

## Data Quality Framework:

The accuracy and completeness of OHCA data is vital to the usefulness of the OHCAR register. Responsibility for data gathering lies with the Emergency Medical Services team who attend the OHCA scene and prepare the Patient Care Reports (PCRs). Data variables are manually entered onto an electronic database before being forwarded to OHCAR. This database is then forwarded to OHCAR together with a scanned copy of each PCR for case-by-case validation.

OHCAR also operates a 'Missing Case Search' system, which is performed on a monthly basis and repeated annually in order to identify cases that were not processed through the OHCAR data collection system.

OHCAR works with NAS and DFB to enhance completeness by providing quarterly reports which include a summary of the availability of core data elements pertaining to the OHCA cases. NAS then devises and circulates OHCAR summary reports to ambulance stations on a quarterly basis. DFB also provide each practitioner access to their quarterly reports.

### Data Quality procedures

The following data quality checks are performed:

- Case duplicate searches
- Checking for inconsistent and/or conflicting data values
- Validation of initial data entries and against OHCAR inclusion criteria
- Clinical expertise is provided on a case-by-case basis by the OHCAR Steering Group when required.

### Data Quality key performance indicators and metrics

Data quality is maintained by a regular audit of the database, to look for inconsistencies, by the OHCAR staff. When the OHCAR Manager is satisfied that the data is accurate, it is then used for reporting purposes.

## Data Quality Audits

The OHCAR Manager is responsible for data quality, prior to its inclusion to the OHCAR Master database. The data is checked at three different stages before it is used. OHCAR uses the PCR, published obituary notices, and the Hospital data to verify data completeness and accuracy.

## Data Quality improvement initiatives

OHCAR strives to improve quality through the following initiatives;

- Comprehensive checking of data accuracy prior to addition to OHCAR master database
- Annual reduction in the number of cases that cannot be located after arrival at Hospital
- Greater accuracy in the incident location, via the use of Eircodes
- Continual review of OHCAR database to prevent case duplication