



Diabetes: IFCC-HbA1c 64mmol/ mol or less

NICE indicator

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www.nice.org.uk/indicators/ind135

Indicator

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.

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

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. 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 \(2016, updated 2022\)](#), recommendations 1.6.6 and 1.6.7
- [Type 2 diabetes in adults: management. NICE guideline NG28 \(2015, updated 2022\)](#), recommendations 1.6.7 to 1.6.10
- [Management of diabetes. SIGN guideline 116 \(2010\)](#)

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: $(\text{Numerator}/\text{denominator}) \times 100$

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, for example, 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.

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