

Data Quality Policy

Chevin medical

Executive Summary

This Policy sets out the manner in which the practice wishes to ensure a consistent approach to Data Quality, in support of legislative, regulatory, statutory and business requirements.

Data Quality is defined within this policy as the; accuracy, validity, reliability, timeliness, relevance, completeness and robustness of data. Everyone who is involved in the collection and recording of information is responsible for ensuring its accurate collection in order to minimise risks to the organisation or individuals.

Information Asset Owners (IAO's) are responsible for ensuring documented procedures and processes are in place to ensure the accuracy of information including service user information on all systems and/or records, including those that support the provision of care in addition to being responsible for ensuring adequate training is provided to staff to ensure the accurate collection of information, including service user information and onward reporting of high quality information.

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Data Quality Policy

Introduction

The Practice recognises that all of their decisions, whether health care, managerial or financial need to be based on information which is of the highest quality. Data quality is crucial and the availability of complete, accurate, relevant and timely data is important in supporting patient care, governance, management and service agreements for health care planning and accountability.

The Practice aspires to the highest standards of clinical competence and corporate behaviour to ensure that safe, fair and equitable procedures are applied to all organisational transactions, including relationships with patients their carers, public, staff, stakeholders and the use of public resources.

The importance of having robust systems, processes, data definitions and systems of validation in place to assure data quality is part of this process. The quality of data can affect the reputation of the Practice and may lead to financial penalty in certain circumstances, e.g. failing to meet contractual requirements, QoF expectations and other reportable outcome measures.

The purpose of this policy, is to provide general principles for the management of all data and guidance. This is to ensure that the Practice can take decisions based on accurate and complete data and can meet its various legal and regulatory responsibilities.

A data quality policy and regular monitoring of data standards are a requirement of the NHS Data Security Protection Toolkit

Information accuracy is also a legal requirement under the GDPR/Data Protection Act 2018

This policy provides the framework to mitigate against the risk of poor data quality and enable individuals within the Practice to take direct responsibility for any data they record or omit to record.

Aims

Ever-increasing use of computerised systems provides greater opportunities to store and

access large volumes of many types of data but also increases the risk of misinformation if the data from which information is derived is not of good quality.

This risk applies to information for the Practice's internal use and to information conveyed in the form of statutory returns to the national databases

For our information to have value, it is essential that the underlying data is consistent and complies with national standards. NHS Practices are assessed, judged and sometimes paid for on the quality of the data they produce

National statistics, performance indicators and audit assessments depend on good quality data for their accuracy and include data quality amongst their number.

The Data Quality Policy underpins the practice's objective to record and present data of the highest possible quality and that all users of the information can be confident about its accuracy.

Scope

This policy must be followed by all staff who works for or on behalf of the Practice including those on temporary or honorary contracts, secondments, volunteers, pool staff, students and any staff working on an individual contractor basis or who are employees for an organisation contracted to provide services to the Practice. The policy is applicable to all areas of the organisation and adherence should be included in all contracts for outsourced or shared services. There are no exclusions.

This policy is applicable to all data held and processed by the Practice.

All data must be managed and held within a controlled environment and to a standard of accuracy and completeness. This applies to data regardless of format.

Written procedures will be available in all relevant locations within the Practice to assist staff in collecting and recording data. These procedures will be kept up-to-date, and where appropriate will also contain information relating to national data definitions.

Processes will be established to ensure compliance with the procedures, which will include sample checks to audit compliance.

It should be noted that all collection, storage, processing and reporting of personal information is governed by detailed legal requirements under the GDPR/Data Protection Act

2018 and associated standards, such as the Caldicott2 guidelines and Health and Social Care Act 2012

As the Practice generates a very wide range of information for a whole variety of uses, this policy does not provide detailed guidance for specific data items or individual areas of application. It concentrates instead on general principles of completeness, accuracy, ongoing validity, timeliness, consistency of definitions and compatibility of data items, and signposts where specific procedures or further guidelines need to exist.

- Patient Care – in the delivery of effective, relevant and timely care, thereby minimising clinical risk.
- Good Clinical Governance – a pre-requisite for minimising clinical risk and avoiding clinical error and misjudgement.
- Disclosure – ensuring that clinical and administrative information provided to the patient and authorised health partners, including external partners is of the highest quality.
- Business planning – ensuring management can rely on the information to make informed and effective business decisions.
- The measurement of activity and performance to ensure effective distribution and use of Practice resources.
- Regulatory reporting – to ensure compliance with the standards and targets as laid down in measures such as QoF, DSP toolkit etc
- Good corporate governance – which, as above, has data quality as a pre-requisite to ensure effective business management.
- Legal compliance – ensuring that the Practice conforms to its legal obligations as laid down in relevant legislation, such as GDPR/Data Protection Act 2018.
- Education and Training – in the development and delivery of quality education and training provision.

General Guidelines and Principles of Data Quality

Supplying accurate data is a complicated task for a number of reasons:

- There are many ways for the data to be inaccurate – data entry errors and incomplete data, etc.
- Data can be corrupted during translation depending on who is translating it, how and with what tools/processes.
- Data must relate to the correct time period and be available when required.
- Data must be in a form that is collectable and which can subsequently be analysed.

To ensure an organisation achieves data quality, it must set out how :

- Data is collected and co-ordinated.
- Data is transferred between systems.
- Data is organised.
- Data is analysed.
- Data is interpreted.
- Conclusions and results drawn from the data are validated.

The following overarching principles underpin the approach to data quality:

- All staff will conform to legal and statutory requirements and recognised good practice, aim to be significantly above average on in-house data quality indicators, and will strive towards 100% accuracy across all information systems.
- All data collection, manipulation and reporting processes by the Practice will be covered by clear procedures which are easily available to all relevant staff, and regularly reviewed and updated.
- All staff should be aware of the importance of good data quality and their own contribution to achieving it, and should receive appropriate training in relation to data quality aspects of their work.
- Teams should have comprehensive procedures in place for identifying and correcting data errors, such that information is accurate and reliable at time of use.

Data can be said to be of 'high quality' if the data accurately portray exact details and/or events that actually took place- the following principles should be considered when doing so.

- Accessibility

Information can be accessed quickly and efficiently through the use of systematic and consistent management in electronic (and physical) format. Access must be appropriate so that only those with a lawful basis and legitimate relationship to the data may view, create or modify them.

- Accuracy

Data (and information) are accurate with systems, processes and practice in place to ensure this. Any limitations on accuracy of data must be made clear to its users and effective margins of error need to be considered for calculations.

- Completeness

Completeness can have a real impact on the quality of data. The evaluation of data quality must monitor for missing, incomplete or invalid information as well as identification of future or occurring causes and the associated risks.

- Relevance

Data captured should be appropriate for the intended purpose and never excessive.

- Reliability

Data and information must reflect a stable, systematic and consistent approach to enhance reliability. Review and enforcement of collection methods of data must be considered to ensure a positive impact on the quality or content of any information produced.

- Timeliness

Data should be recorded as close as possible to being gathered and should be accessed quickly and efficiently, in line with Data Protection legislation and guidance.

- Validity

Validity is supported by consistency over time, systems and measures; data must be collected, recorded and utilised to the standard set by relevant requirements or controls. Any information collection, use or analytical process must incorporate an agreed validation method or tool to ensure the standards and principles outlined above are met. Validation tools will support routine data entry and analysis, as well as supporting the identification and control of duplicate records and other errors.

Accountability and Responsibilities

There are a number of key information governance roles and bodies that the Practice needs to have in place as part of its Information Governance Framework, these are:

- DPO
- Partnership Committee
- Governance, Performance and Risk Committee
- Caldicott Guardian
- Information Asset Owner/Administrator
- Heads of Service/department
- All employees

Within the Practice there are formally documented structures of accountability for Data Quality:

- Every individual that is a registered user of a Practice System is responsible for ensuring the Data Quality of records when using the system. Should individuals knowingly enter data that breaches the previously described Data Quality standards there are disciplinary procedures that can be invoked.
- The Lead GP has overall responsibility for data quality systems and processes in the Practice. The Lead GP is responsible for signing off any statement of assurance of clinical data quality
- Managers are responsible for ensuring the quality of data within their teams, adhering to this policy and implementing the associated Data Quality Management Procedure.
- All staff have a responsibility to ensure the data they enter onto any system – electronic or manual is of good quality and follow Practice and local procedures for the validation of data.

Data quality is a key part of any information system that exists within a Practice. All staff members will be in contact at some point with a form of information system, whether paper or

electronic. As a result, all staff members are responsible for implementing and maintaining data quality and are obligated to maintain accurate information legally (Data Protection Act), contractually (contract of employment) and ethically (professional codes of practice).

It is the responsibility of all managers to ensure that, where appropriate, systems are in place to validate the completeness, accuracy, relevance and timeliness of data/information. Also managers must ensure that all staff are fully aware of their obligations in this area. In certain circumstances, to support equality and diversity, line managers will need to consider individual requirements of staff to support good practice in complying with this policy.

Ultimate responsibility for maintaining accurate and complete data and information lies with the Lead GP but all staff who record information, whether on paper or by electronic means, have a responsibility to take care to ensure that the data is accurate and as complete as possible. Individuals with responsibility for data quality must have this clearly stated in their job descriptions.

External Sources of Data

Where possible validation processes should use accredited external sources of information e.g. using Patient Demographic Service (PDS) to check NHS numbers, . Staff involved with recording data need to ensure that it is performed in a timely manner and that the details being recorded are checked with the source at every opportunity.

The NHS number is the main patient identifier and must be recorded correctly and in all systems where patient information is present. The NHS number should be used in all referral forms and letters. The Data Security and Protection Toolkit requires evidence outlining the NHS number is used and there is a mandatory NHS number field in all documentation and systems.

Procedure for data quality management

Individuals listed in the “Accountability and Responsibilities” section will adhere to published procedures, or standard operating procedures, as indicated in order to discharge this policy in their domain.

Training

The importance of data quality will be included in:

The Practice's mandatory training and induction programme

General Clinical System training offered to all staff

Training issues with systems and/or other specific processes should be addressed on an individual basis as they arise.

Process for monitoring compliance with this policy

Data quality is ultimately the responsibility of department leads where the specific data are being generated. Processes for ensuring high data quality will differ between teams and should be implemented and reviewed locally.

Associated documents

This policy should also be considered in conjunction with all the policies and legislation, especially those highlighted below:

Confidentiality Code of Conduct

Information Governance Policies

Records Retention Schedule