Colorectal: Faecal Incontinence (Adult) 2019/20

NHS England

Indicator Reference Number	Domain	Theme	Measure	Rationale	Name of Indicator / Description	Numerator	Denominator	Period Type	Frequency	Data Source Numerator	Data Source Denominator	Interpretation Guidance	Notes	Reporting Period			
														Q1	Q2	Q3	Q4
FI01	Domain 2: Enhancing quality of life for people with long term	Clinical Process	Pelvic Floor MDT	This is a minimum target level and is in line with recommendations in the service specification	Count of patients discussed at the pelvic floor MDT during the reporting period	The total number of patients discussed at the pelvic floor MDT during the reporting period	N/A	6 month rolling	Quarterly	Provider submitted	N/A	Higher is better	Service specification states minimum of 25 patients discussed per 6 months (50 per annum)	Jan 19 - Jun 19	Apr 19 - Sep 19	Jul 19 - Dec 19	Oct 19 - Mar 20
FI02	Domain 2: Enhancing quality of life for people with long term conditions	Clinical Outcome	Anal sphincter repairs	NICE states that the surgical options for faecal incontinence include anal sphincter repair, sacral nerve stimulation or neosphincter formation (Graciloplasty or artificial sphincter.)	Count of anal sphincter repairs undertaken during the reporting period	The total number of anal sphincter repairs undertaken during the reporting period	N/A	6 month rolling	Quarterly	Provider submitted	N/A	Neutral	Elective only Exclude maternal perineal tears First time repair only OPCS - H57.1 (Placement of artificial anal sphincter NEC), H50.1 (Posterior repair of anal sphincter), H50.2 Anterior repair of anal sphincter) - primary procedure only. DIAG - R15X (Primary or secondary)	Jan 19 - Jun 19	Apr 19 - Sep 19	Jul 19 - Dec 19	Oct 19 - Mar 20
FI03	Domain 2: Enhancing quality of life for people with long term conditions	Clinical Outcome	Sacral Nerve Stimulation - permanent	NICE states that the surgical options for faecal incontinence include anal sphincter repair, sacral nerve stimulation or neosphincter formation (Graciloplasty or artificial sphincter).	Count of patients who receive a permanent Sacral Nerve Stimulation (SNS) for faecal incontinence	The total number of patients who receive a permanent SNS for faecal incontinence during the reporting period	N/A	6 month rolling	Quarterly	Provider submitted	N/A	Higher is better	Elective only First procedure only OPCS - A70.1 (Implantation of neurostimulator into peripheral nerve) followed by Z11.2 (Sacral nerve) **OR** A70.4 (Insertion of neurostimulator electrodes into peripheral nerve) followed by Z11.2 (Sacral nerve). DIAG - R15X (Primary or secondary)	Jan 19 - Jun 19	Apr 19 - Sep 19	Jul 19 - Dec 19	Oct 19 - Mar 20
FI04	Domain 2: Enhancing quality of life for people with long term conditions	Clinical Outcome	Sacral Nerve Stimulation - temporary	Patients who are unsuitable for anal sphincter repair should be given a trial of temporary sacral nerve stimulation. If successful, then permanent sacral nerve stimulation is indicated. If a trial is unsuccessful then the patient can be considered for neosphincter.	Count of patients who receive a temporary Sacral Nerve Stimulation (SNS) for faecal incontinence	The number of patients who receive a temporary SNS for faecal incontinence during the reporting period	N/A	6 month rolling	Quarterly	Provider submitted	N/A	Neutral	Elective only First procedure only A70.1 (Implantation of neurostimulator into peripheral nerve), A70.4 (Insertion of neurostimulator electrodes into peripheral nerve), Z11.2 (Sacral nerve), Y70.5 (Temporary operations) DIAG - R15X (Primary or secondary)	Jan 19 - Jun 19	Apr 19 - Sep 19	Jul 19 - Dec 19	Oct 19 - Mar 20
FI05	Domain 2: Enhancing quality of life for people with long term conditions	Clinical Outcome	Sacral Nerve Stimulation	Patients who are unsuitable for anal sphincter repair should be given a trial of temporary sacral nerve stimulation. If successful, then permanent sacral nerve stimulation is indicated. A successful trial is determined by percutaneous nerve evaluation.	Proportion of patients who go on to have permanent Sacral Nerve Stimulation (SNS) implants following a temporary SNS test	Of those patients in the denominator, the number who subsequently have permanent SNS implants	The number of patients receiving a temporary SNS test in the reporting period	6 month rolling	Quarterly	Provider submitted	Provider submitted	Higher is better	**Numerator:** Include all patients from denominator cohort where: OPCS - A70.1 (Implantation of neurostimulator into peripheral nerve) followed by Z11.2 (Sacral nerve) OR A70.4 (Insertion of neurostimulator electrodes into peripheral nerve) followed by Z11.2 (Sacral nerve) DIAG - R15X (Primary or secondary) **Denominator:** OPCS - A70.1 (Implantation of neurostimulator into peripheral nerve), A70.4 (Insertion of neurostimulator electrodes into peripheral nerve), Y70.5 (Temporary operations),Z11.2 (Sacral nerve) DIAG - R15X (Primary or secondary)	Jan 19 - Jun 19	Apr 19 - Sep 19	Jul 19 - Dec 19	Oct 19 - Mar 20
FI06	Domain 2: Enhancing quality of life for people with long term conditions	Clinical Outcome	Infection rates	The proportion of patients presenting with infection requiring device removal or surgical revision is one indicator of the quality of the faecal incontinence surgical service	Proportion of patients admitted with an infection requiring device removal or surgical revision within 180 days following permanent Sacral Nerve Stimulation (SNS) implantation, replacement, or revision	Of those patients in the denominator, the number who were subsequently admitted with an infection requiring device removal or surgical revision within 180 days of initial procedure	The number of patients receiving permanent, replacement or revision of SNS in the reporting period	6 month rolling	Quarterly	Provider submitted	Provider submitted	Lower is better	**Numerator:** Include all patients from denominator cohort where: OPCS - A70.1 (Implantation of neurostimulator into peripheral nerve), Z11.2 (Sacral nerve) OR A70.2 (Maintenance of neurostimulator in peripheral nerve), Y03.2 (Renewal of prosthesis in organ NOC), Z11.2 (Sacral nerve) OR A70.2 (Maintenance of neurostimulator in peripheral nerve), (Y03.1 (Maintenance of prosthesis in organ NOC), Y03.3 (Correction of displacement of prosthesis NOC), Y03.4 (Other resiting of prosthesis in organ NOC) OR Y03.5 (Conversion to prosthesis in organ NOC) OR Y03.6 (Adjustment to prosthesis in organ NOC) OR Y03.8 (Other specified attention to prosthesis in organ NOC) OR Y03.9 (Unspecified attention to prosthesis in organ NOC)) DIAG - T85.7 (Primary) **Denominator:** OPCS - H50.1 Posterior repair of anal sphincter H50.2 Anterior repair of anal sphincter DIAG - R15X (Primary or secondary)	Jul 18 - Dec 18	Oct 18 - Mar 19	Jan 19 - Jun 19	Apr 19 - Sep 19

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														Q1	Q2	Q3	Q4
FI07	Domain 2: Enhancing quality of life for people with long term conditions	Clinical Outcome	Bulking Agents	NICE guidance states that the current evidence on the safety and efficacy of injectable bulking agents for faecal incontinence does not appear adequate for the procedure to be used without special arrangements for consent and for audit or research. This should take place in the context of a clinical trial or formal audit protocol that includes information on well-defined patient groups.	Count of patients receiving injecting of bulking agents	The number of patients receiving injecting of bulking agents in the reporting period	N/A	6 month rolling	Quarterly	Provider submitted	N/A	Neutral	OPCS - H57.8 (Other specified other operations on the anal sphincter to control continence), Y39.3 (Injection of inert substance into organ NOC) DIAG - R15X (Primary or secondary)	Jan 19 - Jun 19	Apr 19 - Sep 19	Jul 19 - Dec 19	Oct 19 - Mar 20
FI08	Domain 2: Enhancing quality of life for people with long term conditions	Clinical Process	Bulking Agents	NICE guidance states that the current evidence on the safety and efficacy of injectable bulking agents for faecal incontinence does not appear adequate for the procedure to be used without special arrangements for consent and for audit or research. This should take place in the context of a clinical trial or formal audit protocol that includes information on well-defined patient groups.	Proportion of injecting of bulking agent procedures performed as a day case	Of those procedures in the denominator, the number that were carried out as a day case	The number of injecting of bulking agent procedures carried out in the reporting period	6 month rolling	Quarterly	Provider submitted	Provider submitted	Higher is better	**Numerator:** Include all patients from denominator cohort where: PATIENT CLASSIFICATION = '2' **Denominator:** OPCS - H57.8 (Other specified other operations on the anal sphincter to control continence), Y39.3 (Injection of inert substance into organ NOC) DIAG - R15X (Primary or secondary)	Jan 19 - Jun 19	Apr 19 - Sep 19	Jul 19 - Dec 19	Oct 19 - Mar 20

Data collection has been approved by the Review of Central Returns - ROCR
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