

Venous Thromboembolism (VTE) Risk Assessment data collection Quarter 4 2013/14 (January to March 2014)

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1. Background

The VTE risk assessment data collection was first made mandatory from June 2010, and this publication refers to data for January to March 2014.

VTE is a significant international patient safety issue. The first step in preventing death and disability from VTE is to identify those at risk so that preventative treatments can be used. The purpose of this data collection is to quantify the numbers of adult hospital admissions who are being risk assessed for VTE to allow appropriate prophylaxis based on national guidance from NICE¹. Such measures have the potential to save many lives each year.

All providers of NHS funded acute care (including foundation trusts and independent sector providers of acute NHS services) must complete this data collection. Providers of non-acute health services are not asked to complete this data collection, although they should be aware that all patients should be protected from unnecessary risk of VTE.

This data collection is a census of all patients – it is not appropriate to use sampling methodologies to produce estimates. This data collection also serves as the mechanism to enable providers to demonstrate to their commissioners that they have achieved the national CQUIN goal on VTE in $2013/14^2$.

This data collection on VTE risk assessment is intended to embed VTE risk assessment across the NHS and will be critical in evaluating the impact of the National VTE Prevention Programme on improving health outcomes for patients.

2. How the statistics are produced

The data collection asks for three items of information:

- Number of adults admitted as inpatients in the month who have been risk assessed for VTE on admission to hospital using the criteria in the National VTE Risk Assessment Tool
- 2. Total number of adult inpatients admitted in the month
- 3. Calculated from (1) and (2), the percentage of adult inpatients, admitted within the month assessed for risk of VTE on admission

Nil returns

• Providers are required to provide information based on a census of patients. Providers who submit data based on a sample or audit of patients are not included in

¹ The NICE guidance can be found at the following link: http://guidance.nice.org.uk/CG92

² Further information about the CQUIN framework is available at: http://www.england.nhs.uk/wp-content/uploads/2013/02/cquin-guidance.pdf

the figures below, and are classed as a "nil return". Providers who did not have any admissions in a particular month in the quarter are also classed as a 'nil return' in that month.

Timing	Process				
Month A (e.g. April)	Data are collected from patients in each trust for that month.				
Month B (e.g. May)	Trusts submit their data monthly for the previous month (e.g. Ap				
	data are submitted towards the end of May).				
Month C (e.g. June)	Data for month A (April) are quality assured.				
Month D (e.g. July)	Data for month A (April) are published in the NHS England				
	website and in UNIFY 2.0 in the beginning of the month (e.g. April				
	data are published in early July).				
Early every September,	Publication of reports for Quarters 1, 2, 3 and 4 respectively, on				
December, March,	the NHS England website.				
June					

Data are submitted and published according to the timings below:

Providers must collect and submit data onto UNIFY 2 by 20 working days after the month end. The full data tables can be found: http://www.england.nhs.uk/statistics/vte/

Guidance on the data collection is included in the 2013/14 CQUIN guidance and can be found at: http://www.england.nhs.uk/wpcontent/uploads/2013/02/cquin-guidance.pdf

Findings

Number of data returns

- The number of data returns submitted by providers of NHS funded acute care over Quarter 4 2013/14 was 320, 317 and 320 in January, February and March, respectively.
- The number of NHS acute care providers submitting a data return in each month of Quarter 4 2013/14 was 164. For Independent Sector (IS) providers, it was 156, 153,156 in January, February and March respectively.

Proportion of total admissions getting a risk assessment

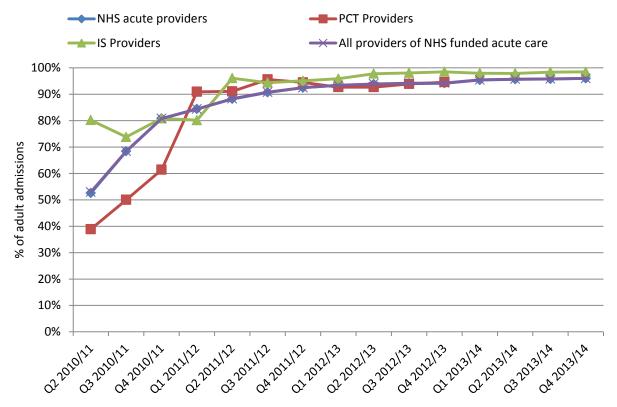
- Over Quarter 4 2013/14 providers reported over 3.5 million admissions to NHS funded acute care. Of these, 3.4 million (96%) received a VTE risk assessment on admission, the same percentage as in Quarter 3 2013/14 see Table 1.
- In Quarter 4 2013/14, the proportion of admissions receiving a VTE risk assessment was slightly lower for NHS acute care providers (96%) than for IS providers (99%), with NHS acute care providers carrying out around 97% of all VTE risk assessments.

Table 1. Proportion of adult hospital admissions risk assessed for VTE (Quarter 4 2013/14, England)

	January 2014	February 2014	March 2014	Q4 2013/14
NHS acute care providers	96.0%	95.9%	95.9%	96.0%
IS Providers	98.3%	98.6%	98.6%	98.5%
All providers of NHS funded acute care	96.1%	96.0%	96.0%	96.0%

 A chart showing the proportion of adult admissions risk assessed for VTE since Quarter 2 2010/11 (July to September 2010) is shown below (see Figure 1). There has been a steady increase in the proportion in all providers of NHS funded acute care, from 53% in Quarter 2 2010/11 to 96% in Quarter 2 2013/14. This proportion has remained stable from Quarter 2 to Quarter 4 in 2013/14.

Figure 1. Proportion of adult hospital admissions risk assessed for VTE (Quarter 2 2010/11 to Quarter 4 2013/14, England)



• Overall, all the NHS regions achieved the 95% goal in this quarter – see table 2.

Table 2. Proportion of adult hospital admissions risk assessed for VTE by NHS Region (Quarter 4 2013/14, England)

NHS Region	All providers	NHS acute care providers	IS providers	
North of England	96.9%	95.7%	98.4%	
Midlands and East				
of England	97.8%	96.8%	98.9%	
London	96.8%	95.5%	99.3%	
South of England	97.1%	95.9%	98.0%	

Proportion of providers above and below 95% of admissions receiving a VTE risk assessment

In Quarter 4 2013/14, 90% (290 trusts) of the providers carried out a VTE risk assessment for 95% or more of their admissions (the CQUIN goal), an increase of 3 percentage points from the 87% (277) in Quarter 3 2013/14 – see table 3. These proportions are lower for NHS acute care providers than for Independent Sector providers, but NHS acute care providers are responsible for 97% of the admissions. The percentage of trusts carrying out a VTE risk assessment from 90% to below 95% of their admissions, and therefore nearing the CQUIN goal, is 7% (23 trusts), an improvement from 10% (33 trusts) in Quarter 3 2013/14.

Table 3. Providers reporting above and below 95% of admissions receiving a VTE risk assessment (Quarter 4 2013/14, England)

	All providers		NHS acute care providers		IS providers	
	Number	%	Number	%	Number	%
90%-95%	23	7%	12	7%	11	7%
Below 95%	31	10%	17	10%	14	9%
95% and above	290	90%	147	90%	143	91%

4. Additional Information

Data for individual organisations are available at: http://www.england.nhs.uk/statistics/vte/

For press enquiries please e-mail the NHS England media team at nhscb.media@nhs.net or call **0113 825 0958 / 0113 825 0959**

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