

Westchester Medical Center Level 1 Adult Trauma Program: Data Quality Plan

Purpose

The Data Quality Plan aims to ensure the accuracy, completeness, and reliability of data within the trauma registry at Westchester Medical Center's Level 1 Adult Trauma Program. This plan outlines a systematic approach to maintain high data standards, facilitating performance improvement, compliance, and quality care delivery.

Objectives

- To maintain high data quality and accuracy within the trauma registry.
- To promote accountability and responsibility among trauma registrars.
- To support continuous improvement initiatives through reliable data.
- To align with Trauma Quality Improvement Program (TQIP) standards and guidelines.

Data Quality Assurance Process

1. Monthly Internal Audits

- Trauma Registrars will conduct internal audits monthly on an assigned peer-review basis, reviewing 10% of the data abstracted.
- This regular audit process will identify discrepancies and maintain a consistent standard of data integrity.

2. Utilization of an Internal Audit Tool

- An internal audit tool will be used during monthly audits to standardize the audit process.
- This tool will cover all essential aspects of data abstraction, ensuring comprehensive data validation.

3. Peer Review by Trauma Registrars

- Trauma Registrars will participate in a peer review process, examining each other's work to identify potential errors or inconsistencies identified in benchmark or other aggregate reports.
- This promotes accountability, fosters collaboration, and provides opportunities for knowledge sharing and education.

4. Creation of Report Cards

- Report cards will be generated to document any discrepancies found during audits, with detailed notes for each issue identified.

9. OPERATIONAL MANAGEMENT GUIDELINES

C. Data Quality Plan

- These report cards will be sent to the original registrar for review and correction, promoting ownership of data quality.

5. Registrar Corrections

- Registrars will be responsible for correcting any discrepancies identified in the report cards.
- This step ensures that the responsibility for data accuracy remains with the registrar who initially abstracted the data, reinforcing accountability.

6. Involvement of Trauma Program Manager (TPM) and Trauma Performance Improvement Nurse Coordinator (TPIC)

- The TPM and TPIC will review abstracted data, providing an additional oversight layer to guide registrars, address concerns, and enhance the quality control process.
- Their involvement ensures a higher level of accuracy, particularly for critical data points.

7. Multi-Layer Review Process

- A multi-layer review approach will be employed to validate critical data elements, such as mortality data and performance improvement (PI) filters.
- This process ensures that essential data is accurately recorded and monitored, reducing the risk of errors.

8. Utilization of TQIP Benchmark Reports

- Trauma Quality Improvement Program (TQIP) benchmark reports will be used as a tool to validate trauma registry data.
- These reports will aid in comparing data against national benchmarks, identifying areas for improvement, and ensuring adherence to best practices.

Data Quality Monitoring and Improvement

- **Regular Feedback Sessions:** Scheduled monthly meetings will be held to discuss audit findings, share best practices, and address areas needing improvement.
- **Continuous Education:** Trauma registrars will receive ongoing training to enhance their data abstraction skills and maintain compliance with registry standards.
- **Performance Improvement Measures:** Key performance indicators (KPIs) will be monitored and reviewed periodically to identify trends and implement corrective actions.

Commitment to Data Integrity

Westchester Medical Center's Level 1 Adult Trauma Program is committed to maintaining the highest standards of data quality. This multi-step approach demonstrates dedication to data accuracy, fostering a culture of continuous improvement and ensuring that the information gathered is reliable. By upholding data integrity, the program supports its mission to provide high-quality care and enhance patient outcomes.

Effective Date: December 2023 **Review Date:** December 2026