



The
Information
Centre

for health and social care

Indicators for Quality Improvement

Full indicator list

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Ref. No.	Title	Quality Dimension	NSR Pathway	Topic
CV35	Percentage of ST-elevation myocardial infarction (STEMI) patients who received primary angioplasty within 120 minutes of call (call to balloon time)	Effectiveness	Acute Care	
CV36	Percentage of ST-elevation myocardial infarction (STEMI) patients who received thrombolytic treatment within 60 minutes of call (call to needle time) PLUS percentage of STEMI patients who received primary angioplasty within 120 minutes of call (call to balloon time)	Effectiveness	Acute Care	
CV34	Percentage of ST-elevation myocardial infarction (STEMI) patients who received thrombolytic treatment within 60 minutes of call (call to needle time)	Effectiveness	Acute Care	
RA18	Emergency readmissions to hospital within 28 days of discharge: fractured proximal femur	Effectiveness	Acute Care	
RA17	Emergency readmissions to hospital within 28 days of discharge: hip replacement surgery	Effectiveness	Acute Care	
RA20	Emergency readmissions to hospital within 28 days of discharge: stroke	Effectiveness	Acute Care	
RA24	Emergency readmissions to hospital within 28 days of discharge: hysterectomy	Effectiveness	Acute Care	
RA25	Emergency re-admissions to hospital following cholecystectomy surgery (Timescale: within 28 days of discharge)	Effectiveness	Acute Care	
RA26	Emergency re-admissions to hospital following aortic aneurysm surgery (Timescale: within 28 days of discharge)	Effectiveness	Acute Care	
CV02	Proportion of stroke patients given a brain scan within 24 hours of stroke	Effectiveness	Acute Care	
CV06	Proportion of stroke patients given a swallow screening within 24 hours of admission	Effectiveness	Acute Care	
CV13	Acute units with 5/6 key characteristics (continuous physiological monitoring; access to scanning within 3 hours of admission/24 hour brain imaging; policy for direct admission from A&E; specialist ward round at least 5 times a week; acute stroke protocols/guidelines)	Effectiveness	Acute Care	
CV14	Acute units with access to scanning for patients with a stroke within 3 hours of admission.	Effectiveness	Acute Care	

CV01	Proportion of stroke patients given Aspirin or alternative e.g. clopidogrel within 48 hours of stroke (secondary prevention)	Effectiveness	Acute Care	
CV10	Patients who spend at least 90% of their time on a stroke unit	Effectiveness	Acute Care	
CV20	Sites offering thrombolysis to stroke patients.	Effectiveness	Acute Care	
RA01	Emergency readmissions to hospital within 28 days of discharge (data relates to 16+ years old only)	Effectiveness	Acute Care	
WCC 2.09	Proportion of children who complete MMR immunisation by 2nd Birthday	Effectiveness	Children's Health	
WCC 2.10	Proportion of children who complete MMR immunisation (1st and 2nd dose) by their 5th Birthday	Effectiveness	Children's Health	
WCC 2.11	Proportion of children who complete DTP immunisation by their 5th Birthday	Effectiveness	Children's Health	
CF04	Services for children in hospital: cover for serious paediatric emergencies	Effectiveness	Children's Health	
CF05	Services for children in hospital: percentage trained in paediatric life support	Effectiveness	Children's Health	
CF06	Services for children in hospital: percentage trained in child protection	Effectiveness	Children's Health	
CF01	Number of hospital occupied bed days on adult psychiatric wards of patients aged under 16, on admission, under the care of a psychiatric specialist	Effectiveness	Children's Health	
CF02	Number of hospital occupied bed days on adult psychiatric wards of patients aged 16 or 17, on admission, under the care of a psychiatric specialist	Effectiveness	Children's Health	
QOF PC 2	The practice has regular (at least 3 monthly) multidisciplinary case review meetings where all patients on the palliative care register are discussed	Effectiveness	End of Life Care	
QOF PC 3	The practice has a complete register available of all patients in need of palliative care/support irrespective of age	Effectiveness	End of Life Care	
WCC 3.24	Percentage of all deaths that occur at home	Effectiveness	End of Life Care	
QOF LD 1	The practice can produce a register of patients with learning disabilities	Effectiveness	Learning disabilities	
QOF AF 4	The percentage of patients with atrial fibrillation diagnosed after 1 April 2008 with ECG or specialist confirmed diagnosis	Effectiveness	Long Term Conditions	

QOF AF 1	The practice can produce a register of patients with atrial fibrillation	Effectiveness	Long Term Conditions	
QOF AF 3	The percentage of patients with atrial fibrillation who are currently treated with anti-coagulation drug therapy or an anti-platelet therapy	Effectiveness	Long Term Conditions	
QOF CANCER 3	The percentage of patients with cancer, diagnosed within the last 18 months who have a patient review recorded as occurring within 6 months of the practice receiving confirmation of the diagnosis	Effectiveness	Long Term Conditions	
CWT 1	Percentage of patients first seen by a specialist within two weeks when urgently referred with suspected cancer	Effectiveness	Long Term Conditions	
QOF CANCER 1	The practice can produce a register of all cancer patients defined as a 'register of patients with a diagnosis of cancer excluding non-melanotic skin cancers from 1 April 2003	Effectiveness	Long Term Conditions	
VSA09	Extension of NHS Breast Screening Programme to women aged 47-49 and 71-73	Effectiveness	Long Term Conditions	
VSA10	Extension of NHS Bowel Cancer Screening Programme to men and women aged up to 75	Effectiveness	Long Term Conditions	
VSA15	All women to receive results of cervical screening tests within two weeks	Effectiveness	Long Term Conditions	
WCC 2.23	Proportion of women aged 25-49 and 50-64 screened for cervical cancer	Effectiveness	Long Term Conditions	
VSA08	Breast Symptom Two Week Wait	Effectiveness	Long Term Conditions	
VSA11	Cancer 31-Day Subsequent Treatments Target (Surgery and Drug Treatments)	Effectiveness	Long Term Conditions	
VSA12	Cancer 31-Day Subsequent Treatments Target (Radiotherapy)	Effectiveness	Long Term Conditions	
VSA13	Extended 62-Day Cancer Treatment Targets	Effectiveness	Long Term Conditions	
WCC 2.25	Percentage of patients waiting no more than 31 days for cancer treatment	Effectiveness	Long Term Conditions	
QOF CHD 1	The practice can produce a register of patients with coronary heart disease	Effectiveness	Long Term Conditions	
QOF CHD 2	The percentage of patients with newly diagnosed angina (diagnosed after 1 April 2003) who are referred for exercise testing and/or specialist assessment	Effectiveness	Long Term Conditions	
QOF CHD 5	The percentage of patients with coronary heart disease whose notes have a record of blood pressure in the previous 15 months	Effectiveness	Long Term Conditions	

QOF CKD 2	The percentage of patients on the CKD register whose notes have a record of blood pressure in the previous 15 months	Effectiveness	Long Term Conditions	
QOF CKD 1	The practice can produce a register of patients aged 18 years and over with CKD (US National Kidney Foundation: Stage 3 to 5 CKD)	Effectiveness	Long Term Conditions	
QOF CKD 3	The percentage of patients on the CKD register in whom the last blood pressure reading, measured in the previous 15 months, is 140/85 or less	Effectiveness	Long Term Conditions	
QOF CKD 5	The percentage of patients on the CKD register with hypertension and proteinuria who are treated with an angiotensin converting enzyme inhibitor (ACE-I) or angiotensin receptor blocker (ARB) (unless a contraindication or side effects are recorded)	Effectiveness	Long Term Conditions	
QOF HF 1	The practice can produce a register of patients with heart failure	Effectiveness	Long Term Conditions	
QOF BP 1	The practice can produce a register of patients with established hypertension	Effectiveness	Long Term Conditions	
QOF STROKE 1	The practice can produce a register of patients with stroke or TIA	Effectiveness	Long Term Conditions	
CV47	Percentage of acute coronary syndrome patients who are seen by a cardiologist during admission.	Effectiveness	Long Term Conditions	
CV37	Participation rates in the Heart Failure Audit	Effectiveness	Long Term Conditions	
CV38	Participation rates in the Cardiac Rehabilitation Audit	Effectiveness	Long Term Conditions	
CV16	Development of continuing education programmes on stroke units for qualified and unqualified staff	Effectiveness	Long Term Conditions	
CV09	Proportion of sites with a community stroke team for longer term management attached to the stroke multidisciplinary team	Effectiveness	Long Term Conditions	
CV21	Proportion of sites with formal links to patient/carer groups	Effectiveness	Long Term Conditions	
CA36	Percentage of bowel cancer cases where there is a histological report on the presence or absence of tumour in the resection margin	Effectiveness	Long Term Conditions	
CA40	Median number of lymph nodes examined in surgical specimen	Effectiveness	Long Term Conditions	
CA41	Histological Confirmation Rate	Effectiveness	Long Term Conditions	

VSBO6	Percentage of women in the relevant PCT population who have seen a midwife or a maternity healthcare professional, for health and social care assessment of needs, risks and choices by 12 weeks and 6 days of pregnancy	Effectiveness	Maternity and Newborn	
VSBI1	Prevalence of Breastfeeding at 6-8 weeks	Effectiveness	Maternity and Newborn	
WCC 2.06	Smoking during pregnancy	Effectiveness	Maternity and Newborn	
NNAP 1	100% of eligible babies to receive Retinopathy of prematurity (ROP) screening in line with current RCPCH/RCOphth/BAPM guidance.	Effectiveness	Maternity and Newborn	
NNAP 2	100% of babies 28 weeks gestation should have their temperature checked within the first hour after birth.	Effectiveness	Maternity and Newborn	
NNAP 3	95% of babies are treated within their local network.	Effectiveness	Maternity and Newborn	
NNAP 4	95% of babies treated with adequate number of nursing staff	Effectiveness	Maternity and Newborn	
NNAP 5	98% of babies receive care in appropriate level of unit	Effectiveness	Maternity and Newborn	
NNAP 6	Proportion of survivors <30w gestation without disability at 2 years in keeping with national rates for similar units	Effectiveness	Maternity and Newborn	
QOF DEM 2	The percentage of patients diagnosed with dementia whose care has been reviewed in the previous 15 months	Effectiveness	Mental Health	
QOF DEM 1	The practice can produce a register of patients diagnosed with dementia	Effectiveness	Mental Health	
QOF DEP 2	In those patients with a new diagnosis of depression, recorded between the preceding 1 April to 31 March, the percentage of patients who have had an assessment of severity at the outset of treatment using an assessment tool validated for use in primary care	Effectiveness	Mental Health	
QOF DEP 1	The percentage of patients on the diabetes register and/or the CHD register for whom case finding for depression has been undertaken on one occasion during the previous 15 months using two standard screening questions	Effectiveness	Mental Health	

QOF MH 9	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses with a review recorded in the preceding 15 months. In the review there should be evidence that the patient has been offered routine health promotion and prevention advice appropriate to their age, gender and health status	Effectiveness	Mental Health	
QOF MH 4	The percentage of patients on lithium therapy with a record of serum creatinine and TSH in the preceding 15 months	Effectiveness	Mental Health	
QOF MH 6	The percentage of patients on the register who have a comprehensive care plan documented in the records agreed between individuals, their family and/or carers as appropriate	Effectiveness	Mental Health	
QOF MH 7	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who do not attend the practice for their annual review who are identified and followed up by the practice team within 14 days of non-attendance	Effectiveness	Mental Health	
QOF MH 8	The practice can produce a register of people with schizophrenia, bipolar disorder and other psychoses	Effectiveness	Mental Health	
QOF MH 5	The percentage of patients on lithium therapy with a record of lithium levels in the therapeutic range within the previous 6 months	Effectiveness	Mental Health	
MH12	IAPT Key Performance Indicators via Omnibus Survey from Oct-Dec 2008	Effectiveness	Mental Health	
LT25	Approach rate - The percentage of potential donors for whom solid organ donation was considered, whose family were approached for consent to donation	Effectiveness	Other	
LT26	Consent rate - The percentage of potential donors whose families were approached or made the approach for consent to donation who gave consent	Effectiveness	Other	
LT27	Conversion rate - The percentage of potential donors who became actual donors	Effectiveness	Other	
LT24	Referral rate - The percentage of potential donors referred to a co-ordinator	Effectiveness	Other	
CA27	Pathology services: percentage compliance with 3D measures	Effectiveness	Planned Care	Cancer
CA28	Imaging services: percentage compliance with 3B measures	Effectiveness	Planned Care	Cancer
CA29	Radiotherapy: percentage compliance with 3E measures	Effectiveness	Planned Care	Cancer

CA51	Compliance with 3C-100 to 3C-500 measures (chemotherapy services)	Effectiveness	Planned Care	Cancer
CA45	Proportion of incident cases reviewed by Multi-Disciplinary Team (MDT) for all cancers	Effectiveness	Planned Care	Cancer
CA01	Percentage compliance with Peer Review by team (breast, lung, colorectal, local and specialist gynaecology, local and specialist urology (including supranetwork testicular and penile, haematology and head & neck)	Effectiveness	Planned Care	Cancer
QOF CHD 6	The percentage of patients with coronary heart disease in whom the last blood pressure reading (measured in the previous 15 months) is 150/90 or less	Effectiveness	Planned Care	Cardiovascular
QOF CHD 7	The percentage of patients with coronary heart disease whose notes have a record of total cholesterol in the previous 15 months	Effectiveness	Planned Care	Cardiovascular
QOF CHD 8	The percentage of patients with coronary heart disease whose last measured total cholesterol (measured in the previous 15 months) is 5mmol/l or less	Effectiveness	Planned Care	Cardiovascular
QOF CHD 9	The percentage of patients with coronary heart disease with a record in the previous 15 months that aspirin, an alternative anti-platelet therapy, or an anti-coagulant is being taken (unless a contraindication or side-effects are recorded)	Effectiveness	Planned Care	Cardiovascular
QOF CHD 10	The percentage of patients with coronary heart disease who are currently treated with a beta blocker (unless a contraindication or side-effects are recorded)	Effectiveness	Planned Care	Cardiovascular
QOF CHD 11	The percentage of patients with a history of myocardial infarction (diagnosed after 1 April 2003) who are currently treated with an ACE inhibitor or Angiotensin II antagonist	Effectiveness	Planned Care	Cardiovascular
QOF CHD 12	The percentage of patients with coronary heart disease who have a record of influenza immunisation in the preceding 1 September to 31 March	Effectiveness	Planned Care	Cardiovascular
QOF HF 2	The percentage of patients with a diagnosis of heart failure (diagnosed after 1 April 2006) which has been confirmed by an echocardiogram or by specialist assessment	Effectiveness	Planned Care	Cardiovascular
QOF HF 3	The percentage of patients with a current diagnosis of heart failure due to LVD who are currently treated with an ACE inhibitor or Angiotensin Receptor Blocker, who can tolerate therapy and for whom there is no contra-indication	Effectiveness	Planned Care	Cardiovascular

QOF BP 4	The percentage of patients with hypertension in whom there is a record of the blood pressure in the previous 9 months	Effectiveness	Planned Care	Cardiovascular
QOF BP 5	The percentage of patients with hypertension in whom the last blood pressure (measured in the previous 9 months) is 150/90 or less	Effectiveness	Planned Care	Cardiovascular
CV48	30 day mortality after first time CABG	Effectiveness	Planned Care	Cardiovascular
CV49	30 day mortality after first time aortic valve replacement	Effectiveness	Planned Care	Cardiovascular
CV52	30 day mortality following congenital heart disease surgery	Effectiveness	Planned Care	Cardiovascular
CV29	Percentage of patients following myocardial infarction discharged on aspirin	Effectiveness	Planned Care	Cardiovascular
CV30	Percentage of patients following myocardial infarction discharged on beta-blockers	Effectiveness	Planned Care	Cardiovascular
CV31	Percentage of patients following myocardial infarction discharged on statins	Effectiveness	Planned Care	Cardiovascular
CV32	Percentage of patients following myocardial infarction discharged on ACE inhibitors	Effectiveness	Planned Care	Cardiovascular
CV33	Percentage of patients following myocardial infarction discharged on theinopyridine (clopidogrel)	Effectiveness	Planned Care	Cardiovascular
QOF PP 1	In those patients with a new diagnosis of hypertension (excluding those with pre-existing CHD, diabetes, stroke and/or TIA) recorded between the preceding 1 April and 31 March: the percentage of patients who have had a face to face cardiovascular risk assessment at the outset of diagnosis (within three months of the initial diagnosis) using an agreed risk assessment treatment tool	Effectiveness	Planned Care	Cardiovascular
QOF PP 2	The percentage of people with hypertension diagnosed after 1 April 2009 who are given lifestyle advice in the last 15 months for: increasing physical activity, smoking cessation, safe alcohol consumption and healthy diet	Effectiveness	Planned Care	Cardiovascular
QOF COPD 12	The percentage of all patients with COPD diagnosed after 1st April 2008 in whom the diagnosis has been confirmed by post bronchodilator spirometry	Effectiveness	Planned Care	COPD
QOF COPD 10	The percentage of patients with COPD with a record of FeV1 in the previous 15 months	Effectiveness	Planned Care	COPD
QOF COPD 1	The practice can produce a register of patients with COPD	Effectiveness	Planned Care	COPD

QOF COPD 8	The percentage of patients with COPD who have had influenza immunisation in the preceding 1 September to 31 March	Effectiveness	Planned Care	COPD
QOF COPD 13	The percentage of patients with COPD who have had a review, undertaken by a healthcare professional, including an assessment of breathlessness using the MRC dyspnoea score in the preceding 15 months	Effectiveness	Planned Care	COPD
QOF COPD 11	COPD11 - The percentage of patients with COPD receiving inhaled treatment in whom there is a record that inhaler technique has been checked in the previous 15 months	Effectiveness	Planned Care	COPD
QOF DM 21	The percentage of patients with diabetes who have a record of retinal screening in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF DM 9	The percentage of patients with diabetes with a record of the presence or absence of peripheral pulses in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF DM 10	The percentage of patients with diabetes with a record of neuropathy testing in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF DM 11	The percentage of patients with diabetes who have a record of the blood pressure in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF DM 13	The percentage of patients with diabetes who have a record of micro-albuminuria testing in the previous 15 months (exception reporting for patients with proteinuria)	Effectiveness	Planned Care	Diabetes
QOF DM 22	The percentage of patients with diabetes who have a record of estimated glomerular filtration rate (eGFR) or serum creatinine testing in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF DM 19	The practice can produce a register of all patients aged 17 years and over with diabetes mellitus, which specifies whether the patient has Type 1 or Type 2 diabetes	Effectiveness	Planned Care	Diabetes
QOF DM 2	The percentage of patients with diabetes whose notes record BMI in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF DM 5	The percentage of patients with diabetes who have a record of HbA1c or equivalent in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF DM 12	The percentage of patients with diabetes in whom the last blood pressure reading is 145/85 or less	Effectiveness	Planned Care	Diabetes

QOF DM 15	The percentage of patients with diabetes with a diagnosis of proteinuria or micro-albuminuria who are treated with ACE inhibitors (or A2 antagonists)	Effectiveness	Planned Care	Diabetes
QOF DM 16	The percentage of patients with diabetes who have a record of total cholesterol in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF DM 17	The percentage of patients with diabetes whose last measured total cholesterol within the previous 15 months is 5mmol/l or less	Effectiveness	Planned Care	Diabetes
QOF DM 18	The percentage of patients with diabetes who have had influenza immunisation in the preceding 1 September to 31 March	Effectiveness	Planned Care	Diabetes
QOF DM 23	The percentage of patients with diabetes in whom the last HbA1c is 7 or less (or equivalent test/reference range depending on local laboratory) in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF DM 24	The percentage of patients with diabetes in whom the last HbA1c is 8 or less (or equivalent test/reference range depending on local laboratory) in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF DM 25	The percentage of patients with diabetes in whom the last HbA1c is 9 or less (or equivalent test/reference range depending on local laboratory) in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF DM 7	The percentage of patients with diabetes in whom the last HbA1c is 10 or less (or equivalent test/reference range depending on local laboratory) in the previous 15 months	Effectiveness	Planned Care	Diabetes
QOF ASTHMA 8	The percentage of patients aged eight and over diagnosed as having asthma from 1 April 2006 with measures of variability or reversibility	Effectiveness	Planned Care	Other
QOF ASTHMA 3	The percentage of patients with asthma between the ages of 14 and 19 in whom there is a record of smoking status in the previous 15 months	Effectiveness	Planned Care	Other
QOF ASTHMA 6	The percentage of patients with asthma who have had an asthma review in the previous 15 months	Effectiveness	Planned Care	Other
QOF ASTHMA 1	The practice can produce a register of patients with asthma, excluding patients with asthma who have been prescribed no asthma-related drugs in the previous twelve months	Effectiveness	Planned Care	Other
QOF EPILEPSY 6	The percentage of patients age 18 and over on drug treatment for epilepsy who have a record of seizure frequency in the previous 15 months	Effectiveness	Planned Care	Other

QOF EPILEPSY 5	The practice can produce a register of patients aged 18 and over receiving drug treatment for epilepsy	Effectiveness	Planned Care	Other
QOF EPILEPSY 7	The percentage of patients aged 18 and over on drug treatment for epilepsy who have a record of medication review involving the patient and/or carer in the previous 15 months	Effectiveness	Planned Care	Other
QOF EPILEPSY 8	The percentage of patients aged 18 and over on drug treatment for epilepsy who have been seizure free for the last 12 months recorded in the previous 15 months	Effectiveness	Planned Care	Other
QOF THYROID 2	The percentage of patients with hypothyroidism with thyroid function tests recorded in the previous 15 months	Effectiveness	Planned Care	Other
QOF THYROID 1	The practice can produce a register of patients with hypothyroidism	Effectiveness	Planned Care	Other
TC05	Percentage of BADS (British Association of Day Surgery) Directory of Procedures (including electronic assessment) carried out as a day case or within appropriate length of stay	Effectiveness	Planned Care	Other
MR30	Mortality following a knee replacement	Effectiveness	Planned Care	Other
MR31	Mortality following a hip replacement	Effectiveness	Planned Care	Other
TC01	18 weeks Referral to Treatment (RTT) - everyone who chooses to be treated within 18 weeks, for whom it is clinically appropriate, will be seen within 18 weeks	Effectiveness	Planned Care	Other
TC03	Diagnostics waiting times: percentage of patients waiting under 6 weeks	Effectiveness	Planned Care	Other
QOF DEP 3	In those patients with a new diagnosis of depression and assessment of severity recorded between the preceding 1 April to 31 March, the percentage of patients who have had a further assessment of severity 5-12 weeks (inclusive) after the initial recording of the assessment of severity. Both assessments should be completed using an assessment tool validated for use in primary care	Effectiveness	Planned Care	Other
QOF CKD 6	The percentage of patients on the CKD register whose notes have a record of an albumin:creatinine ratio (or protein:creatinine ratio) test in the previous 15 months	Effectiveness	Planned Care	Other
QOF SH 1	The practice can produce a register of women who have been prescribed any method of contraception at least once in the last year, or other appropriate interval e.g. 5 years for an IUS	Effectiveness	Planned Care	Other

QOF SH 2	The percentage of women prescribed an oral or patch contraceptive method who have also received information from the practice about long acting reversible methods of contraception in the previous 15 months	Effectiveness	Planned Care	Other
QOF SH 3	The percentage of women prescribed emergency hormonal contraception at least once in the year by the practice who have received information from the practice about long acting reversible methods of contraception at the time of, or within one month of, the prescription	Effectiveness	Planned Care	Other
HES 1	Pressure ulcer incidence per 10,000 patients	Effectiveness	Planned Care	Other
QOF STROKE 13	The percentage of new patients with a stroke or TIA who have been referred for further investigation	Effectiveness	Planned Care	Stroke
QOF STROKE 5	The percentage of patients with TIA or stroke who have a record of blood pressure in the notes in the preceding 15 months	Effectiveness	Planned Care	Stroke
QOF STROKE 7	The percentage of patients with TIA or stroke who have a record of total cholesterol in the last 15 months	Effectiveness	Planned Care	Stroke
QOF STROKE 8	The percentage of patients with TIA or stroke whose last measured total cholesterol (measured in the previous 15 months) is 5mmol/l or less	Effectiveness	Planned Care	Stroke
QOF STROKE 6	The percentage of patients with a history of TIA or stroke in whom the last blood pressure reading (measured in the previous 15 months) is 150/90 or less	Effectiveness	Planned Care	Stroke
QOF STROKE 12	The percentage of patients with a stroke shown to be non-haemorrhagic, or a history of TIA, who have a record that an anti-platelet agent (aspirin, clopidogrel, dipyridamole or a combination), or an anti-coagulant is being taken (unless a contraindication or side effects are recorded)	Effectiveness	Planned Care	Stroke
QOF STROKE 10	The percentage of patients with TIA or stroke who have had influenza immunisation in the preceding 1 September to 31 March	Effectiveness	Planned Care	Stroke
CV03	Proportion of stroke patients given a mood assessment	Effectiveness	Planned Care	Stroke
CV08	Proportion of sites with early supported discharge team attached to the stroke multidisciplinary team	Effectiveness	Planned Care	Stroke
CV05	Proportion of stroke patients who see Physiotherapist within 72 hours of admission	Effectiveness	Planned Care	Stroke
CV11	Number of higher risk TIA cases who are scanned and treated within 24 hours	Effectiveness	Planned Care	Stroke

CV19	Average waiting time for neurovascular clinics	Effectiveness	Planned Care	Stroke
CV04	Proportion of stroke patients who see occupational therapist within 4 working days	Effectiveness	Planned Care	Stroke
QOF OB 1	The practice can produce a register of patients aged 16 and over with a Body Mass Index (BMI) greater than or equal to 30 in the previous 15 months	Effectiveness	Staying Healthy	
QOF Smoking 3	The percentage of patients with any (or any combination of) the following conditions: coronary heart disease, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses, whose notes record smoking status in the previous 15 months	Effectiveness	Staying Healthy	
QOF Smoking 4	The percentage of patients with any (or any combination of) the following conditions: coronary heart disease, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses, who smoke and whose notes contain a record that smoking cessation advice or referral to a specialist service, where available, has been offered within the previous 15 months	Effectiveness	Staying Healthy	
VSC11	People with a long-term condition feeling independent and in control of their condition	Patient experience	Long Term Conditions	
ERIC1	Total Backlog Cost per Occupied Floor Area	Patient experience	Other	
PE49	Score for patients who reported that the hospital room or ward was very or fairly clean	Patient experience	Other	
PE50	Score for patients who reported that the toilets and bathrooms in hospital were very or fairly clean	Patient experience	Other	
PE53	Score for patients who reported that doctors always or sometimes washed or cleaned their hands between touching patients	Patient experience	Other	
PE54	Score for patients who reported that nurses always or sometimes washed or cleaned their hands between touching patients	Patient experience	Other	
PE41	Score for patients who reported that they always or sometimes had confidence and trust in the doctors treating them	Patient experience	Other	
PE42	Score for patients who reported that when they had important questions to ask a nurse, they always or sometimes got answers they could understand	Patient experience	Other	

PE43	Score for patients who reported that they always or sometimes had confidence and trust in the nurses treating them	Patient experience	Other	
PE36	Score for patients who said they were given enough privacy when being examined or treated	Patient experience	Other	
PE37	Score for patients who overall felt they were treated with respect and dignity whilst in hospital	Patient experience	Other	
PE38	Score for patients who reported that the doctors did not talk in front of them as if they were not there	Patient experience	Other	
PE39	Score for patients who reported that the nurses did not talk in front of them as if they were not there	Patient experience	Other	
PE56	Score for whether given enough privacy when being examined or treated in the Emergency Department	Patient experience	Other	
PE48	Score for patients who reported that they were not bothered by noise at night from hospital staff	Patient experience	Other	
PE51	Score for patients who reported that the hospital food was very good or good	Patient experience	Other	
PE52	Score for patients who reported that they were offered a choice of food	Patient experience	Other	
PEAT 1	Environment	Patient experience	Other	
PEAT 2	Food and Food Service	Patient experience	Other	
PEAT 3	Privacy and dignity	Patient experience	Other	
PEXIS1	Patient Experience Headline score for Access & Waiting	Patient experience	Other	
PEXIS2	Patient Experience Headline score for safe high quality coordinated care	Patient experience	Other	
PEXIS3	Patient Experience Headline score for Better Information, more choice	Patient experience	Other	
PEXIS4	Patient Experience Headline score for Building Closer Relationships	Patient experience	Other	
PEXIS5	Patient Experience Headline score for Clean, comfortable, friendly place to be	Patient experience	Other	
PEXIS6	Patient Experience Headline score for Focus on the person	Patient experience	Other	
PEXIS7	Patient Experience Headline score for organisation that learns from experience	Patient experience	Other	
PEXIS8	Patient Experience Headline score for Focus on Dignity and Respect	Patient experience	Other	

PE58	Score for staffing effectiveness - patient reported nurse staffing adequacy	Patient experience	Other	
CA25	Quality of Patient Experience: percentage compliance with patient experience measures. (This indicator is also included in the Patient Experience section)	Patient experience	Planned Care	
PE07	Score for patients who reported that their family or someone close had the opportunity to talk to a doctor if they wanted to	Patient experience	Planned Care	
PE08	Score for patients who said that they found a member of hospital staff to talk to about their worries and fears	Patient experience	Planned Care	
PE15	Score for patients who reported that the 'right amount' of information was given about conditions/treatments by healthcare professionals	Patient experience	Planned Care	
PE16	Score for patients who reported that they were involved as much as they wanted to be in decisions about their care and treatment	Patient experience	Planned Care	
PE18	Score for patients who reported that when leaving hospital they were given written or printed information about what they should or should not do	Patient experience	Planned Care	
PE19	Score for patients who reported that staff explained the purpose of the medicines they were to take at home in a way they could understand	Patient experience	Planned Care	
PE21	Score for patients who reported that staff told them how to take their medication in a way they could understand	Patient experience	Planned Care	
PE22	Score for patients who reported they were given clear written or printed information about their medicines	Patient experience	Planned Care	
PE26	Score for patients who reported that they received copies of letters sent between hospital doctors and their GP	Patient experience	Planned Care	
PE29	Score for patients who reported that whilst in hospital they saw posters or leaflets explaining how to complain about the care or treatment they received	Patient experience	Planned Care	
PE33	Score for patient who reported that after moving wards they did not share a sleeping area with a member of the opposite sex	Patient experience	Planned Care	
PE34	Score for patients who reported that they did not have to use the same bathroom or shower area as patients of the opposite sex	Patient experience	Planned Care	

PE35	Score for patients who said they were given enough privacy when discussing their condition or treatment	Patient experience	Planned Care	
PE06	Score for patients who reported that they always or sometimes got enough help from staff to eat their meals	Patient experience	Planned Care	
PE04	Score for patients who reported that their admission date was not changed by the hospital	Patient experience	Planned Care	
PE05	Score for patients who reported that on arrival at the hospital they did not have to wait a long time to get a bed on a ward	Patient experience	Planned Care	
PE17	Score for patients who reported that they were involved in decisions about their discharge from hospital	Patient experience	Planned Care	
PE09	Score for patients who thought that the hospital staff did everything they could to help control their pain	Patient experience	Planned Care	
PE28	Score of for patients who reported that during their hospital stay they were asked to give their views on the quality of care	Patient experience	Planned Care	
PE27	Percentage of staff who reported that in the last month they had seen any errors, near misses or incidents that could have hurt patients/service users	Patient experience	Planned Care	
PE20	Score for patients who reported that staff told them about medication side effects to watch out for when they went home	Patient experience	Planned Care	
PE23	Score for patients who reported that staff told them about any danger signals to watch out for after they went home	Patient experience	Planned Care	
PE24	Score for patients who reported that the doctors or nurses gave their family or someone close to them all the information they needed to help care for them	Patient experience	Planned Care	
PE25	Score for patients who reported they were told who to contact if they were worried about their condition or treatment after they left hospital	Patient experience	Planned Care	
PE11	Percentage of patients very or fairly satisfied with the time they had to wait from being referred by their GP to when they saw the hospital specialist	Patient experience	Planned Care	
LT28	Renal specific Methicillin-Resistant Staphylococcus Aureus (MRSA) rate (indicator also in Healthcare Associated Infections section)	Safety	Long Term Conditions	
HC12	Bloodstream infections - Central line	Safety	Planned Care	
PS39	Incidence of MRSA bacteraemia	Safety	Planned Care	

VSA03	Incidence of clostridium difficile	Safety	Planned Care	
HC21	Surgical site infections - Orthopaedic	Safety	Planned Care	
PS08	Incidents - acute trusts compliant with safety standards - Care Quality Commission's Annual Health Check data	Safety	Planned Care	
PS09	Alerts - acute trusts compliant with safety standards - Care Quality Commission's Annual Health Check data	Safety	Planned Care	
PS11	Guidance - acute trusts compliant with safety standards - Care Quality Commission's Annual Health Check data	Safety	Planned Care	
PS12	Infection - acute trusts compliant with safety standards - Care Quality Commission's Annual Health Check data	Safety	Planned Care	
PS13	Devices (4b) - acute trusts compliant with safety standards - Care Quality Commission's Annual Health Check data	Safety	Planned Care	
PS14	Devices (4c) - acute trusts compliant with safety standards - Care Quality Commission's Annual Health Check data	Safety	Planned Care	
PS15	Medicines - acute trusts compliant with safety standards - Care Quality Commission's Annual Health Check data	Safety	Planned Care	
NRLS 1	Consistent reporting of patient safety events reported to the Reporting and Learning System (RLS)	Safety	Planned Care	
PS24	Availability of hand washing facilities	Safety	Planned Care	
PS37	Sickness Absence Rate	Safety	Planned Care	
NRLS 2	Timely reporting of patient safety events reported to the Reporting and Learning System (RLS)	Safety	Planned Care	
NRLS 3	Rate of patient safety events occurring in trusts that were submitted to the Reporting and Learning System (RLS)	Safety	Planned Care	
MH06	The proportion of those patients on Care programme approach (CPA) discharged from inpatient care who are followed up within 7 days	Safety	Mental Health	
MH16	NI 149: Adults receiving secondary mental health services on Care Programme Approach (CPA) in settled accommodation	Safety	Mental Health	
MH17	NI150: Adults receiving secondary mental health services on Care Programme Approach (CPA) in employment	Safety	Mental Health	