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																Reporting	Period	
Indicator Reference Number	Domain	Theme	Measure	Rationale	Name of Indicator / Description	Numerator	Denominator	Period Type	Frequency		Data Source Denominator	Target Into	terpretation Guidance	General Notes	Q1 1819	Q2 1819	Q3 1819	Q4 1819
MSM01		Clinical process	Timely review of all newly referred cases		Proportion of patients discussed by core members of the Hub Lead Centre Multi-Disciplinary Team (MDT) including MS Lead Clinician within 7 days from receipt of referral	For those patients in the denominator, the number of patients discussed within 7 days from receipt of referral	The total number of patients discussed by core members of the thus lead centre MVI including MS lead Clinician in the reporting period	Annual	Annual	Provider submitted		Higher is better	As pe Specii will bi follow their i neurc paedi Nurse radiol	de referrals at Hub Lead re only er the Service effication, the MDT quorum e made up of the wing core members, or cover: paediatric lologist with expertise in iatric MS; MS Clinical e Specialists; neuro- logist; and clinical	N/A	N/A	N/A	Apr 18 - Mar 19
MSM02		Clinical process	Assessment	Known patients should be reviewed as quickly as possible if deemed appropriate following discussion between the local unit and the Hub Lead Centre	Proportion of known patients physically assessed within 48 hour following direct liaison and discussion between the local unit and the Hub Lead Centre	Of those in the denominator, the number of patients assessed within 48 hours following direct liaison and discussion between the local unit and the Hub Lead Centre	The total number of known patients physically assessed following direct liston and discussion between the local unit and the hub Lead Centre in the reporting period	Annual	Annual	Provider submitted		Higher is better	Include Centre Include the local Centre Include Centre Include	nologist de referrals at Hub Lead re only de direct liaison between ocal unit and the Hub Lead re de known patients only ie e the outcome is known		N/A	N/A	Apr 18 - Mar 19
MSM03	Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm	Clinical process	MDT	been discussed at a multi-disciplinary	documentation of the recommendations / outcomes provided to	For those patients in the denominator, the number of patients whose MDT recommendations / outcomes are documented and provided to both patient and GP	The total number of patients discussed at Hub Lead Centre MDT in the reporting period	Annual	Annual	Provider submitted		Higher is better		de referrals at Hub Lead re only	N/A	N/A	N/A	Apr 18 - Mar 19
MSM04	Domain 2: Enhancing quality of life for people with long- term conditions	Clinical process	Waiting times	Inititiation of therapy should occur without undue delay once the treatment plan is agreed by patient and physician	Proportion of patients starting the first dose of disease modifying therapy within 4 weeks of the agreement of the treatment plan, as defined in the service specification	Of those in denominator, the number of patients starting therapy within 4 weeks of the agreement of the treatment plan	The total number of patients starting disease modifying therapy in the reporting period	Annual	Annual	Provider submitted		Higher is better			N/A	N/A	N/A	Apr 18 - Mar 19
MSM05	Domain 2: Enhancing quality of life for people with long- term conditions	Clinical Outcome	Disease progression	Treatment strategy should be optimised to reduce Annualised Relapse Rate (ARR)	Proportion of patients achieving a slowing in progression of disease using Annualised Relapse Rate (ARR)		The total number of patients, in the reporting period, who have been in treatment for at least a year (12 months)	Annual	Annual	Provider submitted	Provider submitted	Neutral			N/A	N/A	N/A	Apr 18 - Mar 19
MSM06a		Clinical Outcome	Disease progression	Treatment strategy should be optimised to achieve some level of No Evidence of Disease Activity (NEDA)	Proportion of patients achieving a slowing in progression of disease using No Evidence of Disease Activity (NEDA) - no evidence of relapse		The total number of patients, in the reporting period, who have been in treatment for at least a year (12 months)	Annual	Annual	Provider submitted	Provider submitted	Neutral		ssion' as defined by A: no evidence of relapse	N/A	N/A	N/A	Apr 18 - Mar 19
MSM06b		Clinical Outcome	Disease progression	Treatment strategy should be optimised to achieve some level of No Evidence of Disease Activity (NEDA)	Proportion of patients achieving a slowing in progression of disease using No Evidence of Disease Activity (NEDA) - no evidence of relapse and no MRI activity		The total number of patients, in the reporting period, who have been in treatment for at least a year (12 months)	Annual	Annual	Provider submitted	Provider submitted	Neutral	NEDA	ssion' as defined by A: no evidence of relapse no MRI activity	N/A	N/A	N/A	Apr 18 - Mar 19
MSM06c	Domain 2: Enhancing quality of life for people with long- term conditions	Clinical Outcome	Disease progression	Treatment strategy should be optimised to achieve some level of No Evidence of Disease Activity (NEDA)	Proportion of patients achieving a slowing in progression of disease using No Evidence of Disease Activity (NEDA) - no evidence of relapse, no MRI activity and no evidence of disease progression		The total number of patients, in the reporting period, who have been in treatment for at least a year (12 months)	Annual	Annual	Provider submitted	Provider submitted	Neutral	NEDA no Mi evide	ssion' as defined by A: no evidence of relapse, IRI activity and no ence of disease ression	N/A	N/A	N/A	Apr 18 - Mar 19
MSM07		Clinical process	Clinical Trials	Recruiting patients to clinical trials is important to push the clinical boundaries of management	Proportion of eligible and consented patients who are recruited to a clinical trial	Of those in the denominator, the number of patients recruited to a clinical trial	The total number of eligible consented patients on caseload in the reporting period	Annual	Annual	Provider submitted		Higher is better			N/A	N/A	N/A	Apr 18 - Mar 19
MSM08	Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm	Clinical Outcome	Harm	Patient safety is paramount when prescibing immunotherapy	Proportion of medication errors resulting in significant harm to patients as defined by the Common Terminology Criteria for Adverse Events v3.0 (CTCAE)	Of those in the denominator, the number of errors reported that resulted in significant harm to the patient as defined by CTCAE	The total number of all patients on medication in the reporting period	Annual	Annual	Provider submitted		Lower is better	Include highe	de CTCAE category 3 or er	N/A	N/A	N/A	Apr 18 - Mar 19
						Data collection has been approved by the Review ROCR/OR/2230/001MAI	of Central Returns - ROCR ND											

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