

Hospital Standardised Mortality Ratios (HSMRs)

14 November 2013



Background

- Requirement since 2010/11
- SMRs are published for Trusts in England annually; first published for HSC in Nov 2011
- Different methodologies are available & will give different results
- SMR is 1 measure of quality & is akin to a 'smoke alarm' – an alert to a potential problem that needs further investigation



Interpreting HSMRs

- HSMRs are calculated as a ratio of actual numbers of deaths ÷ expected number x 100
- Compared to the expected range from other Trusts
- Fluctuate over time – presented on funnel plots with 99.8% confidence limits
- If outside the expected range, warrants further investigation
- Key question – is it above the upper level?



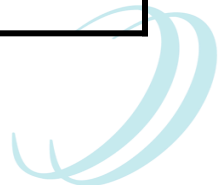
Methodology

- Acute activity data from April 2012-March 2013 (elective & emergency)
- Adjusted for case mix differences using the CHKS RAMI methodology
- Compared to 143 English NHS Acute Trusts

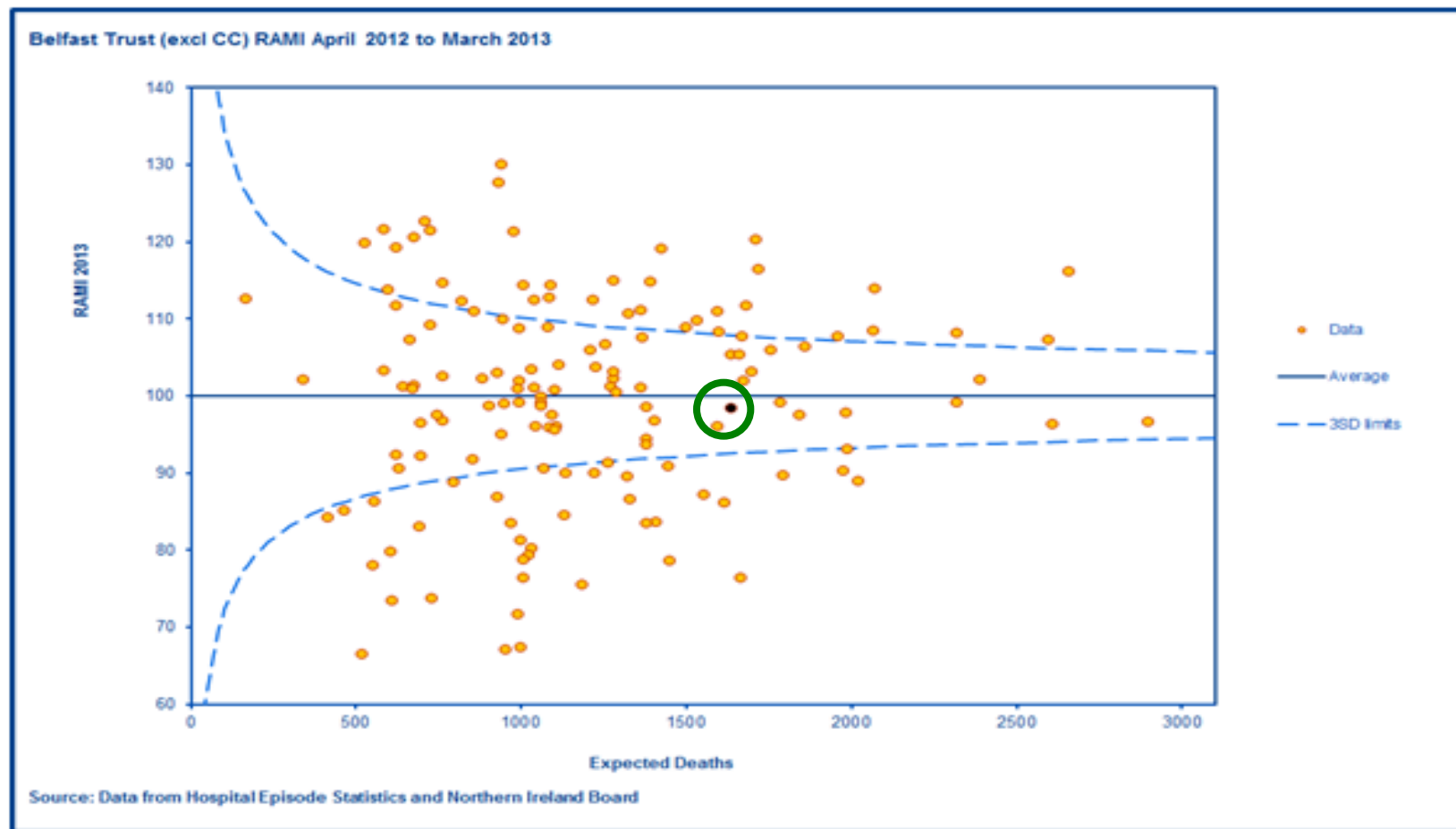


RAMI Scores 2012/13

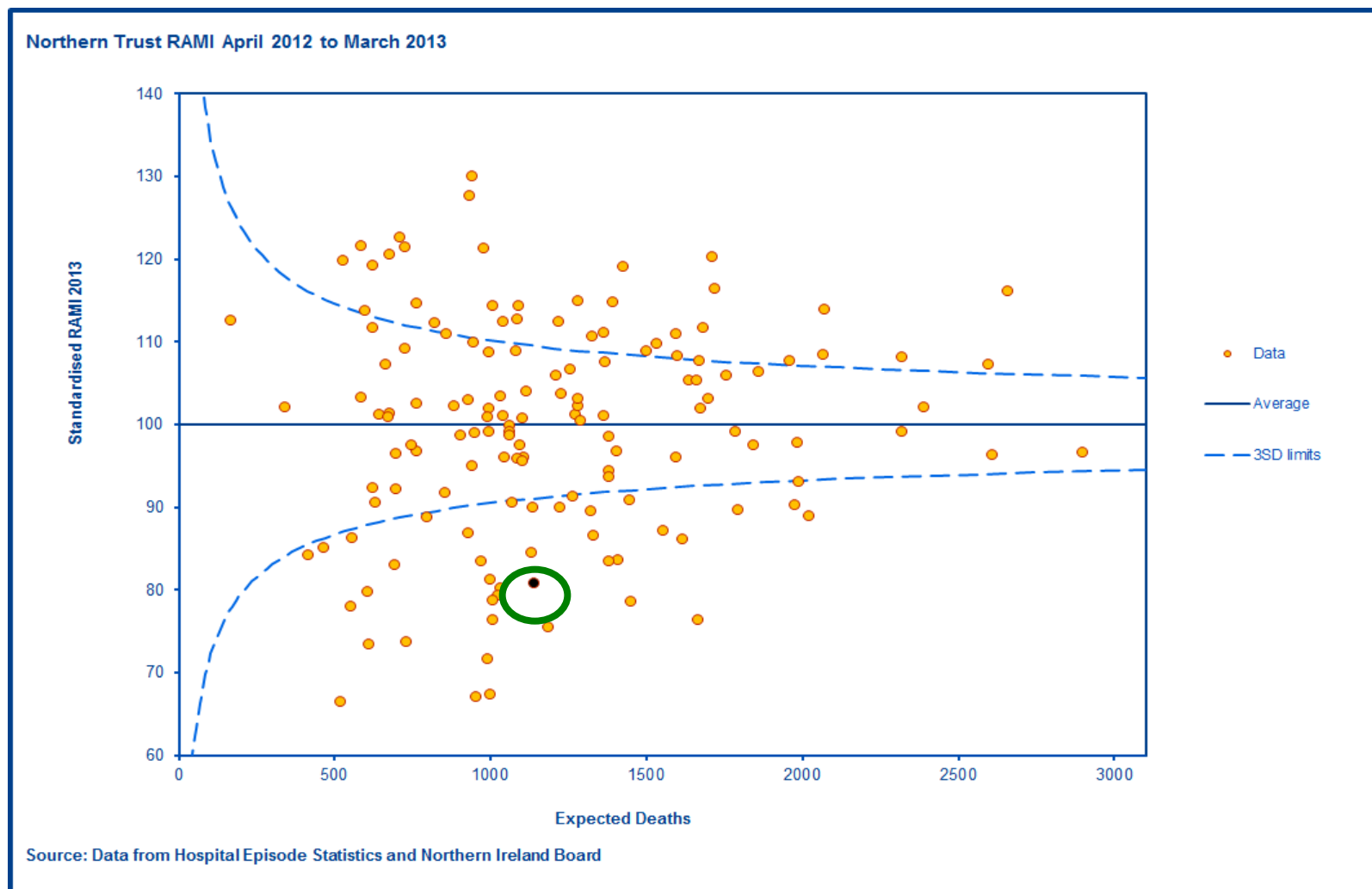
TRUST	RAMI Rebased Index Score	Normal Range (Confidence Limits)
BHSCT (excl Cancer Centre)	99.1	92.6-107.8
SHSCT	97	90.2-110.5
NHSCT	80.9	90.2-110.5
SET	86	90.8-109.1
WHSCT	89	89.3-111.6



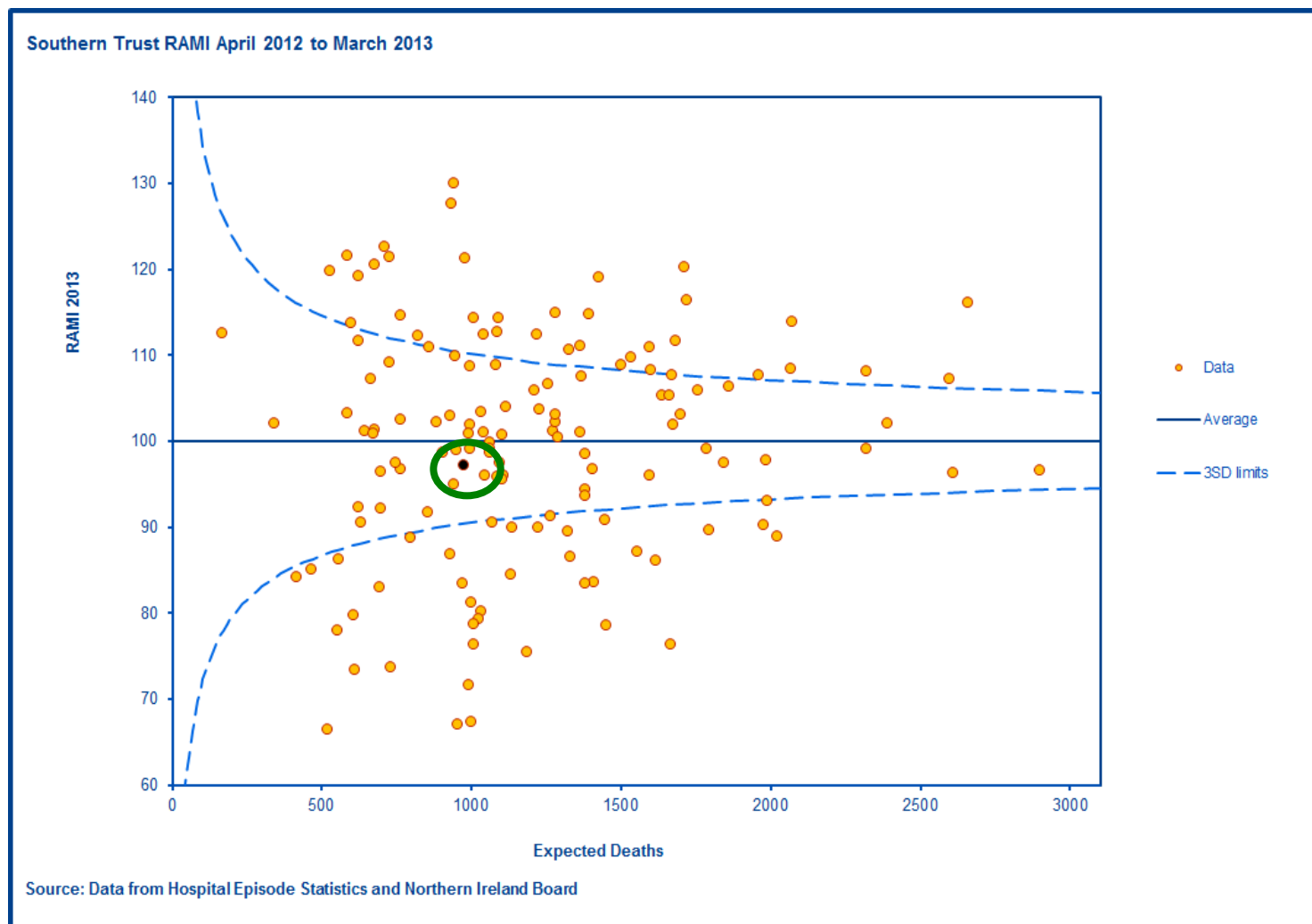
Belfast Trust (excl Cancer Centre) SMR 2012/13



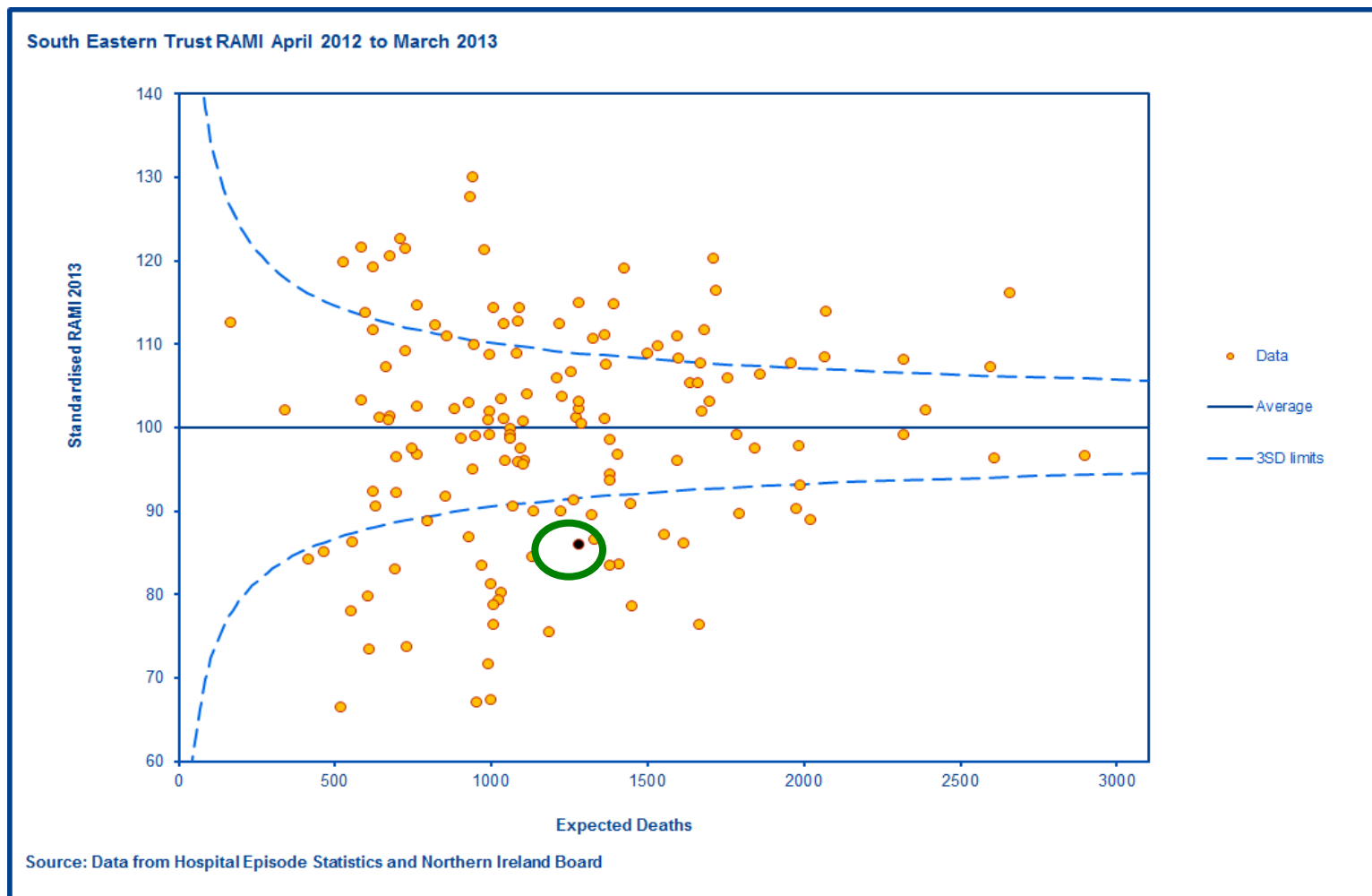
Northern Trust SMR 2012/13



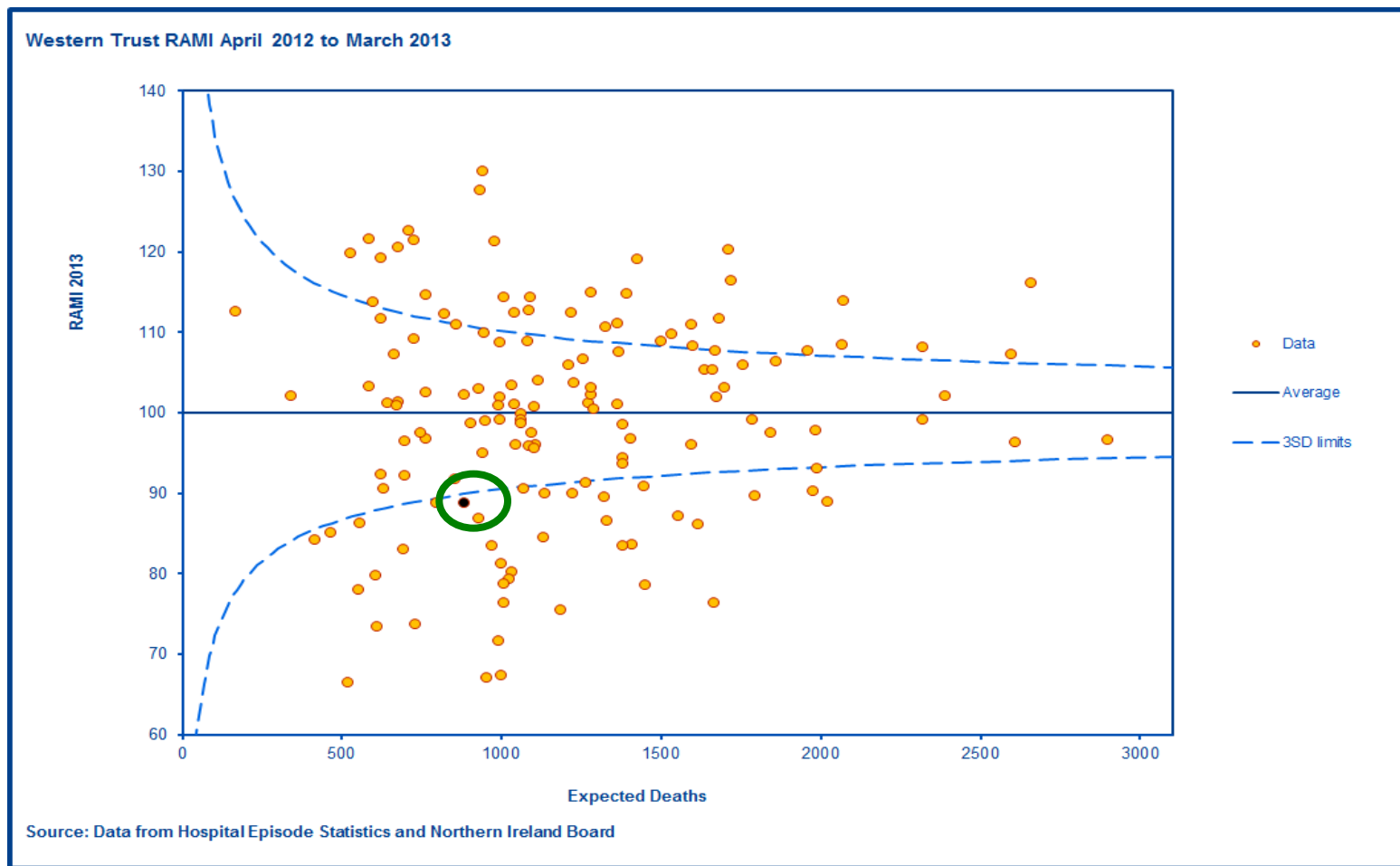
Southern Trust SMR 2012/13



South Eastern Trust SMR 2012/13



Western Trust SMR 2012/13



Methodology

- New methodology developed by DH London for future use
- Labelled SHMI – Summary Hospital Mortality Index
- Will include deaths post hospital discharge within 30 days
- Compared to 143 English NHS Acute Trusts

