

PWYLLGOR DIGIDOL, DATA AC ARLOESI
DIGITAL, DATA AND INNOVATION COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	22 July 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Data Quality Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Executive Director of Finance
SWYDDOG ADRODD: REPORTING OFFICER:	Anthony Tracey, Digital Director

Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)

Er Gwybodaeth/For Information

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

The purpose of this paper is to update the Digital, Data and Innovation Committee on the Health Board's Information Quality Assurance activities, with a particular focus on the ongoing Data Quality Roadshows.

Cefndir / Background

It is important that the quality of data collected in the healthcare environment is of a high standard and fit for purpose. High data quality leads to effective decision making which in turn results in better patient care, wellbeing and safety. It is essential in the production of management information to enable the efficient running of the Health Board and to maximise the utilisation of resources.

Data quality is the foundation of information and needs to be of a high standard and fit purpose in order to enable the efficient running of the Health Board and to maximise the utilisation of resources. The six dimensions of data quality are defined as:

- **Timeliness:** Data must be available quickly and frequently enough to support information needs and to influence the appropriate level of service or management decisions.
- **Completeness:** Data requirements will be clearly specified and based upon the information needs of the organisation and data collection processes matched to these requirements.
- **Accuracy:** Data should be sufficiently accurate for its intended purposes and captured as close to the point of activity as possible.
- **Consistency:** Data will reflect stable and consistent data collection processes across collection points and over time. Managers and stakeholders should be confident that

progress toward performance targets reflects real changes rather than variations in data collection methods.

- **Precision:** Data captured will be relevant to the purposes for which it is used, capable of evolving to reflect changing needs. Quality assurance and feedback processes are needed to ensure the quality of such data.
- **Validity:** Data will be recorded and used in compliance with relevant requirements, including the correct application of any rules or definitions.

Poor quality data has a significant impact on how the service is managed and affects the quality of care on offer to patients and their families. In the case of some national data sets, the quality of the data also has a direct impact on the reported Health Board performance against the nationally agreed targets issued by Welsh Government.

Asesiad / Assessment

In April 2025, the Data Quality Improvement Manager initiated a comprehensive programme of data quality roadshows across the organisation. These roadshows were developed as a proactive approach to engage staff and raise awareness about the critical role of data quality in healthcare delivery. The sessions were designed to connect the dots between accurate data entry, effective training, and reliable reporting, with the overarching aim of improving the integrity of information captured within the Patient Administration System (PAS). By targeting key administrative and clinical support staff, the initiative seeks to embed a culture of accountability and precision in data handling practices throughout the organisation.

The first phase of the roadshows focused on five key staff groups: ward clerks, Emergency Department (ED) staff, Health Records teams, secretaries, and other administrative personnel. These groups were identified as having significant interaction with PAS and other core systems, making their understanding and engagement essential to the success of the initiative. The primary objectives of the roadshows were threefold: to ensure staff understood the importance of accurate data entry into PAS; to highlight the potential consequences of incorrect or incomplete data on the patient journey, clinical decision-making, and organisational performance; and to increase awareness of the various support teams within Information Services, including Data Quality, Data Standards, and Application Support, along with guidance on how to contact them for assistance.

To launch the initiative, the Information Quality Assurance (IQA) team developed a tailored questionnaire aimed at ward clerks who were the first group to be engaged. This questionnaire was distributed to 104 ward clerks across the Health Board, and a total of 64 responses were received. After removing three duplicate submissions, 60 unique responses were analysed. These responses provided valuable insights into current practices, challenges, and knowledge gaps, and were used to shape the content and focus of the roadshow sessions. Four sessions were held throughout April 2025, with one session delivered each week. Of the 104 ward clerks invited, 55 booked onto a session, and 32 attended. While attendance was lower than anticipated, the sessions generated meaningful discussions and provided a platform for staff to ask questions, share experiences, and gain clarity on data quality expectations.

Following the initial engagement with ward clerks, the next phase of the roadshows is now underway, focusing on Health Records staff. Sessions are currently being planned for late June and into July 2025. This phase will build on the lessons learned from the ward clerk sessions and continue to promote consistent, high-quality data entry practices across departments.

In parallel with the roadshows, the IQA team has also conducted a series of deep-dive audits across various services. These audits are designed to assess current data recording practices, identify areas for improvement, and provide actionable recommendations. The findings from these audits are compiled into detailed reports, which are monitored through the Information Governance Sub-Committee. Each report includes a set of recommendations and actions, with clear timelines and accountability assigned to relevant departments. The goal is to ensure that all patient interactions are recorded accurately and consistently, not only within individual departments and across different sites, thereby supporting continuity of care, operational efficiency, and compliance with data governance standards.

Together, the roadshows and audits represent a coordinated effort to strengthen data quality across the organisation. By fostering greater awareness, providing targeted training, and implementing robust monitoring mechanisms, the initiative aims to create a sustainable culture of data excellence that supports both patient care and organisational effectiveness.

Argymhelliad / Recommendation

The Committee are requested to consider:

- **NOTE** the content of the Data Quality Report
- **NOTE** the continuation of the data quality roadshows, with a targeted focus on challenges identified through feedback and audits, while actively promoting staff engagement with Information Services teams to address specific data challenges.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1.2 That the organisation is discharging its responsibilities with regard to the quality and integrity; safety, security and appropriate access and use of information and data, to support health improvement and the provision of high-quality healthcare.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable

Amcanion Cynllunio Planning Objectives	9 Digital plan All Planning Objectives Apply
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Not applicable
Rhestr Termau: Glossary of Terms:	Contained within the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Digidol, Data ac Arloesi Parties / Committees consulted prior to Digital, Data and Innovation Committee:	Not applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Incomplete or missing data can lead to significant errors in the calculation of financial cost returns, potentially resulting in inaccurate projections, flawed budgeting decisions, and misinformed strategic planning. This can undermine financial reporting integrity and affect overall business performance
Ansawdd / Gofal Claf: Quality / Patient Care:	Poor quality data can lead to the misidentification of patients, which poses serious risks to safety and care continuity. Additionally, service changes may be implemented based on incomplete or inaccurate information, preventing healthcare providers from gaining a full and accurate understanding of patient needs and system performance. This can compromise decision-making, resource allocation, and the overall effectiveness of healthcare delivery.
Gweithlu: Workforce:	Poor data quality can lead to inaccurate workforce planning, misallocation of staff, and ineffective deployment of resources. This can result in increased workload pressures, reduced staff morale, and compromised service delivery, ultimately affecting both employee well-being and organisational performance

Risg: Risk:	The accuracy of Welsh costing returns, which rely heavily on derived Healthcare Resource Groupings (HRGs), is critical for informed financial planning and service evaluation. Inaccurate or incomplete HRG data could undermine the effectiveness of clinical service reconfigurations, potentially preventing the University Health Board (UHB) from achieving its strategic objectives to enhance patient care.
Cyfreithiol: Legal:	Not applicable
Enw Da: Reputational:	Poor data quality can hinder the ability to meet key Delivery Targets set by the Welsh Government, leading to potential reputational damage for the organisation. Inaccurate or incomplete data undermines performance reporting, erodes stakeholder confidence, and may result in increased scrutiny or loss of public trust.
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Not applicable