NHS Medway Balanced Scorecard 2009-10

Practice	The Sunlight Centre
Locality	Gillingham and Rainham

The GP Practice Balanced Scorecard allows patients in Medway to see, at a glance, how well individual GP surgeries are providing effective health care services for patients.

General practice services in Medway are generally high quality. However NHS Medway believes that there is always room to improve. NHS Medway is responsible for ensuring that GP practices offer high quality services for all their patients. In order to monitor performance, GP practices are assessed in a number of ways. NHS Medway's vision for primary care is to ensure that general practice in Medway is of the highest quality, accessible, demonstrates good use of resources and offers "value for money". NHS Medway has therefore developed a balanced scorecard to help achieve this vision.

The Department of Health sets standards and targets for all areas of services in general practice and practice performance is compared against specified national targets and benchmarked against other Medway GP Practices. In addition NHS Medway sets local targets to improve services in specific areas, known as 'Vital Signs', to improve the health of specific groups. Where practice performance is identified as requiring further development to achieve national and local targets, NHS Medway will work with those practices to produce a plan for bringing about an improvement in performance to achieve national and local targets.

The balanced scorecard will be published on a regular basis. The data in this scorecard shows practice performance for the period 1st April 2009 - 31st March 2010 unless otherwise stated.

Patient Experience / Access

Results from the national GP Patient Survey 2009/10

	Practice Rating		Comparative Averages - %		Comparison versus all Medway GP Practices		
	%	Banding	All of Medway	Locality			
% of patients who are satisfied with overall care at the practice	74.03	Bronze	86.42	87.99	Lower 25% of Medway Practices	Middle 50% of Medway Practices	Top 25% of Medway Practices
% of patients who would recommend this practice to others	61.95	Bronze	77.44	79.73			
% of patients able to get an appointment with a GP on the same day or within two working days (Monday to Friday)	71.94	Bronze	79.52	81.39			
% of patients able to book a GP appointment two or more days ahead (Monday to Friday)	68.64	Silver	70.85	77.81			
% of patients satisfied with opening hours	75.83	Silver	76.29	79.76			
This practice offers Extended Opening Hours		YES					

Quality & Outcomes Framework

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

Clinical - management of some of the most common long term conditions (eg, Diabetes, Asthma) (697 points)	84.28	Bronze	95.58	94.10	Lower 25% of Medway Practices	Middle 50% of Medway Practices	Top 25% of Medway Practices
Organisational - indicators relating to records and information, patient communications, practice management, education and training, medication/prescription management (167.5 points)	61.99	Bronze	95.96	96.36			
Additional Services - indicators relating to cervical screening, child health surveillance, maternity services and contraceptive services (44 points)	88.00	Bronze	95.29	95.44			
Patient Experience - indicators that relate to length of consultations and the GP Patient Survey (91.5 points, 58.5 of which relate to the national GP Patient Survey)	56.13	Silver	70.80	79.65			
Total QOF Score (maximum 1000 points, as a %)	78.13	Bronze	93.36	93.22			

Screening & Prevention Performance

Note that the percentage achievement shown below is for those patients who received the service. Additional patients may have been invited for the service, but declined to receive it. In this section, achievement is measured against the national target (Gold for achieving national and above).

Cervical Screening Programme % of eligible females who had a smear	75.94	Silver	81.05	82.41	<75%	75-79%	80%
Childhood Immunisation at 12 months % of children who had the recommended 5 in 1 injection	89.40	Silver	96.53	95.73	<85%	85-94%	95%
Pre-school Booster - Childhood Immunisation at 60 months % of children who had the recommended 3 in 1 injection	93.80	Silver	93.48	94.88	<85%	85-94%	95%
Influenza immunisations for over 65s % of patients over 65 who had a 'flu injection	72.60	Silver	72.02	74.38	<65%	65-74%	75%

Effective Use of Information Technology (Computers)

These indicators relate to the use of practice IT systems, (computers) and associated processes, to assure the quality, accuracy, confidentiality and security of electronic data.

The practice has achieved the required standards to assure the quality and accuracy of computer records of patients (voluntary)	NO
The practice has achieved the required standards to assure the confidentiality and security of all data held on computer (mandatory)	YES