Data Quality Improvement Action Plan



**Instructions**

The Data Quality Improvement Action Plan[[1]](#footnote-1) (Action Plan) is designed to enable the consistent reporting of data quality issues and improvement efforts across the WA health system.

Where noteworthy limitations in data quality are identified from the Data Quality Summary, an Action Plan must be completed no later than 3 months after the Data Quality Summary. Data Custodians are responsible for consulting with relevant staff to ensure quality improvement efforts are documented and implemented in accordance with the Action Plan.

The Action Plan can be in any format and must satisfy the mandatory reporting requirements outlined below. An optional Template has been designed to assist Data Custodians meet the mandatory reporting requirements of the Action Plan (refer to the Supporting Information section of the *Data Quality Policy*).

The Action Plan is a minimum requirement and Data Custodians may wish to expand upon these reporting requirements.

**Data Quality Improvement Action Plan**

Details regarding the following points **must** be included within the Action Plan:

* name of the data collection
* start and review date of Action Plan
* name and position of the Data Steward and Data Custodian of the data collection
* name and position of the Data Custodian of the data collection
* overall quality improvement objectives
* data quality issues and priorities for quality improvement
* data quality improvement strategies/activities designed to address data quality issues
* how these improvement strategies/activities will be assessed/measured and demonstrated over time
* allocation of responsibility (person/position) for improvement strategies/activities
* timeframes for the completion of improvement strategies/activities
* Data Custodian’s approval of the Action Plan.

**Ongoing Reporting Requirements**

The Action Plan is a living document, and as such, must be evaluated at least annually (or at shorter intervals as deemed necessary by the Data Custodian) by the Data Custodian or nominated data quality staff until data quality issues are resolved. Data quality staff must submit the completed documents to the Data Custodian for their approval. There is no prescribed format for the annual evaluation, albeit findings should consider accomplishments towards meeting objectives/activities of the Action Plan, lessons learned, changes to timeframes and priorities, and any further actions to improve data quality for at least the coming year.

Once data quality issues are resolved, the Data Cust*o*dian must continue to ensure that the Data Quality Summary is completed annually and all documentation is made available to the Data Steward on request or as deemed appropriate by the Data Custodian.

If you have any questions about this document please contact: Senior Policy Officer, Purchasing and System Performance Division. Email: [RoyalSt.PSPInfoManagement@health.wa.gov.au](mailto:RoyalSt.PSPInfoManagement@health.wa.gov.au).

**This document can be made available in alternative formats   
on request for a person with a disability.**

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1. The Data Quality Improvement Action Plan is based on the Bureau of Quality Improvement Services (BQIS) [Quality Improvement Template](http://www.in.gov/fssa/files/003_Quality_Improvement_Plan_Guide_and_Example_BQIS_122815.pdf) though has been customised to make appropriate for the WA health system. [↑](#footnote-ref-1)