SOUTH EAST SCOTLAND CANCER NETWORK PROSPECTIVE CANCER AUDIT

HEAD AND NECK CANCER 2018 – 2019 Quality Performance Indicators (QPI) Comparative Report

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HEAD AND NECK CANCER 2018-19 COMPARATIVE AUDIT REPORT

Patients diagnosed 1 April 2018 – 31 March 2019

Contents

DOCUMENT HISTORY

Version	Circulation	Date	Comments
Version 1	Lead Clinicians' Sign off Group	21/10/19	Circulated in advance of the Leads meeting
Version 2	SCAN Head & Neck Lead Clinicians	25/11/19	Action points and Lead Clinician's comments added
Version3	SCAN Head & Neck Group	25/11/19	For final comment from SCAN Group
Final Version	SCAN Audit Reporting Framework	12/12/219	Final circulation to SCAN Group and Clinical Governance Framework
Web Version	SCAN Website		

Comment by Chair of the SCAN Head and Neck Group

This year there have been some changes to the QPIs, following formal review, and therefore not all data is comparable with previous years.

SCAN continues to perform well in the core QPIs related to the delivery of treatment for head and cancer. These are evident in the QPIs measuring investigation, decision making and delivery of contemporary treatment for head and neck cancer.

The data shows continued challenges in delivering the QPIs in SALT, nutritional screening, smoking cessation, oral and dental rehabilitation plan, post operative chemoradiotherapy and recruitment into trials.

The nutritional screening and smoking cessation figures are thought to be more a recording issue rather than a true service deficit. To this end, new processes have been adopted to improve the recording of these services as well as its visibility to the audit team.

There continues to be an absolute deficit in Speech and Language Therapy services across all board areas. This has been particularly acute in Fife which has resulted in additional resource. However, challenges remain within Lothian and Borders with outstanding SBARs related to this service deficit. Improvement in this QPI is unlikely to improve without further resource.

The oral and dental rehabilitation QPI is, while falling short of the target, performing relatively well. The service within SCAN is currently only supported by one WTE consultant in Restorative Dentistry. Continuous service delivery is therefore vulnerable to periods of leave and makes consistent delivery of this QPI challenging. The manpower situation of this service is currently under review within the Oral Health Services in NHS Lothian.

Achieving the QPI target for access to post operative chemoradiotherapy continues to be challenging. The relatively small numbers make this QPI vulnerable to percentage failure due to those low numbers. Analysis of the cases which led to the failure may suggest the QPI is over ambitious rather than patients not receiving appropriate treatment. It is likely this QPI will continue to be subject to national scrutiny and amendment as is evolves.

The level of patients consented to trials is improving, and there has been clinical resource directed to this with the anticipation of driving forward improvement of this important service for patients.

In summary, SCAN continues to provide high quality, contemporary management of head and neck cancer for the patients within the network boundaries. Challenges remain within some of the areas outlined above but there are short and medium term plans in place or under discussion to improve the delivery of these areas in the coming years.

Mr J Morrison
Chair SCAN Head and Neck Group
November 2019

ACTION POINTS

QPI Action Plans from 2018-2019

QPI	Action required	Person Responsible	Date for update
QPI 2 (ii)	Dumfries has longstanding known reporting challenges and no action was identified.	N/A	N/A
QPI 4	Patients who receive best supportive care and are offered referral for smoking cessation on the same day are currently not included in the numerator. Query to be submitted to ISD query log in order to update the QPI measurability to include these cases in the numerator.	Fiona Gardiner	Next SCAN group meeting
	MDT referral form to be standardised and updated to capture whether referral is required or has already been offered (and date) A standard letter for referral to be explored from TRAK MDT	J Morrison, NHS Lothian	
QPI 5 (i)	Reporting to be amended to show additional figures for SCAN excluding patients treated outwith SCAN, for which data is not available. Two tables to be produced in next year's report.	Fiona Gardiner	2019-20 report
QPI 6	Lothian and Borders MUST scoring is expected to improve next year due to MUST scores now being recorded electronically on TRAK. Fife have an additional dietician post which is expected to start in 2020. No further action was identified.	N/A	N/A
QPI 7	There is currently an SBAR in process outlining the requirements for additional resource in Borders and Lothian. Further action was not identified.	K McLachlan	Next SCAN group meeting
QPI 10	Consider recording post surgical performance status (in addition to PS currently collected)	QPI review program	Next formal review
QPI 12	Consider recording number of patients being given a trial Patient Information Sheet as this should be available via EDGE	Lothian Clinicians	Next SCAN group meeting

QPI Action Points from 2017/18.

QPI	Action required	Progress/Action Status	Status
QPI 2(i)	Improve recording and capture of diagnostic excision biopsies in Lothian, ensuring correct exclusion of patients.	All Lothian Clinicians	1
QPI 6	All boards to look to improve recording of MUST scores.	NHS Borders: - Dietician awareness raising with Cancer Clinical Nurse Specialists has occurred. Tumour site clinicians reminded to record MUST scores NHS Dumfries & Galloway – MUST will be collected as part of the initial patient assessment. A member of staff has been identified and trained to support the CNS and will work with/under supervision of CNS NHS Fife - Head and Neck clinical nurse specialists have started to record MUST score in CNS Database. NHS Lothian - Meeting scheduled in Lothian for Dieticians and audit staff to meet to ensure the data is available and document in TRAK	1 1 2 2
QPI 7	Audit to consistently record date of first SLT assessments post treatment	NHS Borders - Action plan meeting has occurred with NHSL and NHSB SALT teams. Cancer pathway is being mapped to identify any communication gaps NHS D&G – To ensure SLT are aware of all newly diagnosed Head and Neck Cancers, the Cancer Tracking Team will now email the SLT joint mailbox and CNS so all are aware in time to arrange pre-treatment intervention. This will also improve documentation of patients who do not need pre-treatment input as reasons will be recorded on clinical portal NHS Fife - Work is ongoing, as part of wider Waiting times improvement plans, to increase SALT resource to better support Head and Neck patients. Target to have in place by Oct 2019 NHS Lothian - SBAR in preparation for Lothian SLT resource.	2 2 1 2
QPI 10	Table giving standardised drop down for patients not receiving chemoradiotherapy to be included in comparative reports	Complete – To be included in QPI reports	1
QPI 12	Clinicians to record patients who are given a trial Patient Information Sheet but who decline to enter a trial.	NHS Borders – H&N treatment trials are discussed in NHS Lothian NHS D&G– All oncology treatments and trials for this cancer site are managed regionally, no local action required NHS Fife - A record of patients being given a PIS but who decline to enter a trial is being kept NHS Lothian - A dedicated research clinic is being set up on Friday PM sessions to allow a more coordinated approach to data collection. NHS Borders patients are also discussed regarding trials at MDT in Lothian.	1 3 1 2

Head and Neck QPI Attainment Summary 2018-19

	Target%	Borders		D&G		Fife		Lothian		SCAN	
QPI 1 Pathological Diagnosis of Head and Neck Cancer	95	N 13 / D 13	100%	N 31 / D 31	100%	N 72 / D 72	100%	N 172 / D 172	100%	N 288 / D 288	100%
QPI 2(i) Imaging	95	N 13 / D 13	100%	N 29 / D 30	96.7%	N 71 / D 72	98.6%	N 163 / D 163	100%	N 276 / D 278	99.3%
QPI 2(ii) Imaging	95	N 13 / D 13	100%	N 25 / D 29	86.2%	N 71 / D 71	100%	N 155 / D 163	95.1%	N 264 / D 276	95.7%
QPI 3 Multi-disciplinary Team Meeting (MDT)	95	N 14 / D 14	100%	N 30 / D 30	100%	N 74 / D 74	100%	N 174 / D 174	100%	N 292 / D 292	100%
QPI 4 Smoking Cessation	95	N 2 / D 3	66.7%	N 6 / D 10	60.0%	N 19 / D 25	76.0%	N 41 / D 86	47.7%	N 68 / D 124	54.8%
QPI 5(i) Oral and Dental Rehabilitation Plan	95	N 10 / D 10	100%	N 22 / D 22	100%	N 34 / D 55	61.8%	N 139 / D 140	99.3%	N 205 / D 227	90.3%
QPI 5(ii) Oral and Dental Rehabilitation Plan	95	N 6 / D 6	100%	N 10 / D 11	90.9%	N 29 / D 29	100%	N 85 / D 95	89.5%	N 130 / D 141	92.2%
QPI 6 Nutritional Screening	95	N 11 / D 14	78.6%	N 21 / D 31	67.7%	N 64 / D 74	86.5%	N 161 / D 184	87.5%	N 255 / D 303	84.2%
QPI 7 Specialist Speech and Language Therapist Access	90	N 1 / D 10	10.0	N 9 / D 16	56.3%	N 5 / D 47	10.6%	N 93 / D 114	81.6%	N 108 / D 187	57.8%
QPI 8 Surgical Margins - *presented by hospital of surgery*	<10	N 0 / D 0	N/A	N 0 / D 1	0.0%	N 0 / D 0	N/A	N 2 / D 41	4.9%	N 2 / D 42	4.8%
QPI 9 Intensity Modulated Radiotherapy (IMRT)	95	N 7 / D 7	100%	N 10 / D 10	100%	N 25 / D 25	100%	N 83 / D 83	100%	N 125 / D 125	100%
QPI 10 Post Operative Chemoradiotherapy	55	N 0 / D 0	N/A	N 0 / D 3	0.0%	N 0 / D 2	0.0%	N 5 / D 10	50%	N 5 / D 15	33.3%
QPI 11a 30 Day Mortality (surgery) *presented by hospital of surgery*	<5	N 0 / D 0	N/A	N 0 / D 2	0.0%	N 0 / D 0	N/A	N 0 / D 70	0.0%	N 0 / D 72	0.0%
QPI 11a 90 Day Mortality (surgery) *presented by hospital of surgery*	<5	N 0 / D 0	N/A	N 0 / D 2	0.0%	N 0 / D 0	N/A	N 0 / D 70	0.0%	N 0 / D 72	0.0%
QPI 11b 30 Day Mortality (radiotherapy)	<5	N 0 / D 1	0.0%	N 0 / D 0	N/A	N 0 / D 7	0.0%	N 1 / D 16	6.3%	N 1 / D 24	4.2%
QPI 11b 90 Day Mortality (radiotherapy)	<5	N 0 / D 1	0.0%	N 0 / D 0	N/A	N 0 / D 6	0.0%	N 1 / D 16	6.3%	N 1 / D 23	4.3%

Head and Neck QPI Attainment Summary 2018-19	Target%	Borders		D&G		Fife		Lothian		SCAN	
QPI 11c 30 Day Mortality (chemoradiotherapy)	<5	N 0 D 6	0.0%	N 0 D 8	0.0%	N 0 D 18	0.0%	N 1 D 58	1.7%	N 1 D 90	1.1%
QPI 11c 90 Day Mortality (chemoradiotherapy)	<5	N 0 D 6	0.0%	N 0 D 8	0.0%	N 0 D 17	0.0%	N 2 D 56	3.6%	N 2 D 86	2.3%
Clinical Trial QPI NB: N = patients consented to Trials and on SCRN database, D = 5 year average Cancer Registry Data	15	N 1 D 19	5.3%	N 2 D 36	5.6%	N 3 D 66	4.5%	N 23 D 194	11.9%	N 29 D 313	9.3%

N = Numerator, D = Denominator, % = % Performance

Introduction and Methods

Cohort and Personnel

This report presents comparative data on patients newly diagnosed with Head and Neck cancer in South East Scotland Cancer Network (SCAN) at the following hospitals: Borders General Hospital (NHS Borders), Dumfries and Galloway Royal Infirmary (NHS Dumfries & Galloway), Victoria Hospital, Kirkcaldy (NHS Fife), St John's Hospital, Livingstone (NHS Lothian), New Royal Infirmary, Edinburgh (NHS Lothian), Lauriston Buildings, Edinburgh (NHS Lothian) and Western General Hospital, Edinburgh (NHS Lothian). The report covers data on patients newly-diagnosed in the twelve months from 1 April 2018 to 31 March 2019.

Lead Clinicians and staff involved in audit were as follows

SCAN Region	Hospital	Lead Clinician	Audit Support
NHS Borders	Borders General Hospital	Mr Esmond Carr	Fiona Gardiner
NHS Dumfries & Galloway	Dumfries & Galloway Royal Infirmary	Ms Marissa Botma	Laura Halliday Martin Keith
NHS Fife	Queen Margaret Hospital Victoria Hospital	Mr Justin Yeo	Mimi Bjelogrlic
NHS Lothian & SCAN	Royal Infirmary of Edinburgh Western General Hospital St John's Hospital	Mr James Morrison	Fiona Gardiner
	Edinburgh Cancer Centre	Dr Joanna Mackenzie	

Audit Processes and data recording

Data was analysed by the audit facilitators in each NHS Board according to the measurability document provided by ISD. SCAN data was collated by Fiona Gardiner, SCAN Audit Facilitator for Head and Neck cancer.

Data capture is focused round the process for the weekly multidisciplinary meetings i.e. ensuring that data covering patient referral, investigation, and diagnosis is being picked up through the routine process.

Surgical and Oncology data is obtained either from the clinical records (electronic systems and case notes) or by download from the Department of Clinical Oncology database within the Edinburgh Cancer Centre (ECC).

Radiotherapy is provided centrally in Edinburgh Cancer Centre. Patients living closer to either Carlisle or Dundee may opt to have treatment outwith the SCAN region. All QPIs will be analysed and presented by Hospital of Diagnosis for data verification/sign off purposes with additional reports by Hospital of Surgery as appropriate.

The process remains dependent on audit staff for capture and entry of data, and for data quality checking

All data was recorded on ECase.

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. NHS boards are required to report against QPIs as part of a .mandatory, publicly reported, programme at a national level.

The QPI dataset for Head and Neck was implemented from 01/04/2017. Following Year 3 results the QPIs were subject to a formal review and revised documents for data collection were published in July 2018. Some of the revisions following formal review were not implemented until this year (Year 5; 2018/19), depending on whether new data items were required or not. Accordingly QPIs 2 (spec ii), 4 and 5 (spec i and ii) were not reported in Year 4.

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.	

Data Quality

Clinical Sign-Off: This report compares data from reports prepared for individual hospitals and signed off as accurate following review by the lead clinicians from each service. Additionally, the collated SCAN results are reviewed jointly by the lead clinicians, including the lead Oncologist, to assess variances and provide comments on results.

External QA: SCAN Audit participates in external quality assurance (QA) of data by ISD Scotland, (i.e. when a sample of data is compared with the data definitions). A QA of the QPI Head and Neck dataset took place for Year 1 data and performance was well above the ISD minimum requirement and Scotland average.

Most patients are identified through weekly multidisciplinary meetings. The following sources are used to check for additional patients:

1. Pathology records
2. GRO Death lists
3. ACaDMe (Acute, Cancer, Deaths and Mental Health); a data mart part of NHS National Services Scotland.

Estimated Case Ascertainment

An estimate of case ascertainment (the percentage of the population with head and neck cancer recorded in the audit) is made by comparison with the most recent 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 01.04.2018 to 31.03.2019

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

	Borders	D&G	Fife	Lothian	SCAN
Cases from Audit	14	31	74	184	303
Cancer Registry 5 Year Average	19	36	66	194	313
Case Ascertainment %	**73.7%**	**86.1%**	**112.1%**	**94.8%**	**96.8%**

Source: Scottish Cancer Registry, ISD. Data extracted from ACaDMe on 15/10/2019.
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.

Actions for Improvement

After final sign off, the process is for the report to be sent to the Clinical Governance groups within the four health boards and to the Regional Cancer Planning Group. Action plans and progress with plans will be highlighted to the groups. The report will be placed on the SCAN website once it has been fully signed-off and checked for any disclosive material.

Fiona Gardiner
SCAN Audit Facilitator

DIAGNOSIS AND STAGING

QPI 1: Pathological Diagnosis of Head and Neck Cancer Target = 95%

Numerator = Number of patients with head and neck cancer who have a cytological or histological diagnosis before treatment.

Denominator = All patients with head and neck cancer.

Exclusions = (a) Patients who die before first treatment (b) Patients who decline treatment.

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	1	0	2	12	15
Numerator	13	31	72	172	288
Not Recorded for the Numerator	0	0	0	0	0
Denominator	13	31	72	172	288
Not Recorded for Exclusion	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	100.0%	100.0%	100.0%	100.0%

The target was met by all Boards

QPI 1: Pathological Diagnosis -
Head and Neck Cancer 2017/18 to 2018/19

	Borders	D&G	Fife	Lothian	SCAN
2017/18	100.0%	95.8%	100.0%	97.5%	98.2%
2018/19	100.0%	100.0%	100.0%	100.0%	100.0%
Target	95%	95%	95%	95%	95%
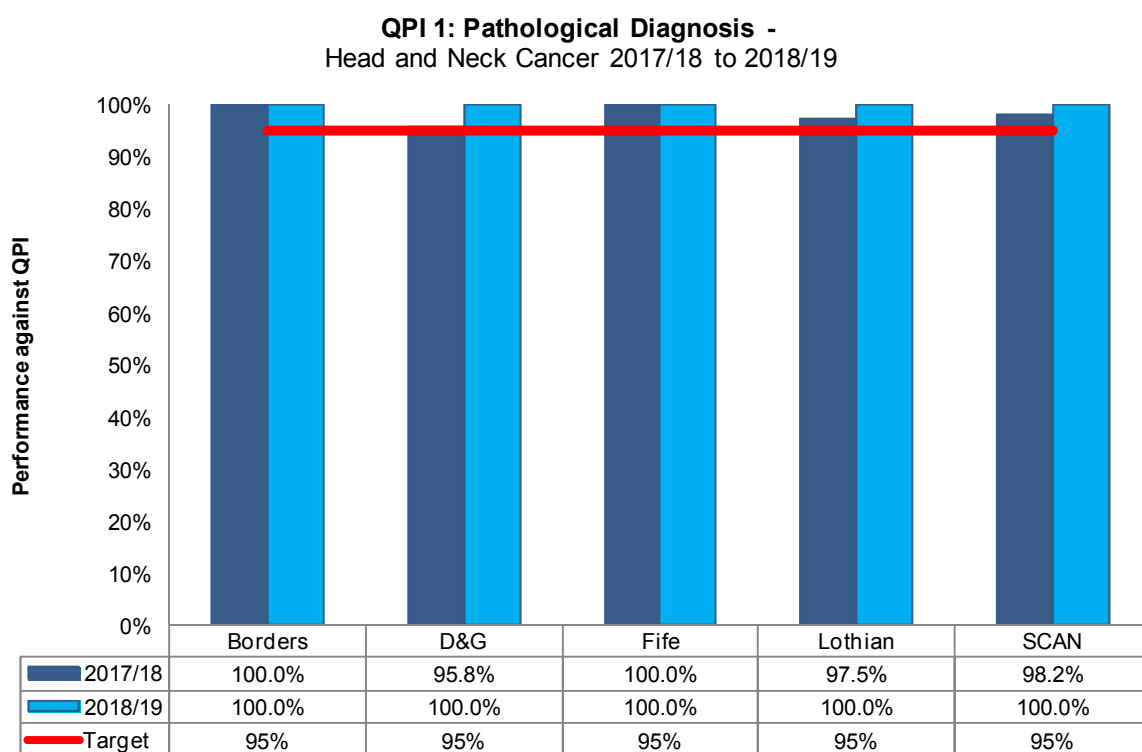
Following formal review after Year 3, QPI 1 was updated. Patients who die before first treatment or decline treatment were excluded. Year 4 and Year 5 data is therefore not directly comparable with the first 3 years of data collection which are shown on the next chart.

QPI 1: Pathological Diagnosis -
Head and Neck Cancer 2015/16 to 2016/17

Performance against QPI

	Borders	D&G	Fife	Lothian	SCAN
2014/15	91.7%	89.7%	97.9%	94.0%	94.1%
2015/16	92.9%	100.0%	100.0%	98.2%	98.4%
2016/17	100.0%	96.8%	98.3%	98.9%	98.7%
Target	95%	95%	95%	95%	95%

QPI 2: Imaging Specification (i) Target = 95%

Numerator = Number of patients with head and neck cancer who undergo CT and/or MRI of the primary site and draining lymph nodes with CT of the chest before the initiation of treatment.

Denominator = All patients with head and neck cancer.

Exclusions = (a) Patients who undergo diagnostic excision biopsy as the definitive surgery (b) Patients who die before first treatment (c) Patients who decline treatment.

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	1	1	2	21	25
Numerator	13	29	71	163	276
Not Recorded for Numerator	0	0	0	0	0
Denominator	13	30	72	163	278
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	96.7%	100.0%	100.0%	99.3%

The target was met by all Boards

QPI 2i: Imaging
Head and Neck Cancer 2017/18 to 2018/19

	Borders	D&G	Fife	Lothian	SCAN
2017/18	100.0%	79.2%	94.5%	98.1%	95.5%
2018/19	100.0%	96.7%	98.6%	100.0%	99.3%
Target	95%	95%	95%	95%	95%

Following formal review after Year 3, QPI 2 (i) was updated. Additional exclusions were added; Patients who die before first treatment or decline treatment and patients who undergo diagnostic excision biopsy as the definitive surgery. Year 4 and Year 5 data is therefore not directly comparable with the earlier years of data collection which are shown on the next chart.

Below are QPI 2 (i) figures from Year 2 and Year 3 of QPI collection. QPI 2 was also updated after year 1 (baseline review) to include patients who die before first treatment or decline treatment. Patients undergoing diagnostic excision biopsy as definitive treatment were also excluded. Year 1 data is therefore excluded from the following graph.

QPI 2i: Imaging
Head and Neck Cancer 2015/16 to 2016/17

	Borders	D&G	Fife	Lothian	SCAN
2015/16	100.0%	100.0%	100.0%	93.0%	95.6%
2016/17	89.5%	93.5%	98.3%	95.7%	95.6%
Target	95%	95%	95%	95%	95%

QPI 2: Imaging Specification (ii) Target = 95%

Numerator = Number of patients with head and neck cancer who undergo CT and/or MRI of the primary site and draining lymph nodes with CT of the chest before the initiation of treatment where the report is available within 2 weeks of the final imaging procedure.

Denominator = All patients with head and neck cancer who undergo CT and/or MRI of the primary site and draining lymph nodes with CT of the chest before initiation of treatment.

Exclusions = (a) Patients who undergo diagnostic excision biopsy as the definitive surgery (b) Patients who die before first treatment (c) Patients who decline treatment.

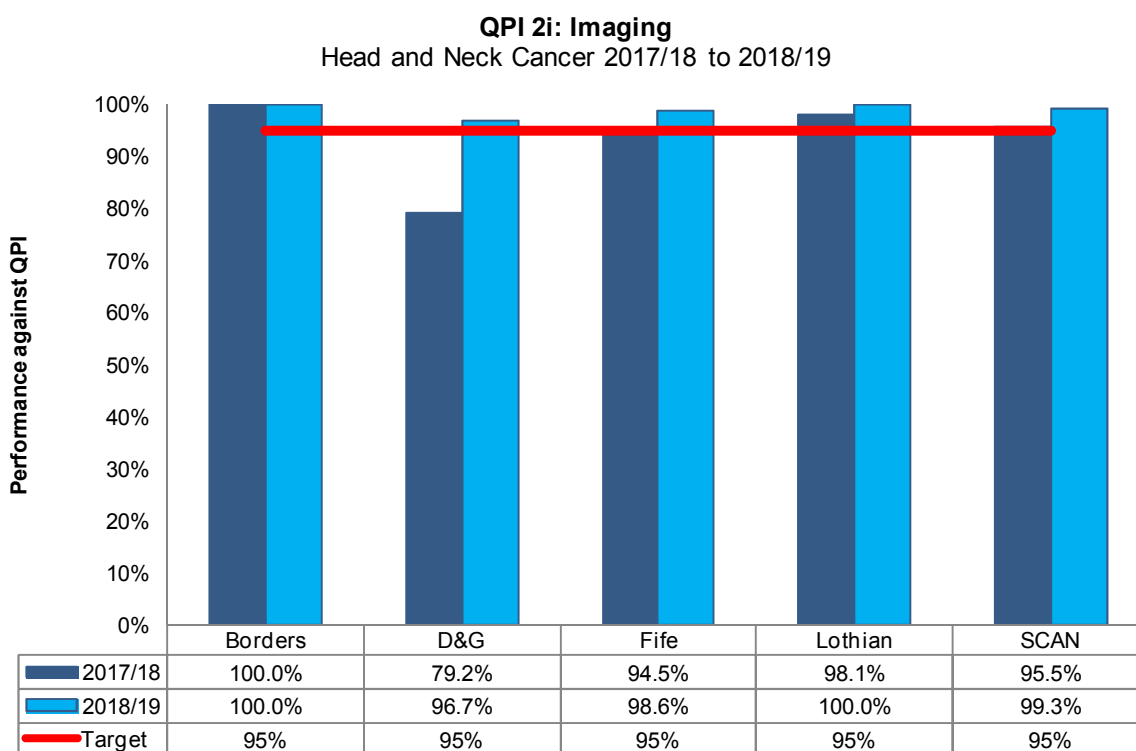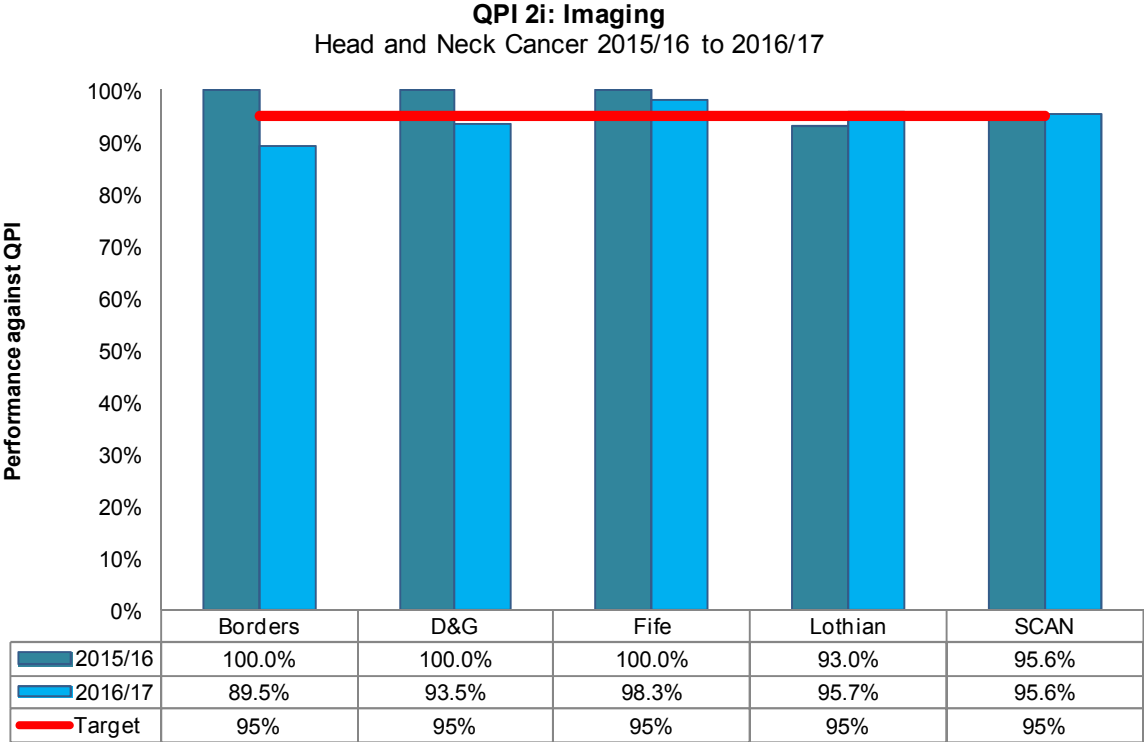| Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	1	2	3	21	27
Numerator	13	25	71	155	264
Not Recorded for Numerator	0	0	0	0	0
Denominator	13	29	71	163	276
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	86.2%	100.0%	95.1%	95.7%

Comments where the QPI was not met

D&G: The target was not met showing a shortfall of 8.8% (4 cases). The final imaging reports for these 4 patients were reported 15, 16, 17 and 18 days after being performed.

QPI 2ii: Imaging
Head and Neck Cancer 2018/19

	Borders	D&G	Fife	Lothian	SCAN
2018/19	100.0%	86.2%	100.0%	95.1%	95.7%
Target	95%	95%	95%	95%	95%
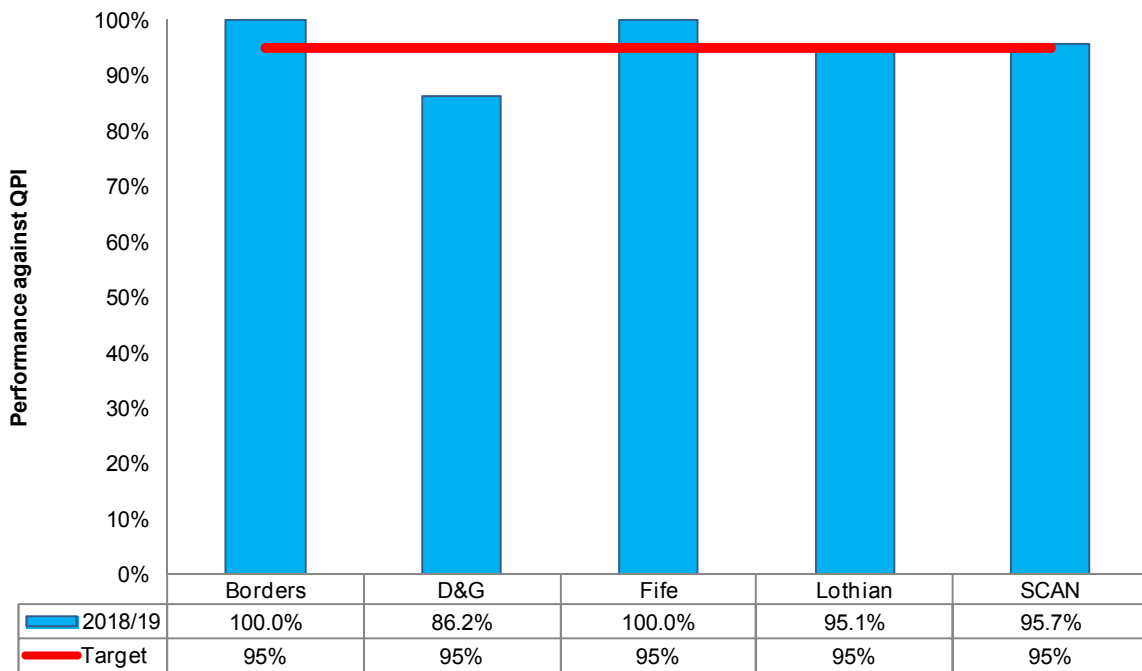
Action: No action required. Dumfries has longstanding known reporting challenges.

Following formal review after Year 3, QPI 2 (ii) was added. Part (ii) has only been reported from Year 5 however as additional data items were required to be collected to measure where the imaging report was available within 2 weeks. Excluded from this QPI are patients who die before first treatment, decline treatment, and patients who undergo diagnostic excision biopsy as the definitive surgery.

QPI 3: Multi-disciplinary Team Meeting (MDT) Target = 95%

Numerator = Number of patient with head and neck cancer discussed at the MDT before definitive treatment.

Denominator = All patients with head and neck cancer.

Exclusions = Patients who die before first treatment or who undergo diagnostic excision biopsy as the definitive surgery.

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	0	1	0	10	11
Numerator	14	30	74	174	292
Not Recorded for the Numerator	0	0	0	0	0
Denominator	14	30	74	174	292
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	0	0
% Performance	100.0%	100.0%	100.0%	100.0%	100.0%

The target was met by all Boards

QPI 3: Multi-Disciplinary Team Meeting (MDT)
Head and Neck Cancer 2015/16 to 2018/19

	Borders	D&G	Fife	Lothian	SCAN
2015/16	100.0%	100.0%	100.0%	95.4%	97.1%
2016/17	89.5%	90.3%	96.6%	94.1%	93.9%
2017/18	100.0%	91.7%	97.3%	98.8%	97.8%
2018/19	100.0%	100.0%	100.0%	100.0%	100.0%
Target	95%	95%	95%	95%	95%
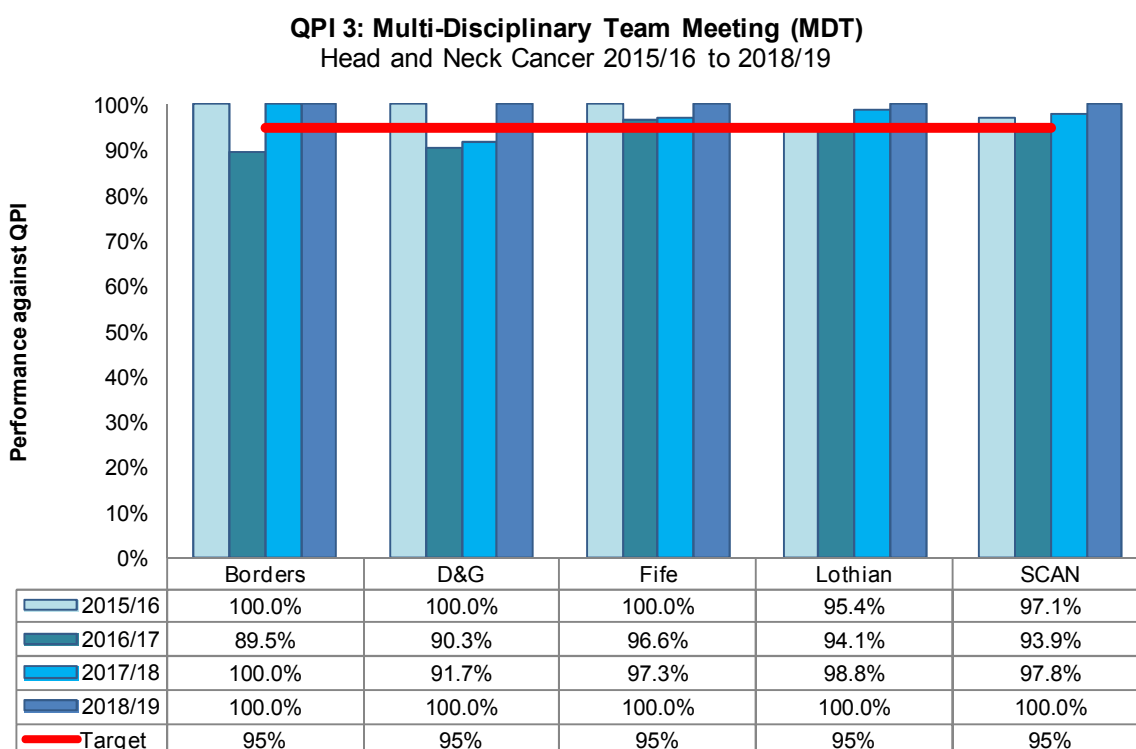
QPI 3 was updated after Year 1 (baseline review) with the exclusion of patients undergoing diagnostic excision biopsy as definitive treatment added, so year 1 is excluded from the graph.

TREATMENT

QPI 4: Smoking Cessation Target = 95%

Numerator = Number of patient with head and neck cancer who smoke who are offered referral to smoking cessation before first treatment

Denominator = All patients with head and neck cancer who smoke (no exclusions)

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	11	21	49	87	168
Numerator	2	6	19	41	68
Not Recorded for Numerator	0	2	0	29	31
Denominator	3	10	25	86	124
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	1	1	1	5	8
% Performance	66.7%	60.0%	76.0%	47.7%	54.8%

Comments where the QPI was not met

Borders: The target was not met showing a shortfall of 28.3% (1 case). This patient declined referral.
1 further patient was 'Not recorded for Denominator' due to smoking status not being recorded.

D&G: The target was not met showing a shortfall of 35% (4 cases). No reason was documented for the 4 patients not offered referral to smoking cessation.
1 further patient was 'Not recorded for Denominator' due to smoking status not being recorded. .

Fife: The target was not met showing a shortfall of 19% (6 cases). For 5 patients referral was offered on the same day as decision for best supportive care, and 1 patient stopped smoking shortly after diagnosis and was not offered referral.
1 further patient was 'Not recorded for Denominator' due to smoking status not being recorded.

Lothian: The target was not met showing a shortfall of 47.3% (45 cases). 29 patients of these patients were 'Not recorded for the Numerator; within these patients whether referral was offered was not recorded for 25 and a further 4 patients were offered referral but the date not recorded. For the remaining 17 patients, 8 were offered on the same day as decision for best supportive care, 3 patients were diagnosed at surgery and only offered referral following this. 4 patients were not offered referral (1 declined all treatment). 1 patient declined referral and 1 patient stopped smoking between cancer referral and MDT – cessation not offered.
5 patients were 'Not recorded for Denominator' due to smoking status not being recorded.

QPI 4: Smoking Cessation
Head and Neck Cancer 2018/19

	Borders	D&G	Fife	Lothian	SCAN
2018/19	100.0%	90.9%	100.0%	88.6%	92.1%
Target	95%	95%	95%	95%	95%
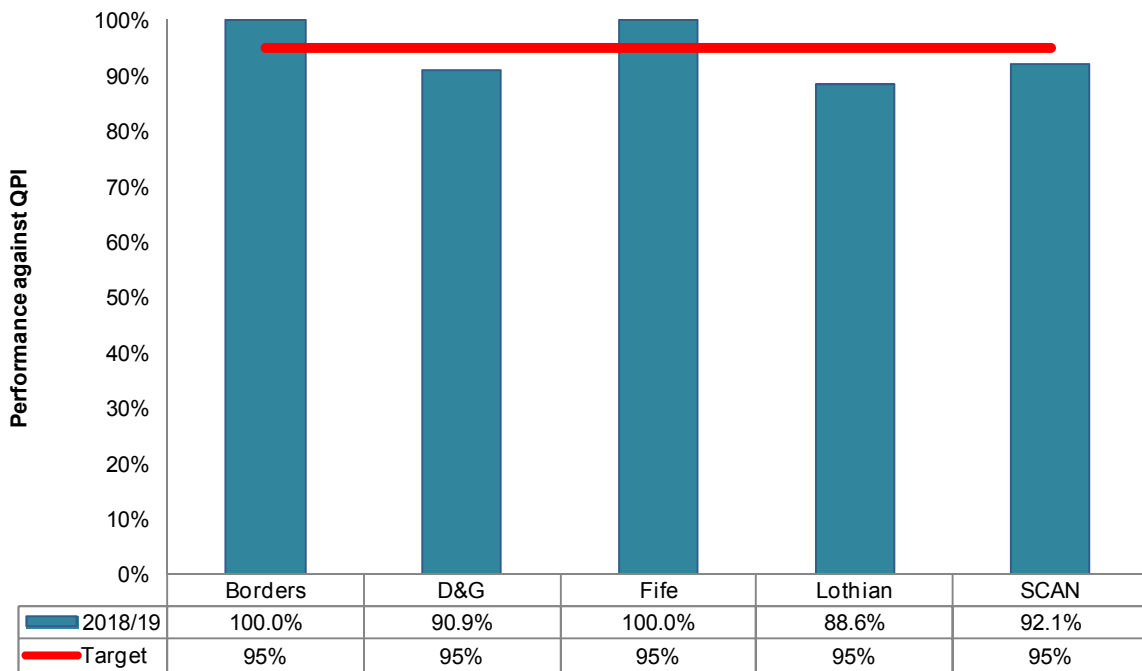
Action: QPI to be amended to allow Best Supportive Care patients who are offered referral on the same day to pass this QPI. MDT referral form to be updated to capture whether referral is required or has already been offered

Following formal review after Year 3, QPI 4 was updated to focus on patients being offered referral, rather than actual referral. This required the collection of additional data items. This QPI was therefore not reported in Year 4.

QPI 5: Oral and Dental Rehabilitation Plan Specification (i) Target = 95%

Numerator = Number of patients with head and neck cancer undergoing active treatment in whom the decision for requiring pre-treatment assessment has been made jointly by Consultants in Restorative Dentistry and the MDT.

Denominator = All patients with head and neck cancer undergoing active treatment.

Exclusions = Patients with T1/T2/N0 cancer.

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	4	9	19	45	77
Numerator	10	22	34	139	205
Not Recorded for Numerator	0	0	21	1	22
Denominator	10	22	55	140	227
Not Recorded for Exclusions	0	0	0	1	1
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	100.0%	61.8%	99.3%	90.3%

Comments where the QPI was not met

Fife: The target was not met showing a shortfall of 33.2% (21 cases). For these 21 patients data was not recorded. 19 patients had treatment in Tayside (data not available) and 2 patients had treatment in NHS Lothian.

QPI 5 (i): Oral and Dental Rehabilitation Plan
Head and Neck Cancer 2018/19

	Borders	D&G	Fife	Lothian	SCAN
2018/19	100.0%	100.0%	61.8%	99.3%	90.3%
Target	95%	95%	95%	95%	95%
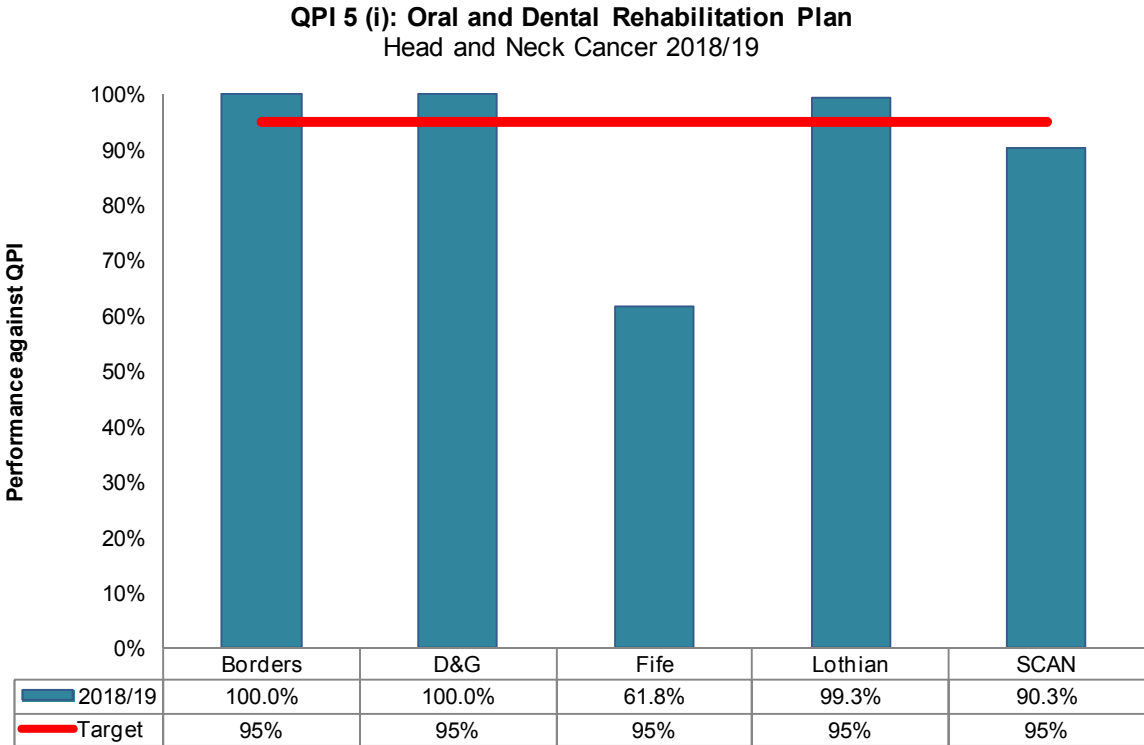
Action: Reporting to be amended to include a table which exclude patients being treated outwith SCAN, for which data is not available.

Following formal review after Year 3, QPI 5 was updated and separated into two parts. Part 1 (specification i) focuses on patients identified jointly by Restorative Dentistry and MDT as requiring pre-treatment assessment. This required the collection of additional data items. This QPI was not therefore reported in Year 4 and is not comparable to data collected in Years 1-3

QPI 5: Oral and Dental Rehabilitation Plan Specification (ii) Target = 95%

Numerator = Number of patients with head and neck cancer who are identified as requiring pre-treatment assessment that have assessment carried out before initiation of treatment.

Denominator = All patients with head and neck cancer who are identified by all relevant members of the MDT as requiring dental assessment.

Exclusions = Patients with T1/T2/N0 cancer.

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	6	20	13	82	121
Numerator	6	10	29	85	130
Not Recorded for Numerator	0	0	0	0	0
Denominator	6	11	29	95	141
Not Recorded for Exclusions	0	0	0	1	1
Not Recorded for Denominator	2	0	32	7	41
% Performance	100.0%	90.9%	100.0%	89.5%	92.2%

Comments where the QPI was not met

D&G: The target was not met showing a shortfall of 4.1% (1 case). This patient was assessed after surgery (first treatment) but before radiotherapy.

Lothian: The target was not met showing a shortfall of 5.5% (10 cases). Nine of these patients were not assessed and 1 patient was assessed after surgery.

QPI 5 (ii): Oral and Dental Rehabiliation Plan
Head and Neck Cancer 2018/19

	Borders	D&G	Fife	Lothian	SCAN
2018/19	100.0%	90.9%	100.0%	89.5%	92.2%
Target	95%	95%	95%	95%	95%

Action: No Action required.

Following formal review after Year 3, QPI 5 was updated and separated into two parts. Part 2 (specification ii) focuses on identifying patients that have a dental assessment prior to initiation of treatment. This required the collection of additional data items. This QPI was not therefore reported in Year 4 and is not comparable to data collected in Years 1-3.

Some issues have been highlighted regarding the updated two-part QPI5 as noted by the Lothian Head and Neck Cancer dental team below). Audit Facilitators and SCAN groups will

be reviewing this.

Comment: As a group, we (NHS Lothian Head & Neck Cancer Dental Team) have discovered what may have been some unforeseen issues with the reworded QPI5. Especially in light of how it is now being recorded. We have seen two data sets for this QPI. One recorded as to the letter of the indicator and another taken by the interpretation of assessments carried out by 'someone' in the MDT as recording that discussion has taken place between the Restorative Consultant and the MDT (specification i).

One of the big motivators for splitting the QPI into 2 parts was that a core group of restorative consultants wished to mandate the attendance of the restorative consultant at the MDT and to have them explicitly state at that time whether dental assessment was indicated or not in the MDT record of the treatment plan for the patient. The rationale was that nobody else within the MDT has the expertise to make this decision.

By analysing the data both ways as we have done, it confirms that our single handed restorative consultant cannot achieve the target. This maths could have been done without an audit as they are likely to attend somewhere in the region of 80% of MDTs/year based on a 42 week/year consultant job plan.

By using presence or absence of assessment as an indicator for specification (i), we potentially miss failings in a service. For example; the restorative consultant identifies 100 patients requiring assessment but only manage to assess 69 of them. By the letter of the QPI this is a fail, but using assessment as a surrogate allows this to become a success.

Furthermore, the QPI more generally is open to interpretation. In specification (ii), we measure the percentage of patients identified by the restorative consultant in part (i) that went on to get a dental assessment. Unfortunately there is no way of knowing if all restorative consultants apply the same criteria to identify who should be assessed. So despite all the intensive discussions to write this national QPI, it may unfortunately fall short of the standard and robust measure we intended.

We all hope for QPIs that have the ability to improve patient outcomes. Unfortunately it seems these items are poor surrogates of the closest measure of quality for this stage of treatment, timely dental assessment, and intervention prior to first line treatment.

The points above raise a question over the validity of specification (i) and QPI 5 more generally.

Dr C Millen
Consultant in Restorative Dentistry
November 2019

QPI 6: Nutritional Screening Target = 95%

Numerator = Number of patients with head and neck cancer who undergo nutritional screening with the Malnutrition Universal Screening Tool (MUST) before first treatment.

Denominator = All patients with head and neck cancer (No exclusions)

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	0	0	0	0	0
Numerator	11	21	64	161	255
Not Recorded for Numerator	0	0	10	9	21
Denominator	14	31	74	184	303
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	78.6%	67.7%	86.5%	87.5%	84.2%

Comments where the QPI was not met

Borders: The target was not met showing a shortfall of 16.4% (3 cases). For 2 patients MUST was not recorded, and for 1 patient MUST was recorded after first treatment.

D&G: The target was not met showing a shortfall of 27.3% (10 cases). For 10 patients MUST was not recorded.

Fife: The target was not met showing a shortfall of 8.5% (10 cases). For these 10 patients MUST was not available from the Tayside service.

Lothian: The target was not met showing a shortfall of 7.5% (23 cases). For 9 patients whether MUST was performed was not recorded (this was prior to MUSTs being recording electronically on TRAK (implemented in February 2019 in Lothian)). For a further 9 patients MUST was recorded after first treatment, 2 patients did not attend for assessment, 2 patients did not have MUST performed as had an NG tube in place and 1 patient declined screening.

QPI 6: Nutritional Screening
Head and Neck Cancer 2014/15 to 2018/19

	Borders	D&G	Fife	Lothian	SCAN
2014/15	33.3%	17.2%	89.4%	63.5%	61.5%
2015/16	0.0%	22.7%	98.2%	3.7%	27.0%
2016/17	68.4%	43.3%	83.3%	65.6%	67.2%
2017/18	81.3%	16.7%	71.2%	80.8%	73.0%
2018/19	78.6%	67.7%	86.5%	87.5%	84.8%
Target	95%	95%	95%	95%	95%
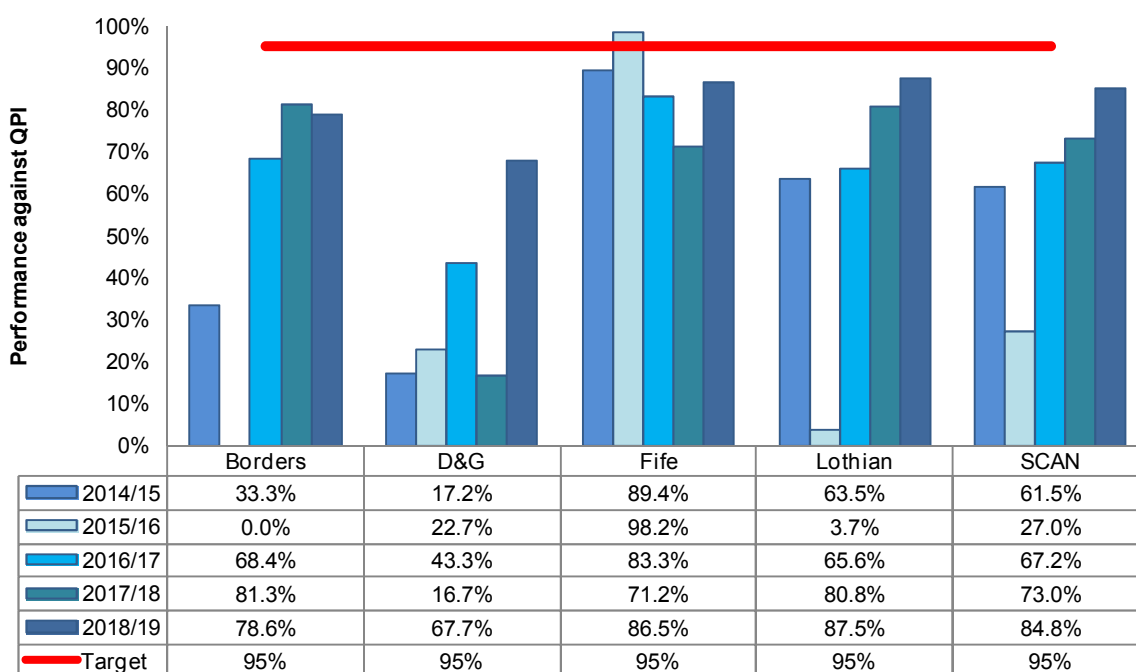
Comment: Lothian and Borders MUST scoring is expected to improve next year due to MUST scores now being recorded electronically on TRAK. Dumfries and Galloway MUST

scoring is also expected to improve next year due to MUST scores now being recorded by the CNS for Head and Neck cancers. Fife now have an additional dietician post which is expected to start in 2020, therefore Fife MUST scores are also expected to improve next year.

No further action was identified.

QPI 7: Specialist Speech and Language Therapist Access Target = 90%

Numerator = Number of patients with oral, pharyngeal or laryngeal cancer undergoing treatment with curative intent who are seen by a specialist Speech and Language Therapist before treatment.

Denominator = All patients with oral, pharyngeal or laryngeal cancer undergoing treatment with curative intent.

Exclusions = Patients who refuse assessment.

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	4	15	27	70	116
Numerator	1	9	5	93	108
Not Recorded for Numerator	0	0	0	0	0
Denominator	10	16	47	114	187
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	10.0%	56.3%	10.6%	81.6%	57.8%

Comments where the QPI was not met:

Borders: The target was not met showing a shortfall of 80% (cases). All 9 patients were not seen by SLT prior to treatment.

D&G: The target was not met showing a shortfall of 23.7% (7 cases). All 7 patients were not seen by SLT prior to treatment.

Fife: The target was not met showing a shortfall of 79.4% (42 cases). Of these 42 patients who were not seen by SLT prior to treatment, 21 patients were seen in Lothian after treatment started. From treatment start date to SLT assessment, the median was 2 days.

Lothian: The target was not met showing a shortfall of 8.4% (21 cases). Of these 21 patients who were not seen by SLT prior to treatment, 5 were seen by SLT after treatment started. Of these 5, 2 were assessed and treated on the same day.

QPI 7: Specialist Speech and Language Therapist Access
Head and Neck Cancer 2017/18 to 2018/19

	Borders	D&G	Fife	Lothian	SCAN
2017/18	40.0%	58.8%	9.4%	76.7%	55.6%
2018/19	10.0%	56.3%	10.6%	81.6%	57.8%
Target	90%	90%	90%	90%	90%
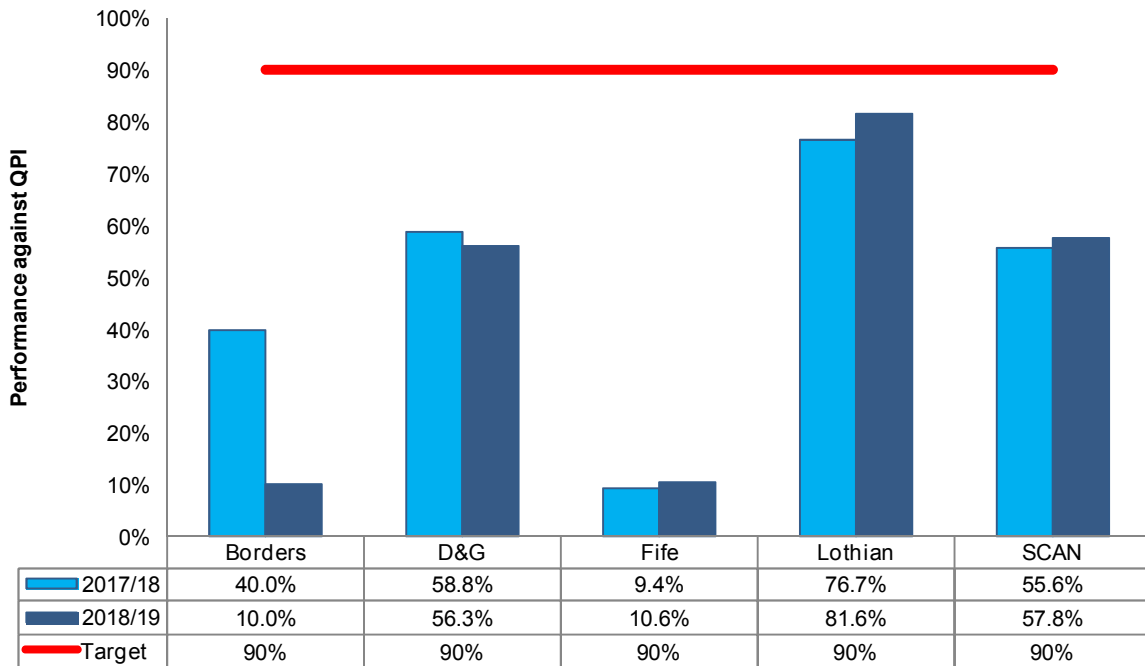
Comment: It is noted that patients are often seen after treatment starts when the need arises and that this is an appropriate course of action with limited resources. There is currently an SBAR in process outlining the requirements for additional resource in Borders and Lothian. Additionally, of the 47 patients in the denominator for Fife, 40 (85%) were also referred to and received local input from the Fife SLT service post treatment, in other locations. No action was identified.

Following formal review after Year 3, QPI 7 was updated. Patients not undergoing treatment with curative intent were excluded from the denominator.

Below are QPI 7 figures from Years 1, 2 and 3 of QPI collection.

QPI 7: Specialist Speech and Laaguage Therapist Access
Head and Neck Cancer 2014/15 to 2016/17

	Borders	D&G	Fife	Lothian	SCAN
2014/15	45.5%	7.7%	4.9%	40.7%	30.3%
2015/16	25.0%	70.0%	22.2%	39.9%	37.6%
2016/17	7.1%	64.0%	5.6%	48.5%	62.8%
Target	90%	90%	90%	90%	90%
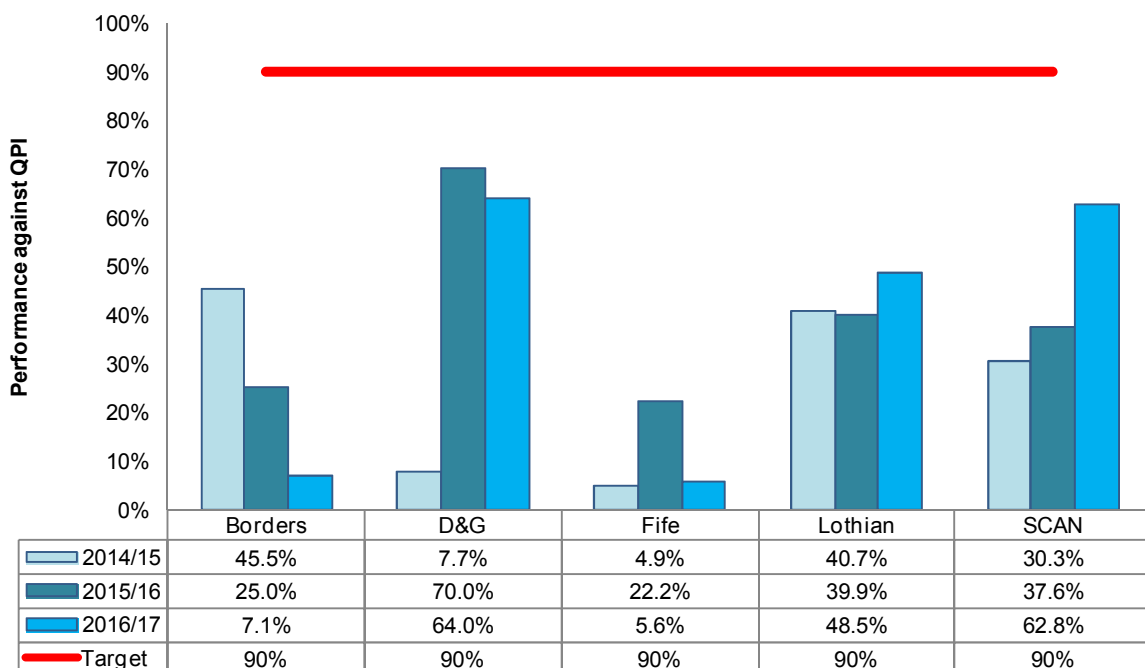
QPI 8: Surgical Margins Target ≤10%

Numerator = Number of patients with squamous cell carcinoma of the oral cavity, larynx or pharynx who undergo open surgical resection with curative intent with final excision margins of less than 1mm (on pathology report).

Denominator = All patients with squamous cell carcinoma of the oral cavity, larynx or pharynx who undergo open surgical resection with curative intent

Exclusions = Patients with naso-pharyngeal cancer, posterior pharyngeal wall cancer and upper oesophageal cancer.

Data presented by Hospital of Surgery

Target <10%	Borders	D&G	Fife	Lothian	SCAN
Numerator	0	0	0	2	3
Not Recorded for Numerator	0	0	0	0	0
Denominator	0	1	0	41	42
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	N/A	0.0%	N/A	4.9%	4.8%

4 patients from D+G were treated in Glasgow, and will appear in the WOSCAN report.
16 patients from Fife were treated in Tayside and will appear in the NOSCAN report.

% Performance in previous years	Borders	D&G	Fife	Lothian	SCAN
2015/16	N/A	N/A	N/A	10.8%	10.8%
2016/17	100.0%	0.0%	0.0%	12.8%	12.9%
2017/18	N/A	N/A	N/A	5.3%	5.3%

QPI 8 was not reported for Year 1 (2014/15)

All Boards reporting data met the target.

QPI 8: Surgical Margins
Head and Neck Cancer 2017/18

	Borders	D&G	Fife	Lothian	SCAN
2017/18	0.0%	0.0%	0.0%	5.3%	5.3%
2018/19	0.0%	0.0%	0.0%	4.9%	4.8%
Target	10%	10%	10%	10%	10%
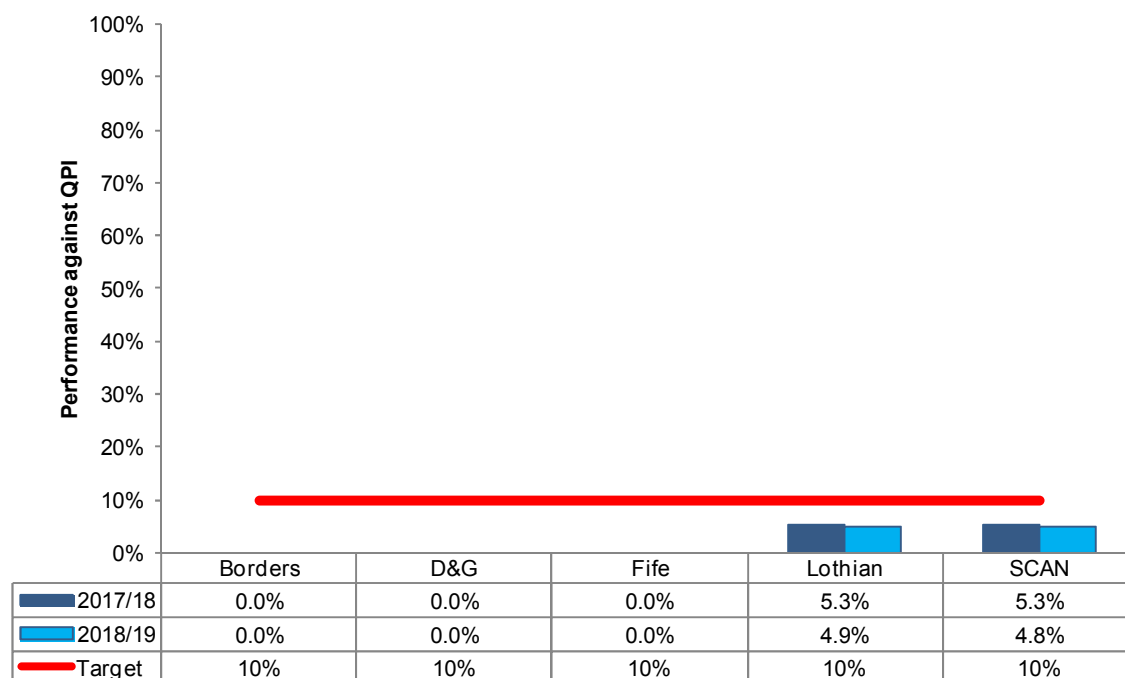
Following formal review after Year 3, QPI 8 was updated. The denominator criteria were changed to focus on those patients with squamous cell carcinoma of the oral cavity, larynx or pharynx (excluding the nasopharynx). The QPI target was also decreased to 10% in line with literature. QPI 8 was not reported for Year 1 so no data is available for this year (2014/15).

QPI 9: Intensity Modulated Radiotherapy (IMRT) Target= 95%

Numerator = Number of patients with head and neck cancer undergoing radiotherapy who receive IMRT.

Denominator = All patients with head and neck cancer undergoing radiotherapy.

Exclusions = Patients undergoing palliative radiotherapy care or T1/T2N0 larynx cancers.

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	7	21	49	101	178
Numerator	7	10	25	83	125
Not Recorded for Numerator	0	0	0	0	0
Denominator	7	10	25	83	125
Not Recorded for Exclusions	0	0	0	4	4
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	100.0%	100.0%	100.0%	100.0%

The target was met by all Boards

QPI 9: Intensity Modulated Radiotherapy (IMRT)
Head and Neck Cancer 2015/16 to 2018/19

	Borders	D&G	Fife	Lothian	SCAN
2015/16	100.0%	100.0%	100.0%	98.3%	99.1%
2016/17	100.0%	100.0%	96.0%	100.0%	99.3%
2017/18	100.0%	100.0%	100.0%	100.0%	100.0%
2018/19	100.0%	100.0%	100.0%	100.0%	100.0%
Target	95%	95%	95%	95%	95%

QPI 10: Post Operative Chemoradiotherapy Target = 55%

Numerator = Number of patients with squamous cell carcinoma of the oral cavity, larynx or pharynx with nodal extracapsular spread and/or involved margins (<1mm) following surgical resection who receive chemoradiation.

Denominator = All patients with squamous cell carcinoma of the oral cavity, larynx or pharynx with nodal extracapsular spread and/or involved margins (<1mm) following surgical resection.

Exclusions = Patients with performance status 2, 3 or 4. Patients with naso-pharyngeal cancer. Patients with oral (lip) cancer.

Target 55%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	14	28	72	174	288
Numerator	0	0	0	5	5
Not Recorded for Numerator	0	0	0	0	0
Denominator	0	3	2	10	15
Not Recorded for Exclusions	0	0	0	2	2
Not Recorded for Denominator	0	0	0	0	0
% Performance	N/A	0.0%	0.0%	50.0%	33.3%

Comments where the QPI was not met:

D&G: The target was not met showing a shortfall of 55% (3 cases). Of these patients 2 declined treatment and 1 was not fit for further treatment after surgery

Fife: The target was not met showing a shortfall of 55% (2 cases). One patient declined the recommended adjuvant chemotherapy and 1 was not fit for treatment.

Lothian: The target was not met showing a shortfall of 5% (5 cases). Of these patients, 3 did not receive any adjuvant treatment, with 2 declining adjuvant radiotherapy and not fit for chemotherapy (1 with advanced age) and for 1 patient no treatment was thought clinically appropriate. The remaining 2 patients received adjuvant radiotherapy only; 1 of these was not suitable for chemotherapy due to comorbidities and 1 was considered to have clear margins at MDT but adjuvant treatment was given due to perineural invasion. This patient was not fit for chemotherapy.

QPI 10: Post Operative Chemoradiotherapy
Head and Neck Cancer 2017/18 to 2018/19

	Borders	D&G	Fife	Lothian	SCAN
2017/18	0.0%	0.0%	0.0%	50.0%	33.3%
2018/19	0.0%	0.0%	0.0%	50.0%	33.3%
Target	55%	55%	55%	55%	55%
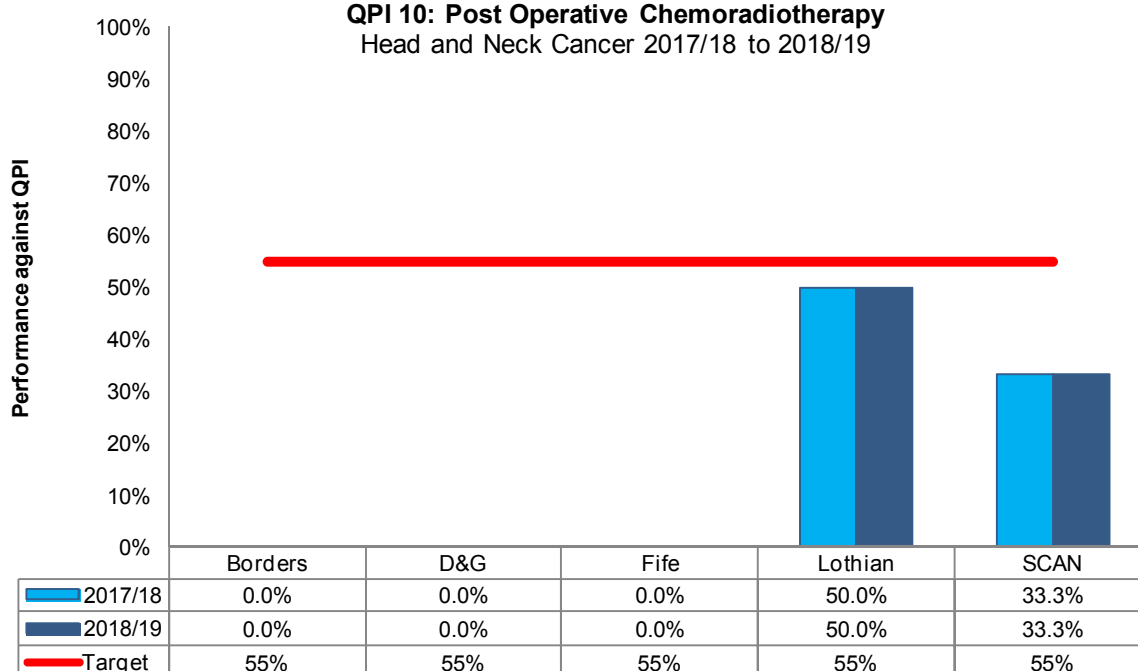
Reason for patients not receiving Chemoradiotherapy (by Health Board)	Borders	D&G	Fife	Lothian	SCAN
Patient not fit for chemo (includes advanced age)	0	1	1	3	5
Patient comorbidities	0	0	0	1	1
Patient died prior to adjuvant treatment	0	0	0	0	0
Patient treated palliatively	0	0	0	0	0
Clinical decision for no adjuvant treatment	0	0	0	1	1
Patient declined treatment	0	2	1	0	3
Patient treated outwith SCAN	0	0	0	0	0
Totals	0	3	2	5	10

Comment: Currently performance status is collected at the time of diagnosis, but post-op performance status is more indicative for this treatment modality.

Action: Consider recording post-op performance status for use in this QPI.

Following formal review after Year 3, QPI 10 was updated. The QPI was changed to focus on patients with squamous cell carcinoma, and the following exclusions added; Patients with performance status 2, 3 or 4, patients with nasopharyngeal cancer or oral (lip) cancer. The target was also lowered to from 85% to 55% following review in consideration of patient suitability for this treatment.

The chart below shows figures from Year 2 and Year 3 of QPI collection. QPI 10 was not reported for Year 1 so no data is available for this year (2014/15).

QPI 10: Post Operative Chemoradiotherapy
Head and Neck Cancer 2015/16 to 2016/17

	Borders	D&G	Fife	Lothian	SCAN
2015/16	0.0%	0.0%	50.0%	29.4%	30.0%
2016/17	40.0%	0.0%	0.0%	27.8%	25.0%
Target	55%	55%	55%	55%	55%
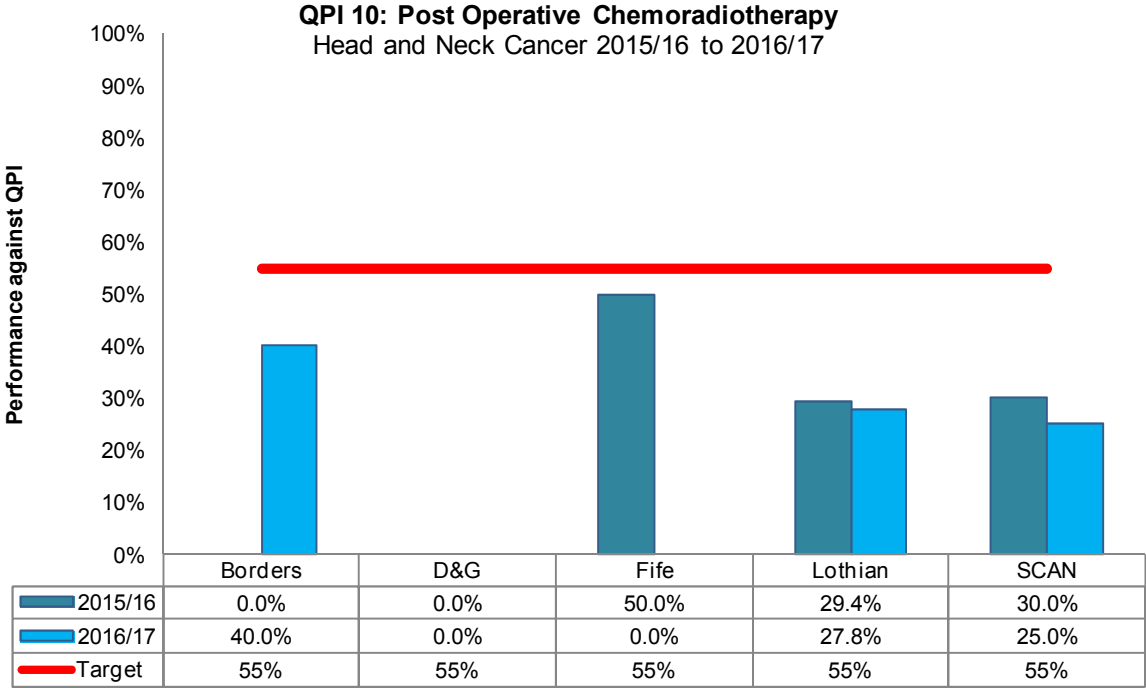
TREATMENT OUTCOMES

QPI 11a: Mortality (Surgery) – Hospital of Surgery

Target <5%

Numerator = Number of patients with head and neck cancer who undergo curative surgery who die within 30 days of treatment.

Denominator = All patients with head and neck cancer who undergo curative surgery.

Exclusions = No exclusions

30 day Mortality (surgery)

Target <5%	Borders	D&G	Fife	Lothian	SCAN
Numerator	0	0	0	0	0
Not Recorded for Numerator	0	0	0	0	0
Denominator	0	2	0	70	72
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	N/A	0.0%	N/A	0.0%	0.0%

5 patients from D+G were treated in Glasgow, and will appear in the WOSCAN report.
18 patients from Fife were treated in Tayside and will appear in the NOSCAN report.

% Performance in previous years	Borders	D&G	Fife	Lothian	SCAN
2014/15	N/A	0.0%	0.0%	0.0%	0.0%
2015/16	N/A	N/A	N/A	0.0%	0.0%
2016/17	0.0%	0.0%	0.0%	0.0%	0.0%
2017/18	0.0%	N/A	0.0%	N/A	0.0%

All Boards reporting data met this QPI

90 day Mortality (Surgery)

Target <5%	Borders	D&G	Fife	Lothian	SCAN
Numerator	0	0	0	0	0
Not Recorded for Numerator	0	0	0	0	0
Denominator	0	2	0	70	72
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	N/A	0.0%	N/A	0.0%	0.0%%

5 patients from D+G were treated in Glasgow, and will appear in the WOSCAN report.
18 patients from Fife were treated in Tayside and will appear in the NOSCAN report.

% Performance in previous years	Borders	D&G	Fife	Lothian	SCAN
2015/16	N/A	N/A	N/A	0.0%	0.0%
2016/17	0.0%	0.0%	0.0%	3.8%	3.5%
2017/18	N/A	0.0%	N/A	3.2%	3.2%

QPI 11 was updated after Year 1 (baseline review) to include 90 Day Mortality. Year 1 data is not available.

All Boards reporting data met this QPI

QPI 11b: Mortality after Radiotherapy – By Hospital of diagnosis

Target <5%

Numerator = Number of patients with head and neck cancer who undergo curative radiotherapy who die within 30 days of treatment.

Denominator = All patients with head and neck cancer who undergo curative radiotherapy. (No exclusions)

30 day Mortality (Radiotherapy)

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	13	31	67	168	279
Numerator	0	0	0	1	1
Not Recorded for Numerator	0	0	0	0	0
Denominator	1	0	7	16	24
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	0.0%	N/A	0.0%	6.3%	4.2%

% Performance in previous years	Borders	D&G	Fife	Lothian	SCAN
2014/15	0.0%	0.0%	0.0%	4.2%	2.6%
2015/16	0.0%	0.0%	0.0%	0.0%	0.0%
2016/17	0.0%	0.0%	0.0%	0.0%	0.0%
2017/18	0.0%	0.0%	0.0%	6.3%	3.6%

Comments where the QPI was not met:

Lothian: The target was not met showing a shortfall of 1.3% (1 case). This patient did not complete treatment course, receiving only 20 of 30 fractions

90 day Mortality (Radiotherapy)

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	13	31	67	168	279
Numerator	0	0	0	1	1
Not Recorded for Numerator	0	0	0	0	0
Denominator	1	0	6	16	23
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	0.0%	N/A	0.0%	6.3%	4.3%

% Performance in previous years	Borders	D&G	Fife	Lothian	SCAN
2015/16	0.0%	0.0%	0.0%	3.6%	2.1%
2016/17	0.0%	0.0%	9.1%	0.0%	2.3%
2017/18	0.0%	0.0%	0.0%	6.3%	3.6%

Comments where the QPI was not met:

Lothian: The target was not met showing a shortfall of 1.3% 1 cases) This patient did not complete treatment course, receiving only 20 of 30 fractions.

NHS Fife: 90 days since treatment had not been reached by 1 patient.

QPI 11c: Mortality Following Chemoradiotherapy – By hospital of diagnosis

Target <5%

Numerator = Number of patients with head and neck cancer who undergo curative chemoradiotherapy who die within 30 days of treatment.

Denominator = All patients with head and neck cancer who undergo curative chemoradiotherapy (No exclusions)

30 day mortality (Chemoradiotherapy)

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	8	23	56	126	213
Numerator	0	0	0	1	1
Not Recorded for Numerator	0	0	0	0	0
Denominator	6	8	18	58	90
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	0.0%	0.0%	0.0%	1.7%	1.1%

% Performance in previous years	Borders	D&G	Fife	Lothian	SCAN
2014/15	0.0%	0.0%	0.0%	0.0%	0.0%
2015/16	0.0%	0.0%	0.0%	2.6%	1.3%
2016/17	0.0%	0.0%	0.0%	3.9%	2.4%
2017/18	0.0%	0.0%	0.0%	0.0%	0.0%

The target was met by all Boards

90 day mortality (Chemoradiotherapy)

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2018-19 Cohort	14	31	74	184	303
Ineligible for this QPI	8	23	56	129	213
Numerator	0	0	0	2	2
Not Recorded for Numerator	0	0	0	0	0
Denominator	6	8	17	56	86
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	0.0%	0.0%	0.0%	3.6%	2.3%

% Performance in previous years	Borders	D&G	Fife	Lothian	SCAN
2015/16	0.0%	0.0%	0.0%	7.7%	3.9%
2016/17	0.0%	0.0%	6.3%	5.8%	4.7%
2017/18	0.0%	0.0%	0.0%	0.0%	0.0%

QPI 11 was updated after Year 1 (baseline review) to include 90 Day Mortality. Year 1 data is not available.

NHS Fife: 90 days since treatment had not been reached by 1 patient.
NHS Lothian: 90 days since treatment had not been reached by 2 patients.

The target was met by all Boards

QPI 12: Clinical Trials Target = 15%

Numerator = Number of patients with head and neck cancer consented for a clinical trial / research study.

Denominator = All patients with head and neck cancer (no exclusions)

Note: The clinical trials QPI is measured using SCRN data for the year 2018 and Cancer Registry data (5 year average of case ascertainment 2013-2017)

Target 15%	Borders	D&G	Fife	Lothian	SCAN
Numerator	1	2	3	23	19
Denominator	19	36	66	194	313
% Performance	**5.3%**	**5.6%**	**4.5%**	**11.9%**	**9.3%**

Open Trials in 2018	Trial Type	Numbers Recruited
CompARE	Interventional	12
DARS	Interventional	1
DOM-INATE	Interventional	1
SR1171	Interventional	9
Javelin	Interventional	5

Action: The inclusion of data from the EDGE clinical trials database, which is used to records patients who are given a trial Patient Information Sheet, is to be considered for subsequent reports. Patients from all reported regions are recorded on this database.

% Performance in previous years	Borders	D&G	Fife	Lothian	SCAN
2017/18	16.7%	0.0%	4.6%	6.3%	5.8%

Clinical Trial data was not collected until 2014/15 when only the SCAN total could be reported. From 2015/16 Board level data has been reported. This QPI was updated after Year 3 to combine reporting of interventional and translational trials and to change the numerator to consented patients. 2015/16 and 2016/17 Interventional and Translational Trial QPI results are shown below.

Interventional Trials (% Performance in previous years) Target 7.5%	Borders	D&G	Fife	Lothian	SCAN
2015/16	0.0%	0.0%	5.8%	2.0%	2.5%
2016/17	5.9%	2.9%	8.8%	9.1%	8.2%

Translational Trials (% Performance in previous years) Target 15%	Borders	D&G	Fife	Lothian	SCAN
2015/16	0.0%	0.0%	0.0%	0.0%	0.0%
2016/17	0.0%	0.0%	0.0%	0.0%	0.0%

KEY CATEGORIES

Table 1: Gender

Total Patients Diagnosed		Male		Female	
Borders	14	12	85.7%	2	14.3%
D&G	31	21	67.7%	10	32.3%
Fife	74	51	68.9%	23	31.1%
Lothian	184	127	69.0%	57	31.0%
SCAN	303	211	69.6%	92	30.3%

Table 2: Age at Diagnosis

Age	Borders		D&G		Fife		Lothian		SCAN	
<45	0	0.0%	0	0.0%	2	2.7%	12	6.5%	14	4.6%
45-49	2	14.3%	1	3.3%	6	8.1%	8	4.34%	17	5.6%
50-54	3	21.4%	4	12.9%	4	5.4%	23	12.5%	34	11.2%
55-59	3	21.4%	3	9.7%	13	17.6%	18	9.8%	37	12.2%
60-64	0	0.0%	6	19.4%	12	16.1%	36	19.6%	54	17.8%
65-69	2	14.3%	7	22.6%	11	14.9%	24	13.0%	44	14.5%
70-74	0	0.0%	6	19.4%	10	13.5%	20	10.9%	36	11.9%
75-79	0	0.0%	2	6.5%	7	9.5%	23	12.5%	32	10.6%
80-84	4	28.6%	1	3.3%	5	6.8%	12	6.5%	22	7.3%
85+	0	0.0%	1	3.3%	4	5.4%	8	4.4%	13	4.3%
Total	14	100.0%	31	100.0%	74	100.0%	184	100.0%	303	100.0%

Table 3: Tumour Site
N=All patients diagnosed

Site of Tumour	Borders		D&G		Fife		Lothian		SCAN	
Larynx	2	14.3%	2	14.9%	11	14.9%	27	14.7%	42	13.9%
Oral Cavity	2	14.3%	10	32.3%	25	33.8%	58	31.5%	95	31.4%
Major Salivary Glands	0	0.00%	4	12.9%	1	1.4%	6	3.3%	11	3.6%
Oropharynx	8	57.1%	13	41.9%	27	36.5%	67	36.4%	115	38.0%
Nasopharynx	0	0.0%	0	0.0%	2	2.7%	3	1.6%	5	1.7%
Hypopharynx	2	14.3%	0	0.0%	4	5.4%	14	7.6%	20	6.6%
Nasal Cavity & Middle Ear	0	0.0%	1	3.2%	2	2.7%	7	3.8%	10	3.3%
Accessory Sinuses	0	0.0%	0	0.0%	0	0.0%	2	1.1%	2	0.7%
Bones	0	0.0%	0	0.0%	2	2.7%	0	0.0%	2	0.7%
Ill Defined Sites	0	0.0%	1	3.2%	74	0.0%	0	0.0%	1	0.3%
Total	14	100.0%	31	100.0%	74	100%	184	100.0%	303	100.0%

QPI Attainment Summary Year 4	Target%	Borders		D&G		Fife		Lothian		SCAN	
QPI 1 Pathological Diagnosis of Head and Neck Cancer	95	N 13 D 13	100%	N 23 D 24	95.8%	N 73 D 73	100%	N 158 D 162	97.5%	N 267 D 272	98.2%
QPI 2(i) Imaging	95	N 13 D 13	100%	N 19 D 24	79.2%	N 69 D 73	94.5%	N 152 D 155	98.1%	N 253 D 265	95.5%
QPI 3 Multi-disciplinary Team Meeting (MDT)	95	N 15 D 15	100%	N 22 D 24	91.7%	N 71 D 73	97.3%	N 162 D 164	98.8%	N 270 D 276	97.8%
QPI 6 Nutritional Screening	95	N 13 D 16	81.3%	N 4 D 24	16.7%	N 52 D 73	71.2%	N 139 D 172	80.8%	N 208 D 285	73.0%
QPI 7 Specialist Speech and Language Therapist Access	90	N 4 D 10	40.0%	N 10 D 17	58.8%	N 5 D 53	9.4%	N 89 D 116	76.2%	N 109 D 196	55.6%
QPI 8 Surgical Margins - *presented by hospital of surgery*	<10	N 0 D 0	N/A	N 0 D 0	N/A	N 0 D 0	N/A	N 2 D 38	5.3%	N 2 D 38	5.3%
QPI 9 Intensity Modulated Radiotherapy (IMRT)	95	N 7 D 7	100%	N 13 D 13	100%	N 29 D 29	100%	N 85 D 85	100%	N 134 D 134	100%
QPI 10 Post Operative Chemoradiotherapy	55	N 0 D 0	N/A	N 0 D 1	0.0%	N 1 D 4	25.0%	N 5 D 15	33.3%	N 6 D 20	30.0%
QPI 11a 30 Day Mortality (surgery) *presented by hospital of surgery*	<5	N 0 D 0	N/A	N 0 D 1	0.0%	N 0 D 0	N/A	N 0 D 62	0.0%	N 0 D 63	0.0%
QPI 11a 90 Day Mortality (surgery) *presented by hospital of surgery*	<5	N 0 D 0	N/A	N 0 D 1	0.0%	N 0 D 0	N/A	N 2 D 62	3.2%	N 2 D 63	3.2%
QPI 11b 30 Day Mortality (radiotherapy)	<5	N 0 D 4	0.0%	N 0 D 5	0.0%	N 0 D 15	0.0%	N 2 D 32	6.3%	N 2 D 56	3.6%
QPI 11b 90 Day Mortality (radiotherapy)	<5	N 0 D 4	0.0%	N 0 D 5	0.0%	N 0 D 15	0.0%	N 2 D 32	6.3%	N 2 D 56	3.6%
QPI 11c 30 Day Mortality (chemoradiotherapy)	<5	N 0 D 4	0.0%	N 0 D 5	0.0%	N 0 D 18	0.0%	N 0 D 45	0.0%	N 0 D 72	0.0%
QPI 11c 90 Day Mortality (chemoradiotherapy)	<5	N 0 D 4	0.0%	N 0 D 5	0.0%	N 0 D 18	0.0%	N 0 D 45	0.0%	N 0 D 72	0.0%
Clinical Trial QPI NB: N = patients consented to Trials and on SCRN database, D = 5 year average Cancer Registry Data	15	N 3 D 18	16.7%	N 0 D 35	0.0%	N 3 D 65	4.6%	N 12 D 191	6.3%	N 18 D 310	5.8%

N = Numerator, D = Denominator, % = % Performance. QPIs 2 (ii), 4 and 5 were not reported in Year 4 following formal review, as additional data items were required

QPI Attainment Summary Years 1-3		Target %	Borders			D&G			Fife			Lothian			SCAN		
			Yr1	Yr2	Yr3	Yr1	Yr2	Yr3	Yr1	Yr2	Yr3	Yr1	Yr2	Yr3	Yr1	Yr2	Yr3
QPI 1: Pathological Diagnosis of Head and Neck Cancer		95	91.7	92.9	100.0	89.7	100.0	96.8	97.9	100.0	98.3	94.0	98.2	98.9	94.1	98.4	98.7
QPI 2i : Imaging		95	100.0	100.0	89.5	89.7	100.0	93.5	95.7	100.0	93.5	85.0	93.0	95.7	88.2	95.6	95.6
QPI 3: Multi-disciplinary Team Meeting		95	91.7	100.0	89.5	96.4	100.0	90.3	95.7	100.0	96.6	84.2	95.4	94.1	88.1	97.1	93.9
QPI 4: Smoking Cessation		90	0.0	0.0	0.0	0.0	33.3	N/A	5.3	90.0	91.3	0.0	0.0	0.0	0.9	-	-
QPI 5: Oral and Dental Rehabilitation plan		90	11.1	80.0	58.8	51.9	76.5	78.3	77.8	90.5	49.0	21.5	49.2	50.7	32.5	-	-
QPI 6: Nutritional Screening		95	33.3	0.0	68.4	17.2	22.7	43.3	89.4	98.2	83.3	63.5	3.7	65.5	61.5	27.0	67.2
QPI 7: Specialist Speech and Language Therapist Access		90	45.5	25.0	7.1	7.7	70.0	64.0	4.9	22.2	5.6	40.7	39.9	48.5	30.3	37.6	62.8
QPI 8: Surgical Margins by Board of surgery		<5%	-	-	100.0	-	-	0.0%	-	-	0.0%	-	10.8	12.8	-	10.8	12.9
QPI 9: Intensity Modulated Radiotherapy (IMRT)		80%	100.0	100.0	100.0	75.0	100.0	100.0	95.2	100.0	96.0	98.5	98.3	100.0	93.6	99.1	99.3
QPI 10: Post Operative Chemoradiotherapy		85%	-	0.0	40.0	-	-	0.0	-	50.0	0.0	-	29.4	27.8	-	30.0	25.0
QPI 11a: Mortality following surgery (presented by Board of surgery)	30 day	<5	-	-	0.0%	0.0	-	0.0	0.0	-	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	90 day	<5	-	-	0.0%	-	-	0.0	-	-	0.0	-	0.0	3.2	-	0.0	3.1
QPI 11b: Mortality following Radiotherapy	30 day	<5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	4.2	0.0	0.0	2.6	0.0	0.0
	90 day	<5	-	0.0	0.0	-	0.0	0.0	-	0.0	9.1	-	3.6	0.0	-	2.1	2.3
QPI 11c: Mortality following Chemoradiotherapy	30 day	<5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.6	3.9	0.0	1.3	2.4
	90 day	<5	-	0.0	0.0	-	0.0	0.0	-	0.0	6.3	-	7.7	5.8	-	3.9	4.7
QPI 12: Clinical Trials	Interventional	7.5	-	0	5.9		0	2.9		5.8	8.8		2.0	9.1		2.5	8.2
	Translational	15		0	0		0	0		0	0		0	0		0	0