

Developing and Publishing Outcomes in Cardiac Surgery

Roger Boyle

National Director for Heart Disease and Stroke





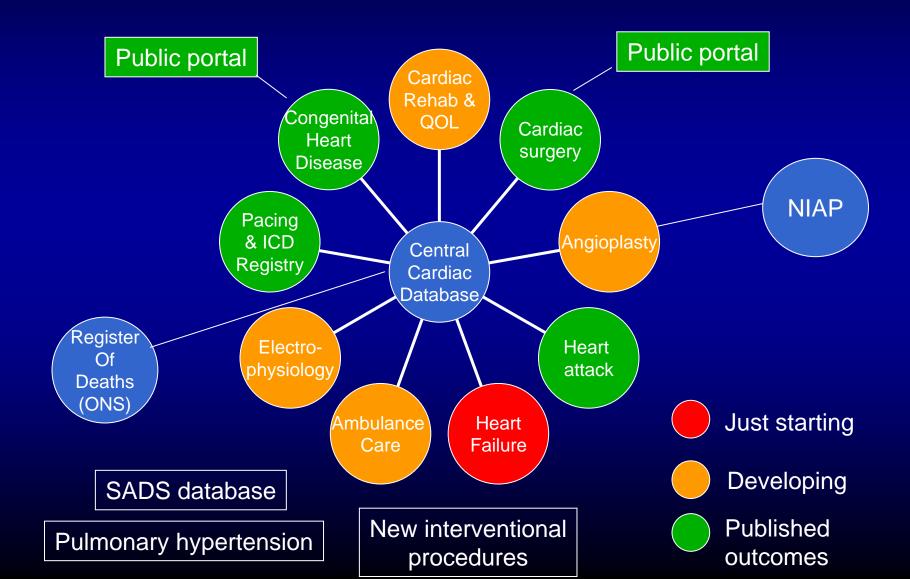
Developing and Publishing Outcomes in Cardiac Surgery

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Department of Health

National audits and registries





Sir Terence English set up the UK 1977 Cardiac Surgical Register Ken Taylor and John Dark (senior) 1986 set up the Heart Valve Registry 1994 National Audit Cardiac Surgical Database replaced the register 2000 National Service Framework for CHD mandating clinical audit Surgical data migrated to CCAD 2004 2006 Public portal goes live First annual update 2007







Bruce Keogh

Public portal

- Information for patients
 - What the procedure entails
 - What to expect after the procedure
 - What are the chances of success
 - Data regarding outcomes at all hospitals
 - Where is the hospital, where to park, who are the surgeons, what is their case-mix?
- Now UK wide
- Covers CABG, aortic valve replacement and all cardiac operations typically covering two years of data
- Unit—specific data and individual surgeon data for about 70% of surgeons
- Similar version for congenital procedures

Heart surgery in Great Britain

Homepage

Survival rates

Information for patients

Media centre

About this site

Home / Survival rates / About coronary artery bypass graft operations / Cardiac unit / Surgeon

W. Andrew Owens

The James Cook University Hospital

About W. Andrew Owens

Specialties

Adult cardiac surgery Adult thoracic surgery

Qualified

Queen's University, Belfast, 1990.

Trained

Papworth Hospital Cambridge, 1995-1996 Freeman Hospital, Newcastle upon Tyne, 1996-1999 St Vincent's Hospital, Sydney, Australia, 1999-2001 James Cook University Hospital, Middlesbrough 2001-2002 Freeman Hospital, Newcastle upon Tyne, 2002

Royal Victoria Hospital, Belfast 1994-1995

Previous consulting posts

Royal Victoria Hospital, Belfast 1994-1995 Papworth Hospital Cambridge, 1995-1996

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- aowens@CTSnet.com
- Webpage



Practice profile for the 3 years ending March 2005

Total number of operations performed

Isolated coronary : Isolated valve bypass operations performed

operations performed

Combined and other operations performed

Survival rates after selected types of heart operation

How you can use this information

Patients who are going to have certain heart surgery may find it useful to look up survival rates for surgeons or units they are considering and discuss this information with their GP or their surgeon.

What it can't tell you

Your own chances of surviving a heart operation.

Coronary artery bypass graft operations

Operations over 3 years ending March 2005



129 operations performed Statistics calculated from all first time patients

Survival rates for all kinds of surgery

Operations over 3 years ending March 2005



140 operations performed Statistics calculated from all first time patients



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Congenital Heart Disease Website

Home Information for Patients

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Congenital Heart Disease Centres

Centre Activity

Specific Procedures National Data

National Statistics

Glossary

Welcome to The Congenital Heart Disease Website.

The site has been created by The Information Centre for health and social care to give the parents and carers of children with congenital heart disease information to help them make important decisions about their child's treatment.

Among the information it provides are profiles of every congenital heart disease centre in the UK, including the number and range of procedures they carry out and survival rates for the most common types of treatment.

Parents and carers are encouraged to regard the facts and figures in the site as a useful source of additional information. However, they are recommended to discuss treatment options with their child's family doctor or heart specialist before making any decisions.

The Congenital Heart Disease portal has been developed by The Information Centre for health and social care, using information collected by it's Central Cardiac Audit Database (CCAD). This has been in collaboration with the Society for Cardiothoracic Surgery and The British Congenital Cardiac Association (BCCA) formerly the British Paediatric Cardiac Association. The website has been funded by the Healthcare Commission.

We welcome your feedback about how useful you have found the information on this website

How to use this information

For more information about how to interpret the information and more information about the site, go to information for patients











Congenital Heart Disease Website

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What information does the website include?

This website provides information about surgical and catheter procedures from congenital heart units across the UK. It shows t carried out each year at a national and individual hospital level. The information is broken down into four age groups:

neonates - up to 30 days old infants - between 31-365 days old children - between one and 16 years old adult - 16 years and older

The site profiles every congenital heart disease centre in the UK. It also shows survival rates for the most common types of proce

Where does the information come from?

The information comes from The Information Centre for health and social care which collects data via its Central Cardiac Audi Disease Audits.

What does the information tell me?

The information will tell you the overall numbers and the overall percentage chance of survival of the more common procedure disease in the whole of the UK, as well as in each of the 16 congenital heart centres.

Will it tell me about my child's chances of surviving a particular procedure?

No. The information is not able to tell you the precise risk of an individual patient dying during or after a procedure. This is der circumstances such as age, general health and the specific detail of the heart abnormality. Your cardiologist or cardiac surg factors with you.

How should I use the information to make decisions about my child's care?

The site has been developed to provide useful information about interventional treatment of congenital heart disease. It shoul should consider before making a decision about your child's heart surgery. We would advise you to discuss any decision you need a specialist.

What does it mean if one centre's survival looks lower than another's?

Several factors can affect mortality rates at individual centres. For example, some surgeons and some centres operate on patient A centre which operates on more difficult cases (such as small babies with very complex heart disease or children with multiple a expected to have a higher mortality rate than the national average. Without taking such factors into account, it is quite possib higher mortality rate could actually be 'better' than one with a lower mortality rate. It is important to understand that there is a from year to year. Therefore a higher (or lower) mortality rate in one particular year is not necessarily an accurate guide to the site, we have done our best to show statistically whether each centre's results for each specific procedure appear to be within National average.

Why doesn't the site show the results of individual operators?

Individual surgeons' and cardiologists' results would be misleading as children and adults with congenital heart disease are tre individual. The IC will consider publishing individual teams' results in the future when we have more robust means of adjustin complexity of the cases. It is important to discuss any proposed procedures with the consultants leading your local teams and to their experience and results.



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	Count	Survival	1 Year Survival
2005-06	8669	98.2%	95.1%
2004-05	7989	98.1%	96.1%
2003-04	8529	97.7%	95.7%
2002-03	7223	97.8%	95.6%
2001-02	7110	97.3%	95%
2000-01	7229	97.2%	93.7%
	2004-05 2003-04 2002-03 2001-02	2004-05 7989 2003-04 8529 2002-03 7223 2001-02 7110	2004-05 7989 98.1% 2003-04 8529 97.7% 2002-03 7223 97.8% 2001-02 7110 97.3%

About This Data

This mortality view shows mortality data based on procedural data from CCAD which has been linked to verified mortality data from The Office for National Statistics (ONS). Mortality status is shown at 30 days and 1 year. Please click on the - National Aggregate - view links to display more detail on various specific procedures.

Total includes thoracic and miscellaneous non-cardiovascular procedures.











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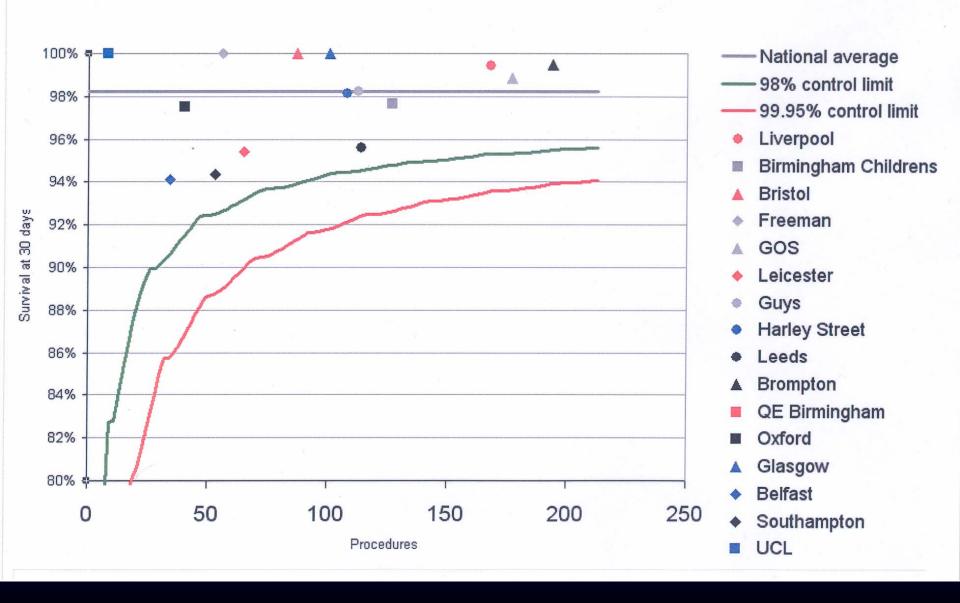
About This Data

Showing All National results

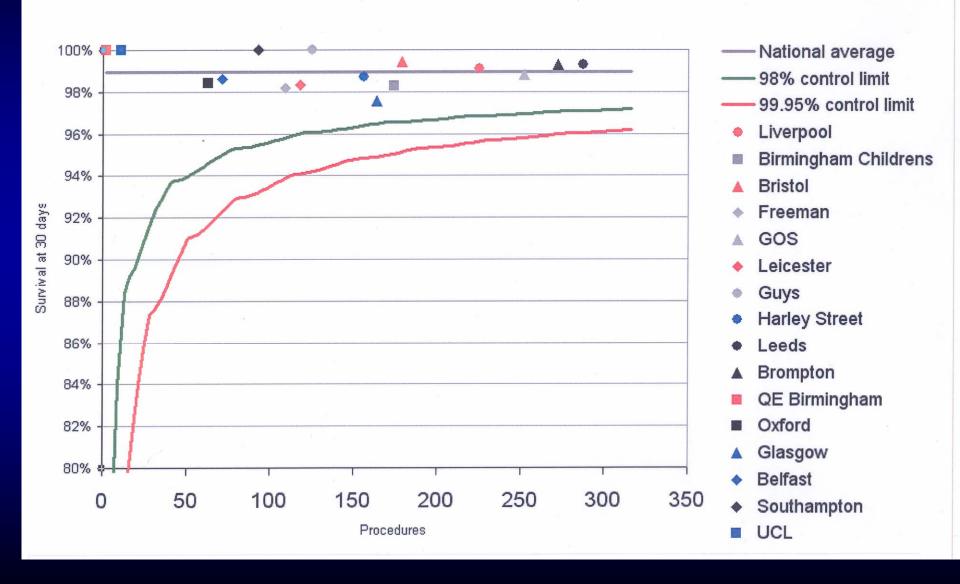
This view shows data for specific procedures for all congenital heart disease centres submitting data to CCAD. Please click detailed data including analysis by age group.

Procedure Description	Type	Financial Year	Procedures	30 Day Survival	1 Year Survival
Anomalous coronary artery repair	Surgery	2005-06	23	100%	100%
Aortic balloon valvotomy	Catheter	2005-06	86	100%	95%
Aortic root replacement (not Ross)	Surgery	2005-06	37	94.4%	90.5%
Aortic valve replacement - Ross	Surgery	2005-06	75	100%	100%
Aortic valvotomy	Surgery	2005-06	13	92.3%	88.9%
Aortopulmonary window repair	Surgery	2005-06	8	100%	100%
Arterial shunt	Surgery	2005-06	285	95%	84.1%
Arterial switch (for isolated transposition)	Surgery	2005-06	151	98%	95.6%
Arterial switch + VSD closure	Surgery	2005-06	50	96%	85.7%
ASD closure (catheter)	Catheter	2005-06	564	100%	99.7%
ASD repair	Surgery	2005-06	280	99.3%	98.6%
Atrioventricular septal defect (complete) repair	Surgery	2005-06	137	100%	96.3%
Atrioventricular septal defect (partial) repair	Surgery	2005-06	90	100%	100%
Atrioventricular septal defect and tetralogy repair	r Surgery	2005-06	3	100%	100%
AVR - non Ross	Surgery	2005-06	97	97.9%	94.7%
Bidirectional cavopulmonary shunt	Surgery	2005-06	188	97.8%	95.7%
Blade atrial septostomy	Catheter	2005-06	9	100%	100%
Coarctation angioplasty	Catheter	2005-06	37	100%	100%

Surgery [Tetralogy repair]: 2001-2006



Surgery [VSD Repair]: 2001-2006



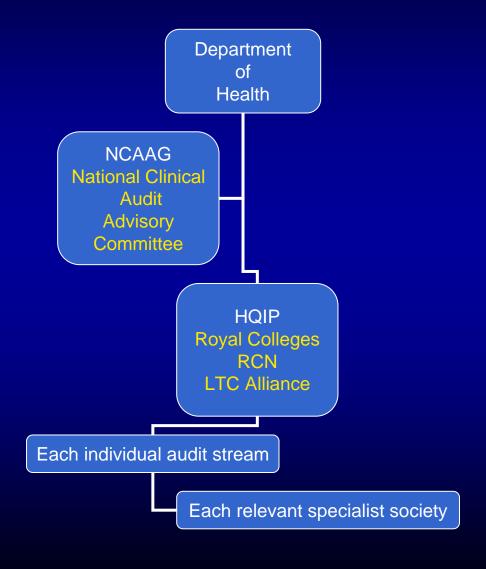
Changing management arrangements for clinical audit

- NICE (2000)
- NHSIA (2001)
- Information Policy Unit with NHSIA (2002)
- National clinical advisory board (2002)
- NCASP (2003)
- CHI CHAI (2003)
- Healthcare Commission (2004)
 - Tripartite governance arrangements for surgery and angioplasty
- Information Centre (2005)

Latest changes

- Healthcare Commission have divested themselves of the audit programme
- Complex new arrangements

New arrangements



Other changes

- Establishment of NICOR
 - National Institute for Clinical Outcomes
 Research
 - Houses MINAP, cardiac surgery, congenital interventions, angioplasty
 - Joint clinical leadership (Adam Timmis, Ben Bridgewater)
- MINAP Academic Group
 - Chaired by Adam Timmis

Broader context and opportunities

- Beyond audit
 - Performance indicators
- Next Stage Review
 - Incentives for quality
 - Requires definition of the metrics
 - Each of the defined audit datasets will be a useful starting point
- Accreditation and revalidation
 - Participation or performance?
- Publication and development of choice
 - NHS Choices website
- Role of the specialist societies
- Some issues remain regarding the devolved nations

Conclusions

- Publication of clinical data is here to stay
- To do this well requires a great deal of clinical commitment and perseverance
- It requires strong clinical leadership to bring it to fruition
- The media spotlight is uncomfortable at first but it soon wears off!