

National Clinical Audit of Psychosis (NCAP)

Outlier Policy: EIP 2020/21 audit

This procedure follows the 2020^{1} guidance provided by HQIP, on modifying outlier escalation processes during the pandemic.

This policy applies to data collected as part of the EIP audit 2020/2021. The patient cohort for this audit was up to 100 patients per team, chosen by random sample by the NCAP team. The sample of patients was taken from those eligible patients on the caseload at the census date of 1 April 2020. The full eligibility criteria can be found <u>here</u>.

Trusts and Health Boards are referred to as services within this document.

Identifying outliers

- Once data cleaning and the main analysis is complete, further data analysis will be carried out on agreed NCAP standards to identify potential outliers.
- The agreed standards in 2020/2021 are:
 - o Standard 3: take up of Family Intervention
 - Standard 6: monitoring of the five cardiometabolic health risk factors (excluding alcohol intake and substance misuse);
- Services will be identified as outliers based on performance three standard deviations away from the total national sample. Services more than three standard deviations away from the TNS are considered alarm level outliers. *Please note that due to pressures from COVID-19, on this occasion we will not be notifying services more than two standard deviations away from the TNS (previously identified as alert level outliers).*
- If a service participating in the audit has submitted fewer than 20 cases, data will be insufficient to determine outlier status. The audit lead will be informed that their outlier status cannot be determined. A list of any such services will be provided to HQIP and the audit lead will be informed of this.
- If there are concerns regarding data quality which would prevent a conclusion about outlier status being determined for any service, the audit lead will be informed. A list of any such services will be provided to HQIP and the audit lead will be informed of this.

¹ <u>Outlier management for National Clinical Audits, HQIP, July 2020</u> National Clinical Audit of Psychosis v1.0 December 2020 *Approved by the NCAP Implementation Group 14/01/2021*



Informing Services

Stage	What action?	Who	Deadline
1	Analysis of NCAP data to identify potential outliers	NCAP	01/04/21
2	Where services have been identified as potential alarm outliers, NCAP will contact the audit leads with their analysed data and request that they identify data errors or provide justifiable explanations. Copies of this request will be sent to the Chief Executive (CEO) and Medical Director (MD).	NCAP	12/04/21
3	Services review their data for accuracy and provide a written response. The NCAP team will keep a log of these responses.	Services	17/05/21
4	NCAP review responses from services and re-analyse any corrected data.	NCAP	14/06/21
5	 If further analysis indicates that there is no case to answer, services will be sent a letter to confirm this, copying in the CEO and MD. Revised data and results will be provided to services. If, following receipt of a written response, Inaccurate data have been amended and the service remains an alarm level outlier; Submitted data were accurate and outlier status remains. The local NCAP lead will be contacted within five working days by telephone prior to sending written confirmation of alarm status, copying in CEO and MD. Communications will include data analysis and previous responses from NCAP lead. NCAP inform CEO of transparency and identification of their service in reporting. Alarm status: for services in England, NCAP will inform CQC, HQIP and NHS Improvement of alarm level outliers in June 2020. For services in Wales, NCAP will inform the Welsh government and HQIP.	NCAP	21/06/21

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6	Local NCAP leads will provide written acknowledgement within 10 working days of receipt of letters of outlier status and confirm a local investigation is taking place, copying in the CQC and HQIP or Welsh government. The CQC or Welsh government is then responsible for making any decisions as to whether the organisations' response is adequate. ²	Services	05/07/21
7	If no acknowledgement is received by 05/07, a reminder letter will be sent to the CEO, copying in the CQC or Welsh government and HQIP. If nothing is received within 15 working days, the CQC and NHS Improvement will be notified for services in England, and the Welsh Government for services in Wales, of non-compliance in consultation with HQIP.	NCAP	26/07/21
8	Comparative data identifying services has been included in national reporting. A list of services with an alarm level status for each outlier standard will be published on the NCAP website.	NCAP	