HEALTHCARE QUALITY IMPROVEMENT PARTNERSHIP

IMPACT REPORT

FEBRUARY 2019



National Clinical Audit and Patient Outcomes Programme

The Healthcare Quality Improvement Partnership (HQIP) commissions and manages the National Clinical Audit and Patient Outcomes Programme (NCAPOP) on behalf of NHS England and Welsh Government.

Every project within the NCAPOP has been established to address a clinical area (or areas) where healthcare improvement is required, and the common aim of each project is to have a positive impact on patient care.

Impact of NCAPOP

This compendium of the impact of NCAPOP provides a summary of some of the key impacts the projects have had. This is the first compendium and covers a wide date range (June 2017 to February 2019) in terms of project submission of their impact reports, due to rolling out this new method of impact capture across the programme. As such, many projects will have more recent impact than presented here. Now that it is established as routine practice for all projects to capture their impact in this way, in future we plan to publish a compendium for each financial year.

Impact has been categorised into four categories and this compendium highlights key impacts against these categories for each project.

The categories have been colour-coded as indicated here:



- Median % of days as an inpatient on which physiotherapy is received increased from 54.3% (13/14) to 71.6% (16/17)
- Percentage of patients scanned within 1 hour of clock start increased from 41.9% (2013/14) to 51.3% (16/17)

Falls & Fragility Fracture (FFFAP)

- 53% relative increase in hip fracture patients getting geriatrician assessment since 2007
- 25% relative increase in patients getting falls assessment as part of fracture prevention

Bowel cancer

- Overall 90-day mortality after major surgery steadily reduced over five years from 5.4 per cent in 2010-11 to 3.8 per cent in 2014-15
- Rates of laparoscopic surgery increased from 42% in 2010-11 to 61% in 2014-2015. No rebound increase in rates of conversion from laparoscopic to open surgery over this time (9.0% to 8.5%)

Maternal, Newborn and Infant CORP

- Perinatal mortality rate decreased significantly and in 2016 was 5.64 per 1,000 total births
- Deaths from hypertensive disorders which in the past were a leading cause of direct maternal deaths, now account for 4.5% of all direct deaths and 1.5% of all maternal deaths

Paediatric Diabetes

- Year-on-year improvement in national median HbA1c – the best indicator of diabetes control – over the past 6 years
- Care process completion improved nationally, with 35% of young people aged 12 and above receiving all key health checks, up from 24.% in 2014/15

COPD

- Secondary care: inpatient mortality has reduced historically – 7.9% 2003, 7.8% 2008, 4.3% 2014
- Secondary care: historical reduction in median length of stay: 6 days 2003; 5 days 2008; 4 days 2014

National Vascular Registry

- Median delay between symptom and carotid endarterectomy (CEA) reduced since 2010 and stabilised at 13 days since 2015
- Rate of stroke and/or death within 30 days following CEA remained stable at just above 2%

Inflammatory Bowel Disease

- Increased prescription prophylactic heparin during inpatient care: 73% (2008) to 90% (2014)
- Increase in number of patients seen by an IBD nurse during an unplanned admission: 27% (2010) to 48% (2014)

Neonatal (NNAP)

- 3% improvement from 58% in 2015 to 61% in 2016 in the rate of babies born at <32 weeks gestation who have a temperature recorded within a hour of admission within the recommended range of 36.5°C to 37.5°C
- 2% rise from 2015 in the proportion of parents documented as seen by a senior member of the team within 24 hours of admission, to 90% in 2016. 33 units achieved this for 100% of eligible babies

- 20% increase in patients with dementia receiving nutritional assessment, from 70% in 2009 to 90% in R3 2016
- 11% improvement in cognitive assessments for people with dementia since 2009, up to 54% in 2016

- Multiparametric MRI (mpMRI) is increasingly being used. 51% of men had a mpMRI in 15/16, an increase from 44% in 14/15
- The potential 'over-treatment' of men with low-risk prostate cancer has reduced (8% in 15/16, 12% in 14/15)
- Fewer men with high-risk localise/locallyadvanced prostate cancer are potentially 'under-treated' (73% of men in 15/16 received radical treatments, 61% in 14/15)

Cardiac

 Radial artery access through the wrist now used for angioplasty in 84.3% of cases (an almost complete switch in 12 years). Over time it's estimated that an extra 450 lives have been saved since 2004 due to this technique

Epilepsy12

- More units reported having a local children's Epilepsy Specialist Nurse (ESN). Round 1, 53%, Round 2, 68%
- More units reported the availability of a young person's Epilepsy Clinic. Round 1, 18%, Round 2, 26%

Lung Cancer

- 1 year survival has increased from 31% to 38% between 2010 and 2015
- 90-day survival following surgery improved from 95.5% to 96.2% between 2012 and 2014

Oesophago-Gastric Cancer

- Increase in the use of definitive oncology from 38% in 2007-09 to 52% in 2013-15 for patients with oesophageal SCC according to best practise guidelines
- 90-day postoperative mortality dropped from 5.7% in 2007-09 to 3.2% in 2013-15 for oesophagectomies

Diabetes

- Between 2011 and 2016 11% more (69% in total) of inpatients were seen by a Specialist Diabetes Team following recommendations of reports
- Complications and Mortality Report 2015-2016 showed relationship between good achievement of care process completion and reduced risk of complications and mortality

Mental Health CORP

- Sudden unexplained deaths (SUD) of in-patients since 2007 in England and Wales have remained steady but most recently indicate a reduction. Safer prescribing of psychotropic drugs and greater attention to the patient's physical health care identified as reducing risk
- Overall fall in mental health suicide: putting in place inquiry recommendations results in falls in local suicide rate. Estimated as 25-300 deaths per year in our Annual Report 2016

Maternity and Perinatal

 Several measures have been adopted by the National Maternity Indicators, including low apgar score and 3rd/4th degree perineal tears

- CCG OIS
- Atlas of Variation
- NHS Choices (CSQM)
- Data.gov.uk
- Public Health England (NCVIN)
- Best Practice Tariff (BPT) Tool used to calculate which patients are eligible to receive each of the three components of BPT

Bowel cancer

- NBOCA shares its data with researchers and the cancer registry
- In 2016 NBOCA worked with HQIP and the CQC intelligence team to create a dashboard of four key indicators to guide CQC inspections

Paediatric Diabetes

Data feeds into:

- CCG IAF
- NHS Choices (CSQM)
- Data.gov.uk
 PD: NPDA data have been used to underpin
 National Institute for Health and Care Excellence
 (NICE) guidance NG18

National Vascular Registry

- NVR results are used by the national commissioners for vascular surgery
- NVR has provided data to the 7 day services initiative from NHS England.

Neonatal (NNAP)

- NNAP has submitted indicators to the MyNHS Clinical Outcomes Publication (COP)
- NNAP is developing a slide in collaboration with CQC and HQIP for the National Clinical Audit Benchmarking (NCAB) project

Falls & Fragility Fracture (FFFAP)

- 65,000 lines of data on hip fracture surgery supplied to Getting it Right First Time to improve efficiencies in surgery
- 3 new fields added to the hip fracture Best Practice Tariff for 2017-2019 to further drive improvement

Maternal, Newborn and Infant CORP

- Launch in March 2016 of the Saving Babies' Lives Stillbirth Care Bundle with a focus on three areas identified in the MBRRACE-UK data as requiring improvements in care: smoking; identification of fetal growth restriction and management of reduced fetal movements
- Ongoing provision of maternal and perinatal data to the Care Quality Commission for inclusion in CQC inspection packs

COPD

- Data from 2014 secondary care audit used to inform the 2016 update of the NICE Quality Standard for COPD (QS10)
- Involvement in future CQC inspection pack dashboards

Inflammatory Bowel Disease

- Results of first rounds of IBD audit initiates development and publication of IBD Standards 2009 and updated 2013
- In 2014 NICE incorporated IBD standards and guidelines into its benchmark criteria

- Audit data will be used by CQC to guide inspection teams: carer rating of care, patients needs being met, monitoring of delirium, discharge planning
- Over 60% of hospitals have developed a care pathway for dementia (2016), up from 36% in 2010

- PROMs data utilised by the Getting it Right First Time (GIRFT) initiative in their first Urology Report
- Organisational audit data published in 2014 n used to inform the NICE Quality Standards published in 2015

Ophthalmology

 Audit outcomes are available on MyNHS and NHS choices website.

Cardiac

- Production of composite markers for scoring performance in particular areas such as Clinical Services Quality Measures (CSQM)
- Data for Clinical Outcomes Publication (COP) produced at operator and unit level for Percutaneous Coronary Intervention and Adult Cardiac Surgery (over 1000 individual reports in total)

Epilepsy12

 Clinical lead provided evidence and information to colleagues within NHS England as part of the consultation process for the development of the NHS England Long Term Plan, published in January 2019

Lung Cancer

- Since 2016 the NLCA has submitted data to CQC inspection packs; 2015 data will be submitted in 2017
- Nursing Times used NLCA data to discuss the low levels of contact between patients and nurse specialists

Oesophago-Gastric Cancer

- In 2016 NOGCA worked with HQIP and the CQ intelligence team to create a dashboard of four key indicators - to guide CQC inspections
- Since 2013 NOGCA has provided outcomes data at consultant and NHS trust level on behalf of NHS England

Diabetes

- NDA data used in the Diabetes outcomes versus expenditure tool (PHE)
- New NICE Quality standards on Diabetes in pregnancy based heavily around findings from audit

Mental Health CORP

- Informing NICE Guidelines and Quality Standards: *Transition between in-patient and community/ home care ING53, 20131
- *Management of self-harm [CG16, 2004; CG133, 2011; QS34, 2013].
- Informing CQC guidance development for inspectors: removal of ligature points, implementation of 7-day follow up.

Medical & Surgical CORP

- Seven Day Services Clinical Standards February 2017 – NHSE used findings from A Journey in the Right Direction (2007) and Who Operates When (1997)
- The NCEPOD recommendations from 'Treat as One' 2017 support the priorities for integrating physical and mental health set out in the NHSE implementation plan for the 5YFVfor Mental Health

Maternity and Perinatal

- Heavily involved in sharing learning related to data collection and quality, in particular with regard to the development of version 2 of the Maternity Services Dataset from NHS Digital
- Care Quality Commission (CQC) involved in monitoring responses from services identified by the NMPA as potential outliers. This ensures services are accountable for their findings and called to respond as appropriate, with action or justification for results that are unexpected

- "We are so proud of our achievement in SSNAP.
 It has made us all come together as an MDT to work towards a common goal"
- 52,266* team level output downloads
- 90,217* regional level output downloads *up to September 2016

Bowel cancer

- In 2016, the audit started to provide MDTs with individualised slide packs of the NHS trust results.
 50% of MDTs reported using these
- Potentially outlying NHS trusts report that they have carried out local quality improvement including case note review

Paediatric Diabetes

- NPDA data underpins performance management by regional network managers, and can feed into internal team performance management
- NPDA events bring MDT staff together to share best practice

National Vascular Registry

- Consultants who are registered on the NVR IT system have access to a revalidation style report they can easily extract for appraisals
- Each user of the NVR IT system is able to view summary tables and graphs that show the results of any cases they have entered

Neonatal (NNAP)

- Shropshire, Staffordshire & Black Country Network improved their rate of on time ROP screening from 87% in 2015 to 98% in 2016
- Improvements to 2 year follow up assessments for at risk neonates in a district general hospital setting

Falls & Fragility Fracture (FFFAP)

- 6 hip fracture units taking place in the HIPQIP quality improvement collaborative using NHFD data to improve care
- 2,000 vision assessment toolkits distributed to clinical teams

Maternal, Newborn and Infant CORP

- One NHS trust established a new specialist bereavement suite 'bubble' to care for newly bereaved parents. An audit demonstrated the value both to parents and staff of having appropriate facilities to care for parents at this sad and vulnerable time.
- One NHS trust established a multidisciplinary team to identify recurring themes and develop actions to reduce their stillbirth rate.

COPD

- Nearly 40 action plans have been submitted from hospitals who participated in the secondary care audit
- Spotlight series in both secondary care and pulmonary rehabilitation newsletters – aim to share learning about doing the audit, and local QI

Inflammatory Bowel Disease

- 2015-16: 10 peer support hospital visits
- 2006 -2017: 8 RCP-led IBD AUDIT regional action planning workshops and 125 action plans recorded.

- Hospitals have fed back that the PowerPoint presentations which show local results around the key findings have been very useful in disseminating results within their hospitals
- Regional quality improvement workshops in seven locations have increased awareness of how to apply QI methods to local audit findings

- 'Developing action plans to ensure that senior clinicians and other members of the MDT complete accurate data on cancer stage and tumour grade for submission to the NPCA'
- 'It was identified that there was a need to monitor the availability and uptake of high-dose rate brachytherapy'

Ophthalmology

- The audit tools we provide allow centres and surgeons to monitor their local results in real time maintaining a continuous focus on quality
- Audit findings used at regional and internal teaching sessions

Cardiac

- A hospital conducted a 3 month pilot programme to improve timeliness to angiography, as audit showed this was poor, improved compliance with angiography within 72 hours from less than 35% of patients to more than 85%, along with reducing length of stay
- Cardiothoracic Unit at one hospital carried out a full process review in 2013 and reduced waiting times from 14 to 8 days, and mortality from 3.2% to 2.6%.

Epilepsy12

 The project established an Epilepsy12 and OPEN UK Quality Improvement (QI) Facilitator Group in September 2018. Over the course of the next three years, the group will support paediatric epilepsy services in delivering top quality care to its patients through focused QI training events and associated activities.

Lung Cancer

- Local data have been used as a driver for local service improvement projects, such as reviewing and improving patient pathways
- NLCA targets and data have been used to investigate variance on resection rates within trusts

Oesophago-Gastric Cancer

- The audit publishes a local action plan template for trusts based on the annual report recommendations
- Since 2016, the audit has provided Trust summaries of the audit data

Diabetes

- There were 1,635 downloads of the 2016 hospital level report which is used for QI work at Hospital/Trust level
- Audit has driven the development of a trust-wide foot check chart at one NHS trust.

Mental Health CORP

- Safer Mental Health Services: A Self Assessment Toolkit: based on the Key Elements, designed for use by clinicians and service planners to audit local services. [Downloaded more than 2,400 times]
- Safety score card produced annually for each NHS trust in England. Provides trust position on 6 safer service measures compared to national medians.

Medical & Surgical CORP

- "My organisation considers the implementation of the recs to be essential, actively promoted by the medical and nursing staff."
- "We have to demonstrate to our Trust Board that we were compliant with ALL of the NCEPOD recommendations. This is taken as a clinical governance issue and a patient safety one."

Maternity and Perinatal

- Several services presented internal work conducted as a direct result of the NMPA findings at our Nov 2018 event. These included quality improvement work on post-partum haemorrhage and data quality improvements
- 14 services reported undertaking additional staff training as a result of the NMPA results

- 811,227 downloads of SSNAP outputs (to September 2016)
- 3 annual reports created, written with and for patients. Over 100,000 downloads of two latest reports

Bowel cancer

- The 2016 annual report has had 1184 downloads since the publication date in December 2016
- The Clinical Outcomes Publication data is published on NHS Choices

Paediatric Diabetes

- Lay summaries of NPDA key publications are sent in hardcopy to all clinics, and inform parents of the importance of good diabetes control in addition to breaking down key report findings/ messages
- Online unit reports enable parents and patients to identify whether another local unit may provide better care.

National Vascular Registry

- National, NHS trust and consultant level results are published on the VSQIP website in a manner that should be easy to understand by patients and the public
- The NVR provides consultant and trust level results to NHS Choices/MyNHS

Neonatal (NNAP)

- Your Baby's Care a guide to the NNAP 2017
 Annual Report available in every neonatal unit.

 Available in English and Welsh
- Unit level poster displaying audit results using infographics sent to every neonatal unit

Falls & Fragility Fracture (FFFAP)

- 10,000 copies of Preventing Falls in Hospital patients guide distributed
- 12 questions are answered in My Hip Fracture Care, a guide for patients, families and carers

Maternal, Newborn and Infant CORP

- In response to our reports the UK Sepsis Trust released six new clinical toolkits specifically for women in pregnancy. Tools are available for out of hours/telephone triage, community midwives, prehospital/ambulance services, general practice, emergency departments and acute medical units, as well as acute hospital inpatients
- We co-produce MBRRACE-UK lay reports with our Public, Parent and Patient Involvement (PPPI) stakeholders to ensure the reports meet the needs of women and families and that the findings have maximum public engagement and impact

COPD

 Between 1 January 2016 and 31 January 2017, the audit programme webpages received nearly 48,000 hits and @NatCOPDAudit has 636 Twitter followers

Inflammatory Bowel Disease

- Active collaboration with Crohns and Colitis UK including joint publication of IBD audit summary report supported by 'My Crohn's and Colitis Care' patient guide – 2015
- IBD audit data supports IBD Patient Panels in evidencing the need for improvements of care

- Accessible version of the national report in January 2018 (produced with input from people living with dementia) which will increase the reach of the audit findings
- National report publicised on the Alzheimer's Society Talking Point. Post seen over 1,700 times

- Prostate Cancer UK utilises the results of the NPCA Organisational Audit to inform patients regarding the availability of services
- Patient/public summaries of NPCA findings have been prepared each year in consultation with PCUK and Tackle – dissemination to membership

Ophthalmology

 3,447 people visited the NOD website since the report publication in July 2017

Cardiac

- Produced a plain English patient-focussed infographic summary of the 2018 report with some of the key findings across the 5 audits. It was presented in an engaging and informative way and has been positively received
- Virtual patient panel of 20 to give feedback. This group reviewed the report at an early stage and made key suggestions to improve it from a lay perspective

Epilepsy12

 Children and young people are actively involved in the project's work via the the Epilepsy12 CYP engagement plan. This has been demonstrated by the CYP symposium, delivered by Epilepsy12 Youth Advocates at the inaugural Epilepsy12/OPEN UK National Conference in June 2018 and the publication of a report on Epilepsy12 "Clinic Chats" which was also written by the Youth Advocates themselves.

Lung Cancer

- Our data has been used by the Roy Castle Lung Cancer Foundation to provide an interactive map on their website for lung cancer patients to easily access facts about their local networks and trusts.
- @RCP_NLCA highlights key findings from our audit and has almost 300 followers on Twitter

Oesophago-Gastric Cancer

- The audit encourages patient involvement by inviting members from the oesophageal patient association to Clinical Reference Group
- Clinical Outcomes Publication data is published on NHS Choices

Diabetes

- Report published in a user friendly format to coincide with the Diabetes UK professional conference
- Diabetes Voices service champions use the data locally to target services

Mental Health CORP

- Videos/ infographics: For each report we produce a short video recording capturing the main findings of the study and implications for patient care and an infographic which simply and clearly states key figures and messages
- Number of unique home page visits Aug 2016-Jun 2017: 14,500

Medical & Surgical CORP

- NCEPOD has recruited a panel of lay representatives to support our entire work programme
- The Times reported in 2017 'London terror attack: trauma centres are saving more lives' as a result of the NCEPOD trauma report

Maternity and Perinatal

- Women and Families Involvement Group (WFIG) regular meetings, involvement with lay summary, setting PPI agenda for NMPA
- Active Twitter account: >300 followers >1300 profile visits during the month of the clinical report launch



Measuring and improving our healthcare services

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