

WHY WE COLLECT QUALITY PERFORMANCE INDICATORS (QPIS)

[Quality Improvement Indicators](#) (QPIS) support a culture of continuous quality improvement in cancer care across NHS Scotland.

The [Scottish Cancer Taskforce](#) established the [National Cancer Quality Steering Group](#) (NCQSG) and in collaboration with the three Regional Cancer Networks (North Cancer Alliance, [SCAN](#) & [WoSCAN](#)), [Information Services Division](#) (ISD), [Healthcare Improvement Scotland](#) (HIS), the NCQSG has [published QPIS](#) for 18 different types of cancer. QPIS are reviewed regularly with NHS Boards required to report performance as part of the [National Cancer Quality Programme](#).

QPIS are used by NHS boards to inform improvements in cancer care. Performance is considered by clinicians both regionally, through Pathway Boards, and at supported national clinical meetings. Each Pathway Board will coordinate an action plan to improve regional performance within QPIS.

HOW WE COLLECT QPI DATA

Stage 1 – Data Collection

Cancer audit data is collected in accordance with nationally agreed [datasets](#) and entered into the electronic Cancer Audit Support Environment (eCASE), a secure centralised web-based database, within individual NHS Boards.

This data is used for QPI reporting, survival analysis and for helping understand other issues relating to cancer care either locally, regionally or nationally.



Stage 2 – Local Board Reporting

QPI performance figures are largely based on Cancer Audit data. Individual NHS Boards calculate against the published measurability documents using the eCASE reporting tool and results are signed-off by clinicians at NHS Board level to ensure that the data is an accurate representation of service in each area prior to collation regionally.

The reporting timetable is developed to take into account the patient pathway and ensure that a complete treatment record is available for the vast majority of patients reported.



Stage 3 – National Reporting

Each year a regional report is produced analysing QPI performance for each tumour-specific group. QPIS are reported at a national level by Information Services Division (ISD) every 3 years.

The majority of QPIS are reported by the NHS Board in which patients are diagnosed; however some measures of surgical quality are reported by the NHS Board in which surgery was undertaken.

NOTES

1. Small Numbers

Where the number of patients meeting the denominator criteria for any indicator is between one and four, the results will not be included in QPI reports.

This is to avoid any unwarranted variation associated with small numbers and to minimise the risk of disclosure. Any charts or tables impacted by this are denoted with an asterisk (*).

2. Audit data completeness / Case ascertainment

This is measured by comparing the numbers of patients identified through cancer audit with the numbers recorded by the National Cancer Registry.

Cancer Registry figures are extracted from ACaDMe (Acute Cancer Deaths and Mental Health), a system provided by NHS Information Services Division (ISD) and analysed by Board of Diagnosis.

As National Cancer Registry data is generally not available for the audit period being reported, an average of the previous five years' figures is used to estimate expected numbers of patients within the reporting year.

3. Safe Use of Data

Rigorous controls are in place to ensure safe and secure handling and storage of data and to ensure that the information derived from these data are communicated in line with local, regional and national governance arrangements.

Further information on how information is collected and used in the NHS is available in the [Information Guide for Patients](#) from Information Services Division (part of NHS Scotland).