National Audit of Cardiac Rehabilitation
WHAT WE USE

The information below outlines the data fields primarily used for NACR reporting (NHS/Networks/ICBs/Certification/Annual Report)

Patient Record: Recording demographic information about the patient. (**NB:** we don't receive any patient identifiable data at NACR)
This is a 'shared' record - ie. all those programmes who have rehab input with the patient have access to it.

We use:

Gender, Marital Status and Ethnic Category reports.

The Postcode and GP Code are also used, to map patients to CCGs and LSOA/Areas of Deprivation.

NHS No. and DoB are mandatory fields

Initiating Event Record: Information on reason for referral, treatment, previous events/co-morbidity etc. This is a shared record ie. all programmes that have input with the patient for this Initiating Event access it.

We primarily use:

IE / IE Date (both mandatory fields)

Treatment, Previous Events and Comorbidity. We are also increasingly reporting on Source of Referral, Referred by and Referring Trust Code

Rehab Record: Rehab activity can be recorded using the Phase structure or Commissioning Pack Structure (Early Rehab & Core Rehab) and there will often be more than one rehab record per initiating event. This record shows which part of rehab you have given to the patient, start/end dates, reasons for not starting/completing (where appropriate), no. of sessions, mode of Rehab Delivery etc. This is not a shared record, and you should always add your own rehab records, as the activity 'counts' come from these records.

We use all the fields on this record (apart from 'How likely are you to recommend').

Phase ID is a mandatory field.

Assessment Record: There is a facility to record three assessment records. Assessment 1 is done pre-rehab programme (Core/Phase 3) to measure baseline;
Assessment 2 is at the end of the Core/Phase 3 rehab programme;
Assessment 3 is at 12 months (not all programmes do this assessment).
As a minimum, patients should receive an assessment before and after rehab (Ass 1 and 2), and recording the same fields as much as possible so that change and outcomes can be seen. The Assessment record includes:

Fitness level, exercise, smoking, BMI, anxiety and depression, quality of life, BP/Cholesterol.

The Assessments are generally completed by the programme delivering Core/Phase 3 rehab to the patient.

The assessment record holds a lot of data, but it is unlikely that you would complete all the data fields – it will depend on what you measure as a team, and on the patient (see the *BACPR Standards* for information on what constitutes a full assessment)

We use:

As much as possible - but what is filled in will depend on what you measure at your rehab assessment. We are starting to report on three main Assessment components so measures should include at least one each from the three categories below:
1. Risk Factors (BMI, Smoking, BP, Cholesterol, Physical Activity, Alcohol Consumption)

2. Psychosocial Wellbeing measure (HADs, PHQ9, GAD7, Dartmouth, Minnesota)

3. Exercise testing/Fitness (ISWT, 6MWT, METs)

You should aim to measure the same at Ass 1 and Ass 2 to give outcomes measures. We currently report on Smoking / Physical Activity (150 mins week) / BMI / Psychosocial measures / Cholesterol / Blood Pressure / Waist / Alcohol / Functional Capacity (ie. ISWT, 6 min walk or other MET measure). The employment status pre and post CR is being increasingly used to look at 'return to work' information.

Assessment Number and Assessment Date are mandatory fields.

Certification:

Staffing - from the staffing survey sent round annually (not from the NACR database)

Priority Groups - from Initiating Event and Treatment information (Heart Failure also comes from 'previous event' information).

Duration - Start Date to End Date for Core/Phase 3 rehab

Ass 1 and Ass 2 percentages - from the number of patients starting Phase 3/Core with a valid (ie with assessed data) Assessment 1 and/or 2 record.

Wait Times - uses Referred Date in Phase 2/3 or Core records (ie. post-discharge referral) to Start Date for Phase 3/Core.

Certification 'Ghost' measures:

(reported, but not currently part of the Certification KPIs)

Multi-mode of delivery – from the Rehab record, is your patient cohort receiving a multi-mode offer (ie. Group and Home-Based, or a Hybrid of both) (due to be added to Certification KPIs for 2024 Certification on Jan-Dec 2023 data)

Assessment 2 percentage of completers – From the Assessment 2 and Core/Phase 3 rehab records, percent of patients who complete Core/Phase 3 with an Ass 2 record (due to be added to Certification KPIs for 2024 Certification on Jan-Dec 2023 data)

Completion rate – From the Core/Phase 3 rehab record, what percent of starters had a completion date/Ass 2 date (with no Reason for not Completing)

Comprehensive Baseline Assessment - from the Assessment 1 record, Percentage of Assessment 1 records with measures for all three core components (ie. Risk Assessment, Psychosocial Health, Exercise Testing/FCT) as a ghost measure with a view to bringing this in as a new KPI in 2025 (Jan-Dec 2024 data) – we will let users know when a decision has been made on including this as an additional KPI metric.