

Primary Care Web Tool

The Primary Care Web Tool has been developed by NHS England using comparative data to provide a reflective tool for quality improvement purposes, by raising awareness amongst GPs about achievement and create an impetus for development and improvement. It contains two sections, General Practice High Level Indicators and General Practice Outcome Standards.

General Practice High Level Indicators

The General Practices High Level Indicators reports can be produced for Local Area Teams, CCGs or practices. Each report begins with providing demographic detail, and continues to provide data against the High Level Indicators; identifying performance against national and local averages and outliers.

Outlier Practices

A report was produced on 3rd July 2013 and within this 4 practices were identified as having 5 or more points which are considered to be outliers.

As some of the data contained in the report was from 2011/2012, further investigation into local data was carried out to determine if the practice was still potentially an outlier for those indicators.

Practice 1

Outlier points are:

- **Emergency Admissions for Dementia per 100 patients on dementia register** – The practice profile of older population is less than the CCG and national average, and has a small number of patients on the dementia register. This either indicates that all patients with a dementia related diagnosis are not included on the dementia register, or there is some unmet need of care for dementia patients.

Local figures using 2012/2013 admission data indicate there have been no emergency admissions with a dementia related primary diagnosis for this practice.

- **CS01: The percentage of patients aged from 25 to 64 whose notes record that a cervical smear has been performed in the last five years (including exceptions)** – This indicates that fewer women than average have had a cervical smear performed.

Local figures using March 2013 QOF data indicate there has been an increase in the percentage of patients aged from 25 to 64 whose notes record that a cervical smear has been performed in the last five years (80%). This is in line with the national average (77%)

- **DM17: The percentage of patients with diabetes whose last measured total cholesterol within the previous 15 months is 5mmol/l or less** – This indicates that fewer patients on the diabetes register have a recorded measure of cholesterol of 5mmol/l or less within the last 15 months than average. This indicates that either the patients have not received this test, or that the cholesterol does not fall below the target.

Local figures using March 2013 QOF data indicate although there has been an increase in percentage of patients with diabetes whose last measured total cholesterol within the previous 15 months is 5mmol/l or less (68%), the figure is still below the national average stated in the General Practice High Level Indicators report (82%).

DM27: The percentage of patients with diabetes in whom the last IFCC-HbA1c is 64 mmol/mol (equivalent to HbA1c of 8% in DCCT values) or less (or equivalent test/reference range depending on local laboratory) in the preceding 15 months – This indicates that fewer patients on the diabetes register whose last recorded measure of HbA1c is 64 mmol/mol (equivalent to HbA1c of 8% in DCCT values) or less within the last 15 months than average. This indicates that either the patients have not received this test, or that the IFCC-HbA1c does not fall below the target.

Local figures using March 2013 QOF data indicate although there has been an increase in percentage of patients with diabetes in whom the last IFCC-HbA1c is 64 mmol/mol (equivalent to HbA1c of 8% in DCCT values) or less (or equivalent test/reference range depending on local laboratory) in the preceding 15 months (65%), the figure is still below the national average stated in the General Practice High Level Indicators report (78%).

- **CHD8: The percentage of patients with coronary heart disease whose last measured total cholesterol (measured in the previous 15 months) is 5mmol/l or less** – This indicates that fewer patients on the CHD register have a recorded measure of cholesterol of 5mmol/l or less within the last 15 months than average. This indicates that either the patients have not received this test, or that the cholesterol does not fall below the target.

Local figures using March 2013 QOF data indicate there has been a small decrease in percentage of patients with coronary heart disease whose last measured total cholesterol (measured in the previous 15 months) is 5mmol/l or less (65%). This figure is still below the national average stated in the General Practice High Level Indicators report (80%).

Practice 2

Outlier points are:

- **Health Checks for people with serious mental illness** – This indicates that fewer people than average who have a serious mental illness are receiving Health Checks.

Local figures using March 2013 QOF data indicate there has been a decrease in Health Checks for people with serious mental illness (45%). This figure is still below the national average stated in the General Practice High Level Indicators report. (89%)

- **Diabetes prevalence ratio** – This indicates there are more patients on the diabetes register than expected in relation to the practice population. This could be due to inaccurate prevalence recording, or due to the demography of the registered population.

Local figures using March 2013 QOF data indicate although there has been a very small decrease in Health Diabetes prevalence ratio (2.86), this figure is still below the national average stated in the General Practice High Level Indicators report (1.09).

- **Ezetimibe as a proportion of all Lipid modifying drugs** – This indicates there are a higher proportion of ezetimibe prescribed of all lipid modifying drug items prescribed than average. To establish if use is appropriate patients would need to be audited.

Local figures from the Centre for Medicines Optimisation at Keele University indicate that this practice is rated Red in a RAG rating system for this indicator.

- **Overall experience of GP Surgery** – This indicates there are a smaller percentage of patients than average who rates their overall experience of their GP Surgery as “Fairly Good” or “Very Good”.

Local figures from GP survey indicate there has been an improvement in the percentage of patients reporting a good overall experience (64%); however this figure is still below the national average stated in the General Practice High Level Indicators report (87%).

- **Ease of getting through to someone at GP surgery on the phone** – This indicates there are a smaller percentage of patients than average who rates their ease of getting through to someone at GP surgery on the phone as “Fairly Easy” or “Very Easy”. This may also be affecting the overall experience score.

Local figures from GP survey indicate there has been reduction in the percentage of patients rating their experience on getting through to someone at the surgery as easy (33%). This figure is still below the national average stated in the General Practice High Level Indicators report (82%).

- **Overall experience of making an appointment** – This indicates there are a smaller percentage of patients than average who rates their ease of getting through to someone at GP surgery on the phone as “Fairly Good” or “Very Good”. This may also be affecting the previous two indicators.

Local figures from GP survey indicate there has been a small improvement in the percentage of patients rating their experience of making an appointment as good (38%), however this figure is still below the national average stated in the General Practice High Level Indicators report (80%).

Practice 3 - Practice is now closed due to retirement.

Outlier points are:

- **Emergency Admissions for Dementia per 100 patients on dementia register** – The practice profile of older population is less than the CCG and national average, and has a small number of patients on the dementia register. This either indicates that all patients with a dementia related diagnosis are not included on the dementia register, or there is some unmet need of care for dementia patients.
- **DM21: The percentage of patients with diabetes who have a record of retinal screening in the previous 15 months** – This indicates that fewer patients on the diabetes register have a record of retinal screening within the last 15 months than average. This indicates that the patients may not be receiving this test.
- **Diabetes prevalence ratio** – This indicates there are more patients on the diabetes register than expected in relation to the practice population. This could be due to inaccurate prevalence recording, or due to the demography of the registered population.
- **Asthma8: The percentage of patients aged eight and over diagnosed as having asthma from 1 April 2006 with measures of variability or reversibility** – This indicates there are less patients aged 8 and over diagnosed as having asthma from 1 April 2006 with measures of variability or reversibility than average. This may mean that variability and reversibility measures are not being taken or not being recorded.
- **Overall experience of making an appointment** – This indicates there are a smaller percentage of patients than average who rates their ease of getting through to someone at GP surgery on the phone as “Fairly Good” or “Very Good”.

Practice 4

Outlier points are:

- **Emergency Asthma Admissions per 100 patients on disease register** – This indicates that all patients with an asthma diagnosis are not included on the asthma register, or there is some unmet need of care for asthma patients.

Local figures using 2012/2013 admission data indicate there has been an increase in emergency admissions with an asthma related diagnosis against the number of patients on the asthma register for this practice (0.10). This is

above the national average stated in the General Practice High Level Indicators report (0.03).

- **DM27: The percentage of patients with diabetes in whom the last IFCC-HbA1c is 64 mmol/mol (equivalent to HbA1c of 8% in DCCT values) or less (or equivalent test/reference range depending on local laboratory) in the preceding 15 months** – This indicates that fewer patients on the diabetes register whose last recorded measure of HbA1c is 64 mmol/mol (equivalent to HbA1c of 8% in DCCT values) or less within the last 15 months than average. This indicates that either the patients have not received this test, or that the IFCC-HbA1c does not fall below the target.

Local figures using 2012/2013 admission data indicate there has been no change in the percentage of patients with diabetes in whom the last IFCC-HbA1c is 64 mmol/mol (equivalent to HbA1c of 8% in DCCT values) or less (or equivalent test/reference range depending on local laboratory) in the preceding 15 months (55%). This figure is still below the national average stated in the General Practice High Level Indicators report (78%).

- **Overall experience of GP Surgery** – This indicates there are a smaller percentage of patients than average who rates their overall experience of their GP Surgery as “Fairly Good” or “Very Good”.

Local figures from GP survey indicate there has been an improvement in the percentage of patients reporting a good overall experience (63%); however this figure is still below the national average stated in the General Practice High Level Indicators report (87%).

- **Ease of getting through to someone at GP surgery on the phone** – This indicates there are a smaller percentage of patients than average who rates their ease of getting through to someone at GP surgery on the phone as “Fairly Easy” or “Very Easy”. This may also be affecting the overall experience score.

Local figures from GP survey indicate there has been an increase in the percentage of patients rating their experience on getting through to someone at the surgery as easy (42%); however this figure is still below the national average stated in the General Practice High Level Indicators report (82%).

- **Overall experience of making an appointment** – This indicates there are a smaller percentage of patients than average who rates their ease of getting through to someone at GP surgery on the phone as “Fairly Good” or “Very Good”. This may also be affecting the previous two indicators.

Local figures from GP survey indicate there has been an improvement in the percentage of patients rating their experience of making an appointment as good (52%); however this figure is still below the national average stated in the General Practice High Level Indicators report (80%).

General Practice Outcome Standards

The General Practice Outcome Standards report is produced for practices. Each report begins by providing the achievement status of the practice and continues to provide data against the Outcome Standards; identifying performance against national and local averages and performance against indicator trigger points.

A report was produced on 3rd July 2013 and within this Walsall CCG was identified as having 21 practices approaching review and 10 practices with a review identified. Practices approaching review are practices that have between 6 – 8 triggers in total or no more than 2 level two triggers. Practices with review identified are practices that have 9 or more triggers in total or 3 or more Level two triggers.

Level One Trigger – The practice is currently achieving a level which is greater than 0.5 standard deviations below the mean average for England, but not more than 2 standard deviations below.

Level Two Trigger – The practice is currently achieving a level which is below the mean average for England and is greater than 2 standard deviations of the target.

To raise awareness of this tool, the Information Intelligence Manager has presented at all of the locality meetings. The CCG has offered support to practices to understand the reports contained within the Primary Care Web Tool, and to address any issues.