

Maximising your QOF income: Cervical screening

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- Indicators: 2
- Points: 11
- Prevalence (2017-18): N/A
- £/patient on the register (est.): N/A

Indicator 1: Cervical screening test in the last 3.5 years for patients between 25-49 years old (7 points)

Indicator 2: Cervical screening test in the last 5.5 years for women between 50-64 years old (4 points)

These two new indicators for 2019/20 reflect the national screening programme and replace the previous single indicator for five-yearly screening for women aged 25-65.

Other than the timescales the two indicators are identical to each other and both have an upper threshold of 80% of women to gain the full quota of points. Points are roughly proportional to the number of smear tests patients will require.

Achievement is based on entering the result of the smear test, rather than merely taking the sample. The appropriate indicator is based on the age of the woman at the end of the QOF year. Women will become eligible on their 25th birthday, with no grace period, and there will inevitably be some women at the end of the year who have not had their smear result yet.

Those who have had a hysterectomy that included removal of the cervix are automatically excluded from this indicator. It is important that the operation is correctly coded. This will usually involve a code for total hysterectomy, or a similar code that explicitly includes the removal of the cervix.

Patients may also be recorded as having refused a cervical smear. For this to happen they should have explicitly refused screening or have not responded to three invitations. The first one or two invitations are likely to be sent by the central screening service, but the final letters should be sent by the practice. This exception will last for three or five years depending on their normal smear interval.

There is a three-month exception period, after patients have registered with the practice, but information about smear tests at the previous practice will need to be entered. This is simple where the records are transferred electronically, which the large majority of practices should now be able to do through GP2GP. Incoming paper records can take much longer and may not arrive before the three-month exception period. They should be summarised on the computer system on arrival and cervical cytology and associated exception codes should be specifically looked for by summarisers.

Removed for 2019/20

The indicator for having a practice protocol is no longer included in the QOF (CS001). A second indicator for auditing cervical screening in the practice has also been removed (CS004).

Both of these are now considered a core responsibility within the global sum.

For reference:

Indicator 1: The proportion of women eligible for screening and aged 25-49 years at the end of the reporting period whose notes record that an adequate cervical screening test has been performed in the preceding 3 years and 6 months (CS005). Payment threshold: 45-80%

Indicator 2: The proportion of women eligible for screening and aged 50-64 years at the end of the reporting period whose notes record that an adequate cervical screening test has been performed in the previous 5 years and 6 months (CS006). Payment threshold: 45-80%

Guide URL:

<http://preview.pulse-intelligence.co.uk/guide/maximise-your-qof-cervical-screening/>