

# **National Prospective Head and Neck Robotic Surgery Audit**

# **Clinical Audit Department Letter**

To Whom it may concern,

We are requesting permission to collect data from this trust for the national prospective Head and Neck robotic surgery perioperative practice audit.

### **Overview of the Audit**

Head and Neck robotic surgery is increasingly used for benign and malignant head and neck conditions, ranging from diagnosis and management of oropharyngeal and unknown primary squamous cell carcinoma through to treatment of obstructive sleep apnoea.

Despite having a number of advantages over traditional open techniques, patients undergoing Head and Neck robotic surgery frequently have issues with post-operative pain and haemorrhage. Standardising perioperative management may minimise the risk of these complications and improve patient experience, however, there is limited, heterogeneous clinical evidence to support any particular management regime.

This project is a national prospective audit investigating variations in perioperative management of all patients undergoing Head and Neck robotic surgery around the UK. Patient's will have their clinical details reviewed until 30 days postoperatively to document rates of early mortality, bleeding, and feeding tube/ tracheostomy status.

#### **Audit objectives**

- 1. To describe variations in the standard of perioperative care of Head and Neck robotic surgery patients throughout the UK.
- 2. Describe variations in selection of post-operative analgesic agents.
- 3. Describe rates of 30-day postoperative haemorrhage and major haemorrhage (necessitating return to the operating theatre).
- 4. Describe variations in methods used to prevent postoperative haemorrhage.
- 5. Describe rate of perioperative tracheostomy use.
- 6. Describe rate of perioperative NG/feeding tubes use.
- 7. Describe 30-day readmission, complication, and mortality rates.
- 8. Describe the scope and range of indications of Head and Neck robotic surgery within the UK.

### Time period for data required

Data will be collected prospectively for all patients undergoing Head and Neck robotic surgery procedures between over a 6-month period from 2<sup>nd</sup> December 2024 to 2<sup>nd</sup> June 2025. Submission of data can occur at any point up to 30 days following completion of data collection, with the end of the data collection period being 7<sup>th</sup> July 2024.



### **Receiving Organisation**

**Organisation Name: INTEGRATE** 

INTEGRATE is a UK Trainee Research Network aiming to support trainee engagement in ENT research and audit through the participation of multicentre collaborative audits.

The group's head and neck committee have a long history of successfully delivering national audits, including the 2023 MDT audit, the 2021 unknown primary audit, and the 2020 telephone triage study.

## **Data Collection**

Collection of data will be recorded onto an online password protected Alea Data Tool. This data tool has previously received regulatory approval from the NHS HRA and is hosted by the University Hospitals Dorset NHS foundation trust/ University of Southampton. The Alea study tool allows direct entry of pseudonymised data, with each patient having a unique study level ID assigned. No identifiable patient information will be submitted to the project management team (PMT) at ENT INTEGRATE. Local sites will only be able to access their own data for the purposes of data entry and review, with only members of the PMT having access to the entire data set for the purpose of review and analysis.

This project will collect information about non-identifiable patient demographics, perioperative management, and post-operative outcomes up to 30 days after their procedure. No patients will be identifiable in subsequent reports, presentations or publications. As such, consent from patients will not be required.

The study data tool contains restricted multiple choice data fields to ensure data homogeneity, and as such there is no way to document identifiable information. However, if any identifiable data is received, the files will be deleted and the site will be informed. This audit will report the treatment recommendations and outcomes of management that have already taken place, and thus does not produce any new data. There will be no impact on the management of patients included in this audit.

This project has been determined to be an audit using the HRA decision tool available here, and therefore does not require further ethical approval.

At the end of the archiving period, data will be deleted from shared server space and all backups will be overwritten or destroyed in line with NHS approved information destruction/deletion standards. Files will be securely deleted from computer systems (including any copies held on backup or archive media).



All members of the PMT at ENT INTEGRATE are employed by the NHS will have completed Information Governance training in accordance with their own Trusts requirements. This project has received no funding and the PMT does not receive any financial incentive for running this audit.

Members of the PMT are aware of their obligations and legal requirements regarding personal confidential data. It is a condition of employment that all employees abide by their organisation's Data Protection Policy and confidentiality clause within their contract of employment.

You can read more about the INTEGRATE national Head and Neck robotic surgery audit <a href="here">here</a>. If you require any further clarification, please contact the audit team at: torsaudit@entintegrate.co.uk.

Yours Sincerely,

**ENT INTEGRATE Head and Neck Committee**