

### SCT AAA CQUIN 16/17

Indicator number	
Indicator name	Increasing uptake in the Abdominal Aortic Aneurysm screening programme
Indicator weighting (% of CQUIN scheme available)	2.5%
Description of indicator	<p>This CQUIN has two components:</p> <ol style="list-style-type: none"> <li>1. To implement action plan as agreed as a result of previous CQUIN and Health Equity Audit</li> <li>2. To work with GPs and/or CCGs to introduce and evaluate “practitioner-endorsed reminder letters” or for those not responding to either initial or initial and standard programme second invitations. Progress and evaluation will be reported to the Programme Board.</li> </ol>
Numerator	<p>Item 1: Action Plan to be agreed in Q1, and at least 3 specific measures to be agreed, with SMART objectives, to be delivered by 31/3/17</p> <p>Item 2 i) numerator – number of such letters sent</p> <p style="padding-left: 40px;">ii) internal evaluation demonstrating impact of change by 31/3/2017</p> <p>NB These will also need progress reports and evaluation to be reported to the Programme Board. Evaluation must be presented no later than end March 2017. Ideally, evaluation should be much earlier to inform 2017/18 commissioning (NB if Programme Board dates conflict with this requirement, the final report must be sent to the relevant Screening and Immunisation lead by this date)</p>
Denominator	Item 2: Denominator – number of patients not responding to either initial or initial and standard programme second invitations (to be agreed which)
Rationale for inclusion	To improve uptake of screening, and to focus on improving access for hard to reach groups

Data source	Providers
Frequency of data collection	Quarterly
Organisation responsible for data collection	Provider
Frequency of reporting to commissioner	Quarterly
Baseline period/date	2015/16
Baseline value	N/A
Final indicator period/date (on which payment is based)	April 2016- March 2017
Final indicator value (payment threshold)	Total 2.5% (1.25% for item 1, 1.25% for item 2) CQUIN will be paid monthly, with reconciliation as appropriate at the end of the year.
Final indicator reporting date	31/3/17
Are there rules for any agreed in-year milestones that result in payment?	As below
Are there any rules for partial achievement of the indicator at the final indicator period/date?	As below

## Milestones

### Item 1

Date/period milestone relates to	Rules for achievement of milestones (including evidence to be supplied to commissioner)	Date milestone to be reported	Milestone weighting (% of CQUIN scheme available)
Quarter 1	Action Plan with at least 3 SMART objectives to be delivered by 31/3/17	31/6/16	10%
Quarter 2	Progress report showing actions to achieve delivery	30/9/16	10%
Quarter 3	Progress report showing actions to achieve delivery	31/12/16	10%
Quarter 4	Progress report showing achievement of objectives	31/3/17	70%

**Item 2**

Date/period milestone relates to	Rules for achievement of milestones (including evidence to be supplied to commissioner)	Date milestone to be reported	Milestone weighting (% of CQUIN scheme available)
Quarter 1 and 2	Progress report showing <b>35%</b> of patients not responding to either initial or initial and standard programme invitations (to be agreed which) are send a practitioner-endorsed reminder letter	30/9/16 or closest Programme Board	50%
Quarter 3	Progress report showing <b>50%</b> of patients not responding to either initial or initial and standard programme invitations (to be agreed which) are send a practitioner-endorsed reminder letter	31/12/16 or closest Programme Board	25%
Quarter 4	Progress report and final evaluation showing <b>75%</b> of patients not responding to either initial or initial and standard programme invitations (to be agreed which) are send a practitioner-endorsed reminder letter	31/3/17 or closest Programme Board	25%

**Rules for partial achievement at final indicator period/date**

Final indicator value for the partial achievement threshold	% of CQUIN scheme available for meeting final indicator value