Indicators for the NICE menu for the QOF

**Indicator area:** Secondary prevention of coronary heart disease

**Indicator:** NM87

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The percentage of patients with coronary heart disease who have had influenza immunisation in the preceding 1 August to 31 March

**Please note:** NICE inherited this indicator when it became responsible for managing the process of developing and maintaining QOF indicators in 2009.

**Introduction**
Cardiovascular disease includes coronary heart disease, stroke and peripheral arterial disease. These conditions are frequently caused by the development of atheroma and thrombosis (blockages in the arteries). In 2012, coronary heart disease was the biggest single cause of death in the UK, with a total of 74,000 deaths. People with coronary heart disease are a high-risk group for developing complications from influenza and are recommended to have an annual influenza vaccination.

**Rationale**
This indicator measures the percentage of people with coronary heart disease who have had an annual influenza vaccination between 1 August and 31 March with the aim of preventing complications in line with NICE-accredited guidance.

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2 British Heart Foundation (2014) *Cardiovascular disease statistics 2014*

NM87: August 2015
The 8-month timeframe was chosen to allow practices time to achieve sufficient uptake during the 6-month winter influenza vaccination programme (usually September to February).

**Source guidance and recommendations**

*Immunizations – seasonal influenza* (2015) NICE clinical knowledge summaries

Seasonal influenza vaccination is recommended for all people at risk of the complications of influenza, including:

- People aged 65 years and older (including all those aged 65 on or before 31 March 2015).
- People aged 6 months and older, with any of these conditions:
  - chronic respiratory disease, including asthma
  - chronic heart disease
  - chronic kidney disease
  - chronic liver disease
  - chronic neurological disease
  - diabetes mellitus
  - immunosuppression.
- Pregnant women (first, second, or third trimester).
- People living in long-stay residential and nursing homes or other long-stay care facilities; rapid spread is likely to follow any introduction of infection and cause high morbidity and mortality. This does not include prisons, young offender's institutions, or university halls of residence.

**Further information**

This is NICE indicator guidance for QOF, which is part of the NICE menu of indicators. This document does not represent formal NICE guidance. The NICE menu of indicators for QOF is available online at:
