## PMS Key Performance Indicators YEAR: 2014-15 - Agreed Indicators, For Publication

	Practice code:	F85031							
		Performance requirement	Level of achievement		Payment scale				
	Indicator		А	В	С	А	В	С	
2	Smoking in pregnancy	% pregnant women recorded as smoker, smoking discussed, referred to stop smoking services	60%	50%	40%	100%	66%	33%	
5	Alcohol	% of adult population screened for alcohol use using AUDIT-C, and where over 15 referred to specialist service if appropriate	20%	15%	10%	100%	66%	33%	
6	Mental health	% patients on register for long term conditionsother than those indicated in QOF screened for depression	≥70%	≥60%	<60%	100%	66%	33%	
9	Phlebotomy	Practice offers the choice of phlebotomy facilities to any patient that can have blood taken in a community setting	100%	No mid	0%	100%	No mid	0%	
11	Practice opening hours	Practice is open at least 52.5 hours per week, and able to take calls over lunch time.	100%	No mid	0%	100%	No mid	0%	
12	Clinical availability	Clinical appointments available total at least 16.5 hours per 1000 patients per week.	100%	No mid	0%	100%	No mid	0%	
13	Patient Participation Group	Patients have influenced service redesign through the practice PPG, been involved in discussions with the practice about the development and selection of KPIs for 2014. Practice to publish its KPIs in surgery waiting room and on practice website and to engage the PPG in monitoring its KPI achievement		No mid	0%	100%	No mid	0%	

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15	Hepatitis B and C screening	Percentage of adult injecting or former injecting drug users offered screening for blood borne virus (hep B & C, HIV)	90%	80%	70%	100%	66%	33%	
16	Hepatitis B vaccination	Percentage of adult injecting or former injecting drug usersoffered vaccination for hepatitis B	90%	80%	70%	100%	66%	33%	
25	Diabetes testing	Screen patients in at risk groups for diabetes on an annual basis with a fasting blood glucose test with one or more of the following criteria: Patients with obesity Patients with IHD Patients with CVA Patients with hypertension Patients with a 10yr CVD risk >20%	70	50	30	100	50	30	
28	Diabetes care 1 - Year of Care	Practice to offer "Gold Standard" Diabetic Year of Care treatment to all patients with Type 2 Diabetes. With this method of management, all type 2 diabetics should expect to receive the 15 Diabetes UK expectations of care (as appropriate)		100% invited and 50% of invitees attend	100% invited	100%	66%	33%	
29	Diabetes care 2 - pregnancy	All diabetics of child bearing age to be offered annual education about pregnancy if appropriate (similar to epilepsy and QoF)	75%	No mid	0%	100%	No mid	0%	
30	Diabetes care 3 - diabetes control in primary care	Type 2 diabetics on insulin to be seen inhouse for their diabetic control unless other complications (such as CKD3b or above) mean hospital management is indicated	75%	50%	0%	100%	50%	0%	
31	Diabetes care 4 - type 1 diabetics	Type 1 diabetics who do not wish to got to hospital are offered an appointment at least twice yearly for a diabetic review	90%	No mid	0%	100%	No mid	0%	

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	Indicator		А	В	С	A	В	С	
36	Identification of mental health patients requiring psychotropic depot injections	Identify patients on mental health register who require psychotropic depot injections. Keep track of compliance. Use a risk analysis by the psychiatrist to define the list. This will also take account of patient's choice. Includes carrying out an audit of how many patients on the register with details of treatment. Keep up to date phone numbers and key workers' details to follow up non attendance	100%	No mid	0%	100%	No mid	0%	
37	Child protection identification and monitoring in primary care	Identify patients on the child protection register at every opportunity when interact with primary care and to discuss with attached HV on a regular basis. Includes carrying out an audit of how many patients have warning when electronic notes are accessed for a child or a member of the family that has a child on a child protection register.	100% childen on	idenificatio n of children only	0%	100%	50%	0%	