



Best Practice – Top Hospitals 2018

Special report: Insights from the winners
of the Top Hospitals awards

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Data quality

The accuracy of data has major financial implications for trusts and is therefore a crucial factor in determining a hospital's overall performance. Data can also be the basis for driving improvement within acute services, which means – when analysed and acted upon – high-quality data facilitates high-quality patient care.

The responsibility for accurate clinical coding is shared by both clinicians and coders, so collaboration and communication between these departments is essential. Clinicians need to be aware of the value of accurate coding and their role in enabling it and this was a key feature of trusts that displayed excellence in this category.

In his reflections on the NHS's 70th birthday, Professor Daniel Ray, director of data at NHS Digital, looked at how data has shaped the service since it was first founded in 1948.¹ He argues that data from Hospital Episodes Statistics (HES) has helped shape the NHS since they first came into being in the 1980s and 1990s. It has helped with policymaking, provision decision-making and ensuring patient safety. Professor Ray says: "Their volume and depth is phenomenal", revealing trends and patterns in hospital activity and the production of "a world-leading, unique, database to support health and care research".ⁱ

The NHS Digital and Private Healthcare Information Network (PHIN) will see private hospital performance data and patient records integrated into NHS systems. By recording private healthcare data in the same way as NHS data, the initiative hopes to improve consistency and transparency across the system.

Sarah Wilkinson, chief executive of NHS Digital, says: "Integrating data from private suppliers into NHS systems will improve the completeness of records for patients whose care is split across private and NHS providers. This will improve safety, efficacy and convenience for these patients."ⁱⁱ

The way patient data is stored is significantly changing, too. As the NHS moves towards its paperless vision of the future, the use of electronic health records, the introduction of Global Digital Exemplars and the new Health and Social Care Network (HSCN) are all working to fulfil the aim of joining up and digitising the NHS.

This is good news for patients. As healthcare data becomes more integrated, reliable, and efficient, so does healthcare itself.

Case study: Clinicians and coders working together for data accuracy

Cambridge University Hospitals NHS Foundation Trust has made significant progress in recent years when it comes to the accuracy and efficiency of clinical coding and, for the second year running, the trust is the recipient of the 2018 CHKS data quality award (England).

Anna-Maria Saeb-Parsy, recording care manager at the trust, says data is hugely important, playing a crucial role in informed decision-making. Its status as a world-leading teaching hospital has also contributed to the trust's appreciation of data quality, with much of the research and innovation that takes place there underpinned by data.

Indeed, the trust does not shy away from innovation. The Epic electronic patient record system went live in 2014 and its implementation was a 'game changer' for the trust, bringing with it multiple benefits. Allison Rodgers, head of clinical coding, says: "With Epic, clinicians are recording the data in real time, so that information is available immediately and is easily decipherable for all the coders. Missing case notes are no longer an issue. It's helping us to code more accurately and more efficiently, but not only that – the time we are saving by using the system has given us more time to look at the data and make sure it's as good as it can be."

In addition to the Epic electronic patient record system, for a number of years the trust has been running a clinical coding improvement project named the 'Recording Care Programme', the aim of which is to improve the quality of clinical data by engaging with clinical teams.

"The Recording Care programme brings clinicians and coders together. The coding department is now a lot more integrated with our clinical divisions, and we introduced five new senior coding posts, each aligned to a particular division, and they are the divisional experts for coding queries for clinical staff – not just for consultants, but junior doctors, nursing staff and allied health professionals, too.

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“We’ve also developed a methodology called ‘Clinical Coder One-to-Ones’, where a coder sits down with a consultant and goes through their coded data to highlight why it’s so important that the data is accurate.” This demonstrates to consultants the importance of the data for the trust and for their clinical development. Clinicians recognise that they get out of the system what they put in. What they record about patient care gives them the data and shows them the areas that they need to improve.

These changes are part of a wider cultural shift that has been integral to improving the quality of data, too, Saeb-Parsy explains. “Having a mutually respectful, open culture is hugely important, and consultants and clinical staff need to understand what the role of coders is. For many years coding was seen as a back-office function, so it’s been about spreading awareness that it’s actually a technical role translating what’s been documented into clinical codes. We also needed to make clinical staff aware of the role they play – the more detailed their documentation, the more accurate the coding is.”

The trust has robust processes in place to monitor data quality. This includes a Data Quality Oversight Group and an executive-led Data Strategy Group, both of which meet on a monthly basis to discuss and monitor the quality of data and highlight any areas where action needs to be taken, so any issues that arise are picked up on and resolved quickly.

Case study: Diligence is the key to upholding standards at Moorfields Eye Hospitals

Moorfields Eye Hospital has been outsourcing its clinical coding to University College London Hospital since 2013 and it's a partnership that is clearly working, having significantly contributed to Moorfields winning the 2018 CHKS data quality award (specialists trusts).

Ranjita Sen, head of performance and information at Moorfields, says it's a strong partnership. "The diligence of the coding team ensures the clinical quality of the data is there, and the culture of the trust lays the foundation that they need in order to succeed." She says there's an organisational focus on data quality, and its importance has been strongly embedded across all levels.

The trust has a data quality assurance framework, which is reviewed each year and sets out the policy for data quality management, while the coding team holds regular meetings with clinicians and data quality is discussed at the clinicians' annual appraisals. It has also moved to include some key data quality measures in its integrated performance report. "We very much view data quality as everybody's business at this trust. If you don't have good quality data then you're at the risk of serious consequences – it could put frontline services and patients at risk, lose us money and undermine our accountability."

Sen attributes the win to the stringent processes they have in place to ensure data is accurate and up to date. Any data quality issues are flagged to clinicians by the coding team and clinicians review the records quickly, providing clarification to the coding team if necessary. When it comes to submitting data to commissioners, the information manager does a number of checks for duplicate admissions and non-discharged admissions. Any issues or uncoded episodes are flagged up to the coding team to investigate.

The trust closely monitors data quality, with a visible data quality team that conducts regular audits to ensure staff across the sites are adhering to standard operating procedures and check whether they are asking patients for the relevant information. "We also have an annual external audit of our clinical coding and we take the recommendations made from those audits very seriously – they are built into our work plan. Last year we scored between 99 and 100% on the accuracy of primary and secondary diagnoses and procedures."

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The data quality team has set up a quality coding dashboard where it reports on a number of key metrics, such as average procedures per spell, and that information is then used to benchmark against other trusts. There are few specialist eye hospitals that the trust can benchmark against, so Sen and her team focus on benchmarking against other trusts that have ophthalmology as a speciality.

Sen also cites the introduction of the HGR4+ tariff structure as being very influential in the trust's award win. This was rolled out in April last year and put extra focus on comorbidities and diagnoses, encouraging staff to record these in more detail.

Greg Stephenson, head of coding services at UCLH NHS Foundation Trust, says: "UCLH has been providing a coding service to Moorfields Eye Hospital for the last five years that has continued to go from strength to strength, resulting in the 2018 Data Quality Award. This achievement has been the result of training, diligence and clinical engagement – ensuring that team members are equipped with the skills and knowledge base to deliver accurate coding, diligent in their application, and fostering regular collaboration with clinical service leads. In turn, this has helped drive better activity recording practices and high-quality coding."

References

ⁱ <https://www.digitalhealth.net/2018/07/happy-birthday-nhs-a-look-back-at-its-digital-milestones/>

ⁱⁱ <https://digital.nhs.uk/news-and-events/latest-news/adapt-programme-initiative-launched-to-capture-private-data-in-nhs-systems>