# CHKS

Workshop 1: The importance of accurate data quality

CHKS Annual Conference 2013 Information is Power

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www.chks.co.uk



### Structure of workshop

#### Setting the scene

- The importance of data quality
- How good is our data?
- What are the issues?
- Tackling the issues
- Discussion/share our experiences
- How can we help?



### Fundamental to the operation of a patientcentred NHS

High quality data will underpin the modernisation of our national health service, ensuring that it becomes truly patient-centred and clinically led, and which properly measures and improves the outcomes patients achieve.

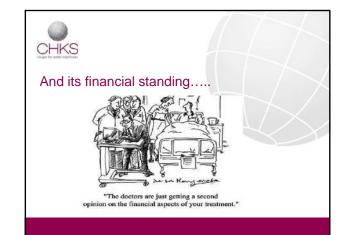
NHS England & HSCIC July 2013





## Integral to the operational effectiveness of organisations

- Operational arrangements
- Performance management arrangements
- Governance arrangements
- Financial arrangements







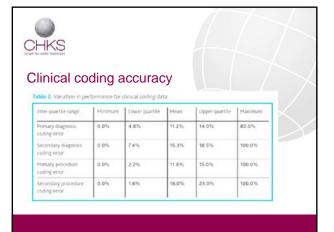




### PbR Assurance Framework

- National programme operated by Capita/CHKS on behalf of DH (previously Audit Commission)
- Reviews accuracy of coding, outpatient, A&E & costing data
- Audit programme and benchmarking





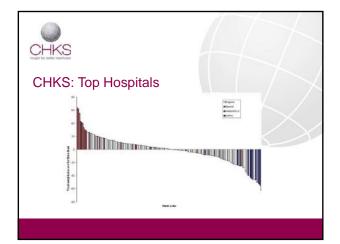
| &E accura                | су             |                   |              |                |         |
|--------------------------|----------------|-------------------|--------------|----------------|---------|
| ble 4: Variation in per  | formance for a | A&E investigation | s and treatr | nents          |         |
| inter quartile range     | Minimum        | Lower quartile    | Mean         | Upper quartile | Maximum |
| Investigations incorrect | 0.0%           | 10.8%             | 24.8%        | 35.9%          | 82,5%   |
| Treatments incorrect     | 1.2%           | 15.6%             | 33.0%        | 43.6%          | 86.1%   |

|  | Procedure error only 1650<br>Procedure error and other error (e.g. First/ follow-up) 150  |   |   |
|--|---|---|---|
| Fighte 7: Attendances with a procedure error compared to attendances with other errors <sup>10</sup> Error type         Number of attendances with error           Procedure error only         1650           Procedure error and other error (e.g. First/ follow-up)         150 | Error type         Number of attendances with error           Procedure error only         1650           Procedure error and other error (e.g. First/ follow-up)         150 |   |   |
| Error type Number of attendances with error<br>Procedure error only 1650<br>Procedure error and other error (e.g. First/ follow-up) 150  | Error type Number of attendances with error<br>Procedure error only 1650<br>Procedure error and other error (e.g. First/ follow-up) 150                                       | utpatient accuracy                                      |   |
| Error type Number of attendances with error<br>Procedure error only 1650<br>Procedure error and other error (e.g. First/ follow-up) 150  | Error type Number of attendances with error<br>Procedure error only 1650<br>Procedure error and other error (e.g. First/ follow-up) 150                                       |   |   |
| Procedure error only 1650 Procedure error and other error (e.g. First/ follow-up) 150  | Procedure error only 1650<br>Procedure error and other error (e.g. First/ follow-up) 150  | ble 7: Attendances with a procedure error compared to a | ttendances with other errors <sup>v</sup> |
| Procedure error and other error (e.g. First/ follow-up) 150  | Procedure error and other error (e.g. First/ follow-up) 150   | Error type  | Number of attendances with error          |
|  |   | Procedure error only                                    | 1650                                      |
| Other error only (e.g. First/ follow-up) 450   | Other error only (e.g. First/ follow.up) 450  | Procedure error and other error (e.g. First/ follow-up) | 150                                       |
|  | ,   | Other error only (e.g. First/ follow-up)                | 450                                       |



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|   | 10.00   |   |                           |  |
| CIC: OP V   | alidity   |   |                           |  |
| Data Item   | National %<br>Valid 2012/13                                 | National %<br>Valid 2011/12                                 | Change from previous year |  |
| NHS Number  | 99.3%   | 99.1%   |                           |  |
| Patient Pathway   | 45.6%   | 40.6%   |                           |  |
| Treatment Function  | 99.8%   | 99.6%   |                           |  |
| Main Specialty  | 99.8%   | 99.7%   | 1                         |  |
| Registered GP Practice  | 99.9%   | 99.7%   | +                         |  |
|   | 99.8%   | 99.9%   | +                         |  |
| Postcode  |   |   |                           |  |
| Postcode<br>PCT of Residence  | 98.7%   | 99.2%   | +                         |  |
|   | 98.7%   | 99.2%   | No Change                 |  |
| PCT of Residence  |   |   | No Change<br>No Change    |  |
| PCT of Residence<br>Commissioner Code   | 99.8%   | 99.8%   |                           |  |
| PCT of Residence<br>Commissioner Code<br>First Attendance   | 99.8%   | 99.8%<br>99.8%  | No Change                 |  |
| PCT of Residence<br>Commissioner Code<br>First Attendance<br>Attendance Indicator   | 99.8%<br>99.8%<br>99.8%                                     | 99.8%<br>99.8%<br>99.8%                                     | No Change                 |  |
| PCT of Residence<br>Commissioner Code<br>First Attendance<br>Attendance Indicator<br>Referral Source  | 99.8%<br>99.8%<br>99.8%<br>99.8%<br>98.9%                   | 99.8%<br>99.8%<br>99.8%<br>98.4%                            | No Change                 |  |
| PCT of Residence<br>Commissioner Code<br>First Attendance<br>Attendance Indicator<br>Referral Source<br>Referral Received Date                                      | 99.8%<br>99.8%<br>99.8%<br>98.9%<br>98.9%<br>95.7%          | 99.8%<br>99.8%<br>99.8%<br>98.4%<br>93.4%                   | No Change<br>No Change    |  |
| PCT of Residence<br>Commissioner Code<br>First Attendance<br>Attendance Indicator<br>Referral Source<br>Referral Received Date<br>Attendance Outcome                | 99.8%<br>99.8%<br>99.8%<br>98.9%<br>95.7%<br>99.0%          | 99.8%<br>99.8%<br>99.8%<br>98.4%<br>93.4%<br>99.0%          | No Change<br>No Change    |  |
| PCT of Residence<br>Commissioner Code<br>First Attendance<br>Attendance Indicator<br>Referral Source<br>Referral Roceved Date<br>Attendance Outcome<br>Photity Type | 99.8%<br>99.8%<br>99.8%<br>98.8%<br>95.7%<br>99.0%<br>99.0% | 99.8%<br>99.8%<br>99.8%<br>93.4%<br>93.4%<br>99.0%<br>97.0% | No Change<br>No Change    |  |

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|  | 1.0000000000000000000000000000000000000 | 1000                    | Distance and  |  |
| Data Item  | National %                              | National %              | Change from   |  |
|  | Valid 2012/13                           | Valid 2011/12           | previous year |  |
| NHS Number   | 95.1%                                   | 93.6%                   | 1             |  |
| Registered GP Practice                               | 99.8%                                   | 99.4%                   | 1             |  |
| Postcode   | 99.8%                                   | 99.8%                   | No Change     |  |
| PCT of Residence                                     | 97.7%                                   | 98.4%                   | 1             |  |
| Commissioner Code                                    | 99.4%                                   | 99.8%                   | 4             |  |
| Attendance Disposal                                  | 99.3%                                   | 99.5%                   | +             |  |
| Patient Group  | 95.1%                                   | 95.0%                   | 1             |  |
|  | 95.4%                                   | 94.8%                   | +             |  |
| First Investigation                                  | 93.6%                                   | 91,9%                   | 1             |  |
| First Investigation<br>First Treatment               |   | 98.2%                   | +             |  |
| First Treatment                                      |   |                         |               |  |
| First Treatment<br>Conclusion Time                   | 98.7%                                   |                         |               |  |
| First Treatment<br>Conclusion Time<br>Departure Time | 99.8%                                   | 99.6%                   |               |  |
| First Treatment<br>Conclusion Time                   |   | 99.6%<br>96.4%<br>96.4% |               |  |









### How are you improving data quality?

Transparency initiatives, record keeping standards, performance management, clinical engagement, SNOMED CT, audit programmes, dashboards, accountability, using technology





### How can we help?

- Data quality reporting, monitoring and benchmarking
- Process reviews
- Clinical engagement and validation
- Records accreditation
- Audit & assurance

