NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE indicator guidance

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# Indicator NM96

The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 64 mmol/mol or less in the preceding 12 months.

# Indicator type

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

# Rationale

This indicator measures the percentage of people with diabetes who have an HbA1c measurement of 64 mmol/mol (8.0%) or less. The aim of treatment is to reduce the risk of complications in people with type 1 or type 2 diabetes.

Strong clinical evidence shows that tight blood glucose control is associated with a reduction in diabetes complications.

For the purposes of primary care indicators, 3 separate clinical practice targets were adopted: HbA1c 59, 64 and 75 mmol/mol (NM14, NM96, NM97). The 3 targets aim to provide incentives for improving blood glucose control across the distribution of HbA1c values in the population with type 1 and type 2 diabetes.

# Source guidance

[Type 1 diabetes in adults: diagnosis and management. NICE guideline NG17](https://www.nice.org.uk/guidance/ng17) (2016, updated 2022), recommendations 1.6.6 and 1.6.7.

[Type 2 diabetes in adults: management. NICE guideline NG28](https://www.nice.org.uk/guidance/ng28) (2015, updated 2022), recommendations 1.6.7 to 1.6.10

[Management of diabetes. SIGN guideline 116](https://www.sign.ac.uk/sign-116-and-154-diabetes) (2010)

# Specification

Numerator: The number of patients in the denominator in whom the last IFCC-HbA1c (measured in the preceding 12 months) is 64 mmol/mol.

Denominator: The number of patients on the diabetes register.

Calculation: (Numerator/denominator)\*100

Exclusions:

* Patients who have their latest serum fructosamine record in the 12 months leading up to and including the payment period end date

AND

have either their latest IFCC-HbA1c recording at least 12 months before the payment period end date i.e. recorded in a previous QOF year; OR

have no evidence of an IFCC-HbA1c recording

* Patients who have a blood test declined code recorded in the 12 months leading up to and including the payment period end date
* Patients who are on maximum tolerated diabetes treatment in the 12 months leading up to and including the payment period end date.

Minimum population: The indicator would be appropriate to assess performance at individual general practice level.

# Further information

This is NICE indicator guidance, which is part of the [NICE menu of indicators](https://www.nice.org.uk/Standards-and-Indicators/index). This document does not represent formal NICE guidance.