

Quality Outcomes Framework for NHS Wales

Phase 1 measures

Accessible and Reportable via Beacon Quality and Safety Dashboard from 1 October 2025

Quality Standard	Area of measurement	Measure name	Operational definition	Data collection plan
Safe	Mortality	RAMI	<p>Numerator: Total deaths for included spells Denominator: Total expected deaths for included spells</p> <p>Exclusions: Any episode in the spell with a COVID-19 diagnosis of U07.1 or U07.2 in a primary or secondary position, those spells are excluded from the model</p> <p>Type: Index Orientation: Lower is better</p>	<p>Where the data is stored: NDAP GCP (National Data Analytics Platform - Google Cloud Platform) Who owns the data: CHKS (Central Health Knowledge System) How the data is collected: CHKS API Frequency: Refreshed monthly Duration: Ongoing Exclusions: None</p>

Safe	Mortality	Crude mortality	<p>Numerator: Spells with Discharge Method=4 (death) Denominator: Total spells excluding well babies</p> <p>Exclusions: None Type: Percentage Orientation: Lower is better</p>	<p>Where the data is stored: NDAP GCP Who owns the data: CHKS How the data is collected: CHKS API Frequency: Refreshed monthly Duration: Ongoing Exclusions: None</p>
Safe	Safeguarding	Safeguarding Adults – Level 1 training	<p>Numerator: Number of staff who have completed the 'Safeguarding Adults - L1 training' competency within the Core Skills and Training Framework Denominator: Total staff (includes all staff groups) Exclusions: None Type: Percentage Orientation: Higher is better</p>	<p>Where the data is stored: NDAP GCP Who owns the data: HEIW How the data is collected: Extracted from the NHS Wales WFP Dashboard Frequency: Monthly Duration: Ongoing Exclusions: None</p>
Safe	Patient Safety	Never Events reported to NHS Wales Performance and Improvement	<p>Numerator: Number of Never Event classification National Reportable Incidents (NRIs) reported to NHS Wales Performance and Improvement Denominator: NA Exclusions: Rejected/down-graded NRIs Type: Volume Orientation: Lower is better</p>	<p>Where the data is stored: RL Datix Who owns the data: NHS Performance and Improvement How the data is collected: Extracted from the RL Datix Incident Reporting tool though the 'all listing' report Frequency: Monthly Duration: Ongoing Exclusions: Rejected/down-graded NRIs</p>

<p>Safe</p>	<p>Deconditioning</p>	<p>People allocated to a D2RA pathway or No Pathway Allocated within 1 Day of admission (Proportion of patients maintaining or improving their D2RA pathway from admission to discharge)</p>	<p>Numerator: Those with maintained or improved D2RA (discharge to recover and assess) recorded on admission and again on discharge. Denominator: Total number of Discharges in a whole calendar month Exclusions: Day case admission, regular day admissions, regular night admission, women using delivery facilities only and not applicable (patient classification 2, 3, 4, 5 and 8), Admitting Episode of the Hospital Provider spell where Treatment Function Codes in MH, Obs, Gynae, Maternity (CODES that start with 7 or 5), and patients that have died. Type: Percentage Orientation: Higher is better</p>	<p>Where the data is stored: DTIV Shared Drive (to be moved to NDAP GCP ETA Sept-25) Who owns the data: Six Goals for Urgent and Emergency Care National Programme How the data is collected: Health Board D2RA submission return forms Frequency: Monthly Duration: Ongoing Exclusions: None</p>
<p>Safe</p>	<p>Infections</p>	<p>Antibiotic prescribing rates - Antibacterial items per 1,000 STAR-PUs</p>	<p>Numerator: All antibacterial items (BNF Code = 0501, BNF Name = 'Antibacterial drugs') Denominator: 1,000 specific therapeutic group age-sex related prescribing units (STAR-PUs) Exclusions: None Type: Rate Orientation: Lower is better</p>	<p>Where the data is stored: NDAP GCP Who owns the data: NWSSP How the data is collected: Server for Prescribing Information Reporting and Analysis (SPIRA)- NPI Reporting Tool (Tableau extract download) Frequency: Quarterly Duration: Ongoing Exclusions: None</p>

<p>Timely</p>	<p>Access to care</p>	<p>12-month improvement trend in percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route), building towards national target of 80% by 31 March 2026</p>	<p>Numerator: The number of patients who start their first definitive cancer treatment within 62 days of the date of suspicion of cancer, regardless of how they were referred (e.g., GP referral, screening, consultant upgrade) Denominator: The total number of patients who start their first definitive cancer treatment, where the clock started at the point of suspicion of cancer, regardless of referral route</p> <p>Exclusions: None Type: Percentage Orientation: Higher is better</p>	<p>Where the data is stored: NDAP GCP Who owns the data: DTIV/DHCW but same data is published through StatsWales Frequency: Monthly Duration: Ongoing Exclusions: None</p>
<p>Timely</p>	<p>Access to care</p>	<p>Percentage of ophthalmology R1 appointments attended which were within their clinical target date or within 25% beyond their clinical target date</p>	<p>Numerator: The number of ophthalmology R1 (R1 = risk of irreversible harm or significant patient adverse outcome) appointments attended within their clinical target date or within 25% beyond their clinical target date Denominator: The total number of ophthalmology R1 appointments attended Exclusions: None Type: Percentage Orientation: Higher is better</p>	<p>Where the data is stored: Objective Connect Who owns the data: Welsh Government, General Ophthalmic Services (WGOS) How the data is collected: Eye Care Outcome monthly submission proforma by Welsh Government extracted through excel Frequency: Refreshed monthly Duration: Ongoing Exclusions: None</p>

<p>Effective</p>	<p>Population health</p>	<p>% of patients (aged 12 years and over) with diabetes who received all eight NICE recommended care processes</p>	<p>Numerator: Registered diabetes patients (type 1 and 2) 17 years or older who have received all eight NICE recommended care processes (</p> <ol style="list-style-type: none"> 1. HbA1c measurement, 2. Blood pressure measurement, 3. Cholesterol measurement, 4. Serum creatinine measurement, 5. Urine albumin-to-creatinine ratio, 6. Foot examination, 7. Body mass index measurement, 8. Smoking status recording) <p>within the last 12 months</p> <p>Denominator: Total registered diabetes patients (type 1 and 2) aged 17 years or older</p> <p>Exclusions: None</p> <p>Type: Percentage</p> <p>Orientation: Higher is better</p>	<p>Where the data is stored: NDAP GCP</p> <p>Who owns the data: Primary Care information Portal</p> <p>How the data is collected: Primary Care information Portal - All Wales Diabetes Module</p> <p>Frequency: Refreshed quarterly</p> <p>Duration: Ongoing</p> <p>Exclusions: None</p>
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<p>Efficient</p>	<p>Sustainability</p>	<p>Agency spend as a percentage of total pay bill</p>	<p>Numerator: Agency spend as the total cost of Agency staff (Invoiced payment) Denominator: Total pay bill as all Pay elements including Contracted cost, Bank cost and Agency Exclusions: None Type: Percentage Orientation: Lower is better</p>	<p>Where the data is stored: NDAP GCP Who owns the data: HEIW How the data is collected: Extracted from the NHS Wales WFP Dashboard Frequency: Monthly Duration: Ongoing Exclusions: None</p>
<p>Equitable</p>	<p>Communication</p>	<p>Preferred language of communication - Were you able to communicate in your preferred language? (%)</p>	<p>Numerator: Total 'Always' or 'Usually' response answers to question 'Were you able to communicate in your preferred language?' Denominator: Total response answers to question 'Were you able to communicate in your preferred language?' Exclusions: None Type: Percentage Orientation: Higher is better</p>	<p>Where the data is stored: NDAP GCP Who owns the data: CIVICA How the data is collected: CIVICA API Frequency: Monthly Duration: Ongoing Exclusions: None</p>

<p>Person-centred</p>	<p>Experience of care</p>	<p>Overall experience rating - People Experience Survey – Using a scale of 0 – 10 where 0 is very bad and 10 is excellent, how would you rate your overall experience?</p>	<p>Numerator: Total response scores (0-10) to question ' Using a scale of 0 – 10 where 0 is very bad and 10 is excellent, how would you rate your overall experience?'</p> <p>Denominator: Total response answers to question ' Using a scale of 0 – 10 where 0 is very bad and 10 is excellent, how would you rate your overall experience?'</p> <p>Exclusions: None</p> <p>Type: Average score</p> <p>Orientation: Higher is better</p>	<p>Where the data is stored: NDAP GCP</p> <p>Who owns the data: CIVICA</p> <p>How the data is collected: CIVICA API</p> <p>Frequency: Monthly</p> <p>Duration: Ongoing</p> <p>Exclusions: None</p>
<p>Person-centred</p>	<p>Patients as Partners</p>	<p>Patient involvement in care planning – People Experience Survey – Were you involved as much as you wanted to be in decisions about your care?</p>	<p>Numerator: Total 'Always' or 'Usually' response answers to question 'Were you involved as much as you wanted to be in decisions about your care?'</p> <p>Denominator: Total response answers to question 'Were you involved as much as you wanted to be in decisions about your care?'</p> <p>Exclusions: None</p> <p>Type: Percentage</p> <p>Orientation: Higher is better</p>	<p>Where the data is stored: NDAP GCP</p> <p>Who owns the data: CIVICA</p> <p>How the data is collected: CIVICA API</p> <p>Frequency: Monthly</p> <p>Duration: Ongoing</p> <p>Exclusions: None</p>