PIP QI Incentive – Quality Improvement Measures

Quality Improvement

Quality improvement is foundational to contemporary high performing primary care. It includes team-based approaches, peer review, reflective practice, best practice, and data analysis. It can improve uptake of evidence-based practices for better patient outcomes, better professional development, and better system performance.

PIP QI Incentive

The PIP QI Incentive (PIP QI) is a payment to general practices for activities that support continuous quality improvement in patient outcomes and the delivery of best practice care. General practices enrolled in the PIP QI Incentive commit to implementing continuous quality improvement activities that support them in their role of managing their patients' health. They also commit to submitting nationally consistent, de-identified general practice data, against ten key *Improvement Measures* that contribute to local, regional and national health outcomes. The *Improvement Measures* allow general practices to understand which patients may benefit from preventative treatments, or may need recall to ensure effective management of a specified chronic disease (e.g. diabetes). This can help delay progression of the condition, improve quality of life, increase life expectancy, and decrease the need for high cost interventions.

Quality Improvement Measures

The collection of the de-identified *Improvement Measures* that form the PIP Eligible Data Set are part of a system of quality improvement that includes reflective practice, a common data baseline, and data analysis. The *Improvement Measures* are not designed to assess individual general practices or general practitioner performance. They do support a regional and national understanding of chronic disease management in areas of high need, and future iterations will respond to emerging evidence on areas of high need. The *Improvement Measures* are:

1. Proportion of patients with diabetes with a current HbA1c result
2. Proportion of patients with a smoking status
3. Proportion of patients with a weight classification
4. Proportion of patients aged 65 and over who were immunised against influenza
5. Proportion of patients with diabetes who were immunised against influenza
6. Proportion of patients with COPD who were immunised against influenza
7. Proportion of patients with an alcohol consumption status
8. Proportion of patients with the necessary risk factors assessed to enable CVD assessment
9. Proportion of female patients with an up-to-date cervical screening
10. Proportion of patients with diabetes with a blood pressure result

For the purposes of this document, 'proportion' referrals to the calculation and reporting of numerators and denominators.

General Business rules

Regular client:

A regular client means a client (patient) who has visited a particular primary health care provider three or more times in the last two years. This includes clients who have had more than one visit with a provider in a day, or who have seen multiple providers in a practice in a day.

Visits should only be considered as such if they are eligible for an MBS rebate.

Non-clinical events, such as administration and patient notification activities, should not be counted as visits for the purposes of this rule.

Deceased patients are to be excluded.

Age:

Age is derived from date of birth and taken as at the last day of the data collection period.

Sex:

Non-binary sex options are recommended based on the *Australian Government Guidelines on the Recognition of Sex and Gender*. Where sex information is collected and recorded in a personal record, individuals should be given the option to select M (male), F (female) or X (Indeterminate/Intersex/Unspecified).

Reporting Data

What is reported from practices to PHNs are practice-level patient counts in the form of a numerator and denominator for each QIM calculation, disaggregated by sex, age and whether the patient is aboriginal or Torres Strait islander as per the below specifications.

Aggregation of the data and the calculation of proportions occurs at the PHN level and is derived from the patients counts (numerators and denominators) received from practices.

Reporting frequency

Reports are required to be submitted at least once a PIP quarter

1 August – 15 October

1 November – 15 January

1 February – 15 April

1 May – 15 July.

QIM 01	Proportion of patients with diabetes with a current HbA1c result
Definition	Proportion of regular clients who have Type 1 or Type 2 diabetes and who have had an HbA1c measurement result recorded within the previous 12 months.
Rationale	Diabetes was the underlying cause of around 10% of all deaths in Australia in 2016 and recent reports show death rates for people with Type 2 diabetes are rising. As part of their care, people with Type 1 and 2 diabetes should have their glycosylated haemoglobin (HbA1c) measured at least every 12 months, or more frequently depending on the level of blood glucose control. Effective management of chronic disease can delay the progression of disease, improve quality of life, increase life expectancy, and decrease the need for high-cost interventions.
Computation description	Proportion of regular clients who have Type 1 **or** Type 2 diabetes **or** a diagnosis which indicates diabetes but does not specify between Type 1 or Type 2 **and** who have had an HbA1c measurement result recorded at the primary health care service within the previous 12 months. HbA1c: glycosylated haemoglobin. Exclude secondary diabetes, gestational diabetes mellitus (GDM), previous GDM, impaired fasting glucose, impaired glucose tolerance. Results arising from measurements conducted outside of the service that are known by the service are included in the calculation of this indicator.
Computation and method of calculation	**Numerator** Calculation A: Number of regular clients who have Type 1 diabetes and who have had an HbA1c measurement result recorded at the primary health care service within the previous 12 months. **Numerator** Calculation B: Number of regular clients who have Type 2 diabetes and who have had an HbA1c measurement result recorded at the primary health care service within the previous 12 months. **Numerator** Calculation C: Number of regular clients who have an unspecified, generic or general diabetes diagnosis which does not specify either Type 1 or Type 2 and who have had an HbA1c measurement result recorded at the primary health care service within the previous 12 months. **Denominator** Calculation A: Total number of regular clients who have Type 1 diabetes **Denominator** Calculation B: Total number of regular clients who have Type 2 diabetes **Denominator** Calculation C: Total number of regular clients who have an unspecified, generic or general diabetes diagnosis which does not specify either Type 1 or Type 2 **Computation** Calculation A: (Numerator A ÷ Denominator A) x 100 **Computation** Calculation B: (Numerator B ÷ Denominator B) x 100 **Computation** Calculation C: (Numerator C ÷ Denominator C) x 100
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice
Numerator data elements and source	Diabetes status (Diabetes mellitus status, METeOR identifier 270194) HbA1c measurement result recorded indicator (METeOR identifier 441495) Regular client indicator (METeOR identifier 686291)

QIM 01	Proportion of patients with diabetes with a current HbA1c result
Denominator data elements and source	Regular client indicator (METeOR identifier 686291) Diabetes status (Diabetes mellitus status, METeOR identifier 270194)

Disaggregation data	a) Sex
	   1 – Male
	   2 - Female
	   X – Indeterminate/Intersex/Unspecified
	
	b) Age group
	      0-4 years
	      5-14 years
	      15-24 years
	      25-34 years
	      35-44 years
	      45-54 years
	      55-64 years
	      65 years and over
	c) Indigenous Status
	   1. Aboriginal but not Torres Strait Islander Status
	   2. Torres Strait Islander but not Aboriginal
	   3. Both Aboriginal and Torres Strait Islander
	   4. Neither Aboriginal or Torres Strait Islander
	   5. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794,) Sex (Person-sex, code X, METeOR identifier: 635126) Indigenous Status (METeOR identifier: 602543)
Aggregation data	PHN Boundary
Aggregation data elements	PHN name
Clinical notes	HbA1c (glycosylated haemoglobin) measures blood glucose levels over time and is a marker of long-term diabetes control. Results from all relevant pathology tests should be included. Results arising from measurements conducted outside of the service, that are known by the service and included in the patient record, are included in the calculation of this indicator. A client is classified as having diabetes, if they have Type 1 or Type 2 diabetes listed as a diagnosis in their patient record. Clients are **excluded** from the calculation if they: • had secondary diabetes, gestational diabetes mellitus (GDM), previous GDM, impaired fasting glucose, impaired glucose tolerance. • had results from measurements conducted outside of the service which were not available to the service <u>and</u> had not visited the service in the previous 12 months.

QIM 01	Proportion of patients with diabetes with a current HbA1c result
	Note that any patients who have had gestational diabetes but **also** have Type 1 or 2 diabetes will be **included**.

QIM 02a	Proportion of patients whose smoking status has been recorded
Definition	Proportion of regular clients aged 15 years and over whose smoking status has been recorded.
Rationale	In Australia, smoking continues to be the behavioural risk factor responsible for the highest levels of preventable disease and premature death. Recording systems that document tobacco use almost double the rate at which clinicians intervene with smokers leading to higher rates of smoking cessation.
Computation description	Proportion of regular clients who are aged 15 years and over and whose smoking status has been recorded within the previous 12 months.
Computation and method of calculation	**Numerator:** Number of regular clients who are aged 15 years and over and whose smoking status has been recorded within the previous 12 months. **Denominator:** Total number of regular clients who are aged 15 years and over
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice
Numerator data elements	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291) Smoking status recorded indicator (METeOR identifier 441380)
Denominator data elements	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291)

Disaggregation data	a) Sex
	  1 – Male
	  2 - Female
	  X – Indeterminate/Intersex/Unspecified
	b) Age group
	    15-24 years
	    25-34 years
	    35-44 years
	    45-54 years
	    55-64 years
	    65 years and over
	c) Indigenous Status
	  1. Aboriginal but not Torres Strait Islander Status
	  2. Torres Strait Islander but not Aboriginal
	  3. Both Aboriginal and Torres Strait Islander
	  4. Neither Aboriginal or Torres Strait Islander
	  5. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794) Sex (Person-sex, code X, METeOR identifier: 635126)

QIM 02a	Proportion of patients whose smoking status has been recorded
	Indigenous Status (METeOR identifier: 602543)
Aggregation data	PHN
Aggregation data elements	PHN name
Clinical notes	Data are reported quarterly for services delivered in the given period [previous 12 months]. This question should be asked annually until age 30 then current status assumed. The most recently recorded result is included in this calculation. Results arising from measurements conducted outside of the service, that are known by the service, are included in the calculation of this indicator.

QIM 02b	Proportion of patients with a smoking status result
Definition	Proportion of regular clients aged 15 years and over whose smoking status has been recorded as one of the following: current smoker; ex-smoker; or never smoked.
Rationale	In Australia, smoking continues to be the behavioural risk factor responsible for the highest levels of preventable disease and premature death. Recording systems that document tobacco use almost double the rate at which clinicians intervene with smokers leading to higher rates of smoking cessation.
Computation description	Proportion of regular clients who are aged 15 years and over and whose smoking status has been recorded within the previous 12 months as one of the following: • current smoker; • ex-smoker or; • never smoked
Computation and method of calculation	**Numerator** Calculation A: Number of regular clients who are aged 15 years and over and whose smoking status has been recorded as 'current smoker' within the previous 12 months. **Numerator** Calculation B: Number of regular clients who are aged 15 years and over and whose smoking status has been recorded as 'ex-smoker' within the previous 12 months. **Numerator** Calculation C: Number of regular clients who are aged 15 years and over and whose smoking status has been recorded as 'never smoked' within the previous 12 months. **Denominator** Total number of regular clients who are aged 15 years and over and who have a smoking status recorded in the last 12 months. **Computation** Calculation A: (Numerator A ÷ Denominator) x 100 **Computation** Calculation B: (Numerator B ÷ Denominator) x 100 **Computation** Calculation C: (Numerator C ÷ Denominator) x 100
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice

QIM 02b	Proportion of patients with a smoking status result
Numerator data elements	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291) Smoking status (METeOR identifier 270311)
Denominator data elements	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291) Smoking status recorded indicator (METeOR identifier 441380)

Disaggregation data	d) Sex
	   1 – Male
	   2 - Female
	   X – Indeterminate/Intersex/Unspecified
	e) Age group
	      15-24 years
	      25-34 years
	      35-44 years
	      45-54 years
	      55-64 years
	      65 years and over
	f) Indigenous Status
	   6. Aboriginal but not Torres Strait Islander Status
	   7. Torres Strait Islander but not Aboriginal
	   8. Both Aboriginal and Torres Strait Islander
	   9. Neither Aboriginal or Torres Strait Islander
	   10. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794) Sex (Person-sex, code X, METeOR identifier: 635126) Indigenous Status (METeOR identifier: 602543)
Aggregation data	PHN
Aggregation data elements	PHN name
Clinical notes	Data are reported quarterly for services delivered in the given period [previous 12 months]. This question should be asked annually until age 30 then current status assumed. Results of "Daily smoker", "weekly smoker" and "irregular smoker" should all be aggregated into "Current smoker". The most recently recorded result is included in this calculation.

QIM 03a	Proportion of patients with a weight classification recorded
Definition	Proportion of regular clients aged 15 years and over and who have had their Body Mass Index (BMI) recorded within the previous 12 months.
Rationale	Being overweight, obese or underweight is associated with higher rates of morbidity and overweight and obesity is now a major public health issue in Australia. Being overweight and obese is a risk factor for Type 2 diabetes, cardiovascular disease, hypertension, osteoarthritis, some cancers and gallbladder disease. Being overweight or obese is also associated with certain psychosocial problems, functional limitations and disabilities. Being underweight means you may be malnourished and develop compromised immune function, respiratory disease, digestive diseases, cancer and osteoporosis. Australia's obesity rate now ranks fifth among Organisation for Economic Co-Operation and Development (OECD) countries (OECD 2017). BMI continues to be a common measure to identify adults who may be at an increased risk or morbidity and mortality due to their weight. Note: As BMI does not differentiate between body fat and muscle mass, there are some exceptions to the BMI guidelines, including people with high muscle mass, people of different ethnic groups, height and physical disabilities. It is useful to include a person's waist circumference as this can indicate health risk for chronic diseases.
Computation description	Body mass index (BMI): A measure of an adult's weight (body mass) relative to height used to assess the extent of weight deficit or excess where height and weight have been measured. Body mass index is the weight in kilograms divided by the square of the height in metres (WHO 2000). Proportion of regular clients who have had their BMI recorded in the last 12 months. Only include those client's whose BMI was classified using a height measurement taken since the client turned 15 and a weight measurement taken within the previous 12 months.
Computation and method of calculation	**Numerator**: Number of regular clients who are aged 15 years and over and who have had their BMI recorded within the previous 12 months. **Denominator**: Total number of regular clients who are aged 15 years and over
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice
Numerator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291) Body mass index recorded indicator (METeOR identifier 443083)
Denominator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291)

Disaggregation data	a) Sex
	    1 – Male
	    2 - Female
	    X – Indeterminate/Intersex/Unspecified

QIM 03a	Proportion of patients with a weight classification recorded

	b) Age group
	15-24 years
	25-34 years
	35-44 years
	45-54 years
	55-64 years
	65 years and over
	
	c) Indigenous Status
	    a. Aboriginal but not Torres Strait Islander Status
	    b. Torres Strait Islander but not Aboriginal
	    c. Both Aboriginal and Torres Strait Islander
	    d. Neither Aboriginal or Torres Strait Islander
	    e. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794,) Sex (Person-sex, code X, METeOR identifier: 635126) Indigenous Status (METeOR identifier: 602543)
Aggregation data	PHN
Aggregation data elements	PHN name
Clinical notes	Results arising from measurements conducted outside of the service, that are known by the service, are included in the calculation of this indicator.

QIM 03b	Proportion of regular patients with a weight classification
Definition	Proportion of regular clients aged 15 years and over and who have had their Body Mass Index (BMI) classified as obese, overweight, healthy, or underweight within the previous 12 months.
Rationale	Being overweight, obese or underweight is associated with higher rates of morbidity and overweight and obesity is now a major public health issue in Australia. Being overweight and obese is a risk factor for Type 2 diabetes, cardiovascular disease, hypertension, osteoarthritis, some cancers and gallbladder disease. Being overweight or obese is also associated with certain psychosocial problems, functional limitations and disabilities. Being underweight means you may be malnourished and develop compromised immune function, respiratory disease, digestive diseases, cancer and osteoporosis. Australia's obesity rate now ranks fifth among Organisation for Economic Co-Operation and Development (OECD) countries (OECD 2017). BMI continues to be a common measure to identify adults who may be at an increased risk or morbidity and mortality due to their weight. Note: As BMI does not differentiate between body fat and muscle mass, there are some exceptions to the BMI guidelines, including people with high muscle mass, people of different ethnic groups, height and physical disabilities. It is

QIM 03b	Proportion of regular patients with a weight classification
	useful to include a person's waist circumference as this can indicate health risk for chronic diseases.
Computation description	Body mass index (BMI): A measure of an adult's weight (body mass) relative to height used to assess the extent of weight deficit or excess where height and weight have been measured. Body mass index is the weight in kilograms divided by the square of the height in metres (WHO 2000).
	Proportion of regular clients who are male and aged 15 and who have had their BMI classified as obese within the previous 12 months, where obese is classified as a BMI score of 28.60 or over
	Proportion of regular clients who are male and aged 15 and who have had their weight classified as overweight within the previous 12 months, where overweight is classified as a BMI score of 23.60 or over and less than 28.60
	Proportion of regular clients who are male and aged 15 and who have had their weight classified as healthy within the previous 12 months, where healthy is classified as a BMI score of 17.26 or over and less than 23.60
	Proportion of regular clients who are male and aged 15 and who have had their weight classified as underweight within the previous 12 months, where underweight is classified as a BMI score of less than 17.26
	Proportion of regular clients who are male and aged 16 and who have had their BMI classified as obese within the previous 12 months, where obese is classified as a BMI score of 29.14 or over
	Proportion of regular clients who are male and aged 16 and who have had their weight classified as overweight within the previous 12 months, where overweight is classified as a BMI score of 24.19 or over and less than 29.14
	Proportion of regular clients who are male and aged 16 and who have had their weight classified as healthy within the previous 12 months, where healthy is classified as a BMI score of 17.80 or over and less than 24.19
	Proportion of regular clients who are male and aged 16 and who have had their weight classified as underweight within the previous 12 months, where underweight is classified as a BMI score of less than 17.80
	Proportion of regular clients who are male and aged 17 and who have had their BMI classified as obese within the previous 12 months, where obese is classified as a BMI score of 29.41 or over
	Proportion of regular clients who are male and aged 17 and who have had their weight classified as overweight within the previous 12 months, where overweight is classified as a BMI score of 24.73 or over and less than 29.41
	Proportion of regular clients who are male and aged 17 and who have had their weight classified as healthy within the previous 12 months, where healthy is classified as a BMI score of 18.05 or over and less than 24.73
	Proportion of regular clients who are male and aged 17 and who have had their weight classified as underweight within the previous 12 months, where underweight is classified as a BMI score of less than 18.05
	Proportion of regular clients who are female and aged 15 and who have had their BMI classified as obese within the previous 12 months, where obese is classified as a BMI score of 29.29 or over
	Proportion of regular clients who are female and aged 15 and who have had their weight classified as overweight within the previous 12 months, where overweight is classified as a BMI score of 24.17 or over and less than 29.29

QIM 03b	Proportion of regular patients with a weight classification
	Proportion of regular clients who are female and aged 15 and who have had their weight classified as healthy within the previous 12 months, where healthy is classified as a BMI score of 17.69 and or over and less than 24.17
	Proportion of regular clients who are female and aged 15 and who have had their weight classified as underweight within the previous 12 months, where underweight is classified as a BMI score of less than 17.69
	Proportion of regular clients who are female and aged 16 and who have had their BMI classified as obese within the previous 12 months, where obese is classified as a BMI score of 29.56 or over
	Proportion of regular clients who are female and aged 16 and who have had their weight classified as overweight within the previous 12 months, where overweight is classified as a BMI score of 24.54 or over and less than 29.56
	Proportion of regular clients who are female and aged 16 and who have had their weight classified as healthy within the previous 12 months, where healthy is classified as a BMI score of 17.91 and or over and less than 24.54
	Proportion of regular clients who are female and aged 16 and who have had their weight classified as underweight within the previous 12 months, where underweight is classified as a BMI score of less than 17.91
	Proportion of regular clients who are female and aged 17 and who have had their BMI classified as obese within the previous 12 months, where obese is classified as a BMI score of 29.84 or over
	Proportion of regular clients who are female and aged 17 and who have had their weight classified as overweight within the previous 12 months, where overweight is classified as a BMI score of 24.85 or over and less than 29.84
	Proportion of regular clients who are female and aged 17 and who have had their weight classified as healthy within the previous 12 months, where healthy is classified as a BMI score of 18.38 and or over and less than 24.85
	Proportion of regular clients who are female and aged 17 and who have had their weight classified as underweight within the previous 12 months, where underweight is classified as a BMI score of less than 18.38
	Proportion of regular clients who are aged 18 years and over and who have had their BMI classified as obese within the previous 12 months, where obese is classified as a BMI score of 30 or over.
	Proportion of regular clients who are aged 18 years and over and who have had their BMI classified as overweight within the previous 12 months, where overweight is classified as a BMI score of 25 to less than 30.
	Proportion of regular clients who are aged 18 years and over and who have had their BMI classified as healthy within the previous 12 months, where healthy is classified as a BMI score of 18.5 to less than 25.
	Proportion of regular clients who are aged 18 years and over and who have had their BMI classified as underweight within the previous 12 months, where underweight is classified as a BMI score of less than 18.5.
	If the client has had their BMI recorded more than once within the previous 12 months, only the most recently recorded result is included in this calculation.
	Where the client is aged between 15 and 24 years, BMI should only be used if both the height and weight measurement have been taken in the last 12 months.

QIM 03b	Proportion of regular patients with a weight classification
	For clients aged greater than 25, only include those clients' whose height has been recorded since the client turned 25 and a weight measurement has been taken within the previous 12 months.
Computation and method of calculation	**Numerator** Calculation A: Number of regular clients who are aged 15 years and over and who have had their BMI classified as obese within the previous 12 months. **Numerator** Calculation B: Number of regular clients who are aged 15 years and over and who have had their BMI classified as overweight within the previous 12 months. **Numerator** Calculation C: Number of regular clients who are aged 15 years and over and who have had their BMI classified as healthy within the previous 12 months. **Numerator** Calculation D: Number of regular clients who are aged 15 years and over and who have had their BMI classified as underweight within the previous 12 months. **Denominator** Calculation A, B, C and D: Total number of regular clients who are aged 15 years and over and who have had their BMI recorded within the previous 12 months. **Computation:** Calculation A: (Numerator A ÷ Denominator) x 100 **Computation:** Calculation B: (Numerator B ÷ Denominator) x 100 **Computation:** Calculation C: (Numerator C ÷ Denominator) x 100 **Computation:** Calculation D: (Numerator D ÷ Denominator) x 100
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice
Numerator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291) Body Mass Index classification (METeOR identifier 270474)
Denominator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Body mass index recorded indicator (METeOR identifier 443083) Regular client indicator (METeOR identifier 686291)

Disaggregation data	a) Sex
	  1 – Male
	  2 - Female
	  X – Indeterminate/Intersex/Unspecified
	b) Age group
	  15-24 years
	  25-34 years
	  35-44 years
	  45-54 years
	  55-64 years
	  65 years and over

QIM 03b	Proportion of regular patients with a weight classification

	c) Indigenous Status
	      a. Aboriginal but not Torres Strait Islander Status
	      b. Torres Strait Islander but not Aboriginal
	      c. Both Aboriginal and Torres Strait Islander
	      d. Neither Aboriginal or Torres Strait Islander
	      e. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794,) Sex (Person-sex, code X, METeOR identifier: 635126) Indigenous Status (METeOR identifier: 602543)
Aggregation data	PHN
Aggregation data elements	PHN name
Clinical notes	If the client has had their BMI recorded more than once within the previous 12 months, only the most recently recorded result is included in this calculation. Where the client is aged between 15 and 24 years, BMI should only be used if both the height and weight measurement have been taken in the last 12 months. For clients aged greater than 25, only include those clients' whose height has been recorded since the client turned 25 and a weight measurement has been taken within the previous 12 months. Exclude clients from the calculation if they: were 18 or older **and** either shorter than 0.914 or taller than 2.108 metres; or refused measurement.

QIM 04	Proportion of patients aged 65 and over who were immunised against influenza
Definition	Proportion of regular clients aged 65 years and over who were immunised against influenza in the previous 15 months.
Rationale	The administration of influenza vaccine to persons at risk of complications of infection is the single most important measure in preventing or attenuating influenza infection and preventing mortality. There is evidence that influenza vaccine reduces hospitalisations from influenza and pneumonia and all-cause mortality in adults aged ≥65 years of age. While best practice guidelines recommend annual immunisation, a 15-month interval allows for cases when a client decides to receive a vaccine earlier than recommended (e.g. from a pharmacy), or delay and wait for the release of an 'enhanced' vaccine.
Computation description	Proportion of regular clients aged 65 years and over and who are immunised against influenza. A person is immunised against influenza if they have received an influenza vaccine within the previous 15 months.
Computation and method of calculation	**Numerator** Number of regular clients who are aged 65 years and over and who are immunised against influenza. **Denominator** Total number of regular clients who are aged 65 years and over. **Computation** (Numerator ÷ Denominator) x 100
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice
Numerator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291) Influenza immunisation indicator (METeOR identifier 457688)
Denominator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291)

Disaggregation data	a) Sex
	   1 – Male
	   2 - Female
	   X – Indeterminate/Intersex/Unspecified
	b) Age group
	      65 years and over
	c) Indigenous Status
	   1. Aboriginal but not Torres Strait Islander Status
	   2. Torres Strait Islander but not Aboriginal
	   3. Both Aboriginal and Torres Strait Islander
	   4. Neither Aboriginal or Torres Strait Islander
	   9. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794,) Sex (Person-sex, code X, METeOR identifier: 635126) Indigenous Status (METeOR identifier: 602543)

QIM 04	Proportion of patients aged 65 and over who were immunised against influenza
Aggregation data	PHN
Aggregation data elements	PHN name
Clinical notes	Data are reported quarterly for services delivered in the given period 12 months. A person is immunised against influenza if they have received an influenza vaccine within the previous 15 months. Results arising from clinical intervention conducted outside of the service, that are known by the service and included in the patient record, are included in the calculation of this indicator. Exclude clients from the calculation if they: • did not have the immunisation due to documented medical reasons (e.g. allergy), system reasons (vaccine not available), or patient reasons (e.g. refusal); or • had results from measurements conducted outside of the service which were not available to the service and had not visited the service in the previous 15 months.

QIM 05	Proportion of patients with diabetes who were immunised against influenza
Definition	Proportion of regular clients with diabetes who were immunised against influenza in the previous 15 months.
Rationale	Diabetes was the underlying cause of around 10% of all deaths in Australia in 2016. People with diabetes are considered to be at high risk of complications from influenza. During recent influenza epidemics, diabetes was considered a significant risk factor for hospitalization. The administration of influenza vaccine to persons at risk of complications is the single most important measure in preventing or attenuating influenza infection and preventing mortality. While best practice guidelines recommend annual immunisation, a 15-month interval allows for cases when a client decides to receive a vaccine earlier than recommended (e.g. from a pharmacy), or delay and wait for the release of an 'enhanced' vaccine.
Computation description	Proportion of regular clients who are recorded as having Type 1 or Type 2 diabetes a diagnosis which indicates diabetes but does not specify between Type 1 or Type 2 and are immunised against influenza. A person is immunised against influenza if they have received an influenza vaccine within the previous 15 months.
Computation and method of calculation	**Numerator** Number of regular clients who are recorded as having Type 1 or Type 2 diabetes or a diagnosis which indicates diabetes but does not specify between Type 1 or Type 2 and are immunised against influenza. **Denominator** Total number of regular clients who are recorded as having Type 1 or Type 2 diabetes or a diagnosis which indicates diabetes but does not specify between Type 1 or Type 2. **Computation** (Numerator ÷ Denominator) x 100
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice
Numerator data elements and source	Regular client indicator (METeOR identifier 686291) Diabetes status (Diabetes mellitus status, METeOR identifier 270194) Influenza immunisation indicator (METeOR 457688)
Denominator data elements and source	Diabetes status (Diabetes mellitus status, METeOR identifier 270194) Regular client indicator (METeOR identifier 686291) Age – total years (Person-age, total years, METeOR identifier: 303794)
Disaggregation data	a) Sex 1 – Male 2 - Female X – Indeterminate/Intersex/Unspecified b) Age group 0-4 years 5-14 years 15-24 years 25-34 years 35-44 years 45-54 years

QIM 05	Proportion of patients with diabetes who were immunised against influenza

	55-64 years
	
	65 years and over
	
	  c) Indigenous Status
	      1. Aboriginal but not Torres Strait Islander Status
	      2. Torres Strait Islander but not Aboriginal
	      3. Both Aboriginal and Torres Strait Islander
	      4. Neither Aboriginal or Torres Strait Islander
	      9. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794,) Sex (Person-sex, code X, METeOR identifier: 635126) Indigenous Status (METeOR identifier: 602543)
Aggregation data	PHN
Aggregation data elements	PHN name
Clinical notes	Data are reported quarterly for services delivered in the given period (15 months). A person is immunised against influenza if they have received an influenza vaccine within the previous 15 months. Results arising from measurements conducted outside of the service, that are known by the service and included in the patient record, are included in the calculation of this indicator. A client is classified as having diabetes, if they have Type 1 or Type 2 diabetes a diagnosis which indicates diabetes but does not specify between Type 1 or Type 2 listed as a diagnosis in their patient record. Exclude clients from the calculation if they: • did not have the immunisation due to documented medical reasons (e.g. allergy), system reasons (vaccine not available) or patient reasons (e.g. refusal). • had secondary diabetes, gestational diabetes mellitus (GDM), previous GDM, impaired fasting glucose, impaired glucose tolerance. • had results from measurements conducted outside of the service which were not available to the service; <u>and</u> had not visited the service in the previous 12 months. Note that any patients who have had gestational diabetes but **also** have Type 2 diabetes will be **included**.

QIM 06	Proportion of patients with COPD who were immunised against influenza
Definition	Proportion of regular clients who are aged 15 years and over, are recorded as having chronic obstructive pulmonary disease (COPD), and were immunised against influenza in the previous 15 months.
Rationale	People with COPD are considered to be at high risk of complications from influenza. Data from several studies also provide evidence that influenza vaccination has a clinically important protective effect on influenza-related COPD exacerbations, and probably an effect on the total number of exacerbations in COPD patients. The administration of influenza vaccine to persons at risk of complications is the single most important measure in preventing or attenuating influenza infection and preventing mortality. While best practice guidelines recommend annual immunisation, a 15-month interval allows for cases when a client decides to receive a vaccine earlier than recommended (e.g. from a pharmacy), or delay and wait for the release of an 'enhanced' vaccine.
Computation description	Proportion regular clients who are aged 15 years and over who are recorded as having COPD and are immunised against influenza. A person is immunised against influenza if they have received an influenza vaccine within the previous 15 months.
Computation and method of calculation	**Numerator** Number of regular clients who are aged 15 years and over who are recorded as having COPD and are immunised against influenza. **Denominator** Total number of regular clients who are aged 15 years and over who are recorded as having COPD. **Computation** (Numerator ÷ Denominator) x 100
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice
Numerator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Influenza immunisation indicator (METeOR identifier 457688) COPD recorded indicator (METeOR identifier 464928) Regular client indicator ((METeOR identifier 686291)
Denominator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator ((METeOR identifier 686291)

Disaggregation data	a) Sex
	   1 – Male
	   2 - Female
	   X – Indeterminate/Intersex/Unspecified
	b) Age group
	     15-24 years
	     25-34 years
	     35-44 years
	     45-54 years
	     55-64 years
	     65 years and over

QIM 06	Proportion of patients with COPD who were immunised against influenza

	c) Indigenous Status
	    1. Aboriginal but not Torres Strait Islander Status
	    2. Torres Strait Islander but not Aboriginal
	    3. Both Aboriginal and Torres Strait Islander
	    4. Neither Aboriginal or Torres Strait Islander
	    9. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794,) Sex (Person-sex, code X, METeOR identifier: 635126) Indigenous Status (METeOR identifier: 602543)
Aggregation data	PHN
Aggregation data elements	PHN name
Clinical notes	COPD: Chronic Obstructive Pulmonary Disease. Include any diagnosis of COPD. A person is immunised against influenza if they have received an influenza vaccine within the previous 15 months. Results arising from measurements conducted outside of the service, that are known by the service and included in the patient record, are included in the calculation of this indicator. Exclude clients from the calculation if they: • did not have the immunisation due to documented medical reasons (e.g. allergy), system reasons (vaccine not available) or patient reasons (e.g. refusal). • had results from measurements conducted outside of the service which were not available to the service; and had not visited the service in the previous 12 months.

QIM 07	Proportion of patients with an alcohol consumption status
Definition	Proportion of regular clients who are aged 15 years and over who have had their alcohol consumption status recorded.
Rationale	Excessive consumption is associated with health and social problems in all populations. Many chronic conditions share common risk factors that are largely preventable, including excessive alcohol consumption. While fewer Australians are drinking at levels that contribute to alcohol-related harm, about 26% of people drink more than is recommended on a single occasion, and they do this at least once each month.
Computation description	Proportion of regular clients who are aged 15 years and over and who have had their alcohol consumption status recorded at the primary health care service. Alcohol consumption status has been recorded if the health service has either: a) A record of whether the client consumes alcohol; or b) A record specifying the amount and frequency of the client's alcohol consumption Results arising from measurements conducted outside of the service, that are known by the service, are included in the calculation of this indicator.
Computation and method of calculation	**Numerator** Number of regular clients who are aged 15 years and over **and** who have had their alcohol consumption status recorded. **Denominator** Total number of regular clients who are aged 15 years and over **Computation** (Numerator ÷ Denominator) x 100
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice
Numerator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291) Alcohol consumption status indicator (Alcohol consumption status recorded indicator, METeOR identifier 441441)
Denominator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291)

Disaggregation data	a) Sex
	  1 – Male
	  2 - Female
	  X – Indeterminate/Intersex/Unspecified
	b) Age group
	  15-24 years
	  25-34 years
	  35-44 years
	  45-54 years
	  55-64 years
	  65 years and over

QIM 07	Proportion of patients with an alcohol consumption status

	c) Indigenous Status
	    1. Aboriginal but not Torres Strait Islander Status
	    2. Torres Strait Islander but not Aboriginal
	    3. Both Aboriginal and Torres Strait Islander
	    4. Neither Aboriginal or Torres Strait Islander
	    9. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794,) Sex (Person-sex, code X, METeOR identifier: 635126) Indigenous Status (METeOR identifier: 602543)
Aggregation data	PHN
Aggregation data elements	PHN name
Clinical notes	Only the most recently recorded result is included in this calculation. Note a record and date stamped Change Track Audit C is the gold standard where clinical information systems have this functionality.

QIM 08	Proportion of patients with the necessary risk factors assessed to enable CVD assessment
Definition	Proportion of regular clients aged 45 to 74 years with information available to calculate their absolute CVD risk.
Rationale	Assessment of absolute CVD risk based on multiple risk factors is more accurate than that based on individual risk factors due to the cumulative nature of risk effects. Basing patient management decisions on this approach should improve CVD outcomes.

Computation description	Proportion of regular clients aged 45 to 74 years, without an existing coded diagnosis of CVD who have had all of the following information recorded:
	
	• Tobacco smoking
	• Diabetes
	   – Diabetes status: Type 1 or Type 2 Diabetes or a diagnosis which indicates diabetes but does not specify between Type 1 or Type 2
	   – Diabetes risk: Fasting Glucose Test result, or a screening for glycosylated haemoglobin (HbA1c test result)
	• Systolic blood pressure
	• Total cholesterol and HDL cholesterol levels
	• Age
	• Sex
	
	Operationalisation of tobacco smoking status, cholesterol levels, sex and age
	Where a regular client's tobacco smoking status does not have an assessment date assigned within the Clinical Information System (CIS), tobacco smoking status as recorded in the CIS should be treated as current (i.e. as having been updated within the previous 12 months).
	
	Where a regular client's total cholesterol and HDL cholesterol levels does not have an assessment date assigned within the Clinical Information System (CIS), it should be treated as current (i.e. as having been updated in accordance with RACGP Red Book guidelines).
	
	If the client has an Indigenous Status of 1 (Aboriginal), 2 (Torres Strait Islander) or 3 (both Aboriginal and Torres Strait Islander), clients in the age group 35 and 44 should also be included in this report.

Computation and method of calculation	**Numerator A:** Number of regular clients aged 45 to 74 years, who have had all of the following information recorded: • Tobacco smoking • Diabetes: Type 1 or Type 2 Diabetes, a diagnosis which indicates diabetes but does not specify between Type 1 or Type 2, **OR** a Fasting Glucose Test result, **OR** a screening for glycosylated haemoglobin (HbA1c test result) • Systolic blood pressure • Total cholesterol and HDL cholesterol levels • Age • Sex **Numerator B:** Number of Indigenous regular clients aged 35 to 44 years, who have all the following information recorded: • Tobacco smoking

QIM 08	Proportion of patients with the necessary risk factors assessed to enable CVD assessment
	• Diabetes: Type 1 or Type 2 Diabetes, a diagnosis which indicates diabetes but does not specify between Type 1 **OR** Type 2 or a Fasting Glucose Test result, **OR** a screening for glycosylated haemoglobin (HbA1c test result) • Systolic blood pressure • Total cholesterol and HDL cholesterol levels • Age • Sex **Denominator A:** Total number of regular clients, aged 45 to 74 years. **Denominator B**: Total number of regular indigenous clients, aged 35 to 44 **Computation** (Numerator ÷ Denominator) x 100
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice
Numerator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Sex (Person-sex, code X, METeOR identifier: 635126) Cardiovascular disease recorded indicator (METeOR identifier 465948) **NB: This indicator is used for the purposes of *excluding* patients with a coded diagnosis of CVD** Regular client indicator (METeOR identifier 686291) Tobacco smoking status (METeOR identifier 270311) Diabetes status (Diabetes mellitus status, METeOR identifier 270194) Fasting glucose result measurement indicator HbA1c measurement result recorded indicator (METeOR identifier 441495) Total cholesterol measurement result recorded indicator (METeOR identifier 588774) Systolic blood pressure measurement result recorded indicator (METeOR identifier 588766) HDL cholesterol measurement result recorded indicator (METeOR identifier 594647)
Denominator data elements and source	Age (Person-age, total years, METeOR identifier: 303794) Sex (Person-sex, code X, METeOR identifier: 635126) Cardiovascular disease recorded indicator (METeOR identifier 465948) **NB: This indicator is used for the purposes of *excluding* of patients with a coded diagnosis of CVD** Regular client indicator (METeOR identifier 686291)

Disaggregation data	a) Sex
	   1 – Male
	   2 - Female
	   X – Indeterminate/Intersex/Unspecified

QIM 08	Proportion of patients with the necessary risk factors assessed to enable CVD assessment

	b) Age group
	      45-54 years
	      55-64 years
	      65 years and over
	c) Indigenous Status
	    1. Aboriginal but not Torres Strait Islander Status
	    2. Torres Strait Islander but not Aboriginal
	    3. Both Aboriginal and Torres Strait Islander
	    4. Neither Aboriginal or Torres Strait Islander
	    9. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794,) Sex (Person-sex, code X, METeOR identifier: 635126) Indigenous Status (METeOR identifier: 602543)
Aggregation data	PHN
Aggregation data elements	PHN name
Clinical notes	Exclude clients from the calculation if they refused measurement. Regular clients who have a recorded diagnosis of CVD should be EXCLUDED. Regular clients without known CVD should be EXCLUDED if information is not recorded for ALL risk factors Include Aboriginal and Torres Strait Islanders aged 35-74 years.

QIM 09	Proportion of female patients with an up-to-date cervical screening
Definition	Proportion of female regular clients aged 25 to 74, who have not had a hysterectomy and who have had a cervical screening [human papillomavirus (HPV) test] after 1 December 2017 and within the previous 5 years.
Rationale	Australia has the lowest mortality rate and the second lowest incidence of cervical cancer in the world. The success of the cervical screening program is dependent upon the recruitment of women. Higher participation in cervical screening means that more women with precancerous abnormalities can have these detected and treated, which is necessary for achieving the overall aim of reducing incidence and mortality from cervical cancer.
Computation description	Proportion of female regular clients who are aged 25 to 74, who have not had a hysterectomy and who have had a cervical screening (HPV test) within the previous 5 years. Count is of females, not tests. An HPV test is a test that detects the presence of HPV. Persistent HPV infection can cause abnormal cervical cell changes prior to the development of cervical cancer. Include HPV tests where the sample is either collected by a health practitioner or self-collected. From 1 December 2017 the screening test for cervical cancer changed from the Pap test to a test for human papillomavirus (HPV). The recommended screening age changed from 18–69 to 25–74. The HPV test is offered every 5 years instead of every 2 years as it was with the Pap test (DoH 2017).
Computation and method of calculation	**Numerator**: Number of female regular clients who are aged 25 to 74 years, who have not had a hysterectomy and who have had a cervical screening (HPV test) after 1 December 2017 and within the previous 5 years. **Denominator**: Total number of female regular clients who are aged 25-74 years who have not had a hysterectomy. **Computation**: (Numerator A ÷ Denominator) x 100
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice
Numerator data elements and source	Sex (Person-sex, code X, METeOR identifier: 635126) Age – total years (Person-age, total years, METeOR identifier: 303794) Cervical screening indicator (METeOR identifier 719551) Regular client indicator (METeOR identifier 686291) Hysterectomy indicator (Female – Hysterectomy indicator, METeOR identifier 457775)
Denominator data elements and source	Sex (Person-sex, code X, METeOR identifier: 635126) Age – total years (Person-age, total years, METeOR identifier: 303794) Regular client indicator (METeOR identifier 686291) Hysterectomy indicator (Female – Hysterectomy indicator, METeOR identifier 457775)

QIM 09	Proportion of female patients with an up-to-date cervical screening

Disaggregation data	a) Age group
	    25-34 years
	    35-44 years
	    45-54 years
	    55-64 years
	    65-69 years
	    70-74 ears
	b) Indigenous Status
	    1. Aboriginal but not Torres Strait Islander Status
	    2. Torres Strait Islander but not Aboriginal
	    3. Both Aboriginal and Torres Strait Islander
	    4. Neither Aboriginal or Torres Strait Islander
	    9. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794,) Indigenous Status (METeOR identifier: 602543)
Aggregation data	PHN
Aggregation data elements	PHN name
Clinical notes	Data are reported quarterly for services delivered in the given period [5 years]. Results arising from measurements conducted outside of the service, that are known by the service and included in the patient record, are included in the calculation of this indicator. Include HPV tests conducted from 1 December 2017. Include patients who have had a sub-total hysterectomy HPV tests where the sample is either collected by a health practitioner or self-collected are included. Exclude clients from the calculation if they: • Have had a complete hysterectomy • did not have the test due to documented medical reasons, system reasons (test not available), or patient reasons (e.g. refusal); or • had results from measurements conducted outside of the service which were not available to the service; or • no longer require testing.

QIM 10	Proportion of patients with diabetes with a blood pressure result
Definition	Proportion of regular clients who have diabetes and who have had a blood pressure measurement result recorded at the primary health care service within the previous 6 months.
Rationale	Diabetes was the underlying cause of around 10% of all deaths in Australia in 2016 and recent reports show death rates for people with type 2 diabetes are rising. For people with type 1 or type 2 diabetes, monitoring blood pressure can help assure appropriate medical care to lower the risk of macro vascular (stroke, heart attack and heart failure) and microvascular (kidney disease, eye disease and peripheral neuropathy) complications.
Computation description	Proportion of regular clients who have Type 1 or Type 2 diabetes or a diagnosis which indicates diabetes but does not specify between Type 1 or Type 2 and who have had a blood pressure measurement result recorded at the primary health care service within the previous 6 months. Exclude secondary diabetes, gestational diabetes mellitus (GDM), previous GDM, impaired fasting glucose, impaired glucose tolerance. Results arising from measurements conducted outside of the service, that are known by the service, are included in the calculation of this indicator.
Computation and method of calculation	**Numerator** Number of regular clients who have Type 1 or Type 2 diabetes a diagnosis which indicates diabetes but does not specify between Type 1 or Type 2 and who have had a blood pressure measurement result recorded at the primary health care service within the previous 6 months. **Denominator** Total number of regular clients who have Type 1 or Type 2 diabetes a diagnosis which indicates diabetes but does not specify between Type 1 or Type 2 **Computation** (Numerator ÷ Denominator) x 100
Source Frequency Custodian	**Source** Participating practice clinical information system **Frequency of extraction/collection** Quarterly **Data custodian** Local Data Custodian – Participating general practice
Numerator data elements and source	Diabetes status (Diabetes mellitus status, METeOR identifier 270194) Blood pressure measurement result recorded indicator (METeOR identifier 441407) Regular client indicator (METeOR identifier 686291)
Denominator data elements and source	Diabetes status (Diabetes mellitus status, METeOR identifier 270194) Regular client indicator (METeOR identifier 686291)

Disaggregation data	a) Sex
	   1 – Male
	   2 - Female
	   X – Indeterminate/Intersex/Unspecified
	b) Age group
	      0-4 years
	      5-14 years
	      15-24 years
	      25-34 years
	      35-44 years

QIM 10	Proportion of patients with diabetes with a blood pressure result

	45-54 years
	55-64 years
	65 years and over
	  c) Indigenous Status
	      1. Aboriginal but not Torres Strait Islander Status
	      2. Torres Strait Islander but not Aboriginal
	      3. Both Aboriginal and Torres Strait Islander
	      4. Neither Aboriginal or Torres Strait Islander
	      9. Not Stated

Disaggregation data elements	Age – total years (Person-age, total years, METeOR identifier: 303794,) Sex (Person-sex, code X, METeOR identifier: 635126) Indigenous Status (METeOR identifier: 602543)
Aggregation data	PHN
Aggregation data elements	PHN name
Clinical notes	Results arising from measurements conducted outside of the service, that are known by the service and included in the patient record, are included in the calculation of this indicator. A client is classified as having Type 1 or Type 2 diabetes or a diagnosis which indicates diabetes but does not specify between Type 1 or Type 2 if it is listed as a diagnosis in their patient record. Exclude clients from the calculation if they had: • secondary diabetes, gestational diabetes mellitus (GDM), previous GDM, impaired fasting glucose, impaired glucose tolerance. • results from measurements conducted outside of the service which were not available to the service; <u>and</u> had not visited the service in the previous 6 months. Note that any patients who have had gestational diabetes but **also** have Type 1 or type 2 diabetes will be **included**.