CHKS
Insight for better healthcare

Clinical coding, data quality and financial assurance

We are the largest private provider of healthcare clinical coding and data quality services in the UK.

What we do

Our focus is on data and payment accuracy in healthcare. Through integrated programmes of analysis, audit and advisory services we help healthcare providers and commissioners ensure that data and payments reflect the patient care delivered.

We have unrivalled experience of working with national bodies, local healthcare providers and commissioners to improve the quality of healthcare information for its many uses including payment, RTT monitoring, and mortality indicators. Through our work managing the PbR assurance framework on behalf of the Audit Commission, Department of Health and Monitor, we delivered over 1,500 audits, assessing over 200,000 patient records amounting to £350m of payments.

We also provide clinical coding services and support to help providers get their data right first time.

Our clients come from all sectors of the health services in all four UK NHS health economies. We work with commissioners, acute trusts, mental health and community providers, as well with all aspects of the independent and private sector, covering both NHS and private healthcare.

Delivered over **1500** audits

Assessed over **200,000** patient records

Amounting to **£350m** of payments

We provide scalable services to suit an organisation's budget and business need

Our services range from one off projects through to integrated data quality improvement services incorporating analysis, audit and advisory services.

- **Analysis of cost and payment data** – focusing on data quality, payment accuracy, and the impact of service delivery on costs and income
- **Audit and assurance of payment data** – clinical coding, outpatient data items and procedures, A&E, critical care, maternity and other data sets
- **Improvement of cost information** - using learning from across the NHS to help trusts increase the accuracy of their cost information
- **Clinical coding** - coding services and support to enable providers, reviews and training to improve the accuracy of coded information and the source documentation it is based on
- **Advisory and consultancy services** – reviewing processes, working with clinicians and supporting managers implement real and sustainable change

All our services are supported ISO 27001, IGT level 3, NHS.NET and N3 connectivity to ensure all patient level information is treated securely and appropriately.

Our areas of work:

- Benchmarking and analysis
- Clinical coding
- Data audit and payment assurance
- Costing
- Consultancy/support

We support:

- Commissioners
- Acute partners
- Mental health/community
- Private healthcare

Benchmarking and analysis

We have a proven track record of analysing payment and healthcare data, through our benchmarking.

Our analysis can be tailored to your needs. From a comprehensive review of all coded data which provides assurance to senior managers on the depth of coding at a trusts, to supporting an integrated audit programme identifying areas for improvement for local NHS staff to investigate and address. Some of our recent work includes:

- **Benchmarking of coded data** – sophisticated casemix and depth of coding reviews will identify where coding can be improved, or where poor source documentation is resulting in under-coding and under-payment
- **Payment data reviews** – covering all areas, including A&E, outpatient and non-tariff areas; focusing on data quality, payment accuracy, and the impact of service delivery on income

- **Pre-freeze coding analysis** – real time analysis of coded data before the cut-off point to improve the accuracy of payments
- **Benchmarking of cost information** – a comprehensive review of unit costs to help trusts improve the accuracy of their cost allocations
- **Bespoke analysis** – such as the application of the non-elective thresholds, reviews of local tariffs and specialised commissioning activity

We also support hospitals to improve the value of their services by linking quality and outcome measures with cost data through our value triangle.

"An excellent robust piece of work that stood the test of arbitration."

Lynn Matthews, *Head of Contracting,* Luton Clinical Commissioning Group.

Clinical coding

We provide clinical coding services for the NHS and independent sector, offering a range of services to support NHS and private healthcare providers to deliver high quality clinical coding including:

- **Clinical coding services** – all of our coders are experienced and ACC qualified and will code activity on site or at distance
- **Query resolution** – working with our clinical coding services provides access to a national organisation with expert, in-depth and up-to-date knowledge of coding practice
- **Clinical coding audit** – as part of our financial assurance services we provide coding audits to support IGT requirements and to ensure payment accuracy
- **Process reviews** – our data quality consultants work in partnership with coding departments to ensure the process in place support efficient and accurate coding, and provide innovative ideas on coding delivery

- **Accreditation of coding departments** – working alongside our accreditation team we are developing a programme of accreditation to kite mark coding and data quality within healthcare provider organisations.

Clinical coding services

We provide clinical coders to help you to deliver a coding service within your organisation. Whether it is short term coding support or outsourced service delivery, our coding team can help you ensure your organisation's coding is delivered in a timely, efficient and effective manner. This flexible approach allows you to make best use of budgets and resource.

In addition to our standard services we offer bespoke solutions to suit specific coding requirements, for example scanning and off site coding.

Clinical coding training

Our TAP approved HSCIC trainers provide a wide range of training, mentoring and coder assessment services to help you develop your coding team capability.

With our training partner, MIAA NHS Clinical Coding Academy, we develop high quality and tailored workshops and materials to deliver your coding training requirements. Workshops include standards and refresher training as well as specialty workshops, including T&O, cancer and obstetrics.

We can also provide introductory courses, for example in mental health services or for clinicians and hospital staff who need a basic understanding of coding and how it relates to key performance measures such as SHMI.

Data audit and payment assurance

We are the main provider of data quality audits and reviews to the NHS and private healthcare sector. Our audit and assurance programmes ensure that patient information is coded, recorded, classified and reported in line with national guidance and local expectations, so that the payments made accurately reflect the care delivered.

Alongside managing the PbR Assurance Framework for the last eight years, we also work with both providers and commissioners in health economies to improve the quality of data and the accuracy of payments.

Building on our background of independent reviews for national bodies, we provide an independent and authoritative view to assure senior managers and other organisations on the accuracy of health care data and the payments made based on this data.

Clinical coding audit

Our coding auditors have experience of over 1,500 auditing clinical audits at every acute trust in the country.

Our clinical coding audit services cover:

- **Information Governance Toolkit (IGT) audits** to deliver your IGT requirements and provide independent assurance of your assessment
- **Payment accuracy reviews** – targeted reviews of specific records prior to the freeze date to ensure coded information, and therefore payment, accurately reflects the work delivered
- **Mortality and palliative care reviews** providing assurance that key coding data which underpins mortality measures are recorded correctly

Broader data quality audits

We also work with health economies to provide assurance across all aspects of payment and performance data.

Recent areas we have reviewed include:

- Zero length of stay (0LoS) emergency admissions
- Referral to Treatment (RTT) waiting list validation
- Non-elective marginal rate review
- Maternity pathways
- Day case vs. outpatient classifications
- Outpatient procedures
- A&E
- Critical care
- Mental health clustering
- Local tariff reviews

Our experienced data quality consultants will also work with local staff, reviewing existing processes, putting in place actions plans to address issues identified, and engaging with clinical staff to improve data capture.

Costing services

With the NHS facing unprecedented financial challenges, a clear understanding of the cost of running an organisation is crucial to identify and realise long-term, sustainable savings.

Accurate costing data provides detailed business intelligence on the activity a hospital delivers, how much it costs to do this, why it costs that much, and how much income is received for that activity.

We provide independent and trusted assurance on the accuracy of your costing data and processes. Our knowledgeable and experienced staff use learning from across the NHS to help trusts increase the accuracy of their cost information.

Quality, costing and income risk programme

We also support hospitals with service reviews and improving the value of its services by linking quality and outcome measures with cost data through our industry leading benchmarking.

Our **value triangle** takes a three dimensional view of trust data to examine the dynamics between quality, cost, length of stay and income. By looking at qualitative performance metrics such as mortality, clinical complications and readmissions, we are able to get a detailed understanding of the links between operating costs and quality of care – enabling Trusts to make informed decisions about the effectiveness and efficiency of the services they deliver.

Advisory services

We are unique in our ability to link all areas of data capture and payment. Our consultants have extensive experience of working with organisations to review processes and implement sustainable change that delivers real improvements.

Our approach is to work in partnership with our clients, so that change and improvement is delivered *with* those responsible, not *done to* them.

- **Turning analysis into action** – we link benchmarking analysis to characteristics in the trust to enable managers to understand the link between data capture, casemix and payment, and to identify areas of concern
- **Identifying the root cause of inaccuracy** – we will review existing processes, identifying pinch points and areas of risk that are impacting on accurate data capture, and then putting in place action plans to address issues identified

- **Helping clinicians understand their role** – we engage with clinicians to ensure information recorded in case notes supports full and accurate coding; from large workshops to direct engagement, we can work with your coding department to improve an organisation's understanding of how clinical information is translated into coded data
- **Accreditation processes** – working alongside our accreditation team we are developing a programme of accreditation to kite mark coding and data quality within providers
- **Linking payment accuracy to broader issues** – we are unique in our knowledge of coding and payment data, and how to link this to wider healthcare intelligence and benchmarking activity, helping to improve quality and safety across the healthcare sector

"CHKS' expertise was very helpful when it came to looking back at case notes, by helping us to find variation and analysing the likely impact of this variation. The focus is now on looking carefully at what happened to each patient from a clinical perspective."

Melissa Baker, *Clinical Information Analyst,*
Betsi Cadwaladr University Health Board

Supporting commissioners

We have a proven track record of analysing and auditing payment data. We work with Clinical Commissioning Groups and Commissioning Support Units to make sure the payments made to providers accurately reflect patient care and that clinical information is recorded in the most appropriate way.
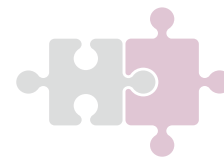
Many organisations include our independent reviews as part of the contract setting process, taking the heat out of contract negotiations through a credible and independent view on data quality and payment accuracy.

Our experience running the PbR assurance framework on behalf of commissioners provides us with the expertise needed to effectively address issues causing contracting disputes between provider and commissioner.

We address all issues around data capture and how this translates to payment. Our most recent work includes:

- Zero length of stay (0LoS) emergency admissions
- Maternity pathways
- Day case vs outpatient classifications
- Outpatient procedure audits
- Referral to Treatment (RTT) waiting list validation
- Local tariff reviews
- Non-elective marginal rate review
- Critical care audit

We also provide benchmarking analysis to support commissioners to understand the impact of casemix, coding and service delivery on payment.

"The quality of the team's work and the robustness of the judgments was exactly what we were looking for, but the most important aspect of the review for us as commissioners was that the Trust's senior clinicians agreed with the findings."

Matt England, *Head of Contracting and Commercial Strategy,* NHS Wakefield Clinical Commissioning Group

Acute partners

We have a proven track record of working in partnership with acute trusts to ensure they are paid accurately and appropriately for the care they deliver.

Our services help trusts deliver work where day-to-day demands mean that there just isn't the time or resources available:

- We provide coding services that deliver accurate coded information
- Our coding audits support internal requirements such as IGT
- Our consultants work with coding and costing departments to supplement ongoing engagement programmes.

Our broader integrated programmes provide assurance to boards and commissioners that processes within trusts are robust and efficient, and that trusts are capturing relevant, accurate and complete information to ensure they are funded appropriately for the care they deliver.

We also work with trusts on an ongoing basis using benchmarking and audits to deliver payment accuracy reviews. These are targeted reviews of specific records prior to the freeze date to ensure coded information, and therefore payment, accurately reflects the work delivered.

Beyond clinical coding we have experience of auditing and assuring data in all acute services, including:

- Emergency admissions
- Referral to Treatment (RTT) waiting list validation
- Critical care
- Maternity pathways
- Outpatient procedures
- A&E
- Local tariff reviews

Mental health and community providers

Accurate data underpinning contracts and payment systems, coupled with good quality cost information is crucial to across the health service.

We have experience in supporting local organisations to improve both. As trusts move away from block contracts or seek to improve the data underpinning them, reliance on accurate data will become more important. Our work with providers as part of the PbR assurance framework has shown that there are many issues that need to be addressed in mental health and community services before the data recorded is consistently accurate across the country. Our services include:

- **Data quality reviews** to assess the accuracy of mental health cluster and community services data underpinning tariff development currencies
- **Costing reviews** to provide an assessment of the costing data and arrangements for producing accurate and robust cost information for national and local use, including local tariff setting

"CHKS helped us review our costing and clustering data. It provided assurance around the work that we are doing and gave us opportunities to learn. The final report was both useful and positive. It reinforced some of our understanding around areas of good practice but also confirmed a number of areas where we needed to focus our efforts to improve."

James Duncan, *Director of Finance and Deputy Chief Executive,* Northumberland and Tyne and Wear NHS Foundation Trust
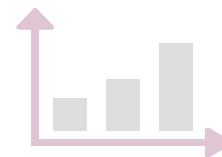
Independent sector

We have a long track record of working with the independent sector, not only supporting the care they deliver on behalf of the NHS, but also supporting data recording and payment accuracy for private healthcare.

- **Clinical coding** – we provide full clinical coding services to many independent sector providers, such as Spire and HCA. We accurately code NHS and private healthcare activity in a timely and efficient manner
- **Audit and assurance** – we work with a number of independent sector providers to help them ensure the data they are being paid on is complete and accurate, through benchmarking analysis, audit and reviews. We also deliver audit services to the main healthcare insurers, providing assurance on the accuracy of hospital contract data and payments
- **CCSD** – we maintain the CCSD schedule of procedures on behalf of the four main insurers

We are also working with providers and insurers in preparing for and delivering the implementation of the Competition and Markets Authority information remedies, which requires the implementation of ICD-10 and OPCS to private healthcare activity.

Case study - How we helped Spire improve the accuracy of coding within its hospitals

Background

Spire Healthcare is a private hospital group with 38 private hospitals throughout the UK. In 2012 it saw 1.1 million patients for outpatient appointments and every year it treats over 930,000 patients. It has been working with CHKS, part of Capita Health Partners over the last six years to improve the accuracy of its coding. Martin Rennison, Director NHS Business, explains how this has improved confidence amongst NHS commissioners and also benefitted Spire's bottom line.

How did you improve?

Using professionally-qualified coders had an instant impact and it was clear that this was improving our data quality. We came to the conclusion that we should contract out all our coding requirements to CHKS and moved all our hospitals across. At the same time we worked with CHKS on a system of quality assurance, which meant we would get monthly reports on the quality of coding followed by regular coding reviews at every hospital.

What benefits have you seen from working with CHKS?

Working with CHKS has improved our coding which in turn means our data quality is much higher. Our coding error rate is less than 4 per cent, which compares favourably with the NHS average of between seven and nine per cent. This is very important when it comes to assuring our commissioners that we are invoicing for the right activity. As a result we are being paid more promptly. Six years ago we had a 60 day debt figure of in excess of £28 million and that figure now sits at around £8 million for a business twice the size.

We needed our commissioners to trust that our data and billing is accurate. We now believe it is and achieving this has improved the relationships we have with commissioners and ultimately helped to grow our business with the NHS.

Martin Rennison, *Director of Commercial Contracting ,* **Spire Healthcare**

For more information please get in touch

CHKS
1 Arden Court, Arden Road,
Alcester, Warwickshire, B49 6HN

01789 761600
www.chks.co.uk
info@chks.co.uk