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Message from the Chairman

It is my privilege once again to report on the progress of the Population Health Research Network (PHRN) during a year that has provided many opportunities in the expansion and operation of Australia’s national data linkage network.

From a sustainability point of view, the most significant event for the PHRN during 2014-15 was the announcement by the Australian Government that it will allocate $150 million to NCRIS facilities in 2015-16 and in 2016-17. I am pleased to report that on 14 May 2015 the Hon Christopher Pyne, MP announced that the PHRN has been allocated $4.269m for 2015-16. These funds will be directed towards the four key areas of the PHRN: Program Coordination, National Linkage Services, Secure Data Access and Regional Linkage Services.

Following the recommendations of an independent review of the PHRN in 2013-14 our governance structure has transitioned to an independent Board with support and advice provided through a representative Participant Council. I am very pleased to have been appointed as Chairman of the Board that consists of five members of eminent status, bringing together a range of skills and experience that will provide strong strategic oversight of the next phase of PHRN’s development.

The PHRN Board’s top priority is the development of a strategic plan. This will be done in the context of national and regional priorities for science and health over the next 10 years. The Board has commenced the strategic planning process and I look forward to having the plan in place by early 2016.

I would like to thank my fellow Board members for their enthusiasm for their new roles. As always Merran Smith and her team in the Program Office have worked tirelessly to progress the objectives of the PHRN.
Report from
the Chief Executive

2014-15 was a busy and productive year for the PHRN. Our dedicated teams located around the country worked hard to further expand and operate the national data linkage infrastructure, resulting in 133 projects receiving their approved research data.

As our network expands, so too does the community of researchers, government agencies, custodians and other groups involved in the national data linkage infrastructure.

A key focus in 2014-15 has been engagement with our stakeholders to promote the progress and value of the PHRN data linkage infrastructure. During the year we have participated in a number of workshops and conferences including the successful NCRIS Showcase at the Australian Parliament House in Canberra in September 2014. We have also met with politicians and a number of senior officials from Australian Government departments including the NHMRC, the Australian Institute of Family Studies and the WA Department of Premier and Cabinet.

The PHRN has also advocated for better access to linked data by participating in a range of public reviews and inquiries throughout the year including the Senate Select Committee inquiry on Health [October 2014] and the Department of Health’s inquiry into electronic health records and healthcare identifiers [June 2015].

As the PHRN enters its seventh year of existence, the network is strongly positioned to support the national research effort and underpin the next generation of scientific discoveries in health and related fields. I believe the PHRN’s success over this year has been a testament to hard work, commitment and collaboration, and I thank all involved for their contribution.

Dr Merran Smith
PHRN Chief Executive
The principal purpose of the PHRN is to build and operate a nationwide data linkage infrastructure capable of securely and safely linking and integrating data collections from a wide range of sources to enable research.

The data linkage infrastructure developed and operated by the PHRN is crucial to population-based research that is supporting the ongoing improvement of health and health related outcomes across Australia.

The ability of researchers to access linked health and related data within and between every Australian jurisdiction, to monitor national trends and to evaluate the effectiveness of health policy for government and key decision makers, will ensure that health policy, funding and campaigns are better targeted and more effective.

Vision
A valued national resource generated from linkage of population data from a broad range of areas such as health, education and community services and used for research to inform policy, planning and management to improve the health and wellbeing of all Australians.

Mission
To build a national data linkage infrastructure by working collaboratively with key stakeholders including data custodians, researchers and the community. This will support research of national relevance which results in improved policy making and service delivery and demonstrates global best practice in maximising the benefits to the Australian community whilst preserving individual privacy.

NEW GOVERNANCE STRUCTURE
Establishment of the PHRN Board and PHRN Participant Council

$6.877m
Secured cash and in-kind contributions for 2015-16

111
Peer-reviewed manuscripts involving linked data provided through the PHRN infrastructure
PHRN at a glance cont.

PHRN Facilities

National Facilities

The PHRN has established or funded two national data linkage units (The Centre for Data Linkage, Curtin University and Australian Institute of Health and Welfare).

The following additional national infrastructure has been built:

- The Secure Unified Research Environment (SURE) – a remote-access computing environment that allows researchers to access and analyse linked data for approved studies.
- The Secure Unified File Exchange (SUFEX) – a file transfer service for the PHRN and its stakeholders that allows secure, high volume, large-scale transmission of files between researchers and network participants.
- The national Online Application System – a system to enable researchers to submit data applications to all jurisdictions online.

Regional Facilities

The PHRN has established or funded additional infrastructure for the six State/Territory data linkage units (Centre for Health Record Linkage NSW/ACT; Queensland Research Linkage Group; SA NT DataLink; Tasmanian Data Linkage Unit; Victorian Data Linkages and WA Data Linkage Branch).

$4.269m

NCRIS secured funding for 2015-16

Launch of the PHRN’s Online Application System

97

Researchers using the Secure Unified Research Environment
PHRN Project participants

Australian Institute of Health and Welfare

The last year has seen the AIHW move to a new building and experience some organisation restructure. Ms Kerry Flanagan PSM joined the AIHW as Acting Director following the departure of Mr David Kalisch to the position of Australian Statistician in December 2014.

As part of the AIHW’s organisational changes, the data linkage team moved to a new group headed up by Warren Richter. The AIHW’s Data Integration Services Centre (DISC) has continued to provide linkage and support services to researchers across Australia. Thirty one projects were approved in 2014-15 and data was provided to 38 projects of varying sizes and complexity.

Recent achievements for AIHW include the completion of cross-jurisdictional linkage for the PHRN Proof of Concept Collaboration investigating Australia’s childhood immunisation regimen. This project and a number of other projects requiring integration of Commonwealth data have helped establish processes for Commonwealth data access and project approval. There are still some challenges around accessing the Commonwealth Department of Health data but the Institute are introducing standard processes to help support data integration requests.

The AIHW relocated to new premises in late June 2014 located at 1 Thynne St, Bruce.

The Centre for Data Linkage, Curtin University

The secure file transfer system operated by CDL known as ‘SUFEX’ continues to grow with more people using the system. Back in March 2014 there were 53 registered users of the system, and we are delighted that there are now 153 registered users.

In 2014-15 there were 717 files transferred using SUFEX. A user survey was undertaken on the secure file transfer service (SUFEX) managed by the CDL. The survey responses were very encouraging and the CDL are currently working on the suggestions highlighted by respondents to help improve SUFEX.

The National Linkage System (NLS) has been rebadged and is now known as LinXmart and has been updated to allow either Oracle or SQL Server as the enterprise database. Versions of LinXmart have been made available for the SAIL appliance in Wales, and to both AIHW and the Queensland government for evaluation. The CDL have also been developing additional functionality around grouping strategies and are exploring a number of research opportunities to improve current matching efficiency and extend linkage capabilities. An interesting development has seen the evaluation of privacy preserving linkage (PPL) methods. As part of the PPL work, the team have developed prototypes and are currently looking at tools and new methodologies.

The CDL has also completed linkages for two PHRN Proof of Concept Collaborations and is working with researchers on a number of national/cross jurisdictional linkage projects.
PHRN Project participants cont.

Sax Institute


The new facility ensures that SURE will have the capacity to meet the increasing demands from the researcher community, particularly the large number of data linkage projects involving Commonwealth data that are in the pipeline. Stage 3 of the project will look at adapting SURE and exploring the possibility of plugging in private clouds within the existing infrastructure.

There are currently 40 projects hosted on SURE with around 200 researchers working on them.

The SURE team have also been working with CSIRO on guidelines for researchers for statistical disclosure control of results. This is following the release of a PHRN-commissioned report in 2013-14 that sought to examine the risk of statistical disclosure in the publication of outputs associated with data integration and document mitigation strategies to address any proposed risks.

Program Office, Telethon Kids Institute

The Program Office has continued to undertake the central role in leading and coordinating the development and operation of the PHRN infrastructure. It has been responsible for executive support for the PHRN Board, PHRN Participant Council and related groups.

Other activities undertaken by the Program Office in 2014-15 included coordination of governance and management encompassing contract and financial management, policy development and implementation, some researcher services and training. A particular focus was the submission of the Final Report for the original PHRN NCRIS investment, as well as the development of a Deed of Variation and associated Annual Business Plan for the disbursement of the newly awarded NCRIS 2015 funding.

The Program Office has also developed a detailed Communications Plan for the PHRN which has been provided to and approved by the PHRN Board. The PHRN Chief Executive, Board Chairman and Program Office have been implementing the Plan during 2014-15, holding meetings with Ministers, Government Departments, researchers, funders and private industry, as well as visiting the PHRN Participants around the country. The PHRN website continues to be updated and is a key communication tool for a number of stakeholders, in particular researchers and the community where a series of case studies and a catalogue of research outputs have been generated.
PHRN Project participants cont.

The Centre of Health Record Linkage (CHeReL), NSW Ministry of Health

In early 2015 the CHeReL added the 100 millionth record to its Master Linkage key (MLK) – an amazing achievement! Since this event, a further 6.7 million ambulance transport records have been linked to the MLK, demonstrating the ever-expanding capacity of the CHeReL to support the use of NSW and ACT linked data in research and policy analysis. Initially this will support three research projects which are all funded through external competitive research grants.

In response to the results from a user satisfaction survey, the CHeReL are investigating processes which will reduce the lag time in customer data feeds and the use of golden records in MLK to speed up processing. The team are also looking at the best ways to reduce the clerical review rate.

Future plans include a pilot of a real time linkage process, improved processes for data transfers from custodians and ongoing system optimisation to ensure that linkage processes continue to handle high volume linkages within current timeframes. Key outputs for 2014-15 included 43 new project approvals and 31 projects where all data has been provided.

Staff members of the CHeReL continued their involvement in the running of the ‘Introductory Analysis of Linked Data’ workshops held at the University of Sydney on two occasions: 17-21 November 2014 and 22-26 June 2015.

Queensland Research Linkage Group, Queensland Health

The linkage team in the Queensland node commenced linkage of core health data collections in near-real time in October 2014. This now means that linked data are as up to date as possible.

Other developments in Queensland include finalising linkage of all core data back to 2007-08 and development of an automated quality checking process. Profiling of Emergency Department data is currently underway in preparation for adding it to the Master Linkage File. The Master Linkage File now contains around 20 million records with a further 9.3 million records added in 2014-15 and the addition of four new collections in 2014-15.

The Queensland Department of Health held a Data Linkage Symposium on 25 November 2014 to share and showcase some of the health-related data linkage work being conducted in Queensland. The event was a great success with over 200 people attending in person and 37 sites video-conferencing in.

The demand for linkage services in Queensland is increasing with more than one half of requests coming from within the Queensland Department of Health to inform planning, managing, monitoring and evaluating health services. In recognition of the value of linked data to inform departmental activities, data linkage positions have now been converted to permanent positions within the Department.
SA NT Datalink, University of South Australia

SA NT Datalink’s linkage services continue to grow. The SA Department of Premier and Cabinet has requested a researchable data repository to support Government and university research in South Australia. Legislation changes are also being put in place to allow designated organisations to receive data on a regular basis.

SA NT DataLink has continued to maintain and expand the datasets within the master linkage files for South Australia and Northern Territory. Datasets currently under negotiation or awaiting first-time linkage in SA and NT include: SA Motor Vehicle Licensing and Road Crash data, SA Motor Accident Commission data, SA Ambulance Service data, SA Mental Health data, SA Private Hospital and Pathology SA data, SafeWork SA (WorkCover), codified Cause of Death, and the SA and NT Coroners’ data, NT Department of Health ‘Emergency Department’, NT Department of Health ‘Primary Care Information System’ (PCIS) and NT Immunisation Register.

As well as the work SA NT Datalink undertakes for the Department of Health, they also support research at South Australian Health Medical Research Institute (SAHMRI) and the Cancer Council. A number of new members of staff are supporting SA NT Datalink services, including data quality.

SA NT DataLink ran a series of weekly lunchtime Data Linkage Workshops at Menzies School of Health Research in Darwin in August 2014. SA NT DataLink also held two Data Linkage Conversation events in Darwin on 8 and 9 September 2014. These events were well attended by researchers, data custodians and other key stakeholders from government departments across the NT. On 8 May 2015, a Researcher Conversation event was held in Adelaide, where Professor Andrew Morris, Scottish Government Chief Scientist, gave a presentation on ‘Big Data for Improved Health Outcomes’.

Tasmanian Data Linkage Unit

With the most recent dataset added to the TDLU’s Master Linkage Map (MLM), the total number of records linked has topped 4 million with over 1.3 million unique keys now held in the Map. Public hospital admitted patient episodes and emergency department presentations comprise almost 680,000 of the total number of records linked. The TDLU is currently adding Tasmania birth registrations to its Map, covering the period 2000-2014 with further data held for this collection dating back to 1970 planned for processing later in 2015. In excess of 84,000 public school census records were also recently linked for a specific project, bringing to 10 the number of individual datasets currently contained in the Map.

With the addition of multiple datasets within a relatively short period of time, significant resources has been allocated to functions associated with clerical review and quality assurance ensuring that the quality of the TDLU’s MLM is very high. In support of these functions, the TDLU captures, records and analyses a comprehensive array of data processing and quality metrics. The metrics are used to assist in the production of quality statements to data custodians and for resource allocation and planning.
Victorian Data Linkages, Victorian Department of Health

The VDL has completed data linkages for the Victorian Government Common Client Data Linkage Project. With over 23 different datasets and over 120 million records being linked, the project aims to inform government policy development, performance and evaluation, operations and service delivery.

It will also attempt to provide ‘proof of concept’ about the benefits of linking data across multiple Victorian Government agencies and explore future options for a whole of government data linkage capability.

The Better Patient Data project which aims to collect patient name and address in the department has finalised the initial retrospective Patient Master Index (PMI) data collection and set up a structured platform for the prospective PMI data as a routine departmental collection in 2015-16.

The Victorian Linkage Map currently holds 14 datasets, with a number of additional datasets under negotiation between VDL and the data custodians. VDL has purchased SAS Data Management Standard Studio, which is the data management and data linkage software that forms an integrated data linkage platform found to be the most compatible with the DHHS IT infrastructure.

WA Data Linkage Branch, WA Department of Health

The development and implementation of the Custodian Administered Research Extract Server (CARES) system has been a great success and a substantial addition to the services offered by the WA Data Linkage Branch. The team have published two papers on this work recently.

There are currently 56 linkage projects in the pipeline at the WA Data Linkage Branch, all at varying stages of completion. In addition the team have 11 infrastructure linkage projects, the largest involving WA ambulance data with over 2 million records. Negotiations are currently underway for new datasets, including WA Police. The WADLB are also looking at the possibility of historical records for some datasets.

The WADLB hardware has recently been updated through a Lotterywest infrastructure project. The team are currently working to improve the geocoding systems and are ready to implement the new linkage system.

Diana Rosman, Program Manager of the WADLB has retired. For over 15 years, Diana led and managed the Branch and championed data linkage activities at a national and international level. Diana was a member of the PHRN Management Council, the PHRN Access Committee and the PHRN Data Access Working Group, as well as being the Chair of the Proof of Concept Reference Group.
Collaborations and partnerships

The PHRN has undertaken a series of collaborations with researchers during the development of its national data linkage infrastructure. The Proof of Concept (PoC) Collaborations are testing the infrastructure and provide critical evidence of the ability of the PHRN to support research of national importance.

The Collaborations were selected through a competitive process overseen by a dedicated PoC Reference Group assisted by a PoC Coordinator. The Collaborations were assessed on their ability to demonstrate the capability of national data linkage involving the PHRN-funded infrastructure (technical and logistical aims) as well as the value of linking national data to support research of national importance (epidemiological aims). Results from the Collaborations are being used to inform the development of the infrastructure, promote the PHRN and support the case for future investment.

A snapshot of the PHRN PoC Collaborations is provided below.

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**PoC Collaboration**

In-hospital and post-discharge mortality: learning about quality of care using data linkages from Australian states

**Chief Investigator**

Ms Diana Rosman, WA Health

**Data collections involved**

Inpatient separations and Register of Births, Deaths and Marriages (RBDM) death data from New South Wales (NSW), Western Australia (WA), Queensland (QLD) and South Australia (SA)

**Linkage teams involved**

CHeReL (NSW linkage); WADLB (WA Linkage); SA NT Datalink (SA linkage); QLD RLG (QLD linkage); CDL (national linkage)

**Current Status**

The Proof of Concept #1 has now been completed (Oct 2014). Congratulations to Dr Katrina Spilsbury, Di Rosman and Dr Janine Alan. This is a great achievement – the first ever cross-jurisdictional person-linked compilation of hospital service data and death registry data from four Australian states. Dr Katrina Spilsbury gave a presentation about the Collaboration to the PHRN Board in June 2015.

The first publication of the study focusing on the epidemiological aims of the Collaboration appeared in the Medical Journal of Australia:

### Collaborations and partnerships cont.

**PoC Collaboration**
Burden and cost of the injury-attributable health care use and mortality in Australia

<table>
<thead>
<tr>
<th><strong>Chief Investigator</strong></th>
<th>Dr Rebecca Mitchell, Macquarie University (formerly UNSW)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Data collections involved</strong></td>
<td>Inpatient separations, RBDM death data, Emergency Department data and electoral roll data from NSW and SA (for cross-jurisdictional linkage) plus QLD (for state-based linkage only)</td>
</tr>
<tr>
<td><strong>Linkage teams involved</strong></td>
<td>CHeReL (NSW linkage); SA NT Datalink (SA linkage); QLD RLG (QLD linkage); CDL (national linkage)</td>
</tr>
<tr>
<td><strong>Current Status</strong></td>
<td>In the second quarter of 2014-15, mortality, morbidity and Emergency Department data from both SA and NSW were successful linked by the CDL. The Chief Investigator received linked event data from SA and NSW. In the process of data cleaning, the research team identified an anomaly with the number of deaths in the SA control group. SANT DataLink worked with the SA Electoral Commission to negotiate resupply of electoral data for SA controls. This will in turn result in a resupply of data to the CDL for national linkage, identification of national cases and controls, resupply of national linkage keys to state-based custodians and a re-extraction of content data for supply to the CI. Based on these requirements, the deadlines for this PoC Collaboration will be extended in order for data analysis to be conducted and a final report to be prepared. The second publication from the study focusing on the application and approval processes appeared in the Australian and New Zealand Journal of Public Health: Rebecca J. Mitchell, Cate M. Cameron, Rod J. McClure and Ann M. Williamson. Data linkage capabilities in Australia: practical issues identified by a Population Health Research Network ‘Proof of Concept project’ <em>Aust N Z J Public Health</em>. 39:4, August 2015, 319–325.</td>
</tr>
</tbody>
</table>
Collaborations and partnerships cont.

**PoC Collaboration**
Linkage of the Australian Childhood Immunisation Register (ACIR) and state-based registers to evaluate and inform Australia’s immunisation program

**Chief Investigator**
Dr Heather Gidding, UNSW

**Data collections involved**
Perinatal data, RBDM births data, hospital admissions data, ED data, notifiable infectious diseases data from NSW and WA, ACIR data and the National Death Index (NDI)

**Linkage teams involved**
CHeReL (NSW linkage); WADLB (WA linkage); AIHW (national linkage as a Commonwealth Integrating Authority)

**Current Status**
The ratification of the Commonwealth Public Interest Certificate (PIC) which enables inclusion of Commonwealth ACIR and NDI data for linkage was a major milestone for the Collaboration. A strong collaboration evolved between AIHW, the Department of Human Services and the Department of Health to achieve this, with Tenniel Guiver from the AIHW providing feedback to the research team about progress. As a result, the ACIR and state birth data was linked in January 2015 following the completion of state-based linkage in September 2014.

The research team was given access to the cross-jurisdictional linked data in March 2015 through the Sax Institute’s SURE facility. The Collaboration has now involved the linkage of a 17 year birth cohort (over 2 million children) to ACIR and health outcome data. The research team is undertaking data analysis and is also preparing two manuscripts to submit to peer-reviewed journals.

Dr Jeremy McAnulty, NSW Health, Director of Health Protection and Dr Paul Armstrong, WA Health, Director, Communicable Disease Control launched the Linkage of the ACIR data to state-based health datasets to evaluate and inform Australia’s immunisation program at the Communicable Disease Control Conference in Brisbane on 2 June 2015.

The new date for the submission of the Final Report for this Collaboration is 30 September 2015.
In the Spotlight

PHRN Technical Forum

The 4th PHRN Technical Forum was hosted by Katie Irvine and staff from CHeReL and organised by the CDL team. The event took place on 29-30 April 2015 at Mary MacKillop Place in Sydney with over 30 attendees from all PHRN nodes as well as representatives from the Australian Institute of Family Studies and Statistics New Zealand. The attendees represented a cross-section of technical data linkers, client services officers, unit managers and IT consultants.

Each PHRN Project Participant provided a short summary on achievements over the last year, and highlighted future challenges. In addition, there were sessions exploring Linkage Quality, Benchmarking, Metadata, Family Connections and Graph Theory, all of which generated much discussion. The presentations and discussions allowed participants to discuss common issues and provided a fantastic opportunity for networking and collaboration with a number of follow up meetings arranged to discuss these issues and solutions further.

Given the distributed nature of the PHRN, the Technical Forum is instrumental in bringing together the wealth of knowledge and experience across the network, resulting in a very successful and informative event.

PHRN’s National Online Application System

The PHRN has developed an Online Application System to improve the efficiency of the application process for cross-jurisdictional projects. The unified form reduces the number of application forms required and enables all data linkage units involved in each cross-jurisdictional project to view all the documents related to the project in one place improving transparency and collaboration.

The Online Application System has been endorsed by all PHRN data linkage units as the agreed application process for cross-jurisdictional projects and some nodes are considering adopting the system for project management within their jurisdiction. The system allows researchers to:

• Submit their applications online;
• Use the same form for requests for quotes, expression of interest and formal applications;
• Use the one form to obtain approval from multiple jurisdictions;
• Submit their application to multiple jurisdictions simultaneously;
• Track the progress of their application for data;
• View approvals as they come in from data custodians and data linkage units;
• Share the application with multiple researchers for viewing and comments; and
• Manage all relevant documents in a central point.

The Online Application System was launched in February 2015. Researchers can access the PHRN Online Application System from the PHRN website.
NCRIS Showcase

On 30 September 2014, the NCRIS Showcase event was held in the Great Hall of Parliament House in Canberra. The showcase brought an exciting interactive display of what some of Australia’s best research infrastructure does to support research in fields as diverse as advanced manufacturing, microscopy, geology, astronomy and ocean observation.

As one of the 27 NCRIS Capabilities, the PHRN had a stand at the Showcase manned by Management Council Chairman, Brendon Kearney, PHRN Chief Executive Merran Smith and Dr Felicity Flack from the Program Office. The stand featured a number of interactive activities and a digital presentation explaining how data linkage works and its numerous applications in health and related research. A short brochure, 'Better Data Better Health', which showcases the PHRN and includes case studies highlighting the benefits from research using linked data, was produced for the event.

The Showcase was attended by Parliamentarians and their staffers, Government Department staff, representatives of other NCRIS capabilities and members of the general community. It provided a valuable opportunity to promote the value and success of the PHRN infrastructure to date.
Governance

In response to recommendations from an independent review of the PHRN undertaken in 2013-14, a new governance framework for the PHRN was implemented. An independent Board was established. The main roles of the Board are to:

- Develop and implement a strategic plan for the PHRN.
- Monitor compliance with the requirements of UWA’s agreements with the Department of Education and UWA’s agreements with PHRN Project Participants.
- Provide oversight of financial management including annual budgets and business plans, and allocation of funding in line with the strategic direction of the PHRN.

Board Membership

The Board is supported by the Participant Council which provides advice on strategy, policy, funding priorities, stakeholder engagement, performance and accountability.

Ms Lindley Edwards
Managing Director, AFG Venture Group

Ms Elizabeth Foley
Chief Executive Officer and Managing Director, Research Australia

Dr Diane Watson

Ms Stephanie Miller
Chief Executive Officer, Survivors of Torture and Trauma Assistance and Rehabilitation Service

Professor Robyn Owens
Deputy Vice Chancellor (Research) UWA

For more information about PHRN governance see http://www.phrn.org.au/about-us/governance/

Participant Council Membership

Mr Warren Richter
Head, Chief Information Officer Group, Australian Institute of Health and Welfare

Mr Charlie Thorn
Director, Research and Development, Curtin University

Associate Professor Sarah Thackway
Director, Centre for Epidemiology and Evidence, NSW Ministry of Health

Dr Jeannette Young
Queensland Chief Health Officer

Mr Robert Wells
Deputy Chief Executive Officer, Sax Institute

Mr Michael Pervan
Secretary, Tasmanian Department of Health and Human Services

Mr Andrew Stanley
Director, SA NT Datalink

Mr Peter Carver
Director, Victorian Data Linkages

Professor Tarun Weeramanthri
Assistant Director General, Public Health, WA Department of Health
Financial year in brief

The following table and diagrams provide a summary of PHRN income and expenditure for 2014-15.

Table 1: PHRN Financial Overview 2014-15

<table>
<thead>
<tr>
<th>(Excluding GST)</th>
<th>EIF SSI 2014-15 $'000</th>
<th>CRIS 2014 $'000</th>
<th>NCRIS 2013 2014-15 $'000</th>
<th>Total $'000</th>
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<tbody>
<tr>
<td>Balance at the start of the year</td>
<td>866</td>
<td>1,044</td>
<td>427</td>
<td>2,337</td>
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<tr>
<td>Income</td>
<td></td>
<td></td>
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<td>DET Cash Contribution</td>
<td>930</td>
<td>1,474</td>
<td>3,454</td>
<td>5,858</td>
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<tr>
<td>Cash Co-Investments</td>
<td>8</td>
<td>561</td>
<td>2,099</td>
<td>2,668</td>
</tr>
<tr>
<td>In-Kind Contributions</td>
<td>439</td>
<td>1,232</td>
<td>2,538</td>
<td>4,209</td>
</tr>
<tr>
<td>Total Funding Received</td>
<td>1,377</td>
<td>3,267</td>
<td>8,091</td>
<td>12,735</td>
</tr>
<tr>
<td>Expenditure</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salaries and on costs</td>
<td>1,124</td>
<td>1,137</td>
<td>1,783</td>
<td>4,044</td>
</tr>
<tr>
<td>Operation, Management and Governance costs</td>
<td></td>
<td>568</td>
<td>579</td>
<td>1,147</td>
</tr>
<tr>
<td>Infrastructure maintenance</td>
<td>319</td>
<td></td>
<td>580</td>
<td>899</td>
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<tr>
<td>Operating Expenses</td>
<td></td>
<td>813</td>
<td></td>
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<tr>
<td>Contractual &amp; General Expenses</td>
<td>193</td>
<td></td>
<td>216</td>
<td>409</td>
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<tr>
<td>NCRIS expenditure sub-total</td>
<td>1,636</td>
<td>2,518</td>
<td>3,158</td>
<td>7,312</td>
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<tr>
<td>Cash Co-Investments Expenditure</td>
<td>66</td>
<td>561</td>
<td>1,590</td>
<td>2,217</td>
</tr>
<tr>
<td>In-Kind Expenditure</td>
<td>541</td>
<td>1,232</td>
<td>2,538</td>
<td>4,311</td>
</tr>
<tr>
<td>Total Expenditure</td>
<td>2,243</td>
<td>4,311</td>
<td>7,286</td>
<td>13,840</td>
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<tr>
<td>Balance at the end of the year</td>
<td>-</td>
<td>-</td>
<td>1,232</td>
<td>1,232</td>
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</table>
Financial year in brief cont.

Figure 1: Investment by Project Participant 2014-15 ($’000)

- South Australian and Northern Territory DataLink
- Tasmanian Data Linkage Unit
- Victorian Data Linkages
- Centre for Health Record Linkage – NSW
- Australian Institute of Health and Welfare
- The Sax Institute
- Queensland Health, Research Linkage Group
- Centre for Data Linkage
- Western Australian Data Linkage Branch
- Online Application System/Proof of Concept Collaboration, Telethon Kids Institute
- PHRN Program Office

Figure 2: Investment by Key Activity Area 2014-15 ($’000)

- Cross Jurisdictional Data Linkage Capability
- Online Application System/Proof of Concept Collaboration
- Data Supply and User Access Facilities
- Regional Data Linkage Capability