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Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board

**Reference Number:** UHB 298  
**Version Number:** 1  
**Next Review Date:** 15 Sep 2018  
**Previous Trust/LHB Reference Number:** N/A

## DATA QUALITY POLICY

### Policy Statement

High quality data in all settings is critical for improving patient and service user care, performance monitoring, and planning services. In relation to personal data this is in line with Principle 4 of the Data Protection Act 'Personal data shall be accurate and where necessary kept up to date' and is an important aspect of the Information Governance agenda. The Health Board is committed to implementing programmes of work within the organisation to address data quality, and ensure that where data is processed within the organisation, controls are in place to ensure the data is kept accurate and where necessary up to date. The Health Board will deliver this through the management accountabilities and responsibilities framework. The Board will be given assurance as to whether the UHB is meeting its obligations by reporting through its information governance assurance framework.

The ability of the Health Board to generate, use and share good quality data effectively and to demonstrate this objectively is paramount to the business of healthcare. High quality data gives the Health Board assurance that all data and derived information is reliable, supports decision making and the delivery of the best possible care.

The Health Board aims through this policy to give a clear statement of intent as to how it will organise and meet its obligations in processing data to the highest standards.

### Policy Commitment

Key components of data quality include; accuracy, completeness, validity, timeliness, free from duplication or fragmentation, defined and consistent. Data from all areas should be recorded and processed at all levels in the Health Board using relevant skills and knowledge.

The Health Board has set 8 key objectives in order to achieve the policy aims. They are:

- Data is accurate and up to date:
  - Correct and accurately reflects what actually happened
  - Precise and includes all data processed in the organisation
- Data is complete: Data should be captured in full and where applicable a valid and traced NHS number must be included to support operational use.
- Data is valid
  - Data should be held in a format which conforms to recognised national standards
  - Must be mapped by codes to national values where these are in existence
  - Held in computer systems that are programmed to only accept valid entries

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wherever possible

- Data is timely
  - Data should be collected at the earliest opportunity, preferably at the time and place of the activity taking place
  - Data is available when required for its intended use
- Data is free from duplication and fragmentation: Patients must not have duplicated or confused patient records e.g. should not have two or more separate records held on Patient Management Systems.
- Data is defined and consistent: The data being collected should be understood by the staff collecting and interpreting it.
- Coverage: Data from all areas of activity - clinical or corporate should be recorded in the appropriate place and format.
- Data quality management: At every level across the Health Board those managing data quality must have the appropriate skills and knowledge.

All employees are required to adhere to this policy. Inappropriate use of data may lead to disciplinary action. Serious breaches, for example disclosure of person identifiable information, theft and misuse of information technology may constitute gross misconduct and lead to dismissal and possibly police involvement.

### **Supporting Policies, Procedures and other Written Control Documents**

This policy and the supporting guidance together with its supporting procedures describes the UHB's aim, objectives and operational organisation in regard to discharging its obligations in respect of the quality of information and data it processes.

### **Scope**

This policy applies to all Health Board staff whether permanent, temporary, or contracted including students, contractors or volunteers in all locations and those with Honorary Contracts.

### **Equality Impact Assessment**

An Equality Impact Assessment has been completed for the overarching Information Governance Policy one element of which is Data Quality. The assessment can be found [insert hyperlink when approved] An action plan has been developed to address those areas.

### **Documents to read alongside this Procedure**

Data Quality Operational Management and Responsibilities  
[Records Management Policy](#)  
[Records Management Retention and Destruction Protocol](#)  
 Validation at Source System (VASS) checks mandated by Welsh Government.  
 Data Standard Change Notifications (DSCNs) issued by the National Wales Informatics Service  
 Other relevant documents mandated by Welsh Government

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	such as the “Rules for Managing Referral to Treatment Waiting Times” UHB Standard Operating Procedures for routine Data Quality checks linked to the 8 key objectives as described in the Data Quality Operational Management and Responsibilities Procedure
<b>Approved by</b>	People, Planning and Performance Committee
<b>Accountable Executive or Clinical Board Director</b>	Director of Public Health (Acting Director of Information)
<b>Author(s)</b>	Head of Information Governance and Assurance and Senior Manager, Performance and Compliance

**Disclaimer**

If the review date of this document has passed please ensure that the version you are using is the most to date either by contacting the document author or the [Governance Directorate](#).

Summary of reviews/amendments			
Version Number	Date of Review Approved	Date Published	Summary of Amendments
1	15/09/2016	06/04/2016	New Policy