

Service Profiles and Quality Indicators – the National Agenda

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AD Clinical Outcomes

April 2013

What makes a 'quality' service



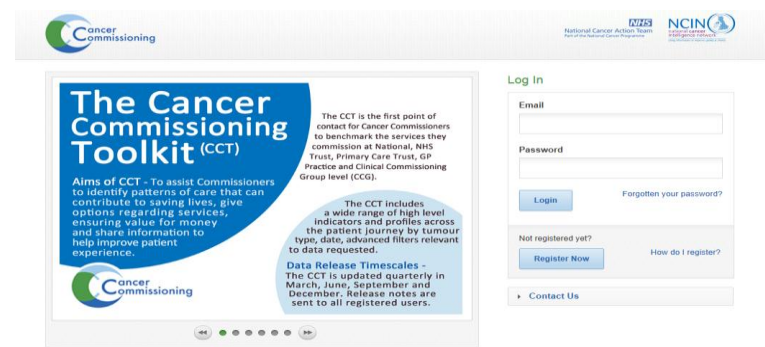
Access to Information?

Pre CCT:



- *Multiple sources of data and information*
- *In different places*
- *Different timescales*
- *Different methodology*
- *Difficult to benchmark 'similar organisations'*
- *Limited information strategies*

Post CCT:



- *12 data sources*
- *112 charts covering pathways*
- *Latest data always shown*
- *Benchmarked and trend analyses*
- *Data sources still viewed separately*

Targeted cancer-profiles

NCIN
national cancer
intelligence network



Using information to improve quality & choice

Cancer Service Profiles for Colorectal Cancer - Look and feel mock-up - dummy data
v1.4 Sept 2011. Please direct comments and feedback to profiles@ncin.org.uk.

National Cancer Action Team
Part of the National Cancer Programme



Trust is significantly different from England mean
Trust is not significantly different than England mean
Statistical significance can not be assessed
England mean



Jo Blogs NHS Trust

Select Trust/MDT

Lowest in Eng. Eng. 25th Percentile Eng. mean Eng. 75th Percentile Highest in Eng.

Section	#	Indicator	No. of patients/cases or value	Trust	Proportion or rate		England	Trust rates or proportion compared to England mean		Source	Period
					Lower 95% confidence	Upper 95% confidence		Range			
Demographics (based on new patients treated per year)	1	Number of new patients treated per year	90				0%				
	2	Patients aged 70+	50	50%	49%	52%	60%	0%		100%	Cancer waits
	3	Patients with recorded ethnicity	89	89%	86%	92%	94%	0%		100%	2010
	4	Patients recorded as non white-British	15	15%	15%	15%	16%	0%		100%	
	5	Patients who are income deprived	Quintile 2	17%	16%	18%	18%	0%		100%	
	6	Male patients	2	2%	2%	2%	7%	0%		100%	
	7	Patients with a registered cancer stage	70	70%	68%	72%	77%	0%		100%	
	8	Patients with a Stage A or B disease at diagnosis	40	40%	39%	41%	46%	0%		100%	
	9	Patients with a Charlson co-morbidity index >0	34	34%	33%	35%	38%	0%		100%	
	10	The specialist team has full membership	Yes	82%				0%		100%	
Specialist Team	11	Proportion of peer review indicators met	No				0%			100%	
	12	Peer review: are there immediate risks?	No				0%			100%	
	13	Peer review: are there serious concerns	No				0%			100%	
	14	Patients reporting good availability of a CNS	92	92%	89%	95%	99%	0%		100%	
	15	Surgeons not managing 20+ cases per year	4	40%	39%	41%	45%	0%		100%	
Throughput	16	Number of two week wait referrals for cancer	42				0%			100%	
	17	Number and proportion of admissions that are emergencies	120	48%	47%	49%	52%	0%		100%	
	18	Patients referred via the screening service	17	17%	16%	18%	19%	0%		100%	
	19	TWW referrals with suspected cancer seen within 2 weeks	37	88%	85%	91%	93%	0%		100%	
	20	TWW referrals treated within 62 days	41	98%	95%	101%	103%	0%		100%	
Waiting times	21	TWW referrals diagnosed with cancer	7	7%	7%	7%	14%	0%		100%	
	22	Patients treated within 31 days of agreeing treatment plan	91	91%	88%	94%	93%	0%		100%	
	23	Surgical cases treated laparoscopically	12	12%	12%	12%	21%	0%		100%	
	24	Patients resected for liver metastases	8	8%	8%	8%	16%	0%		100%	
	25	Patients undergoing a major surgical resection	29	32%	31%	33%	38%	0%		100%	
	26	Mean length of stay for elective admissions	4.5	4.4	4.6	4.6	0			100%	
	27	Mean length of stay for emergency admissions	5.7	5.5	5.9	5.7	0			100%	
	28	Surgical patients readmitted as an emergency within 28 days	4	4%	4%	4%	10%	0%		10	
	29	New to follow-up outpatients appointments	76%	74%	78%	82%	0%			10	
	30	Patients treated surviving at one year	90	90%	87%	93%	91%	0%		100%	
Practice	31	Surgical patients who die within 30 days	1	1%	1%	1%	0%			100%	
	32	Patients reporting being treated with respect and dignity	92	92%			0%			100%	
	33	Cancer patient experience survey questions scored as "green"	3	87%			0%			100%	
		Cancer patient experience survey questions scored as "red"	6	4%			0%			100%	
							0%			100%	

LINKS, ...

Data.gov.uk

The screenshot shows the Data.gov.uk website in a web browser. The browser's address bar displays <http://data.gov.uk/>. The website's header features the HM Government logo and a 'Log in or sign up' link. The main navigation bar includes links for Home, Data, Participate, Data requests, Apps, Location, Linked Data, Library, and About. The main content area is a carousel of promotional tiles. The visible tiles include: 'SUGGEST A DATASET' (yellow and purple puzzle pieces), 'SPEND DATA REPORTING TOOL' (red background), 'THE NEW DATA.GOV.UK' (dark grey background with the Data.gov.uk logo), 'Don't sell our postcodes!' (featuring a woman's face), 'SITE STATS GRAPHS' (green background with a line graph), and 'OPEN DATA WHITE PAPER' (teal background with the text 'Unleashing the potential' and 'Read the UK Government's vision for the future of open data'). The browser's taskbar at the bottom shows various application icons and the system clock indicating 08:11 on 24/04/2013.

http://data.gov.uk/

HM Government Log in or sign up

DATA.GOV.UK^{Beta}
Opening up Government

Home Data Participate Data requests Apps Location Linked Data Library About

SUGGEST A DATASET

SPEND DATA REPORTING TOOL

THE NEW DATA.GOV.UK

Don't sell our postcodes!
ODUG on why we should have Open Addressing in the UK

SITE STATS GRAPHS

OPEN DATA WHITE PAPER
Unleashing the potential
Read the UK Government's vision for the future of open data

http://data.gov.uk/library/open-data-white-paper

08:11
24/04/2013

What is Open Data?

- Open government data means:
 - Data produced or commissioned by government or government controlled entities
 - Data which is open as defined in the Open Definition – that is, it can be freely used, reused and redistributed by anyone.

National Agenda

- Increased transparency and access to data and information
- Greater understanding of what is available
- Data v intelligence?
 - Where are the 'good' services?
 - How to define?
 - How to interpret and communicate?
- From Cancer Profiles to Composite Indicators?

Definition:

A composite indicator is formed when individual indicators are compiled into a single index, on the basis of an underlying model of the multi-dimensional concept that is being measured

OECD, 2004, "The OECD-JRC Handbook on Practices for Developing Composite Indicators", paper presented at the OECD Committee on Statistics, 7-8 June 2004, OECD, Paris

The NCIN story so far.....

Cancer Service Profiles for Breast Cancer

Data displayed are for patients for which the trust of treatment can be identified. For a full description of the data and methods please refer to the 'Data Definitions' document. For advice on how to use the profiles and the consultation, please refer to 'Profiles guidance'. Please direct comments/feedback to service_profiles@ncin.org.uk



NCIN
national cancer
intelligence network
Data collaboration to reduce health inequalities

NCIN
National Cancer Action Teams
Part of the National Cancer Programme

● Trust is significantly different from England mean
● Trust is not significantly different from England mean
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England median

Lowest in England 25th 75th Highest in England

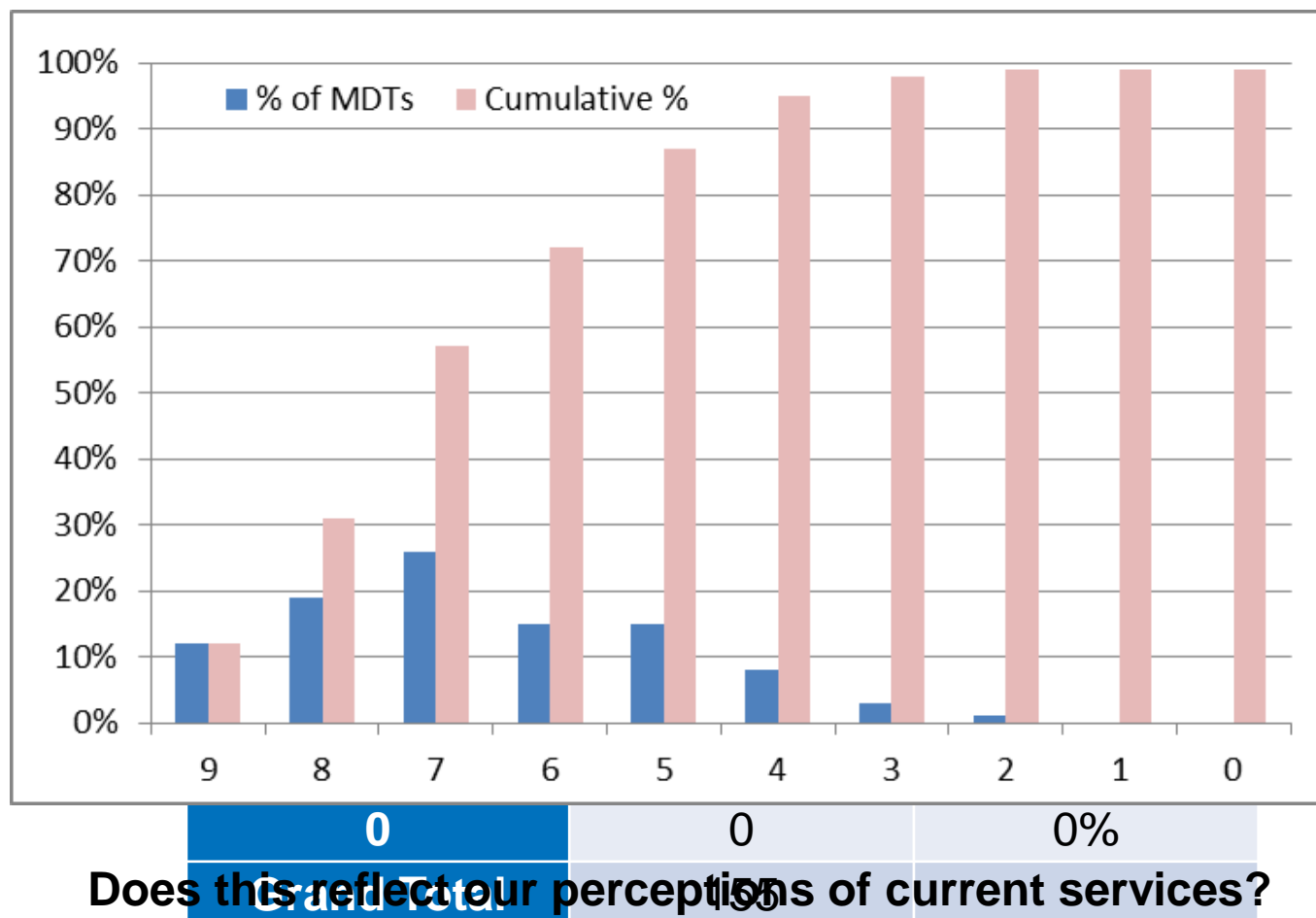
Select Trust/MDT				Percentage or rate			Trust rate or percentage compared to England				Source	Period
Section	#	Indicator	No. of patients/cases or value	Trust	Lower 95% confidence limit	Upper 95% confidence limit	England	Lowest	Range	Highest		
Size	1	Number of new patients treated per year, 2010/11	407					63		759	CWT	2010/11
	2	Number of newly diagnosed patients treated per year, 2009	289					8		754	CWT/NCDR	2009
Demographics Newly diagnosed patients, 2009	3	Patients aged 70+	95	33%	28%	38%	30%	13%		57%	CWT/NCDR	2009
	4	Patients with recorded ethnicity	276	96%	92%	97%	91%	73%		99%	CWT/NCDR	2009
	5	Patients with recorded ethnicity which is not White-British	14	5%	3%	8%	9%	0%		71%	CWT/NCDR	2009
	6	Patients who are Income Deprived (1)		12%			14%	6%		29%	CWT/NCDR	2009
	7	Male patients										
Specialist Team	1											
	1											
	1											
	1											
	0											
Throughput	1											
	1											
	0											
	1											
	0											
Waiting Times	2											
	2											
	1											
	1											
	2											
Patient Experiences	2											
	1											
	1											
	1											
	0											
Outcomes and Recovery	33	Mean length of episode for elective admissions		2.3			2.8	0.7		6.3	HES	2009/10
	34	Mean length of episode for emergency admissions		5.7			4.9	2.4		11.3	HES	2009/10
	36	Surgical patients readmitted as an emergency within 28 days	9	2%	1%	4%	4%	1%		15%	HES	2010/11
	38	Q2-Q4 2010/11: First outpatient appointments of all outpatient appointments	5,473	42%	42%	43%	43%	23%		71%	PBR BUS	2010/11 Q2-Q4
	37	Patients treated surviving at one year (to be included in later profile release)										
Patient Experiences - CPES (4)	38	Patients surveyed & % reporting always being treated with respect & dignity (8)	50	89%			82%	65%		95%	CPES	2010
	39	Number of survey questions and % of those questions scoring red and green (7)	50	5%				0%		70%	CPES	2010
	40			41%				0%		72%	CPES	2010

- Does the Specialist Team have full membership?
- Proportion of Peer Review indicators met?
- Peer Review: are there immediate risks?
- Peer Review: are there serious concerns?
- % treated within 62 days of urgent GP referral for suspected cancer?
- How many surgical patients receive a mastectomy?
- How many mastectomy patients receive an immediate reconstruction?
- % of patients surveyed report being treated with respect and dignity?
- % of survey questions scoring red or green?

MDT Scores per Indicator

Indicator No:	Indicator	Criteria for Inclusion	Nos MDTs achieving criteria	Total Nos MDTs	% MDTs achieving criteria
11	The specialist team has full membership	= YES	120	155	77%
12	Proportion of peer review indicators met	>=80%	101	155	65%
13	Peer review: are there immediate risks?	= NO	143	155	92%
14	Peer review: are there serious concerns?	= NO	103	155	66%
23	Treatment within 62 days of urgent GP referral for suspected cancer %	>=95%	126	155	81%
30	Provider undertaking immediate reconstruction*	>0%	141	155	91%
32	Surgical patients receiving mastectomies %	< value of 75 th percentile	116	155	75%
38	% reporting always being treated with respect & dignity	>80%	73	148	49%
40	Cancer patient experience survey questions scored as "green" %	>12%	85	149	57%

Composite 'Indicator'



Questions & Caveats?

- Validity of approach - very simple, proof of principle
- Who selects the indicators to include?
 - Different groups may have different priorities?
- How is each indicator weighted – equally?
 - due consideration to clinical and statistical issues
 - Justifiable design of scoring system
- How to ensure adjusted for casemix?
- Timeliness of data
 - More recent or more robust?
- How to interpret and how to share publically?

Where next – Breast Cancer

- Review indicators in profile with patients, clinical teams & commissioners
- Select indicators for inclusion
 - same or different?
- Other indicators for consideration
 - NHSOF, CCG Outcomes Indicator Set, NICE, Professional
 - Are the data available?
 - Are there agreed methodologies for each indicator
- Consider methodology for ‘composite model’

Where next – Colorectal Ca.

- Base on Australian model (Prof. Solomon et al)
 - Several aspects of care
 - Adherence to national guidelines for services
- Compare England with Australia
 - Comprehensive comparisons a challenge
 - Use Australian methodology
- Use data from current profile
 - 3 types indicators
- Construct composite indicator for each trust

Where next – Colorectal Ca.

Types of indicators

- evidence-based indicator (EBI)
 - use of DVT prophylaxis, chemotherapy for Stage III disease etc
- process-based
 - e.g. two week waits, MDT discussion, Peer Review, etc
- Clinical outcome-based indicator (COI)
 - 30-day post-op mortality, returns to theatre, readmission rates etc

Two Options to Construct Composite Indicator

- Threshold set at the 20th percentile of the variation*
 - If in lowest 20th percentile, score = 0
 - Large numbers of hospitals in this category, as ‘someone has to be at the bottom’
 - E.g. EBS = nos of EBI >20th percentile/total nos of EBI
 - Investigated correlation between indicators , scores and caseload to test relationship bet EBS & COS
- Identify outliers e.g. 2 or 3 SD from the mean?
 - Genuine poor performers

**Evidence-Based and Clinical Outcomes Scores to Facilitate Audit and Feedback for Colorectal Cancer Care; MR Habib, ML Solomon et al; Diseases of the Colon & Rectum Volume 52: 4 (2009)*

In summary.....

- Can demonstrate differences between services
- But does it demonstrate quality?
 - What is quality?
 - Whose quality is it?
- Require method that
 - Has clinically or statistically defined level of confidence to score hospitals
 - Clinical credibility
 - Easy to calculate, interpret and understand!



Potentially a long way to go but....



just beginning & need to learn from each other
- It is a challenge..... **We have until March 2013?**