



How to ensure you are achieving the AUA DES

If you did not achieve the AUA targets for the September extraction you may wish to go through the list below to check why and, where possible, correct any errors identified. If you did achieve, hopefully this will help to monitor your data.

AUA Check list for the 1st April 2015 – 30 September Extraction

The Rules are looking back **twelve months from the reporting period:**

The reporting period for the extraction for Component Two is **01/10/2014 - 30/09/2015**

The reporting period for the extraction for Component Three is **01/10/2015 - 31/03/2016**

The list sizes used for the calculation of 2% of the practice population 18 years and over are:

Component Two - 1st April 2015

Component Three - 1st October 2015

Register:

The register is calculated against your practice list size aged 18 years and over.

If you did not achieve the 2% for the September 30th extraction, you will need to increase your register size for the second extraction on the 31st March 2016. The requirement is an average of **2% across the year**. Please see the scenario below:

The register has to be an average of 2% across the year				
Patients aged 18 and over	10120			
	At risk Register		At risk Register	
Sep-15	182	1.80%	182	1.80%
Mar-16	202	2.00%	223	2.20%
Average		1.90%		2.00%

As you can see in the example above, to achieve an average of 2% you would need to increase your register by 21 patients

You do have the ability to add patients who were on the register and have died during 2015/16, this may help to increase your register above the 2%. You would be required to add the patient number manually on CQRS.

Allocated a named GP

Allocated Named GP is a **new code** for this year and should have been entered into your **total population** between **01/04/2015 and 30/06/2015**. Although this is a contractual requirement, it also is included in the payment validation for the AUA DES.

	Version 2 (EMIS, Vision and Microtest)	CTV3 (SystemOne)
Patient allocated named accountable general practitioner	9NN60	XacWQ

Admissions Avoidance Register Read Code

All patients will require the following Read code to be entered onto their records to appear on the AUA register. This Read code should only be entered **once** unless the patient had previously been coded as 'admissions avoidance care ended'. If for the duration of the patient being included on the register the Read code below is entered again, this will supersede all the work you have completed and the system will expect you to start the process again.

	Version 2 (EMIS, Vision and Microtest)	CTV3 (SystemOne)
Admissions Avoidance Care Started	8CV4.	XaYD1

Within 21 days of entering the register

Part of the DES is that all patients are either written to or verbally informed of their allocated GP and the following Read code is entered on to the patient's record within **21 days** of entering the AUA register. **(This may be a duplicate entry for patients aged 75 and over but to ensure you fulfil the requirements you will be required to re-enter as per the DES requirements.)**

	Version 2 (EMIS, Vision and Microtest)	CTV3 (SystemOne)
Informing patient of accountable general practitioner	67DJ.	Xab9D

Within one month of the latest 'admission avoidance started' code

All patients should have agreed a care plan or declined a care plan* and one of the following Read code should be entered into the patient's clinical record within one month from entering the register.

This code must be entered at the **same time** or within **one month** after the **latest** "admission avoidance started" Read code.

	Version 2 (EMIS, Vision and Microtest)	CTV3 (SystemOne)
Admissions Avoidance Care plan agreed	8CSB.	XabFm
Admissions Avoidance Care plan declined	8IAe1	XabFn

* Care plan declined should only be used for patients who wish to remain on the register and have agreed to all other criteria within the DES even though they do not wish to have a care plan

Within twelve months of the reporting period

All patients should have received a review or declined a review of their care plan if they were **on the register during 2014/15** and should have one of the following Read codes entered into their clinical records:

	Version 2 (EMIS, Vision and Microtest)	CTV3 (SystemOne)
Review of admissions avoidance care plan	8CMG3	XabFo
Review of admissions avoidance care plan declined	8IAe3	XacWP

For all patients who declined a care plan before 1st October 2014:

This cohort of patients would require a review of their decision and the decline code re-entered before the 30th September 2015 or you would need to start the process again if they agree to a care plan being implemented.

All patients who have been added to the register for 2015/16 require the 'Care plan agreed' or 'Care plan declined' recorded in their clinical records

For patients who it is no longer considered appropriate to belong on the register, you will be required to enter the following Read code. Please remember you will need to identify another patient if by removing a patient you are not maintaining 2% of patients aged 18 and over on the register.

	Version 2 (EMIS, Vision and Microtest)	CTV3 (SystemOne)
Admissions avoidance care ended	8CT2.	XaYD2

Due to the way the Business Rules have been written I would recommend any patients added to the register either during the month of September 2015 and during the month of March 2016, you complete the process all on the same day:

Admissions avoidance started

Admissions avoidance care plan agreed/declined

Informed of the accountable GP

(The 'allocated of an accountable GP' will already have been entered during April-June 2015)

You will need to correct any Read code errors identified from the September extraction now to ensure the same errors are not picked up on the 31st March extraction.

I would recommend you locate the searches used by the system suppliers and use them to monitor your achievement if possible.

Jill Warn, Audit and IT Lead 11/12/2015