

## **SOUTH EAST SCOTLAND CANCER NETWORK PROSPECTIVE CANCER AUDIT**

# **OESOPHAGO-GASTRIC CANCER 2018**

## **COMPARATIVE AUDIT REPORT**

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**Report number: SA UGI09/19W**

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Patients diagnosed 1st January 2018 – 31st December 2018

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## DOCUMENT HISTORY

Version	Circulation	Date	Comments
Version 1	SCAN Upper GI Group meeting	12/11/2019	Actions identified. Comments added
Version 2	Lead Clinician for commentary and comments	12/11/2019	Lead Clinician's commentary added
Version 3	Final draft report circulated to SCAN Upper GI Group	12/11/2019	For final comments
Version 4	Final report and action plans circulated to SCAN Upper GI Group and Clinical Governance Groups	27/11/2019	No comments received
Version 4W	Final report added to the SCAN website		

# **OESOPHAGO-GASTRIC CANCER 2018 COMPARATIVE AUDIT REPORT**

## **COMMENT BY CHAIR OF THE SCAN UPPER GI GROUP**

The introduction of oesophagogastric cancer QPIs has led to improvement in the level and quality of audit data with the aim of driving good practice and equity of care. The SCAN audit team have worked extremely hard to provide complete and accurate data for the 2018 report.

In many QPIs there has been good performance driven by key areas of good practice:

1. The SCAN-wide oesophagogastric cancer MDT (including Lothian, Fife, Borders, and Dumfries & Galloway Boards) to ensure equity of care and promote good practice including communication between boards and collection of QPI data. Ongoing work is required to ensure documentation of TNM stage and treatment intent for all patients.
2. There is ongoing high performance in postoperative and post oncology treatment outcomes reflecting good team work, case selection, and multidisciplinary care of patients.
3. National network meetings to share good practice between networks and support current work on the 2<sup>nd</sup> cycle of QPI revision.

However, there are some QPIs where the results are repeatedly below the target level and represent a challenge for both SCAN and at a national level:

1. QPI 5 – The nutritional QPI has proved difficult, particularly with recording MUST scores prior to treatment. There has been an improvement in results in 2018 but targeted work is ongoing.
2. Failure to meet the curative treatment rate QPI reflects national results and requires a national drive towards earlier diagnosis for oesophagogastric cancer.

Mr Peter Lamb  
Chair, SCAN Upper GI Group  
November 2019

## SCAN Action points 2018

QPI	Action required	Lead	Date for Update
4	MDM Chair to ensure that the treatment intent is clearly stated in order for MDM coordinators and audit staff to document accurately.	Pete lamb	RCPG meeting March 2020
13	Although the QPI was met in SCAN, it is noted that NICE guidelines advise that all patients with oesophagogastric adenocarcinoma should be tested for HER2. This QPI therefore requires to be revised.	Pete Lamb /Formal Review	5 <sup>th</sup> November 2019
Trials	Some trials (particularly surgical trials) are not currently registered on the EDGE database (where data for this QPI is taken from). In order to ensure the EDGE database is complete and up to date principal investigators should liaise with the SCR Network Manager to ensure trials are registered on the SCR database "EDGE".	Richard Skipworth / Dorothy Boyle	RCPG meeting March 2020

### Action Plans from previous report (2017)

No.	Action Required / Health Board Action Taken	Lead	Progress/Action Status
QPI 4	MDM Chair to ensure that TNM and treatment intent is clearly stated in order for MDM coordinators and audit staff to document accurately.	Peter Lamb	This has been highlighted through the SCAN wide MDT
QPI 5i	SCAN Dieticians need to put mechanisms in place to ensure MUST scores are calculated and documented in the patient record. Borders: Agreement within the dietetic team to assess all patients with a diagnosis of Upper GI Cancer regardless of MUST score. MUST score is then recorded in EMIS with a copy dietetic assessment letter to the patient's central record. D&G: Due to local pathway dieticians are not able to ensure MUST scores are recorded. Local UGI CNS now records MUST scores for patients at time of MDT referral if this has not been done previously. This will be recorded as a clinical note in clinical portal by the CNS Fife: CNS to aim to carry out nutritional assessment and record MUST score	BGH: Ann O'Connor  D&G:M Keith/H Johnstone  Lothian: Beverley Wallace	Borders: Policy in place. Reminder emails sent to individual dieticians by the Lead of Service to record/copy MUST scores to the patient's central record. D&G: MUST scores are now recorded for all patients referred to MDT since 01/01/2019 Fife: A system is now in place so that MUST Score will be collected by the CNS/HCSW Lothian:
QPI 5ii	Mechanisms need put in place to ensure that patients at risk of malnutrition are referred into the dietetics service appropriately Borders: GI Consultants/Endoscopists agreed to ensure patients diagnosed with upper GI cancer are referred to a dietician by the endoscopist at the time of diagnosis, describing dysphagia, grade, weight, BMI and amount of weight loss. D&G: Local pathways exist for patients to be referred to dietetics if they require intervention due to malnutrition. Improved recording of MUST score as per 5i will provide reassurance that this is a robust pathway	BGH: Dr Jonathan Fletcher D&G: M Keith/H Johnstone Lothian: Beverley Wallace	Borders: Agreed protocol is in place ensuring people with upper GI Cancer are seen by a dietician. The dietetic service includes proactive management of people with upper GI Cancer who have a MUST score of 0. D&G: To be monitored as present performance appears to be appropriate to meet this QPI Fife: Nutritional Screening is carried out on all cancer patients and this is currently an acceptable form of referral to the Dietitian
QPI 5ii	Lothian gastric case with MUST score greater than 2 not seen by a dietician requires review.	Beverley Wallace	Lothian: Patient details being sent to Fiona Huffer
QPI 13	Action is required in NHS Fife to ensure HER2 status is reported prior to commencing treatment.	Peter Driscoll Alan Christie Vicki Saves	Recent performance seems to have been 100% for HER2 availability pre-treatment over the last 6 months and no treatment plans have been changed after starting.

No.	Action Required / Health Board Action Taken	Lead	Progress/Action Status
Trials	Principal investigators should liaise with the SCRN Network Manager to ensure trials are registered on the SCRN database "EDGE".	Richard Skipworth	None noted

OG QPI Attainment Summary - 2018		Target%	Borders	D&G	Fife	Lothian	SCAN
QPI 1: Endoscopy - Histological diagnosis made within 6 weeks of initial endoscopy and biopsy	Oesophageal	95	N 31 91.2% D 34	N 25 96.2% D 26	N 74 93.7% D 79	N 116 86.6% D 134	N 246 90.1% D 273
	Gastric	95	N 9 100% D 9	N 9 81.8% D 11	N 17 89.5% D 19	N 30 85.7% D 35	N 65 87.8% D 74
QPI 3: MDT before definitive treatment	Oesophageal	95	N 28 87.5% D 32	N 24 100% D 24	N 75 94.9% D 79	N 128 95.5% D 134	N 255 94.8% D 269
	Gastric	95	N 5 62.5% D 8	N 11 100% D 11	N 18 94.7% D 19	N 34 91.9% D 37	N 68 90.7% D 75
QPI 4: TNM Staging recorded at MDT prior to treatment	Oesophageal	90	N 29 85.3% D 34	N 24 92.3% D 26	N 79 100% D 79	N 122 89.1% D 137	N 254 92.0% D 276
	Gastric	90	N 6 66.7% D 9	N 11 100% D 11	N 19 100% D 19	N 30 81.1% D 37	N 66 86.8% D 76
QPI 4: TNM Treatment Intent recorded at MDT prior to treatment	Oesophageal	95	N 30 88.2% D 34	N 24 92.3% D 26	N 78 98.7% D 79	N 110 80.3% D 137	N 242 87.7% D 276
	Gastric	95	N 5 55.6% D 9	N 11 100% D 11	N 19 100% D 19	N 31 83.8% D 37	N 66 86.6% D 76
QPI 5: Nutritional Assessment: Undergo screening with the Malnutrition Universal Screening Tool (MUST) before first treatment.	Oesophageal	95	N 24 70.6% D 34	N 10 38.5% D 26	N 75 94.9% D 79	N 84 61.3% D 137	N 193 69.9% D 276
	Gastric	95	N 5 55.6% D 9	N 4 36.4% D 11	N 19 100% D 19	N 17 45.9% D 37	N 45 59.2% D 76
QPI 5: Nutritional Assessment: are at high risk of malnutrition (MUST score >2) referred to dietician	Oesophageal	90	N 18 100% D 18	N 12 100% D 12	N 42 100% D 42	N 54 98.2% D 55	N 126 99.2% D 127
	Gastric	90	N 1 100% D 1	N 6 100% D 6	N 4 100% D 4	N 15 100% D 15	N 26 100% D 26
QPI 6: Appropriate Selection: Neo-Adjuvant chemotherapy followed by surgical resection	Oesophageal	80	N 4 80.0% D 5	N 4 80.0% D 5	N 9 90.0% D 10	N 17 89.5% D 19	N 34 87.2% D 39
	Gastric	80	N 1 50.0% D 2	N 1 100.0% D 1	N 1 100% D 1	N 1 100.0% D 1	N 4 80.0% D 5
QPI 7 (i): 30 Day Mortality Following Surgery (presented by Board of Surgery)	Oesophageal	<5	Board of Surgery			N 1 2.4% D 42	N 1 2.4% D 42

OG QPI Attainment Summary - 2018		Target%	Borders	D&G	Fife	Lothian	SCAN
	Gastric	<5	N 0 D 0 -	N 0 0.0% D 1 0.0%	N 0 - D 0 -	N 0 0.0% D 14 0.0%	N 0 0.0% D 15 0.0%
QPI 7 (II): 90 Day Mortality Following Surgery (presented by Board of Surgery)	Oesophageal	<7.5	Board of Surgery			N 2 4.8% D 42 4.8%	N 2 4.8% D 42 4.8%
	Gastric	<7.5	N 0 D 0 -	N 0 0.0% D 1 0.0%	N 0 - D 0 -	N 0 0.0% D 14 0.0%	N 0 0.0% D 15 0.0%
QPI 8: Lymph Node Yield – Curative resection where >15 lymph nodes are resected and examined (Presented by Board of Surgery)	Oesophageal	90	Board of Surgery			N 38 90.5% D 42 90.5%	N 38 90.5% D 42 90.5%
	Gastric	80	N 0 D 0 -	N 1 100% D 1 100%	N 0 - D 0 -	N 9 64.3% D 14 64.3%	N 10 66.7% D 15 66.7%
QPI 9: Hospital of Stay: Discharge within 14 days of surgical procedure (presented by Board of Surgery)	Oesophageal	60	Board Of Surgery			N 36 73.5% D 49 73.5%	N 36 73.5% D 49 73.5%
	Gastric	60	N 0 D 0 -	N 2 100% D 2 100%	N 0 - D 0 -	N 18 94.7% D 19 94.7%	N 20 95.2% D 21 95.2%
QPI 10(I): Oesophageal resection margins. Circumferential clear (presented by Board of Surgery)	Oesophageal	70	Board of Surgery			N 31 73.8% D 42 73.8%	N 31 73.8% D 42 73.8%
QPI 10(II): Longitudinal margins clear (presented by Board of Surgery)	Oesophageal	90	Board of Surgery			N 42 100% D 42 100%	N 42 100% D 42 100%
	Gastric	90	N 0 D 0 -	N 1 100% D 1 100%	N 0 - D 0 -	N 14 100% D 14 100%	N 15 100% D 15 100%
QPI 11: Curative Treatment Rates	Oesophageal	35	N 8 23.5% D 34 23.5%	N 6 23.1% D 26 23.1%	N 19 24.1% D 79 24.1%	N 35 25.5% D 137 25.5%	N 68 24.6% D 276 24.6%
	Gastric	35	N 2 22.2% D 9 22.2%	N 2 18.2% D 11 18.2%	N 4 21.1% D 19 21.1%	N 9 24.3% D 37 24.3%	N 17 22.4% D 76 22.4%
QPI 12: 30 day Mortality after Oncological Treatment	Oesophageal curative Chemoradiotherapy	<5	N 0 D 0 -	N 0 - D 0 -	N 0 0.0% D 1 0.0%	N 0 0.0% D 1 0.0%	N 0 0.0% D 2 0.0%
	Oesophageal Peri-operative Chemotherapy	<5	N 0 0.0% D 5 0.0%	N 0 0.0% D 5 0.0%	N 0 0.0% D 8 0.0%	N 0 0.0% D 18 0.0%	N 0 0.0% D 36 0.0%
	Oesophageal Adjuvant Chemotherapy	<5	N 0 D 0 -	N 0 0.0% D 2 0.0%	N 0 - D 0 -	N 0 0.0% D 1 0.0%	N 0 0.0% D 3 0.0%
	Oesophageal Downstaging Chemotherapy	<5	N 0 D 0 -	N 0 - D 0 -	N 0 - D 0 -	N 0 - D 0 -	N 0 - D 0 -
	Gastric Curative Chemoradiotherapy	<5	N 0 D 0 -	N 0 - D 0 -	N 0 - D 0 -	N 0 - D 0 -	N 0 - D 0 -

OG QPI Attainment Summary - 2018		Target%	Borders	D&G	Fife	Lothian	SCAN
	Gastric Peri-operative Chemotherapy	<5	N 0 D 2 0.0%	N 0 D 1 0.0%	N 0 D 1 0.0%	N 0 D 1 0.0%	N 0 D 5 0.0%
	Gastric Adjuvant Chemotherapy	<5	N 0 D 0 -	N 0 D 0 -	N 0 D 0 0.0%	N 0 D 0 -	N 0 D 0 0.0%
	Gastric Downstaging Chemotherapy	<5	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -
QPI 12: 90 day Mortality after Oncological Treatment	Oesophageal Curative Chemoradiotherapy	<7.5%	N 0 D 0 -	N 0 D 0 -	N 0 D 1 0.0%	N 0 D 1 0.0%	N 0 D 2 0.0%
	Oesophageal Peri-operative Chemotherapy	<7.5%	N 0 D 5 0.0%	N 0 D 5 0.0%	N 0 D 8 0.0%	N 0 D 18 0.0%	N 0 D 36 0.0%
	Oesophageal Adjuvant Chemotherapy	<7.5%	N 0 D 0 -	N 0 D 2 0.0%	N 0 D 0 -	N 0 D 1 0.0%	N 0 D 3 0.0%
	Oesophageal Downstaging chemotherapy	<7.5%	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -
	Gastric Curative Chemoradiotherapy	<7.5%	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -
	Gastric Peri-operative Chemotherapy	<7.5%	N 0 D 2 0.0%	N 0 D 1 0.0%	N 0 D 1 0.0%	N 0 D 1 0.0%	N 0 D 5 0.0%
	Gastric Adjuvant Chemotherapy	<7.5%	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -
	Gastric Downstaging Chemotherapy	<7.5%	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -	N 0 D 0 -
	Oesophageal palliative Chemotherapy	<5%	N 1 D 5 20.0%	N 0 D 4 0.0%	N 4 D 15 26.7%	N 0 D 19 0.0%	N 5 D 43 11.6%
	Gastric Palliative Chemotherapy	<5%	N 0 D 1 0.0%	N 0 D 0 -	N 0 D 2 0.0%	N 0 D 3 0.0%	N 0 D 6 0.0%
QPI 13 HER2 Status in Advanced Gastric Cancer	90%	N 0 D 0 -	N 1 D 1 100%	N 1 D 1 100%	N 2 D 2 100%	N 4 D 4 100%	
Clinical Trial QPI NB: N= patients consented to trial/study on SCRN database, D = 5 year average Cancer Registry patients	15%	N 2 D 36 5.6%	N 1 D 46 2.2%	N 2 D 95 2.1%	N 14 D 185 7.6%	N 19 D 362 5.2%	



## INTRODUCTION AND METHODS

### Cohort

This report covers patients diagnosed with an Oesophageal or Gastric cancer from 01/01/2018 to 31/12/2018. The results contained within this report are presented by NHS board of diagnosis, where the QPI relates to surgical outcomes the results are presented by hospital of surgery.

### Dataset and Definitions

The QPIs have been developed collaboratively with the three Regional Cancer Networks, Information Services Division (ISD), and Healthcare Improvement Scotland. QPIs will be kept under regular review and be responsive to changes in clinical practice and emerging evidence.

The overarching aim of the cancer quality work programme is to ensure that activity at NHS board level is focussed on areas most important in terms of improving survival and patient experience whilst reducing variance and ensuring safe, effective and person-centred cancer care.

Following a period of development, public engagement and finalisation, each set of QPIs is published by Healthcare Improvement Scotland.

Accompanying datasets and measurability criteria for QPIs are published on the ISD website<sup>1</sup>. NHS boards are required to report against QPIs as part of a mandatory, publicly reported, programme at a national level.

The QPI dataset for Upper GI was implemented from 01/01/2013. A formal 3 year review of the Upper GI Cancer QPIs was undertaken and published on the HIS website in April 2017. The revised QPIs were used to report year 4, 2016 data with the existing data fields and using the new measurability. Where new data fields were required, collection and reporting started in year 5, 2017.

The second 3 year formal review for the Upper GI cancer QPIs commences in autumn 2019.

The standard QPI format is shown below:

QPI Title:	Short title of Quality Performance Indicator (for use in reports etc.)	
Description:	Full and clear description of the Quality Performance Indicator.	
Rationale and Evidence:	Description of the evidence base and rationale which underpins this indicator.	
Specifications:	Numerator:	Of all the patients included in the denominator those who meet the criteria set out in the indicator.
	Denominator:	All patients to be included in the measurement of this indicator.
	Exclusions:	Patients who should be excluded from measurement of this indicator.
	Not recorded for numerator:	Include in the denominator for measurement against the target. Present as not recorded only if the patient cannot otherwise be identified as having met/not met the target.
	Not recorded for exclusion:	Include in the denominator for measurement against the target unless there is other definitive evidence that the record should be excluded. Present as not recorded only where the record cannot otherwise be definitively identified as an inclusion/exclusion for this standard.
	Not recorded for denominator:	Exclude from the denominator for measurement against the target. Present as not recorded only where the patient cannot otherwise be definitively identified as an inclusion/exclusion for this standard.
Target:	Statement of the level of performance to be achieved.	

<sup>1</sup> Datasets and measurability documents are available at [www.isdscotland.org](http://www.isdscotland.org)

## Audit Processes

Data was analysed by the audit facilitators in each NHS board according to the measurability document provided by ISD. SCAN data was collated by Kirsty Martin, SCAN Audit Facilitator for Upper GI cancer.

Patients were mainly identified through registration at weekly multidisciplinary meetings, and through checks made against pathology listings and GRO death listings. Data capture was dependent on casenote audit and review of various hospitals electronic records systems. SCAN data was recorded in eCase for Lothian, Borders, Dumfries & Galloway and Fife.

## Lead Clinicians and Audit Personnel

SCAN Region	Hospital	Lead Clinician	Audit Support
NHS Borders	Borders General Hospital	Mr Jonathon Fletcher	Alistair Johnston
NHS Dumfries & Galloway	Dumfries & Galloway Royal Infirmary	Mr Jeyakumar Apollos	Campbell Wallis
NHS Fife	Queen Margaret Hospital Victoria Hospital	Mr Peter Driscoll	Maureen Lamb
SCAN & NHS Lothian	St Johns Hospital Royal Infirmary Edinburgh Western General Hospital	Mr Peter Lamb	Kirsty Martin
	Edinburgh Cancer Centre	Oncologist: Dr Lucy Wall	

## Data Quality Assurance

All hospitals in mainland Scotland participate in a Quality Assurance (QA) programme provided by the National Services Scotland Information Services Division (ISD). QA of the Oesophago-Gastric data was carried out in July 2014 and this showed an average of 97.2% data accuracy for SCAN and the average accuracy for Scotland was 98.8% accuracy

## Clinical Sign-off

To ensure the quality of the data and the results presented, the process was as follows:

- Individual health board results were reviewed and signed-off locally.
- Collated results were presented and discussed at the Upper GI SCAN Group Meeting on 6<sup>th</sup> September 2019.
- The final draft of the regional report was circulated to members of the SCAN Upper GI Group and Clinical Governance Framework on 27<sup>th</sup> November 2019.

## ESTIMATE OF CASE ASCERTAINMENT

### Estimated Case Ascertainment

An estimate of case ascertainment (the percentage of the population with oesophageal or gastric cancer recorded in the audit) is made by comparison with the Scottish Cancer Registry five-year average data from 2013 to 2017. High levels of case ascertainment provide confidence in the completeness of the audit recording and contribute to the reliability of results presented. Levels greater than 100% may be attributable to an increase in incidence. Allowance should be made when reviewing results where numbers are small and variation may be due to chance.

**Number of cases recorded in audit:** patients diagnosed 01/01/2018 – 31/12/2018

	<b>Borders</b>	<b>D&amp;G</b>	<b>Fife</b>	<b>Lothian</b>	<b>SCAN</b>
Oesophageal Cancer	34	26	79	137	276
Gastric Cancer	9	11	19	37	76
<b>Total Upper GI Cancers</b>	<b>43</b>	<b>37</b>	<b>98</b>	<b>174</b>	<b>352</b>

**Estimate of case ascertainment:** calculated using the average of the most recent available five years of Cancer Registry Data

<b>Case Ascertainment</b>	<b>Borders</b>	<b>D&amp;G</b>	<b>Fife</b>	<b>Lothian</b>	<b>SCAN</b>
Number of cases from audit	43	37	98	174	352
Cases from Cancer Registry (2013-2017)	36	46	95	185	362
<b>Case Ascertainment</b>	<b>119.4%</b>	<b>80.4%</b>	<b>103.2%</b>	<b>94.1%</b>	<b>97.2%</b>

Source: Scottish Cancer Registry, ISD. Data extracted from ACaDMe 01/08/2019

Note: Case ascertainment is reported by board of diagnosis and has been estimated using a denominator based on the latest (2013-2017) five-year annual average available from the Scottish Cancer Registry.

Death certificate only cases have been excluded. Cases that have been diagnosed in the private sector but received any treatment in NHS hospitals have been included.

## DIAGNOSIS AND STAGING

### QPI 1 – Endoscopy

Target = 95%

Numerator = Number of patients with oesophageal or gastric cancer who undergo endoscopy and who have a histological diagnosis made within 6 weeks of initial endoscopy and biopsy

Denominator = All patients with oesophageal or gastric cancer who undergo endoscopy

Exclusions = No exclusions

#### Oesophageal cancer

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	0	0	0	3	3
Numerator	31	25	74	116	246
Not recorded for numerator	0	0	0	0	0
Denominator	34	26	79	134	273
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>91.2</b>	<b>96.2</b>	<b>93.7</b>	<b>86.6</b>	<b>90.1</b>

**Borders:** The target was not met showing a shortfall of 3.8% (3 cases). 2 had pathology confirmed after treatment and 1 had a clinical diagnosis only.

**D&G:** The target was met.

**Fife:** The target was not met showing a shortfall of 1.3% (5 cases). 3 had clinical diagnoses only and 2 had pathology confirmed on subsequent biopsy.

**Lothian:** The target was not met showing a shortfall of 8.4% (18 cases). In 14 cases, patients were clinically diagnosed with pathology showing high grade dysplasia or were highly suspicious, 5 of those were being followed up for Barrett's oesophagus. A further 3 patients had positive pathology after treatment, and 1 patient with a radiological diagnosis declined further investigations.

#### Gastric cancer

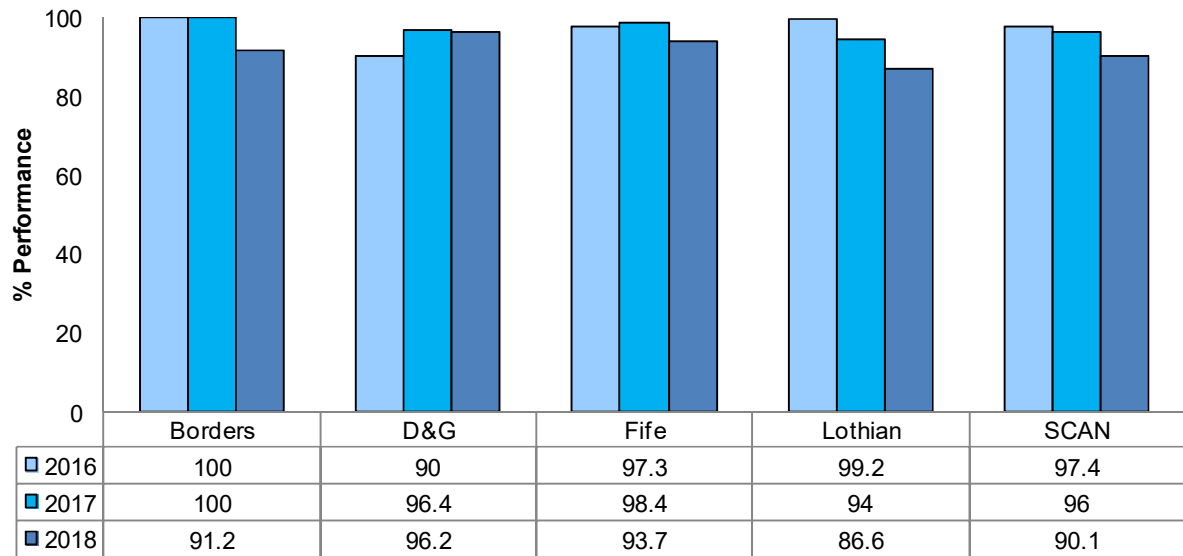
Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	9	11	19	37	76
Ineligible for this QPI	0	0	0	2	2
Numerator	9	9	17	30	65
Not recorded for numerator	0	0	0	0	0
Denominator	9	11	19	35	74
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>100.0</b>	<b>81.8</b>	<b>89.5</b>	<b>85.7</b>	<b>87.8</b>

**D&G:** The target was not met showing a shortfall of 13.2% (2 cases). 1 case showed high grade dysplasia and the other was a clinical diagnosis only.

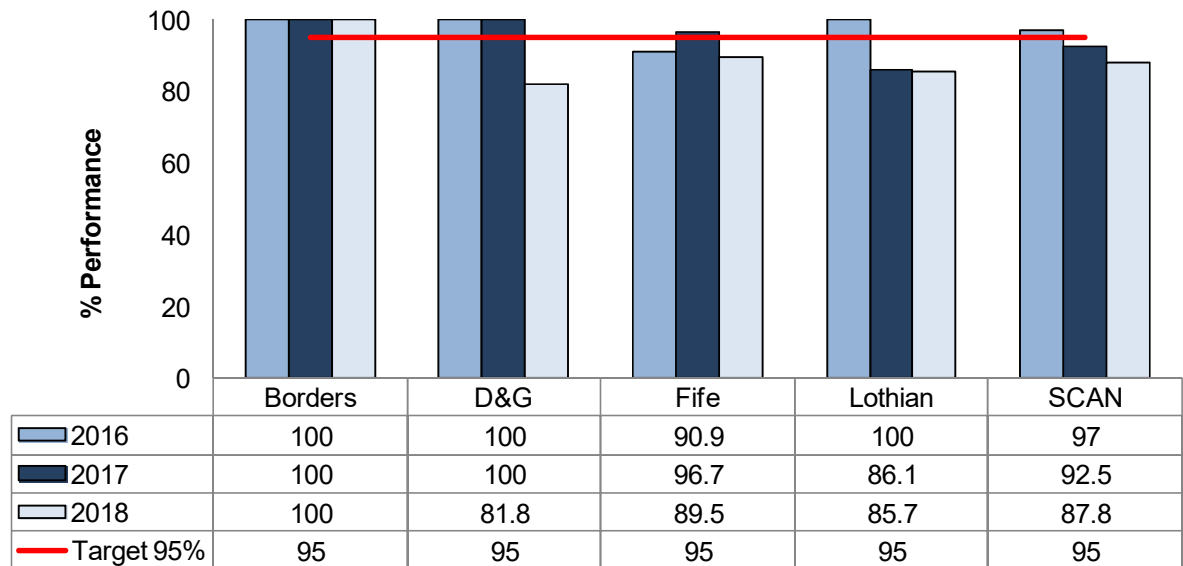
**Fife:** The target was not met showing a shortfall of 5.5% (2 cases). Neither patients were fit for further investigation. 1 patient had biopsy showing high grade dysplasia and had extensive disease on CT, the other had a biopsy which was not diagnostic.

**Lothian:** The target was not met showing a shortfall of 9.3% (5 cases). All 5 had clinical diagnoses prior to treatment. Initial path reports were not diagnostic, showing either a high suspicion or high grade dysplasia.

### QPI 1 - Endoscopy (Oesophageal)



### QPI 1 - Endoscopy (Gastric)

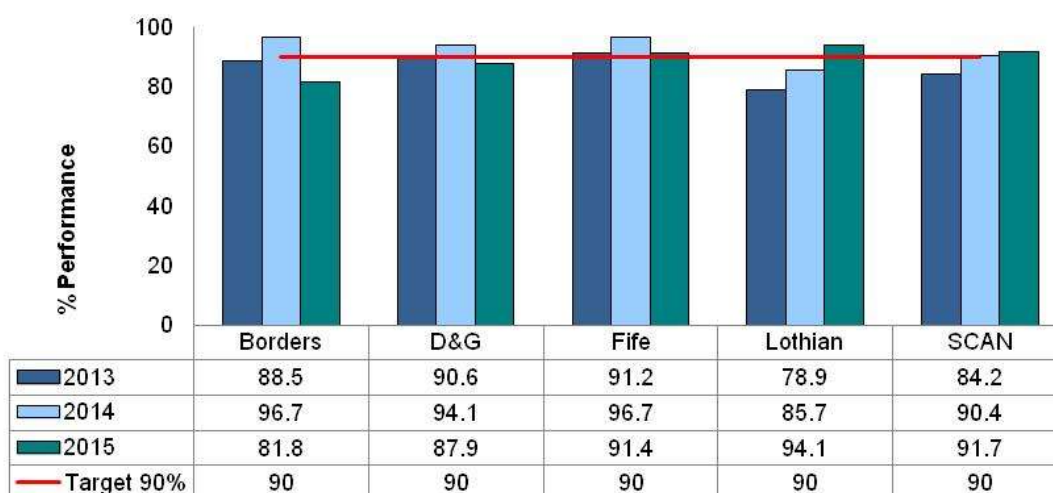


**Comment:**

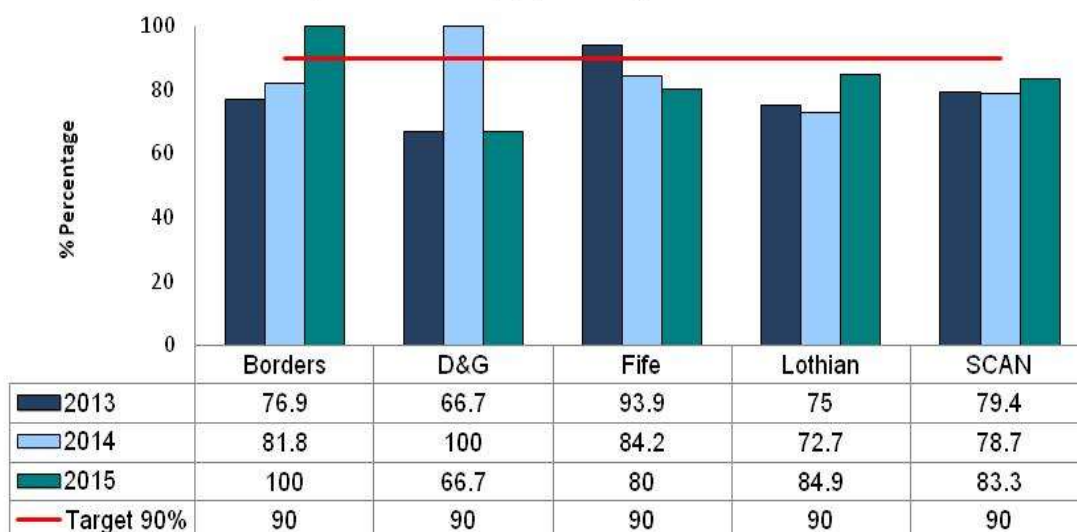
The majority of patients had a working clinical diagnosis prior to treatment and no action has been identified.

Following the formal review after 3 years of data collection, the measurability for QPI 1 was changed for year 4 (2016), when a 6 week timeframe was introduced and the target was increased to 95%. Below are QPI 1 details from the first 3 years.

**QPI 1 - Endoscopy (Oesophageal) 2013 - 2015**



**QPI 1 - Endoscopy (Gastric) 2013 - 2015**



### QPI 3 – Multi-Disciplinary Team (MDT) Meeting

Target = 95%

Numerator = Number of patients with oesophageal or gastric cancer discussed at the MDT meeting (MDM) before definitive treatment

Denominator = All patients with oesophageal or gastric cancer

Exclusions = Patients who died before first treatment

#### Oesophageal cancer

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	2	2	0	0	4
Numerator	28	24	75	128	255
Not recorded for numerator	0	0	0	0	0
Denominator	32	24	79	134	269
Not recorded for exclusions	0	0	0	1	1
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>87.5</b>	<b>100.0</b>	<b>94.9</b>	<b>95.5</b>	<b>94.8</b>

**Borders:** The target was not met showing a shortfall of 7.5% (4 cases). 2 patients for best supportive care were referred to MDM and died before discussion. 2 patients were treated (1 was treated prior to MDM discussion and 1 was not discussed at MDM).

**Fife:** The target was not met showing a shortfall (0.1%) (4 cases). All 4 patients were treated prior to discussion at MDM.

#### Gastric cancer

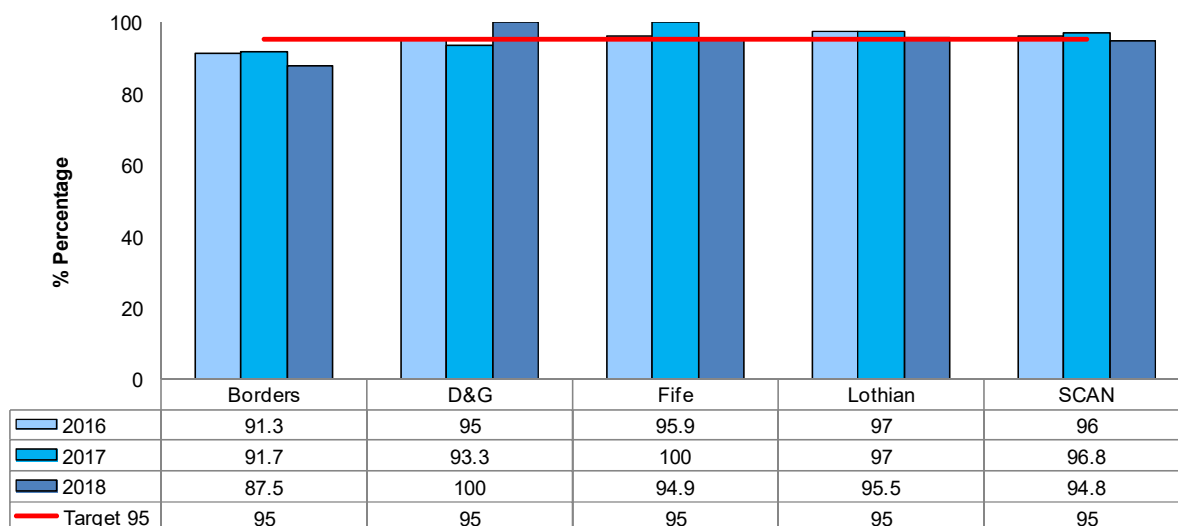
Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	9	11	19	37	76
Ineligible for this QPI	1	0	79	0	80
Numerator	5	11	18	34	68
Not recorded for numerator	0	0	0	0	0
Denominator	8	11	19	37	75
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>62.5</b>	<b>100.0</b>	<b>94.7</b>	<b>91.9</b>	<b>90.7</b>

**Borders:** The target was not met showing a shortfall 32.5% (3 cases). 1 patient had metastatic disease and not fit for chemotherapy, was not referred to the MDM and died. 1 patient was treated endoscopically and was not referred to MDM. 1 patient had a secondary primary cancer and was not referred to Upper GI MDM.

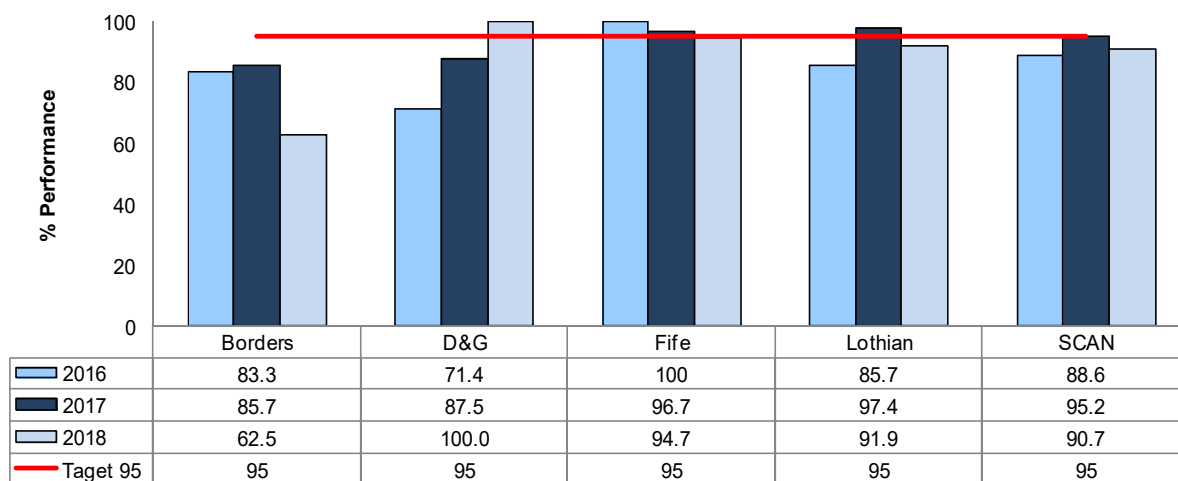
**Fife:** The target was not met by 0.3% (1 case). This patient had extensive disease and a decision was made on the ward for supportive care prior to MDM.

**Lothian:** The target was not met showing a shortfall of 3.1% (3 cases). 3 patients were not discussed at MDM (2 received radiological diagnoses only and were for best supportive care and 1 emergency admission received best supportive care).

### QPI 3 - Multi-Disciplinary Team (Oesophageal)



### QPI 3 - Multi-Disciplinary Team (Gastric)



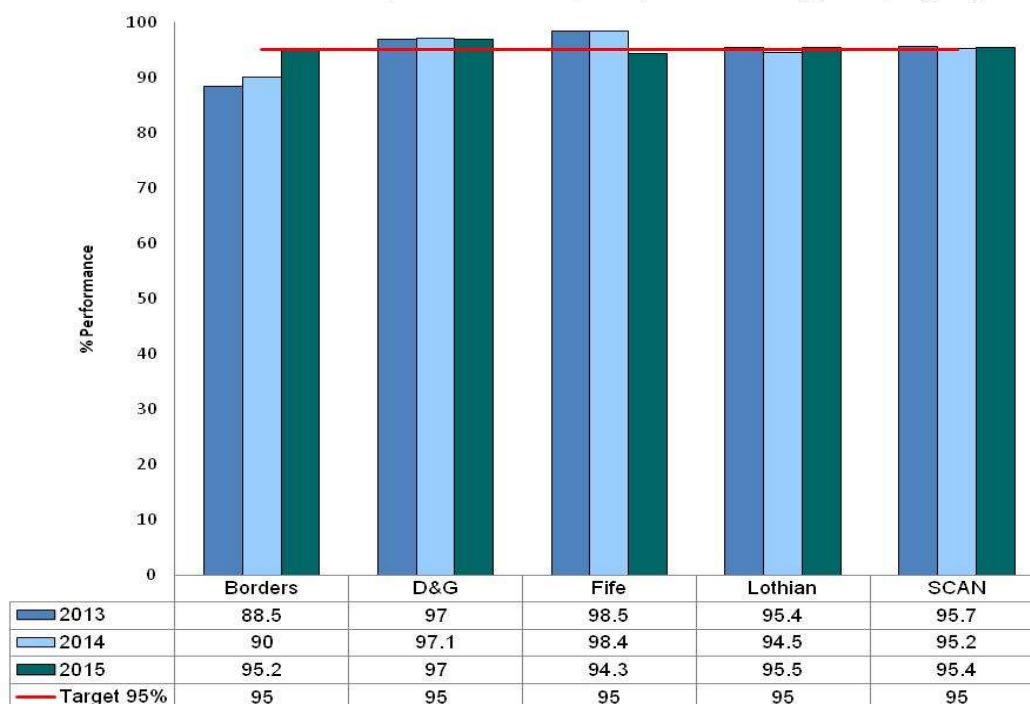
#### Comment:

All cases have been reviewed and patients treated prior to MDT discussion were treated appropriately, no action has been identified.

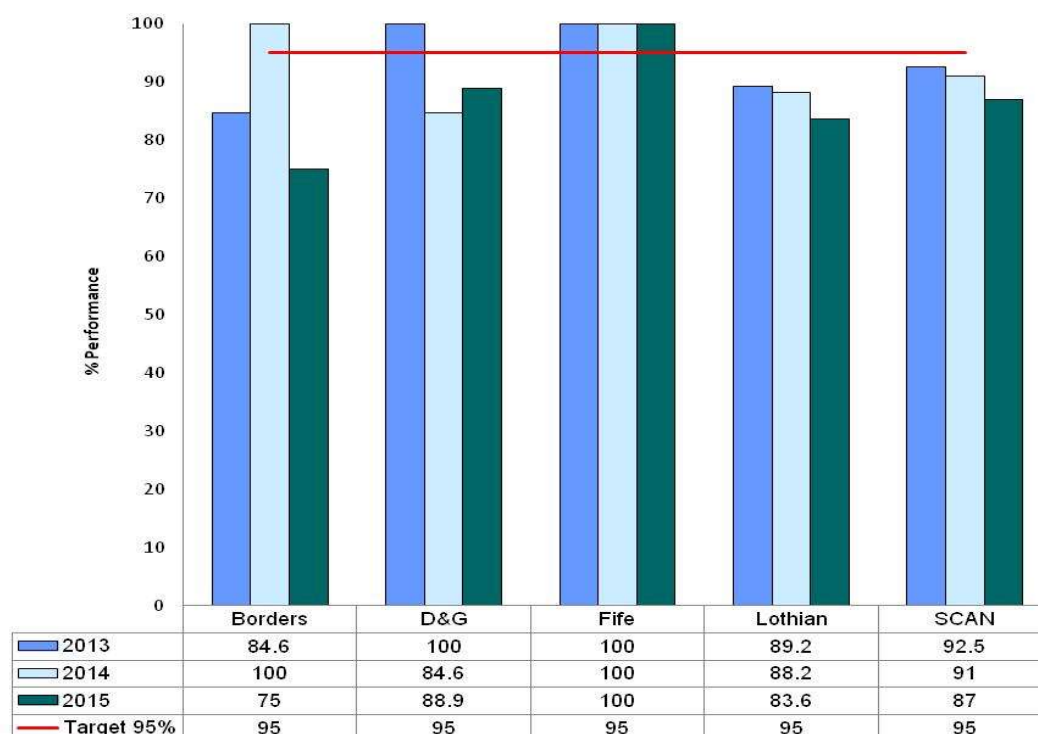


After the formal 3 year review the measurability for QPI 3 changed for year 4 (2016). The QPI was previously more complex and included whether TNM and treatment intent were recorded at MDM. Below are the details from the first 3 years of QPI3 results with those requirements.

**QPI 3 - Multi-Disciplinary Team Meeting (Oesophageal)**



**QPI 3 Multi-Disciplinary Team Meeting (Gastric)**



## QPI 4i – Staging (TNM)

Staging Target = 90%

Numerator = Number of patients with oesophageal or gastric cancer who have TNM stage recorded at the MDT meeting (MDM) prior to treatment

Denominator = All patients with an oesophageal or gastric cancer diagnosis

Exclusions = No exclusions

### Oesophageal cancer

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	0	0	19	0	19
Numerator	29	24	79	122	254
Not recorded for numerator	0	0	0	0	0
Denominator	34	26	79	137	276
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>85.3</b>	<b>92.3</b>	<b>100.0</b>	<b>89.1</b>	<b>92.0</b>

**Borders:** The target was not met showing a shortfall of 4.7% (5 cases). 4 patients were frail and or elderly and were not discussed at MDT so staging was not recorded. 1 patient was diagnosed with both UGI and HPB cancers, and was node positive from the HPB cancer.

**Lothian:** There was a shortfall of 0.9% (15 cases). 7 patients had no TNM recorded at MDM (5 of whom received EMR which diagnosed and treated the cancer prior to MDM). 6 patients were not discussed at MDM (4 were for best supportive care and 2 died before MDM). 1 patient was discussed at MDM with no mention of metastatic disease. 1 patient with a concurrent primary was discussed at a different MDM and had no TNM recorded for the OG cancer.

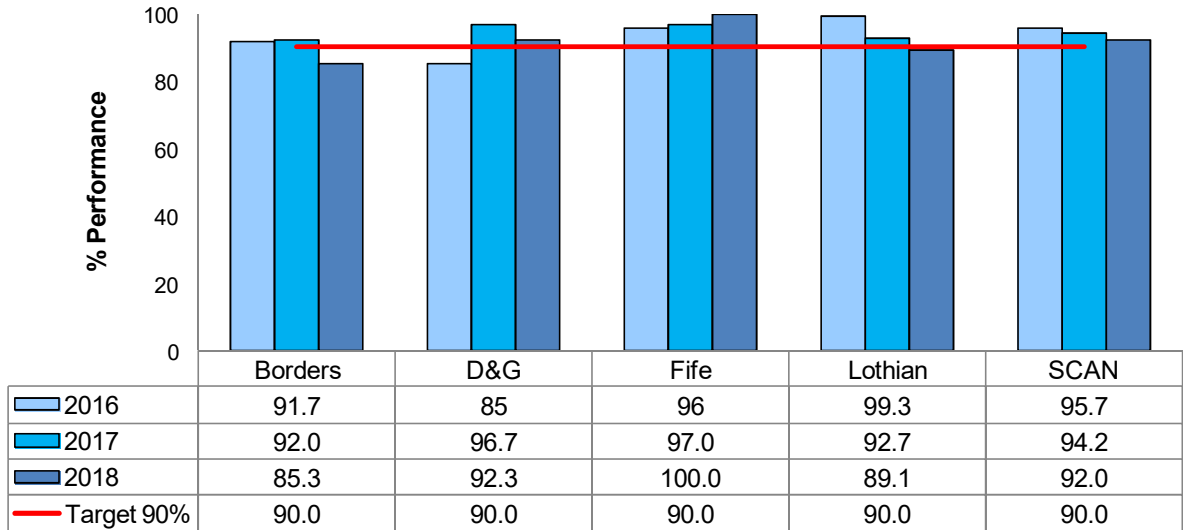
### Gastric cancer

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	9	11	19	37	76
Ineligible for this QPI	0	0	0	0	0
Numerator	6	11	19	30	66
Not recorded for numerator	0	0	0	0	0
Denominator	9	11	19	37	76
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>66.7</b>	<b>100.0</b>	<b>100.0</b>	<b>81.1</b>	<b>86.8</b>

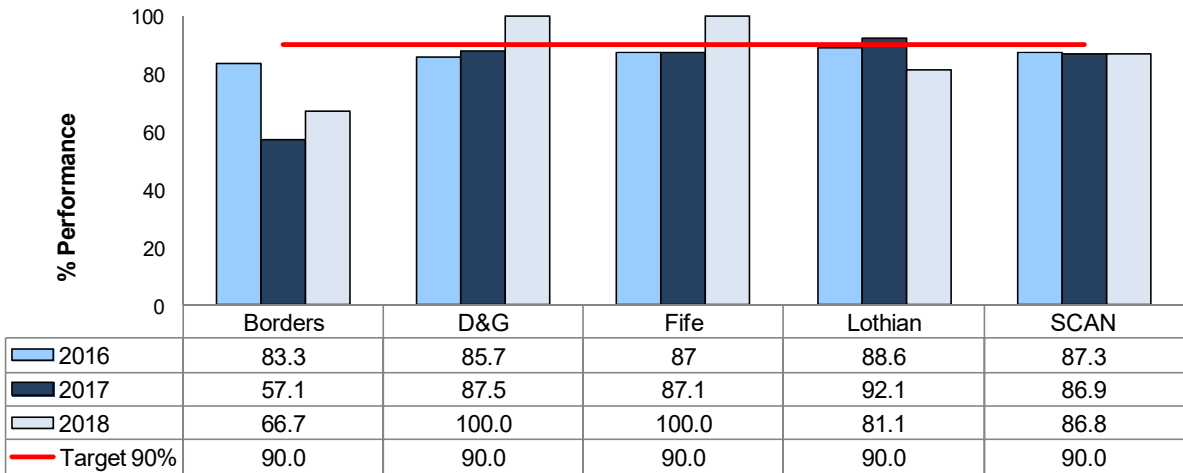
**Borders:** The target was not met showing a shortfall of 23.3% (3 cases). All 3 were frail and were not discussed at MDM.

**Lothian:** The target was not met with a shortfall of 8.9% (7 cases). 6 patients had no TNM recorded at MDM and 1 was not discussed at MDM.

**QPI 4 - TNM Stage recorded at MDT prior to treatment (Oesophageal)**



**QPI 4 - TNM Stage recorded at MDT prior to treatment (Gastric)**



TNM stage and treatment intent were previously part of QPI 3 so comparable data are not available prior to 2016.

**Comment:** Patients who are frail with advanced disease are sometimes not discussed at MDM because the treatment options are limited to best supportive care. The tolerance is designed to allow for situations where patients are not fit for further investigations, however in the Gastric cancer cohort, small numbers produce large percentage differences. No action has been identified.

## QPI 4ii – Treatment Intent

Target = 95%

Numerator = Number of patients with oesophageal or gastric cancer who have treatment intent recorded at the MDT meeting prior to treatment.

Denominator = All patients with an oesophageal or gastric cancer diagnosis

Exclusions = No exclusions

### Oesophageal Cancer

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	0	0	0	0	0
Numerator	30	24	78	110	242
Not recorded for numerator	0	0	0	0	0
Denominator	34	26	79	137	276
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>88.2</b>	<b>92.3</b>	<b>98.7</b>	<b>80.3</b>	<b>87.7</b>

**Borders:** 4 patients were frail and or elderly and were not discussed at MDM.

**Lothian:** The target was not met showing a shortfall of 14.7% (27 cases).

19 patients were discussed but had no treatment intent recorded (5 were diagnosed and treated with EMR, 5 received radiotherapy, 4 had endoscopic treatment, 2 had BSC, 2 were for argon therapy and 1 had chemotherapy). 4 patients had concurrent primaries and were discussed at a different MDM. 3 patients died before MDM and 1 patient declined treatment.

### Gastric Cancer

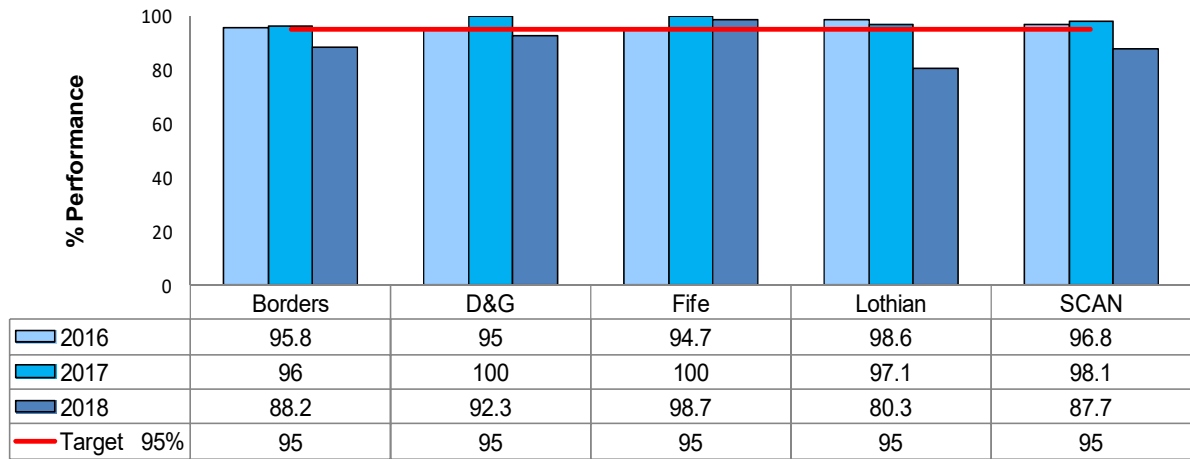
Target 95%	Borders	D&G	Fife	Lothian	SCAN
2017 Cohort	9	11	19	37	76
Ineligible for this QPI	0	0	0	0	0
Numerator	5	11	19	31	66
Not recorded for numerator	0	0	0	0	0
Denominator	9	11	19	37	76
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>55.6</b>	<b>100.0</b>	<b>100.0</b>	<b>83.8</b>	<b>86.8</b>

**Borders:** The target was not met showing a shortfall of 39.4% (4 cases). 3 patients were not discussed at MDM and 1 patient died before being discussed

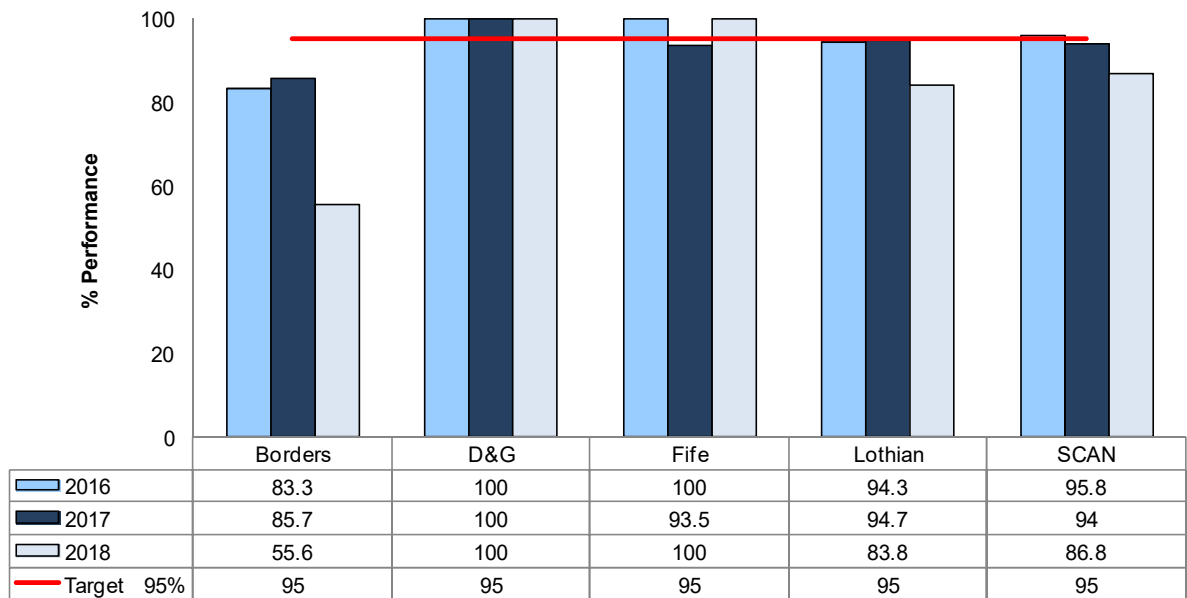
**Lothian:** The target was not met showing a shortfall 11.2% (6 cases).

4 patients discussed at MDM had no intent recorded (2 were diagnosed at surgery and 2 declined treatment). 1 patient was not discussed and 1 was discussed at a different MDM.

**QPI 4 - Treatment Intent recorded at MDT (Oesophageal)**



**QPI 4 - Treatment Intent recorded at MDT (Gastric)**



TNM stage and treatment intent were previously part of QPI 3 so comparable data are not available prior to 2016.

**Comment:** All cases have been reviewed and in some cases the treatment intent may not have been explicitly indicated at the MDM.

**Action:** MDM Chair to ensure that the treatment intent is clearly stated in order for MDM coordinators and audit staff to document accurately.

## QPI 5i – Nutritional Assessment: Malnutrition Universal Screening Tool (MUST)

Target = 95%

Numerator = Number of patients with oesophageal or gastric cancer who undergo nutritional screening with the Malnutrition Universal Screening Tool (MUST) before first treatment.

Denominator = All patients with an oesophageal or gastric cancer diagnosis

Exclusions = No exclusions

### Oesophageal cancer

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	0	0	0	0	0
Numerator	24	10	75	84	193
Not recorded for numerator	0	0	0	0	0
Denominator	34	26	79	137	276
Not recorded for exclusions	0	0	0	1	1
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>70.6</b>	<b>38.5</b>	<b>94.9</b>	<b>61.3</b>	<b>69.9</b>

**Borders:** The target was not met showing a shortfall of 24.4% (10 cases). 7 patients had no MUST screening carried out. 3 patients had nutritional screening after first treatment.

**D&G:** The target was not met showing a shortfall of 56.5% (16 cases). All 16 patients all had a MUST score recorded after date of first treatment.

**Fife:** The target was not met showing a shortfall of 0.1% (4 cases). 4 patients admitted under medical teams, supportive care decision made on ward, all frail. Dietetic assessment took place after supportive care decision made.

**Lothian:** The target was not met showing a shortfall of 33.7% (53 cases). 22 patients had a MUST score recorded after first treatment and 31 had no MUST score recorded.

### Gastric cancer

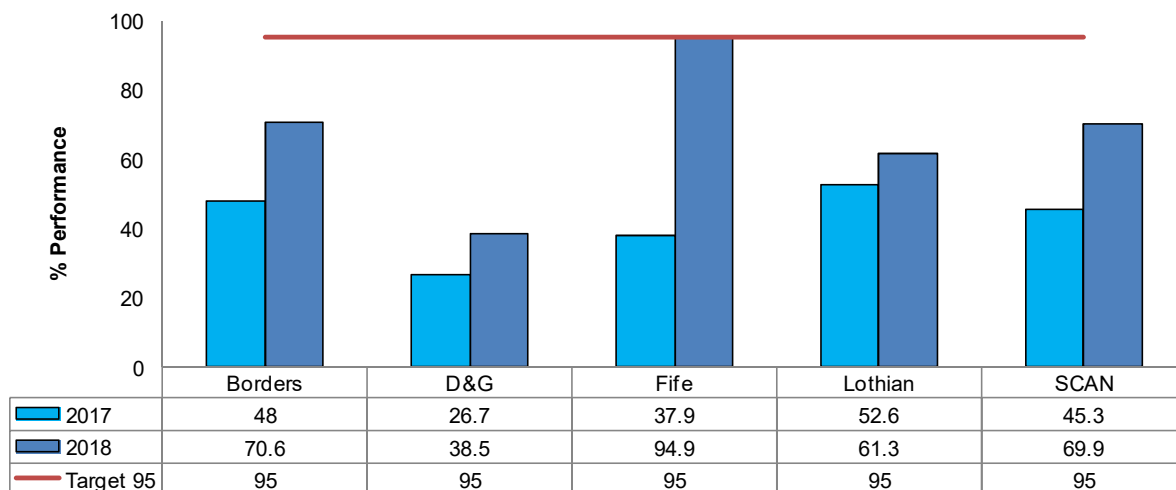
Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	9	11	19	37	76
Ineligible for this QPI	0	0	0	0	0
Numerator	5	4	19	17	45
Not recorded for numerator	0	0	0	1	1
Denominator	9	11	19	37	76
Not recorded for exclusions	0	0	0	0	1
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>55.6</b>	<b>36.4</b>	<b>100.0</b>	<b>45.9</b>	<b>59.2</b>

**Borders:** The target was not met by 39.4% (4 cases). 3 patients had no MUST score and 1 had a MUST recorded after treatment.

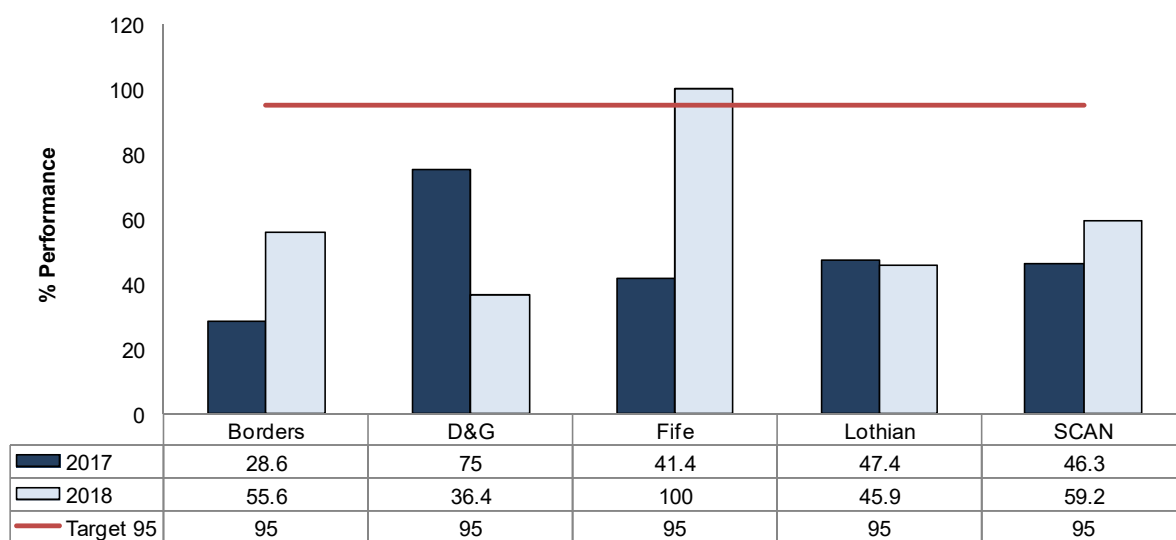
**D&G:** The target was not met showing a shortfall of 58.6% (7 cases). All 7 patients had a MUST score recorded after first treatment (3 patients were seen after first treatment, 2 were not seen by a dietician and 2 patients were seen by a dietician pre-treatment but no MUST score was recorded at that time).

**Lothian:** The target was not met showing a shortfall of 49.1% (20 cases). 15 patients had a MUST recorded after first treatment and 5 had no MUST score recorded.

### QPI 5i Nutritional Assessment: MUST (Oesophageal)



### QPI 5i Nutritional Assessment: MUST (Gastric)



**Comment:** Recording of MUST scores has increased in all SCAN Health Boards. Recording in Fife has improved significantly due to CNS recording of MUST and good communication with audit staff.

## QPI 5ii – Nutritional Assessment: Referral to a dietician for patients with a high risk of malnutrition (MUST score ≥ 2)

Target = 90%

Numerator: Patients with high risk of malnutrition (MUST Score ≥ 2) who are referred to a dietician.

Denominator: All patients with MUST Score ≥ 2

No exclusions

### Oesophageal cancer

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	16	14	37	82	149
Numerator	18	12	42	54	126
Not recorded for numerator	0	0	0	0	0
Denominator	18	12	42	55	127
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>98.2</b>	<b>99.2</b>

### Gastric cancer

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	9	11	19	37	76
Ineligible for this QPI	8	5	15	17	45
Numerator	1	6	4	15	26
Not recorded for numerator	0	0	0	0	0
Denominator	1	6	4	15	26
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

**Comment:** In SCAN in 2018 78% of patients were documented as having been referred to a dietitian (221 oesophageal and 56 gastric patients).

43% of all OG patients were documented as having a MUST score of 2 or above, which may be lower than expected for this group of patients, arguably all OG cancer patients could be scored with a minimum of 2.

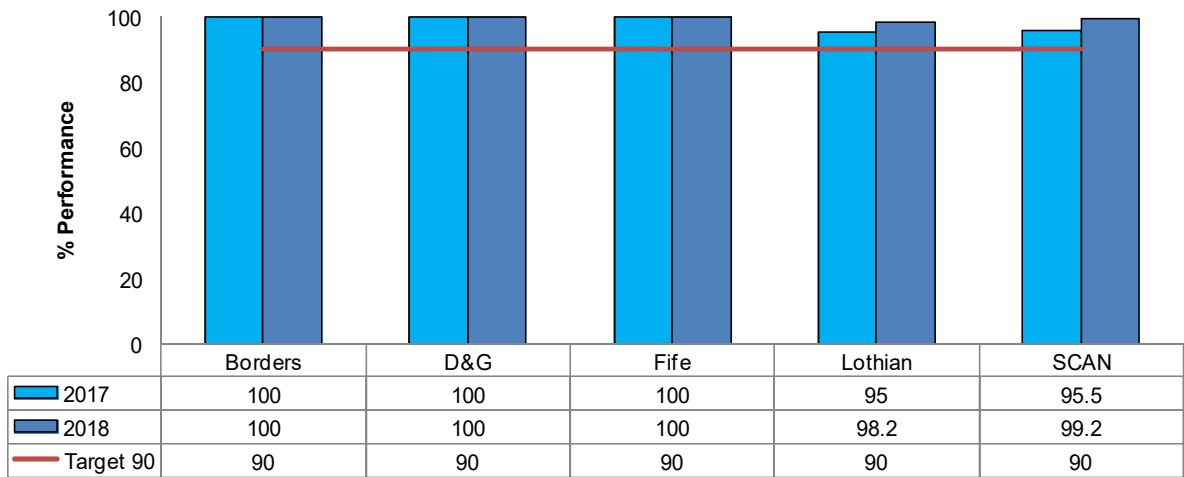
So although the second part of this QPI has been met, in SCAN it is felt that this QPI does not accurately reflect the service provided nor the significant pressures on the current service.

An alternative QPI split onto 4 parts has been forwarded for discussion at the national formal review and no further action is possible at this point.

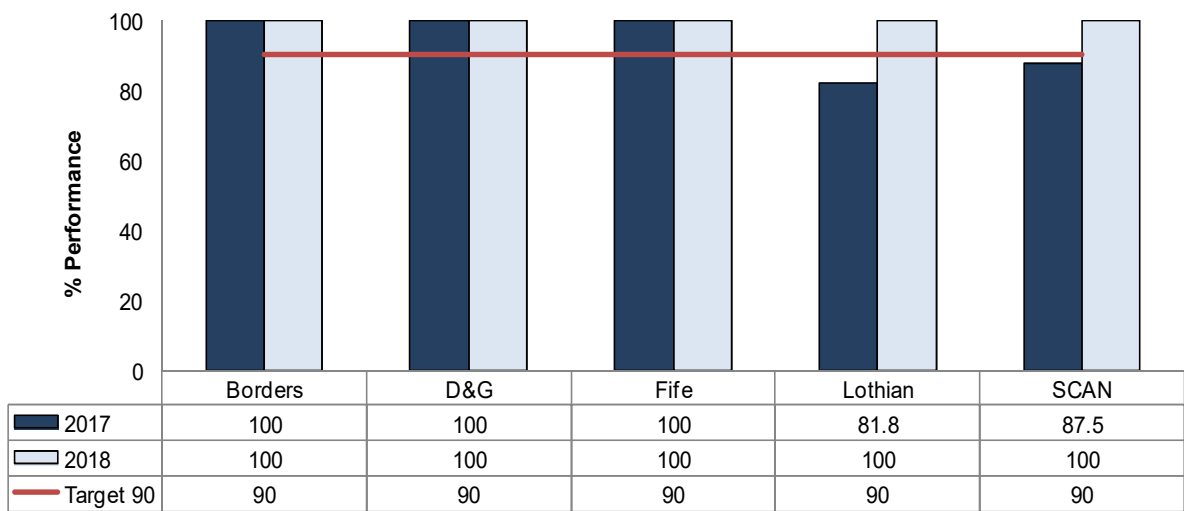
1. Percentage of patients who have MUST score documented within 2 weeks of diagnosis
2. Percentage of patients who have MUST score repeated weekly during treatment ( to monitor % weight change)
3. Percentage of patients who have seen a Dietitian within 2 weeks of diagnosis, either in hospital or community setting
4. Percentage of patients who continue to see a Dietitian during treatment



**QPI 5 (ii) - MUST score  $\geq$  Referred to a Dietician (Oesophageal)**



**QPI 5 (ii) - MUST Score  $\geq$  2 Referred to a Dietician (Gastric)**



## SURGICAL OUTCOMES

### QPI 6 – Appropriate Selection of Surgical Patients

Target = 80%

Numerator = Number of patients with oesophageal or gastric cancer who receive neo-adjuvant chemotherapy or chemoradiotherapy who then undergo surgical resection

Denominator = All patients with oesophageal or gastric cancer who receive neo-adjuvant chemotherapy or chemoradiotherapy.

Exclusions = No exclusions

#### Oesophageal cancer

Target 80%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	29	21	69	118	237
Numerator	4	4	9	17	34
Not recorded for numerator	0	0	0	0	0
Denominator	5	5	10	19	39
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>80.0</b>	<b>80.0</b>	<b>90.0</b>	<b>89.5</b>	<b>87.2</b>

The target was met by all Health Boards.

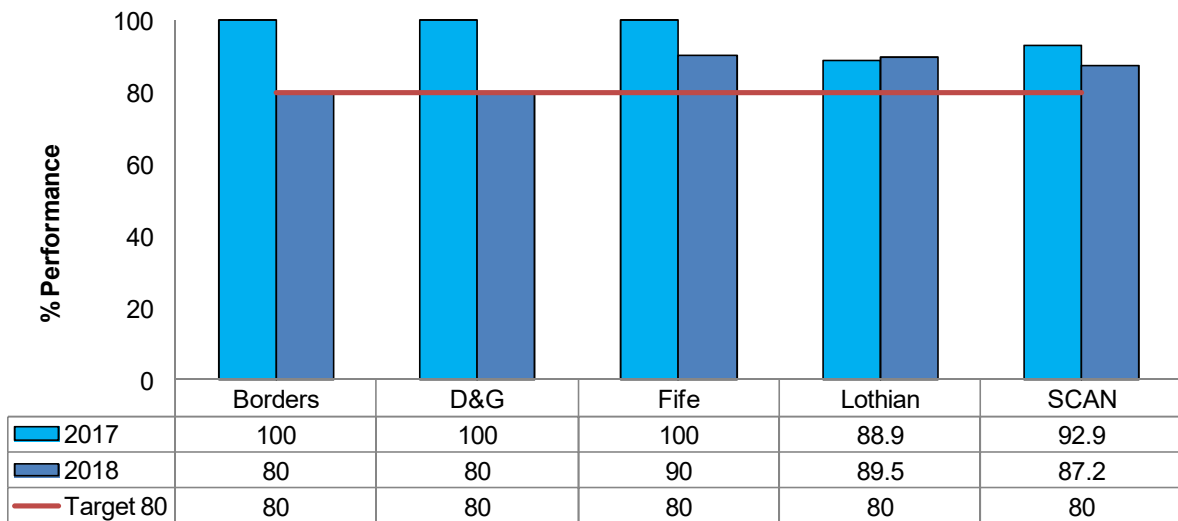
#### Gastric cancer

Target 80%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	9	11	19	37	76
Ineligible for this QPI	7	10	18	36	71
Numerator	1	1	1	1	4
Not recorded for numerator	0	0	0	0	0
Denominator	2	1	1	1	5
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>50.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>80.0</b>

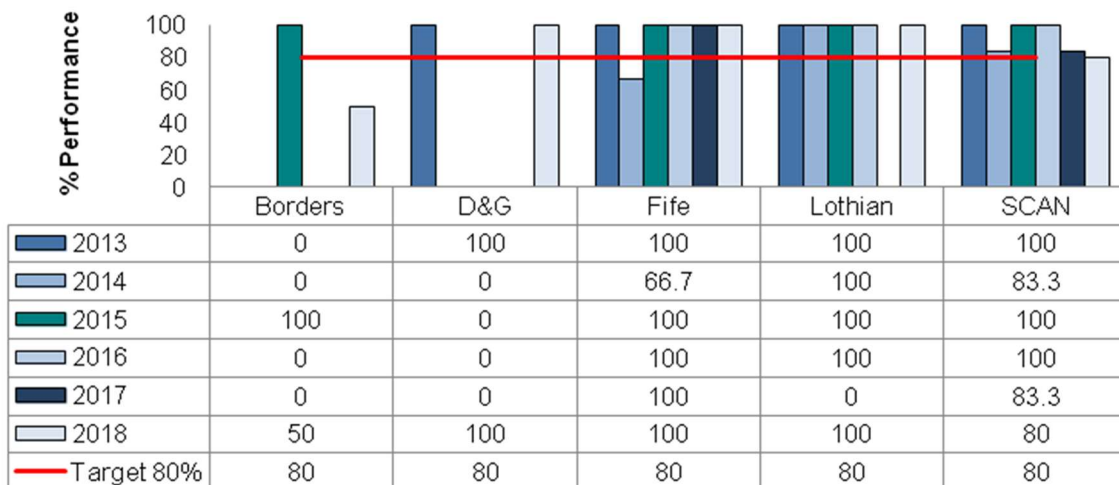
The SCAN target was met by all Health Boards.

Following 3 year formal review QPI 6 was updated, for year 5. The QPI was amended to include patients who received chemoradiotherapy. The results are directly comparable for years 1-5, for the gastric cohort as there were no gastric cancer patients in SCAN who received chemoradiotherapy in 2017.

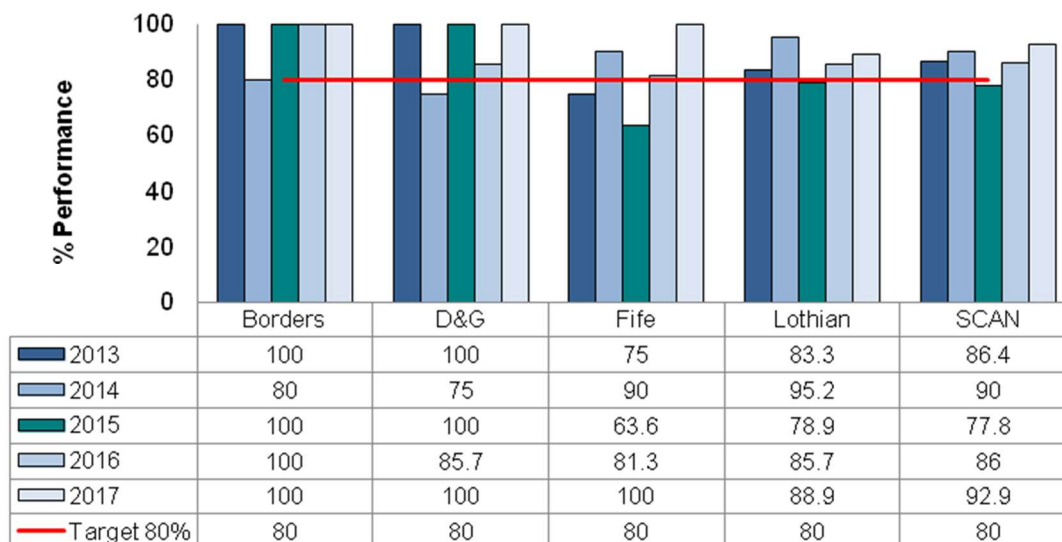
**QPI 6 - Appropriate Selection of Surgical Patients (Oesophageal)**



**QPI 6 - Appropriate Selection of Surgical Patients (Gastric)**



**QPI 6 - Appropriate Selection of Surgical Patients (Oesophageal)**



## QPI 7 – 30/90 Day Mortality Following Surgery

30 day Target <5%, 90 day Target <7.5%

Numerator = Number of patients with oesophageal or gastric cancer who undergo surgical resection who die within 30 and 90 days of treatment

Denominator = All patients with oesophageal or gastric cancer and who undergo surgical resection

Exclusions = No exclusions

### Oesophageal cancer by Hospital of Surgery

#### 30 Day Mortality

Target < 5%	RIE	SCAN
2018 Cohort	276	276
Ineligible for this QPI	235	235
Numerator	1	1
Not recorded for numerator	0	0
Denominator	42	42
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
<b>% Performance</b>	<b>2.4</b>	<b>2.4</b>

The target was met.

#### 90 Day Mortality

Target < 7.5%	RIE	SCAN
2018 Cohort	276	276
Ineligible for this QPI	235	235
Numerator	2	2
Not recorded for numerator	0	0
Denominator	42	42
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
<b>% Performance</b>	<b>4.8</b>	<b>4.8</b>

The target was met.

**Borders:** 1 patient died 78 days post operative infection, ischaemia and atrial fibrillation

**Fife:-** 1 patient died of respiratory failure - 26 days post surgery.

### Gastric cancer by Hospital of Surgery

#### 30 Day Mortality

Target <5%	DGRI	Fife VHK	RIE	SCAN
2018 Cohort	11	0	65	76
Ineligible for this QPI	10	0	51	61
Numerator	0	0	0	0
Not recorded for numerator	0	0	0	0
Denominator	1	0	14	15
Not recorded for exclusions	0	0	0	0
Not recorded for denominator	0	0	0	0
<b>% Performance</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

90 Day Mortality Target <7.5%	DGRI	Fife VHK	RIE	SCAN
2018 Cohort	11	0	65	76
Ineligible for this QPI	10	0	51	61
Numerator	0	0	0	0
Not recorded for numerator	0	0	0	0
Denominator	1	0	14	15
Not recorded for exclusions	0	0	0	0
Not recorded for denominator	0	0	0	0
<b>% Performance</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

### QPI 8 – Lymph Node Yield

Target = Oesophageal 90%, Gastric = 80%

Numerator = Number of patients with oesophageal or gastric cancer who undergo surgical resection where ≥15 lymph nodes are resected and pathologically examined

Denominator = All patients with oesophageal or gastric cancer who undergo surgical resection.

Exclusions = No exclusions

#### Oesophageal cancer – Hospital of surgery

Target 90%	RIE	SCAN
2018 Cohort	276	276
Ineligible for this QPI	234	234
Numerator	38	38
Not recorded for numerator	0	0
Denominator	42	42
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
<b>% Performance</b>	<b>90.5</b>	<b>90.5</b>

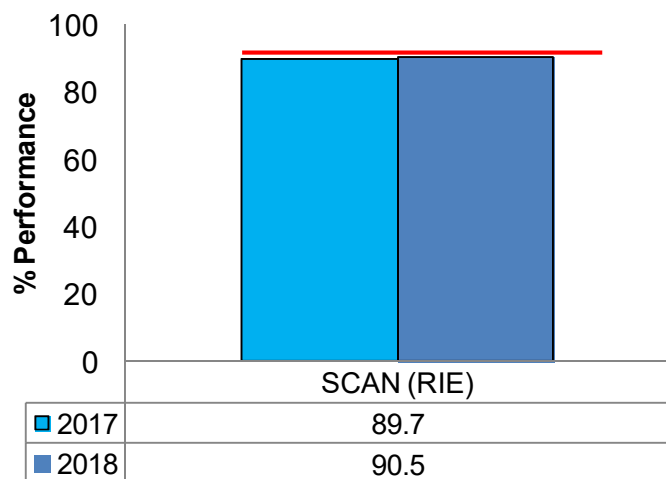
The target was met.

#### Gastric cancer – Hospital of surgery

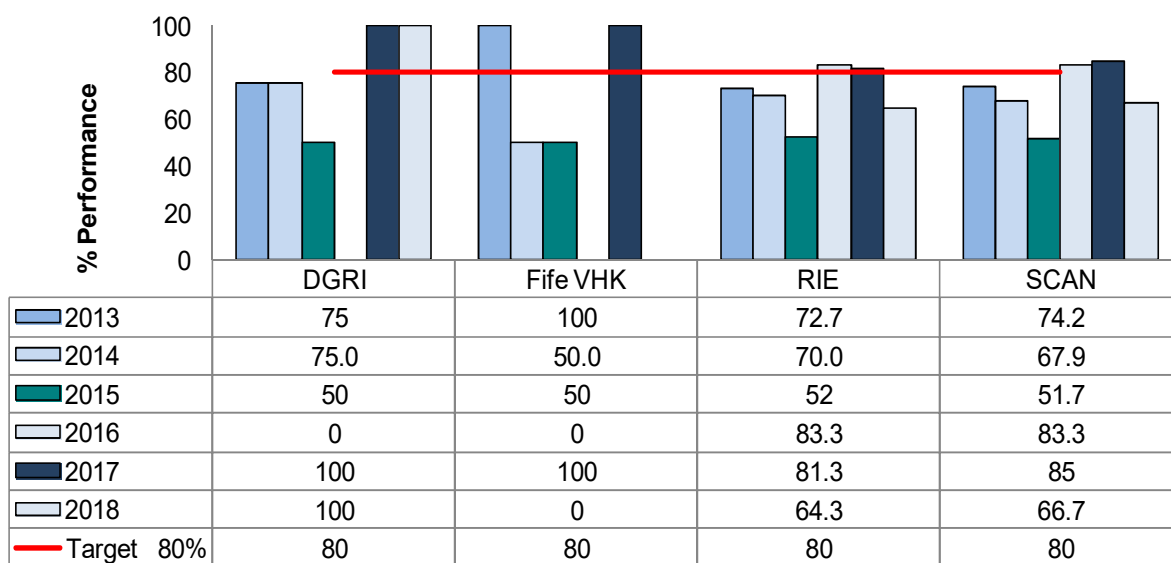
Target 80%	DGRI	Fife VHK	RIE	SCAN
2018 Cohort	11	0	65	76
Ineligible for this QPI	10	0	51	61
Numerator	1	0	9	10
Not recorded for numerator	0	0	0	0
Denominator	1	0	14	15
Not recorded for exclusions	0	0	0	0
Not recorded for denominator	0	0	0	0
<b>% Performance</b>	<b>100.0</b>	<b>0</b>	<b>64.3</b>	<b>66.7</b>

Following formal review, QPI 8 was updated in 2016 to include results for oesophageal cancers with a target of 90%, previously QPI was reported for gastric cancer only and results are shown for gastric for all 5 years below with the unchanged target of 80%.

### QPI 8 - Lymph Node Yield (Oesophageal)



### QPI 8 - Lymph Node Yield (Gastric)



**Comment** The cases with less than 15 lymph nodes are being reviewed by both the surgical and pathology teams and no further action was identified.

## QPI 9 – Length of Hospital Stay Following Surgery

Target = 60%

Numerator = Number of patients undergoing surgical resection for oesophageal or gastric cancer who are discharged within 14 days of surgical procedure

Denominator = All patients undergoing surgical resection for oesophageal or gastric cancer

Exclusions = No exclusions

The following data has been calculated using SMR01<sup>2</sup> returns.

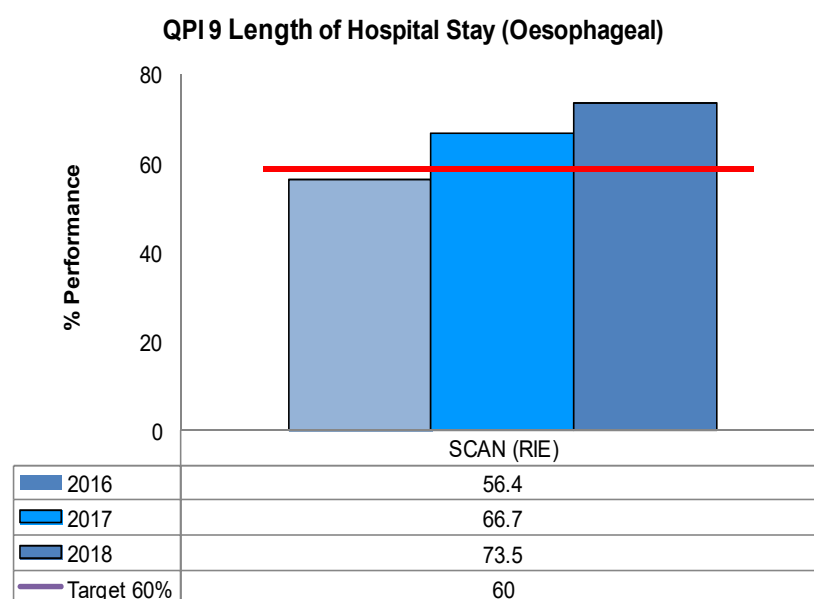
### Oesophageal cancer – Hospital of surgery

Target 60%	RIE	SCAN
Numerator	36	36
Not recorded for numerator	0	0
Denominator	49	49
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
<b>% Performance</b>	<b>73.5</b>	<b>73.5</b>

### Gastric cancer – Hospital of surgery

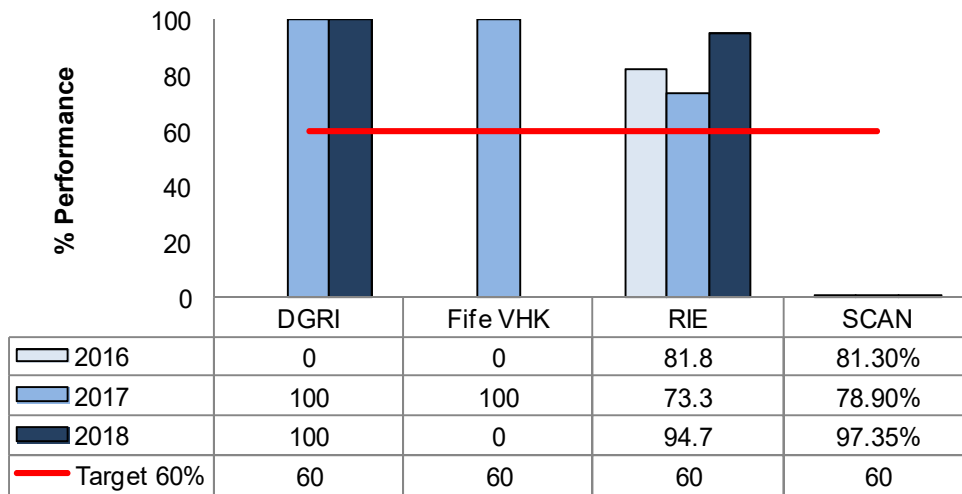
Target 60%	DGRI	Fife VHK	RIE	SCAN
Numerator	2	0	18	20
Not recorded for numerator	0	0	0	0
Denominator	2	0	19	21
Not recorded for exclusions	0	0	0	0
Not recorded for denominator	0	0	0	0
<b>% Performance</b>	<b>100.0</b>	<b>0</b>	<b>94.7</b>	<b>95.2</b>

Following formal review, QPI 9 was updated in 2016. The time in days was changed from 21 to 14. Below are QPI 9 details from 3 years of collection measuring 21 days.

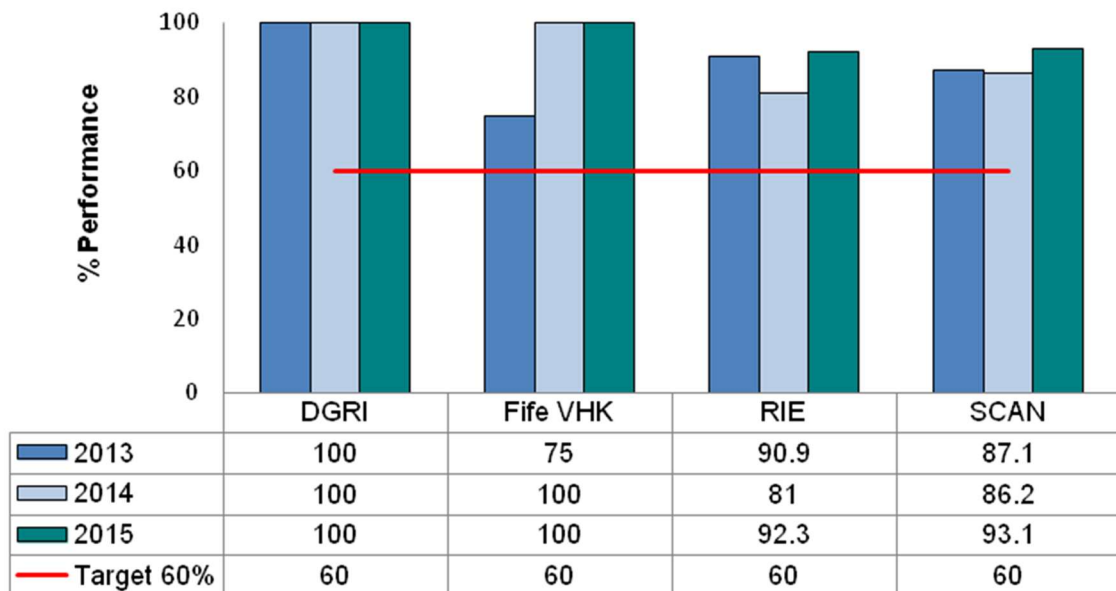


<sup>2</sup> The Scottish Morbidity Record (SMR01) is an episode-based record relating to all inpatients and day cases discharged from acute hospital admissions in Scotland. A record is formed when a patient is discharged from hospital, changes consultant or is transferred to another hospital or hospital department.

### QPI 9 - Length of Hospital of Stay (Gastric)



### QPI 9 - Length of Hospital Stay (Gastric)





### QPI 10i – Resection Margins

Target = 70%

Numerator = Number of patients with oesophageal cancer who undergo surgical resection in which circumferential surgical margin are clear of tumour

Denominator = All patients with oesophageal cancer who undergo surgical resection

Exclusions = No exclusions

#### Oesophageal cancer – Hospital of surgery

Target 70%	RIE	SCAN
2018 Cohort	276	276
Ineligible for this QPI	234	234
Numerator	31	31
Not recorded for numerator	0	0
Denominator	42	42
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
<b>% Performance</b>	<b>73.8</b>	<b>73.8</b>

### QPI 10ii – Resection Margin

Target = 90%

Numerator = Number of patients with oesophageal or gastric cancer who undergo surgical resection in which longitudinal surgical margin is clear of tumour

Denominator = All patients with gastric cancer who undergo surgical resection

Exclusions = No exclusions

#### Oesophageal Longitudinal margin clear (Hospital of Surgery)

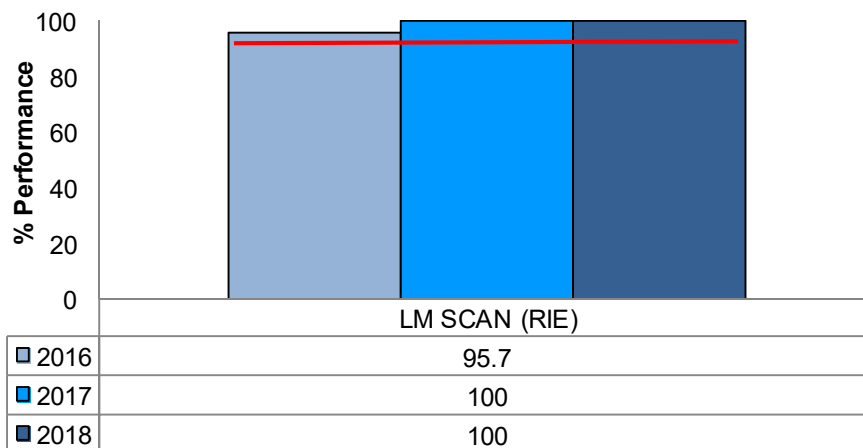
Target 90%	RIE	SCAN
2018 Cohort	276	276
Ineligible for this QPI	174	174
Longitudinal margin clear	42	42
Not recorded for numerator	0	0
Denominator	42	42
<b>% Performance</b>	<b>100.0</b>	<b>100.0</b>

#### Gastric Longitudinal margin clear (Hospital of Surgery)

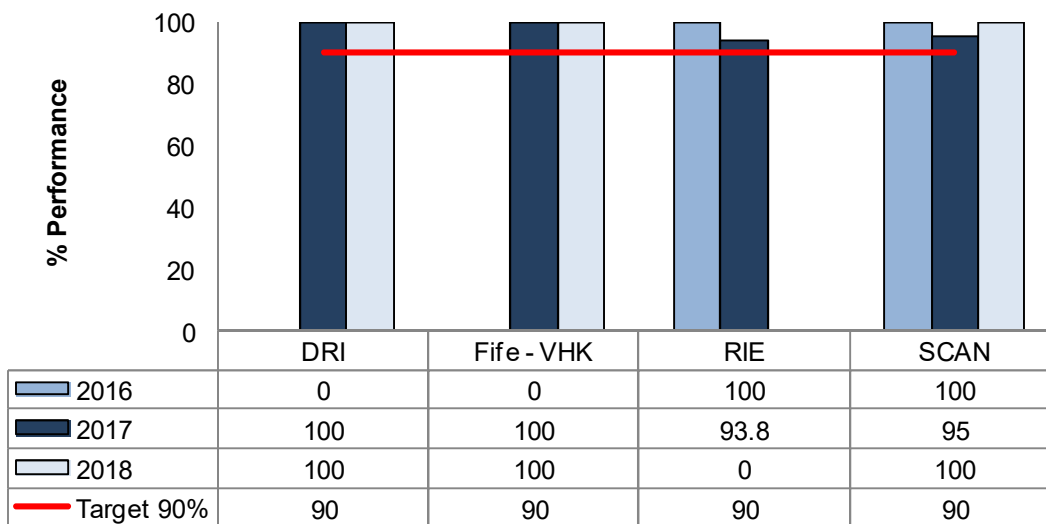
Target 90%	DGRI	Fife VHK	RIE	SCAN
2018 Cohort	11	0	65	76
Ineligible for this QPI	10	0	51	61
Longitudinal margin clear	1	0	14	15
Not recorded for numerator	0	0	0	0
Denominator	1	0	14	15
<b>% Performance</b>	<b>100.0</b>	<b>0</b>	<b>100.0</b>	<b>100.0</b>

The target was met.

### QPI 10 - Resection Margins Oesophageal Longitudinal Margin



### QPI 10 - Resection Margins Gastric Longitudinal Margin



Following formal review, QPI 10 was updated in 2016. The oesophageal cancer circumferential and longitudinal resection margins were previously reported combined. Below are the QPI percentage performance for 3 years of collection with the 70% target.

#### Oesophageal resection margins - previous performance

Year	RIE (SCAN)
2013	55.0%
2014	53.6%
2015	44.9%

## QPI 11 – Curative Treatment Rates

Target = 35%

Numerator = Number of patients with oesophageal or gastric cancer who undergo curative treatment.

Denominator = All patients with oesophageal or gastric cancer

Exclusions = No exclusions

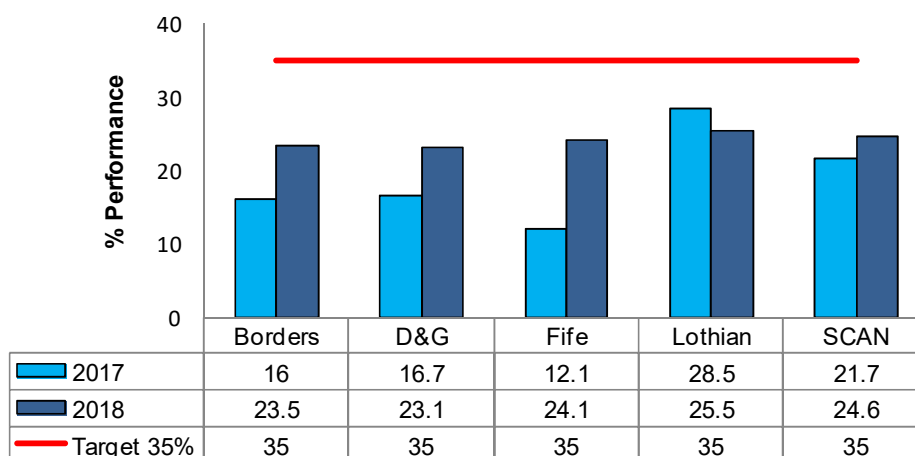
### Oesophageal cancer – Health board of diagnosis

Target 35%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	0	0	0	0	0
Numerator	8	6	19	35	68
Not recorded for numerator	0	0	0	0	0
Denominator	34	26	79	137	276
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>23.5</b>	<b>23.1</b>	<b>24.1</b>	<b>25.5</b>	<b>24.6</b>

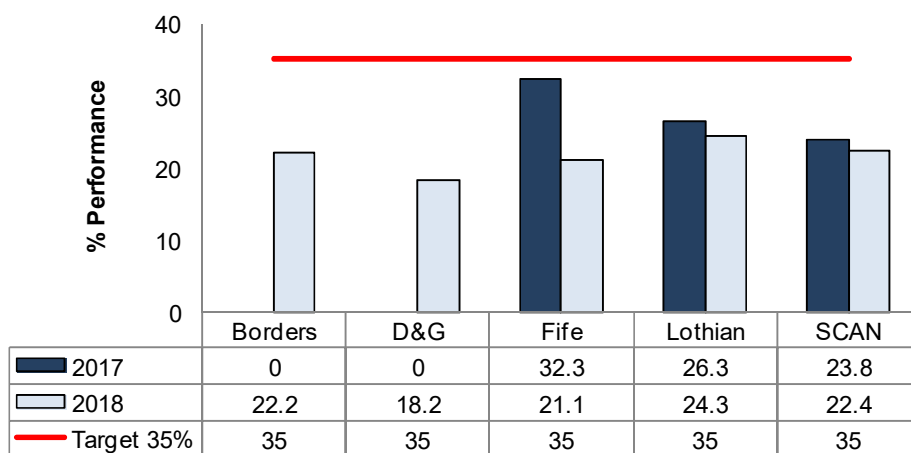
### Gastric cancer – Health board of diagnosis

Target 35%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	9	11	19	37	76
Ineligible for this QPI	0	0	0	0	0
Numerator	2	2	4	9	17
Not recorded for numerator	0	0	0	0	0
Denominator	9	11	19	37	76
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>22.2</b>	<b>18.2</b>	<b>21.1</b>	<b>24.3</b>	<b>22.4</b>

### QPI 11 - Curative Treatments (Oesophageal)

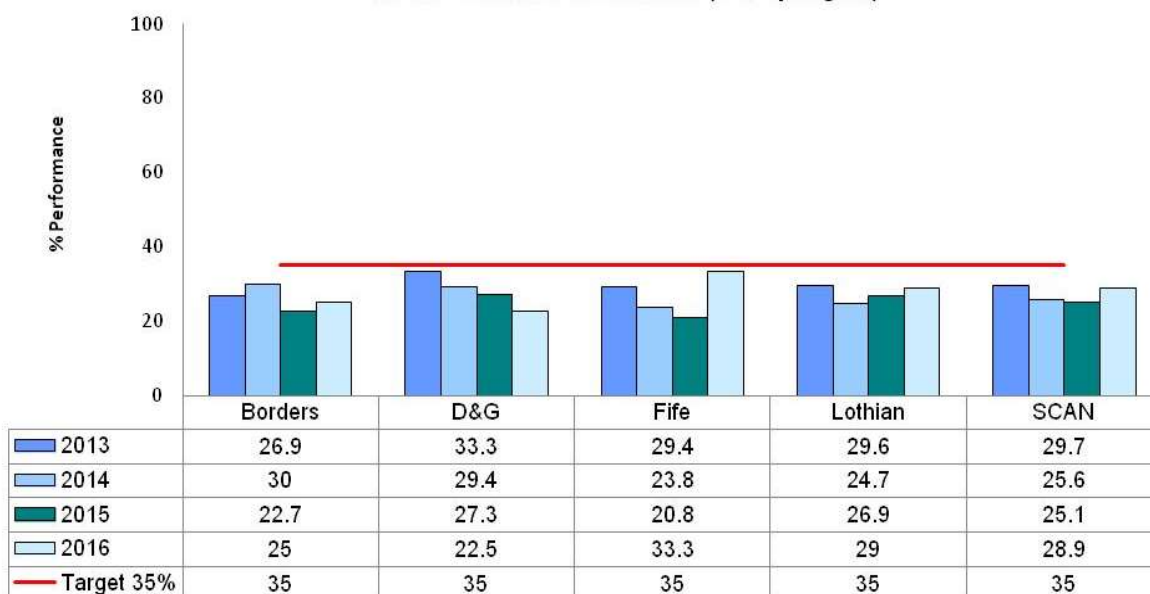


### QPI 11 - Curative Treatments (Gastric)

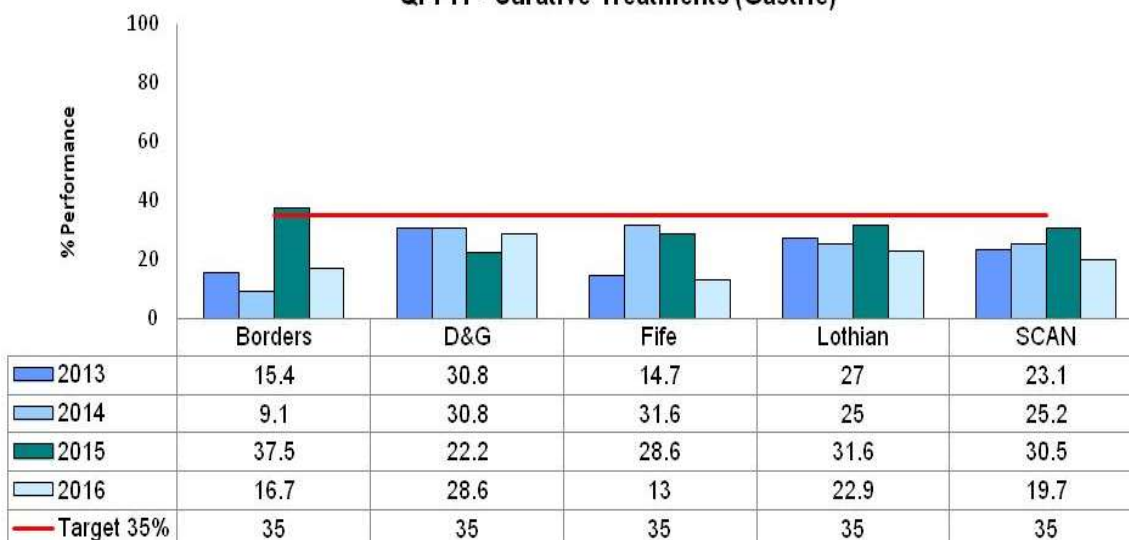


Following formal review, QPI 11 was updated in Year 5, 2017. The curative treatment now includes neoadjuvant chemotherapy and neoadjuvant chemoradiotherapy and additional oesophagectomy and gastrectomy procedures. Below are the QPI details for the first 4 years of analysis.

### QP 11 - Curative Treatments (Oesophageal)



### QPI 11 - Curative Treatments (Gastric)



## QPI 12i – 30 and 90 Day Mortality Following Curative Oncological Treatment

Target <5%

Numerator = Number of patients with oesophageal or gastric cancer who receive curative oncological treatment who die within 30 or 90 days of treatment

Denominator = All patients with oesophageal or gastric cancer who receive curative oncological treatment

Exclusions = No exclusions

Note: This indicator requires to be reported by treatment modality and intent

### Oesophageal cancer – 30 Day mortality for curative Oncological treatment Radical Chemoradiotherapy

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	34	26	78	136	274
Numerator	0	0	0	0	0
Not recorded for numerator	0	0	0	0	0
Denominator	0	0	1	1	2
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

### Peri-operative Chemotherapy

Target <5 %	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	29	21	71	119	240
Numerator	0	0	0	0	0
Not recorded for numerator	0	0	0	0	0
Denominator	5	5	8	18	36
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

### Neo-adjuvant Chemoradiotherapy

Target <5 %	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	34	26	78	136	274
Numerator	0	0	0	0	0
Not recorded for numerator	0	0	0	0	0
Denominator	0	0	1	1	2
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

### Adjuvant Chemotherapy

Target <5 %	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	34	24	79	136	273
Numerator	0	0	0	0	0
Not recorded for numerator	0	0	0	0	0
Denominator	0	2	0	1	3
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

### Gastric cancer – 30 Day mortality for curative Oncological treatment

No gastric cancer patients were treated with neoadjuvant chemoradiotherapy, radical chemoradiotherapy, adjuvant chemotherapy, or downstaging chemotherapy in 2018.

### Peri-operative Chemotherapy

Target <5 %	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	9	11	19	37	76
Ineligible for this QPI	7	10	18	36	71
Numerator	0	0	0	0	0
Not recorded for numerator	0	0	0	0	0
Denominator	2	1	1	1	5
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

## QPI 12i – 90 Day Mortality Following Curative Oncological Treatment

Target < 7.5%

Numerator = Number of patients with oesophageal or gastric cancer who receive curative oncological treatment who die within 90 days of treatment

Denominator = All patients with oesophageal or gastric cancer who receive curative oncological treatment

Exclusions = No exclusions

Note: This indicator requires to be reported by treatment modality and intent

### Oesophageal cancer – 90 Day mortality for curative Oncological treatment Radical Chemoradiotherapy

Target <7.5%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	34	26	78	136	274
Numerator	0	0	0	0	0
Not recorded for numerator	0	0	0	0	0
Denominator	0	0	1	1	2
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>N/A</b>	<b>N/A</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

### Peri-operative Chemotherapy

Target <7.5 %	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	29	21	71	119	240
Numerator	0	0	0	0	0
Not recorded for numerator	0	0	0	0	0
Denominator	5	5	8	18	36
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

### Neo-adjuvant Chemoradiotherapy

Target <7.5 %	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	34	26	78	136	274
Numerator	0	0	0	0	0
Not recorded for numerator	0	0	0	0	0
Denominator	0	0	1	1	2
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>N/A</b>	<b>N/A</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

### Adjuvant Chemotherapy

Target <7.5 %	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	34	24	79	136	273
Numerator	0	0	0	0	0
Not recorded for numerator	0	0	0	0	0
Denominator	0	2	0	1	3
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>N/A</b>	<b>0.0</b>	<b>N/A</b>	<b>0.0</b>	<b>0.0</b>

### Gastric cancer – 90 Day mortality for curative Oncological treatment

#### Peri-operative Chemotherapy

Target <7.5%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	9	11	19	37	76
Ineligible for this QPI	7	10	18	36	71
Numerator	0	0	0	0	0
Not recorded for numerator	0	0	0	0	0
Denominator	2	1	1	1	5
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

No gastric cancer patients were treated with neoadjuvant chemoradiotherapy, radical chemoradiotherapy, adjuvant chemotherapy or downstaging chemotherapy in 2018.



## QPI 12ii – 30 Day Mortality Following Palliative Oncological Treatment

Target <5%

Numerator = Number of patients with oesophageal or gastric cancer who receive palliative oncological treatment who die within 30 days of treatment

Denominator = All patients with oesophageal or gastric cancer who receive palliative oncological treatment

Exclusions = No exclusions

Note: This indicator requires to be reported by treatment modality and intent.

### Oesophageal cancer – 30 Day mortality for palliative Oncological treatment

#### Chemotherapy

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	34	26	79	137	276
Ineligible for this QPI	29	22	64	118	233
Numerator	1	0	4	0	5
Not recorded for numerator	0	0	0	0	0
Denominator	5	4	15	19	43
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>20.0</b>	<b>0.0</b>	<b>26.7</b>	<b>0.0</b>	<b>11.6</b>

### Gastric cancer – 30 Day mortality for palliative Oncological treatment

#### Chemotherapy

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	9	11	19	37	76
Ineligible for this QPI	8	11	17	34	70
Numerator	0	0	0	0	0
Not recorded for numerator	0	0	0	0	0
Denominator	1	0	2	3	6
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>0.0</b>	<b>N/A</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

**Comment:** All deaths after treatment have been reviewed and all patients were treated appropriately. No action is required.

## QPI 13 – HER2 for Decision Making in Advanced Gastric and Gastro-oesophageal Junction Cancer

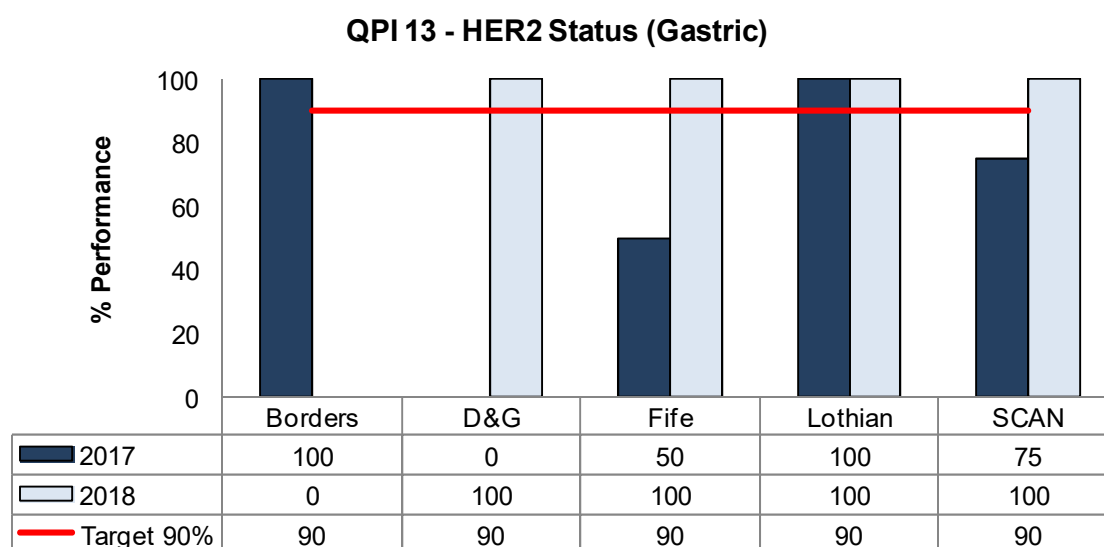
Target = 90%

Numerator = Number of patients with metastatic gastric or gastro-oesophageal junction adenocarcinoma undergoing first line palliative chemotherapy as their initial treatment for whom the HER2 status is reported prior to commencing treatment.

Denominator = All patients with metastatic gastric or gastro-oesophageal junction adenocarcinoma undergoing first line palliative chemotherapy as their initial treatment.

Exclusions = No exclusions

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2018 Cohort	13	37	23	37	110
Ineligible for this QPI	13	36	22	18	89
Numerator	0	1	1	2	4
Not recorded for numerator	0	0	0	0	0
Denominator	0	1	1	2	4
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
<b>% Performance</b>	<b>N/A</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>



Although the QPI was met in SCAN, it is noted that NICE guidelines advise that all patients with oesophagogastric adenocarcinoma should be tested for HER2. Performance would be lower if the QPI included all patients recommended by NICE and would reflect current service pressures better. This QPI therefore requires to be revised.

## Clinical Trials QPI

Target = 15%

Numerator = Number of patients with oesophageal or gastric cancer consented in a clinical trial

Denominator = All patients with oesophageal or gastric cancer

Exclusions = No exclusions

Note: The clinical trials QPI is measured using SCRN data and Cancer Registry data (5 year average of case ascertainment)

Clinical Trials	Borders	D&G	Fife	Lothian	SCAN
Numerator	2	1	2	14	19
Denominator	36	46	95	185	362
<b>% Performance</b>	<b>5.6</b>	<b>2.2</b>	<b>2.1</b>	<b>7.6</b>	<b>5.2</b>

Patients in Trials not currently held on EDGE database	Patient numbers as reported by principle investigator)
Cachexia	49
OCCAMS	40
Edinburgh Oesophageal Tissue Bank (EOTB)	60

**Comment:** Some trials (particularly surgical trials) are not currently registered on the EDGE database (where data for this QPI is taken from). In order to ensure the EDGE database is complete and up to date principal investigators should liaise with the SCRN Network Manager.

**Action:** Principal investigators should liaise with the SCRN Network Manager to ensure trials are registered on the SCRN database "EDGE".

## Key Categories –

### Number of Cases Based on Site of Origin of Tumour

Tumour Site	Borders		D&G		Fife		Lothian		SCAN	
	n	%	n	%	n	%	n	%	n	%
Oesophageal Cancer	34	79.1	26	70.3	79	80.6	137	78.7	276	78.4
Gastric Cancer	9	20.9	11	29.7	19	19.4	37	21.3	76	21.6
<b>Total Upper GI Cancers</b>	<b>43</b>	<b>100%</b>	<b>37</b>	<b>100%</b>	<b>98</b>	<b>100%</b>	<b>174</b>	<b>100%</b>	<b>352</b>	<b>100%</b>

### Breakdown of Site of Origin of Tumour

Tumour Site	Borders		D&G		Fife		Lothian		SCAN	
	n	%	n	%	n	%	n	%	n	%
C15.0	0.0	0.0	0	0.0	0	0.0	1	0.6	1.0	0.3
C15.1	0.0	0.0	0	0.0	0	0.0	0	0.0	0.0	0.0
C15.2	0.0	0.0	0	0.0	0	0.0	0	0.0	0.0	0.0
C15.3	4.0	9.3	1	2.7	3	3.1	4	2.3	11.0	3.5
C15.4	4.0	9.3	4	10.8	10	10.2	26	14.9	40.0	12.7
C15.5	18.0	41.9	16	43.2	53	54.1	67	38.5	138.0	43.8
C15.8	2.0	4.7	1	2.7	9	9.2	16	9.2	27.0	8.6
C15.9	1.0	2.3	0	0.0	0	0.0	4	2.3	5.0	1.6
C16.0	5.0	11.6	4	10.8	4	4.1	19	10.9	28.0	8.9
C16.1	0.0	0.0	0	0.0	1	1.0	3	1.7	4.0	1.3
C16.2	5.0	11.6	1	2.7	6	6.1	9	5.2	20.0	6.3
C16.3	2.0	4.7	2	5.4	7	7.1	15	8.6	24.0	7.6
C16.4	2.0	4.7	0	0.0	1	1.0	2	1.1	5.0	1.6
C16.5	0.0	0.0	2	5.4	1	1.0	1	0.6	2.0	0.6
C16.6	0.0	0.0	1	2.7	0	0.0	4	2.3	4.0	1.3
C16.8	0.0	0.0	0	0.0	1	1.0	2	1.1	3.0	1.0
C16.9	0.0	0.0	5	13.5	2	2.0	1	0.6	3.0	1.0
<b>Total</b>	<b>43.0</b>	<b>100%</b>	<b>37.0</b>	<b>100%</b>	<b>98.0</b>	<b>100%</b>	<b>174.0</b>	<b>100%</b>	<b>315.0</b>	<b>100%</b>

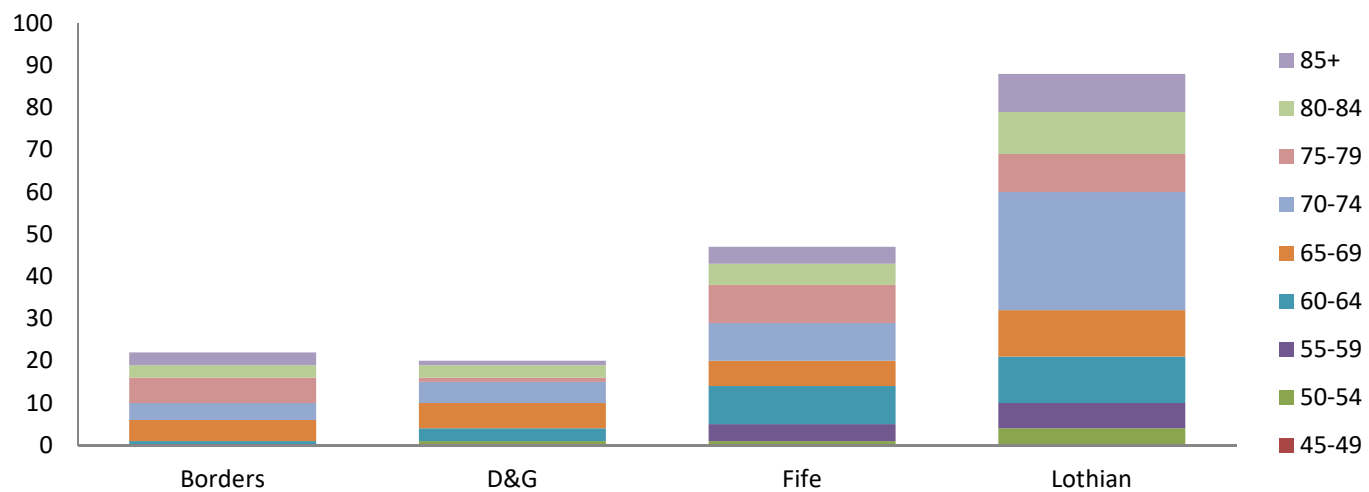
## Age and Gender Distribution

### Oesophageal

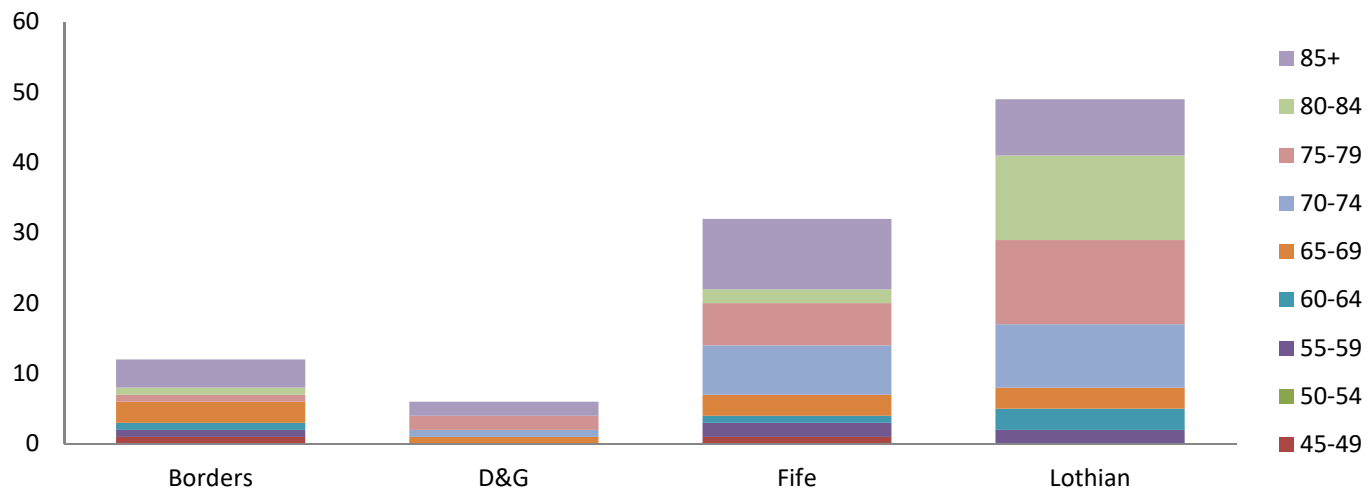
Age at Diagnosis	Borders				D&G				Fife				Lothian				SCAN			
	M		F		M		F		M		F		M		F		M		F	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
<45	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
45-49	0	1	1	8.3	0	0.0	0	0.0	0	0.0	1	3.1	0	0.0	0	0.0	0	0.0	2	2.0
50-54	0	0	0	0.0	1	5.0	0	0.0	1	2.1	0	0.0	4	4.5	0	0.0	6	3.4	0	0.0
55-59	0	1	1	8.3	0	0.0	0	0.0	4	8.5	2	6.3	6	6.8	2	4.1	10	5.6	5	5.1
60-64	1	1	1	8.3	3	15.0	0	0.0	9	19.1	1	3.1	11	12.5	3	6.1	24	13.6	5	5.1
65-69	5	3	3	25.0	6	30.0	1	16.7	6	12.8	3	9.4	11	12.5	3	6.1	28	15.8	10	10.1
70-74	4	0	0	0.0	5	25.0	1	16.7	9	19.1	7	21.9	28	31.8	9	18.4	46	26.0	17	17.2
75-79	6	1	1	8.3	1	5.0	2	33.3	9	19.1	6	18.8	9	10.2	12	24.5	25	14.1	21	21.2
80-84	3	1	1	8.3	3	15.0	0	0.0	5	10.6	2	6.3	10	11.4	12	24.5	21	11.9	15	15.2
85+	3	4	4	33.3	1	5.0	2	33.3	4	8.5	10	31.3	9	10.2	8	16.3	17	9.6	24	24.2
<b>Total</b>	<b>22</b>	<b>100%</b>	<b>12</b>	<b>100%</b>	<b>20</b>	<b>100%</b>	<b>6</b>	<b>100%</b>	<b>47</b>	<b>100%</b>	<b>32</b>	<b>100%</b>	<b>88</b>	<b>100%</b>	<b>49</b>	<b>100%</b>	<b>177</b>	<b>100%</b>	<b>99</b>	<b>100%</b>

Age at Diagnosis	Borders		D&G		Fife		Lothian	
	M	F	M	F	M	F	M	F
Min	62	47	54	68	54	45	52	55
Max	91	92	85	94	97	97	90	96
Mean	75.5	73.3	71	80	71	77	71	78
Median	76	73	70	78	72	77	71	77

### Age of Males Patients (Oesophageal)



### Age of Females Patients (Oesophageal)

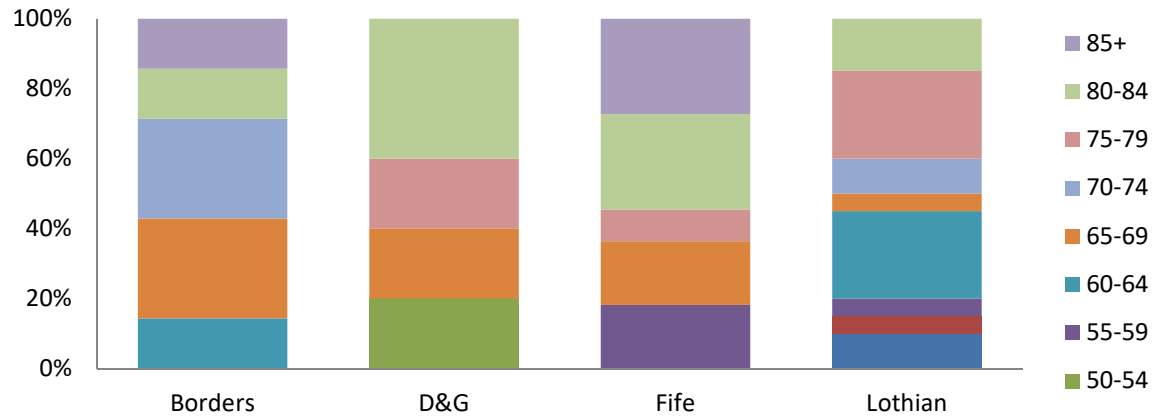


### Gastric

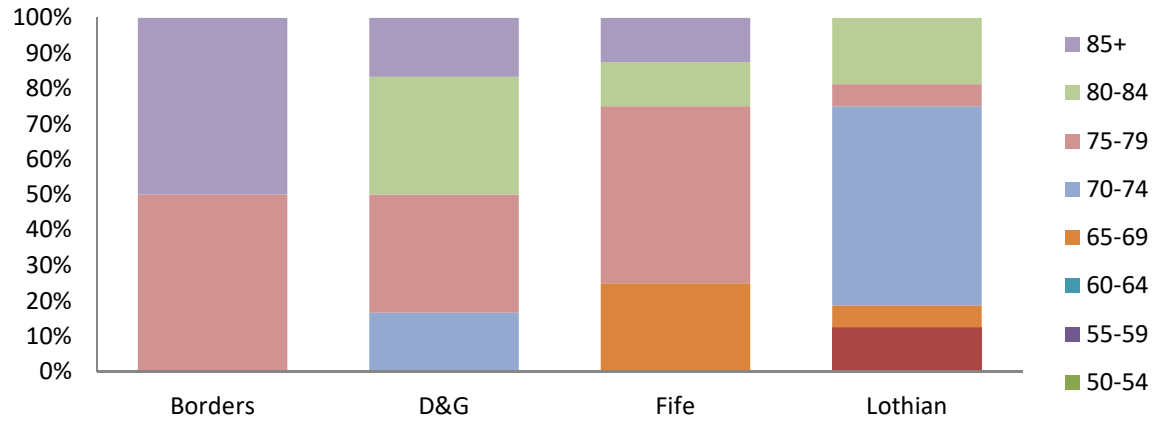
Age at Diagnosis	Borders				D&G				Fife				Lothian				SCAN			
	M		F		M		F		M		F		M		F		M		F	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
<45	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	2	10.0	0	0.0	2	4.7	0	0.0
45-49	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	1	5.0	2	12.5	1	2.3	2	6.3
50-54	0	0.0	0	0.0	1	20.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	1	2.3	0	0.0
55-59	0	0.0	0	0.0	0	0.0	0	0.0	2	18.2	0	0.0	1	5.0	0	0.0	3	7.0	0	0.0
60-64	1	14.3	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	5	25.0	0	0.0	6	14.0	0	0.0
65-69	2	28.6	0	0.0	1	20.0	0	0.0	2	18.2	2	25.0	1	5.0	1	6.3	6	14.0	3	9.4
70-74	2	28.6	0	0.0	0	0.0	1	16.6	0	0.0	0	0.0	2	10.0	9	56.3	4	9.3	10	31.3
75-79	0	0.0	1	50.0	1	20.0	2	33.3	1	9.1	4	40.0	5	25.0	1	6.3	7	16.3	8	25.0
80-84	1	14.3	0	0.0	2	40.0	2	33.3	3	27.3	1	12.5	3	15.0	3	18.8	9	20.9	6	18.8
85+	1	14.3	1	50.0	0	0.0	1	16.6	3	27.3	1	12.5	0	0.0	0	0.0	4	9.3	3	9.4
<b>Total</b>	<b>7</b>	<b>100%</b>	<b>2</b>	<b>100%</b>	<b>5</b>	<b>100%</b>	<b>6</b>	<b>100%</b>	<b>11</b>	<b>100%</b>	<b>8</b>	<b>100%</b>	<b>20</b>	<b>100%</b>	<b>16</b>	<b>100%</b>	<b>43</b>	<b>100%</b>	<b>32</b>	<b>100%</b>

Age at Diagnosis	Borders		D&G		Fife		Lothian	
	M	F	M	F	M	F	M	F
Min	62	76	51	72	55	77	31	48
Max	85	88	80	88	98	93	82	83
Mean	72.9	82	71	79.5	75	77	65	72
Median	73	82	76	80	80	76	66	71

**Age of Male patients (Gastric)**



**Age of Female patients (Gastric)**





OG Cancers QPI Attainment Summary 2017, Year 5		Target %	Borders		D&G		Fife		Lothian		SCAN	
QPI 1: Endoscopy - Histological diagnosis made within 6 weeks of initial endoscopy and biopsy	Oesophageal	95	N 25 D 25	100%	N 27 D 28	96.4%	N 63 D 64	98.4%	N 125 D 133	94.0%	N 240 D 250	96.0%
	Gastric	95	N 7 D 7	100%	N 7 D 7	100%	N 29 D 30	96.7%	N 31 D 36	86.1%	N 74 D 80	92.5%
QPI 3: MDT before definitive treatment	Oesophageal	95	N 22 D 24	91.7%	N 28 D 30	93.3%	N 65 D 65	100%	N 129 D 133	97.0%	N 244 D 252	96.8%
	Gastric	95	N 6 D 7	85.7%	N 7 D 8	87.5%	N 29 D 30	96.7%	N 37 D 38	97.4%	N 79 D 83	95.2%
QPI 4: TNM Staging recorded at MDT prior to treatment	Oesophageal	90	N 23 D 25	92.0%	N 29 D 30	96.7%	N 64 D 66	97.0%	N 127 D 137	92.7%	N 243 D 258	94.2%
	Gastric	90	N 4 D 7	57.1%	N 7 D 8	87.5%	N 27 D 31	87.1%	N 35 D 38	92.1%	N 73 D 84	86.9%
QPI 4: TNM Treatment Intent recorded at MDT prior to treatment	Oesophageal	95	N 24 D 25	96.0%	N 30 D 30	100%	N 66 D 66	100%	N 133 D 137	97.1%	N 253 D 258	98.1%
	Gastric	95	N 6 D 7	85.7%	N 8 D 8	100%	N 29 D 31	93.5%	N 36 D 38	94.7%	N 79 D 84	94.0%
QPI 5: Nutritional Assessment: Undergo screening with the Malnutrition Universal Screening Tool (MUST) before first treatment.	Oesophageal	95	N 12 D 25	48.0%	N 8 D 30	26.7%	N 25 D 66	37.9%	N 72 D 137	52.6%	N 117 D 258	45.3%
	Gastric	95	N 2 D 7	28.6%	N 6 D 8	75.0%	N 12 D 29	41.4%	N 18 D 38	47.4%	N 38 D 82	46.3%
QPI 5: Nutritional Assessment: are at high risk of malnutrition (MUST score >2) referred to dietician	Oesophageal	90	N 3 D 3	100%	N 2 D 2	100%	N 2 D 2	100%	N 57 D 60	95.0%	N 64 D 67	95.5%
	Gastric	90	N 1 D 1	100%	N 3 D 3	100%	N 1 D 1	100%	N 9 D 11	81.8%	N 14 D 16	87.5%
QPI 6: Appropriate Selection: Neo-Adjuvant chemotherapy followed by surgical resection	Oesophageal	80	N 4 D 4	100%	N 3 D 3	100%	N 3 D 3	100%	N 16 D 18	88.9%	N 26 D 28	92.9%
	Gastric	80	N 0 D 0	-	N 0 D 0	-	N 5 D 5	100%	N 0 D 1	0.0%	N 5 D 6	83.3%
QPI 7 (i): 30 Day Mortality Following Surgery (presented by Board of Surgery)	Oesophageal	<5	Board of Surgery						N 1 D 39	2.6%	N 1 D 39	2.6%
	Gastric	<5	N 0 D 0	-	N 0 D 1	0.0%	N 0 D 3	0.0%	N 0 D 16	0.0%	N 0 D 20	0.0%

OG Cancers QPI Attainment Summary 2017, Year 5				Target %	Borders	D&G	Fife	Lothian	SCAN
QPI 7 (II): 90 Day Mortality Following Surgery (presented by Board of Surgery)	Oesophageal	<7.5	Board of Surgery				N 1 2.7%	N 1 2.7%	
	Gastric	<7.5	N 0 - D 0 -	N 0 0.0% D 1 0.0%	N 0 0.0% D 3 0.0%	N 0 0.0% D 16 0.0%	N 0 0.0% D 20 0.0%		
QPI 8: Lymph Node Yield – Curative resection where >15 lymph nodes are resected and examined (Presented by Board of Surgery)	Oesophageal	90	Board of Surgery				N 35 89.7% D 39 89.7%	N 35 89.7% D 39 89.7%	
	Gastric	80	N 0 - D 0 -	N 1 100% D 1 100%	N 3 100% D 3 100%	N 13 81.3% D 16 81.3%	N 17 85.0% D 20 85.0%		
QPI 9: Hospital of Stay: Discharge within 14 days of surgical procedure (presented by Board of Surgery)	Oesophageal	60	Board Of Surgery				N 32 66.7% D 48 66.7%	N 32 66.7% D 48 66.7%	
	Gastric	60	N 0 - D 0 -	N 1 100% D 1 100%	N 3 100% D 3 100%	N 11 73.3% D 15 73.3%	N 15 78.9% D 19 78.9%		
QPI 10(I): Oesophageal resection margins. Circumferential clear (presented by Board of Surgery)	Oesophageal	70	Board of Surgery				N 29 74.4% D 39 74.4%	N 29 74.4% D 39 74.4%	
QPI 10(II): Longitudinal margins clear (presented by Board of Surgery)	Oesophageal	90	Board of Surgery				N 39 100% D 39 100%	N 39 100% D 39 100%	
	Gastric	90	N 0 - D 0 -	N 1 100% D 1 100%	N 3 100% D 3 100%	N 15 93.8% D 16 93.8%	N 19 95.0% D 20 95.0%		
QPI 11: Curative Treatment Rates	Oesophageal	35	N 4 16.0% D 25 16.0%	N 5 16.7% D 30 16.7%	N 8 12.1% D 66 12.1%	N 39 28.5% D 137 28.5%	N 56 21.7% D 258 21.7%		
	Gastric	35	N 0 0.0% D 7 0.0%	N 0 0.0% D 8 0.0%	N 10 32.2% D 31 32.2%	N 10 26.3% D 38 26.3%	N 20 23.8% D 84 23.8%		
QPI 12: Mortality after Oncological Treatment (Oesophageal)	Curative Chemoradiotherapy	30 day	<5	N 0 - D 0 -	N 0 - D 0 -	N 0 - D 0 -	N 0 0.0% D 3 0.0%	N 0 0.0% D 3 0.0%	
		90 day	<7.5	N 0 - D 0 -	N 0 - D 0 -	N 0 - D 0 -	N 0 0.0% D 3 0.0%	N 0 0.0% D 3 0.0%	
	Peri-operative Chemotherapy	30 day	<5	N 0 0.0% D 4 0.0%	N 0 0.0% D 3 0.0%	N 0 0.0% D 3 0.0%	N 0 0.0% D 15 0.0%	N 0 0.0% D 25 0.0%	
		90 day	<7.5	N 0 0.0% D 4 0.0%	N 0 0.0% D 3 0.0%	N 0 0.0% D 3 0.0%	N 0 0.0% D 15 0.0%	N 0 0.0% D 25 0.0%	

OG Cancers QPI Attainment Summary 2017, Year 5			Target %	Borders	D&G	Fife	Lothian	SCAN
QPI 12: Mortality after Oncological Treatment (Oesophageal)	Adjuvant Chemotherapy	30 day	<5	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 1 0.0%	N 0 D 1 0.0%
		90 day	<7.5	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 1 0.0%	N 0 D 1 0.0%
	Downstaging Chemotherapy	30 day	<5	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 1 0.0%	N 0 D 1 0.0%
		90 day	<7.5	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 1 0.0%	N 0 D 1 0.0%
QPI 12: Mortality after Oncological Treatment (Gastric)	Curative Chemoradiotherapy	30 day	<5	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 0
		90 day	<7.5	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 0
	Peri-operative Chemotherapy	30 day	<5	N 0 D 0	N 0 D 0	N 0 D 5 0.0%	N 0 D 1 0.0%	N 0 D 6 0.0%
		90 day	<7.5	N 0 D 0	N 0 D 0	N 0 D 5 0.0%	N 0 D 1 0.0%	N 0 D 6 0.0%
	Adjuvant Chemotherapy	30 day	<5	N 0 D 0	N 0 D 0	N 0 D 2 0.0%	N 0 D 0	N 0 D 2 0.0%
		90 day	<7.5	N 0 D 0	N 0 D 0	N 0 D 2 0.0%	N 0 D 0	N 0 D 2 0.0%
	Downstaging Chemotherapy	30 day	<5	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 0
		90 day	<7.5	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 0	N 0 D 0
QPI 12. 30 day Mortality after Palliative Chemotherapy	Oesophageal	<5	N 0 D 4 0.0%	N 0 D 5 0.0%	N 0 D 7 0.0%	N 3 D 19 15.8%	N 3 D 35 8.6%	
	Gastric	<5	N 0 D 1 0.0%	N 0 D 0	N 0 D 3 0.0%	N 0 D 2 0.0%	N 0 D 6 0.0%	
QPI 13 HER2 Status in Advanced Gastric Cancer			90	N 2 D 2 100%	N 0 D 0	N 2 D 4 50%	N 2 D 2 100%	N 6 D 8 75.0%
Clinical Trial QPI NB: N= patients enrolled in Trials and held on SCRN database, D = 5 year average Cancer Trials.			15	N 1 D 37 2.7%	N 2 D 46 4.3%	N 9 D 96 9.4%	N 18 D 187 9.68%	N 30 D 366 8.1%