

# PDR Data Quality Procedure

Effective 2014/15, PSBC produces **Quarterly Cumulative DQ Reports** to streamline our data quality (DQ) process, which is explained below.

## Hospitals that have the DQ Tool installed

Please run your DQ Tool each time you do a file submission. This can be done one of two ways:

1. Run the DQ Tool **during** Step 8.2.3.4 Data Quality Checks in your Reference Manual (page 165) during the Period End Procedure, **OR**
2. Run the DQ Tool **immediately following** your Period End Procedure and file submission (e.g. run the DQ Tool for Period 5 after you have submitted Period 5).

All errors corrected between the time you run your DQ Tool and the next time you do a Period End Procedure will be captured in the next file submission.

In all cases, please:

- correct all your errors;
- rerun the DQ Tool once you have corrected all your errors;
- document any exclusions (with an asterisk (\*), highlighting, etc.) and the reason they are being excluded; and
- submit your documented exclusions back to PSBC either by secure FTP, courier, or fax.

On a quarterly basis (Periods 1-3, Periods 4-6, Periods 7-9, and Periods 10-13), a **Cumulative** Supplementary DQ Report will be produced and posted on the eNG (or shared folder)

In all cases, please:

- correct all your errors by the due date (usually three weeks after the report is produced);
- document any exclusions (with an asterisk (\*), highlighting, etc.) and the reason they are being excluded;
- submit your documented exclusions back to PSBC either by secure FTP, courier, or fax; and
- note that there is no need to send a separate DQ Export File (unless requested by PSBC); these corrections will automatically be captured in your next file submission.

## Hospitals that do not have the DQ Tool installed

On a quarterly basis (Periods 1-3, Periods 4-6, Periods 7-9, and Periods 10-13), a **Cumulative** DQ Report will be produced and posted on the eNG (or shared folder). This report will be a single PDF document and will consist of all DQ Tool errors and Supplementary DQ errors.

In all cases, please:

- correct all your errors by the due date (usually three weeks after the report is produced);
- document any exclusions (with an asterisk (\*), highlighting, etc.) and the reason they are being excluded;
- submit your documented exclusions back to PSBC either by secure FTP, courier, or fax; and
- note that there is no need to send a separate DQ Export File (unless requested by PSBC); these corrections will automatically be captured in your next file submission.

## All Hospitals

Approximately one month following your submission of Period 13, a final annual Cumulative DQ Report will be produced. This report will be a single PDF document and will consist of all remaining DQ errors and remaining Supplementary DQ errors that you have not previously told PSBC should be excluded.

In all cases, please:

- correct all your errors by the due date (usually three weeks after the report is produced);
- document any exclusions (with an asterisk (\*), highlighting, etc.) and the reason they are being excluded;
- submit your documented exclusions back to PSBC either by secure FTP, courier, or fax; and
- note that there is no need to send a separate DQ Export File (unless requested by PSBC); these corrections will automatically be captured in your next file submission.

If there are still remaining DQ Errors you will be phoned and asked to correct any remaining errors. Once all sites have submitted Period 13 and all DQ errors are corrected, PSBC will run a series of cross-facility DQs across the entire database. Once all cross-facility DQs are corrected, PSBC will do a final DQ check of our BC Perinatal Data Registry (PDR) before we close off the year.

## Product Support

**PDR Helpline:** 604-877-2121, ext 223753

**PSBC Email:** [psbc@phsa.ca](mailto:psbc@phsa.ca)

**PSBC Website:** Resources for Coders page  
<http://tiny.cc/PSBCCoderResources>

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