## Appendix 2: Adjusted National Health Service Quality and Outcome Framework quality indicators

The United Kingdom National Health Service Quality and Outcome Framework (NHS QOF) contains groups of indicators, against which a primary care practice can obtain points according to their level of achievement. The British National Institute of Clinical Excellence (NICE) advises on relevant, evidence based quality indicators, which includes a number of domains such as coronary heart disease and hypertension. In this project, only indicators relevant for CVD (prevention) will be used. The number of cases in the denominator to calculate the score stage will be the number of patients included in QUICK- I who are diagnosed with the condition of interest. Some indicators are related to services that are not available in this setting; these indicators will fall under exception reporting criteria and will not be taken into account when scoring the quality of care. More information on the scoring systems can be found at the NHS QOF website [1].

The indicators have been adapted to the local context and are listed in the tables below.

Table 1: primary prevention indicators

| Number | Indicator | Points | Score* <br> stages |
| :---: | :---: | :---: | :---: |
| PP1 | The percentage of patients with a new diagnosis of hypertension (excluding those with pre-existing coronary heart disease (CHD), diabetes, stroke and/or transient ischemic attack (TIA)) recorded in the last year who had a face to face cardiovascular risk assessment at the outset of diagnosis (within 3 months of the initial diagnosis) using an agreed risk assessment tool. | 8 | 40-70\% |
| PP2 | The percentage of patients diagnosed with hypertension diagnosed after 1 April 2009 who are given lifestyle advice in the last 15 months for: increasing physical activity, smoking cessation, safe alcohol consumption and healthy diet. | 5 | 40-70\% |

Table 2: Hypertension indicators

| Number | Indicator | Points | Score* <br> stages |
| :---: | :---: | :---: | :---: |
| BP1 | The practice can produce a register of patients with established hypertension. | 6 |  |
| BP4 | The percentage of patients with hypertension in whom there is a record of the blood pressure in the previous 9 months. | 18 | 40-90\% |
| BP5 | The percentage of patients with hypertension in whom the last blood pressure (measured in the previous 9 months) is $150 / 90$ or less. | 57 | 40-70\% |

Table 3: Heart failure indicators

| Number | Indicator |  | Score* <br> stages |
| :--- | :--- | :--- | :--- |
| HF1 | The practice can produce a register of patients with heart failure. | Points |  |
| HF2 | The percentage of patients with a diagnosis of heart failure (diagnosed after 1 April 2006) which has been <br> confirmed by an echocardiogram or by specialist assessment within 12 months of diagnosis in the clinic | 6 | $40-90 \%$ |

Table 4: Stroke indicators

| Number | Indicator | Points | Score* <br> stages |
| :---: | :---: | :---: | :---: |
| Stroke1 | The practice can produce a register of patients with stroke or transient ischemic attack (TIA). | 2 |  |
| Stroke13 | The percentage of new patients with a stroke or TIA who have been referred for further investigation. | 2 | 40-80\% |
| Stroke5 | The percentage of patients with TIA or stroke whose notes have a record of blood pressure in the preceding 15 months. | 2 | 40-90\% |
| Stroke6 | The percentage of patients with a history of TIA or stroke in whom the last blood pressure reading (measured in the previous 15 months) is 150/90 or less. | 5 | 40-70\% |
| Stroke7 | The percentage of patients with TIA or stroke who have a record of total cholesterol in the past 15 months. | 2 | 40-90\% |
| Stroke8 | The percentage of patients with TIA or stroke whose last measured total cholesterol (measured in the previous 15 months) is $5 \mathrm{mmol} / \mathrm{L}$ or less. | 5 | 40-60\% |
| Stroke12 | The percentage of patients with a stroke shown to be non-haemorrhagic, or a history of TIA, who have a record that an anti-platelet agent (aspirin, clopidogrel, dipyridamole or a combination), or oral anticoagulant is being taken (unless a contraindication or side-effects are recorded). | 4 | 40-90\% |
| Stroke10 | The percentage of patients with TIA or stroke who have a record of influenza immunization in the preceding 1 September to 31 March. | 2 | 40-85\% |

[^0]Table 5: Diabetes indicators

| Number | Indicator | Points | Score* <br> stages |
| :---: | :---: | :---: | :---: |
| DM19 | The practice can produce a register of all patients aged 17 years and over with diabetes mellitus. | 6 | 40-90\% |
| DM2 | The percentage of patients with diabetes whose notes record Body Mass Index (BMI) in the previous 15 months. | 3 | 40-90\% |
| DM5 | The percentage of patients with diabetes who have a record of HbA 1 c or blood glucose in the previous 15 months. | 3 | 40-90\% |
| DM23 | The percentage of patients with diabetes in whom the last HbA 1 c is 7 or less in the previous 15 months | 17 | 40-50\% |
| DM24 | The percentage of patients with diabetes in whom the last HbA1c is 8 or less, or fasting blood glucose is 7 $\mathrm{mmol} / \mathrm{I}$ or less, or random blood glucose is $14 \mathrm{mmol} / \mathrm{I}$ or less in the previous 15 months. | 8 | 40-70\% |
| DM25 | The percentage of patients with diabetes in whom the last HbA1c is 9 or less in the previous 15 months. | 10 | 40-90\% |
| DM21 | The percentage of patients with diabetes who have a record of retinal screening/vision check in the previous 15 months. | 5 | 40-90\% |
| DM9 | The percentage of patients with diabetes with a record of the presence or absence of peripheral pulses in the previous 15 months. | 3 | 40-90\% |
| DM10 | The percentage of patients with diabetes with a record of neuropathy testing in the previous 15 months. | 3 | 40-90\% |
| DM11 | The percentage of patients with diabetes who have a record of blood pressure in the previous 15 months. | 3 | 40-90\% |
| DM12 | The percentage of patients with diabetes in whom the last blood pressure is $145 / 85$ or less, measured in the last 15 months. | 18 | 40-60\% |
| DM13 | The percentage of patients with diabetes who have a record of micro-albuminuria testing in the previous 15 months (exception reporting for patients with proteinuria). | 3 | 40-90\% |
| DM22 | The percentage of patients with diabetes who have a record of estimated glomerular filtration rate (eGFR) or serum creatinine testing in the previous 15 months. | 3 | 40-90\% |
| DM15 | The percentage of patients with diabetes with a diagnosis of proteinuria or micro-albuminuria who are treated with an angiotensin converting enzyme inhibitor (ACE) inhibitors (or A2 antagonists) in the last 6 months). | 3 | 40-80\% |
| DM16 | The percentage of patients with diabetes who have a record of total cholesterol in the previous 15 months | 3 | 40-90\% |
| DM17 | The percentage of patients with diabetes whose last measured total cholesterol within the previous 15 months is $5 \mathrm{mmol} / \mathrm{l}$ or less. | 6 | 40-70\% |
| DM18 | The percentage of patients with diabetes who have a record of influenza immunization in the preceding 1 September to 31 March. | 3 | 40-85\% |

[^1]Table 6: Chronic Kidney Disease indicators

| Number | Indicator | Points | Score* <br> stages |
| :---: | :---: | :---: | :---: |
|  | The practice can produce a register of patients aged 18 years and over with chronic kidney disease (CKD) (US |  |  |
| CKD1 | National Kidney Foundation: Stage 3 to 5 CKD). | 6 |  |
| CKD2 | The percentage of patients with CKD whose notes have a record of blood pressure in the previous 15 months. | 6 | 40-90\% |
| CKD3 | The percentage of patients with CKD in whom the last blood pressure reading, measured in the previous 15 months, is $140 / 85$ or less. | 11 | 40-70\% |
| CKD5 | The percentage of patients with CKD with hypertension and proteinuria who are prescribed an angiotensin converting enzyme inhibitor (ACE-I) or angiotensin receptor blocker (ARB) (unless a contraindication or side effects are recorded), in the last 6 months. | 9 | 40-80\% |
| CKD6 | The percentage of patients with CKD whose notes have a record of a urine albumin: creatinine ratio (ACR) or protein: creatinine ratio (PCR) test recorded in the previous 15 months. | 6 | 40-80\% |

Table 7: Obesity indicators

|  |  |  |
| :--- | :--- | :--- |
| Number | Indicator | Points |
|  | Score* <br> stages |  |
| The practice can produce a register of patients aged 18 and over with a Body Mass Index (BMI) greater |  |  |
| OB1 $\quad$ than or equal to 30 in the previous 15 months. | 8 |  |
| see reference 1 |  |  |

Table 8: Smoking indicators

| Number | Indicator | Score* <br> stages |
| :--- | :--- | :--- |
|  | The percentage of patients with any or any combination of the following conditions: coronary heart disease <br> (CHD), stroke or transient ischemic attack (TIA), hypertension, diabetes, Chronic Obstructive Pulmonary <br> Disease (COPD), chronic kidney disease (CKD), asthma, schizophrenia, bipolar affective disorder or other <br> psychoses whose notes record smoking status in the previous 15 months. | Points |
|  | The percentage of patients with any or any combination of the following conditions: CHD, stroke or TIA, <br> Sypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar disorder or other psychoses who smoke <br> whose notes contain a record that smoking cessation advice or referral to a specialist service, where | $40-90 \%$ |

## References

1. Quality and Outcomes Framework guidance for GMS contract 2009/10
[http://www.nhsemployers.org/Aboutus/Publications/Documents/QOF Guidance 2009 fin al.pdf]

[^0]:    *see reference 1

[^1]:    *see reference 1

