

## OUTCOME of Welsh Information Standards Board (WISB) Appraisal

<b>TITLE OF ANALYSIS METHODOLOGY:</b>	Clinical Coding Completeness Standard (Monthly)
<b>REF. NO.</b>	ISRN 2013 / 013
<b>SPONSOR OF STANDARD:</b>	Kevin Flynn, Director of Delivery and Deputy Chief Executive, NHS Wales, DHSS
<b>APPROVAL HISTORY:</b>	n/a
<b>DATE CONSIDERED BY WISB:</b>	21 <sup>st</sup> November 2013
<b>WISB COMMENTS:</b>	
<ol style="list-style-type: none"> <li>1. Members noted that a definition of 3 months equalling '90 days or less' had been included. They noted that the recently-procured benchmarking tool reported against whole calendar months rather than by 90 days prior to the reporting date. They also noted that the numerator and denominator referred to the 'reporting month'. They queried whether this actually implied reporting by calendar month. They suggested that the centrally-produced measure methodology should be shared with the benchmarking tool provider.</li> <li>2. Members queried by what 'units' the result of dividing numerator by denominator was reported: for example, was it by specialty, hospital, Health Board provider or Health Board of residence? They suggested that this should be clear in all analysis methodologies.</li> <li>3. Members queried whether there should be a more comprehensive business description of the measure and whether this would be included under the Detailed Specification / Definitions section.</li> <li>4. Although it was noted that Birth Episodes were excluded, there was no rationale given.</li> <li>5. Members understood that the lack of specificity in this target allowed variations in coding completeness over time or by hospital or specialty.</li> <li>6. Members considered the inclusion of the SQL code: the majority felt that it was informative for Service analyst teams despite its being specific to PEDW. It was also felt that publishing it would enable any flaws in logic or mistakes to be identified.</li> <li>7. In relation to this, Members queried whether there should be a non-technical description of the SQL code included.</li> </ol>	
<b>ACTION(S) TO BE TAKEN BY SUBMITTER AND/OR SPONSOR:</b>	
<ol style="list-style-type: none"> <li>1. Submitter to confirm the 'reporting currency such as by specialty, hospital or Health Board.</li> <li>2. Submitter to confirm the significance of 90 days, 3 months and reporting month.</li> </ol>	
<b>WISB APPRAISAL ASSESSMENT:</b>	<b>Accredited</b>
<b>WISB APPRAISAL ASSESSMENT KEY:</b>	1. <b>Accredited:</b> This Analysis Methodology has been

	<p>appraised by WISB and is felt to be fit for purpose in that it:</p> <ul style="list-style-type: none"> <li>- meets the business requirement</li> <li>- has clarity of scope</li> <li>- is reproducible by local organisations where appropriate</li> </ul> <p><b>2. Refinement Required:</b> WISB suggests that modifications are made to the Analysis Methodology as outlined in the appraisal Outcome.</p>
<b>STATUS OF DATA CONTENT:</b>	<b>Not WISB Reviewed</b>
<b>WISB DATA CONTENT ASSURANCE STATUS:</b>	<p><b>1. WISB Reviewed:</b> the data used in this Analysis Methodology has been through the Information Standards Assurance Process</p> <p><b>2. Not WISB Reviewed:</b> some or all of the data used in this Analysis Methodology has not been through the Information Standards Assurance Process. This may include data flows which predate the establishment of WISB.</p>