

Reporting and data sharing policy



August 2010

The West Midlands Perinatal Institute has a remit to collect, analyse and report on maternity/perinatal/ infant data. Our reports fall into the following categories:

1. Annual reports – e.g. on stillbirths and infant deaths, for Clusters, PCTs, Trusts/Units. These are usually issued during summer for perinatal mortality updates up to and including the preceding calendar year. Some of this information is also summarised for the annual regional 'Key Health Data Report' published by Birmingham University.
2. Quarterly reports – covering denominator maternity data, including demographics and quality / performance indicators like those developed under the regional Investing for Health programme.
3. Ad-hoc reports for specific projects, audits and results of focussed statistical modelling on causes of adverse outcome.
4. Reporting on data requests - this is a rolling programme whereby we respond to requests for analyses of regional and local data by SHA, PCTs, Trusts / Units and other stakeholders. Data requests received are discussed at the next (weekly) meeting of the PI data team. Unless complicated or needing clarification, the responses are usually completed within two weeks of acknowledgement of receipt.

All reports are anonymised and treated according to our Information Governance protocol. Request by health service providers for potentially identifiable data are transmitted with encryption via secure NHSnet accounts. We also have an ongoing system of data checks and validations in place to ensure that the information on our registers is as accurate and complete as possible. For example,

- we undertake regular cross checks with the Safe Guarding Children's Boards to ensure infant mortality data is complete on both their and our registers;
- we augment incomplete data held in unit/trust based maternity systems with information we collect on the regional Perinatal Episode Electronic Record (PEER).

The Institute works with individuals on agreed projects to improve the health services' understanding of quality indicators, risk factors and adverse outcome. Following advice from the NHS Information Centre of Health and Social Care, *no raw data are provided for secondary analysis to individuals and agencies outside the Institute.* Instead, every effort is made to undertake the analysis on behalf of the organisation through the data request protocol.

This policy is to ensure that we are able to best fulfil our remit and provide

- a common, single source of authoritative, high quality reports
- analyses consistent with appropriate definitions and limitations of the available data
- cost effective, bespoke modes of analysis which can subsequently be offered to other stakeholders for their own local data.

Data requests and related feedback are thereby used as a source of learning, to continually improve the quality of data definition, collection and analysis for all stakeholders in the region.

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