



Working regionally to improve cancer services

SOUTH EAST SCOTLAND CANCER NETWORK PROSPECTIVE CANCER AUDIT

HEAD AND NECK CANCER 2020 – 2021 Quality Performance Indicators (QPI) Comparative Report

Mr J Morrison, NHS Lothian, SCAN Group Chair Mr E Carr, NHS Borders Ms M Botma, NHS Dumfries & Galloway Mr J Yeo, NHS Fife Dr J Mackenzie, Clinical Oncologist, NHS Lothian

Fiona Gardiner SCAN Head and Neck Cancer Audit Facilitator

Campbell Wallis, Cancer Audit Facilitator, NHS Dumfries & Galloway Jennifer Bruce, Senior Analyst, NHS Dumfries & Galloway Mimi Bjelogrlic, Cancer Audit Facilitator, NHS Fife

SCAN Report Index Number: SA HN01/22w

HEAD AND NECK CANCER 2020-21 COMPARATIVE AUDIT REPORT

Patients diagnosed 1 April 2020 – 31 March 2021

Contents

| DOCUMENT HISTORY | 3 |
|--|----|
| Comment by Chair of the SCAN Head and Neck Group | 3 |
| ACTION POINTS | |
| Introduction and Methods | 8 |
| Dataset and Definitions | g |
| Data Quality | |
| Estimated Case Ascertainment | |
| Actions for Improvement | |
| DIAGNOSIS AND STAGING | |
| QPI 1: Pathological Diagnosis of Head and Neck Cancer | |
| QPI 2: Imaging Specification (i) | 13 |
| QPI 2: Imaging Specification (ii) | 14 |
| QPI 3: Multi-disciplinary Team Meeting (MDT) | 16 |
| TREATMENT | 18 |
| QPI 4: Smoking Cessation | 18 |
| QPI 5: Oral and Dental Rehabilitation Plan Specification (i) | 20 |
| QPI 5: Oral and Dental Rehabilitation Plan Specification (ii) | 22 |
| QPI 6: Nutritional Screening | |
| QPI 7: Specialist Speech and Language Therapist Access | 26 |
| QPI 8: Surgical Margins – Reported by Hospital of Surgery | |
| QPI 9: Intensity Modulated Radiotherapy (IMRT) | |
| QPI 10: Post Operative Chemoradiotherapy | |
| TREATMENT OUTCOMES | |
| QPI 11a: Mortality (Surgery) – Reported by Hospital of Surgery | 36 |
| 30 day Mortality (surgery) | |
| 90 day Mortality (Surgery) | |
| QPI 11b: Mortality after Radiotherapy – Reported by Hospital of Diagnosis | 38 |
| 30 day Mortality (Radiotherapy) | |
| 90 day Mortality (Radiotherapy) | |
| QPI 11c: Mortality Following Chemoradiotherapy – Reported by Hospital of Diagnosis | |
| 30 day mortality (Chemoradiotherapy) | |
| 90 day mortality (Chemoradiotherapy) | |
| QPI 12: Clinical Trials | |
| KEY CATEGORIES | |
| QPI Attainment Summary Year 6 | 44 |

DOCUMENT HISTORY

| Version | Circulation | Date | Comments |
|---------------|--|------------|--|
| Version 1 | Lead Clinicians' Sign off Group | 18/11/2021 | Circulated in advance of the Leads meeting |
| Version 2 | SCAN Head and Neck Lead Clinicians | 25/11/2021 | Action points and Lead Clinician's comments added |
| Version3 | SCAN Head and Neck Group | 07/02/2022 | For final comment from SCAN Group (Chairs clinical commentary to be added) |
| Final Version | SCAN Audit Reporting Framework | 22/03/2022 | Circulation to SCAN Group and Clinical Governance Group |
| Web Version | Published to SCAN Website | 2022 | Disclosure checks performed |

Comment by Chair of the SCAN Head and Neck Group

Due to the COVID pandemic, the year April 2020 to March 2021 has seen unprecedented pressures on our healthcare system and our ability to maintain the regional head and neck cancer service.

While some of the QPIs remain challenging, there has been considerable incremental improvement over recent years. Robust plans have been developed to consolidate these gains and to improve performance moving forward.

The diagnostic and MDT components of the patients' pathway continue to perform strongly against the QPI standards. This is despite significant pressure in both the pathology and radiology services.

The mortality associated with surgical and oncological management of head and neck cancer remains low and performs well against the QPI targets.

It is worthy of note that the SCAN Head and Neck cancer group continues to perform exceptionally well in the recruitment of patients into clinical trials. This is important for our patients because those who are treated in centres with a strong record of research tend to have better outcomes.

Performance in QPI 4 (smoking cessation) has remained stubbornly around the 75% mark despite incremental improvements in recording. The QPI previously had no exclusions and so included patients that were on a best supportive care pathway. This QPI was subject to formal review in November 2021 and updated to exclude these patients. It will be interesting to see if this change results in improved performance in the next report.

Attempts at improving the performance in QPI 5 (oral and dental rehabilitation) have been beset with recording issues as well as a single handed restorative dentistry consultant practice. A business case was raised by the dental team and I am pleased to report that a new consultant in restorative dentistry has been appointed and commenced in January 2022. This appointment will result in increased capacity to treat patients and enable prospective cover for

the MDT. There continues to be recording and visibility issues for the audit team. I continue to engage with the audit and dental teams to improve the recording of which patients require a dental assessment prior to management of the head and neck cancer and those who receive it.

The performance in QPI 6 (nutritional screening) has improved markedly over recent years and is close to achieving the target. There are recording issues within NHS Fife which are being addressed and it is hoped this will improve the SCAN performance in this QPI moving forward.

QPI 7 (speech and language therapy) has posed the greatest H&N QPI challenge across the health boards in SCAN since the inception of the QPIs. Significant strides have been made in recent years, most notably in NHS Fife. Following on from this, I am delighted to report that the NHS Lothian Speech and Language Therapy team were successful in a bid for funding from the Scottish Government National Cancer Plan. This newly funded post has been successfully recruited in NHS Lothian and the appointee has recently commenced in post. The NHS Lothian SLT team continue to engage with NHS Borders to help support the provision of a sustainable regional head and neck SLT service. I would anticipate a sustained improvement in performance of this QPI over the coming years.

A review of the QPIs was completed in November 2021. This formal review updated, archived and introduced new QPIs.

QPIs 9 (Intensity Modulated Radiotherapy) and 10 (Post operative chemoradiotherapy) have been archived.

QPIs in mortality following SACT (QPI 13), time from surgery to radiotherapy (QPI 14) and PD-L1 status for decision making (QPI 15) are new QPIs which have been added following the formal review completed in November 2021. These reflect QPIs against standard care as well as the evolving novel management of head and neck cancer.

In summary, despite a very difficult year for patients and colleagues alike, I am pleased to report the Head and Neck cancer services within the SCAN region have either consolidated or improved their performance against all of the QPI standards. There have been crucial appointments in Speech and Language Therapy and Restorative Dentistry. I am optimistic that there will be sustained improvement in the performance of these QPIs which, until now, have been the most challenging.

Mr James Morrison Chair SCAN Head and Neck Cancer Group February 2022

ACTION POINTS

QPI Action Plans from 2020/21

| QPI | Action required | Person Responsible | Date for update |
|---------|--|--------------------|----------------------------------|
| QPI 4 | Improvements noted year on year in Lothian and Borders, and will also improve next year with the QPI amendment following formal review. The possibility of a smoking cessation referral letter appearing on Trak is still however to be explored | Jim Morrison | Next SCAN group meeting |
| QPI5i | Audit and Dental staff in Lothian to implement change in recording process to ensure decision for/not for dental assessment is recorded. | Fiona Gardiner | Next SCAN group meeting |
| QPI5ii | Small number of patients not meeting the numerator. No action required | N/A | N/A |
| QPI6 | This QPIs results continue to improve year on year. Fife patients not attending their first MDT discussion in Lothian noted to generally miss screening. Fife lead to be made aware | Mimi Bjelogrlic | N/A |
| QPI 7 | Central funding has been secured by SLT and more staff should improve performance in this QPI. No action required | N/A | N/A |
| QPI 10 | All patients treated appropriately. No action identified | N/A | N/A |
| QPI 11b | All deaths reviewed. No action identified | N/A | N/A |

QPI Action Points from 2019/20

| QPI | Action required | Progress/Action Status | Status |
|---------|--|---|--------|
| QPI 2ii | SCAN Lead to discuss results with Radiology | Radiology acknowledged problems with reporting backlogs over this period. Since then a Neuro H+N radiology consultant and a part time Neuro consultant has been appointed to improve the resilience of the service. The issue not expected to impact future patients. | 1 |
| QPI 4 | Wording on H+N MDT referral form to be changed to improve the recording of smoking cessation referrals | NHS-Lothian Referral form updated and circulated | 1 |
| | Explore the possibility of a smoking cessation referral letter appearing on Trak | In progress | 3 |
| QPI 5i | Improve recording process of dental assessment decisions in NHS Lothian | In progress | 3 |
| QPI 6 | Consideration of second part of this QPI | Proposals submitted at formal review | 1 |

| QPI | Action required | Progress/Action Status | Status |
|--------|---|--|--------|
| QPI 7 | There an SBAR in process outlining the requirements for additional resource in Borders and Lothian. Lothian and Borders leads to meet with the aim of enabling Borders patients to be assessed prior to treatment | NHS Lothian – SBAR in progress | 1 |
| QPI 8 | Lothian cases to be reviewed | Cases reviewed and complex cases noted. No further action identified | 1 |
| QPI 10 | Consideration of an amendment to the QPI to exclude by performance status prior to adjuvant treatment | Proposals submitted at formal review | 1 |

| Head and Neck QPI Attainment Summary 2020-21 | Target% | Bo | rders | | D& | G | | Fife |) | | Lo | thian | | SC | AN | |
|---|---------|--------|----------|-------|--------|----------|-------|--------|----------|-------|--------|------------|-------|--------|------------|-------|
| QPI 1 Pathological Diagnosis of Head and Neck Cancer | 95 | N D | 16 16 | 100% | N D | 42 44 | 95.5% | N D | 57 59 | 96.6% | N D | 161 167 | 96.4% | N D | 276 286 | 96.5% |
| QPI 2(i) Imaging | 95 | N D | 16 16 | 100% | N D | 41 43 | 95.3% | N D | 56 58 | 96.6% | N D | 155 161 | 96.3% | N D | 268 278 | 96.4% |
| QPI 2(ii) Imaging | 95 | N D | 16 16 | 100% | N D | 40 41 | 97.6% | N D | 56 56 | 100% | N D | 150 150 | 100% | N D | 262 263 | 99.6% |
| QPI 3 Multi-disciplinary Team Meeting (MDT) | 95 | N D | 16 16 | 100% | N D | 42 44 | 95.5% | N D | 59 59 | 100% | N D | 166 167 | 99.4% | N D | 283 286 | 99.0% |
| QPI 4 Smoking Cessation | 95 | N D | 5 6 | 83.3% | N D | 8 13 | 61.5% | N D | 25 25 | 100% | N D | 42 57 | 73.7% | N D | 80 101 | 79.2% |
| QPI 5(i) Oral and Dental Rehabilitation Plan | 95 | N D | 12 14 | 85.7% | N D | 25 27 | 92.6% | N D | 35 40 | 87.5% | N D | 89 127 | 70.1% | N D | 161 208 | 77.4% |
| QPI 5(ii) Oral and Dental Rehabilitation Plan | 95 | N D | 9 11 | 81.8% | N D | 18 22 | 81.8% | N D | 28 32 | 87.5% | N D | 78 83 | 94.0% | N D | 133 148 | 89.9% |
| QPI 6 Nutritional Screening | 95 | N D | 16 16 | 100% | N D | 42 45 | 93.3% | N D | 49 60 | 81.7% | N D | 163 175 | 93.1% | N D | 270 296 | 91.2% |
| QPI 7 Specialist Speech and Language Therapist Access | 90 | N D | 1 12 | 8.3% | N D | 22 23 | 95.7% | N D | 25 31 | 80.6% | N D | 74 96 | 77.1% | N D | 122 162 | 75.3% |
| QPI 8 Surgical Margins - presented by hospital of surgery | <10 | N D | 0 | N/A | N D | 0 0 | N/A | N D | 0 0 | N/A | N D | 3 37 | 8.1% | N D | 3 37 | 8.1% |
| QPI 9 Intensity Modulated Radiotherapy (IMRT) | 95 | N D | 9 9 | 100% | N D | 15 15 | 100% | N D | 24 24 | 100% | N D | 70 70 | 100% | N D | 118 118 | 100% |

| Head and Neck QPI Attainment Summary 2020-21 Targ | et% | Bor | ders | | D& | G | | Fife |) | | Lo | thian | | SC | AN | |
|--|-----|--------|---------|-------|--------|---------|-------|--------|----------|-------|--------|-----------|-------|--------|-----------|-------|
| QPI 10 Post-Operative Chemoradiotherapy | 55 | N D | 0 0 | N/A | N D | 1 1 | 100% | N D | 1 3 | 33.3% | N D | 4 7 | 57.1% | N D | 6 11 | 54.5% |
| QPI 11a 30 Day Mortality (surgery) presented by hospital of surgery | <5 | N D | 0 | N/A | N D | 0 | N/A | N D | 0 | N/A | N D | 1 61 | 1.6% | N D | 1 61 | 1.6% |
| QPI 11a 90 Day Mortality (surgery) presented by hospital of surgery | <5 | N D | 0 0 | N/A | N D | 0 | N/A | N D | 0 0 | N/A | N D | 1 61 | 1.6% | N D | 1 61 | 1.6% |
| QPI 11b 30 Day Mortality (radiotherapy) | <5 | N D | 0 5 | 0.0% | N D | 1 3 | 33.3% | N D | 0 10 | 0.0% | N D | 0 29 | 0.0% | N D | 1 47 | 2.1% |
| QPI 11b 90 Day Mortality (radiotherapy) | <5 | N D | 0 5 | 0.0% | N D | 1 3 | 33.3% | N D | 0 9 | 0.0% | N D | 2 29 | 6.9% | N D | 3 46 | 6.5% |
| QPI 11c 30 Day Mortality (chemoradiotherapy) | <5 | N D | 0 4 | 0.0% | N D | 0 12 | 0.0% | N D | 0 14 | 0.0% | N D | 0 29 | 0.0% | N D | 0 59 | 0.0% |
| QPI 11c 90 Day Mortality (chemoradiotherapy) | <5 | N D | 0 4 | 0.0% | N D | 0 12 | 0.0% | N D | 0 14 | 0.0% | N D | 0 29 | 0.0% | N D | 0 59 | 0.0% |
| Clinical Trial QPI: N = patients consented to Trials and on SCRN database, D = 5 year average Cancer Registry Data | 15 | N D | 8 21 | 38.1% | N D | 3 37 | 8.1% | N D | 10 67 | 14.9% | N D | 42 200 | 21.0% | N D | 63 327 | 19.3% |

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 2020 to 31 March 2021.

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 Royal Infirmary | | Ms Marissa Botma | Campbell Wallis 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 |
| COMM | 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 | nort title of Quality Performance Indicator (for use in reports etc.) | | | | | | | | |
|-------------------------|-------------------------------|--|--|--|--|--|--|--|--|--|
| Description: | Full and clear desc | I and clear description of the Quality Performance Indicator. | | | | | | | | |
| Rationale and Evidence: | Description of the | scription 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: | | | | | | | | | |
| 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 2015 to 2019. 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 01.04.2020 to 31.03.2021

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 | 16 | 45 | 60 | 175 | 296 |
| Cancer Registry 5 Year Average | 21 | 37 | 67 | 200 | 325 |
| Case Ascertainment % | 76.2% | 122.6% | 89.6% | 87.5% | 91.1% |

Source: Scottish Cancer Registry, PHS. Data extracted from ACaDMe on 16/09/2021.

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.

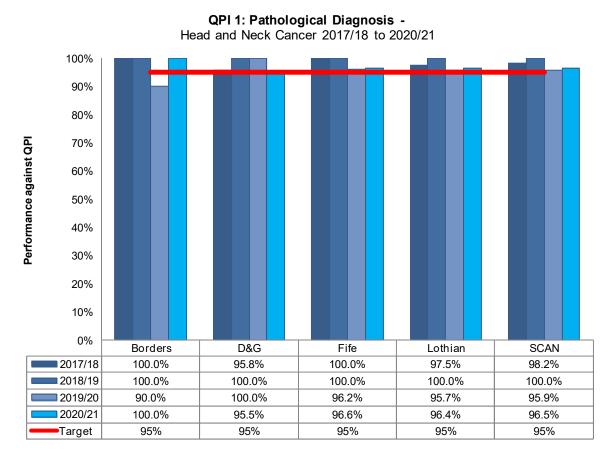
Denominator = All patients with head and neck cancer.

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

| Target 95% | Borders | D&G | Fife | Lothian | SCAN |
|--------------------------------|---------|-------|-------|---------|-------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 0 | 1 | 1 | 8 | 10 |
| Numerator | 16 | 42 | 57 | 161 | 276 |
| Not Recorded for the Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 16 | 44 | 59 | 167 | 286 |
| Not Recorded for Exclusion | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 100.0% | 95.5% | 96.6% | 96.4% | 96.5% |

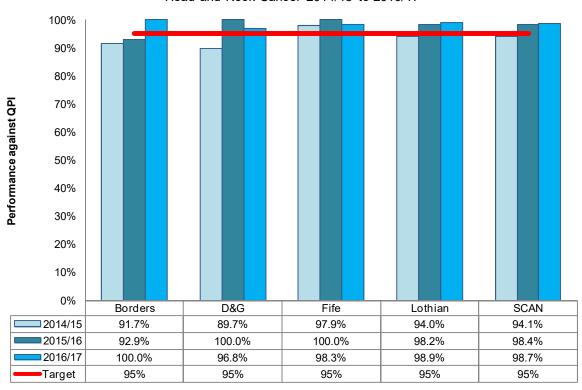
Comments:

The target was met by all Boards



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 1: Pathological Diagnosis -Head and Neck Cancer 2014/15 to 2016/17



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.

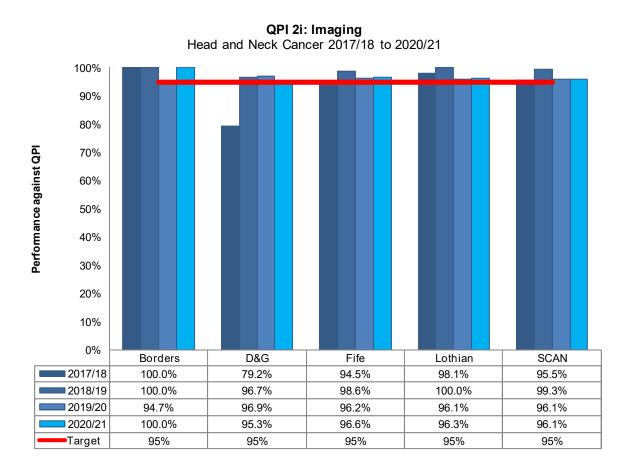
Denominator = All patients with head and neck cancer.

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 |
|------------------------------|---------|-------|-------|---------|-------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 0 | 1 | 2 | 14 | 17 |
| Numerator | 16 | 41 | 56 | 155 | 268 |
| Not Recorded for Numerator | 0 | 0 | 0 | 1 | 1 |
| Denominator | 16 | 43 | 58 | 161 | 278 |
| Not Recorded for Exclusions | 0 | 0 | 5 | 1 | 6 |
| Not Recorded for Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 100.0% | 95.3% | 96.6% | 96.3% | 96.4% |

Comments:

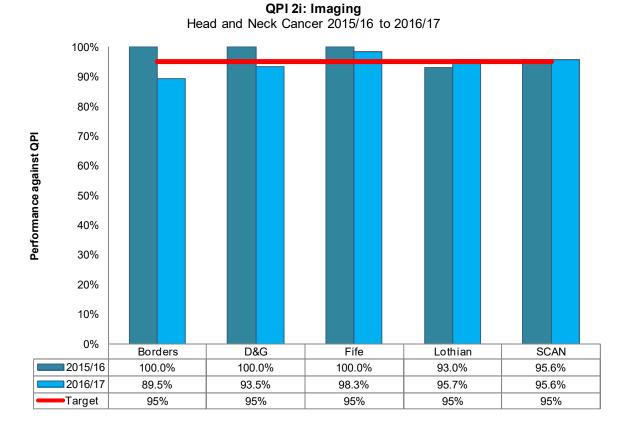
The target was met by all Boards



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%

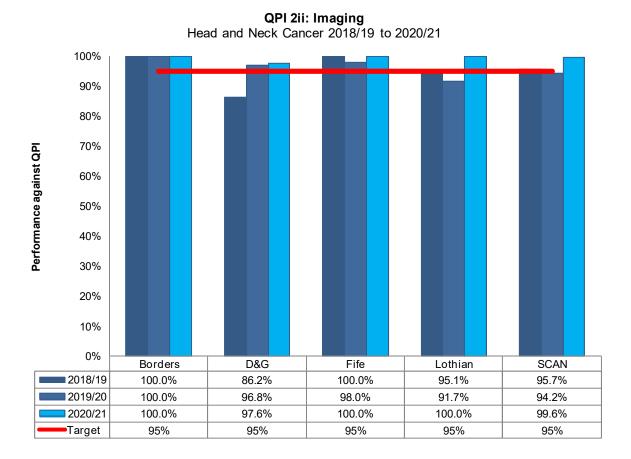
Numerator = Number of patients with head and neck cancer who undergo CT and/or MRI of the primary site and draining lymph nodes with CT of the chest before the initiation of treatment where the report is available within 2 weeks of the final imaging procedure.

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 |
|------------------------------|---------|-------|--------|---------|-------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 0 | 4 | 4 | 25 | 33 |
| | | | | | |
| Numerator | 16 | 40 | 56 | 150 | 262 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 16 | 41 | 56 | 150 | 263 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 5 | 1 | 6 |
| Not Recorded for Denominator | 0 | 0 | 0 | 1 | 1 |
| % Performance | 100.0% | 97.6% | 100.0% | 100.0% | 99.6% |

Comments: The target was met by all Boards



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 |
|----------------------------------|---------|-------|--------|---------|-------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 0 | 0 | 1 | 8 | 9 |
| | | | | | |
| Numerator | 16 | 42 | 59 | 166 | 283 |
| Not Recorded for the Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 16 | 44 | 59 | 167 | 286 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 5 | 1 | 6 |
| Not Recorded for the Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 100.0% | 95.5% | 100.0% | 99.4% | 99.0% |

Comments:

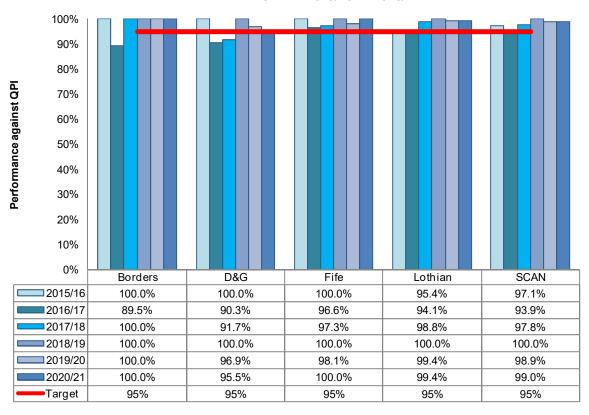
The target was met by all Boards

- 19 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow).
- 21 patients diagnosed in Fife were discussed in MDTs in NOSCAN (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 |
|----------------------------------|---------|-------|--------|---------|-------|
| 2020-21 Cohort | 16 | 26 | 39 | 175 | 256 |
| Ineligible for this QPI | 0 | 0 | 0 | 8 | 8 |
| | | | | | |
| Numerator | 16 | 24 | 39 | 166 | 245 |
| Not Recorded for the Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 16 | 26 | 39 | 167 | 248 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 2 | 1 | 3 |
| Not Recorded for the Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 100.0% | 92.3% | 100.0% | 99.4% | 98.8% |

QPI 3: Multi-Disciplinary Team Meeting (MDT)

Head and Neck Cancer 2015/16 to 2020/21



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 |
|------------------------------|---------|-------|--------|---------|-------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 10 | 32 | 35 | 118 | 195 |
| | | | | | |
| Numerator | 5 | 8 | 25 | 42 | 80 |
| Not Recorded for Numerator | 0 | 5 | 0 | 2 | 5 |
| Denominator | 6 | 13 | 25 | 57 | 101 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Denominator | 0 | 0 | 1 | 0 | 1 |
| % Performance | 83.3% | 61.5% | 100.0% | 73.7% | 79.2% |

Comments where the QPI was not met:

Borders: The target was not met showing a shortfall of 11.7% (1 case). For this 1 patient an offer of referral to smoking cessation services was not made; the patient was treated with best supportive care and an offer of referral was not considered to be in the patient's best interests.

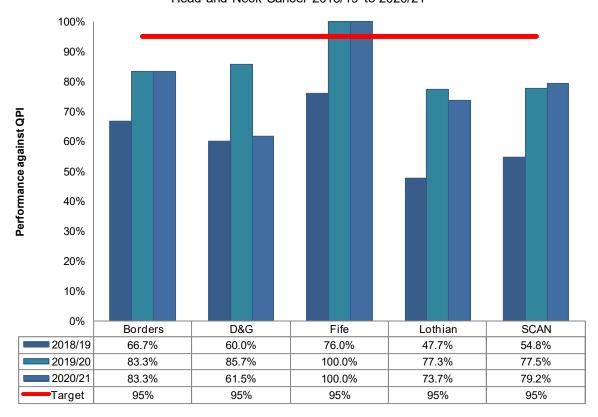
D&G: The target was not met showing a shortfall of 33.5% (5 cases). For these 5 patients referral was offered but the date of this was not recorded.

Lothian: The target was not met showing a shortfall of 21.3% (15 cases). Of these 15 patients, 6 were treated palliatively and an offer of referral was not made, 2 were offered referral on the same day as first treatment (best supportive care), 2 patients were offered referral after the start of treatment, 2 patients were not offered referral as they had stopped smoking themselves, for 2 patients it was not recorded if referral was offered, and for 1 patient referral was offered but the date of this was not recorded.

19 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow). 21 patients diagnosed in Fife were discussed in MDTs in NOSCAN (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 |
|----------------------------------|---------|-------|--------|---------|-------|
| 2020-21 Cohort | 16 | 26 | 39 | 175 | 256 |
| Ineligible for this QPI | 10 | 20 | 21 | 118 | 169 |
| | | | | | |
| Numerator | 5 | 4 | 18 | 42 | 67 |
| Not Recorded for the Numerator | 0 | 2 | 0 | 2 | 4 |
| Denominator | 6 | 6 | 18 | 57 | 87 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for the Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 83.3% | 66.7% | 100.0% | 73.7% | 77.0% |

QPI 4: Smoking Cessation Head and Neck Cancer 2018/19 to 2020/21



Action: It is likely that the QPI changes following the second formal review will improve performance in this QPI. Efforts to improve recording of smoking cessation referral date are to be made in Lothian. D&G has recently updated its MDT referral form to improve recording of this date.

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 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 |
|------------------------------|---------|-------|-------|---------|-------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 2 | 18 | 20 | 48 | 88 |
| | | | | | |
| Numerator | 12 | 25 | 35 | 89 | 161 |
| Not Recorded for Numerator | 2 | 2 | 4 | 38 | 46 |
| Denominator | 14 | 27 | 40 | 127 | 208 |
| | _ | | | | |
| Not Recorded for Exclusions | 0 | 1 | 0 | 3 | 4 |
| Not Recorded for Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 85.7% | 92.6% | 87.5% | 70.1% | 77.4% |

Comments where the QPI was not met:

Borders: The target was not met showing a shortfall of 2.3% (2 cases). For these 2 patients it was not recorded if pre-treatment dental assessment was required or not.

D&G: The target was not met showing a shortfall of 2.4% (2 cases). For these 2 patients it was not recorded if pre-treatment dental assessment was required or not.

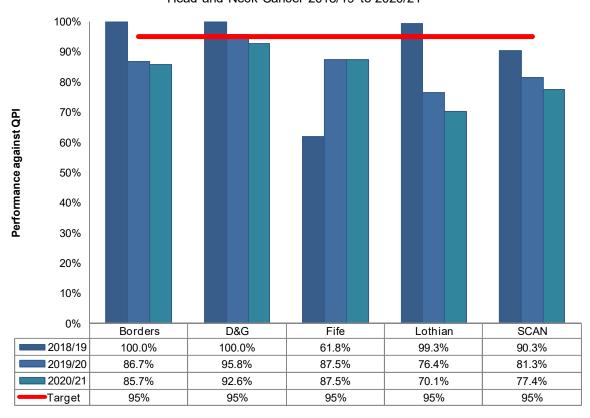
Fife: The target was not met showing a shortfall of 7.5% (5 cases). Of these 5 patients, for 4 it was not recorded if pre-treatment dental assessment was required or not, for 1 patient the only treatment was diagnostic excision biopsy, therefore this patient was discussed at MDT after treatment.

Lothian: The target was not met showing a shortfall of 24.9% (38 cases). For 38 patients it was not recorded if pre-treatment dental assessment was required or not. For 1 of these patients surgery was performed in Glasgow and dental care would have been passed to dentists in WoSCAN. It has been noted that for patients undergoing palliative radiotherapy, and which would therefore be included in the denominator of this QPI as undergoing active treatment, dental assessments are not generally performed as it is felt to not be in the best interests of the patients. 8 patients fell into this category from the 38 in the denominator.

19 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow). 21 patients diagnosed in Fife were discussed in MDTs in NOSCAN (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 |
|----------------------------------|---------|-------|-------|---------|-------|
| 2020-21 Cohort | 16 | 26 | 39 | 175 | 256 |
| Ineligible for this QPI | 2 | 10 | 16 | 48 | 76 |
| | | | | | |
| Numerator | 12 | 14 | 19 | 89 | 134 |
| Not Recorded for the Numerator | 2 | 0 | 4 | 38 | 44 |
| Denominator | 14 | 16 | 23 | 127 | 180 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 0 | 3 | 3 |
| Not Recorded for the Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 85.7% | 87.5% | 82.6% | 70.1% | 74.4% |

QPI 5 (i): Oral and Dental Rehabilitation Plan Head and Neck Cancer 2018/19 to 2020/21



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 |
|------------------------------|---------|-------|-------|---------|-------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 5 | 23 | 28 | 92 | 148 |
| | | | | | |
| Numerator | 9 | 18 | 28 | 78 | 133 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 11 | 22 | 32 | 83 | 148 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 1 | 0 | 1 | 2 |
| Not Recorded for Denominator | 3 | 4 | 9 | 74 | 90 |
| % Performance | 81.8% | 81.8% | 87.5% | 94.0% | 89.9% |

Comments where the QPI was not met:

Borders: The target was not met showing a shortfall of 13.2% (2 cases). 1 patient did not attend the dental appointment, and 1 patient was assessed after surgery but prior to adjuvant radiotherapy.

D&G: The target was not met showing a shortfall of 13.2% (4 cases).). For these 4 patients, 3 were not documented as having been dentally assessed and were treated in WoSCAN, 1 patient declined treatment.

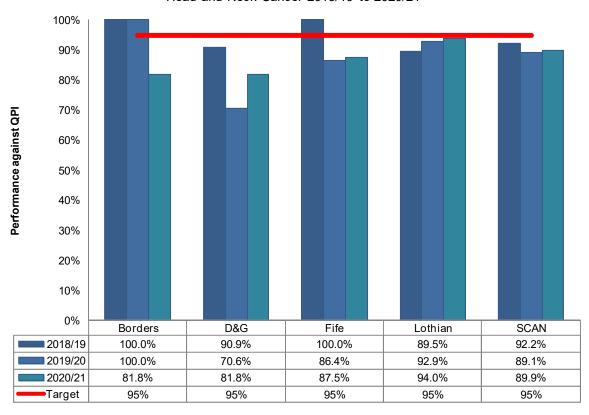
Fife: The target was not met showing a shortfall of 7.5% (4 cases). For these 4 patients, 2 were not referred to the dental team, 1 patient did not attend their appointment, 1 patient was assessed after treatment had started but prior to adjuvant chemoradiation.

Lothian: The target was not met showing a shortfall of 1.0% (5 cases). For these 5 patients, 3 were not dentally assessed prior to surgery, 1 declined the offered surgery and was not dentally assessed, 1 patient was only seen post-operatively for dental reconstruction.

19 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow).
21 patients diagnosed in Fife were discussed in MDTs in NOSCAN (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 |
|----------------------------------|---------|-------|--------|---------|-------|
| 2020-21 Cohort | 16 | 26 | 39 | 175 | 256 |
| Ineligible for this QPI | 5 | 14 | 20 | 92 | 131 |
| | | | | | |
| Numerator | 9 | 11 | 19 | 78 | 117 |
| Not Recorded for the Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 11 | 12 | 19 | 83 | 125 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 0 | 1 | 1 |
| Not Recorded for the Denominator | 3 | 0 | 9 | 74 | 86 |
| % Performance | 81.8% | 91.7% | 100.0% | 94.0% | 93.6% |

QPI 5 (ii): Oral and Dental Rehabiliation Plan Head and Neck Cancer 2018/19 to 2020/21



Action: Small number of cases not meeting the numerator. 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.

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 |
|------------------------------|---------|-------|-------|---------|-------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 0 | 0 | 0 | 0 | 0 |
| | | | | | |
| Numerator | 16 | 42 | 49 | 163 | 270 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 16 | 45 | 60 | 175 | 296 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 100.0% | 93.3% | 81.7% | 93.1% | 91.2% |

Comments where the QPI was not met:

D&G: The target was not met showing a shortfall of 1.7% (3 cases). For these 3 patients, 2 were not screened prior to treatment, 1 patient declined to be screened.

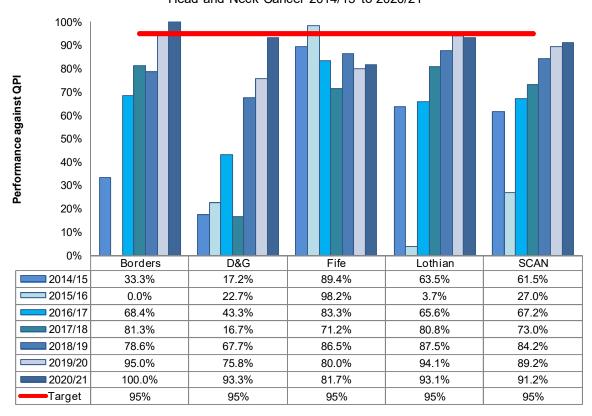
Fife: The target was not met showing a shortfall of 13.3% (11 cases). For these 11 patients, 9 were not screened prior to treatment with best supportive care (7 were discussed in the Lothian MDT and 2 were discussed in Tayside), 2 patients were not screened prior to wide local excision.

Lothian: The target was not met showing a shortfall of 1.9% (12 cases). For these 12 patients, 4 were missed for screening, 3 patients declined screening, 2 patients were unfit for screening, 1 patient was screened only after laser vocal cord surgery, 1 patient was screened but died prior to treatment, and 1 patient was not screened and died prior to treatment.

19 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow).
21 patients diagnosed in Fife were discussed in MDTs in NOSCAN (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 |
|----------------------------------|---------|-------|-------|---------|-------|
| 2020-21 Cohort | 16 | 26 | 39 | 175 | 256 |
| Ineligible for this QPI | 0 | 0 | 0 | 0 | 0 |
| | | | | | |
| Numerator | 16 | 25 | 32 | 163 | 236 |
| Not Recorded for the Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 16 | 26 | 39 | 175 | 256 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for the Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 100.0% | 96.2% | 82.1% | 93.1% | 92.2% |

QPI 6: Nutritional Screening Head and Neck Cancer 2014/15 to 2020/21



Action: Fife patients not attending their first MDT discussion in Lothian noted to generally miss nutritional screening. Fife lead to be made aware. D&G has recently updated its MDT referral form to improve recording.

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 |
|------------------------------|---------|-------|-------|---------|-------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 4 | 21 | 29 | 79 | 133 |
| Numerator | 1 | 22 | 25 | 74 | 122 |
| | ı | | 23 | 74 | 122 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 12 | 23 | 31 | 96 | 162 |
| | I | | | | |
| Not Recorded for Exclusions | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Denominator | 0 | 0 | 5 | 1 | 6 |
| % Performance | 8.3% | 95.7% | 80.6% | 77.1% | 75.3% |

Comments where the QPI was not met:

Borders: The target was not met showing a shortfall of 81.7% (11 cases). Of these 11 patients, 9 were seen by SLT following the start of their treatment, and 2 were not seen by SLT. Of the 9 patients seen after start of treatment, 4 were treated with radical radiotherapy, 3 were treated with chemoradiotherapy, 1 was surgically treated with a wide local excision, and 1 patient was seen following neck dissection and following the start of radiotherapy to the primary tumour. Of the 2 patients not seen by SLT, 1 had laser surgery for a vocal cord lesion, and 1 was treated with chemoradiotherapy.

Fife: The target was not met showing a shortfall of 9.4% (6 cases). All 6 patients were not referred to SLT or assessed by SLT prior to treatment.

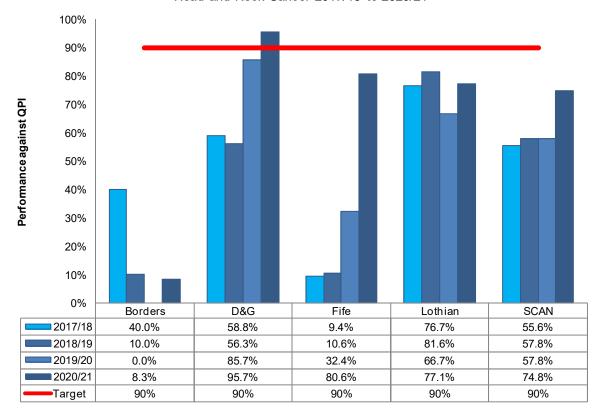
5 patients did not have the intent of their surgical treatment recorded, so were not included in the denominator, because curative intent could not be established, of these patients 2 were seen by SLT prior to surgery.

Lothian: The target was not met showing a shortfall of 12.9% (22 cases). Of these 22 patients who were not seen by SLT prior to treatment, 12 were surgically treated with wide local excision, 3 were treated with radical radiotherapy, 2 had nasopharyngeal tumours so did not require assessment, 2 had laser surgery for vocal cord lesions, 1 was seen following initial neck dissection and prior to palliative radiotherapy, 1 was surgically treated outwith SCAN, 1 patient was treated with chemoradiotherapy but was not assessed prior to treatment.

19 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow). 21 patients diagnosed in Fife were discussed in MDTs in NOSCAN (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 |
|------------------------------|---------|-------|--------|---------|-------|
| 2020-21 Cohort | 16 | 26 | 39 | 175 | 256 |
| Ineligible for this QPI | 4 | 9 | 19 | 79 | 111 |
| Numerator | 1 | 16 | 20 | 74 | 111 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 12 | 17 | 20 | 96 | 145 |
| Not Recorded for Exclusions | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Denominator | 0 | 0 | 2 | 1 | 3 |
| % Performance | 8.3% | 94.1% | 100.0% | 77.1% | 76.6% |

QPI7: Specialist Speech and Language Therapist Access
Head and Neck Cancer 2017/18 to 2020/21



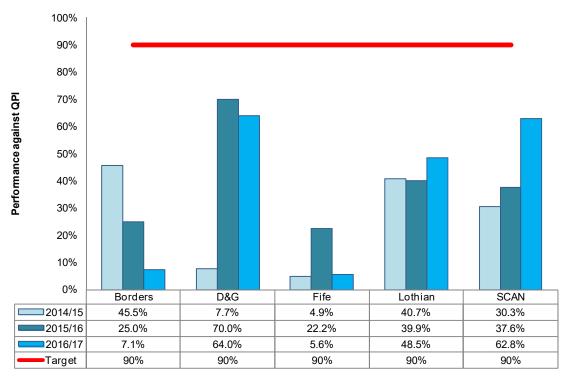
Action: Central funding has been secured by SLT and more staff should improve performance in this QPI. No further action required.

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 – Reported by Hospital of Surgery 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 | 3 | 3 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 0 | 0 | 0 | 37 | 37 |
| Not Recorded for Exclusions | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Denominator | 0 | 0 | 0 | 1 | 1 |
| % Performance | N/A | N/A | N/A | 8.1% | 8.1% |

⁶ patients from D&G were treated in Glasgow, and will appear in the WoSCAN report.

¹ patient from Lothian was treated surgically in Glasgow and will appear in the WoSCAN report

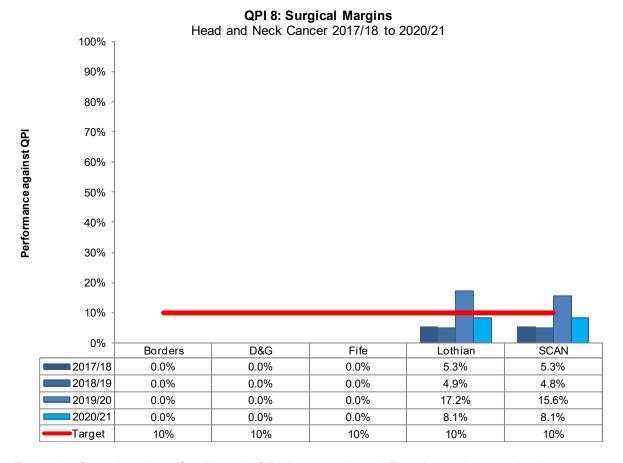
| % Performance in previous | Borders | D&G | Fife | Lothian | SCAN |
|---------------------------|---------|------|------|---------|-------|
| 2015/16 | N/A | N/A | N/A | 10.8% | 10.8% |
| 2016/17 | 100.0% | 0.0% | 0.0% | 12.8% | 12.9% |
| 2017/18 | N/A | N/A | N/A | 5.3% | 5.3% |
| 2018/19 | N/A | 0.0% | N/A | 4.9% | 4.8% |
| 2019/20 | N/A | 0.0% | N/A | 17.2% | 15.6% |

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

Comments:

The target was met by all Boards

¹² patients from Fife were treated surgically in Tayside and will appear in the NOSCAN report.



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 |
|------------------------------|---------|--------|--------|---------|--------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 7 | 30 | 36 | 105 | 178 |
| | T | I | | | |
| Numerator | 9 | 15 | 24 | 70 | 118 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 9 | 15 | 24 | 70 | 118 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 1 | 1 | 3 | 5 |
| Not Recorded for Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |

Comments:

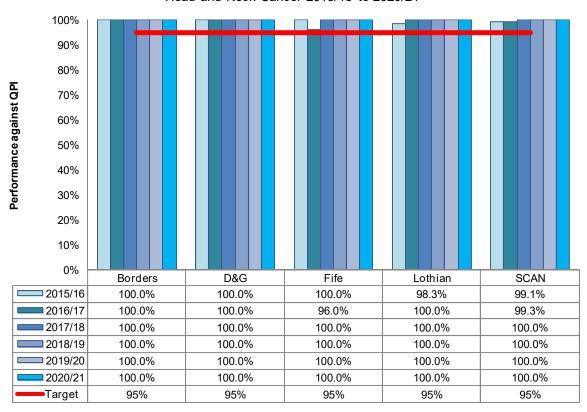
The target was met by all Boards

- 19 patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow).
- 21 patients diagnosed in Fife were discussed in MDTs in NOSCAN (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 | 16 | 26 | 39 | 175 | 256 |
| Ineligible for this QPI | 7 | 16 | 21 | 105 | 149 |
| | | | | | |
| Numerator | 9 | 10 | 18 | 70 | 107 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 9 | 10 | 18 | 70 | 107 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 1 | 3 | 4 |
| 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 2020/21



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 |
|------------------------------|---------|--------|-------|---------|-------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 16 | 44 | 57 | 168 | 285 |
| | | | | | |
| Numerator | 0 | 1 | 1 | 4 | 6 |
| Not Recorded for Numerator | 0 | 0 | 0 | 1 | 1 |
| Denominator | 0 | 1 | 3 | 7 | 11 |
| | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 0 | 1 | 1 |
| Not Recorded for Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | N/A | 100.0% | 33.3% | 57.1% | 54.5% |

Comments where the QPI was not met:

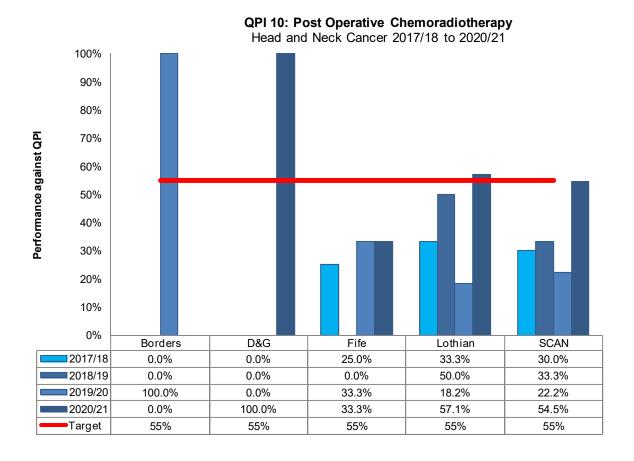
Fife: The target was not met showing a shortfall of 21.7% (2 cases). 1 was treated with adjuvant radiotherapy only (clinical decision not to offer chemotherapy) and was treated in Tayside. 1 patient didn't require adjuvant therapy as per MDT decision.

| Reason for patients not receiving | Borders | D&G | Fife | Lothian | SCAN |
|---|---------|-----|------|---------|------|
| Patient not fit for chemo (includes advanced age) | 0 | 0 | 0 | 1 | 1 |
| 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 | 2 | 0 | 2 |
| Patient declined treatment | 0 | 0 | 0 | 1 | 1 |
| Patient treated outwith SCAN | 0 | 0 | 0 | 0 | 0 |
| Totals | 0 | 0 | 2 | 3 | 5 |

¹⁹ patients diagnosed in D&G were discussed in MDTs in WoSCAN (Glasgow).

²¹ patients diagnosed in Fife were discussed in MDTs in NOSCAN (Tayside). These patients are removed from the results in the table shown below in order to aid interpretation of the results.

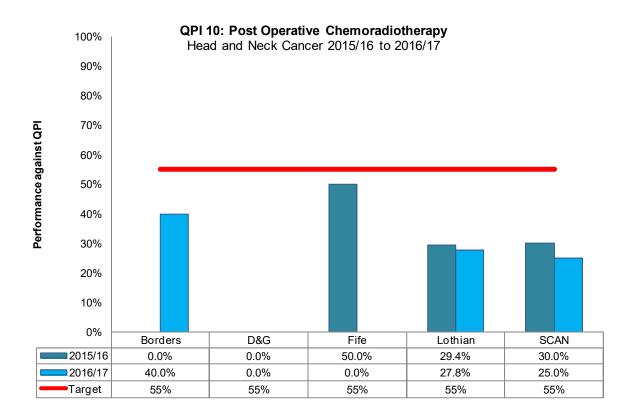
| Target 90% | Borders | D&G | Fife | Lothian | SCAN |
|------------------------------|---------|-----|-------|---------|-------|
| 2019-20 Cohort | 16 | 26 | 39 | 175 | 256 |
| Ineligible for this QPI | 16 | 26 | 37 | 168 | 247 |
| Numerator | 0 | 0 | 1 | 4 | 5 |
| Not Recorded for Numerator | 0 | 0 | 0 | 1 | 1 |
| Denominator | 0 | 0 | 2 | 7 | 9 |
| Not Recorded for Exclusions | 0 | 0 | 0 | 1 | 1 |
| Not Recorded for Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | N/A | N/A | 50.0% | 57.1% | 55.5% |



Action: All patients treated appropriately. No action identified

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) – Reported by 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) | Lothian (ERI) | Lothian (St Johns) | Lothian Total | SCAN |
|--|---------|--|--------------------------------|------------------|-----------------------|------------------|---------|
| Numerator | 0 | 0 | 0 | 0 | 1 | 1 | 1 |
| Not Recorded for Numerator Denominator | 0 | 0 | 0 | 0 | 0 | 0 61 | 0 61 |
| Not Recorded for Exclusions | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Denominator | 0 | 0 | 0 | 0 | 3 | 3 | 3 |
| % Performance | N/A | N/A | N/A | 0.0% | 1.7% | 1.6% | 1.6% |

¹ patient from Lothian was treated in Glasgow, and will appear in the WOSCAN report.

¹² patients from Fife were treated surgically in Tayside and will appear in the NOSCAN 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% |
| 2019/20 | N/A | 0.0% | 0.0% | 0.0% | 0.0% |

Comments:

All Boards reporting data met the target

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

90 day Mortality (Surgery)

| Target <5% | Borders | D&G (New Royal Infirmary) | Fife (Victoria Hospital) | Lothian (ERI) | Lothian (St Johns) | Lothian Total | SCAN |
|---------------------------------|---------|--|--------------------------------|------------------|-----------------------|------------------|------|
| Numerator | 0 | 0 | 0 | 0 | 1 | 1 | 1 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Denominator | 0 | 0 | 0 | 1 | 60 | 61 | 61 |
| Not Recorded for Exclusions | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Denominator | 0 | 0 | 0 | 0 | 3 | 3 | 3 |
| % Performance | N/A | N/A | N/A | 0.0% | 1.7% | 1.6% | 1.6% |

¹ patient from Lothian was treated in Glasgow, and will appear in the WOSCAN report.

¹² patients from Fife were treated surgically in Tayside and will appear in the NOSCAN report.

| % Performance | 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% |
| 2019/20 | N/A | 0.0% | 0.0% | 3.2% | 3.1% |

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

Comments:

All Boards reporting data met the target

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

QPI 11b: Mortality after Radiotherapy – Reported by Hospital of Diagnosis

Target <5%

2017/18

2018/19

2019/20

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 |
|-----------------------------------|---------|-------|------|---------|------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 11 | 42 | 50 | 146 | 249 |
| | ı | | | | |
| Numerator | 0 | 1 | 0 | 0 | 1 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 5 | 3 | 10 | 29 | 47 |
| N. (D l. 16 . E l i | | | | | |
| Not Recorded for Exclusions | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 0.0 | 33.3% | 0.0 | 0.0 | 2.1% |
| 0/ Denfermence in previous vicers | | | | | |
| % Performance in previous years | | | | | |
| 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% |

0.0%

N/A

0.0%

0.0%

0.0%

0.0%

6.3%

6.3%

4.2%

3.6%

4.2%

2.5%

0.0%

0.0%

0.0%

Comments where the QPI was not met:

D&G: There was 1 death, the patient died of aspiration pneumonia.

² patients in the denominator for Fife were treated outwith SCAN in NOSCAN

90 day Mortality (Radiotherapy)

| Target <5% | Borders | D&G | Fife | Lothian | SCAN |
|---------------------------------|---------|-------|------|---------|------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 11 | 42 | 51 | 146 | |
| Numerator | 0 | 1 | 0 | 2 | 3 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 5 | 3 | 9 | 29 | 46 |
| Not Recorded for Exclusions | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Denominator | 0 | 0 | 0 | 0 | 0 |
| % Performance | 0.0 | 33.3% | 0.0 | 6.9% | 6.5% |
| % Performance in previous years | | | | | |
| 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% |
| 2019/20 | N/A | 0.0% | 0.0% | 4.5% | 2.9% |

² patients in the denominator for Fife were treated outwith SCAN in NOSCAN

Fife: 90 days since treatment not reached by 1 patient

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

Comments where the QPI was not met:

D&G: There was 1 death, the patient died of aspiration pneumonia

Lothian: There were 2 deaths. Both patients both were registered with Covid-19 and pneumonia as causes of death in addition to cancer.

Action: All deaths were reviewed. No action was identified.

QPI 11c: Mortality Following Chemoradiotherapy – Reported 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 |
|------------------------------|---------|------|------|---------|------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 12 | 33 | 46 | 146 | 237 |
| | | | | | |
| Numerator | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 4 | 12 | 14 | 29 | 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 |
|---------------------------------|---------|------|------|---------|------|
| 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% |
| 2019/20 | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |

² patients in the denominator for Fife were treated outwith SCAN in NOSCAN.

Comments:

All Boards met the target

³ patients in the denominator for D&G were treated outwith SCAN in WoSCAN.

90 day mortality (Chemoradiotherapy)

| Target <5% | Borders | D&G | Fife | Lothian | SCAN |
|------------------------------|---------|------|------|---------|------|
| 2020-21 Cohort | 16 | 45 | 60 | 175 | 296 |
| Ineligible for this QPI | 12 | 33 | 46 | 146 | 237 |
| Numerator | 0 | 0 | 0 | 0 | 0 |
| Not Recorded for Numerator | 0 | 0 | 0 | 0 | 0 |
| Denominator | 4 | 12 | 14 | 29 | 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% |
| 2019/20 | 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.

Comments:

All Boards met the target

² patients in the denominator for Fife were treated outwith SCAN in NOSCAN.

³ patients in the denominator for D&G were treated outwith SCAN in WoSCAN.

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 2015-2019)

| Target 15% | Borders | D&G | Fife | Lothian | SCAN |
|---------------|---------|------|-------|---------|-------|
| Numerator | 8 | 3 | 10 | 42 | 63 |
| Denominator | 21 | 37 | 67 | 200 | 327 |
| % Performance | 38.1% | 8.1% | 14.9% | 21.0% | 19.3% |

| Open Trials | Trial Type | Numbers Recruited |
|-------------|----------------|-------------------|
| CompARE | Interventional | 6 |
| DARS | Interventional | 3 |
| DOM-INATE | Interventional | 2 |
| SR1171 | Translational | 46 |
| PATHOS | Interventional | 1 |
| PETNECK2 | Interventional | 5 |

Comments where the QPI was not met:

D&G: The target was not met showing a shortfall of 6.9%.

Fife: The target was not met showing a shortfall of 0.1%.

| % 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% |
| 2019/20 | 26.3% | 20.0% | 18.8% | 19.3% | 19.7% |

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 | tal Patients Diagnosed Male | | Female | | |
|----------------|-----------------------------|-----|--------|-----|-------|
| Borders | 16 | 11 | 68.8% | 5 | 31.2% |
| D&G | 45 | 29 | 64.4% | 16 | 35.5% |
| Fife | 60 | 37 | 61.7% | 23 | 38.3% |
| Lothian | 175 | 108 | 61.7% | 67 | 38.3% |
| SCAN | 296 | 185 | 62.5% | 111 | 37.5% |

Table 2: Age at Diagnosis

| Age | | Borders | | D&G | | Fife | L | othian | SCAN | | | |
|-------|----|---------|----|--------|----|--------|-----|--------|------|--------|--|--|
| <45 | 2 | 12.5% | 1 | 2.2% | 1 | 1.7% | 7 | 4.0% | 11 | 3.7% | | |
| 45-49 | 2 | 12.5% | 1 | 2.2% | 2 | 3.3% | 13 | 7.4% | 18 | 6.1% | | |
| 50-54 | 1 | 6.3% | 4 | 8.9% | 7 | 11.7% | 14 | 8.0% | 26 | 8.8% | | |
| 55-59 | 1 | 6.3% | 6 | 13.3% | 8 | 13.3% | 22 | 12.6% | 37 | 12.5% | | |
| 60-64 | 2 | 12.5% | 7 | 15.6% | 9 | 15.0% | 33 | 18.8% | 51 | 17.3% | | |
| 65-69 | 3 | 18.8% | 7 | 15.6% | 6 | 10.0% | 20 | 11.4% | 36 | 12.2% | | |
| 70-74 | 4 | 25.0% | 8 | 17.8% | 16 | 26.7% | 30 | 17.1% | 58 | 19.6% | | |
| 75-79 | 1 | 6.3% | 5 | 11.1% | 1 | 1.7% | 19 | 10.8% | 26 | 8.8% | | |
| 80-84 | 0 | 0.0% | 3 | 6.7% | 4 | 6.7% | 11 | 6.3% | 18 | 6.1% | | |
| 85+ | 0 | 0.0% | 3 | 6.7% | 6 | 10.0% | 6 | 3.4% | 15 | 5.1% | | |
| Total | 16 | 100.0% | 45 | 100.0% | 60 | 100.0% | 175 | 100.0% | 296 | 100.0% | | |

Table 3: Tumour Site

N=All patients diagnosed

| Site of Tumour | В | orders | [| D&G | ı | Fife | L | othian | S | SCAN | | | |
|------------------------------|----|--------|----|--------|----|------------|-----|--------|-----|--------|--|--|--|
| Larynx | 3 | 18.8% | 10 | 22.2% | 9 | 15.0% | 32 | 18.3% | 54 | 18.2% | | | |
| Oral Cavity | 3 | 18.8% | 16 | 35.6% | 16 | 26.7% | 53 | 30.3% | 88 | 29.7% | | | |
| Major Salivary Glands | 0 | 0.0% | 5 | 11.1% | 1 | 1.7% | 6 | 3.4% | 12 | 4.1% | | | |
| Oropharynx | 6 | 37.5% | 10 | 22.2% | 22 | 36.7% | 54 | 30.9% | 92 | 31.1% | | | |
| Nasopharynx | 1 | 6.3% | 0 | 0.0% | 0 | 0.0% | 3 | 1.7% | 4 | 1.4% | | | |
| Hypopharynx | 1 | 6.3% | 1 | 2.2% | 6 | 10.0% | 19 | 10.9% | 27 | 9.1% | | | |
| Nasal Cavity & Middle Ear | 1 | 6.3% | 1 | 2.2% | 3 | 5.0% | 7 | 4.0% | 12 | 4.1% | | | |
| Accessory Sinuses | 0 | 0.0% | 1 | 2.2% | 2 | 3.3% | 1 | 0.6% | 4 | 1.4% | | | |
| Bones | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | | | |
| III Defined Sites | 1 | 6.3% | 1 | 2.2% | 1 | 1.7% | 0 | 0.0% | 3 | 1.0% | | | |
| Total | 16 | 100.0% | 45 | 100.0% | 60 | 100.0 % | 175 | 100.0% | 296 | 100.0% | | | |

QPI Attainment Summary Year 6

| Head and Neck QPI Attainment Summary 2019-20 | Target% | | Borders | | D&G | | | Fife | | | Lothian | | | sc | | |
|---|---------|--------|----------|-------|--------|----------|-------|--------|----------|-------|---------|------------|-------|--------|------------|-------|
| 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 | 248 278 | 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 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 | <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 | <5 | N D | 0 | N/A | N D | 0 2 | 0.0% | N D | 0 1 | 0.0% | N D | 2 62 | 3.2% | N D | 2 65 | 3.1% |

| Head and Neck QPI Attainment Summary 2019-20 Tar | | Borders | | | D&G | | | Fife | 9 | | Lothian | | | sc | | |
|--|----|---------|---------|-------|--------|---------|------|--------|----------|-------|---------|-----------|-------|--------|-----------|-------|
| 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 | N/A | N D | 0 | 0.0% | N D | 0 9 | 0.0% | N D | 1 22 | 4.5% | N D | 1 35 | 2.9% |
| QPI 11c 30 Day Mortality (chemoradiotherapy) | <5 | N D | 0 8 | 0.0% | N D | 0 6 | 0.0% | N D | 0 13 | 0.0% | N D | 0 35 | 0.0% | N D | 0 62 | 0.0% |
| QPI 11c 90 Day Mortality (chemoradiotherapy) | <5 | N D | 0 8 | 0.0% | N D | 0 6 | 0.0% | N D | 0 11 | 0.0% | N D | 0 34 | 0.0% | N D | 0 59 | 0.0% |
| Clinical Trial QPI: N = patients consented to Trials and on SCRN database, D = 5 year average Cancer Registry Data | 15 | N D | 5 19 | 26.3% | N D | 7 35 | 20% | N D | 13 69 | 18.8% | N D | 37 192 | 19.3% | N D | 62 315 | 19.7% |

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