

Summary of 2012/13 QOF Changes

Retirements

2011/12 QOF ID	2011/12 Indicator Wording	Points	Threshold
CHD13	For patients with newly diagnosed angina (diagnosed after 1 April 2011), the percentage who are referred for specialist assessment	7	40-90
AF4	The percentage of patients with atrial fibrillation diagnosed after 1 April 2008 with ECG or specialist confirmed diagnosis	10	40-90
QP1	The practice conducts an internal review of their prescribing to assess whether it is clinically appropriate and cost effective, agrees with the PCO 3 areas for improvement and produces a draft plan for each area no later than 30 June 2011	6	-
QP2	The practice participates in an external peer review of prescribing with a group of practices and agrees plans for 3 prescribing areas for improvement firstly with the group and then with the PCO no later than 30 September 2011	7	-
QP3	The percentage of prescriptions complying with the agreed plan for the first improvement area as a percentage of all prescriptions in that improvement area during the period 1 January 2012 to 31 March 2012 (Payment stages to be determined locally according to the method set out in the indicator guidance below with 20 percentage points between upper and lower thresholds)	5	Locally determined
QP4	The percentage of prescriptions complying with the agreed plan for the second improvement area as a percentage of all prescriptions in that improvement area during the period 1 January 2012 to 31 March 2012 (Payment stages to be determined locally according to the method set out in the indicator guidance below with 20 percentage points between upper and lower thresholds)	5	Locally determined
QP5	The percentage of prescriptions complying with the agreed plan for the third improvement area as a percentage of all prescriptions in that improvement area during the period 1 January 2012 to 31 March 2012 (Payment stages to be determined locally according to the method set out in the indicator guidance below with 20 percentage points between upper and lower thresholds)	5	Locally determined

Replacement Indicators – indicator wording amendments

2011/12 QOF ID	NICE ID	2012/13 QOF ID	2012/13 Indicator Wording	Points	Threshold
Asthma6	NM23	Asthma9	The percentage of patients with asthma who have had an asthma review in the preceding 15 months that includes an assessment of asthma control using the 3 RCP questions	20	45-70
Smoking3	NM38	Smoking5	The percentage of patients with any or any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses whose notes record smoking status in the preceding 15 months	25*	50-90
Smoking4	NM39	Smoking6	The percentage of patients with any or any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses who smoke whose notes contain a record that smoking cessation advice or referral to a specialist service, where available, has been offered within the preceding 15 months	25*	50-90
DM19	NM41	DM32	The practice can produce a register of all patients aged 17 years and over with diabetes mellitus, which specifies the type of diabetes where a diagnosis has been confirmed	6	n/a
MH15	NM42	MH20	The percentage of patients aged 40 years and over with schizophrenia, bipolar affective disorder and other psychoses who have a record of blood glucose or HbA1c in the preceding 15 months	5	45-80
AF3	NM45	AF6	In those patients with Atrial Fibrillation in whom there is a record of a CHADS2 score of 1, the percentage of patients who are currently treated with anti-coagulation drug therapy or an anti-platelet therapy.	6	50-90
AF3	NM46	AF7	In those patients with Atrial Fibrillation in whom there is a record of a CHADS2 score of greater than 1, the percentage of patients who are currently treated with anti-coagulation drug therapy	6	40-70
DEM3	-	DEM4	The percentage of patients with a new diagnosis of dementia recorded between the preceding 1 April to 31 March with a record of FBC, calcium, glucose, renal and liver function, thyroid function tests, serum vitamin B12	6	45-80

			and folate levels recorded 6 months before or after entering on to the register		
DEP5	-	DEP8	In those patients with a new diagnosis of depression and assessment of severity recorded between the preceding 1 April to 31 March, the percentage of patients who have had a further assessment of severity 2 - 12 weeks (inclusive) after the initial recording of the assessment of severity. Both assessments should be completed using an assessment tool validated for use in primary care	8	45-80
Education 1	-	Eduction11	There is a record of all practice-employed clinical staff and clinical partners having attended training/updating in basic life support skills in the preceding 18 months.	4	-

*Points reduced from 2011/12 to 2012/13 – Smoking5 reduced by 5 points and Smoking6 reduced by 5 points

Replacement Indicators – changed due to noteworthy coding or business logic amendments

2011/12 QOF ID	NICE ID	2012/13 QOF ID	2011/12 Indicator Wording	Points	Threshold
MH14	-	MH19	The percentage of patients aged 40 years and over with schizophrenia, bipolar affective disorder and other psychoses who have a record of total cholesterol:hdl ratio in the preceding 15 months	5	45-80
Asthma3	-	Asthma10	The percentage of patients with asthma between the ages of 14 and 19 years in whom there is a record of smoking status in the preceding 15 months	6	45-80
DEP1	-	DEP6	The percentage of patients on the diabetes register and/or the CHD register for whom case finding for depression has been undertaken on 1 occasion during the preceding 15 months using two standard screening questions	6	50-90
DEP4	-	DEP7	In those patients with a new diagnosis of depression, recorded between the preceding 1 April to 31 March, the percentage of patients who have had an assessment of severity at the time of diagnosis using an assessment tool validated for use in primary care	17	50-90

Records23	-	Smoking7	The percentage of patients aged 15 years and over whose notes record smoking status in the preceding 27 months (Note: indicator also moved to clinical domain)	11	50-90
-----------	---	----------	---	----	-------

Note: All final QOF indicator ID numbers are still subject to change as national guidance and supporting business rules are finalised.

New Indicators

NICE ID	2012/13 QOF ID	2012/13 Indicator Wording	Points	Threshold
NM32	PAD1	The practice can produce a register of people with peripheral arterial disease	2	-
NM33	PAD2	The percentage of patients with peripheral arterial disease with a record in the preceding 15 months that aspirin or an alternative anti-platelet is being taken	2	40-90
NM34	PAD3	The percentage of patients with peripheral arterial disease in whom the last blood pressure reading (measured in the preceding 15 months) is 150/90 or less	2	40-90
NM35	PAD4	The percentage of patients with peripheral arterial disease in whom the last measured total cholesterol (measured in preceding 15 months) is 5.0mmol/l or less	3	40-90
NM24	AF5	The percentage of patients with Atrial Fibrillation in whom stroke risk has been assessed using the CHADS2 risk stratification scoring system in the preceding 15 months	10	40-90
NM40	Smoking8	The percentage of patients aged 15 years and over who are recorded as current smokers who have a record of an offer of support and treatment within the preceding 27 months	12	40-90
NM29	OST1	The practice can produce a register of patients: 1. Aged 50-74 years with a record of a fragility fracture after 1 April 2012 and a diagnosis of osteoporosis confirmed on DXA scan, and 2. Aged 75 years and over with a record of a fragility fracture after 1 April 2012	3	30-60
NM30	OST2	The percentage of patients aged between 50 and 74 years, with a fragility fracture, in whom osteoporosis is confirmed on DXA scan, who are currently treated with an appropriate bone-sparing agent	3	30-60
NM31	OST3	The percentage of patients aged 75 years and over with a fragility fracture, who are currently treated with an appropriate bone-sparing agent	3	30-60

-	QP12	The practice meets internally to review the data on accident and emergency attendances provided by the PCO no later than 31 July 2012. The review will include consideration of whether access to clinicians in the practice is appropriate, in light of the patterns on accident and emergency attendance.	7	-
-	QP13	The practice participates in an external peer review with a group of practices to compare its data on accident and emergency attendances, either with practices in the group of practices or practices in the PCO area and agrees an improvement plan firstly with the group and then with the PCO no later than 30 September 2012. The review should include, if appropriate, proposals for improvement to access arrangements in the practice in order to reduce avoidable A&E attendances and may also include proposals for commissioning or service design improvements to the PCO.	9	-
-	QP14	The practice implements the improvement plan that aims to reduce avoidable accident and emergency attendances and produces a report of the action taken to the PCO no later than 31 March 2013	15	-

Reduced points – change only in point value

2011/12 QOF ID	2012/13 QOF ID	Indicator Wording	2011/12 Points	2012/13 Points	Threshold
BP4	BP4	The percentage of patients with hypertension in whom there is a record of the blood pressure in the preceding 9 months	16	8	50-90
BP5	BP5	The percentage of patients with hypertension in whom the last blood pressure (measured in the preceding 9 months) is 150/90 or less	57	55	45-80
DM2	DM2	The percentage of patients with diabetes whose notes record BMI in the preceding 15 months	3	1	50-90
DM22	DM22	The percentage of patients with diabetes who have a record of estimated glomerular filtration rate (eGFR) or serum creatinine testing in the preceding 15 months	3	1	50-90
CKD2	CKD2	The percentage of patients on the CKD register whose notes have a record of blood pressure in the preceding 15 months	6	4	50-90

Increased thresholds

For the following indicators, the thresholds have changed from 40-90 to 50-90:

CHD9, CHD12, HF2, Stroke7, Stroke12, BP4, DM2, DM10, DM13, DM21, DM22, DM28, DM29, Epilepsy6, Epilepsy9, Thyroid 2, Cancer3, MH11, MH12, MH13, MH17, MH18, DEP6, DEP7, CKD2, AF6, Smoking5, Smoking6, Smoking7, SH2 and SH3

For the following indicators, where the upper threshold is between 70 to 85 the lower threshold has changed from 40 to 45:

CHD8, CHD14, HF3, Stoke13, Stroke10, DM27, DM30, DM15, DM18, COPD15, COPD8, Epilepsy8, MH19, MH20, MH16, Asthma8, Asthma3, Asthma9, DEM4, DEP8, CKD3, CKD5, CKD6, LD2, CS1

For the following indicators, the upper thresholds have changed as follows:

2012/13 QOF ID	Points	2011/12 Threshold	2012/13 Threshold
CHD6	17	40-71	40-75
CHD10	7	40-60	40-65
CVD-PP1	8	40-70	40-75
CVD-PP2	5	40-70	40-75
HF4	9	40-60	40-65

2012/13 QOF ID	Points	2011/12 Threshold	2012/13 Threshold
Stroke6	5	40-71	40-75
Stroke8	5	40-60	40-65
DM31	3	40-60	40-65
DM17	6	40-70	40-75
COPD10	7	40-70	40-75

For the following indicators, the lower and upper thresholds have changed as follows:

2012/13 QOF ID	Points	2011/12 Threshold	2012/13 Threshold
BP5	55	40-70	45-80
MH10	6	25-50	30-55

2012/13 QOF ID	Points	2011/12 Threshold	2012/13 Threshold
DEM2	15	25-60	35-70

QOF Guidance

The detailed QOF guidance will be published in due course.