Summary of indicators

Clinical domain

Secondary prevention of coronary heart disease

Indicator	Points	Payment stages
Records		
CHD 1. The practice can produce a register of patients with coronary heart disease	4	
Diagnosis and initial management		
CHD 2. The percentage of patients with newly diagnosed angina (diagnosed after 1 April 2003) who are referred for exercise testing and/or specialist assessment	7	40–90%
Ongoing management		
CHD 5. The percentage of patients with coronary heart disease whose notes have a record of blood pressure in the previous 15 months	7	40-90%
CHD 6. The percentage of patients with coronary heart disease in whom the last blood pressure reading (measured in the previous 15 months) is 150/90 or less	19	40-70%
CHD 7. The percentage of patients with coronary heart disease whose notes have a record of total cholesterol in the previous 15 months	7	40-90%
CHD 8. The percentage of patients with coronary heart disease whose last measured total cholesterol (measured in the previous 15 months) is 5mmol/l or less	17	40-70%
CHD 9. The percentage of patients with coronary heart disease with a record in the previous 15 months that aspirin, an alternative anti-platelet therapy, or an anti-coagulant is being taken (unless a contraindication or side-effects are recorded)	7	40-90%
CHD 10. The percentage of patients with coronary heart disease who are currently treated with a beta blocker (unless a contraindication or side-effects are recorded)	7	40-60%
CHD 11. The percentage of patients with a history of myocardial infarction (diagnosed after 1 April 2003) who are currently treated with an ACE inhibitor or Angiotensin II antagonist	7	40-80%
CHD 12. The percentage of patients with coronary heart disease who have a record of influenza immunisation in the preceding 1 September to 31 March	7	40-90%

Heart failure

Indicator	Points	Payment stages
Records		
HF 1: The practice can produce a register of patients with heart failure	4	
Initial diagnosis		
HF 2: The percentage of patients with a diagnosis of heart failure (diagnosed after 1 April 2006) which has been confirmed by an echocardiogram or by specialist assessment	6	40-90%
Ongoing management		
HF 3: The percentage of patients with a current diagnosis of heart failure due to LVD who are currently treated with an ACE inhibitor or Angiotensin Receptor Blocker, who can tolerate therapy and for whom there is no contra-indication	10	40-80%

Stroke and Transient Ischaemic Attack (TIA)

Indicator	Points	Payment stages
Records		
STROKE 1. The practice can produce a register of patients with stroke or TIA	2	
STROKE 13. The percentage of new patients with a stroke or TIA who have been referred for further investigation	2	40-80%
Ongoing management		
STROKE 5. The percentage of patients with TIA or stroke who have a record of blood pressure in the notes in the preceding 15 months	2	40-90%
STROKE 6. 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%
STROKE 7. The percentage of patients with TIA or stroke who have a record of total cholesterol in the last 15 months	2	40-90%

STROKE 8. The percentage of patients with TIA or stroke whose last measured total cholesterol (measured in the previous 15 months) is 5mmol/l or less	5	40-60%
STROKE 12. 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 an anti-coagulant is being taken (unless a contraindication or side-effects are recorded)	4	40-90%
STROKE 10. The percentage of patients with TIA or stroke who have had influenza immunisation in the preceding 1 September to 31 March	2	40-85%

Hypertension

Indicator	Points	Payment stages
Records		
BP 1. The practice can produce a register of patients with established hypertension	6	
Ongoing management		
BP 4. The percentage of patients with hypertension in whom there is a record of the blood pressure in the previous 9 months	20	40-90%
BP 5. 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%

Diabetes mellitus

Indicator	Points	Payment stages
Records		
DM 19.The practice can produce a register of all patients aged 17 years and over with diabetes mellitus, which specifies whether the patient has Type 1 or Type 2 diabetes	6	
Ongoing management		
DM 2.The percentage of patients with diabetes whose notes record BMI in the previous 15 months	3	40-90%
DM 5. The percentage of patients with diabetes who have a record of HbA1c or equivalent in the previous 15 months	3	40-90%
DM 20. The percentage of patients with diabetes in whom the last HbA1c is 7.5 or less (or equivalent test/ reference range depending on local laboratory) in the previous 15 months	17	40-50%
DM 7. The percentage of patients with diabetes in whom the last HbA1c is 10 or less (or equivalent test/ reference range depending on local laboratory) in the previous 15 months	11	40-90%
DM 21. The percentage of patients with diabetes who have a record of retinal screening in the previous 15 months	5	40-90%
DM 9. 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%
DM 10. The percentage of patients with diabetes with a record of neuropathy testing in the previous 15 months	3	40-90%
DM 11. The percentage of patients with diabetes who have a record of the blood pressure in the previous 15 months	3	40-90%
DM 12. The percentage of patients with diabetes in whom the last blood pressure is 145/85 or less	18	40-60%
DM 13. 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%

DM 22. 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%
DM 15. The percentage of patients with diabetes with a diagnosis of proteinuria or micro-albuminuria who are treated with ACE inhibitors (or A2 antagonists)	3	40-80%
DM 16. The percentage of patients with diabetes who have a record of total cholesterol in the previous 15 months	3	40-90%
DM 17. The percentage of patients with diabetes whose last measured total cholesterol within the previous 15 months is 5mmol/l or less	6	40-70%
DM 18. The percentage of patients with diabetes who have had influenza immunisation in the preceding 1 September to 31 March	3	40-85%

Chronic obstructive pulmonary disease (COPD)

Indicator	Points	Payment stages
Records		
COPD 1. The practice can produce a register of patients with COPD	3	
Initial diagnosis		
COPD 12. The percentage of all patients with COPD diagnosed after 1st April 2008 in whom the diagnosis has been confirmed by post bronchodilator spirometry	5	40-80%
Ongoing management		
COPD 10. The percentage of patients with COPD with a record of FeV1 in the previous 15 months	7	40-70%
COPD 11. The percentage of patients with COPD receiving inhaled treatment in whom there is a record that inhaler technique has been checked in the previous 15 months	7	40-90%
COPD 8. The percentage of patients with COPD who have had influenza immunisation in the preceding 1 September to 31 March	6	40-85%

Epilepsy

Indicator	Points	Payment stages
Records		
EPILEPSY 5. The practice can produce a register of patients aged 18 and over receiving drug treatment for epilepsy	1	
Ongoing management		
EPILEPSY 6. The percentage of patients age 18 and over on drug treatment for epilepsy who have a record of seizure frequency in the previous 15 months	4	40-90%
EPILEPSY 7. The percentage of patients age 18 and over on drug treatment for epilepsy who have a record of medication review involving the patient and/or carer in the previous 15 months	4	40-90%
EPILEPSY 8. The percentage of patients age 18 and over on drug treatment for epilepsy who have been seizure free for the last 12 months recorded in the previous 15 months	6	40-70%

Hypothroid

Indicator	Points	Payment stages
Records		
THYROID 1. The practice can produce a register of patients with hypothyroidism	1	
Ongoing management		
THYROID 2. The percentage of patients with hypothyroidism with thyroid function tests recorded in the previous 15 months	6	40-90%

Cancer

Indicator	Points	Payment stages
Records		
CANCER 1. The practice can produce a register of all cancer patients defined as a 'register of patients with a diagnosis of cancer excluding non-melanotic skin cancers from 1 April 2003'	5	
Ongoing management		
CANCER 3. The percentage of patients with cancer, diagnosed within the last 18 months who have a patient review recorded as occurring within 6 months of the practice receiving confirmation of the diagnosis	6	40-90%

Palliative care

Indicator	Points	Payment stages
Records		
PC 3: The practice has a complete register available of all patients in need of palliative care/support irrespective of age	3	
Ongoing management		
PC 2: The practice has regular (at least 3 monthly) multidisciplinary case review meetings where all patients on the palliative care register are discussed	3	

Mental health

Indicator	Points	Payment stages
Records		
MH 8. The practice can produce a register of people with schizophrenia, bipolar disorder and other psychoses	4	
Ongoing management		
MH 9. The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses with a review recorded in the preceding 15 months. In the review there should be evidence that the patient has been offered routine health promotion and prevention advice appropriate to their age, gender and health status	23	40-90%
MH 4. The percentage of patients on lithium therapy with a record of serum creatinine and TSH in the preceding 15 months	1	40-90%
MH 5. The percentage of patients on lithium therapy with a record of lithium levels in the therapeutic range within the previous 6 months	2	40-90%
MH 6: The percentage of patients on the register who have a comprehensive care plan documented in the records agreed between individuals, their family and/or carers as appropriate	6	25-50%
MH 7: The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who do not attend the practice for their annual review who are identified and followed up by the practice team within 14 days of non-attendance	3	40-90%

Asthma

Indicator	Points	Payment stages
Records		
ASTHMA 1. The practice can produce a register of patients with asthma, excluding patients with asthma who have been prescribed no asthma-related drugs in the previous twelve months	4	
Initial management		
ASTHMA 8. The percentage of patients aged eight and over diagnosed as having asthma from 1 April 2006 with measures of variability or reversibility	15	40-80%
Ongoing management		
ASTHMA 3. The percentage of patients with asthma between the ages of 14 and 19 in whom there is a record of smoking status in the previous 15 months	6	40-80%
ASTHMA 6. The percentage of patients with asthma who have had an asthma review in the previous 15 months	20	40-70%

Dementia

Indicator	Points	Payment stages
Records		
DEM 1: The practice can produce a register of patients diagnosed with dementia	5	
Ongoing management		
DEM 2: The percentage of patients diagnosed with dementia whose care has been reviewed in the previous 15 months	15	25-60%

Depression

Indicator	Points	Payment stages
Diagnosis and initial management		
DEP 1: The percentage of patients on the diabetes register and /or the CHD register for whom case finding for depression has been undertaken on one occasion during the previous 15 months using two standard screening questions	8	40-90%
DEP 2: 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 outset of treatment using an assessment tool validated for use in primary care	25	40-90%

Chronic kidney disease (CKD)

Indicator	Points	Payment stages
Records		
CKD 1: The practice can produce a register of patients aged 18 years and over with CKD (US National Kidney Foundation: Stage 3 to 5 CKD)	6	
Initial management		
CKD 2: The percentage of patients on the CKD register whose notes have a record of blood pressure in the previous 15 months	6	40-90%
Ongoing management		
CKD 3: The percentage of patients on the CKD register in whom the last blood pressure reading, measured in the previous 15 months, is 140/85 or less	11	40-70%
CKD 5: The percentage of patients on the CKD register with hypertension and proteinuria who are treated with an angiotensin converting enzyme inhibitor (ACE-I) or angiotensin receptor blocker (ARB) (unless a contraindication or side effects are recorded)	4	40-80%

Atrial fibrillation

Indicator	Points	Payment stages
Records		
AF 1: The practice can produce a register of patients with atrial fibrillation	5	
Initial diagnosis		
AF 4: The percentage of patients with atrial fibrillation diagnosed after 1 April 2008 with ECG or specialist confirmed diagnosis	10	40-90%
Ongoing management		
AF 3: The percentage of patients with atrial fibrillation who are currently treated with anti-coagulation drug therapy or an anti-platelet therapy	15	40-90%

Obesity

Indicator	Points	Payment stages
Records		
OB 1: The practice can produce a register of patients aged 16 and over with a Body Mass Index (BMI) greater than or equal to 30 in the previous 15 months	8	

Learning disabilities

Indicator	Points	Payment stages
Records		
The practice can produce a register of patients with learning disabilities	4	

Smoking

Indicator	Points	Payment stages
On-going management		
Smoking 3: The percentage of patients with any or any combination of the following conditions: coronary heart disease, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses whose notes record smoking status in the previous 15 months	33	40-90%
Smoking 4: The percentage of patients with any or any combination of the following conditions: coronary heart disease, 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 previous 15 months	35	40-90%

Organisational domain

Records and information

	Indicator	Points
Records 3	The practice has a system for transferring and acting on information about patients seen by other doctors out of hours	1
Records 8	There is a designated place for the recording of drug allergies and adverse reactions in the notes and these are clearly recorded	1
Records 9	For repeat medicines, an indication for the drug can be identified in the records (for drugs added to the repeat prescription with effect from 1 April 2004). Minimum Standard 80%	4
Records 11	The blood pressure of patients aged 45 and over is recorded in the preceding 5 years for at least 65% of patients	10
Records 13	There is a system to alert the out-of-hours service or duty doctor to patients dying at home	2
Records 15	The practice has up-to-date clinical summaries in at least 60% of patient records	25
Records 17	The blood pressure of patients aged 45 and over is recorded in the preceding 5 years for at least 80% of patients	5
Records 18	The practice has up-to-date clinical summaries in at least 80% of patient records	8
Records 19	80% of newly registered patients have had their notes summarised within 8 weeks of receipt by the practice	7
Records 20	The practice has up-to-date clinical summaries in at least 70% of patient records	12
Records 21	Ethnic origin is recorded for 100% of new registrations	1
Records 23	The percentage of patients aged over 15 years whose notes record smoking status in the past 27 months (payment stages 40 – 90%)	11

Information for patients

	Indicator	Points
Information 4	If a patient is removed from a practice's list, the practice provides an explanation of the reasons in writing to the patient and information on how to find a new practice, unless it is perceived that such an action would result in a violent response by the patient	1
Information 5	The practice supports smokers in stopping smoking by a strategy which includes providing literature and offering appropriate therapy	2

Education and training

	Indicator	Points
Education 1	There is a record of all practice-employed clinical staff having attended training/updating in basic life support skills in the preceding 18 months	4
Education 5	There is a record of all practice-employed staff having attended training/updating in basic life support skills in the preceding 36 months	3
Education 6	The practice conducts an annual review of patient complaints and suggestions to ascertain general learning points which are shared with the team	3
Education 7	The practice has undertaken a minimum of twelve significant event reviews in the past 3 years which could include: • any death occurring in the practice premises • new cancer diagnoses • deaths where terminal care has taken place at home • any suicides • admissions under the Mental Health Act • child protection cases • medication errors. A significant event occurring when a patient may have been subjected to harm, had the circumstance/ outcome been different (near miss)	4
Education 8	All practice-employed nurses have personal learning plans which have been reviewed at annual appraisal	5
Education 9	All practice-employed non-clinical team members have an annual appraisal	3
Education 10	The practice has undertaken a minimum of three significant event reviews within the last year	6

Practice management

	Indicator	Points
Management 1	Individual healthcare professionals have access to information on local procedures relating to Child Protection	1
Management 2	There are clearly defined arrangements for backing up computer data, back-up verification, safe storage of back-up tapes and authorisation for loading programmes where a computer is used	1
Management 3	The Hepatitis B status of all doctors and relevant practice-employed staff is recorded and immunisation recommended if required in accordance with national guidance	0.5
Management 5	The practice offers a range of appointment times to patients, which as a minimum should include morning and afternoon appointments five mornings and four afternoons per week, except where agreed with the PCO	3
Management 7	The practice has systems in place to ensure regular and appropriate inspection, calibration, maintenance and replacement of equipment including: • A defined responsible person • Clear recording • Systematic pre-planned schedules • Reporting of faults.	3
Management 9	The practice has a protocol for the identification of carers and a mechanism for the referral of carers for social services assessment	3
Management 10	There is a written procedures manual that includes staff employment policies including equal opportunities, bullying and harassment and sickness absence (including illegal drugs, alcohol and stress), to which staff have access	2

Medicines management

	Indicator	Points
Medicines 2	The practice possesses the equipment and in-date emergency drugs to treat anaphylaxis	2
Medicines 3	There is a system for checking the expiry dates of emergency drugs on at least an annual basis	2
Medicines 4	The number of hours from requesting a prescription to availability for collection by the patient is 72 hours or less (excluding weekends and bank/local holidays)	3
Medicines 6	The practice meets the PCO prescribing adviser at least annually and agrees up to three actions related to prescribing	4
Medicines 8	The number of hours from requesting a prescription to availability for collection by the patient is 48 hours or less (excluding weekends and bank/local holidays)	6
Medicines 10	The practice meets the PCO prescribing adviser at least annually, has agreed up to three actions related to prescribing and subsequently provided evidence of change	4
Medicines 11	A medication review is recorded in the notes in the preceding 15 months for all patients being prescribed four or more repeat medicines. Standard 80%	7
Medicines 12	A medication review is recorded in the notes in the preceding 15 months for all patients being prescribed repeat medicines. Standard 80%	8

Patient experience domain

Indicator	Points	Payment stages
PE 1 Length of consultations The length of routine booked appointments with the doctors in the practice is not less than 10 minutes (If the practice routinely sees extras during booked surgeries, then the average booked consultation length should allow for the average number of extras seen in a surgery session. If the extras are seen at the end, then it is not necessary to make this adjustment) For practices with only an open surgery system, the average face to face time spent by the GP with the patient is at least 8 minutes Practices that routinely operate a mixed economy of booked and open surgeries should report on both criteria	33	
PE 2 Patient surveys (1) The practice will have undertaken an approved patient survey each year	25	
PE 6 Patient surveys (2) The practice will have undertaken an approved patient survey each year and, having reflected on the results, will produce an action plan that: 1. sets priorities for the next two years 2. describes how the practice will report the findings to patients (for example, posters in the practice, a meeting with a patient practice group or a PCO approved patient representative) 3. describes the plans for achieving the priorities, including indicating the lead person in the practice 4. considers the case for collecting additional information on patient experience, for example through surveys of patients with specific illnesses, or consultation with a patient group.	30	
PE 7 Patient experience of access (1) The percentage of patients who, in the appropriate national survey, indicate that they were able to obtain a consultation with a GP (in England) or appropriate health care professional (in Scotland, Wales and NI) within 2 working days (in Wales this will be within 24 hours)	23.5	70-90%
PE 8 Patient experience of access (2) The percentage of patients who, in the appropriate national survey, indicate that they were able to book an appointment with a GP more than 2 days ahead	35	60-90%

Additional services

For practices providing additional services, the following organisational markers will apply.

Cervical screening (CS)

	Indicator	Points
CS 1	The percentage of patients aged from 25 to 64 (in Scotland from 21 to 60) whose notes record that a cervical smear has been performed in the last five years Standard 40 – 80%	11
CS 5	The practice has a system for informing all women of the results of cervical smears	2
CS 6	The practice has a policy for auditing its cervical screening service, and performs an audit of inadequate cervical smears in relation to individual smear-takers at least every 2 years	2
CS 7	The practice has a protocol that is in line with national guidance and practice for the management of cervical screening, which includes staff training, management of patient call/recall, exception reporting and the regular monitoring of inadequate smear rates	7

Child health surveillance (CHS)

	Indicator	Points
CHS 1	Child development checks are offered at intervals that are consistent with national guidelines and policy	6

Maternity services (MAT)

	Indicator	Points
MAT 1	Ante-natal care and screening are offered according to current local guidelines	6

Contraceptive services (CON)

	Indicator	Points
CON 1	The team has a written policy for responding to requests for emergency contraception	1
CON 2	The team has a policy for providing pre-conceptual advice	1