

Multiple Sclerosis Management for Children Quality Dashboard 2019/20



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	General Notes	Reporting Period			
															Q1 1819	Q2 1819	Q3 1819	Q4 1819
MSM01	Domain 2: Enhancing quality of life for people with long-term conditions	Clinical process	Timely review of all newly referred cases	Timely MDT is required for all patients referred to the MS service	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 Hub Lead Centre MDT including MS Lead Clinician in the reporting period	Annual	Annual	Provider submitted	Provider submitted	Higher is better		Include referrals at Hub Lead Centre only  As per the Service Specification, the MDT quorum will be made up of the following core members, or their cover: paediatric neurologist with expertise in paediatric MS; MS Clinical Nurse Specialists; neuro-radiologist; and clinical neurochemist	N/A	N/A	N/A	Apr 19 - Mar 20
MSM02	Domain 2: Enhancing quality of life for people with long-term conditions	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 liaison and discussion between the local unit and the Hub Lead Centre in the reporting period	Annual	Annual	Provider submitted	Provider submitted	Higher is better		Include referrals at Hub Lead Centre only  Include direct liaison between the local unit and the Hub Lead Centre  Include known patients only ie where the outcome is known	N/A	N/A	N/A	Apr 19 - Mar 20
MSM03	Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm	Clinical process	MDT	Patients initiating therapy should have been discussed at a multi-disciplinary meeting (will be a remote, non face to face meeting) with documentation of the recommendations provided to the patient and the general practitioner.	Proportion of patients initiating therapy that have been discussed by the Hub Lead Centre Multi-Disciplinary Team (MDT) with documentation of the recommendations / outcomes provided to the patient and the General Practitioner (GP)	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	Provider submitted	Higher is better		Include referrals at Hub Lead Centre only	N/A	N/A	N/A	Apr 19 - Mar 20
MSM04	Domain 2: Enhancing quality of life for people with long-term conditions	Clinical process	Waiting times	Initiation 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	Provider submitted	Higher is better			N/A	N/A	N/A	Apr 19 - Mar 20
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)	Of those in the denominator, the number of patients who have seen a reduction in relapse rate using 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 19 - Mar 20
MSM06a	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	Of those in the denominator, the number of patients who have achieved disease remission using 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		Remission' as defined by NEDA: no evidence of relapse	N/A	N/A	N/A	Apr 19 - Mar 20
MSM06b	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 and no MRI activity	Of those in the denominator, the number of patients who have achieved disease remission using NEDA - 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		Remission' as defined by NEDA: no evidence of relapse and no MRI activity	N/A	N/A	N/A	Apr 19 - Mar 20
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	Of those in the denominator, the number of patients who have achieved disease remission using NEDA - 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		Remission' as defined by NEDA: no evidence of relapse, no MRI activity and no evidence of disease progression	N/A	N/A	N/A	Apr 19 - Mar 20
MSM07	Domain 2: Enhancing quality of life for people with long-term conditions	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	Provider submitted	Higher is better			N/A	N/A	N/A	Apr 19 - Mar 20
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 prescribing 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	Provider submitted	Lower is better		Include CTCAE category 3 or higher	N/A	N/A	N/A	Apr 19 - Mar 20

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