

Oxfordshire GP Practice NHS Health Check Quality Assurance Dashboard 2014/15

K80000 - Example Oxfordshire GP Practice / Provider

Phase 1: Visit Score vs. PHE Programme Standards using Oxfordshire QA Audit Tool

National Programme Standard	Description of Standard	Out of	Practice score	Practice %	Oxfordshire Average %
Invitation and Offer	1) Identifying the eligible population and offering a Check	10	8	80.0%	76.1%
	2) Consistent approach to non-responders / DNA their appointment	5	4	80.0%	80.3%
Risk Assessment	3) Ensuring a complete Check is undertaken and recorded	18	18	100.0%	93.0%
	4) Equipment use	6	6	100.0%	98.7%
	5) Quality control for point of care testing (N/A in Oxfordshire)	N/A	N/A	N/A	N/A
Communication of Risk	6) Ensuring results are communicated effectively and recorded	11	10	90.9%	77.8%
Risk Management	7) High quality and timely lifestyle advice given to all	9	8	88.9%	93.5%
	8) Additional testing and clinical follow up	8	8	100.0%	97.5%
	9) Appropriate follow up for all if CVD risk assessed as ≥20%	5	5	100.0%	89.6%
Throughout the pathway	10) Confidential transfer of patient data (N/A in Oxfordshire)	N/A	N/A	N/A	N/A
Total		72	67	93.1%	88.2%

Phase 2: Data Compliance for PHE Standard 3

Risk Assessment Information/Measurements	Practice % Compliance	Oxfordshire Average %
Height	98.8%	82.9%
Weight	99.4%	97.1%
Body Mass Index	99.7%	94.8%
Blood Pressure	99.7%	94.1%
Cholesterol	100.0%	93.0%
Smoking Status	99.1%	94.1%
AUDIT-C	50.1%	43.2%
GPPAQ	62.2%	91.4%
Dementia Awareness	17.5%	29.1%
QRisk score	99.4%	73.5%
Average Data Compliance		82.6%

Phase 2: Risk Management Data Compliance for PHE Standard 7

Risk Management Outcomes	Aim and Threshold	No. of Checks	No. identified from Checks	No. given brief advice / referred	Practice %	Oxfordshire Average %
Smoking Cessation (if smoker)	100% of smokers receive brief advice	342	50	34	68.0%	66.6%
	50% of smokers referred for support		smokers	1	2.0%	4.7%
Weight Management (BMI>30 or >27.5 if South Asian origin)	100% of obese patients receive brief advice		91	91	100.0%	53.1%
	100% of obese patients referred		obese patients	1	1.1%	4.1%
Physical Activity (GPPAQ score 0-3)	100% of inactive patients receive brief advice		196	141	71.9%	35.4%
	100% of inactive patients referred		inactive patients	0	0.0%	6.5%
Alcohol Intervention (AUDIT Score 20+)	100% of patients with dependency receive brief advice		1	1	100.0%	80.0%
	100% of patients with dependency referred		AUDIT Score 20+	1	100.0%	40.0%

Phase 2: Data Compliance for PHE Standard 1

No. of Checks completed with no invite Read Code	Missed Payment of	Oxfordshire Average
4	£12.00	£21
Date of Phase 1 (based on outcomes from practice visit):		01/12/2014
Date of Phase 2 (based on Quarter 1 & 2 data extraction):		12/12/2014
Dashboard created by Oxfordshire County Council		

Programme Standard Comments / Feedback

Invitation and Offer	Encouraged to send the Dementia leaflet with the invite to all patients aged 65+. This, and leaflets in other formats, can be ordered via www.orderline.dh.gov.uk/ecom_dh/public/saleproducts.jsf
Risk Assessment	Advise that Dementia awareness (if 65+), the AUDIT-C (Full AUDIT if AUDIT-C score >5) and GPPAQ assessments are completed on all patients to attain accurate QRisk score and Read Coded accordingly
Risk Assessment	Recommend to review template used on clinical system for the Risk Assessment as Read Code data below 100% compliance
Communication of Risk	Advise that the following results from the Check should be shared in writing to all patients: a) Body mass index, b) Cholesterol level, c) Blood pressure, d) QRisk score, e) AUDIT score
Risk Management	Potential missed opportunities to offer brief advice and signpost or refer patients onto lifestyle services (i.e. smoking cessation), further details can be found within the Service Specification