

# Quality Plan 2023-2024: Numerator and denominator information

# **Immunisation**

# Goal 2

**Numerator** = count of enrolled children who are Māori, Pacific peoples or other ethnicity living in quintile 5 areas who turned eight months during the reporting period who had received their final dose (fully immunised) vaccination on or before their eight-month milestone age.

**Denominator** = count of enrolled children who are Māori, Pacific peoples or other ethnicity living in quintile 5 areas who turned eight months within the reporting period.

#### Goal 3

**Numerator** = count of enrolled children who turned eight months during the reporting period, who had received their final dose (fully immunised) vaccination on or before their eight-month milestone age.

**Denominator** = count of enrolled children who turned eight months within the reporting period.

# Smoking brief advice

#### Goal 4

**Numerator =** count of enrolled patients at the start of the period who are Maori, Pacific peoples, or other ethnicity living in quintile 5 areas, aged 15-74 years (inclusive) at the end of the reporting period, who have been a coded smoker within the last 15 months, and have been offered help to quit smoking in the past 15months. The 15 month look back is counted from the end of the reporting quarter.

**Denominator** = count of enrolled patients at the start of the reporting period who are Maori, Pacific peoples, or other ethnicity living in quintile 5 areas, aged 15-74 years (inclusive) at the end of the reporting period and who have been a coded smoker within the last 15 months counting back from the end of the reporting quarter.

**Note:** This, therefore, includes patients who were already coded as a smoker 15 months back from the end of the reporting quarter, plus patients who have been newly coded as a smoker during the 15 months counting back from the end of the reporting quarter.

**Current smoker =** @ZPSA.10, 1372, 1372, 1373, 1374, 1375, 1376, 137G, 137H, 137J, 137M, 137P, 137Q, 137R, E251.

#### Goal 5

**Numerator** = count of enrolled patients at the start of the reporting period who have been a coded as a smoker within the last 15 months, who will be aged 15-74 years (inclusive) at the end of the reporting period, and have been offered help to quit smoking in the past 15 months. The 15 month look-back is counted from the end of the reporting quarter.

**Denominator** = count of enrolled patients at the start of the reporting period who have been a coded smoker within the last 15 months (counting back from the end of the reporting quarter), who will be aged 15-74 years (inclusive) at the end of the reporting period.

**Note:** This, therefore, includes patients who were already coded as a smoker 15 months back from the end of the reporting quarter, plus patients who have been newly coded as a smoker during the 15 months counting back from the end of the reporting quarter.



# Cervical screening

#### Goal 6

**Numerator** = count of enrolled women at the start of the reporting period who are Māori, Pacific peoples, or other ethnicity living in quintile 5 areas, will be aged ≥25 and <70 at the end of the reporting period, have had a cervical smear in the last three years (where date of screening occurred in the three years prior to the end of the reporting period), with a valid screening outcome indicator.

**Denominator** = count of enrolled women at the start of the reporting period who are Māori, Pacific peoples, or other ethnicity, living in quintile 5 areas, will be aged ≥25 and <70 at the end of the reporting period, minus those that do not require a cervical smear.

**Not required** = count of enrolled women at the start of the reporting period who are Māori, Pacific peoples, or other ethnicity, living in quintile 5 areas, will be aged ≥25 and <70 at the end of the reporting period, have never been sexually active or who have been coded as clinically not required to have a cervical smear, or those who do not need a cervical smear because they have had a total hysterectomy (no cervix).

#### Goal 7

**Numerator** = count of enrolled women at the start of the reporting period who will be aged ≥25 and <70 at the end of the reporting period, have had a cervical smear in the last three years (where date of screening occurred in the three years prior to the end of the reporting period), with a valid screening outcome indicator.

**Denominator** = count of enrolled women at the start of the reporting period who will be aged ≥25 and <70 at the end of the reporting period, minus those that do not require a cervical smear.

**Not required =** count of enrolled women at the start of the reporting period who will be aged ≥25 and <70 at the end of the reporting that have never been sexually active, or who have been coded as clinically not required to have a cervical smear, or those who do not need a cervical smear because they have had a total hysterectomy (no cervix).

# **CVRA**

#### Goal 8

**Numerator** = count of people within the eligible population (2003 guidelines) who are high needs and are enrolled that have had a CVRA within the last 5 years as at the end of the reporting period.

**Denominator** = count of people who are high needs and who are eligible for a CVRA (2003 guidelines) and enrolled as at the end of the reporting quarter

**High needs** = Maori and Pacific Island or quintile 5

**CVRAs** = Māori, Pacific or Indian for CVRAs = 21 (Māori), 30 (Pacific Island – not further defined), 31 Samoan, 32 (Māori – Cook Island), 33 (Tongan), 34 (Niuean), 35 (Tokelaun), 36 (Fijian), 37 (Pacific Island – other), 43 (Indian subcontinent).

#### Goal 9

**Numerator** = count of people within the eligible population (2003 guidelines) who are enrolled that have had a CVRA within the last 5 years as at the end of the reporting period.

**Denominator** = count of people who are eligible for a CVRA (2003 guidelines) and enrolled as at the end of the reporting quarter

# CVRA eligible =

If patient is male or any other gender except female and:

• patient is either Māori/Pacific Islander or Indian



• age is >= 35 years and < 75 years.

#### OR

- patient is not Māori/Pacific Islander or Indian
- age is >= 45 years and < 75 years.

#### If patient is female and:

- patient is either Māori/Pacific Islander or Indian
- age is >= 45 years and < 75 years.</li>

### OR

- patient is not Māori/Pacific Islander or Indian
- age is > = 55 years and < 75 years.

# Diabetic annual review

#### Goal 10

**Numerator** = count of patients coded as diabetic (type 1 or 2) aged 15 years and over enrolled at the start of the reporting period who have had the minimum set of data (associated with diabetes annual management review) within the previous twelve months (at the end of the quarter).

**Denominator** = count of patients coded as diabetic (type 1 or 2) aged 15 years and over and enrolled at the start of the reporting period.

#### Goal 11

**Numerator** = count of patients who are Māori, Pacific peoples or other ethnicity living in quintile 5 areas, coded as diabetic (type 1 or 2) aged 15 years and over enrolled at the start of the reporting period who have had the minimum set of data (associated with diabetes annual management review) within the previous twelve months (at the end of the quarter).

**Denominator** = count of patients who are Māori, Pacific peoples or other ethnicity living in quintile 5 areas, coded as diabetic (type 1 or 2) aged 15 years and over and enrolled at the start of the reporting period.

## HbA1c

#### Goal 12

**Numerator =** count of enrolled patients at the start of the reporting period who are Māori, Pacific peoples, or other ethnicity living in quintile 5 areas, coded as diabetic (type 1 or type 2), aged 15 years and over and whose most recent HbA1c is  $\leq$  64mmol/mol submitted in the past 12 months as at the end of the reporting period.

**Denominator** = count of enrolled patients at the start of the reporting period who are Māori, Pacific peoples, or other ethnicity living in quintile 5 areas, coded as diabetic (type 1 or type 2), and who will be aged 15 15 years and over at the end of the reporting period.

#### Goal 13

**Numerator** = count of enrolled patients at the start of the reporting period, coded as diabetic (type 1 or type 2), who will be aged 15 years and over at the end of the reporting period. Their most recent HbA1c is  $\leq$  64mmol/mol, submitted in the past 12 months, as at the end of the reporting period.

**Denominator** = count of enrolled patients at the start of the reporting period, coded as diabetic (type 1 or type 2), and who will be 15 years and over at the end of the reporting period.