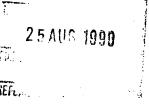
Health DepartmentER



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COLING

Dear Colleague

CLINICAL OUTCOME INDICATORS REP

Summary

1. This report continues work initiated in 1992 to publish clinical outcome indicators in selected areas of care in the NHS in Scotland. The report updates four indicators previously published in 1995 and contains an extensive new section on breast cancer.

Action

- 2. Health Boards and NHS Trusts are asked to:-
 - consider each indicator critically and to identify areas in which improvements may be possible;
 - review the quality and completeness of the data on which this report is based;
 - ➤ consider the possible causes of the variations between Health Board areas.
- 3. Primary Care Trusts are asked to circulate the report to GPs in their area. Bulk supplies will be supplied for that purpose.

Use of outcome indicators

4. Attention is drawn to the care with which these indicators must be interpreted in the light of all local circumstances. On their own, the indicators cannot and do not provide proof about standards of care. Rather, the indicators are intended to focus attention on variations in outcome whose existence might otherwise have remained unsuspected and to stimulate, where appropriate, further investigations. Indicators should not be used as the basis for inappropriate or premature conclusions about which Health Boards or hospitals provide the best care.

Yours sincerely

SIR DANID CARTER
Chief Medical Officer

GEOFF SCAIFE
Chief Executive
NHS in Scotland

NHS Management Executive St Andrew's House Regent Road Edinburgh EH1 3DG 23rd August 1999.

Addressees

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