

Internal Medicine

Cardiac Services

Cardiology: Cardiac Magnetic Resonance Imaging (CMR) (Adult)

A09/S/e

| Code   | Metric  | Numerator   | Denominator  | Period Type | Frequency | Data Source Numerator | Data Source Denominator | Target | Notes                                  | Q1              | Q2              | Q3              | Q4              |
|--------|---|---|--|-------------|-----------|-----------------------|-------------------------|--------|--|-----------------|-----------------|-----------------|-----------------|
| CMRI01 | Number of scans carried out in reporting period   | The total number of scans carried out in the reporting period   |  | Quarter     | Quarterly | Provider              |                         |        |  | Apr-22 - Jun-22 | Jul-22 - Sep-22 | Oct-22 - Dec-22 | Jan-23 - Mar-23 |
| CMRI02 | Is there access to a level 3 qualified reporter to view scans at all times?   | yes/no  |  | Quarter     | Quarterly | Provider              |                         |        |  | Apr-22 - Jun-22 | Jul-22 - Sep-22 | Oct-22 - Dec-22 | Jan-23 - Mar-23 |
| CMRI03 | Proportion of patients who receive a booked appointment by the next working day   | Of those in the denominator, the number of referrals which resulted in appointments being booked by the next working day    | The total number of inpatient referrals received in the reporting period | Quarter     | Quarterly | Provider              | Provider                | 80     |  | Apr-22 - Jun-22 | Jul-22 - Sep-22 | Oct-22 - Dec-22 | Jan-23 - Mar-23 |
| CMRI04 | Proportion of inpatients who have MRI whose scan is reported within 24 hours  | Of those in the denominator, the number of scans reported on within 24 hours of the scan taking place                       | The total number of inpatient MRIs carried out in the reporting period   | Quarter     | Quarterly | Provider              | Provider                | 80     |  | Apr-22 - Jun-22 | Jul-22 - Sep-22 | Oct-22 - Dec-22 | Jan-23 - Mar-23 |
| CMRI05 | Proportion of reports sent back to referring clinician within 2 weeks of scan being carried out   | Of those in the denominator, the number of reports sent back to referring clinician within 2 weeks of the scan taking place | The total number of outpatient scans carried out in the reporting period | Quarter     | Quarterly | Provider              | Provider                | 80     |  | Apr-22 - Jun-22 | Jul-22 - Sep-22 | Oct-22 - Dec-22 | Jan-23 - Mar-23 |
| CMRI06 | Is there evidence of a regular and quality assured audit program?   | yes/no  |  | Quarter     | Quarterly | Provider              |                         |        | Evidence: regular meetings and minutes | Apr-22 - Jun-22 | Jul-22 - Sep-22 | Oct-22 - Dec-22 | Jan-23 - Mar-23 |
| CMRI07 | Are all images available to review in cardiac theatres as well as in radiology?   | yes/no  |  | Quarter     | Quarterly | Provider              |                         |        |  | Apr-22 - Jun-22 | Jul-22 - Sep-22 | Oct-22 - Dec-22 | Jan-23 - Mar-23 |
| CMRI08 | Is there a Standard Operating Procedure (SOP) for dealing with complex patients containing details of how to deal with cross referrals and definitions of who to refer for scans? | yes/no  |  | Quarter     | Quarterly | Provider              |                         |        |  | Apr-22 - Jun-22 | Jul-22 - Sep-22 | Oct-22 - Dec-22 | Jan-23 - Mar-23 |