



Australian Government

**Department of Health,
Disability and Ageing**

First Nations Health Reporting:

OSR – Best Practice Data Limitations

Introduction

The Online Services Report (OSR) collects data on the services your organisation provides, like Client Numbers, Client Contacts, Episodes of Care, and staffing levels. It also includes some contextual information about your organisation. Unlike the National Key Performance Indicators (nKPI) report, the OSR doesn't track health outcomes.

Most of the OSR information is entered manually through the Health Data Portal, but some data can be automatically reported via your clinical information system (CIS). This article focuses only on the measures that can be extracted from and reported by the CIS.

Differences in how clinical information systems (CIS) capture and report data (whether due to system capability, reporting limitations, or both) can affect the accuracy and completeness of these indicators. Understanding these system-specific limitations and how they translate into CIS reports, as well as knowing where to record data within the CIS, is critical for ensuring your activities are comprehensively reported and results interpreted correctly.

This article outlines some of the CIS limitations that may impact health service's data and some practical tips to help manage data.

Best Practice limitations and data quality tips

Telephone visits

Best Practice doesn't distinguish between clinical and non-clinical encounters for telephone visits. As a result, all telephone encounters are counted as an eligible contact type for the indicators.

This may lead to inflated figures for Episodes of Care and Client Numbers, especially if non-clinical staff are recording their client interactions as telephone encounters. The Client Contact numbers aren't affected because that indicator is filtered by provider type and only counts clinical provider types.

The Specifications allow for, and accept, this limitation in scenarios where CIS can't distinguish between clinical and non-clinical telephone visits.

NOTE: Telehealth visits are categorised separately.

TIP: Knowing this limitation helps you better understand what counts as a contact and what doesn't.

Reportable Provider types

Medical Specialists, Transport workers, and SEWB Link Up caseworkers do not exist as user categories in Best Practice and it's not possible to manually add user categories. As a result, contacts with these provider types can't be extracted directly from Best Practice.

Understanding how users are configured will help you with optimal OSR reporting. Where these types of providers are users of Best Practice and recording information in client records, it's essential you know how each user is set up and which provider type is allocated to their user profile. This will help you manually segregate data to record information against OSR categories and minimise risk of duplication. It will also help you comment on any relevant Health Data Portal validation flags.

TIPS:

- Track these interactions separately and manually enter the number of Episodes of Care and Client Contacts into the Health Data Portal. Remember to check how these providers are currently set up in Best Practice. If their activities are recorded under an existing user category (e.g. contract doctor or SEWB staff), be sure to subtract those interactions from that category to avoid double counting.
- If a client has only had contact with these provider types, you will also need to include them in the Client Numbers. However, if the client has had contact with other clinical staff, they will be counted through those interactions.

Users with multiple profiles

Best Practice supports both clinical and non-clinical user profiles. If a user records clinical activity while logged in under a non-clinical profile (e.g. Practice Manager), it can lead to inconsistencies in reporting. Specifically, the Episode of Care count may be higher than the Client Contacts count which will trigger a validation flag in the Health Data Portal. This occurs because Episodes of Care are not filtered by provider type, whereas Client Contacts are.

TIP: Always ensure you're logged in under the appropriate profile for the task. Clinical activities should be recorded using a clinical user profile to maintain accurate and consistent reporting.

Key takeaways:

- Telephone encounters are counted as clinical encounters.
- Some provider types (Medical Specialists, Transport workers and SEWB Link Up caseworkers) aren't available user categories in Best Practice and must be tracked manually.
- Recording clinical activity under a non-clinical profile can result in the Episodes of Care count being higher than the Client Contacts count, which will trigger a validation flag in the Health Data Portal.

Resources

Links to supporting documents, information and further reading:

- **Specifications for nKPI and OSR:** This document is for service providers and clinical information system vendors. It gives a detailed overview of foundation data concepts, related data, and a full explanation of each measure—covering inclusions, exclusions, counting rules, measure code disaggregation points, and the nKPI Condition and Pathology Coding Frameworks. It also highlights variances in vendor implementation for selected measures. You can access the Specifications here: <https://www.solvinghealth.au/specifications>
- **CIS User Guides:** These explain how vendors report indicators and where data need to be recorded in the CIS to optimise reporting. Refer to the article CIS User Guides for links or visit the link in the Specifications (dot point above) which has links to vendor documents at the end of the web page.
- **Vendor scorecard:** The vendor scorecard is a one page visual that compares results for nKPI and OSR across CIS: <https://www.solvinghealth.au/scorecard>

For more data management tips see the other articles in this series available at: [Clinical Information System \(CIS\) Education Articles](#)

