

<b>Appraisal of quality of indicator for provisional CCG OIS</b>	
<b>Indicator ref.:</b> HFra10	<b>Indicator title:</b> Of people with hip fracture, the proportion who receive surgery on the day of, or the day after, admission.
<u>Key considerations for the NICE Committee</u>	<ul style="list-style-type: none"> <li>The National Hip Fracture Database (NHFD) has been identified as a source for this indicator. Around 95% of the cases occurring annually are now documented by NHFD. For the period 1st April 2011 to 31st March 2012 the number of hip fractures recorded in the NHFD is 60,353. 41,225 (68.3%) of cases meet the indicator numerator criteria.</li> <li><b>In summary: the HSCIC view is that this indicator is feasible.</b></li> </ul>
<u>Rationale</u>	<p>This indicator is based on the NICE Quality Standard for Hip Fracture in adults, statement 5: 'People with hip fracture have surgery on the day of, or the day after, admission.'</p> <p>The NICE Clinical Guideline 124, recommendation 1.2.1 recommends that surgery is performed on the day of, or the day after, admission.</p>
<u>Suitability of indicator for purpose</u>	<p><b>Data Quality dimensions:</b></p> <p><b>Completeness</b> Since 2007, NHFD coverage has expanded steadily, with all 188 eligible hospitals in England, now registered to participate in this optional audit. ('Eligible' indicates that they provide a comprehensive hip fracture service for a local population)</p> <p><b>Accuracy</b> 97% of the eligible hospitals regularly upload case records in a standard dataset format that covers casemix, care and outcomes. Hospitals receive benchmarked feedback that enables clinicians and managers to monitor and improve the care they provide.</p> <p><b>Timeliness</b> The underlying data required for the construction of the indicator are available on an annual basis.</p> <p><b>Accessibility</b> The underlying data are held by the National Hip Fracture Database and published in the annual audit report.</p> <p><b>Relevance</b> This could be used by CCGs to assess the level of service provision that they commission as it contributes to the quality of outcome for the patient.</p>
<u>What is measured</u>	<p><b>Source of data</b> National Hip Fracture Database</p> <p><b>Denominator</b> The number of patients in the National Hip Fracture Database</p> <p><b>Numerator</b> Of the denominator, the number of patients who receive surgery on the same day, or the day after, admission</p>

<u>How data are aggregated</u>	This indicator will be a percentage																																																																													
<u>Risk adjustment</u>	This indicator would not be adjusted or standardised																																																																													
<u>Scientific validity</u>	There may be local variation in data quality, particularly diagnostic and procedure coding.																																																																													
<u>Interpretation</u>	A high percentage is desirable; as per the NICE Clinical Guideline 124 referenced in the rationale.																																																																													
<u>Equality assessment</u>	The following fields are available in NHFD which would support analysis by the following equality dimensions: Age Gender																																																																													
<u>Use, follow-up investigation and action</u>	The data could be analysed by the equality dimensions to investigate if there are specific issues within certain groups. HSCIC will assess the options for this analysis as part of further development and checking for data quality issues. Publication of the indicator broken down by the equality dimensions may be restricted due to suppression (numbers of 5 or less are not published to ensure that individuals cannot be identified), but CCGs could also undertake local analysis.																																																																													
<u>Feedback from HSCIC consultation</u>	<table><tr><th>Question</th><th>N</th><th colspan="5">Response (%)</th></tr><tr><td>Organisation</td><td>1</td><td colspan="5">General Practice (100%)</td></tr><tr><td></td><td></td><td>Strongly Agree</td><td>Agree</td><td>Disagree</td><td>Strongly Disagree</td><td>Don't Know</td></tr><tr><td>Well defined</td><td>1</td><td>100.0%</td><td>0.0%</td><td>0.0%</td><td>0.0%</td><td>0.0%</td></tr><tr><td>Well constructed</td><td>1</td><td>100.0%</td><td>0.0%</td><td>0.0%</td><td>0.0%</td><td>0.0%</td></tr><tr><td></td><td></td><td>Yes, significant issues</td><td>Yes, minor issues</td><td>No Issues</td><td colspan="2">Don't Know</td></tr><tr><td>Data Quality issues</td><td>1</td><td>0.0%</td><td>0.0%</td><td>0.0%</td><td colspan="2">100.0%</td></tr><tr><td></td><td></td><td>Highly likely</td><td>Quite likely</td><td>Quite unlikely</td><td>Highly unlikely</td><td>Don't know</td></tr><tr><td>Likely service improvements</td><td>1</td><td>100.0%</td><td>0.0%</td><td>0.0%</td><td>0.0%</td><td>0.0%</td></tr><tr><td>Results group dependant</td><td>1</td><td>0.0%</td><td>0.0%</td><td>0.0%</td><td>100.0%</td><td>0.0%</td></tr><tr><td>Likely perverse incentives</td><td>0</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td></tr></table> <p><u>Do you have any other views or general feedback that you would like to provide about this indicator?</u></p> <p>Do they actually need surgery would be my question, but generally this is a good idea</p>	Question	N	Response (%)					Organisation	1	General Practice (100%)							Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Well defined	1	100.0%	0.0%	0.0%	0.0%	0.0%	Well constructed	1	100.0%	0.0%	0.0%	0.0%	0.0%			Yes, significant issues	Yes, minor issues	No Issues	Don't Know		Data Quality issues	1	0.0%	0.0%	0.0%	100.0%				Highly likely	Quite likely	Quite unlikely	Highly unlikely	Don't know	Likely service improvements	1	100.0%	0.0%	0.0%	0.0%	0.0%	Results group dependant	1	0.0%	0.0%	0.0%	100.0%	0.0%	Likely perverse incentives	0	-	-	-	-	-
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Sample data – This sample data is for the full-year 2011/12

CCG	Denominator	Numerator	%
CCG1	79	16	20.3%
CCG2	107	31	29.0%
CCG3	176	64	36.4%
CCG4	384	142	37.0%
CCG5	118	44	37.3%
CCG6	191	72	37.7%
CCG7	106	43	40.6%
CCG8	100	42	42.0%
CCG9	104	44	42.3%
CCG10	132	56	42.4%

CCG	Denominator	Numerator	%
CCG202	267	227	85.0%
CCG203	136	116	85.3%
CCG204	194	166	85.6%
CCG205	322	276	85.7%
CCG206	387	332	85.8%
CCG207	138	119	86.2%
CCG208	430	386	89.8%
CCG209	358	329	91.9%
CCG210	541	501	92.6%
CCG211	441	428	97.1%

