



Royal College
of Physicians

National Mortality Case
Record Review Programme

Using the structured judgement review method

Data collection form

(England version)

In partnership with:



Commissioned by:



National Mortality Case Record Review Programme: Structured case note review data collection

Please enter the following.

Age at death (years):

Gender: M/F

First 3/4 digits of the patient's postcode:

Day of admission/attendance:

Time of arrival:

Day of death:

Time of death:

Number of days between arrival and death:

Month cluster during which the patient died:

Jan/Feb/Mar

Apr/May/June

Jul/Aug/Sept

Oct/Nov/Dec

Specialty team at time of death:

Specific location of death:

Type of admission:

The certified cause of death if known:

Guidance for reviewers

1) Did the patient have a learning disability?

- No indication of a learning disability – proceed with this review.
- Yes – clear or possible indications from the case records of a learning disability. Action: after your review, please refer the case to the hospital’s clinical governance group for linkage with the Learning Disability Mortality Review Programme.

2) Did the patient have a serious mental health issue?

- No indication of a severe mental health issue – proceed with this review
- Yes- clear or possible indications from the case records of a severe mental health issues. Action: after your review, please refer the case to the hospital’s clinical governance group.

3) Is the patient under 18 years old?

- No the patient is 18 years or older – proceed with this review.
- Yes- the patient is under 18 years old. Action: after your review, please refer the case to the hospital’s clinical governance group for linkage with the Child’s Deaths review programme.

Structured case note review data collection

Phase of care: **Admission and initial management (approximately the first 24 hours)**

Please record your explicit judgements about the quality of care the patient received and whether it was in accordance with current good practice (for example, your professional standards or your professional perspective). If there is any other information that you think is important or relevant that you wish to comment on then please do so.

Please rate the care received by the patient during this phase.

1 = very poor care 2 = poor care 3 = adequate care 4 = good care 5 = Excellent care

Please circle only one score.

Phase of care: **Ongoing care**

Please record your explicit judgements about the quality of care the patient received and whether it was in accordance with current good practice (for example, your professional standards or your professional perspective). If there is any other information that you think is important or relevant that you wish to comment on then please do so.

Please rate the care received by the patient during this phase.

1 = very poor care 2 = poor care 3 = adequate care 4 = good care 5 = Excellent care

Please circle only one score.

Phase of care: **Care during a procedure (excluding IV cannulation)**

Please record your explicit judgements about the quality of care the patient received and whether it was in accordance with current good practice (for example, your professional standards or your professional perspective). If there is any other information that you think is important or relevant that you wish to comment on then please do so.

Please rate the care received by the patient during this phase.

1 = very poor care 2 = poor care 3 = adequate care 4 = good care 5 = Excellent care

Please circle only one score.

Phase of care: **Perioperative care**

Please record your explicit judgements about the quality of care the patient received and whether it was in accordance with current good practice (for example, your professional standards or your professional perspective). If there is any other information that you think is important or relevant that you wish to comment on then please do so.

Please rate the care received by the patient during this phase.

1 = very poor care 2 = poor care 3 = adequate care 4 = good care 5 = Excellent care

Please circle only one score.

Phase of care: **End-of-life care**

Please record your explicit judgements about the quality of care the patient received and whether it was in accordance with current good practice (for example, your professional standards or your professional perspective). If there is any other information that you think is important or relevant that you wish to comment on then please do so.

Please rate the care received by the patient during this phase.

1 = very poor care 2 = poor care 3 = adequate care 4 = good care 5 = Excellent care

Please circle only one score.

Phase of care: **Overall assessment**

Please record your explicit judgements about the quality of care the patient received overall and whether it was in accordance with current good practice (for example, your professional standards). If there is any other information that you think is important or relevant that you wish to comment on then please do so.

Please rate the care received by the patient during this overall phase.

1 = very poor care 2 = poor care 3 = adequate care 4 = good care 5 = Excellent care

Please circle only one score.

Please rate the quality of the patient record.

1 = very poor 2 = poor 3 = adequate 4 = good 5 = Excellent

Please circle only one score.

Assessment of problems in healthcare

In this section, the reviewer is asked to comment on whether one or more specific types of problem(s) were identified and, if so, to indicate whether any led to harm.

Were there any problems with the care of the patient? (Please tick)

No (please stop here) **Yes** (please continue below)

If you did identify problems, please identify which problem type(s) from the selection below and indicate whether it led to any harm. Please tick all that relate to the case.

Problem types

1. **Problem in assessment, investigation or diagnosis** (*including assessment of pressure ulcer risk, venous thromboembolism (VTE) risk, history of falls*) **Yes** **No**
Did the problem lead to harm? **No** **Probably** **Yes**
2. **Problem with medication / IV fluids / electrolytes / oxygen** (*other than anaesthetic*)
Yes **No**
Did the problem lead to harm? **No** **Probably** **Yes**
3. **Problem related to treatment and management plan** (*including prevention of pressure ulcers, falls, VTE*) **Yes** **No**
Did the problem lead to harm? **No** **Probably** **Yes**
4. **Problem with infection management** **Yes** **No**
Did the problem lead to harm? **No** **Probably** **Yes**
5. **Problem related to operation / invasive procedure** (*other than infection control*)
Yes **No**
Did the problem lead to harm? **No** **Probably** **Yes**
6. **Problem in clinical monitoring** (*including failure to plan, to undertake, or to recognise and respond to changes*) **Yes** **No**
Did the problem lead to harm? **No** **Probably** **Yes**
7. **Problem in resuscitation following a cardiac or respiratory arrest** (*including cardiopulmonary resuscitation (CPR)*) **Yes** **No**
Did the problem lead to harm? **No** **Probably** **Yes**
8. **Problem of any other type not fitting the categories above** **Yes** **No**
Did the problem lead to harm? **No** **Probably** **Yes**

Adapted from Hogan H, Zipfel R, Neuberger J, Hutchings A, Darzi A, Black N. Avoidability of hospital deaths and association with hospital-wide mortality ratios: retrospective case record review and regression analysis. *BMJ* 2015;351:h3239. DOI: 10.1136/bmj.h3239

Avoidability of death judgement score
(Most appropriately used at second stage review, if required)

We are interested in your view on the avoidability of death in this case. Please choose from the following scale.

Score 1 Definitely avoidable

Score 2 Strong evidence of avoidability

Score 3 Probably avoidable (more than 50:50)

Score 4 Possibly avoidable but not very likely (less than 50:50)

Score 5 Slight evidence of avoidability

Score 6 Definitely not avoidable

Please explain your reasons for your judgement of the level of avoidability of death in this case, including anything particular that you have identified.

Please note that this data collection sheet is subject to change following conclusion of the pilot phase of the programme.