

Pennine Acute Hospitals NHS Trust

Greater Manchester A04

The Pennine Acute Hospitals NHS Trust incorporates Rochdale Infirmary, North Manchester General Hospital, Fairfield General Hospital in Bury, and Royal Oldham Hospital <http://www.pat.nhs.uk/> <<http://www.pat.nhs.uk/>>

Patient inclusion and data sources

The majority of these results are for patients in England and Wales diagnosed with bowel cancer 1 Apr 2019 – 31 Mar 2020. The exceptions are for adjuvant chemotherapy, APER/Hartmann's and the five trust outcomes: 30-day unplanned readmission, 30-day unplanned return-to-theatre, 90-day mortality 2-year mortality and unclosed ileostomy.

30-day unplanned readmission, 30-day unplanned return to theatre and 90-day mortality are further restricted to patients undergoing surgery up to 31 March 2020. Two-year mortality estimates include patients undergoing a major resection between 1 April 2017 and 31 March 2018. Adjuvant chemotherapy estimates include patients undergoing major resection for pathological stage III colon cancer between 01 December 2016 and 31 August 2019.

The Audit dataset is linked to Hospital Episode Statistics (HES) and Patient Episode Database for Wales (PEDW) at the patient level to obtain further information on patient care and follow-up such as stoma reversal and emergency readmissions in England/Wales. The dataset also links to Office of National Statistics records. These provide information about date, place and cause of death.

NBOCA also links to the National Radiotherapy Dataset (RTDS) for information on radiotherapy treatment in England, and the Systemic Anti-Cancer Therapy database (SACT) for information on chemotherapy treatment in England.

Data Quality

Case ascertainment

Number of patients reported to the Audit as a percentage of the number of patients admitted for the first time to the trust/network with a diagnosis of bowel cancer within the audit period according to NCRAS in England and PEDW in Wales. This can be larger than 100 if more patients are reported to the Audit than identified in NCRAS/PEDW.

Data completeness

% of relevant patient group with useable value of data item.

ASA grade

% of patients recorded as having a major resection who have a particular ASA grade recorded, or no ASA recorded.

Management of all patients

Potentially curative patients

Patients electively diagnosed with colon cancer with pre-treatment staging of T2-T4 and no evidence of metastatic disease.

Management of patients having major resection

At least 12 lymph nodes excised (%)

% of colon cancer patients undergoing major resection with a recorded number of lymph nodes, who had at least 12 lymph nodes examined.

Adjuvant chemotherapy

% of adjuvant chemotherapy in patients undergoing major resection for pathological stage III colon cancer between 01 June 2016 and 31 August 2019. These are unadjusted chemotherapy rates. SACT and HES data re used for patients treated in England and PEDW data are used for patients treated in Wales.

Rectal cancer patients

Neo-adjuvant therapy (%)

% of rectal cancer patients having short- or long-course radiotherapy prior to major resection.

Circumferential resection margin: Negative (%)

% of rectal cancer patients undergoing major resection whose CRM is reported to be negative.

Circumferential resection margin: Recorded (%)

% of rectal cancer patients undergoing a major resection who have a recorded CRM.

APER rate (%)

% of patients with rectal cancer undergoing abdominoperineal excision of the rectum and therefore having a permanent stoma this audit year.

APER/Hartmann's (%)

% of patients whose rectal cancer resection is an abdomino-perineal excision of rectum (APER)/pelvic exenteration/Hartmann's 1 April 2014 to 30 September 2018.

Compare trust outcomes

Funnel plots display trust risk-adjusted outcomes for 30-day unplanned readmission, 30-day unplanned return to theatre, 90-day mortality, 2-year mortality and 18-month unclosed ileostomy. The funnel regions represent the 95 per cent limit and the 99.8 per cent limit for trusts compared to the national average. Those trusts with results outside the outer (99.8 per cent) limit are considered potential outliers.

Risk adjustment is performed using the seven items listed under Data Quality as well as mode of admission (elective/emergency) and number of co-morbidities according to HES/PEDW, and an interaction between age and distant metastases. Missing values are imputed using Multiple Imputation. The model for two-year mortality additionally includes interactions between follow-up time (0-3 months after surgery vs. 3-24 months after surgery) and all of the risk factors.

See [FAQs <https://www.nboca.org.uk/about/faq/>](https://www.nboca.org.uk/about/faq/) for more details.

Data Quality

All Patients:	Trust	Network	National
Number of patients in Audit	447	1550	32641
Case ascertainment (%)	Good	Good	Good
Data completeness of:			
– Pre-treatment TNM (%)	98	94	85

All Patients:	Trust	Network	National
– Performance status (%)	85	86	86

Patients having major resection:	Trust	Network	National
Number of patients in Audit	226	920	18552
ASA grade 1 (%)	6	14	9
ASA grade 2 (%)	54	50	53
ASA grade 3 (%)	37	33	30
ASA grade 4+ (%)	3	2	2
ASA grade not recorded (%)	N/A	1	6
Data completeness of:			
7 Audit items for risk-adjustment (%)	100	97	89

Key:

- > 80%
- 50 - 80%
- < 50%

Management of all patients

All Patients:	Trust	Network	National
Number of patients in Audit	447	1546	29766
Seen by Clinical Nurse Specialist (%)	100	94	86

All patients deemed potentially curative	Trust	Network	National
Number of potentially curative patients	90	374	8157
Undergoing major resection (%)	78	83	83

Management of patients having major resection

Patients having major resection:	Trust	Network	National
Number of patients in Audit	226	920	18515
Distant metastases (%)	3	5	6
Urgent or emergency surgery (%)	14	16	21
At least 12 lymph nodes excised (%)	89	88	86
Laparoscopic surgery attempted (%)	74	61	71

Patients having major resection:	Trust	Network	National
Risk-adjusted length of stay > 5 days (%)	50	60	58

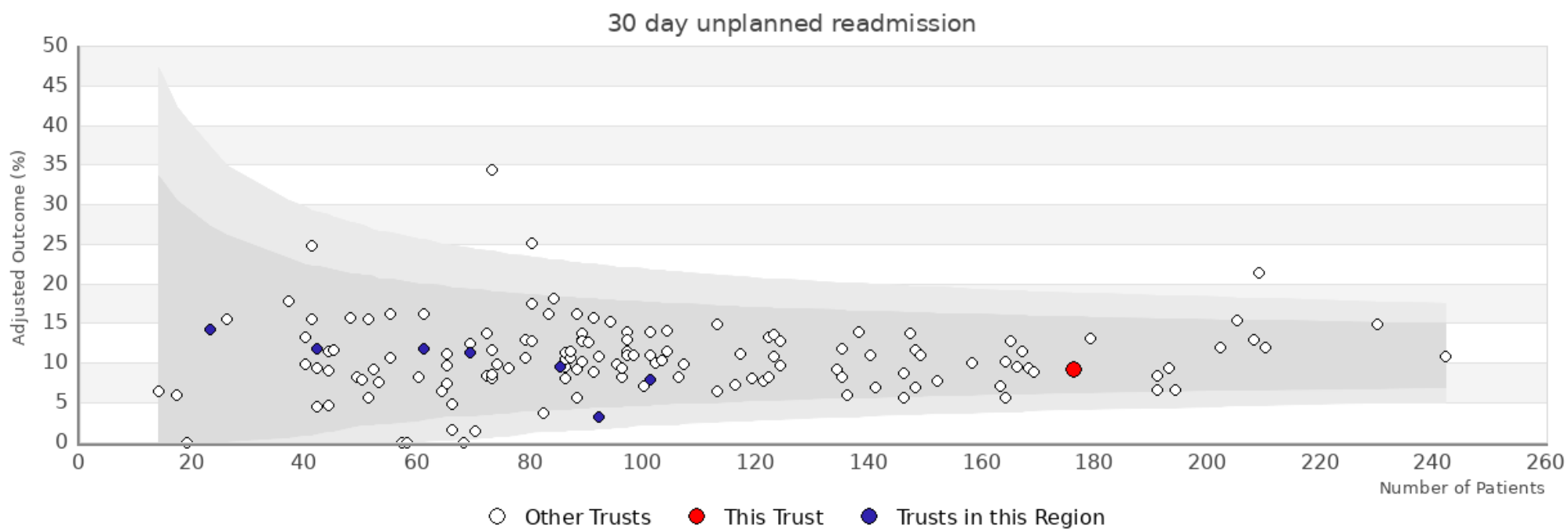
Patients having major resection for stage III colon cancer:	Trust	Network	National
Number of patients in audit	130	535	10335
Adjuvant chemotherapy (%)	56	56	63

Rectal cancer patients

Patients having major resection:	Trust	Network	National
Number of patients in Audit	48	184	4137
Neoadjuvant therapy (%)	31	47	34
Circumferential resection margin: Recorded (%)	100	97	90
Circumferential resection margin: Negative (%)	98	90	84
Rectal volume	N/A	N/A	N/A

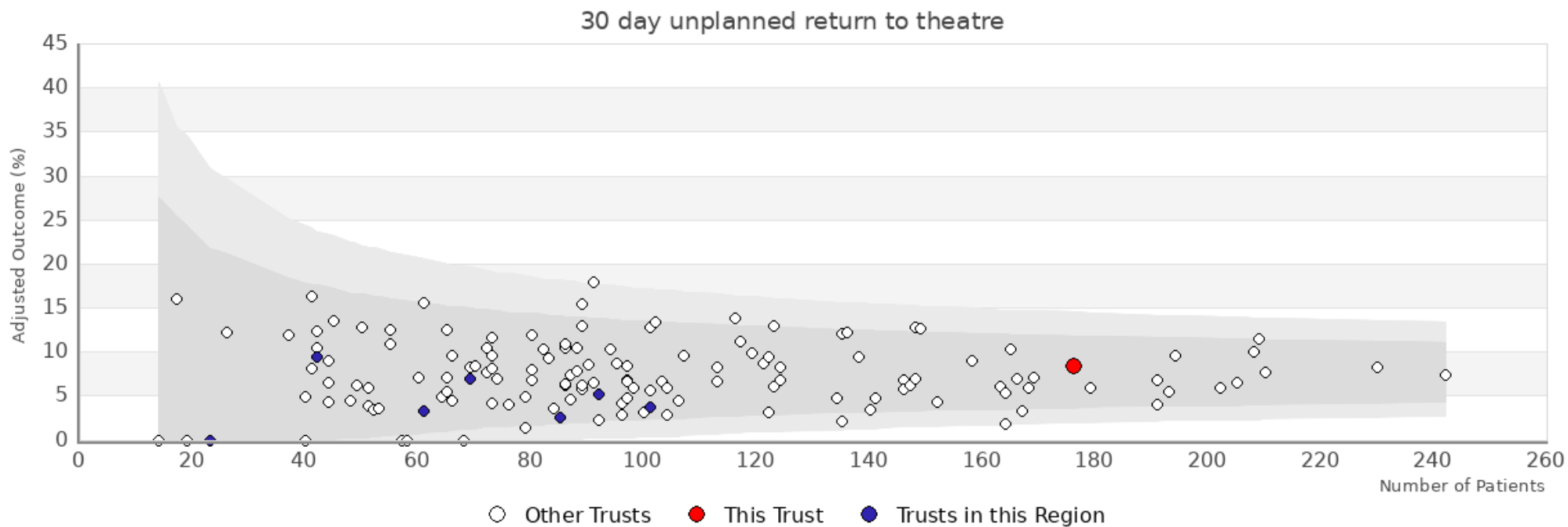
Patients in APER/Hartmanns estimate:	Trust	Network	National
Number of patients in APER/Hartmanns estimate	180	772	17956

Patients in APER/Hartmanns estimate:	Trust	Network	National
APER/Hartmanns (%)	33	45	37



Trust	Number	Adjusted	Observed
Pennine Acute Hospitals NHS Trust	176	9.1%	9.1%
Other trusts within the region: Greater Manchester			
Bolton NHS Foundation Trust	92	3.2%	3.3%
University Hospital of South Manchester NHS Foundation Trust	101	7.9%	7.9%

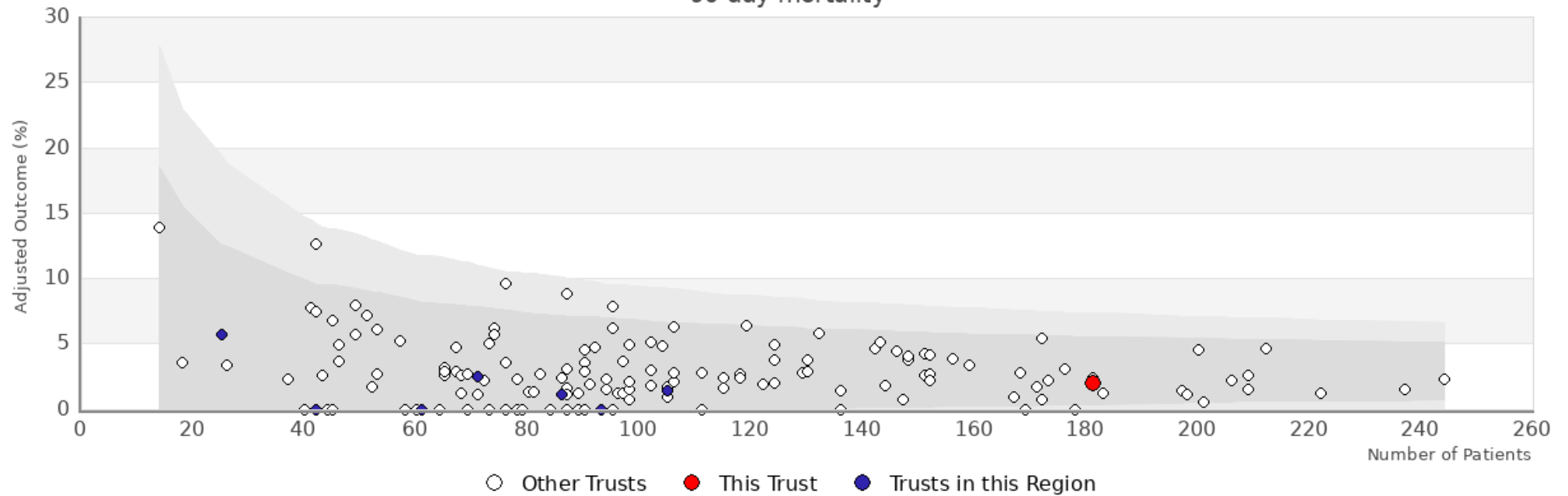
Trust	Number	Adjusted	Observed
Salford Royal NHS Foundation Trust	61	11.8%	11.5%
Stockport NHS Foundation Trust	85	9.5%	9.4%
Tameside Hospital NHS Foundation Trust	42	11.8%	11.9%
The Christie NHS Foundation Trust	23	14.3%	17.4%
Wrightington, Wigan and Leigh NHS Foundation Trust	69	11.3%	10.1%



Trust	Number	Adjusted	Observed
Pennine Acute Hospitals NHS Trust	176	8.5%	8.5%
Other trusts within the region: Greater Manchester			
Bolton NHS Foundation Trust	92	5.1%	5.4%
University Hospital of South Manchester NHS Foundation Trust	101	3.7%	4%

Trust	Number	Adjusted	Observed
Salford Royal NHS Foundation Trust	61	3.2%	3.3%
Stockport NHS Foundation Trust	85	2.5%	2.4%
Tameside Hospital NHS Foundation Trust	42	9.4%	9.5%
Wrightington, Wigan and Leigh NHS Foundation Trust	69	6.9%	5.8%

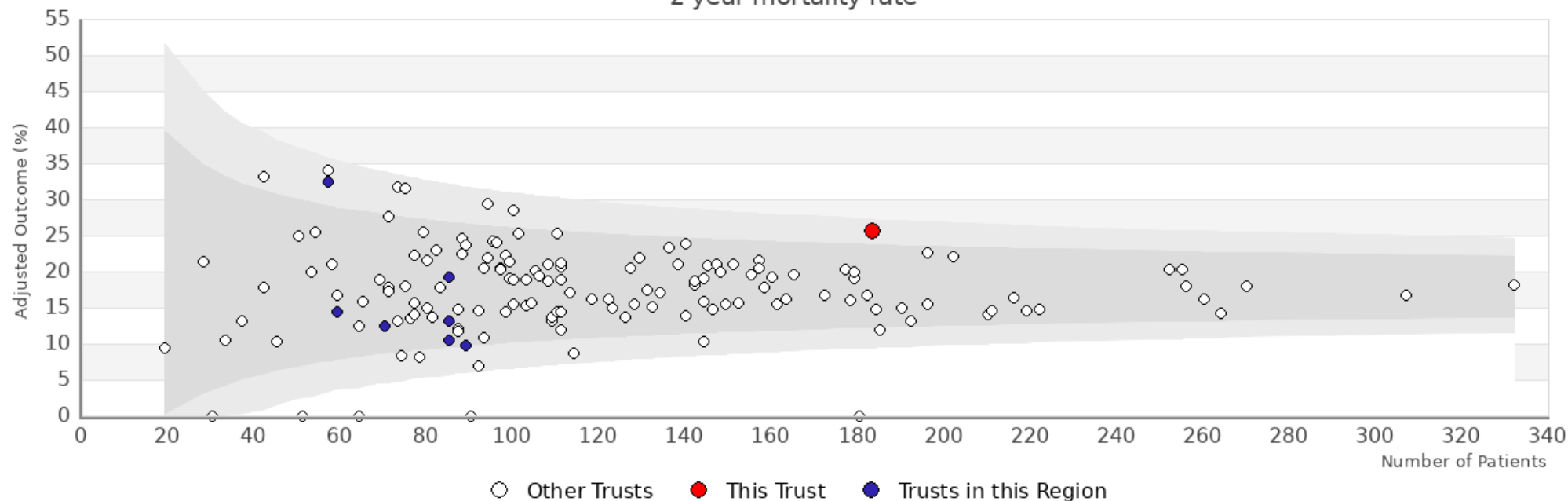
90 day mortality



Trust	Number	Adjusted	Observed
Pennine Acute Hospitals NHS Trust	181	2%	1.7%
Other trusts within the region: Greater Manchester			
University Hospital of South Manchester NHS Foundation Trust	105	1.4%	1.9%
Stockport NHS Foundation Trust	86	1.1%	1.2%

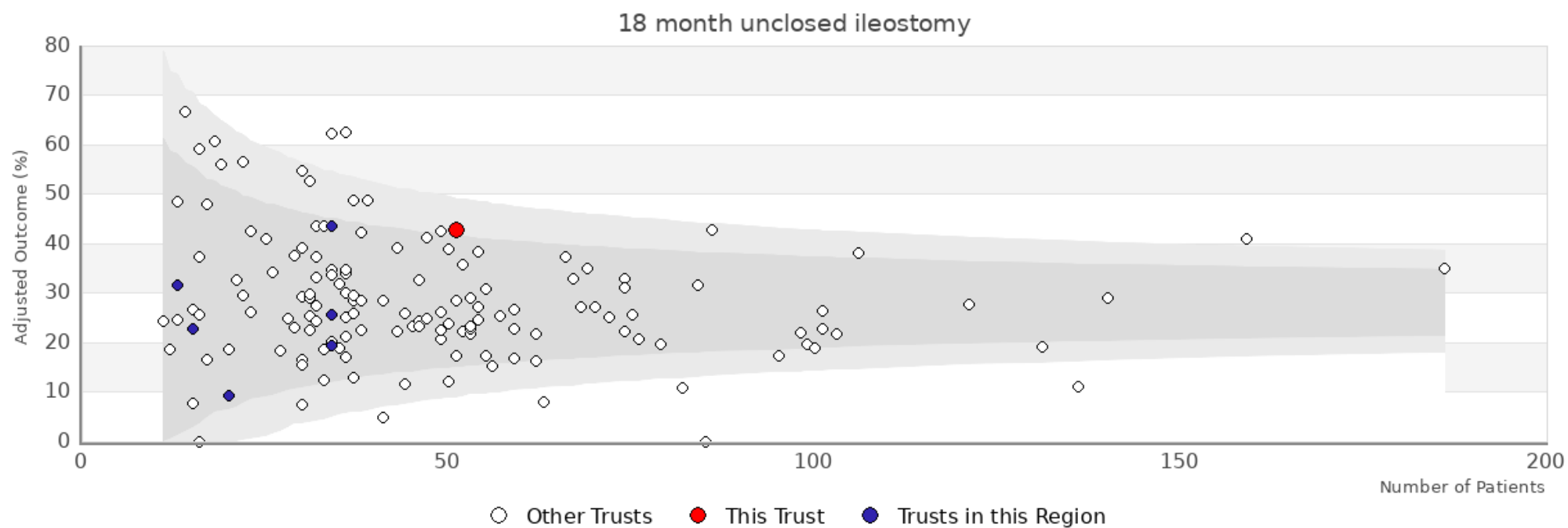
Trust	Number	Adjusted	Observed
The Christie NHS Foundation Trust	25	5.7%	4%
Wrightington, Wigan and Leigh NHS Foundation Trust	71	2.5%	1.4%

2 year mortality rate



Trust	Number	Adjusted	Observed
Pennine Acute Hospitals NHS Trust	183	25.7%	21.5%
Other trusts within the region: Greater Manchester			
Bolton NHS Foundation Trust	85	10.4%	11.1%
University Hospital of South Manchester NHS Foundation Trust	89	9.7%	13.5%

Trust	Number	Adjusted	Observed
Salford Royal NHS Foundation Trust	70	12.5%	12%
Stockport NHS Foundation Trust	85	13.2%	18.1%
Tameside Hospital NHS Foundation Trust	57	32.4%	38.7%
The Christie NHS Foundation Trust	59	14.4%	14.4%
Wrightington, Wigan and Leigh NHS Foundation Trust	85	19.3%	15.4%



Trust	Number	Adjusted	Observed
Pennine Acute Hospitals NHS Trust	51	42.7%	41.2%
Other trusts within the region: Greater Manchester			
Bolton NHS Foundation Trust	34	25.6%	23.5%
University Hospital of South Manchester NHS Foundation Trust	34	19.4%	20.6%

Trust	Number	Adjusted	Observed
Salford Royal NHS Foundation Trust	15	22.9%	20%
Stockport NHS Foundation Trust	34	43.5%	47.1%
Tameside Hospital NHS Foundation Trust	20	9.2%	10%
Wrightington, Wigan and Leigh NHS Foundation Trust	13	31.7%	30.8%