

New hospital mortality rate index to be used across UK

June 9 2011

A team from the University of Sheffield's School of Health and Related Research (ScHARR) has developed a new index to measure hospital mortality rates that has been accepted for use by the Department of Health.

Led by Professor Michael Campbell, the team, including Drs Richard Jacques and James Fotheringham, were commissioned in January 2011 by the Department of Health to develop and test a new [index](#) to look at deaths following a [hospital admission](#). In the past this has mainly been done by a company called Dr Foster, which produced the Hospital Standardised Mortality Ratio (HSMR). This index identified Mid Staffordshire NHS Foundation Trust Hospital as a failing hospital in March 2009, prompting a public inquiry after its failings were widely publicised.

As part of a package of measures being introduced to prevent such cases, the Department of Health wanted to look at a new indicator that could identify failings sooner. They also wanted an index based on deaths in hospital and 30 days after discharge, to try and discourage hospitals from discharging dying patients to improve their statistics.

A report from the Steering Group for the National Review of the Hospital Standardised Mortality Ratio (NHS Information Centre for Health and Social Care, Whalley, 2010) states: "Hospital mortality rates have been used in parts of the NHS for a number of years. There has however been no consistency in how they should – and indeed should not

– be used. Recently, the way they have been used has been the subject of controversy, to the extent that doubts have been voiced about the NHS's openness or otherwise to national and local scrutiny concerning mortality rates.

"This has eroded public confidence. The NHS now operates – rightly – in line with very high public expectations for openness, transparency and accountability. This means that the use of indicators comparing expected and observed trends in a range of NHS activity, and especially regarding mortality, is a permanent and important part of the landscape."

The team was given records of all admissions to hospital in England for five years (92 million records) and linked deaths from the Office of National Statistics. In 10 weeks they produced a new index, the Summary [Hospital Mortality](#) Index (SHMI) based on the age, sex, method of admission and comorbidity of the patient. This has now been accepted by the Department of Health and will be used throughout England as part of a package to identify failing hospitals.

Professor Campbell highlighted a number major benefits of the new index, namely:

- The SHMI is a single system where previously there have been several,
- The SHMI is relatively simple,
- SHMI will publish data quarterly rather than annually,
- It will be implemented by the Department of [Health](#) instead of a private company.

Professor Campbell said: "This new index is a single, transparent indicator that will be used throughout NHS. It includes deaths that occur 30 days after discharge and so tries to remove the incentive of hospitals discharging dying patients to improve their mortality data.

"It will be published quarterly to allow better real-time monitoring at a local and national level. Attached will be explanations for healthcare professionals and the public on interpreting the measure, and it will be accessible to patients and the public on NHS Choices. It will not be used in isolation, but will be used with companion indicators and other supporting information."

Professor Campbell explained that the SHMI also provides the opportunity to spot failings sooner and therefore improve conditions and care for patients, saying: "Due to plans to publish the measure quarterly, hospitals will be able to monitor their overall performance in a timelier manner. There is the capacity for hospitals to be alerted to failings more rapidly than the existing annual report."

Provided by University of Sheffield

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