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| BreastScreen Australia. A joint Australian, State and Territory Government Program | **OFFICE USE ONLY** |  |
| Date of receipt by SCU |  |
| Date of receipt by NQMC |  |
| **Response by Service/SCU to Data Assessor Report** |
| **DETAILS OF SERVICE/SCU** |
| **Name of SERVICE/SCU** |  |
|  |  |
| **Reporting period** | From | Click here to enter a date. | To | Click here to enter a date. |  |
|  |  |
| **Completed by** (name) |  |  |  |  |
|  |  |

**Instructions**

1. For each **DGMA requirement** the Data Assessor has assessed as ‘Unmet’, please enter your response in the ‘Service Response’ column.
* Your response should include information on how the problem is being addressed, with reference to the relevant section of your quality improvement plan (if applicable).
* If you disagree with the Data Assessor’s assessment, please also provide an explanation of why you consider the DGMA requirement to be met.
1. For each **Assessment Point Risk Rating** where the Data Assessor has determined a Risk Rating contrary to that determined in your self-assessment, enter your response in the ‘Service Response’ column.
2. The completed form is to be provided to the NQMC along with the Response by Service/SCU to the Survey Report.

| Assessment Point | # | DGMA Requirement | Assessment  | Service Response |
| --- | --- | --- | --- | --- |
| **1. Data security arrangements are acceptable** | Choose an item. |  |
|  | 1.1 | Data is secure from unauthorised access, within systems and during transfers between systems.  | Choose an item. |  |
| 1.2 | Data identity is obscured.  | Choose an item. |  |
| 1.3 | Data security breaches are well managed.  | Choose an item. |  |
| **2. Data quality arrangements are acceptable** | Choose an item. |  |
|  | 2.1 | Data is entered, recorded, managed, monitored and processed in conformance with the definitions and algorithms of the BSA data dictionary.  | Choose an item. |  |
|  | 2.2 | The data recorded in systems is accurate and complete.  | Choose an item. |  |
|  | 2.3 | Each client within a state or territory program has one unique identifier.  | Choose an item. |  |
|  | 2.4 | All client records are appropriately dated and identifiable to the relevant health professionals.  | Choose an item. |  |
|  | 2.5 | Data quality problems are identified.  | Choose an item. |  |
| **3. Data integrity arrangements are acceptable** | Choose an item. |  |
|  | 3.1 | Data integrity is maintained in transfers between systems, including local systems, state-wide systems and external systems.  | Choose an item. |  |
|  | 3.2 | The file tracking system used has integrity and reliability.  | Choose an item. |  |
| **4. Data organisation and systems management arrangements are acceptable** | Choose an item. |  |
|  | 4.1 | The ownership, accountability and responsibility for all key data sets are clearly identified and understood.  | Choose an item. |  |
|  | 4.2 | Data is used for strategic purposes, quality improvement and for clinical management and for review by the National Quality Management Committee.  | Choose an item. |  |
|  | 4.3 | Data is retained, stored and disposed of in accordance with relevant state or territory legislation.  | Choose an item. |  |
|  | 4.4 | Systems are reliable and well supported.  | Choose an item. |  |
|  | 4.5 | Systems are updated in ways that meet changing requirements and maintain system reliability.  | Choose an item. |  |
|  | 4.6 | Systems are updated to meet changes to the BSA NAS and BSA Data Dictionary.  | Choose an item. |  |
|  | 4.7 | Systems conform to relevant standards for how clinical information is recorded, organised and managed.  | Choose an item. |  |
|  | 4.8 | Systems and data can be restored in event of data corruptions and disasters.  | Choose an item. |  |