PASCOM-10: HOW TO REPORT YOUR PODIATRIC ACTIVITY & OUTCOMES

PASCOM has its origins as a paper-based audit of podiatric surgery dating back to the late 1990s. Since the early 2000s, PASCOM has been under the direction of the College of Podiatry. Following a major investment in the system, an online version was launched in May 2010, and made available to all members. The website is able to capture activity and patient-reported outcome measures (PROMS) for all elements of podiatry.

WHAT IS PASCOM-10?

PASCOM-10 is a database of foot treatment and outcomes. It can be adapted to suit various purposes but uses include audit and evaluation, a log book for reflective practice, a career-long clinical portfolio and a handy treatment summary generator for GP and patient correspondence.

WHAT DATA DOES PASCOM CAPTURE?

PASCOM-10 has seen 136 centres contribute data for 106,698 procedures up to December 2015. There has been a gradually increasing trend to recording more surgical admissions and related procedures over the last six years. However, the uptake for data collection of core (general) podiatry, MSK and wound care has been slow.
PASCOM DIAGNOSTICS

PASCOM records a range of medical and podiatric diagnostic codes using the ICD-10 classification. The top 10 diagnoses in both the invasive and non-invasive domains are presented right.

PASCOM PROCEDURES AND INVESTIGATIONS

Some 523 procedure codes can be recorded on PASCOM. The codes can be manually grouped, placing similar procedures in a single ‘basket’. The result of this grouping is that the top 10 procedures account for 67% of all procedures recorded on PASCOM-10 (invasive domain).

PASCOM AND MEDICINES

PASCOM-10 can record the medicines supplied, administered or prescribed as part of a surgical episode of care. Crucially, PASCOM can identify how the drug was accessed, thus providing evidence in support of independent prescribing.

PASCOM COMPLICATIONS OF SURGERY

The PASCOM-10 system can collect data relating to 61 adverse events, sequelae and complications. The system highly user dependent, however, and only around 59% of episodes have outcome data recorded. Looking at the rates of specific complications, even where centres collect outcome data there is likely widespread under-reporting.

MISSING DATA

As mentioned above, post-operative outcome data collection is a cause for concern. In the period 2010-2016 almost 60,000 episodes of surgery were recorded, but clinical outcome data are available for only 59% of these. PROM data in the form of the Manchester Oxford Foot/Ankle Questionnaire (MOXFO) are missing for 63% of the cohort and satisfaction data in the form of the Patient Satisfaction Questionnaire (PSQ-10) are missing for 44% of the cohort.
SOURCES OF ERROR
There are several recognised sources of error within PASCOM. These include duplication of data entry, under-reporting, erroneous data entry, failure to capture post-operative data and poor uptake of PROMS.

PASCOM DEVELOPMENTS
The PASCOM team is working with the College of Podiatry Epidemiology group to look at rolling out PASCOM Lite, a trimmed down version of the system requiring minimal input from users. The ‘Lite’ system will be aimed at core (general) practitioners with the aim of generating outcome data for the wider podiatry profession.

PASCOM NORTHERN PROJECT
A group of six NHS podiatric surgery units in the Northern Deanery have agreed to work together to test the reliability of their data collection and to agree a shared methodology with the intention of improving our collective reporting of outcome data.

PASCOM WORKING PARTY
PASCOM is supported by a small working party of podiatrists. We endeavour to answer queries raised through the website within two working days. The group is chaired by Matthew Fitzpatrick, and other members are Damian Holdcroft, Anthony Maher, Suzy Taylor and David Tollafield.

Any member of the working party can be contacted via www.pascom-10.com.

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