NICE National Institute for Health and Care Excellence

NICE

Cardiovascular disease prevention: cardiovascular risk assessment for people newly diagnosed with hypertension or T2DM

NICE indicator

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www.nice.org.uk/indicators/ind161

Indicator

The percentage of patients aged between 25 and 84 years with a new diagnosis of hypertension or type 2 diabetes, recorded in the preceding 12 months (excluding those with pre-existing cardiovascular disease, chronic kidney disease, familial hypercholesterolaemia or type 1 diabetes) who have had a consultation for full formal cardiovascular disease risk assessment between 3 months before or 3 months after date of diagnosis.

Indicator type

General practice indicator suitable for use in the Quality and Outcomes Framework.

> This document does not represent formal NICE guidance. For a full list of NICE indicators, see our menu of indicators.
>
> To find out how to use indicators and how we develop them, see our NICE indicator process guide.

Rationale

The aim of this indicator is to identify people for intervention (lifestyle modification and statin therapy) to prevent cardiovascular events. The 3-month timeframe has been chosen to allow practices enough time to carry out any required tests. NICE quality standard cardiovascular risk assessment and lipid modification highlights a full formal risk assessment using the QRISK3 tool as a national priority for quality improvement.

Source guidance

Cardiovascular disease: risk assessment and reduction, including lipid modification. NICE guideline NG238 (2023), recommendations 1.1.7 and 1.1.8

Specification

Numerator: The number of patients in the denominator who have had consultation for a full formal cardiovascular disease risk assessment between 3 months before or 3 months after date of diagnosis.

Denominator: The number of patients aged between 25 and 84 years with a new diagnosis of hypertension or type 2 diabetes, recorded in the preceding 12 months (excluding those with pre-existing cardiovascular disease, chronic kidney disease, familial hypercholesterolaemia or type 1 diabetes).

Calculation: Numerator divided by the denominator, multiplied by 100.

Definitions:

- Cardiovascular disease is defined as angina, previous myocardial infarction, revascularisation, stroke or TIA or symptomatic peripheral arterial disease.

- Full formal cardiovascular disease risk assessment. NICE guidance recommends QRISK3 for full formal cardiovascular disease risk assessment however the indicator allows for additional coded tools to be used dependent on local practice.

Exclusions: None.

Personalised care adjustments or exception reporting should be considered to account for situations where the patient declines, does not attend or if the indicator is not appropriate.

Expected population size:

The National Diabetes Audit for 2021 showed that 0.4% of people in England had a new diagnosis of type 2 diabetes: 42 patients for an average practice with 10,000 patients. QOF data for indicator PP1 in 2012/13 showed that 0.5% of people in England had a new diagnosis of hypertension: 54 patients for an average practice with 10,000 patients. To be suitable for use in QOF, there should be more than 20 patients eligible for inclusion in the denominator, per average practice with 10,000 patients, prior to application of personalised care adjustments.

Update information

Minor changes since publication

April 2024: We updated links to source guidance NG238 and added expected population size.

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