Performance Evidence Delivery Framework

August 2016

Information and technology for better health and care
Background

• The Framework has been developed to encourage the utilisation of methods proposed to improve administrative approach to data quality

• The Framework does not have to be applied in its entirety, but is intended to prompt review and understand local ways of working

• NHS Digital would encourage Trusts to consider the value this Framework could add in their own organisation

• The Framework should be used to improve the organisation’s DQMI score
Aim of the Framework

- Address training and education needs relating to the correct entry of data
- Improve engagement between administrative staff and clinical staff
- A consistent way of working
- Equitable and consistent management of staff
- Ensure adequate focus on data quality as well as supporting clinical areas
- To provide support, cover and service delivery
- Continually engage with the administrative staff as to what they feel their priorities are in regard to data quality and other tasks they have to complete.
Data Quality Delivery Statement

Create a culture and understanding in staff of the value of capturing high quality data in real time to improve patient care. To continually record accurate data to ensure high quality care to all patients, citizens and stakeholders.
Key Areas
Key Datasets

The following key data datasets are included in the August publication of the DQMI:

- Accident and Emergency (A&E) CDS
- Admitted Patient Care (APC) CDS
- Outpatients (OP) CDS
- Diagnostic Imaging Dataset (DID)
- Improving Access to Psychological Therapies (IAPT)
- Mental Health Services Data Set (MHSDS)
- Maternity Services Data Set (MSDS)
Key Data Items

The following key data items are included in the DQMI:

- ACTIVITY TREATMENT FUNCTION CODE
- ADMINISTRATIVE CATEGORY CODE
- ADMINISTRATIVE CATEGORY CODE (ON ADMISSION)
- ADMISSION METHOD (HOSPITAL PROVIDER SPELL)
- ADMISSION_DATE(HOSPITAL_PROVIDER_SPELL)
- CARE PROFESSIONAL MAIN SPECIALTY CODE
- CONSULTANT CODE
- DECIDED TO ADMIT DATE
- DISCHARGE DESTINATION CODE (HOSPITAL PROVIDER SPELL)
- DISCHARGE METHOD CODE (HOSPITAL PROVIDER SPELL)
- ETHNIC CATEGORY
- GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)
- NHS NUMBER
- NHS NUMBER STATUS INDICATOR CODE
- ORGANISATION CODE (CODE OF COMMISSIONER)
- ORGANISATION CODE (CODE OF PROVIDER)
- PATIENT CLASSIFICATION CODE
- PERSON BIRTH DATE
- PERSON GENDER CODE CURRENT
- POSTCODE OF USUAL ADDRESS
- PRIMARY DIAGNOSIS (ICD)
- SITE CODE (OF TREATMENT)
- SOURCE OF ADMISSION CODE (HOSPITAL PROVIDER SPELL)
- SOURCE OF REFERRAL FOR A and E
- SOURCE OF REFERRAL FOR MENTAL HEALTH
- SOURCE OF REFERRAL FOR OUT-PATIENTS
Performance Management

• Excellent performance should be praised and highlighted, with good practice shared amongst other admin staff
• Seek to understand where data accuracy is of a low level and engage the admin service to improve
• Proposal to develop local performance reporting tools that demonstrate following audit the accuracy of the data entered at an individual administrator level
• Empower management staff of administrators to engage with the data accuracy and quality agenda to build close relationships between care delivers and admin staff.
Structures

A clear management structure should be held by each organisation. In regard to those individuals who enter in data. This ensures that there is accountability for low levels of data quality and accuracy.
Overall Approach - Conclusion

- To what extent are administrative staff who enter data incentivised, engaged, audited and reviewed for the data they enter.
- Immediate response to data quality issues or changes in practice should be in place locally.
- Ensure cover is in place for clinical areas to maintain consistency of clinical and administrative data entry,
- Set clear expectations to all admin staff on the level of data quality expected.
- Promote engagement between administrative and clinical staff.
- Ensure there are appropriate structures of engagement groups to prioritise data quality within an organisation and accountable officers are in place.