



Public Health
England

Protecting and improving the nation's health

Clinical Headline Indicators

What are they

- What – Feedback on activity performance and outcomes at trust/MDT level
- Purpose – to enable providers and commissioners to regularly monitor services in order to drive up standards and improve outcomes
- When – within a year of activity
- How – initially presented through the COSD conformance portal
- Who for – Providers, commissioners, peer review process...

Where does the data come from

- Initially from the COSD dataset
 - Collected monthly
 - Within two months of diagnosis
 - Ongoing monthly updates
 - Fully collated/registered within nine months of diagnosis
 - Full year's data available by following autumn
- Other data sources can be added later
- Conformance reports to monitor the data quality for CHI
 - Essential pre-requisite
 - Can pick up problems early
 - Clinical ownership

Structure/content

- Contextual information
 - Numbers
 - Performance status
 - Stage
- Generic
 - One year survival rates
- Site specific information
 - Standard reports
 - Customisable data
 - As per service profiles


Development process

- Small steering group
 - NCIN
 - NCRS
 - KITs
 - Clinical lead
- Small development team
- Clinical input
 - SSCRGs
- Timescales
 - First reports by June
 - Initially generic, breast and lung
 - 2013 data complete

Alignment

- Service profiles
- Clinical Lines of Enquiry
- National Audits – Local Action Plans
- NHS England Dashboards
- Cancer commissioning toolkit
- Peer Review portal?
- PHE fingertips tool?
- And others.....
- There will be some duplication and overlap initially
- Check and use existing methodology/don't reinvent the wheel/consistency
- Mustn't lose current outputs

An example



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Clinical Headline Indicators

[Home](#)
[Breast](#)
[Lung](#)
[Log Out](#)

Clinical Headline Indicators

Trust
St George's Healthcare NHS Trust
Year
2012

Month
January, February, March, April, May
Tumour Site
Breast

Quarterly / Monthly
Quarterly
Data View
Tabular

1 of 1

Select a format
Export

Breast Specific Metrics	Total	Q1	Q2	Q3	Q4					
Of All Invasive Tumours										
With a nationally registered Nottingham Prognostic Index	166	48%	40	12%	38	11%	39	11%	49	14%
- With nationally registered NPI in excellent or good prognostic groups	48	29%	10	6%	14	8%	13	8%	11	7%
That are recorded as screen detected	0	0%	0	0%	0	0%	0	0%	0	0%
Managed at this trust with non-invasive cancer (D05)	15	4%	6	2%	4	1%	1	0%	4	1%
Managed at this trust with invasive cancer (C50)	330	96%	107	31%	82	24%	68	20%	73	21%
For Cases managed at this Trust with invasive cancer (C50)										
Major surgeries in invasive breast cancer	233	71%	77	23%	58	18%	53	16%	45	14%
- Receiving mastectomy (invasive only)	87	37%	28	12%	20	9%	19	8%	20	9%
- Receiving sentinel lymph node biopsy (invasive only)	122	52%	37	16%	30	13%	32	14%	23	10%
Surgery Count	333		102		85		72		74	
- Surgeries which are day case or one overnight stay	2	1%	0	0%	0	0%	0	0%	2	1%
- Median length stay (days) for elective surgical admissions)	21		0		3		4		14	
- Mean length stay (days) for elective surgical admissions)	21		0		3		4		14	

Its your (patients') data

What can you do?

- Make sure your data is accurate and complete
- Know how your data is submitted
- Set up processes with your whole MDT to record the COSD data
- Use electronic systems at MDT
- Record and sign off at MDT where possible
- Make sure you check your own data
- Sign up to the conformance portal (N3 connection)
<http://ncrsreports.phe.nhs.uk/cosd/>
- Review the Indicators when available

Thank you

For COSD queries: cosd@ncin.org.uk