Top 10 tips to reduce HPECD database errors

Did you know that…

1) Five of the 10 most common error codes in the HPECD Data Quality Report are related to the Families First Screening and Parent Survey summary forms.

2) There are 10 error codes related to completion of the Families First Screening Form. Within each of these error codes there are several required fields. If any one of the required fields is not completed, an error report will be generated. If you fix some of the fields in an error code but not all, you will continue to get that error code on subsequent data quality reports.

3) Error codes related to the FFS form may or may not be true errors. There may be reasons for some of the omissions. The Error Codes were created to ensure that our recording is as complete as possible. The error code is a reminder to double check your entry as the fields in the error code are generally available from the PPRF or through routine PHN assessment.

4) The Sc3 error code is the most common error related to the FFS form. The screen shot below illustrates where in the database that these mandatory fields are found. For example: Screened prenatally is a required field. Failure to fill out this bubble will result in a DQR error.

5) The Sc5 error code, the second most common FFS form error includes data elements commonly found on the PPRF as well as information routinely collected through a conversation with the parent and PHN. Sometimes the bubble may not be filled in because the risk factor was not assessed and other times a DQR may be generated due to an inputting error i.e. you completed the information on the paper FFS but did not transcribe it in to the database. Common Sc5 errors reported in the DQR include not filling in low birth weight; high birth weight; prematurity (born <37 weeks); multiple birth and smoking, drug, and alcohol use during pregnancy. Maternal smoking and alcohol during pregnancy requires further assessment around amounts used.
For Example: A parent may share that they smoked or use alcohol during pregnancy and may choose not to disclose amounts. In this case you would be unable to fill out the amount bubble on the FFS form yet you will receive a DQR error for this.

6) HPECD database error codes are generated for 2 cycles meaning the data errors if not corrected or unable to be corrected will appear on 2 consecutive DQRs. After 2 DQR cycles you should not receive the same error code for that family.   The instructions for completing the DQR recommend that you document an explanation on the hard copy of the DQR for any errors that

can't be fixed. Similarly if you notice repeat errors (same error/same client as on previous report(s)), note this on the hard copy so we can follow up and try to eliminate the cause.
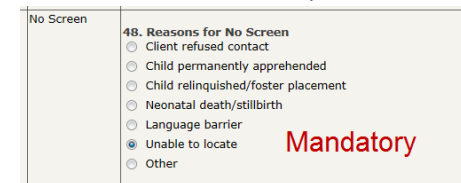
For Example: If you received a Sc5 error in the first cycle, check your paper FFS form against what has been inputted into the database. If it is an inputting error, then fix it. If it is a risk item that was not assessed make a note on the hard copy of the DQR that you have checked this error code and no fix is required. When it shows up for cycle 2, disregard the error code for this family.

7) Every attempt should be made to collect data for as many of the 40 risk factors as possible. PHNs use communication skills in conversations with families to assess risks. PHNs need to balance assessing risk, with collecting data and maintaining a trusting relationship. **A FFS is complete when the PHN has done this to the best of his/her ability.** The intent of the FFS is to gather as much information as possible so that the PHN has a good picture of what the families' strengths and challenges are. Based on this assessment the PHN works with family to determine a plan of care.

8) Any PHN that works with the family can input data from the FFS in to the database. The database collects statistical information about the families that we serve and is not part of the client clinical record. The family file is used to document interventions, plans and family progress.

9) Families First Program standards state that the PS process (which includes the FFS and Parent Survey) is to be completed within 7 days of maternal discharge from hospital. PHNs attempt to gather as much information from the FFS on initial contact and add to it as they have subsequent follow up with families during the first week postpartum. The FFS form should be saved and marked complete within 7 days.
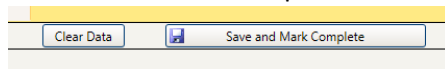
Please note: For those families who score negative on the PS summary or score positive and decline FF services, the Parent Survey Summary Worksheet is "saved and marked complete' with 7 days of maternal discharge from hospital. For those families enrolled in the FF program the Parent Survey Summary Worksheet is not "saved and marked complete" until discharge from the program.

10) Every attempt should be made to complete a FFS with all birth mothers. There may be times where this is not possible. When there is no screen, you **must** select the reason for "no screen" then 'save and mark complete.' Failure to do this will result in an error code.