

PICU Quality Dashboard 2017/18

Indicator Reference Number	Domain	Theme	Measure	Rationale	Name of Indicator/Description	Numerator	Denominator	Period Type	Frequency	Data Source Numerator	Data Source Denominator	Target	Interpretation Guidance	Notes	Reporting Periods			
															Q1	Q2	Q3	Q4
PIC01	Domain 1: Preventing people from dying prematurely	Clinical Outcome	Risk adjusted mortality	PICANet is a clinical data base used by most / all PICU providers. PICANet produce a risk adjusted SMR that is accepted by Trusts.	Risk adjusted mortality.	Number of patients who died on PICU.	Number of patients expected to die on PICU (as per PICANet risk adjustment methodology) in time period.	Annual with 6 month lag	Annually	(External data Source) PICANet	(External data Source) PICANet	1	Any performance reported above the upper confidence or below the lower confidence limits will require further investigation		TBC	TBC	TBC	TBC
PIC02	Domain 5: Treating and caring for people in a safe environment and protecting them from avoidable harm	Clinical Outcome	Emergency admissions refused	To measure emergency admissions refused from within the defined catchment population served.	Percentage of emergency admissions who were refused admission.	Number in denominator who were refused admission.	Total number of requests for emergency admission to the PICU from providers for patients in the defined catchment population in month (the 'defined catchment population' means patients for whom the Unit forms the expected pathway).	Quarterly	Quarterly	Provider Organisations to submit data to the SSQD web portal. (PIC Unit)	Provider Organisations to submit data to the SSQD web portal. (PIC Unit)	<5%	Lower is better	The 'defined catchment population' means patients for whom the Unit forms the expected pathway. This may vary depending on the patient's indication for admission (i.e. cardiac surgery patients may belong to a different or wider catchment to respiratory patients). The output from this measure is relevant for review and discussion within the PIC network.	Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18
PIC03	Domain 4: Ensuring that people have a positive experience of care	Clinical Process	Cancellation of elective paediatric surgery	Cancellation of elective paediatric surgery on day of surgery, due to bed unavailability.	Cancellation of elective paediatric surgery on day of surgery, due to bed unavailability.	Number in denominator cancelled on the day of surgery owing to a lack of a PICU bed.	Total number of planned hospital ward transfers to PICU post-elective paediatric surgery (all specialties).	Quarterly	Quarterly	Provider Organisations to submit data to the SSQD web portal. (Admission unit)	Provider Organisations to submit data to the SSQD web portal. (PIC Unit)	<5%	Lower is better	This indicator should be relatively easy to under take since Trusts are required to routinely collect cancelled operation information.	Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18
PIC04	Domain 5: Treating and caring for people in a safe environment and protecting them from avoidable harm	Clinical Outcome	Emergency readmissions to PICU within 48 hours	Emergency readmissions to PICU within 48 hours of a previous discharge/transfer from PICU.	Emergency readmissions to PICU within 48 hours of a previous discharge/transfer from PICU.	Number in denominator readmitted as an emergency within 48 hours of discharge from critical care clinical responsibility.	Total number of discharges / transfer out from the PICU in period (excludes direct PICU to PICU transfers).	Quarterly	Quarterly	Provider Organisations to submit data to the SSQD web portal. (Core PAS or PIC Unit)	Provider Organisations to submit data to the SSQD web portal. (Core PAS or PIC Unit)	To set baseline %	Lower is better	This indicator could be verified by commissioners using their SUS data flows where providers flow paediatric intensive care data.	Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18
PIC05a	Domain 5: Treating and caring for people in a safe environment and protecting them from avoidable harm	Clinical Outcome	Bed occupancy	Bed occupancy.	PICU bed occupancy rates.	Total number of occupied bed days (midnight census).	Number of commissioned PICU beds multiplied by days in period.	Quarterly	Quarterly	Provider Organisations to submit data to the SSQD web portal. (PICANET)	Provider Organisations to submit data to the SSQD web portal. (PIC Unit)	0.80	0.75 - 0.85 is ok, consistently above 0.85 needs scrutiny, any month above 1.0 needs commissioner review.		Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18
PIC08	Domain 5: Treating and caring for people in a safe environment and protecting them from avoidable harm	Clinical Outcome	Rate of accidental extubation of patients	Rate of accidental extubation of patients.	Rate of accidental extubation of patients.	Number of unplanned extubation events in patients in denominator	Total number of ventilated (via an endotracheal tube) bed days for patients in the PICU within the reporting period.	Quarterly	Quarterly	Provider Organisations to submit data to the SSQD web portal. (PIC Unit)	Provider Organisations to submit data to the SSQD web portal. (PIC Unit)	To set baseline rate	Lower is better	An unplanned extubation is any of the following are not in place at the outset : 1. An intention to extubate 2. The presence of competent staff at the bedside 3. The preparation of suction and an oxygen delivery system in place before the patient is extubated. Rate of unplanned extubation of patients/100 ventilated days .	Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18
PIC09	Domain 5: Treating and caring for people in a safe environment and protecting them from avoidable harm	Clinical Process	Timely death review	To measure PICU deaths undergoing a timely formal review process.	Percentage of death reviews conducted within 3 months.	Number of deaths in PICU in reporting period discussed at a multi-disciplinary review meeting (M&M) within 3 months of date of death, with written documentation of the findings and an action plan.	Total number of PICU deaths in the first 3 months of the previous 6 month reporting period.	Quarterly	Quarterly	Provider Organisations to submit data to the SSQD web portal. (PIC Unit)	Provider Organisations to submit data to the SSQD web portal. (PIC Unit)	To set baseline %	Neutral	Would expect the SI reporting to also be replicated in Trust information.	Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18

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PIC10		Clinical Process	Timeliness of PICANET data submissions	PICANet expect provider information to be complete and accurate 3 months after patient discharge.	Percentage of data submissions within 3 months of discharge.	Number of data submission within three months of discharge	Total number of discharges in the first 3 months of the previous 6 month reporting period.	Quarterly	Quarterly	Provider Organisations to submit data to the SSQD web portal. (PICANET)	Provider Organisations to submit data to the SSQD web portal. (PICANET)	100%	Higher is better		Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18
PIC13	Domain 4: Ensuring that people have a positive experience of care	Clinical Process	Retrieval service performance	Ability to deliver a comprehensive retrieval service.	Percentage of refused requests for retrieval of a patient within defined catchment.	Number of requests in denominator which are refused.	Total number of requests (within defined catchment of retrieval service) for retrieval of a patient requiring PIC admission.	Quarterly	Quarterly	Provider Organisations to submit data to the SSQD web portal. (Retrieval Service)	Provider Organisations to submit data to the SSQD web portal. (Retrieval Service)	To set baseline %	Lower is better		Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18
PIC14i	Domain 1: Preventing people from dying prematurely	Clinical Process	Timely mobilisation of PIC retrieval team	Retrievals should be performed within the agreed mobilisation time.	Timely mobilisation of PIC retrieval team. Percentage of emergency retrievals undertaken where the team departs the transport base within 30 minutes from the time the referral is accepted for retrieval.	Number in denominator where the team departs the transport base within 30 minutes from the time the referral is accepted for retrieval, during the reporting period.	Total number of emergency retrievals undertaken, during the reporting period.	Quarterly	Quarterly	Provider Organisations to submit data to the SSQD web portal. (Retrieval Service)	Provider Organisations to submit data to the SSQD web portal. (Retrieval Service)	95%	Higher is better	Local data capture will be required to confirm that the retrieval team was mobilised within time. Indicator reference number changed 16/17, as change to numerator.	Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18

Data collection has been approved by the Review of Central Returns - ROCR
ROCR/OR/2230/001/MAND