Quality Performance Indicators Audit Report

Tumour Area:	Cervical Cancer			
Patients Diagnosed:	1 st October 2019 – 30 th September 2020			
Published Date:	8 th February 2023			

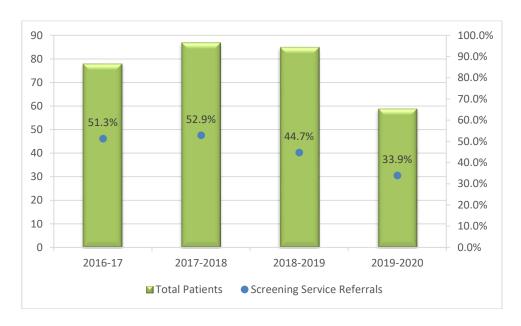


1. Patient Numbers and Case Ascertainment in the North of Scotland

Between 1st October 2019 and 30th September 2020 a total of 59 cases of cervical cancer were diagnosed in the North of Scotland and recorded through audit. Overall case ascertainment was 66.9%, this was lower than the previous year with a result of 95.7%. The number of cases and case ascertainment may have been impacted, in part, by the pausing of NHS Scotland's national screening programmes from March 2020 due to Coronavirus (COVID-19)¹. Cervical Cancer QPI data includes the source of cancer referral, previous years have shown that the highest percentage or majority were referred via the screening service, however, the data for 2019-2020 shows that less than 34% were referred through the screening service and the highest percentage were referred by a primary care clinician (39%).

Case ascertainment and proportion of NoS total for patients diagnosed with cervical cancer in 2019-2020

	Grampian	Highland	Orkney	Shetland	Tayside	W Isles	NoS
No. of Patients 2019-20	18	13	0	0	27	1	59
% of NoS total	30.5%	22.0%	0%	0%	45.8%	1.7%	100%
Mean ISD Cases 2015-19	35.2	13.4	0.4	0.6	37.2	1.4	88.2
% Case ascertainment 2019-20	51.1%	97.0%	0%	0%	72.6%	71.4%	66.9%

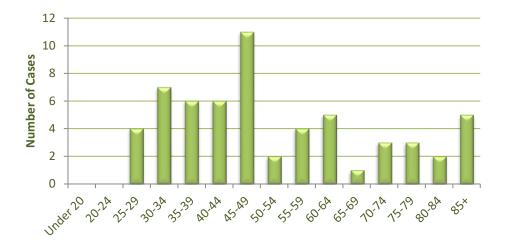


Patients diagnosed in the North of Scotland and percentage referred via screening service from 2016-2020.

For patients included within the audit, data collection was near complete. As such, QPI calculations based on data captured are considered to be representative of patients diagnosed with cervical cancer during the audit period.

2. Age Distribution

The figure below shows the age distribution of patients diagnosed with cervical cancer in the North of Scotland in 2019-2020. The highest number of diagnoses were seen within the 45-49 years age bracket.



Age distribution of patients diagnosed with cervical cancer in the North of Scotland, 2019-2020.

3. Performance against Quality Performance Indicators (QPIs)

Definitions for the QPIs reported in this section are published by Health Improvement Scotland², while further information on datasets and measurability used are available from Information Services Division³. Data for most QPIs are presented by Board of diagnosis; however QPI 5, relating to surgical margins, is presented by Hospital of Surgery. In addition, QPI 8, clinical trials and research study access, is reported by NHS Board of residence.

*Where the number of cases per Board is between one and four, results have been excluded from charts and tables to minimise the risk of disclosure. However, all board results are included within the total for the North of Scotland.

4. Governance and Risk

QPI performance is overseen by the North Cancer Alliance and its constituent groups, with an assessment of clinical risk and action planning undertaken collaboratively and reporting at board and regional level. Actions will be overseen by the Pathway Boards and reported concurrently into the NCA governance groups and the Clinical Governance committees at each North of Scotland health board.

Further information is available here.

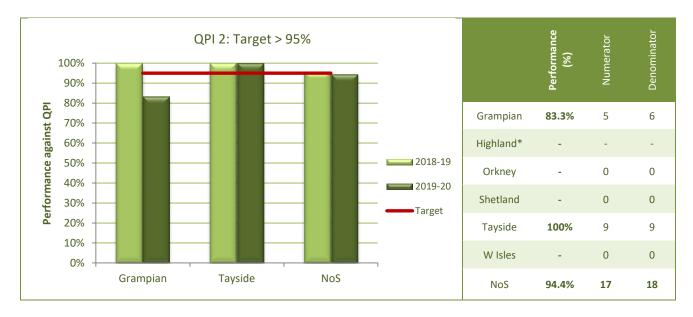
QPI 1 Radiological Staging

Proportion of patients with cervical cancer who have an MRI of the pelvis performed prior to definitive treatment.



QPI 2 Positron Emission Tomography/Computed Tomography (PET/CT)

Proportion of patients with cervical cancer, for whom primary definitive treatment is radical radiotherapy, who have PET/CT imaging.



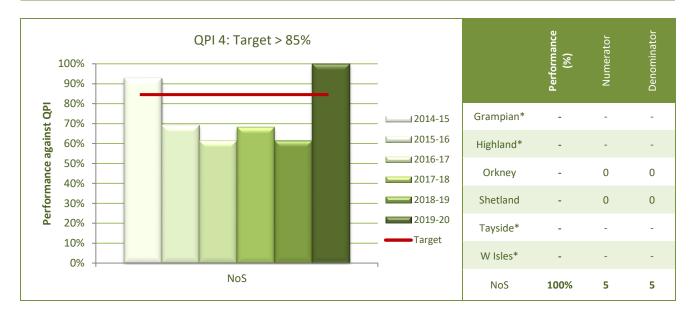
QPI 3 Multidisciplinary Team Meeting (MDT)

Proportion of patients with cervical cancer who are discussed at a MDT meeting before definitive treatment.



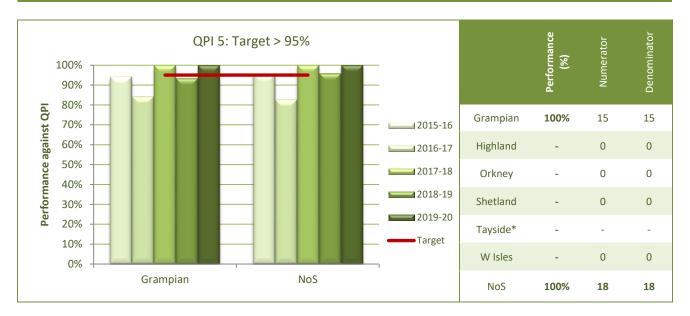
QPI 4 Radical Hysterectomy

Proportion of patients with stage IB1 cervical cancer (as defined by radiology and/or histopathology) who undergo radical hysterectomy.



QPI 5 Surgical Margins

Proportion of patients with cervical cancer who have surgical margins clear of tumour following hysterectomy.



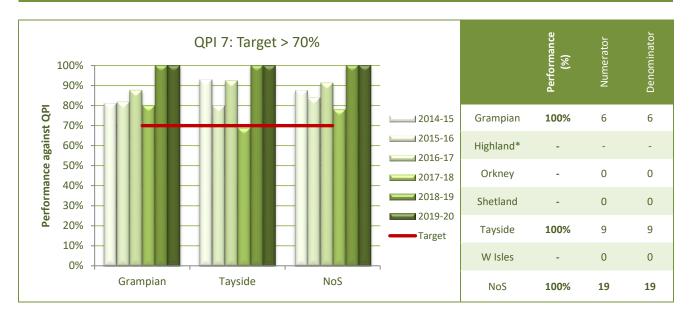
QPI 6 56 Day Treatment Time for Radical Radiotherapy

Proportion of patients with cervical cancer undergoing radical radiotherapy whose overall treatment time, from the start to the end of treatment, is not more than 56 days.



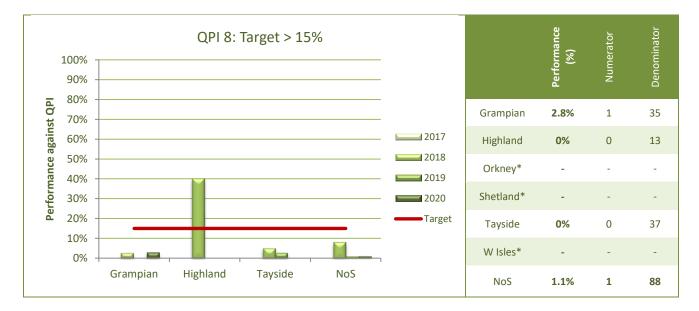
QPI 7 Chemoradiation

Proportion of patients with cervical cancer undergoing radical radiotherapy who receive concurrent chemotherapy.



QPI 8 Clinical Trials and Research Study Access

Proportion of patients diagnosed with cervical cancer who are consented for a clinical trial / research study. Data reported are for patients consented in 2020.



References

- 1. Public Health Scotland. Coronavirus and screening programmes, 2021. Available at: http://www.healthscotland.scot/health-topics/screening/coronavirus-and-screening-programmes
- Scottish Cancer Taskforce, 2018. Cervical Cancer Clinical Quality Performance Indicators, Version 3.0. Health Improvement Scotland. http://www.healthcareimprovementscotland.org/his/idoc.ashx?docid=6d6ae7c8-b410-4b6f-8c77-54d68432d6fe&version=-1
- 3. http://www.isdscotland.org/Health-Topics/Cancer/Cancer-Audit/

Appendix 1: Clinical trials and research studies for patients with cervical cancer open within the North of Scotland in 2020.

Trial	Principle Investigator	Patients consented into trial in 2020	
COMICE	Ann-Maree Kennedy	Y	