all that we do.

Our legislation and governance

Enabling legislation

The AIHW Act specifies our functions, operations and responsibilities as follows:

- collect and produce, and coordinate and assist in the collection and production of, health- and welfare- related information and statistics
- conduct and promote research into Australians' health and their health services
- develop specialised standards and classifications for health, health services and welfare services
- publish reports on our work
- make recommendations to the Minister on prevention and treatment of diseases and improvement and promotion of the health awareness of Australians
- provide researchers with access to health- and welfare-related information and statistics, subject to confidentiality provisions.

Governance

We are a corporate Commonwealth entity in the Health and Aged Care portfolio, operating under the PGPA Act. The AIHW's accountable authority under the PGPA Act is the AIHW Board (board). The AIHW is led by its Chief Executive Officer (CEO) who is responsible for its day-to-day administration.

AIHW Board

The board is responsible for ensuring the proper, efficient and effective performance of the AIHW's functions. The board is accountable to the Parliament of Australia through the Minister for Health and Aged Care.

The AIHW Board provides valuable insight reflecting the diverse roles and experiences of its membership, including in the government, health care, not-for-profit and housing sectors. Board membership includes First Nations representation.

AIHW Ethics Committee

The AIHW Act requires the board to appoint an AIHW Ethics Committee. Its functions and membership are prescribed in the Australian Institute of Health and Welfare (Ethics Committee) Regulations 2018. Current members in the category 'Person with knowledge of and current experience in areas of research regularly considered by the committee' include a person with knowledge of and current experience in issues facing First Nations people.

The AIHW Ethics Committee exists to ensure data about people is handled with respect and in line with best practice. Its main responsibility is to advise on the ethical acceptability of activities undertaken by the AIHW and our stakeholders. This includes assessing ethical considerations in research involving First Nations people and other participant groups.

The AIHW Ethics Committee is recognised with the National Health and Medical Research Council (NHMRC) as a properly constituted Human Research Ethics Committee as outlined in the National Statement on Ethical Conduct in Human Research (National Statement).



Our operating context

Our operating context is constantly evolving, complex, and provides opportunities for us to lead and contribute health and welfare data and information improvement. To maintain our relevance to our stakeholders, we keep abreast of the information and data landscape. We are focused on talking with and listening to our partners and stakeholders, and responding to trends and challenges with agility and adaptability. Our success is measured by how we anticipate and flexibly respond to these environmental changes while ensuring we strive towards achieving our purpose and strategic goals.

Our environment

During the next 4 years, we will continue to focus on the following key environmental factors and adapt our operations to achieve our purpose.

Data priorities

To fulfil our role in providing statistics and information about key issues of relevance to Australia, we will continue to advocate for health and welfare data and analysis improvement including work to identify and close data gaps and improve data quality and comparability. We will also continue to undertake informative data analysis.

The response to the COVID-19 pandemic highlighted the importance and value of timely health data and information in times of crisis and uncertainty. Innovative approaches were taken to utilise novel data sources and maximise the timeliness of the release of data to obtain key information for evidence-based decision making.

There has been an increasing recognition of the importance of data linkage. Data linkage brings together data from different sources to produce meaningful insights. Being able to integrate data from multiple sources on a person's health, welfare, education, economic circumstances etc., provides a more holistic picture of a person's situation and journey and how this changes over time. These insights are not possible from analysing a single data source. Data linkage helps decision makers to evaluate what works and what does not work in policy and service delivery.

Demand for data linkage services has increased, not only in terms of the number of linkage projects but also the size and complexity of projects required to resolve health and welfare knowledge gaps. This has increased the complexity of governance arrangements and infrastructure required. There needs to be investment to enable good governance at a systemic level and investment in infrastructure and workforce capability for linking and working with complex integrated data.

National Integrated Health Services Information (NIHSI) and National Health Data Hub (NHDH)

We play a key role in advancing the National Integrated Health Services Information (NIHSI) analysis asset, which provides useful insights into patient journeys through the health and aged care sectors. The NIHSI analysis asset, is continuing to evolve to increase access to the asset, improve timeliness and consider broadening scope.

We are also leading the development of a National Primary Health Care Data Collection (NPHCDC) and conducting data demonstration projects to gain a comprehensive understanding of general practice data in Australia.

With the support of the NIHSI Advisory Committee (AC), we are transitioning the NIHSI into a National Health Data Hub (NHDH), which will become a key asset in the Australian National Data Integration Infrastructure (ANDII). The NIHSI has proven to be successful in providing access to linked data, saving time and effort for stakeholders. In 2023, the NIHSI will be made available to non-government researchers through the AIHW instance of the ABS' Secure Environment for Analysis of Data.

National Disability Data Asset (NDDA) and Australian National Data Integration Infrastructure (ANDII)

We continue to work closely with the Australian Bureau of Statistics (ABS), Department of Social Services and other Australian Government, and state and territory agencies to establish a new national data integration system for people-centred data. This new system, referred to as the ANDII, is initially being established to support delivery of the National Disability Data Asset (NDDA), but is being designed to support future uses.

The ANDII builds on recent government reforms, including the Data Availability and Transparency Act 2022 (DAT Act) and the Intergovernmental agreement on data sharing between the Australian and state and territory governments. The ANDII will streamline the approach and reduce the time required to build and access integrated datasets.

The ANDII will serve as the national linkage and integration infrastructure, including a national spine, data governance, streamlined data sharing arrangements, and an ICT solution built in the cloud. The ANDII will be cogoverned with the states and territories, and the disability sector. This will facilitate appropriate data use and regular linkage of Australian Government, state and territory data. Following the successful completion of the NDDA pilot in December 2021, the NDDA and ANDII has secured further funding, to 2025-26, with ongoing funding beyond this to be determined.

Governments have made substantial progress on the NDDA and ANDII technical and data governance infrastructure design and build. This includes progressing the ICT build, design of the national data linkage model, design of data products and the development of robust data governance, privacy, and ethics arrangements to ensure data sharing for the ANDII to deliver the NDDA is safe, secure, legal and ethical.

Further progress has also been made on establishing enduring governance arrangements. The NDDA will be co-governed by the Australian Government, states and territories with the disability community. The ANDII will be co-governed by the Australian Government, states and territories.

Other data priorities

Other examples of our work on data priorities include:

- Improving the evidence base relating to domestic, family and sexual violence through development of a prototype specialist data collection, data integration and improved reporting.
- Supporting development of a National Aged Care data strategy, releasing the first iteration of a new Aged Care Data Asset, and publishing the first iteration of a new Aged Care National Minimum Data set.
- Continued enhancement of the National Suicide and Self-harm Monitoring System and expanded mental health data collections, data sharing and reporting and analysis will provide an enhanced evidence base that can be used to help prevent suicide and improve the mental health of Australians.
- Continued provision of timely health system capacity and activity data to inform governments and the enhancement of a national COVID-19 linked data set which aims to address the emerging medium and long-term research and data needs of the COVID-19 pandemic.
- Supporting the Department of Health and Aged Care in the establishment of the Australian Centre for Disease Control.
- Expanding collection of Indigenous-specific primary health care data in response to a review of the national Key Performance Indicators and Online Services Report collections.

- Continuing work to build the evidence base related to the performance of the health system in the context of our role under the National Health Reform Agreement.
- Continuing to explore and progress key aspects of the NPHCDC (under development) through proof-of-concept projects in partnership with key stakeholders.
- Supporting the Department of Health and Aged Care's provision of Urgent Care Clinics through timely supply of data to Primary Health Networks.
- Continued work on initiatives under the National Strategy to Prevent and Respond to Child Sexual Abuse 2021-2030, including establishing a Child Wellbeing Data Asset, finalising a monitoring and evaluation data feasibility assessment study and completing a feasibility study for the development of a national data collection for specialist and community support services for victims and survivors of child sexual abuse.
- Commencing work with all jurisdictions to establish a Public Dental Services National Minimum Data Set, which will build on the arrangements for the current Public Dental Waiting Times National Minimum Data set to support dental reform.
- Monitoring the uptake, quality and performance of the new national lung cancer screening program.
- Continuing work on the Australian Burden of Disease Study to provide key measures of the impact of different diseases, injuries and risk factors on the health of the Australian population, and needed for monitoring targets included in the National Preventative Health Strategy 2021-30.

Stakeholder expectations

Our stakeholders are important to us as groups to whom we are accountable, who fund us and to whom we target our products and provide services. We will build on our collaboration and partnerships with Australian, state and territory government agencies and non-government organisations.

Data needs to be easily accessible and available at the right time to inform discussion and decisions. Integrated data at national, state, territory, and local level supports new insights and allows us, and others, to better understand complex interactions people have with services, for example, client or patient journeys, and population outcomes.

Privacy and trust

We operate in an environment of evolving community and data provider expectations about the protection of personal information and other data from both privacy and confidentiality perspectives. Much of the data we hold is given to us voluntarily by entities that have collected it for another purpose – generally an administrative purpose related to providing (often government-funded) services to Australians.

We protect the privacy of the information we hold in compliance with legislation and under a comprehensive set of data governance arrangements involving designated data custodians, the AIHW Ethics Committee, audit activities, and physical and ICT security. These multiple layers of defence ensure that data are accessed only by authorised personnel for appropriate purposes in a secure environment.

Our capability

Workforce capability

To achieve our purpose, we will continue to ensure our employees have the appropriate balance of core, technical, and leadership skills to undertake their roles. We will:

- use flexible training delivery with an appropriate mix of face-to-face, virtual, and blended learning
- draw on internal expertise and external partnerships to deliver contemporary technical training
- provide training in core leadership and management skills
- provide on-the-job training and mentoring opportunities
- encourage internal and external mobility opportunities
- learn from others through guest speaker presentations
- offer e-learning opportunities through our learning management system.

Our graduate intakes remain a key strategy for building our workforce capability. In addition to our annual graduate intake, we participate in the Australian Public Service (APS) Data Professional Stream Graduate Program to attract candidates who specifically seek an APS career in data.

We have established relationships with organisations to increase opportunities to attract and engage First Nations people, people with a disability and people from diverse backgrounds, including targeted recruitment and internships. Our strategies to attract and retain First Nations people are aligned with the Commonwealth Aboriginal and Torres Strait Islander Workforce Strategy 2020–24, which aims that 5% of the APS workforce are First Nations people by 2024.

We continue to work with organisations such as the Australian Network on Disability to assist us to achieve the goals of the Australian Public Service Disability Employment Strategy 2020–25, which aims to reflect an APS-wide workforce that includes at least 7% of staff with a disability by 2025. Through training programs, our diversity networks, and raising staff awareness, we promote a culture that embraces accessibility and inclusivity.

One of our key focus areas is maintaining a flexible workforce so that we can adjust our staff numbers in line with our variable funding streams. To achieve this, we will continue to engage some non-ongoing APS staff and contractors, and partner with universities for internship and scholarship opportunities.

Information and communications technology capability

The AIHW Technology Strategy 2023–2026 sets an ambitious plan for the institute to ensure that we continue to meet the expectations of our stakeholders and staff, both now and in the future. It provides a strong foundation to advance our ICT services and infrastructure over the next 3 years, ensuring we have the right capabilities to achieve our strategic goals and address the growing requirements for:

- accessing and using complex and secure data sets,
- building resilience to the increasing threat of cyber-attacks
- maintaining sustainable digital platforms and technology solutions.

To deliver the strategy, the AIHW will focus on 4 priority areas:

- sustaining our core ICT services – providing a reliable and secure technology foundation
- introducing a future analytics model – empowering the workforce and supporting evolving business needs

- improving staff and external client engagement – being a trusted partner and providing ICT services that are future proof
- supporting and enabling innovation – using technology to improve business processes, freeing up staff to focus on data analytics

We continue to have a proactive focus on security and ensure our systems are resilient to cyber threats. We will continuously improve our security posture, with a focus on our maturity level against the Essential Eight cyber mitigation strategies and alignment with best practice guidance from the Australian Cyber Security Centre. With the evolving cyber threat environment, we continue to keep cybersecurity at the forefront of ICT decision making and capability.

Risk oversight and management

Over the next 4 years, the board will continue oversight of our risk management framework (RMF), strategic risk profile (SRP) and high-level operational risks. These are reported to the board every 6 months via the Risk, Audit and Finance Committee (RAFC).

As outlined in our RMF, the protection and enhancement of our reputation with our key stakeholders is paramount. We have a very low appetite for behaviours, activities, processes, investments and other decisions that put our reputation as a trusted and relevant institution at risk. However, to enhance relevance with stakeholders we need to occasionally embark on initiatives with new risks that will be managed with effective mitigation strategies to achieve desired outcomes.

Therefore, we have a moderate appetite for accepting some well-managed risks on activities that have a high probability of increasing our reputation. The board sets the risk appetite. The CEO and Executive Committee are expected to manage risk, consistent with the expressed board risk appetite and risk tolerances for various categories of risk. Risk mitigation strategies are reviewed and updated every 6 months.

The 8 strategic risks identified in the SRP are:

- breach of cybersecurity
- externally driven disruption
- major project delivery failure
- growing pains
- preparedness of IT systems to handle large, complex data sets
- data governance and privacy
- key person risk
- loss of reputation with stakeholders

Fraud control

We will minimise the potential for fraud in accordance with our Fraud and Corruption Control Plan 2021–23. Key fraud management controls contained in the plan include appropriate fraud prevention, detection, investigation, reporting and data collection procedures, and processes to meet our specific needs. The plan will be updated in 2023-24.

Internal audit

We will continue to contract out our internal audit function. Each year the internal auditors undertake a program of compliance and performance audits examining controls over financial procedures, ICT systems and data collections.

Cooperation

Our major partners and stakeholders include:

- the Australian Government and through it to the Australian Parliament and the people of Australia
- the Minister for Health and Aged Care as our responsible minister
- Australian Government departments and agencies
- state and territory governments and their departments
- First Nations stakeholders and organisations
- Health, welfare service providers and non-government organisations
- consumers of health, welfare and housing services
- students and the research community
- professional associations
- the Australian community.

Australian Government

We maintain memoranda of understanding or similar agreements with many of our Australian Government stakeholders. In the next 4 years we will continue to work with Australian Government departments and agencies to develop, collect, compile, analyse, manage, report and disseminate health and welfare data and information. These agencies include the:

- Department of Health and Aged Care
- Department of Social Services (DSS)
- Australian Bureau of Statistics (ABS)
- National Mental Health Commission
- Department of Education
- Department of Veterans' Affairs
- Australian Digital Health Agency
- Office of the National Data Commissioner.

In the 2023–24 Health Portfolio Budget Statements (PBS) we have linked programs with the Department of Health and Aged Care, DSS, ABS, Australian Commission on Safety and Quality in Health Care, Independent Hospital Pricing Authority and National Health Funding Body.

We will also continue to actively engage in a range of national committees across health and welfare sectors to ensure we are meeting stakeholder needs and expectations.

State and territory governments

Much of the government services data that we report at a national level are provided by state and territory government departments that fund and deliver those services. Our focus over the next 4 years will be to continue our close working relationships with state and territory government departments that are critical to developing and reporting nationally consistent and comparable health and welfare data.

Along with numerous government entities from all jurisdictions, we are a party to national information agreements that underpin the activities of national information committees. Separate agreements cover health, community services, early childhood education and care, and housing and homelessness. The agreements ensure that effective infrastructure and governance arrangements are in place for the development, supply and use of nationally consistent data for each of these areas.

Non-government organisations

Over the next 4 years we will continue our engagement with non-government organisations by providing briefings on forthcoming releases (including providing embargo access to reports) and partnering on stakeholder engagement and communication activities, where possible.

International cooperation

We will continue our role in information sharing with international organisations, such as the WHO and the OECD. We will maintain informal collaborative arrangements with other international agencies and bodies, such as the Canadian Institute for Health Information and the International Group for Indigenous Health Measurement.

We have an agreement with the Department of Foreign Affairs and Trade to establish the Pacific Health Information Support Hub (PHISH). The agreement enables a dedicated team to provide health information support to the Pacific region, including data governance, metadata development and management, and health classifications advice. We will work closely with Pacific Island Countries, the Pacific Community (SPC), and other stakeholders to conduct a needs assessment and identify priority areas.

In addition, the agreement includes provisions for us to offer a mentoring program to enhance the skills and knowledge of health information staff in the Pacific region. The PHISH proposal aligns with our existing work in the Pacific, such as the Memorandum of Understanding between AIHW and SPC, as well as the review of the Healthy Island Monitoring Framework Indicators and data for the for the WHO.

Closing the Gap

We are committed to the implementation of the National Agreement on Closing the Gap Priority Reforms which are closely aligned with the AIHW's strategic directions.

Priority reform	Description
Priority Reform 1: Formal Partnerships and Shared Decision Making	<p>We provide timely, accurate and authoritative statistical reporting on the health and welfare of First Nations people.</p> <p>As a trusted leader in health and welfare data and analysis, we partner and consult with experts and groups with First Nations leadership and representation. This engagement shapes our work program in many ways, including how we:</p> <ul style="list-style-type: none">• present insights through publicly available reports and data products• share data with trusted stakeholders• provide advice to our stakeholders• work with our partners to design data standards, performance indicators and measures• collect, integrate and analyse data• help build the data capability and expertise of key stakeholders including students and employees of Aboriginal Community Controlled Organisations, researchers and other First Nations organisations.

(continued)

Priority reform	Description
Priority Reform 2: Building the Community-Controlled Sector	<p>As an innovative producer of data sets and analysis, we provide data and advice to First Nations organisations and researchers. These data and advice are used to build the community-controlled sector through informing decision-making, attracting investment and supporting advocacy for change.</p> <p>As a strong strategic partner, we work with First Nations organisations to build data capabilities, improve access to data and develop shared learnings.</p>
Priority Reform 3: Transforming Government Organisations	<p>We are recognised for our organisational excellence.</p> <p>We embrace the diversity of our employees, providing a workplace that is inclusive, respectful, and free of discrimination. We aim to:</p> <ul style="list-style-type: none"> • increase understanding, value and recognition of First Nations cultures, histories, knowledge and rights through cultural learning • demonstrate respect to First Nations people by observing cultural protocols • build respect for First Nations people, cultures, and histories through celebrating significant events. <p>We strive for best practice, continuing endeavours to:</p> <ul style="list-style-type: none"> • Achieve the 5% First Nations employee representation target outlined in the Commonwealth Aboriginal and Torres Strait Islander Workforce Strategy 2020–24. • Procure goods and services from First Nations businesses. • Invest in relationships with First Nations people and organisations, including reciprocity. • Strengthen engagement with First Nations people and organisations to enhance our work program. • Partner with First Nations people and organisations to implement Closing the Gap priority reforms. • Enhance our approach to the governance of data describing First Nations people. • Improve data access for First Nations people and organisations by simplifying processes and increasing transparency. • Engage with other statistical agencies to resolve or explain differences in reporting of the health and welfare of First Nations people. • Present accessible and meaningful insights into the health and welfare of First Nations people and apply a strengths-based approach to reporting.

(continued)

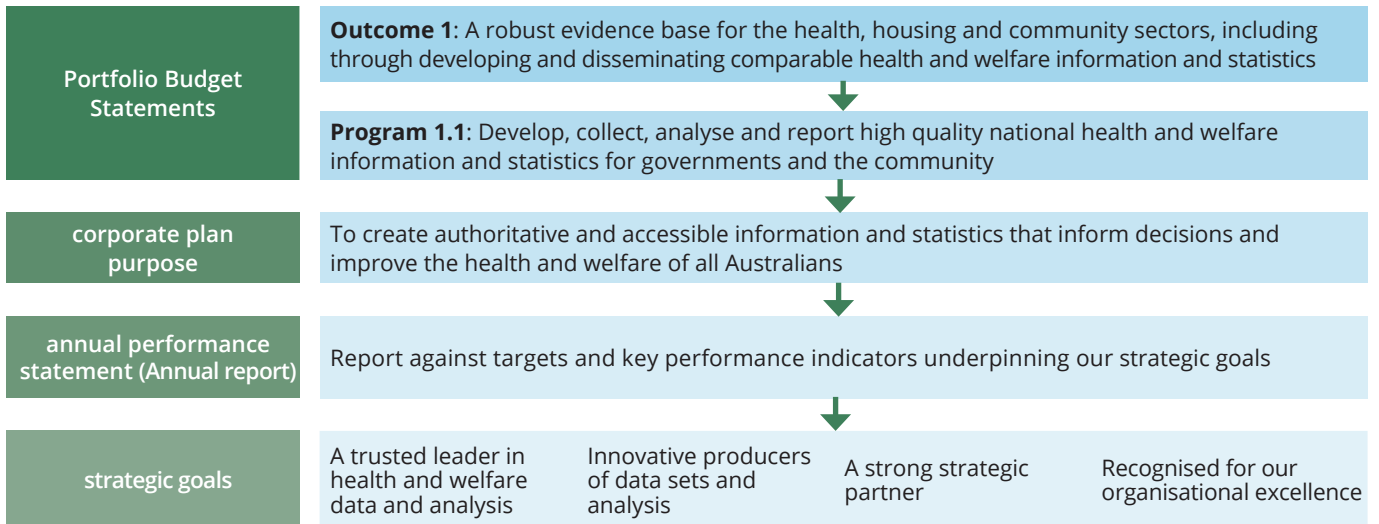
Priority reform	Description
<p>Priority Reform 4: Shared Access to Data and Information at a Regional Level</p>	<p>We inform and shape policy, service delivery and community debate by highlighting key health and welfare priorities and the needs of First Nations people. We:</p> <ul style="list-style-type: none"> • Publish a broad range of insights into the health and welfare of First Nations people through the AIHW website and other websites such as Regional Insights for Indigenous Communities, Aboriginal and Torres Strait Islander Health Performance Framework and the Indigenous Mental Health and Suicide Prevention Clearinghouse. • Contribute to the broader data and information landscape such as through the Closing the Gap information repository, Report on Government Services and National Agreement Performance Reporting Dashboard. • Make customised data available on request. • Liaise with many First Nations organisations and researchers to provide data-related advice and keep building data capability and expertise. <p>To support this work, we engage with First Nations people and organisations to continually improve the quality of our data holdings and enhance the accessibility, cultural relevance and appropriateness of our products and services for First Nations audiences.</p>

4 Our performance

Our performance reporting framework

The corporate plan is a key strategic planning document. It outlines our planned activities and performance measures which we will monitor progress against and report outcomes in our annual report. Figure 4.1 provides an overview of our performance planning and reporting framework.

Figure 4.1: Relationships between Portfolio Budget Statements, corporate plan and annual performance statements



Activities

As outlined in the *2023–24 Health Portfolio Budget Statements*, we will publish extensive, policy-relevant health and welfare information to inform various stakeholders, including consumers, healthcare professionals, housing and community service providers, researchers, and government entities at all levels. By providing precise statistical data, robust data analysis, and comprehensive information development, we contribute to a deeper understanding of health and welfare issues. Consequently, this evidence-based approach serves as a basis for policy changes and improved service delivery, ultimately assisting the enhancement the overall health and welfare of all Australians.

Delivery

We will:

- Develop, maintain and promote statistical information standards for the health, community services and housing assistance sectors, and publish comprehensive biennial reports on Australia's health and Australia's welfare.
- Release a range of health and welfare data and information products relevant to key policy areas.
- Maximise use of existing data to provide new insights (for example, through modelling).
- Improve availability and access to data at regional levels.
- Enhance data resources with the addition of new health and welfare data assets to fill data gaps in the health and welfare sectors.
- Modernise the presentation of national health and welfare data and analyses to meet the needs of diverse audiences.

Performance criteria

Key activities	2023-24	2024-25	2025-26	2026-27
Publish health and welfare data products incorporating AIHW expert analysis on the AIHW's website for public access.	≥210	≥210	≥210	≥210
Publish annual products incorporating expert analysis on the AIHW's website within 6 months of receipt of final data.	≥85%	≥85%	≥85%	≥85%
Enhance data resources with 4 new or significantly enhanced data collections or linkages to fill in identified information gaps.	✓	✓	✓	✓
Finalise and present <i>Australia's welfare 2023</i> to the Minister for Health and Aged Care and publish it on the AIHW's website by December 2023. Undertake planning and preparation of Australia's health 2024 for presentation to the Minister for Health and Aged Care in June 2024.	✓	*	**	***
Increase the number of annual reports produced on a quarterly basis by one.	✓	✓	✓	✓
Collaborate with:				
• the Australian Bureau of Statistics, the Department of Social Services and participating jurisdictions to co-design, test, and establish new national data integration infrastructure for the National Disability Data Asset	✓	✓	✓	✓
• stakeholders to implement continuous improvement of the National Suicide and Self-Harm Monitoring project and publish updated data quarterly.	✓	✓	✓	✓
Data linkage projects completed in accordance with agreed requirements.	✓	✓	✓	✓
Enhance the AIHW website.	✓	✓	✓	✓
Improve access to national linked health data.	✓	✓	✓	✓
Improve the visibility of our strategic approaches to data.	✓	✓	✓	✓
Improve the breadth of our partnerships.	✓	✓	✓	✓
Demonstrate the impact of our work on decision making.	✓	✓	✓	✓
Support staff by facilitating flexible work arrangements.	✓	✓	✓	✓
Support staff and manage growth by implementing a Learning and Development Strategy focused on capability development.	✓	✓	✓	✓
Facilitate greater diversity in AIHW staff.	✓	✓	✓	✓
Provide accessible, scalable and available ICT services to staff.	✓	✓	✓	✓
Ensure ICT and Data environments are resilient to cyber threats.	✓	✓	✓	✓
Enable access to contemporary analytics tools and applications to facilitate AIHW business delivery.	✓	✓	✓	✓

■ Performance criteria included in the *2023-24 Health Portfolio Budget Statements*.

* Undertake planning and preparation of Australia's welfare 2025 for presenting to the Minister for Health in 2025-26.

** Finalise Australia's welfare 2025 and Australia's health 2026 reports and present to the Minister for Health and Aged Care.

*** Undertake planning and preparation of Australia's welfare 2027 for presenting to the Minister for Health in 2027-28.

Performance monitoring

Over the next 4 years we will continue to monitor progress against our performance by measuring achievements against our purpose and strategic goals using measures outlined in the 2023–24 Health PBS and our corporate plan as part of our Performance monitoring framework. We will provide regular performance reports to senior executives, the RAFC and the board.

Appendixes

Abbreviations and acronyms

AIHW	Australian Institute of Health and Welfare
AIHW Act	<i>Australian Institute of Health and Welfare Act 1987</i>
APS	Australian Public Service
ANDII	Australian National Data Integration Infrastructure
CEO	Chief Executive Officer
I CARE	impartial, committed to service, accountable, respectful, ethical
ICT	information and communications technology
NDDA	National Disability Data Asset
NHDH	National Health Data Hub
NIHSI	National Integrated Health Services Information
OECD	Organisation for Economic Co-operation and Development
PBS	Portfolio Budget Statements
PGPA Act	<i>Public Governance, Performance and Accountability Act 2013</i>
RAFC	Risk, Audit and Finance Committee
RMF	Risk Management Framework
SRP	Strategic Risk Profile
WHO	World Health Organization

References

Department of Finance 2023. Corporate plans for Commonwealth entities: Resource management guide No. 132. Canberra: Department of Finance.

Department of Health Portfolio Budget Statements 2023–24. Health Portfolio. Canberra: Department of Health.


Australian Institute of Health and Welfare


Corporate Plan 2023–24



This Corporate plan is a key strategic planning document for the Australian Institute of Health and Welfare (AIHW). It sets out the key strategic priorities and the activities we will pursue to achieve our purpose.


Our Corporate plan assists the Australian Government, the Australian Parliament and the people of Australia to assess how we are performing, how we use the public resources entrusted to us and how we cooperate with others to achieve wider objectives. It has been developed in accordance with the requirements of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act) and the Public Governance, Performance and Accountability Rule 2014.



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Stronger evidence,
better decisions,
improved health and welfare