Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Asthma (AST)	AST002	The percentage of patients aged 8 or over with asthma (diagnosed on or after 1 April 2006), on the register, with measures of variability or reversibility recorded between 3 months before or anytime after diagnosis.	15	4,695	4,658	99.21%
Asthma (AST)	AST003	The percentage of patients with asthma, on the register, who have had an asthma review in the preceding 15 months that includes an assessment of asthma control using the 3 RCP questions.	20	6,260	5,858	93.58%
Asthma (AST)	AST004	The percentage of patients with asthma aged 14 or over and who have not attained the age of 20, on the register, in whom there is a record of smoking status in the preceding 15 months.	6	1,878	1,814	96.60%
Atrial fibrillation	AF006NI	The percentage of patients with atrial fibrillation in whom stroke risk has been assessed using the CHA <sub>2</sub> DS <sub>2</sub> -VASc score risk stratification scoring system in the preceding 3 years (excluding those patients with a previous CHADS <sub>2</sub> or CHA <sub>2</sub> DS <sub>2</sub> -VASc score of 2 or more).	12	3,756	3,722	99.10%
Atrial fibrillation	AF007	In those patients with atrial fibrillation whose latest record of a CHA <sub>2</sub> DS2-VASc score is 2 or more, the percentage of patients who are currently treated with anticoagulation drug therapy.	10	3,130	3,130	100.00%
Cancer (CAN)	CAN003	The percentage of patients with cancer, diagnosed within the preceding 15 months, who have a patient review recorded as occurring within 6 months of the contractor receiving confirmation of the diagnosis.	6	1,878	1,738	92.54%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Secondary prevention of coronary heart disease (CHD)	CHD002	The percentage of patients with coronary heart disease in whom the last blood pressure reading (measured in the preceding 15 months) is 150/90 mmHg or less.	17	5,321	5,315	99.89%
Secondary prevention of coronary heart disease (CHD)	CHD003NI	The percentage of patients with coronary heart disease whose last measured total cholesterol (measured in the preceding 3 years) is 5 mmol/l or less.	17	5,321	5,310	99.79%
Secondary prevention of coronary heart disease (CHD)	CHD005	The percentage of patients with coronary heart disease with a record in the preceding 15 months that aspirin, an alternative anti-platelet therapy, or anti-coagulant is being taken.	7	2,191	2,189	99.91%
Secondary prevention of coronary heart disease (CHD)	CHD007	The percentage of patients with coronary heart disease who have had influenza immunisation in the preceding 1 August to 31 March.	7	2,191	2,039	93.05%
Chronic obstructive pulmonary disease (COPD)	COPD002NI	The percentage of patients with COPD (diagnosed on or after 1 April 2011) in whom the diagnosis has been confirmed by post bronchodilator spirometry between 3 months before and 15 months after entering on to the register.	5	1,565	1,549	98.95%
Chronic obstructive pulmonary disease (COPD)	COPD003	The percentage of patients with COPD who have had a review, undertaken by a healthcare professional, including an assessment of breathlessness using the Medical Research Council dyspnoea scale in the preceding 15 months.	9	2,817	2,533	89.91%
Chronic obstructive pulmonary disease (COPD)	COPD004NI	The percentage of patients with COPD with a record of FEV₁ in the preceding 3 years.	7	2,191	2,180	99.51%
Chronic obstructive pulmonary disease (COPD)	COPD005NI	The percentage of patients with COPD and Medical Research Council dyspnoea grade ≥3 at any time in the preceding 12 months, with a record of oxygen saturation value within the preceding 15 months.	5	1,565	1,547	98.85%
Chronic obstructive pulmonary disease (COPD)	COPD007	The percentage of patients with COPD who have had influenza immunisation in the preceding 1 August to 31 March.	6	1,878	1,775	94.53%
Dementia (DEM)	DEM002	The percentage of patients diagnosed with dementia whose care has been reviewed in a face-to-face review in the preceding 15 months.	15	4,695	4,353	92.72%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Dementia (DEM)	DEM003	The percentage of patients 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, thyroid function tests, serum vitamin B12 and folate levels recorded between 6 months before and 6 months after entering on to the register.	6	1,878	1,704	90.72%
Depression (DEP)	DEP001NI	The percentage of patients aged 18 or over with a new diagnosis of depression in the preceding 1 April to 31 March, who have had an assessment of the physical, psychological and social aspects of the condition by the point of diagnosis. The completion of the assessment is to be recorded on the same day as the diagnosis is recorded.	21	6,573	6,283	95.59%
Diabetes mellitus (DM)	DM002NI	The percentage of patients with diabetes, on the register, in whom the last blood pressure reading (measured in the preceding 15 months) is 150/90 mmHg or less.	8	2,504	2,504	100.00%
Diabetes mellitus (DM)	DM003NI	The percentage of patients with diabetes, on the register, in whom the last blood pressure reading (measured in the preceding 15 months) is 140/80 mmHg or less.	10	3,130	3,056	97.63%
Diabetes mellitus (DM)	DM004NI	The percentage of patients with diabetes, on the register, whose last measured total cholesterol (measured within the preceding 15 months) is 5 mmol/l or less.	6	1,878	1,826	97.25%
Diabetes mellitus (DM)	DM006	The percentage of patients with diabetes, on the register, with a diagnosis of nephropathy (clinical proteinuria) or micro-albuminuria who are currently treated with an ACE-I (or ARBs).	3	939	880	93.74%
Diabetes mellitus (DM)	DM007	The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 59 mmol/mol or less in the preceding 15 months.	17	5,321	5,306	99.72%
Diabetes mellitus (DM)	DM008	The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 64 mmol/mol or less in the preceding 15 months.	8	2,504	2,301	91.89%
Diabetes mellitus (DM)	DM009	The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 75 mmol/mol or less in the preceding 15 months.	10	3,130	2,768	88.42%
Diabetes mellitus (DM)	DM010	The percentage of patients with diabetes, on the register, who have had influenza immunisation in the preceding 1 August to 31 March.	3	939	863	91.86%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Diabetes mellitus (DM)	DM012	The percentage of patients with diabetes, on the register, with a record of a foot examination and risk classification: 1) low risk (normal sensation, palpable pulses), 2) increased risk (neuropathy or absent pulses), 3) high risk (neuropathy or absent pulses plus deformity or skin changes in previous ulcer) or 4) ulcerated foot within the preceding 15 months.	4	1,252	984	78.58%
Diabetes mellitus (DM)	DM015NI	The percentage of male patients with diabetes, on the register, with whom erectile dysfunction has been discussed. Where appropriate patients should have been offered advice/investigation/treatment.	4	1,252	1,222	97.58%
Heart failure	HF002NI	The percentage of patients with a diagnosis of heart failure (diagnosed on or after 1 April 2006) which has been confirmed by an echocardiogram or by specialist assessment between 3 months before and 15 months after entering on to the register.	6	1,878	1,851	98.55%
Heart failure	HF003	In those patients with a current diagnosis of heart failure due to left ventricular systolic dysfunction, the percentage of patients who are currently treated with an ACE-I or ARB.	10	3,130	2,987	95.44%
Heart failure	HF004	In those patients with a current diagnosis of heart failure due to left ventricular systolic dysfunction who are currently treated with an ACE-I or ARB, the percentage of patients who are additionally currently treated with a betablocker licensed for heart failure.	9	2,817	2,808	99.68%
Hypertension	HYP002NI	The percentage of patients with hypertension in whom the last blood pressure reading (measured in the preceding 15 months) is 150/90 mmHg or less.	20	6,260	6,015	96.09%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Mental health (MH)	MH002	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a comprehensive care plan documented in the record, in the preceding 15 months, agreed between individuals, their family and/or carers as appropriate.	6	1,878	1,718	91.47%
Mental health (MH)	MH003	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of blood pressure in the preceding 15 months.	4	1,252	1,133	90.49%
Mental health (MH)	MH007	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of alcohol consumption in the preceding 15 months.	4	1,252	1,069	85.40%
Mental health (MH)	MH008NI	The percentage of women aged 25 or over and 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.	5	1,565	1,503	96.05%
Mental health (MH)	MH009	The percentage of patients on lithium therapy with a record of serum creatinine and TSH in the preceding 9 months.	1	313	296	94.70%
Mental health (MH)	MH010	The percentage of patients on lithium therapy with a record of lithium levels in the therapeutic range in the preceding 4 months.	2	626	537	85.77%
Osteoporosis: secondary prevention of fragility fractures	OST002	The percentage of patients aged 50 or over and who have not attained the age of 75, with a 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.	3	939	866	92.20%
Osteoporosis: secondary prevention of fragility fractures	OST005	The percentage of patients aged 75 or over with a fragility fracture on or after 1 April 2012, who are currently treated with an appropriate bonesparing agent.	3	939	851	90.58%
Palliative Care (PC)	PC001	The contractor establishes and maintains a register of all patients in need of palliative care/support irrespective of age.	3	939	924	98.40%
Palliative Care (PC)	PC002	The contractor has regular (at least 3 monthly) multi-disciplinary case review meetings where all patients on the palliative care register are discussed.	3	939	921	98.08%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Rheumatoid arthritis (RA)	RA002	The percentage of patients with rheumatoid arthritis, on the register, who have had a face-to-face review in the preceding 15 months.	5	1,565	1,407	89.93%
Rheumatoid arthritis (RA)	RA003NI	The percentage of patients with rheumatoid arthritis aged 30 or over and who have not attained the age of 85 who have had a cardiovascular risk assessment using a CVD risk assessment tool adjusted for RA in the preceding 3 years.	7	2,191	2,130	97.21%
Rheumatoid arthritis (RA)	RA004	The percentage of patients aged 50 or over and who have not attained the age of 91 with rheumatoid arthritis who have had an assessment of fracture risk using a risk assessment tool adjusted for RA in the preceding 3 years.	5	1,565	1,444	92.27%
Stroke and transient ischaemic attack (STIA)	STIA003	The percentage of patients with a history of stroke or TIA in whom the last blood pressure reading (measured in the preceding 15months) is 150/90 mmHg or less.	5	1,565	1,544	98.66%
Stroke and transient ischaemic attack (STIA)	STIA004NI	The percentage of patients with stroke and is shown to be non-haemorrhagic or a history of TIA who have a record of total cholesterol in the preceding 3 years.	2	626	624	99.65%
Stroke and transient ischaemic attack (STIA)	STIA005NI	The percentage of patients with stroke shown to be non-haemorrhagic, or a history of TIA, whose last measured total cholesterol (measured in the preceding 3 years) is 5 mmol/l or less.	5	1,565	1,565	100.00%
Stroke and transient ischaemic attack (STIA)	STIA007	The percentage of patients with a stroke shown to be non-haemorrhagic, or a history of TIA, who have a record in the preceding 15 months that an antiplatelet agent, or an anti-coagulant is being taken.	4	1,252	1,247	99.60%
Stroke and transient ischaemic attack (STIA)	STIA008NI	The percentage of patients with a stroke or TIA (diagnosed on or after 1 April 2008) who have a record of a referral for further investigation between 3 months before and 1 month after the date of the latest recorded stroke or the first TIA.	2	626	606	96.86%
Stroke and transient ischaemic attack (STIA)	STIA009	The percentage of patients with stroke or TIA who have had influenza immunisation in the preceding 1 August to 31 March.	2	626	568	90.78%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Cardiovascular disease – primary prevention (CVD-PP)	CVD- PP011NI	The percentage of patients with a new diagnosis of hypertension recorded in the preceding 1 April to 31 March (excluding those with pre-existing CHD, diabetes, stroke and/or TIA), who are aged 30 or over and who have not attained the age of 75, who have a CVD risk assessment score recorded in the preceding 15 months.	5	1,565	1,451	92.73%
Cardiovascular disease – primary prevention (CVD-PP)	CVD- PP012NI	In those patients with a new diagnosis of hypertension aged 30 or over and who have not attained the age of 75, recorded between the preceding 1 April to 31 March (excluding those with pre-existing CHD, diabetes, stroke and/or TIA), who have a recorded CVD risk assessment score in the preceding 15 months of ≥20%: the percentage who are currently treated with statins.	5	1,565	1,316	84.11%
Blood Pressure (BP)	BP002	The percentage of patients aged 45 or over who have a record of blood pressure in the preceding 5 years.	15	4,695	4,583	97.62%
Smoking (SMOK)	SMOK001NI	The percentage of patients aged 15 or over whose notes record smoking status in the preceding 3 years.	10	3,130	2,782	88.87%
Cervical Screening	CS002NI	The percentage of women aged 25 or over and who have not attained the age of 65 whose notes record that a cervical screening test has been performed in the preceding 5 years.	11	3,443	3,318	96.37%
Sexual Health	CON003NI	The percentage 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 methods of contraception in the preceding 3 years.	3	939	860	91.62%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Patient Experience (PE)	PE001NI	The practice undertakes a survey of patients who have had contact with the practice (face to face or telephone consultation or prescription) within the past year with the question "Would you recommend your GP practice to someone who has just moved into the local area?" and one follow-up question (see guidance). The practice should survey at least 2% of the practice list size and need to get a minimum of 50 responses. A summary report is required to be submitted to the Regional Board by 31 March 2020.	18	5,634	5,634	100.00%
Records & Systems	RS001	General Practitioners in the contracting practice should use Clinical Communications Gateway (CCG) for referrals to all available Consultant led specialties.	10	3,130	3,130	100.00%
Records & Systems	RS002	The Practice reviews its own CCG Referral Data. Firstly to ensure that ALL GPs, including locums, are using CCG for referrals to all (available) Consultant led specialties. Secondly to look at referral patterns compared to previous years and neighbouring practices.	20	6,260	6,260	100.00%
Records & Systems	RS003	The practice engages with between three and six neighbouring practices to discuss outpatient referrals. This should include identifying any issues with CCG use and looking at referral patterns and pathways.	20	6,260	6,260	100.00%
Records & Systems	RS004	The Practice codes Emergency/Unplanned Admissions on receipt of the final paper or electronic discharge letter. Information should include Date of Admission, Specialty and Diagnosis.	20	6,260	6,260	100.00%
Records & Systems	RS005	The Practice runs the Data Quality in Practice (DQIP) minimum dataset queries (to include queries to calculate the electronic frailty index) in conjunction with the R&S tool, supported by the clinical informatics team on a six monthly basis. The extracts are shared with the HSCB in pseudonymised form. The practice will create and maintain a patient frailty register by coding patients identified by the electronic frailty index, presented in a dashboard in the R&S tool, using the appropriate Read code for mild, moderate or severe frailty.	30	9,390	9,390	100.00%

An agreement regarding QOF achievement was in place between the HSCB and 12 practices in relation to issues which the HSCB recognised would impact on QOF achievement in 2019/20. These issues related to practice closures, dispersals and mergers and the subsequent impact on practices. These 12 practices are excluded from all tables and analysis.