



Working regionally to improve cancer services

SOUTH EAST SCOTLAND CANCER NETWORK PROSPECTIVE CANCER AUDIT

HEAD AND NECK CANCER 2019 – 2020 Quality Performance Indicators (QPI) Comparative Report

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HEAD AND NECK CANCER 2019-20 COMPARATIVE AUDIT REPORT

Patients diagnosed 1 April 2019 – 31 March 2020

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DOCUMENT HISTORY

Version	Circulation	Date	Comments
Version 1	Lead Clinicians' Sign off Group	10/11/2020	Circulated in advance of the Leads meeting
Version 2	SCAN Head and Neck Lead Clinicians	20/11/2020	Action points and Lead Clinician's comments added
Version3	SCAN Head and Neck Group	07/01/2020	For final comment from SCAN Group (Chairs clinical commentary to be added)
Final Version	SCAN Audit Reporting Framework	03/02/2021	For circulation to SCAN Group and Clinical Governance Group
Web Version	Published to website	2022	Disclosure checks performed.

Comment by Chair of the SCAN Head and Neck Group

The QPI data for 2019/20 reveals strong and consistent performance across many of the indicators. This reflects the high standard of care delivered by the H&N team across the SCAN region. There continue to be areas which are challenging. However, there has been notable improvement in several domains and there are plans in place to build upon that success. The regional H&N team continues to perform well in the diagnostic, MDT and treatment delivery components of the patients' pathway. The mortality associated with both surgical and oncological management is well below the 5% target.

The performance related to smoking cessation and nutritional screening continues to make steady improvement recording their best results to date. These QPIs have been somewhat dogged by recording and measurability issues which have been systematically addressed. Improvements have been made and there are further modifications in the pipeline for future years.

The oral rehabilitation team perform very well but fall just short of the QPI standard. This is largely due to recording issues and a single handed restorative dental consultant practice. Both of these issues are being addressed. The dental team will work with the audit facilitator to improve the visibility of the necessary documentation. A business case for a further restorative dental consultant post has been approved and will move forward to the recruitment phase in the near future.

The Speech and Language Therapy QPI continues to be particularly challenging. The overall regional performance remains largely unchanged. However, while the position in Fife has improved, the equivalent in Lothian has fallen back. Resource and recruitment remain challenging within SLT and there are ongoing regional discussions regarding the provision of the H&N SLT service. In the meantime, resource has been directed to those deemed in most need. This QPI is under formal review and the SCAN SLT team are involved in those national discussions.

There has been notable success in the recruitment of patients into H&N trials within SCAN. This has resulted in a significant improvement in performance within this domain culminating in the passing of this QPI for the first time. Many H&N cancer patients have benefitted from inclusion in these trials and many more with benefit in the future from the knowledge and experience that has been gained.

In summary, the core performance and standard of care provided by the SCAN H&N group remains very high. While there are still some challenging areas, excellent progress has been made in many of them with plans to build upon that success moving forward.

Mr J Morrison Chair SCAN Head and Neck Group February 2021

ACTION POINTS

QPI Action Plans from 2019-20

QPI	Action required	Person Responsible	Date for update
QPI 1	No action identified. Patients were treated appropriately	N/A	N/A
QPI 2i	No action identified.	N/A	N/A
QPI 2ii	SCAN Lead to discuss results with Radiology	Jim Morrison	Next SCAN group meeting
QPI 4	Other SCAN boards to consider adopting the Fife model for smoking cessation referrals Consider changing wording on MDT referral forms and standardisation Investigate the possibility of a smoking cessation letter appearing on TRAK, with patient also sent a copy.	Jim Morrison Esmond Carr	Next SCAN group meeting
QPI 5i	Audit and Dental staff in Lothian to implement change in recording process to ensure decision for/not for dental assessment is recorded.	Susan Baines Fiona Gardiner	Next SCAN group meeting
QPI 6	Consideration of the addition of a second part to this QPI which assesses if appropriate referral is being made, required at formal review	All clinicians	Next formal review
QPI 7	Fife has implemented a joint SLT and dietetics clinic, which is expected to improve QPI results. Lothian and Borders leads to meet with SLT, with the aim of enabling Borders patients to be assessed prior to treatment. There is currently an SBAR in process outlining the requirements for additional resource in Borders and Lothian.	Jim Morrison Esmond Carr Kirsty McLachlan	Next SCAN group meeting
QPI 8	NHS Lothian patients were all reviewed and some cases were complex. No further actions was identified.	N/A	N/A
QPI 10	Excluding patients from this QPI due to performance status prior to adjuvant treatment would be more relevant than performance status prior to surgery. To consider updating this QPI at formal review. Consideration also to be given to reporting by Board of Treatment.	All clinicians	Next formal review

QPI Action Points from 2018/19.

QPI	Action required	Progress/Action Status	Statu
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 PHS query log in order to update the QPI measurability to include these cases in the numerator.	NHS Lothian – Measurability updated.	1
	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	NHS Lothian – Under consideration	3
QPI 5i	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.	NHS Lothian – Table included this year	1
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.	NHS Lothian – SBAR in progress	1
QPI 10	Consider recording post surgical performance status (in addition to PS currently collected)	NHS Lothian - To be considered during the QPI review program	1
QPI 12	Are figures available from Fife now that there is a record of patients being given a PIS but who decline to enter a trial?	This information is held on the EDGE trials database.	1

Head and Neck QPI Attainment Summary 2019-20	Target%	Boi	rders		D&	G		Fife	•		Lo	thian		sc	AN	
QPI 1 Pathological Diagnosis of Head and Neck Cancer	95	N D	18 20	90%	N D	33 33	100%	N D	50 52	96.2%	N D	154 161	95.7%	N D	255 266	95.9%
QPI 2(i) Imaging	95	N D	18 19	94.7%	N D	31 32	96.9%	N D	50 52	96.2%	N D	147 153	96.1%	N D	246 256	96.1%
QPI 2(ii) Imaging	95	N D	18 18	100%	N D	30 31	96.8%	N D	49 50	98%	N D	132 144	91.7%	N D	229 243	94.2%
QPI 3 Multi-disciplinary Team Meeting (MDT)	95	N D	19 19	100%	N D	31 32	96.9%	N D	52 53	98.1%	N D	158 159	99.4%	N D	260 263	98.9%
QPI 4 Smoking Cessation	95	N D	5 6	83.3%	N D	12 14	85.7%	N D	25 25	100%	N D	54 66	81.8%	N D	86 111	77.5%
QPI 5(i) Oral and Dental Rehabilitation Plan	95	N D	13 15	86.7%	N D	23 24	95.8%	N D	28 32	87.5%	N D	97 127	76.4%	N D	161 198	81.3%
QPI 5(ii) Oral and Dental Rehabilitation Plan	95	N D	10 10	100%	N D	12 16	75.0%	N D	19 22	86.4%	N D	65 70	92.9%	N D	106 119	89.1%
QPI 6 Nutritional Screening	95	N D	19 20	95%	N D	25 33	75.8%	N D	44 55	80%	N D	160 170	94.1%	N D	248278	89.2%
QPI 7 Specialist Speech and Language Therapist Access	90	N D	0 9	0.0%	N D	18 21	85.7%	N D	12 37	32.4%	N D	66 99	66.7%	N D	96 166	57.8%
QPI 8 Surgical Margins - presented by hospital of surgery	<10	N D	0	N/A	N D	0 2	0.0%	N D	0 1	0.0%	N D	5 29	17.2%	N D	5 32	15.6%
QPI 9 Intensity Modulated Radiotherapy (IMRT)	95	N D	11 11	100%	N D	14 14	100%	N D	19 19	100%	N D	78 78	100%	N D	120 120	100%
QPI 10 Post Operative Chemoradiotherapy	55	N D	1 1	100%	N D	0 3	0.0%	N D	1 3	33.3%	N D	2 11	18.2%	N D	4 18	22.2%
QPI 11a 30 Day Mortality (surgery) presented by hospital of surgery	of <5	N D	0	N/A	N D	0 2	0.0%	N D	0 1	0.0%	N D	0 64	0.0%	N D	0 67	0.0%
QPI 11a 90 Day Mortality (surgery) presented by hospital of surgery	of <5	N D	0	N/A	N D	0 2	0.0%	N D	0	0.0%	N D	2 62	3.2%	N D	2 65	3.1%
QPI 11b 30 Day Mortality (radiotherapy)	<5	N D	0 1	0.0%	N D	0 5	0.0%	N D	0 10	0.0%	N D	1 24	4.2%	N D	1 40	2.5%
QPI 11b 90 Day Mortality (radiotherapy)	<5	N D	0 0	N/A	N D	0 4	0.0%	N D	0 9	0.0%	N D	1 22	4.5%	N D	1 35	2.9%

Head and Neck QPI Attainment Summary 2019-20 Targ	et%	Во	rders		D&	G		Fife)		Lo	thian		sc	AN	
QPI 11c 30 Day Mortality (chemoradiotherapy)	<5	N	0	0.0%	N	0	0.0%	N	0	0.0%	N	0	0.0%	N	0	0.0%
		D	8	0.070	D	6	0.070	D	13	0.070	D	35	0.070	D	62	0.0%
ODI 44a 00 Day Martality (aharrayadiatharan)	<5	N	0	0.0%	N	0	0.00/	N	0	0.0%	N	0	0.0%	N	0	0.0%
QPI 11c 90 Day Mortality (chemoradiotherapy)	\\\	D	8	0.0%	D	6	0.0%	D	11	0.0%	D	34	0.0%	D	59	0.0%
Clinical Trial QPI: N = patients consented to Trials and on	15	N	5	26.3%	N	7	20%	N	13	18.8%	N	37	19.3%	N	62	19.7%
SCRN database, D = 5 year average Cancer Registry Data	15	D 19	19	D	35	5 20%	D	69	10.8%	D	192	19.5%	D 3	315	19.7%	

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 2019 to 31 March 2020.

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	Campbell Wallis Martin Keith Jennifer Bruce		
NHS Fife Queen Margaret Hospital Victoria Hospital		Mr Justin Yeo	Mimi Bjelogrlic		
NHS Lothian &	Royal Infirmary of Edinburgh Western General Hospital St John's Hospital	Mr James Morrison	Fiona Gardiner		
30, 11	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 PHS. 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, Public Health Scotland (PHS) 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 PHS 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 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 Qualit	Short title of Quality Performance Indicator (for use in reports etc.)								
Description:	Full and clear desc	cription of the Quality Performance Indicator.								
Rationale and Evidence:	Description of the	evidence base and rationale which underpins this indicator.								
	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.								
Specifications:	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 le	evel 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 PHS (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 PHS 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 2014 to 2018. 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 01.04.2019 to 31.03.2020

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	20	33	55	170	278
Cancer Registry 5 Year Average	19	35	69	192	316
Case Ascertainment %	105.3%	94.3%	79.7%	88.5%	88.0%

Source: Scottish Cancer Registry, PHS. Data extracted from ACaDMe on 22/09/2020.

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.

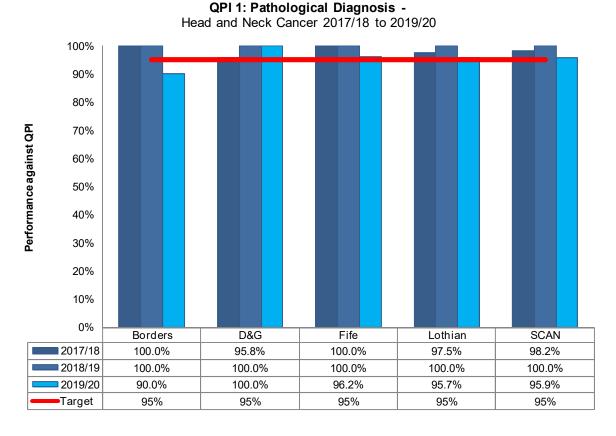
Denominator = All patients with head and neck cancer.

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

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	0	0	3	9	12
Numerator	18	33	50	154	255
	10		30	134	200
Not Recorded for the Numerator	0	0	U	0	Ü
Denominator	20	33	52	161	266
N (B)		•			
Not Recorded for Exclusion	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	90.0%	100.0%	96.2%	95.7%	95.9%

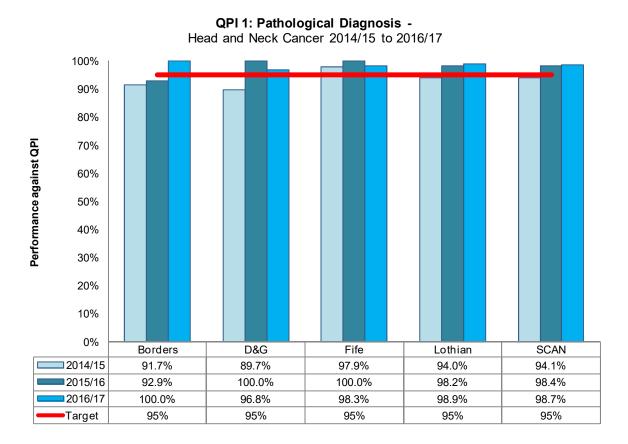
Comments where the QPI was not met

Borders: The target was not met showing a shortfall of 5.0% (2 cases). Both patients had pathology noted as 'highly suggestive for squamous cell carcinoma' and were considered at MDT to have evidence suggestive of incurable disease. Both patients were treated palliatively.



Action: No action identified. Patients were treated appropriately.

Following formal review after Year 3, QPI 1 was updated. Patients who die before first treatment or decline treatment were excluded. Year 4, Year 5 and Year 6 data is therefore not directly comparable with the first 3 years of data collection which are shown on the next chart.



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.

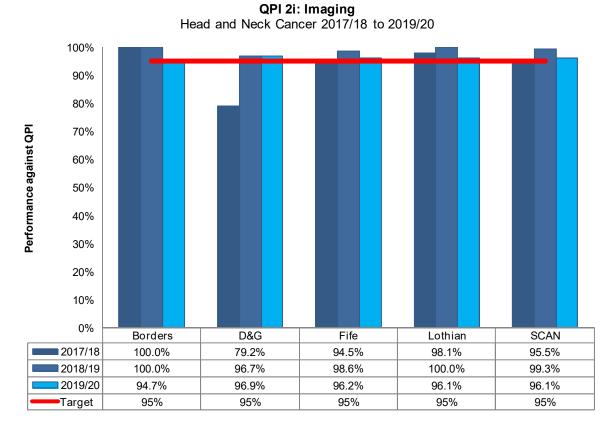
Denominator = All patients with head and neck cancer.

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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	1	1	3	17	22
Numerator	18	31	50	147	246
Not Recorded for Numerator	0	0	0	0	0
Denominator	19	32	52	153	256
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	94.7%	96.9%	96.2%	96.1%	96.1%

Comments where the QPI was not met

Borders: The target was not met showing a shortfall of 0.3% (1 case). The patient had a CT chest booked but not performed and was treated with Best Supportive Care.

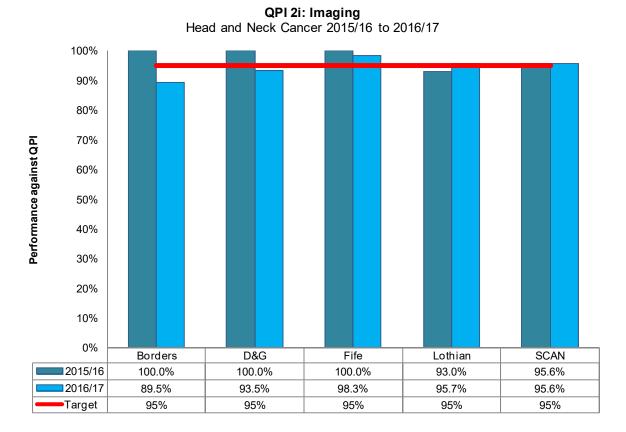


Action: No action identified.

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, Year 5 and Year 6 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 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.

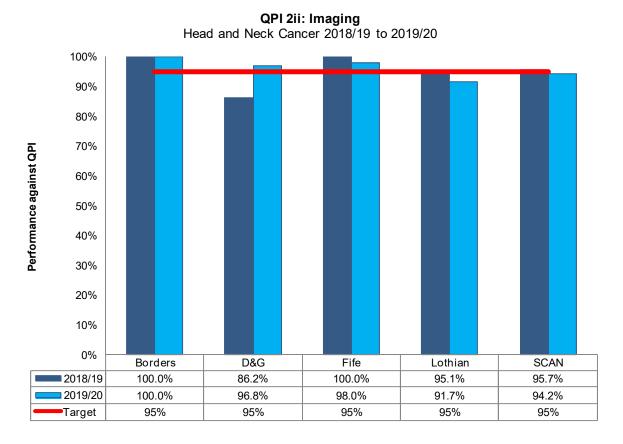
Denominator = All patients with head and neck cancer who undergo CT and/or MRI of the primary site and draining lymph nodes with CT of the chest before initiation of treatment.

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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	2	2	5	26	35
Numerator	18	30	49	132	229
Not Recorded for Numerator	0	0	0	0	0
Denominator	18	31	50	144	243
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	96.8%	98.0%	91.7%	94.2%

Comments where the QPI was not met

Lothian: The target was not met showing a shortfall of 3.3% (12 cases). The final imaging reports for these 12 patients were reported 15, 16 (3 patients), 17, 18 (2 patients), 19 (2 patients), 20, 23 and 28 days after being performed.



Action: SCAN lead to discuss results with Lothian Radiology.

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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	1	1	2	11	15
Numerator	19	31	52	158	260
Not Recorded for the Numerator	0	0	0	0	0
Denominator	19	32	53	159	263
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	0	0
% Performance	100.0%	96.9%	98.1%	99.4%	98.9%

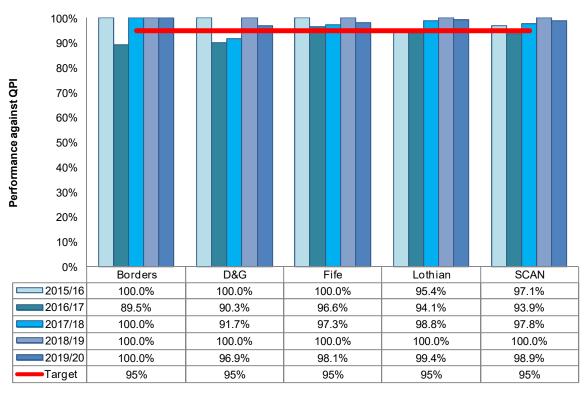
The target was met by all Boards

12 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow). Additionally 15 patients diagnosed in Fife were discussed in MDTs in NCA (Tayside). These patients are removed from the results in the table shown below in order to aid interpretation of the results.

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2019-20 Cohort	20	21	40	170	251
Ineligible for this QPI	1	0	1	11	12
Numerator	19	21	37	158	235
Not Recorded for the Numerator	0	0	0	0	0
Denominator	19	21	38	159	237
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	0	0
% Performance	100.0%	100.0%	97.4%	99.4%	99.1%

QPI 3: Multi-Disciplinary Team Meeting (MDT)

Head and Neck Cancer 2015/16 to 2019/20



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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	14	19	30	104	167
Numerator	5	12	25	54	86
Not Recorded for Numerator	0	0	0	10	10
Denominator	6	14	25	66	111
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	1	0	0	1
% Performance	66.7%	85.7%	100.0%	77.3%	77.5%

Comments where the QPI was not met

Borders: The target was not met showing a shortfall of 28.3% (1 case). This patient was not offered referral.

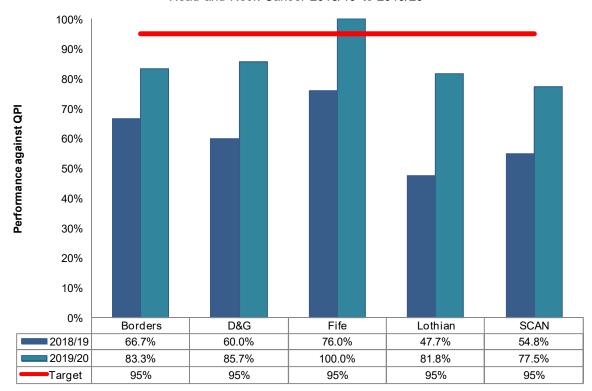
D&G: The target was not met showing a shortfall of 9.3% (2 cases). 1 patient was not offered referral and a further 1 patient was offered referral after the start of first treatment.

Lothian: The target was not met showing a shortfall of 17.7% (12 cases). 10 patients were not recorded for the numerator, as they were known smokers but it could not be established if the QPI criteria were met (7 patients were offered referral but the date of referral is unknown, and for a further 3 patients it was not recorded if they were offered referral). 1 further patient was offered referral after first treatment, and one additional patient had already stopped smoking between MDT referral and MDT discussion.

12 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow). Additionally 15 patients diagnosed in Fife were discussed in MDTs in NCA (Tayside). These patients are removed from the results in the table shown below in order to aid interpretation of the results.

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2019-20 Cohort	20	21	40	170	251
Ineligible for this QPI	14	12	21	104	151
Numerator	5	7	19	54	85
Not Recorded for the Numerator	0	0	0	10	10
Denominator	6	9	19	66	100
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	0	1
% Performance	66.7%	77.8%	100.0%	77.3%	85.0%

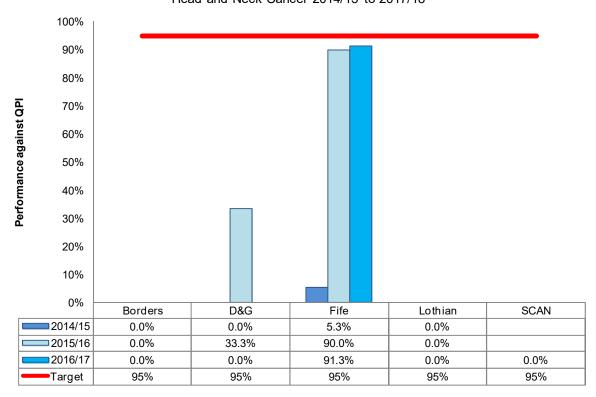
QPI 4: Smoking Cessation
Head and Neck Cancer 2018/19 to 2019/20



Action: Other SCAN boards to consider adopting the Fife model for smoking cessation referrals. To consider changing wording on MDT referral forms and standardisation to track referral offers. Investigate the possibility of a smoking cessation letter appearing on TRAK, with patient also sent a copy.

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. For Year 6 reporting the QPI was also amended to allow Best Supportive Care patients who are offered referral on the same day as treatment to pass this QPI.

QPI 4: Smoking Cessation Head and Neck Cancer 2014/15 to 2017/18



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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	5	9	23	43	80
Numerator	13	23	28	97	161
Not Recorded for Numerator	2	1	3	29	35
Denominator	15	24	32	127	198
Not Recorded for Exclusions	0	0	1	0	1
Not Recorded for Denominator	0	0	0	0	0
% Performance	86.7%	95.8%	87.5%	76.4%	81.3%

Comments where the QPI was not met

Borders: The target was not met showing a shortfall of 8.3% (2 cases). For these cases it was not recorded if pre-treatment dental assessment was required or not.

Fife: The target was not met showing a shortfall of 7.5% (4 cases). 3 cases were discussed outwith SCAN in Tayside and it was not recorded if pre-treatment dental assessment was required or not. 1 patient was not discussed at MDT.

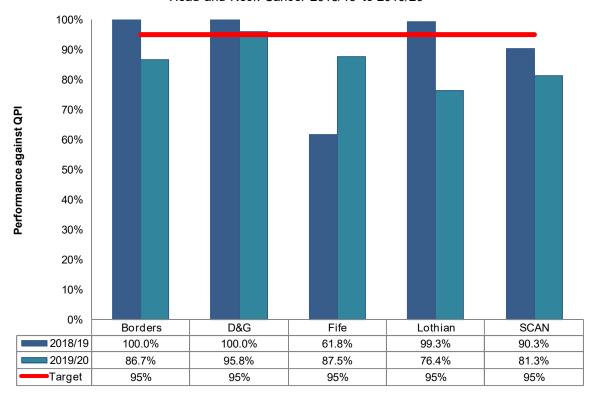
Lothian: The target was not met showing a shortfall of 18.6% (30 cases). For 29 patients it was not recorded if pre-treatment dental assessment was required or not, and 1 patient died shortly prior to MDT.

12 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow). Additionally 15 patients diagnosed in Fife were discussed in MDTs in NCA (Tayside). These patients are removed from the results in the table shown below in order to aid interpretation of the results.

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2019-20 Cohort	20	21	40	170	251
Ineligible for this QPI	5	7	18	43	73
Numerator	13	13	21	97	144
Not Recorded for the Numerator	2	1	1	29	33
Denominator	15	14	22	127	178
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	0	0
% Performance	86.7%	92.9%	95.5%	76.4%	80.9%

QPI 5 (i): Oral and Dental Rehabilitation Plan

Head and Neck Cancer 2018/19 to 2019/20



Action: Audit and Dental staff in Lothian to implement change in recording process to ensure decision for/not for dental assessment is recorded.

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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	7	16	15	57	95
Numerator	10	12	19	65	106
Not Recorded for Numerator	0	1	2	2	5
Denominator	10	16	22	70	119
Not Recorded for Exclusions	0	0	0	2	2
Not Recorded for Denominator	3	1	18	43	65
% Performance	100.0%	75.0%	86.4%	92.9%	89.1%

Comments where the QPI was not met

D&G: The target was not met showing a shortfall of 20.0% (4 cases). 2 patients were not assessed (1 received a total laryngectomy and adjuvant radiotherapy, and 1 received no active treatment), 1 patient was assessed after first treatment (discussed and treated outwith SCAN), and for one patient the exact date of dental assessment was not recorded (discussed and treated outwith SCAN).

Fife: The target was not met showing a shortfall of 8.6% (3 cases). For 2 patients the exact date of dental assessment was not recorded (1 of these patients was assessed and treated outwith SCAN), and one patient was not assessed.

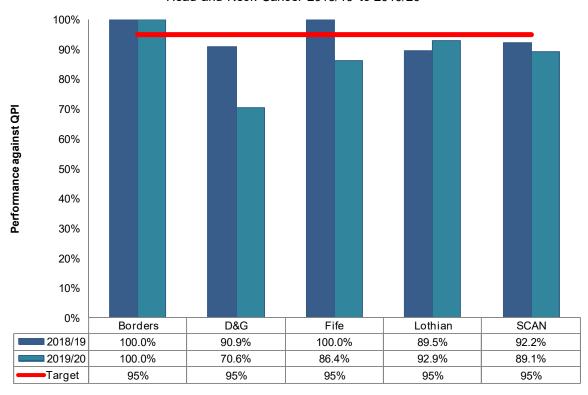
Lothian: The target was not met showing a shortfall of 2.1% (5 cases). For 3 patients a dental assessment was not performed (1 patient declined all therapies, and 1 patient was originally planned to receive surgery but was subsequently deemed unresectable). For 2 patients the exact date of dental assessment was not recorded.

12 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow). Additionally 15 patients diagnosed in Fife were discussed in MDTs in NCA (Tayside). These patients are removed from the results in the table shown below in order to aid interpretation of the results for SCAN.

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2019-20 Cohort	20	21	40	170	251
Ineligible for this QPI	7	9	8	57	81
Numerator	10	9	19	65	103
Not Recorded for the Numerator	0	0	1	2	3
Denominator	10	11	21	70	112
Not Recorded for Exclusions	0	0	0	2	2
Not Recorded for the Denominator	3	1	11	43	58
% Performance	100.0%	81.8%	90.5%	92.9%	92.0%

QPI 5 (ii): Oral and Dental Rehabiliation Plan

Head and Neck Cancer 2018/19 to 2019/20



Action: No action identified.

Patients identified in QPI 5i as not recorded for the numerator, i.e., those for whom it was not recorded if pre-treatment dental assessment was required or not, will automatically be excluded from the denominator in QPI 5ii. This highlights the need for improving recording of the decision if a patient requires dental assessment or not.

Lothian and Borders patients who were identified by QPI5 as not having had it recorded if pre-treatment dental assessment was required or not, and not excluding those that did not have active treatment, were reviewed. 6 of these patients who were not dentally assessed were identified as a potential clinical risk.

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.

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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	0	0	0	0	0
	1				
Numerator	19	25	44	160	248
Not Recorded for Numerator	0	0	11	0	11
Denominator	20	33	55	170	278
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	95.0%	75.8%	80.0%	94.1%	89.2%

Comments where the QPI was not met

D&G: The target was not met showing a shortfall of 19.2% (8 cases). For 7 patients MUST screening was not done (3 were palliative patients), and 1 patient declined assessment.

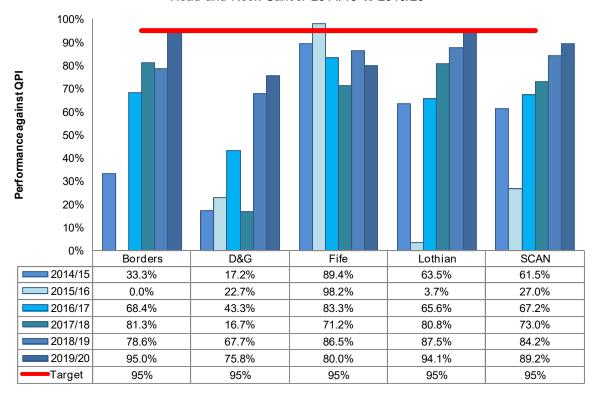
Fife: The target was not met showing a shortfall of 15.0% (11 cases). For 11 patients MUST screening was not performed (8 of these patients were for Best Supportive Care, and 1 patient declined surgery). A further 2 patients were not discussed at MDM (1 patient had a wedge excision to the lip, and 1 patient died before treatment.

Lothian: The target was not met showing a shortfall of 0.9% (10 cases). For 8 of these patients MUST screening was performed after the start of first treatment (of these, 2 patients did not attend first MDT clinic and were for Best Supportive Care). 2 patients did not have MUST screening performed.

12 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow). Additionally 15 patients diagnosed in Fife were discussed in MDTs in NCA (Tayside). These patients are removed from the results in the table shown below in order to aid interpretation of the results.

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2019-20 Cohort	20	21	40	170	251
Ineligible for this QPI	0	0	0	0	0
Numerator	19	15	34	160	228
Not Recorded for the Numerator	0	0	6	0	6
Denominator	20	21	40	170	251
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	0	0
% Performance	95.0%	71.4%	85.0%	94.1%	90.1%

QPI 6: Nutritional Screening Head and Neck Cancer 2014/15 to 2019/20



Action: To consider the addition of a second part to this QPI to assess if appropriate referrals are being made.

Comment: Lothian and Borders MUST scoring improved during 2019/20 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.

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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	11	12	18	71	112
	_				
Numerator	0	18	12	66	96
Not Recorded for Numerator	0	0	0	0	0
Denominator	9	21	37	99	166
	ı				
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	0.0%	85.7%	32.4%	66.7%	57.8%

Comments where the QPI was not met

Borders: The target was not met showing a shortfall of 90.0% (9 cases). All 9 patients were not assessed by SLT prior to treatment.

D&G: The target was not met showing a shortfall of 4.3% (3 cases). All 3 patients were not assessed by SLT prior to treatment (1 patient was referred after treatment had started, 1 patient was treated by laser only, 1 patient had lip cancer so did not require assessment)

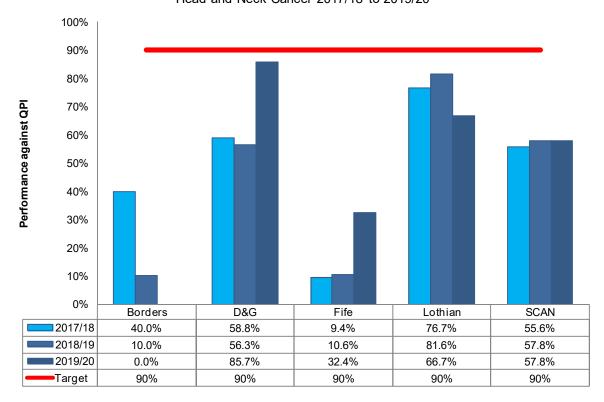
Fife: The target was not met showing a shortfall of 57.6% (25 cases). Of these 25 patients, were seen by SLT shortly after treatment start (14 patients seen in Lothian and 1 patient in Tayside; from treatment start date to SLT assessment, the median was 4 days), 10 patients were not assessed.

Lothian: The target was not met showing a shortfall of 23.3% (33 cases). Of these 33 patients who were not seen by SLT prior to treatment, 19 were surgically treated with wide local excision, 6 patients were treated with radical radiotherapy, 2 patients were diagnosed in Lothian but were resident in the Borders so were not seen by Lothian SLT, 2 patients did not attend the assessment (1 of these patients had double booked appointments), 1 patient assessment was missed due to staffing issues. 1 patient had a nasopharyngeal tumour so did not require assessment and 1 patient was treated with chemoradiotherapy but was not assessed.

12 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow). Additionally 15 patients diagnosed in Fife were discussed in MDTs in NCA (Tayside). These patients are removed from the results in the table shown below in order to aid interpretation of the results.

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2019-20 Cohort	20	21	40	170	251
Ineligible for this QPI	11	8	12	71	102
	1				
Numerator	0	12	11	66	89
Not Recorded for Numerator	0	0	0	0	0
Denominator	9	13	28	99	149
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	0.0%	92.3%	39.3%	66.7%	59.7%

QPI 7: Specialist Speech and Language Therapist Access
Head and Neck Cancer 2017/18 to 2019/20



Action: NHS Fife has implemented a joint SLT and dietetics clinic, which is expected to improve QPI results. NHS Lothian and NHS Borders leads to meet with SLT, with the aim of enabling Borders patients to be assessed in Lothian prior to treatment.

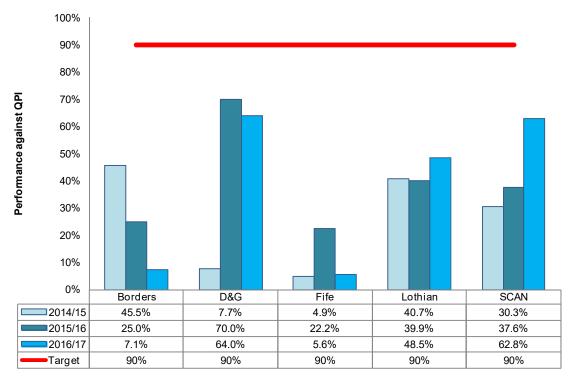
Comment: Following receipt of funding and recruitment in November 2019, Fife SLT service was able to commence input to patient's pre-treatment, resulting in the percentage increase over the last 4 months of the 2019/20 reporting period.

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 Lauguage Therapist Access

Head and Neck Cancer 2014/15 to 2016/17



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 (New Royal Infirmary)	Fife (Victoria Hospital)	Lothian (St Johns)	SCAN
Numerator	0	0	0	5	5
Not Recorded for Numerator	0	0	0	0	0
Denominator	0	2	1	29	32
Not Decembed for Evolucions				•	
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	N/A	0.0%	0.0%	17.2%	15.6%

⁸ patients from D+G were treated in Glasgow, and will appear in the WoSCAN report.

⁹ patients from Fife were treated in Tayside and will appear in the NCA report.

% Performance in previous	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%
2018/19	N/A	0.0%	N/A	4.9%	4.8%

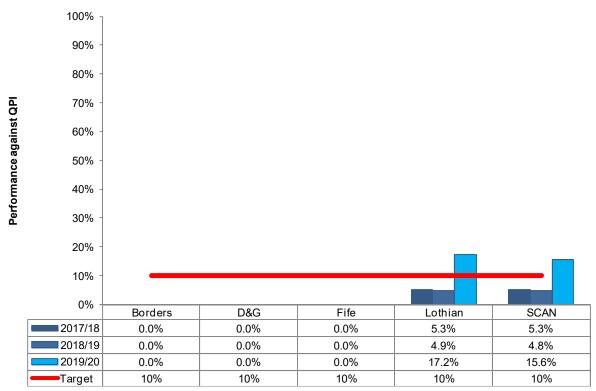
QPI 8 was not reported for Year 1 (2014/15)

Comments where the QPI was not met

Lothian: The target was not met showing a shortfall of 7.2% (5 cases). All 5 patients (4 Lothian patients and 1 Fife patient) were treated at St. Johns Hospital for squamous cell carcinomas.

The 2 patients who underwent Surgery in D&G were discussed and managed in the WoSCAN MDT

QPI 8: Surgical Margins Head and Neck Cancer 2017/18 to 2019/20



Action: All Lothian patients were reviewed and some complex cases were identified. No further action identified.

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 naso-pharynx). 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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	10	19	36	93	158
	I				
Numerator	10	14	19	77	120
Not Recorded for Numerator	0	0	0	0	0
Denominator	10	14	19	77	120
	I				
Not Recorded for Exclusions	0	0	0	7	7
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

12 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow).

15 patients diagnosed in Fife were discussed in MDTs in NCA (Tayside). These patients are removed from the results in the table shown below in order to aid interpretation of the results.

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2019-20 Cohort	20	21	40	170	251
Ineligible for this QPI	10	10	21	93	134
	I				
Numerator	10	11	19	77	117
Not Recorded for Numerator	0	0	0	0	0
Denominator	10	11	19	77	117
Not Recorded for Exclusions	0	0	0	7	7
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	100.0%	100.0%	100.0%	100.0%

QPI 9: Intensity Modulated Radiotherapy (IMRT)

Head and Neck Cancer 2015/16 to 2019/20



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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	19	30	52	159	260
Newscarton					
Numerator	1	0	1	2	4
Not Recorded for Numerator	0	0	0	0	0
Denominator	1	3	3	11	18
Not Recorded for Exclusions	0	1	0	2	3
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	0.0%	33.3%	18.2%	22.2%

Comments where the QPI was not met

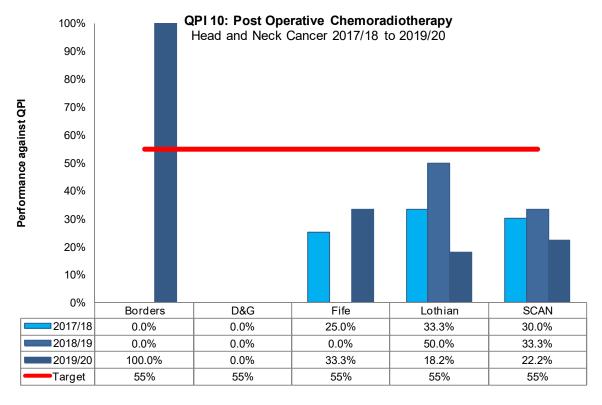
D&G: The target was not met showing a shortfall of 55.0% (3 cases). All 3 patients received initial treatment outwith SCAN. Adjuvant treatment was also given in WOSCAN. 1 patient was not fit for chemotherapy and received only adjuvant radiotherapy, 1 patient was moved onto palliative treatment, and 1 patient had synchronous primaries, radiotherapy was only given to separate pathology in the neck.

Fife: The target was not met showing a shortfall of 21.7% (2 cases). 1 patient had been previously treated with chemoradiotherapy >10 years previously and 1 patient had prolonged recovery after surgery and missed the window of opportunity for radiotherapy.

Lothian: The target was not met showing a shortfall of 36.8% (9 cases). Of these 9 patients, 3 had comorbidities and were not fit for chemotherapy, 2 patients were not fit for chemotherapy at the point of adjuvant treatment (both previously were PS0/1 prior to surgery), for 2 patients chemotherapy was not indicated and for 2 patients a clinical decision for no adjuvant therapy was made (both had laser treatment of vocal cord lesions).

12 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow).
15 patients diagnosed in Fife were discussed in MDTs in NCA (Tayside). These patients are removed from the results in the table shown below in order to aid interpretation of the results.

Target 55%	Borders	D&G	Fife	Lothian	SCAN
2019-20 Cohort	20	21	40	170	251
Ineligible for this QPI	19	21	38	159	237
Numerator	1	0	1	2	4
Not Recorded for Numerator	0	0	0	0	0
Denominator	1	0	2	11	14
Not Recorded for Exclusions	0	0	0	2	3
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	0.0%	50.0%	18.2%	28.6%



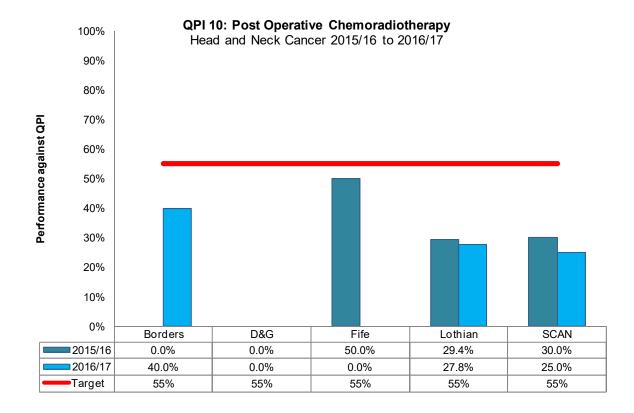
Reason for patients not receiving	Borders	D&G	Fife	Lothian	SCAN
Patient not fit for chemo (includes advanced age)	0	0	0	2	2
Patient comorbidities	0	0	0	3	3
Patient died prior to adjuvant treatment	0	0	0	0	0
Patient treated palliatively	0	0	0	0	0
Clinical decision for no adjuvant treatment	0	0	2	4	6
Patient declined treatment	0	0	0	0	0
Patient treated outwith SCAN	0	3	0	0	3
Totals	0	3	2	9	14

Comment: Currently performance status is collected at the time of diagnosis and is used as an exclusion in this QPI, but post-op performance status is more indicative for this treatment modality.

Action: Consider recording post-op performance status for use in this QPI, and reporting by Board of Treatment.

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).



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 (New Royal Infirmary)	Fife (Victoria Hospital)	Western General	St Johns	Lothian Total	SCAN
Numerator	0	0	0	0	0	0	0
Not Recorded for Numerator Denominator	0	0 2	0	0	0 63	0 64	0 67
			•	<u> </u>	- 00	01	01
Not Recorded for Exclusions	0	0	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0	0	0
% Performance	N/A	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

⁸ patients from D+G were treated in Glasgow, and will appear in the WOSCAN report.

⁹ patients from Fife were treated in Tayside and will appear in the NCA report.

% Performance in	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	N/A	0.0%	N/A	0.0%	0.0%
2018/19	N/A	0.0%	N/A	0.0%	0.0%

All Boards reporting data met this QPI

The 2 patients who underwent Surgery in D&G were discussed and managed in the WoSCAN MDT

90 day Mortality (Surgery)

Target <5%	Borders	D&G (New Royal Infirmary)	Fife (Victoria Hospital)	Western General	St Johns	Lothian Total	SCAN
Numerator	0	0	0	0	2	2	2
Not Recorded for Numerator	0	0	0	0	0	0	0
Denominator	0	2	1	1	61	62	65
Not Recorded for Exclusions	0	0	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0	0	0
% Performance	N/A	0.0%	0.0%	0.0%	3.3%	3.2%	3.1%

⁸ patients from D+G were treated in Glasgow, and will appear in the WOSCAN report.

⁹ patients from Fife were treated in Tayside and will appear in the NCA report.

% Performance in	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%	3.2%	3.1%
2017/18	N/A	0.0%	N/A	3.2%	3.2%
2018/19	N/A	0.0%	N/A	0.0%	0.0%

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

NHS Lothian: 90 days since treatment had not been reached by 2 patients

The 2 patients who underwent Surgery in D&G were discussed and managed in the WoSCAN MDT

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

Target <5%

2016/17

2017/18

2018/19

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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	19	28	45	146	239
Numerator	0	0	0	1	1
Not Recorded for Numerator	0	0	0	0	0
Denominator	1	5	10	24	40
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%	4.2%	2.5%
% 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%

0.0%

0.0%

N/A

0.0%

0.0%

0.0%

0.0%

6.3%

6.3%

0.0%

3.6%

4.2%

0.0%

0.0%

0.0%

All Boards reporting data met this QPI

90 day Mortality (Radiotherapy)

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	19	29	45	146	239
Numerator	0	0	0	1	1
Not Recorded for Numerator	0	0	0	0	0
Denominator	0	4	9	22	35
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	N/A	0.0%	0.0%	4.5%	2.9%
% 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%
2018/19	0.0%	N/A	0.0%	6.3%	4.3%

¹ patient from D+G was treated outwith SCAN in WoSCAN.

All Boards reporting data met this QPI

NHS Borders, Dumfries and Fife: 90 days since treatment not reached by 1 patient **NHS Lothian:** 90 days since treatment not reached by 2 patients

¹ patient from D+G was treated outwith SCAN in WoSCAN.

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

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
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	12	27	42	135	216
Numerator	0	0	0	0	0
Not Recorded for Numerator	0	0	0	0	0
Denominator	8	6	13	35	62
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%	0.0%	0.0%
% 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%
2018/19	0.0%	0.0%	0.0%	1.7%	1.1%

All Boards reporting data met this QPI

90 day mortality (Chemoradiotherapy)

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2019-20 Cohort	20	33	55	170	278
Ineligible for this QPI	12	27	42	135	219
	I .				
Numerator	0	0	0	0	0
Not Recorded for Numerator	0	0	0	0	0
Denominator	8	6	11	34	59
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%	0.0%	0.0%
% 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%
2018/19	0.0%	0.0%	0.0%	3.6%	2.3%

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

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

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 and Cancer Registry data (5 year average of case ascertainment 2014-2018)

Target 15%	Borders	D&G	Fife	Lothian	SCAN
Numerator	5	7	13	37	62
Denominator	19	35	69	192	315
% Performance	26.3%	20.0%	18.8%	19.3%	19.7%

Open Trials	Trial Type	Numbers Recruited
CompARE	Interventional	11
DARS	Interventional	0
DOM-INATE	Interventional	15
SR1171 (Circulating DNA)	Translational	52
PATHOS	Interventional	1

All Boards reporting data met this QPI

% Performance in previous years	Borders	D&G	Fife	Lothian	SCAN
2017/18	16.7%	0.0%	4.6%	6.3%	5.8%
2018/19	5.3%	5.6%	4.5%	11.9%	9.3%

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		M	ale	Female		
Borders	20	14	70.0%	6	30.0%	
D&G	33	23	69.7%	10	30.3%	
Fife	55	42	76.4%	13	23.6%	
Lothian	170	110	64.7%	60	35.3%	
SCAN	278	189	68.0%	89	32.0%	

Table 2: Age at Diagnosis

Age		Borders		D&G		Fife	L	othian		SCAN
<45	2	10.0%	4	12.1%	2	3.6%	7	4.1%	15	5.4%
45-49	2	10.0%	2	6.1%	4	7.2%	6	3.5%	14	5.0%
50-54	3	15.0%	3	9.1%	5	9.1%	20	11.8%	31	11.2%
55-59	6	30.0%	3	9.1%	10	18.2%	20	11.8%	39	14.0%
60-64	1	5.0%	3	9.1%	4	7.2%	31	18.2%	39	14.0%
65-69	0	0.0%	4	12.1%	7	12.7%	33	19.4%	44	15.1%
70-74	2	10.0%	5	15.2%	6	10.9%	22	12.9%	35	12.6%
75-79	2	10.0%	6	18.2%	11	20.0%	17	10.0%	36	12.9%
80-84	1	5.0%	3	9.1%	2	3.6%	9	5.3%	15	5.4%
85+	1	5.0%	0	0.0%	4	7.2%	8	4.7%	13	4.7%
Total	20	100%	33	100.0%	55	100.0%	170	100.0%	278	100.0%

Table 3: Tumour Site

N=All patients diagnosed

Site of Tumour	В	orders	[D&G		Fife	Lo	othian	S	CAN
Larynx	1	5.0%	6	18.2%	15	27.3%	33	19.4%	55	19.8%
Oral Cavity	1	5.0%	9	27.3%	16	29.1%	43	25.3%	69	24.8%
Major Salivary Glands	1	5.0%	2	6.1%	1	1.8%	8	4.7%	12	4.3%
Oropharynx	13	65.0%	12	36.4%	17	30.9%	66	38.8%	108	38.8%
Nasopharynx	0	0.0%	0	0.0%	1	1.8%	3	1.8%	4	1.4%
Hypopharynx	3	15.0%	4	12.1%	4	7.3%	12	7.1%	23	8.3%
Nasal Cavity & Middle Ear	1	5.0%	0	0.0%	1	1.8%	3	1.8%	5	1.8%
Accessory Sinuses	0	0.0%	0	0.0%	0	0.0%	1	0.6%	1	0.4%
Bones	0	0.0%	0	0.0%	0	0.0%	1	0.6%	1	0.4%
III Defined Sites	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Total	20	100.0%	33	100.0%	55	100.0%	170	100.0%	278	100.0%

QPI Attainment Summary Years 4-5		Boro	ders	D	&G	Fi	fe	Lothian		SCAN		
Target %			Yr4	Yr5	Yr4	Yr5	Yr4	Yr5	Yr4	Yr5	Yr4	Yr5
QPI 1: Pathological Diagnosis of Head and Cancer	Neck	95	100.0	100.0	95.8	100.0	100.0	100.0	97.5	100.0	98.2	100.0
QPI 2(i): Imaging		95	100.0	100.0	79.2	96.7	94.5	98.6	98.1	100.0	95.5	99.3
QPI 2(ii) : Imaging		95		100.0		86.2		100.0		95.1		95.7
QPI 3: Multi-disciplinary Team Meeting (MD	T)	95	100.0	100.0	91.7	100.0	97.3	100.0	98.8	100.0	97.8	100.0
QPI 4: Smoking Cessation		95		66.7		60.0		76.0		47.7		54.8
QPI 5(i): Oral and Dental Rehabilitation Pla	n	95		100.0		100.0		61.8		99.3		90.3
QPI 5(ii) : Oral and Dental Rehabilitation Plan		95		100.0		90.9		100.0		89.5		92.2
QPI 6 : Nutritional Screening		95	81.3	78.6	16.7	67.7	71.2	86.5	80.8	87.5	73.0	84.2
QPI 7 : Specialist Speech and Language Th Access	erapist	90	40.0	10.0	58.8	56.3	9.4	10.6	76.2	81.6	55.6	57.8
QPI 8 : Surgical Margins by Hospital of Surg	gery	<10	N/A	N/A	N/A	0.0	N/A	N/A	5.3	4.9	5.3	4.8
QPI 9 : Intensity Modulated Radiotherapy (I	MRT)	95	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
QPI 10 : Post Operative Chemoradiotherap	У	55	N/A	N/A	0.0	0.0	25.0	0.0	33.3	50.0	30.0	33.3
QPI 11a: Mortality following surgery	30 day	<5	N/A	N/A	0.0	0.0	N/A	N/A	0.0	0.0	0.0	0.0
(presented by Board of surgery)	90 day	<5	N/A	N/A	0.0	0.0	N/A	N/A	3.2	0.0	3.2	0.0
ODI 44 h. Mantalitu fallavina Dadiatharan	30 day	<5	0.0	0.0	0.0	N/A	0.0	0.0	6.3	6.3	3.6	4.2
QPI 11b: Mortality following Radiotherapy	90 day	<5	0.0	0.0	0.0	N/A	0.0	0.0	6.3	6.3	3.6	4.3
QPI 11c: Mortality following	30 day	<5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.7	0.0	1.1
Chemoradiotherapy	90 day	<5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.6	0.0	2.3
QPI 12: Clinical Trials		15	16.7	5.3	0.0	5.6	4.6	4.5	6.3	11.9	5.8	9.3

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				Borders			D&G			Fife			Lothian			SCAN		
Target %			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 (presented 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 surge		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
	ery)	90 day	<5	-	-	0.0%	-	-	0.0	-	-	0.0	-	0.0	3.2	-	0.0	3.1
QPI 11b: Mortality following		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
Radiotherapy		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		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
Chemoradiotherapy		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