



NWL Enhanced Service (ES)Templates EMIS

Primary Care System Facilitation Team NHS North West London

Information

All screenshots have been taken using a test patient.

Some of the dates in the screenshots are quite old (as this is a test patient). Your dates in your patient template will show previous financial years, but the latest should mostly be for this financial year only (other than diabetes which is from 1st January 2024 to 31st March 2025)

In some templates you may find that an indicator may be in the last X years depending on particular circumstances. There will be a note beside the indicator to advise you of this.

Some of the in depth template pages do not have comments as they are self explanatory



All NWL ES Templates – Design Format

- Enhanced Service Titles: All templates have the headers on the top right of the page.
- **Pages:** The majority of the templates have several pages. These can be jumped to by clicking on the page name on the left hand side of the template. Please be aware that some of the pages are very long and you may need to cursor down, or use the slider to find certain parts of the template
- Areas marked with an Asterisk: means they are Minimum Data Set (MDS) or KPI items which you need to complete for payment in most cases. We will comment on any areas that are slightly different.
- MDS/KPI: You will find the MDS (KPIs) for each Service mostly at the top of each page. If not possible to fit on the page you may find it on other pages. – Usually the contract specification page or information page



All NWL ES Templates – Design Format

- Save: Don't forget to save your patient after completing the template
- Contact the Team: The Information page states how to contact the team if you have a query or feedback regarding the template



The easiest way to find the Enhanced Service templates is to use the F12 button on your keyboard.

Adding NWL F12 Template Launcher to the EMIS Protocol Launcher

Introduction

The NWL F12 Template launcher provides EMIS users in North West London quick access to all of the templates created and maintained by the NWL IT Primary Care Systems team. This is an easy way of accessing all the templates which have been created for local contracts and services, especially those which generate a payment.

Templates can still be accessed from the patient record in the usual way (Add > data using template > choose template from the template picker) in addition to accessing via F12.

Each user will need to configure their own F12 shortcut, following the instructions below.



Enhanced Services Template Location Cont'd

How to configure

- From within EMIS, press the F12 key on your keyboard (this can be done with or without a patient record open).
- 2. The Protocol Launcher will appear on the right-hand side of your screen. Right-click any letter which is currently blank and choose Add



3. The Protocol Picker screen will open. Type in the name of the protocol: **NWL F12 Template Launcher** and then click **Ok**.



 The NWL F12 template launcher will now be available to select from the Protocol Launcher.





ABPM Template

Ambulatory Blood Pressure Monitoring

Dares (
ARDM	North West London ICB ABPM ES 2024/25		
Ta fa mashia a	NOTE: Fields marked with * are mandatory		
Information	ES Payment Criteria		
	*Application of ambulatory blood pressure monitor	No previous entry	
	*Home visit	No previous entry	
	*Enhanced services administration	27-0ct-2023	*
	To Achieve Payment for ABPM Consultations ABPM01 Patient must be aged 18 and over AND		
	Has SNOMED code of Application of ambulatory blood pressure monitor (448678005) recorded by the provider AND		
	Has SNOMED code of Enhanced Services Administration (166221000000105) recorded at the same time as the application of the blood pressure monitor		
	Achieved coding required for ABPM01 AND		
	Has SNOMED code of Home Visit (439708006) recorded at the same time as the application of the blood pressure monitor		
	To Achieve Payment for ABPM Home Visits ABPM02 Achieved coding required for ABPM01 AND		
	Has SNOMED code of Home Visit (439708006) recorded at the same time as the application of the blood pressure monitor		
	DO NOT click 'enhanced services administration' if the ABPM was done elsewhere		
	Optional		
	Annication of ambulatory blood	27-Oct-2023	*
	pressure monitor	No previous entry	
	Removal of ambulatory blood pressure monitor	No previous entry	
	Average day interval systolic blood mmHg pressure	No previous entry	
	Average day interval diastolic blood mmHg pressure	No previous entry	
	Average home systolic blood pressure	No previous entry	
	Average home diastolic blood pressure mmHg	No previous entry	
	Ambulatory Average Daytime BP / Home BP Monitoring \geq 135/85 = Stage 1 hypertension		
	Ambulatory Average Daytime BP / Home BP Monitoring \geq 150/95 = Stage 2 hypertension		

The areas marked with an asterisk need to be completed for ES Payment

Tick the box when you apply the blood pressure monitor.

At the same time tick the box for enhanced service administration

Only tick the Home visit if you have seen the patient in their home.

Please do read notes in bold which may help you to complete the template

When returning to the template to add in the ABPM results **do not** tick Application of the Ambulatory Blood Pressure Monitor and the Enhanced Services Administration boxes again.

NWL ICS ABPM ES 2024/25	
Pages «	Disclaimer
ABPM Information	This template has been created by North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accurate. However, responsibility for ensuring the accuracy of the data produced using this template remains with the Practice; the ICB strongly recommends that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing nhsnwl.servicedesk@nhs.net . Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).
	Purpose
	The purpose of this template is to facilitate standardised data entry in line with the NWL Enhanced Service for ABPM.
	Developed by
	Developed by NWL PCS System Development team.
	Reporting
	Enhanced Service Searche Location EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v
	Version
	This template was last updated March 2024.

On this page you will find the disclaimer and feedback email address.

You will also find the purpose of the template, when it was last updated and who designed and developed it.

Clinical Searches and Reports - ABPM

Enhanced Service Search Location EMIS Enterprise S&R > NWL Enhanced Services 2024 25



Asylum Seeker – Health Screening Template 2024/25

NWL ICS Asylum Seeker ES 2024	/25					
Pages «	NWL Asylum Seeker 2023/24 ES					
KPIs		NWL Asylum Seeker Enhanced Service 2024/25				
General Health		NOTE: All of the below fields are mandatory				
Physical Health and Blood Test	1	This page contains only the mandatory fields required for an asylum seeker review. For additional supporting fields and a more detailed version of the review please use the other pages	in this template.			
Sexual Health & Antenatal	General Health					
Safequarding	*Asylum seeker		No previous entry			
Montal Lipath	*Enhanced services administration		27-Oct-2023	*		
	"Medication review done		12-Jan-2024	*		
Care Plan	*Influenza administration	✓	26-Sep-2022 Administratio	*		
Resources						
Information	Physical Health and Blood Test		20 Jun 2024 170			
	*Height (QOF)		20-Jun-2024 1/0 cm	*		
	*Weight (QOF)	kg	20-Jun-2024 70 kg	*		
	*BMI (QOF)	Calculate	20-Jun-2024 24.22 kg/m2	*		
	*BP (QOF)		20-Jun-2024 190/100 mmHg	*		
	*Pulse Rate (QOF)	beats/min	27-Apr-2022 100 beats/min	*		
	*Rhythm (QOF)		No previous entry			
	*Current Smoking Status (QOF)	v	20-Jun-2024 Ex-smoker	*		
	*Smoking cessation advice		No previous entry			
	Sexual Health & Antenatal (Female	e specific)				
	*Pregnant Finding	×	No previous entry			
	Safeguarding (select from either ch	hild or adult boxes below)				
	*Current Adult Safeguarding Concern	×	No previous entry			
		Text				
	*Current Child Safeguarding Concern	×	No previous entry	·		
	Mental Health					
	*PHQ-9 score		16-Mar-2023 6 / 27	*		
	*Mental health screening		No previous entry			
	*Care Plan					
	∐ ‴Care Plan	Text	No previous entry			
		North Work Landau TCD Archine Costane 2024/25				
	North West London ICB Asylum Seekers 2024/25 nhsnwl.servicedesk@nhs.net					

KPIs

The areas marked with an asterisk must be completed for Enhanced Services. Please ensure you tick the Enhanced Service administration code at the same time as you tick the box for Asylum Seeker

Please note (QOF). You would need to complete those areas appropriate to the patient to meet the QOF criteria for payment The other pages in this template show each area fully.

w	ICS	Asvlum	Seeker	ES	2024/25	
		,,	Deciter		202 ., 20	

WVL ICS ASYIUM Seeker ES 2024	4/20					
Pages «	General Health					
KPIs	The purpose of this health screeni health services are not linked to in	ing is to identify the health needs of the asylum seeker once they are registered with a local GP. Please note that the patient must understand why you are asking them abou mmigration procedures.	t their personal history and that			
General Health						
Physical Health and Blood Test	Asylum History					
Sexual Health & Antenatal	*Asylum seeker		No previous entry			
	*Enhanced services administration		27-Oct-2023			
Sateguarding	Lives in hotel	Text	No previous entry			
Mental Health	Country of birth	$\sim P$	No previous entry			
Care Plan	Country of origin/fleeing from	Text	No previous entry			
Resources	Date of entry to United Kingdom	23-Jul-2024	No previous entry			
Information	□ Travel method/reason for leaving country of origin	Text	No previous entry			
	□ Travelling with children - CODE TO BE ADVISED	Text	No previous entry			
	Relatives					
	Please use Registration to record Family Relationship links					
	Carer Status					
	Carer Status	×	27-Oct-2023 Is no longer a 🔌			
		Text				
	Current Health Problems					
	Current health problems	×	14-Feb-2024 Postherpetic »			
	No current problems	Text	No previous entry			
	Current Medication					
	*Medication review done	Text	12-Jan-2024 >>			

General Health (Part page - 1)

This is page is a fuller version which includes the KPIs and asks for further information regarding the patient.

The areas marked with an asterisk must be completed for Enhanced Services and Enhanced Services Administration if you have not already completed them on a previous page.

Resources	Past Medical History		
Information	Past Medical History		
	History of surgery	Text	No previous entry
	No significant medical history	Text	No previous entry
	Allergies		
	Known Allergies	×	No previous entry
	No known allergies	Text	No previous entry
	Family History		
	🗌 FH: Ischaemic heart disease	Text	No previous entry
	FH: Hypertension	Text	No previous entry
	FH: Cancer	Text	No previous entry
	🗌 FH: Diabetes mellitus	Text	No previous entry
	FH: Other known family history	✓	No previous entry
	No significant family history	Text	No previous entry
	Seasonal Vaccinations		
	*Influenza Administration	×	26-Sep-2022 Administratio »
	Not up to date with immunisations	Text	No previous entry

General Health (Part page - 2)

The areas marked with an asterisk must be completed. Please ensure you have ticked the box for completed Influenza Administration if you have not already completed them on a previous page.

NWL ICS Asylum Seeker ES 202	4/25		
Pages «	Blood Testing (over 18's)		1
KPIs	Consider the following tests as part of Health Screening, when indicated:		
General Health	FBC U+Es LFTs, Folate, B12, ferritin Vitamin D, HbA1c, Lipid profile		
Physical Health and Blood Test	Physical Examination	Ma ann ionn achai	
Sexual Health & Antenatal	Consider capturing data for:	No previous entry	
Safeguarding			
Mental Health	Addominal Examination Cardiovascular Examination		
Care Plan	• Respiratory Exam / measurement		_
Resources	*Physical Obs, BP & Pulse KPI>18 only		
Information	*Height (QOF)	20-Jun-2024 170 cm	
Inomation	*Weight (QOF) kg	20-Jun-2024 70 kg	
	*BMI (QOF) Calculate	20-Jun-2024 24.22 kg/m2 »	
	* BP (QOF) /	20-Jun-2024 190/100 mmHg 🔌	
	*Pulse rate (QOF)	27-Apr-2022 100 beats/min »	
	*Rhythm (QOF)	No previous entry	
	*Current Smoking Status (QOF)	20-Jun-2024 Ex-smoker »	
	*Smoking cessation advice (QOF) Text	No previous entry	
	*Substance Abuse (QOF)		
	Consider capturing the following tests as part of Health Screening, when indicated:		
	FBC U+Es LFTs, Folate, B12, ferritin Vitamin D, HbA1c, Lipid profile		
	Harmful substance use Text	No previous entry	
	LTBI Screening		
	Consider capturing data for Latent TB screening		
	Latent tuberculosis screening declined	No previous entry	

Physical Health and Blood test

The areas marked with an asterisk must be completed if not completed on an earlier page. Please do read notes in dark blue which may help you to complete the template

Physical Health and Blood test cont'd – Asylum Seekers – Health Screening

HIV Screening	
Consider capturing data for Sexual Health - HIV Testing	
HIV screening declined	No previous entry
Hep B & C Screening	
Consider capturing data for Sexual Health	
Hepatitis B screening declined	No previous entry
Hepatitis C screening declined	No previous entry
Notifiable Diseases	
Consider using NWL ICS UKHSA London Region Notification of Infectious Disease Form	
Chagas (if from South/Central America and pregnant) Typhoid Malaria, Schistosomiasis, Active TB, Diphtheria, Scabies	

Physical Health and Blood test

Please do read notes in dark blue which may help you to complete the template

NWL ICS Asylum Seeker ES 2024/25					
Pages «	STI & Contraception				
KPIs	Consider whether the patient needs STI testing or have any immediate contraceptive needs?				
General Health	*Female Specific Questions - over 16 y/o - Antenatal				
	*Pregnant Finding V No previous entry				
Physical Health and Blood Test	If patient is pregnant, check whether they have been referred to antenatal clinic				
Sexual Health & Antenatal	Consider Antenatal Care				
Safeguarding					
Mental Health	Female Specific Questions - FGM				
Care Plan	Consider capturing data for Female Genital Mutilation				

Please do read notes in dark blue which may help you to complete the template. The areas marked with an asterisk must be completed by using the drop down box

NL ICS Asylum Seeker ES 2024/25				
Pages «	Safeguarding			
PIs	Does the patient feel safe in the ho	tel? Are there any threats to the patient now? (See Considerations section below)		
ieneral Health	Housing - finding		25-Jan-2024 Lives in a resi »	
hysical Health and Blood Test	Adult Safeguarding			
www.l.llasth. 0. Astronatel	*Current Adult Safeguarding Concerns		No previous entry	
exual Health & Antenatal		Text		
afeguarding	*No safeguarding concern identified		No previous entry	
lental Health	Child Safeguarding			
are Plan	*Current Child Safeguarding Concerns	×	No previous entry	
esources		Text		
nformation	*No safeguarding concern identified		No previous entry	
	Considerations			
	Ask about history of sexual abuse /	torture / ill treatment (differentiate between historic vs ongoing)		
	Witnessing of war or violence	Text	No previous entry	
	Torture or rape		No previous entry	
		Text		
	Injuries from war or violence		No previous entry	
		Text		
	Fleeing homo/transphobia, as appro	opriate		
	Gender identity observations	Text	No previous entry	
	Modern slavery/trafficking	<pre></pre>	No previous entry	
		Text		
	Death of Relatives			
	Consider referral to relevant volunta	ary organisations depending on history		
	Death of Relative		No previous entry	
	Referral to voluntary organisation	Text	No previous entry	

Use the drop down boxes to complete the areas marked with an asterisk in Safeguarding Please do read notes in dark blue which may help you to complete the template

Pages «	Current Mental Health Problems			
(PIs	Consider capturing data for:			
General Health	New Active ProblemMental Health			
Physical Health and Blood Test	 PHQ9 Assessment, PHQ4 Assess 	nent, PHQ4/9 translated versions		
Sexual Health & Antenatal	*PHQ-9 Score		16-Mar-2023 6 / 27	*
Safeguarding	PHQ-9 declined		No previous entry	
Iental Health	GAD-7 Score		16-Mar-2023 4 / 21	*
Care Plan	Mental Health Symptoms	v	No previous entry	
Resources		Text		
information	Previous Mental Health Interventio	n		
	Mental Health Intervention	v	No previous entry	
		Text		
	Medication for Mental Health Proble	m		
	Consider capturing New Repeats			
	Mental health medication review done	Text	No previous entry	
	Self Harm (QOF)			
	Consider screening for mental disorde	rs		
	Self Harm History/Risk	v	No previous entry	
		Text		
	*Mental health screening		No previous entry	
	Actions/Outcomes			
	Patient given advice (IAPT Links)	Text	27-Oct-2023	*
	□ Signposting to mental health service (Crisis lines)	Text	No previous entry	
	Referral to mental health team	Text	No previous entry	

Use the drop down boxes to complete the areas marked with an asterisk in Mental Health if not already completed on previous pages Please do read notes in dark blue which may help you to complete the template

Care Plan– Asylum Seekers – Health Screening

Pages «	Care Planning			
KPIs	Please complete a Universal Care Plan (UCP) where appropriate			
General Health	*Care plan Text	No previous entry		
Physical Health and Blood Test				
Sexual Health & Antenatal				
Safeguarding				
Mental Health				
Care Plan				

The area for Care Plan marked with an asterisk must be completed if not completed on previous pages

Resources – Asylum Seekers – Health Screening

NWL ICS Asylum Seeker ES 2024	IWL ICS Asylum Seeker ES 2024/25			
Pages «	Resources			
KPIs	Training Resources Video: Universal Care Plan (UCP) https://silent-sounds.co.uk/			
General Health	https://www.refugee-action.org.uk/ https://refugeesathome.org/			
Physical Health and Blood Test	https://england.shelter.org.uk/			
Sexual Health & Antenatal	https://www.qov.uk/asylum-support/what-youll-get Reporting			
Safeguarding	NWL Enhanced Service Searches			
Mental Health	NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 03 Asylum Seeker			
Care Plan				
Resources				
Information				

IWL ICS Asylum Seeker ES 2024/25			
Pages «	Information		
KPIs	This template has been created by North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accurate. However, responsibility for ensuring the accuracy of the data produced using this template remains with the Practice; the ICB strongly recommends that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing		
General Health	nhsnwl.servicedesk@nhs.net		
Physical Health and Blood Test	Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).		
Sexual Health & Antenatal	Purpose		
Safeguarding	The purpose of this template is to provide a comprehensive data entry template for the purposes of Asylum Seeker health data collection (Asylum Seeker health screening) - the criteria have been set by LBH data reporting needs.		
Mental Health	Amendments		
Care Plan	• January 2024 - first version published		
Resources	Developed by		
Information	Developed by NVVL PCS System Development team, with guidance from NVVL Clinical 11 Leads.		
	Version		
	This template was last updated: March 2024		
Sexual Health & Antenatal Safeguarding Mental Health Care Plan Resources Information	Purpose The purpose of this template is to provide a comprehensive data entry template for the purposes of Asylum Seeker health data collection (Asylum Seeker health screening) - the criteria have been set by LBH data reporting needs. Amendments • January 2024 - first version published Developed by Developed by NWL PCS System Development team, with guidance from NWL Clinical IT Leads. Version This template was last updated: March 2024		

On this page you will find the disclaimer and feedback email address.

You will also find the purpose of the template, when it was last updated and who designed and developed it.

Clinical Searches and Reports – Asylum Seeker Health Screening

Reporting

<u>NWL Enhanced Service Searches</u> NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 03 Asylum Seeker



Atrial Fibrillation Template

North West London ICB Atrial Fibrillation AF ES 2024/25				
	NOTE: Fields marked with * are mandatory			
Payment codes				
*Electrocardiogram, single lead		No previous entry		
*Enhanced services administration		27-0ct-2023	*	
*ECG result	~	No previous entry		
Screening				
Opportunistic screening		No previous entry		
lister	^			
history	✓			
Examination				
Pulse rate	beats/min	27-Apr-2022 100 beats/min	*	
BP		20-Jun-2024 190/100 mmHg	*	
		_		
Examination				
ECG: atrial fibrillation (no P waves		No previous entry		
and irregular QRS?)		no previous energ		
Echocardiogram requested		No previous entrv		
Plan	na profila CDD 2 Mitral uzbra dicasca FCUO 2 baset failura - DND			
Consider causes: FBC, TFTS, 0+E, Dor	e prome, CKP ? Mitrai valve disease -ECHO ? neart failure - BNP			
Plan				
	×			
Anticoagulation therapy	×	No previous entry		
Diagnosis				
Type of AF	~	No previous entry		
		No previous entry		
C€ CHA2DS2-VASc Risk Score	Calculate	No previous entry		
The CHA2DS2-VASc calculator is no longer recommended for use in locally-authored templates. Use the AF Advisor template instead. Find this in Templates & Protocols > EMIS Library > Primary Care Templates.				
ORBIT replaces HAS-BLED as per NIC	E recommendation.			
ORBIT Score for Major Bleeding Risk				
	North West London ICB Atrial Fibrillation AF ES 2024/25 nhsnwl.servicedesk@nhs.net			

The areas marked with an asterisk need to be completed for ES Payment

When carrying out the ECG for Atrial Fibrillation tick the box for Electrocardiogram as well as the box for Enhanced Services Administration

When ECG has been completed use the ECG result drop down box to pick the result

Please note the highlighted area in yellow which gives information.

Please do read notes in dark blue which may help you to complete the template

NWL ICS Atrial Fibrillation AF ES 2024/25			
Pages «	Resources		
Main page Resources	NWL AF Guidelines NICE: bleeding risk Patient.info: anticoagulants AF NICE guidages NG196		
Information			
	Enhanced Service Searches EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > Atrial Fibrillation		
	Payment/KPI Rules		
	To Achieve Payment for AF ECG Test Completed AF01 Patient must be aged 55 and over AND Has no previous diagnosis of Atrial Fibrillation (QOF AFIB) OR Paroxysmal Atrial Fibrillation (28285002) AND Has SNOMED code of Electrocardiogram, single lead (14431003) AND Has SNOMED code of Enhanced services administration (16622100000105) recorded at the same time as the single lead ECG AND Has SNOMED code of Atrial fibrillation detected (106683100000104) OR Atrial fibrillation not detected (106706100000104) OR Electrocardiogram equivocal (370359005) recorded within 7 days of the single lead ECG		
	AF ruleset		
	AF001: The contractor establishes and maintains a register of patients with atrial fibrillation.		
	AF006: The percentage of patients with atrial fibrillation in whom stroke risk has been assessed using the CHA2DS2-VASc score risk stratification scoring system in the preceding 12 months (excluding those patients with a previous CHADS2 or CHA2DS2-VASc score of 2 or more)		
arrier rectore	AF007: In those patients with atrial fibrillation with a record of a CHA2DS2-VASc score of 2 or more, the percentage of patients who are currently treated with anticoagulation drug therapy		
	Normal hart rate - adequate rate Control (<90bpm and symptoms controlled)		
	Rate / Rhythm control		
	RATE CONTROL should be the routine 1st line strategy for most AF patients unless: Patients < 65 yrs Patients with corrected reversible cause e.g. corrected hyperthyroidism New onset AF		
	RATE CONTROL TREATMENT (aim for resting pulse of < 90 bpm and control of symptoms - palpitations and SOB) 1. Beta blocker (BB) e.g. bisoprolol initially 1.25 - 2.5mg daily (uptitrate to max 10mg) 2. If BB contraindicated, use rate limiting calcium channel blocker (CCB) e.g. diltiazem (60-120mg bd using branded generic) or verapamil (40-120mg tds) 3. Add digoxin to BB or CCB if rate control suboptimal on monotherapy (start at low dose 62.5-125mcg particularly if on diltiazem, verapamil or amiodarone which all increase digoxin levels)		
	IF DRUG TREATMENT HAS FAILED TO CONTROL SYMPTOMS REFER TO CARDIOLOGY FOR ASSESSMENT FOR ABLATION: For patients who remain symptomatic despite drug therapy, ablation should be offered to patients with paroxysmal AF and considered for patients with persistent AF		
	Important notes: 1. Do not use BB with rate-limiting CCB without specialist advice (negatively inotropic ++) 2. Amlodipine and felodipine do not control rate in AF 3. COPD is not a contraindication for BB use		
	SUMMARY: Rate control is the most appropriate strategy for the majority of patients with AF, particularly elderly patients. Rhythm control should mainly be reserved for patients who remain significantly symptomatic despite rate control		

This page offers links to guidelines and where to find reports.

Payment & KPI Rules You will find the SNOMED codes used in the templates that will lead to achieving Enhanced Service payment (These areas are marked with an asterisk in the template) The AF Ruleset includes a drop down box requesting a reason if the patient has not been anticoagulated

The **Rate/Rhythm Control** area provides helpful information.

NWL ICS Atrial Fibrillation AF ES	2024/25	
Pages «	Disclaimer	
Main page	This template has been created by North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is to the best of our knowledge accurate. However, responsibility for ensuing the accuracy of the data produced using this template remains with the	
Resources	Practice; the ICB strongly recommends that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing nhsnwl.servicedesk@nhs.net	
Information	Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).	
	Purpose	
	The purpose of this template is to allow recording of information into the patient record in line with the AF enhanced service.	
	Developed by	
	Developed by the NWL PCS System Development team	
	Version	
	This template was last updated March 2024.	

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Clinical Searches and Reports – Atrial Fibrillation

Reporting

Enhanced Service Searches EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > Atrial Fibrillation



Chronic Kidney Disease CKD Template

WL ICS Chronic Kidney Disease ES 2024/25					
Pages «				^	
Main page		North West London ICB Chronic Kidney Disease 2024/25			
Patient resources		NOTE: Fields marked with * are mandatory			
Clinician resources	Diagnosis / KPI				
Information	ACR <3 Normal (A1) ACR 3-30 Microalbuminuria (ACR >30 Albuminuria (A3)	A2)			
	eGFR >90 Normal or G1 if ot eGFR 60 - 89 Normal or G2 if ot eGFR 45 - 59 CKD stage G3A eGFR 30 - 44 CKD stage G3B eGFR 15 - 29 CKD stage G4 eGFR <15 CKD stage G5 If coding for G1 A1, G2 A1 you can use normality 10 - 20	ner findings her findings			
	*CKD stage		No previous entry		
	*Urine albumin:creatinine ratio	ma/mmol	07-Aug-2024 3 mg/mmol	*	
	*eGFR	mL/min	07-Aug-2024 6 mL/min	*	
	*GFR	mL/min	07-Aug-2024 6 mL/min	»	
	HbA1c	mmo/moj	07-Aug-2024 45 mmol/mol	*	
	*Chronic kidney disease annual review		No previous entry		
	Renal diagnosis	~	No previous entry		
	*Exception reporting (QOF)	×	No previous entry		

The areas marked with an asterisk must be completed for Enhanced Services. Please do read notes in dark blue which may help you to complete the template

Main Page cont'd– Chronic Kidney Disease

Datiant recourses	Examination			
Clinicipe recources	History	· · · · · · · · · · · · · · · · · · ·		
Linician resources	(hocory	v		
Information	O/E - blood pressure reading		07-Aug-2024 180/110 mmHg	*
	CKD (no T2DM) + uACR >22.6 Statin + ACEi or ARB + SGLT2i BP target 120-140/<90 (if uACR <70) BP target 120-130/<80 (if uACR >70)			
	CKD + T2DM + uACR >3 Statin + ACEi or ARB + SGLT2i BP target 120-130/<80			
	Click other template pages to view cl	inical guidance and resources		
	Standing height	cm	07-Aug-2024 1.6 cm	*
	Body weight	kg	07-Aug-2024 77 kg	*
	Body Mass Index	Calculate	07-Aug-2024 300781.25 kg	*
	Serum creatinine level	<u>umol/L</u>	No previous entry	
	Haemoglobin estimation		No previous entry	
	Serum non high density lipoprotein cholesterol level	mmol/L	07-Aug-2024 6 mmol/L	*
	Smoking status	×	07-Aug-2024 Ex-smoker	*
	Cessation advice	✓	No previous entry	
	Plan			
	Renal disorder medication review		No previous entry	
	Renal disorder education		No previous entry	
	UK Kidney Failure Risk calculator			
	Additional			
	Influenza QOF codes		26-Sep-2022 Administratio	*
	Pneumococcal vaccine	×	No previous entry	
	Consider Hep B if possibility of dialys	5		
	Exception reporting (ACE)	×	No previous entry	
	Exception reporting (ARB)	×	No previous entry	
	Exception reporting (statin)	×	No previous entry	
		North West London ICB Chronic Kidney Disease 2024/25 nhsnwl.servicedesk@nhs.net		

The areas marked with an asterisk must be completed for Enhanced Services. Please do read notes in dark blue/red which may help you to complete the template

Patient Resources – Chronic Kidney Disease

NWL ICS Chronic Kidney Disease ES 2024/25			
Pages «	Patient resources		
Main page	Refer a patient to CKD education To send the message to the patient copy and paste into your SMS or email provider		
Patient resources	Dear Patient,		
Clinician resources	Join "Know Your Kidneys" online group education session to learn about chronic kidney disease. To register click on the link https://www.nwlondonics.nhs.uk/CKD, select a date and fill in your details. For support download the registration guide available underneath the dates. Thank you.		
Information	Understanding CKD: Patient information videos [PDF]		
	CKD health check: look after your kidneys and keep yourself well [PDF]		

Clinician Resources - Chronic Kidney Disease

NWL ICS Chronic Kidney Disease	ES 2024/25
Pages «	Clinician resources
Main page	<u>NWL CKD Guidelines</u> Think Kidneys - potentially problematic drugs
Patient resources	Think Kidnevs - AKI Quick Reference Guide
Clinician resources	Payment Rules CODING NECESSARY FOR PAYMENT
Information	Patients included in Target Population for Chronic Kidney Disease CKD01D Patient has latest eGR (CKD01Da) <60 recorded and a previous eGR < 60 recorded between 3 months and 2 years before OR Has Urine ACR (CKD01Db) > 3 recorded and a previous Urine ACR > 3 recorded between 1 week and 2 years before Has NO QOF Cluster CKD (1-2) (CKD01Dc) or OQF Cluster CKD (3-5) (CKD01Dd) before the start of the financial year Patients included in Target Population for Chronic Kidney Disease CKD02D Patient has a SNOMED code QoF Cluster CKD (3-5) (CKD01Dd) WITHOUT a more recent Chronic Kidney disease resolved (939211000000104) OR QOF Cluster CKD (1-2) (CKD01Dc) To Achieve Payment for Chronic Kidney Disease CKD01N Patient must be in CKD01D AND Has dagnosis CKD01N recorded in the financial year by the provider To Achieve Payment for Chronic Kidney Disease CKD02N Patient must be in CKD02D AND Has CKD Annual Review CKD02N recorded in the financial year by the provider
	Reporting
	Enhanced Service Searches_ NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > Chronic Kidney Disease

On the Clinician Resource page you will find the SNOMED codes used in the templates that will lead to achieving Enhanced Service payment (These are the areas that are marked with an asterisk in this template)

NWL ICS Chronic Kidney Disease	ES 2024/25
Pages «	Disclaimer
Main page	This template has been created by North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accurate. However, responsibility for ensuring the accuracy of the data produced using this template remains with the Practice; the ICB strongly recommends that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing
Patient resources	nhsnwi.servicedesk@nhs.net
Clinician resources	Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).
Information	Purpose
,	The purpose of this template is to allow the recording of key information for patients with Chronic Kidney Disease (CKD).
	Developed by
	Developed by the NWL PCS System Development team with guidance from NWL CVD/Renal and Diabetes leads
	Version
	This template was last updated March 2024.

On this page you will find the disclaimer and feedback email address.

You will also find the purpose of the template, when it was last updated and who designed and developed it.

Clinical Searches and Reports – Chronic Kidney Disease

Reporting

Enhanced Service Searches NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > Chronic Kidney Disease



Coil Fitting for Non-Contraception Template 2024/25

WL ICS Coil Fitting for Non-Con	traceptive ES 2024/25		
Pages «			
Coil Fitting	*Required for Enhanced Services	27-0ct-2023	*
nformation	Non-contraceptive Indication At least one box must be ticked for ES, if fitting for contraception reasons please leave blank and claim payment via public health		
	"Menormagia "Menormagia " "Hormone replacement therapy " "Gynaecological disorder " "Other Pain in female pelvis	No previous entry No previous entry No previous entry No previous entry	
	Pre-appointment Information Date of last sexual intercourse 20-Aug-2024 Chlamydia deoxyribonucleic acid 20-Aug-2024 20-Aug-2024 Im Text Text	No previous entry No previous entry	
	NWL - Coil Fitting for Non-Contraception View >>	No previous entry	
	Discussion Text Discussion Text Comment on advice given: Mode of action/duration of use, risk of failure/ectopic, hormonal side effects (IUS), risk of infection (1st 20 days), effects on menstrual cycle, risk of expulsion, risk of perforations, insertion procedure and expected pain	No previous entry	
	Risks discussed Verbal Consent	No previous entry No previous entry	

The areas marked with an asterisk must be completed for Enhanced Services. Please do read notes in dark blue which may help you to complete the template Ensure you tick the box for Enhanced Service Administration which is required for payment

NWL ICS Coil Fitting for Non-Con	NL ICS Coil Fitting for Non-Contraceptive ES 2024/25				
Pages «	Insertion/Removal Procedure		^		
Coil Fitting	BP		07-Aug-2024 180/110 mmHg 🔌		
Insertion/Removal	Chaperone present		No previous entry		
Information	🗌 Bi-manual vaginal exam.		No previous entry		
Inomacon	Length of uteras on sounding		No previous entry		
	Include batch no. and expiry date				
	🗌 Analgesia offered	Text	No previous entry		
	🗌 Analgesia used	Text	No previous entry		
	*Insertion of intrauterine system		No previous entry		
	*Replacement of intrauterine system		No previous entry		
	*Removal of intrauterine system		No previous entry		
	*Unsuccessful intrauterine contraceptive device insertion		No previous entry		
	Cervix appearance	×	No previous entry		
	Post Procedure				
	BP		07-Aug-2024 180/110 mmHg 🔌		
	Advice about intrauterine contraceptive device, checking for threads		No previous entry		
	Post Fitting contraception advice given		No previous entry		
	Written advice about long acting reversible contraception		No previous entry		
	If unable to find threads - follow up	in 6 weeks			
	Follow-up 6 weeks	20-Aug-2024	No previous entry		
	LARC Change Due Date:	×	No previous entry		
		20-Aug-2024			
		Text			
	Review				
	IUD Checked	×	No previous entry		
		Text			
	Mirena coil check		No previous entry		
	Mirena Information		No previous entry		
	 IUD threads lost 		No previous entry		

Please do read notes in dark blue which may help you to complete the template
NWL ICS Coil Fitting for Non-Con	traceptive ES 2024/25
Pages «	Payment/KPI Rules
Coil Fitting	COF00 Non-contraceptive indication menoperate (386692008) OP
Insertion/Removal	Hormone replacement therapy (266717002) OR
Information	Pain in female pelvis (426702003)
	To Achieve Payment Insertion or Replacement of LNG-IUD COF01 • Female patient must be aged 18 and over AND • Has history of non-contraceptive indicator COF00 recorded AND • Has SNOMED code of Insertion of hormone releasing intrauterine contraceptive device (472837007) OR Replacement of intrauterine system (844911000000104) OR Unsuccessful intrauterine contraceptive device insertion (416548008) recorded in the payment period by the provider AND • Has SNOMED code of Enhanced services administration (16622100000105) recorded at the same time as the Insertion or replacement of LNG-IUD
	 To Achieve Payment Removal of LNG-IUD COF02 Female patient must be aged 18 and over AND Has history of non-contraceptive indicator COF00 recorded AND Has SNOMED code of Removal of hormone releasing intrauterine contraceptive device (472838002) OR Unsuccessful intrauterine contraceptive device removal (429596008) recorded in the payment period by the provider AND Has SNOMED code of Enhanced services administration (166221000000105) recorded at the same time as the Removal of LNG-IUD
	Information
	This template has been created by the NHS North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accurate. However, responsibility for ensuring the accuracy of the data produced using this template remains with the Practice; the ICB strongly recommend that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing nhsnwl.servicedesk@nhs.net
	Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).
	Purpose The purpose of this template is to provide a comprehensive data entry template for the purposes of Coil Fitting for non contraceptive enhanced services in line with the specification. Amendments April 2024 - First Release Developed by Developed by Developed by NWL PCS System Development team, with guidance from NWL clinical leads

On this information page you will find the SNOMED codes used in the templates that will lead to achieving Enhanced Service payment (These are the areas that are marked with an asterisk in this template).

Also on this page you will find the disclaimer and feedback email address. You will also find the purpose of the template, when it was last updated and who designed and developed it.

Clinical Searches and Reports – Coil Fitting for Non Contraception

Reporting

<u>NWL Enhanced Service Searches</u> NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 06 Coil fitting for non contraception



Non-Diabetic Hyperglycaemia Template 2024/25

NWE ICS NOT Diabetic Hypergryc	defind L3 2024/25			
Pages «				· · · ·
KPIs		NWL ICS Non-Diabetic Hyperglycaemia Enhanced Service 2024/25		
Contract Specification		NOTE: All fields marked with * are mandatory		
Information				
Inormation				
	*Diagnosis (high risk of diabetes)	×	16-Mar-2023 Non-diabetic	*
		20-Aug-2024		
	History/symptoms	Text	07-Aug-2024	*
	Family History of Diabetes Mellitus?		16-Mar-2023 No family hist	. *
	Leicester Diabetes Risk Score		16-Mar-2023 14 /47	*
	*PD (005)		07-Aug-2024 190/110 mmHg	1 2
	"BP (QOF)		07-Aug-2024 100/110 mining	
	*HbA1c level (QOF)		07-Aug-2024 45 mmol/mol	*
	*Serum cholesterol level	mmol/L	07-Aug-2024 6 mmol/L	*
	*Serum non HDL cholesterol level	mmol/L	07-Aug-2024 6 mmol/L	*
	*Smoking Status (QOF)	×	07-Aug-2024 Ex-smoker	*
	*Exercise	v	16-Mar-2023 Aerobic exer	*
	Alcohol units per week	<u>U/week</u>	16-Mar-2023 10 U/week	*
	*Height	cm	07-Aug-2024 1.6 cm	*
	*Weight	kg	07-Aug-2024 77 kg	*
	*Body Mass Index	Calculate	07-Aug-2024 300781.25 kg	*
	*Lifestyle advice regarding diet		16-Mar-2023	*
	*Lifestyle advice regarding exercise		13-Nov-2023	*
	Patients goals and priorities	Text	07-Aug-2024	» 、

For ages 17 years and above.

Only complete the diagnosis if it is a new diagnosis. The areas marked with an asterisk need to be completed for Enhanced Service Payment. NDH is spaced over a time period of the last 15 months (by the end of the financial year) – therefore for 24/25 the date of any entry should be between 1st January 2024 to 31st March 2025

Please use the BMI Calculator to add the BMI

NHS Diabetes Prevention Programme

NHS Diabetes Prevention Programme

Criteria for referral to NHS National Diabetes Prevention Programme:

HbA1c results between 42-47.9mmol/mol (6.0-6.4%), or Fasting Plasma Glucose [FPG] result between 5.5-6.9 mmols/l dated within the last 12 months. If patient has a history of Gestational Diabetes (GDM) then patient is eligible with HbA1c < 42 mmol/mol or FPG < 5.5mmol/l. The previous GDM diagnosis must be indicated under the `Referral Information' section

Patient does not have Type 2 Diabetes - if a reading is in the diabetic range (HbA1c ≥48 or FPG ≥7) the individual is not eligible. If two blood test readings are provided on the referral, and one is in the diabetic range, you will be asked to

confirm that the patient is not being treated as diabetic

Patient is registered with a GP Practice within North West London STP, is not pregnant and aged 18 years or over. If aged over 80, you must confirm that you consider that the benefits of this programme are likely to outweigh the potential risks

There is no medical reason why this patient should not take part in a programme that includes light-moderate physical activity

Clinical Searches and Reports – Non Diabetic Hyperglycaemia

NWL ICS Non-Diabetic Hyperglycaemia ES 2024/25					
Pages	«	Searches			
KPIs		<u>NWL Enhanced Service Searches</u> NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 10 Non diabetic Hyperglycaemia			
Contract Specification Information		Searches: Payment and Missing Data			

Disclaimer

NWL ICS Non-Diabetic Hypergly	aemia ES 2024/25					
Pages «						
KPIs Contract Specification	Disclaimer This template/report has been created by the North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system e our knowledge, accurate.					
Information	However, responsibility for ensuring the accuracy of the data produced using this form / template remains with the Practice; the ICB strongly recommend that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing, nhsnyl servicedesk@nhs.net					
	Updated: April 2024					
	For template audit only					
	☑ Template entry	07-Aug-2024	*			

On this page you will find the disclaimer and feedback email address.



Diabetes Level 1 Template

WL ICS Diabetes Review Level 1 ES 2024/25								
Pages «			^					
*KPIs	North West London ICB Diabetes Level 1 Enhanced Service 2024/25	North West London ICB Diabetes Level 1 Enhanced Service 2024/25						
Mental Health	NOTE: All of the below fields are mandatory							
Diagnosis	This page contains *mandatory fields including the 9 Key Care Processes required for the Diabetes Level 1 review. For additional supporting fields and a more detailed version of the review please use	the other pages in this template.						
BP								
HbA1c	History Text	07-Aug-2024	*					
Lipids	Examination Text	07-Aug-2024	*					
Lifestyle	Control							
Feet	1. *BP (QOF) /	07-Aug-2024 180/110 mmHg	*					
Kidneys	≤140/80 (≤ 150/90 in mod/sev frailty)							
Eyes	2. *HbA1c (QOF)	07-Aug-2024 45 mmol/mol	*					
Hypoglycaemia	≤58 (≤75 in mod/sev fraity)							
Care Planning	HbA1c target mmol/mol	07-Aug-2024 40 mmol/mol	*					
Education	Only one non-HDL code required							
Medication Management	3. *Serum cholesterol level mmol/L	07-Aug-2024 6 mmol/L	*					
Pre-conception	*Non-hdl cholesterol level mmol/L	07-Aug-2024 6 mmol/L	*					
Joint Consultation	*Serum non-hdl cholesterol level mmol/L	07-Aug-2024 6 mmol/L	*					
Recall	Lifestyle							
Guidelines	4. *Smoking (QOF)	07-Aug-2024 Ex-smoker	*					
Patient Info	*Weight kg	07-Aug-2024 77 kg	*					
Contract Specification	*Height cm	07-Aug-2024 1.6 cm	*					
Information	5. *BMI Calculate	07-Aug-2024 300781.25 kg	*					

The areas marked with an asterisk need to be completed for Enhanced Service Payment. Diabetes Review Level 1 is spaced over a time period of the last 15 months (by the end of the financial year) – therefore for 24/25 the date of any entry should be between 1st January 2024 to 31st March 2025. Areas marked with (QOF) are the KPIs for Quality Outcomes Framework

Please do read the notes written in red and dark blue which may help you to complete the template.

KPIs cont'd – Diabetes Review Level 1



The areas marked with an asterisk need to be completed for Enhanced Service Payment. Diabetes review is spaced over a time period of the last 15 months (by the end of the financial year) – therefore for 24/25 the date of any entry should be between 1st January 2024 to 31st March 2025

KPIs cont'd – Diabetes Review Level 1

NWL ICS Diabetes Review Level	1 ES 2024/25		
Pages «	Mental Health		,
*KPIs	*One of: • DDS-2 or DDS-17		
Mental Health	GAD-2 AND PHQ-2 GAD-2 AND PHQ-9		
Diagnosis	GAD-7 AND PHQ-2 GAD-7 AND PHQ-9		
ВР	*DDS-2	16-Mar-2023 2	*
HbA1c	*DDS-17	16-Mar-2023 3	*
Lipids	OR		
Lifestyle	*GAD-2 <u>/6</u>	07-Aug-2024 15/6	*
Feet		07-Aug-2024 15 /21	*
Kidneys	"GAU-/	07 Hug 2021 13 / 21	
Eyes	AND /6	07 Aug 2024 2 /6	22
Hypoglycaemia	*PHQ-2	07-Aug-2024 3/0	~
Care Planning	*PHQ-9	07-Aug-2024 15/27	*
Education	Goals & Care Plan we encourage you to think about some achievable goals that you want to set over the next few months to year. What would you like to have happen over the next year? What is important to you about this? What	needs to happen for that to happe	en?
Medication Management	*Patient's goals and priorities Tart	07 Aug 2024	
Pre-conception	*Care Plan Text	07-Aug-2024	*
Joint Consultation	*Support Programmes (OOF)	07-Aug-2024 Attended dia.	*
Recall	QISMET approved education programmes:	· · · · · · · · · · · · · · · · · · ·	
Guidelines	*Patient has Know Diabetes Account Text	07-Aug-2024	*
Patient Info	Pre-conception advice Text	16-Mar-2023	*
Contract Specification	Influenza Please complete the influenza template (QOF)		
Information	<u>NWL Diabetes Guidelines</u> https://www.knowdiabetes.org.uk		
Ì	Diabetes Review		
	If diabetes review completed, tick both boxes below to support recalls		
	Diabetes type 2 review	16-Mar-2023	*
	Diabetes annual review completed	16-Mar-2023	»

North West London ICB Diabetes Level 1 ES 2024/25

Ensure that you complete either the DDS-2 on its own **OR** the GAD-2 with the PHQ-2 (both needed for payment) – Questions are on Mental Health page of this template. Support Programmes need to be completed as part of the care plan (see next page). Patient has a Know Diabetes Account – only tick if the patient already has an account

KPIs cont'd – Diabetes Review Level 1

*Support Programmes (QOF)		\sim
QISMET approved education program	A Attended diabetes structured education programme	^
*Patient has Know Diabetes Account	Attended diabetes education and seir management for ongoing and newly diagnosed structured programme C Attended dose adjustment for normal eating diabetes structured education programme	
	D Attended expert patient education versus routine treatment diabetes structured education programme	
Pre-conception advice	E Remote diabetes structured education and support programme commenced	
Influenza Please complete the influenza	 Diabetes structured education programme completed G Diabetes education and self management for ongoing and newly diagnosed structured programme completed 	
NWL Diabetes Guidelines	H Dose adjustment for normal eating diabetes structured education programme completed	
https://www.knowdiabetes.org.uk	I Expert patient education versus routine treatment diabetes structured education programme completed	
- -	J X-PERT (expert patient education versus routine treatment) First Steps diabetes self-management programme completed	¥1
	Remote diabetes structured education and support programme completed Referral to diabetes structured education programme	^
	Referral to online diabetes structured education programme	
	Referral to type I diabetes structured education programme	
	Referral to dose adjustment for normal eating diabetes structured education programme	- 64
	Referral to expert patient education versus routine treatment diabetes structured education programme Referral to diabetes education and cell management for engine and neuror diagnosed structured programme declined	
	Referral to total diet replacement programme	
	Referral to NHS Digital Weight Management Programme	
	Diabetes structured education programme declined	~
	I Group consultation via video conference	
	J Group consultation	¥

Use slider on dropdown to see more options for support programmes

Mental Health – Diabetes Review Level 1

NWL ICS Diabetes Review Level	1 ES 2024/25		
Pages «			
*KPIs	MENTAL HEALTH		
Mental Health	*Please record one of: • DDS-2 or DDS-17		
Diagnosis	GAD-2 AND PHQ-2 PHO-2 AND GAD-7		
ВР	 PHQ-9 AND GAD-2 PHQ-9 AND GAD-7 		
HbA1c	DDS-2		
Lipids	DDS-2: If score ≥ 3 then consider performing full DDS-17 assessment		
Lifestyle	To what extent have you experienced feeling overwhelmed by the demands of		
Feet	living with diabetes over the last month		
Kidneys	To what extent have you experienced feeling that you are often failing with vour are often failing with		
Eyes	month		
Hypoglycaemia	Diabetes Distress Scale 2 item score	16-Mar-2023 2	*
Care Planning	Psychological Aspects		
Education	6AD-2		
Medication Management	Over the past 2 weeks, how often have vous a stop or control working able to stop or control working?		
Pre-conception	Over the past 2 weeks how often have		
Joint Consultation	you been bothered by feeling nervous, anxious or on edge?		
Recall	GAD-2 (generalised anxiety disorder 2) 46 scale score	07-Aug-2024 15/6	*
Guidelines	If score ≥ 3 then consider referral to IAPT or Know Diabetes Self Help (see link below)		
Patient Info	Know Diabetes		

Ensure that you complete either the DDS-2 on its own **OR** the GAD-2 with the PHQ-2 (both needed for payment)

Mental Health Cont'd – Diabetes Review Level 1

NWL ICS Diabetes Review Level 1 ES 2024/25				
Pages «			^	
*KPIs	PHQ-2			
Mental Health	Over the past 2 weeks how often have you been bothered by little interest or plasure in doing things?			
Diagnosis	Over the past 2 weeks how often have			
BP	you been bothered by feeling down, depressed, or hopeless?			
HbA1c	PHQ-2 (patient health questionnaire 2) [6]	07-Aug-2024 3/6	*	
Lipids	If score ≥ 3 then consider referral to IAPT or Know Diabetes Self Help (see link below)			
Lifestyle	Know Diabetes			
Feet				
Kidneys	DDS-17			
Eyes	Diabetes Distress Scale 17 item score	16-Mar-2023 3	*	
Hypoglycaemia				
Care Planning	GAD-7			
Education	score	07-Aug-2024 15/21	*	
Medication Management				
Pre-conception	PHQ-9 Patient Health Questionnaire Nine Item 227	07-Aug-2024 15 /27	*	
Joint Consultation	score	07-hug-2024 13/2/		

Ensure that you complete either the DDS-2 on its own **OR** the GAD-2 with the PHQ-2 (both needed for payment)

Mental Health Cont'd – Diabetes Review Level 1

Mini Con Announces

Mini-Cog Assessment		
Please remember and repeat the following words: BANANA SUNRISE CHAIR	~	
Clock Drawing: Use paper with a circle. "Please mark in all the numbers to indicate the hours of a clock." "Please mark in hands to show 10 past eleven (11:10)."	~	
"Please tell me what those 3 words were that I asked you to remember earlier"	~	
General practitioner assessment of cognition tool		16-Mar-2023
If score < 3 then perform full GPCOG	assessment	
General Practitioner Assessment of Cognit	on GPCOG (patient.co.uk)	
Six-item Cognitive Impairment		
If assessing over the telephone use s	x item cognitive test for initial screening	
Six-item Cognitive Impairment Test screer	<u>ing</u>	
Interpretation: Score out of 28		
0 - 7 Normal > 8 Significant		

 \gg

Mini-cog assessment (not a KPI). Clinicians decision whether it is needed

Diagnosis – Diabetes Review Level 1

Pages «	^						^
*KPIs		DIAGNOSIS					
Mental Health		NWL Diagnosis Guidelines					
Diagnosis		The Diabetes strategy group recommend	HbA1c for diabetes diagnosis except in those groups where HbA1c may be unreliable and glucose should be used.				
BP		Diagnosis Galdennes (NVVE)					
HbA1c		HbA1c Records (last coded entry)			07-Aug-2024 45 mmol/mol	*	
Lipids		HbA1c Target (Last coded entry)			07-Aug-2024 40 mmol/mol	*	
Lifestyle		To view the full diagnosis history, please	view the 'Problems' tab within the care record				
Feet		*Diabetes Diagnosis			No provious entry		
Kidneys		Diabetes Diagnosis	28-Aug-2024		No previous entry		
Eyes							
Hypoglycaemia		Remission Definition (NWL)					4
Care Planning		Type 2 diabetes in remission	28-Aug-2024		No previous entry		
Education							
Medication Management		Structured Education					
Pre-conception		NWL Diabetes Guidelines Structured Edu	cation				
Joint Consultation		Refer to diabetes structured education (QOF)	· · · · · · · · · · · · · · · · · · ·		16-Mar-2023 Referral to di	*	
Recall			28-Aug-2024				
Guidelines		*Diabetes structured education			07-Aug-2024 Attended dia	*	
Patient Info	~	Dishates structured education excention	28-Aug-2024	I	No provious optor		~
	~	codes (QOF)]	no previous entry		¥

Only add diagnosis if it is new diagnosis. Support Programmes need to be completed as part of the care plan. Add Structured Education if not completed on the KPI Page

BP – Diabetes Review Level 1

Pages «		
*KPIs	BLOOD PRESSURE	
Mental Health	NICE GUIDANCE	
Diagnosis	Aim for BP \leq 140/80 (\leq 130/80 if kidney, eye or cerebrovascular complications)	
ВР	Offer lifestyle advice Review after 1-2 months and add/intensify medication if BP remains > 140/80 (>130/80 if kidney, eye or cerebrovascular complications)	
HbA1c	Up to 50% of patients will need at least 3 antihypertensive agents	
Lipids	Blood Pressure Guidelines (NWL)	
Lifestyle	Treatment steps for hypertension (NICE)	
Feet		07 Aug 2024 100/110 mml/g
Kidneys	*BP (QOF):	07-Aug-2024 180/110 milling //
Eyes	Pulse rate	27-Apr-2022 100 beats/min »
Hypoglycaemia	Rhythm ~	No previous entry
Care Planning	Target diastolic blood pressure mmHg	No previous entry
Education	Target systolic blood pressure mmHg	No previous entry
Medication Management		
Pre-conception	Exception reporting (QOF)	12-Jan-2024 Patient on ma »
Joint Consultation		

Links to BP guidelines and Treatment steps for Hypertension. The areas marked with an asterisk need to be completed for Enhanced Service Payment if not completed on the KPI Page.

HbA1c – Diabetes Review Level 1

Pages «	^			-
*KPIs		HbA1c		
Mental Health		*HbA1c (QOF) 28-Aug-2024	07-Aug-2024 45 mmol/mol	*
Diagnosis		<u>Glycaemic Management Algorithm (NWL)</u>		
ВР		Target HbA1c (required for patients initiating injectable therapy)		
HbA1c		Involve the person in decisions about their individual HbA1c target level - this should be between 48-58 mmol/mol (6.5-7.5%). Target depends on factors include	ling: age, comorbidity, length of	
Lipids		diagnosis of diabetes, numbers of hypoglycaemic agents, frailty.		
Lifestyle		Target HbA1c mmol/mol	07-Aug-2024 40 mmol/mol	*
Feet		Individulising HbA1c Targets (NWL)		
Kidneys		Serum fructosamine level	No previous entry	
Eyes		For fructosamine interpretation please refer to reference ranges provided by the local pathology lab		
Hypoglycaemia		For necessariline incorpretation please refer to reference ranges provided by the local pathology lab		
Care Planning		Self-monitoring of blood glucose Text	16-Mar-2023	*
Education		Monitoring Glycaemic Control (NWL)		
Medication Management		Education: Why and when to test	No	
Pre-conception		Diabetes Text	No previous entry	
Joint Consultation				
Recall		Text	No previous entry	

The areas marked with an asterisk need to be completed for Enhanced Service Payment if not completed on the KPI Page.

HbA1c Cont'd – Diabetes Review Level 1

	Hypos (SU/Insulin)	~	No previous entry
	<u>Oral Hypoglycaemic Agents</u> *Frequency of hypoglycaemia attack	times/week	07-Aug-2024 1 times/week »
	Frequency of GP treated hypoglycaemia attack	<u>/vear</u>	No previous entry
	Frequency of hospital-treated hypoglycaemia attack	<u>/year</u>	No previous entry
	Hypoglycaemic warning	~	No previous entry
	Exception reporting (QOF)	~	No previous entry
\sim	Criteria for referral to level 2		

Frequency of hypoglycaemic attack needs to be noted even if the figure is zero

Lipids – Diabetes Review Level 1

Pages	« ^			
*KPIs				
Mental Health		Nice Guidance Atorvastatin 20-40mg for the primary prevention of CVD in people with Type 2 Diabetes with 10% or greater 10-year risk of developing CVD, 80mg if existing	ig CVD	
Diagnosis		Lipids Guidance		
BP		Lipid Levels		
HbA1c	LIPIDS Nice Guidance Actovastance Actovastance Actovastance Actovastance Actovastance Ipids Guidance Lipid Levels "Serum cholesterol level mmol/L "Serum non-HDL cholesterol mmol/L Serum HDL cholesterol mmol/L Serum HDL cholesterol level mmol/L Serum HDL cholesterol level mmol/L Serum triglycerides level mmol/L Delase use the CE-complant EMIS-authored QRISK cardiovascular disease 10 year risk score template, which can be accessed from the EMIS library LIFS / Non Akcohok Steatohepatitis (NASH) screening Non Akcohok Steatohepatitis (N			
Lipids		*Serum cholesterol level	07-Aug-2024 6 mmol/L	*
Lifestyle		*Serum non-HDL cholesterol mmol/L	07-Aug-2024 6 mmol/L	*
Feet		*Non-HDL cholesterol <u>mmol/L</u>	07-Aug-2024 6 mmol/L	*
Kidneys		Serum HDL cholesterol level mmol/L	No previous entry	
Eyes		Serum LDL cholesterol level mmol/L	No previous entry	
Hypoglycaemia		Serum triglycerides level mmol/L	No previous entry	
our planting		ORISK		
		Please use the CE-compliant EMIS-authored QRISK cardiovascular disease 10 year risk score template, which can be accessed from the EMIS library		
		LFTs / Non Alcoholic Steatohepatitis (NASH) screening		
		Non Alcoholic Steatohepatitis (NASH) Guidance		
		Serum alanine aminotransferase level	No previous entry	
		Aspartate aminotransferase level (AST)	No previous entry	
		Platelet count	No previous entry	
		Fibrosis-4 index score	No previous entry	
		Fibrosis-4 (FIB-4) Calculator		
	~	Exception reporting (QOF)	12-Jan-2024 Patient on ma	*

Lifestyle – Diabetes Review Level 1

Pages «	<u> </u>		^
*KPIs	LIFESTYLE		
Mental Health	Smoking		
Diagnosis	*Smoking status	~	05-Nov-2019 Never smoke »
BP	Cigar consumption	<u>/day</u>	No previous entry
HbA1c	Cigarette consumption	<u>/day</u>	No previous entry
Lipids	Pipe tobacco consumption	<u>g/week</u>	No previous entry
Lifestyle	Total time smoked	<u>year</u>	No previous entry
Feet	Smoking pack-year calculator		
Kidneys	Cessation advice	~	No previous entry
Eyes		Text	
Hypoglycaemia	Readiness to stop	~	No previous entry
Care Planning		Text	
Education	Exception reporting	~	No previous entry
Medication Management		Text	
Medication Management	Diet and Exercise		
	Exercise	~	16-Mar-2023 Aerobic exer »
	Height	cm	07-Aug-2024 1.6 cm »
	Weight	kg	07-Aug-2024 77 kg »
	*Body Mass Index	Calculate	07-Aug-2024 300781.25 kg »

The areas marked with an asterisk need to be completed for Enhanced Service Payment if not completed on the KPI Page.

Lifestyle Cont'd – Diabetes Review Level 1

v

<u>BMI Recommendations (NICE)</u> Obestity (NWL)				
Ideal body weight		kg	No previous entry	
Target weight		kg	No previous entry	
	Text			
Waist circumference		cm	No previous entry	
Lifestyle advice regarding diet	Text		16-Mar-2023	*
Lifestyle advice regarding exercise	Text		13-Nov-2023	*
Exercise and Physical Activity				
Alcohol				
Alcohol intake		<u>U/week</u>	No previous entry	
AUDIT-C score		<u>/12</u>	No previous entry	
<u>Alcohol and Sensible Drinking</u> Audit-C Guidance (Healthcheck NHS)				
Brief intervention		~	No previous entry	
	Text			

Feet – Diabetes Review Level 1

Pages «	^		
*KPIs	FEET		
Mental Health	Diabetic Foot Examination (NWL) Foot Pulses		
Diagnosis	Right Foot		
BP	Right DP	~	No previous entry
HbA1c	Right PT	~	No previous entry
Lipids	Left Foot		
Lifestyle	Left DP	×	No previous entry
Feet	Left PT	×	No previous entry
Kidneys Eyes	Diabetic peripheral angiopathy	28-Aug-2024	No previous entry
Hypoglycaemia	Foot Sensation		
Care Planning	Right Foot	~	No previous entry
Education	Left Foot	~	No previous entry
Medication Management			
Pre-conception		28-Aug-2024	No previous entry
Joint Consultation			
Recall	*Foot Complications (QOF)		
Guidelines	*Right Foot (QOF)		07-Aug-2024 O/E - Right di »
Patient Info	*Left Foot (QOF)	×	07-Aug-2024 O/E - Left dia 🔌

The areas marked with an asterisk need to be completed for Enhanced Service Payment if not completed on the KPI Page.

Feet Cont'd – Diabetes Review Level 1

~

Diabetic foot screen note	es Text			No previous entry
NWL Diabetic foot review o	uidelines			
Low risk	Normal sensation, palpable pulses	3-6 monthly review		
Moderate risk	Neuropathy / absent pulses	3-6 monthly review		
High risk	Neuropathy / absent pulses + deformity / skin changes / previous ulcer	Refer		
Ulcerated/Charcot foot		Refer		
Diabetic foot referral			~	No previous entry
	-			
Diabetic foot care educat				
				No previous entry
Exception Reporting (QOF)			~	No previous entry
	Text			
Patient leaflets (Diabetes.o	r <u>a.uk)</u>			

 \checkmark

Kidneys – Diabetes Review Level 1

Pages	« ^			
*KPIs		KIDNEYS		
Mental Health		Classification of CKD using ACR and eGFR	<u>R category quidelines</u>	
Diagnosis		Code CKD stage using ACR and eGEE	R values	
RD		coue one stage using Ack and con		
UbAlc		ACR		07-Aug-2024 3 mg/mmol »
HDATC		ACR <3 Normal A1		
Lipids		ACR 3- 30 Microalbuminuria A2		
Lifestyle		ACR > Albuminuria A3		
Feet				
Kidneys		Ethnicity - If afro-caribbean multiply eGF	FR by 1.2	
Eyes		eGRF		07-Aug-2024 6 mL/min »
Hypoglycaemia		eGFR >90 Normal or G1 if other find	dings	
Care Planning		eGFR 45 - 59 CKD stage G3A		
Care Hanning		eGFR 30 - 44 CKD stage G3B		
Education		eGFR 15 - 29 CKD stage G4		
Medication Management		eGFR <15 CKD stage G5		
Pre-conception				
Joint Consultation		CKD Stage	~	No previous entry
Recall		-	28-Aug-2024	,
Guidelines		Proteinuria?		No previous entry
Datient Info			28-Aug-2024	no previous energy
radene ino	×		29 Aug 2024	
			20-Aug-2024	No previous entry
	~	Exception Reporting (QOF)	×	No previous entry

Eyes – Diabetes Review Level 1

Pages « '	<u> </u>			
*KPIs	EYES			
Mental Health Diagnosis	NICE GUIDANCE Arrange emergency review by an ophth sudden loss of vision, rubeosis iridis, pre- Optimise HbA1c, blood pressure and lipi	nalmologist for: -retinal or vitreous haemorrhage, retinal detachment. d management		
BP	NWL Retinopathy Guidelines			
HbA1c	*Retinopathy screening (OOF)	~	07-Aug-2024 Retinal scree	*
Lipids		28-Aug-2024	of hag been needed bereen	
Lifestyle				
Feet	Diabetic retinopathy	28-Aug-2024	02-Nov-2021	*
Kidneys	Left eye (Retinopathy)	×	No previous entry	
Eyes		28-Aug-2024		
Hypoglycaemia	Left eye (Maculopathy)	×	No previous entry	
Care Planning		28-Aug-2024		
Education	Right eye (Retinopathy)	~ ·	No previous entry	
Medication Management		28-Aug-2024		
Pre-conception	Right eye (Maculopathy)	~	No previous entry	
Joint Consultation		28-Aug-2024		
Recall		Follow Lip		
Guidelines		20-Aug-2024	No previous entry	
Patient Info	Exception Reporting	×	No previous entry	
Facilit IIIO	<i>•</i>			
	NWL Diabetic Eye Screening Programme Tel: 020 8099 1122			

Hypoglycaemia– Diabetes Review Level 1

Pages «	^			
*KPIs		HYPOGLYCAEMIA		
Mental Health		<u>NWL hypoqlycaemic quidelines</u>		
Diagnosis		Hypoglycaemic attack requiring 3rd 28-Aug-2024		No previous entry
BP		Text		
HbA1c		*Frequency of hypoglycaemia attack		07-Aug-2024 1 times/week 😕
Lipids		Tavt		
Lifestyle		FUAL		
Feet			^	
Kidneys		Nocturnal hypoglycaemia	~	
Eyes		Note importance of asking specifically about night time hypos as they carry the risk of prolongation of QT interval and predict worse	hypoglycaemia outcomes	
Hypoglycaemia		Hypoglycaemic warning absent		No previous entry
Care Planning				
Education		Patient advised to inform DVLA Text		No previous entry
Medication Management		Diabetes & Driving		no pronodo ondy
Pre-conception		Diabetes and Safe Driving (Trend)		
Joint Consultation				
Recall		Education		
Guidelines				
Patient Info	~			

The areas marked with an asterisk need to be completed for Enhanced Service Payment if not completed on other pages. Frequency of hypoglycaemic attack needs to be noted even if the figure is zero

Care Planning – Diabetes Review Level 1

Pages «	^		
*KPIs	CARE PLANNING		
Mental Health	ADMIN		
Diagnosis	Patient allocated named accountable general practitioner		No previous entry
BP	Informing patient of named accountable general practitioner		No previous entry
HbA1c	Medication review done		12-Jan-2024 >>
Lipids	Over 75 health check		No previous entry
Lifestyle	Number of falls in last year	<u>/year</u>	No previous entry
Feet			
Kidnevs	ASSESSMENT		
Ever	History/symptoms	Text	07-Aug-2024 >>
Lyes .	Examination findings	Text	07-Aug-2024 >>
Hypoglycaemia	Frailty Severity	~	No previous entry
Care Planning	PLAN		
Education	Summary of needs	Text	No previous entry
Medication Management	Patient's goals and priorities	Text	07-Aug-2024 >>
Pre-conception	Care plan agreed	Text	No previous entry
Joint Consultation	Anticipatory care plan	Text	No previous entry
Recall	Review of care plan	Text	No previous entry
Guidelines	Social prescribing	×	27-Oct-2023 Referral to so »
Datiant Info		Text	
	Social prescribing	✓	27-0ct-2023 Referral to so »
		Text	
	Summary Care Record		No previous entry
		Taut	no providuo enery
		Text	

Education – Diabetes Review Level 1

Pages « ^	5			
*KPIs	DIABETES EDUCATION			
Mental Health	Know Diabetes - Diabetes Education Advice about blood glucose control	Text	No previous entry	
Diagnosis	Blood glucose control			
BP	Lifestyle advice regarding diet	Text	16-Mar-2023	*
HbA1c	Education about alcohol consumption	Text	No previous entry	
Lipids	Advice on effects of smoking on health	Text	No previous entry	
Lifestyle	Advice about exercise	Text	13-Nov-2023	*
Feet	Education about self management of diabetes	Text	No previous entry	
Kidneys	Diabetic foot care education	Text	No previous entry	
Eyes	Health education - hypoglycaemia	Text	No previous entry	
Hypoglycaemia	Emergency contact details	Text	No previous entry	
Care Planning	Patient advised to inform DVLA	Text	No previous entry	
Education	Education about diabetes and driving	Text	No previous entry	
Medication Management	Patient advised to inform insurance	Text	No previous entry	
Pre-conception	Company			

Education Cont'd – Diabetes Review Level 1

Insulin		
Insulin passport	×	No previous entry
Advice on foreign travel	Text	No previous entry
Diabetes Structured Education		
Structured Education	~ ~	16-Mar-2023 Attended dia »
Structured Education Guidelines		
Patient Leaflets		
What is diabetes		
Type 2 DM		
Rationale of diabetes treatment		
Lifestyle advice regarding smoking		
Sick day rules		
Diabetes and driving		

The areas marked with an asterisk need to be completed for Enhanced Service Payment if not completed on other pages.

Medication Management– Diabetes Review Level 1

Pages	*	^					
*KPIs			MEDICATION MANAGEMENT				
Mental Health			Refer to the medication section of the o	are record for patients current medication			
Diagnosis			Self-administration of OTC medication	Text		No previous entry	
Diagriosis			Latest eGFR			07-Aug-2024 6 ml / min	*
ВР						67 Aug 2021 6 Milly Mill	
HbA1c			Medication Review				
Lipids			Manages Medication	~	·	No previous entry	
Lifestyle			2	Text	1	,	
Feet			Understands medication?			24-Dec-2020 Patient unde	*
Kidneys				Text	1		_
Eyes			Medication review done (GMS)			12-Jan-2024	*
Hypodycaemia			Medication Compliance	~		13-Nov-2020 Drug complia	*
Care Dapping				Text			
Care Planning							
Education							

Oral Hypoglycaemic Agents Glycaemic Management Algorithm (NWL) Metformin (NICE) Gliclazide (NICE) Pioglitazone (NICE) DPP4 - Gliptins (Diabetes.org.uk) SGLT-2 Empagliflozin (NICE)

Medication Management

Pre-conception

Recall

Joint Consultation

Pre-Contraception – Diabetes Review Level 1

Pages «	
*KPIs	PRE-CONCONCEPTION
Mental Health	NICE Clinical Knowledge Summary Women Of Childbearing Age (NWL)
Diagnosis	
BP	Refer all women with diabetes mellitus who wish to become pregnant to a pre-conception diabetes clinic (if available) or to their diabetes care team, as soon as possible.
HbA1c	Ensure that concurrent medication is reviewed - Stop statins, fibrates, ACE inhibitors and ARBs
Lipids	Prescribe folic acid 5 mg daily until week 12 of pregnancy to reduce risk of neural tube defect
Lifestyle	Advise the woman to avoid pregnancy if the HbA1C is above 86 mmol/mol (10%).
Feet	Advise women with type 2 diabetes that their current medication for diabetes will need to be reviewed, and that they will probably be advised to switch to insulin therapy for the duration of their pregnancy.
Kidneys	Discuss the importance of optimal blood glucose control with the woman.
Eyes	Women planning pregnancy should ideally aim to achieve a pre-conception HbA1C value of less than 42 mmol/mol (< 6.1%) if this can be achieved safely. Reassure the woman that any reduction in HbA1C towards the normal HbA1C value of less than 42 mmol/mol (< 6.1%) is likely to reduce the risk of concepting the achieved is a normal HbA1C cannot be achieved then the woman
Hypoglycaemia	should aim for a target of less than 53 mmol/mol (< 7%) if this target is safely achievable, but hypoglycaemic risk should be considered when trying to achieve this target.
Care Planning	Advise the woman to continue using effective contraception methods until her individualized target has been achieved. Offer monthly monitoring of HbA1C.
Education	Ensure that complications of diabetes are reviewed.
Medication Management	Measure thyroid stimulating hormone (TSH), free thyroxine, and thyroid peroxidase antibodies in women with type 1 diabetes.
Pre-conception	

Joint Consultation – Diabetes Review Level 1

NWL ICS Diabetes Review Level	I 1 ES 2024/25	
Pages «		
*KPIs	JOINT CONSULTATION	
Mental Health		
Diagnosis	Seen in multidisciplinary diabetic clinic Tarte	revious entry
BP		evious entry
HbA1c	Consultation Type	
Lipids	Joint Consultation V No pr	revious entry
Lifestyle	Text	
Feet		
Kidneys	Please tick the box below if the consultation was done as a virtual clinic or telephone discussion with the DSN/DNC	
Eyes	Third party consultation Text No pr	revious entry
Hypoglycaemia		
Care Planning		
Education		
Medication Management		
Pre-conception		
Joint Consultation		

Recall – Diabetes Review Level 1

NWL ICS Diabetes Review Level	1 ES 2024/25			
Pages «				
*KPIs	RECALL			
Mental Health	Diabetic annual review	Follow Up	20-Aug-2024	No previous entry
Diagnosis		Text		
PD	HbA1c Recall	Follow Up	20-Aug-2024	No previous entry
DP	BP Recall	Follow Up	20-Aug-2024	No previous entry
HDA1C	Cholesterol Recall	Follow Up	20-Aug-2024	No previous entry
Lipids				
Lifestyle				
Feet				
Kidneys				
Eyes				
Hypoglycaemia				
Care Planning				
Education				
Medication Management				
Pre-conception				
Joint Consultation				
Recall				

Patient Information – Diabetes Review Level 1

Know Diabetes Links

Know Diabetes - Diabetes Education BAME section Low carb section Move more Remission Remission videos REWIND Patient videos Understanding blood results Complications Downloadable resources Blog

Type 2 Diabetes Remission Information

Remission slides Remission slides (short version) Printable patient information leaflet

Best other websites for Type 2 Dietary Information

Diet Doctor The Blood Sugar Diet Low Carb Programme

Type 1 Information

eLearning courses (pumps, growing up with type 1): Type 1 Resources:

Diabetes Videos

Healthy Eating Diabetes remission/reversal Surinder's story - lifestyle changes Martin's story - using technology to make changes Patrick's story - getting more active and cutting carbs Ian's story - low carb diet More NWL patient videos

Patient Leaflets

Living with Diabetes (Diabetes.co.uk) Diabetes Information Prescriptions (Diabetes.co.uk) Glucose control Rationale of diabetes treatment Hypoglycaemic Managment Sick day rules Safe driving and the DVLA Free online Hypo Training Program

Links to patient information (copy the link and send to patient)

Clinical Searches and Reports – Diabetes Review Level 1

Searches

Reporting > Population Reporting > NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 > Diabetes Level 1

Searches: Payment and Missing Data

Information – Diabetes Review Level 1

Disclaimer		
This template has been created by the North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accur the accuracy of the data produced using this template remains with the Practice; the ICB strongly recommend that Practices ensure appropriate checks are in the NWL IT Team by emailing nhsnwl.servicedesk@nhs.net	ate. However, responsibility for ensuri place and that any errors are reported	ng to
Video: EMIS diabetes template quidance by Dr Tony Willis		
Feedback		
Your template feedback is important to us. Please send your comments/requests to the address below nhsnwl.servicedesk@nhs.net		
Template Publish Date: April 2021		
Template Review Date: March 2024		
For template audit only		
Template entry	07-Aug-2024	*

On this page you will find the disclaimer and feedback email address. You will also find a link to a very informative video: EMIS diabetes template guidance by Tony Willis

You will also find the purpose of the template, when it was last updated and who designed and developed it.


Diabetes Early Onset/ T2DAY Template 2024/25

WL ICS Diabetes Early Onset/T2DAY ES 2024/25					
Pages «	Pages «				
Main page	North West London ICB Early Onset Type 2 Diabetes Review ES 2024/25				
Patient Resources	NOTE: Fields marked with * are mandatory				
Clinician Resources Information	Diagnosis Consider: Potential misclassification of diabetes type, Alternative diagnosis considered unlikely, Alternative diagnosis possible, Pancreatic autoantibody testing, Referral to specialist				
	Genetic Testing MODY Diagnosis interpretation Text	30-Nov-2023	*		
	Pancreatic Autoantibody Testing				
	Glutamic acid decarboxylase antibody u/m	No previous entry			
	Serum glutamic acid decarboxylase kU/L klub klub klub klub klub klub klub klub	No previous entry			
	Insulnoma-associated antigen-2 antibody U/mL	No previous entry			
	*Pre-pregnancy counselling				
Consider: Pre-pregnancy counselling, Contraception discussed, Planning for possibility of pregnancy, Folic acid prescriptions to women of child bearing age					
	Please ensure that folic acid is prescribed to women of childbearing age				
	*Pre-conception education Text	30-Nov-2023	*		
	Cardiovascular Risk				
	Optimisation of glycaemia and cardiovascular risk and weight Consider: Lipid-lowering therapies, BP management, SGLT2 inhibitors, ACE/ARB, Weight management, GLP-1 receptor agonist treatment,				
	Cardiovascular Risk Text	30-Nov-2023	*		
	Psychological well-being				
	Psychological wellbeing unmet and social needs				
	Advice about psychological well-being Text	30-Nov-2023	*		
	*Referral				
	*Weight Management Referral	30-Nov-2023 Referral to w	*		
	*Referral to service	30-Nov-2023 Referral to c	*		
	*EOT2D Management Plan				
	review Text	30-Nov-2023	*		
	North West London ICB [template name] 2024/25 <u>nhsnwl servicedesk@nhs.net</u>				

This enhanced service is for Early Onset Diabetes for the under 40s

The area marked with an asterisk need to be completed for ES payment

Patient Resources - Diabetes Early Onset/T2Day

Clinician Resources - Diabetes Early Onset/T2Day

Patient Resources

Know Diabetes links

Know Diabetes Find a programme https://www.knowdiabetes.org.uk/professional/diabetes-education-for-people-with-diabetes/ BAME section https://www.knowdiabetes.org.uk/get-local/bame/ Low carb sectionhttps://www.knowdiabetes.org.uk/be-healthier/low-carb/ Move more https://www.knowdiabetes.org.uk/get-local/bame/ Low carb sectionhttps://www.knowdiabetes.org.uk/be-healthier/move-more/ Remission https://www.knowdiabetes.org.uk/be-healthier/low-carb/ Remission https://www.knowdiabetes.org.uk/know-more/achieving-type-2-remission/ Remission videoshttps://www.knowdiabetes.org.uk/know-more/remission-video-page/ REVINDhttps://www.knowdiabetes.org.uk/for-you/programmes/type-2/diabetes-rewind-programme/ Patient videoshttps://www.knowdiabetes.org.uk/for-you/get-inspired/

Understanding blood resultshttps://www.knowdiabetes.org.uk/know-more/your-blood/ Complicationshttps://www.knowdiabetes.org.uk/know-more/feet-heart-eyes-and-kidneys/ Downloadable resources <u>https://www.knowdiabetes.org.uk/for-you/free-resources/</u>

Blog https://www.knowdiabetes.org.uk/blog/

Type 2 Diabetes Remission Information

Remission slides:https://rebrand.ly/t2dmRemissionSlides Remission slides (short version):https://rebrand.ly/t2dmRemissionSlidesShort Printable patient information leaflethttps://rebrand.ly/t2dmRemissionHandout

Best other websites for Type 2 dietary information

Diet Doctor:https://www.dietdoctor.com The blood sugar diet: <u>https://thebloodsugardiet.com/</u> Low carb programme:https://www.lowcarbprogram.com/

Type 1 Information

eLearning courses (pumps, growing up with type 1): <u>https://www.knowdiabetes.org.uk/for-you/elearning/</u> Type 1 Resources: <u>https://www.t1resources.uk/home/</u>

Diabetes information in different languages

Information in different languages https://www.diabetes.org.uk/diabetes-the-basics/information-in-different-languages

Clinician Resources

NW London Diabetes Referral Guidelines

https://www.nwlondonics.nhs.uk/professionals/referral-quidelines-and-clinical-documents/diabetes

NWL Diabetes Type 2 Clinical Guidelines

https://www.nwlondonics.nhs.uk/application/files/4316/7352/6001/00 NHS NWL Type 2 Diabetes Clinical Guidelines Dec 2022.pdf

Clinical Searches and Reports – Diabetes Early Onset Type 2

Activity/KPIs: NWL Enterprise S&R >> NWL Enhanced Services 2024 25 >> 14 Diabetes Early Onset Type 2

Data Quality: NWL Enterprise S&R >> NWL Enhanced Services 2024 25 >> Diabetes Early Onset Type 2

Information – Diabetes Early Onset Type 2

Disclaimer

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Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).

Purpose

The purpose of this template is to support practices identify and support care for patients with early onset type 2 diabetes.

Developed by

Developed by the NWL PCS System Development team

Version

This template was last updated in April 2024

On this page you will find the disclaimer and feedback email address.

You will also find the purpose of the template, when it was last updated and who designed and developed it.



Diabetes MDT Template 2024/25

NWL ICS Diabetes MDT Review ES 2024/25					
Pages «	North West London ICB Diabetes MDT ES 2024/25				
Pre-MDT		NOTE: Fields marked with * are mandatory			
Metrics	Pre-MDT Activities				
*MDT	Please ensure all pre-MDT fields are	e complete before the MDT			
Clinician Resources	Reason for referral	Text	22-Dec-2022	*	
Information	Referral Outcome (Accepted/Rejected)	Text	No previous entry		
Information	Pre-MDT Assessment	Text	No previous entry		
	Patients Occupation	✓	No previous entry		
		20-Aug-2024			
	Shift worker		No previous entry		
	Night shift worker		No previous entry		
	Needle phobia	Text	No previous entry		
	Conflicting spiritual beliefs and medical/health care regimen	Text Regarding diagnosis/over treatment/needles/prefers natural	No previous entry		
	Health beliefs eg ambivalence, phobia				
	Frailty	v	No previous entry		
	Has a carer	Text	No previous entry		
	Well-being assessment for long term conditions reviewed		No previous entry		
	Medication compliance status	v	13-Nov-2020 Drug complia	*	
		20-Aug-2024			
		Text			
	Medication review		12-Sep-2023	*	
	Medication review done by	×	24-Dec-2020 Medication re	. »	
	Patient has Know Diabetes Account		07-Aug-2024	*	
	Knowdiabetes.org.uk				
		North West London ICB Diabetes MDT 2024/25 nhsnwl.servicedesk@nhs.net			

This part of the template needs to be completed before the MDT

Metrics - Diabetes MDT Review

NWL ICS Diabetes MDT Review ES 2024/25					
Pages «	Metrics				
Pre-MDT	Frequency of hypoglycaemia attack	07-Aug-2024 1 times/week	*		
Metrics	Insulin dependent	No previous entry			
*MDT	Hyperglycaemia Text Number of admissions for Hyperglycaemia and/or DKA	No previous entry			
Clinician Resources	Anti GAD ABs	No previous entry			
Information	HbA1c Level	07-Aug-2024 45 mmol/mol	*		
Inormation	BP	07-Aug-2024	*		
	Body Mass Index Calculate	07-Aug-2024 300781.25 kg	*		
	QRISK2 cardiovascular disease 10 year <u>%</u>	05-Nov-2019 3.3 %	*		
	MA Ratio	07-Aug-2024 3 mg/mmol	*		
	Microalbuminuria	No previous entry			
	eGFR	07-Aug-2024 6 mL/min	*		
	CKD GA Stage	No previous entry			
	CKD Status	No previous entry			
	REWIND	16-Mar-2023	*		
	Structured Education	07-Aug-2024	*		
	Alcohol Consumption	16-Mar-2023 10 U/week	*		
	Smoking status	07-Aug-2024 Ex-smoker	*		
	Drug use	No previous entry			
	Medication Review	12-Sep-2023	*		
	Comorbidities				
	Mental Health	01-Aug-2024 Eating disorder	*		
	Ischaemic Heart Disease	No previous entry			
	Stroke	No previous entry			
	Heart Failure	No previous entry			
	Peripheral vascular disease	No previous entry			
	Retinopathy	02-Nov-2021 Diabetic retin	*		
	Renal Disease	No previous entry			

MDT* - Diabetes MDT Review

IWL ICS Diabetes MDT Review ES 2024/25				
Pages «				
Pre-MDT	NOTE: Fields	s marked with * are mandatory		
Metrics	Questions for MDT			
*MDT	Referral for multidisciplinary review Text Please list questions for MDT		No previous entry	
	Multi-Disciplinary Team (MDT) Meeting			
Clinician Resources	Please ensure all pre-MDT fields are complete before the MDT			
Information	Attendees (including roles)		No previous entry	
	Seen by	~	16-Mar-2023 Seen by phar	*
	Discussion about treatment options Text		No previous entry	
	Outcome of MDT discussion Text		No previous entry	
	Refer to weight management service	~	30-Nov-2023 Referral to w	*
	Referred to ARRS services	~	27-Oct-2023 Referral to so 2	*
	Referral to other service	~	30-Nov-2023 Referral to c	*
	Social prescribing declined		No previous entry	
	Both boxes below must be ticked on the same day			
	The second secon		No previous entry	
	Text			
	*Enhanced services administration		27-Oct-2023	*

Complete the starred areas for ES payment.

Also ensure that when completed you remember to tick the boxes for MDT Diabetes review and Enhanced Services Administration which are the bottom of the page.

Please do read notes in red or bold blue which may help you to complete the template

Clinical Searches and Reports – Diabetes MDT

NWL Enhanced Service Searches

NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 08 Diabetes L2

Information – Diabetes MDT

NWL ICS Diabetes MDT Review ES 2024/25					
Pages	*	Disclaimer			
Pre-MDT		This template has been created by North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accurate. However, responsibility for ensuring the accuracy of the data produced using this			
Metrics		template remains with the Practice; the ICB strongly recommends that Practices ensure appropriate checks are in place and that any errors are reported to the NWL 11 Team by emailing nhsnwl.servicedesk@nhs.net			
*MDT		Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).			
Clinician Resources					
(Purpose			
Information		The purpose of this template is to capture data relevant for diabetes multidiciplinary review			
		Developed by			
		Developed by the NWL PCS System Development team and the NWL diabetes clinical leads			
		Version			
		This template was last updated April 2024			



ECG Template 2024/25

NWL ICS ECG ES 2024/25				
Pages «	Cardiology			· · · · · · · · · · · · · · · · · · ·
ECG		North West London ICB ECG ES 2024/25		
Guidance		NOTE: Fields marked with * are mandatory		
Information	ES Payment criteria			
	*ECG tests conducted		17-Oct-2022	*
	*Enhanced services administration		27-Oct-2023	*
	*ECG Interpretation	\checkmark	No previous entry	
	*Home visit		No previous entry	
	To Achieve Payment for ECG E01 Has SNOMED code of Electrocardiographic Has SNOMED code of Enhanced services ar To Achieve Payment for ECG Home Visi Achieved coding required for E01 AND Has SNOMED code of Home Visit (439708 To Achieve Payment for ECG Interpret Achieved coding required for E01 AND Has SNOMED code of ECG normal (16485-	monitoring (46825001) recorded by the provider AND dministration (166221000000105) recorded at the same time as ECG its EO2 1006) recorded at the same time as the ECG ation EO3 4000) OR ECG equivocal (370359005) OR ECG abnormal (102594003) recorded by the provider		

Complete the areas with an asterisk for ES payment.

Ensure you tick the enhanced services administration code at the same time as the you tick the Diagnostic electrocardiography box.

Only tick the Home visit if you have seen the patient in their home.

When returning to the template to add in the ECG Overview/Results **do not** tick the ECG and Enhanced Services Administration boxes again.

You will also find on this page the SNOMED codes used in the templates that will lead to achieving Enhanced Service payment (These areas are highlighted with an asterisk).

KPIs Cont'd – ECG

Additional Information (Optional)					
Pulse rate	beats/min		27-Apr-2022 100 beats/min 🕨		
Pulse rhythm	v	-	No previous entry		
ECG: Heart rhythm		·	No previous entry		
ECG: Conduction Abnormalities	↓	-	No previous entry		
ECG: LVH		-	No previous entry		
ECG: QT interval		-	No previous entry		
ECG: QT interval length		ł	No previous entry		
Males: Borderline = 431-450ms; Abno	ormal > 450ms. Females: Borderline = 451-470ms; Abnormal > 470ms				
AF diagnosis		\sim	No previous entry		
ECG: old myocardial infarction			No previous entry		
Old myocardial infarction		\sim	No previous entry		
BP and serum potassium may be help	pful				
BP			07-Aug-2024 180/110 mmHg 🔌		
Serum potassium level			No previous entry		
ECG interpretation (add notes)		\sim	No previous entry		
	Text				
Reason for ECG		\sim	No previous entry		
Reason for ECG if not listed above	Text		17-0ct-2022		
	North West London ICB ECG ES 2024/25 <u>nhsnwl.servicedesk@nhs.net</u>				

Guidance - ECG

NWL ICS ECG ES 2024/25	
Pages «	Guidance
Pages ECG Guidance Information	Guidance Avis: Positive in lead I and avF = normal Negative in I and positive in avF = lead misplacement Positive in I and negative in avF look at lead II, if positive = normal, if negative = Left axis deviation Normal PR 012-0.2 seconds (3-5 small squares) Normal QRS 0.08-0.12 sec (2-3 small squares) Normal QRS 0.08-0.12 sec (2-3 small squares) Broad complexes: Mainly look at V1 and V6 R vave in V1 = RBBB Deep S wave in V1 suggests LBBB OT intervals should be: <0.448 (11 small sq) in men

Clinical Searches and Reports – ECG

Reporting

NWL Enhanced Service Searches

NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > ECG

Information – ECG

NWL ICS ECG ES 2024/25	
Pages «	Disclaimer
ECG	This template has been created by North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accurate. However, responsibility for ensuring the accuracy of the data produced using this template remains with the Practice; the ICB strongly recommends that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing nhsnwl.servicedesk@nhs.net
Information	Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).
	Purpose
	The purpose of this template is to provide a comprehensive data entry template for the purposes of ECG enhanced services in line with the specification.
	Developed by
	Developed by NWL PCS System Development team
	Version
	This template was last updated March 2024.

On this page you will find the disclaimer and feedback email address.

You will also find the purpose of the template, when it was last updated and who designed and developed it.



Hypertension Management Template 2024/25

WL ICS Hypertension Management ES 2024/25					
Pages «				^	
Diagnosis		North West London ICB Hypertension Managment 2024/25			
Lifestyle	Diagnosis				
Investigations	If patient age <40 consider referral t	If patient age <40 consider referral to secondary care			
Medicines Optimisation ES	*Hypertension Diagnosis (QOF)		~	05-Jan-2024 Stage 1 hype »	
Resources		20-Aug-2024			
Information	Hypertension resolved	20-Aug-2024		No previous entry	
Information	*Ethnicity		~ 🌽	19-Jun-2023 Other Mixed b 🔌	
	Pulse Rhythm		~	No previous entry	
	Pulse rate	beats/min		27-Apr-2022 100 beats/min 🔉	
	*BP (QOF)			07-Aug-2024 180/110 mmHg 🔌	
		20-Aug-2024			
	Target systolic blood pressure	mmHa		No previous entry	
	Target diastolic blood pressure	mmHg		No previous entry	
	Exception reporting (QOF)		~	No previous entry	
	Home Monitoring				
	Has access to BP monitor	Text		No previous entry	
	Advice relating to equipment and appliances	Text		No previous entry	
	Average home systolic blood pressure	20-Aug-2024		No previous entry	
	Average home diastolic blood pressure	20-Aug-2024		No previous entry	
QOF Target BP should be <140/90 for <80 years old and <150/90 for >80 years.				a <125/05 (<145/05 for 90+urs)	

Complete the areas marked with an asterisk for ES payment.

The areas marked with an asterisk also covers some of the QOF Indicators

The location of the report which finds your eligible patients is shown on the next page.

Please do read the notes written in dark blue which may help you to complete the template

Please note the QOF icon in brackets. You would need to complete those areas appropriate to the patient to meet the QOF criteria for payment

Diagnosis cont'd - Hypertension Management

QOF Target BP should be <140/90 for <80 years old and <150/90 for >80 years. Targets may be lower for those with co-merchilities and should be percentilized. Home BP measurements and ABPMs ha

Targets may be lower for those with co-morbidities and should be personalised. Home BP measurements and ABPMs have lower targets and for data entry should access their templates. Home BP targets should ideally be <135/85 (<145/85 for 80+yrs) Priority One

Clinic BP ≥180/120mmHg

Priority Two

Clinic BP ≥160/100 mmHg** Clinic BP ≥ 140/90mmHg** if BAME AND relevant comorbidity/ risk factor* No BP reading in 18 months

Priority Three Clinic BP ≥140/90mmHg**

Priority Four Clinic BP \approx 160/100 mmHg** Clinic BP \approx 140/90mmHg** if BAME AND relevant comorbidity/ risk factor* No BP reading in 18 months

NICE Guidance for Hypertension Management NWL Hypertension Guidelines

UCLP

Identify eligible patients using the UCLP CEG Risk Stratification searches:

Brent/Harrow: EMIS > Reporting > Population Reporting > NWL Emis Enterprise S&R > UCLP CEG Risk Stratification

Hillingdon: EMIS > Reporting > Population Reporting > Hillingdon Enterprise S&R > UCLP CEG Risk Stratification

NWL Enhanced Service Searches NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > Hypertenson

> North West London ICB Hypertension Management 2024/25 nhsnwl.servicedesk@nhs.net

UCLP CEG Risk Stratification Reports are highlighted in Red

Lifestyle – Hypertension Management

NWL ICS Hypertension Management ES 2024/25						
Pages «	Lifestyle					
Diagnosis	Standing height	cm	07-Aug-2024 1.6 cm »			
Lifestyle	Body weight	kg	07-Aug-2024 77 kg			
Investigations	Waist circumference	cm	No previous entry			
Medicines Optimisation ES	Body Mass Index	Calculate	07-Aug-2024 300781.25 kg 🔌			
Resources	*Smoking (QOF)		07-Aug-2024 Ex-smoker »			
Information	Alcohol units consumed per week	<u>U/week</u>	16-Mar-2023 10 U/week »			
	Exercise	~ ~	16-Mar-2023 Aerobic exer »			
	Lifestyle advice regarding exercise	Text	13-Nov-2023			
	Lifestyle advice regarding diet	Text	16-Mar-2023			

Please note QOF Indicator

Investigations – Hypertension Management

Pages «	Investigations			^
Diagnosis	ECG			
Lifestyle	Refer for ECG recording (QOF)	21-Aug-2024	No previous entry	
Investigations	ECG not done (Declined)		No previous entry	
Medicines Optimistics 50	<€ QRisk2 CVD Risk	% over 10 years Calculate View	05-Nov-2019 3.3 %	*
Medicines Optimisation ES	QRISK3 Calculator (grisk.org)			
Resources	QRISK3 CVD 10 year risk score	<u>%</u>	No previous entry	
Information	QRISK2 calculated heart age	<u>year</u>	No previous entry	
	Urine			
	Glucose	~	No previous entry	
	Protein	✓	No previous entry	
	Blood	~	No previous entry	
	Urine albumin:creatinine ratio	mg/mmol	07-Aug-2024 3 mg/mmol	*
	Blood Results			
	Serum cholesterol level	mmol/L	07-Aug-2024 6 mmol/L	*
	Serum triglyceride level		No previous entry	- 1
	eGFR (estimated glomerular filtration rate) using creatinine Chronic Kidney Disease Epidemiology Collaboration equation per 1.73 square metres	<u>mL/min</u>	07-Aug-2024 6 mL/min	»
	Serum creatinine level	umol/L	No previous entry	
	Serum sodium level	mmol/L	No previous entry	
	Serum potassium level	mmol/L	No previous entry	

Please note QOF Indicators

Investigations – Hypertension Management Cont'd

Medication			
Statins	×	12-Jan-2024 Patient on ma	*
Medication review	Text	12-Sep-2023	*
Plan			
Hypertension monitoring	Text	27-Oct-2023	*
☐ Hypertension clinical management plan	Text	16-Mar-2023	*
Additional			
Patient on maximal tolerated antihypertensive therapy (QOF)		12-Jan-2024	*
□ Blood pressure procedure declined (QOF)		No previous entry	

Please note QOF Indicators

Medicines Optimisation - Hypertension Management

NWL ICS Hypertension Managem	/L ICS Hypertension Management ES 2024/25				
Pages «	Medicines Optimisation Enhanced Service - Optimising Antihypertensive Management				
Diagnosis	Adult patients aged 40-80 with a latest clinic blood pressure >= 140/90 and on a single antihypertensive agent Search Location:				
Lifestyle	<u>nt</u>				
Investigations	NW London Enterprise S&R > Medicines Team Brent Searches (Brent viewable) > Medicines Enhanced Service 24/25 > TGT2.4 Optimising Antihypertensive Management				
Medicines Optimisation ES	Harrow NW London Enterprise S&R > Harrow Reports > Medicines Management v1 > Medicines Enhanced Service 24/25 > TGT2.4 Optimising Antihypertensive Management				
Resources	Hillingdon				
Information	Hillingdon Enterprise S&R > NW London ICB > Medicines Management v1 > Medicines Enhanced Service 24/25 > TGT2.4 Optimising Antihypertensive Management				
	*Understands importance of blood pressure monitoring and control Text 22-Nov-2023				
	AND select one of the following:				
	*Current treatment status v 13-Nov-2023 Treatment fo »				
	Text				
	NICE: NG136 Visual summary. Hypertension in adults: diagnosis and treatment NICE: NG136 Patient decision aid on how do I control my blood pressure? Lifestyle options and choice of medicines				

Complete the areas marked with an asterisk for ES payment.

Resources – Hypertension Management

Clinical Resources

<u>NWL Hypertension Guidelines</u> NICE Guidance for Hypertension

Patient Resources

To send the link to the patient, (highlight the hyperlink below then Ctrl +C to copy, Ctrl + V to paste into SMS or email)

https://www.bhf.org.uk/informationsupport/publications/heart-conditions/understanding-blood-pressure

https://www.nhs.uk/conditions/high-blood-pressure-hypertension/

Information on appropriate home BP machines and supporting monitoring

https://www.nwlondonccq.nhs.uk/application/files/6816/2869/7521/BPMatHome_device_information.pdf

Sample messages to copy-paste regarding results of Home BP monitoring

Normal Blood Pressure results (no tests needed)

Thanks for your blood pressure readings. These show your BP is well controlled. Please continue the same treatment & send a new set of readings in 6 months time For info on hypertension, seehttps://www.nhs.uk/conditions/high-blood-pressure-hypertension/

Normal Blood Pressure results (tests needed)

Thanks for your blood pressure readings. These show your BP is well controlled. Please continue the same treatment & send a new set of readings in 6 months time. You are now due for routine blood test monitoring. We will send a separate text to explain how to book your blood tests. For info on hypertension, see https://www.nhs.uk/conditions/high-blood-pressure-hypertension/

Raised home Blood Pressure results (no tests needed)

Thanks for your blood pressure readings. These show your BP is not well controlled. Please book an appointment with a Dr to discuss this. For info on hypertension, see https://www.nhs.uk/conditions/high-blood-pressure-hypertension/

Raised home Blood Pressure results (tests needed)

Thanks for your blood pressure readings. These show your BP is not well controlled. Please book an appointment with a Dr to discuss this. You are also due blood tests. We will send a separate text to explain how to book your blood tests. For info on hypertension, see https://www.nhs.uk/conditions/high-blood-pressure-hypertension/

Clinical Searches and Reports – Hypertension Management

Reporting

<u>NWL Enhanced Service Searches</u> NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > Hypertension

Information – Hypertension Management

Disclaimer

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Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).

Purpose

The Hypertension Management template is a resource which aims to help clinicians in the diagnosis, assessment and management of their patients with Hypertension. It will aid accurate coding, has a framework for assessment and has links to resources to help manage the patients effectively. It should support practices and PCNs in achieving targets in NWL Enhanced service, QOF and the PCN DES IIF.

Developed by

Developed by NWL PCS System Development team, with guidance from NWL Cardiovascular lead.

Version

This template was last updated in March 2024.

On this page you will find the disclaimer and feedback email address.

You will also find the purpose of the template, when it was last updated and who designed and developed it.



Latent TB Template

KPIs – Latent TB

NWL ICS Latent TB ES 2024/25				
Pages «				
Latent TB / KPIs		North West London ICB Latent TB ES 2024/25		
Information		NOTE: Fields marked with * are mandatory		
	*ES KPI			
	*Screening invited/declined	×	No previous entry	
	*Patient tested for TB this contract year	· ~	No previous entry	
	*Examination for suspected		No previous entry	
	Referral to tuberculosis screening service		03-Nov-2022 >>	
	History			
	History			
	Country of birth	V	No previous entry	
	Date of entry to United Kingdom	21-Aug-2024	No previous entry	
	Please list all countries visited/lived i	n for more than 6 months during the past 5 years		
	Country lived in	×	No previous entry	
	Ethnic category - 2001 census	V	19-Jun-2023 Other Mixed b »	

Complete the areas marked with an asterisk for ES payment.

KPIs – Latent TB

Pages «	TB risk				1
Latent TB / KPIs	Examination		Ô		
Information	Intravenous drug user Alcohol abuse		•	No previous entry No previous entry	
	Smoking status		\sim	07-Aug-2024 Ex-smoker	
	Homeless			No previous entry	
	Exposure to tuberculosis			No previous entry No previous entry	
	BCG vaccination	21-Aug-2024		No previous entry	
	Screening				
	Plan		$\hat{}$		
	Tick if patient does NOT want data sha	ared with Public Health			
	Declined consent to share patient data with specified third party	Text		No previous entry	

KPIs cont'd – Latent TB

NWL TCC Latent TD EC 2024/25

WWE ICS Editent TD ES 2024/			
Pages	« Testing / results		
Latent TB / KPIs	Cough present?	×	No previous entry
Information	Fever present?	×	No previous entry
	Night sweats		No previous entry
	Abnormal weight loss		No previous entry
	Tuberculosis test by ELISA (enzyme linked immunoabsorbant assay) interferon-gamma release assay		No previous entry
	Blood sample taken		No previous entry
	Did not attend blood test		No previous entry
	Investigation results education		No previous entry
	Inactive tuberculosis		No previous entry
	Lymphadenopathy?	~	No previous entry
	O/E - chest examination normal		No previous entry
	O/E: BCG scar present		No previous entry
	Standard chest X-ray requested		No previous entry
	Standard chest X-Ray Result	×	No previous entry
	HIV screening	✓	No previous entry
	Hep B screening	~	No previous entry
	Hep C screening	×	No previous entry
	Tuberculosis	V	No previous entry
	Discussion about treatment	Text	No previous entry

Information – Latent TB

WL ICS Latent TB ES 2024/25			
Pages «	KPI		
Latent TB / KPIs	Patients included in Target population TBOD: • Patients must be aged 16-35 • Registered WK within the last 5 years (86002100000109) • Born OR Lived >6 months in a high incidence country • No previous history of TB or LTBI • Not previously screened for LTBI (171400006/1087701000000104 PAYMENT/KPI RULES To Achieve Payment for Latent TB Invitation (3 times) or Declined for TB01 • Patient is in target population TB00 AND • Has SNOMED code of Latent tuberculosis screening invitation at least 3 times (<<925541000000101) on different days OR Latent tuberculosis screening invitation at least 3 times (<<925541000000101) on different days OR Latent tuberculosis screening declined (926261000000105) recorded by the provider To Achieve Payment for Latent TB Testing TB02 • Patient is in target population TB00 AND • Has either SNOMED code of IGRA Positive (440662009) OR IGRA Negative (440661002) OR IGRA Indeterminate (439996009) recorded by the provider To Achieve Payment for Positive (640662009) OR IGRA Negative (440661002) OR IGRA Indeterminate (439996009) recorded by the provider To Achieve Payment for Positive IGRA Result and Referral to TB Service TB03 • Patient is in target population TB00 AND • Has SNOMED code of IGRA Positive (440662009) recorded by the provider AND • Has SNOMED code of Referral to tuberculosis screening service (51912100000100) OR Examination for suspected • tuberculosis (T21400006) recorded by the provider		

This page gives you guidance on the target population

You will also find the SNOMED codes used in this template that will lead to achieving Enhanced Service payment

Clinical Searches and Reports – Latent TB

Reporting

NWL Enhanced Service Searches

NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 13 Latent TB

Information – Latent TB

Disclaimer

This template has been created by the North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accurate. However, responsibility for ensuring the accuracy of the data produced using this template remains with the Practice; the ICB strongly recommend that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing https://www.servicedesk@nhs.net

Feedback

Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).

Purpose

The purpose of this template is to enable the capture of data for NWL Latent TB.

Amendments

Last updated: April 2024

Developed by

Developed by NWL PCS System Development team.

On this page you will find the disclaimer and feedback email address.

You will also find the purpose of the template, when it was last updated and who designed and developed it.



Mental Health Template 2024/25

KPIs - Mental Health

Pages «	NWL Mental Health ES				
KPIs	NWL ICS Mental Health Enhanced Service 2024/25				
Physical Health (Nurse/HCA)	NOTE: All of the below fields are mandatory ONE annual review and ONE follow-up per year are required and must be recorded on different days				
Respiratory / Diabetes					
Psychosocial	This page contains only the mandatory fields required for a mental health review. For additional supporting fields and a more detailed version of pages in this template.	the review please use the other	r		
Recovery and Stay Well Plan GP	CCMI				
Follow-up	Add patient to CCMI register	No previous entry			
Depot	Only tick for patients with CCMI. Do NOT tick for SMI patients as these will be automatically identified from the Mental Health register.				
Lithium Prescribing	Physical Health				
Blood Results	*BP /	07-Aug-2024 180/110 mmHg	*		
Mandatory fields	*Body Mass Index Calculate	07-Aug-2024 300781.25 kg	*		
Resources	Bloods				
	Record serum cholesterol level. Record HbA1c OR fasting glucose. Most recent blood test result will be shown on the right. This need to be dated within the past 12 months.				
Contract Specification	MH11 and 12 HbA1C or fasting glucose and lipids or cholesterol will NOT be mandatory for SMI and CCMI patients who are NOT on antipsychoti years OB have had these blood tests done within the last 2 years	c medication AND are under 35			
Information					
	*Serum cholesterol level	07-Aug-2024 6 mmol/L	*		
	PLUS				
	*Haemoglobin A1c level - International <u>mmol/mol</u> Federation of Clinical Chemistry and Laboratory Medicine standardised	07-Aug-2024 45 mmol/mol	*		
	OR				
	*Serum fasting glucose level mmol/L	No previous entry			

Complete the areas marked with an asterisk for ES payment.

Please do read the notes written in dark blue which may help you to complete the template

Please note the QOF icon in brackets. You would need to complete those areas appropriate to the patient to meet the QOF criteria for payment

Only CCMI Patients being reviewed need to be added to the CCMI Register this financial year (do not tick for SMI Patients)

KPIs Cont'd - Mental Health

	NWL ICS Mental Health ES 2024/	25	
	Pages «	Lifestyle	^
	KPIs	*Smoking status ~	07-Aug-2024 Ex-smoker »
	Physical Health (Nurse/HCA)	*Alcohol units consumed per week	16-Mar-2023 10 U/week »
•	Respiratory / Diabetes	*Substance misuse V	No previous entry
	Psychosocial	*Dietary assessment ~	No previous entry
	Recovery and Stay Well Plan GP	*Exercise assessment \checkmark	No previous entry
		Vaccination	
	Follow-up	Seasonal influenza vaccination (QOF)	26-Sep-2022 Administratio »
	Depot	Coronavirus vaccination 🗸	No previous entry
	Lithium Prescribing	Cancer screening	
	Blood Results	Tick if applicable	
	Mandatory fields	*Provision of information about cervical screening programme (25.64/mc)	No previous entry
	Resources	— *Advice given about breast	No provious entry
	Contract Specification	screening programme (50-70yrs)	No previous entry
	Information	*Advice given about bowel cancer screening programme (60-74yrs)	No previous entry
		Please send these screening easy read information links to all patients they are relevant for.	
		https://tinyurl.com/breast-screening-easy	
		<u>nttps://tinyuri.com/smear-test-easy</u> https://tinyuri.com/bowel-test-easy	

Complete the areas marked with an asterisk for ES payment.

Please note the QOF icon in brackets. You would need to complete those areas appropriate to the patient to meet the QOF criteria for payment

KPIs (Recovery and Stay Well Plan) cont'd - Mental Health

NWL ICS Mental Health ES 2024/25				
Pages «	Recovery and Stay Well Plan			
KPIs	*Mental health medication review	No previous entry		
Physical Health (Nurse/HCA)	*Current mental state Text	No previous entry		
Respiratory / Diabetes	Including symptoms and signs of becoming unwell	_		
Psychosocial	*Current treatment & crisis plan Text	No previous entry		
Recovery and Stay Well Plan GP	Including treatment response & other support required	_		
Follow-up	*Goals and priorities Text	07-Aug-2024 »		
Depot	What would feeling better look like			
Lithium Prescribing	*Agreeing on mental health care plan Text	No previous entry		
Blood Results	SMART goals e.g. taking the stairs not the lift to aid weight loss			
Mandatory fields	*Mental health personal health plan (Recovery & Stay Well Plan completed)	No previous entry		
Resources	Care plan provided?	07-Jun-2022 Provision of c »		
Contract Specification				
Information	1 annual review per year is mandatory.			

Complete the areas marked with an asterisk for ES payment.

KPIs Cont'd - Mental Health

NWL ICS Mental Health ES 2024	NL ICS Mental Health ES 2024/25				
Pages «	Annual review / follow-up				^
KPIs	1 annual review AND 1 follow-up consultation per year is mandatory. MUST be recorded on different days.				
Physical Health (Nurse/HCA)	*Annual mental health review completed		07-Jun-2022	*	
Respiratory / Diabetes	*Mental health review follow-up		No previous entry		
Psychosocial	Lithium monitoring				
Recovery and Stay Well Plan GP	Lithium monitoring is ONLY required for patients taking Lithium. They must have a 6 monthly check of Lithium levels, re-	enal function and	thyroid function. For patients	at	
Follow-up	nigner risk this should be done 3 monthly.		No consideration and the		
Depot	*Serum lithium level		No previous entry		
Lithium Prescribing	*eGFR	~	07-Aug-2024 6 mL/min	*	
Blood Results	*Serum TSH (thyroid stimulating mU/L hormone) level		No previous entry		
Mandatory fields	Further information on mandatory fields				
Resources	1. *BMI 2. *BP				
Contract Specification	3. *Diet assessment 4. *Exercise assessment				
Information	5. *Smoking status 6. *Alcohol intake				
	 7. *Substance misuse 8. *Cancer screening 9. *Recovery and Stay Well Plan (RSWP) 10. *Medication review 11. *HbA1c or fasting glucose 12. *Lipids or cholesterol 13. *Lithium monitoring 14. *First appointment (annual review) 15. *Follow-up appointment (must not occur on same day as First appointment 				~

Complete the areas marked with an asterisk for ES payment. A list of the mandatory fields is shown here in red.

Please do read the notes written in dark blue and red which may help you to complete the template. Follow up must be completed on a different day to the review.
Physical Health - Mental Health

NWL ICS Mental Health ES 2024/	/25			
Pages «		NWL ICS Mental Health Enhanced Service 2024/25		^
KPIs		NOTE: Fields marked with * are mandatory ONE annual review and ONE follow-up per year are required		
Physical Health (Nurse/HCA)	CCMI / SMI Payment codes			
Respiratory / Diabetes	*Add patient to CCMI register		No previous entry	
Psychosocial	Only tick for patients with CCMI. Do	NOT tick for SMI patients as these will be automatically identified from the Mental Health register.		
Recovery and Stay Well Plan GP	SMI in remission		No previous entry	
Follow-up	SMI remission criteria: 5 years withou	It psychiatric care or antipsychotic meds		
Depot	Physical Health			
Lithium Prescribing	Consultation type	×	No previous entry	*
Blood Results	*BP (QOF) *Body Mass Index (OOF)		07-Aug-2024 300781.25 kg	*
Mandatory fields	QRISK2 unsuitable/declined	~	No previous entry	_
Resources	Pulse rhythm		No previous entry	
Contract Specification				
Information	Pulse rate	beats/min	27-Apr-2022 100 beats/min	*
	Height	cm	07-Aug-2024 1.6 cm	*
	Weight	kg	07-Aug-2024 77 kg	*
	Waist circumference	cm	No previous entry	
	Hypertension and Obesity are commo patient group.	on in patients with serious mental illness. Annual BP, Pulse, BMI checks and Qrisk Assessment are required of	lue to increased risk of CVD in th	is 🗸

Complete the areas marked with an asterisk for ES payment if not already completed on the KPI Page.

Please do read the notes written in dark blue and red which may help you to complete the template Only CCMI Patients being reviewed need to be added to the CCMI Register this financial year (do not tick for SMI Patients)

Physical Health cont'd - Mental Health

NWL ICS Mental Health ES 2024	/25			
Pages «	Diabetes markers and lipid profile			^
KPIs	Record serum cholesterol level. Record HbA1c OR fasting glucose. Most recent blood test result will be shown on the right.			
Physical Health (Nurse/HCA)	MH11 and MH12 HbA1C or fasting glucose and lipids or cholesterol need to be dated within the past 12 months EXCEPT for SM medication AND are under 35 years OR have had these blood tests done within the last 3 years.	1I and CCMI pat	tients who are NOT on antipsych	otic
Respiratory / Diabetes	*Serum cholesterol level (QOF) mmol/L		07-Aug-2024 6 mmol/L	*
Psychosocial	PLUS			
Recovery and Stay Well Plan GP	*HbA1c (QOF) <u>mmol/mol</u>		07-Aug-2024 45 mmol/mol	*
Follow-up	OR			
Depot	*Serum fasting glucose level <u>mmol/L</u>		No previous entry	
Lithium Prescribing	Blood test declined		No previous entry	
Blood Results	*Serum lithium level (for pts on lithium mmol/L		No previous entry	
Mandatory fields	only)			
Resources	Smoking *Smoking status		07 Aug 2024. Ex. smoker	
Contract Specification			07-Aug-2024 EX-Shioker	~
Information	Current smokers: offer referral to smoking cessation programme. Complete Respiratory page to screen for COPD case finding an	nd diagnosis.		
	Smoking intervention	~	No previous entry	

Complete the areas marked with an asterisk for ES payment if not already completed on the KPI Page.

Please do read the notes written in dark blue which may help you to complete the template

Physical Health cont'd - Mental Health

NWL ICS Mental Health ES 2024	/25		
Pages «	Alcohol		^
KPIs	*Alcohol consumption	~	05-Nov-2019 Moderate dri »
Physical Health (Nurse/HCA)	*Alcohol units consumed per week	<u>U/week</u>	16-Mar-2023 10 U/week »
Respiratory / Diabetes			
Psychosocial	AUDIT-C score		No previous entry
Recovery and Stay Well Plan GP	Alcohol intervention	~	No previous entry
Follow-up	Substance misuse		
Depot	*Substance misuse	~	No previous entry
Lithium Prescribing			
Blood Results	Substance intervention	×	No previous entry
Mandatory fields	Diet & exercise		
Resources	*Dietary assessment	~	No previous entry
Contract Specification	*Exercise assessment	~	No previous entry
Information			
	Dietary advice	~	16-Mar-2023 Lifestyle advi »
	Exercise advice	~~	19-Jun-2020 Patient advis »
	Exercise history	Text	No previous entry
	Fruit & veg intake	~	No previous entry

Complete the areas marked with an asterisk for ES payment if not already completed on the KPI Page.

Please do read the notes written in dark blue which may help you to complete the template

Physical Health cont'd - Mental Health

KPIs	Vaccination		
Physical Health (Nurse/HCA)	Seasonal influenza vaccination	×	26-Sep-2022 Administratio »
Respiratory / Diabetes	Coronavirus vaccination	×	No previous entry
Psychosocial	Pneumococcal vaccination	×	No previous entry
Recovery and Stay Well Plan GP	NHS Cancer Screening Programme		
Follow-up	Last recorded breast cancer screening		No previous entry
Depot	*Advice given about breast screening programme	Text	No previous entry
Lithium Prescribing			
Blood Results	Last recorded cervical cancer screening offered		No previous entry
Mandatory fields	*Provision of information about	Text	No previous entry
Resources	cervical screening programme		
Contract Specification	Last bowel cancer screening programme		No previous entry
Information	*Advice given about bowel cancer screening programme	Text	No previous entry
	Please send these screening easy re	ead information links to all patients they are relevant for.	
	Breast screening Having a smear test Bowel cancer screening		,

Complete the areas marked with an asterisk for ES payment if not already completed on the KPI Page

Respiratory / Diabetes - Mental Health

NWL ICS Mental Health ES 2024	/25			
Pages «	Mental Health NWL ES			^
KPIs		NOTE: Fields marked with * are mandatory		
Physical Health (Nurse/HCA)	Patients with SMI who are either at therefore important to offer early s	risk of respiratory disease or already have a diagnosis of asthma and/or COPD are at high risk of creening and optimisation of therapy.	unplanned hospital admissions. It is	3
Respiratory / Diabetes		NOTE: the below options presented will depend on the diagnosis codes in the patient record.		
Psychosocial	Patient has respiratory disease			
Recovery and Stay Well Plan GP	Patient HAS diagnosis of asthma / (COPD. If relevant please record values using a respiratory template.		
Follow-up	Asthma annual review		26-1an-2024 »	
Depot	Chronic obstructive pulmonary		22-Nov-2021	•
Lithium Prescribing	└┘ disease annual review			
Blood Results	Conditions template for these.	oxes may not mark your patient as achieved in the QOF indicators if you have not completed all items re	equired. Refer to NWL ICS Respiratory	'
Mandatory fields	Diabetes			
Resources	Diabetes prevention	~	16-Mar-2023 NHS Diabetes »	•
Contract Specification	Patients with pre-diabetes (which is a • either exercise advice or a referra	HbA1c of >42 and <47) on the SMI Register, should receive a lifestyle intervention: If for exercise therapy		
Information	 or weight management advice / or dietary advice / referral to the NHS 	B Diabetes Prevention Programme.		
	Diabetic on diet only		No previous entry	
	Diabetic on oral treatment		No previous entry	
	Diabetic on insulin and oral treatment		No previous entry	
	Statin use	~	No previous entry	
	Diabetes education	~	16-Mar-2023 Attended dia	*

Please do read the notes written in dark blue and red which may help you to complete the template

Psychosocial - Mental Health

NWL ICS Mental Health ES 2024,	/25		
Pages «	Mental Health NWL ES		
KPIs		NOTE: Fields marked with * are mandatory	
Physical Health (Nurse/HCA)	Care co-ordination		
Physical Health (Nursey Henry	Key worker's details:	Text	No previous entry
Respiratory / Diabetes	Care co-ordinator's details:	Text	No previous entry
Psychosocial	Carer's details	Text	No previous entry
Recovery and Stay Well Plan GP	🗌 Has personal health budget		No previous entry
Follow-up	Social		
Depot	Employment	~	07-Jun-2022 Employment a »
Lithium Prescribing	Finances	~	No previous entry
Blood Results	Accommodation	~	07-Jun-2022 Lives in rente »
Mandatory fields	Carer status	~	07-Jun-2022 Has an inform »
Resources	Social induction		No provinue optra
Contract Specification	Social intervention		27 Oct 2022 Referral to so
Information	Consider referral to employment serv	ices at CMHH/MINT	27-000-2025 Referratio So //

Please do read the notes written in dark blue and red which may help you to complete the template

Psychosocial cont'd - Mental Health

ECG			
ECG requested		No previous entry	
Annual ECG if patient is on an antipsy Many antisychotics and antidepressan QTc interval interpretation: • Normal QTc interval <440 ms • Borderline QTc interval >440 ms Prolonged QTc interval >500 ms	chotics, has cardiac disease, or QRISK > 20% ts can cause prolonged QTc. but <500 ms		~
Dental, eye and sexual health			
Oral health education		No previous entry	
Optician visit	~	No previous entry	
Health education - sexual		No previous entry	
General contraceptive advice		No previous entry	~

Please do read the notes written in dark blue which may help you to complete the template

Recovery & Stay Well Plan - Mental Health

NWL ICS Mental Health ES 2024/25

Pages «	Mental Health NWL ES		-	
KPIs	NOTE: Fields marked with * are mandatory			
Physical Health (Nurse/HCA)	Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS)			
Physical freater (nurse/free/)	Click the link below to access a printable PDF for the patient to complete. This form can be completed by the patient in advance	e of the appointment.		
Respiratory / Diabetes	Click here to access the SWEMWBS			
Psychosocial	When entering the SWEMWBS score below be aware that the range of the below score is set to /70 by default. Amend this by the "short" score total).	clicking /70 below and changing it to /35 (this is		
Recovery and Stay Well Plan GP	Warwick Edinburgh Mental Well Being /70	No previous entry		
Follow-up	Scale score	···· ,		
Depot	U Well-being assessment for long term conditions not appropriate	No previous entry		
Lithium Prescribing	Medication reconciliation and review			
	*Mental health medication review	No previous entry		
Blood Results	Medication review done	× 12-lan-2024 Medication re »		
Mandatory fields	Mental health annual physical	No previous entry	·	
Resources	examination done	No previous encry		
Contract Englification	Annual physical health check: Please ensure you review the patient's medications including reconciliation of psychiatric medication	ons.		

Complete the areas marked with an asterisk for ES payment if not already completed on the KPI Page Please do read the notes written in dark blue which may help you to complete the template

Recovery & Stay Well Plan cont'd - Mental Health

Recovery and Stay Well Plan (RSW	P)		
Consultation type	✓	No previous entry	
*Current mental state	Text	No previous entry	
Including symptoms and signs of becomin	g unwell		
Current treatment & crisis plan	Text	No previous entry	
Including treatment response & other sup	pport required		
*Goals and priorities	Text	07-Aug-2024	*
What would feeling better look like			
*Health Action Plan	Text	No previous entry	
SMART goals e.g. taking the stairs not th	e lift to aid weight loss		
*Mental health personal health plan (Recovery & Stay Well Plan completed)		No previous entry	
*Annual mental health review complete		07-Jun-2022	*
Care plan provided?	~ ~	07-Jun-2022 Provision of c	*

Complete the areas marked with an asterisk for ES payment if not already completed on the KPI Page Please do read the notes written in dark blue which may help you to complete the template

Follow up - Mental Health

NWL ICS Mental Health ES 2024	/25		
Pages «	Mental Health NWL ES		
KPIs	1 follow-up consultation per year is r	mandatory.	
Physical Health (Nurse/HCA)	Annual follow-up		
Respiratory / Diabetes	Consultation type	×	No previous entry
Psychosocial	*Mental health review follow-up	Text	No previous entry
Recovery and Stay Well Plan GP	Date of last MH review follow-up		No previous entry
Follow-up	Risks		
Depet	Suicide risk	×	No previous entry
Depot	Aggressive behaviour	×	No previous entry
Lithium Prescribing	Safeguarding risks		No previous entry
Blood Results		Text	
Mandatory fields	Domestic Violence		
Resources	Domestic abuse enquiry made - none disclosed	Text	No previous entry
Contract Specification	Patient discloses history of domestic abuse	Text	No previous entry
Information	Online access guidance		
	MH care		
	Discussed with mental health team		No previous entry

Complete the areas marked with an asterisk for ES payment if not already completed on the KPI Page Ensure follow up is not on the same day as the review.

Depot - Mental Health

NWL ICS Mental Health ES 2024	/25					
Pages «	Mental Health NWL ES					
KPIs		NOTE: Fields marked with * are mandatory				
Physical Health (Nurse/HCA)	Authorise					
Respiratory / Diabetes	Patient Specific Directive for administ (GP to complete on request for trans	ration of depot: ier of depot from secondary care and at each annual medication review)				
Psychosocial Recovery and Stay Well Plan GP	Has authorisation for medication Under PSD (patient specific direction)	I have assessed this patient and authorise administration of the following medication to this patient:	No previous entry			
Follow-up	Please include: drug, dose, route, fre	quency, to be administered by, authorising Dr and date				
Depot	Administration					
Lithium Prescribing	If the patient seems mentally more u If the patient fails to attend a depot	nwell than usual eg more unkempt, withdrawn or suspicious please inform the Dr but give the injection appointment please contact them to rearrange this as soon as possible though a 1-2wk delay is rarely s	anyway. significant as these are very long-			
Blood Results	acting drugs. If you are unable to ge	hold of the patient please see DNA policy and inform the DR who may need to contact the CMH team.				
Mandatory fields	If patient reports any new side effect injection.	s then please ask them to complete the GASS questionnaire. If you notice any severe side effects pleas	e inform the Dr PRIOR to giving the			
Resources	Drug side effects checked	Text	24-Nov-2020			
Contract Specification	Please add details of any new side ef	ects and/or reasons for any change to the regime.				
Information	GASS score	<u>/63</u>	No previous entry			
	Injection site	Text	No previous entry			
	Please state: left deltoid, right deltoi	l, left gluteal or right gluteal				
	Consent given for injection	Text	No previous entry			
	Depot medication given	Text	No previous entry			
	Please include: drug, dose, route, a	dministered by, date last given and date next due	,			
	Annual SMI Review					
	Mental health review due	21-Aug-2024	07-Jun-2022			
	□ Blood test due	21-Aug-2024	No previous entry			

Please read notes in red and bold blue to help with completing the template

Lithium Prescribing - Mental Health

NWL ICS Mental Health ES 2024	4/25	
Pages «	Lithium prescribing	
KPIs	Review the patient record for:	
Physical Health (Nurse/HCA)	• Brands and generics of lithium carbonate (tablets). Brand names include Priadel®, Camcolit®, Liskonum®.	
Respiratory / Diabetes	• Brands and generics of lithium citrate (liquid). Brand names include Priadel® Liquid, and Li-Liquid®	
Psychosocial	Please prescribe lithium by brand and NOT as generic.	
Recovery and Stay Well Plan GP	Patient information - purple booklet / NPSA app	
Follow-up	Send the below guidance to the patient:	
Depot	Your quarterly lithium tests are now due (12 hours after your dose). Please ensure the results are added to your purple book and stay well hydrated on lithium.	
Lithium Prescribing	Check purple booklet every 12 months. Enter results every 3 months.	
Blood Results	Lithium patient information booklet No previous entry given No previous entry	
Mandatory fields	Lithium therapy record book No previous entry completed	
Resources	Purple lithium monitoring books, cards etc. are available for GP surgeries to order from Tel: 0333 014 2884. They are also available online.	
Contract Specification	https://pcse.england.nhs.uk/services/supplies	
Information	Personana di Antonio di	
	Resources	

Lithium Prescribing cont'd - Mental Health

Blood monitoring (previous entries displayed on the right)

Lithium level 0.4-1.0 mmol/L (0.4-0.8 mmol/L for elderly)

Lithium levels needed quarterly for all patients unless very low risk. Six monthly permitted for low risk patients. Please document reason if bloods not in date. Renal function, TFTs and calcium due 6 monthly. FBC and BMI due annually.

Lithium dose:		\sim		
*Serum lithium level	<u>mmol/L</u>		No previous entry	
Pathology result missing - reason:		\sim		
Lithium stopped			No previous entry	
U&Es:				
Serum sodium level	<u>mmol/L</u>		No previous entry	
Serum potassium level	mmol/L		No previous entry	
Serum creatinine level	<u>umol/L</u>		No previous entry	
*eGFR (estimated glomerular filtration rate)	<u>mL/min</u>		07-Aug-2024 6 mL/min	*
*Glomerular filtration rate	<u>mL/min</u>		07-Aug-2024 6 mL/min	*
*GFR (glomerular filtration rate)	mL/min		07-Aug-2024 6 mL/min	*

Complete the areas marked with an asterisk for ES payment if not already completed on the KPI Page Please do read the notes written in dark blue which may help you to complete the template

Lithium Prescribing cont'd - Mental Health





Complete the areas marked with an asterisk for ES payment if not already completed on the KPI Page

Lithium Prescribing cont'd - Mental Health

Examination		
Standing height	cm	07-Aug-2024 1.6 cm
Body weight	kg	07-Aug-2024 77 kg
Body mass index	<u>ka/m2</u>	07-Aug-2024 300781.25 kg

Blood results - Mental Health

NWL ICS Mental Health ES 2024/25						
Pages «	U&E					
KPIs	Serum sodium level		<u>mmol/L</u>	21-Aug-2024	No previous entry	
Physical Health (Nurse/HCA)	Serum potassium level		<u>mmol/L</u>	21-Aug-2024	No previous entry	
Respiratory / Diabetes	Serum creatinine level		<u>umol/L</u>	21-Aug-2024	No previous entry	
Psychosocial			ml /min		07 Aug 2024 - C ant Amin	
Recovery and Stay Well Plan GP	GFR calculated abbreviated			21-Aug-2024	07-Aug-2024 6 mL/ min	8
Follow-up	LFT					
Depot	Serum alanine aminotransferase level		<u>IU/L</u>	21-Aug-2024	No previous entry	
Lithium Prescribing	Serum bilirubin level		<u>umol/L</u>	21-Aug-2024	No previous entry	
Blood Results	Serum alkaline phosphatase level		<u>IU/L</u>	21-Aug-2024	No previous entry	
Mandatory fields	Serum total protein		<u>a/L</u>	21-Aug-2024	No previous entry	
Resources	Serum albumin level		<u>a/L</u>	21-Aug-2024	No previous entry	
Information	Serum globulin level		<u>a/L</u>	21-Aug-2024	No previous entry	
	Bone Profile					
	Serum calcium level		mmol/L	21-Aug-2024	No previous entry	
	Serum adjusted calcium concentration		<u>mmol/L</u>	21-Aug-2024	No previous entry	
	Serum inorganic phosphate level		<u>mmol/L</u>	21-Aug-2024	No previous entry	

Blood results cont'd - Mental Health

Thyroid function			
Serum TSH level	<u>mU/L</u>	21-Aug-2024 No previous entry	
Serum free T4 level	mmol/L	21-Aug-2024 No previous entry	
Lithium level			
Serum lithium level	mmol/L	21-Aug-2024 No previous entry	
Prolactin level			
Serum prolactin level	<u>mU/L</u>	21-Aug-2024 No previous entry	

Mandatory Fields - Mental Health

PagesMandatory fieldsKPIs1. *BMIPhysical Health (Nurse/HCA)3. *Diet assessmentRespiratory / Diabetes5. *Smoking statusPsychosocial6. *Alcohol intakePsychosocial9. *Recovery and Stay Well Plan GPRecovery and Stay Well Plan GP10. *Medication reviewFollow-up11. *HbA1c or fasting glucoseDepot13. *Lithium monitoring14. *First appointment (annual review)15. *Follow-up appointment (must not occur on same day as
KPIs1. *BMI 2. *BPPhysical Health (Nurse/HCA)3. *Diet assessment 4. *Exercise assessment 5. *Smoking status 6. *Alcohol intake 7. *Substance misuse 8. *Cancer screening 9. *Recovery and Stay Well Plan GP Follow-up Depot1. *BMI 2. *BP 3. *Diet assessment 5. *Smoking status 6. *Alcohol intake 7. *Substance misuse 8. *Cancer screening 9. *Recovery and Stay Well Plan GP 10. *Medication review 11. *HbA1c or fasting glucose 12. *Lipids or cholesterol 13. *Lithium monitoring 14. *First appointment (annual review) 15. *Follow-up appointment (must not occur on same day as
Lithium Prescribing Blood Results Mandatory fields Resources Contract Specification Information

Mandatory fields that need to be completed for ES payment

Resources - Mental Health

NW London Mental Health Referral Guidelines

https://www.nwlondonics.nhs.uk/professionals/referral-guidelines-and-clinical-documents/mental-health

Resources

NW London ICB Mental Health Referral Guidelines

NW London Transfer of Prescribing of Antipsychotics Guidance

Click on the link to access Guidance

Contract Specification - Mental Health

NWL ICS Mental Health ES 2024/25

Pages «	Rationale
KPIs	People with SMI are at increased risk of poor physical health. The life-expectency of the SMI cohort is reduced by an average of 15-20 years compared to the general population mainly due to preventable physical illness. Two thirds of these deaths result from avoidable conditions, including heart disease and cancer. There is a 30% higher case fatality rate from cancer in psychiatric patients
Physical Health (Nurse/HCA)	even though their incidence of cancer is no greater than in the general population.
Respiratory / Diabetes	People with SMI are three times more likely to attend A&E with an urgent physical health need and are almost 5x more likely to be admitted as an emergency case.
Psychosocial	They are 3x more likely to smoke and 3.5x more likely to loose all teeth. They have double the risk of diabetes and obesity, 3x the risk of hypertension and metabolic syndrome. They are 5x the risk of Dyslipidaemia.
Recovery and Stay Well Plan GP	Best practice evidence indicates that where primary care teams deliver care collaboratively with secondary care services, outcomes are improved. The lead responsibility for assessing and supporting
Follow-up	
Depot	Primary care teams are responsible for carrying out annual physical health assessments and follow-up care for:
Lithium Prescribing	Patients with SMI who are: 1) not in contact with secondary mental health services, including both: a those whose care has always been solely in primary care, and
Blood Results	b. those who have been discharged from secondary care back to primary care
Mandatory fields	2) In contact with secondary care mental health who have been open to services for more than 12 months and who are not under urgent care services
Resources	Inclusion Criteria This service is for enhanced engagement for those patients with serious mental illness (SMI) and the top 5% by severity of those with common mental illness (Compley Common Mental Illness)
Contract Specification	SMI includes: Schizophrenic Disorders, Bipolar Affective Disorder, other Psychosis including Schizotypal disorder, Major Depressive Episode with Psychosis and other non-organic psychosis, Severe Personality, Disorder with psychotic symptoms/schizotypal symptoms
Information	CCMI includes: Anxiety disorders, Depressive disorders, Eating disorders, Gender Identity disorder, Non-Organic Sleep disorders, Obsessive Compulsive disorder, Panic disorder, Personality disorders, Post Traumatic Stress disorder and Somatisation disorder.
	Annual Review This should be completed for all patients at least annually. This is to include the minimum dataset completed and the Recovery and Stay Well plan. These should all be completed annually for all patients. The RSWP must be supervised by the GP where it is not undertaken by the GP Either the first Appointment or the Follow up Appointment must be completed by the GP
	Follow-Up Consultations One additional follow-up consultation per year is mandatory.

Please note the inclusion criteria for CCMI. You would need to complete 60% of your SMI patients before you can claim for CCMI Patients. The amount of CCMI Patients you would then be able to claim for is the equivalent of 5% of your QOF Depression Register.

Contract Specification Cont'd - Mental Health

Psychosocial	Mandatory checks
Recovery and Stay Well Plan GP	'Mandatory items are marked with an asterisk, other items are retained on the template for good clinical practice
Follow-up	1. *BMI 2. *BP
Depot	3. "Diet assessment 4. *Exercise assessment
Lithium Prescribing	6. *Alcohol intake
Blood Results	8. *Cancer screening
Mandatory fields	10. *Medication review
Resources	12. *Lipids or cholesterol
Contract Specification	14. *First appointment (annual review) 15. *Follow up appointment (must not occur on same day as
Information	First appointment

Mandatory fields that need to be completed for ES payment

Clinical Searches and Reports - Mental Health

Searches

NWL Enhanced Service Searches

NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 14 Mental Health

Information - Mental Health

NWL ICS Mental Health ES 2024,	/25
Pages «	Disclaimer
KPIs	This template has been created by North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accurate. However, responsibility for ensuring the accuracy of the data produced using this template remains with the
Physical Health (Nurse/HCA)	Practice; the ICB strongly recommends that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing nhsnwl.servicedesk@nhs.net
Respiratory / Diabetes	Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).
Psychosocial	Purpose
Recovery and Stay Well Plan GP	The purpose of this template is to provide a comprehensive data entry template for the purposes of Mental Health enhanced services in line with the specification.
Follow-up	Developed by
Depot	Developed by NWL PCS System Development team, with guidance from NWL Mental Health leads.
Lithium Prescribing	Version
Blood Results	This template was last updated: First Release - March 2023 (ES 23/24)
Mandatory fields	opuateu - March 2024 (ES 2024/25)
Resources	
Contract Specification	For template audit only
Information	✓ Template entry 07-Aug-2024 >>

On this page you will find the disclaimer and feedback email address.

You will also find the purpose of the template, when it was last updated and who designed and developed it.



Near Patient Testing Template 2024/25

NWL ICS Near Patient Testing / I	DMARDS 2024/25			
Pages «				
Main page	North West London ICB Near Patient Testing / DMARDS 2024/25			
Information	NOTE: Fields marked with * are mandatory			
	Drugs included in the service: Azathiop mofetil and mycophenolic acid, Penicillamir	rine, Ciclosporin, Hydroxycarbamide, Hydroxychloroquine sulfate, Leflunomide, Mercaptopurine, Methotrexate: Oral .e, Sulfasalazine	nd sub-cut injection, Mycophenolate	
		Stay alert for any signs of drug toxicity \$		
	ES Payment Codes			
	*Near patient testing enhanced service completed		No previous entry	
	To Achieve Quarterly Payment for Nea Patient must be aged 18 and over AND Has SNOMED code Near Patient Testing E	ir Patient Testing NPT01 nhanced Service completed (166451000000101) recorded by the provider in payment Quarter		
	Clinical monitoring			
	Regular monitoring discussed with patient		No previous entry	
	Patient understands why taking all medication		24-Dec-2020	*
	Contraception care education		No previous entry	
	Advice on immunisation		No previous entry	
	DMARD information leaflet given		No previous entry	
	DMARD booklet	~	No previous entry	
	DMARD monitoring notes			

This KPIs for this template have not changed since last year.

Blood test for patients every quarter and then tick the box for *Near patient testing enhanced service completed for payment for that quarter.

Main Page cont'd – Near Patient Testing

Laboratory monitoring		
Total white cell count	<u>10*9 cels</u>	No previous entry
Neutrophil count	<u>10*9 cells</u>	No previous entry
Eosinophil count	<u>10*9 cells</u>	No previous entry
Platelet count	<u>10*9 cells</u>	No previous entry
eGFR (estimated glomerular filtration rate) using creatinine Chronic Kidney Disease Epidemiology Collaboration equation per 1.73 square metres	mL/min	07-Aug-2024 6 mL/min »
Serum alanine aminotransferase level		No previous entry
MCV - Mean corpuscular volume	<u><u><u>n</u></u></u>	No previous entry
Serum adjusted calcium concentration	mmol/L	No previous entry
Urine protein	~	No previous entry
Additional		
Hydroxychloroquine Eye Toxicity A • Annually for all people who have tal • Annual monitoring before 5 years of - Concomitant tamoxifen therapy, in - High-dose therapy (greater than 5	nnual Monitoring sen hydroxychloroquine for greater than 5 years. i treatment if additional risk factors for retinal toxicity exist, such as: npaired renal function (estimated glomerular filtration rate less than 60mL/minute/1.73m2) or mg/kg/day of hydroxychloroquine).	
Hydroxychloroquine retinopathy screening	21-Aug-2024	No previous entry
	Text	
□ Date of next DMARD monitoring clinic appointment	Follow Up 21-Aug-2024	No previous entry
Pneumovax codes	~	No previous entry
Flu vaccine codes	~	26-Sep-2022 Administratio »
	North West London ICB Near Patient Testing / DMARDS 2024/25 <u>nhsnwl.servicedesk@nhs.net</u>	

Please read notes in red and bold blue to help with completing the template

Clinical Searches and Reports – Near Patient Testing

KPI / Reporting

PAYMENT/KPI RULES

- To Achieve Payment for Near Patient Testing
- Patients must be aged 18 and over AND
- Has SNOMED code of Near patient testing enhanced service completed (166451000000101) recorded by the provider in payment Quarter

NWL Enhanced Service Searches

NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 15 Near Patient Testing

On this page you will find the SNOMED codes used in the templates that will lead to achieving Enhanced Service payment (These are the areas that are marked with an asterisk in this template).

Monitoring Guidance – Near Patient Testing





Phlebotomy (Adults and Paediatrics) Template 2024/25

NWL ICS Phlebotomy (Adults & Paediatric) ES 2024/25				
Pages «				
Phlebotomy Service	North West London ICB Phlebotomy ES (Adults & Paediatric) 2024/25			
Contract Specification	NOTE: Fields marked with * are mandatory			
Information	ES Payment Criteria			
	State if the patient's consultation for bleeding was successful:			
	*Blood sample taken No previous entry			
	*Home visit No previous entry			
	To Achieve Payment for Phlebotomy PHL01_ Has SNOMED code of Blood sample taken (313334002) recorded by the provider			
	<u>To Achieve Payment for Phlebotomy Home Visits PHL02</u> Achieved coding for PHL01 AND Has SNOMED code Home Visit (439708006) recorded at the same time as PHL01			

Areas marked with an asterisk need to be completed for ES payment

Only tick the Home visit if you have seen the patient in their home.

Phlebotomy Service cont'd– Phlebotomy (Adults & Paediatric)

Pages «	Optional	
Phlebotomy Service	Consent given by person with parental responsibility	No previous entry
Contract Specification	BP /	07-Aug-2024 180/110 mmHg 🔌
Information	Body weight kg	07-Aug-2024 77 kg
	Standing height cm	07-Aug-2024 1.6 cm »
	Body Mass Index Calculate	07-Aug-2024 300781.25 kg »
	Smoking status	05-Nov-2019 Never smoke »
	Cigarette consumption /day	No previous entry
	Cigar consumption /day	No previous entry
	Pipe tobacco consumption	No previous entry
	Total time smoked	No previous entry
	Alcohol units consumed per week	16-Mar-2023 10 U/week »
	AUDIT-C (Alcohol Use Disorders /12 Identification Test - Consumption) score	No previous entry
	Venous blood sampling	No previous entry
	If this bleed is for Glucose Tolerance Testing, this will need to be coded each time the patient is bled (should be twice).	
	If the bleed was unsuccessful, please record this below:	
	Unsuccessful phlebotomy Text reason:	No previous entry
	Consider documenting: • Patient Did not fast for fasting test • Patient did not consent to procedure • Unable to locate vein • Patient did not attend	
	North West London ICB Phlebotomy ES 2024/25 <u>nhsnwl.servicedesk@nhs.net</u>	

Clinical Searches and Reports – Phlebotomy and Paediatric Phlebotomy

Searches

NWL Enhanced Service Searches NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 16 Phlebotomy

NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 17 Paediatric Phlebotomy

Contract Specification – Phlebotomy and Paediatric Phlebotomy

Contract Specification

This template can be used regardless of the age of the patient.

The coding for adult and paediatric phlebotomy is the same as detailed in the service specification. The age of patient at the time the data was coded is being used to separate activity into the different age bands. Business rules are in place to ensure the correct tariff is used.



Respiratory Conditions Template 2024/25

KPIs Diagnosis and Asthma review – Respiratory Conditions

Dagos #						
Pages 🚿	Diagnosis and Management					
КРІ	*For Diagnosis - Record once only					
Introduction	*Diagnosis (QOF)	· · · · · · · · · · · · · · · · · · ·	~	22-Dec-2022 Suspected as	*	
Acute Respiratory Infections	*Demonstration of inhaler technique	Text		No previous entry		
Immunisation History	*Asthma action plan agreed and copy to patient (QOF)	Text		08-Dec-2021	*	
999 and NEWS Score	*Smoking cessation education	Text		No previous entry		
Antiviral (CMDU)/Antibiotics	Asthma Review					
Self Care/ Winter Prepared	***Acute asthma	21-Aug-2024		No previous entry		
Asthma CYP/Adults	Tick both codes below for ES					
COPD	*Asthma Review (QOF)	· · · · · · · · · · · · · · · · · · ·	,	26-Jan-2024 Asthma annu	*	4
Spirometry	*Enhanced services administration			27-Oct-2023	*	
Pulmonary Rehabilitation	Only tick UCP if patient has Universal C	are Plan (UCP)				
Oxygen - home supply	*Patient has Universal Care Plan (UCP)			No previous entry		
Dis Communication						

Only add a diagnosis if it is a new diagnosis or has changed

KPIs for enhanced services are denoted by an asterisk. (QOF) denotes if this area needs to be completed for QOF.

When carrying out an Asthma review ensure you also tick the Enhanced Service Administration box.

Only tick the Universal Care Plan box if the patient already has a plan.

KPIs Asthma review Cont'd – Respiratory Conditions

Pages «	<u>^</u>		
КРІ	*Asthma Triggers (Once Only)	~ ~	No previous entry
Introduction	*Number of asthma exacerbations in past year	<u>/year</u>	No previous entry
Acute Respiratory Infections	*ACT Score (Age 12+) (QOF)	<u>/25</u>	No previous entry
Immunisation History	*cACT score (Age 4-11) (QOF)		No previous entry
999 and NEWS Score	*PEFR - measurement (OOF)		08-May-2024 350 L/min 🔉
Antiviral (CMDU)/Antibiotics			
Self Care/ Winter Prepared	"Best ever peak expiratory flow rate (QOF)		08-May-2024 500 L/min 🔌
Asthma CYP/Adults	*Predicted peak expiratory flow rate	Calculate	08-May-2024 399 L/min »
COPD	*Asthma medication review		19-Apr-2022 »
Spirometry	*Number of SABA inhalers prescribed in last 12m		19-Apr-2022 7 >>
Pulmonary Rehabilitation	*Inhaler technique observed (QOF)		No previous entry
Oxygen - home supply	*Inhaler technique (QOF)	v	19-Apr-2022 Inhaler techn »
Poforrals	*Smoking status (QOF)	~	05-Nov-2019 Never smoke »
Referrals	*Smoke exposure (QOF)	~	No previous entry
NWL Virtual or Ward Admis	*Smoking cessation education (QOF)	Text	No previous entry

KPIs for enhanced services are denoted by an asterisk. (QOF) denotes if this area needs to be completed for QOF.

KPIs Asthma review Cont'd – Respiratory

Conditions				
Pages «	*1. For QOF record of quality assured sp	ometry		
КРІ	Spirometry performed (FEV1/FVC % or FEV1 Z score) (QOF)	21-Aug-2024	No previous entry	
Introduction	*Percent predicted FEV1	<u>%</u>	No previous entry	
Acute Respiratory Infections	*Spirometry Unsuitable/Declined (QOF)	~	No previous entry	
Immunisation History	*Diagnostic spirometry service not	21-Aug-2024	No previous entry	
999 and NEWS Score	*2 Plus ONE of the following - BDP/ EEI	2/ DEEP variability		
Antiviral (CMDU)/Antibiotics	Spirometry BDR result % (QOF)	21-Aug-2024	No previous entry	
Self Care/ Winter Prepared	*FENO result ppb (QOF)	21-Aug-2024	No previous entry	
Asthma CYP/Adults	*FeNO test service not available	21-Aug-2024	No previous entry	
COPD				
Spirometry	*PEFR variability % (QOF)	21-Aug-2024	No previous entry	
Pulmonary Rehabilitation	Asthma Action Plan		_	
Oxygen - home supply	*Asthma action plan agreed and copy to patient (QOF)	Text	08-Dec-2021	*
Referrals	*Asthma clinical management plan (tick to launch Asthma Action Plan		No previous entry	
NWL Virtual or Ward Admis	on saving)			
Clinician Resources	Healthcare professionals Asthma Lung U MART asthma action plan – Asthma + Lu	<u>g UK (asthmaandlung.org.uk)</u>		

KPIs for enhanced services are denoted by an asterisk. (QOF) denotes if this area needs to be completed for QOF.

Please read notes in red to help with completing the template

Tick the Asthma Clinical Management plan if you wish to print the plan when you save.

KPIs cont'd- Asthma Exacerbation – Respiratory Conditions

Pages «	^	Asthma Exacerbation					^
КРІ		*Diagnosis (QOF)		·	No previous entry		
Introduction		*PEFR (QOF)	L/min		08-May-2024 350 L/min	*	
Acute Respiratory Infections			Text	7			
Immunisation History		*Inhaler technique observed (QOF)			No previous entry		
999 and NEWS Score		*Asthma action plan agreed and	Text		08-Dec-2021	*	
Antiviral (CMDU)/Antibiotics		*Asthma clinical management plan			No previous entry		
Self Care/ Winter Prepared		(tick to launch Asthma Action Plan on saving)					
Asthma CYP/Adults		Post Attack Review					
COPD		Tick if appropriate					
Spirometry		*Post hospital discharge - 2 working day review			No previous entry		
Pulmonary Rehabilitation		☐ If post attack review, enter date of attack			No previous entry		
Oxygen - home supply		*Inhaler technique observed (QOF)			No previous entry		
Referrals		*Asthma action plan agreed and copy to patient (QOF)			08-Dec-2021	*	
NWL Virtual or Ward Admis		*Asthma clinical management plan			No previous entry		
Clinician Resources	~	on saving)					~
KPIs Asthma review Cont'd – Respiratory Conditions

NWL ICS Respiratory Conditions ES 2024/25					
Pages «					
	COPD Review				
KPI	*Chronic obstructive pulmonary	22-Nov-2021	*		
Introduction	asease annual review (QOF)				
Acute Respiratory Infections	Chronic obstructive pulmonary disease monthly review (QOF)	No previous entry			
Immunisation History	*Enhanced services administration	27-0ct-2023	*		
999 and NEWS Score	Only tick UCP if patient has Universal Care Plan (UCP)				
Antiviral (CMDU)/Antibiotics	*Patient has Universal Care Plan (UCP)	No previous entry			
Self Care/ Winter Prepared	*Number of chronic obstructive /vear	No previous entry			
Asthma CYP/Adults	pulmonary disease exacerbations in past vear				
COPD	*Issue of chronic obstructive pulmonary disease rescue pack	No previous entry			
Spirometry	*Has supply of rescue medication	No previous entry			
Pulmonary Rehabilitation	***MRC Scale	No previous entry			
Oxygen - home supply	*Peripheral blood oxygen saturation	No previous entry			
Referrals	*Smoking status (QOF)	07-Aug-2024 Ex-smoker	*		
NWL Virtual or Ward Admis	*Smoke exposure (QOF)	No previous entry			
Clinician Resources	*Excepted from COPD Quality Indicators	No previous entry			

When carrying out a COPD review ensure you also tick the Enhanced Service Administration box.

KPIs for enhanced services are denoted by an asterisk. (QOF) denotes if this area needs to be completed for QOF. Please read notes in red to help with completing the template

KPIs cont'd – Respiratory Conditions

Spirometry			
Spirometry screening		22-Dec-2022	*
*Enhanced services administration		27-Oct-2023	*
Pulmonary Rehabilitation			
*Pulmonary Rehab (QOF)	~ ~	22-Dec-2022 Referral to p	*
*Code indicating pulmonary rehabilitation (QOF)		No previous entry	
Oxygen - Home Supply			
*Home oxygen supply		No previous entry	
*Advance care planning (UCP)	Text	No previous entry	

Please note that for Spirometry screening you need to tick the Enhanced Service Administration box.

KPIs for enhanced services are denoted by an asterisk. (QOF) denotes if this area needs to be completed for QOF.

Introduction – Respiratory Conditions

NWL ICS Respiratory Conditio	ns ES 2024/25
Pages «	
KPI	NHS
Introduction	North West London
Acute Respiratory Infections	North West London ICB Respiratory Conditions 2024/25
Immunisation History	
999 and NEWS Score	Introduction
Antiviral (CMDU)/Antibiotics	Dear Colleague This series of Respiratory template and contents are aimed to take into account all acute and long term respiratory related conditions in one place.
Self Care/ Winter Prepared	
Asthma CYP/Adults	It has been jointly prepared with input from Drs Stephen Goldring, Zinnia Dalton Hall and Kuldhir Johal It is being launched early to support winter pressures and will continue to be updated to ensure alignment to the GMS Contract.
COPD	QOF Codes are marked with an asterix. *Indicate Respiratory Enhanced Service alignment
Spirometry	Training
Pulmonary Rehabilitation	You may find the following training tools helpful and links to NICE CKS.
Oxygen - home supply	Please ensure that the respiratory lead in your practice has undergone the following level of training.
Referrals	Paediatrics as per link below to Tier 3 - for the practice respiratory lead and those reviewing paediatric cases regularly. https://www.e-lfh.org.uk/programmes/children-and-young-peoples-asthma/ NICE CKS COVID19 NICE CKS Influenza - seasonal NICE CKS Scarlet Fever NICE CKS Measles NICE CKS comunity Acquired Infections NICE CKS Seaples NICE CKS Seaple NICE CKS cough-acute-with-chest-signs-in-children including bronchiolitis NICE CKS Seaples NICE CKS Cough-acute-with-chest-signs-in-children including bronchiolitis

Information and training – please click on specific link to access that training

Acute Respiratory Infections – Respiratory Conditions

NWL ICS Respiratory Conditions ES 2024/25					
Pages « 🔨	Presentation				
КРІ	Pre-existing condition if relevant	~	03-Jan-2024 Asthma »		
Introduction	Source of referral	~	No previous entry		
Acute Respiratory Infections	Type of consultation/location	×	No previous entry		
Immunisation History	History and symptoms suggestive of an acute respiratory infection:- most likely	~ ~	No previous entry		
999 and NEWS Score	Hypoxaemia - PO2 is equal to or less than 92% in air or below agreed	21-Aug-2024	No previous entry		
Antiviral (CMDU)/Antibiotics	threshold				
Self Care/ Winter Prepared					
Asthma CYP/Adults	Additional history note:-				
COPD	Travel history		No previous entry		
Spirometry	Day of illness	~			
Pulmonary Rehabilitation	Cough	~	No previous entry		
Oxygen - home supply	Breathlessness	~	No previous entry		
Referrals	Additional symptoms	~	No previous entry		
NWL Virtual or Ward Admis	Heart rate	beats/min 21-Aug-2024	No previous entry		
Clinician Resources		Text			

Use drop downs for most of these questions, you may need to use the slider to see all options

Acute Respiratory Infections cont'd – Respiratory Conditions

Pages « ,	Pulse rate	beats/min	21-Aug-2024		27-Apr-2022 100 beats/min	» ^
KPI		Tavt				
Introduction	Derisheral blood esturation					
Acute Respiratory Infections		degrees C	21 Aug 2024	~	No previous entry	
Immunisation History	Tympanic temperature		21-Aug-2024		No previous encry	
999 and NEWS Score		Text				_
Antiviral (CMDU)/Antibiotics	BP				07-Aug-2024 180/110 mmHg	*
Self Care/ Winter Prepared	Pulse rhythm			\sim	No previous entry	- 1
Asthma CYP/Adults		21-Aug-2024				
COPD		Text		_		
Spirometry	Examination			~	08-May-2024 500 L/min	*
Dulmonany Rehabilitation	Additional Examination note:-					
		cm		$\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{\mathbf{$	07 Aug 2024 1 C am	
Oxygen - nome supply	Height				07-Aug-2024 1.6 CM	"
Referrals	Weight	kg			07-Aug-2024 77 kg	*
NWL Virtual or Ward Admis	ВМІ	Calculate			07-Aug-2024 300781.25 kg	*
	Peak expiratory flow rate (PEFR)	L/min			08-May-2024 350 L/min	*
	Has access to pulse oximeter	21-Aug-2024			No previous entry	
		Text			- •	
	Respiratory Rate			~	No previous entry	~

Immunisation History – Respiratory Conditions

NWL ICS Respiratory Conditions ES 2024/25					
Pages «	Immunisation History				
КРІ	Administration of first inactivated seasonal influenza vaccination (QOF)	21-Aug-2024	26-Sep-2022		
Introduction		Text			
Acute Respiratory Infections	Administration of second inactivated seasonal influenza vaccination (QOF)	21-Aug-2024	No previous entry		
Immunisation History		Text			
999 and NEWS Score	Influenza immunisation advised in	21-Aug-2024	No previous entry		
Antiviral (CMDU)/Antibiotics	surgery				
Self Care/ Winter Prepared	Seasonal influenza vaccination	21-Aug-2024	No previous entry		
Asthma CYP/Adults	declined (QOF)				
COPD		Text			
Spirometry	Pneumococcal vaccination (QOF)		No previous entry		
Pulmonary Rehabilitation	Pneumococcal immunisation advised in surgery	21-Aug-2024	No previous entry		
Oxygen - home supply		Text			
Referrals	Pneumococcal vaccination declined (QOF)	21-Aug-2024	No previous entry		
NWL Virtual or Ward Admis		Text			

Complete areas appropriate for the patient to meet the QOF criteria for payment

Immunisation History cont'd – Respiratory Conditions

NWL ICS Respiratory Conditions ES 2024/25				
Pages «	SARS-CoV-2 (severe acute		No previous entry	
КРІ	protection maintenance course	-2024		
Introduction	declined			
Acute Respiratory Infections	Administration of first dose of			
Immunisation History	SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2)	-2024	No previous entry	
999 and NEWS Score	vaccine			
Antiviral (CMDU)/Antibiotics	Administration of second dose of			
Self Care/ Winter Prepared	SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2)	-2024	No previous entry	
Asthma CYP/Adults	vaccine			
COPD	/ext			
Spirometry	SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2)	-2024	No previous entry	
Pulmonary Rehabilitation	vaccine			
Oxygen - home supply	Text			
Referrals	Administration of fourth dose of SARS-CoV-2 (severe acute 21-Aug-	-2024	No previous entry	
NWL Virtual or Ward Admis	vaccine			
Clinician Resources	, Text			
	Administration of fifth dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine	g-2024 III	No previous entry	
	, Text			

Complete appropriate areas

Pages «	999 and Health Care Professional Contact details					
КРІ	If the symptoms are severe - please call	If the symptoms are severe - please call 999				
Introduction	Otherwise you can also use the	Otherwise you can also use the				
Acute Respiratory Infections	Healthcare Professional Line number of 0	20 3162 7525				
neared neophatory infections	Ambulance Referral Details					
Immunisation History	Patient advised to contact	27. Aug 2024	No previous entry			
999 and NEWS Score	soon as possible	27-Aug-2024				
Antiviral (CMDU)/Antibiotics		Text				
Self Care/ Winter Preparedness	Ambulance transport to hospital declined	27-Aug-2024	No previous entry			
Asthma CYP/Adults		Text				
COPD	Ambulance request for patient	27-Aug-2024	No previous entry			
Spirometry		Text Ambulance request for patient time:-				
Pulmonary Rehabilitation	CAD Reference number	Text CAD Reference number:-				
Oxygen - home supply	Seen by ambulance crew		No previous entry			
Referrals	Left practice or addtional details	~ ~				
	NEWS Score					
	Royal College of Physicians NEWS2 (National Early Warning Score 2) total score	/20	No previous entry			
		Text				
	Scores	~ ~	No previous entry			
	PEWS Paediatric Early Warning Score		No previous entry			
	NHSE NEWS NHSE PEWS https://www.mdcalc.com/calc/10083/national-early-warning-score-news-2 https://www.mdcalc.com/calc/3901/pediatric-early-warning-score-pews					

Links at the bottom of this page to NHSE NEWS and NHS PEWS

Pages «	COVID Medicines Delivery Unit (CM	DU)			
KPI	<u>CMDU Guidance</u> Clinicians are reminded to promptly refer o	on receipt of a request for an eligible patient as eligible patients should receive treatment within 5 days of a positive CC	DVID test.		
Introduction	Referral route:				
Acute Respiratory Infections	Via NHS email to nhsnwlccg.e84068@n The Ridgeway Surgery - Contact Numbe	hs.net r: 020 8537 1385			
Immunisation History	The hagenay surgery contact hamse				
999 and NEWS Score	Please give patient's NHS number, date sy	mptoms started, high risk condition or therapy, phone number and postcode.			
Antiviral (CMDU)/Antibiotics	Please inform the patient that service will contact them within 24 hours to discuss whether they may benefit from treatment. If the patient does not hear from the service within 24 hrs they should follow-up.				
Self Care/ Winter Preparedness	To refer patient use: NWL ICS COVID:	19 Paxlovid Screening Tool 2024/25			
Asthma CYP/Adults	Supporting resources:				
COPD	 Home - electronic medicines compendium (emc) <<u>https://www.medicines.org.uk/emc</u>> [Paxlovid]⁴ + [patient's medication] 				
Spirometry	Elverpool COVID-19 Interactions Medicines Advice ServiceMedi	(covid19-druginteractions.org) < <u>https://www.covid19-druginteractions.org/checker</u> >4 cines Advice contact details SPS - Specialist Pharmacy Service < <u>https://www.sps.nhs.uk/home/about-sps/get-in-touch</u> ,	/medicines-information-services-contact-		
Pulmonary Rehabilitation	 <u>details/</u>>⁶ CMDU GP Lead Specialist advice 				
	To be completed by CMDU Provider	(The Ridgeway Practice) only			
	Referral Source	~	No previous entry		
	Tick both boxes below				
	*COVID-19		No previous entry		
	*Enhanced services administration		27-Oct-2023		
	Select Antiviral therapy OR Referral t	o hospital OR Antiviral therapy declined OR Treatment not indicated			
	*Antiviral therapy		No previous entry		
	*Referred, declined or treatment not indicated	~	No previous entry		
		Text			
	NWL Antiobiotic Guidelines				
	NWL ICB Antibiotics Guidance				

Link and information regarding CMDU (*Covid-19 Medicines Delivery Unit*). Link to Antibiotic Guidelines. Please read notes in dark blue and red to help with completing the template.

Pages «	Self Care - links and tools			
КРІ	The following links can be sent to patient	is via SMS messaging - to assist in their general self-care.		
Introduction	Children - 0-18 https://what0-18.nhs.uk			
Acute Respiratory Infections	Paediatric - all conditions - self care			
Immunisation History	<u>Asthma</u> <u>COPD</u>			
999 and NEWS Score	NWL Post COVID19			
	Respiratory Disease Risk Factors			
Antiviral (CMDU)/Antibiotics	Smoking status (QOF)	~ ~	07-Aug-2024 Ex-smoker	*
Self Care/ Winter Preparedness	Smoking cessation (QOF)	~	No previous entry	
Asthma CYP/Adults	Winter Preparedness			
COPD	Winter vaccinations and services			

Links to websites for patients

Complete areas appropriate for the patient to meet the QOF criteria for payment

Pages «					^
КРІ	NHS				
Introduction	North West London			- 1	
Acute Respiratory Infections		North West London ICB Respiratory Conditions 2023/24	4		
Immunisation History		NOTE: All of the below fields marked with * are mandatory fields This template captures all aspects of asthma care including diagnosis, asthma review, acute asthma and post	attack review		
999 and NEWS Score	Tune of Anthrop Deview				
Antiviral (CMDU)/Antibiotics	Asthma telephone review not recommend	ded - inhaler technique cannot be assessed over the phone			
Self Care/ Winter Preparedness	***Acute asthma	27-Aug-2024	No previous entry		
Asthma CYP/Adults		Text	, ,		
COPD	Tick both codes below for ES				
Spirometry	*Asthma Review (QOF)	~	26-Jan-2024 Asthma annu	*	
Pulmonary Rehabilitation	*Enhanced services administration		27-Oct-2023	*	
Oxygen - home supply	Only tick UCP if patient has Universal Ca	re Plan (UCP)			
Referrals	*Patient has Universal Care Plan (UCP)		No previous entry		
NWL Virtual or Ward Admission	Type of consultation/location	~	16-Mar-2023 Group consul	*	
Clinician Resources	Did not attend asthma clinic		No previous entry		
	Consider safeguarding referral if asthma po	porly controlled and two or more non-attandance			
	Safeguarding concern	Text	No previous entry		Ļ
	Growth				
	Growth charts (rcpch.ac.uk)			_	
	Height		07-Aug-2024 1.6 cm	*	
	Weight	kg	07-Aug-2024 77 kg	*	
	Body Mass Index	Calculate	07-Aug-2024 300781.25 kg	*	

KPIs for enhanced services are denoted by an asterisk. (QOF) denotes if this area needs to be completed for QOF.

When carrying out an Asthma review ensure you also tick the Enhanced Service Administration box.

Only tick the Universal Care Plan box if the patient already has a plan.

Pages «	Symptoms & Past Medical History		^
KPI	Freetext history	^	
Introduction		✓	
Acute Respiratory Infections	Clinical features of high/ intermediate probability of asthma - the	e more reatures/ symptoms the higher the probability	
Acute Respiratory Infections	Episodic dry cough		No previous entry
Immunisation History	Nocturnal cough / wheeze		No previous entry
999 and NEWS Score	□ No cough		No previous entry
Antiviral (CMDU)/Antibiotics	Expiratory wheeze		No previous entry
Self Care/ Winter Preparedness	Dyspnoea		No previous entry
Asthma CYP/Adults	Tight chest		No previous entry
	Triggers (If applicable)		
COPD	*Asthma trigger - respiratory infection		No previous entry
Spirometry	🗌 *Asthma trigger - pollen		No previous entry
Pulmonary Rehabilitation	🗌 *Asthma trigger - seasonal		No previous entry
Oxygen - home supply	*Asthma trigger - cold air		No previous entry
Referrals	🗌 *Asthma trigger - damp		No previous entry
NWL Virtual or Ward Admission	🗌 *Asthma trigger - animals		No previous entry
Clinician Resources	*Asthma trigger - exercise		No previous entry
	🗌 *Asthma trigger - airborne dust		No previous entry
	*Asthma trigger - tobacco smoke		No previous entry
	Asthma trigger - others		No previous entry

KPIs for enhanced services are denoted by an asterisk

Pages «	Atopy history		^
(DI	Allergic rhinitis	Text	No previous entry
P1	Eczema	Text	No previous entry
neroduction	Food allergy	Text	No previous entry
Acute Respiratory Infections	FH: Atopy	Text	No previous entry
mmunisation History	Previous acute asthma/wheeze attacks		
999 and NEWS Score	Episodes of acute wheeze/ asthma	Text	
Antiviral (CMDU)/Antibiotics	PICU admission for asthma	Text	
Self Care/ Winter Preparedness	Symptoms suggestive of alternative cond	lition	
Asthma CYP/Adults	Breathlessness with paraesthesia		
COPD	 (hyperventilation, suggestive of anxiety/ panic attack) 		
Spirometry	Symptoms since birth		
ulmonany Robabilitation	Persistant wet cough		
	Recurrent vomiting/ dysphagia		
Oxygen - home supply	Failure to thrive/ stridor/ focal clinical		
Dafarrala	Review of Exacerbations Since Last	t Review	
	*Number of asthma exacerbations in past year (QOF)	<u>/year</u>	No previous entry
	Number of courses of oral steroids		No previous entry
	Number of days absent from school	day day	No previous entry
	Comment on exacerbations	*	
	Review of Current Control		
	Use an objective test to score current co For ACT/cACT a score of 20 or less sugge	introl (QOF) ests poor control - take ACTION	
	Asthmacontroltest.com		
	*ACT score (Age 12+) (QOF)	<u>/25</u>	No previous entry
	*cACT score (Age 4-11) (QOF)		No previous entry
	Asthma control unsatisfactory	Text	No previous entry

KPIs for enhanced services are denoted by an asterisk. Please read notes in dark blue and red to help with completing the template

Pages «	Review of Medication				^
КРІ	*Asthma Medication Review (QOF)	Text	19-Apr-2022	*	
Introduction	*Number of SABA inhalers prescribed in [last 12m		19-Apr-2022 7	*	
Acute Respiratory Infections	Using four or more SABA in 12 months is a	red flag, particularly when combined with acute attacks and oral corticosteroid use - take ACTION			
Immunisation History	Number of times reliever inhaler used per [week	/week	No previous entry		
999 and NEWS Score	Number of steroid inhalers issued in past		16-Nov-2021 6	*	
Antiviral (CMDU)/Antibiotics	year Poor adherence with inhaled steroids is a r	ed flag for acute attacks, especially when combined with high SABA use. Examples of number of steroid inhalers o	eeded per year according to dose.		
Self Care/ Winter Preparedness	Clenil 50mcg and 100mcg MDI each contain 20	10 doses. Two puffs twice daily = seven per year			
Asthma CYP/Adults	Seretide 50/25mcg and 125/25mcg MDI each	contain 120 doses. Two puffs twice daily = 12 per year			
COPD	Symbicort 100/6 and 200/6 turbohalers each o	contain 120 doses. Two puffs twice daily = 12 per year			
Spirometry					
Pulmonary Rehabilitation	Poor inhaler technique is a common cause Must be checked at every visit	of poor asthma control			
Oxygen - home supply	Best is to say 'show me how you use your	inhaler'			
Referrals	Inhaler technique observed (QOF)		No previous entry		
NWL Virtual or Ward Admission	*Inhaler technique (QOF)	~	19-Apr-2022 Inhaler techn	*	
Clinician Resources	Asthma treatment compliance satisfactory		No previous entry		
	Asthma treatment compliance unsatisfactory		No previous entry		
					¥
	Comment on medication				

KPIs for enhanced services are denoted by an asterisk. Please read notes in dark blue and red to help with completing the template

Pages «	Smoking & Environmental Impacts		·
КРІ	*Smoking status (QOF)	✓	05-Nov-2019 Never smoke »
Introduction	*Smoke exposure (QOF)	✓	No previous entry
Ander Deminter of Lines	Vaping	~ ~	No previous entry
Acute Respiratory Intections	Damp in house	Text	No previous entry
Immunisation History	Mould on surfaces in home	Text	No previous entry
999 and NEWS Score	Keeps pets	Text	No previous entry
Antiviral (CMDU)/Antibiotics			
Self Care/ Winter Preparedness	Comment on environmental impacts	✓	
Asthma CYP/Adults	Examination		
COPD	Examination findings	^	
Chiramoth/		~	

KPIs for enhanced services are denoted by an asterisk.

Pages «	Investigations (QOF)				^		
КРІ	There is no gold standard diagnostic test (BTS).	here is no gold standard diagnostic test for asthma. A clinical diagnosis can be made where there is a high/ intermediate probability of asthma and good response to a trial of inhaled corticosteroids 3TS).					
Introduction	For QOF diagnosis code AST011, patient	ts aged >=6 years	should have the followiing measured between 3 months before and 6 months after dia	gnosis (unles	s personal care adjustment apply, see		
Acute Respiratory Infections	note below)						
Immunisation History	*1. A record of quality assured spirometr	ry					
999 and NEWS Score	% or FEV1 Z score) (QOF)	27-Aug-2024			No previous entry		
Antiviral (CMDU)/Antibiotics		Text					
Self Care/ Winter Preparedness	***Percent predicted FEV1		<u>%</u>		No previous entry		
Asthma CYP/Adults		Text					
COPD	*Spirometry Unsuitable/Declined (QOF)			\sim	No previous entry		
Spirometry	*Diagnostic spirometry service not available (QOF)	27-Aug-2024			No previous entry		
Pulmonary Rehabilitation	*2. Plus ONE of the following - BDR/ FEN	NO/ PEFR variability					
Oxygen - home supply	*Spirometry BDR result % (QOF)	27-Aug-2024			No previous entry		
Referrals		Text					
NWL Virtual or Ward Admission	*FENO result ppb (QOF)	27-Aug-2024			No previous entry		
Cipicipa Decourses		Text					
Clinician Resources	FeNO test service not available (QOF)	27-Aug-2024			No previous entry		
	*PEFR variability % (QOF)		<u>%</u> 27-Aug-2024		No previous entry		
		Text					

KPIs for enhanced services are denoted by an asterisk – please complete if not completed on KPI page. Please read notes in red to help with completing the template

Consider the following as positive results - FEV1/FVC < 70% or FEV1 Z score <1. - BDR >= 12% - FENO >=35 - PEFR variability >20% PEFR variability definition - Best of three hard and fast blows twice - Standing or sitting but be consistent th - % variability = (highest PEF - lowest PE - For greater accuracy, calculate % varial NB For 2023/24 personal care adjustment	(NICE guidance) 64 e a day for two weeks rroughout EF)/highest PEF bility for each day and average ove ts are in place exempting the nee	er the two week period d for diagnostic investigations where either the patient is not able to perform the test, or the service is not avail	able.
No For 2020/21 personal care adjustment	courte in place exempting the need		10101
Comment on investigations			
Peak Flow Monitoring			· ·
PEFR - paeds.pdf (bradfordvts.co.uk)			
*PEFR - measurement (QOF)	<u>L/min</u>	08-May-2024 350 L/	min »
*PEFR - Best ever (QOF)	L/min	08-May-2024 500 L/	min »
*Predicted peak expiratory flow rate	Calculate	08-May-2024 399 L/	min »

KPIs for enhanced services are denoted by an asterisk – please complete if not completed on KPI page. Please read notes in red to help with completing the template

Diagnosis & Management					
Diagnosis & Hanagement					
If suspected asthma review history, inhaler technique, adherence to ICS, CYP and family understanding, and consider further period of monitoring and review in 6 weeks. Do not use 'viral wheeze' if age 5 years and above and recurrent wheeze					
*Diagnosis (QOF)	~	22-Dec-2022 Suspected as	*		
	27-Aug-2024				
	Text				
Demonstration of inhaler technique (QOF)	Text	No previous entry			
*Asthma action plan agreed and copy to patient (QOF)	Text	08-Dec-2021	*		
Asthma clinical management plan (ick to launch Asthma Action Plan on saving)		No previous entry			
*Smoking cessation education (QOF)	Text	No previous entry			
Advice given (housing, pollution, damp & mould)	Text	No previous entry			
Referral for specialist assessment	Text	No previous entry			
Comment on diagnosis and management					

KPIs for enhanced services are denoted by an asterisk – please complete if not completed on KPI page. Please read notes in red to help with completing the template

Pages «	Exacerbation	^
КРІ	Good practice point - apart from addressing the acute issues - what is the background context? How many exaserbations in the last 12months?	
Introduction	How many SABAs used? Is the child on a preventer?	
Acute Respiratory Infections	Are they using it? Does it work?	
Immunisation History	Is their inhaler technique correct?	
999 and NEWS Score	Guidance on objective severity assessment (BTS)	
Antiviral (CMDU)/Antibiotics	Moderate	
Self Care/ Winter Preparedness	Age 2-5 years: RR<=40, HR <= 140	
Asthma CYP/Adults	Age 6-11 years: RR <=30, HR <=125 Age >12 years: RR <25, HR <110	
COPD	PEFR >50 % of best or predicted Able to talk/ feed	
Spirometry		
Pulmonary Rehabilitation	Severe	
Oxygen - home supply	Age 2-5 years: RR>40, HR >140	
Referrals	Age 6-11 years: RR >30, HR >125 Age >12: RR >=25, HR >=110	
NWL Virtual or Ward Admission	PEFR 33-50% of best or predicted Too breathless to talk or marked recession	
1	O2 Sats <92% plus any of:	
	PEFR <33% or unable to do	
	Silent chest	
	Poor respiratory effort	

Altered conscious level/ confusion/ agitation/ exhaustion/ cyanosis

Please read notes in red

Pages «				^
КРІ	History/ examination			
Introduction	Temperature	degrees C	No previous entry	
Acute Respiratory Infections	Parisharal average caturation		No previous entry	
Immunisation History	Peripitetai oxygen saturation	bosts/min	,	
999 and NEWS Score	Heart rate		No previous entry	
Antiviral (CMDU)/Antibiotics	Respiratory rate	/minute	No previous entry	
Self Care/ Winter Preparedness	<u> PEFR - paeds.pdf (bradfordvts.co.uk)</u>			
Asthma CYP/Adults	*Peak expiratory flow rate (QOF)		08-May-2024 350 L/min	
COPD	*Diagnosis (QOF)	×	No previous entry	
Spirometry		Text		
Pulmonary Rehabilitation	Management			
Oxygen - home supply	Referral to hospital	Text	No previous entry	
Referrals	Key red flag advice for patients			
NWL Virtual or Ward Admission	Seek urgent medical review if - Needing more than 6 puffs of SABA fou	r hourly		
Clinician Resources	 6 puffs of SABA not lasting four hours Not getting better after 48 hours Follow their acute asthma action plan 			
I	All patients need a review in primary care	within two working days		
	Checked adaquate supply of		No previous entry	
	medication			
	Two working day review booked			
			No previous entry	
	copy to patient (QOF)		08-Dec-2021	4
	Asthma clinical management plan (tick to launch Asthma Action Plan on saving)		No previous entry	4

KPIs for enhanced services are denoted by an asterisk – please complete if not completed on KPI page. Please read notes in red to help with completing the template

Pages	Post Attack Review - within two w	rorking days	·
KPI	Telephone review not recommended - ir Good practice is to review background ri If there is a pattern of recurrent exacer	nhaler technique cannot be assessed over the phone sk factors/ exacerbations/ medication use/ adherence to inform future risk and management. nations/ biob SABA use /noor adherence/ non-engagement or other red-flags, then this must be escalated	
Introduction			
Acute Respiratory Infections	- *Post hospital discharge - 2 working		No constructions and as
Immunisation History	day review		No previous entry
999 and NEWS Score	If post attack review, enter date of attack	27-Aug-2024	No previous entry
Antiviral (CMDU)/Antibiotics	Type of consultation	~ ~	No previous entry
Self Care/ Winter Preparedness	Did not attend	Text	No previous entry
Asthma CYP/Adults	How is the child now?		
COPD	PEFR - paeds.pdf (bradfordvts.co.uk)		
Spirometry	*PEFR (QOF)	L/min	08-May-2024 350 L/min »
Pulmonary Rehabilitation		Text	
Oxygen - home supply	Perform your clinical assessment using th	e scoring system below, calculate the total score and manage accordingly.	
Referrals	NB this is a guide and does not replace o	linical judgement.	
NWL Virtual or Ward Admission	4 or more Urgent review in ED 2-3 Same day GP review		
Clinician Resources	0-1 Book asthma review with	hin 4 weeks	
Cimician Resources			
	Breathing		^
	Struggling to breath = 4		
	Increased resp rate = 2		
	Ongoing wheeze = 2		
	Ongoing cough = 2		
	Absence of symptoms = 0	KPIs for enhanced services are denoted by an ast	erisk – nlease
	Progress		
	Appears worse = 2	complete if not completed on KPI page. Please re	ead notes in
	Appears the same = 1	red to belo with completing the templete	
	Appears better = 0		

KPI	SABA				
Introduction	Requires SABA 1-3 hourly = 2				
Acute Respiratory Infections	Requires SABA 4-6 hourly = 1 Requires SABA PRN = 0				
Immunisation History	PEFR (if has device/ technically able)				
999 and NEWS Score	\bigcirc <50% predicted = 2				
Antiviral (CMDU)/Antibiotics	50-75% predicted = 1 75-100% predicted = 0				
Self Care/ Winter Preparedness	4 or more = Urgent review in ED				
Asthma CYP/Adults	2-3 = Same day GP review 0-1 = Book asthma review within 4 week	s			
COPD	NB this is a guide - use clinical judgement				
Spirometry	Plan		^		
Pulmonary Rehabilitation	Fidit		\sim		
Oxygen - home supply	Inhaler technique checked			No previous entry	
Referrals	*Asthma action plan agreed and copy to patient (QOF)			08-Dec-2021	*
NWL Virtual or Ward Admission	Asthma clinical management plan (tick to launch Asthma Action Plan			No previous entry	
Clinician Resources	on saving)				
	relephone review not recommended - Ini	naier technique cannot de assessed over the phone			
	Asthma follow up booked (QOF)	Follow Up	27-Aug-2024	No previous entry	
		Text			
	MART Asthma Plan				~

KPIs for enhanced services are denoted by an asterisk – please complete if not completed on KPI page. Please read notes in red to help with completing the template

COPD – Respiratory Conditions

NWL ICS Respiratory Conditions ES 2024/25						
Pages «	COPD					^
КРІ	Did not attend chronic obstructive pulmonary disease clinic			No previous entry		
Introduction	*Chronic obstructive pulmonary disease annual review (QOF)			22-Nov-2021	»	
Acute Respiratory Infections	*Enhanced services administration			27-0ct-2023	*	
Immunisation History	Only tick UCP if patient has Universal Care	Plan				
999 and NEWS Score	*Patient has Universal Care Plan (UCP)			No previous entry		
Antiviral (CMDU)/Antibiotics	COPD monthly review (QOF)		~	No previous entry		
Self Care/ Winter Preparedness	**Issue of chronic obstructive pulmonary disease rescue pack	Text		No previous entry		
Asthma CYP/Adults	**Has supply of rescue medication			No previous entry		
COPD	Rescue pack declined		~	No previous entry		
Spirometry	***MRC Scale		~	No previous entry		
Pulmonary Rehabilitation	*Smoking status (QOF)		~	07-Aug-2024 Ex-smoker	*	
Oxygen - home supply	*Smoke exposure (QOF)		~	No previous entry		
Referrals	Initial post discharge review			No previous entry		
NWL Virtual or Ward Admission	Chronic obstructive pulmonary disease resolved			No previous entry		

KPIs for enhanced services are denoted by an asterisk – please complete if not completed on KPI page. Please read notes in red to help with completing the template

COPD cont'd– Respiratory Conditions

Pages «	Examinations/Investigations					^
KPI	Standing height	cm	07-Aug-2024	1.6 cm	*	
Introduction	Body weight	kg	07-Aug-2024	77 kg	*	
Acute Respiratory Infections	Body Mass Index	Calculate	07-Aug-2024	300781.25 kg	*	
Immunisation History	ВР		07-Aug-2024	180/110 mmHg	*	
999 and NEWS Score	Pulse rate	beats/min	27-Apr-2022	100 beats/min	*	
Antiviral (CMDU)/Antibiotics	Respiratory rate	/minute	No previous e	ntry		
Self Care/ Winter Preparedness	Predicted DEER using EN 13826 standard		00 May 2024	2001/min	~	
Asthma CYP/Adults	(QOF)		08-Mdy-2024	399 L/ IIIII	"	
COPD	Peak expiratory flow rate		08-May-2024	350 L/min	*	
Spirometry	Forced expired volume in 1 second	litre	No previous e	ntry		
Pulmonary Rehabilitation	Percent predicted FEV1	<u>%</u>	No previous e	ntry		
Oxygen - home supply	FEV/1/EV/C percent	<u>%</u>	08-Dec-2021	7%	*	
Referrals	revi/ive percent					
NWL Virtual or Ward Admission	Expected FEV1		No previous e	ntry		
Clinician Resources	*Peripheral blood oxygen saturation	~	No previous e	ntry		
	Spirometry (QOF)	~	No previous e	ntry		
	Reversability test to salbutamol	×	No previous e	ntry		
	*Number of chronic obstructive pulmonary disease exacerbations in past	<u>/vear</u>	No previous e	ntry		~

KPIs for enhanced services are denoted by an asterisk

COPD cont'd– Respiratory Conditions

Pages «	Online COPD Assessment Test			
КРІ	Chronic obstructive pulmonary disease assessment test score	/40		No previous entry
Introduction	Airways Obstruction		~	No previous entry
Acute Respiratory Infections	Inhaler technique		~	19-Apr-2022 Inhaler techn »
Impunisation Liston	Inhaler technique shown			No previous entry
	Spacer device in use			19-Apr-2022 >>
999 and NEWS Score	Medication review (QOF)			12-Jan-2024 >>
Antiviral (CMDU)/Antibiotics	Optimisation of medication for			No previous entry
Self Care/ Winter Preparedness	chronic obstructive pulmonary disease			
Asthma CYP/Adults	*Pulmonary rehabilitation programme (QOF)		~	22-Dec-2022 Referral to p 🔌
COPD	COPD disease monitoring			No previous entry
Spirometry	*Excepted from COPD Quality Indicators		~	No previous entry
	Vaccinations			no previous enery
	Influenza vaccinations		~	26-Sep-2022 Administratio »
	Influenza vaccination not given		~	No previous entry
	Intranasal Influenza vaccination declined		~	No previous entry
	Intanasal influenza vaccination		~	No previous entry
	Pneumococcal vaccination		~	No previous entry
	Pneumococcal vacination not given		~	No previous entry
	Follow up			
	*Chronic obstructive pulmonary disease annual review	Follow Up	27-Aug-2024	No previous entry
	Chronic obstructive pulmonary disease 3 monthly review	Follow Up	27-Aug-2024	No previous entry
	Chronic obstructive pulmonary disease 6 monthly review	Follow Up	27-Aug-2024	No previous entry

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Spirometry – Respiratory Conditions

Pages «	Spirometry			
КРТ	Spirometry screening		22-Dec-2022	*
Takan du aking	*Enhanced services administration		27-0ct-2023	*
Introduction	Indication for spirometry referral	×	22-Dec-2022 Suspected as	*
Acute Respiratory Infections	Spirometry Unsuitable/Declined		No previous entry	
Immunisation History		Text		
999 and NEWS Score	Diagnostic spirometry service not	27-Aug-2024	No previous entry	
Antiviral (CMDU)/Antibiotics		Text		
Self Care/ Winter Preparedness	Quitcome of spirometry		03-1an-2024 Asthma	*
Asthma CYP/Adults			05-5an-2024 Astimia	
COPD				
Spirometry				

KPIs for enhanced services are denoted by an asterisk – please complete if not completed on KPI page. Also ensure when carrying out Spirometry screening that both the Spirometry screening and Enhanced services administration boxes are ticked

Pulmonary Rehabilitation – Respiratory Conditions

Pages «	Pulmonary Rehabilitation		
КРІ	*Pulmonary Rehab (QOF)	×	22-Dec-2022 Referral to p »
Introduction	*Code indicating pulmonary rehabilitation (QOF)	27-Aug-2024	No previous entry
Acute Respiratory Infections		Text	
Immunisation History	Pulmonary rehabilitation review	27-Aug-2024	No previous entry
999 and NEWS Score		Text	
Antiviral (CMDU)/Antibiotics			
Self Care/ Winter Preparedness			
Asthma CYP/Adults			4
COPD			
Spirometry			r a
Pulmonary Rehabilitation			

KPIs for enhanced services are denoted by an asterisk – please complete if not completed on KPI page.

Oxygen home supply – Respiratory Conditions

Pages «	Oxygen - Home			^
KPI	Referral to home oxygen service	27-Aug-2024	No previous entry	
Introduction		Text		. 1
Acute Respiratory Infections	Home oxygen therapy declined		22-Dec-2022	*
Immunisation History	Patient consent given for supply of home oxygen	27-Aug-2024	No previous entry	
999 and NEWS Score		Text		
Antiviral (CMDU)/Antibiotics	Assessment for home oxygen therapy	27-Aug-2024	No previous entry	
Self Care/ Winter Preparedness		Text		
Asthma CYP/Adults	Home oxygen order form completed	27-Aug-2024	No previous entry	
COPD		Text		
Spirometry	"Home oxygen supply	27-Aug-2024	No previous entry	
Pulmonary Rehabilitation				
Oxygen - home supply			No previous entry	
Referrals	Home oxygen therapy review	27-Aug-2024	No previous entry	
NWL Virtual or Ward Admission		Text		
Clinician Resources	Home oxygen supply stopped		No previous entry	
	CQC requirements for home oxyge	n use		
	Named prescriber for home oxygen	Text Named prescriber for home oxygen:-		
	Clinical reason for the home oxygen:-	Text Clinical reason for the home oxygen:-		
	Patient has been informed how to Use the recommended oxygen as prescribed	Patient has been informed how to use the recommended oxygen as prescribed:-		
	Delivered oxygen flow rate	L/min 27-Aug-2024	No previous entry	
		Text Recommended delivered oxygen flow rate		
	https://www.cgc.org.uk/guidance-provid	ers/adult-social-care/managing-oxygen-in-peoples-own-homes		

KPIs for enhanced services are denoted by an asterisk – please complete if not completed on KPI page.

Oxygen home supply cont'd – Respiratory Conditions

Clinician Resources	Please also record the following inf	ormation in the Universal Care Plan - and personalised care plan	
	Please also see NWL ICS Care Planning	2023/24 template. Clicking on the advance care planning code below indicates that you have created the University	al Care Plan
	***Advance care planning (UCP)	Text	No previous entry
	Emergency care plan details	~	No previous entry

KPIs for enhanced services are denoted by an asterisk – please complete if not completed on KPI page. Please read notes in red to help with completing the template

Referrals – Respiratory Conditions

NWL ICS Respiratory Conditions	WL ICS Respiratory Conditions ES 2024/25				
Pages «	Referrals				
KPI	Referral to pulmonary rehabilitation	27-Aug-2024	22-Dec-2022	*	
Introduction		Text			
Acute Respiratory Infections	Referral to smoking cessation advisor	27-Aug-2024	No previous entry		
Immunication History		Text			
	Referral to respiratory clinic declined	27-Aug-2024	No previous entry		
999 and NEWS Score		Text			
Antiviral (CMDU)/Antibiotics	Refer to community respiratory team	27-Aug-2024	05-Jul-2024	*	
Self Care/ Winter Preparedness		Text			
Asthma CYP/Adults					4
COPD					Ċ
Spirometry					4
Pulmonary Rehabilitation					
Oxygen - home supply					
Referrals					

Please complete if a referral is made

NWL Virtual or Ward Admission – Respiratory Conditions

Pages «	Data Entry - From NWL Virtual Wa	rd	
KPI	Admission to virtual ward	27-Aug-2024	No previous entry
Introduction		Text	
Acute Respiratory Infections	Discharge from virtual ward	27-Aug-2024	No previous entry
		Text	
Immunisation History	Referral to virtual ward	27-Aug-2024	No previous entry
999 and NEWS Score		Text	
Antiviral (CMDU)/Antibiotics	Remote monitoring service details		No previous entry
Self Care/ Winter Preparedness	Hospital Discharge Details		
Asthma CYP/Adults	Hospital admission or discharge	~	No previous entry
COPD			
Spirometry			-
Pulmonary Rehabilitation			
Oxygen - home supply			
Referrals			
NWL Virtual or Ward Admission			
Clinician Resources			

Please complete if appropriate

Clinician Resource – Respiratory Conditions

Pages «	Clinician Resources	
КРІ	NWL Respiratory Guidelines and Clinical Documents	
Introduction		
Incroduction	Long Term Condition	
Acute Respiratory Infections	Long term condition V 03-Jan-2024 Asthma V	
Immunisation History	NICE CKS Asthma NICE CKS COPD	
999 and NEWS Score	NICE CKS Bronchiectasis	
Antiviral (CMDU)/Antibiotics	NICE CKS Breathlessness NHS England Adult Breathlessness pathway April 2023	
Self Care/ Winter Preparedness	NICE CKS Pulmonary Embolism MART Asthma Plan	
Asthma CYP/Adults	Paediatric	
COPD	https://www.nhs.uk/conditions/asthma/ https://ginasthma.org/gina-patient-guide-you-can-control-your-asthma/	
Spirometry	https://www.asthma.org.uk/conditions/asthma https://patient.info/chest-lungs/asthma-leaflet	
Pulmonary Rehabilitation	For template audit only	
Oxygen - home supply	✓ Template entry 07-Aug-2024 >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>	-
Referrals		
NWL Virtual or Ward Admission		
Clinician Resources		

Click on links for Guidelines



Ring Pessary Template 2024/25

NWL ICS Ring Pessary ES 2024/	25		
Pages «			^
Ring Pessary	North West London ICB Ring Pessary ES 2024	/25	
Contract Specification	NOTE: Fields marked with * are mandatory		
Information	Payment Criteria [*] Insertion of ring pessary into vagina <i>Text</i>	No previous entry	
	*Removal of ring pessary from vagina Text *Renewal of ring pessary in vagina Text	No previous entry	
	*Enhanced services administration Text	27-0ct-2023	*
	<u>To Achieve Payment for Ring Pessary R01</u> Patient must be a Female Aged 18 and Over WITHOUT having medication for (Estring (Pharmacia) ring pessary recorded AND Has SNOMED code of Insertion of ring pessary into vagina (176726001) OR Removal of ring pessary (236865002) OR Renewal of ring pessary (2368 Has SNOMED code of Enhanced services administration (166221000000105) recorded at the same time as Ring Pessary insertion/removal	861006) recorded by the provider AND	4 4
	Other		
	O/E - vaginal speculum examination - Text	No previous entry	
	O/E - speculum vaginal wall Text	No previous entry	
	Gynaecologic examination Text	No previous entry	
	Follow-up clinic letter sent to general Text	No previous entry	
	Complete below if there is an infection / ulceration / wrong size refitting Problem with vaginal pessary Text	No previous entry	~
	North West London ICB Ring Pessary ES 2024/25 nhsnwl.servicedesk@nhs.net		

KPIs for enhanced services are denoted by an asterisk. Ensure you tick the enhanced services administration box at the same time as you tick the procedure. You will also find on this page the SNOMED codes used in the templates that will lead to achieving Enhanced Service payment (The areas are highlighted with an asterisk).

Contract Specification (Reporting) – Ring Pessary

NWL ICS Ring Pessary ES 2024/25		*
Pages «	Contract Specification	
Ring Pessary	Reporting	
Contract Specification	<u>NWL Enhanced Service Searches</u> NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 19 Ring Pessary	
Information		

Information – Ring Pessary

Pages «	Disclaimer
Ring Pessary Contract Specification	This template has been created by the North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accurate. However, responsibility for ensuring the accuracy of the data produced using this template remains with the Practice; the ICB strongly recommend that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing <u>nhsnwl.servicedesk@nhs.net</u>
Information	Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).
	Purpose
	The purpose of this template is to provide a comprehensive data entry template for the purposes of Ring Pessary enhanced services in line with the specification.
	Developed by
	Developed by the NWL PCS System Development team
	Version
	This template was last updated: April 2024

On this page you will find the disclaimer and feedback email address.

You will also find the purpose of the template, when it was last updated and who designed and developed it.



Warfarin/Anticoagulation Monitoring Template 2024/25
Pages «	Warfarin Monitoring		
Warfarin Monitoring	North West London ICB Warfarin Monitoring ES 2024/25		
Contract Specification	NOTE: Fields marked with * are mandatory		
Information	ES Payment criteria		
	*Warfarin therapy initiated in the GP No previous entry Surgery No previous entry		
	No previous entry		
	No previous entry		
	*INR - international normalised ratio		
	*Enhanced services administration 27-Oct-2023		
	PAYMENT/KPI RULES To Achieve Quarterly Payment for Warfarin Initiation ACD1 - Registered patient must be Aged 18 and Over AND - Has SNOMED code of Warfarin Therapy Started (17092007) recorded by the provider in the payment Quarter - Has SNOMED code of Enhanced Services Administration (16522100000105) recorded at the same time as the International normalised ratio To Achieve Quarterly Payment for Warfarin Initiation Home Visit ACO2 - Has achieved coding for AC01 AND - Has SNOMED code of Home Visit (439708006) recorded at the same time as International normalised ratio To Achieve Quarterly Payment for Warfarin Monitoring ACO3 - Registered patient must be Aged 18 and Over WITHOUT being initiated by the provider on Warfarin Initiation in last 12 months AND - Has SNOMED code of International normalised ratio (165581004) recorded by the provider - Has SNOMED code of International normalised ratio (165581004) recorded by the provider on Warfarin Initiation in last 12 months AND - Has SNOMED code of International normalised ratio (165581004) recorded by the provider - Has SNOMED code of International normalised ratio (165581004) recorded by the provider in the payment Quarter - Has SNOMED code of Enhanced Services Administration (16622100000105) recorded at the same time as the International normalised ratio To Achieve Quarterly Payment for Warfarin Monitoring Home Visit ACO4 - Has achieved coding for ACO3 AND - Has SNOMED code of Home Visit (439708006) recorded at the same time as International normalised ratio		

In most cases you would only tick Warfarin Monitoring (3rd Tick box) and the enhanced services administration box at the same time along with the INR. You will also find on this page the SNOMED codes used in the templates that will lead to achieving Enhanced Service payment (The areas are highlighted with an asterisk). Only tick the Home visit if you have seen the patient in their home.

Warfarin Monitoring cont'd – Warfarin/Anticoagulation Monitoring

Pages «	Additional Information (Optional)			1
Warfarin Monitoring	Monitoring			
Contract Specification	Indication	~	No previous entry	
Information		27-Aug-2024		
	Target international normalised ratio		No previous entry	
	Planned stop date for anticoagulation therapy	27-Aug-2024	No previous entry	
	Requires lifelong warfarin therapy		No previous entry	
	Regular monitoring discussed with patient		No previous entry	
	Patient understands why taking all medication		24-Dec-2020	*
	General contraceptive advice		No previous entry	
	Provision of written information about anticoagulant therapy		No previous entry	
	Patient held anticoagulation therapy record updated		No previous entry	_
	International normalised ratio derived warfarin dose	ma	No previous entry	
	Notes regarding warfarin dose (from INRStar output)			
	🗌 Warfarin dose changed		No previous entry	

Warfarin Monitoring cont'd – Warfarin/Anticoagulation Monitoring

INR (international normalised ratio) percentage time in therapeutic range	<u>%</u>			No previous entry	
Self monitoring of international normalised ratio				No previous entry	
Date of next anticoagulant clinic appointment	27-Aug-2024			No previous entry	
Did not attend general practitioner anticoagulant clinic				No previous entry	
Test clinic location			~	No previous entry	
Warfarin therapy stopped				No previous entry	
DOAC (direct-acting oral anticoagulant) declined	Text			12-Sep-2023	*
<u>Patient leaflet</u> <u>Action if bleeding</u> <u>Drug interations for Warfarin</u>					
		North West London ICB Warfarin Monitoring ES	2024/25		

Contract Specification (Reporting) – Warfarin/Anticoagulation Monitoring

Pages «	Contract Specification
Warfarin Monitoring	Reporting
Contract Specification	Reporting > Population Reporting > NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v > 02 Anticoagulation
Information	

Information – Warfarin/Anticoagulation Monitoring

Pages «	Disclaimer
Warfarin Monitoring	This template has been created by North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accurate. However, responsibility for ensuring the accuracy of the data produced using this template remains with the
Contract Specification	Practice; the ICB strongly recommends that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing nhsnwl.servicedesk@nhs.net
Information	Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).
	Purpose
	The purpose of this template is to provide a comprehensive data entry template for the purposes of Warfarin Monitoring enhanced services in line with the specification.
	Developed by
	Developed by NWL PCS System Development team
	Version
	This template was last updated March 2024.

On this page you will find the disclaimer and feedback email address.

You will also find the purpose of the template, when it was last updated and who designed and developed it.



Wound Care Template 2024/25

NWL ICS Wound Care ES 2024/25				
Pages «				^
Wound Care		North West London ICB Wound Care ES 2024/25		
Contract Specification		NOTE: Fields marked with * are mandatory		
Information	ES Payment Codes			
	*Wound care *Enhanced services administration <u>Wound Care W01</u> Has SNOMED code of Wound care (225 Has SNOMED code of Enhanced services	Text 358003) recorded by the provider AND administration (166221000000105) recorded at the same time as Wound Care	No previous entry 27-Oct-2023	*
	Wound type	24-Sep-2024 Image: Control of the second secon	No previous entry	
	History	Text	07-Aug-2024	*
	Length of wound	<u>mm</u>	No previous entry	
	Width of wound	Text	No previous entry	^
	Depth of wound		No previous entry	

The areas marked with an asterisk need to be completed for ES Payment

Tick the box for wound care and at the same time tick the box for enhanced service administration You will also find the SNOMED codes used in the templates that leads to achieving Enhanced Service payment

Wound Care cont'd – Wound Care

Colour of exudate	Text	No previous entry
Wound odour		No previous entry
Wound infected	Text	No previous entry
Skin wound swab taken	Text	No previous entry
Care plan agreed with patient	Text	No previous entry
Procedures	~	No previous entry
	Text	
🗌 Management Plan	Text	No previous entry
Advice given about wound care	Text	No previous entry
🗌 Referral to tissue viability nurse	Text	No previous entry
Record if wound healed		
Wound healed	Text	No previous entry
Consent for photo	Text	No previous entry
Photography of wound	Text	No previous entry

Further information regarding the wound

Wound Care cont'd – Wound Care



Click on configure for further images to annotate

NWL ICS Wound Care ES 2024/25				
Pages «	Contract Specification			
Wound Care	ES (2024/25) Coming soon			
Contract Specification	Convehoe			
Information	Searches			
inormation	Reporting > Population Reporting > NWL EMIS Enterprise S&R > NWL Enhanced Services 2024 25 v			

	Pages	*	Disclaimer
Wo	und Care		This template has been created by the North West London ICB to support Member Practices' effective delivery of patient services. It has been developed in close liaison with local clinicians, tested extensively within live clinical system environments and is, to the best of our knowledge, accurate. However, responsibility for ensuring
Con	tract Specification		the accuracy of the data produced using this template remains with the Practice; the ICB strongly recommend that Practices ensure appropriate checks are in place and that any errors are reported to the NWL IT Team by emailing https://www.servicedesk@nhs.net
Info	ormation		Feedback
			Your template feedback is important to us. Please email your comments/requests to the address above and they will be addressed at the next review date (sooner if need dictates).
			Purpose The summer of this template is to early the control of data for Wound Care Takanand Careiro Careiffertian and annuide a computation summer and annuite template the
			The purpose of this template is to enable the capture of data for wound care Enhanced Service Specification and provide a comprehensive wound care consultation
			Amendments This template will be updated as new guidance becomes available. Last updated: April 2024
			Developed by Developed by NWL PCS System Development team and ES team.

On this page you will find the disclaimer and feedback email address.

You will also find the purpose of the template, when it was last updated and who designed and developed it.

At the end of each template you will find the pathway to both the Payment and Data Quality reports however you do need to copy them to your own computer to use them.

- Payment Reports These reports will show you the completed KPIs
- Data Quality Reports These reports are very useful to find if you have missed something when filling in a template.
 - One of the main data quality issues is omitting the enhanced service administration tick box when completing a service (not all services have this tick box).

