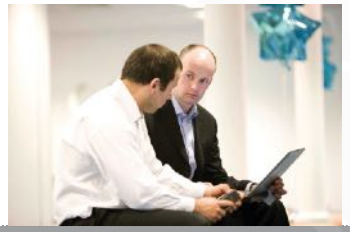
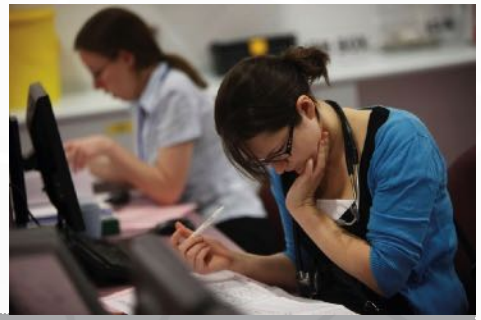
CHKS
Insight for better healthcare

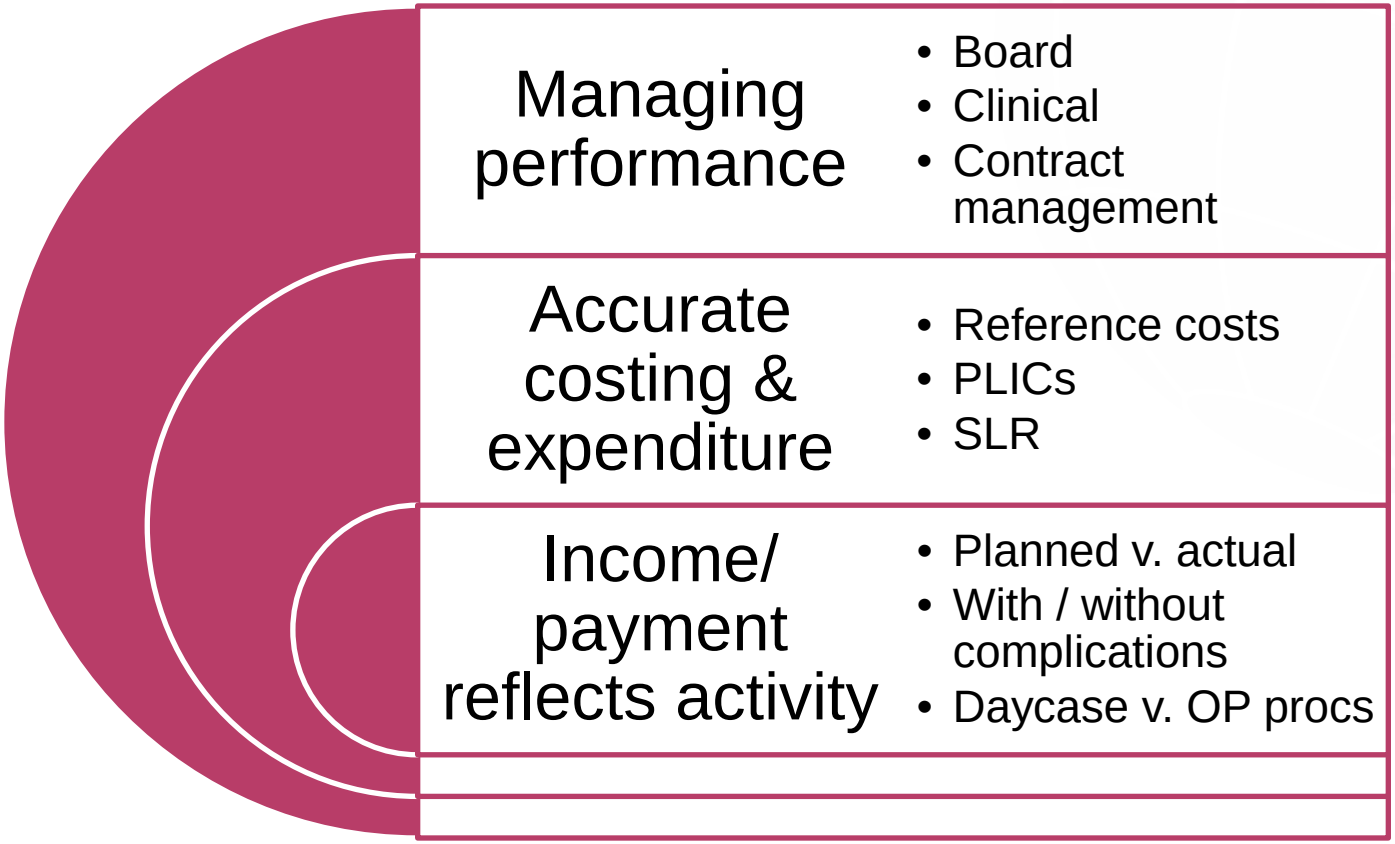




Data quality workshop: Accurate data quality throughout the organisation

Bevin Manoy bmanoy@chks.co.uk

Why do you need accurate data



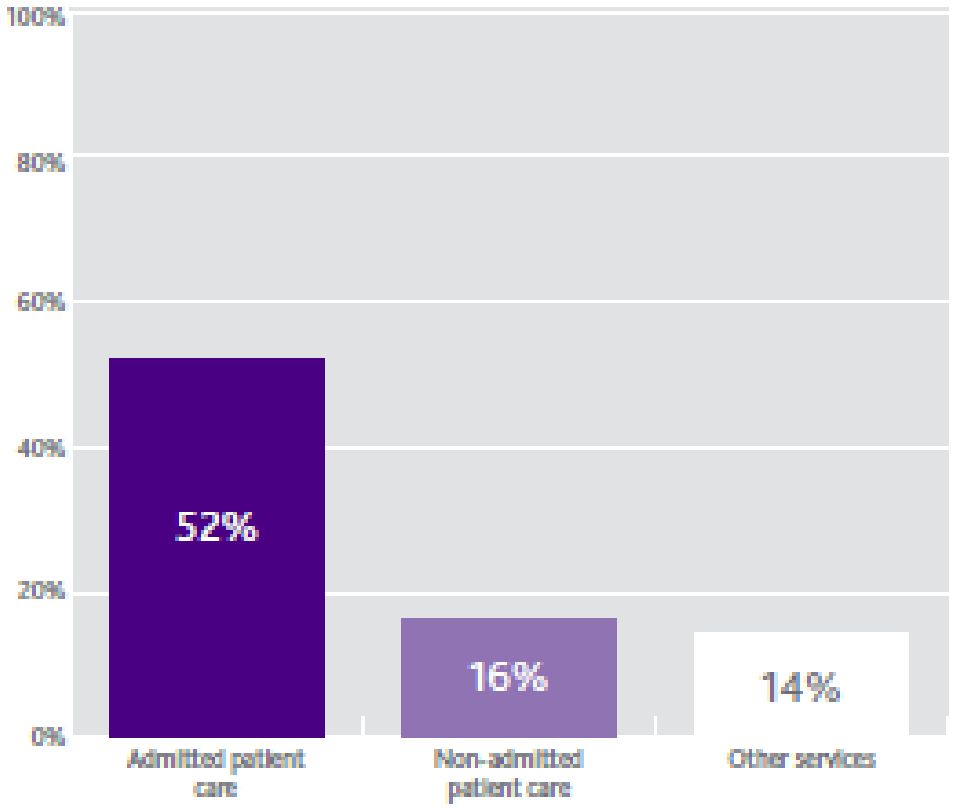
CHKS
Insight for better healthcare

Overarching areas

- the governance arrangements for data quality
- the policies and procedures in place for data recording and reporting
- the systems and processes in place to secure data quality
- the knowledge, skills and capacity of staff to achieve the data quality objectives
- the arrangements and controls in place for the use of data

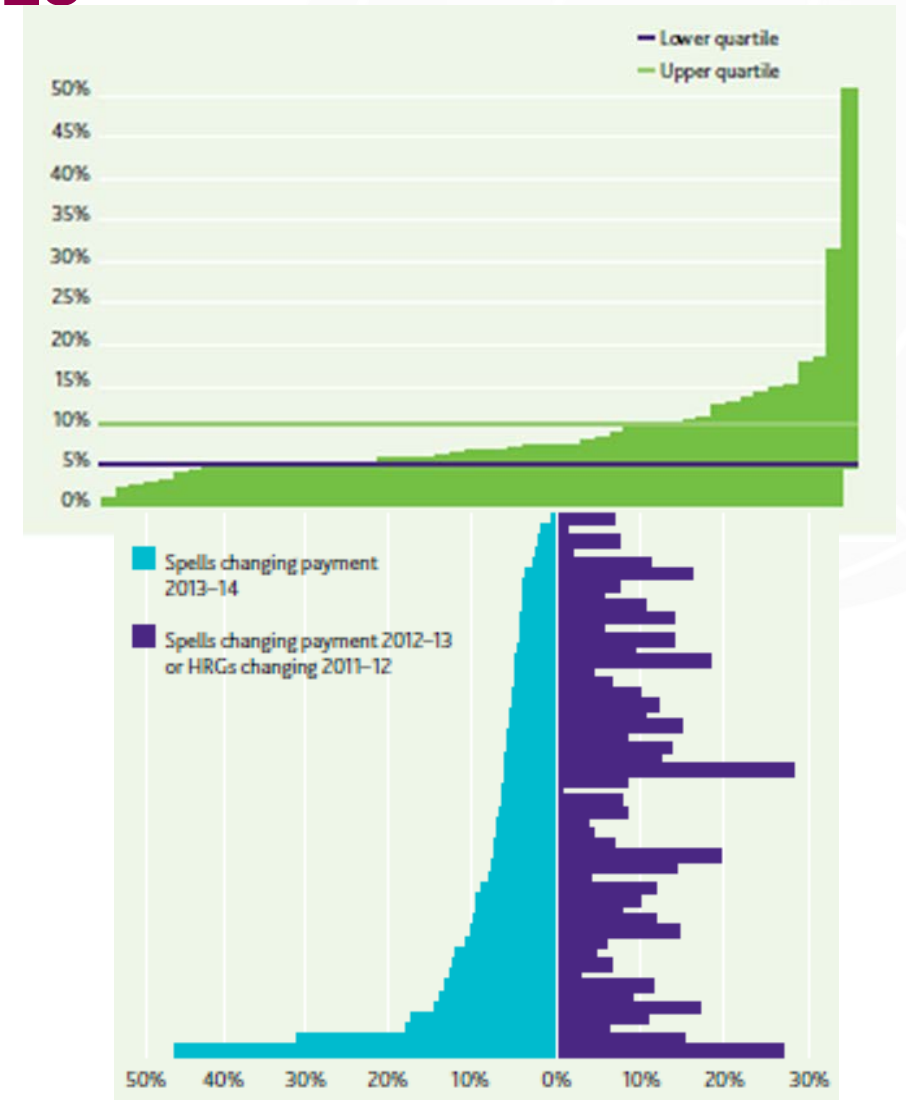
Data quality arrangements

- During costing audits in 2013/14 we reviewed data quality arrangements
- APC arrangements were good in over 50%
- Low percentage of trusts had good arrangements in outpatients and non-PAS



Clinical coding errors 2014/15

- Reviewed coding in 50 trusts in 2013/14
- Average HRG error rate 7%
- Coding accuracy is poor in many Trusts 25% worse than 10.5% HRG error rate
- Accuracy varies year on year
- Over 25% of trust not at IG level 2 coding accuracy
- Less than 25% of trusts at IG level 3 coding accuracy or better



CHKS
Insight for better healthcare

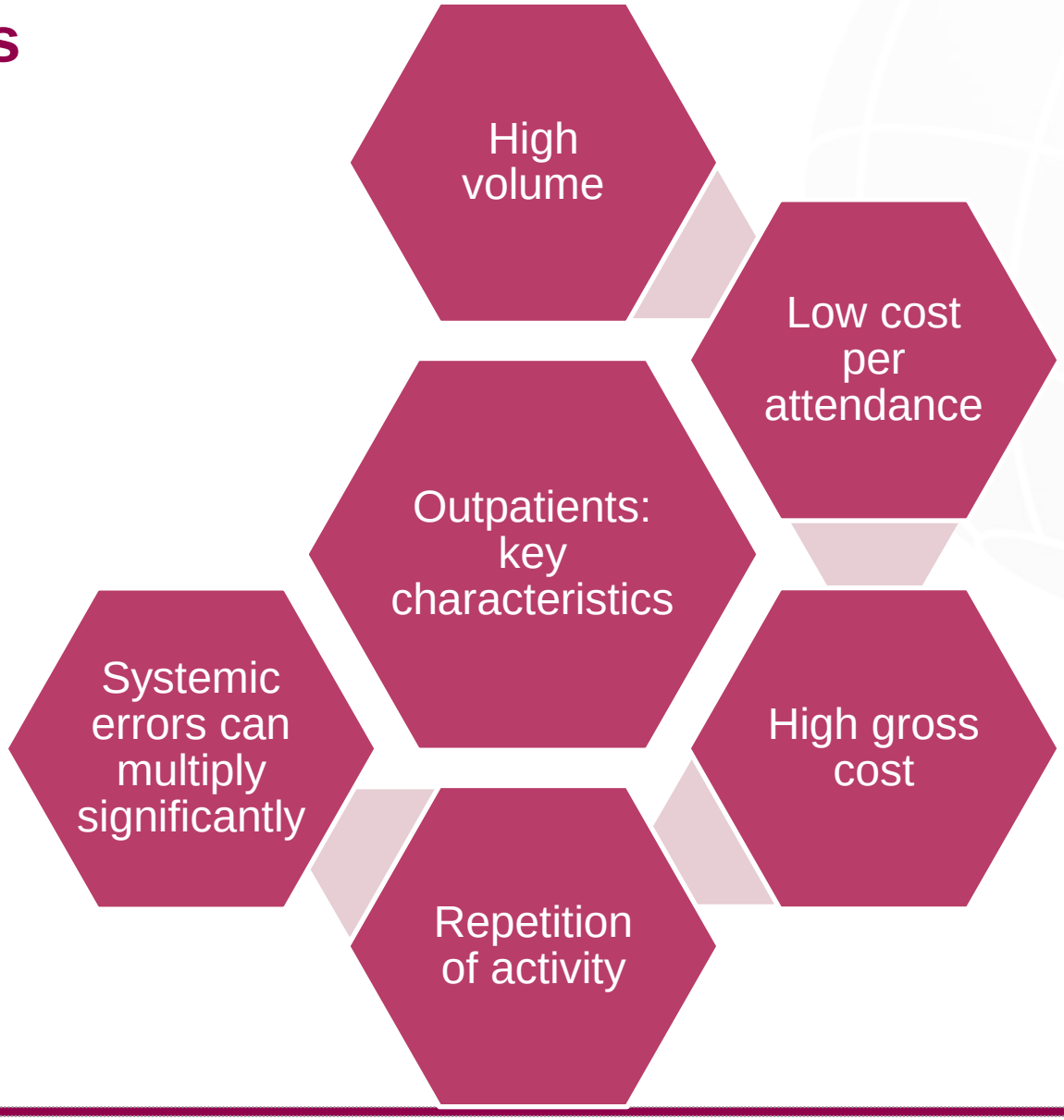
www.chks.co.uk

APC coding data – a reminder of key issues

- Source documentation
- Vacant posts
- Inexperienced staff & unqualified coders
- Coding manager involved in coding duties rather than managing
- Auditors and trainers – regular reviews and support to coders are necessary to achieve and maintain accurate coding

1. Outpatients
2. A&E
3. Non PAS systems

Outpatients



Data quality issues in outpatients

- the attendance was recorded as a first when it should have been a follow-up, or vice versa
- the patient did not attend (DNA) but were recorded as doing so
- the treatment function code was wrong
- poor procedure recording

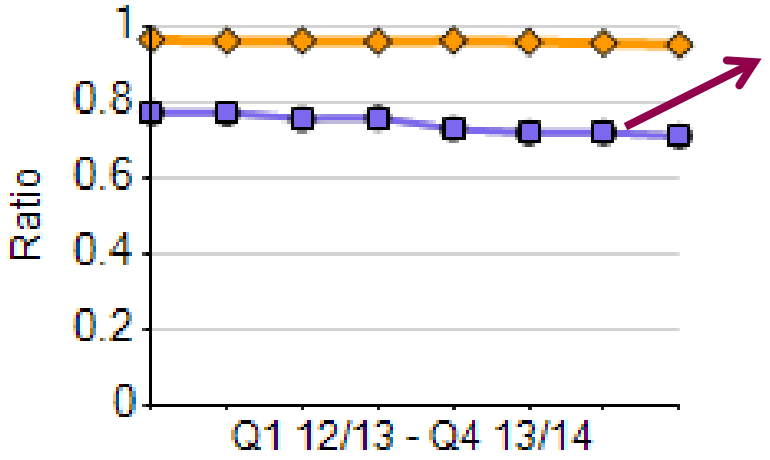
What causes poor procedure recording

Out of date proformas	Not being updated in line with National Classification Service updates; and
Case notes	Lack of evidence to confirm that the procedure was undertaken / proformas poorly completed by clinicians.
Information mismatch	Data on profomas did not match the information recorded in the case notes.

Case study

There is no formal audit programme for outpatient procedure coding: in 2012/13 there has been a considerable shift of activity into less acute settings across many specialities (from elective to outpatient). Data does not show an expected increase in outpatient procedure HRGs, However there was clear evidence in an increase in OP attendances.

Ophthalmology – OP ratio (tariffed procedures)



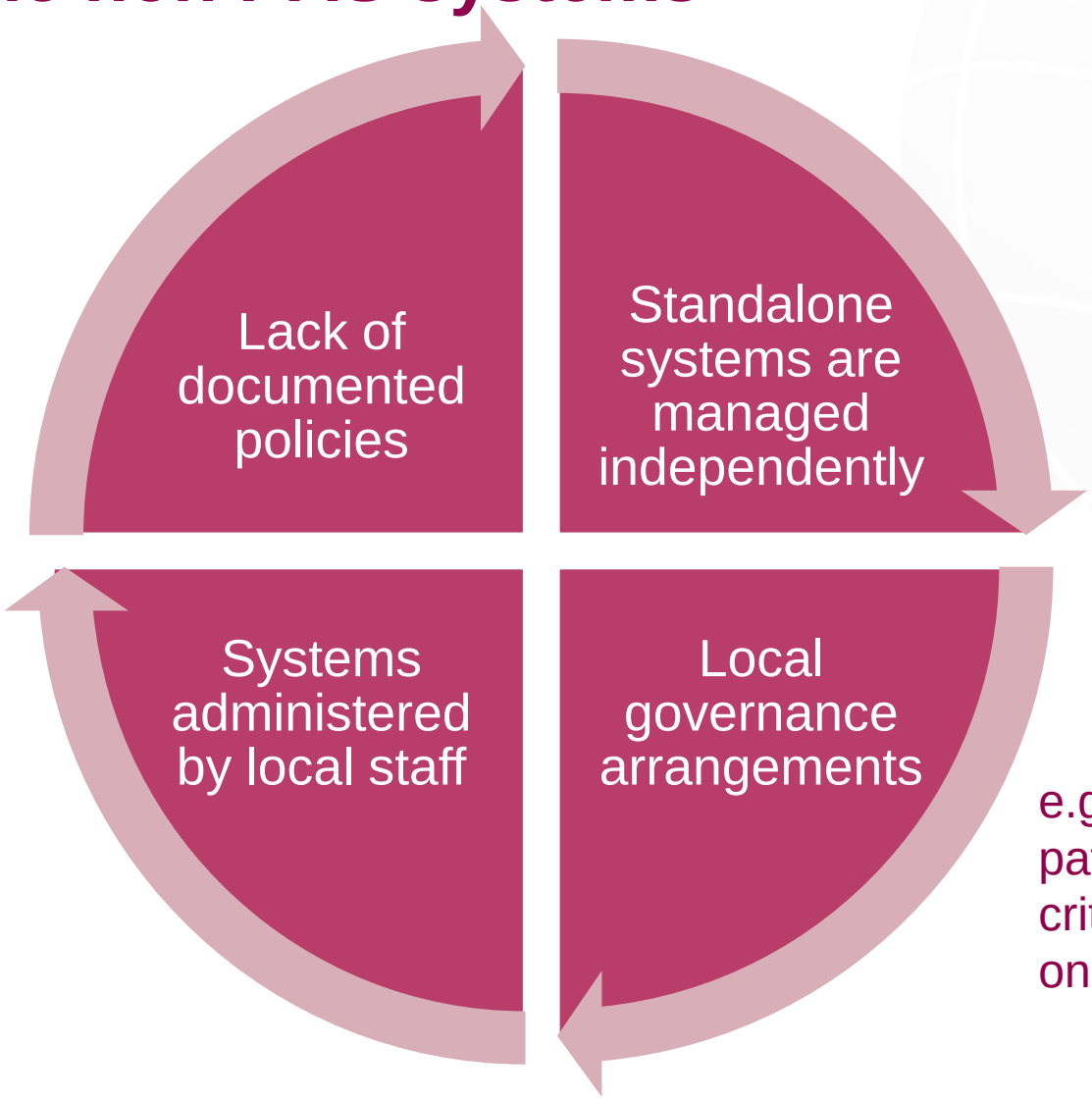
A&E

e.g. mix of primary care access, ambulatory care and A&E in same setting

Data quality issues and areas to focus

- under recording activity data such as drugs used and investigations such as ECGs
- Satisfactory systems for accurately recording data, but poor implementation by clinical staff
- data entry staff did not always input information accurately when it was recorded by clinicians – poor understanding of the systems and lack of training.
- Use of local codes did not result in an accurate national A&E code.
- Data duplicated in A&E data set and local primary care systems

Standalone non PAS systems



e.g. community systems,
pathology,
critical care,
oncology

CHKS
Insight for better healthcare

Non Pas system issues

- Data is extracted by or collected by administrative staff without a good understanding of end user
- Data extraction not subject to routine checks and validation.
- Systems now being updated in line with PbR guidance – critical systems not fit for purpose inline with most recent PbR guidance
- However, some areas had excellent electronic treatment systems with good independent audit.

Recap of key themes to focus on for assurance

- the governance arrangements for data quality
- the policies and procedures in place for data recording and reporting
- the systems and processes in place to secure data quality
- the knowledge, skills and capacity of staff to achieve the data quality objectives
- the arrangements and controls in place for the use of data

Getting the data right