

# Feedback to the Australian Core Data for Interoperability (AUCDI) Release 1.



The first release of the Australian Core Data for Interoperability was open for community consultation in February 2024. Cancer Council reviewed the proposed Release and in response, highlighted opportunities for the Australian Core Data for Interoperability initiative and the interaction with cancer-related data, including the National Cancer Data Framework ([action 4.2.1 of the Australian Cancer Plan](#)). Feedback provided within the submission drew on Cancer Council's [Developing a Data Strategy: A report for discussion](#).

The Australian Core Data for Interoperability aims to standardise the capture, structure, usage, and exchange of health data to counteract the current fragmentation of Australia's health data systems and will be the foundation from which all health-related datasets build on. Cancer Council supports this aim as improving the utilisation of quality data will inform better healthcare delivered to Australians. Australia currently has no standardised or mandatory performance measurement and reporting system for health services. Therefore, information needed to benchmark performance across the health system and to systematically identify opportunities for improvement is currently missing.

Cancer Council provided several suggestions against the proposed Release 1 data groups to extend their relevance for capturing data on the prevention and early detection of cancer, and cancer care, including:

- Broader capture of sociodemographic data elements to understand experiences of different people and socioeconomic factors on cancer outcomes.
- Ensure, at a minimum, the following key elements become standard collection items or can be calculated based on available data through the Australian Core Data for Interoperability. These data include cancer diagnosis (type), treatment received, stage at diagnosis, incidence, mortality, relative survival, cause specific survival, post treatment mortality, comorbidities, other individual risk factors and self-report health data.
- Broadening the proposed Key Biomarkers data group to Laboratory Test Results to include data items to capture genetic, genomic and biomarker information important to predicting cancer risk, identifying cancer early, guiding treatment and care options, and in the monitoring of cancer and treatment progress.
- Consider how cancer screening data is captured (potentially within the Procedure Completed data element group) within the Release.
- Consider implications of the current data element capturing a single diagnosis/problem and how the dataset can create links to additional diagnoses/problems made related to the primary diagnosis to provide a complete picture of cancer burden. Broadening to create an opportunity within the data collection to recognise where one diagnosis has triggered another diagnosis or related problem would enable a greater understanding of the impact of cancer on the person.
- Include opportunities within the Medication statement data group to identify medications used in combination.

- Review the placement of information related to supportive care interventions such as exercise and smoking cessation, if they are not to be captured within the Procedure Completed data group.
- Expand data element groups to include the capture of Patient Reported Outcome Measures and Patient Reported Experience Measures.

More information about the Australian Core Data for Interoperability Release 1 and to access the draft community consultation paper is available here: [Australian Core Data for Interoperability \(AUCDI\) – Sparked \(csiro.au\)](#)