

VTE risk assessment data collection Q1 2011-12 Key Points

1.0 Background

- 1.1 This is the fourth publication of the Department of Health VTE risk assessment data collection. The data collection was first made mandatory from June 2010, and the publication refers to the fourth full quarters data, April to June 2011.
- 1.2 The data collection asks for three items of information:
 1. Number of adult hospital admissions admitted in the month risk assessed for VTE on admission to hospital according to the DH/NICE National Tool
 2. Total number of adult hospital admissions admitted in the month
 3. Calculated from (1) and (2), the percentage of adult hospital admissions, admitted within the month assessed for risk of VTE on admission
- 1.3 Trusts are required to upload their data on VTE risk assessment onto Unify2 and signed off no later than 20 working days after the month end.
- 1.4 The full data tables can be found at:
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsStatistics/DH_127236
- 1.5 Guidance on the data collection can be found here:
http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_117030.pdf
- 1.6 As this is a relatively new data collection, Department of Health analysts will continue to keep the methodology under review. For any further queries on this data collection, or if you would like to provide feedback, please contact the VTE mailbox at vte@dh.gsi.gov.uk

2.0 VTE risk assessment

- 2.1 VTE is a significant international patient safety issue. The first step in preventing death and disability from VTE is to identify those at risk so that preventative treatments can be used. The purpose of this data collection is to quantify for the first time, the numbers of adult hospital admissions who are being risk assessed for Venous Thromboembolism (VTE) to allow appropriate prophylaxis based on national guidance from the National Institute for Health and Clinical Excellence (NICE)¹. Such measures have the potential to save many lives each year.
- 2.2 All providers of NHS funded acute hospital care (including foundation trusts and independent sector providers of acute NHS services) must complete this data collection. Providers of non-acute health services are not asked to complete this data collection, although they should be aware that all patients should be protected from unnecessary risk of VTE.

¹ The NICE guidance can be found at the following link: <http://guidance.nice.org.uk/CG92>

- 2.3 This data collection is a census of all patients – it is not appropriate to use sampling methodologies to produce estimates. This data collection also serves as the mechanism to enable providers to demonstrate to their commissioners that they have achieved the national CQUIN goal on VTE in 2011/12².
- 2.4 This data collection on VTE risk assessment is intended to embed VTE risk assessment across the NHS and will be critical in evaluating the impact of the National VTE Prevention Programme on improving health outcomes for patients. As a result, we expect to move quickly to focus on audit of appropriate prophylaxis.

3.0 Analysis

Number of data returns

- 3.1 In Q1 2011-12, the number of data returns submitted by NHS providers of acute funded care increased to 182. Over 54% of all providers returned a data submission between April and June 2011, an increase since Q4 2010-11. The proportion of NHS Acute Providers returning data reached just over 99% in this period. Please note that figures outlined in the further analysis of the data are based on only the number admissions as submitted in the data returns.

Table 1 – Number and proportion of providers submitting a data return

	Total	Returned VTE data					
		April		May		June	
	Number	%	Number	%	Number	%	
NHS Acute Providers	163	162	99.4%	162	99.4%	162	99.4%
PCT Providers	16	1	6.3%	1	6.3%	1	6.3%
IS Providers	153	19	12.4%	19	12.4%	19	12.4%
Total	332	182	54.8%	182	54.8%	182	54.8%

Nil returns

- 3.2 Providers are required to provide information based on a census of all patients. Providers who submit data based on a sample or audit of patients are not included in the figures below, and are classed as a “nil return”. In each of April, May and June, three NHS Acute Providers reported nil returns. Please note that figures outlined in the analysis of the data do not include information from nil returns.

Proportion of total admissions getting a risk assessment

- 3.3 Over the period Q1 2011-12, providers reported 3.1m adult admissions to NHS funded acute care. 84% of these received a VTE risk assessment on admission, an increase compared to Q4 2010-11 (81%). The proportion increased each month from 83% in April to 86% in June 2011.
- 3.4 In Q1 2011-12, the proportion of admissions receiving a VTE risk assessment was higher for NHS acute providers (84.1%) than for Independent Sector providers (80.2%). The compliance rate for NHS acute providers is much higher than for other types of providers, so this may have an influence on the performance figures. In Q1 2011-12, only one PCT providing NHS funded

² Further information about CQUIN framework:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_091443

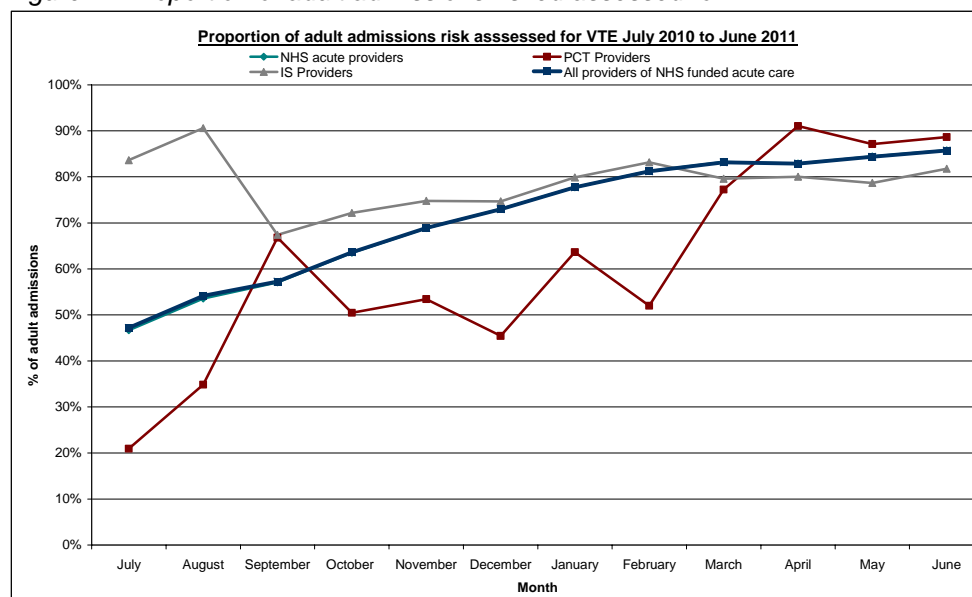
acute care returned data. In this PCT, the proportion of admissions receiving a VTE risk assessment was 90.9%.

Table 2 –Proportion of adult admissions risked assessed for VTE

	April	May	June	Q1 2011-12
NHS acute providers	82.9%	84.4%	85.8%	84.1%
PCT Providers	91.1%	87.1%	88.7%	90.9%
IS Providers	80.0%	78.7%	81.8%	80.2%
All providers of NHS funded acute care	82.9%	84.4%	85.7%	84.1%

3.5 A chart showing the proportion of adult admissions risked assessed for VTE since July 2010 is shown below. There has been a steady increase in the proportion of adult admissions risked assessed for VTE in all providers of NHS funded acute care, from 47% in July 2010 to 84% in March 2011.

Figure 1 –Proportion of adult admissions risked assessed for VTE



3.6 A breakdown of the number of trusts and their reported proportion of admissions who receive a VTE risk assessment is outlined below. Between April and June, the proportion of providers who reported that at least 50% of adult admissions were risk assessed for VTE increased from 92% to 95%. In June 2011, 131 providers reported that at least 90% of adult admissions were risk assessed for VTE, compared to 18 in July 2010.

Table 3 – Number of providers by proportion of adult admissions risk assessed for VTE

% of admissions assessed for VTE	April		May		June	
	Number of providers	% of providers	Number of providers	% of providers	Number of providers	% of providers
Nil returns	3	1.6%	3	1.6%	3	1.6%
<50%	11	6.0%	10	5.5%	6	3.3%
50-90%	53	29.1%	50	27.5%	42	23.1%
>90%	115	63.2%	119	65.4%	131	72.0%
Total	182	100.0%	182	100.0%	182	100.0%