

# NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

## Primary Care Quality and Outcomes Framework Indicator Advisory Committee recommendations

### Indicator area: Learning Disability

#### *Recommended Indicator:*

**Percentage of patients on the Learning Disability register with Down's Syndrome aged 18 and over who have a record of blood TSH in the previous 15 months (excluding those who are on the thyroid disease register)**

#### **Background**

The Primary Care Quality and Outcomes Framework (QOF) Indicator Advisory Committee (AC) met in June 2009 and July 2009 to consider information on the prioritisation of potential indicators for inclusion in the NICE menu for QOF. This included consideration of a briefing paper that provided a summary of the evidence on the clinical effectiveness of a potential indicator relating to learning disability, cost effectiveness evidence and an Equality Impact Assessment. This report is taken from the full confirmed minutes of these meetings and presents the AC's considerations and recommendations.

#### **QOF Indicator Advisory Committee recommendations**

Wording of the proposed indicator presented to the June 2009 AC:

*Percentage of patients on the LD register with Down's Syndrome over the age of 18 who have a record of blood Thyroid-stimulating hormone*

*(TSH) in the past 1 year (excluding those who are on the thyroid disease register)*

Following consideration of the clinical effectiveness evidence presented in the briefing paper for learning disability the AC acknowledged that the proposed indicator was based on professional consensus of opinion and was strongly supported by families and people with Down's syndrome. The AC agreed that the proposed indicator has the potential to increase the detection and management of a common clinical condition in a vulnerable group and to reduce health inequalities. The Committee recommended that the wording of the proposed indicator is amended to 'aged 18 years and over'.

The cost effectiveness evidence presented to the AC suggested that the introduction of the proposed indicator could be justified on economic grounds. The Committee agreed that the indicator appears to offer the potential to lead to earlier diagnosis and treatment, resulting in improved outcomes, at a relatively modest cost to the NHS. The AC recommended that further consideration of achievement levels should be given to inform incentivisation of this indicator.

Following consideration of the Equality Impact Assessment carried out as part of the briefing paper, no equality issues were identified that would prevent the indicator from going forward for inclusion in the NICE menu for QOF.

### **QOF Indicator Advisory Committee final recommendation**

The Committee recommended that the wording of the proposed indicator is amended to 'aged 18 years and over'. The AC recommended this indicator for inclusion on the NICE menu.