NHS Health Checks - Quality Assurance Dashboard

Locality: Example Bristol locality | **Practice: Example Bristol Practice** | **Period: Year 2015-16**

A/ Practice score using Bristol Practice Self-Assessment Tool

National Programme Standard	Description of Standard (S)	Out of	Practice score	Practice %	Locality average %
Invitation and Offer	S1: Identifying the eligible population and offering a Check	7	6	86%	79%
	S2: Consistent approach to non-responders and those who DNA	4	3	75%	85%
Risk Assessment	S3 : Ensuring a complete Check is undertaken and recorded	17	17	100%	91%
	S4: Equipment use	4	4	100%	98%
	S5: Quality control for point of care testing	4	4	100%	95%
Communication of Results	S6: Ensuring results are communicated effectively and recorded	4	4	100%	83%
Risk Management	S7: High quality and timely lifestyle advice given to all	8	7	88%	75%
	S8: Additional testing and clinical follow up	10	7	70%	79%
	S9: Appropriate follow up for all if CVD risk assessed as ≥20%	5	5	100%	83%
Throughout the Pathway	S10: Confidential and timely transfer of patient data	7	5	71%	82%
Total		70	62	89%	85%

B/ Data completeness for Risk Assessment (S3)

Risk assessment indicator	Practice %	Locality average %
Ethnicity	95%	85%
Family history IHD<60	79%	91%
Pulse	100%	100%
Blood Pressure	100%	100%
BMI	100%	95%
Total cholesterol	82%	91%
Smoking status	95%	90%
GPPAQ index	92%	85%
AUDIT-C score	62%	72%
QRISK2	68%	76%
Dementia awareness if 65-74yr olds	75%	82%
Further bloods if BP and/or BMI abnormal	81%	83%
Average data completeness	86%	87%

C/ Compliance Indicators for Risk Management (S7)

Risk Management Outcome	Abnormal parameter	Aim and Threshold	No. of Checks completed	No. identified from Checks	No. of Brief Advice/Referrals	Practice %	Locality average %
Smoking Cessation	smoker	100% receive cessation advice and leaflet		80	75	94%	79%
	smoker	50% referred for support		80	5	13%	45%
Weight Management	BMI ≥25<30 (or <27.5 if South Asian)	100% receive advice and signposting		180	180	100%	94%
	BMI ≥30 or ≥27.5 if South Asian	100% as above and referred to weight management service	300	90	10	11%	32%
Physical Activity	moderately (in)active or inactive	100% receive advice, leaflet, signposting and brief intervention		210	150	71%	85%
	inactive and BMI ≥30	100% as above and referred to activity programme		80	5	6%	12%
Alcohol Intervention	AUDIT score 8-19	100% receive advice, leaflet and brief intervention		20	20	100%	95%
	AUDIT score ≥20	100% as above and referred to ROADS		5	5	100%	92%

Note: In the future we will be looking into ways of reporting patient outcomes as a result of Health Check (e.g. number of patients who stopped smoking or lost weight).

D/ Compliance for Ext. Quality Assurance (S5)

Indicator	Aim and Threshold	Practice no. (%)
Return of results	12 per annum	11/12 (92%)
TC - Results in range	100% in range	11/11 (100%)
HDL - Results in range	100% in range	8/11 (73%)

E/ Compliance for Read coding of Outreach (S10)

Indicator	No. completed by Outreach	No. (%) coded as outreach by practice
Outreach Checks	30	15 (50%)