

iCompare Service Definition

Benchmarking and
Performance Intelligence

CHKS iCompare Programme

Online performance monitoring and benchmarking combined with a simple user interface to turn everyone into an expert analyst

A sophisticated and intuitive intelligence solution, the iCompare programme allows you to create your own scorecards or use/edit default scorecards to form alerts around indicators relevant to your Trust, division, specialty or key area; i.e. patient safety, finance, quality, assurance. All indicators are then available to view in various graphical outputs including, trends, bar charts, shape analyses, CuSum etc.

Interpretation of any data is the key to using information effectively to drive change and performance improvement, which is then monitored and tracked through the iCompare programme.

Key benefits:

- Helps you to provide assurance to stakeholders that efficiency is not achieved at the expense of quality and patient care
- Enables early detection of variations in performance and enables a swift response via targets and alerts functions
- Customisable scorecards to support Trust objectives
- Standard Key scorecards already configured; i.e. CQC indicators, Mortality, Patient Safety, Efficiency
- Converts robust data into actionable information that can be used to support decision-making
- Enables you to benchmark against other providers – both local and national – to help become best in class
- By providing patient level data and analysis, supports Trust improvement review

System features:

- Easy to export to MS Excel, CSV, Word and PDF files for inclusion in Quality Accounts and CQC reports
- Automatically updated as new data is released – national data sets are scheduled, local data can be updated as frequently as weekly depending on trust preference.
- Various presentation options including, heat maps, charts and tables
- Help function on every page
- Bespoke reports track performance by priority indications, division, specialty and local peers
- Fast upload of Trust data that is ready to access in just a few days – no reliance on a national data feed
- Shows percentile position within your peer group.

CHKS Emergency Care Module

Online monitoring and benchmarking to help emergency departments understand and optimise patient flows and plan effective use of resources

Key benefits:

- See at a glance your A&E performance to help you understand the factors behind the growing use of A&E
- Understand the impact on efficiency and patient outcomes
- Identify ways that care could be redirected or resources scheduled more effectively to help manage periods of peak demand
- Gives you fact based analytics to help you engage with primary and social care colleagues and commissioners
- Easy to use within the iCompare framework and allowing for customisation using filters, dates and peers.
- Comes with consultancy support to enable quick implementation and initial reporting of key issues.

System features:

- Benchmark A&E demand and services against external national and selected peer
- View waiting time performance by day of the week and time of arrival at A&E department or provider site
- Understand the quality of patient care and how key indicators are linked to an A&E attendance like readmissions, length of stay
- Profile patient demand and treatment pathways
- Highlight activity where treatment should take place in a more appropriate setting using the A&E diagnosis, procedure and investigation information
- Track the quality of your A&E and linked inpatient data

Data Analysis Toolkit Plus (DAT+)

The Data Analysis Toolkit Plus (DAT+) provides total flexibility in comparative analysis and reporting providing you with a powerful analytical ability that has, until now, been unavailable within the market place.

It allows you to run bespoke queries against the whole database to inform one-off information requirements. Alternatively you can configure to automatically produce regular reports for strategic and operational decision-making.

A significant addition to this toolkit is the provision of the RAMI / RALI and SHMI methodologies. This means that the tool can be used to analyse the risk of mortality using RAMI or SHMI methodologies for deceased patients but also the population in general. This would allow you to identify at consultant level, the mortality risk of a given case load. The tool can also be used to identify actual vs. expected mortality for episodes or spells at HRG or Diagnosis level. Other additions include:

- Tariff – to identify costs against activity
- Treatment Function Codes (mapped to Körner) – for easier analysis of all treatments given to patients

DAT+ allows bespoke queries to be written and run on the English HES database. It allows you to analyse and compare information reported in the CMDS at a granular level. You are able to query performance at HRG, Diagnosis or Procedure level. An example of using this tool effectively is to look at stroke patients with a secondary diagnosis of aspiration pneumonia. This is an indicator of the 'swallow screening' performed for stroke patients, a patient safety indicator.

DAT+ allows you to query your own data and the HES database. For example you could write a query asking DAT+ to identify patients with a primary diagnosis of stroke (by diagnosis code) and a secondary diagnosis of aspiration pneumonia. To link this query to mortality you could identify which of these patients had subsequently died. This information will allow you to create a mortality rate. Additionally DAT+ could be used to create a risk adjusted mortality score for this group and also look at the length of stay associated at patient level. This query could be run for your own data and also for any English trust that you wanted to compare against. The programme allows you to export patient ID so that patients can be identified for clinical audit.

DAT+ would allow you to re-run this query by saving the query for future use and would also allow you to set it up to run to a pre-determined schedule e.g. every quarter or monthly when new data is available. The inclusion of our Risk Adjusted Mortality Indicator (RAMI) and the new Summary Hospital Mortality Indicator (SHMI) to DAT+ will allow a further depth to this type of analysis. SHMI can be viewed in different ways. The profile of in and out of hospital deaths can show what is driving the outcome for the SHMI category. We include the national rate i.e. out of hospital for the category to help place into context the Trust position.

CHKS Customisation and Implementation Consultancy Package

Your dedicated CHKS consultant will ensure your initial iCompare implementation is completed and sufficient training is provided to relevant staff.

This package supports the full customisation of our iCompare programme allowing for personalised scorecards and reports – this package is for first year implementation only. The package also includes 5 training days, to be used in Year 1. As part of the implementation CHKS will work with your Trust contact to set up and run an implementation and user group. A CHKS consultant is your first point of contact. Our consultants are all NHS-experienced and can provide training, data analysis and interpretation, group facilitation, report writing and presentations and briefings to increase your understanding of the key issues you need to address. They work with you to:

- Agree data submission for new clients and check this data
- Report client data and compare with HES and obtain client acceptance of data received
- Establish Project/Steering Group
- Agree peer groups with Trust or initial peer for start up
- Process baseline indicators
- Create initial scorecards
- Plan and hold initial awareness sessions to ensure a clear understanding of the programme provided with key stakeholders
- Prepare presentation based on client initial data
- Meet project group to agree progress and any changes to the icompare set up
- Prepare initial Board Presentation
- Set up and roll out/workshops sessions for training and password allocation

Market Intelligence Programme

An on-line toolkit designed to support marketing, business planning process and the interface with commissioning in an acute trust.

The Market Intelligence Programme has two key elements:

- **My Commissioners** – enables you to track, examine and understand activity for your existing CCG and GP Practice commissioners. This supports the management of business risks and identification of opportunities within your existing markets.
- **My Market** – enables you to define markets, monitor performance indicators, and explore the opportunities within these wider areas. My Market also allows you to review and investigate the activities of other healthcare providers.

The programme is designed for service, divisional and business managers who need to track admission and referral patterns and understand the impact on services, activity and income.

System features

The following features are available throughout the programme:

1. Data grids and graphical reporting

Presents key activity, income and market share information over time to help you easily understand your market position, identify trends and highlight any changes that might need further investigation.

2. Maps including:

- Multiple CCG maps – showing all CCGs commissioning from your organisation
- CCG maps by provider - showing activity, income and market share for all providers for a CCG
- GP practice maps by provider – showing activity, income and market share for your GP commissioners.

3. Detailed analysis tools

Detailed analysis is available and shows variations in commissioners' demand and by patient grouping - this will help you and your commissioners understand how best to meet changing healthcare needs.

4. National datasets

Using the national datasets within the Market Intelligence Programme, you are able to understand the whole market.

Key benefits:

Develop your services:

- Identify opportunities to develop new services or grow existing ones
- Measure the success of service improvement initiatives.

Manage risks:

- Quickly detect risks to established activity or income
- Analyse competitor activity and understand the impact on your services
- Highlight risks to service improvement initiatives
- Identify commissioning trends to understand pressures in the healthcare system and support work to resolve them.

Engage with your commissioners:

- See where GPs and CCGs are commissioning their services from and how this affects your organisation
- Take a total view of the local healthcare market and the needs of your key commissioners
- Generate supporting data that informs commissioner discussions.

CHKS, part of Capita
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and **quality**
improvement services.

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