

**Data Stewardship Committee
Annual Report, 2012/2013**

Requirement to Report

This report is submitted in fulfillment of the requirements of Section 16(1) of the *e-Health (Personal Health Information Access and Protection of Privacy) Act*:

- 16(1) At least once each year, the data stewardship committee must report to the minister respecting
- (a) The activities of the data stewardship committee,
 - (b) Information-sharing agreements entered into by an administrator under this Division, and
 - (c) Any matter the minister requires.

2012/2013 Data Stewardship Committee Activities

a. Membership and Meetings

Seven members were reappointed to the Committee during this interval.

The Committee met nine times during the reporting period.

No Information-sharing agreements involving Health Information Banks were entered into during the reporting period.

b. PharmaNet and Data Stewardship Committee Amalgamation

The *Pharmaceutical Services Act* came into effect May 31, 2012, at which time the Committee's role expanded to include PharmaNet research data and requests for personally identifiable research data. During the reporting period, the Committee has approved a total of 11 new project requests for PharmaNet data and 39 amendments for past projects.

c. Collaboration with the Office of the Information and Privacy Commissioner

A Request to Contact process framework was established in collaboration with the Committee, the Ministry of Health, and the Office of the Information and Privacy Commissioner perspectives.

One "Request to Contact" application was considered during the reporting period by the Committee, and successfully recommended for approval by the Information and Privacy Commissioner as well as two amendments for past requests.

d. Advisory Work – Policy Recommendations

In the previous reporting period, the Committee welcomed the Ministry's of Health's request for two separate policy recommendations. Work for one of the two policy recommendation has been finalized and a draft policy has been submitted to the Ministry of Health.

Next Steps

As I mentioned during my comments at the *Data Effect Conference* in June 2012, I would like the Ministry of Health and the Data Stewardship Committee to work towards implementing a rapid response process for health data requests.

For non-patient level data requests (also known as non-record level data requests) which can be used to formulate a more fulsome investigation of a particular health planning issue, I suggest approvals/rejections or clarifications be provided to requestors within two weeks. For patient-level requests, a timeline of no more than 30 days should be the goal.

This is likely to require redirected Ministry resources to facilitate these improvements in data access. The benefits of this are that we can begin to formulate health system improvements in BC much more quickly.

For patient level data requests, the Data Stewardship Committee, with the support of the Ministry of Health, has worked towards improving the approval times for academic requests to PharmaNet data. As it can be seen in Table 1 below, the median number of days for approval has been reduced from 316 days in 2010 to 45 days in 2013, while the maximum number of days for approval has been reduced from 746 days in 2010 to 98 days in 2013.

Table 1. Data Stewardship Committee Data Access Requests – New Projects					
YEAR	# Received	# Approved	Min (days)	Max (days)	Median (days)
2010	20	20	31	746	316
2011	8	8	52	414	205
2012	7	6	36	125	56
2013 (August 2013)	8	3	38	98	45 ¹

[1] The approval year was not necessarily the same as the submission year.

The data holdings in BC are immense and an important resource for improving the health of British Columbians. Harnessing these data and the academic expertise that exists among requestors will contribute significantly to improving and preserving our health system.

Sincerely,



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