SystmOne pdf guides are correct at the date of writing, for further assistance you are advised to consult F1 help.
25 November 2010

QOF queries in SystmOne

For further help with QOF:

1. See the Primary Care Contracting (www.primarycarecontracting.nhs.uk) website for more information

2. Contact your PCT Information or Data Quality team

Contents

Note: Any patient data shown in this document is fictitious

1. The QOF screen, Points and Targets

The QOF screen is available by selecting **Reporting**>**QOF Indicators** from the Main Menu. Total points for the practice are displayed at the top right of the screen under the **Points** column (Fig 1.1), a breakdown of the points is given for each disease register beneath the total.
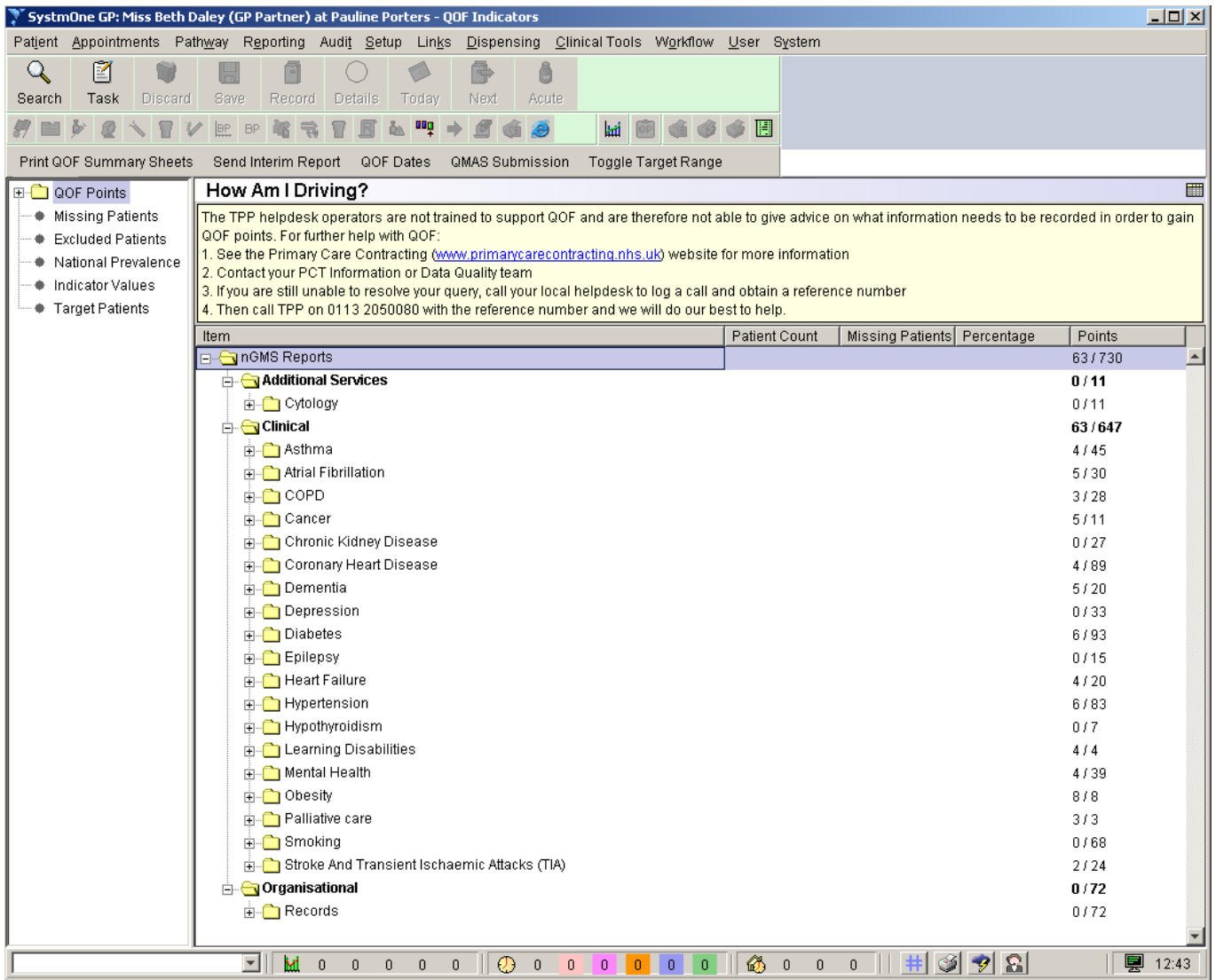

Fig 1.1

Note: Any patient data shown in this document is fictitious

Expanding a disease register (*Coronary Heart Disease* in Fig 1.2) displays the points for each individual report within the indicator and three new columns.
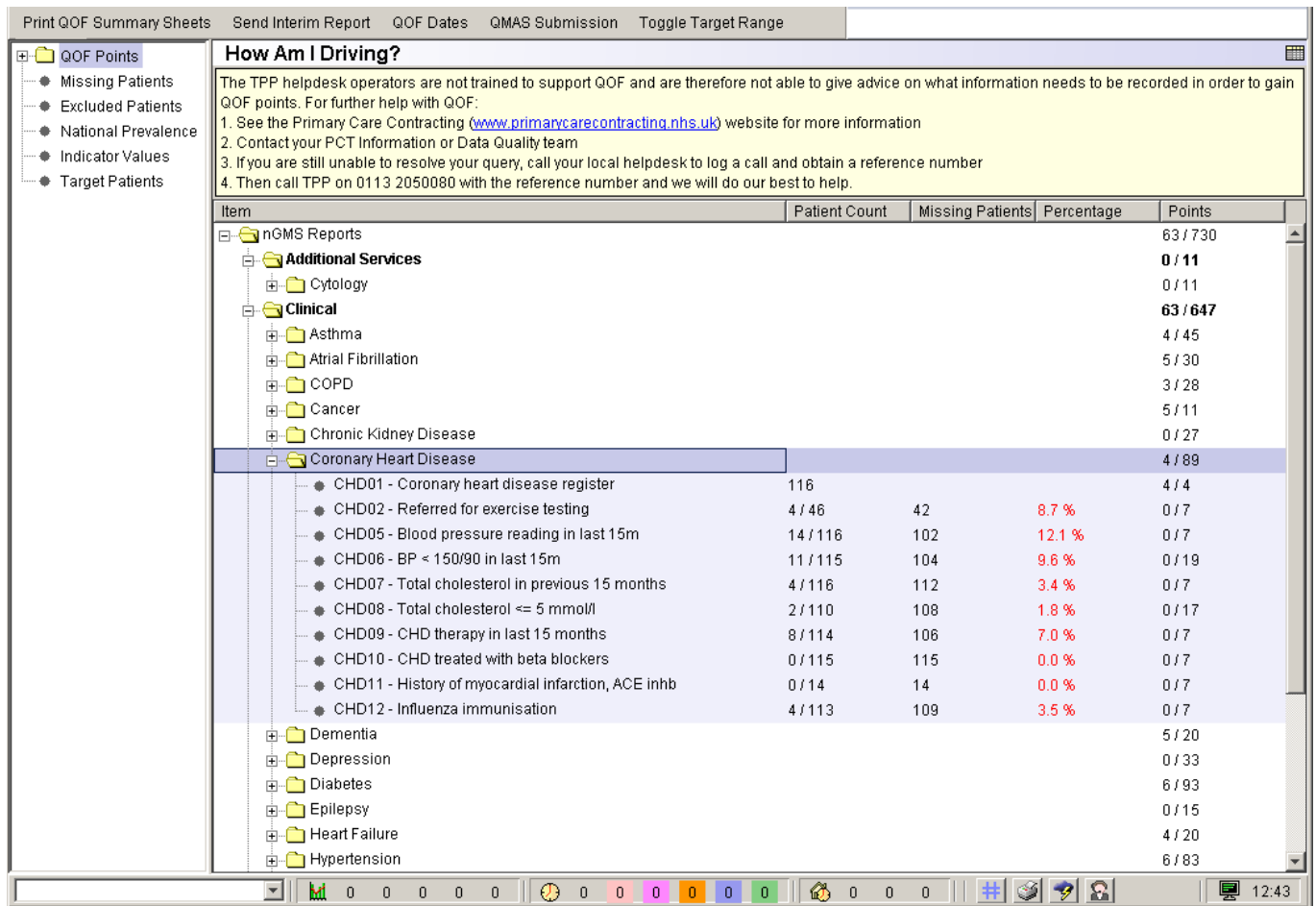
Print QOF Summary Sheets	**Send Interim Report**	**QOF Dates**	**QMAS Submission**	**Toggle Target Range**

How Am I Driving?

The TPP helpdesk operators are not trained to support QOF and are therefore not able to give advice on what information needs to be recorded in order to gain QOF points. For further help with QOF:
1. See the Primary Care Contracting (www.primarycarecontracting.nhs.uk) website for more information
2. Contact your PCT Information or Data Quality team
3. If you are still unable to resolve your query, call your local helpdesk to log a call and obtain a reference number
4. Then call TPP on 0113 2050080 with the reference number and we will do our best to help.

Item	Patient Count	Missing Patients	Percentage	Points
nGMS Reports				63 / 730
Additional Services				**0 / 11**
Cytology				0 / 11
Clinical				**63 / 647**
Asthma				4 / 45
Atrial Fibrillation				5 / 30
COPD				3 / 28
Cancer				5 / 11
Chronic Kidney Disease				0 / 27
Coronary Heart Disease				4 / 89
CHD01 - Coronary heart disease register	116			4 / 4
CHD02 - Referred for exercise testing	4 / 46	42	8.7 %	0 / 7
CHD05 - Blood pressure reading in last 15m	14 / 116	102	12.1 %	0 / 7
CHD06 - BP < 150/90 in last 15m	11 / 115	104	9.6 %	0 / 19
CHD07 - Total cholesterol in previous 15 months	4 / 116	112	3.4 %	0 / 7
CHD08 - Total cholesterol <= 5 mmol/l	2 / 110	108	1.8 %	0 / 17
CHD09 - CHD therapy in last 15 months	8 / 114	106	7.0 %	0 / 7
CHD10 - CHD treated with beta blockers	0 / 115	115	0.0 %	0 / 7
CHD11 - History of myocardial infarction, ACE inhb	0 / 14	14	0.0 %	0 / 7
CHD12 - Influenza immunisation	4 / 113	109	3.5 %	0 / 7
Dementia				5 / 20
Depression				0 / 33
Diabetes				6 / 93
Epilepsy				0 / 15
Heart Failure				4 / 20
Hypertension				6 / 83

QOF Points
— Missing Patients
— Excluded Patients
— National Prevalence
— Indicator Values
— Target Patients

M 0 0 0 0 0   0 0 0 0 0 0   0 0 0   #   12:43

Fig 1.2

The three columns are as follows:

a) The **Patient Count** column displays the number of 'achieved' patients out of the amount of patients that qualify to be within that section (i.e. patients that are not excluded from the report).
b) The second column displays the **Missing Patients** (or 'Work to do' before maximum points can be achieved).
c) Column three displays the current **Percentage** that the practice has for a particular indicator.

A tooltip is displayed if the mouse is hovered over the percentage – this displays the **Target Range** which is the percentage bracket that is required to gain points. E.g. 40 – 90 % means 40% is the minimum required to gain 1 point and 90% is the minimum requirement to gain full points.

The final column titled **Points** displays a breakdown of the points achieved for each disease register.

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To view a flow chart of how the DoH rules are interpreted in SystmOne, right-click on a report and select **Report Information** (Fig 1.3).

Fig 1.3

This window displays a visual interpretation of the Department of Health Business Rules (CHD07. example in Fig 1.4), but the reports can be rather complicated. It should not be necessary for you to view the information within these screens as TPP must pass an accreditation of how we interpret the Business Rules before they are put into use. This means you can be assured that what is displayed in SystmOne corresponds to the latest version of the QOF specification.

Fig 1.4

Common Questions

1) Why are the figures lower than expected?

Check the individual indicators to see if there is a specific area that is causing the points loss. For example, 0/93 points for the Diabetes indicator would suggest that the practice need to investigate if they have been correctly recording information here. If you randomly select a few missing patients that you expect to be "achieved", you can ascertain if the correct codes have been recorded.

2) What is the difference between the 'How am I driving?' and 'End of Year' screens?

How Am I Driving?
This screen displays the results as of today i.e. it shows the points that would be used to calculate payments if today's date were the end of the financial year. This means that if you continue doing the same things as you have done over the last 15 months or so, these points are what you should expect to achieve at the end of the financial year. The results on this screen will remain fairly constant unless you change your working practices, e.g. if you decide to target all your asthmatic patients to gain maximum points, you would expect your asthma indicator points to increase.

End of Year
This screen usually displays your practice results as of the end of the current financial year. This means that if your practice did not record any clinical data after today, the points displayed are what you would achieve at the end of the financial year. The points shown on this screen will continue to increase until the next financial year arrives when the points will drop dramatically before slowly building up over the year again.

Note: You can have either the 'End Of Year' report or use custom reference and baseline dates. You cannot have both reports on the same day.

The results from this tab are used when sending submissions to QMAS.

Percentages
The Percentage column shown on the two indicator views are colour-coded to show whether:
   a) The percentage is below the minimum percentage (shown in red) - you'll get no points for this indicator
   b) The percentage is below the target percentage (shown in orange) - you'll receive a reduced number of points
   c) The percentage is on or above the target percentage (shown in green) - you'll receive the maximum number of points

2. Read Code Clusters

As you can see from viewing the Department of Health QOF Business Rules, the reports are linked to and built around a list of Read Codes that correspond to groups, or 'clusters' of codes. These clusters can be found by selecting **Read Code Clusters** from the **Reporting** menu (Fig 2.1).
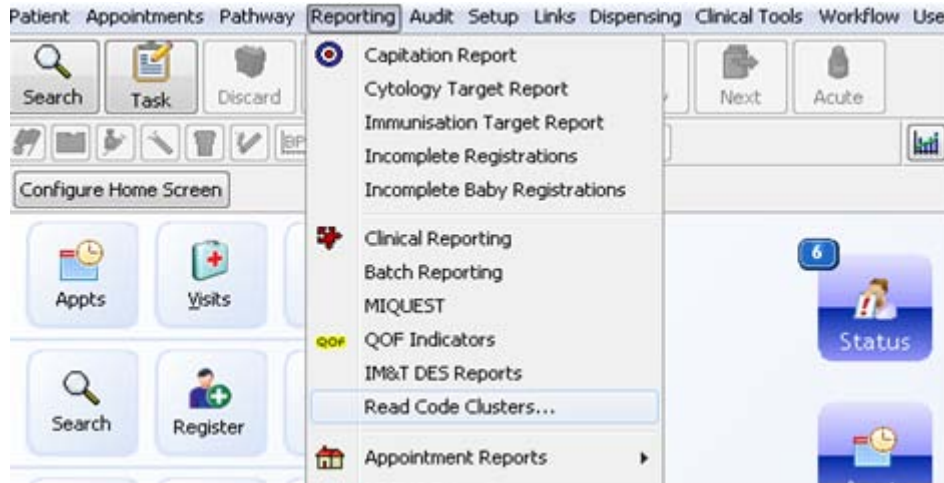

Fig 2.1

After selecting this a new window will appear. On the left of this screen a list of all the Read Code Clusters is displayed. When a cluster is selected the corresponding list of Read Codes is displayed in the right hand pane. Notice how all these codes have a QOF icon next to them (Fig 2.2).
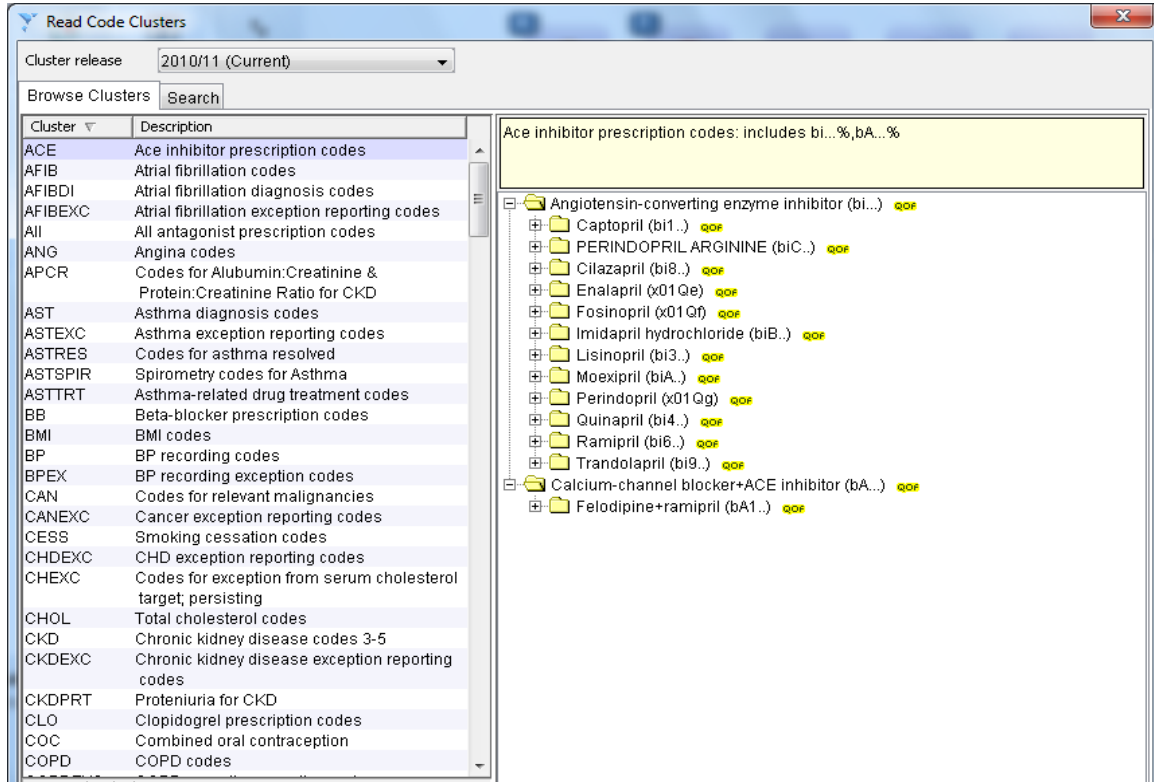
Fig 2.2

Note: You can hover the mouse over the ᴏᴏꜰ icon anywhere in SystmOne to display a tool tip of which cluster(s) that particular code belongs to.

Another way of doing this is with the **Search** tab in the **Read Code Clusters** window. For example, searching for 'Heart failure' and clicking the 'Search' button will display that the code *G58..* belongs to the clusters **HF**, **DRHF1** and **DRHF2** (Fig 2.3).
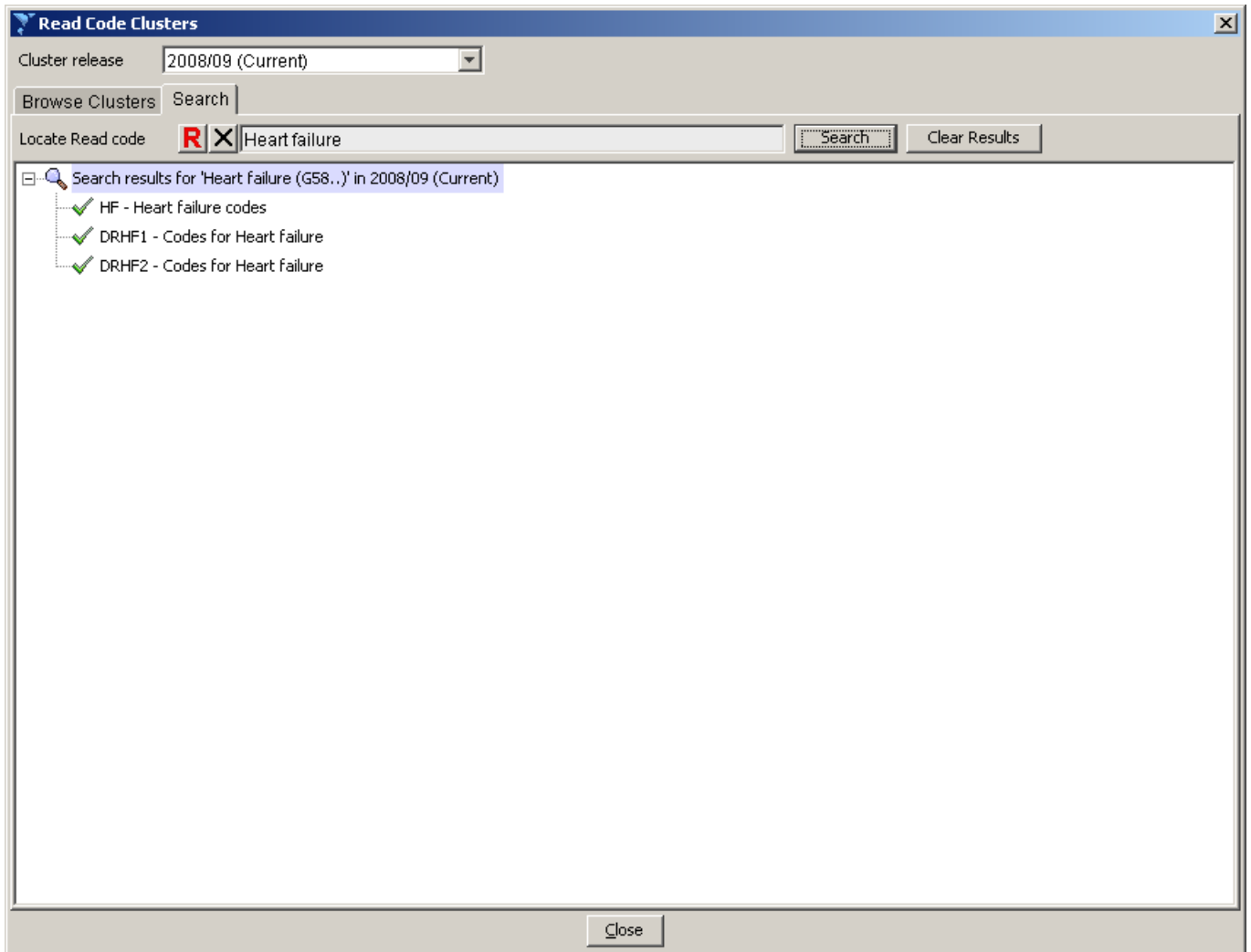
Fig 2.3

Common Questions

1) **How do I find if I have used the correct QOF code when I have added a diagnosis?**

   You can use the search facility as above to find if the code is in the relevant cluster.

2) **I have recorded a code that I don't believe should be a QOF code. Can TPP change this?**

This specification has been created by the Department of Health and therefore cannot be amended by TPP unless we receive new business rules.

3. QOF Alerts and how to view QOF codes within the patient record

As well as the QOF Indicators screen giving you information about missing patients and work to do, **QOF Alerts** within the patient record also flag when work needs to be completed.
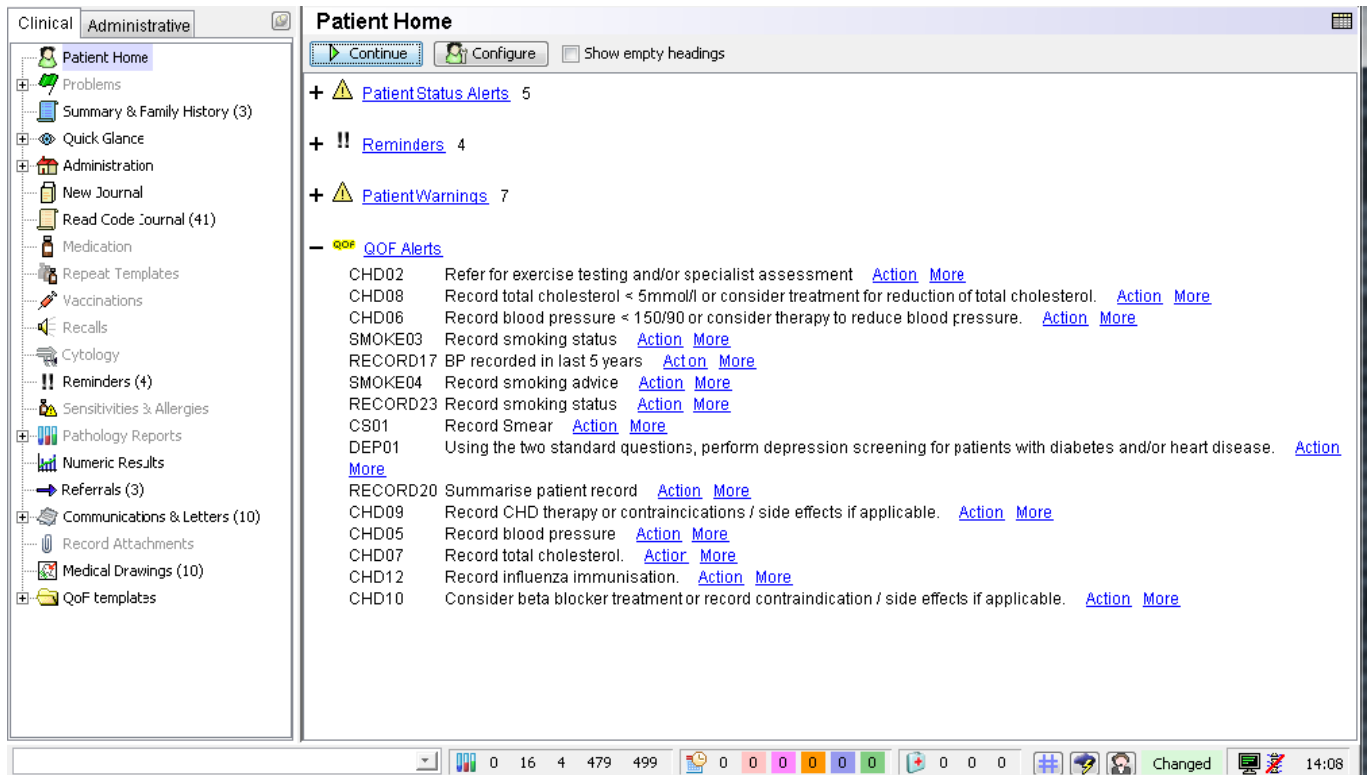
Fig 3.1

These are initially displayed in the **Patient Home** screen (Fig 3.1) upon retrieval of the record.

To view the alerts in more detail, select **QOF Alerts & Patient Warnings** from the Clinical Tree configuration. [If this does not appear in the user's tree configuration it may need adding. Information on configuring the Clinical Tree can be found in F1 Help.] This is essentially a view of the patient record which separates everything QOF-related from everything else and is split into two tabs: **QOF Alerts & Patient Warnings** and **Clinical Data by Read Code Cluster**.

QOF Alerts & Patient Warnings

This is a list of 'Work to do' for the selected patient before any points can be added to the QOF Indicators screen. The **Protocol** field displays what needs to be completed in bold ('Record blood pressure' for example) and the text beneath displays which report this relates to ('Report CHD05 – Missing patients' for the example in Fig 3.2).

Fig 3.2

Clinical Data by Read Code Cluster

This is probably the most important screen when dealing with QOF queries, as this screen provides a filter for each Read Code Cluster. This provides an extremely quick way of finding codes in a patient's record, and whether the correct codes have been recorded for a specific indicator.

Fig 3.3

If you highlight a cluster in the middle pane of this view (Fig 3.3, **DRHYP1** in this case), then a filter on the right displays if a relevant Read Code has been recorded. The date of entry is also shown which is useful as most QOF indicators require certain codes to be recorded within a specific time frame.

Note: You can find out which Read Codes belong to the cluster you have highlighted by clicking the [i] button.

This will show the **Read Code Clusters** screen as detailed in section 2 above, but will open for the cluster selected.

Common Questions

1) **I can see that I've recorded all the relevant codes so why does the patient still appear to have a missing patients QOF Alert?**

   Check if the Read Code has been added today, or added today and backdated. If this is the case you will need to wait until the next day for the reports to build overnight. Backdated codes are denoted in the

   New Journal section of the record with the [icon] icon. Hovering the mouse over the icon will display a tool tip containing the date and time the code was entered.

   If this is not the case also check if the indicator reports on 'episodicity'. New episodes are also shown in the filter (and the New Journal), denoted by a [icon] icon.

2) **I have just completed the work for a patient but the QOF Alert still appears.**

   When you have 'actioned' an alert and saved the record the alert will turn grey and the actioned checkbox will be ticked. SystmOne's reporting tables need to be built overnight before this disappears and the QOF screen is updated.

4. Indicator Details - Finding which section of a report a patient appears in

This section relates to the QOF Indicator Reports available by selecting **Reporting**>**QOF Indicators** from the Main Menu.

Every QOF Indicator is split into a subset of reports. These always include:

1. An 'achieved' patients report (where the points are tallied up, shown as **Numerator** in Fig 4.2).
2. A 'missing patients' report (work to do).
3. An 'excluded' patients report (patients that have the condition but do not qualify to be on the report). These appear under the **Exclusions** folder in Fig 4.2.

Right clicking and selecting **Indicator Details** applies a filter within the report that allows you to find out which part of an indicator a specific patient appears in (Fig 4.1).
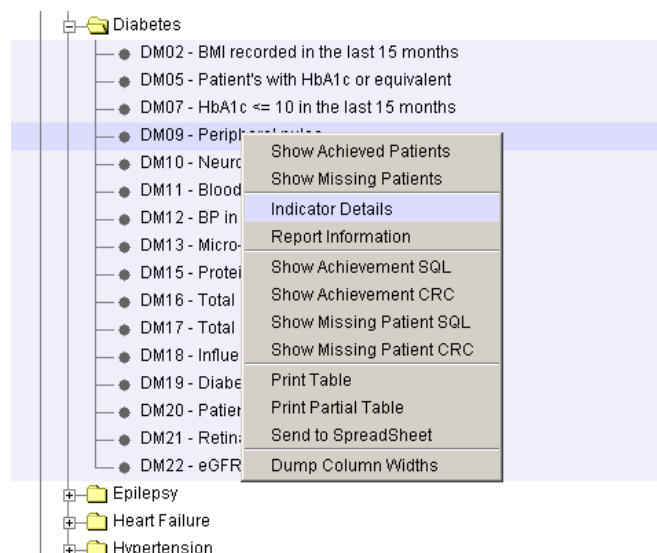
Fig 4.1

Selecting 'Indicator Details' from the right-click menu presents you with the screen below (Fig 4.2).
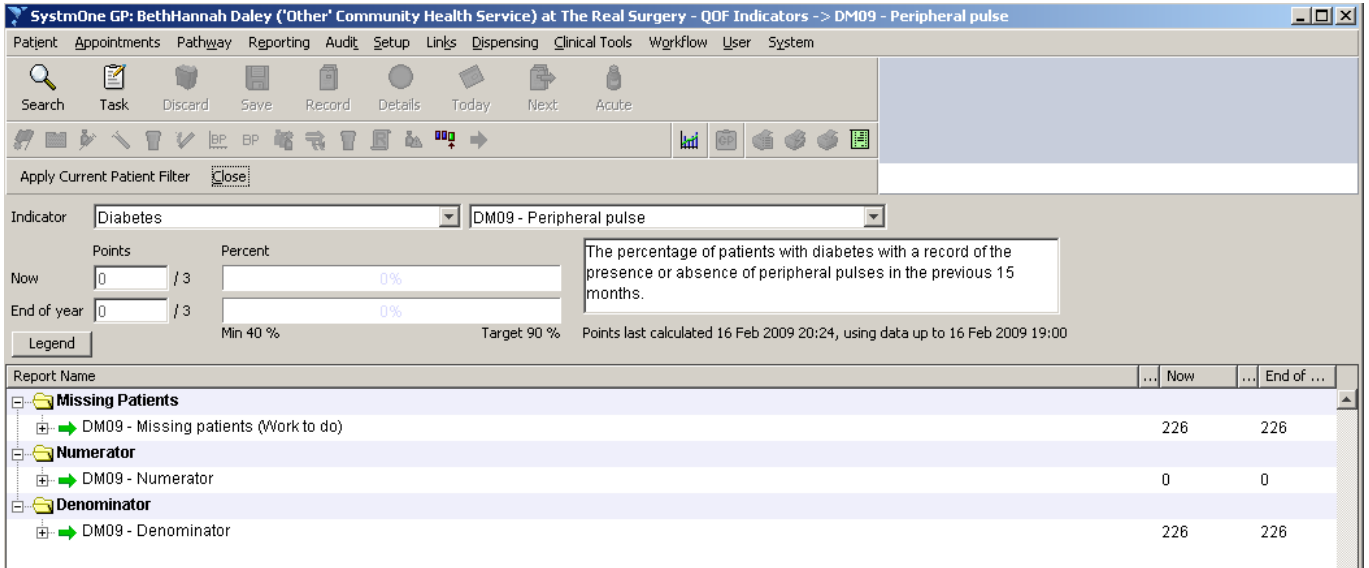
Fig 4.2

If you are investigating a patient that you expect to see on this report, then:

1. Retrieve the patient record.
2. Go to the report you are interested in and select **Indicator Details** as in Fig 4.1.
3. Press the **Apply Current Patient Filter** button at the top left of the screen (Fig 4.2).

After pressing this button, the reports will quickly run in the background and then display a ✓ icon in the two columns on the right of the screen (Fig 4.3) if the patient appears in any of the reports. The tick on the right corresponds to the report the patient appears in on the left.
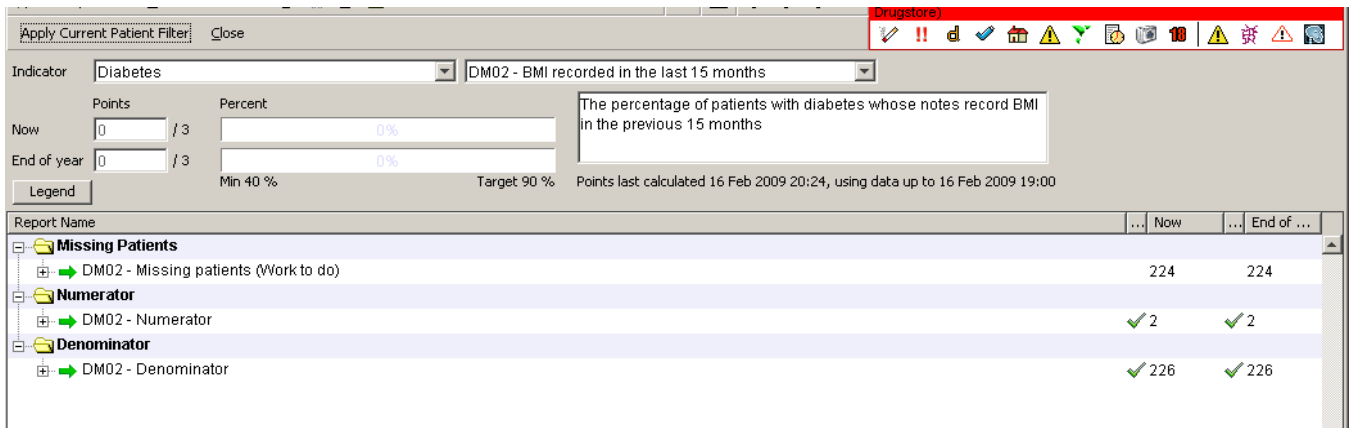
Fig 4.3

In the example above, the ✔ appears to correspond with the **Numerator** report, i.e. the 'achieved' report, hence there is no work to do for this patient. The **Denominator** is actually just a sub-report of the Numerator and can therefore be ignored for investigative reasons.

You will also notice from Fig 4.3 that the ✔ appears in two columns. When expanded these columns show 'Patient Now' and 'Patient End of Year':

Patient Now	Now	Patient End of Year	End of Year
	76		78
✔	2	✔	2
✔	78	✔	80

This is useful as you can see if any work may need to be done towards the end of the financial year. For example, a patient that needs a review every 15 months may not need any work doing now but this screen will help you to see if they need calling for a review before the end of the financial year.

Common Questions

1) **I can see from the patient QOF Alerts that I have recorded all the relevant codes and satisfied all of the date criteria in the DoH business rules. Why does the patient not appear in the report at all?**

   If you retrieve the patient and use the **Apply Current Patient Filter** tool, it will most likely show that the patient is excluded from the report. This will be denoted by a ✔ icon in one of the reports beneath the **Exclusions** folder.

2) **Why is my patient 'achieved' now, but missing at the end of financial year?**

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Check the report criteria to see if any date ranges are set within the report. It may be that by the end of the financial year more work will need to be done.

3) **There are no codes recorded for the patient. Why do they appear on the indicator?**

This can occur when a user has deleted a qualifying code for an indicator and the reports have not built overnight to update this information. Check the **Deleted Items** node of the **Administrative** patient tree to view if there have been any codes deleted today that are in one the indicator's Read Code Clusters.

5. Non QMAS Reports

Non QMAS reports are not automatically submitted to QMAS.

The reports for Medicines 11 and Medicines 12 are now shown on the QOF Indicators screen and can be found under the **Organisational** folder.

As with the previous QOF reports, these reports are broken down into **Patient Count**, **Missing Patients**, **Percentage** and **Total Points**.

New Records 19 reports

System Wide reports are now available to help GP practices collate data for Records 19. Records 19 is a QMAS report worth 7 points. The target is for your practice to have summarised the notes of 80% of newly registered patients within 8 weeks of receipt.

The Record19 –Medical notes summarised within 8 weeks (not submitted) - shows the patients whose record has had a CSUM Read code recorded within 8 weeks of receipt. This report can be found in the sub folder 'Records' within the 'Organisational' folder on the QOF indicators screen (Fig. 5.1). This report will not be automatically submitted to QMAS.

Fig 5.1

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To see and breakdown non QMAS reports:

1. Select **Reporting>Clinical Reporting** from the Main Menu.

2. Expand the **System Wide** and **QOF 2009 to 2010** folders.

3. Select **non QMAS reports**. (Fig 5.2)

Fig 5.2

4. The reports for Medicines 11, Medicines 12, Records 19, Records 9 are displayed. Select a report and click the **Run the selected report(s)** button on the tool bar or right-click and select **Run**.

5. To breakdown the run report, select it and click the **Breakdown the selected report** button on the tool bar or right-click and select **Breakdown Results**.

6. Select the options from the tree that you wish to use to breakdown the report, then click **Refresh** (Fig 5.3).

Fig 5.3

To show patients, select the report or a line of the broken down results, then click the **Show Patients** button on the tool bar or right-click and select **Show Patients**.

There are two sets of reports for Records 19:

'Records 19 Achievement - Records Summarised with 8 weeks'. This is the main report, which shows the patients whose record has had a CSUM Read code recorded within 8 weeks of receipt. This report is made up of:

a. 'Records 19 - Denominator'. This report lists the active GMS patients whose records have been received within the last 12 months but not within the last 8 weeks.

b. 'Records 19 - Records summarised codes after records received'. This report shows the patients in the 'Denominator' report whose records have had a CSUM Read code recorded after the date the records were received.

Note: If a record has been received for a patient within the last 8 weeks, the patient will not appear in these reports as there is still time for their record to be summarised.

Follow-up: 'Records 19 - Patients still to summarise'. This is the 'Work to do' report, which shows the patients whose records have been received in the last 8 weeks but not yet summarised. This report is made up of:

a. 'Records 19 - Patients still to summarise - Medical records received in last 8 weeks'. This report shows the active GMS patients whose records have been received in the last 8 weeks.

b. 'Records 19 - Patients still to summarise - Records summarised codes after records received in last 8 weeks'. This report shows the patients whose records have been received in the last 8 weeks, and whose record has been summarised since the date the records were received. Patients appearing in this report are excluded from the 'Work to do' report as the work has been completed for them.

To run these reports:

1. Select **Reporting>Clinical Reporting** from the Main Menu.

2. Either:

a. Expand the **System Wide** folder, then select **QOF 2009-2010 > non QMAS reports** from the tree.

b. Select **Search for** from the tree, then enter 'Records 19' in the **Search** field. Press 'Enter' on your keyboard or click **Find**.

3. The reports are displayed. Select the Records 19 reports then either right-click and select **Run** or click the green 'arrow' button on the tool bar.

4. The results are returned. Look at the '%' column of the main report (Records 19 Achievement - Records Summarised with 8 weeks') results to see the percentage of newly registered patients whose notes have been summarised within 8 weeks of receipt by the practice.