

Thoracic Surgery Adults Quality Dashboard 2019/20



Indicator Ref Number	Domain	Theme	Measure	Rationale	Name of Indicator	Numerator	Denominator	Period Type	Frequency	Data Source Numerator	Data Source Denominator	Target	Interpretation Guidance	Notes	Reporting Period			
															Q1	Q2	Q3	Q4
T501	Domain 3: Helping people to recover from episodes of ill health or following injury	Clinical Process	MDT	Multi-Disciplinary meetings bring together the whole team looking after the patient, including Oncologists, Surgeons and Specialist Nurses. This results in joined up decision making, enabling effective decision-making to take place.	Proportion of lung cancer resection patients discussed at the Multi-Disciplinary Team Meetings (MDT)	Of those patients in the denominator, the number of patients discussed at the lung cancer MDT	The total number of patients undergoing lung cancer resection in the reporting period	Quarterly	Quarterly	Provider submitted	Provider submitted	Neutral	Neutral	Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Jun-19	Jul-19-Sep-19	Oct-19-Dec-19	Jan-20-Mar-20
T502	Domain 2: Enhancing quality of life for people with long term conditions	Clinical Process	Clinical trials	Clinical trials help to shape future treatments and drive continuous improvements to care by adding to the pool of evidence in any given field	Count of patients undertaking a clinical trial	The total number of patients taking part in a clinical trial in the reporting period	N/A	Quarterly	Quarterly	Provider submitted	Provider submitted	Higher is better	Higher is better	Numerator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Jun-19	Jul-19-Sep-19	Oct-19-Dec-19	Jan-20-Mar-20
T503	Domain 5: Treating and caring for people in a safe environment, and protecting them from avoidable harm	Clinical Outcome	Surgical procedures	This metric is to find a baseline of activity	Count of surgical procedures	The total number of surgical procedures in the reporting period	N/A	Quarterly	Quarterly	Provider submitted (GCS Thoracic Surgical Database)	Provider submitted (GCS Thoracic Surgical Database)	Neutral	Neutral	Include surgery for lung cancer, benign disease and emphysema Numerator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Jun-19	Jul-19-Sep-19	Oct-19-Dec-19	Jan-20-Mar-20
T504	Domain 4: Ensuring that people have a positive experience of care	Clinical Outcome	Surgery cancellations	Cancellations to procedures are sometimes unavoidable but cancellation of surgery on the day itself can be an indication a lack of pre-planning or anticipation of increased demand of certain resources.	Proportion of patients whose procedure was cancelled on the day of operation	Of those in the denominator, the number of patients who had their procedure cancelled on the day of operation	The total number of patients undergoing lung cancer resection in the reporting period	Quarterly	Quarterly	Provider submitted	Provider submitted	Lower is better	Lower is better	Include all cancellations Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Jun-19	Jul-19-Sep-19	Oct-19-Dec-19	Jan-20-Mar-20
T505	Domain 1: Preventing people from dying prematurely	Clinical Outcome	Survival rate (1 year)	UK cancer survival rates, including lung cancer, have historically been below the European average. One year survival rate can be used as one measure of the quality of the Thoracic surgery service and can be used to track improvements over successive audit periods.	1 year survival rate	Of those in the denominator, the number of patients alive 1 year after surgery	The total number of patients undergoing lung cancer resection in the reporting period	Annual	Annual	Provider submitted (National Lung Cancer Audit)	Provider submitted (National Lung Cancer Audit)	Higher is better	Higher is better	Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Mar-20			
T506	Domain 1: Preventing people from dying prematurely	Clinical Outcome	Survival rate (5 years)	UK cancer survival rates, including lung cancer, have historically been below the European average. Five year survival rate can be used as one measure of the quality of the Thoracic surgery service and can be used to track improvements over successive audit periods.	5 year survival rate	Of those in the denominator, the number of patients alive 5 years after surgery	The total number of patients undergoing lung cancer resection in the reporting period	Annual	Annual	Provider submitted	Provider submitted	Higher is better	Higher is better	Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Mar-20			
T507	Domain 1: Preventing people from dying prematurely	Clinical Outcome	Post-surgical mortality rate (90 days)	90 day post-surgical mortality rates are one measure of the quality of the Thoracic Surgery service.	90 day mortality rate post surgery	Of those in the denominator, the number of patients who died within 90 days of surgery	The total number of patients undergoing lung cancer resection in the reporting period	Annual	Annual	Provider submitted (National Lung Cancer Audit)	Provider submitted (National Lung Cancer Audit)	Lower is better	Lower is better	Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Mar-20			
T508	Domain 1: Preventing people from dying prematurely	Clinical Outcome	Post-surgical mortality rate (90 days)	90 day mortality rates are one measure of the quality of the Thoracic Surgery service.	90 day mortality rate post surgery	Of those in the denominator, the number of patients who died within 90 days of surgery	The total number of patients undergoing lung cancer resection in the reporting period	Annual	Annual	Provider submitted (National Lung Cancer Audit)	Provider submitted (National Lung Cancer Audit)	Lower is better	Lower is better	Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Mar-20			
T509	Domain 1: Preventing people from dying prematurely	Clinical Outcome	Resection rate for stage 1 and stage 2 NSCLC	It has been postulated that higher resection rates in Europe and the USA has contributed to their higher lung cancer survival rates. Stage 1 and 2 non-small cell lung cancers are the most amenable to surgery.	Proportion of patients undergoing surgical resection for histologically confirmed Stage 1 and 2 non-small cell lung cancers	Of those patients in the denominator, the number who underwent surgical resection	The total number of patients diagnosed with histologically confirmed Stage 1 and 2 non-small cell lung cancer in the reporting period	Annual	Annual	Provider submitted (National Lung Cancer Audit)	Provider submitted (National Lung Cancer Audit)	Higher is better	Higher is better	Numerator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure) Denominator - ICD code: C34.9	Apr-19-Mar-20			
T510	Domain 1: Preventing people from dying prematurely	Clinical Outcome	Sampling of mediastinal nodal stations	Sampling of mediastinal nodal stations is essential in the staging of disease for patients undergoing thoracic surgery for lung cancer. It allows confirmation that a complete resection of all malignant tissue is possible and enables accurate determination of the extent of primary resection required, thus minimising sacrifice of functioning lung parenchyma.	Proportion of patients in whom 3 separate mediastinal nodal stations are sampled	Of those in the denominator, the number of patients in whom 3 separate mediastinal nodal stations are sampled	The total number of patients undergoing lung cancer resection in the reporting period	Quarterly	Quarterly	Provider submitted	Provider submitted	Higher is better	Higher is better	Should be available from standard pathological report but may not be routinely recorded. Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Jun-19	Jul-19-Sep-19	Oct-19-Dec-19	Jan-20-Mar-20
T511	Domain 1: Preventing people from dying prematurely	Clinical Outcome	Return to theatre	Return to theatre is usually performed for a complication of surgery and therefore may reflect on the quality of surgery	Proportion of patients who returned to theatre	Of those patients in the denominator, the number who returned to theatre	The total number of patients undergoing lung cancer resection in the reporting period	Quarterly	Quarterly	Provider submitted	Provider submitted	Lower is better	Lower is better	Numerator - Exclude return for bronchoscopy, tracheostomy, endoscopy or drain insertion Include return for major surgery only Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Jun-19	Jul-19-Sep-19	Oct-19-Dec-19	Jan-20-Mar-20
T512	Domain 1: Preventing people from dying prematurely	Clinical Outcome	ITU readmission	If a patient is readmitted to ITU after being transferred back to a ward then this may be an indication of issues in the care pathway and post operative care.	Proportion of patients readmitted to ITU following initial lung cancer resection	Of those patients in the denominator, the number who were readmitted to ITU	The total number of patients undergoing lung cancer resection in the reporting period	Quarterly	Quarterly	Provider submitted	Provider submitted	Lower is better	Lower is better	Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Jun-19	Jul-19-Sep-19	Oct-19-Dec-19	Jan-20-Mar-20
T513	Domain 1: Preventing people from dying prematurely	Clinical Outcome	Ventilation post surgery	bc	Proportion of patients requiring ventilation following initial lung cancer resection	Of those patients in the denominator, the number who required ventilation post surgery	The total number of patients undergoing lung cancer resection in the reporting period	Quarterly	Quarterly	Provider submitted	Provider submitted	Lower is better	Lower is better	Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Jun-19	Jul-19-Sep-19	Oct-19-Dec-19	Jan-20-Mar-20
T514	Domain 3: Helping people to recover from episodes of ill health or following injury	Clinical Outcome	Post-surgical length of stay (LOS)	A longer stay in hospital following surgery would suggest slower rates of post-operative recovery.	Average post surgical length of stay	For those patients in the denominator, the sum total of days spent in hospital following surgery (from day of surgery to day of discharge) in the reporting period	The total number of patients undergoing lung cancer resection in the reporting period	Quarterly	Quarterly	Provider submitted	Provider submitted	Lower is better	Lower is better	If necessary, please provide any comment to clarify any longer than expected stays. Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Jun-19	Jul-19-Sep-19	Oct-19-Dec-19	Jan-20-Mar-20
T515	Domain 3: Helping people to recover from episodes of ill health or following injury	Clinical Process	CNS input	Service specification states that lung cancer nurse specialist support should be available in thoracic surgical clinics and wards, and thoracic nurse specialist support should be available in all areas.	Proportion of patients seen by a Clinical Nurse Specialist (CNS)	Of those patients in the denominator, the number seen by a CNS	The total number of patients undergoing lung cancer resection in the reporting period	Quarterly	Quarterly	Provider submitted	Provider submitted			Denominator - OPCS codes: E54.1, E54.2, E54.3, E54.4, E54.5, E54.6, E54.8, E54.9, E55.4, E44.1, E57.4, E57.8 (primary procedure)	Apr-19-Jun-19	Jul-19-Sep-19	Oct-19-Dec-19	Jan-20-Mar-20

Data collection has been approved by the Review of Central Returns - ROCR ROCR/OPCS2019/16/AVE