



																Reporting Perio		ods	
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	Q1	Q2	Q3	Q4	
PRH01	Domain 4: Ensuring that people have a positive experience of care	Clinical process	Patient education	Children with established rheumatic diseases should be counselled by a Paediatric Clinical Nurse Specialist (or other designated member of the MDT) before starting treatment with a DMARD or Biologic	a Paediatric Clinical Nurse Specialist	Of those in the denominator, the number of children counselled by a Paediatric Clinical Nurse Specialist (or other designated member of the MDT) before starting treatment with a DMARD or Biologic agent	Total number of children of any age who started treatment with a DMARD or Biologic agent within the reporting period	Quarterly	Quarterly	Provider submitted data	Provider submitted data		Higher is better	DMARDS -Methotrexate, Leflunamide, Sulphasalazine, Mycophenolate mofetil. Biologics - Etanercept, Adalimumab, Infliximab, Anakinra, Tocilizumab, Abatacept, Rituximab.	1 '	Jul 20 - Sep 20		Jan 21 - Mar 21	
PRH02	Domain 4: Ensuring that people have a positive experience of care	Clinical process	Access to dedicated paediatric rheumatology clinics	Children with Juvenile Idiopathic Arthritis (JIA) should have access to a dedicated paediatric rheumatology clinic* for all follow-up appointments.	Proportion of patients with JIA seen at dedicated paediatric rheumatology clinic	Of those in the denominator, the number of children seen in a dedicated paediatric rheumatology clinic	Total number of rheumatology appointments for children with JIA in outpatients	Quarterly	Quarterly	Provider submitted data	Provider submitted data		Higher is better	* A dedicated paediatric rheumatology clinic includes access to a full MDT, as defined by BSPAR.	1 '	Jul 20 - Sep 20		1 1	
PRH03	Domain 4: Ensuring that people have a positive experience of care	Clinical process	Timely access to specialist service (newly- diagnosed)	Children with Juvenile Idiopathic Arthritis should have access to a specialist paediatric rheumatology service from new diagnosis	Mean time (in days) for children with JIA to appointment in a specialist paediatric rheumatology	Of those in the denominator, the sum total of days for all patients from time referral received to time patient seen at specialist centre	Total number of children with newly-diagnosed JIA	Quarterly	Quarterly	Provider submitted data	Provider submitted data		Lower is better	Applies to referrals received by fax, email, or letter (not telephone)	1 '	Jul 20 - Sep 20	Oct 20 - Dec 20		
PRH04	Domain 4: Ensuring that people have a positive experience of care	Clinical process	Timely access to specialist treatments	Children with Juvenile Idiopathic Arthritis who need to have intra- articular steroid injections should wait no longer than 4 weeks, and have them done on a Paediatric General Anaesthetic list	Mean time (in days) to dedicated Paediatric GA list from date of decision to treat	Of those in the denominator, the sum total of time waited (in days) from decision to treat to treatment on dedicated Paediatric GA list	Number of children with JIA who receive Intra- Articular steroid injections under General Anaesthesia	Quarterly	Quarterly	Provider submitted data	Provider submitted data		Lower is better		1 '	Jul 20 - Sep 20			
PRH05	Domain 4: Ensuring that people have a positive experience of care	Clinical process	Timely access to Uveitis screening	Children with Juvenile Idiopathic Arthritis (JIA) should have access to Uveitis screening within 6 weeks of diagnosis	Mean time (in days) to booked appointment to start Uveitis screening with an appropriate paediatric opthalmic specialist.	Of those in the denominator, the sum total of days to a booked appointment to start uveitis screening with an appropriate paediatric opthalmic specialist	Total number of children with newly-diagnosed JIA	Quarterly	Quarterly	Provider submitted data	Provider submitted data		Lower is better	Provider organisations are required to detail reasons if the value being submitted for this denominator is different to the value being submitted for the denominator for PRH03	1	Jul 20 - Sep 20	Oct 20 - Dec 20	Jan 21 - Mar 21	

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