



For All London Practices supported by Londonwide LMCs

This update covers the agreed changes to QOF for 2019/20; in England these changes to QOF follow a substantial NHS England/GPC led QOF Review during 2017/18 which recommended retention and evolution of the QOF structure. The full 559 points, and QOF financial envelope, are being retained, unlike in Scotland and Wales where QOF has been partially or completely abolished.

Retirement of Indicators

28 Indicators (comprising 175 points, 31% of the total) are being retired.

Introduction of New Indicators

15 new Indicators (101 points) are being introduced, these being (Section 3.10):

- Reducing iatrogenic harm and improving outcomes in diabetic care (43 points),
- Aligning blood pressure control targets with NICE guidance (41 points),
- Supporting age-appropriate cervical screening (11 points) which brings QOF into line with National Screening Committee recommendations. The GMS Cervical Screening Additional Service is unchanged,
- Improving weight management as part of physical care for patients with complex enduring mental illness (4 points),
- Offering pulmonary rehabilitation for patients with COPD (2 points).

A full list of the retired and new indicators is given below.

Focusing on Quality Improvement

The remaining 74 points are being used to create two Quality Improvement Modules developed in conjunction with the RCGP and NICE. In 2019/20 the modules (each 37 points) will be (Section 3.16):

- Prescribing Safety (Q1001, Q1002),
- End-of-Life Care (Q1003, Q1004).

Details of both Quality Improvement Modules are available in the main Contract Agreement document. There are no threshold achievements within this domain; both modules include 10 points to incentivise shared learning within the practice's Primary Care Network (PCN).

Quality Improvement Modules will be supported within QOF for one year, and (Section 3.2.2) then future modules will link with the seven National Service Specifications being developed for the Network Contract DES.



Payment Thresholds

No new threshold changes will apply in 2019/20 to continuing QOF indicators.

QOF Point Value

This will rise by 4.7% from £179.26 to £187.74, to reflect the increase in to the average practice list size (CPI: Contractor Population Index).

Personalised Care Adjustment

This will replace the current exception-reporting process, which is a blunt instrument, and practices with high levels of exception reporting have been criticised (for example by CQC) as potentially indicating the presence of poor quality care.

Patients will now be differentiated as being removed from the indicator denominator because (Section 3.12) of:

- Unsuitability (e.g. medicine intolerance),
- Patient choice,
- Failure to respond to recorded offers of care (which will now usually be two invitations rather than three),
- The specific service is not available locally (in relation to certain indicators),
- Newly diagnosed/registered patients (as now).

INLIQ Mandatory Extraction (Indicators no longer incentivised in QOF)

There are minor changes to the INLIQ Suite with four being added, and six removed, leaving 23 INLIQ indicator extractions. The continuing and retiring INLIQ indicators are also listed below.

Future Developments

Over the next two years a review of heart failure, asthma and COPD (2020) and mental health (2021) indicators is planned, together with the development of further Quality Improvement Modules.

The full QOF implementation guidance, indicating changes to the Statement of Financial Entitlements (SFE) was issued in late March 2019.

Dr Michelle Drage, CEO of Londonwide LMCs - with thanks to Dr Julius Parker, CEO of Surrey & Sussex LMCs; Dr Matt Mayer, CEO BBOLMCs, and Alex Orton and Sam Dowling of Londonwide LMCs.



Annex

Summary of QOF changes:

<u>RETIRED</u>		<u>NEW</u>	
Indicator	Description	Indicator	Description
CHD002 (17 points)	The % of patients with coronary heart disease in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less.	CS005 (NICE ID NM 154) (7 points)	The proportion of women eligible for screening and aged 25-49 years at the end of the reporting period whose notes record that an adequate cervical screening test has been performed in the preceding 3 years and 6 months.
CON001 (4 points)	The contractor establishes and maintains a register of women aged 54 or under who have been prescribed any method of contraception at least once in the last year, or clinically appropriate interval e.g. last 5 years.	CS006 (NICE ID NM 155) (4 points)	The proportion of women eligible for screening and aged 50-64 years at the end of reporting period whose notes record that an adequate cervical screening test has been performed in the previous 5 years and 6 months.
CON003 (3 points)	The % of women on the register prescribed emergency hormonal contraception one or more times in the preceding 12 months by the contractor who have received information from the contractor about long acting reversible contraception at the time or within one month of the prescription.	COPD008 (NICE ID NM 47) (2 points)	The % of patients with COPD and Medical Research Council (MRC) dyspnoea scale >3 at any time in the preceding 12 months with a subsequent record of an offer of referral to a pulmonary rehabilitation programme.
COPD004 (7 points)	The % of patients with COPD with a record of FEV in the preceding 12 months.	DM019 (NICE ID NM 159) (10 points)	The % of patients with diabetes without moderate or severe frailty on the register in whom the last blood pressure reading (measured in the preceding 12 months) is 140/80 mmHg or less.
COPD005 (5 points)	The % of patients with COPD and medical research council dyspnoea grade >3 at any time	DM020 (NICE ID NM 157)	The % of patients with diabetes without moderate or severe frailty on the register in



Indicator	Description	Indicator	Description
	in the preceding 12 months, with a record of oxygen saturation value within the preceding 12 months.	(17 points)	whom the last IFCC-HbA1c is 58 mmol/mol or less in the preceding 12 months.
CS001 (7 points)	The contractor has a protocol that is in line with national guidance agreed with the NHS CB for the management of cervical screening, management of patient call/recall, exception. reporting and regular monitoring or inadequate sample rates	DM021 (NICE ID NM 158) (10 points)	The % of patients with diabetes with moderate or severe frailty on the register in whom the last IFCC-HbA1c is 75 mmol/mol or less in the preceding 12 months.
CS002 (11 points)	The % of women aged 25 or over who have not attained the age of 65 whose notes record that a cervical screening test has been performed in the preceding 5 years.	DM022 (NICE ID NM 162) (4 points)	The % of patients with diabetes aged 40 years and over with no history of CVD and without moderate or severe frailty who are currently treated with a statin (excluding patients with type 2 diabetes and a CVD risk score of <10% recorded in the preceding 3 years).
CS004 (2 points)	The contractor has a policy for auditing its cervical screening service and performs an audit of inadequate cervical screening tests in relation to individual sample takers at least every 2 years.	DM023 (NICE ID NM 163) (2 points)	The % of patients with diabetes and a history of CVD (excluding haemorrhagic stroke) who are currently treated with a statin.
DEM005 (6 points)	The % of patient with a new diagnosis of dementia recorded in the preceding 1 April to 31 March with a record of FBC, Calcium, Glucose, renal and liver function tests, serum vitamin B12 and folate levels recorded between 12 months before or 6 months after entering on to the register.	HYP003 (NICE ID NM 53) (14 points)	The % of patients aged 79 years or under with hypertension in whom the last blood pressure reading (measured in the preceding 12 months) is 140/90 mmHg or less.



Indicator	Description	Indicator	Description
DM002 (8 points)	The % of patients with diabetes on the register in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less.	HYP007 (NICE ID NM 54) (5 points)	The % of patients aged 80 years and over with hypertension in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less.
DM003 (10 points)	The % of patients with diabetes on the register in whom the last blood pressure reading (measured in the preceding 12 months) is 140/80 mmHg or less.	MH006 (NICE ID NM 16) (4 points)	The % of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of BMI in the preceding 12 months.
DM004 (6 points)	The % of patients with diabetes on the register whose last measured total cholesterol (measured within the preceding 12 months) is 5 mmol/l or less.	CHD008 (NICE ID NM 68) (12 points)	The % of patients aged 79 years or under with coronary heart disease in whom the last blood pressure reading (measured in the preceding 12 months) is 140/90mmHg or less.
DM007 (17 points)	The % of patients with diabetes on the register in whom the last IFCC-HbA1c is 59 mmol/mol or less in the preceding 12 months.	CHD009 (NICE ID NM 86) (5 points)	The % of patients aged 80 years or over with coronary heart disease in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90mmHg or less.
DM008 (8 points)	The % of patients with diabetes on the register in whom the last IFCC-HbA1c is 64 mmol/mol or less in the preceding 12 months.	STIA010 (NICE ID NM 69) (3 points)	The % of patients aged 79 years or under with a history of stroke or TIA in whom the last blood pressure reading (measured in the preceding 12 months) is 140/90 mmHg or less.
DM009 (10 points)	The % of patients with diabetes on the register in whom the last IFCC-HbA1c is 75 mmol/mol or less in the preceding 12 months.	STIA011 (NICE ID NM 93) (2 points)	The % of patients aged 80 years and over with a history of stroke or TIA in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less.



Indicator	Description	Indicator	Description
HYP006 (20 points)	The % of patients with hypertension in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less.		Prescribing safety
MH007 (4 points)	The % of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of alcohol consumption in the preceding 12 months.	QI001 (27 points)	The contractor can demonstrate continuous quality improvement activity focused upon prescribing safety as specified in the QOF guidance.
MH008 (5 points)	The % of women aged 25 or over who have not attained the age of 65 with schizophrenia, bipolar affective disorder and other psychoses whose notes record that a cervical screening test has been performed in the preceding 5 years.	QI002 (10 points)	The contractor has participated in network activity to regularly share and discuss learning from quality improvement activity as specified in the QOF guidance. This would usually include participating in a minimum of two peer review meetings.
MH009 (1 point)	The % of patients on lithium therapy with a record of serum creatinine and TSH in the preceding 9 months.		End of life care
MH010 (2 points)	The % of patients in lithium therapy with lithium levels in therapeutic range in the preceding 4 months.	QI003 (27 points)	The contractor can demonstrate continuous quality improvement activity focused on end of life care as specified in the QOF guidance.
OST002 (3 points)	The % of patients aged 50 or over and who have not attained the age of 75 with fragility fracture on or after 1 April 2012 in whom osteoporosis is confirmed on DXA scan who are currently treated with an appropriate bone sparing agent.	QI004 (10 points)	The contractor has participated in network activity to regularly share and discuss learning from quality improvement activity as specified in the QOF guidance. This would usually include participating in a minimum of two network peer review meetings.
OST005 (3 points)	The % of patients aged 75 or over and who have not		



Indicator	Description	Indicator	Description
	attained the age of 75 with fragility fracture on or after 1 April 2014 and a diagnosis of osteoporosis who are currently treated with a bone sparing agent.		
PAD002 (2 points)	The % of patients with peripheral arterial disease in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less.		
PAD003 (2 points)	The % of patients with peripheral arterial disease with a record in the preceding 12 months that aspirin or an alternative anti-platelet is being taken.		
PC002 (3 points)	The contractor has regular (at least 3 monthly) multidisciplinary case review meetings where all patients on the palliative care register are discussed.		
SMOK003 (2 points)	The contractor supports patients who smoke in stopping smoking by a strategy which includes providing literature and offering appropriate therapy.		
STIA003 (5 points)	The % of patients with a history of a stroke or TIA in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less.		
STIA008 (2 points)	The % of patients with a stroke or TIA (diagnosed on or after 1 April 2014) who have a record of a referral for further investigation between 3 months before or 1 month		



Indicator	Description	Indicator	Description
	after the date of the last recorded or stroke or the first TIA.		
INLIQ CON002	The % of patients on the register prescribed an oral patch contraceptive method in the preceding 12 months who have also received information from the contractor about long acting reversible methods of contraception in the preceding 12 months.	INLIQ MH007	The % of patients with Schizophrenia bipolar affective disorder and other psychoses who have a record of alcohol consumption in the preceding 12 months.
INLIQ DEP001	The % of patients aged 18 or over with a new diagnosis of depression in the preceding 1 April to 31 March who have had a biopsychosocial assessment by the point of diagnosis. The completion of the assessment is to be recorded on the same day as the diagnosis record.	INLIQ MH008	The % of women aged 25 or over who have not attained the age of 65 with Schizophrenia bipolar affective disorder and other psychoses whose notes record that a cervical screening test has been performed in the preceding 5 years.
INLIQ DM016	The % of male patients with diabetes on the register who have a record of erectile dysfunction with a record of advice and assessment of contributory factors and treatment options in the preceding 12 months	INLIQ PAD008	The % of patients with peripheral arterial disease in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less.
INLIQ HYP004	The % of patients with hypertension aged 16 or over and who have not attained the aged of 75 in whom there is an assessment of physical activity using GPPAQ in the preceding 12 months.	INLIQ PAD003	The % of patients with peripheral arterial disease with a record in the preceding 12 months that aspirin or an alternative anti-platelet is being taken.
INLIQ HYP005	The % of patients with hypertension aged 16 or over and who have not attained to the age of 75 who score less		



Indicator	Description	Indicator	Description
	than active on GPPAQ in the preceding 12 months who also have a record of a brief intervention in the preceding 12 months.		
INLIQ STIA004	The % of patients with a stroke or TIA who have a record of total cholesterol in the preceding 12 months.		

175 points

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