Data Quality (CDSA)

The CDSA Tool has been developed to report on the completeness of patient demographic and health summary data within the general practice clinical following reports:

- 'Data Quality Dashboard Report' to indicate the overall status of data quality based on the data indicators.
- 'Data Completeness Report' to report the % of completeness for each data indicator.
- 'Data Completeness Patient Graph' to provide a graphical view of the data indicators and allow re-identification of patients where data is missing
- · 'Duplicate Patients Report' to list patient records within the clinical system where duplication is suspected.

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We provide links to the 4th edition fact sheets because the RACGP has not created fact sheets for the current fifth edition. There has details between 4th and 5th editions.

The CDSA Tool is available in CAT Version 3 for clinical systems where the CAT data extract meets to CAT data specifications version 1_12 or higher CAT4 view under the 'Data Quality' tab. Under that tab are four different tabs which are described in more detail below.

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Please note that the percentages shown on the Data Quality Dashboard are an in some cases an average value of the individual indicators. To reaction dashboard is a combination of Allergy Status recorded, Coded Allergy recorded and Reaction Completed.

Generally speaking the Data Completeness Report will give much more detail than the dashboard and is the recommended report to understa

Demographics Ethnicity Data Quality Data Cleansing Allergies	Smoking Alcohol M	leasures Pathol	ogy Disease S	Screening	Co-morbidities	Medications			
CDSA Patient Data Report									
Data Quality Dashboard Data Completeness Report Data Complete		Duplicate Numbe	r Patient Report	Duplicate	Name Patient R	eport			
	.▼ 100%	•	Find	Next					
Data Quality Dashboard Report Date: 01/10/2018 3:04 AM									
	Practice N	lame: Deid	entified Pra	ctice					
Data is taken from the Data Completeness Report and Dupli	icate Patients Repo	rt.	View 5th Edit Guideline						
Allergies and adverse reactions		79.68 %	View 4th Edi Guideline						
Medicines		18.16 %	View 4th Edi Guideline						
Medical History		74.41 %	View 4th Edi Guideline						
Health Risk Factors 67.37 % View 4th Edition Guidelines									
Immunisations		66.46 %	View 4th Edi Guideline						
Relevant Family History		58.49 %	View 4th Edi Guideline						
Relevant Social History		41.49 %	View 4th Edi Guideline						
Non-Duplicate Patients		0.00 %							

D a	The data indicators are based on the data content outlined in the RACGP data recommendations http://www.racgp.org.au/ehealth/summary and are grouped into sections as follows:
I n d	1. Allergies and Adverse Reactions 2. Medicines 3. Medical History 4. Health Risk Factors
i c a t	5. Immunisations6. Relevant Family History7. Relevant Social History
o rs	Detailed data indicator information is provided in Appendix A at the end of this guide. Some indicators may not be available for some clinical systems. These are provided in Appendix B at the end of this guide.
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D at а С 0 m рl et е n е s s R е p 0 rts The Data Quality Dashboard provides a report indicating the overall status of data quality based on the data indicators. It displays each data content se

calculated from the % completeness of each data indicator within the section. Each indicator contributes equal weight to the overall status Indicators th system do not contribute to the overall status.

The 'Traffic Light' status icons will display:

RED: 0 - 60% for all

ORANGE: > 60 - 90% for allergies, > 60 - 75% for the other indicators

GREEN: > 90% for allergies, >75% for the other indicators

An additional section for 'Duplicate Patients' is included. The dashboard status for this section is calculated as the percentage of patients where no pot Note: There will always be some potential duplication that is not an error but with a 'clean' database this should be small and the status icon should be

The Data Quality Dashboard provides links to the relevant RACGP fact sheets which provide information on addressing identified gaps and improving RACGP has not published

updated fact sheets for the 5th Edition of their guidelines, but the recommendations have not changed.

<u>Data Quality Dashboard</u> Report Date: 01/10/2018								
Practice Name: Deidentified Practice								
Data is taken from the Data Completeness Report and Dupli		View 5th Edition Guidelines						
Allergies and adverse reactions		79.68 %	View 4th Edition Guidelines					
Medicines		18.16 %	View 4th Edition Guidelines					
Medical History		74.41 %	View 4th Edition Guidelines					
Health Risk Factors		67.37 %	View 4th Edition Guidelines					
Immunisations		66.46 %	View 4th Edition Guidelines					
Relevant Family History		58.49 %	View 4th Edition Guidelines					
Relevant Social History		41.49 %	View 4th Edition Guidelines					
Non-Duplicate Patients		0.00 %						

D The Completeness Report provides a % of completeness for each data indicator. at

For each data indicator the report displays:

Measure = measure description Q

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Count = the number of data items correctly recorded

Eligible population = the possible number of data items for this measure (the measure denominator) al

% = the count as a % of the eligible population ity

The eligible population is generally Active patients (3 visits in the last 2 years). Where an indicator has a different denominator this is highlighted on the Indicators that are not available for a clinical system are highlighted in the report as 'Not Available'.

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Data Completeness Report		Report Date: 15/12/2011			
	Pra	actice Name: M	ELB2-234		
* Eligible Population = Active patients except where the denomi An Active patient has had 3 visits in the last 2 years	nator is specificied	with the measure			
Measure	Count	Eligible Population*	%		
Allergies and adverse reactions		J			
Allergy status recorded	3915	4035	97.03 %		
Allergy recorded - coded format (denominator = number of allergies for eligible population)	Not Available				
Allergy recorded - description completed (denominator = number of allergies for eligible population)	527	1360	38.75 %		
Medicines	b.	t h			
Medications - coded reason for prescribing recorded (denominator = number of scripts for eligible population)	286	11783	2.43 %		

D The Completeness graph provides a graphical view of the data indicators by patient and allows re-identification of patients where data is missing.

For each data indicator the report displays a patient in one of the following categories:

Q Green = Recorded (all items for this measure are recorded)

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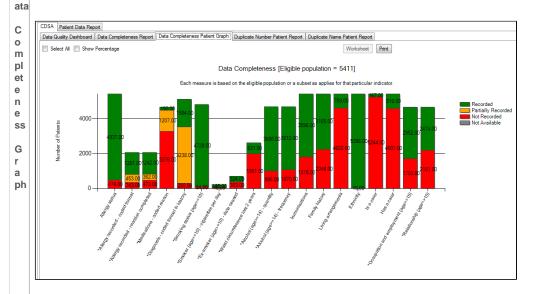
C o m pl et e n e ss W o r k s h e et

Orange = Partially recorded (some items for this measure are recorded)

al Red = Not recorded (no items for this measure are recorded)

Grey = Not Available (no items for this measure are available for recording)

The eligible population is the Active patients (3 visits in the last 2 years). Where an indicator has a subset denominator this is highlighted in the report



Patient data can be exported from the Data Completeness Graph using the 'Worksheet' button.

The worksheet provides patient demographic details and a summary of the data contributing to each indicator. This allows missing data to be easily id

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Selected	. Data Comple	teriess (inedica	‡	±	. Record	\$ \$	\$	‡	\$	‡	÷	•	•	\$	•	•	٠
ID	Surname	First Name	Sex	D.O.B	Allergy Status	Meds coded	Diagnos is coded	Smokin	Waist	Alcohol amount/ freq	Imms	Fam Hist	Living	Ethnicit	Carer	Occupa tion	Relatio
35774	AI35774	A35774	М	09/01/1972	NKA	1/1	3/4	Never Smoked	95	1 on 1- 2d/wk	*	N	NA		NA		N
38908	Al38908	M38908	М	26/03/1977	NKA	1/1	2/2	Smoker		Non drinker			NA	*	NA		
30432	Be30432	J30432	F	29/12/1955	NKA	2/2	5/6	Never Smoked				N.	NA	V	NA		
37615	Be37615	P37615	M	17/06/1978	NKA	1/1	1/1						NA		NA		
36527	Bi36527	L36527	F	04/10/1978	NKA	2/2	3/3	Smoker					NA	V	NA		
33096	Br33096	G33096	F	29/11/2004		1/1	4/4	Never Smoked		age<14	V	×	NA	*	NA		
40681	Ca40681	V40681	М	01/12/1976	NKA	1/1	1/1						NA		NA		
38722	Ch38722	C38722	F	30/03/1978	NKA	1/1	2/2	Ex Smoker 1003200 9		3 on 1- 2d/wk			NA		NA	×	
39789	Ch39789	F39789	F	14/11/1983	Allergies Coded= NA	1/1	1/1	Never Smoked		4 on 7- 11d/yr		×	NA		NA	×	

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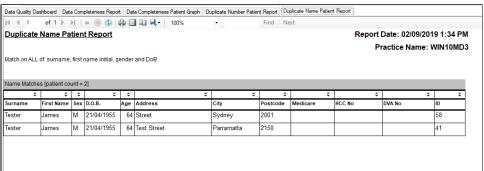
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The Duplicate Patients Report is a list of patient records within the clinical system where duplication is suspected.

The report is divided into 2 parts:

Name match – a match on all of:

Surname, First name initial, Gender and DOB

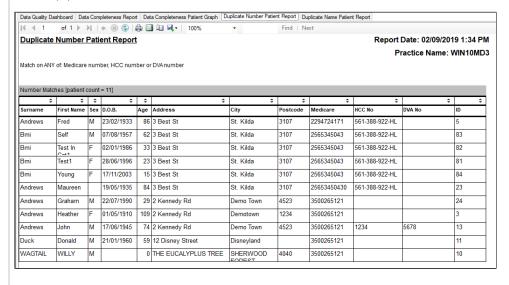


• Number match - a match on any of:

Medicare number Practices may find duplicate Medicare numbers appear if their clinical system CAT extractor is not including the Medicare index

HCC number DVA number

The population is Total Patients.



The report can be sorted by any of the columns. The default sorting is:

- 1. Name match by surname then first name
- 2. Number match by Medicare number then surname

Appendix A: Data Indicators		
Indicator	Numerator	Denominator
1. Allergies and Adverse Reactions		
Allergy status recorded	Number of patients with an allergy status recorded (Allergy recorded or no known allergies)	Active patients

Allergy recorded – coded format	Number of allergies recorded that are not NKA from a coded table of available allergens	Number of allergies for active patients recorded that are not NKA			
Allergy recorded – reaction completed	Number of allergies recorded that are not NKA that have content in the reaction field	Number of allergies for active patients recorded that are not NKA			
2. Medicines					
Medications – coded reason for prescribing	Number of prescriptions for current medications in active patients where the reason	Number of prescriptions for current medications recorded for active patients			
	for prescribing is recorded from a coded pick list				
3. Medical History					
Diagnosis recorded – coded format in past history	Number of diagnoses entered in the past history which have been entered in a coded format	Number of diagnoses recorded in the past history for active patients			
4. Health Risk Factors					
Smoking status recorded	Number of active patients 10 years and over for whom smoking status is recorded	Active patients 10 years and over			
Smoker – Cigarettes per day recorded	Number of active patients 10 years and over recorded as smokers for whom the number of cigarettes has been recorded	Active patients 10 years and over recorded as smokers			
Ex-smoker – Date ceased	Number of active patients 10 years and over recorded as ex- smokers for whom a cease date is recorded	Active patients 10 years and over recorded as exsmokers			
Waist circumference recorded in	Number of active patients for whom a waist circumference is recorded within the last 2 years	Active patients who are overweight (BMI 25) or underweight (BMI < 18.5)			
overweight/underweight patients					
Alcohol Status – quantity recorded	Number of active patients 14 years and over who have alcohol quantity recorded	Active patients 14 years and over			
Alcohol Status – frequency recorded	Number of active patients 14 years and over who have alcohol frequency recorded	Active patients 14 years and over			
5. Immunisations					
Immunisations recorded Active patients with immunisations recorded in the system		Active patients			
6. Relevant Family History					
Family history recorded	Active patients with family history recorded in the system	Active patients			
7. Relevant Social History					
Living arrangement recorded	Active patients with living arrangements recorded	Active patients			
Ethnicity recorded	Active patients with ethnicity recorded	Active patients			
Is a carer recorded	Active patients with 'Is carer' recorded	Active patients			
Has a carer recorded	Active patients with 'has a carer' field recorded	Active patients			
Occupation and employment status recorded	Active patients with occupation and employment status field recorded	Active patients 15 years and over			
Relationship status recorded	Active patients with relationship status field recorded	Active patients 15 years and over			
8. Duplicate Patients					
Duplicate Patients	Patients who have a match on any of the following: Surname, First name initial, Gender and DOB Medicare number HCC number DVA number A patient is only counted once regardless of the number of items where there are matches	Total Population			

Appendix B: Indicator unavailability by Clinical System	
Medical Director	The following indicators are not available for collection from Medical Director: Allergy recorded – coded format Living arrangement recorded Is a carer recorded Has a carer recorded
Best Practice	All indicators are available
Medinet	The following indicators are not available for collection from Medinet: Allergy recorded – coded format Medications – coded reason Living arrangement recorded Is a carer recorded Has a carer recorded