



QOF & GP Contract Update 2021/22

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2020-21 Recap

- Quality and Outcomes Framework (QOF)
 - 183 points - performance based domains
 - 310 points - Income Protected domains
 - 74 points – Quality Improvement
 - Public Health - Vaccination & Immunisations
 - Childhood vaccinations became an Essential Service
 - MMR (2020/21) – introduced in year 2 of GP Contract
 - All remaining childhood vaccinations and Shingles in year 3 of GP Contract
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2020-21 Recap

- PCN Investment and Impact Fund – 194 points
 - Seasonal flu – 72 points
 - LD health checks (age 14+) – 47 points
 - Social prescribing referrals – 25 points
 - Medicines safety indicators – 50 points

 - Additional Essential Services
 - Post natal check at 6-8 weeks
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QOF

2021/22

Contractual Overview

- 3rd year of 5 year contract agreement
 - Interim contractual arrangement from April 2021
 - Points increased from 567 to 635
 - QOF point increased to £201.16 per point
 - Average practice population 9,085.
 - No changes to payment thresholds
 - Remote reviews where clinically appropriate
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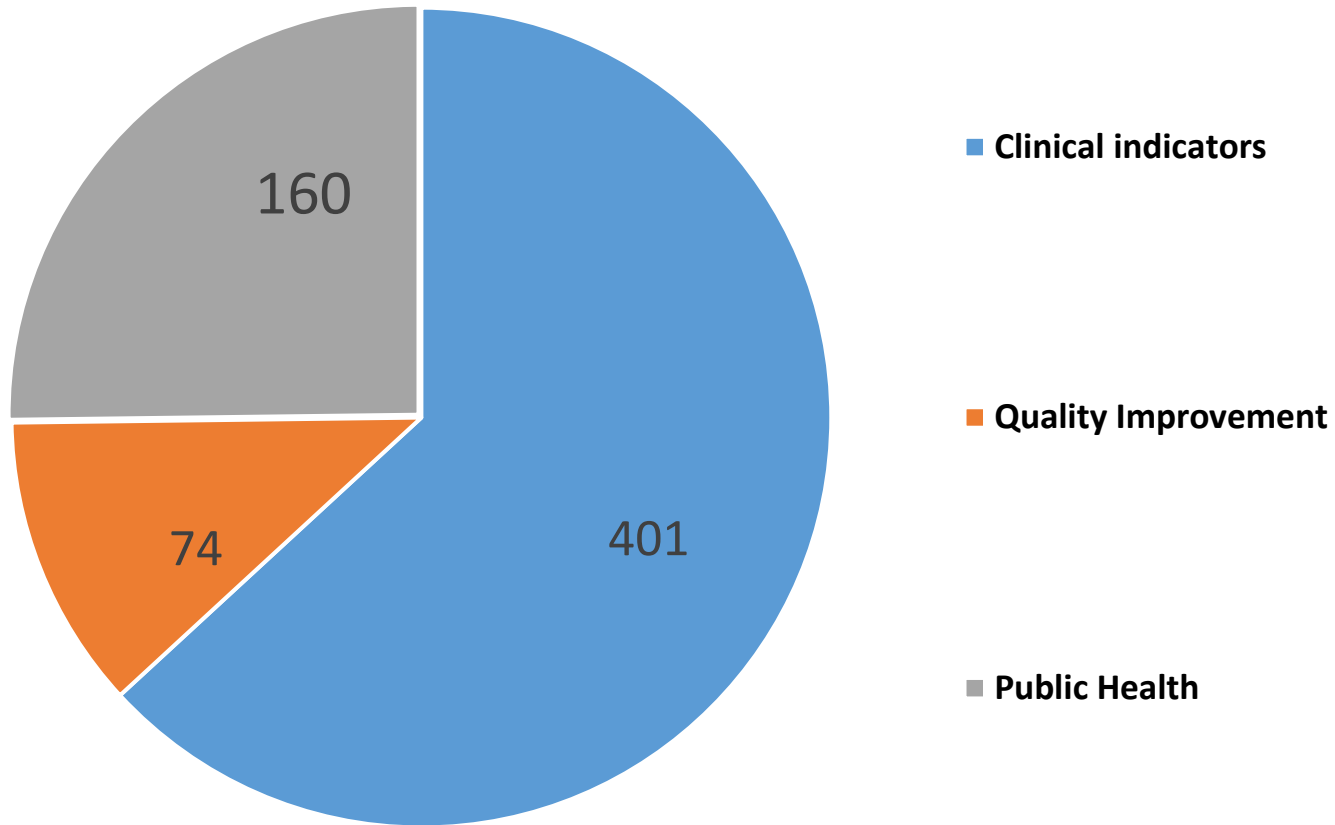
QOF changes overview

- 22 Indicators No Longer In QOF
 - 4 flu indicators retired (COPD/DM/STIA/CHD)
 - 9 new indicators
 - 3 in MH
 - 2 in Cancer
 - 4 in Vaccinations and Immunisation
(Childhood Imms & Shingles)
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Points distribution

- Clinical Domains – 401 points
 - Public Health Domains – 160 points
 - Quality Improvement Domains – 74 points
-

QOF Points – 635 (£201.16 per point)



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- PCN Investment & Impact Fund – 225 points
 - Seasonal Flu
 - LD Health Checks
 - Social Prescribing referrals
 - Appointment slot mapping

 - Essential Services (contractual requirement)
 - Post natal checks
 - Referral to weight management services
-

Potential income:

■ Average Practice List size 21/22	9085
■ Max QOF points	635
■ £ per point	£201.16

Income for average sized
practice

£127k

Mental Health – new indicators

Indicator ID	Indicator wording	Points	Payment thresholds	Points at lower threshold	Rationale for inclusion
MH007	The % of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of alcohol consumption in the preceding 12 months	4	50-90%	N/A	To improve alcohol screening so as to ensure that people can access the support they may need to reduce their alcohol consumption.
MH011	The % of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of a lipid profile in the preceding 12 months (in those patients currently prescribed antipsychotics, and/or who have pre-existing cardiovascular conditions, and/or smoke, and/or are overweight [BMI of ≥ 23 kg/m ² or ≥ 25 kg/m ² if ethnicity is recorded as White]) or preceding 24 months for all other patients	8	50-90%	N/A	To monitor cholesterol so that healthcare practitioners can offer advice and treatment for raised cholesterol level, to reduce the risk of cardiovascular disease, when needed
MH012	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of blood glucose or HbA1c in the preceding 12 months	8	50-90%	N/A	To monitor blood glucose or HbA1c so that healthcare practitioners can offer preventative advice and treatment for diabetes if needed.

CEG SMI support searches

SMI QOF Register

SMI excluding in Remission

#Incomplete Physical Health Checks

Missing Criteria

6 Physical Health Check Completed

Alcohol Consumption (1.8.20-31.7.21)

BMI or BMI & Waist circumference (1.8.20-31.7.21)

BP and Pulse Check (1.8.20-31.7.21)

Cholesterol or QRISK (1.8.20-31.7.21)

HbA1c / Blood Glucose (1.8.20-31.7.21)

Smoking status (1.8.20-31.7.21)

CEG NHSE Returns Dashboard – across NEL

	2019/20 technical guidance ref.	Number of patients	Percentage of patients receiving check
The number of people on the General Practice SMI registers (on the last day of the reporting period) excluding patients recorded as 'in remission' (Denominator):	1.2.1	4,079	
Of the above, patients who have had (Numerators):			
1. measurement of weight (BMI or BMI + Waist circumference)	1.4.1	2,431	59.6%
2. blood pressure and pulse check (diastolic and systolic blood pressure recording or diastolic and systolic blood pressure + pulse rate)	1.4.2	2,149	52.7%
3. blood lipid including cholesterol test (cholesterol measurement or QRISK measurement)	1.4.3	2,279	55.9%
4. blood glucose test (blood glucose or HbA1c measurement)	1.4.4	1,842	45.2%
5. assessment of alcohol consumption	1.4.5	2,015	49.4%
6. assessment of smoking status	1.4.6	3,309	81.1%
All six physical health checks - note this cannot be greater than the minimum figure reported in 1 to 6 above.	1.2.1	1,020	25.0%

Note that an individual who has received all six physical health checks should **also** be reported against **each** physical health check, 1 to 6.

The number of people on the General Practice SMI registers (on the last day of the reporting period) excluding patients recorded as 'in remission' (Denominator):		4,079	
Of the denominator above, patients who have had (Numerators):			
7. assessment of nutritional status/diet and level of physical activity	1.6.1	780	19.1%
8. assessment of use of illicit substance/non-prescribed drugs	1.6.2	1,046	25.6%
9. medicines reconciliation or review	1.6.3	2,324	57.0%

Cancer – new indicators

Indicator ID	Indicator wording	Points	Payment thresholds	Points at lower threshold	Rational for inclusion
CAN004	The percentage of patients with cancer, diagnosed within the preceding 24 months, who have a patient Cancer Care Review using a structured template recorded as occurring within 12 months of the date of diagnosis	6	50-90%	N/A	To encourage GP practices to conduct a cancer care review which represents an initial opportunity to address patients' needs for individual assessment, care planning and ongoing support and information requirements using a structured template at a time that is appropriate for the individual patient
CAN005	The percentage of patients with cancer, diagnosed within the preceding 12 months, who have had the opportunity for a discussion and been informed of the support available from primary care, within 3 months of diagnosis	2	70-90%	N/A	To ensure patients are aware of the support available from their GP and wider practice team soon after their diagnosis and how this can complement the care they are receiving in secondary care.

CEG Cancer Template - EMIS

Cancer Review

- **Cancer invitation and information sent to patient No previous entry

Cancer Care review should form part of any LTC holistic patient review as there are often long term consequences and unmet needs relating to their cancer and the treatments that were given.

QOF- All patients newly diagnosed with cancer need to have a review recorded within 6 months of diagnosis.

- **Cancer diagnosis discussed No previous entry

Has the patient received chemo/radiotherapy or both? No previous entry

National Cancer Survivorship Initiative - **Concerns Checklist**

- Please ensure you have discussed this with the patient and scanned it into their medical record, the CCG will require anonymised samples at the end of the year for payment & quality.

- Palliative treatment No previous entry

If the patient is palliative please refer to St Joseph's

- Referral to St Joseph's No previous entry

Cancer Referrals and Resources

- [Macmillan information for patients](#)
- [Lymphoedema service at Mile End website](#)
- [Lymphoedema service at Mile End referral form](#)
- [St Joseph Hospice – Referral form and process](#)





QOF Vaccs & Imms - Shingles

Indicator ID	Indicator wording	Points	Payment thresholds	Points at lower threshold	Rational for inclusion
VI004	The % of patients who reached 80 years old in the preceding 12 months, who have received a shingles vaccine between the ages of 70 and 79 years.	10	50-60%	N/A	To support vaccination against shingles for patients 70 years old and over.

CEG Adult Immunisations Template

Seasonal Flu Vaccination

- Influenza vacc consent given 13-Apr-2021 
- *Administration of first inactivated seasonal influenza vaccine
- *Seasonal Flu Vac given by other Healthcare Provider
- Seasonal Flu Exceptions
- Inactivated flu vac due Follow Up Apr-2021 

Pneumococcal Vaccination

- Pneumococcal vaccination given
- Last Pneumococcal vaccination recorded with old code
- Pneumococcal Vaccination Exceptions

Shingles Vaccination

- Herpes zoster vaccination
- Herpes Zoster Vaccination Exceptions

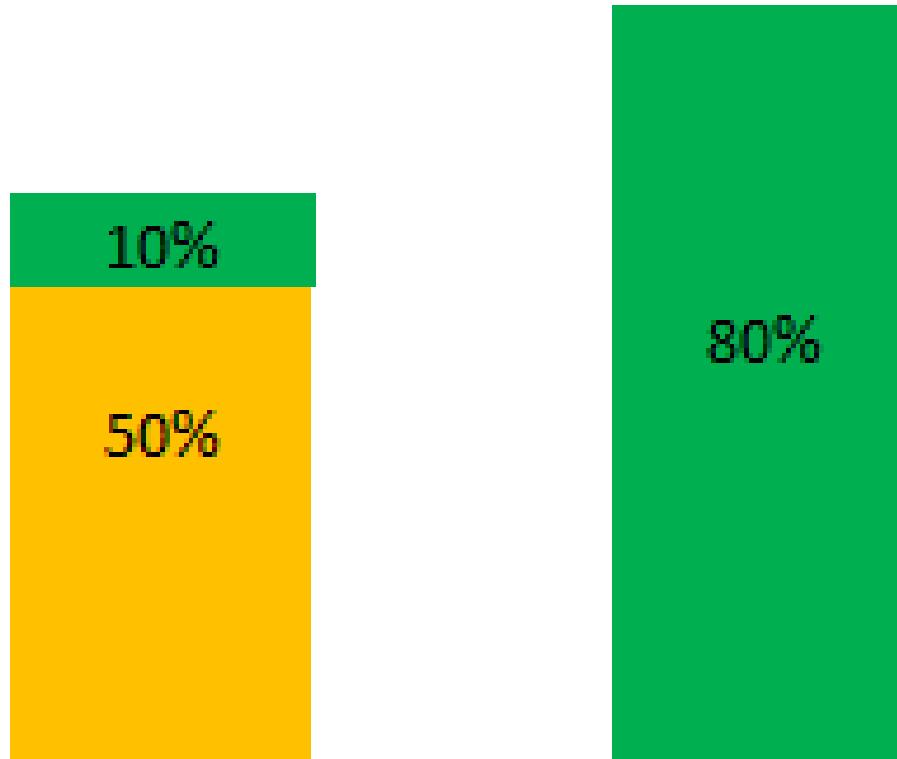
QOF Vaccs & Imms – Childhood Imms

Indicator ID	Indicator wording	Points	Payment thresholds	Points at lower threshold	Rational for inclusion
VI001	The % of babies who reached 8m old in the preceding 12 months, who have received at least 3 doses of a diphtheria, tetanus and pertussis containing vaccine before the age of 8m	18	90-95%	3	To support early vaccination with the hexavalent vaccine according to the routine immunisation schedule.
VI002	The % of children who reached 18m old in the preceding 12 months, who have received at least 1 dose of MMR between the ages of 12 and 18m	18	90-95%	7	To support early vaccination with the first dose of the MMR vaccine according to the routine immunisation schedule
VI003	The % of children who reached 5 years old in the preceding 12 months, who have received a reinforcing dose of DTaP/IPV and at least 2 doses of MMR between the ages of 1 and 5 years	18	87-95%	7	To support immunisation according to the routine immunisation schedule. Measurement by age 5 aims to achieve full immunisation before children start school

IOS Vaccs & Imms – Essential Service

- 5 core contractual standards:
 - Named lead,
 - Sufficient convenient appts,
 - Call/recall programmes and opportunistic offers,
 - Participate in national agreed catch-up programmes,
 - Record keeping and automated extraction via CQRS (except HPV – manual reporting)
 - Item of Service payment of £10.06 per vaccine
 - Practices achieving less than 80% will not receive any payment for the first 50% of their cohort
 - If 50%-80% - payment for each immunisation administered
 - If above 80% practices will get the full amount for all immunisations administered
-

Example payment



CEG Childhood Imms Template

Administration

Please check via **Care Record/Immunisations** the full immunisation history of the child prior to giving any immunisations. For further guidance on schedules, contraindications and precautions, please check Green Book.

[Click here for Green Book](#)

[Click here for Childhood Immunisation Schedule](#)

[Vaccination of individuals with uncertain or incomplete immunisation status](#)

Consent to Immunisation No previous entry
Text Name of parent:

Administration of medication under patient group direction No previous entry

BCG: Refer only those infants under the age of 1 year who have parents or grandparents from a high risk TB country:

BCG  No previous entry

Children should have daily **vitamin drops** till the age of 5 years. Available from:

1. Healthy start programme for those who are eligible
2. OTC
3. On prescription

[What to expect after vaccinations \(leaflets in languages\)](#)

At 2 Months Old

First DTaP/IPV/Hib/HepB vaccination  No previous entry

1st Rotavirus Vaccination  No previous entry

First meningitis B vaccination  No previous entry

At 3 Months Old

Second DTaP/IPV/Hib/HepB vaccination  No previous entry

2nd Rotavirus Vaccination  No previous entry

1st PCV at 12 weeks

[Changes to the infant pneumococcal conjugate vaccine schedule-complete PHE guidance](#)

1st Pneumococcal conjugated (PVC)  No previous entry

Childhood Imms Dashboard



Newham Childhood Immunisations Dashboard: Metric Details

Cluster Summary

March 2021



Coverage *Percentage of target population immunised*
 Activity *Number of patients immunised*
 Required *Number of patients requiring immunisation for network to attain 95% coverage*

● 95% and over 100%
 ● 94% 80%
 ● 92% or 93% 40%
 ● Less than 92%

Patients becoming 12m within Q4

	1,336		139			224			92			115	
	Coverage	Activity	Coverage	Activity	Required	Coverage	Activity	Required	Coverage	Activity	Required	Coverage	Activity
DTaP/IPV/Hib/HepB	● 87.5%	1,169	● 82.0%	114	18	● 87.5%	196	17	● 91.3%	84	3	● 87.0%	100
Men B	● 87.3%	1,166	● 82.7%	115	17	● 87.5%	196	17	● 91.3%	84	3	● 84.3%	97
PCV	● 90.8%	1,213	● 86.3%	120	12	● 91.5%	205	8	● 95.7%	88		● 87.8%	101
Rotavirus	● 84.7%	1,131	● 77.0%	107	25	● 86.2%	193	20	● 88.0%	81	6	● 75.7%	87

Patients becoming 24m within Q4

	1,268		147			194			84			107	
	Coverage	Activity	Coverage	Activity	Required	Coverage	Activity	Required	Coverage	Activity	Required	Coverage	Activity
DTaP/IPV/Hib	● 91.8%	1,164	● 85.0%	125	15	● 92.3%	179	5	● 95.2%	80		● 87.9%	94
MMR	● 82.6%	1,048	● 74.8%	110	30	● 80.4%	156	28	● 79.8%	67	13	● 84.1%	90
Hib/Men C	● 83.0%	1,052	● 73.5%	108	32	● 81.4%	158	26	● 78.6%	66	14	● 82.2%	88
PCV (Booster)	● 82.6%	1,048	● 74.1%	109	31	● 80.4%	156	28	● 81.0%	68	12	● 82.2%	88
Men B (Booster)	● 82.7%	1,049	● 74.8%	110	30	● 82.0%	159	25	● 78.6%	66	14	● 80.4%	86

Patients becoming 5y within Q4

	1,293		159			227			83			94	
	Coverage	Activity	Coverage	Activity	Required	Coverage	Activity	Required	Coverage	Activity	Required	Coverage	Activity
DTaP/IPV (Booster)	● 91.2%	1,179	● 92.5%	147	4	● 90.7%	206	10	● 90.4%	75	4	● 90.4%	85
MMR (Primary)	● 89.3%	1,155	● 84.9%	135	16	● 88.5%	201	15	● 89.2%	74	5	● 91.5%	86
DTaP/IPV/Hib	● 76.6%	990	● 65.4%	104	47	● 74.9%	170	46	● 75.9%	63	16	● 79.8%	75

Public Health

■ Smoking:

- If never smoked only ask up to 26th birthday
- If ex-smoker record annually for 3 consecutive years

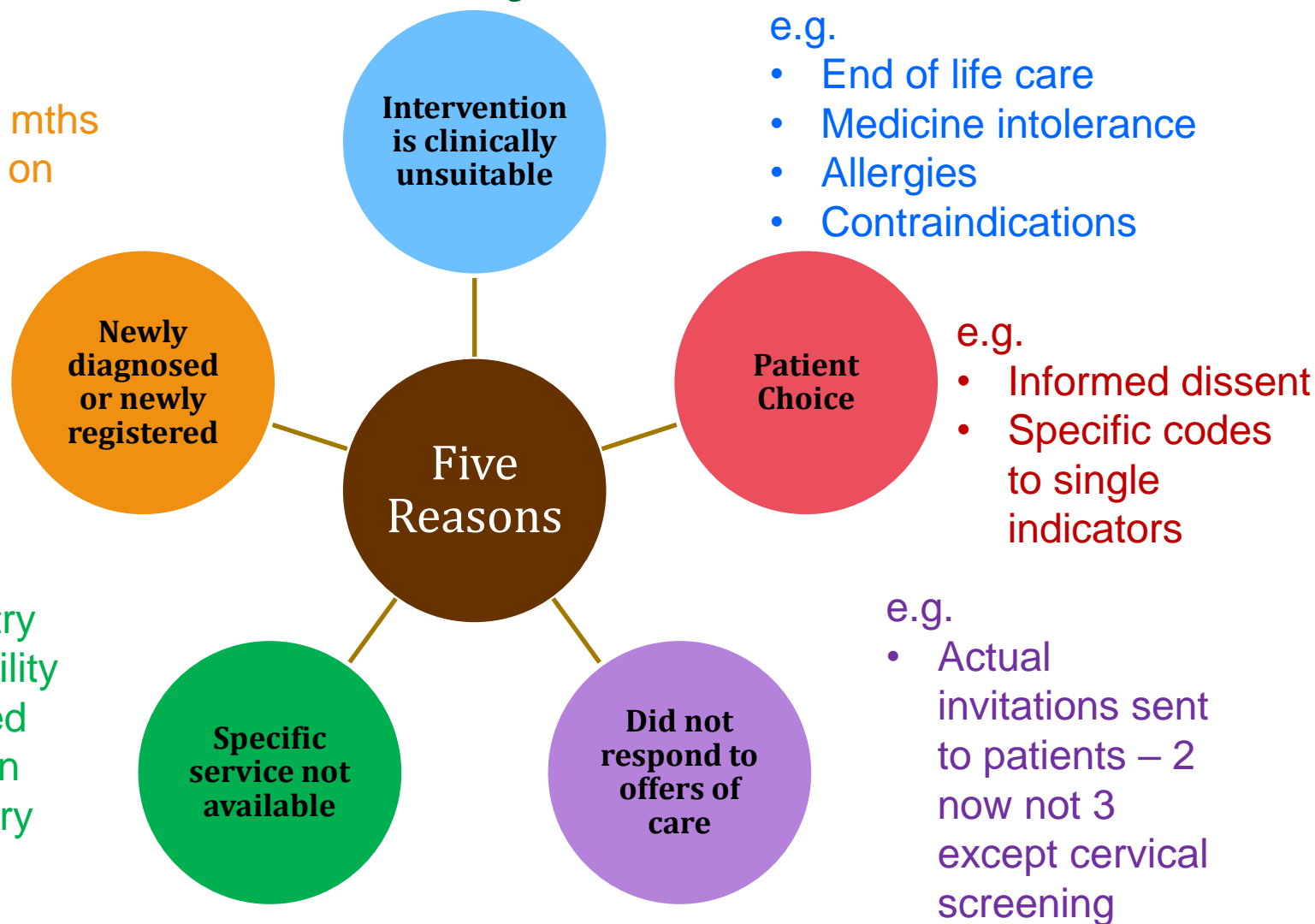
Cervical Screening:

Indicator	Points	Achievement thresholds
CS005. The proportion of women eligible for screening aged 25-49 years at end of period reported whose notes record that an adequate cervical screening test has been performed in the previous 3 years and 6 months <i>(NICE 2017 menu ID: NM154)</i>	7	45-80%
CS006. The proportion of women eligible for screening and aged 50-64 years at end of period reported whose notes record that an adequate cervical screening test has been performed in the previous 5 years and 6 months <i>(NICE 2017 menu ID: NM155)</i>	4	45-80%

Personalised Care Adjustment

- e.g.
- 3mths or 9 mths depending on condition

- e.g.
- Echo
 - Spirometry
 - Reversibility
 - Structured Education
 - Pulmonary Rehab






Resources for risk stratification



- UCLP have developed searches for Diabetes/Hypertension/COPD/Asthma
 - CEG APL Tools – CVD, AF, Diabetes and Asthma
 - Individual localities risk stratification searches
-

Risk Stratification

- UCLP CEG Risk Stratification
 - UCLP-CEG Asthma Group Checks EMIS v2
 - UCLP-CEG COPD Group Checks EMIS
 - UCLP-CEG Diabetes Group Checks EMIS v5
 - UCLP-CEG Hypertension Group Checks EMIS v5


 **APL - CVD Cardiovascular Disease Tool v1**


Instructions to locate folder containing CSV file(s)  2. Press START to see patients 

You will not be able to see the files contained in the folder  **This may take a while to process data report(s)** 

The Active Patient Link- Cardiovascular disease tool (APL-CVD) is part of REAL CVD Triple Aim program. This programme will optimise medication for the major preventable causes of CVD; blood pressure control, use of safer system for harm reduction from inappropriate treatments.

This tool may aid clinical decision making but is not intended to replace clinical judgment.

CVD Statin	
Data Available?	
EMIS Report Run date	

CVD Bleed	
Data Available?	
EMIS Report Run date	

**Investment & Impact Fund
(IIF)
&
Other Essential Services
2021/22**

PCN DES Investment and Impact Fund (IIF)

225 points @ £200 per point

- 6 indicators in 2021/22
 - Patients aged 65 and over who received a seasonal flu vaccination – 40 pts (80%-86%)
 - Patients aged 18 to 64 and in a clinical at-risk group who received a seasonal flu vaccination – 88 pts (57%-90%)
 - Children aged 2 to 3 who received a seasonal flu vaccination – 14 pts (45%-82%)
-

-
- ❑ LD health checks and action plan aged 14 and over – 36 pts (49%-80%)
 - ❑ Referrals to social prescribing – 20 pts (0.8%-1.2%)
 - ❑ All practices to have mapped all active appointment slot types to the new set of national appointment categories – 27 pts

<https://www.england.nhs.uk/wp-content/uploads/2020/08/gpad-guidance.pdf>

Example – payment for the lower threshold

Consider a hypothetical example worth 50 points with an upwards desired direction, a lower performance threshold of 50% and an upper performance threshold of 75%. Then, two IIF points are earned for every percentage point improvement in performance ($50 \text{ points} / (75\% - 50\%) = 2 \text{ points per } \% \text{ point}$). If a PCN's performance is 70%, it will earn 40 of the 50 available achievement points – because 70% is 4/5ths of the way from 50% (the lower performance threshold) to 75% (the upper performance threshold).

Other Essential Services

- ❑ Post natal check at 6-8 weeks
 - ❑ Obesity and referral to weight management services
-

CEG Postnatal Template

Maternal P/N exam. done

Delivery History

Place of delivery

14-Apr-2021



Text

Type of delivery

14-Apr-2021



Text

Trauma to perineum and vulva during delivery

14-Apr-2021



Length of gestation at birth

week

14-Apr-2021



Did you have a personalised birth plan?

Did you feel you had continuity of care?

Moving Forward... Searches

- Prevalence Improvement searches - SNOMED
 - Asthma reviews – disaggregated
 - HF reviews disaggregated from HF Med reviews
 - Asthma: Children without spirometry for PCA
 - Childhood Immunisations
 - Shingles
-

CEG Support

Newham: p.kallah@qmul.ac.uk

City and Hackney: l.o.rivastaquias@qmul.ac.uk

Waltham Forest: f.wilkins@qmul.ac.uk

Tower Hamlets: a.gutierrez@qmul.ac.uk

BHR: b.corfield@qmul.ac.uk; t.gibbons@qmul.ac.uk

CEG Website - <https://www.qmul.ac.uk/blizard/ceg/>

Resources

NHS England – GP Contract:

<https://www.england.nhs.uk/gp/gpfv/investment/gp-contract/>

Update on Vaccs & Imms changes for 2021/22

<https://www.england.nhs.uk/wp-content/uploads/2021/03/B0434-update-on-vaccination-and-immunisation-changes-for-2021-22.pdf>

BMA – QOF Guidance for 2021/22

[file:///C:/Users/Admin/Downloads/B0456%20Update%20on%20Quality%20Outcomes%20Framework%20changes%20for%202021.22%20%20\(1\).pdf](file:///C:/Users/Admin/Downloads/B0456%20Update%20on%20Quality%20Outcomes%20Framework%20changes%20for%202021.22%20%20(1).pdf)

NHS Confederation – Early diagnosis of cancer

https://www.nhsconfed.org/-/media/Confederation/Files/Publications/Documents/Delivering-PCN-specifications-on-early-diagnosis-of-cancer_FNL.pdf

NHS Confederation – Supporting people with LD

<https://www.england.nhs.uk/wp-content/uploads/2020/02/20-21-qof-qi-supporting-people-with-learning-disabilites.pdf>

Now over to you.....

