Focus on Quality and Outcomes Framework Management and Analysis System (QMAS)

(October 2004, Revised February 2007)

This guidance note has been produced by the General Practitioners Committee to help GPs and Local Medical Committees understand QMAS and its position in relation to the Quality and Outcomes Framework (QOF).

QMAS

QMAS (Quality and Outcomes Framework Management and Analysis System) is software that has been developed for the new GMS contract so that practices can assess their achievement under the new contract and contribute to the calculation of national disease prevalence. QMAS provides a link to the Exeter payment system in England to enable quality payments to be made.

A version of QMAS has been implemented in Scotland. In Northern Ireland the Payments Calculation and Analysis System (PCAS) is used. In Wales, MSDs Contract Manager is used. Payments are made through the respective systems the Practitioners Services Division in Scotland and MSDi software in Wales.

How does it work?

QMAS consists of several components delivered by NHS Connecting for Health.

The 'practice end system' has been provided by GP clinical system suppliers. Practice end systems have been accredited by the National Programme for IT (NPfIT) following a thorough testing process against a database of 25,000 fictitious patients to gain GMS certification. If the answers produced were not accurate and reliable, the system was not accredited.

The central system, delivered by BT, collects the clinical and non-clinical achievement data, calculates the points/pounds and prevalence and displays the results.

How will my data be uploaded onto QMAS?

QMAS runs automatically for the Quality and Outcomes Framework **clinical indicators** and a subset of the organisational and additional services indicators. Quality and Outcomes Framework clinical point scores will be extracted automatically. When first run, retrospective reports for each month of the current QOF year, will be extracted and sent to the central QMAS system. This will establish the practice's QMAS "track record" for the current QOF financial year. Thereafter, a monthly report is sent automatically to QMAS. Practices can access QMAS and run reports to assess their performance whenever they wish. PCOs will see a monthly report, but not any ad hoc reports run by the practice.

Data relating to most of the **organisational indicators** cannot be automatically extracted (Go to note 1). All practices will need to enter organisation data manually using QMAS web-forms by visiting the QMAS website (nww.qmas.nhs.uk). This, for security reasons, is only accessible via nhs net, not via the world wide web.

Prevalence

QMAS will calculate practice achievement. However, what you are paid will depend on others. This is because of **prevalence**, which was factored into the new contract to allow quality rewards to reflect the differing workloads required to achieve quality points. For example a practice based at a university is likely to have few patients with coronary heart disease. It would therefore be much easier for them to achieve maximum quality points in

this domain compared to a practice with a large number of pensioners. A prevalence adjustment factor is therefore applied to ensure a more equitable distribution of rewards between practices. Prevalence will be calculated each month, but the prevalence upon which achievement payments will be based is that calculated on data up to and including 14th February each year.

Prevalence estimations can alter the calculations which are dependent on data received from other practices, not just your own.

Your results will also alter as your data expires. For example, BP 4 measures the percentage of patients with hypertension in whom there is a record of the blood pressure in the past 9 months. Whilst you may have a 100% achievement in this indicator in one month, this will change over the year as the 9 months limit expires for individual patients.

Final reports
QMAS will generate the final report, which will determine your quality payment. In order to do this prevalence factors have to be set for that payment year. NHS Employers and the GPC have agreed that the prevalence factors that exist on the 14th February will be used as the prevalence factors in calculating each year's payments. This is known as National Prevalence Day, 14th February.

The calculation of the prevalence factors that applied on the 14th February will not take place until the end of the financial year. The data is collected for automated practices in mid March allowing practices to bring all data up to date. Manual practices have six weeks to contribute their prevalence data to the national calculations.   National achievement day (2nd April) is the day when the achievement payments for the year are calculated. On National achievement day QMAS will "look back" to all the data supplied to it and calculate the prevalence that existed on the 14th February. Achievements will then be adjusted and payments calculated. The final prevalence-adjusted figures will therefore not be available until 2nd April.

What data will leave my practice?
No patient identifiable data will leave practices via QMAS. Only numbers (numerators and denominators, registers of patients by clinical domain and exception counts for each indicator) will be submitted to QMAS.

Non-computerised practices and manual practices
Non-computerised and manual (Go to note 2) practices will need to contact their PCO which will enter data on their behalf and supply the various reports and outputs to the practice.

Scotland
In Scotland QMAS can be accessed at the following website.
http://www.qmasweb.scot.nhs.uk/

Scotland also has a QMAS Users Group which is a useful resource for LMCs and GPs.
http://www.paymodernisation.scot.nhs.uk/gms/quality/qmas/usergroup/index.htm

Wales
Practices in Wales will use MSD's Contract Manager instead of QMAS to allow practices to assess their performance and calculate prevalence. This can be accessed via the link below: http://www.msdinformatics.com/MSD%20Informatics%20web/cm.html

In Wales QOF Practice Population Day is 14 February and QOF Data Prevalence Day is 14 March.

LMCs: Suggested action

- Encourage practices to log on and use QMAS

- Find out the contact details of the PCT QMAS User Administrator(s), who practices can refer to for advice

- Refer practices to their GP clinical system suppliers if they have questions regarding accuracy of data

- If practices have other Quality and Outcomes Framework software that is giving conflicting results they should discuss this with their software supplier. This may well be due either to coding errors or to different types of reports being run.

- Encourage practices to use the Primary Care Contracting website to see the latest Datasets and Business Rules that will be picked up by QMAS. http://www.primarycarecontracting.nhs.uk/145.php

Enquiries and Information

- Further information on prevalence is available in Focus on QOF Payments, Appendix 2, Adjusted Practice Disease Factor.

- Further information about QMAS in England is available on the NHS Connecting for Health website: http://www.connectingforhealth.nhs.uk/delivery/programmes/qmas

- The QMAS training website is available at www.qmastraining.nhs.uk

- The rules, logical queries and algorithms that QMAS uses to work out which data qualifies for Quality and Outcome points can be downloaded and accessed at: http://www.primarycarecontracting.nhs.uk/145.php

(1) Except for the organisational indicators relating to blood pressure, smoking and cervical screening and notes summarisation indicators. (In Scotland notes summarisation will be managed differently due to Scottish specific IT issues).

(2) Manual practices are defined as those practices without a GMS certified GP clinical system or NHSnet connection.