

NIS 2019/20

19/20 NIS Integrated Clinical Commissioning Quality (ICCCQ)

Clinical

- Personalised care plans
- Key Performance Indicators (KPIs)
- Budget circa £3,768,677

Prescribing

- £180k

Enablers

- Network Infrastructure and areas for development
- Budget circa £2,687,610

Additional Investment

- £400k

'NIS process'
Can we have GP Care Group/more individuals involved

New process introduced for 19/20
(Agreed at Primary Care Development Collaborative)

Small working groups to develop changes

Primary Care Committee

NIS Contract negotiation meetings x3:
(10-15 in attendance)

- Reps:**
- LMC
 - GP Care Group
 - NIS Network Manager Leads
 - Pharmacist

Agenda

Time	Item	Lead
13:30-13:40 <i>10min</i>	Welcome, introduction and overview	Dr Khyati Bakhai
13:40-13:45 <i>5min</i>	LMC video	Dr Jackie Applebee
13:45-14:10 <i>25min</i>	You said, we did. Overview of changes to 19/20 NIS	Dr Khyati Bakhai
14:10 <i>20 min</i>	19/20 Enablers & NIS new investment overview	Jenny Cooke
14:30-15:00 <i>30min</i>	Workshop Rotation 1	
15:00-15:15 <i>15min</i>	Tea break	
15:15-15:45 <i>30min</i>	Workshop rotation 2	
15:45-16:15 <i>30min</i>	Workshop rotation 3	
16:15-16:30 <i>15 Mins</i>	Wrap up GPCG	Chris Banks (GP Care Group)
16:30	Celebrating Dr Shan (retirement event straight after PLT)	

An orange speech bubble with a white outline and a tail pointing downwards and to the left. The text "You Said" is centered inside in white.

You Said

A green speech bubble with a white outline and rounded corners. It has a tail pointing downwards and to the left. The text "We did" is centered inside in white.

We did

Specification:
Too long &
incomprehensible

Send before 1st April

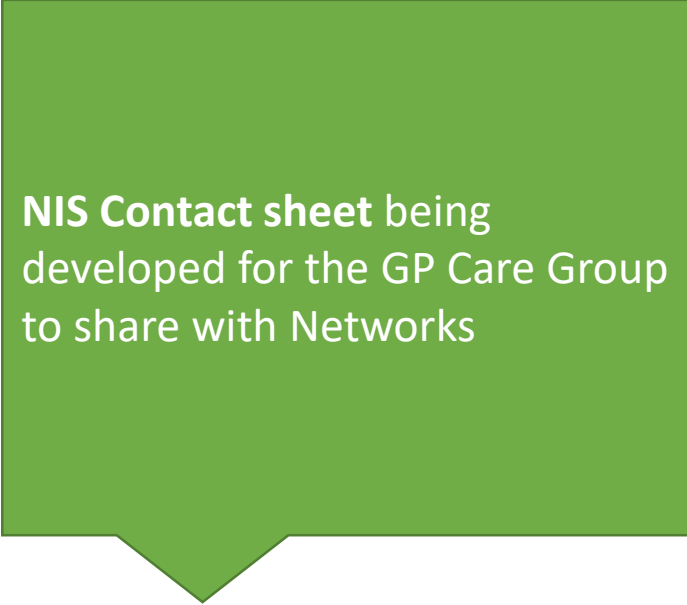
4 clear documents for key areas:

1. Clinical KPIs (clarity between monitoring/payment)
2. Prescribing
3. Enablers
4. New Investment


Specification 21st March



Who is the **go to person** for NIS areas



NIS Contact sheet being developed for the GP Care Group to share with Networks



**Rolling 12 month
targets**
Big concerns, please
reconsider



Not being taken forward in 19/20

Care Plans

- What needs to be delivered?
- Need more training

Workshop running today. Commitment to follow up on further development needs

New training programme coming through CPEN:

- Develop skills and confidence
- Putting skills into practice
- Setting really SMART Goals
- Developing ideas for self-care



Not enough notice
for **audit**.



Time period increased from 6-8
weeks to 12 weeks



BP target confusing

- 
- Generic BP Target disaggregated
 - Individual targets reinstated

18/19 Blood Pressure
Aggregated Generic BP

19/20
Disaggregate & reinstate individual BPs



Diabetes

% patients <80 years
latest blood pressure
reading within last 12
months <140/80 mmHg.

Target 65%



CVD

% patients <80 years
latest blood pressure
reading within last 12
months <140/90 mmHg.

Target 80%



CKD BP

% patients latest blood
pressure reading within
last 12m <140/90
(<130/80mmHg for DM)

Target 40%

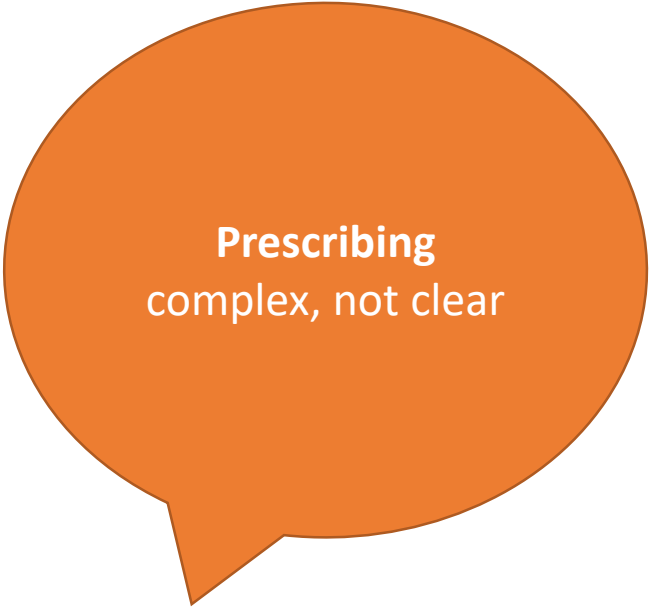
NEW monitor KPI - Renal
% who have had ACR

**Referral
management**
Clarity on the ask &
understanding the
data


Workshop running
today. Commitment
to follow up on any
areas identified for
further support

Clarity provided on data and
how to read funnel plots

Clearer definition in specification



Prescribing
complex, not clear

- 
- Simplified
 - Less elements
 - Just one NIS in one place
 - Structure for submissions

A bit more detail on Key changes to clinical KPIs

Changes to Clinical KPIs



NICE Guidance

National Requirement

Clinical need to change focus

Stretch targets

Care Plan 19/20 Part A

New process question – Recreational Drug Use

National Requirement
(Mental Health)

Decline to answer
code requested

Separate free text tick
box for 'declined' in
interim

Care Plan 19/20 Part B

New process - COPD Assessment Test (CAT)

8 Questions

Measures the impact COPD is having
on your wellbeing and daily life

Monitoring KPI

Can be done outside
of appointment

Via pod/text etc

18/19

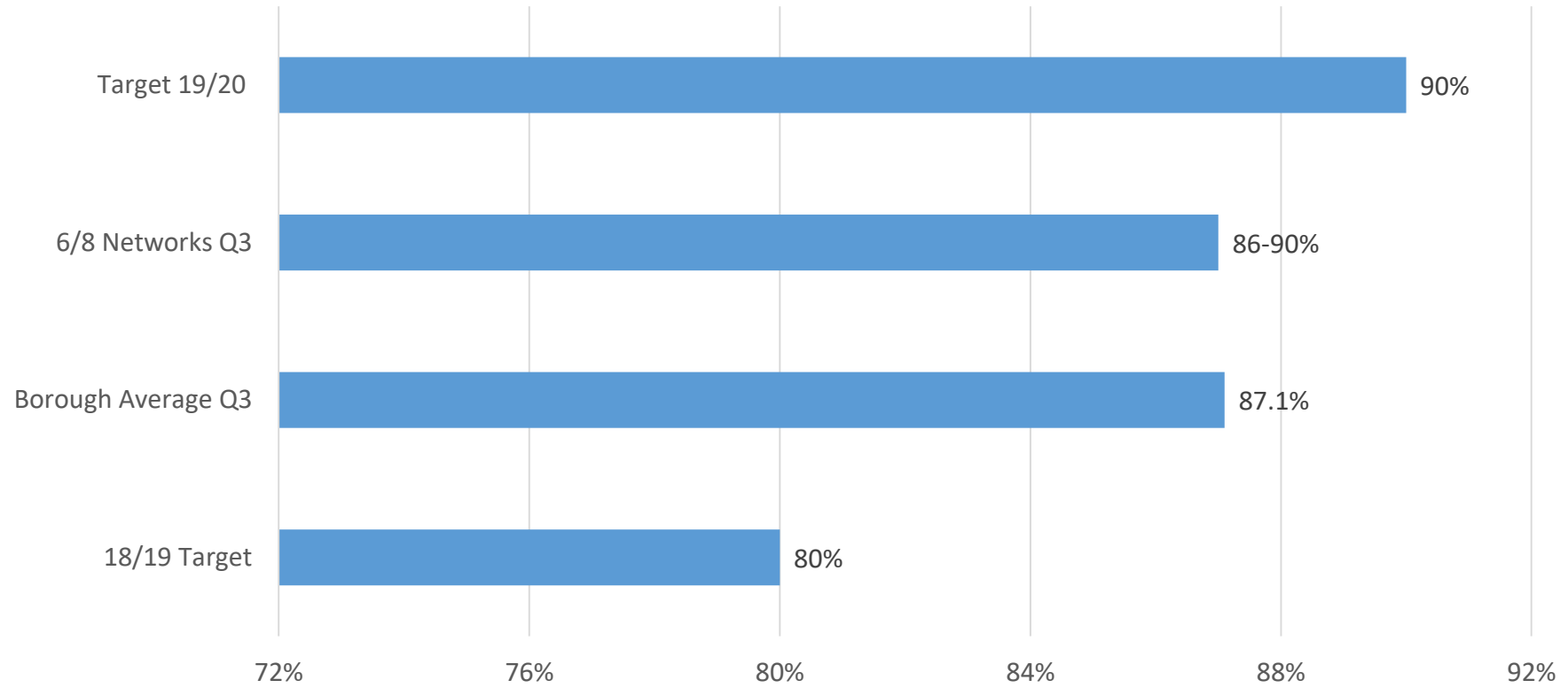
% of patients with **COPD** whose MRC score is 2 or above referred to Pulmonary Rehabilitation in the last 3 years (Monitoring KPI)

19/20

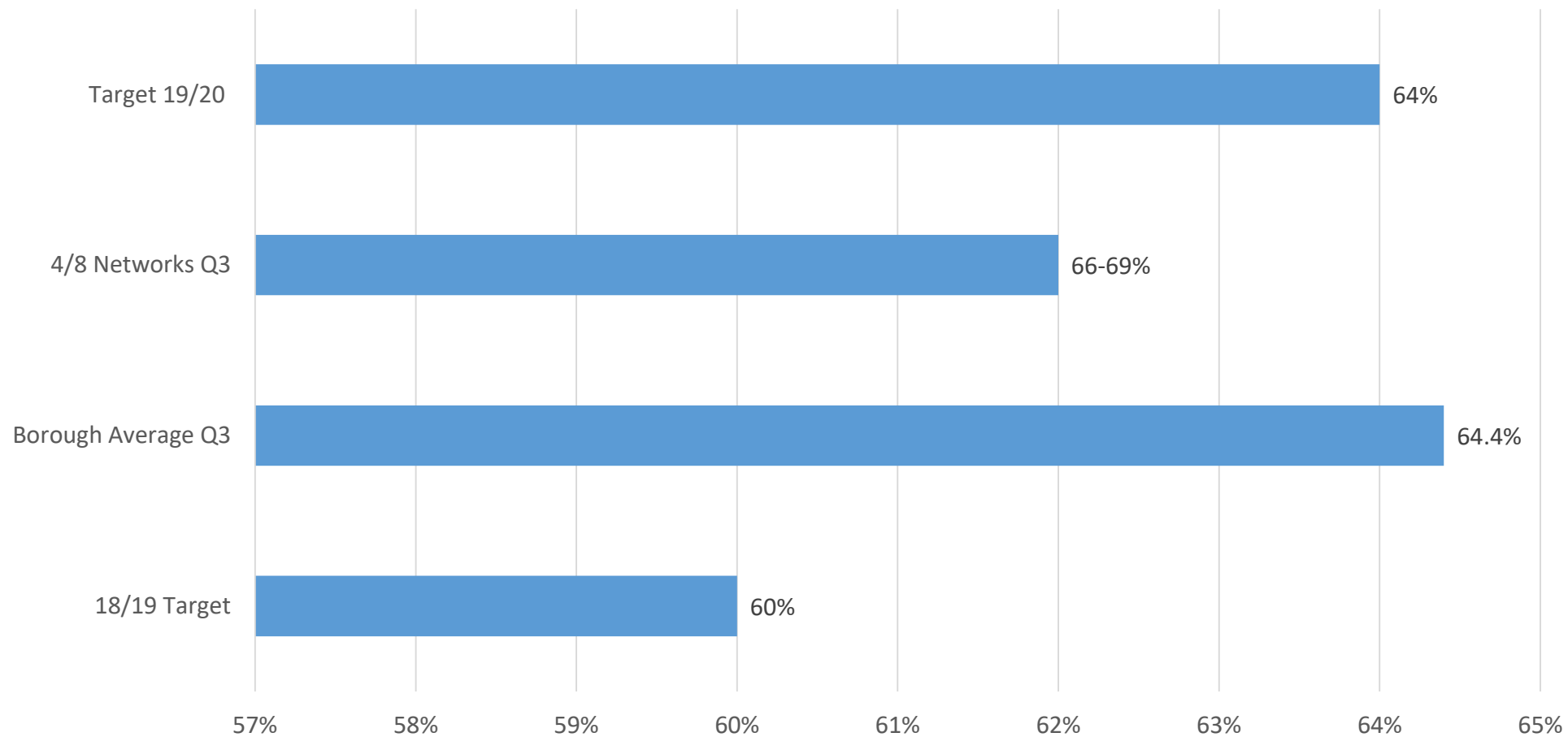
% of patients with COPD **whose latest MRC score is 2** or above referred to Pulmonary Rehabilitation in the last 3 years

(Exacerbations
in a year 61%)

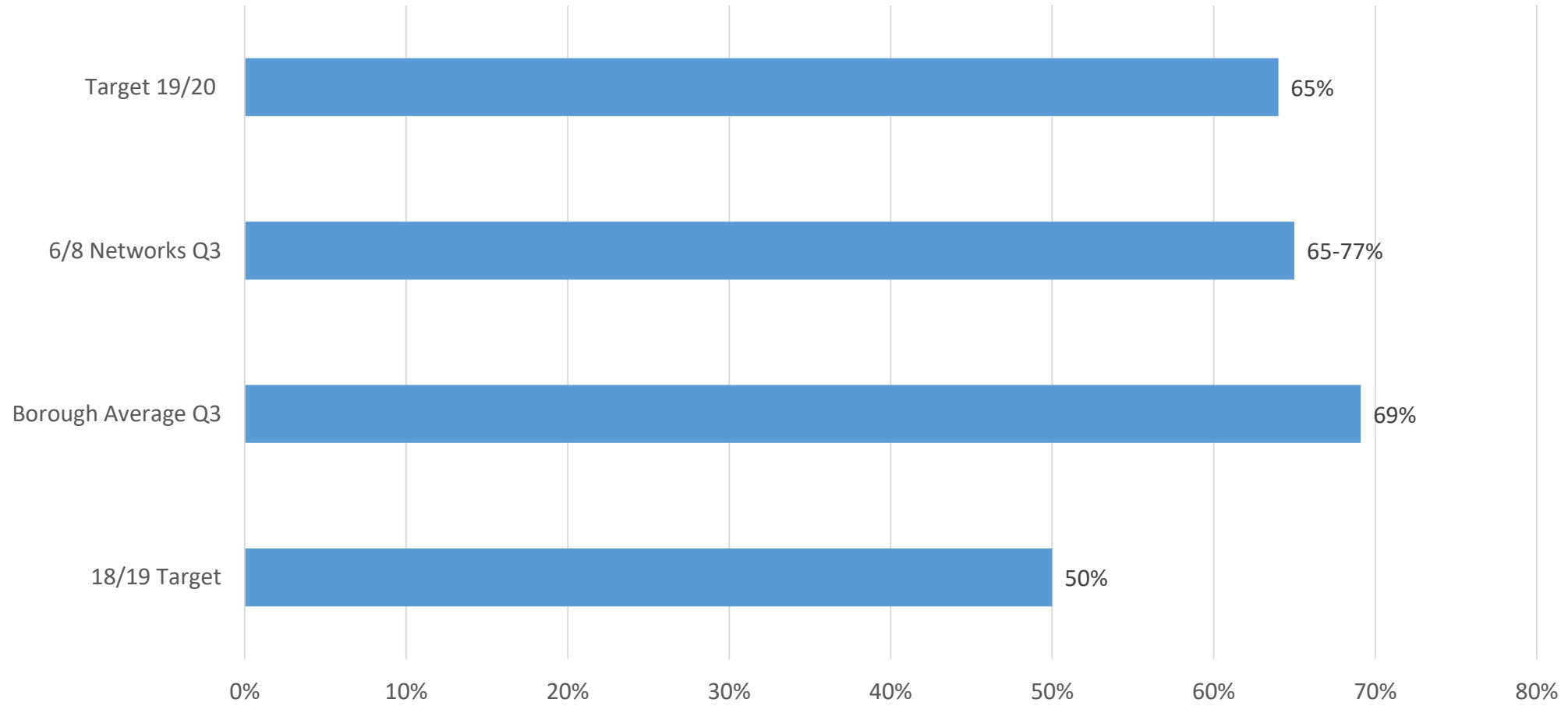
AF + CHADVASC>0



Secondary Prevention STATINS



Cognitive Assessment



Gestational Diabetes Mellitus (GDM)

- Variable coding
- Post Partum Glucose Tolerance Tests (GTT) 45% DNA rate
- Diabetes specialist at Barts estimates about 50% of women with GDM will have diabetes within 5 years



19/20 New KPI - Gestational Diabetes Mellitus (GDM)

Identify and code GDM at post-natal check and offer Hba1c at 3m post partum

Implementation year (target introduced 20/21)

18/19	19/20	Rationale
PAYMENT Key Performance Indicators		
	NEW Part A – Care Plan New Question re recreational drug use Decline code requested. Interim - separate free text tick box for 'declines to answer'	National requirement
Cognitive assessment 'You are required to ask eligible patients if they have a memory concern, and, if they do, carry out a GPCOG assessment with the patient.' Target 50%	Target revision to 65%	Performance levels
COPD % of patients with COPD with MRC score 2 or above referred to Pulmonary Rehabilitation in the last 3 years (Monitoring KPI Target 80%)	% of patients with COPD whose latest MRC score is 2 or above referred to Pulmonary Rehabilitation in the last 3 years Moved from monitoring to payment. Target reviewed lower	Percentage of COPD patient exacerbations in a year = 61%
Secondary prevention STATINS: Patients with CVD (defined as either CHD, stroke/TIA, PAD, AF or heart failure) or people with T2 diabetes - % who are on either atorvastatin 40 or 80mg. (last 12m) Target 60%	Target revision 64%	Performance
CVD Percentage of people with atrial fibrillation on anticoagulant with CHADSVASC score of 1 or more or CHADSVASC not recorded Target 80%	Target Revision 90%	Performance

18/19	19/20	Rationale
PAYMENT Key Performance Indicators		
<p>This is an audit KPI and the CLINICAL BP target levels may well be different- ie 140/80 for diabetes, 130/80 CKD etc Percentage of patients <80 years with hypertension alone or on CVD (defined as either CHD, stroke/TIA, PAD, AF or heart failure), CKD or T2 diabetes registers with latest blood pressure reading within last 12 months <140/90 mmHg</p>	<p>Disaggregate & reinstate individual BPs: Diabetes Percentage of patients <80 years with latest blood pressure reading within last 12 months <140/80 mmHg Target 65%</p>	<p>Disaggregate due to confusion Targets set in line with Q3 achievement</p>
	<p>CVD Percentage of patients <80 years with latest blood pressure reading within last 12 months <140/90 mmHg Target 80%</p>	
	<p>Renal Percentage of patients, with latest blood pressure reading within last 12 months <140/90 or <130/80 mmHg for DM) Target 40%</p>	<p>new BP reading guidance NICE March 2019</p>
	<p>NEW Renal % who have had ACR</p>	<p>Necessary for Renal BP</p>
	<p>NEW Gestational Diabetes Mellitus (GDM) Identify and code GDM at post-natal check and offer Hba1c at 3m post partum (must not be before 3m) Implementation year (target to be introduced 20/21)</p>	<p>Coding GTT 45% DNA rate</p>

MONITORING Key Performance Indicators**Complex**

For IC mandatory only- report on 12 month rolling % of the two functions:

- 1) Prognosis discussed (67D1)
- 2) Anticipatory care planning (8CMM or 8CMG5)

Split into two separate KPIs:

1)For IC mandatory only- report on 12 month rolling % of:

Prognosis discussed (67D1)

2)For IC mandatory only- report on 12 month rolling % of:

Anticipatory care planning (8CMM or 8CMG5)
(add prognosis discussion declined or discussed with carer/relative)

Different processes

NEW

COPD Assessment Test (CAT % completion)

Monitoring KPI. No set target

Added to Part B for COPD

COPD

% of patients with COPD (exclude asthma over age 18 years or if most recent eosinophil count in last 3 years > 0.5) with FEV1>50 and prescribed any inhaled steroid. (Global Strategy for the Diagnosis, Management and Prevention of COPD. Global Initiative for Chronic Obstructive Lung Disease (GOLD) 2016

Target 40% Rate or below

No change to KPI

Moved from payment to monitoring

Focus on COPD exacerbations

Prescribing NIS 2018/19 – Lessons

Issues raised in 2018/19 NIS	Lessons taken
2 separate prescribing KPIs : Clinically in the ICMCQ NIS & Cost effective in a separate NIS	Focus on just ONE NIS - Clinical No separate cost effectiveness NIS
3 separate areas: <ul style="list-style-type: none">• Minimising Waste (PrescMW)• Safety (PrescS)• Maximising clinical effectiveness (PrescMCE)	1 section for Medicines Optimisation incorporating the separate themes
Unclear / confusing targets	Simplified targets All gone through joint LMC / GPCG / Contracting meetings
No prescriptive direction regarding methodology or submission so variation in submissions	Submission templates to be provided but allow practices to adopt QI methodologies to achieve work/ targets
Insufficient communication regarding roll out	PLT! Launch before financial year Already booking visits!

Key Changes to Enablers

Care Planning Quality

Standardised approach to collection of patient experience of care planning
(Patient sample across all cohorts)



10 point anchor scale

Thinking about the appointment you have just had ...

1. How much effort was made to help you understand your health issues?

0 1 2 3 4 5 6 7 8 9
No effort was made Every effort was made

2. How much effort was made to listen to the things that matter most to you about your health issues?

0 1 2 3 4 5 6 7 8 9
No effort was made Every effort was made

3. How much effort was made to include what matters most to you in choosing what to do next?

0 1 2 3 4 5 6 7 8 9
No effort was made Every effort was made

18/19

Cancer reflection tool for all new colorectal cancers
Cancer safety netting

19/20

Cancer Care Reviews (CCR) Quality

Each Practice to review cancer diagnosis

- Feedback at year end
- Evaluation
- Sharing good practice/successes

18/19 Funding for Gestational Diabetes Mellitus (GDM) retrospective coding exercise

Carried forward to 19/20

- Search for diabetes related prescriptions in women with no coded diagnosis of diabetes
- Code indication for prescribing at time script issued
- If indication was GDM and no diabetes check when last had an HbA1c - if > 1 year ago request an HbA1c

Working group will model results and determine best course of follow up to begin in Q3
(Subject to new funding availability)

Re-Investment

Area	Requirement	Total Investment
Long Term Conditions	2% uplift	£56,903
Complex Care	Expansion of mandatory cohort in Q2 by 345 patients	£74,865
SMI cohort expansion	Inclusion of those on anti-psychotic drugs under the SMI cohort	£62,783
SMI follow-up interventions	Proposal to map current offer for SMI follow-up interventions	£5,000
ADHD Health check	One annual health check with the GP and twice annually physical monitoring with nurse / HCA	£6,750
Learning Disability	Ensuring 75% of those on the LD register receive annual health checks, and ensuring the LD register fully reflects local prevalence	£56,000
Latent TB programme	Delivery of the latent TB programme, and practice-based audits of those that have had TB screening	£17,600
Children and young people coding and safeguarding support	Case-finding and coding for a range of children's health conditions. Support to embed robust safeguarding approaches.	£118,300

Workshops : Before we start

1. Upon arrival you should have signed up to 3 themes for each rotation, make sure you stick to it.
2. At the end of each rotation, **participants will be asked to move to their next workshop** (location map will be available in each room). Room allocation is as follows.

#	Title	Location
Theme 1	Medicine optimisation (prescribing)	Room 5, stay here (LEFT side of the room)
Theme 2	Referral Management and planned care (dermatology and anti-coagulation)	Room 5, stay here (RIGHT Side of the room)
Theme 3	Care Planning (incl. MDT)	Room 6, 1 st Floor
Theme 4	Long Term Conditions - COPD, Respiratory/pulmonary Rehab & Cancer	Room 7, 2 nd Floor
Theme 5	Mental Health	Room 8, 2 nd Floor

3. Handouts and **presentations will be uploaded online** (link will be sent next week).
4. Following the PLT, **FAQs** will be written up for each theme and **uploaded online**.