Friday 16th August 2013

To: LHB Head of Information Services

CC: Director of Operations, Department of Health & Social Services, Welsh Government
Andrew Sallows, Delivery & Support Unit
Operational Services (Data Acquisition) Team, NHS Wales Informatics Service
Information Standards Team, NHS Wales Informatics Service

Dear Colleagues,

EDDS Data Consistency Standards

This letter formally mandates the introduction of the Emergency Department Data Set (EDDS) Data Consistency standards for NHS Wales.

EDDS data are submitted monthly to the national database at the NHS Wales Informatics Service (NWIS) by Local Health Boards (LHBs). This is used to support the planning and management of healthcare services through the ongoing monitoring of demand for, and provision of, Accident and Emergency services at both a local and national level.

In order to help address issues of data quality across Wales, a Data Quality Improvement Project was established through the Corporate Health Information Programme (CHIP) in March 2007, which had the overall objective of raising the profile of data quality and implementing a revised approach with a view to securing demonstrable improvements. This programme is now being taken forward by the Data Quality Team within the Information Services Division, NWIS.

In 2010, a set of data validity standards for EDDS data were introduced, which were designed to check submitted data to ensure that they were being provided in the agreed format and, where applicable, that they were populated with a nationally-agreed value as defined in the NHS Wales Data Dictionary. Whilst being a useful initial check of the data, this process in itself does not guarantee that the data are accurate.

To further enhance the data quality checks, a set of data consistency standards are to be introduced for EDDS data from August 2013, to be applied to 2013/14 activity data onwards. These will check submitted EDDS data to ensure *related* data items for the same patient are consistent with one another. These checks build upon a small number of new data quality checks[1] that were introduced in June 2012 in order to comply with requirements issued by the Welsh Government (WG) for the reporting of performance against the 4 & 8 hour wait targets[2]. The introduction of a broader set of data quality standards and an updated set of tools to monitor the quality of the EDDS data is in response to the increasing requirement for accurate and robust emergency department data.

[1] Letter issued by David Hawes 29th June 2012
http://howis.wales.nhs.uk/sitesplus/documents/1059/20120404%20EDDS%20Data%20Consistency%20Standards%20v4%20%28FINAL%29.pdf

[2] Letter issued by Roger Perks 29th March 2012 http://howis.wales.nhs.uk/sitesplus/documents/1059/20120329%20-%20Letter%20-%20Unscheduled%20Care%204%20%26%208%20Hour%20Measurement%20and%20Reporting.pdf

In developing the new indicators, NWIS consulted with NHS Wales organisations and a range of other stakeholders. These were widely accepted as a mechanism for improving the data quality of the dataset. Performance against the standards will be monitored using a new monthly Data Consistency Performance Monitoring Report, similar to the reports currently used to monitor APC data consistency, and also EDDS data validity. So as to align the EDDS Data Consistency Standards with similar standards being applied across other national patient-level data sets, the targets for performance have been revised from 100% to 98%.

Performance against the standards will be published on the NWIS Data Quality website, which can be accessed via the following link:

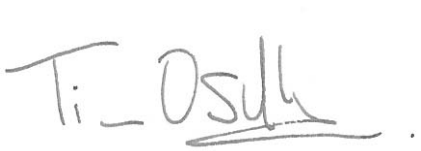
http://howis.wales.nhs.uk/dataquality

The full set of data consistency standards are listed in Appendix A.

To enable LHBs to monitor the data quality of their own submissions to the NHS Wales Data Switching Service (NWDSS), new data consistency checks were incorporated into the Validation at Source Service (VASS) prior to the deadline for submissions of October data on 12th November 2012.

Should you have any queries, please contact David Hawes, Information Standards Manager, NWIS on 029 2050 2571 or via email – david.hawes@wales.nhs.uk.

Yours sincerely,



Tim O'Sullivan
Head of Information
NHS Wales Informatics Service

Appendix A

DATA CONSISTENCY INDICATORS FOR EDDS ACTIVITY DATA

The following table outlines the new data consistency indicators. The logic outlines the general reasoning as to the use of such a check and should not be regarded as a complete description of the check itself.

Full descriptions and the underpinning SQL logic of each of these checks can be found on the VASS website:

http://nwdss.hsw.wales.nhs.uk/NwdssMerge/VASS/

#	Data Item 1	Data Item 2	Logic	Target* (% Consistent)
Date / Time Checks				
1	Administrative Arrival Date/Time	Administrative End Date/Time	Administrative Arrival Date / Time <= Administrative End Date / Time.	98%
2	Administrative Arrival Date/Time	Treatment End Date/Time	Administrative Arrival Date / Time <= Treatment End Date / Time.	98%
3	Birth Date	Administrative Arrival Date	Birth Date <= Administrative Arrival Date.	98%
4	Birth Date	Administrative End Date	Birth Date <= Administrative End Date.	98%
5	Birth Date	Health Event Date	Birth Date <= Health Event Date.	98%
6	Birth Date	Treatment End Date	Birth Date <= Treatment End Date.	98%
7	Health Event Date/Time	Administrative Arrival Date/Time	Health Event Date / Time <= Administrative Arrival Date / Time.	98%
8	Health Event Date/Time	Administrative End Date/Time	Health Event Date / Time <= Administrative End Date / Time.	98%
9	Health Event Date/Time	Treatment End Date/Time	Health Event Date / Time <= Treatment End Date / Time.	98%
10	Treatment End Date/Time	Administrative End Date/Time	Treatment End Date / Time <= Administrative End Date / Time.	98%
11	Treatment End Date	Treatment End Time	If Treatment End Date is valid, then Treatment End Time must be populated with a valid value. (and vice versa)	98%
AWISS-Related Checks				
12	Activity at Time of Injury	Road User	If 'Activity at Time of Injury' = 06 (Road Traffic Collision), then 'Road User' must be populated with a valid value.	98%
13	Activity at Time of Injury	Sport Activity	If 'Activity at Time of Injury' = 03 (Sports), then 'Sport Activity' must be populated with a valid value.	98%

#	Data Item 1	Data Item 2	Logic	Target* (% Consistent)
14	Attendance Group	Activity at Time of Injury	If 'Attendance Group' = 11 – 15 (i.e. injury), then 'Activity at Time of Injury' must be populated with a valid value.	98%
15	Attendance Group	Injury Location Type	If 'Attendance Group' = 11 – 15 (i.e. injury), then 'Injury Location Type' must be populated with a valid value.	98%
16	Attendance Group	Mechanism of Injury	If 'Attendance Group' = 11 – 15 (i.e. injury), then 'Mechanism of Injury' must be populated with a valid value.	98%
17	Attendance Group	Road User	If 'Attendance Group' = 20, 30 or 99 (i.e. non-injury), then 'Road User' must = 98 (Not Applicable – Non Injury / Not a Road User).	98%
18	Attendance Group	Sport Activity	If 'Attendance Group' = 20, 30 or 99 (i.e. non-injury), then 'Sport Activity' must = 98 (Not Applicable – Non Injury / Non Sport Injury).	98%
Other Checks				
19	Arrival Mode	Ambulance Incident Number	If 'Arrival Mode' = 01 (Ambulance), then 'Ambulance Incident Number' should not be left blank. If 'Arrival Mode' = 02 – 07 or 20, then 'Ambulance Incident Number should be blank.	98%
20	Attendance Category	Alcohol Indicator	If 'Attendance Category' = 01 (New Attendance) or 03 (Unplanned Follow-Up Attendance), then 'Alcohol Indicator' must equal 01 (Yes), 02 (No) or 03 (Don't Know). If 'Attendance Category = 02 (Planned Follow-Up Attendance), then 'Alcohol Indicator' must = 04 (Not Applicable – Planned Follow-Up Patient).	98%
21	Attendance Category	Appropriateness of Attendance	If 'Attendance Category' = 01 (New Attendance) or 03 (Unplanned Follow-Up Attendance), then 'Appropriateness of Attendance' must equal 01 (Appropriate Attendance) or 02 (Inappropriate Attendance). If 'Attendance Category = 02 (Planned Follow-Up Attendance), then 'Appropriateness of Attendance' must = 03 (Not Applicable – Planned Follow-Up Patient).	98%
22	Attendance Category	Arrival Mode	If 'Attendance Category' = 01 (New Attendance) or 03 (Unplanned Follow-Up Attendance), then 'Arrival Mode' must be a valid value between 01 – 20.	98%
23	Attendance Category	Triage Category	If 'Attendance Category' = 02 (Planned Follow-Up Attendance), then 'Triage Category' must be 06 (See & Treat).	98%
24	Attendance Group	Outcome of Attendance	If 'Attendance Group' = 30 (Dead on Arrival), then 'Outcome of Attendance' must be 11 (Dead on Arrival).	98%
25	Postcode	Local Health Board of Residence	Check to ensure that the submitted 'Postcode' lies within the boundaries of the submitted 'Local Health Board of Residence'.	98%
26	Referrer Code	Referring Organisation Code	A check to ensure that the 'Referrer Code' is registered to the submitted 'Referring Organisation Code'.	98%

A data consistency indicator will check whether *related* data items in submitted EDDS data are consistent with one another. For example, the Treatment End Date/Time cannot be reported as occurring before the Treatment Start Date/Time would require investigation and correction.

* The target refers to the percentage of patient records within EDDS that should be correctly populated with consistent values for the associated data items at any point in time. Performance will be monitored on both a financial year-to-date and month-by-month basis.