Maximising your QOF: Depression

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- Indicators: 1
- Points: 10
- Prevalence (2016-17): 7.1%
- £/patient on the register (est): £2.75

You probably can't see the register of patients used in the depression area, but it is there nonetheless.

The register consists of all patients who have had a diagnosis of depression since 1 April 2006 and are 18 years or older at the end of the QOF year. Patients diagnosed as a child or teenager will automatically come onto the register as they get older.

It is important that patients who register with the practice have their previous history correctly coded so that they appear on the register. This should be a diagnosis to look out for when notes are summarised after arrival.

There are many diagnostic codes available. However, be aware that the descriptions 'low mood' or 'depressed' are considered symptoms rather than diagnostic codes, and so these patients won’t appear on the register.

It is possible to remove patients from the register by coding the depression as resolved, but there is little incentive to do so, as this will cut income and does not save any work.

Indicator 1: Review after diagnosis (10 points)

The only depression indicator records whether patients have had a review between 10 and 56 days after the diagnosis is made. A ‘ticking clock’ starts at the date of diagnosis and it is vital that all (or at least 80%) of the patients who have a diagnosis also have a review.

Exception reporting is available with the usual codes for informed dissent and not being suitable for the depression indicator. The rules are a bit odd though, as the exception code can only be logged three months after diagnosis, and so it might appear in a different QOF year. For example, if a patient is diagnosed in January they will have until March to have the review. If they don’t agree to the review then that code would have to be entered from April onwards in the following QOF year.

As meeting the requirements of this indicator depends on the patient turning up for a review it is important that patients are aware of the need for a review in the appropriate timescale. It is possible to use 'low mood' or 'depressed' symptom codes until the review takes place.
Often these reviews have occurred but are not coded so a review of the notes of patients who have not passed this indicator can be worthwhile. You can schedule a proactive phone review, reminders or booking in advance.

For reference:

Indicator 1: The percentage of patients aged 18 or over with a new diagnosis of depression in the preceding 1 April to 31 March, who have been reviewed not earlier than 10 days after and not later than 56 days after the date of diagnosis (DEP003). Payment threshold: 45-80%

Guide URL:
http://preview.pulse-intelligence.co.uk/guide/how-to-increase-your-qof-payments-depression/