

Specialised Kidney, Bladder and Prostate Cancer Services (Adults) (Kidney Services) Quality Dashboard 2020/21



| 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 |
| KC01 | Domain 1: Preventing people from dying prematurely | Outcome measure | New diagnoses | | The number of patients newly diagnosed within a calendar year | The total number of patients newly diagnosed within the reporting period | N/A | Annual | Annual | Provider submitted | N/A | | Neutral | | N/A | N/A | N/A | Jan 20 - Dec 20 |
| KC02 | Domain 1: Preventing people from dying prematurely | Process measure | Performance status | | Proportion of patients with a performance status of 0-1 recorded | Of those in the denominator, the number of patients with a performance status of 0-1 recorded | The total number of patients diagnosed in the reporting period | Quarterly | Quarterly | Provider submitted | Provider submitted | | Higher is better | | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC03 | Domain 5: Treating and caring for people in a safe environment, and protecting them from avoidable harm | Process measure | MDT | | Proportion of patients with a newly diagnosed cancer discussed by the multi-disciplinary team prior to definitive treatment | Of those in the denominator, the number of patients discussed by multi disciplinary team prior to definitive treatment | The total number of patients newly diagnosed in the reporting period | Quarterly | Quarterly | Provider submitted | Provider submitted | | Higher is better | | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC04 | Domain 1: Preventing people from dying prematurely | Outcome measure | Referral | | Proportion of patients presenting via a GP referral | Of those in the denominator, the number of patients presenting via a 2 week referral | The total number of patients newly diagnosed in the reporting period | Quarterly | Quarterly | Provider submitted | Provider submitted | | Higher is better | Numerator: Referral source code - 03 | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC05 | Domain 1: Preventing people from dying prematurely | Outcome measure | Referral | | Proportion of patients presenting via emergency referral | Of those in the denominator, the number of patients presenting via emergency referral | The total number of patients newly diagnosed in the reporting period | Quarterly | Quarterly | Provider submitted | Provider submitted | | Lower is better | Numerator: Referral source codes - 01, 04, 10 | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC06 | Domain 1: Preventing people from dying prematurely | Process measure | Stage recorded | | Proportion of patients with a valid stage recorded | Of those in the denominator, the number of patients who have a valid stage recorded | The total number of patients on caseload in the reporting period (new and existing diagnoses) | Quarterly | Quarterly | Provider submitted | Provider submitted | | Higher is better | | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC07 | Domain 1: Preventing people from dying prematurely | Process measure | Stage recorded | | Proportion of patients with an early stage (stage 1 or 2) recorded | Of those in the denominator, the number of patients who have an early stage (1 or 2) recorded | The total number of patients on caseload in the reporting period (new and existing diagnoses) | Quarterly | Quarterly | Provider submitted | Provider submitted | | Higher is better | | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC08 | Domain 1: Preventing people from dying prematurely | Process measure | Histology | | Proportion of patients with a histological confirmed diagnosis (basis 5, 6 or 7) | Of those in the denominator, the number of patients with a histological confirmed diagnosis (basis 5, 6, or 7) | The total number of patients on caseload in the reporting period (new and existing diagnoses) | Quarterly | Quarterly | Provider submitted | Provider submitted | | Higher is better | | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC09 | Domain 4: Ensuring that people have a positive experience of care | Process measure | CNS | | Proportion of patients who have Clinical Nurse Specialist (CNS) contact recorded | Of those in the denominator, the number of patients having CNS contact recorded | The total number of patients on caseload in the reporting period (new and existing diagnoses) | Quarterly | Quarterly | Provider submitted | Provider submitted | | Higher is better | Numerator: Codes Y1, Y2, Y3, Y4 | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC10 | Domain 1: Preventing people from dying prematurely | Outcome measure | Surgery | | Proportion of patients that undergo surgery | Of those in the denominator, the number of patients who underwent surgery (in reporting period) | The total number of patients with a confirmed diagnosis in the reporting period | Quarterly | Quarterly | Provider submitted | Provider submitted | | Neutral | | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC11 | Domain 1: Preventing people from dying prematurely | Outcome measure | Chemotherapy | | Proportion of patients having chemotherapy | Of those in the denominator, the number of patients who had chemotherapy (in reporting period) | The total number of patients with a confirmed diagnosis in the reporting period | Quarterly | Quarterly | Provider submitted | Provider submitted | | Neutral | | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC12 | Domain 1: Preventing people from dying prematurely | Outcome measure | Radiotherapy | | Proportion of patients having radiotherapy | Of those in the denominator, the number of patients who had radiotherapy (in reporting period) | The total number of patients with a confirmed diagnosis in the reporting period | Quarterly | Quarterly | Provider submitted | Provider submitted | | Neutral | | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC13 | Domain 2: Enhancing quality of life for people with long-term conditions | Outcome measure | Clinical trial | | Proportion of patients entered into a clinical trial | Of those in the denominator, the number of patients who are entered onto a clinical trial | The total number of patients on caseload in the reporting period (new and existing diagnoses) | Quarterly | Quarterly | Provider submitted | Provider submitted | | Higher is better | | Apr 20 - Jun 20 | Jul 20 - Sep 20 | Oct 20 - Dec 20 | Jan 21 - Mar 21 |
| KC14 | Domain 1: Preventing people from dying prematurely | Outcome measure | Mortality | | Proportion of patients that die within 1 year of diagnosis | Of those in the denominator, the number of patients that died with 1 year | The total number of patients diagnosed in the reporting period | Annual | Annual | Provider submitted | Provider submitted | | Lower is better | | N/A | N/A | N/A | Apr 19 - Mar 20 |

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