

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

**HEAD AND NECK CANCER 2021 – 2022  
Quality Performance Indicators (QPI)  
Comparative Report**

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## HEAD AND NECK CANCER 2021-22 COMPARATIVE AUDIT REPORT

Patients diagnosed 1 April 2021 – 31 March 2022

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## DOCUMENT HISTORY

Version	Circulation	Date	Comments
Version 1	Lead Clinicians' Sign off Group	26/09/2022	Circulated in advance of the Leads meeting
Version 2	SCAN Head and Neck Lead Clinicians	07/02/2023	Action points and Lead Clinician's comments added
Version3	SCAN Head and Neck Group	07/02/2023	For final comment from SCAN Group (Chairs clinical commentary to be added)
Final Version	SCAN Audit Reporting Framework	14/03/2023	For circulation to SCAN Group and Clinical Governance Group
Web Version		14/03/2023	

### Comment by Chair of the SCAN Head and Neck Group

The healthcare environment continues to be very challenging in the wake of the covid-19 pandemic. Despite this, the SCAN H&N cancer team are managing to sustain a high quality service which continues to make incremental improvements in performance as demonstrated in this year's QPIs. A formal review of the QPIs was completed in November 2021. This is the first year of reporting since the implementation of changes following the formal review.

The diagnostic pathway for H&N cancer patients continues to perform strongly. This is despite significant pressure on radiology and pathology services.

While superficially the smoking cessation QPI 4 continues to be challenging, there were some patients who had already stopped smoking between referral and being seen in secondary care. Understandably, they were not referred to smoking cessation services but are included in the figures. Exclusion of those patients alone would markedly improve the performance to beyond 90%.

QPI 5 (oral and dental rehab) and QPI 6 (nutritional screening) continue to be beset by persistent recording difficulties.

There has been a significant and positive change in the recording mechanism for QPI 5 which is expected to result in an improvement in the performance moving forward.

QPI 6 continues to pose challenges around data collection across health boards and MDTs. Patients from SCAN affiliated health boards can be treated by WoSCAN and NCA MDTs. This results in data which is often not collected or visible to the audit team in SCAN. This can have a significantly adverse impact on the percentage performance despite the relatively small numbers involved.

There has been a notable and welcomed improvement in the performance of speech and language therapy QPI 7. This follows on from the successful bid for additional funding and the resultant recruitment of another SLT colleague. Further improvements are expected in next year's performance after collaborative regional working with NHS Borders was agreed and implemented.

The rates of 30 and 90 day mortality remain very low for both surgery and oncology. They are both well below the target of <5%.

The clinical trials QPI continues to perform well with a total of 28% patients recruited to clinical trials. This is well above the target of 15%.

There has been encouraging performance in the new QPIs 14 (Time to adjuvant radiotherapy) and 15 (PD-L1 CPS). This is the first year of reporting these new QPIs.

QPI 14 was marginally failed across SCAN and QPI 15 was passed at the first attempt.

The failure of QPI 14 was due to an under-performance in NHS Fife. This may, in part, be due to recording issues due to patients being treated in NCA area but being reported within the SCAN dataset. The audit team will continue to review their data collection processes to ensure maximum data collection across cancer network boundaries.

In summary, the SCAN H&N team continue to provide a high standard of care in what remains a very challenging environment. The overall performance in the QPIs has continued to improve over recent years. There has been significant improvement in the SLT QPI 7 with more anticipated in the coming year. The challenge posed by the introduction of two new QPIs has been met robustly by the team and I am sure the results will only continue to improve in the coming years.

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

## ACTION POINTS

### QPI Action Plans from 2021-22

QPI	Action required	Person Responsible	Date for update
6i	Patient's pathways in which screening was not performed to examined, and efforts to be made to assess similar patients in future. Fife team to record MUST on local TrakCare System.	Karen Angel/Katie Cunningham (Lothian/Fife)	Next SCAN group meeting
6i	Tayside MDT to record MUST score on the MDT proforma so the auditor in Fife has this information.	Katie Cunningham (Fife)	Next SCAN group meeting
6ii	Decision for not referring a patient to dietetics due to a palliative/BSC pathway should be documented.	All Clinical Staff/Dietetics	Next SCAN group meeting
6iii	Issue in Lothian with surgical patients attending St John's not being referred to dietetics to be addressed	Karen Angel (Lothian)	Next SCAN group meeting

### QPI Action Points from 2020-21.

QPI	Action required	Progress/Action Status	Status
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	QPI has been revised and this alone may improve performance. No action required due to QPI revision.	3
QPI 5i	Audit and Dental staff in Lothian to implement change in recording process to ensure decision for/not for dental assessment is recorded.	Dental team are now circulating a further list of patients for/not for dental assessment, shortly after each MDM.	1
QPI 6	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	Actioned	1

Head and Neck QPI Attainment Summary 2021-22		Target%	Borders		D&G		Fife		Lothian		SCAN	
QPI 1 Pathological Diagnosis of Head and Neck Cancer	95	N 19 D 19	100%	N 37 D 38	97.4%	N 63 D 63	100%	N 163 D 166	98.2%	N 282 D 286	98.6%	
QPI 2(i) Imaging	95	N 19 D 19	100%	N 34 D 37	91.9%	N 61 D 63	96.8%	N 156 D 160	97.5%	N 270 D 279	96.8%	
QPI 2(ii) Imaging	95	N 18 D 19	94.7%	N 33 D 34	97.1%	N 61 D 61	100%	N 156 D 156	100%	N 268 D 270	99.3%	
QPI 3 Multi-disciplinary Team Meeting (MDT)	95	N 20 D 20	100%	N 36 D 37	97.3%	N 62 D 63	98.4%	N 165 D 168	98.8%	N 283 D 288	98.3%	
QPI 4 Smoking Cessation	95	N 5 D 5	100%	N 10 D 10	100%	N 12 D 16	75.0%	N 45 D 59	76.3%	N 72 D 90	80.0%	
QPI 5(i) Oral and Dental Rehabilitation Plan	95	N 7 D 11	63.6%	N 21 D 26	80.8%	N 40 D 44	90.9%	N 86 D 114	75.4%	N 154 D 195	79.0%	
QPI 5(ii) Oral and Dental Rehabilitation Plan	95	N 7 D 7	100%	N 16 D 18	88.9%	N 29 D 30	96.7%	N 62 D 71	87.3%	N 114 D 126	90.5%	
QPI 6(i) Nutritional Screening	95	N 18 D 20	90.0%	N 33 D 38	86.8%	N 46 D 64	71.9%	N 163 D 175	93.1%	N 260 D 297	87.5%	
QPI 6(ii) Nutritional Screening	90	N 4 D 4	100%	N 7 D 7	100%	N 4 D 6	66.7%	N 48 D 55	87.3%	N 63 D 72	87.5%	
QPI 6(iii) Nutritional Screening	90	N 9 D 10	90.0%	N 20 D 24	83.3%	N 42 D 44	95.5%	N 93 D 107	86.9%	N 164 D 185	88.6%	
QPI 7 Specialist Speech and Language Therapist Access	90	N 4 D 10	40.0%	N 19 D 24	79.2%	N 43 D 45	95.6%	N 90 D 103	87.4%	N 159 D 186	85.5%	
QPI 8 Surgical Margins - <i>presented by hospital of surgery</i>	<10	N 0 D 0	N/A	N 0 D 0	N/A	N 0 D 0	N/A	N 4 D 44	9.1%	N 4 D 44	9.1%	
QPI 11a 30 Day Mortality (surgery) <i>presented by hospital of surgery</i>	<5	N 0 D 0	N/A	N 0 D 0	N/A	N 0 D 0	N/A	N 1 D 67	1.5%	N 1 D 67	1.5%	
QPI 11a 90 Day Mortality (surgery) <i>presented by hospital of surgery</i>	<5	N 0 D 0	N/A	N 0 D 0	N/A	N 0 D 0	N/A	N 1 D 65	1.5%	N 1 D 65	1.5%	
QPI 11b 30 Day Mortality (radiotherapy)	<5	N 0 D 1	0.0%	N 0 D 4	0.0%	N 0 D 10	0.0%	N 0 D 27	0.0%	N 0 D 42	0.0%	

<b>Head and Neck QPI Attainment Summary 2021-22</b>	<b>Target%</b>	<b>Borders</b>	<b>D&amp;G</b>	<b>Fife</b>	<b>Lothian</b>	<b>SCAN</b>
QPI 11b 90 Day Mortality (radiotherapy)	<5	N 0 D 1 0.0%	N 0 D 3 0.0%	N 0 D 7 0.0%	N 0 D 23 0.0%	N 0 D 34 0.0%
QPI 11c 30 Day Mortality (chemoradiotherapy)	<5	N 0 D 4 0.0%	N 0 D 12 0.0%	N 0 D 18 0.0%	N 0 D 31 0.0%	N 0 D 65 0.0%
QPI 11c 90 Day Mortality (chemoradiotherapy)	<5	N 0 D 4 0.0%	N 0 D 9 0.0%	N 0 D 13 0.0%	N 0 D 29 0.0%	N 0 D 55 0.0%
Clinical Trial QPI NB: N = patients consented to Trials and on SCRN database, D = 5 year average Cancer Registry Data	15	N 8 D 21 38.1%	N 14 D 38 36.8%	N 15 D 71 21.1%	N 56 D 202 27.7%	N 93 D 332 28.0%
QPI 14 Time from Surgery to Adjuvant Radiotherapy/Chemotherapy	50	N 1 D 1 100%	N 1 D 1 100%	N 1 D 7 14.3%	N 7 D 14 50.0%	N 10 D 23 43.5%
QPI 15 PD-L1 Combined Proportion Score (CPS)	75	N 1 D 1 100%	N 1 D 1 100%	N 0 D 1 0.0%	N 7 D 9 77.8%	N 9 D 12 75.0%

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 2021 to 31 March 2022.

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 Jennifer Bruce
NHS Fife	Queen Margaret Hospital Victoria Hospital	Mr Justin Yeo	Mimi Bjelogrljic
NHS Lothian & SCAN	Royal Infirmary of Edinburgh Western General Hospital St John's Hospital	Mr James Morrison	Fiona Gardiner
	Edinburgh Cancer Centre	Dr Joanna Mackenzie	

### Audit Processes and data recording

Data was analysed by the audit facilitators in each NHS Board according to the measurability document provided by Public Health Scotland (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, 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.

Following Year 6 results the QPIs were again subject to a formal review and revised documents for data collection were published in Nov 2021. The revisions following formal review were not implemented until Year 8 (2021/22). QPIs 9 and 10 were archived, and QPIs 13, 14 and 15 added.

The standard QPI format is shown below:

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

## Data Quality

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

**External QA:** SCAN Audit participates in external quality assurance (QA) of data by 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 2016 to 2020. 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 01.04.2021 to 31.03.2022

**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	38	64	175	297
Cancer Registry 5 Year Average	21	38	71	202	332
<b>Case Ascertainment %</b>	<b>95.2%</b>	<b>100.0%</b>	<b>90.1%</b>	<b>86.6%</b>	<b>89.5%</b>

Source: Scottish Cancer Registry, PHS. Data extracted from ACaDMe on 15/08/2022.

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.

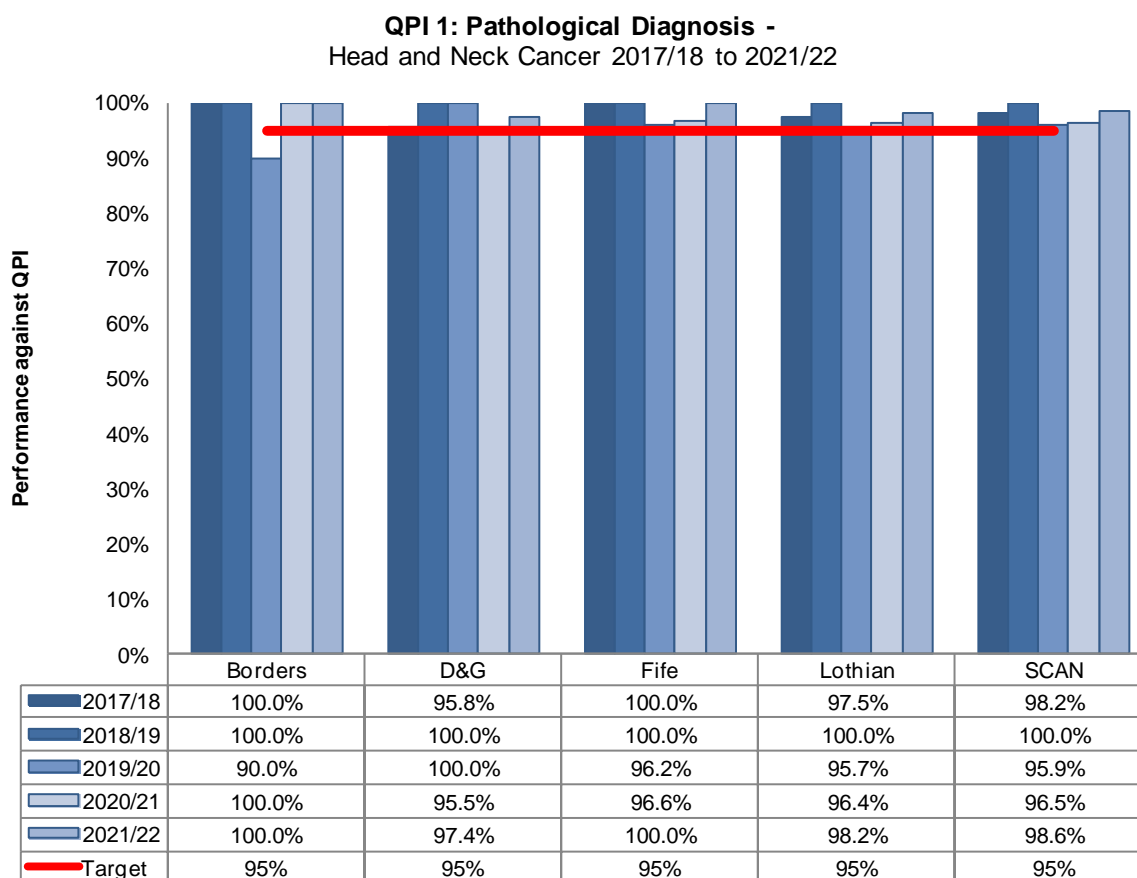
Denominator = All patients with head and neck cancer.

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

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	38	64	175	297
Ineligible for this QPI	1	0	1	9	11
Numerator	19	37	63	163	282
Not Recorded for the Numerator	0	0	0	0	0
Denominator	19	38	63	166	286
Not Recorded for Exclusion	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	97.4%	100.0%	98.2%	98.6%

#### Comments:

The target was met by all Boards



Some patients within this cohort were discussed and treated outwith SCAN (but were diagnosed in SCAN and are therefore SCAN patients). So as to focus only on patients discussed and treated within SCAN, a second table will appear within each QPI which omits these patients. This year 13 Dumfries patients were discussed at MDTs in WoSCAN

(Glasgow) and 22 Fife patients were discussed at MDT in NOSCAN (Tayside). Additionally 1 Fife patient was not discussed at MDT but what also treated in NOSCAN.

<b>Target 95%</b>	<b>Borders</b>	<b>D&amp;G</b>	<b>Fife</b>	<b>Lothian</b>	<b>SCAN</b>
2020-21 Cohort	20	25	41	175	261
Ineligible for this QPI	1	0	0	9	11
Numerator	19	24	41	163	247
Not Recorded for the Numerator	0	0	0	0	0
Denominator	19	25	41	166	251
Not Recorded for Exclusion	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	96.0%	100.0%	98.2%	98.4%

**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	20	38	64	175	297
Ineligible for this QPI	1	1	1	15	18
Numerator	19	34	61	156	270
Not Recorded for Numerator	0	0	0	1	1
Denominator	19	37	63	160	279
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	91.9%	96.8%	97.5%	96.8%

**Comments where the QPI was not met:**

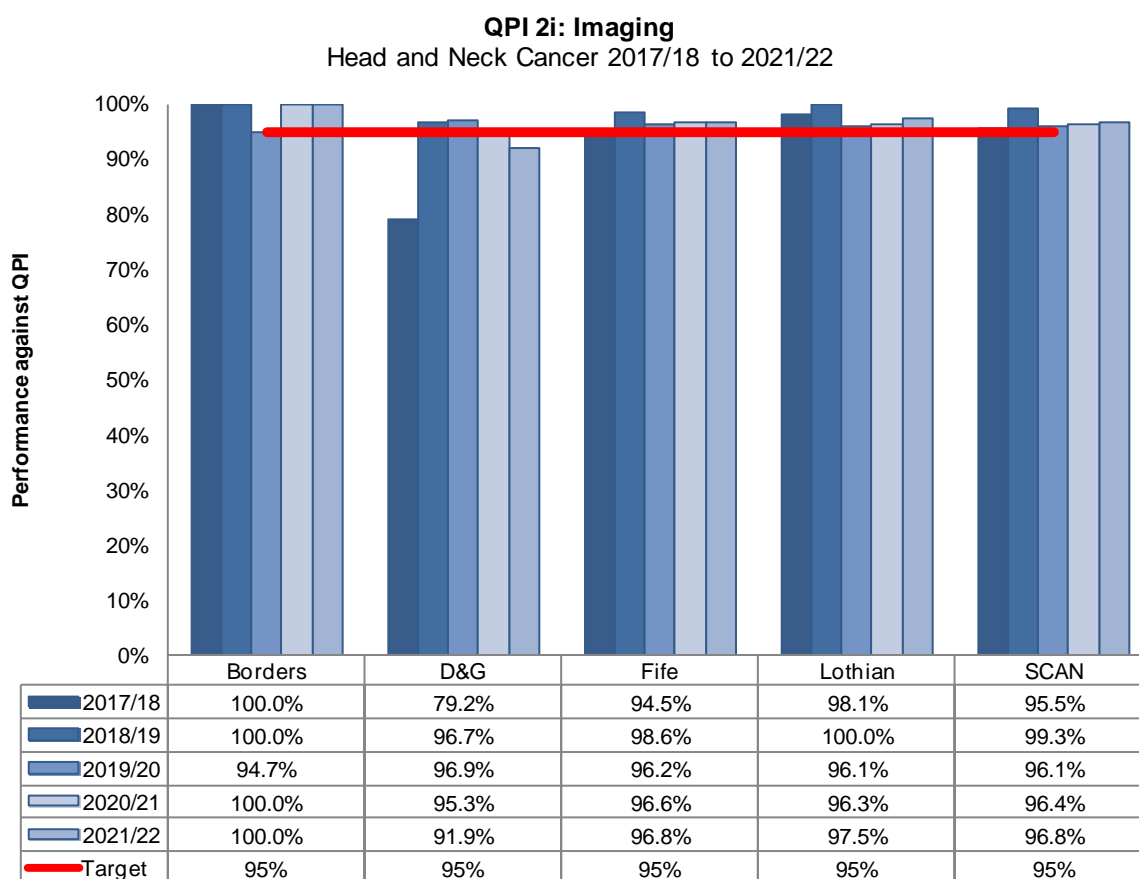
**D&G:** The target was not met showing a shortfall of 3.1% (3 cases). For these 3 patients, 1 was frail and not fit for treatment/scanning, 1 did not have a CT of the neck performed and was for Best Supportive Care (BSC), and 1 patient had a diagnosis by incidental finding; they discussed in WoSCAN and a decision made that no scans were needed.

Removal of this WoSCAN discussed patient brings the % performance in this QPI up to 94.4% in D&G.

Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN and 23 Fife patients treated in NOSCAN).

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	25	41	175	261
Ineligible for this QPI	1	0	0	15	16
Numerator	19	23	39	156	237
Not Recorded for the Numerator	0	0	0	0	0
Denominator	19	25	41	160	245
Not Recorded for Exclusion	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	92.0%	100.0%	97.5%	96.7%

**Action: None identified**



**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	20	38	64	175	297
Ineligible for this QPI	1	4	3	19	27
Numerator	18	33	61	156	268
Not Recorded for Numerator	0	0	0	0	0
Denominator	19	34	61	156	270
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	1	1
% Performance	94.7%	97.1%	100.0%	100.0%	99.3%

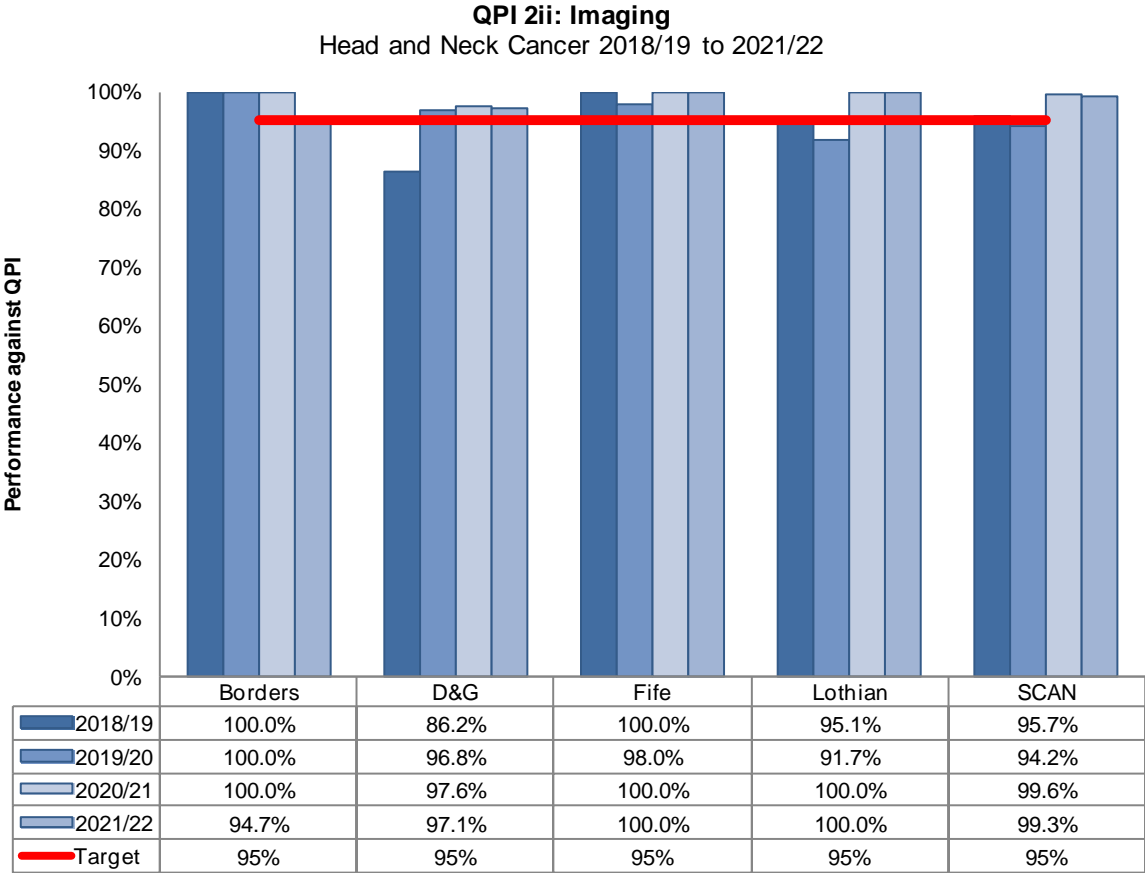
**Comments where the QPI was not met:**

**Borders:** The target was not met showing a shortfall of 0.3% (1 case). For this one patient reporting took 20 days. This period was also noted to fall over the festive period.

Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN, and 23 Fife patients treated in NOSCAN).

<b>Target 95%</b>	<b>Borders</b>	<b>D&amp;G</b>	<b>Fife</b>	<b>Lothian</b>	<b>SCAN</b>
2020-21 Cohort	20	25	41	175	261
Ineligible for this QPI	1	0	0	19	20
Numerator	18	25	41	156	240
Not Recorded for the Numerator	0	0	0	0	0
Denominator	19	25	41	156	241
Not Recorded for Exclusion	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	94.7%	100.0%	100.0%	100.0%	99.1.7%

**Action: None identified**



QPI 2(ii) was not reported in Year 4 (2017/18) due to first formal review changes.



**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	20	38	64	175	297
Ineligible for this QPI	0	1	1	8	10
Numerator	20	36	62	165	283
Not Recorded for the Numerator	0	0	0	0	0
Denominator	20	37	63	167	287
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	0	0
% Performance	100.0%	97.3%	98.4%	98.8%	98.6%

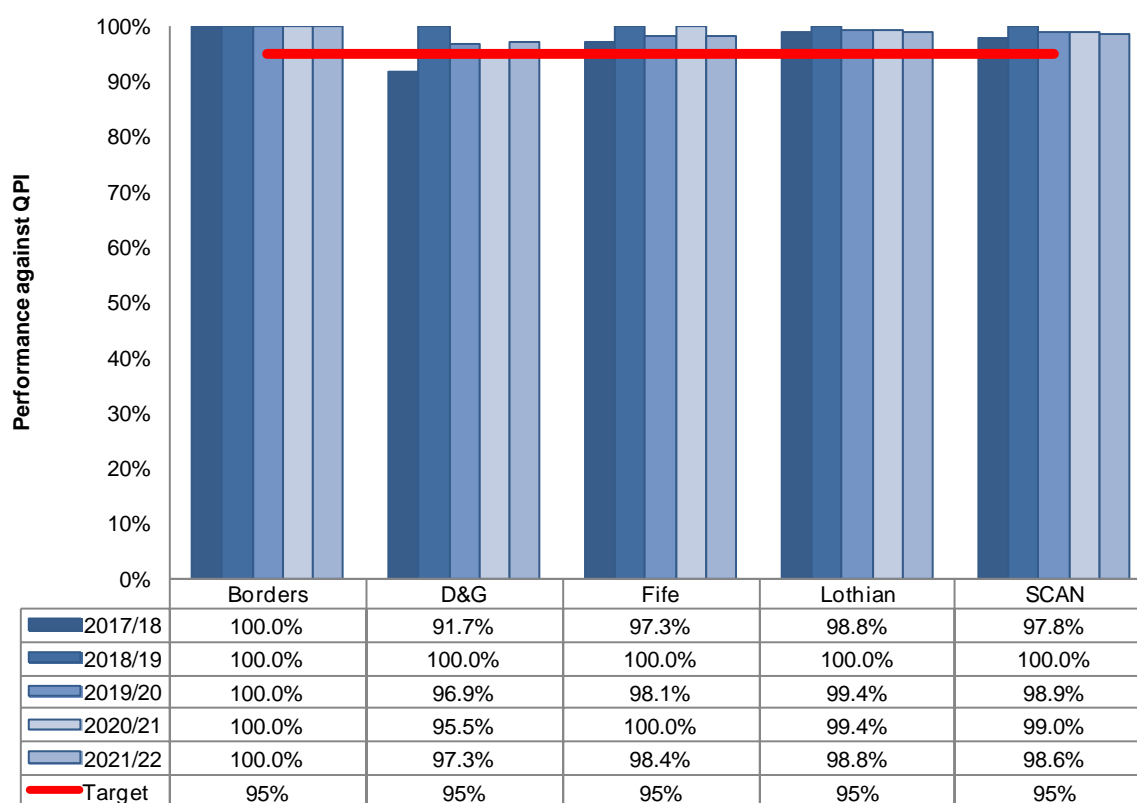
**Comments:**

**The target was met by all Boards**

Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN, and 23 Fife patients treated in NOSCAN).

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	25	41	175	261
Ineligible for this QPI	0	0	1	8	9
Numerator	20	24	40	165	249
Not Recorded for the Numerator	0	0	0	0	0
Denominator	20	25	40	167	252
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	0	0
% Performance	100.0%	96.0%	100.0%	98.8%	98.8%

**QPI 3: Multi-Disciplinary Team Meeting (MDT)**  
 Head and Neck Cancer 2017/18 to 2021/22



## 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

Exclusions = Patients undergoing supportive care only

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	38	64	175	297
Ineligible for this QPI	15	28	48	116	207
Numerator	5	10	12	45	72
Not Recorded for Numerator	0	0	4	0	4
Denominator	5	10	16	59	90
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	2	0	1	3
% Performance	100.0%	100.0%	75.0%	76.3%	80.0%

#### Comments where the QPI was not met:

**Fife:** The target was not met showing a shortfall of 20.0% (4 cases). For these 4 patients data was not recorded. They were discussed in the NOSCAN (Tayside) MDT and smoking cessation was not documented.

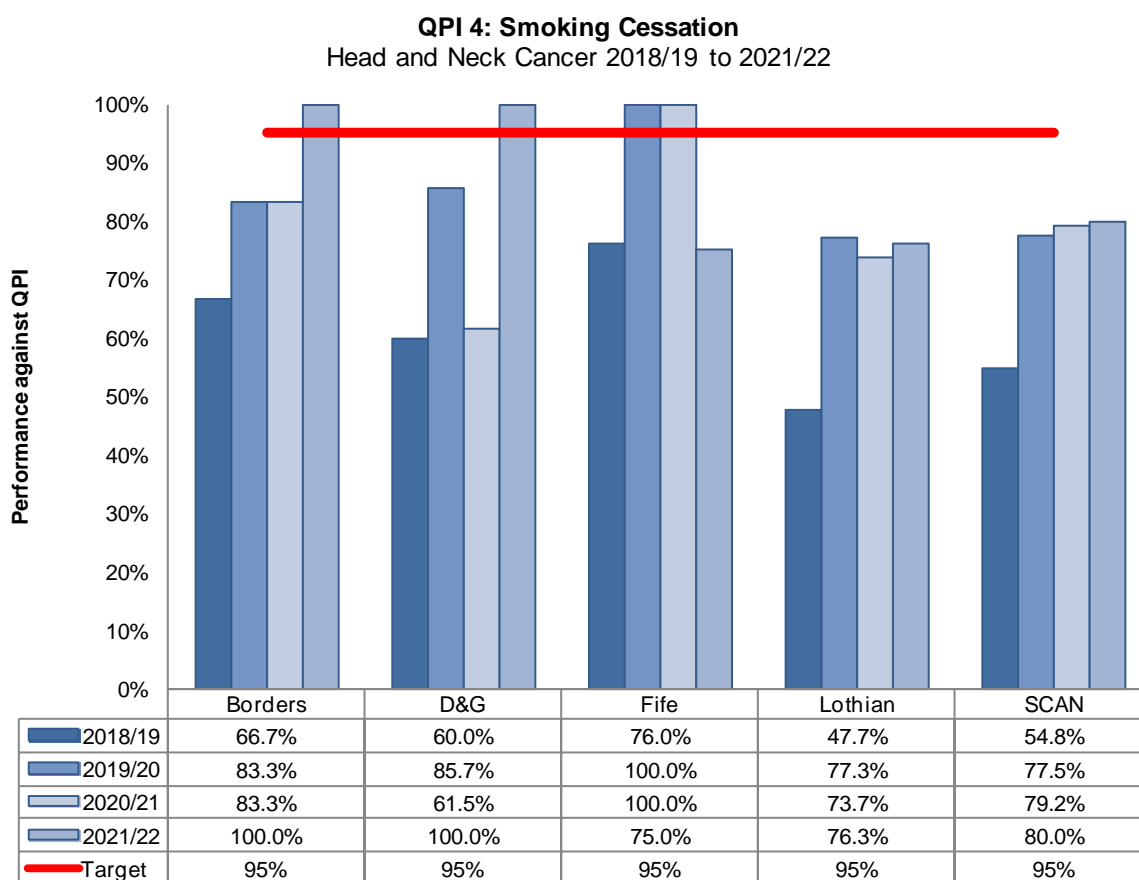
**Lothian:** The target was not met showing a shortfall of 18.7% (14 cases). For these 14 patients, 9 stopped smoking themselves between the time of first referral for investigation of potential cancer and MDT; a smoking cessation referral was therefore not offered. A further 2 patients were offered referral to smoking cessation after first treatment, 2 patients declined all interventions and treatment (referral therefore not offered), and for 1 patient referral was not offered.

On review, it is noted that removal of the 9 patients who stopped smoking themselves between time of referral into secondary care and MDT discussion would bring Lothian's performance up to 90%. Additionally results in this QPI have shown improvement year on year.

Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN, and 23 Fife patients treated in NOSCAN).

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	25	41	175	261
Ineligible for this QPI	15	18	32	116	181
Numerator	5	7	9	45	66
Not Recorded for the Numerator	0	0	0	0	0
Denominator	5	7	9	59	80
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	1	1
% Performance	100.0%	100.0%	100.0%	76.3%	82.5%

**Action:** None Identified. Awaiting publication of the Healthcare Improvement Scotland (HIS) review which included this QPI.



This QPI was not reported in Year 4 (2017/18). For Year 6 reporting the QPI was also amended to allow BSC patients who are offered referral on the same day as treatment to pass this QPI. Following the second formal review during Year 7 (2020/21), an exclusion category was also added for patients undergoing BSC.

**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 (no exclusions)

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	38	64	175	297
Ineligible for this QPI	9	12	20	61	102
Numerator	7	21	40	86	154
Not Recorded for Numerator	4	5	4	28	41
Denominator	11	26	44	114	195
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	1	0	1
% Performance	63.6%	80.8%	90.9%	75.4%	79.0%

**Comments where the QPI was not met:**

**Borders:** The target was not met showing a shortfall of 31.4% (4 cases). For these 4 patients the decision for requiring assessment was not recorded.

**D&G:** The target was not met showing a shortfall of 14.2% (5 cases). For these 5 patients the decision for requiring assessment was not recorded.

**Fife:** The target was not met showing a shortfall of 4.1% (4 cases). For these 4 patients the decision for requiring assessment was not recorded. All patients were discussed at the Lothian MDT. A further 1 patient was not in the denominator due to treatment intent not being recorded (not recorded for the denominator).

**Lothian:** The target was not met showing a shortfall of 19.6% (28 cases). For these 28 patients the decision for requiring assessment was not recorded.

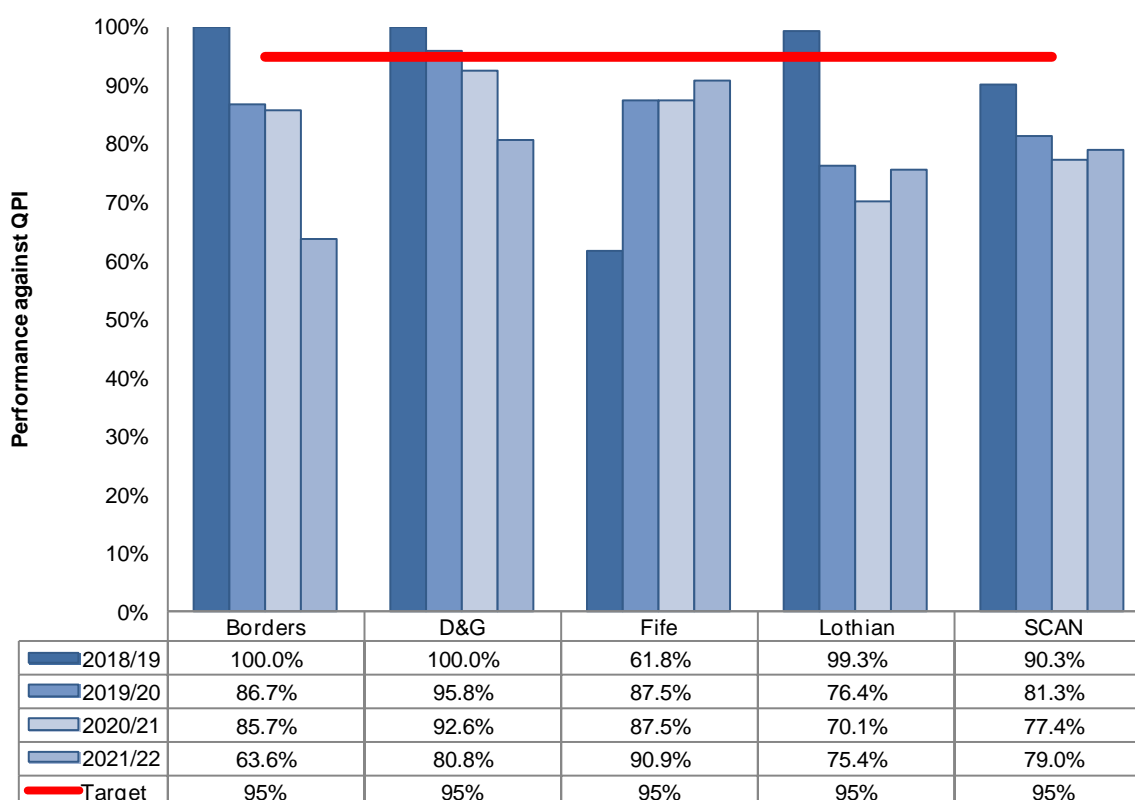
During the course of this cohort year, a change in the recording process for dental assessment decisions was made at the Lothian MDT. From February 2022 when this change was implemented, the data shows a significant improvement in recording. The full impact of this change is not seen in the above QPI results as the change was implemented partway through the cohort year. The number of 'Not Recorded for Numerator' cases is therefore expected to drop next year for all regions.

Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN, and 23 Fife patients treated in NOSCAN).

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	25	41	175	261
Ineligible for this QPI	9	6	14	61	90
Numerator	7	14	23	86	130
Not Recorded for the Numerator	4	5	4	28	41
Denominator	11	19	27	114	171
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	0	0
% Performance	63.6%	73.7%	85.2%	75.4%	76.0%

**Action:** None identified. Change in Lothian data recording processes expected to improve results next year.

**QPI 5 (i): Oral and Dental Rehabilitation Plan**  
Head and Neck Cancer 2018/19 to 2021/22



Following the second formal review during Year 7 (2020/21), QPI 5(i) was updated and the denominator changed from all those undergoing active treatment to all those undergoing treatment with curative intent. The exclusion of patients with T1/T2/N0 larynx cancer was also removed. Additionally, this QPI was not reported in Year 4 (2017/18).

**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 (no exclusions)

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	38	64	175	297
Ineligible for this QPI	13	20	34	105	172
Numerator	7	16	29	62	114
Not Recorded for Numerator	0	0	1	0	1
Denominator	7	18	30	71	126
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	8	8	12	61	89
% Performance	100.0%	88.9%	96.7%	87.3%	90.5%

**Comments where the QPI was not met:**

**D&G:** The target was not met showing a shortfall of 6.1% (2 cases). For these 2 patients, 1 patient was assessed after first treatment and 1 patient did not have a dental appointment and was edentulous.

**Lothian:** The target was not met showing a shortfall of 7.7% (9 cases). For these 9 cases who were identified as requiring a pre-treatment dental assessment but that were not seen, 5 were later noted as edentulous and did not require to be assessed. 4 patients were not assessed pre-treatment (1 patient had dental delayed and was then missed, 1 patient had complex drug misuse issues, 1 was for a WLE of the tongue and local approach was that there was no dental assessment required).

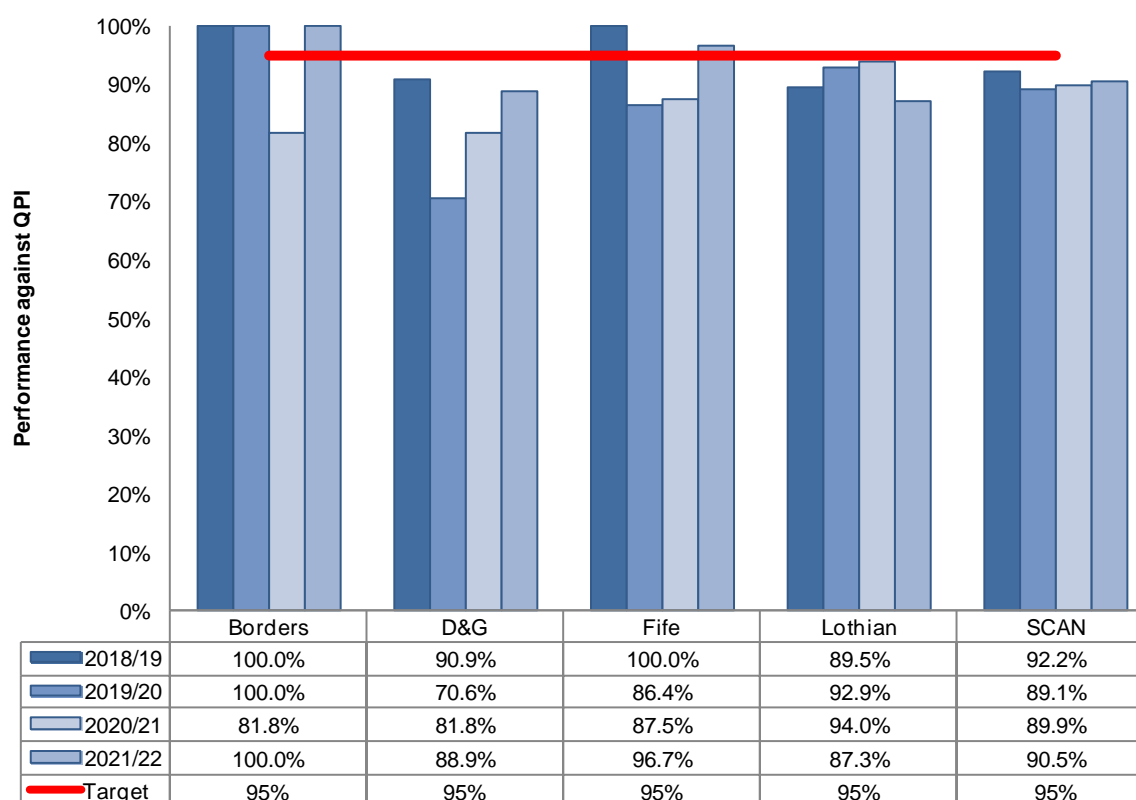
During the course of this cohort year, a change in the recording process for dental assessment decisions was made at the Lothian MDT. From February 2022 when this change was implemented the data shows a significant improvement in recording. The full impact of this change is not seen in the above QPI results as the change was implemented partway through the cohort year. The number of 'Not Recorded for Denominator' cases is therefore expected to drop next year for all regions.

Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN, and 23 Fife patients treated in NOSCAN).

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	25	41	175	261
Ineligible for this QPI	13	11	24	105	153
Numerator	7	13	16	62	98
Not Recorded for the Numerator	0	0	1	0	1
Denominator	7	14	17	71	109
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	8	8	11	61	88
% Performance	100.0%	100.0%	94.1%	87.3%	89.9%

**Action:** None identified. Change in Lothian data recording processes expected to improve results next year.

**QPI 5 (ii): Oral and Dental Rehabilitation Plan**  
Head and Neck Cancer 2018/19 to 2021/22



Following the second formal review during Year 7 (2020/21), QPI 5(ii) was updated and the exclusion of patients with T1/T2/N0 larynx cancer was removed. Additionally, this QPI was not reported in Year 4 (2017/18).



**QPI 6(i): 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	20	38	64	175	297
Ineligible for this QPI	0	0	0	0	0
Numerator	18	33	46	163	260
Not Recorded for Numerator	0	0	13	0	13
Denominator	20	38	64	175	297
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	90.0%	86.8%	71.9%	93.1%	87.5%

**Comments where the QPI was not met:**

**Borders:** The target was not met showing a shortfall of 5.0% (2 cases). Screening was not performed for these 2 patients.

**D&G:** The target was not met showing a shortfall of 8.2% (5 cases). Of these 5 patients, 2 patients were MUST screened after first treatment, 1 patient was already under the long term care of dietitians, 1 patient was referred to palliative care and 1 patient was for BSC and their GP referred them to a dietitian.

**Fife:** The target was not met showing a shortfall of 23.1% (18 cases). For 13 patients MUST screening was not performed. 12 of these patients were discussed in NOSCAN (Tayside) MDT and all 12 had dietetic input in Fife, 1 patient in Lothian MDT was confirmed as having dietetic input from both Lothian and Fife dietitians. For a further 5 patients screening was not performed (3 of these patients were discussed in NOSCAN (Tayside) MDT, 1 patient declined screening and died shortly after diagnosis, and 1 patient did not attend the MDT clinic).

15 out of 18 patients who do not have a recorded MUST were treated in Tayside. The majority of patients were seen by the Fife dietitian but this information has not been captured as they did not have a MUST recorded.

**Lothian:** The target was not met showing a shortfall of 1.9% (12 cases). Of these 12 cases, screening was not performed for 11 patients, and 1 patient declined all interventions.

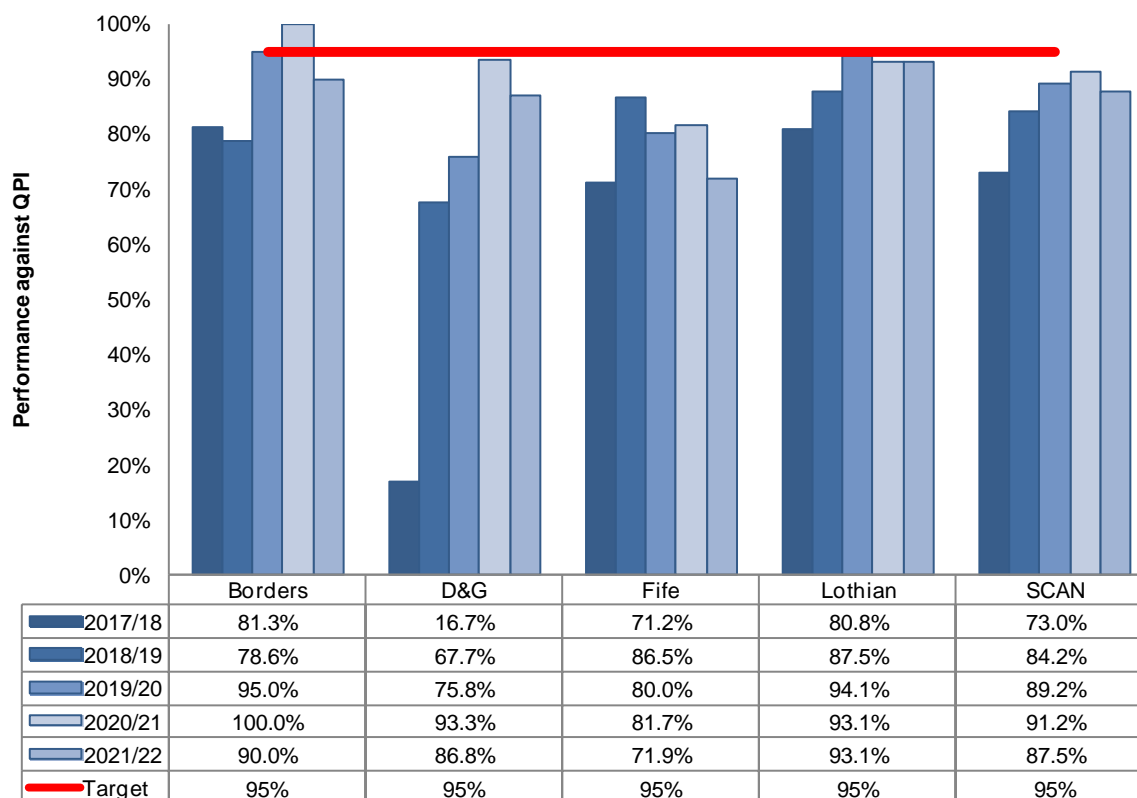
Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN, and 23 Fife patients treated in NOSCAN).

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	25	41	175	261
Ineligible for this QPI	0	0	0	0	0
Numerator	18	24	38	163	243
Not Recorded for the Numerator	0	0	2	0	2
Denominator	20	25	41	175	261

Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	0	0
% Performance	90.0%	96.0%	92.7%	93.1%	93.1%

**Action:** Patient’s pathways in which screening was not performed to examined, and efforts to be made to assess similar patients in future. Fife MDT to record MUST score on the MDT local TrakCare system.

**QPI 6(i): Nutritional Screening**  
Head and Neck Cancer 2017/18 to 2021/22



**QPI 6(ii): Nutritional Screening Target = 90%**

Numerator = Number of patients with head and neck cancer at high risk of malnutrition (MUST Score of 2 or more) who are assessed by a specialist dietitian.

Denominator = All patients with head and neck cancer at high risk of malnutrition (MUST Score of 2 or more) (No exclusions).

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	38	64	175	297
Ineligible for this QPI	16	31	58	120	225
Numerator	4	7	4	48	63
Not Recorded for Numerator	0	0	0	0	0
Denominator	4	7	6	55	72
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	1	13	0	0
% Performance	100.0%	100.0%	66.7%	87.3%	87.5%

**Comments where the QPI was not met:**

**Fife:** The target was not met showing a shortfall of 23.3% (2 cases). For these 2 patients assessment did not occur but dietetic input was provided or offered to both patients. Additionally, for 13 patients a MUST score was not recorded (12 of these patients were discussed in NOSCAN (Tayside) MDT and all had dietetic input in Fife).

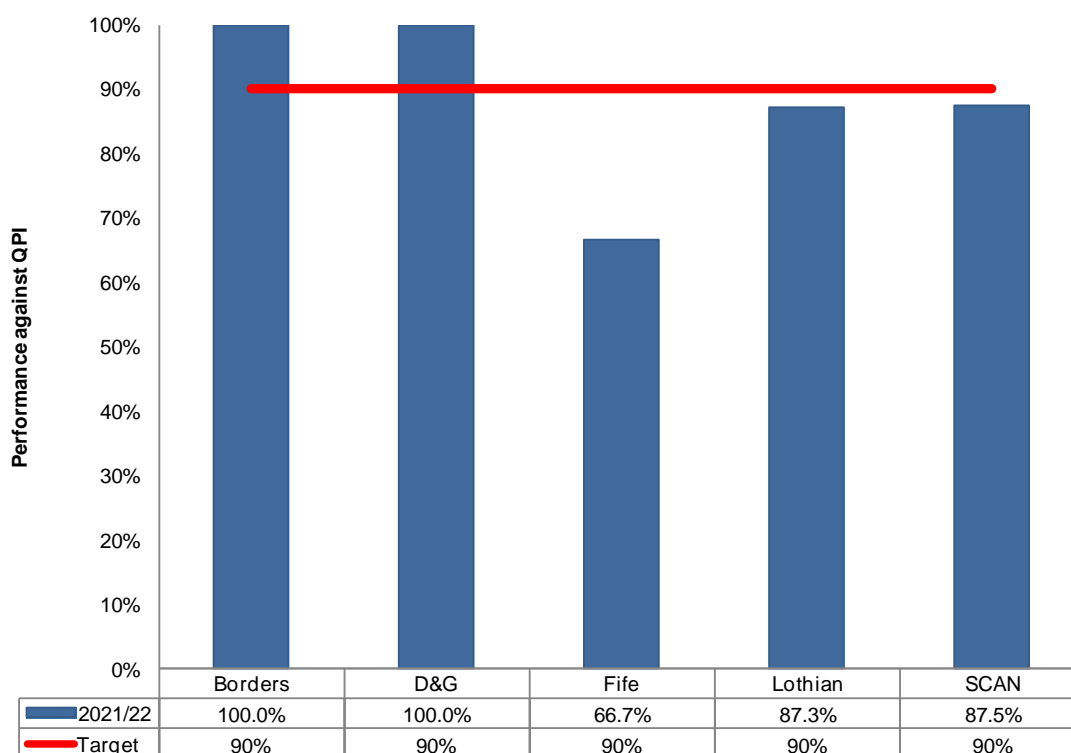
**Lothian:** The target was not met showing a shortfall of 2.7% (7 cases). Of these 7 cases, 5 were for BSC, 1 case was treated palliatively and 1 case curatively. Following review, Lothian Dietetics noted that clinical judgement was likely used and patients were likely not referred to dietetics as on a palliative/BSC pathway.

Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN, and 23 Fife patients treated in NOSCAN).

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	25	41	175	261
Ineligible for this QPI	16	20	35	120	191
Numerator	4	5	4	48	61
Not Recorded for the Numerator	0	0	0	0	0
Denominator	4	5	6	55	70
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	1	1	0	0
% Performance	100.0%	100.0%	66.7%	87.3%	87.1%

**Action:** Decision for not referring a patient to dietetics due to a palliative/BSC pathway should be documented.

**QPI 6(ii): Nutritional Screening**  
Head and Neck Cancer 2021/22



**QPI 6(iii): Nutritional Screening Target = 90%**

Numerator = Number of patients with oral, pharyngeal or laryngeal cancer undergoing treatment with curative intent who are assessed by a specialist dietitian.

Denominator = All patients with oral, pharyngeal or laryngeal cancer undergoing treatment with curative intent. (No exclusions)

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	38	64	175	297
Ineligible for this QPI	10	14	20	68	112
Numerator	9	20	42	93	164
Not Recorded for Numerator	0	0	0	0	0
Denominator	10	24	44	107	185
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	1	0	1
% Performance	90.0%	83.3%	95.5%	86.9%	88.6%

**Comments where the QPI was not met:**

**D&G:** The target was not met showing a shortfall of 6.7% (4 cases). Of these 4 patients who were not assessed, for 2 patients dietetic input was not needed upon review (1 patient had weight monitored in OMFS follow up clinic), 1 patient declined appointments, and 1 patient had no dietetics referral sent.

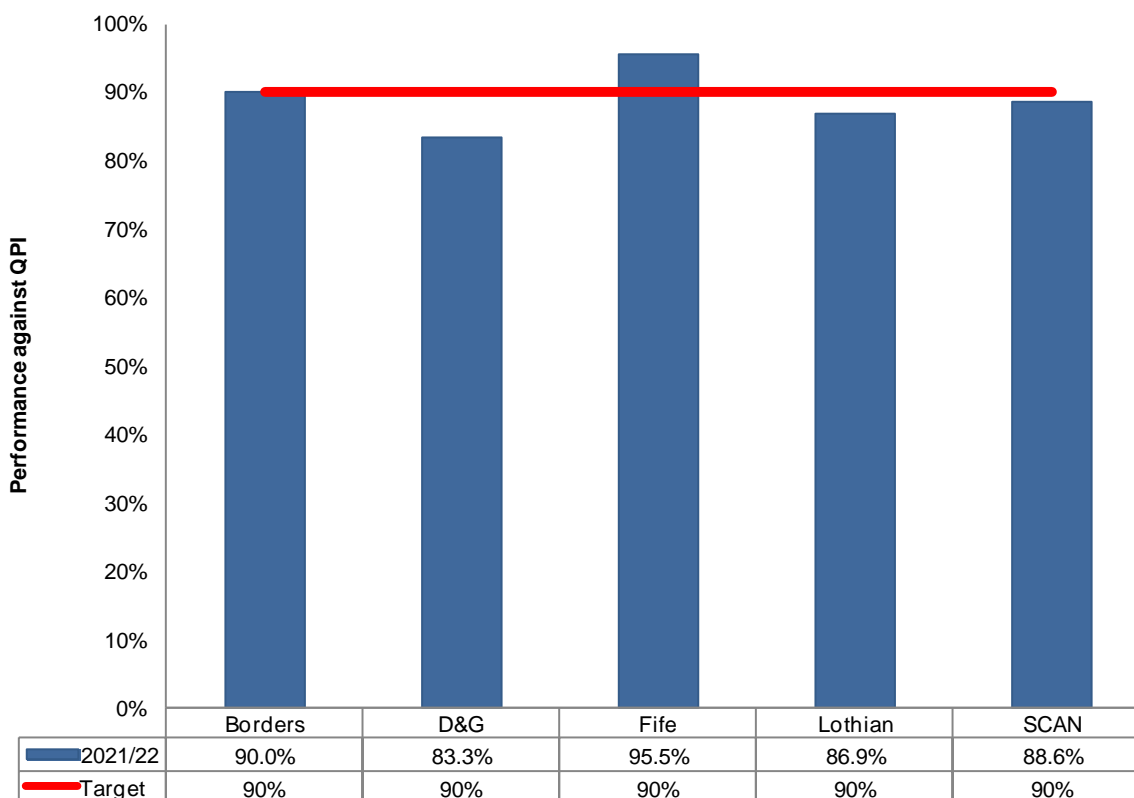
**Lothian:** The target was not met showing a shortfall of 3.1% (14 cases). Of these 14 patients who were not assessed, 13 patients had a MUST of ‘0’ (low risk) pre-treatment, and 1 patient had a pre-treatment MUST of ‘2’ (high risk). Additionally, of these 14 patients, 12 were surgical patients (4 laser surgery), 1 patient was for radical radiotherapy and no dietetic referral was sent for this patient, and 1 patient was subsequently moved onto a palliative pathway.

Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN, and 23 Fife patients treated in NOSCAN).

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	25	41	175	261
Ineligible for this QPI	10	7	14	68	99
Numerator	9	17	25	93	144
Not Recorded for the Numerator	0	0	0	0	0
Denominator	10	18	27	107	162
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for the Denominator	0	0	0	0	0
% Performance	90.0%	94.4%	92.6%	86.9%	88.9%

**Action:** Issue in Lothian with surgical patients attending St John’s not being referred to dietetics to be addressed

**QPI 6(iii): Nutritional Screening**  
Head and Neck Cancer 2021/22



**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	20	38	64	175	297
Ineligible for this QPI	10	14	19	72	111
Numerator	4	19	43	90	156
Not Recorded for Numerator	0	0	0	0	0
Denominator	10	24	45	103	182
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	1	0	0
% Performance	40.0%	79.2%	95.6%	87.4%	85.7%

**Comments where the QPI was not met:**

**Borders:** The target was not met showing a shortfall of 50.0% (6 cases). Of these 6 patients, all were not seen pre-treatment by SLT.

During the course of this cohort year, provision was made for Borders patients to see Specialist Speech and Language Therapists locally in the Borders. The full impact of this change is not seen in the above QPI results as the change was implemented partway through the year. Borders QPI performance is expected therefore to improve again in the following cohort and no further action is identified for Borders.

**D&G:** The target was not met showing a shortfall of 10.8% (5 cases). Of these 5 patients, 2 did not require SLT intervention, 2 were seen by SLT but after treatment had started, and 1 patient was not seen by SLT.

**Lothian:** The target was not met showing a shortfall of 2.6% (13 cases). Of these 13 patients who were not seen by SLT prior to treatment, 9 were surgically treated patients who were not seen by SLT prior to surgery, 3 patients declined a pre-treatment appointment with SLT, and 1 patient was not seen by SLT prior to starting chemoradiotherapy treatment.

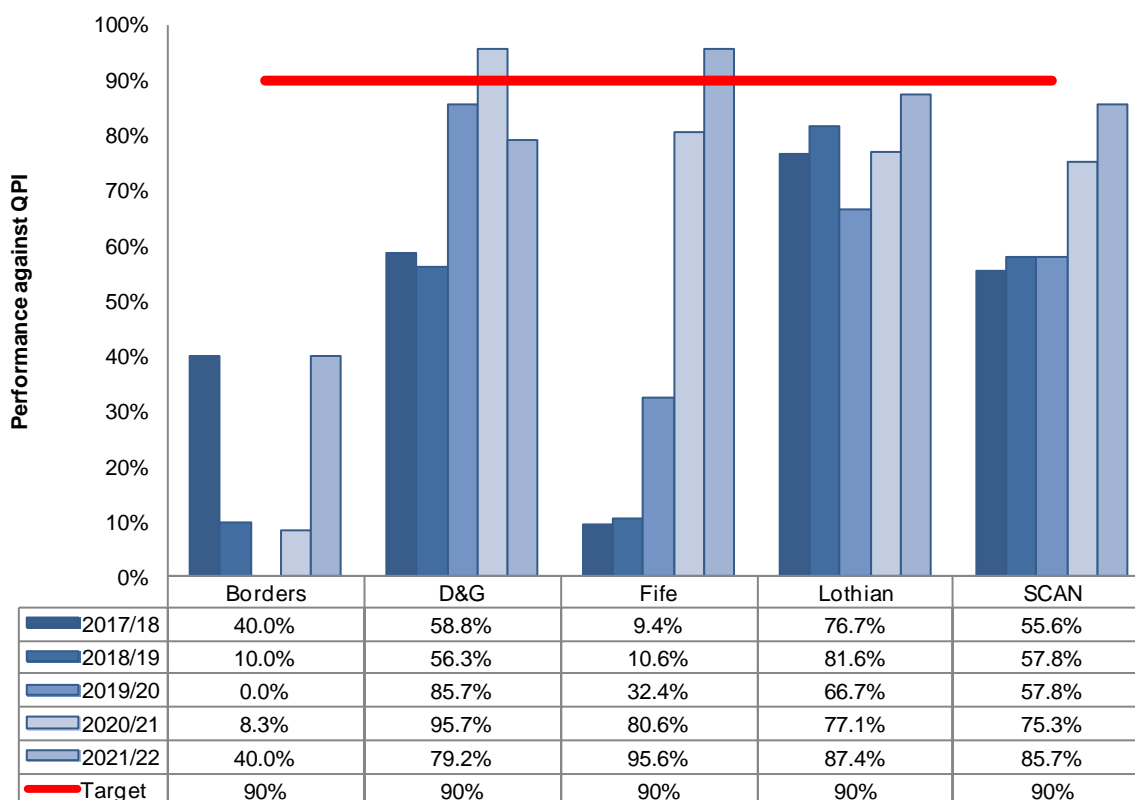
At the point of writing this report interim data for the Year 2022/23 shows Lothian's percentage performance at 92.5%

**Action:** None identified. Additional resources have been appointed and the impact of this will be fully assessed next year

Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN, and 23 Fife patients treated in NOSCAN).

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	25	41	175	261
Ineligible for this QPI	10	7	12	72	101
Numerator	4	15	27	90	136
Not Recorded for Numerator	0	0	0	0	0
Denominator	10	18	29	103	160
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	40.0%	83.3%	93.1%	87.4%	85.0%

**QPI 7: Specialist Speech and Language Therapist Access**  
Head and Neck Cancer 2017/18 to 2021/22



### 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

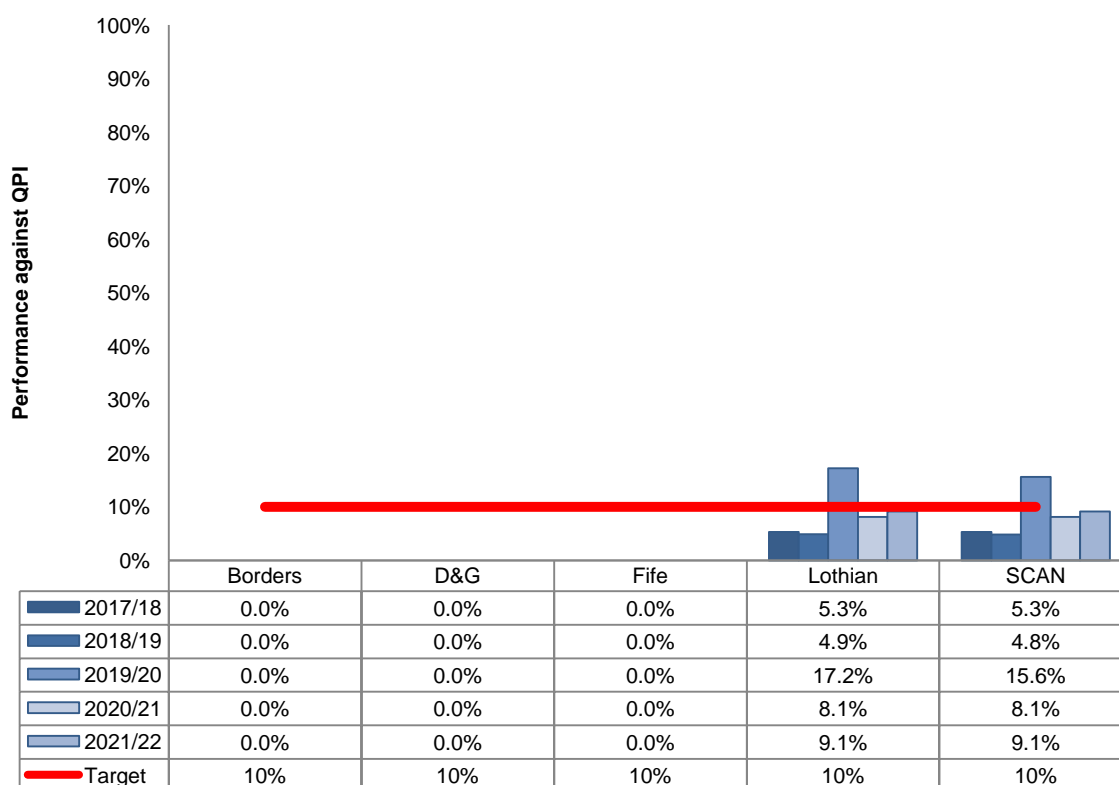
Target <10%	Borders	D&G (New Royal Infirmary)	Fife (Victoria Hospital)	Lothian (St Johns)	SCAN
Numerator	0	0	0	4	4
Not Recorded for Numerator	0	0	0	0	0
Denominator	0	0	0	44	44
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	N/A	N/A	N/A	9.1%	9.1%

% Performance in previous	Borders	D&G	Fife	Lothian	SCAN
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%
2020/21	N/A	N/A	N/A	8.1%	8.1%

#### Comments:

All Boards reporting data met the target. All death are reviewed at M&M meetings

**QPI 8: Surgical Margins**  
Head and Neck Cancer 2017/18 to 2021/22





## 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 (St John's)	SCAN
Numerator	0	0	0	1	1
Not Recorded for Numerator	0	0	0	0	0
Denominator	0	0	0	67	67
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	N/A	N/A	N/A	1.5%	1.5%

% Performance in	Borders	D&G	Fife	Lothian	SCAN
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%
2020/21	N/A	N/A	N/A	0.0%	0.0%

### Comments:

All Boards reporting data met the target

### 90 day Mortality (Surgery)

Target <5%	Borders	D&G (New Royal Infirmary)	Fife (Victoria Hospital)	Lothian (St John's)	SCAN
Numerator	0	0	0	1	1
Not Recorded for Numerator	0	0	0	0	0
Denominator	0	0	0	65	65
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	N/A	N/A	N/A	1.5%	1.5%

Lothian – 90 days since treatment not reached by 2 cases

% Performance in	Borders	D&G	Fife	Lothian	SCAN
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%
2020/21	N/A	N/A	N/A	1.6%	1.6%

#### Comments:

**All Boards reporting data met the target**

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

Target <5%

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

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

#### 30 day Mortality (Radiotherapy)

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	38	64	175	297
Ineligible for this QPI	19	4	54	148	255
Numerator	0	0	0	0	0
Not Recorded for Numerator	0	0	0	0	0
Denominator	1	4	10	27	42
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					
2017/18	0.0%	0.0%	0.0%	6.3%	3.6%
2018/19	0.0%	N/A	0.0%	6.3%	4.2%
2019/20	0.0%	0.0%	0.0%	4.2%	2.5%
2020/21	0.0%	33.3%	0.0%	0.0%	2.1%

#### Comments:

All Boards reporting data met the target

#### 90 day Mortality (Radiotherapy)

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	38	64	175	297
Ineligible for this QPI	19	34	54	152	259
Numerator	0	0	0	0	0
Not Recorded for Numerator	0	0	0	0	0
Denominator	1	3	7	23	34
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%

D&G – 90 days since treatment not reached by 1 case

Fife – 90 days since treatment not reached by 3 cases

Lothian – 90 days since treatment not reached by 4 cases

% Performance in previous years					
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%
2020/21	0.0%	33.3%	0.0%	6.9%	6.5%

#### Comments:

All Boards reporting data met the target

### 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	20	38	64	175	297
Ineligible for this QPI	16	26	46	144	232
Numerator	0	0	0	0	0
Not Recorded for Numerator	0	0	0	0	0
Denominator	4	12	18	31	65
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%

4 patients from Fife were treated outwith SCAN in NOSCAN

% Performance in previous years	Borders	D&G	Fife	Lothian	SCAN
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%
2020/21	0.0%	0.0%	0.0%	0.0%	0.0%

#### Comments:

**All Boards met the target**

#### 90 day mortality (Chemoradiotherapy)

Target <5%	Borders	D&G	Fife	Lothian	SCAN
2020-21 Cohort	20	38	64	175	297
Ineligible for this QPI	16	26	46	146	234
Numerator	0	0	0	0	0
Not Recorded for Numerator	0	0	0	0	0
Denominator	4	9	13	29	55
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%

D&G – 90 days since treatment not reached by 3 cases

Fife – 90 days since treatment not reached by 5 cases

Lothian – 90 days since treatment not reached by 2 cases

% Performance in previous years	Borders	D&G	Fife	Lothian	SCAN
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%
2020/21	0.0%	0.0%	0.0%	0.0%	0.0%

#### Comments:

**All Boards met the target**

**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 SCR data and Cancer Registry data (5 year average of case ascertainment 2016-2020)

Target 15%	Borders	D&G	Fife	Lothian	SCAN
Numerator	8	14	15	56	93
Denominator	21	38	71	202	332
<b>% Performance</b>	<b>38.1%</b>	<b>36.8%</b>	<b>21.1%</b>	<b>27.7%</b>	<b>28.0%</b>

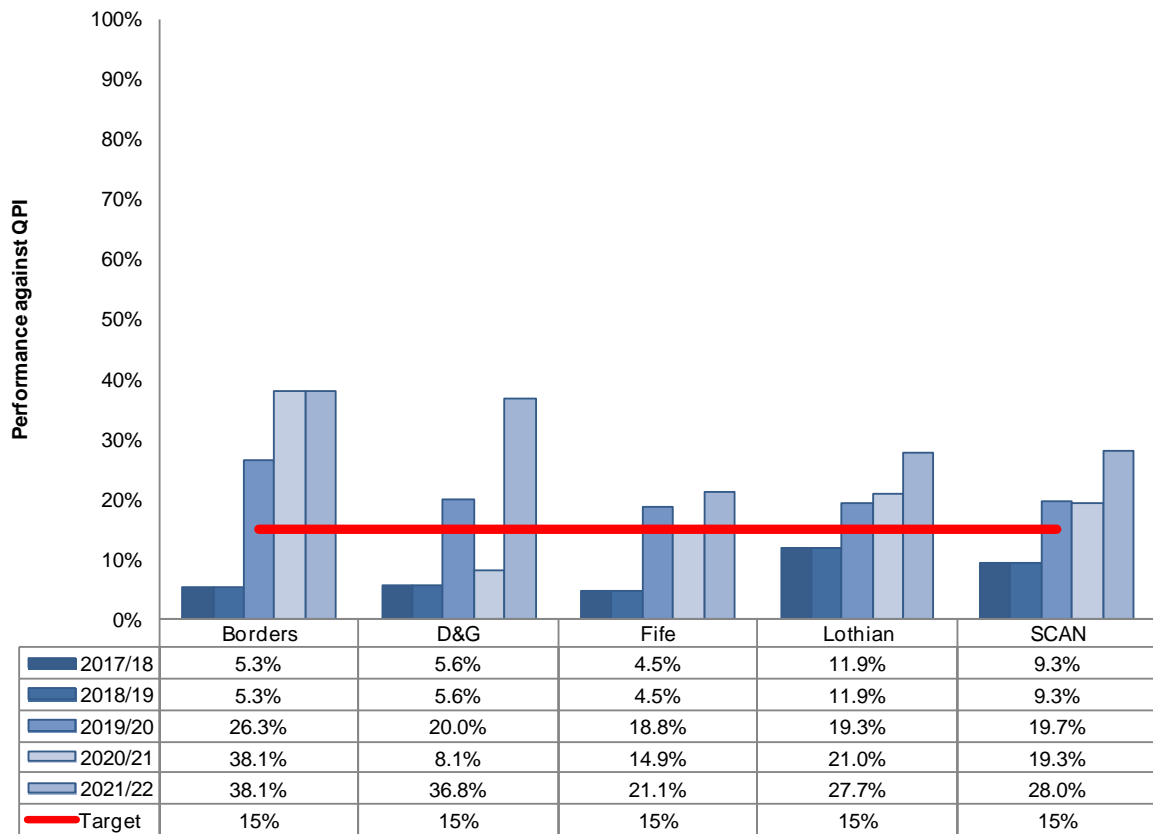
Trials in 2021	Trial Type	Numbers Recruited
CompARE	Interventional	11
SR1171	Translational	46
PATHOS	Interventional	2
PETNECK2	Interventional	21
Biobank SR1418	Translational	7
Cell free DNA	Translational	45
SCCAMP V1.0	Translational	2
CCP-Cancer UK	Translational	1
POPPY	Interventional	4
Revolution Study	Interventional	1
UPSTREAM	Translational	1

NB: some patients recruited to multiple trials

**All Boards met the target**

% 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%
2020/21	38.1%	8.1%	14.9%	21.0%	19.3%

**QPI 12: Clinical Trials**  
Head and Neck Cancer 2017/18 to 2021/22



**QPI 14: Time from Surgery to Adjuvant Radiotherapy/Chemotherapy Target 50%**

Numerator = Number of patients with squamous cell carcinoma of the oral cavity, pharynx or larynx who undergo adjuvant radiotherapy or chemoradiotherapy who commence this within 7 weeks of definitive surgical resection

Denominator = All patients with squamous cell carcinoma of the oral cavity, pharynx or larynx who undergo definitive surgical resection followed by adjuvant radiotherapy or chemoradiotherapy

Exclusions = no exclusions

Target 50%	Borders	D&G	Fife	Lothian	SCAN
2021-22 Cohort	20	38	64	175	297
Ineligible for this QPI	19	37	57	161	274
Numerator	1	1	1	7	10
Not Recorded for Numerator	0	0	0	0	0
Denominator	1	1	7	14	23
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	100.0%	14.3%	50.0%	43.5%

**Comments where QPI not met:**

**Fife:** The target was not met showing a shortfall of 35.7% (6 cases). These 6 patients had surgery in NOSCAN (Tayside). 3 patients had complications following initial surgery, 2 patients did not have a documented reason for delay, and 1 patient did not have their pathology available at the first oncology appointment.

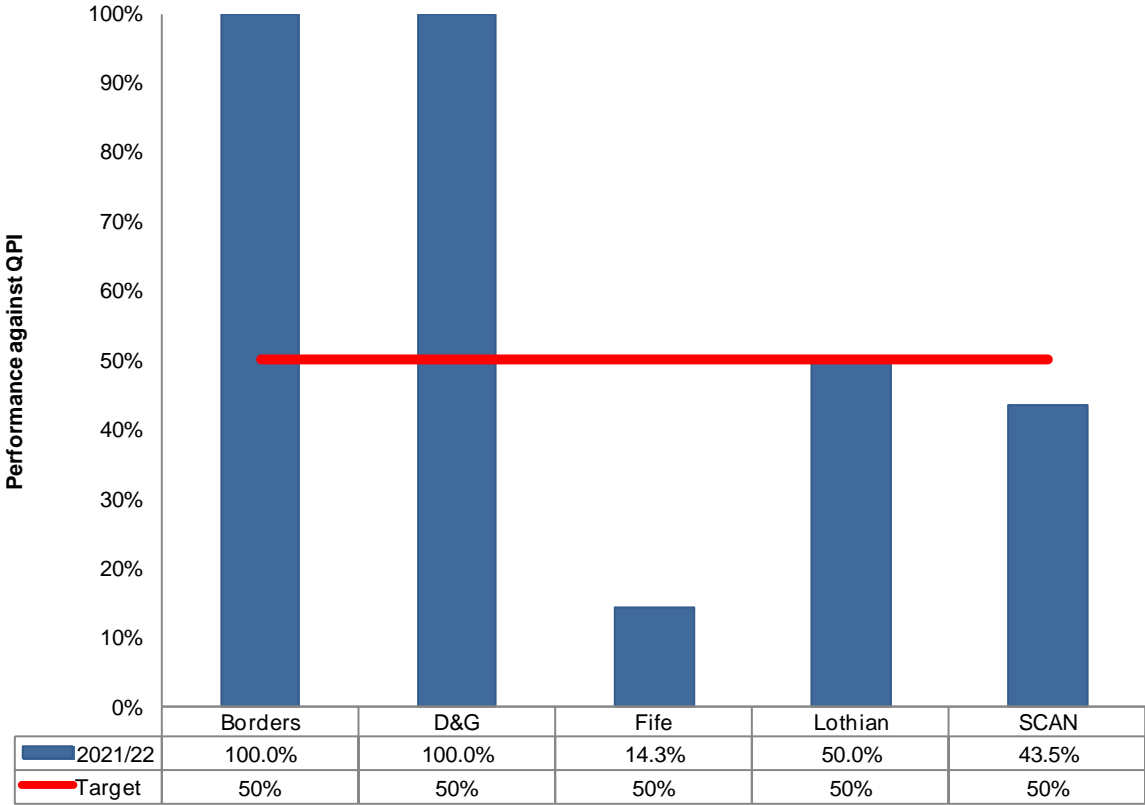
**Additional Comments:** The 7 patients in Lothian who did not meet the target were reviewed by the Oncology team and all were unavoidable delays.

**Action:** None identified for SCAN.

Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN, and 23 Fife patients treated in NOSCAN).

Target 50%	Borders	D&G	Fife	Lothian	SCAN
2021-22 Cohort	20	25	41	175	261
Ineligible for this QPI	19	24	40	161	244
Numerator	1	1	1	7	10
Not Recorded for Numerator	0	0	0	0	0
Denominator	1	1	1	14	17
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	100.0%	100.0%	50.0%	58.8%

**QPI 14: Time from Surgery to Adjuvant Radiotherapy/Chemotherapy**  
 Head and Neck Cancer 2021/22





**QPI 15: PD-L1 Combined Proportion Score (CPS) for Decision Making Target 75%**

Numerator = Number of patients with squamous cell head and neck cancer undergoing first line palliative SACT for whom PD-L1 CPS is reported within 14 days of MDT request

Denominator = All patients with squamous cell head and neck cancer undergoing first line palliative SACT

Exclusions = Patients with nasopharyngeal cancer

Target 75%	Borders	D&G	Fife	Lothian	SCAN
2021-22 Cohort	20	38	64	175	297
Ineligible for this QPI	19	37	63	166	285
Numerator	1	1	0	7	9
Not Recorded for Numerator	0	0	0	0	0
Denominator	1	1	1	9	12
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	100.0%	0.0%	77.8%	75.0%

**Comments where QPI not met:**

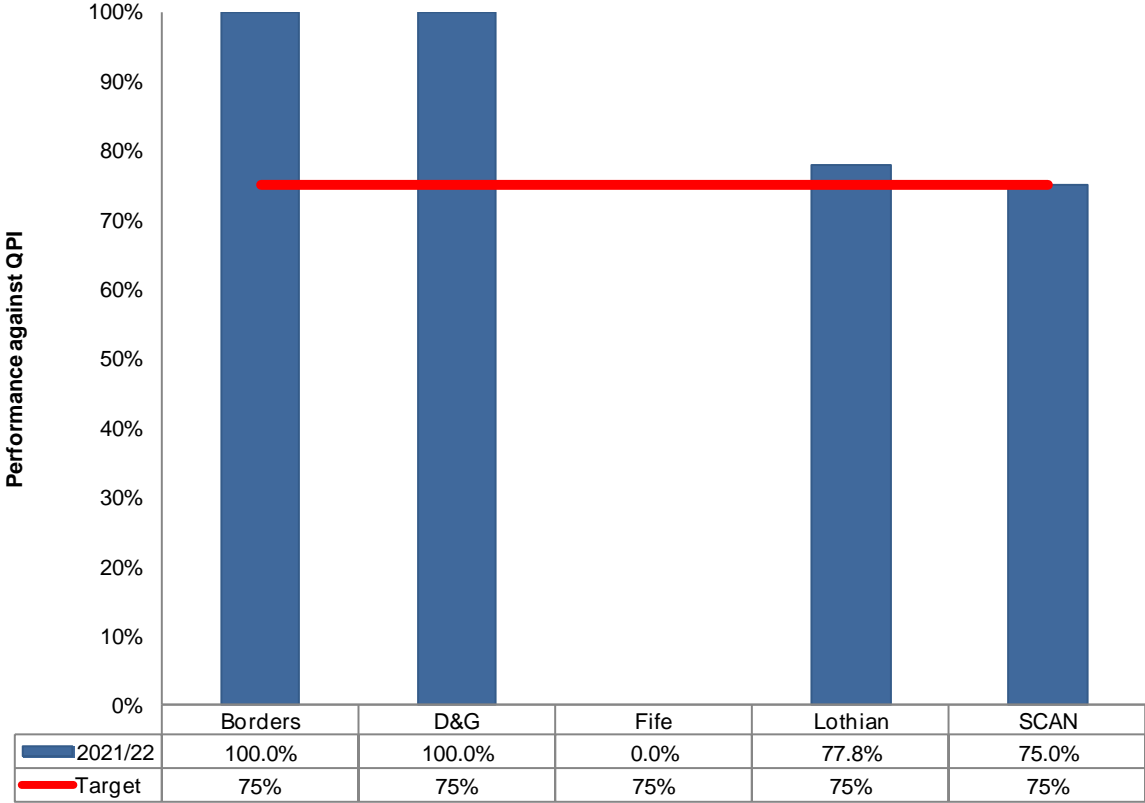
**Fife:** The target was not met showing a shortfall of 75.0% (1 case). For this 1 patient PD-L1 was not requested at the Lothian MDT.

**Action:** None identified

Some patients within this cohort were discussed and treated outwith SCAN. So as to focus only on patients discussed and treated within SCAN, the table below omits these patients (13 Dumfries patients discussed and treated in WoSCAN, and 23 Fife patients treated in NOSCAN).

Target 75%	Borders	D&G	Fife	Lothian	SCAN
2021-22 Cohort	20	25	41	175	261
Ineligible for this QPI	19	24	40	166	249
Numerator	1	1	0	7	9
Not Recorded for Numerator	0	0	0	0	0
Denominator	1	1	1	9	12
Not Recorded for Exclusions	0	0	0	0	0
Not Recorded for Denominator	0	0	0	0	0
% Performance	100.0%	100.0%	0.0%	77.8%	75.0%

**QPI 15: PD-L1 Combined Proportion Score (CPS) for Decision Making**  
 Head and Neck Cancer 2021/22



## KEY CATEGORIES

**Table 1: Gender**

Total Patients Diagnosed	Male			Female	
Borders	20	13	65.0%	7	35.0%
D&G	38	19	50.0%	19	50.0%
Fife	64	42	65.6.0%	22	34.3%
Lothian	175	123	70.3%	52	29.7%
<b>SCAN</b>	<b>297</b>	<b>197</b>	<b>100.0%</b>	<b>100</b>	<b>100.0%</b>

**Table 2: Age at Diagnosis**

Age	Borders		D&G		Fife		Lothian		SCAN	
<45	1	5.0%	1	2.63%	4	6.3%	9	5.1%	<b>15</b>	5.1%
45-49	1	5.0%	1	2.63%	6	9.38%	5	2.9%	<b>13</b>	4.4%
50-54	1	5.0%	4	10.5%	5	7.8%	13	7.4%	<b>23</b>	7.7%
55-59	2	10.0%	7	18.4%	9	14.1%	23	13.1%	<b>41</b>	13.8%
60-64	3	15.0%	6	15.8%	6	9.4%	25	14.3%	<b>40</b>	13.5%
65-69	3	15.0%	7	18.4%	13	20.3%	33	18.9%	<b>56</b>	18.9%
70-74	4	20.0%	4	10.5%	10	15.6%	26	14.9%	<b>44</b>	14.8%
75-79	2	10.0%	2	5.3%	8	12.5%	22	12.6%	<b>34</b>	11.5%
80-84	2	10.0%	4	10.5%	1	1.6%	11	6.3%	<b>18</b>	6.1%
85+	1	5.0%	2	5.3%	2	3.1%	8	4.6%	<b>13</b>	4.4%
<b>Total</b>	<b>20</b>	<b>100.0%</b>	<b>38</b>	<b>100.0%</b>	<b>64</b>	<b>100.0%</b>	<b>175</b>	<b>100.0%</b>	<b>297</b>	<b>100.0%</b>

**Table 3: Tumour Site**

N=All patients diagnosed

Site of Tumour	Borders		D&G		Fife		Lothian		SCAN	
Larynx	1	5.0%	8	21.1%	15	23.4%	39	22.3%	<b>63</b>	21.1%
Oral Cavity	5	25.0%	12	31.6%	18	28.1%	42	24.0%	<b>77</b>	25.9%
Major Salivary Glands	1	5.0%	2	5.3%	1	1.6%	6	3.4%	<b>10</b>	3.4%
Oropharynx	10	50.0%	12	31.6%	20	31.3%	62	35.4%	<b>104</b>	35.0%
Nasopharynx	1	5.0%	0	0.0%	1	1.6%	1	0.6%	<b>3</b>	1.0%
Hypopharynx	1	5.0%	3	7.9%	5	7.8%	18	10.3%	<b>27</b>	9.1%
Nasal Cavity & Middle Ear	0	0.0%	0	0.0%	1	1.6%	5	2.9%	<b>6</b>	2.0%
Accessory Sinuses	0	0.0%	0	0.0%	2	3.1%	0	0.0%	<b>2</b>	0.7%
Bones	0	0.0%	0	0.0%	1	1.6%	0	0.0%	<b>1</b>	0.3%
Ill Defined Sites	1	5.0%	1	2.6%	0	0.0%	2	1.2%	<b>4</b>	1.4%
<b>Total</b>	<b>20</b>	<b>100.0%</b>	<b>38</b>	<b>100.0%</b>	<b>64</b>	<b>100.0%</b>	<b>175</b>	<b>100.0%</b>	<b>297</b>	<b>100.0%</b>

QPI Attainment Summary Year 7	Target%	Borders		D&G		Fife		Lothian		SCAN	
QPI 1 Pathological Diagnosis of Head and Neck Cancer	95	N 16	100%	N 42	95.5%	N 57	96.6%	N 161	96.4%	N 276	96.5%
		D 16		D 44		D 59		D 167		D 286	
QPI 2(i) Imaging	95	N 16	100%	N 41	95.3%	N 56	96.6%	N 155	96.3%	N 268	96.4%
		D 16		D 43		D 58		D 161		D 278	
QPI 2(ii) Imaging	95	N 16	100%	N 40	97.6%	N 56	100%	N 150	100%	N 262	99.6%
		D 16		D 41		D 56		D 150		D 263	
QPI 3 Multi-disciplinary Team Meeting (MDT)	95	N 16	100%	N 42	95.5%	N 59	100%	N 166	99.4%	N 283	99.0%
		D 16		D 44		D 59		D 167		D 286	
QPI 4 Smoking Cessation	95	N 5	83.3%	N 8	61.5%	N 25	100%	N 42	73.7%	N 80	79.2%
		D 6		D 13		D 25		D 57		D 101	
QPI 5(i) Oral and Dental Rehabilitation Plan	95	N 12	85.7%	N 25	92.6%	N 35	87.5%	N 89	70.1%	N 161	77.4%
		D 14		D 27		D 40		D 127		D 208	
QPI 5(ii) Oral and Dental Rehabilitation Plan	95	N 9	81.8%	N 18	81.8%	N 28	87.5%	N 78	94.0%	N 133	89.9%
		D 11		D 22		D 32		D 83		D 148	
QPI 6 Nutritional Screening	95	N 16	100%	N 42	93.3%	N 49	81.7%	N 163	93.1%	N 270	91.2%
		D 16		D 45		D 60		D 175		D 296	
QPI 7 Specialist Speech and Language Therapist Access	90	N 1	8.3%	N 22	95.7%	N 25	80.6%	N 74	77.1%	N 122	75.3%
		D 12		D 23		D 31		D 96		D 162	
QPI 8 Surgical Margins - <i>presented by hospital of surgery</i>	<10	N 0	N/A	N 0	N/A	N 0	N/A	N 3	8.1%	N 3	8.1%
		D 0		D 0		D 0		D 37		D 37	
QPI 9 Intensity Modulated Radiotherapy (IMRT)	95	N 9	100%	N 15	100%	N 24	100%	N 70	100%	N 118	100%
		D 9		D 15		D 24		D 70		D 118	
QPI 10 Post Operative Chemoradiotherapy	55	N 0	N/A	N 1	100%	N 1	33.3%	N 4	57.1%	N 6	54.5%
		D 0		D 1		D 3		D 7		D 11	
QPI 11a 30 Day Mortality (surgery) <i>presented by hospital of surgery</i>	<5	N 0	N/A	N 0	N/A	N 0	N/A	N 1	1.6%	N 1	1.6%
		D 0		D 0		D 0		D 61		D 61	
QPI 11a 90 Day Mortality (surgery) <i>presented by hospital of surgery</i>	<5	N 0	N/A	N 0	N/A	N 0	N/A	N 1	1.6%	N 1	1.6%
		D 0		D 0		D 0		D 61		D 61	
QPI 11b 30 Day Mortality (radiotherapy)	<5	N 0	0.0%	N 1	33.3%	N 0	0.0%	N 0	0.0%	N 1	2.1%
		D 5		D 3		D 10		D 29		D 47	

<b>QPI Attainment Summary Year 7</b>	<b>Target%</b>	<b>Borders</b>	<b>D&amp;G</b>	<b>Fife</b>	<b>Lothian</b>	<b>SCAN</b>
QPI 11b 90 Day Mortality (radiotherapy)	<5	N 0 D 5 0.0%	N 1 D 3 33.3%	N 0 D 9 0.0%	N 2 D 29 6.9%	N 3 D 46 6.5%
QPI 11c 30 Day Mortality (chemoradiotherapy)	<5	N 0 D 4 0.0%	N 0 D 12 0.0%	N 0 D 14 0.0%	N 0 D 29 0.0%	N 0 D 59 0.0%
QPI 11c 90 Day Mortality (chemoradiotherapy)	<5	N 0 D 4 0.0%	N 0 D 12 0.0%	N 0 D 14 0.0%	N 0 D 29 0.0%	N 0 D 59 0.0%
Clinical Trial QPI NB: N = patients consented to Trials and on SCRN database, D = 5 year average Cancer Registry Data	15	N 8 D 21 38.1%	N 3 D 37 8.1%	N 10 D 67 14.9%	N 42 D 200 21.0%	N 63 D 327 19.3%

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

QPI Attainment Summary Years 4-6		Borders			D&G			Fife			Lothian			SCAN		
Target %		Yr4	Yr5	Yr6	Yr4	Yr5	Yr6	Yr4	Yr5	Yr6	Yr4	Yr5	Yr6	Yr4	Yr5	Yr6
QPI 1: Pathological Diagnosis of Head and Neck Cancer	95	100.0	100.0	90.0	95.8	100.0	100.0	100.0	100.0	96.2	97.5	100.0	95.7	98.2	100.0	95.9
QPI 2(i) : Imaging	95	100.0	100.0	94.7	79.2	96.7	96.9	94.5	98.6	96.2	98.1	100.0	96.1	95.5	99.3	96.1
QPI 2(ii) : Imaging	95		100.0	100.0		86.2	96.8		100.0	98.0		95.1	91.7		95.7	94.2
QPI 3: Multi-disciplinary Team Meeting (MDT)	95	100.0	100.0	100.0	91.7	100.0	96.9	97.3	100.0	98.1	98.8	100.0	99.4	97.8	100.0	98.9
QPI 4: Smoking Cessation	95		66.7	83.3		60.0	85.7		76.0	100.0		47.7	81.8		54.8	77.5
QPI 5(i) : Oral and Dental Rehabilitation Plan	95		100.0	86.7		100.0	86.7		61.8	87.5		99.3	76.4		90.3	81.3
QPI 5(ii) : Oral and Dental Rehabilitation Plan	95		100.0	100.0		90.9	100.0		100.0	86.4		89.5	92.9		92.2	89.1
QPI 6 : Nutritional Screening	95	81.3	78.6	95.0	16.7	67.7	75.8	71.2	86.5	80.0	80.8	87.5	94.1	73.0	84.2	89.2
QPI 7 : Specialist Speech and Language Therapist Access	90	40.0	10.0	0.0	58.8	56.3	85.7	9.4	10.6	32.4	76.2	81.6	66.7	55.6	57.8	57.8
QPI 8 : Surgical Margins by Hospital of Surgery	<10	N/A	N/A	N/A	N/A	0.0	0.0	N/A	N/A	0.0	5.3	4.9	17.2	5.3	4.8	15.6
QPI 9 : Intensity Modulated Radiotherapy (IMRT)	95	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
QPI 10 : Post Operative Chemoradiotherapy	55	N/A	N/A	100.0	0.0	0.0	0.0	25.0	0.0	33.3	33.3	50.0	18.2	30.0	33.3	22.2
QPI 11a: Mortality following surgery (presented by Board of surgery)	30 day	<5	N/A	N/A	N/A	0.0	0.0	0.0	N/A	N/A	0.0	0.0	0.0	0.0	0.0	0.0
	90 day	<5	N/A	N/A	N/A	0.0	0.0	0.0	N/A	N/A	0.0	3.2	0.0	3.2	3.2	0.0
QPI 11b: Mortality following Radiotherapy	30 day	<5	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
	90 day	<5	0.0	0.0	N/A	0.0	N/A	0.0	0.0	0.0	0.0	6.3	6.3	4.5	3.6	4.3
QPI 11c: Mortality following Chemoradiotherapy	30 day	<5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.7	0.0	0.0	1.1	0.0
	90 day	<5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.6	0.0	0.0	2.3	0.0
QPI 12: Clinical Trials	15	16.7	5.3	26.3	0.0	5.6	20.0	4.6	4.5	18.8	6.3	11.9	19.3	5.8	9.3	19.7

Not for wider dissemination – assessment risk of disclosure of sensitive personal information not yet undertaken

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