

To all Practice Partners and Practice Managers

Yorkshire and Humber Regional Local Office NHS England Unit 3 Alpha Court Monks Cross York YO32 9WN

12 March 2017

Dear Colleagues

QRISK2 review process update

Enhanced Service in recognition of work caused by QRISK2 mapping error

On Thursday 9 June 2016, GP practices with patients potentially affected by historic code mapping errors in the integrated QRISK2 calculator on SystmOne were provided with lists of these patients and clinical recommendations for identifying patients for call/recall and support reviews.¹

On Thursday 9 June 2016, TPP resolved the code mapping errors and the SystmOne QRISK2 tool can now be relied upon to inform discussion with patients. It is important that patients that were given an inaccurate QRISK2 score have their management plan updated.

Following the communication in June 2016, a further small cohort of patients have been identified as having received a QRISK2 score in a non-GP setting. It is possible your practice will receive a separate communication from NHS Digital about any of the affected patients that may be registered with your practice.

For the majority of patients, a review will not require an additional face-to-face consultation, however we recognise that there is a workload implication for ensuring affected patients are reviewed as appropriate. In light of this, TPP has agreed to make a contribution towards GP practice costs in recognition of any additional work this has caused.

To make payment, NHS England is introducing a new Enhanced Service (ES) to allow you to submit a manual financial claim through CQRS. The full details of the Enhanced Service are available at the end of this letter, and in summary, the key requirements are:

 $^{^{1}\} https://www.tpp-uk.com/wp-content/uploads/2016/06/NHS-England-Clinical-Guidance-QRISK2-Incident.pdf$

- Practices will need to sign up to accept it.
- The ES is available to all practices with patients affected by the QRISK2 code mapping error. Claims need to be made by 31 May 2016 and payments will be made by Monday 31 July 2017. All claims are on the basis that the follow up work set out in the Enhanced Service is carried out by 31 September 2017.
- Practices can claim £6.50 for every patient reviewed from the list of affected patients (the denominator).
- For practices using SystmOne, the denominator is the list of patients identified in the SystmOne report. These lists remain available within SystmOne (since June 2016). Guidance is available on how to identify patients within SystmOne.²
- For non-SystmOne practices, the denominator is the list of patients sent to practices by HSCIC (now NHS Digital) on 16 June 2016 and 29 June 2016. This will include any additional patients identified and sent to practices as part of the second wave of contact tracing. Practices involved will be able to obtain a copy of their patient list by using NHS Digital portal https://grisk.nhs.uk
- The form the assessment takes is for clinical discretion. The practice can claim £6.50 on confirmation that an appropriate assessment has been completed. On average, a practice using SystmOne will have up to 100 affected patients to review and can therefore, on average, expect to claim up to £650.
- The ES reporting will require confirmation by practices that they have taken appropriate clinical action. The ES will not require reporting on any further investigation and / or treatment of patients whose QRISK2 score has significantly changed as this will be funded as a core primary care service.
- CQRS will calculate achievement. Practices and local commissioners will validate and approve in the usual way and payment will then be processed.

By submitting a claim, a practice will be making a declaration that its patients have been directly affected by the QRISK2 incident and the practice has taken the necessary action to resolve it. The information requested will be the minimum necessary to help administer the payment system.

We hope that this scheme will help to go some way in recognising the impact this incident has had on practices; and facilitate the successful completion of patient reviews.

Best wishes,

Dr David Geddes Head of Primary care Commissioning

 $^{^2\} https://www.tpp-uk.com/wp-content/uploads/2016/06/TPP-user-guide-for-identifying-patients.pdf$

