

DATA QUALITY POLICY

Title:	Data Quality Policy			
Policy Reference Number:	COR/GOV.14/V1.00			
Summary:	This document is a policy to support the provision and maintenance of high quality data to provide robust clinical and management information to support the health and business processes of the PCT			
Associated Documents:				
Target Audience:	All staff responsible for the recording, collection, data input and reporting of information			
Document Version:	Version 1.00			
Date of this Version:	18 Nov 2008			
Date Issued:				
Author's Name:	K Gaylard			
Custodian's Name:	Lynda Murray			
Approved by:	□ Hampshire PCT Management Board □ HPCT Governance and Healthcare Assurance Committee □ Care Services Integrated Governance Committee	Date of meeting:		
Ratified by:	□ Hampshire Primary Care Trust Board	Date of meeting:		
Signature of Chief Executive:		Date:		

Hampshire Primary Care Trust Data Quality Policy Version 1.00
POLICY DEVELOPMENT DOCUMENT CONTROL PANEL

This control panel is used to register and track policies using the Policy Reference Number and the Version Number. All new and reissued policies must be registered with the Compliance Unit of Hampshire Primary Care Trust and a Policy Reference Number issued prior to approval by any governance committee.

This section to be completed by the Compliance Unit:

Policy Reference Number: COR/GOV.14/V1.00

Policy Title: Data Quality Policy

Data Quality

version Number:	Date of Issue:	Rev	new Date:
This section to be	e completed by the policy a	uthor:	
Policy Custodian:	Lynda Murray		
	d of Information (Registra	tion Authority Mar	nager)
	nda.murray@nhpct.nhs.uk		37
Is this a new policy?			Yes
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Standards for Bette		Core Standa	rds:
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Other (please speci	ifiy):		
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Stella Randall, Info Sue Parsons, Head Triss Clark, Head o Hampshire Primary	porate Performance & Information Lead – Care Service I of Information Services , So If Service Improvement and If Care Trust Trust's Legal Services	s, Hampshire Primouthampton ICT Sh Performance, Care	ary Care Trust ared Services Services Directorate,
15,500	ficant changes made:		
Section:	3,141,191,191		
Section:			
ACCORDING TO A CO.			
Approval Route:	GHAC		Date:

This document is valid on the day it was issued. The most up to date version of this policy can

Version 1.0 Review Date:

be found at: http://www.hampshirepct.nhs.uk/index/documents/policies-home.htm

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Hampshire Primary Care Trust Data Quality Policy Version 1.00

EQUALITY ASSESSMENT TOOL

8. If Yes, can the impact be avoided? N/A	Policy Title: Data Quality Po				
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12. Can the impact be reduced by taking different action? N/A	12. Can the impact be reduce	d by taking different action?		N/A	

If you have identified a potential discriminatory impact of this policy document, please refer it to the Trust together with any suggestions you have as to the action required to avoid/reduce this impact. For advice in respect of answering the above questions, contact Human Resources

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Definition

For the purpose of clarity, within this document the word "staff" should be taken to mean any full-time or part time employee of the PCT, temporary staff, whether through an agency or directly employed, contractors on fixed-term or open-ended contracts or anyone working for another organisation who has responsibility for recording, interpreting or reporting on any data which relates to the business of Hampshire PCT.

Background

Hampshire PCT recognises that a vital prerequisite to the production of robust information is the availability of high quality data to support good clinical governance and effective performance management. Excellent data quality is crucial to the availability of complete, accurate and timely information to support both the delivery of its core business objectives; and the monitoring of activity and performance for internal and external management purposes.

The PCT Board must be able to assure themselves of local performance against the standards monitored by the Healthcare Commission's Standards for Better Health (the HCC Annual Healthcheck); it will be essential to ensure that all of the data used is of sufficient quality to enable the Board to be confident in its assessment. The Data Protection Act 1998 also sets the legal requirement for data users; ensuring that personal data is kept accurate and up to date is one of its fundamental principles.

The PCT is committed to the achievement and maintenance of the Information Data Quality Assurance requirements for primary care trusts, through the use of the Information Governance Toolkit.

In order to address the above requirements, the PCT has produced this data quality policy to achieve and maintain the continuing availability of high quality data throughout the organisation.

1. Policy statement

The purpose of this document is to improve and maintain the quality of information contained in all PCT data. A definition of data quality is a measure of the degree of usefulness of the data for a specific purpose.

The benefits of maximising data quality are:

- From a patients perspective good data quality can lead to better decisions about their care
- Quality data is a valuable resource to the PCT to enable decision making

Good quality information is derived from data that is:

- Complete
- Valid
- Reliable
- Accurate

- Timely
- Relevant
- Fit for purpose

These criteria will be met by:

- 1.1 Developing a PCT strategy to support the improvement of the quality of data that will underpin local PCT business needs and link with key strategic developments in healthcare. The strategy will encompass links to care pathways, clinical governance, national service frameworks and the PCT's preparation in readiness for Connecting for Health, and any other reviews which occur in the future.
- 1.2 Ensuring that the PCT fulfils its requirements under the Information Quality Assurance initiative as part of information governance.
- 1.3 Establishing procedures to monitor data quality throughout the PCT and providing regular support through training to individuals using the PCT's systems, whether electronic or otherwise.
- 1.4 Establishing procedures to promote the effective use of key PCT information systems.
- 1.5 Providing regular feedback to data providers and developing action plans via the Data Custodian and Information Governance Steering Group.
- 1.6 Working with the Commissioning teams and Information Requirement Work Groups to produce the SCHEDULE 5 document (Information Requirements) for inclusion within the Annual Contract with NHS Provider Trusts and its subsequent monitoring.

2. Scope

- 2.1 This policy applies to all staff as defined at the beginning of this policy.
- 2.2 The document covers all types of activity where data is collected.
- 2.3 The policy applies to systems, electronic or otherwise, which collect, store or report on data which related the PCT's activities.
- 2.4 It applies to such data for the entire period during which it is held, not just when it is first recorded, and also to any amendments made subsequently.

3. Data management

- 3.1 Assistance will be provided in the form of Policy and Procedure documents covering the capture and recording of patient information.
- 3.2 These procedures will be reviewed and kept updated and logged on the Primary Care Trust's central procedure log. Copies will be kept in all areas where patient activity occurs and data is recorded.

- 3.3 Training documentation and User Guides will be available at all locations where information is collected.
- 3.4 Processes and procedures must be in place to ensure that where new services are provided or system changes are made, the appropriate action is taken to notify system administrators of changes and ensure that all users are aware of the impact of those changes to maintain information quality.
- 3.5 All data collection will be supported by documented procedures and managers must ensure that these are regularly reviewed and updated.
- 3.6 It is important to ensure that managers who are responsible for staff and systems which collect data clearly understand the data quality standards and requirements, and are committed to making improvements by requesting and acting upon regular data quality monitoring reports. Individual members of staff shall also be responsible for ensuring that they understand and follow these standards and requirements.
- 3.7 The policy acts as a reference point within the PCT for national and local Data Standards as an aid to ensuring that new requirements are implemented.
- 3.8 Formal notifications from governing organisations must be logged and disseminated appropriately within the PCT.

4. Data quality monitoring

- 4.1 Procedures should be in place to ensure that PCT staff routinely check information with the source and that corrections are routinely made. Liaison should take place with outside organisations with regard to data quality issues.
- 4.2 Raise awareness of data quality throughout the PCT via data quality groups and training sessions [evidence DH DQ sessions].
- 4.3 Data quality will in all cases (as a minimum requirement) be compliant with the data quality standards laid down by the Department of Health.

5. Data quality reporting

- 5.1 There will be a framework in place to report significant data quality issues which may arise, using local procedures as appropriate, such as risk reporting systems.
- 5.2 Significant, specific issues should be raised at the Primary Care Trust Board as part of the monthly Performance Monitoring.

6. Training

6.1 New starters will receive training on data quality as a part of their induction programme.

6.2 Local areas will have specific procedures to provide ongoing data quality training for all staff.

7. Communications

7.1 The policy and framework will be available to all staff via the intranet. Procedures will be available locally at all appropriate sites. Managers will be responsible for ensuring that staff are aware of these procedures, and are kept informed of any changes or additions.

8. Accountabilities

- 8.1 It is the role of the PCT Board (and the Care Services Board where appropriate) to ensure that corporate responsibility for Information Quality Assurance is allocated appropriately at Board level and that this is reflected in all relevant job descriptions.
- 8.2 Managers within the PCT are responsible for ensuring that the policy and its supporting standards and guidelines are built into local processes and that there is on-going compliance with its requirements.
- 8.3 Staff are responsible for ensuring that they are aware of the requirements incumbent upon them and for ensuring that they comply with these on a day to day basis.

9. Security

- 9.1 All staff must comply with security requirements within the PCT's security policies and procedures documentation.
- 9.2 All data must be held securely.
- 9.3 All staff must abide by confidentiality policies and procedures ensuring that any personal identifiable information is kept secure at all times. The PCT reserves the right to take disciplinary action against any person who is in breach of these policies and procedures.

10. Summary

- 10.1 Good data quality is not an optional extra, it is fundamental to the business of this PCT and as such, must always be considered at the centre of any future developments, and kept under regular review.
- 10.2 The PCT will ensure that it keeps up to date with any future developments and changes using appropriate methods to communicate them appropriately throughout the organisation.
- 10.3 The monitoring of the policy and its effectiveness and maintenance will be audited annually using the Information Governance Toolkit.

11. Related Policies & Strategies

Freedom of Information Policy

- Information Security Policy
- Information Governance Strategy
- Records Management Policy
- Information Governance Policy
- Data Dictionary guidelines to ensure data quality
- NSTS (to be replaced by Personal Demographic Service (PDS) as part of the Clinical Spine Applications CSA

