Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Asthma (AST)	AST002	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 anytime after diagnosis	15	4,755	4,268	89.75%
Asthma (AST)	AST003	The percentage of patients with asthma, on the register, who have had an asthma review in the preceding 15 months that includes an assessment of asthma control using the 3 RCP questions	20	6,340	977	15.41%
Asthma (AST)	AST004	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 15 months	6	1,902	401	21.08%
Atrial fibrillation	AF006NI	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 3 years (excluding those patients with a previous $CHADS_2$ or CHA_2DS_2-VASc score of 2 or more)	12	3,804	1,696	44.57%
Atrial fibrillation	AF007	In those patients with atrial fibrillation whose latest record of a CHA_2DS2-VASc score is 2 or more, the percentage of patients who are currently treated with anticoagulation drug therapy	10	3,170	3,169	99.98%
Cancer (CAN)	CAN003	The percentage of patients with cancer, diagnosed within the preceding 15 months, who have a patient review recorded as occurring within 6 months of the contractor receiving confirmation of the diagnosis	6	1,902	422	22.17%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Secondary prevention of coronary heart disease (CHD)	CHD002	The percentage of patients with coronary heart disease in whom the last blood pressure reading (measured in the preceding 15 months) is 150/90 mmHg or less	17	5,389	3,128	58.05%
Secondary prevention of coronary heart disease (CHD)	CHD003NI	The percentage of patients with coronary heart disease whose last measured total cholesterol (measured in the preceding 3 years) is 5 mmol/l or less	17	5,389	4,898	90.89%
Secondary prevention of coronary heart disease (CHD)	CHD005	The percentage of patients with coronary heart disease with a record in the preceding 15 months that aspirin, an alternative anti-platelet therapy, or anti-coagulant is being taken	7	2,219	2,182	98.35%
Secondary prevention of coronary heart disease (CHD)	CHD007	The percentage of patients with coronary heart disease who have had influenza immunisation in the preceding 1 August to 31 March	7	2,219	1,006	45.32%
Chronic obstructive pulmonary disease (COPD)	COPD002NI	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 15 months after entering on to the register	5	1,585	1,370	86.44%
Chronic obstructive pulmonary disease (COPD)	COPD003	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 15 months	9	2,853	297	10.42%
Chronic obstructive pulmonary disease (COPD)	COPD004NI	The percentage of patients with COPD with a record of FEV_1 in the preceding 3 years	7	2,219	1,315	59.25%
Chronic obstructive pulmonary disease (COPD)	COPD005NI	The percentage of patients with COPD and Medical Research Council dyspnoea grade $\geq$3 at any time in the preceding 12 months, with a record of oxygen saturation value within the preceding 15 months	5	1,585	463	29.22%
Chronic obstructive pulmonary disease (COPD)	COPD007	The percentage of patients with COPD who have had influenza immunisation in the preceding 1 August to 31 March	6	1,902	926	48.71%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Dementia (DEM)	DEM002	The percentage of patients diagnosed with dementia whose care has been reviewed in a face-to-face review in the preceding 15 months	15	4,755	366	7.69%
Dementia (DEM)	DEM003	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 and 6 months after entering on to the register	6	1,902	744	39.13%
Depression (DEP)	DEP001NI	The percentage of patients aged 18 or over with a new diagnosis of depression in the preceding 1 April to 31 March, who have had an assessment of the physical, psychological and social aspects of the condition by the point of diagnosis. The completion of the assessment is to be recorded on the same day as the diagnosis is recorded	21	6,657	1,765	26.51%
Diabetes mellitus (DM)	DM002NI	The percentage of patients with diabetes, on the register, in whom the last blood pressure reading (measured in the preceding 15 months) is 150/90 mmHg or less	8	2,536	1,729	68.18%
Diabetes mellitus (DM)	DM003NI	The percentage of patients with diabetes, on the register, in whom the last blood pressure reading (measured in the preceding 15 months) is 140/80 mmHg or less	10	3,170	1,698	53.56%
Diabetes mellitus (DM)	DM004NI	The percentage of patients with diabetes, on the register, whose last measured total cholesterol (measured within the preceding 15 months) is 5 mmol/l or less	6	1,902	1,035	54.42%
Diabetes mellitus (DM)	DM006	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)	3	951	618	64.99%
Diabetes mellitus (DM)	DM007	The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 59 mmol/mol or less in the preceding 15 months	17	5,389	4,636	86.03%
Diabetes mellitus (DM)	DM008	The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 64 mmol/mol or less in the preceding 15 months	8	2,536	1,384	54.56%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Diabetes mellitus (DM)	DM009	The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 75 mmol/mol or less in the preceding 15 months	10	3,170	1,944	61.34%
Diabetes mellitus (DM)	DM010	The percentage of patients with diabetes, on the register, who have had influenza immunisation in the preceding 1 August to 31 March	3	951	412	43.34%
Diabetes mellitus (DM)	DM012	The percentage of patients with diabetes, on the register, 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 in previous ulcer) or 4) ulcerated foot within the preceding 15 months	4	1,268	173	13.63%
Diabetes mellitus (DM)	DM015NI	The percentage of male patients with diabetes, on the register, with whom erectile dysfunction has been discussed. Where appropriate patients should have been offered advice/investigation/treatment.	4	1,268	1,125	88.73%
Heart failure	HF002NI	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 between 3 months before and 15 months after entering on to the register	6	1,902	1,424	74.86%
Heart failure	HF003	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	10	3,170	2,594	81.83%
Heart failure	HF004	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 betablocker licensed for heart failure	9	2,853	2,817	98.75%
Hypertension	HYP002NI	The percentage of patients with hypertension in whom the last blood pressure reading (measured in the preceding 15 months) is 150/90 mmHg or less	20	6,340	2,037	32.12%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Mental health (MH)	MH002	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 15 months, agreed between individuals, their family and/or carers as appropriate	6	1,902	142	7.45%
Mental health (MH)	MH003	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of blood pressure in the preceding 15 months	4	1,268	273	21.55%
Mental health (MH)	MH007	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a record of alcohol consumption in the preceding 15 months	4	1,268	76	5.98%
Mental health (MH)	MH008NI	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	5	1,585	1,172	73.95%
Mental health (MH)	MH009	The percentage of patients on lithium therapy with a record of serum creatinine and TSH in the preceding 9 months	1	317	187	58.95%
Mental health (MH)	MH010	The percentage of patients on lithium therapy with a record of lithium levels in the therapeutic range in the preceding 4 months	2	634	260	41.03%
Osteoporosis: secondary prevention of fragility fractures	OST002	The percentage of patients aged 50 or over and who have not attained the age of 75, with 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	3	951	594	62.46%
Osteoporosis: secondary prevention of fragility fractures	OST005	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	3	951	429	45.07%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Palliative Care (PC)	PC001	The contractor establishes and maintains a register of all patients in need of palliative care/support irrespective of age	3	951	939	98.74%
Palliative Care (PC)	PC002	The contractor has regular (at least 3 monthly) multi-disciplinary case review meetings where all patients on the palliative care register are discussed	3	951	897	94.32%
Rheumatoid arthritis (RA)	RA002	The percentage of patients with rheumatoid arthritis, on the register, who have had a face-to-face review in the preceding 15 months	5	1,585	100	6.33%
Rheumatoid arthritis (RA)	RA003NI	The percentage of patients with rheumatoid arthritis aged 30 or over and who have not attained the age of 85 who have had a cardiovascular risk assessment using a CVD risk assessment tool adjusted for RA in the preceding 3 years	7	2,219	859	38.70%
Rheumatoid arthritis (RA)	RA004	The percentage of patients aged 50 or over and who have not attained the age of 91 with rheumatoid arthritis who have had an assessment of fracture risk using a risk assessment tool adjusted for RA in the preceding 3 years	5	1,585	379	23.94%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Stroke and transient ischaemic attack (STIA)	STIA003	The percentage of patients with a history of stroke or TIA in whom the last blood pressure reading (measured in the preceding 15months) is 150/90 mmHg or less	5	1,585	730	46.03%
Stroke and transient ischaemic attack (STIA)	STIA004NI	The percentage of patients with stroke and is shown to be non-haemorrhagic or a history of TIA who have a record of total cholesterol in the preceding 3 years	2	634	553	87.22%
Stroke and transient ischaemic attack (STIA)	STIA005NI	The percentage of patients with stroke shown to be non-haemorrhagic, or a history of TIA, whose last measured total cholesterol (measured in the preceding 3 years) is 5 mmol/l or less	5	1,585	1,399	88.26%
Stroke and transient ischaemic attack (STIA)	STIA007	The percentage of patients with a stroke shown to be non-haemorrhagic, or a history of TIA, who have a record in the preceding 15 months that an anti-platelet agent, or an anti-coagulant is being taken	4	1,268	1,216	95.93%
Stroke and transient ischaemic attack (STIA)	STIA008NI	The percentage of patients with a stroke or TIA (diagnosed on or after 1 April 2008) who have a record of a referral for further investigation between 3 months before and 1 month after the date of the latest recorded stroke or the first TIA	2	634	346	54.58%
Stroke and transient ischaemic attack (STIA)	STIA009	The percentage of patients with stroke or TIA who have had influenza immunisation in the preceding 1 August to 31 March	2	634	260	41.01%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Cardiovascular disease – primary prevention (CVD-PP)	CVD- PP011NI	The percentage of patients with a new diagnosis of hypertension recorded in the preceding 1 April to 31 March (excluding those with pre-existing CHD, diabetes, stroke and/or TIA), who are aged 30 or over and who have not attained the age of 75, who have a CVD risk assessment score recorded in the preceding 15 months.	5	1,585	817	51.57%
Cardiovascular disease – primary prevention (CVD-PP)	CVD- PP012NI	In those patients with a new diagnosis of hypertension aged 30 or over and who have not attained the age of 75, recorded between the preceding 1 April to 31 March (excluding those with pre-existing CHD, diabetes, stroke and/or TIA), who have a recorded CVD risk assessment score in the preceding 15 months of ≥20%: the percentage who are currently treated with statins.	5	1,585	920	58.03%
Blood Pressure (BP)	BP002	The percentage of patients aged 45 or over who have a record of blood pressure in the preceding 5 years	15	4,755	4,070	85.60%
Smoking (SMOK)	SMOK001NI	The percentage of patients aged 15 or over whose notes record smoking status in the preceding 3 years	10	3,170	1,994	62.91%
Cervical Screening	CS002NI	The percentage of women aged 25 or over and who have not attained the age of 65 whose notes record that a cervical screening test has been performed in the preceding 5 years	11	3487	2924	83.85%
Sexual Health	CON003NI	The percentage of women, on the register, prescribed emergency hormonal contraception one 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 in the preceding 3 years.	3	951	232	24.42%
Patient Experience (PE)	PE001NI	The practice undertakes a survey of patients who have had contact with the practice (face to face or telephone consultation or prescription) within the past year with the question “Would you recommend your GP practice to someone who has just moved into the local area?” and one follow-up question (see guidance). The practice should survey at least 2% of the practice list size and need to get a minimum of 50 responses. A summary report is required to be submitted to the Regional Board by 31 March 2022	18	5706	5274	92.43%

Indicator area	Indicator ID	Indicator definition	Points available (per practice)	Points Available (NI)	Points Achieved (NI)	% of points achieved
Records & Systems	RS001	General Practitioners in the contracting practice should use Clinical Communications Gateway (CCG) for referrals to all available Consultant led specialties.	20	6340	6060	95.58%
Records & Systems	RS002	The Practice reviews its own CCG Referral Data. Firstly to ensure that ALL GPs, including locums, are using CCG for referrals to all (available) Consultant led specialties. Secondly to look at referral patterns compared to previous years and neighbouring practices.	20	6340	6160	97.16%
Records & Systems	RS003	The practice engages with between three and six neighbouring practices to discuss outpatient referrals. This should include identifying any issues with CCG use and looking at referral patterns and pathways.	20	6340	6100	96.21%
Records & Systems	RS004	The Practice codes Emergency/Unplanned Admissions on receipt of the final paper or electronic discharge letter. Information should include Date of Admission, Specialty and Diagnosis.	20	6340	6200	97.79%
Records & Systems	RS005	The Practice runs the Data Quality in Practice (DQIP) minimum dataset queries (to include queries to calculate the electronic frailty index) in conjunction with the R&S tool, supported by the clinical informatics team on a six monthly basis. The extracts are shared with the HSCB in pseudonymised form. The practice will create and maintain a patient frailty register by coding patients identified by the electronic frailty index, presented in a dashboard in the R&S tool, using the appropriate Read code for mild, moderate or severe frailty.	20	6340	6200	97.79%