Maximising your QOF income: Stroke and TIA

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- Indicators: 5
- Points: 13
- Prevalence (2017-18): 1.8%
- £/patient on the register (est.): £16.81

Stroke has been in the QOF since the very start and prevalence is pretty stable. There is a wide range of pathology that comes under the heading of stroke and transient ischaemic attack (TIA) and there are over 60 diagnostic codes that will put a patient on the register. The rules reflect this complexity.

Indicator 1: Maintain patient register (2 points)

As these patients are often on the same cardiovascular medicines as those on other registers they can be difficult to search for if not coded. The diagnosis is usually made in secondary care and searching for CT scans of the head may throw up some missed patients, particularly if you have access to hospital results.

The official guidance says that it is up to practices when a 'dizzy turn' or amaurosis fugax should be coded as a TIA. Practically that decision might be made after the CT scan has been performed – see below.

Indicator 2: Blood pressure 140/90 or less in under 80 year olds (3 points)

Indicator 3: Blood pressure 150/90 or less in over 80 year olds (2 points)

These are new for 2019/20 and replace the previous single blood pressure target indicator with two agestratified indicators, introducing a tighter target blood pressure for the under 80s.

There are five points for patients whose final blood pressure is under the appropriate threshold for their age. These are the same levels as the hypertension area and they have equivalent exception codes for patient consent, suitability and maximal tolerated antihypertensive therapy.

Blood pressure measurement will normally take place in an annual review. Remember that a hypertension code may also be appropriate to put the patient on the hypertension register.

Indicator 4: Antiplatelets or anticoagulant prescription (4 points)

Four points are available for the prescription of antiplatelets or anticoagulant to a patient who has had a non-haemorrhagic stroke. This is a much smaller range of diagnoses and where there is ambiguity patients will not qualify for this indicator. The majority of qualifying codes use the word 'infarction'.

Prescriptions of aspirin, clopidogrel, dipyridamole and oral anticoagulants will count towards this indicator, as well as a record of the use of, or advice about, over-the-counter aspirin.

There is exception reporting for the whole stroke area. To exception report for this indicator alone there will need to be individual codes entered for aspirin, clopidogrel, dipyridamole and oral anticoagulation – that is four separate codes.

Indicator 5: Influenza vaccination (2 points)

The final two points are for the administration of influenza vaccinations to this group. The upper threshold is high, at 95%, and two points is not especially rewarding. These patients will, however, also be covered by the influenza enhanced services, so this indicator may be more about record keeping.

Exception recording is available where patients do not want to have the vaccination or do not respond to three invitations.

Removed in 2019/20:

The indicator requiring referral around the date of diagnosis has been removed.

For reference:

Indicator 1: The contractor establishes and maintains a register of patients with stroke or TIA (STIA001)

Indicator 2: The percentage of patients aged 79 years or under with a history of stroke or TIA in whom the last blood pressure reading (measured in the preceding 12 months) is 140/90 mmHg or less (STIA010). Payment threshold: 40-73%

Indicator 3: The percentage of patients aged 80 years and older 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 (STIA011). Payment threshold: 46-86%

Indicator 4: 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 antiplatelet agent, or an anti-coagulant is being taken (STIA007). Payment threshold: 57-97%

Indicator 5: The percentage of patients with stroke or TIA who have had influenza immunisation in the preceding 1 August to 31 March (STIA009). Payment threshold: 55-95%

Guide URL: http://preview.pulse-intelligence.co.uk/guide/pi-how-to-increase-your-qof-payments-stroke-and-transient-ischaemic-attack/





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