# Defining evidence needs and understanding data

NSW Cancer Plan recognises that improved communication and sharing of information across all care settings is a key enabler in improving cancer outcomes. The Forum included a session within 'defining evidence needs and understanding data' to better understand Local Health Districts (LHD) services' data and evidence, needs/gaps as identified by delegates. Delegates were asked, whilst at their designated table, to enter their service's data and evidence, needs/gaps into the Slido Application, responses have been summarised below – for more information and detail on the responses please contact CINSW-Multicultural@health.nsw.gov.au.

Improving information systems and data reporting was an important topic for delegates and it generated rich feedback such as

- Disparate information systems do not communicate well, systems need to connect LHDs and to primary and public health care.
- Information of patients' cultural background is not carried forward or updated into other systems (medical record and Mosaiq / Aria)
- Capturing the need for an interpreter does not work easily during point of care and does not transfer to other systems.
- There is a need to report back to consumers, that data can support evidence of interventions' changes and success.

*"We need to better identify patient's cultural needs so we can serve them better" LHD Cancer Services Staff*

It was noted that quality control processes need to be embedded in data entry and reporting. LHDs noted they require additional support and equitable resources that enable high-quality input, management, use, and maintenance of data. Concern was raised regarding 'if we are asking the right questions' and thus collecting the right data. Systems need to be tailored to incorporate different data fields (Language, Country of Birth, age, religion) and expand to include questions that capture English proficiency, and also recruitment of multicultural populations in clinical trials.