

Allied health data quality guideline

Purpose

The purpose of this data quality guideline is to support DHB allied health services achieve accurate data, through supported and enabled staff. Accurate data is essential to monitor and evaluate care capacity and demand management.

Data governance

Internal structures

A Governance Group / Steering Committee should oversee the optimal utilisation of system/tool functionality. An appropriate allied health representative should be a member of this group as they play a key role in governance.

An allied health Data Quality Group is an informatics group which monitors and improves care capacity and demand management through utilisation of the Core Data Set and any other data determined by the group. This group should be responsible for the following:

1. The development and implementation of a data quality framework. This framework should include:
 - Internal processes that promote data integrity and quality control.
 - Documented key performance indicators for the various roles involved in data collection & quality.
 - A process to evaluate data completeness. Within the CCDM programme this is defined as 'recorded clinical and non-clinical time is within 15% margin of contracted FTE'.
2. Monthly review of sentinel Core Data Set metrics for evaluating the effectiveness of care capacity demand management by team/service.
3. Monthly reporting to the CCDM council, specifying any issues/risks/successes identified through Core Data Set analysis.
4. Development of / support of existing structures, so allied health teams/services can access and use their own data for quality improvement activities.

Standardised data sets

The DHB will ensure national data sets are implemented / captured, to ensure allied health teams/services are identified, classified and recorded in a common way. This will enable the generation of knowledge applicable to service development, national benchmarking and comparative service analysis.

Data sets include the CCDM Allied Health Physical Health and Mental Health Activity Data Sets.

Data accuracy

An aspect of assessing data accuracy includes assessing the completeness of recorded data. As per the national CCDM implementation reporting, one of the criteria is that recorded clinical and non-clinical time is within 15% margin of contracted FTE. This means the total recorded hours entered by allied staff against pts + the total hours recorded for non-clinical activity (from the allocate staff screen if TrendCare used) is within a 15% margin of total contracted FTE hours available. 1.00 FTE = 40 hours per week.

Enabled staff

Operational business rules

Operational business rules/guidelines should be applied/developed to promote consistent and optimal use of the data collection system/tool. At a minimum, business rules/guidelines should include the following items:

- All users are required to record patient information in the system/tool accurately and in a timely manner. Data should be entered within the rostered shift.
- Staff must not alter or enter data on behalf of another staff member unless under direction of the staff member responsible for the care.

Education and support

- Each allied health team/service should have a data champion. This role is to promote data collection capabilities within their team/service and wider organisation.
- All new users should receive standardised training on how to use the system/tool before initial use and receive refresher training if there is any functionality change.
- All new users should be assessed by someone suitable within 5 days of beginning use.
- Managers should receive additional training and support on system utility and reporting functionalities.

Roles and responsibilities

Along with implementing operational business rules/guidelines, Table 1 below provides guidance on roles and responsibilities to achieve data accuracy.

Table 1. Key performance indicator guidance

Role	Responsibility
Allied health staff (registered or equivalent and support staff, e.g. assistants)	<ul style="list-style-type: none"> • Can articulate the daily use of the data collection system/tool. • Has received standardised training in how to use the system/tool, and how to access appropriate data. • Has been 'checked' by a data champion/colleague/senior within five (5) days of receiving training, assessing they can use the system/tool correctly. • Maintains accuracy by entering clinical, non-clinical and unmet need data daily (as appropriate).

Team/service data champion	<ul style="list-style-type: none"> • May provide education to new users on use of the system/tool • Assesses all new staff within 5 days of starting use of the system/tool ensuring they can use the system/tool correctly. • Acts as lead/advocate within own team/service with regards to data collection practices
Team/service leader or coordinator	<ul style="list-style-type: none"> • Undertakes routine checks to ensure staff have entered data accurately. • Completes monthly reporting requirements to identify staffing caseloads, patient volumes and work-flow across the wards. • Manages and maintains requirements for new staff. • Uses activity data to support the strategic goals of the DHB • Uses activity data to review performance across all staff within their relevant team/service to support improvement in clinical care and/or practice. • Incorporates activity data with routine/annual performance appraisals of staff. • Facilitates annual clinical file audit for each staff member, cross-checking clinical notes with data collection system/tool entry.
Operational managers and professional leads	<ul style="list-style-type: none"> • Enables and advocates for allied health data to be included in DHB 'Score Cards' • Monitors and addresses anomalies or concerns of data integrity in a reasonable manner to improve performance.
System/tool coordinator	<ul style="list-style-type: none"> • Identifies challenges and enhancements for ease of system use • Works with the allied health teams/services to identify and develop education and training resources. • Supports seniors/managers/leaders in maintaining data integrity. • Supports seniors/managers/leaders in developing and maintaining reports.