STRATEGIC IMPROVING INFORMATION PROGRAMME BOARD
Meeting May 14th 2009
Agenda item 12

Data Quality programme

Background

One of the priority areas highlighted b the Healthcare Informatics Review in 2008 was that of data quality. In response, the NHS Information Centre established a Data Quality programme.
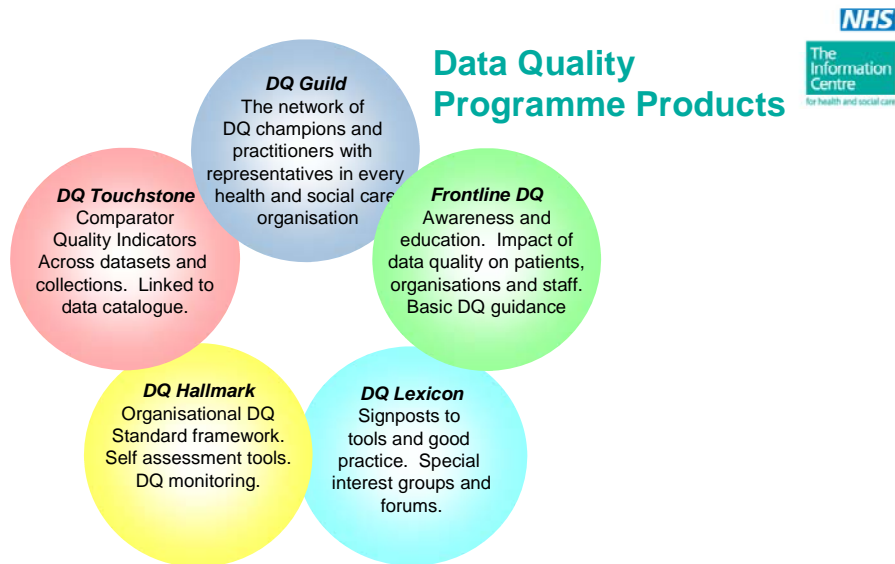
Vision and approach of the programme

The programme has been established to improve the quality of data throughout the NHS and Social Care by:

• Raising awareness about the impact of data quality
• Helping data suppliers to improve data quality
• Providing data suppliers and data users with a data quality grading scheme.

The Board has recognised that data quality is 'everybody's job but nobody's responsibility." There is no single body responsible for data quality in health or social care. It has recognised that different arrangements are in place for health and social care.

The Board itself does not have decision-making authority. However, it has invited membership from key organisations (SHA, PCT, acute trust, mental health trust, the Audit Commission, Care Quality Commission, the Information Standards Board, the Department of Health, NHS Connecting for Health, the Information Centre).

Data Quality Programme Products

DQ Guild The network of DQ champions and practitioners with representatives in every health and social care organisation

DQ Touchstone Comparator Quality Indicators Across datasets and collections. Linked to data catalogue.

Frontline DQ Awareness and education. Impact of data quality on patients, organisations and staff. Basic DQ guidance

DQ Hallmark Organisational DQ Standard framework. Self assessment tools. DQ monitoring.

DQ Lexicon Signposts to tools and good practice. Special interest groups and forums.

www.ic.nhs.uk/dataqualityprogramme

The central, authoritative source of health and social care information.

The Board aims to provide a mechanism for fixing high priority, high impact DQ problems that nobody owns. It does this by exploiting the authority, range of representation and networking capability of the DQ Board members. The Board prioritises and analyses the issues raised, assigns responsibility for addressing the problems so that there is some management through to completion.

It was always intended that the programme target the needs of both health and social care. Upto now, it has focussed on healthcare issues as they apply to coding and its use for Payment by Results, the Secondary Uses Service, etc.

It is already having some impact in terms of healthcare, and has been endorsed by Christine Connelly and others as an important and valuable programme.

Relevance to adult social care

Data quality is already a hot topic for adult social care. The three regional seminars have been used to raise awareness of the programme with local authority/social care audiences. It is clear that there is interest in this programme. Over 100 people from the seminars have signed up for the DQ Guild.

Its importance is growing because:

- In social care, we are just beginning to work on am operational standard for the adoption and use of the NHS Number.
- Annual data collections for social care are not subject to the same use of standards or automated handling. Concerns are routinely expressed about the variability of the data recorded and submitted as part of these collections, as it undermines the value of the aggregated data for comparative purposes.
- Arrangements and approaches for information governance and data quality in their widest sense are left to local discretion or management for adult social care.

Some current issues being discussed at the Board have relevance to adult social care:

- The importance of record keeping as an area of work requiring a more rigorous approach. Numerous guidance documents are available, from different organisations, most recently guidance has been published by the Royal College of Physicians. The DQ Programme intends to review these for relevance to health and social care. This should usefully include a review (and where appropriate) a refresh of any guidance aimed at a social care audience. This would complement the SIIP's work on the social care record.
- Consideration of the approaches to information governance, and particularly the role and use of the IG toolkit. This is currently discretionary, but required for N3 connections. There are concerns about its structure, content and status in the context of NHS organisations. It is now being extended to cover social care and local government. The SIIP's involvement in these discussions would be timely, to ensure that the IG Toolkit is fit for the purposes for which we wish to use it.
- The range of products being developed, and the building up of local interest through the DQ Guild is having an impact in terms of raising the profile of data quality. We could similarly benefit from this approach.

Recommendation

It is therefore proposed that:

1. The SIIP endorse the DQ programme as one which has relevance to adult social care.
2. Engagement is sought with local authorities through national and regional ADASS IMG.
3. The SIIP is represented on the DQ Board by Linda Whalley and Penny Hill.
4. Upto three additional representatives for the SIIP are sought from local authorities, through the IMGs.

L Whalley
6th May 2009