

Required manual indicators for Quality and Outcomes Framework 16/17

This guide is for GPs and Commissioning Organisations (RLO/CCG) using the Calculating Quality Reporting Service (CQRS) for primary care information collections.

Support

Service desk	cqrsservicedesk@gdit.com , 0800 440 2777, 8am-6pm Mon-Fri
System	CQRS log in [https://login.cqrs.nhs.uk/cas/login]
Web	CQRS [https://digital.nhs.uk/article/279/General-Practice-GP-collections] GPES [http://content.digital.nhs.uk/gpes]

About this guide

This guide describes how to manually enter the four manual QOF indicators. Until the indicators are entered the QOF year-end achievement and next year's aspiration will not calculate.

The indicators that need to be manually entered for 2016/17 are:

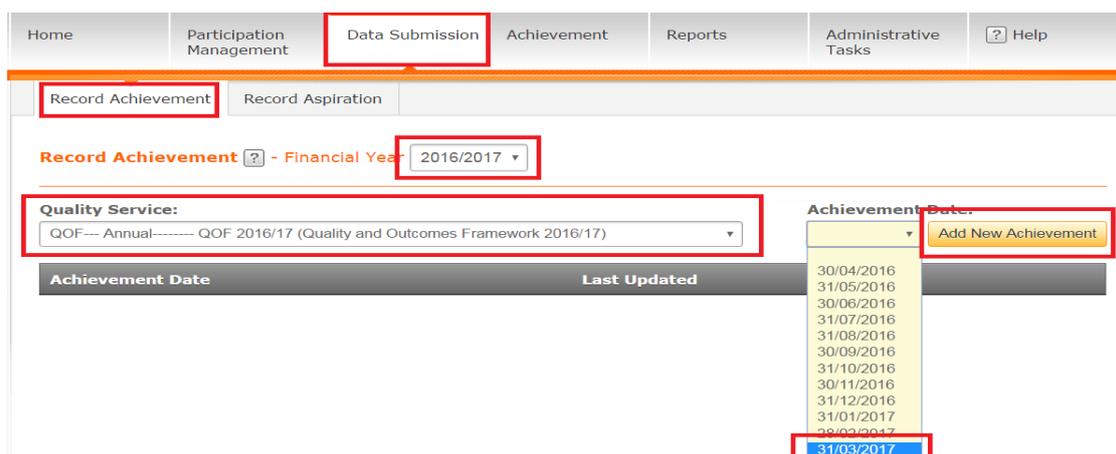
- PC002
- SMOK003
- CS001
- CS004

Achievement data inputted after the 31 March 2017 may result in a delay to your payment.

Step-by-step

To enter achievement for the four QOF 2016/17 required manual indicators follow the steps below.

1. Select the Data Submission tab from the CQRS main menu.
2. Select the Record Achievement option and set financial year dropdown to 2016/17.
3. Select Quality and Outcomes Framework 2016/17 from the drop down box.
4. Set the achievement date to 31 March 2017, end date of the financial year.
5. Select Add New Achievement.



The screenshot shows the CQRS Data Submission interface. The 'Data Submission' tab is selected in the top navigation bar. Below it, the 'Record Achievement' option is highlighted. The 'Financial Year' dropdown is set to '2016/2017'. The 'Quality Service' dropdown is set to 'QOF 2016/17 (Quality and Outcomes Framework 2016/17)'. The 'Achievement Date' dropdown is open, showing a list of dates from 30/04/2016 to 31/03/2017, with '31/03/2017' selected. The 'Add New Achievement' button is highlighted.

6. See QOF 2016/17 Domains and Groups for all the indicator groups.

Quality and Outcomes Framework 2015/16 - Achievement Date: 31/03/2016 [« Back to Record Achievement](#)

Last Updated: 23/02/2016 Practice List Size: N/A
 Baseline Date: 01/04/2015

Indicator Group	Indicators Submitted	Indicators In Progress	Last Updated
QOF 2016/17 Achievement			
Clinical domain			
Atrial fibrillation	0 of 3	0 of 3	
Secondary prevention of coronary heart disease	0 of 4	0 of 4	
Heart failure	0 of 4	0 of 4	
Hypertension	0 of 2	0 of 2	
Peripheral arterial disease	0 of 3	0 of 3	
Stroke and transient ischaemic attack	0 of 5	0 of 5	
Diabetes mellitus	0 of 11	0 of 11	
Asthma	0 of 4	0 of 4	
Chronic obstructive pulmonary disease	0 of 6	0 of 6	
Dementia	0 of 3	0 of 3	

7. Select the first group, Palliative Care. You'll then see the indicator in this group and the field, or fields that need to be entered for it.

Chronic kidney disease	0 of 1	0 of 1
Epilepsy	0 of 1	0 of 1
Learning disability	0 of 1	0 of 1
Osteoporosis: secondary prevention of fragility fractures	0 of 3	0 of 3
Rheumatoid arthritis	0 of 2	0 of 2
Palliative care	0 of 2	0 of 2
Public health domain		
Public health domain: All contracts		
Cardiovascular disease - primary prevention	0 of 1	0 of 1
Blood pressure	0 of 1	0 of 1

8. Select the PC002 drop down menu and then select either Yes or No. Then click the Submit Achievement Data at the bottom of the screen.

Last Updated: 23/02/2016 Practice List Size: N/A
 Baseline Date: 01/04/2015

Indicators

Indicator ID	Description	Date Submitted	Submitted Values	New Values
PC001	The contractor establishes and maintains a register of all patients in need of palliative care/support irrespective of age			<input type="checkbox"/> Palliative Care Register
PC002	The contractor has regular (at least 3 monthly) multidisciplinary case review meetings where all patients on the palliative care register are discussed			<div style="border: 2px solid red; display: inline-block; padding: 2px;"> Yes/No Flag <input type="button" value="Yes"/> <input type="button" value="No"/> </div>

Submission Notes: (1000 character limit)

Submit Achievement Data
Save Work in Progress
Cancel

9. After submitting your data you'll be taken back to the Indicator Group screen. You'll then see a message at the top of the screen informing you the submission has been successful.

The screenshot shows a navigation bar with tabs: Home, Participation Management, Data Submission (active), Achievement, Reports, Administrative Tasks, and Help. Below the navigation bar, there are sub-tabs: Record Achievement and Record Aspiration. The main content area displays: "Quality and Outcomes Framework 2016/17 Achievement Date 31/03/2016" with a link "Back to Record Achievement". A blue message box contains a checkmark and the text: "The Data Submission Model for Palliative care (PC) has been successfully submitted." Below this, a summary table shows: "Last Updated: 01/02/2017", "Practice List Size: N/A", and "Baseline Date: 01/04/2016".

10. From the indicator Group screen select the second group, Smoking.

<u>Palliative care</u>	1 of 2	0 of 2	23/02/2016
Public health domain			
Public health domain: All contracts			
<u>Cardiovascular disease - primary prevention</u>	0 of 1	0 of 1	
<u>Blood pressure</u>	0 of 1	0 of 1	
<u>Obesity</u>	0 of 1	0 of 1	
<u>Smoking</u>	0 of 4	0 of 4	
Public health domain: Additional services sub domain			
<u>Cervical screening</u>	0 of 3	0 of 3	
<u>Contraception</u>	0 of 2	0 of 2	

Navigation bar: Participation | Data Submission | Achievement | Reports | Administrative | Help

11. Select the SMOK003 drop down menu and then select either Yes or No. Then click on Submit Achievement Data at the bottom of the screen.

The screenshot shows two indicator rows: SMOK003 and SMOK004. SMOK003 description: "The contractor supports patients who smoke in stopping smoking by a strategy which includes providing literature and offering appropriate therapy". SMOK004 description: "The percentage of patients aged 15 or over who are recorded as current smokers who have a record of an offer of support and treatment within the preceding 24 months". A dropdown menu for SMOK003 is open, showing "Yes" and "No" options, with "No" selected. To the right, text reads: "EXCEPTION: Patient excepted as having given refusal in the 12 payment period". Below the indicators is a "Submission Notes:" field with a "(1000 character limit)" label and an empty text box. At the bottom, there are three buttons: "Submit Achievement Data" (highlighted with a red box), "Save Work in Progress", and "Cancel".

12. After clicking Submit Achievement Data you'll be taken to the Indicator Group screen and see a message informing you that the submission has been successful.

The Data Submission Model for **Smoking (SMOK)** has been successfully submitted.

13. Select the third group, Cervical Screening. You'll then see the indicators in this group and the field, or fields that need to be entered for it.

Cardiovascular disease - primary prevention	0 of 1	0 of 1	
Blood pressure	0 of 1	0 of 1	
Obesity	0 of 1	0 of 1	
Smoking	1 of 4	0 of 4	23/02/2017
Public health domain: Additional services sub domain			
Cervical screening	0 of 3	0 of 3	
Contraception	0 of 2	0 of 2	

Participation Management Data Submission Achievement Reports Administrative Tasks Help

14. Select the CS001 drop down menu and then select either Yes or No. Repeat this for CS004 and then click on Submit Achievement Data at the bottom of the screen.

Indicators

Indicator ID	Description	Date Submitted	Submitted Values	New Values
CS001	The contractor has a protocol that is in line with national guidance agreed with the NHSCB for the management of cervical screening, which includes staff training, management of patient call/recall, exception reporting and the regular monitoring of inadequate sample rates			<input type="text"/> Yes/No Flag
CS002	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			<input type="checkbox"/> EXCEPTION: Smear not wanted recorded in the 5 years before the end of the payment period <input type="checkbox"/> EXCEPTION: Smear not indicated recorded in the 5 years before the end of the payment period <input type="checkbox"/> EXCLUSION: Patient has a hysterectomy or equivalent code <input type="checkbox"/> EXCEPTION: Smear Disclaimer sent in the 5 years before end of payment period <input type="checkbox"/> Numerator
CS004	The contractor has a policy for auditing its cervical screening service and performs an audit of inadequate cervical screening tests in relation to individual sample-takers at least every 2 years			<input type="text"/> Yes/No Flag

Submission Notes: (1000 character limit)

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15. After clicking Submit Achievement Data you'll return to the Indicator Group screen. A message will appear at the top of the screen informing you the submission has been successful.



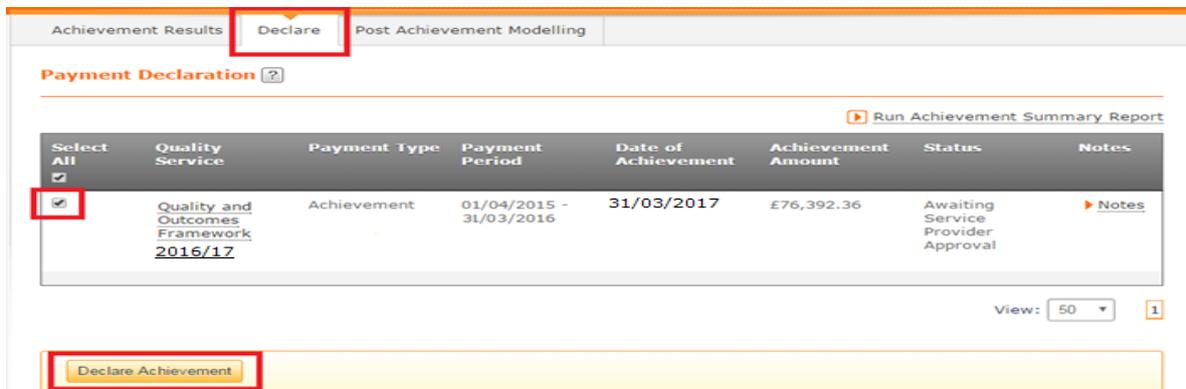
16. If you have entered the required manual indicators, your information will be collected and CQRS will calculate your QOF16/17 achievement payment and QOF 17/18 aspiration payments. When the collection is complete you'll see the information in CQRS and be able to declare it. See GP collections bulletins for the relevant dates.

IMPORTANT INFORMATION

You can only submit QOF achievement information once. After you submit the Achievement it is no longer possible to update the fields. If you identify an error after you've submitted, contact your commissioning organisation.

Declaring achievement for payment

- Go to the CQRS Achievement screen and select the Declare sub-tab.
- If you've completed all the steps above, you'll see your QOF16/17 achievement on screen.
- Check your achievement. To declare it, select the checkbox to the left of the Quality Service title, Quality and Outcomes Framework 2016/17 and select the Declare Achievement button.
- You'll then see a message confirming that your achievement has been declared and is awaiting approval by your regional local office.
- Once your regional local office approves your achievement the information will be passed to the National Health Applications and infrastructure Services (NHAIS) for payment.



Adjusting payment values

If you disagree with any of your achievement data assemble your evidence to support your claim and contact your commissioning organisation. They will review this evidence and make any necessary adjustment.