

NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

Primary Care Quality and Outcomes Framework Indicator Advisory Committee recommendations

Indicator area: Cancer

Recommended Indicator:

The percentage of patients with cancer diagnosed within the preceding 15 months who have a review recorded as occurring within 3 months of the practice receiving confirmation of the diagnosis.

Background

The Primary Care Quality and Outcomes Framework (QOF) Indicator Advisory Committee (AC) met in June 2012 to consider information on the prioritisation of potential indicators for inclusion in the NICE menu for 2013/14. This included results of the NICE led public consultation, results from indicator development and pilot feedback, cost effectiveness evidence and equality impact assessment. This report is taken from the full unconfirmed minutes of this two day meeting.

QOF Indicator Advisory Committee recommendations

Wording of the piloted indicator presented to the June 2012 AC:

The percentage of patients with cancer diagnosed within the preceding 18 months who have a review recorded as occurring within 3 months of the practice receiving confirmation of the diagnosis

The Committee noted practices do not always get information about cancer patients within 3 months, but felt the indicators may improve this. It was felt that the indicators could improve the speed of information received from hospitals.

The Committee believed that at 3 months practices should know that a patient has cancer, and it was acknowledged that primary care has a significant role at this time. It was felt a consultation at 3 months would not always need to be face-to-face and that a phone call could provide useful support and options for intervention.

The Committee supported making timelines shorter but noted most practices undertake earlier reviews anyway, and those that do not, consider this appropriate for their patients. However the Committee agreed that moving to a 3 month review could provide real benefit to patients.

The Committee did note that identifying patients with metastatic or recurrent disease may be problematic in terms of identifying appropriate Read codes and that the requirements for a review would be variable.

QOF Indicator Advisory Committee final recommendation

The Committee recommended that indicator 1 be progressed for inclusion on the NICE menu for negotiation into QOF and noted the patient review would not need to be onerous and could be done by telephone.

The Committee recommended that indicator 2 should not be progressed for inclusion on the NICE menu due to the problems with identifying appropriate Read codes and the potential for varying requirements for patients with recurrent / metastatic disease.