



Consultant Level Indicator Programme

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30000 - General Medicine

**York Teaching Hospitals NHS Foundation Trust
(Merged)**

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Contents

1. Report Overview	1
2. Scorecard	3
3. Activity	4
Admitted Workload.....	4
Outpatient Workload	4
4. Focus	6
Day Case Top 10 Procedures by Volume	6
Inpatient Top 10 Diagnoses by Volume.....	7
Outpatient Top 5 Procedures by Volume.....	7
5. Trend	8
FCE Volume & ALoS.....	9
Day Case Rate & FCE LoS.....	9
Mortality Rate	9
Readmission Rate.....	9
Outpatient Attendances	9
Outpatient DNA Rate	9
6. Schedule	10
Non-Elective Inpatient Admission Profile.....	10
Non-Elective Inpatient ALoS Profile	10
Zero LoS Non-Elective Admission Profile	10
Non-Elective Inpatient Discharge Profile.....	10
7. Indicator Definitions	11

1. Report Overview

This report has been produced based on information extracted from the organisation's patient administration system. The individual consultant and the data period are both detailed on the front cover of the report.

You have been assigned to a specialty based on a combination of the specialty your organisation assigned you to and the clinical information about the patients you treated. For example, you may have been assigned to trauma and orthopaedics by your organisation but based on the clinical information recorded about the patients you treated CHKS have subdivided this specialty further to hand, hip, knee, etc. The same criteria are then applied to both the local and selected peer ensuring that comparisons are as appropriate as possible.

The analysis included in this report frequently refers to consultant, local peer and selected peer which are explained below:

- Consultant - displays the consultant value, shown as an index, percentage/rate or ratio depending on each indicator's calculation. Where applicable the actual value (numerator) is shown.
- Local Peer - displays the local peer value which consists of consultant colleagues' average value within the same organisation and same specialism.
- Selected Peer - displays the external peer value which consists of a selection of consultants' average value within the same specialism but from external organisations.

The scorecard view also contains a **Peer Range** which displays a comparison with the selected peer group ONLY and is shown graphically within a RAG spectrum. The linear spectrum shows the consultants value plotted between the 10th to 90th percentile values of the selected peer. If the consultant's value is outside this range then it is displayed as a diamond.

Peer Sites		
Taunton And Somerset NHS Foundation Trust	Ipswich Hospital NHS Trust	Great Western Hospitals NHS Foundation Trust
Derby Hospitals NHS Foundation Trust	University Hospitals Of Morecambe Bay NHS Foundation Trust	University Hospitals Of Leicester NHS Trust
Worcestershire Acute Hospitals NHS Trust	East Sussex Healthcare NHS Trust	Mid Yorkshire Hospitals NHS Trust
Western Sussex Hospitals NHS Foundation Trust		

Rating	Interpretation
■	Consultant value falls within the top 75% percentile of the peer
■	Consultant value falls between the 75% and 25% percentiles of the peer
■	Consultant value falls within the bottom 25% percentile of the peer
■	Consultant has no data
■	Insufficient peer data available to make a meaningful comparison

* Data suppressed due to small number rules.

Indicator definitions are either included in your report, are available locally or can be obtained by emailing info@chks.co.uk, including the name of the organisation you work for along with your GMC number and name.

2. Scorecard

The scorecard below is a collection of performance and efficiency indicators at consultant level. For each indicator consultant, local peer and selected peer values are displayed along with a peer range based on a RAG spectrum. See overview for explanation of values.

Indicator	Consultant	Local	Peer	Peer Range	
Average Length of Stay (FCE - zero trimmed)	1588	3.5	3.2	4.9	
Elective Average Length of Stay (FCE - zero trimmed)	39	1.95	2.86	3.8	
Non-elective Average Length of Stay (FCE - zero trimmed)	1549	3.6	3.3	4.9	
% Emergency FCEs - Zero LoS	228	34.92%	46.16%	25.718%	
Day Case Rate	708	98.33%	96.38%	94.15%	
Day Case Overstays	9	1.2552%	2.6592%	1.5501%	
Elective IP - no procedure	0	0%	7.317%	5.568%	
Mortality Rate	14	1.3121%	1.5996%	3.382%	
Mortality Rate - Elective	1	0.09372%	0%	0.025407%	
Mortality Rate - Non-elective	13	1.2184%	1.5996%	3.356%	
Readmissions within 28 days	91	8.545%	11.449%	10.274%	
Complication rate - attributed	1	0.09372%	0.3255%	0.4159%	
Misadventure rate	0	0%	0.005613%	0.024466%	
Outpatient New to follow-up ratio	476	1 : 1.66	1 : 2.49	1 : 1.95	
Outpatient DNA Rate	99	11.485%	10.746%	6.993%	
Outpatient DNA Rate - New Attendances	49	14.583%	8.694%	6.814%	
Outpatient DNA Rate - Follow-up Attendances	50	9.506%	11.545%	7.084%	

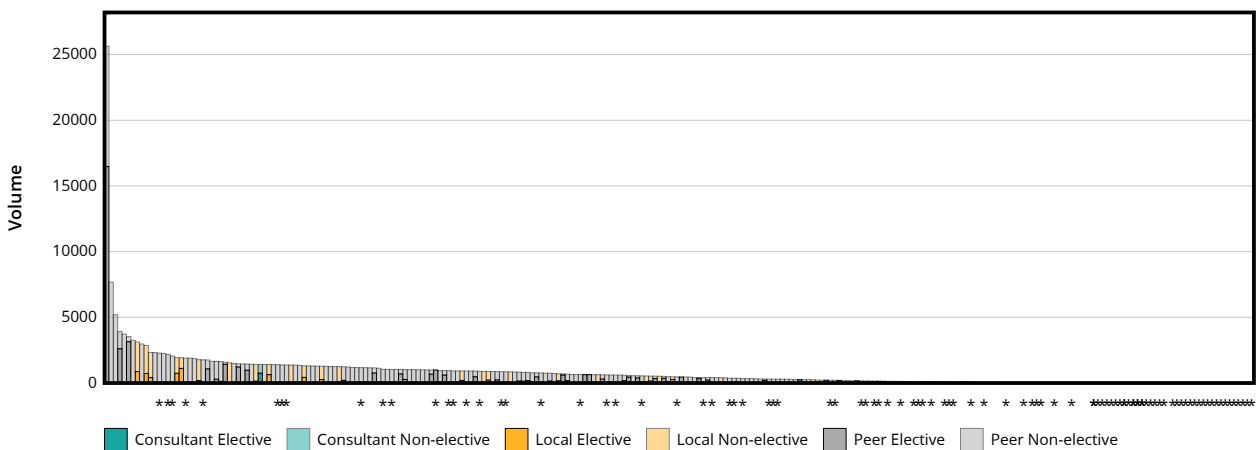
3. Activity

The activity tables display a collection of activity based indicators split by inpatient and outpatient workload.

Admitted Workload

Indicator	Consultant	Local	Peer	
Total FCEs	1413	-	1106	754
% Elective FCEs	753	53.29%	22.172%	23.414%
% Elective FCEs - Inpatients	28	3.718%	14.929%	7.561%
% Elective FCEs - Day Cases	728	96.68%	94.03%	91.84%
% Regular Attenders	3	0.3984%	1.1506%	1.0974%
% Emergency FCEs	653	46.21%	77.68%	73.33%
% Other FCEs	7	0.4954%	0.14532%	3.257%

FCE Activity Volume - Elective/Non-elective

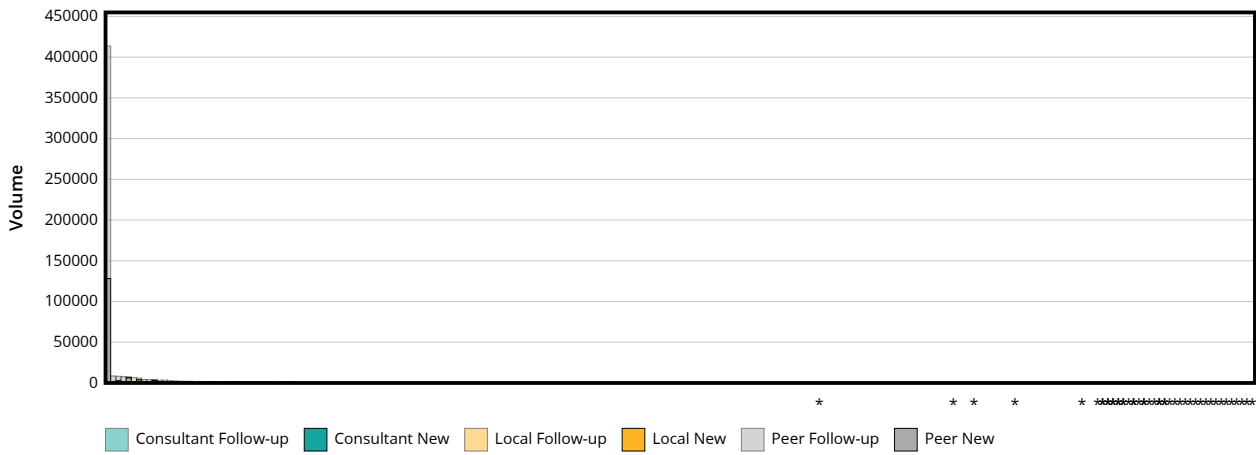


Outpatient Workload

Indicator	Consultant	Local	Peer	
Total Attendances (OP)	763	-	997	2676
Total New OP Attendances	287	-	286	908
Total Follow-up OP Attendances	476	-	711	1768
Outpatient Attendances with a Procedure	763	100%	100%	31.061%
New Outpatient Attendance with a Procedure	287	100%	100%	25.440%
Follow-up Attendances with a Procedure	476	100%	100%	33.95%

New Outpatient Attendance - referred by GP	211	73.52%	65.02%	46.14%
Total DNA's	99	-	120	201
% of DNA's New Attendances	49	49.49%	22.685%	32.99%
% of DNA's Follow-up Attendances	50	50.51%	77.31%	67.01%

Outpatient Attendances - New/Follow-up



4. Focus

Focus displays the top 10 procedures / diagnoses at consultant level split by day cases, inpatient procedures and the top 5 outpatient procedures. In medical specialties the inpatient profile will be the top diagnoses while for surgical specialities it will be procedures. The day case procedure profile includes the volume, day case rate and day case overstay rate; the inpatient profile includes the volume and average length of stay and the outpatient profile shows volume of procedures.

Please note that if your organisation or your selected peer does not clinically code, or only partially clinically code outpatient activity these values may not reflect activity. Your local clinical coding department will be able to advise you.

Day Case Top 10 Procedures by Volume

Procedure	Actual Day Cases						Day Case Overstays					
	Number			Rate			Number			Average LoS		
	Cons	Local	Peer	Cons	Local	Peer	Cons	Local	Peer	Cons	Local	Peer
G45 - Diagnostic fibreoptic endoscopic examination of upper gastrointestinal tract	212	47	66	99.53 %	99.62 %	98.94 %	1	0.143	*	1	24.5	3.2
X29 - Continuous Infusion of therapeutic substance	128	29.8	*	100%	100%	94.83 %	0	0	*	0	0	1
X92 - High cost musculoskeletal drugs	99	9.9	*	100%	100%	98.94 %	0	0	0	0	0	4
G21 - Other operations on oesophagus	87	0.036	0	98.86 %	50%	14.286 %	1	0	*	3	0	2.71
H22 - Diagnostic endoscopic examination of colon	80	19.6	20.9	98.77 %	98.92 %	98.46 %	0	0.143	*	0	1	1.66
H25 - Diagnostic endoscopic examination of lower bowel using fibreoptic sigmoidoscope	20	6.2	12.3	100%	95.58 %	98.75 %	0	0.214	*	0	2.67	4.9
H20 - Endoscopic extirpation of lesion of colon	18	4.9	7.4	100%	97.18 %	97.72 %	0	0.071	*	0	1	1.52
X36 - Blood withdrawal	16	9.2	*	100%	100%	94.24 %	0	0	0	0	0	1
G44 - Other therapeutic fibreoptic endoscopic operations on upper gastrointestinal tract	15	0.64	*	93.75 %	85.71 %	84.09 %	1	0.071	*	8	6	2.32
G64 - Therapeutic endoscopic operations on jejunum	11	0.071	0	84.62 %	66.67 %	60%	2	0	0	4.5	0	12.5

Inpatient Top 10 Diagnoses by Volume

Procedure	Number			IP Average LoS		
	Cons	Local	Peer	Cons	Local	Peer
J18 - Pneumonia; organism unspecified	27	60	48	2.93	2.69	4.2
R07 - Pain in throat and chest	27	61	15.9	0.52	0.270	0.65
K70 - Alcoholic liver disease	27	7.9	*	5.7	4.9	4.9
A41 - Other sepsis	25	30.3	13.2	3.16	3.4	4.4
K80 - Cholelithiasis	18	5.7	*	2.61	1.36	3.3
K92 - Other diseases of digestive system	16	12.9	7.5	1.19	1.48	2
J44 - Other chronic obstructive pulmonary disease	15	34	17.8	2.47	2.31	2.45
K26 - Duodenal ulcer	14	2.64	*	3.6	1.38	2.45
K31 - Other diseases of stomach and duodenum	14	1.79	*	3.07	2.56	4.4
N39 - Other disorders of urinary system	11	25.8	29.3	3	2.54	4.3

Outpatient Top 5 Procedures by Volume

Procedure	Consultant	Local	Peer
X62 - Assessment	763	969	63

5. Trend

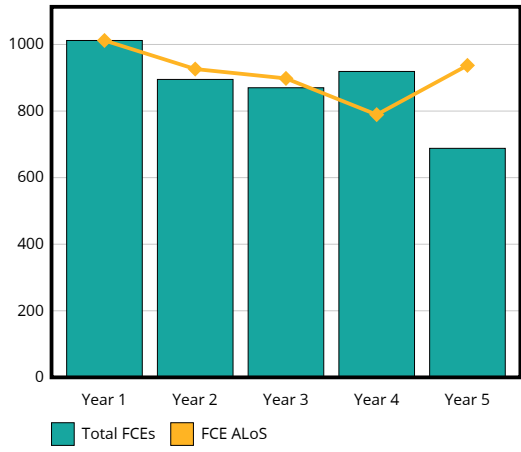
This analysis displays a collection of performance and efficiency indicators for the target consultant comparing performance year on year data for the selected time period. Up to a maximum of five years can be displayed depending on the availability of data.

Data may be missing if your organisation has not submitted historical data to CHKS or if you became a consultant at the organisation within the last five years.

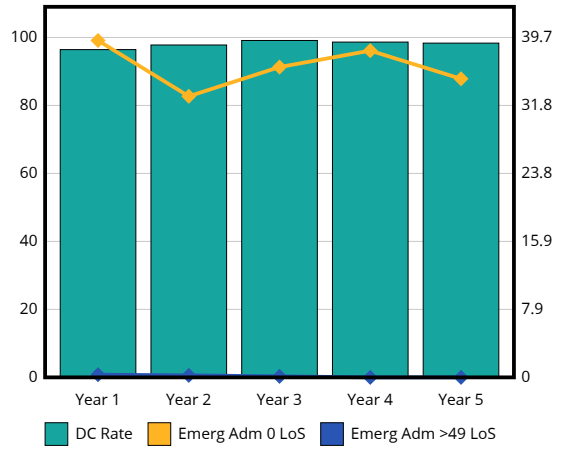
If a period of less than 12 months is selected then this is also the period that will be reported for the previous years. For example, if the selected period is January - June 2016 then the previous four years will be the January - June period in each year.

Indicator	Jan 12 - Dec 12	Jan 13 - Dec 13	Jan 14 - Dec 14	Jan 15 - Dec 15	Jan 16 - Dec 16
Total FCEs (Exclusions: Standard and Day-cases)	1012	895	870	919	688
Average Length of Stay (FCE - zero trimmed)	3.8	3.5	3.4	2.97	3.5
Day Case Rate	96.43%	97.78%	99.11%	98.64%	98.33%
% Emergency FCEs - Zero LoS	39.39%	32.87%	36.29%	38.20%	34.92%
% Emergency Admissions >49 day LoS	0.31348%	0.23229%	0.11976%	0%	0%
Mortality Rate	2.4548%	1.4403%	1.0117%	0.8455%	1.3121%
Readmissions within 7 days	2.9070%	3.224%	2.8016%	2.5365%	4.225%
Readmissions within 14 days	3.811%	4.595%	4.358%	4.381%	5.915%
Readmissions within 28 days	6.008%	6.790%	6.693%	6.610%	8.545%
Total New OP Attendances	295	405	237	320	287
Total Follow-up OP Attendances	682	735	553	591	476
Outpatient DNA Rate	8.947%	7.916%	7.818%	8.073%	11.485%
Outpatient DNA Rate - Follow-up Attendances	7.588%	6.369%	6.588%	6.635%	9.506%

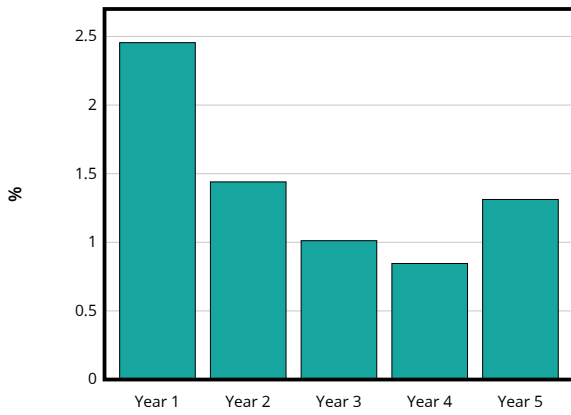
FCE Volume & ALoS



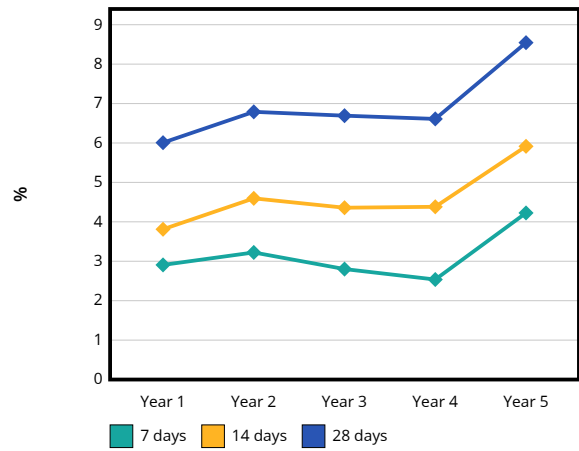
Day Case Rate & FCE LoS



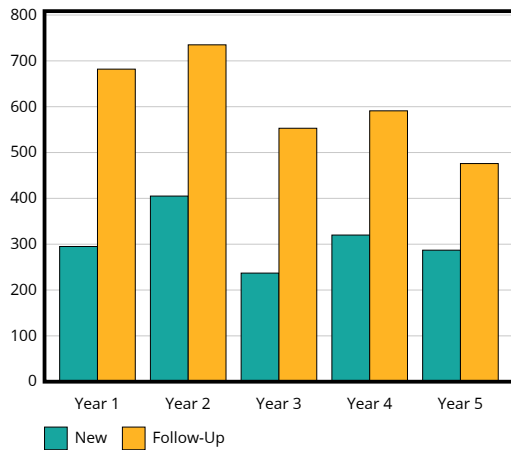
Mortality Rate



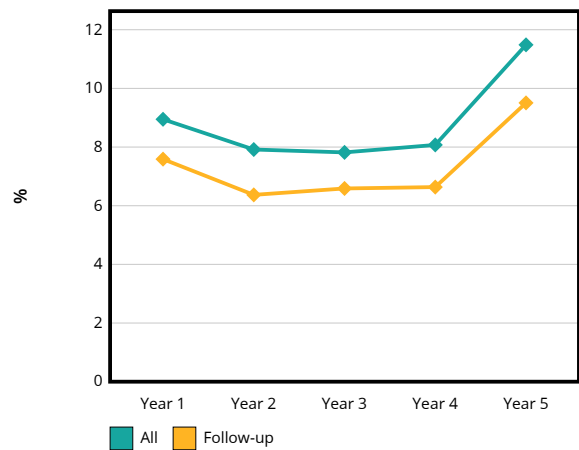
Readmission Rate



Outpatient Attendances



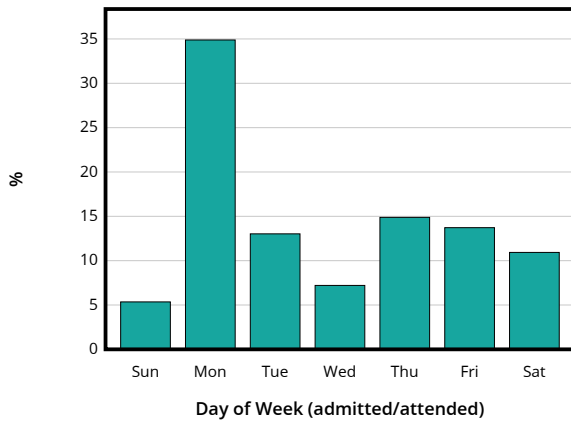
Outpatient DNA Rate



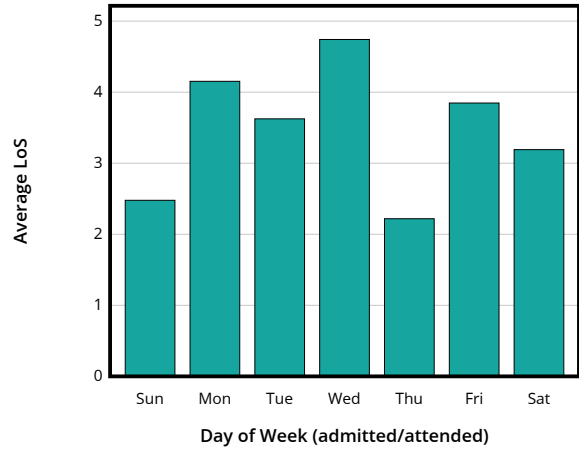
6. Schedule

This section displays the consultant profile for a selection of indicators by the day of the week of admission and discharge.

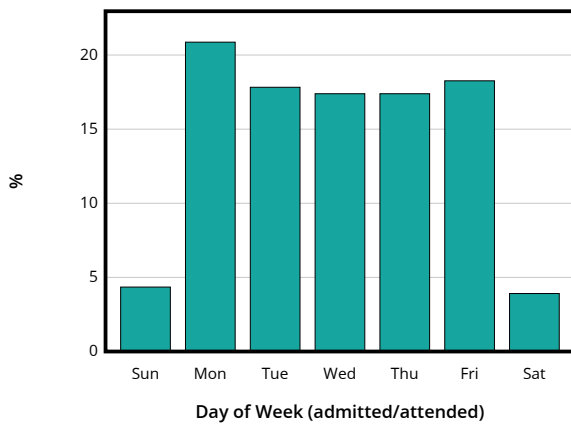
Non-Elective Inpatient Admission Profile



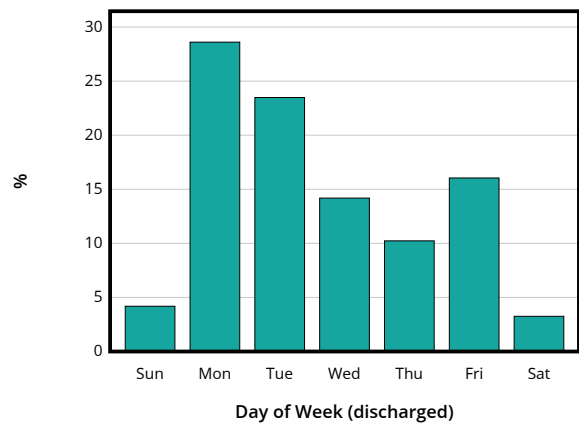
Non-Elective Inpatient ALoS Profile



Zero LoS Non-Elective Admission Profile



Non-Elective Inpatient Discharge Profile



7. Indicator Definitions

% Elective FCEs

Numerator: Count of FCEs with MoA = 11, 12,13
Denominator: Total FCEs
Exclusions: Well babies

% Elective FCEs - Day Cases

Numerator: Count of FCEs (IM = 2 AND MoA = 11, 12 or 13 AND spell LoS = 0)
Denominator: Count of FCEs with MoA = 11, 12,13
Exclusions: Well babies

% Elective FCEs - Inpatients

Numerator: Count of FCEs MoA = 11 12 or 13, Not Day-case or Regular Attender
Denominator: Count of FCEs with MoA = 11, 12,13
Exclusions: Well babies

% Emergency Admissions >49 day LoS

Numerator: Total FCEs, MoA starts with 2 AND FCE LoS>49
Denominator: Total FCEs, MoA starts with 2
Exclusions: Well babies, regular attenders or renal dialysis patients

% Emergency FCEs

Numerator: Count of FCEs with MoA starts with 2
Denominator: Total FCEs
Exclusions: Well babies

% Emergency FCEs - Zero LoS

Numerator: Total FCEs, MoA starts with 2 AND FCE LoS=0
Denominator: Total FCEs, MoA starts with 2
Exclusions: Well babies, regular attenders or renal dialysis patients

% Other FCEs

Numerator: Count of FCEs with MoA NOT 11, 12, 13 or start with 2
Denominator: Total FCEs
Exclusions: Well babies

% Regular Attenders

Numerator: Count of FCEs with MoA = 11, 12 or 13 and intended management = 3, 4 or 5
Denominator: Count of FCEs with MoA = 11, 12,13
Exclusions: Well babies

% of DNA's Follow-up Attendances

Numerator: Total follow-up Attendances (attendance flag = 3 AND First attendance flag = 2 or 4)
Denominator: Total planned attendances that did not attend (attendance flag = 3)

% of DNA's New Attendances

Numerator: Total New Attendances that did not attend (attendance flag = 3 AND First attendance flag = 1 or 3)
Denominator: New attendances & DNA's (attendance flag = 3, 5 or 6 AND First attendance flag = 1 or 3)

Average Length of Stay (FCE - zero trimmed)

Numerator: Total bed days for FCEs LoS>0
Denominator: Total FCEs with FCE LoS >0
Exclusions: Well babies, regular attenders or renal dialysis patients

Average Length of Stay (FCE)

Numerator: Total bed days
Denominator: Total FCEs
Exclusions: Well babies, regular attenders or renal dialysis patients

Complication rate - attributed

Numerator: Spells containing attributed complication (qualifying ICD10 code found and attributed to spell containing qualifying procedures. The procedure may be in the same spell as the complication or in a preceding period - see separate criteria)
Denominator: Total spells excluding well babies
Exclusions: None

Day Case Overstays

Numerator: Day case overstays (IM = 2 AND MoA = 11, 12 or 13 AND Spell LoS > 0)
Denominator: Planned day cases - actual and overstays (IM = 2 AND MoA = 11, 12 or 13)
Exclusions: Well babies, regular attenders or renal dialysis patients OR spells with a planned procedure not carried out (HRG WA14A, WA14B or WA14Z)

Day Case Rate

Numerator:	Total day cases (IM = 2 AND MoA = 11, 12 or 13 AND spell LoS = 0)
Denominator:	Elective spells (MoA = 11, 12 or 13)
Exclusions:	Well babies, regular attenders or renal dialysis patients OR spells with a planned procedure not carried out (HRG WA14A, WA14B or WA14Z)

Elective Average Length of Stay (FCE - zero trimmed)

Numerator:	Total FCEs, MoA = 11, 12 or 13 with FCE LoS >0
Denominator:	Total FCEs, MoA = 11, 12 or 13 with FCE LoS >0
Exclusions:	Well babies, regular attenders or renal dialysis patients

Elective IP - no procedure

Numerator:	Coded Elective spells (MoA = 11 12 or 13, IM not = 2, Spell los > 0) and procedure 1 blank
Denominator:	Coded Elective spells (MoA = 11 12 or 13, IM not = 2, Spell los > 0)
Exclusions:	Well babies, regular attenders or renal dialysis patients OR spells with a planned procedure not carried out (HRG WA14A, WA14B or WA14Z)

Follow-up Attendances with a Procedure

Numerator:	Total follow-up Attendances (attendance flag = 5 or 6 AND First attendance flag = 2 or 4) AND procedure 1 = valid OPCS procedure code
Denominator:	Total follow-up Attendances (attendance flag = 5 or 6 AND First attendance flag = 2 or 4)
Exclusions:	OPCS4 Y and Z codes and procedure code 'X999-No outpatient procedure carried out'.

Misadventure rate

Numerator:	Spells with misadventure (diagnoses code T812, T815, T816, Y60, Y61, Y62, Y63, Y64, Y65, Y66 or Y69 recorded in any position)
Denominator:	Total spells excluding well babies
Exclusions:	None

Mortality Rate

Numerator:	Spells with DM=4 (death)
Denominator:	Total spells excluding well babies
Exclusions:	None

Mortality Rate - Elective

Numerator:	Spells with DM=4 (death) And MoA = 11,12,13
Denominator:	Total spells
Exclusions:	Well babies

Mortality Rate - Non-elective

Numerator: Spells with DM=4 (death) And MoA not 11,12,13
Denominator: Total spells
Exclusions: Well babies

New Outpatient Attendance - referred by GP

Numerator: Total New Attendances (attendance flag = 5 or 6 AND First attendance flag = 1 or 3) AND Source of referral = 3
Denominator: Total New Attendances (attendance flag = 5 or 6 AND First attendance flag = 1 or 3)

New Outpatient Attendance with a Procedure

Numerator: Total New Attendances (attendance flag = 5 or 6 AND First attendance flag = 1 or 3) AND procedure 1 = valid OPCS procedure code
Denominator: Total New Attendances (attendance flag = 5 or 6 AND First attendance flag = 1 or 3)
Exclusions: OPCS4 Y and Z codes and procedure code 'X999-No outpatient procedure carried out'

Non-elective Average Length of Stay (FCE - zero trimmed)

Numerator: Total FCEs, MoA not 11, 12 or 13 with FCE LoS >0
Denominator: Total FCEs, MoA not 11, 12 or 13 with FCE LoS >0
Exclusions: Well babies, regular attenders or renal dialysis patients

Outpatient Attendances with a Procedure

Numerator: Total attendances (attendance flag = 5 or 6) AND procedure 1 = valid OPCS procedure code
Denominator: Total attendances (attendance flag = 5 or 6)
Exclusions: OPCS4 Y and Z codes and procedure code 'X999-No outpatient procedure carried out'.

Outpatient DNA Rate

Numerator: Total planned attendances that did not attend (attendance flag = 3)
Denominator: DNA's plus attendances (attendance flag = 3, 5 or 6)
Exclusions: None

Outpatient DNA Rate - Follow-up Attendances

Numerator: Total follow-up Attendances (attendance flag = 3 AND First attendance flag = 2 or 4)
Denominator: Follow-up attendances & DNA's (attendance flag = 3, 5 or 6 AND First attendance flag = 2 or 4)

Outpatient DNA Rate - New Attendances

Numerator: Total New Attendances that did not attend (attendance flag = 3 AND First attendance flag = 1 or 3)
Denominator: New attendances & DNA's (attendance flag = 3, 5 or 6 AND First attendance flag = 1 or 3)

Outpatient New to follow-up ratio

Numerator: Total Follow-up Attendances (attendance flag = 5 or 6 AND First attendance flag = 2 or 4)
Denominator: Total New Attendances (attendance flag = 5 or 6 AND First attendance flag = 1 or 3)
Exclusions: None

Readmissions within 14 days

Numerator: Total spells where the patient was readmitted as emergency (MoA starts with 2) within 14 days of the date of discharge of previous admission
Denominator: Total spells
Exclusions: Denominator only exclusion - Well babies, regular attenders or renal dialysis patients

Readmissions within 28 days

Numerator: Total spells where the patient was readmitted as emergency (MoA starts with 2) within 28 days of the date of discharge of previous admission
Denominator: Total spells
Exclusions: Denominator only exclusion - Well babies, regular attenders or renal dialysis patients

Readmissions within 7 days

Numerator: Total spells where the patient was readmitted as emergency (MoA starts with 2) within 7 days of the date of discharge of previous admission
Denominator: Total spells
Exclusions: Denominator only exclusion - Well babies, regular attenders or renal dialysis patients

Total Attendances (OP)

Numerator: Total attendances (attendance flag = 5 or 6)
Denominator:
Exclusions: None

Total DNA's

Numerator: Total planned attendances that did not attend (attendance flag = 3)
Denominator:

Total FCEs

Numerator: Total FCEs
Denominator:
Exclusions: Well babies

Total FCEs (Exclusions: Standard and Day-cases)

Numerator: Total FCEs (Excluding Well Babies, Regular Attenders, Renal Dialysis and Day-cases)
Denominator:
Exclusions: Well babies, regular attenders, renal dialysis and day-cases

Total Follow-up OP Attendances

Numerator: Total follow-up Attendances (attendance flag = 5 or 6 AND First attendance flag = 2 or 4)
Denominator:
Exclusions: None

Total New OP Attendances

Numerator: Total New Attendances (attendance flag = 5 or 6 AND First attendance flag = 1 or 3)
Denominator:
Exclusions: None