

NHS Kent and Medway GP Scorecard 2011-12

To search for the required practice **DELETE** any text and please start typing the practice code or practice name. Matching Practices will appear in the picklist below for selection.

Double click on the required practice

Practice Code and Name	G82062 - Parrock Street Practice
Clinical Commissioning Group (CCG)	DGS

Key to Star Ratings	
★ ★ ★	Performing at or above benchmark or expected level (performing well)
★ ★	Performing slightly below benchmark or expected level (performing fairly well)
★	Performing below benchmark or expected level

Practice List Data (Number of Patients at the Practice)

This shows how much the practice list size (number of patients) has changed over the year. Most practices have reasonably static list sizes. Significant changes (eg, 10% plus) are generally due to practices merging.

No of Patients on the Practice List at 31.3.11	2544
No of Patients on the Practice List at 31.3.12	2556
% Change + or -	0.47%

Screening and Prevention Performance

Note that the percentage achievement shown below is for those patients who received the service. Additional patients may have been invited for the service, but declined to receive it. In this section, achievement is measured against the national benchmark (where it exists) or Kent and Medway benchmark (where no national benchmark exists, usually based on the mid point of all data). Practices achieve 3 stars (***) for achieving benchmark and above.

	Benchmark Achievement %	Kent and Medway Average %	DGS CCG Average %	Practice Achievement %	Practice Star Rating
Influenza Immunisation - Over 65s % of patients who had a 'flu vaccination	75.0%	73.4%	72.1%	71.5%	★ ★
Influenza Immunisation Under 65s in a clinical risk group % of patients who had a 'flu vaccination	60.0%	44.6%	44.0%	46.3%	★
Pneumococcal immunisations for over 65s % of patients who had a vaccination <i>Local benchmark for Kent and Medway</i>	67.0%	68.2%	68.8%	24.7%	★
Cervical Screening Programme % of eligible females who had a smear	80.0%	80.8%	81.3%	75.7%	★ ★

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Quality and Outcomes Framework

The Quality and Outcomes Framework (QOF) is a voluntary part of the GP Contract. It is an annual reward and incentive programme for all GP surgeries in England. The QOF has four main components, known as domains. Each domain consists of a set of measures of achievement, known as indicators, against which practices score points according to their level of achievement. Achievement shown is the % of points achieved, with 3 Stars (***) for achieving local (Kent and Medway) benchmark and above.

	Benchmark Achievement %	Kent and Medway Average %	DGS CCG Average %	Practice Achievement %	Practice Star Rating
QOF Overall Achievement	98%	96%	89%	88.6%	★★
QOF Clinical Domain	99%	97%	90%	91.2%	★★
Smoking - % of patients aged 15 and over who have a smoking status recorded within the preceding 27 months	93%	85%	86%	85.2%	★★

Patient Access and Experience

Patient views of access to the surgery, and the overall experience of the surgery, as reported against questions in the national GP Patient Survey. (The following results are based on weighted population)

	Benchmark Achievement %	Kent and Medway Average %	CCG Average %	Practice Achievement %	Practice Star Rating
% of patients easily able to get through to someone at the surgery on the phone	74.0%	76.8%	72.7%	87.0%	★★★
% of patients who found were easily able to get an appointment to see or speak to someone	90.0%	85.8%	84.7%	86.7%	★★
% of patients who rated their overall experience of the surgery as good	84.0%	87.7%	85.1%	86.7%	★★★

Reviewing Significant Events

Reviewing any event, incident or occurrence that caused, or could have caused, harm to anything or anyone. **Important** - a 'Yes' response is positive. This means the practice is investigating and learning from errors or omissions to prevent them happening again.

	Benchmark Achievement	Practice Achievement	Practice Star Rating
The practice has reviewed at least 3 Significant Events in the last year, to improve processes/outcomes	Yes	Yes	★★★
The practice has reviewed at least 12 Significant Events in the 3 years, to improve processes/outcomes	Yes	Yes	★★★

Hospital Attendance

Data showing, per 1000 patients, the number of attendances at A&E and the number of Emergency Admissions to hospital. The data gives an indication of the ratio per practice compared with the benchmarked achievement across NHS Kent and Medway.

Monitoring this type of information at practice level is a key element in trying to ensure appropriate use of Emergency Services as well as ensuring that these services are kept free for those who really need them. Note that practices should be below the benchmarks

	Benchmark Achievement per 1000	Kent and Medway Average	DGS CCG Average	Practice Achievement	Practice Star Rating
A&E	254	263	283	215	★★★
Emergency Admissions	89	90	83	71	★★★

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Provision of Enhanced Services

The practice offers the following services to its patients. Participation in these services is over and above the practice's contractual requirements, and is therefore voluntary on the part of the practice.

	Yes/No
Extended Hours - increase patient access to primary medical services by offering early morning/evening or weekend appointments	Yes
Minor Surgery - avoid hospital attendance through practice provision of services such as joint injections, contraceptive implants	Yes
Patient Participation - promote patient engagement through the use of Patient Groups and seek patient views through a local patient survey	Yes
Alcohol - Recording the alcohol consumption of newly registered patients aged 16 and over, and offering appropriate advice	No

Enhanced Service Practice Star Rating

Safe and Effective Prescribing

Prescribing information that indicates whether practices are considering issues of patient care and safety, as well as the appropriate use of proven effective, but lower cost, medications.

	Benchmark Achievement	DGS CCG Average	Practice Achievement	Practice Star Rating
ASTRO PU - Weighted Cost per Patient (£)	£24.33	£23.92	£17.76	★ ★ ★
Low Cost Statin prescribing - Increase use of low acquisition cost drugs (patient safety and cost) (%)	92.00%	82.18%	96.58%	★ ★ ★
Inhaled Corticosteroids - reducing use in line with national guidelines (patient safety) (Weighted quantity per 1000 patients)	13	12.13	13.64	★ ★
Drugs Acting on Benzodiazepine Receptors - reduce long term prescribing (patient safety) (Weighted quantity per 1000 patients)	1350	1862	1302	★ ★ ★
Reduce Prescribing of Higher Risk Antibiotics - reduce antibiotic resistance and hence infection development (patient safety)(%)	5.77%	6.00%	2.86%	★ ★ ★
Non Steroidal Anti Inflammatory Drugs (NSAIDS) - STAR PU (patient safety and cost) (Weighted items per 1000 patients)	900	1033	343	★ ★ ★
Ibuprofen/Naproxen as a % of all NSAID prescriptions, reducing prescribing of Diclofenac (patient safety) (%)	60%	51%	78%	★ ★ ★

Prevalence

Prevalence is the number of patients who meet certain criteria at a given point in time, in comparison with the total number of patients in the practice, expressed as a %. Eg, if the practice has 100 patients who have Asthma, and the practice has 1000 patients in total, then the practice's prevalence of Asthma is 10% (100/1000).

	Practice Prevalence %
Atrial Fibrillation	0.9
Asthma	3.0
COPD	1.5
Diabetes	5.6
CHD	3.3
Dementia	0.2
Cancer	1.0