NICE National Institute for Health and Care Excellence

The NICE menu of general practice and clinical commissioning group indicators

Last updated: August 2016

Since 2009, NICE has managed an independent and transparent process for developing indicators that are suitable for potential inclusion within the Quality and Outcomes Framework (QOF); it does this by producing a 'menu' of general practice indicators. NHS England and the devolved administrations use the menu to identify potential indicators that may or may not be included in each country's QOF as part of the national negotiations for the GP contract each year.

Although initially developed for inclusion in the national QOF, these general practice indicators can be used by clinical commissioning groups (CCGs) and others to support local quality improvement schemes.

In addition to developing indicators for general practice, NICE has developed indicators to support measurement at CCG level. These indicators can be used to identify local priorities for quality improvement and to demonstrate progress that local health systems are making on improving outcomes. NICE indicators can and are being used to support the development and implementation of local sustainability and transformation plans.

The CCG indicators developed by NICE are used in NHS England's CCG Outcomes Indicator Set (CCG OIS) and the CCG Improvement and Assessment Framework (CCG IAF).

All of the indicators are developed with an expert advisory committee. The membership of the committee includes GPs, hospital consultants, public health and social care practitioners, and NHS commissioners.

The NICE indicators on the menu are underpinned by a robust evidence base and have been through a rigorous development process that includes:

- clinical review
- testing and piloting
- public consultation.

For further information or to contact NICE email - indicators@nice.org.uk

NICE indicator menu: August 2016

Contents

What is this document for?

o   It provides a menu of **general practice** and **CCG / population level indicators** across a range of topics that have been developed by NICE.

o   It can be used by **national** and **local organisations** to identify relevant indicators to help them measure and improve the quality of care across health services.

Why use NICE indicators?

o   They are **evidence-based indicators** developed in accordance with a robust process.

o   They can help providers and commissioners to be assured that services are **high quality.**

o   They are developed by an **independent expert committee**. The committee members include GPs, hospital consultants, public health and social care practitioners, NHS commissioners and lay members.

What can NICE indicators be used for?

NICE indicators can be used to assess the quality of care and outcomes in a range of ways, including:

o   general practice quality schemes
o   national and local incentive schemes (for example, QOF, CQUIN)
o   local CCG commissioning contracts
o   national and local improvement and assessment frameworks
    o   CCG Improvement and Assessment Framework
    o   CCG Outcomes Indicator Set
o   clinical pathway commissioning and improvement schemes.

How are NICE indicators developed?

The NICE indicators are underpinned by a robust evidence base and have been through a rigorous development process that includes**:**

- **expert independent clinical review**
- **testing and live piloting**[1]
- **public consultation.**

What are the components of a NICE indicator?

NICE indicators measure outcomes that reflect the quality of care, or processes linked by evidence to improved outcomes. General practice indicators are usually process measures linked to outcomes. CCG indicators are usually outcome measures.

Indicators on the NICE menu are offer an off-the-shelf resource that can be used across the health system. The main components include:

- a **denominator**, describing the target population included in an indicator
- a **numerator**, describing the number of people in the denominator who should have the specified intervention, treatment or outcome
- a description of the inclusions, exclusions and exceptions
- the appropriate data source or the information system **business rules** to inform data extraction, if relevant.

Managing and updating the NICE menu

NICE review and **maintain all indicators** on the menu ensuring that all indicators are in line with the latest guidance. NICE are broadening the range of indicators on the menu so they can be used to help improve the quality of new models of care in the health system.

NICE welcome feedback on the indicators – indicators@nice.org.uk

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[1] Indicators being tested for inclusion in the QOF are piloted in a cross section of GP practices across the UK for 6 months

NICE indicator menu: August 2016

The NICE indicator menu by clinical area

The NICE indicator menu includes general practice and CCG indicators by clinical area. They are presented in this document in 2 separate sections, with general practice indicators in section 1 and CCG indicators in section 2. If an indicator is currently in a national framework this is noted.

Section 1 – General practice indicators

Angina and coronary heart disease

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status[2]
NM08	For patients with newly diagnosed angina (diagnosed after 1 April 2011), the percentage who are referred for specialist assessment	NICE guideline CG95: rec 1.3.1.1	Stable angina, QS21: statement 1	NICE menu
NM68	The percentage of patients aged 79 or under with coronary heart disease in whom the last blood pressure reading (measured in the last 12 months) is 140/90 mmHg or less	NICE guideline CG127: rec 1.5.5		NICE menu
NM86	The percentage of patients with coronary heart disease in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less	NICE guideline CG127: rec 1.5.6		In 2016/17 QOF
NM87	The percentage of patients with coronary heart disease who have had influenza immunisation in the preceding 1 August to 31 March	NICE guideline CG108: rec 1.2.1.5		In 2016/17 QOF

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[2] Current status refers to whether an indicator is currently used in a national indicator framework. Where they are not they are noted as being on the NICE menu.

NM88	The percentage of patients with coronary heart disease with a record in the preceding 12 months that aspirin, an alternative anti-platelet therapy, or an anti-coagulant is being taken	NICE guideline CG172: rec 1.3.12, 1.3.14 NICE guideline CG126: rec 1.3.5, 1.4.1 NICE guideline CG94: rec 1.3.1, 1.3.3		In 2016/17 QOF
NM118	The percentage of patients with coronary heart disease whose last measured total cholesterol (measured in the preceding 12 months) is 5 mmol/l or less	SIGN guideline 97 rec 9.7		NICE menu
NM122	The percentage of patients with coronary heart disease, stroke or transient ischemic attack, diabetes and/or chronic obstructive pulmonary disease who have influenza immunisation in the preceding 1 August and 31 March	Clinical Knowledge Summaries: Immunizations – seasonal influenza		NICE menu

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Asthma[3]

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM23	The percentage of patients with asthma, on the register, who have had an asthma review in the preceding 12 months that includes an assessment of asthma control using the 3 RCP questions	SIGN guideline 141	Asthma QS25: statement 5, 6	In 2016/17 QOF
NM101	The percentage of patients aged 8 or over with asthma (diagnosed on or after 1 April 2006), on the register, with measures of variability or reversibility recorded between 3 months before or any time after diagnosis	SIGN guideline 141	Asthma QS25: statement 1	In 2016/17 QOF
NM102	The percentage of patients with asthma aged 14 or over and who have not attained the age of 20, on the register, in whom there is a record of smoking status in the preceding 12 months	SIGN guideline 141	Smoking: helping people to stop QS43: statement 1	In 2016/17 QOF

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[3] NICE is developing new guidance on the diagnosis and management of asthma, which may lead to changes for the asthma indicators

NICE indicator menu: August 2016

Atrial fibrillation

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM81	The percentage of patients with atrial fibrillation in whom stroke risk has been assessed using the CHA_2DS_2-VASc score risk stratification scoring system in the preceding 12 months (excluding those patients with a previous $CHADS_2$ or CHA_2DS_2-VASc score of 2 or more)	NICE guideline CG180: rec 1.4.1		In 2016/17 QOF
NM82	In those patients with atrial fibrillation with a record of a CHA_2DS_2-VASc score of 2 or more, the percentage of patients who are currently treated with anticoagulation drug therapy.	NICE guideline CG180: rec 1.5.3	Atrial fibrillation QS93: statement 1	In 2016/17 QOF

Bipolar, schizophrenia and other psychoses

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM15	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of alcohol consumption in the preceding 15 months	NICE guideline CG178: rec 1.3.3.1 NICE guideline CG185: rec 1.2.9		In 2016/17 QOF
NM16	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of BMI in the preceding 15 months	NICE guideline CG178: rec 1.1.3.6,1.3.6.1, 1.5.3.2, 1.5.3.3 NICE guideline CG185: rec 1.2.12	Psychosis and schizophrenia in adults QS80: statement 6	NICE menu
NM17	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of blood pressure in the preceding 15 months	NICE guideline CG178: rec 1.1.3.6,1.3.6.1, 1.5.3.2, 1.5.3.3 NICE guideline CG185: rec 1.2.12	Psychosis and schizophrenia in adults QS80: statement 6	In 2016/17 QOF
NM20	The percentage of women aged 25 or over and who have not attained the age of 65 with schizophrenia, bipolar affective disorder and other psychoses whose notes record that a cervical screening test has been performed in the preceding 5 years.	Not based on a specific NICE guideline		In 2016/17 QOF
NM21	The percentage of patients on lithium therapy with a record of serum creatinine and TSH in the preceding 9 months	NICE guideline CG185: rec 1.10.21, 1.10.22		In 2016/17 QOF

NM22	The percentage of patients on lithium therapy with a record of lithium levels in the therapeutic range within the previous 4 months	NICE guideline CG185: rec 1.10.20, 1.10.21, 1.10.22	Bipolar disorder in adults QS95: statement 5	In 2016/17 QOF
NM130	The percentage of patients aged 18 years and over with schizophrenia, bipolar affective disorder and other psychoses who have a record of blood glucose or HbA1c in the preceding 12 months	NICE guideline CG178: rec 1.1.3.6,1.3.6.1, 1.5.3.2, 1.5.3.3 NICE guideline CG185: rec 1.10.29	Psychosis and schizophrenia in adults QS80: statement 6	NICE menu
NM78	The percentage of women with schizophrenia, bipolar affective disorder or other psychoses under the age of 45 years who have been given information and advice about pregnancy, conception or contraception tailored to their pregnancy and contraceptive intentions recorded in the preceding 12 months	NICE guideline 192 rec 1.2.1		NICE menu
NM108	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a comprehensive care plan documented in the record, in the preceding 12 months, agreed between individuals, their family and/or carers as appropriate	NICE guideline CG178: rec 1.3.3.4, 1.5.3.6 NICE guideline CG185: rec 1.2.4, 1.3.4, 1.9.4	Bipolar disorder in adults QS80: statements 2, 3	In 2016/17 QOF
NM120	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses aged 25-84 (excluding those with pre-existing CHD, diabetes, stroke and/or TIA) who have had a CVD risk assessment performed in the preceding 12 months (using an assessment tool agreed with NHS England)	NICE guideline CG178: rec 1.1.3.1, 1.1.3.6, 1.3.3.4, 1.3.6.5. NICE guideline CG185: rec 1.2.11	Psychosis and schizophrenia in adults QS80: statement 6	NICE menu

| NM129 | The percentage of patients aged 18 and over with schizophrenia, bipolar affective disorder and other psychoses who have a record of total cholesterol: hdl ratio in the preceding 12 months | NICE guideline CG178: rec 1.5.3.2, 1.5.3.3, 1.3.6.1

NICE guideline CG185: rec 1.10.29 | Psychosis and schizophrenia in adults QS80:
statement 6 | NICE menu |

Cancer

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM62	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	Review based indicator not based on specific guidance		In 2016/17 QOF

Chronic kidney disease

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM83	The contractor establishes and maintains a register of patients aged 18 years or over with CKD with classification of categories G3a to G5 (previously stage 3 to 5)	NICE guideline CG182: rec 1.2.1		In 2016/17 QOF
NM84	The percentage of patients on the CKD register who have hypertension and proteinuria and who are currently being treated with renin-angiotensin system antagonists	NICE guideline CG182: rec 1.6.3		NICE menu
NM109	The percentage of patients on the CKD register whose notes have a record of a urine albumin:creatinine ratio (or protein:creatinine ratio) test in the preceding 12 months	NICE guideline CG182: rec 1.1.18, 1.3.2	Chronic kidney disease in adults QS5: statement 6	NICE menu
NM117	The percentage of patients on the CKD register in whom the last blood pressure reading (measured in the preceding 12 months) is 140/90 mmHg or less	NICE guideline CG182: rec 1.6.1, 1.6.2	Chronic kidney disease in adults QS5: statement 5	NICE menu

Chronic obstructive pulmonary disease

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM47	The percentage of patients with COPD and Medical Research Council (MRC) Dyspnoea Scale ≥3 at any time in the preceding 15 months, with a subsequent record of an offer of referral to a pulmonary rehabilitation programme	NICE guideline CG101: rec 1.2.8.2	COPD in adults QS10: statement 4	NICE menu
NM63	The percentage of patients with COPD and Medical Research Council dyspnoea grade ≥3 at any time in the preceding 12 months, with a record of oxygen saturation value within the preceding 12 months	NICE guideline CG101: rec 1.2.5.4		In 2016/17 QOF
NM103	The percentage of patients with COPD (diagnosed on or after 1 April 2011) in whom the diagnosis has been confirmed by post bronchodilator spirometry between 3 months before and 12 months after entering on to the register	NICE guideline CG101: rec 1.1.2.1	COPD in adults QS10: statement 1	In 2016/17 QOF
NM104	The percentage of patients with COPD who have had a review, undertaken by a healthcare professional, including an assessment of breathlessness using the Medical Research Council dyspnoea scale in the preceding 12 months	NICE guideline CG101: rec 1.2.14.2		In 2016/17 QOF
NM105	The percentage of patients with COPD with a record of FEV1 in the preceding 12 months	NICE guideline CG101: rec 1.2.14.2		In 2016/17 QOF
NM106	The percentage of patients with COPD who have had influenza immunisation in the preceding 1 August to 31 March	NICE guideline CG101: rec 1.2.9.1		In 2016/17 QOF

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM122	The percentage of patients with coronary heart disease, stroke or transient ischemic attack, diabetes and/or chronic obstructive pulmonary disease who have influenza immunisation in the preceding 1 August and 31 March	Clinical Knowledge Summaries: Immunizations – seasonal influenza		NICE menu

Contraception

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM114	The percentage of women, on the register, prescribed an oral or patch contraceptive method in the preceding 12 months who have also received information from the contractor about long acting reversible methods of contraception in the preceding 12 months	NICE guideline CG30: rec 1.1.1.1 NICE guidance PH51: rec 3		NICE menu
NM115	The percentage of women, on the register, prescribed emergency hormonal contraception 1 or more times in the preceding 12 months by the contractor who have received information from the contractor about long acting reversible methods of contraception at the time of or within 1 month of the prescription	NICE guideline CG30: rec 1.1.1.1 FSRH guidance Emergency contraception: section 11		In 2016/17 QOF

NICE indicator menu: August 2016

Dementia

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM09	The percentage of patients with a new diagnosis of dementia recorded in the preceding 1 April to 31 March with a record of FBC, calcium, glucose, renal and liver function, thyroid function tests, serum vitamin B12 and folate levels recorded between 6 months before or after entering on to the register	NICE guideline CG42: rec 1.4.2.1		In 2016/17 QOF
NM64	The percentage of patients with dementia with the contact details of a named carer on their record	NICE guideline CG42: rec 1.11.1.1		NICE menu
NM65	The percentage of patients with dementia (diagnosed on or after 1 April 2014) who have a record of attendance at a memory assessment service up to 12 months before entering on to the register	NICE guideline CG42: rec 1.4.5.1	Dementia: support in health and social care QS1: statement 2	NICE menu
NM72	The percentage of patients with dementia (diagnosed on or after 1 April 2014) with a record of FBC, calcium, glucose, renal and liver function, thyroid function tests, serum vitamin B12 and folate levels recorded up to 12 months before entering on to the register	NICE guideline CG42: rec 1.4.2.1		NICE menu
NM107	The percentage of patients diagnosed with dementia whose care plan has been reviewed in a face-to-face review in the preceding 12 months	NICE guideline CG42: rec 1.1.7.3	Dementia: support in health and social care QS1: statement 4	In 2016/17 QOF In 2016/17 CCG IAF

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Depression and anxiety

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM10	In those patients with a new diagnosis of depression, recorded between the preceding 1 April to 31 March, the percentage of patients who have had an assessment of severity at the time of diagnosis using an assessment tool validated for use in primary care	NICE guideline CG90: rec 1.5.2.6	Depression in adults QS8: statement 1	NICE menu
NM11	In those patients with a new diagnosis of depression and assessment of severity recorded between the preceding 1 April to 31 March, the percentage of patients who have had a further assessment of severity 2–12 weeks (inclusive) after the initial recording of the assessment of severity. Both assessments should be completed using an assessment tool validated for use in primary care	NICE guideline CG90: rec 1.5.2.6	Depression in adults QS8: statement 11	NICE menu
NM49	The percentage of patients with a new diagnosis of depression in the preceding 1 April to 31 March who have had a bio-psychosocial assessment by the point of diagnosis	NICE guideline CG90: rec 1.1.4.1, 1.1.4.2		NICE menu
NM50	The percentage of patients with a new diagnosis of depression in the preceding 1 April to 31 March who have been reviewed within 10-35 days of the date of diagnosis	NICE guideline CG90: rec 1.4.1.3, 1.5.2.6, 1.5.2.7	Depression in adults QS8: statement 11	In 2016/17 QOF
NM123	The percentage of patients with a new diagnosis of depression and/or anxiety disorder in the preceding 1 April to 31 March, whose notes record an offer of referral for psychological treatment within 3 months of the date of diagnosis	NICE guideline CG90: rec 1.4.2.1– 1.4.3.2 NICE guideline CG159: rec 1.3.2, 1.3.4, 1.3.7	Depression in adults QS8: statements 4, 6, 7, 8, 13 Anxiety disorders QS53: statement 2	NICE menu

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Diabetes

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM01	The percentage of patients with diabetes, on the register, in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less	NICE guideline NG17: rec 1.13.8 NICE guideline NG28: rec 1.4.3	Diabetes in adults QS6: statement 5	In 2016/17 QOF
NM02	The percentage of patients with diabetes, on the register, in whom the last blood pressure reading (measured in the preceding 12 months) is 140/80 mmHg or less	NICE guideline NG17: rec 1.13.8 NICE guideline NG28: rec 1.4.3	Diabetes in adults QS6: statement 5	In 2016/17 QOF In 2016/17 CCG IAF
NM131	The percentage of patients with diabetes with a record of testing of foot sensation using a 10g monofilament within the preceding 12 months	NICE guideline NG19: rec 1.3.3,1.3.4	Diabetes in adults QS6: statement 10	NICE menu
NM13	The percentage of patients with diabetes with a record of a foot examination and risk classification: 1) low risk (normal sensation, palpable pulses), 2) increased risk (neuropathy or absent pulses), 3) high risk (neuropathy or absent pulses plus deformity or skin changes or previous ulcer) or 4) ulcerated foot within the preceding 15 months	NICE guideline NG19: rec 1.3.4, 1.3.6	Diabetes in adults QS6: statement 10	In 2016/17 QOF
NM27	The percentage of patients newly diagnosed with diabetes, on the register, in the preceding 1 April to 31 March who have a record of being referred to a structured education programme within 9 months after entry on to the diabetes register	NICE guideline NG17: rec 1.3.1 NICE guideline NG28: rec 1.2.1,1.2.2		In 2016/17 QOF In 2016/17 CCG IAF

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM28	The percentage of patients with diabetes who have a record of a dietary review by a suitably competent professional in the preceding 15 months	NICE guideline NG17: rec 1.4.6 NICE guideline NG28: rec 1.3.1	Diabetes in adults QS6: statement 2	NICE menu
NM41	The contractor establishes and maintains a register of all patients aged 17 or over with diabetes mellitus, which specifies the type of diabetes where a diagnosis has been confirmed	Register indicator not based on a specific recommendation		In 2016/17 QOF
NM51	The percentage of male patients with diabetes with a record of being asked about erectile dysfunction in the preceding 15 months	NICE guideline NG17: rec 1.15.37 NICE guideline NG28: rec 1.7.13		NICE menu
NM52	The percentage of male patients with diabetes who have a record of erectile dysfunction with a record of advice and assessment of contributory factors and treatment options in the preceding 15 months	NICE guideline NG17: rec 1.15.37-1.15.39 NICE guideline NG28: rec 1.7.13-1.7.16		NICE menu
NM59	The percentage of patients with diabetes who have a record of an albumin:creatinine ratio (ACR) test in the preceding 15 months	NICE guideline NG17: rec 1.1.6 NICE guideline NG28: rec 1.7.12 NICE guideline CG182 rec 1.1.18		NICE menu

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM70	The percentage of women with diabetes aged 17 or over and who have not attained the age of 45 who have a record of being given information and advice about pregnancy or conception or contraception tailored to their pregnancy and contraceptive intentions recorded in the preceding 12 months	NICE guideline NG3: rec 1.1.3	Diabetes in adults QS6: statement 7	NICE menu
NM74	The percentage of patients with diabetes who have had the following care processes performed in the preceding 12 months: • BMI measurement • BP measurement • HbA1c measurement • Cholesterol measurement • Record of smoking status • Foot examination • Albumin: creatinine ratio • Serum creatinine measurement	NICE guideline NG17: rec 1.13.2, 1.15.6 NICE guideline NG28: rec 1..4.1, 1.6.1, 1.5.2, 1.7.11,1.3.4 NICE guideline NG19: rec 1.3.3	Diabetes in adults QS6: statements 4, 5, 10	NICE menu
NM95	The percentage of patients with diabetes, on the register, with a diagnosis of nephropathy (clinical proteinuria) or micro-albuminuria who are currently treated with an ACE-I (or ARBs)	NICE guideline NG17: rec 1.15.10, 1.15.11 NICE guideline NG28: rec 1.4.7, 1.4.8, 1.4.10	Diabetes in adults QS6: statement 5	In 2016/17 QOF

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM98	The percentage of patients with diabetes, on the register, who have a record of retinal screening in the preceding 12 months	NICE guideline NG28: rec 1.7.17, 1.7.18 NICE guideline NG17: rec 1.15.1, 1.15.2		NICE menu
NM139	The percentage of patients with diabetes, on the register, who have had influenza immunisation in the preceding 1 August to 31 March	Clinical Knowledge Summaries: Influenza – seasonal (treatment of influenza)		In 2016/17 QOF
NM132	The percentage of patients aged 25–84, years with a new diagnosis of hypertension or type 2 diabetes, recorded between the preceding 1 April to 31 March (excluding those with pre-existing CHD, stroke and/or TIA) who have had a consultation for cardiovascular risk assessment using the QRISK2 risk assessment tool between 3 months before or 3 months after date of diagnosis	NICE guideline CG181: rec 1.1.8, 1.1.10	Cardiovascular risk assessment and lipid modification QS100: statement 1	NICE menu
NM133	In those patients with a new diagnosis of hypertension or type 2 diabetes aged 25-84 years, recorded between the preceding 1 April to 31 March (excluding those with pre-existing CHD, stroke and/or TIA), who have a recorded CVD risk assessment score (using the QRISK2 assessment tool) of >20% in the preceding 12 months: the percentage who are currently treated with statins (unless there is a contraindication)	NICE guideline CG181: rec 1.3.12, 1.3.14	Cardiovascular risk assessment and lipid modification QS100: statement 4	NICE menu
NM122	The percentage of patients with coronary heart disease, stroke or transient ischemic attack, diabetes and/or chronic obstructive pulmonary disease who have influenza immunisation in the preceding 1 August and 31 March	Clinical Knowledge Summaries: Immunizations – seasonal influenza		NICE menu

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NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM142	Of the patients with type 1 diabetes who meet the following criteria: aged over 40 years and who have either had diabetes for more than 10 years, or who have established nephropathy or other CVD risk factors; the percentage currently treated with a statin.	Cardiovascular disease: risk assessment and reduction, including lipid modification (2014) rec 1.3.24		New indicator for 2016
NM97	The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 75 mmol/mol or less in the preceding 12 months	NICE guideline NG17: rec 1.6.6,1.6.9

NICE guideline NG28: rec 1.6.8,1.6.9 | Diabetes in adults QS6: statement 4 | In 2016/17 QOF |
| 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 | NICE guideline NG17: rec 1.6.6,1.6.9

NICE guideline NG28: rec 1.6.8,1.6.9 | Diabetes in adults QS6: statement 4 | In 2016/17 QOF |
| NM141 | The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 58 mmol/mol or less in the preceding 12 months. | NICE guideline NG17: rec 1.6.6,1.6.9

NICE guideline NG28: rec 1.6.8,1.6.9 | Diabetes in adults QS6: statement 4 | Amended indicator 2016 |

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End of life care

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM111	The contractor has regular (at least 3 monthly) multi-disciplinary case review meetings where all patients on the palliative care register are discussed	Department of Health quality markers and measures for end of life care NHS National End of Life Care Programme draft Spiritual support and bereavement care quality markers and measures for end of life care: spiritual support 2	End of life care in adults QS13: statement 8	In 2016/17 QOF

Epilepsy

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM03	The percentage of women under the age of 55 years who are taking antiepileptic drugs who have a record of information and counselling about contraception, conception and pregnancy in the preceding 15 months	NICE guideline CG137: rec 1.15.1.1, 1.15.1.2		NICE menu
NM71	The percentage of women with epilepsy aged 18 or over and who have not attained the age of 45 who are taking antiepileptic drugs who have a record of being given information and advice about pregnancy or conception or contraception tailored to their pregnancy and contraceptive intentions recorded in the preceding 12 months	NICE guideline CG137: rec 1.15.1.1, 1.15.1.2		NICE menu
NM110	The percentage of patients aged 18 or over on drug treatment for epilepsy who have been seizure free for the last 12 months recorded in the preceding 12 months	NICE guideline CG137: rec 1.20.9		NICE menu

Heart failure

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM48	The percentage of patients with heart failure diagnosed within the preceding 15 months with a subsequent record of an offer of referral for an exercise-based rehabilitation programme within the preceding 15 months	NICE guideline CG108: rec 1.3.1.1	Chronic heart failure in adults QS9: statement 6	NICE menu
NM89	In those patients with a current diagnosis of heart failure due to left ventricular systolic dysfunction, the percentage of patients who are currently treated with an ACE-I or ARB	NICE guideline CG108: rec 1.2.2.2, 1.2.2.14	Chronic heart failure in adults QS9: statement 3	In 2016/17 QOF
NM90	In those patients with a current diagnosis of heart failure due to left ventricular systolic dysfunction who are currently treated with an ACE-I or ARB, the percentage of patients who are additionally currently treated with a beta-blocker licensed for heart failure	NICE guideline CG108: rec 1.2.2.2, 1.2.2.7	Chronic heart failure in adults QS9: statement 3	In 2016/17 QOF
NM116	The percentage of patients with a diagnosis of heart failure (diagnosed on or after 1 April 2006) which has been confirmed by an echocardiogram or by specialist assessment 3 months before or 12 months after entering on to the register	NICE guideline CG108: rec 1.1.1.2, 1.1.1.3 NICE guideline CG187: rec 1.1.2, 1.2.2, 1.2.3, 1.2.4	Chronic heart failure in adults QS9: statement 1 Acute heart failure: diagnosis and management in adults QS103: statement 2 and 3	In 2016/17 QOF

Hypertension

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM36	The percentage of patients with hypertension aged 16 to 74 years in whom there is an annual assessment of physical activity, using GPPAQ, in the preceding 15 months	NICE guideline PH44: rec 1		NICE menu
NM37	The percentage of patients with hypertension aged 16 or over and who have not attained the age of 75 who score 'less than active' on GPPAQ in the preceding 12 months, who also have a record of a brief intervention in the preceding 12 months	NICE guideline PH44: rec 2		NICE menu
NM53	The percentage of patients under 80 years old with hypertension in whom the last recorded blood pressure (measured in the preceding 9 months) is 140/90 or less	NICE guideline CG127: rec 1.5.5	Hypertension in adults QS28: statement 4	NICE menu
NM54	The percentage of patients aged 80 years and over with hypertension in whom the last recorded blood pressure (measured in the preceding 9 months) is 150/90 or less	NICE guideline CG127: rec 1.5.6	Hypertension in adults QS28: statement 4	NICE menu
NM61	The percentage of patients aged 40 years and over with a blood pressure measurement recorded in the preceding 5 years	Record-based indicator so not based on a specific recommendation		In 2016/17 QOF
NM66	The percentage of patients with a new diagnosis of hypertension (diagnosed on or after 1 April 2014) which has been confirmed by ambulatory blood pressure monitoring (ABPM) or home blood pressure monitoring (HBPM) in the three months before entering on to the register	NICE guideline CG127: rec 1.2.3, rec 1.2.4	Hypertension in adults QS28: statement 1	NICE menu

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM75	The percentage of patients with a new diagnosis of hypertension in the preceding 1st April to 31st March who have a record of urinary albumin: creatinine ratio test in the 3 months before or after the date of entry to the hypertension register	NICE guideline CG127: rec 1.2.6, 1.3.3	Hypertension in adults QS28: statement 2	NICE menu
NM76	The percentage of patients with a new diagnosis of hypertension in the preceding 1st April to 31st March who have a record of a test for haematuria in the 3 months before or after the date of entry to the hypertension register	NICE guideline CG127: rec 1.2.6, 1.3.3	Hypertension in adults QS28: statement 2	NICE menu
NM77	The percentage of patients with a new diagnosis of hypertension in the preceding 1st April to 31st March who have a record of a 12 lead ECG performed in the 3 months before or after the date of entry to the hypertension register	NICE guideline CG127: rec 1.2.6, 1.3.3	Hypertension in adults QS28: statement 2	NICE menu
NM91	The percentage of patients with hypertension in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less	NICE guideline CG127: rec 1.5.6	Hypertension in adults QS28: statement 4	In 2016/17 QOF
NM112	The percentage of patients diagnosed with hypertension (diagnosed on or after 1 April 2009) who are given lifestyle advice in the preceding 12 months for: smoking cessation, safe alcohol consumption and healthy diet	NICE guideline CG127: rec 1.4.1 NICE guideline CG181: section 1.2	Hypertension in adults QS28: statement 5	NICE menu
NM132	The percentage of patients aged 25–84, years with a new diagnosis of hypertension or type 2 diabetes, recorded between the preceding 1 April to 31 March (excluding those with pre-existing CHD, stroke and/or TIA) who have had a consultation for cardiovascular risk assessment using the QRISK2 risk assessment tool between 3 months before or 3 months after date of diagnosis	NICE guideline CG181: rec 1.1.8, 1.1.10	Cardiovascular risk assessment and lipid modification QS100: statement 1	NICE menu

NICE indicator menu: August 2016

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM133	In those patients with a new diagnosis of hypertension or type 2 diabetes aged 25-84 years, recorded between the preceding 1 April to 31 March (excluding those with pre-existing CHD, stroke and/or TIA), who have a recorded CVD risk assessment score (using the QRISK2 assessment tool) of >20% in the preceding 12 months: the percentage who are currently treated with statins (unless there is a contraindication)	NICE guideline CG181: rec 1.3.12, 1.3.14		NICE menu

Hypothyroidism

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM99	The contractor establishes and maintains a register of patients with hypothyroidism who are currently treated with levothyroxine	NICE Clinical Knowledge Summary – Hypothyroidism		NICE menu
NM100	The percentage of patients with hypothyroidism, on the register, with thyroid function tests recorded in the preceding 12 months	NICE Clinical Knowledge Summary – Hypothyroidism		NICE menu

Learning disabilities

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM04	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)			NICE menu
NM73	The contractor establishes and maintains a register of patients with learning disabilities	Register indicator not based on a specific recommendation		In 2016/17 QOF

NICE indicator menu: August 2016

Myocardial infarction

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM79	The percentage of patients who had a myocardial infarction in the preceding 1 April to 31 March and who are currently being treated with ACE-I (or ARB if ACE-I intolerant), dual anti-platelet therapy, beta-blocker and a statin	NICE guideline CG172: rec 1.3.1, 1.3.5, 1.3.8, 1.3.12, 1.3.32, 1.3.33		NICE menu
NM80	The percentage of patients with a history of myocardial infarction (more than 12 months ago) who are currently being treated with an ACE-I (or ARB if ACE-I intolerant), aspirin (or anticoagulant drug therapy) and a statin and a beta-blocker for those patients with left ventricular systolic dysfunction	NICE guideline CG172: rec 1.3.10, 1.3.11, 1.3.13, 1.3.32, 1.3.33, 1.3.34, 1.3.35	Acute heart failure: diagnosis and management in adults QS103: statement 4	NICE menu

Obesity and weight management

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM121	The percentage of patients with coronary heart disease, stroke or TIA, diabetes, hypertension, peripheral arterial disease, heart failure, COPD, asthma and/ or rheumatoid arthritis who have had a BMI recorded in the preceding 12 months	NICE guideline CG189: rec 1.2.1 NICE guideline CG147 rec 1.2.1, NICE guideline CG101 rec 1.2.12.6		NICE menu
NM128	The contractor establishes and maintains a register of patients aged 18 or over with a BMI ≥25 in the preceding 12 months	NICE guideline CG189: rec 1.2.2, 1.2.7.		NICE menu
NM143	The percentage of patients aged 18 or over (on or after 1 April 2017) who have had a record of a BMI being calculated in the preceding 5 years (and after their 18th birthday)	Obesity NICE Clinical guideline 189 (2014) Recommendations 1.2.1, 1.2.2		New indicator for 2016

NICE indicator menu: August 2016

Osteoporosis

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM29	The contractor establishes and maintains a register of patients: 1. Aged 50 or over and who have not attained the age of 75 with a record of a fragility fracture on or after 1 April 2012 and a diagnosis of osteoporosis confirmed on DXA scan, and 2. Aged 75 or over with a record of a fragility fracture on or after 1 April 2014 and a diagnosis of osteoporosis	Register indicator so not based on a specific recommendation		In 2016/17 QOF
NM30	The percentage of patients aged 50 or over and who have not attained the age of 75, with a record of a fragility fracture on or after 1 April 2012, in whom osteoporosis is confirmed on DXA scan, who are currently treated with an appropriate bone-sparing agent	NICE technology appraisal guidance 161: rec 1.1		In 2016/17 QOF
NM31	The percentage of patients aged 75 or over with a fragility fracture on or after 1 April 2012, who are currently treated with an appropriate bone-sparing agent	NICE technology appraisal guidance 161: rec 1.1		In 2016/17 QOF

Peripheral arterial disease

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM32	The contractor establishes and maintains a register of patients with peripheral arterial disease	Register indicator not based on specific guideline recommendation		In 2016/17 QOF
NM33	The percentage of patients with peripheral arterial disease with a record in the preceding 12 months that aspirin or an alternative anti-platelet is being taken	SIGN guideline 89: rec 2.8 NICE technology appraisal guidance 210: rec 1.1	Peripheral arterial disease QS52: statement 2	In 2016/17 QOF
NM34	The percentage of patients with peripheral arterial disease in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less	NICE guideline CG127: rec 1.5.6	Peripheral arterial disease QS52: statement 2	In 2016/17 QOF
NM35	The percentage of patients with peripheral arterial disease in whom the last measured total cholesterol (measured in preceding 15 months) is 5.0mmol/l or less	SIGN guideline 97 rec 9.7	Peripheral arterial disease QS52: statement 2	NICE menu
NM67	The percentage of patients aged 79 or under with peripheral arterial disease in whom the last blood pressure reading (measured in the last 12 months) is 140/90 mmHg or less	NICE guideline CG127: rec 1.5.5	Peripheral arterial disease QS52: statement 2	NICE menu

Rheumatoid arthritis

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM55	The practice can produce a register of all patients aged 16 years and over with rheumatoid arthritis	Register indicator so not based on a specific recommendation		In 2016/17 QOF
NM56	The percentage of patients with rheumatoid arthritis aged 30-84 years who have had a cardiovascular risk assessment using a CVD risk assessment tool adjusted for RA in the preceding 15 months	NICE guideline CG79: rec 1.5.1.4	Rheumatoid arthritis in over 16s QS33: statement 7	NICE menu
NM57	The percentage of patients aged 50-90 years with rheumatoid arthritis who have had an assessment of fracture risk using a risk assessment tool adjusted for RA in the preceding 27 months	NICE guideline CG79: rec 1.5.1.4 NICE guideline CG146: rec 1.1, 1.2	Rheumatoid arthritis in over 16s QS33: statement 7	NICE menu
NM58	The percentage of patients with rheumatoid arthritis, on the register, who have had a face-to-face review in the preceding 12 months	NICE guideline CG79: rec 1.5.1.4	Rheumatoid arthritis in over 16s QS33: statement 7	In 2016/17 QOF

NICE indicator menu: August 2016

Smoking

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM38	The percentage of patients with any or any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses who are recorded as current smokers who have a record of an offer of support and treatment within the preceding 12 months	NICE guidelines: CG182: rec 1.3.7, 1.4.6, 1.4.10 CG101: rec 1.2.1.1, 1.2.1.2, 1.2.1.3 CG127: rec 1.4.8, CG147: rec 1.2.1 CG172: rec 1.2.12, 1.2.13 CG178: 1.1.3.3, 1.1.3.4, 1.1.3.5 CG108: rec 1.2.11, NG17: rec 1.1.3.5, NG28: rec 1.3.10, SIGN guideline 141: rec 5.2.3B, 10.8.1.	Smoking: supporting people to stop QS43: statements 1, 2, 3, 4	In 2016/17 QOF

NM39	The percentage of patients with any or any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses who smoke whose notes contain a record of an offer of support and treatment within the preceding 15 months	NICE guidelines: CG182: rec 1.3.7, 1.4.6, 1.4.10 CG101: rec 1.2.1.1, 1.2.1.2, 1.2.1.3 CG127: rec 1.4.8, CG147: rec 1.2.1 CG172: rec 1.2.12, 1.2.13 CG178: 1.1.3.3, 1.1.3.4, 1.1.3.5 CG108: rec 1.2.11, NG17: rec 1.1.3.5, NG28: rec 1.3.10, SIGN guideline 141: rec 5.2.3B, 10.8.1. SIGN guideline 116: rec 3.4.1B	Smoking: supporting people to stop QS43: statements 1, 2, 3, 4	In 2016/17 QOF
NM40	The percentage of patients aged 15 years and over who are recorded as current smokers who have a record of an offer of support and treatment within the preceding 24 months	NICE guideline PH1: rec 1, 2, 3, 4, 9	Smoking: supporting people to stop QS43: statements 1, 2, 3, 4	In 2016/17 QOF
NM113	The contractor supports patients who smoke in stopping smoking by a strategy which includes providing literature and offering appropriate therapy	NICE guideline PH1: rec 2, 3, 4	Smoking: supporting people to stop QS43: statements 2, 3, 4	NICE menu
NM124	The percentage of patients with schizophrenia, bipolar affective disorder or other psychoses whose notes record smoking status in the preceding 12 months	NICE guideline CG178: rec 1.1.3.3, 1.1.3.4 NICE guideline PH45: rec 3	Psychosis and schizophrenia in adults QS80: statement 7	NICE menu

NICE indicator menu: August 2016

NM125	The percentage of patients with schizophrenia, bipolar affective disorder or other psychoses who are recorded as current smokers who have a record of an offer of support and treatment within the preceding 12 months	NICE guideline CG178: rec 1.1.3.3, 1.1.3.4 NICE guideline PH45: rec 3	Smoking: supporting people to stop QS43: statements 1, 2, 3, 4 Psychosis and schizophrenia in adults QS80: statement 7	NICE menu
NM126	The percentage of patients with any or any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, whose notes record smoking status in the preceding 12 months	NICE guidelines: CG182, CG101, CG127, CG147, CG172, CG108, NG17, NG28, SIGN guideline 141	Smoking: supporting people to stop QS43: statements 1	NICE menu
NM127	The percentage of patients with any or any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma who are recorded as current smokers who have a record of an offer of support and treatment within the preceding 12 months	NICE guidelines: CG182, CG101, CG127, CG147, CG172, CG108, NG17, NG28, SIGN guideline 141	Smoking: supporting people to stop QS43: statements 1, 2, 3	NICE menu

Stroke and ischaemic attack

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
NM60	The percentage of patients with a stroke shown to be non-haemorrhagic, or a history of TIA whose last measured total cholesterol (measured in the preceding 15 months) is 5mmol/l or less	SIGN guideline 97: rec 9.7		NICE menu
NM69	The percentage of patients aged 79 or under with stroke or TIA in whom the last blood pressure reading (measured in the preceding 12 months) is 140/90 mmHg or less	NICE guideline CG127: rec 1.5.5		NICE menu
NM92	The percentage of patients with a stroke or TIA (diagnosed on or after 1 April 2014) who have a record of a referral for further investigation between 3 months before or 1 month after the date of the latest recorded stroke or TIA	NICE guideline CG68: rec 1.1.2.2, 1.1.2.4 RCP guidelines for stroke: rec 4.2.1A		In 2016/17 QOF
NM93	The percentage of patients with a history of stroke or TIA in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less	NICE guideline CG127: rec 1.5.6 RCP guidelines for stroke: rec 5.4.1A		In 2016/17 QOF
NM94	The percentage of patients with a stroke shown to be non-haemorrhagic, or a history of TIA, who have a record in the preceding 12 months that an anti-platelet agent, or an anti-coagulant is being taken	NICE guideline CG68: rec 1.4.2.1, 1.4.2.3, 1.4.2.4 RCP guidelines for stroke: rec 4.4.1A, 4.10.1C		In 2016/17 QOF

NICE indicator menu: August 2016

| NM140 | The percentage of patients with stroke or TIA who have had influenza immunisation in the preceding 1 August to 31 March | Clinical Knowledge Summaries: Immunizations – seasonal influenza | | In 2016/17 QOF |

NICE indicator menu: August 2016

Section 2 - CCG indicators

Anxiety disorders

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG54	Proportion of people treated by IAPT for anxiety disorders who return to full function	Overarching outcome measure	Anxiety disorders QS53 (2014)	New NICE indicator 2016

Atrial fibrillation

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG55	Proportion of patients with atrial fibrillation on anticoagulation admitted to hospital for stroke	Overarching outcome measure	Atrial fibrillation QS93 (2015)	New NICE indicator 2016
CCG56	Proportion of patients with atrial fibrillation not on anticoagulation admitted to hospital for stroke	Outcome measure (statement 1)	Atrial fibrillation QS93 (2015) statement 1	New NICE indicator 2016

NICE indicator menu: August 2016

Cancer

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG01	The proportion of invasive cases of cancer diagnosed via an emergency route	Overarching outcome measure		In 2015/16 CCG OIS[4]
CCG02	The proportion of new cases of cancer with a stage of diagnosis recorded	Overarching outcome measure		In 2016/17 CCG IAF In 2015/16 CCG OIS
CCG03	The proportion of people with cancer who have the cancer detected at stage 1 or 2	Overarching outcome measure		In 2015/16 CCG OIS
CCG04	Breast cancer mortality rates	Overarching outcome measure		In 2015/16 CCG OIS
CCG06	The proportion of lung cancer cases for which a stage at diagnosis is recorded	Overarching outcome measure		In 2015/16 CCG OIS

Chronic obstructive pulmonary disorder

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG08	The proportion of people with COPD and MRC Dyspnoea Scale 3 and above referred to a pulmonary rehabilitation programme	NICE guideline CG101: rec 1.2.8.2	COPD in adults QS10 (2016) statement 4	In 2015/16 CCG OIS

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[4] The 2016/17 CCG OIS has not yet been published

NICE indicator menu: August 2016

Dementia

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG18	Proportion of people with dementia prescribed anti-psychotic medication	NICE guideline CG42 recs 1.7.2.2, 1.7.2.3		In 2015/16 CCG OIS

Depression and anxiety

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG41	People of all ages and aged >65 who recover following talking therapies	Overarching outcome measure	Anxiety disorders QS53	In 2015/16 CCG OIS

Diabetes

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG12	The proportion of adults with a diagnosis of diabetes who have a HES recording of MI, stroke and end stage kidney disease.	Overarching outcome measure		In 2015/16 CCG OIS

CCG13	The proportion of adults with diabetes who have received all nine basic care processes performed (see guidance for the details of the process)	NICE guideline NG28 rec 1.8–1.14 NICE guideline NG17 recs 1.2.5, 1.13, 1.15	Diabetes in adults QS6: statement 8	In 2015/16 CCG OIS
CCG14	The proportion of adults with diabetes referred to a structured education programme within 12 months of diagnosis	NICE guideline NG28 rec 1.1.1 NICE guideline NG17 rec 1.3.1, 1.3.8 NICE guideline NG19 rec 1.3.13	Diabetes in adults QS6: statement 1	In 2016/17 CCG IAF In 2015/16 CCG OIS
CCG15	The proportion of adults with diabetes who have an emergency admissions for diabetic ketoacidosis.	Overarching outcome measure	Diabetes in adults QS6	In 2015/16 CCG OIS
CCG16	Proportion of adults with diabetes with a HES recording of NDA complications	Overarching outcome measure	Diabetes in adults QS6	In 2015/16 CCG OIS
CCG58	Admission rates for people with diabetes due to complications associated with diabetes	NICE guideline NG28 NICE guideline NG17		New NICE indicator 2016
CCG59	Admissions rates due to angina in people with diabetes	NICE guideline NG28 rec 1.5.2 NICE guideline NG17 rec 1.13.7		New NICE indicator 2016

NICE indicator menu: August 2016

CCG60	Admission rates due to myocardial infarction in people with diabetes	NICE guideline NG28 rec 1.5.2 NICE guideline NG17 rec 1.13.7		New NICE indicator 2016
CCG61	Admission rates due to heart failure in people with diabetes	NICE guideline NG28 rec 1.5.2 NICE guideline NG17 rec 1.13.7		New NICE indicator 2016
CCG62	Admission rates due to stroke in people with diabetes	NICE guideline NG28 rec 1.5.2 NICE guideline NG17 rec 1.13.7		New NICE indicator 2016
CCG63	Admissions rates for renal replacement therapy in people with diabetes	NICE guideline NG28 rec 1.5.2 NICE guideline NG17 rec 1.3.13		New NICE indicator 2016
CCG64	Admission rates due to diabetic ketoacidosis in people with diabetes	NICE guideline NG28 rec 1.5.2 NICE guideline NG17 rec 1.15.10 to 1.15.18		New NICE indicator 2016
CCG65	Admission rates due to lower limb amputations in people with diabetes	NICE guideline NG19		New NICE indicator 2016

CCG66	Proportion of children and young people with diabetes who receive the following individual care processes in the past 12 months: • Glycated Haemoglobin A1c (HbA1c) monitoring • Body Mass Index (BMI) • Blood pressure • Urinary Albumin • Eye screening • Foot examination • Smoking • Screening for thyroid disease • Psychological assessment	NICE guideline NG18		New NICE indicator 2016
CCG67	Proportion of children and young people with diabetes who have had their glycated haemoglobin A1c (HbA1c) monitored in the previous 12 months	NICE guideline NG18		New NICE indicator 2016
CCG68	Proportion of children and young people with diabetes who have had their Body Mass Index (BMI) recorded	NICE guideline NG18		New NICE indicator 2016
CCG69	Proportion of young people aged 12-18 years with diabetes who have had their blood pressure recorded in the previous 12 months	NICE guideline NG18		New NICE indicator 2016
CCG70	Proportion of young people aged 12-18 years with diabetes who have had their urinary albumin recorded in the previous 12 months	NICE guideline NG18		New NICE indicator 2016
CCG72	Proportion of young people aged 12-18 years with diabetes who have a record of eye screening in the previous 12 months	NICE guideline NG18		New NICE indicator 2016
CCG73	Proportion of children and young people with diabetes who have a record of a foot examination in the previous 12 months	NICE guideline NG18		New NICE indicator 2016
CCG74	Proportion of young people age 12 -18 who have had their smoking status recorded in the previous 12 months	NICE guideline NG18		New NICE indicator 2016
CCG75	Proportion of children and young people with type 1 diabetes who have been screened for thyroid disease	NICE guideline NG18		New NICE indicator 2016

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG76	Proportion of children and young people with diabetes who have received a psychological assessment in the previous 12 months.	NICE guideline NG18 recs1.2.98, 1.3.37.	Diabetes in children and young people QS125: statement 6	New NICE indicator 2016

Heart failure

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG10	The proportion of people with coronary heart disease referred for cardiac rehabilitation	NICE guideline CG108 rec 1.3.1.1	Chronic heart failure in adults QS9: statement 6	In 2015/16 CCG OIS
CCG11	All cause mortality - 12 months following admission to hospital for heart failure	Outcome measure	Chronic heart failure in adults QS9: statement 4	In 2015/16 CCG OIS

Heavy menstrual bleeding

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG77	Rates of hysterectomy	NICE guideline CG44 rec 1.7.3, 1.7.5 and 1.7.6.	Heavy menstrual bleeding QS47: statement 6	New NICE indicator 2016
CCG78	Rates of endometrial ablation	NICE guideline CG44 rec 1.6.4, 1.6.5.	Heavy menstrual bleeding QS47: statement 5	New NICE indicator 2016

NICE indicator menu: August 2016

Hip fracture

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG20	The proportion of people with hip fracture, who receive a formal hip fracture programme from admission	NICE guideline CG124: rec 1.8.1, 1.8.5, 1.8.6	Hip fracture in adults QS16: statement 1	In 2015/16 CCG OIS
CCG21	The proportion of people with hip fracture, who receive surgery on the day of, or the day after, admission	NICE guideline CG124: rec 1.2.1, 1.2.2	Hip fracture in adults QS16: statement 5	In 2015/16 CCG OIS
CCG22	The proportion of people with hip fracture, who receive a multifactorial risk assessment of future falls risk	NICE guideline 161: rec 1.1.2.1, 1.1.2.2	Hip fracture in adults QS16: statement 11 Falls in older people QS86: statement 4	In 2015/16 CCG OIS
CCG23	The proportion of people in the national hip fracture database who have received all nine care processes performed (see guidance for the details of the process)	NICE guideline 124: rec 1.8.1		In 2015/16 CCG OIS
CCG24	The rate of people admitted with a primary diagnosis of hip fracture per 100,000 NMCCG population	NICE guideline 161: rec 1.1, 1.2		In 2015/16 CCG OIS

NICE indicator menu: August 2016

Pregnancy and neonates

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG30	Proportion of women who receive antenatal assessments by 13 weeks of pregnancy	NICE guideline CG62: rec 1.1.1.1	Antenatal care QS22: statement 1	In 2015/16 CCG OIS
CCG31	Proportion of pregnant women who were smokers during pregnancy	NICE guideline PH26: rec 1	Antenatal care QS22: statement 5	NICE menu
CCG32	Proportion of pregnant women who were smokers at the time of delivery	NICE guideline PH26: rec 1	Antenatal care QS22: statement 5	In 2016/17 CCG IAF In 2015/16 CCG OIS
CCG33	Proportion of successful births where breast feeding is initiated	NICE guideline CG62: rec 1.1.1.1 NICE guideline PH11 rec 7	Postnatal care QS37 statement 5	NICE menu
CCG34	The proportion of pregnancies resulting in a neonatal or still birth	Overarching outcome measure	Antenatal care QS22 and Caesarean section QS32: Multiple pregnancy: twin and triplet pregnancies QS46	In 2016/17 CCG IAF In 2015/16 CCG OIS
CCG35	The proportion of full term births where the child has a low birth weight	Overarching outcome measure	Antenatal care QS22 and Caesarean section QS32: Maternal and child nutrition QS98	In 2015/16 CCG OIS

NICE indicator menu: August 2016

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG36	The proportion of births resulting in a neonatal unit admission	Overarching outcome measure	Antenatal care QS22 and Caesarean section QS32: Multiple pregnancy: twin and triplet pregnancies QS46	In 2015/16 CCG OIS
CCG37	The proportion of pregnant women having a planned caesarean section who have the procedure carried out at or after 39 weeks 0 days	NICE guideline CG132: rec 1.4.11	Caesarean section QS32: statement 5	In 2015/16 CCG OIS
CCG38	Rates of exclusive or partial breastfeeding at 6-8 weeks after the birth	NICE guideline CG37: rec 1.3.3 NICE guideline PH11 rec 7	Postnatal care QS37: statement 5	In 2015/16 CCG OIS

Smoking

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG44	Rates of smoking in people with severe mental illness	NICE guideline PH48: rec 2		In 2015/16 CCG OIS

Stroke and ischaemic attack

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG45	Mortality within 30 days of hospital admission for stroke	Overarching outcome measure.	Stroke in adults QS2:	In 2015/16 CCG OIS
CCG46	Proportion of people who receive psychological support for mood, behaviour or cognitive disturbance 6 months after an admission to hospital with a stroke	NICE guideline CG162: rec 1.1.3	Stroke in adults QS2: statement 3	In 2015/16 CCG OIS
CCG47	Proportion of people with stroke who receive joint health and social care plans on discharge from hospital	NICE guideline CG162: rec 1.11.15	Stroke in adults QS2: statement 7	In 2015/16 CCG OIS
CCG48	Proportion of people who had a stroke who are reviewed within 6 months of being discharged from hospital	NICE guideline CG162: rec 1.11.15	Stroke in adults QS2: statement 7	In 2015/16 CCG OIS
CCG49	The proportion of people who had a stroke that are supported by a stroke skilled early supported discharge (ESD) team	NICE guideline CG162: rec 1.1.8	Stroke in adults QS2: statement 4	In 2015/16 CCG OIS
CCG50	Proportion of people who have had an acute stroke who receive thrombolysis for stroke (where clinically indicated).	NICE guideline CG68: rec. 1.4.1.1		In 2015/16 CCG OIS
CCG51	Proportion of people who have had or are having a stroke who are admitted to an acute stroke unit within 4 hours of arrival to hospital	NICE guideline CG68: rec 1.3.1.1	Stroke in adults QS2: statement 1	In 2015/16 CCG OIS
CCG52	Proportion of patients who have had an acute stroke who spend 90% or more of their stay on a stroke unit	NICE guideline CG68: rec 1.3.1.1	Stroke in adults QS2: statement 1	In 2015/16 CCG OIS

NICE indicator menu: August 2016

NICE menu ID	Indicator			NICE menu
CCG53	Proportion of people who have had an acute stroke whose swallowing is screened by a specially trained healthcare professional within 4 hours of admission to hospital			NICE menu

Surgical site infection

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG79	Readmission rates for surgical site infections within 30 days of discharge from surgery	Outcome measure	Surgical site infection QS49: statement 7	New NICE indicator 2016

Venous thromboembolism

NICE menu ID	Indicator	Evidence base	NICE quality standard	Current status
CCG80	Mortality rates directly associated with VTE	Overarching outcome measure.	Venous thromboembolism in adults: diagnosis and management QS29	New NICE indicator 2016

NICE indicator menu: August 2016