

Unplanned Admissions - Personalised Care Plan Manager Reports

Vision+ contains a comprehensive suite of reports that assist in monitoring your quarterly reporting for Unplanned Admissions (DES) payments for England. Additional reports are available to aid overseeing and managing your patients on the Personalised Care Plan Register.

Key Dates

The payment for the Unplanned Admissions DES for England 2014/15 is made in five components. In order to meet each component you must monitor your data using the Unplanned Admissions Reports. Below is a summary of the components and payment dates:

Components

- **Component One** An upfront 'establishment' payment of 45%, which includes practice availability personalised care plans and patient care reviews for a minimum of 2% of your adult population (patients aged 18 and over).
- Component Two Quarter 2 Register payment of 20% for maintaining the register of 2% for quarter 2 (for example, 1 July 2022 to 30 September 2022), as well as identifying the named accountable GP and care co-ordinator (where applicable) and informing patients. Achievement will depend on you having a minimum of 1.8% of patients on the register on 30 September 2014 as a proportion of the list size taken on 1 July 2022.
- **Component Three** Quarter 3 Register payment of 10% for maintaining the register at a minimum of 2% for quarter 3 (for example, 1 October 2022 to 31 December 2022), as well as identifying the named accountable GP and care co-ordinator (where applicable) and informing patients. Achievement will depend on you having a minimum of 1.8% of patients on the register on 31 December 2022 as a proportion of the list size taken on 1 October 2022.
- **Component Four** Quarter 4 Register payment of 10% for maintaining the register at a minimum of 2% for quarter 4 (for example, 1 January 2023 to 31 March 2023), as well as identifying the named accountable GP and care co-ordinator (where applicable) and informing patients. Achievement will depend on you having a minimum of 1.8% of patients on the register on 31 March 2023 as a proportion of the list size taken on 1 January 2023.





• **Component Five** - An End-of-Year payment of 15% for reviewing and improving the hospital discharge process and undertaking regular internal practice reviews of all unplanned admissions and readmissions for vulnerable patients.

Note - When available, GPES extractions are used to support the achievement of the Unplanned Enhanced Service, covering both payment and management information requirements. In the meantime, you must manually submit data to support claims for achievement reporting and associated payment claims.

Payment Dates

Payment is based on a maximum of $\pounds 2.87$ per registered patient, with the payment based on achievement of each quarter's requirements:

Payment	Percentage of total funding	Per registered patient (total £2.87)	Payable (no later than)
Component 1	45%	£1.29	31-Jul-14
Component 2	20%	£0.57	30-Nov-14
Component 3	10%	£0.29	28-Feb-15
Component 4	10%	£0.29	31-May-15
Component 5	15%	£0.43	31-May-15

How to Run the Unplanned Admission Reports

There are two sets of Outcomes Manager Unplanned Admission Reports:

- Admission Risk Stratification and Register Report see Admission Risk Stratification and Register Manager Report on page 3.
- Personalised Care Plan Manager Report see Personalised Care Plan Manager Reports on page 6.



Admission Risk Stratification and Register Manager Report

The Admissions Risk Stratification and Register Manager Report has two purposes. It is where you can apply the QAdmission tool to your over 18 target population, it also provides a comprehensive list of reports which help identify:

- Patients eligible for the Unplanned Admissions Register,
- Patients with a high probability of being admitted in the next year,
- Patients whom you are awaiting a response to the offer of Personal Care Plan,
- Patients whose risk is more than three months since last recorded.

The clinical terms used to identify the patients who have attended A&E in the last year are:

- 8HCZ.Refer to hospital casualty NOS
- 9N19.Seen in hospital casualty
- 8HJJ.Self ref to accident emergency
- 9b8D.Accident & emergency
- 9Nr..Inapp use of A and E service
- 8HE8.Discharged from A & E
- 8HEA.Discharged from AAU
- 8H2..Emergency hospital admission%

Running the Admission Risk Stratification and Register Manager Report

- 1. Log into Vision 3.
- 2. From the Windows Notification Area, right click Vision+ and select Practice Reports:





3. Select **Practice Lists**:



4. Select the Enhanced Services and select Admissions Risk Stratification and Register Manager:

Practice Lists		
All Practice Lists	Enhanced Services	
Enhanced Services	Run Date 09/08/2023 •	
SIGN	Search for practice lists $ ho imes$	
	Admissions Risk Stratification and Register Manager Annual Reviews for Pre-Diabetes (ACE Excellence)	
0ther	Care Processes for Diabetes (ACE Excellence) COPD (ACE Excellence) End of Life Care - Current Patients (ACE Excellence)	
		-



5. A message displays stating 'Do you want to run this practice list now, or schedule it to run in the next 24 hours?':



Select from:

• **Run now** - To run the report. The report screen displays a progress bar.

Training Tip - To run a report for call and recall invite purposes you must select **Run now**.

• **Schedule** - To schedule the report. The **Schedule** screen displays, enter a start time within the next 24 hours to run the report:

Ō	х
	0
Please enter a start time: 09:12 🛟	
OK Cance	

Training Tip - This must be set using the 24 hour clock, for example, for 4pm use 16:00.

You can now continue working as usual and the report runs as per your schedule. Once a report is complete it displays in the **Practice Reports** - **Last Run** screen.

- **Cancel** To exit the confirmation screen.
- 6. The report shows the admission risk stratification results. It displays a number of cohort lines, including all permanent and applied patients over 18 and those over 18 not on the Personal Care Plan Register:

8	Admissions Risk Stratification and Register Manager - Report Date 19 Jul 2023 😨 🗵 🗕 🗖 🗙
File Home Appearance	
Print Preview Patient List	Category Analysis
Patient Name	👻 DOB 🔗 Sex 🤗 NHS Number 🔗 Telephone No 🤗 Mobile No 🔗 Email
Category : Admissions Risk Stratification	and Register Manager
	Register and no QAdmissions score : (COUNT=17)
	Register; QAdmissions Score > 3 Months Ago : (COUNT=392)
 Not on UA Register: Probability of Ad 	mission (QAdmission Score) in Next Year: 0-4% : (COUNT=290)
 Not on UA Register: Probability of Ad 	mission (QAdmission Score) in Next Year: 5-9% : (COUNT=65)
 Not on UA Register: Probability of Ad 	mission (QAdmission Score) in Next Year: 10-14% : (COUNT=20)
Not on UA Register: Probability of Ac	dmission (QAdmission Score) in Next Year: 15-19% : (COUNT=8)
	Imission (QAdmission Score) in Next Year: 20-29% : (COUNT=8)
■ Not on UA Register: Probability of Ad	Imission (QAdmission Score) in Next Year: 30-39% : (COUNT=1)
 GP02: On UA Register: Probability of 	Admission (QAdmission Score) in Next Year: 40-49% : (COUNT=1)
	sions in Last Year + Moderate Number of Risk Factors for Admission : (COUNT=1)
Age 80-89 + No A+E/Hospital Admiss	sions in Last Year + Lower Number of Risk Factors for Admission : (COUNT=1)
	sions in Last Year + Lower Number of Risk Factors for Admission : (COUNT=2)
	ons in Last Year + Lower Number of Risk Factors for Admission : (COUNT=13)
Category : Admissions Risk Stratification	and Register Manager - Practice monitoring



Note - The report also groups patients by age and risk of admission, offering additional stratification, should you wish to use them.

7. To view patient names double click on the cohort line or select Expand
 If you select a patient you can use the toolbar at the top of the screen to:



- Print Preview, Print, CSV File Print or Export the patient list.
- Open Patient Takes you directly into this patient's Consultation Manager screen.
- Codeset Allows you to add a Clinical term to the patient record.
- **Show Template** Launches the Personalised Care Plan Manager Register Template.
- Show Indicators Brings up the patient's Alert Indicator pop-up window without having to open **Consultation Manager**.
- Indicator Logic Allows you to see why the patient is on the cohort list.

Personalised Care Plan Manager Reports

The Personalised Care Plan Manager Reports are designed to help monitor patients on the at risk register and audit your achievement. They include:

- Number of patients on the Care Plan Register
- Patients with a Care Plan Review recorded
- Practice list size per quarter
- Quarterly achievement figures
- Patients who do not have a named GP
- Patients who do not have a review
- Discharge review information

Note - The reporting tool cannot currently show the 2% figure for each quarter so you must calculate the percentage manually. For example, register count (divided by) Q2 reporting on practice list 1st July 2014 (18 and over) = nn%.



To run the Personalised Care Plan Manager Report

- 1. Log into Vision 3.
- 2. From the Windows Notification Area, right click Vision+ and select Practice Reports:
 - Image: Symbol Constraints
 Practice Reports

 Image: Symbol Constraints
 Template Designer

 Image: Symbol Constraints
 Download Web Files

 Image: Symbol Constraints
 Pathway Developer

 Image: Symbol Constraints
 Sent SMS Messages

 Image: Symbol Constraints
 Pseudonymised Patient

 Image: Symbol Constraints
 Settings
- 3. Select Practice Lists:





4. Select the Enhanced Services and select Personalised Care Plan Manager:

Practice Lists		
All Practice Lists	Enhanced Services	
Enhanced Services	Run Date 09/08/2023 -	
SIGN	Search for practice lists $ ho \times$	
	IAPT Referral for Patients with Mental Illness (ACE Excellence) Integrated Community Support - Mental Health (ACE Foundation)	•
0ther	Personalised Care Plan Manager Prevention - Avoiding Alcohol-Related Admissions (ACE Foundation) Prevention - COPD Post-Discharge Reviews (ACE Foundation)	
	Prevention - Prescription for Exercise (ACE Foundation)	•

5. A message displays stating 'Do you want to run this practice list now, or schedule it to run in the next 24 hours?':

Confirm	x
?	Do you want to run this practice list now for the report date 20/10/2022, or schedule it to run in the next 24 hours?

Select from:

• **Run now** - To run the report. The report screen displays a progress bar.

Training Tip - To run a report for call and recall invite purposes you must select **Run now**.



• **Schedule** - To schedule the report. The **Schedule** screen displays, enter a start time within the next 24 hours to run the report:

Ğ ×
0
Please enter a start time: 09:12 🛟
OK Cancel

Training Tip - This must be set using the 24 hour clock, for example, for 4pm use 16:00.

You can now continue working as usual and the report runs as per your schedule. Once a report is complete it displays in the **Practice Reports** - **Last Run** screen.

- **Cancel** To exit the confirmation screen.
- 6. A suite of reports display:



To view patient names double click on the cohort line or select **Expand**Image: Select Sel

Training Tip - Use the toolbar at the top of the screen to Print, Export or work with the patient list. If you use the Export facility you can further analyse the data in Excel, for example report on named GP. For more information on working with patients lists, see <u>Working with Data within the Patient Target Lists</u> in the **Vision+ Help Centre**.