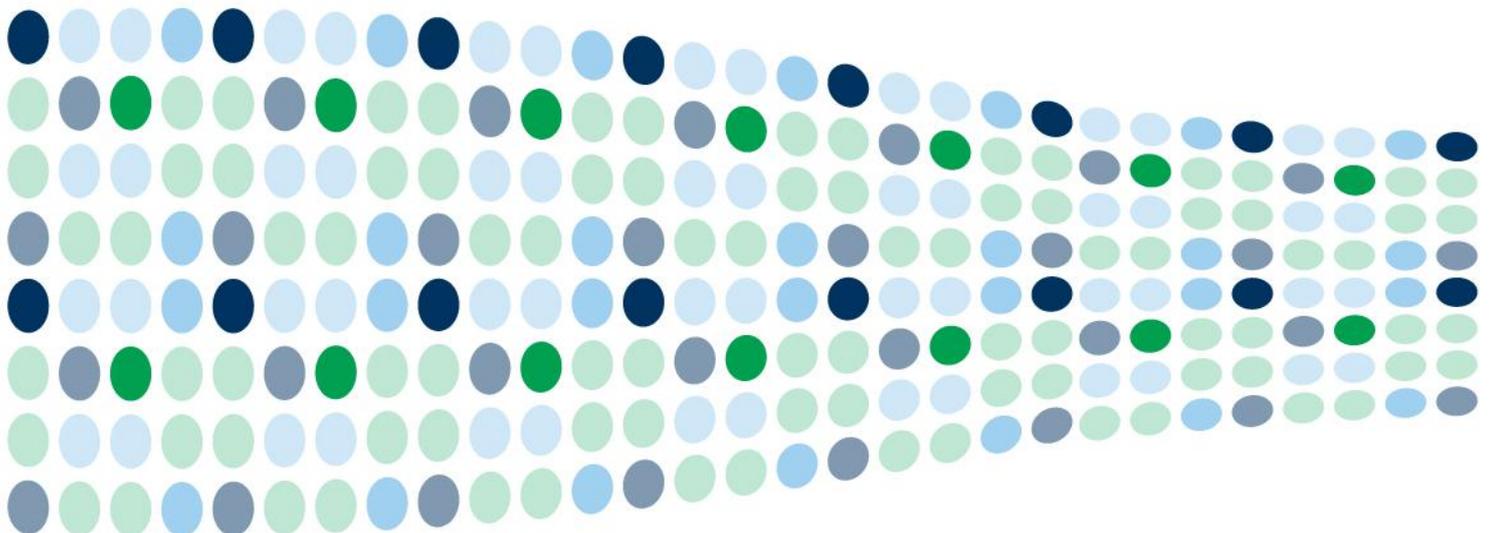




Health & Social Care  
Information Centre

# Quality Outcomes Framework (QOF) Recorded Dementia Diagnoses

**Provisional 2013/14 data**



Published 30 July 2014

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Following a specific request from Department of Health and NHS England, this publication gives more timely information on dementia prevalence.

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# 1.0 Background

This analysis looks at Quality Outcomes Framework (QOF) recorded dementia prevalence for 2012/13 and provisional data for 2013/14.

The Department of Health (DH) launched the Dementia Strategy in 2009 (<https://www.gov.uk/government/publications/living-well-with-dementia-a-national-dementia-strategy>). The strategy highlighted the issue of under-diagnosis; data from 2007 quoted in the strategy estimated that only one third of people with dementia received a formal diagnosis<sup>1</sup>. One of the key objectives of the dementia strategy was:

**Good-quality early diagnosis and intervention for all.** *All people with dementia to have access to a pathway of care that delivers: a rapid and competent specialist assessment; an accurate diagnosis sensitively communicated to the person with dementia and their carers; and treatment, care and support provided as needed following diagnosis. The system needs to have the capacity to see all new cases of dementia in the area.*

Prime Minister David Cameron launched the Dementia Challenge in 2012 (<http://dementiachallenge.dh.gov.uk/>), to build on the Dementia Strategy. A key component of the challenge is to improve diagnosis rates for dementia; so that more patients suffering from dementia are given a formal diagnosis so that they can receive the appropriate care and support.

NHS England has a commitment to increase the dementia diagnosis rate to 67 per cent by March 2015 (<http://www.england.nhs.uk/wp-content/uploads/2013/12/5yr-strat-plann-guid-wa.pdf>). By this measure two thirds of people with dementia would receive a formal diagnosis.

## NHS Mandate 2014-15

*The Government's goal is that the diagnosis, treatment and care of people with dementia in England should be among the best in Europe.*

*The objective is for NHS England is to make measurable progress towards achieving this by March 2015, in particular ensuring timely diagnosis and best available treatment for everyone who needs it, including support for carers.*

*NHS England have agreed a national ambition for diagnosis rates that by 2015 two-thirds of the estimated number of people with dementia in England should have a diagnosis, with appropriate post-diagnosis support. Better dementia diagnosis will improve the lives of people with the condition and give them, their carers and professionals the confidence that they are getting the care and treatment they need. NHS England should work with CCGs to support local proposals for making the best treatment available across the country.*

To support monitoring of progress for this ambition, DH and NHS England requested that the Health and Social Care Information Centre (HSCIC) release the QOF dementia register data for

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<sup>1</sup> NAO (2007). Improving services and support for people with dementia. London: TSO. (<http://www.nao.org.uk/report/improving-services-and-support-for-people-with-dementia/>)

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2013/14 early, ahead of the full publication of QOF Achievement, prevalence and exceptions data scheduled for October 2014.

The HSCIC is working with data suppliers to provide monthly updates to the QOF dementia register data. When these become available the HSCIC plans to release monthly practice-level dementia register data on the HSCIC website.

## 2.0 Definitions of measures associated with dementia diagnosis

There are a number of measures used to assess the number of patients with dementia, and those who have had a formal diagnosis. We define these as follows:

### 2.1 Recorded prevalence

Dementia register data are a component of the QOF<sup>2</sup> (see [Overview of the Quality and Outcomes Framework](#)). For 2013/14 numbers of patients with a diagnosis of dementia was collected for indicator DEM001. This indicator states:

*The contractor establishes and maintains a register of patients diagnosed with dementia*

For each practice participating in the QOF, the HSCIC receives a count of patients who have a diagnosis of dementia on the GP patient record, as defined by the QOF business rules<sup>3</sup>. No personal identifiable data (PID) are collected through this mechanism, they are simply an aggregate number of patients with a diagnosis at each practice.

The HSCIC also receives counts of patients registered at each practice. Again, these are non-PID aggregate counts for each practice.

Using these data the HSCIC calculates recorded prevalence for each practice as follows:

*Recorded dementia prevalence =*

*(Number of patients on dementia register / Number of patients registered at practice) x 100*

**All prevalence data referred to in this report are “recorded prevalence”**

### 2.2 Estimated prevalence

In 2007 the Alzheimer’s Society produced estimated prevalence figures for dementia. These figures are based on a Delphi consensus exercise, and are viewed as the most authoritative to date (see the Dementia UK<sup>4</sup> report).

The Dementia UK 2007 report contains estimates of late onset dementia prevalence rates (i.e. how many people have dementia as a proportion of the population in that age band) by 5 year age bands from age 30 to 95+. These rates are available by gender and as a weighted average for all persons. Estimates of dementia were calculated for the UK and in each local authority (or equivalent) in each of the UK countries. As these estimates are based on research evidence, they

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<sup>2</sup> <http://www.nhsemployers.org/your-workforce/primary-care-contacts/general-medical-services/quality-and-outcomes-framework>

<sup>3</sup> <http://www.hscic.gov.uk/qofesextractspecs>

<sup>4</sup> [http://www.alzheimers.org.uk/site/scripts/download\\_info.php?fileID=2](http://www.alzheimers.org.uk/site/scripts/download_info.php?fileID=2)

are not updated on a routine basis. The Alzheimer's Society is currently reviewing these data, with a view to provide updated estimated prevalence data.

**This report does not use “estimated prevalence” data**

## 2.3 Diagnosis rate

Not all people who have dementia currently have a diagnosis. Diagnosis rate refers to the number of people who have received a diagnosis as a percentage of those estimated to have the condition.

Diagnosis rate is used in the NHS Outcomes Framework<sup>5</sup> (indicator 2.6i): *Estimated diagnosis rate for people with dementia*. To calculate diagnosis rate; Estimated prevalence data are applied to population estimates (sourced from the Office of National Statistics). The number of patients on QOF dementia registers is then divided by this figure:

*Dementia diagnosis rate =*

*Number of patients on dementia register / (Estimated prevalence x Population estimate)*

**The dementia diagnosis rate is the focus of the 67 per cent ambition. Diagnosis rate is not provided or calculated in this report. See [Uses and usage](#) for more information.**

Further details on the indicator calculation and latest available diagnosis rates are available at:

HSCIC indicator specification

[https://indicators.ic.nhs.uk/download/Outcomes%20Framework/Specification/NHSOF\\_Domain\\_2\\_S\\_V2.pdf](https://indicators.ic.nhs.uk/download/Outcomes%20Framework/Specification/NHSOF_Domain_2_S_V2.pdf)

HSCIC indicator portal <https://indicators.ic.nhs.uk/webview/>

Public Health Outcomes Framework tool <http://www.phoutcomes.info/public-health-outcomes-framework#gid/1000044/pat/6/ati/102/page/6/par/E12000004/are/E06000015>

## 3.0 Data included in this report

Recorded prevalence is calculated at practice level and at aggregate levels for Clinical Commissioning Groups (CCGs), NHS Area Teams (ATs), NHS Regions and national level.

The 2012/13 data presented are those collected for the QOF for 2012/13 and published in October 2013<sup>6</sup>. Data presented here have different coverage than presented in the original report, and therefore aggregate counts and rates are different to those originally published. In the original 2012/13 report, data for 8,020 practices was included. To make the most accurate comparison to the provisional 2013/14 data, only practices included in both datasets have been included in summary tables. There is one exception in that all 8,020 practices are included in the time series (table 1.0), for consistency with all previous years, which also use the originally published data.

Applying this constraint, 7,928 practices are included in the tables where 2012/13 and 2013/14 are directly compared (table 1.1 onwards). This constraint was necessary because the annual QOF data routinely published by the HSCIC is validated by Area Teams to ensure that only data for appropriate practices are included. Some practices do not participate in the QOF, for example

<sup>5</sup> <https://www.gov.uk/government/publications/nhs-outcomes-framework-2014-to-2015>

<sup>6</sup> <http://www.hscic.gov.uk/catalogue/PUB12262>

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those which provide services to the homeless; other practice codes are set up for other administrative purposes and do not represent a 'real' practice. In consultation with Area Teams, the HSCIC identifies these practices and if necessary removes them from the publication dataset. For data presented in this report, and any subsequent monthly data, it is not feasible to undertake this validation exercise. Therefore, the most straightforward way to ensure that only appropriate practices are included is to match the practices against the practice list from the last annual QOF publication.

Practices are matched in the datasets by their practice code, the difference in coverage can be attributed to practice closures, openings and mergers, as well as changes in practice codes.

**If users identify practices which are not included in the dataset, but which they consider should be included, then please contact [qof@hscic.gov.uk](mailto:qof@hscic.gov.uk). Where appropriate and where data are available, we will include these practices in subsequent releases.**

## 3.1 Caveats & constraints

### Provisional data

Data for 2013/14 are provisional. The Calculating Quality Reporting Service (CQRS) extracted QOF data for 31<sup>st</sup> March 2014. As part of the normal sign-off process for QOF achievement data, practices have until the end of June to agree their achievement and payments with Area Teams, who will approve each practice's submission. In some circumstances, this sign-off process can and does take longer. Data presented here for 2013/14 are therefore 'unapproved'.

**This means that the register and practice list data are subject to change.**

### Coverage

In addition, there are practices for which QOF data are collected, but which do not participate in the QOF (QOF is a voluntary scheme, but the vast majority of practices participate). During the publication process for the full QOF publication, the HSCIC removes these practices from the data (in consultation with ATs). We have not undertaken any such cleaning on these data, other than aligning them to the practices included in the 2012/13 QOF publication.

**This means that the practice coverage is subject to change.**

**Revised data will be published following the publication of final QOF data for 2013/14 in October 2014.**

## 3.2 Uses and usage

As described in the definitions section, numbers of patients on dementia registers are a component of both [recorded prevalence](#) and [diagnosis rate](#). These data will be used by DH and NHS England to calculate updated diagnosis rates, to monitor progress toward the objectives of the dementia strategy and dementia challenge, including the 67 per cent diagnosis rate ambition.

It is expected that the data will be incorporated in to the Dementia Prevalence Calculator<sup>7</sup>. The calculator is available to registered users and allows health communities to improve their understanding of local estimated prevalence. The tool also allows GPs and commissioners to set base lines and ambitions to improve diagnosis rates.

The tool uses an adjusted [diagnosis rate](#); the number of patients with a formal diagnosis as a percentage of those estimated to be suffering from dementia.

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<sup>7</sup> <http://dementiapartnerships.com/diagnosis/dementia-prevalence-calculator/>

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NHS England apply an adjustment in the practices' dementia diagnosis rates, by accounting for those patients who are in a residential care setting, recognising there is a higher prevalence of dementia in this section of the community. The summary values presented by NHS England may therefore differ to the diagnosis rate values provided by HSCIC.

An increase in these rates would demonstrate progress towards the ambition of a two-thirds diagnosis rate by March 2015.

## 4.0 Overview of the Quality and Outcomes Framework

The national Quality and Outcomes Framework (QOF) was introduced as part of the new General Medical Services (GMS) contract on 1 April 2004. The objective of the QOF is to improve the quality of care patients are given by rewarding practices for the quality of care they provide to their patients. QOF is therefore an incentive payment scheme, not a performance management tool, and a key principle is that QOF indicators should be based on the best available research evidence. Participation by practices in the QOF is voluntary, though participation rates are very high, with most Personal Medical Services (PMS) practices also taking part.

Information in this bulletin was derived from the Calculating Quality Reporting Service (CQRS)<sup>8</sup> a national system developed by the HSCIC. CQRS uses data extracted from general practices via the General Practice Extraction Service (GPES)<sup>9</sup>, to calculate their QOF achievement.

More detailed QOF information for 2012/13, and QOF information from previous years, has been published by the Health and Social Care Information Centre at <http://www.hscic.gov.uk/qof>

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<sup>8</sup> <http://systems.hscic.gov.uk/cqrs>

<sup>9</sup> <http://www.hscic.gov.uk/gpes>

## 5.0 Recorded Dementia Prevalence

The following tables present numbers of patients on dementia registers and recorded dementia prevalence. Data are presented at England, Region and Area Team levels, with a map also showing data for Clinical Commissioning Groups. Detailed data tables for all organisations, including at practice level, are provided in Annex 1 which accompanies this report.

### 5.1 Recorded National Prevalence

#### 5.1.1 Recorded dementia prevalence national time series

Recorded dementia prevalence data has been collected through the QOF since 2006/07, when dementia indicators were introduced into the framework. Table 1.0 demonstrates the progressive increase in the number of patients on practice dementia registers from 2006/07 to 2013/14.

Numbers of patients with a recorded diagnosis has increased from 213 thousand to 344 thousand over seven years. This increase of 132 thousand patients (62 per cent) may sound like a dramatic increase, but figure 1.0 demonstrates that the increase in recorded prevalence has followed a steady trajectory over time. When interpreting this increase we must also recognise that a rise in recorded prevalence could be due partly to epidemiological factors (such as an ageing population) or due partly to increased case finding and improved recording of diagnoses.

**Table 1.0: Recorded dementia prevalence time series, England**

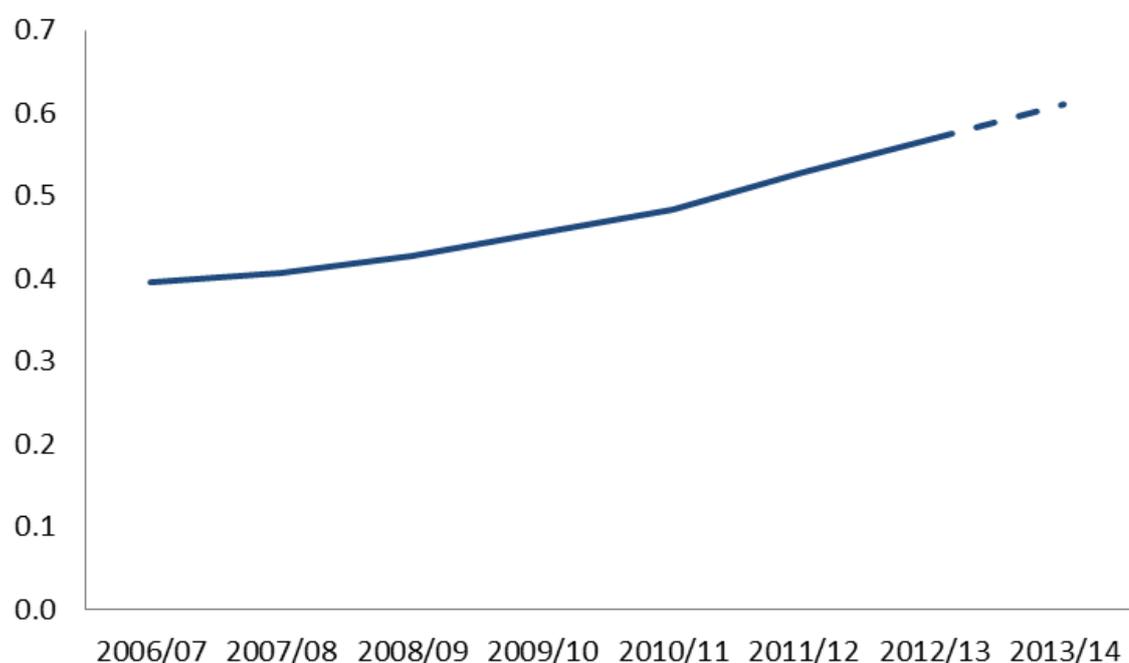
England	Practices	Practice list size (thousands)	Dementia register (thousands)	Recorded prevalence (per cent)
2006/07	8,372	53,681	213	0.40
2007/08	8,294	54,010	220	0.41
2008/09	8,229	54,311	232	0.43
2009/10	8,305	54,837	249	0.45
2010/11	8,245	55,170	267	0.48
2011/12	8,123	55,526	294	0.53
2012/13	8,020	56,012	319	0.57
2013/14 <sup>1</sup>	7,928	56,336	344	0.61
Change 2006/07 to 2013/14	-444	2,655	132	0.2
Per cent change 2006/07 to 2013/15	-5.3	4.9	61.9	54.2

Source: Health and Social Care Information Centre

Notes:

1. Data for 2013/14 are based on data for those practices that participated in QOF 2012/13. Therefore information for 2013/14 may be revised once the final data are available
2. 2013/14 figures are provisional and are subject to change in future reports.

**Figure 1.0: Recorded dementia prevalence time series, England**



1. Dashed line indicates provisional data for 2013/14, which are subject to change in future reports

### 5.1.2 Recorded dementia prevalence national summary

To make the most accurate comparison of provisional 2013/14 data to 2012/13 data (particularly at sub-national level), and to ensure that only appropriate practices were included in the 2013/14 dataset, only practices included in both datasets are included in all the following tables and charts. However, as seen in table 1.1, the 2012/13 prevalence of 0.57 per cent is unchanged compared with the original data (shown in table 1.0), even with this constraint applied.

Table 1.1 shows that nationally, recorded prevalence has provisionally increased by 0.04 percentage points from 2012/13 to 2013/14.

**Table 1.1: Recorded dementia prevalence from QOF, England**

England				
	Practices	Practice list size (thousands)	Dementia register (thousands)	Recorded prevalence (per cent)
2012/13 <sup>1</sup>	7,928	55,737	318	0.57
2013/14 <sup>2</sup>	7,928	56,336	344	0.61
Difference	-	599	27	0.04

Notes:

1. Information is based on those practices that participated in QOF in both years. Therefore, information for 2012/13 does not match previously published.

2. 2013/14 figures are provisional and are subject to change in future reports.

## 5.2 Sub-national recorded dementia prevalence

### 5.2.1 Recorded dementia prevalence regional summary

At regional level, there are differences in levels of recorded prevalence. The North and South regions have the highest levels of recorded prevalence, with London notably lower. All regions show an increase in recorded prevalence since 2012/13, but the level of increase is lowest in London (table 2.0 and figure 2.0).

Table 2.1 and figure 2.1 show that the age profile of patients in London is different to the other three regions, and the national average. In London almost three out of four patients are under 50, whereas in the other regions, the figure is less than two out of three. The younger profile of patients in London, compared to the overall England profile, is demonstrated in figure 2.1, particularly among patients aged between 20 and 40. Having proportionally fewer patients in the older age groups is likely to at least partly explain the lower level of recorded prevalence in London.

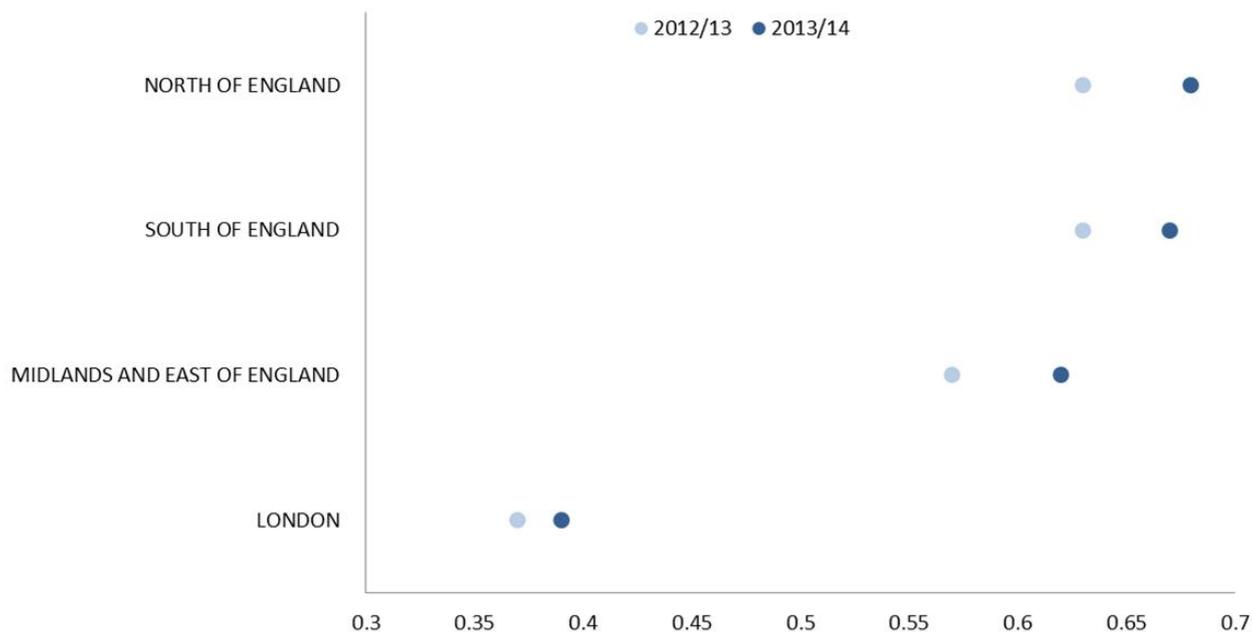
**Table 2.0: Recorded dementia prevalence from QOF, by Region, England**

Region	Practices	Practice list size (thousands)	Dementia register (thousands)	Recorded prevalence (per cent)
<b>North of England</b>				
2012/13 <sup>1</sup>	2,395	15,694	98	0.63
2013/14 <sup>2</sup>	2,395	15,832	107	0.68
Difference	-	139	9	0.05
<b>Midlands &amp; East of England</b>				
2012/13 <sup>1</sup>	2,334	16,817	96	0.57
2013/14 <sup>2</sup>	2,334	17,004	105	0.62
Difference	-	187	9	0.05
<b>London</b>				
2012/13 <sup>1</sup>	1,432	8,984	33	0.37
2013/14 <sup>2</sup>	1,432	9,071	35	0.39
Difference	-	87	2	0.02
<b>South of England</b>				
2012/13 <sup>1</sup>	1,767	14,241	90	0.63
2013/14 <sup>2</sup>	1,767	14,428	97	0.67
Difference	-	187	7	0.04

**Notes:**

1. Information is based on those practices that participated in QOF in both years. Therefore information for 2012/13 does not match previously published.
2. 2013/14 figures are provisional and are subject to change in future reports.

**Figure 2.0: Recorded dementia prevalence from QOF by Region in England in 2012/13 and 2013/14**



**Notes:**

1. Information is based on those practices that participated in QOF in both years. Therefore information for 2012/13 does not match previously published.
2. 2013/14 figures are provisional and are subject to change in future reports.

**Table 2.1: Percentage of all patients on practice lists by gender, age band and Region, England, 2014**

	0-49			50-79			80 plus		
	Male	Female	All	Male	Female	All	Male	Female	All
North of England	32.5	31.3	63.9	15.6	16.0	31.6	1.7	2.8	4.5
Midlands & East of England	32.5	31.3	63.8	15.5	15.9	31.4	1.9	2.9	4.8
London	37.5	36.7	74.2	11.4	11.5	22.8	1.2	1.8	3.0
South of England	31.3	30.7	62.0	16.1	16.6	32.6	2.1	3.3	5.4
England	33.0	32.0	65.0	15.0	15.4	30.4	1.8	2.8	4.6

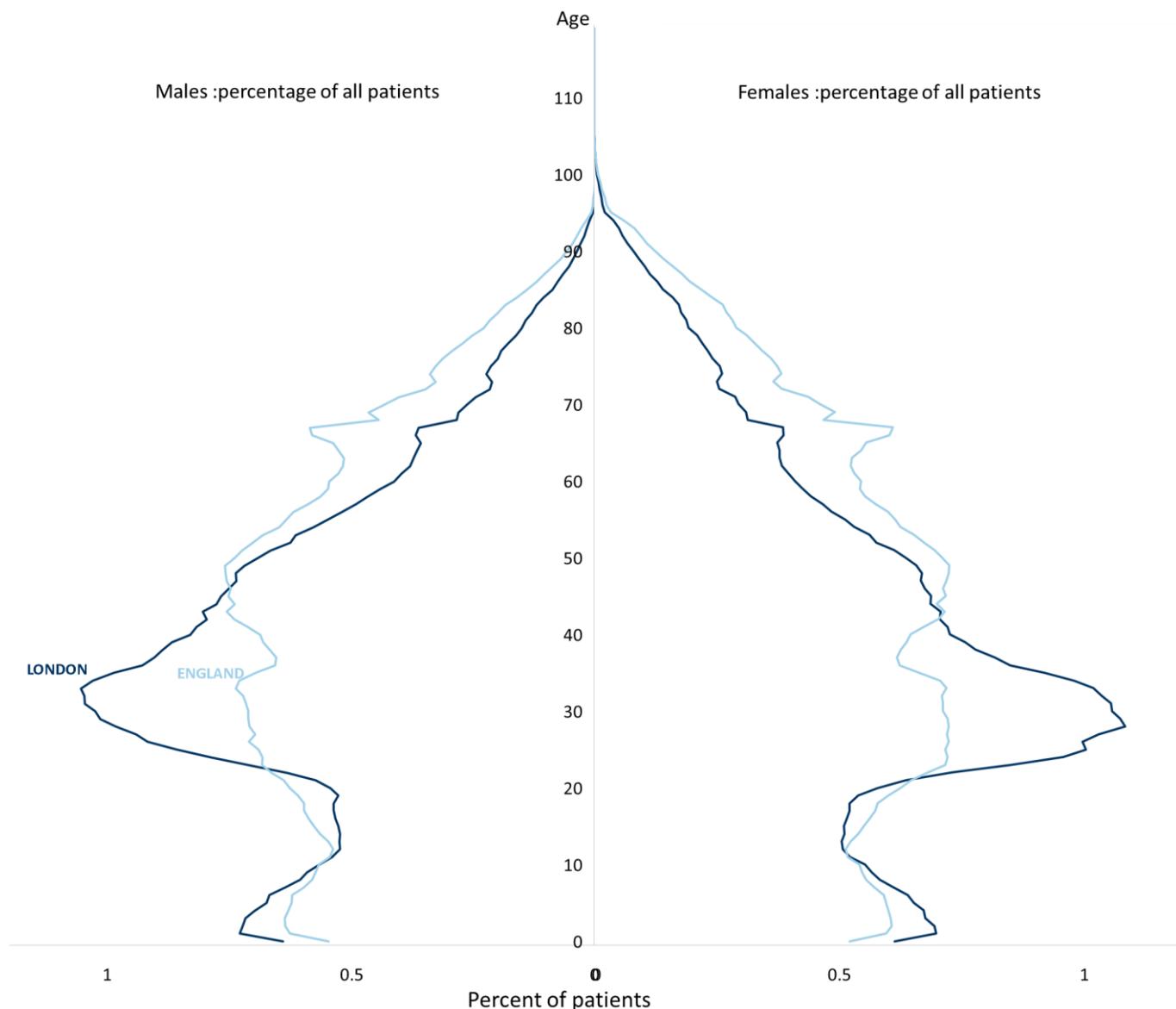
Source: Exeter

1. Data are based on practice list age breakdowns extracted on 1st April 2014

The population pyramids shown in figure 2.1 show the different age profile of patients in London, compared with the overall England profile. For London, there are greater proportions of younger patients, demonstrated by the pyramid spreading out between the ages around 20 to 40. The London pyramid then narrows more steeply towards the higher ages than the England value, indicating that London has proportionally fewer patients in the older age groups.

As dementia is an age related condition, this age profile may provide some explanation for the lower rate of recorded prevalence in London.

**Figure 2.1: Age distribution of practice lists, London region and England 2013/14**



## 5.2.2 Dementia Prevalence Area Team summary

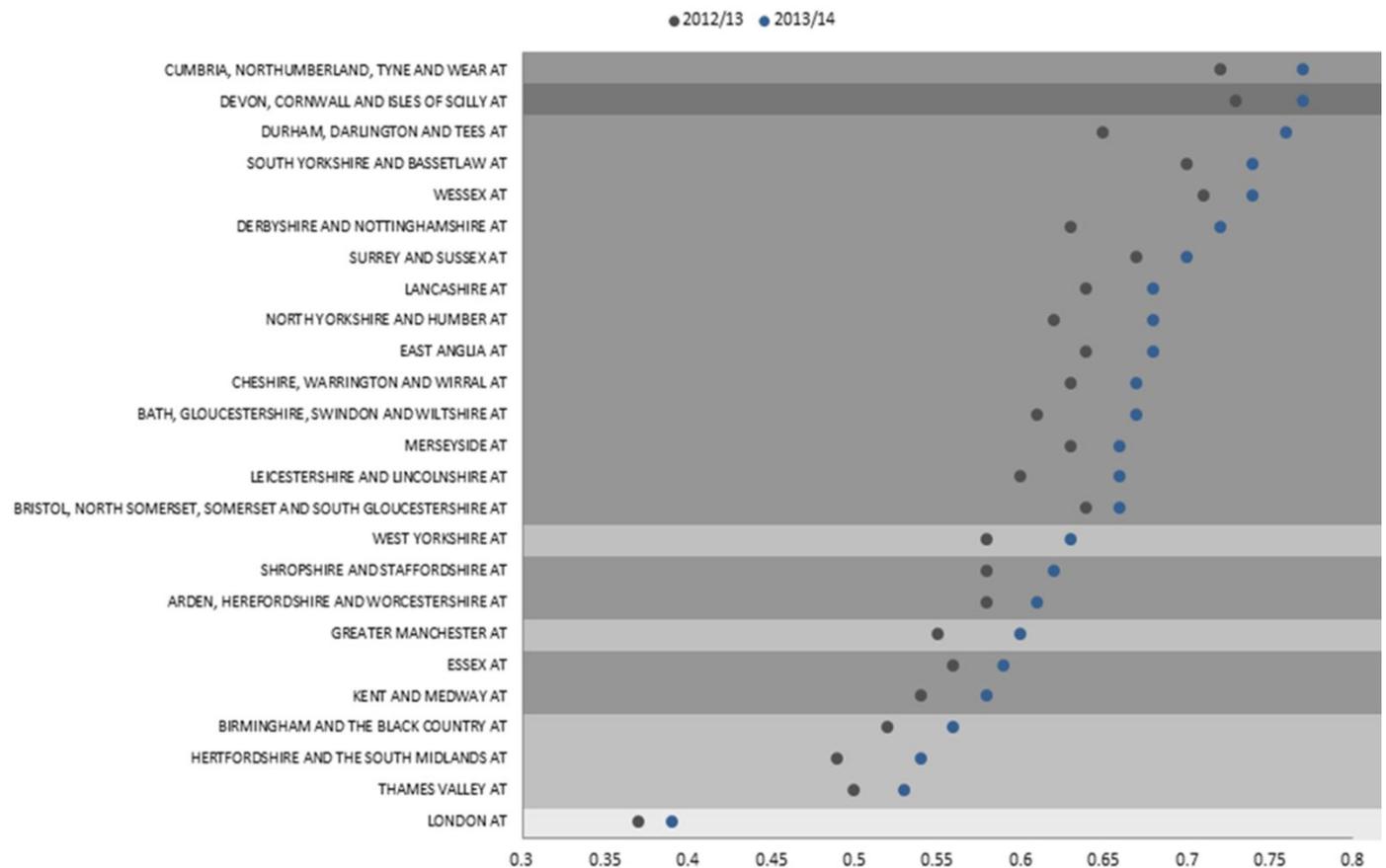
Differences in levels of recorded prevalence are also apparent at Area Team level. Recorded prevalence has increased in all Area Teams, but there is variation in the size of the increase. Durham, Darlington & Tees AT and Derbyshire & Nottinghamshire AT show the greatest increase, while London AT and Bristol, North Somerset, Somerset & South Gloucestershire AT have the smallest increases (figure 3.1).

Figure 3 also incorporates an indication of age profile in each Area Team. The shading of the background relates to the percentage of registered patients aged 50 and over. The darker the shading, the higher the percentage of patients aged 50 and over. For example, Devon, Cornwall and Isles of Scilly AT has the second highest recorded prevalence for 2013/14, and also has the highest percentage of patients over 50 (over 40 per cent, as indicated by the dark grey shading).

Maps showing recorded prevalence and percentage of patients aged 50 and over are shown at figures 3.1 and 3.2.

A full table containing data for Area Teams is available in Annex 1.

**Figure 3.0: Recorded dementia prevalence from QOF, and percentage of patients aged 50 and over by Area Team (AT) in England in 2012/13 and 2013/14**



**Notes:**

- Information is based on those practices that participated in QOF in both years.
- 2013/14 figures are provisional and are subject to change in future reports.
- Shading of the background relates to the percentage of patients on practice lists aged 50 and over.

**Percentage of registered patients aged 50 and over, shading key**

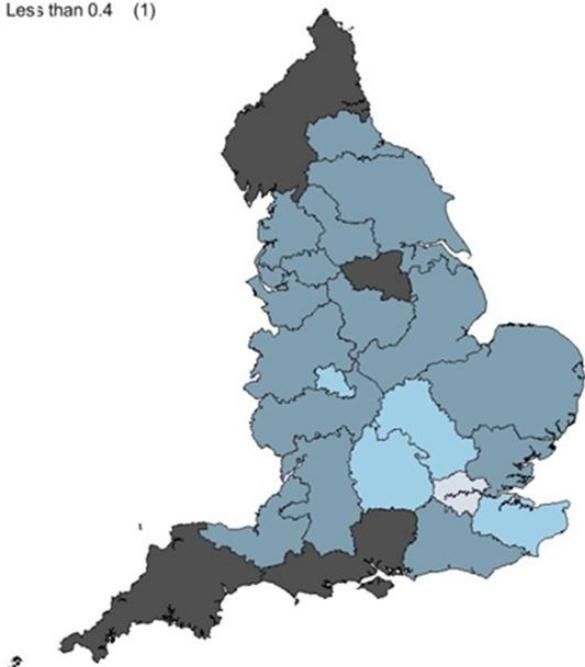
40 and over
35 to 39.9
30 to 34.9
Less than 30

**Figure 3.1: Recorded dementia prevalence from QOF by Area Team in England, 2012/13 and 2013/14**

Quality Outcomes Framework (QOF)  
Dementia Prevalence by Area Team in England, 2012/13

Coverage by Area Team  
England 0.57

0.85 or above	(0)
0.7 to 0.84	(4)
0.55 to 0.69	(16)
0.4 to 0.54	(4)
Less than 0.4	(1)

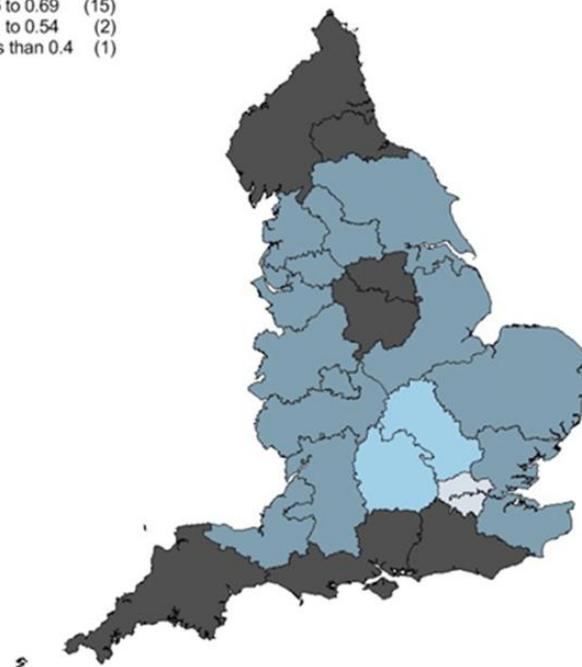


Contains Ordnance Survey data (C) Crown copyright and database right (2014)

Quality Outcomes Framework (QOF)  
Dementia prevalence by Area Team in England, 2013/14

Coverage by Area Team  
England 0.61

0.85 or above	(0)
0.7 to 0.84	(7)
0.55 to 0.69	(15)
0.4 to 0.54	(2)
Less than 0.4	(1)



Contains Ordnance Survey data (C) Crown copyright and database right (2014)

**Notes:**

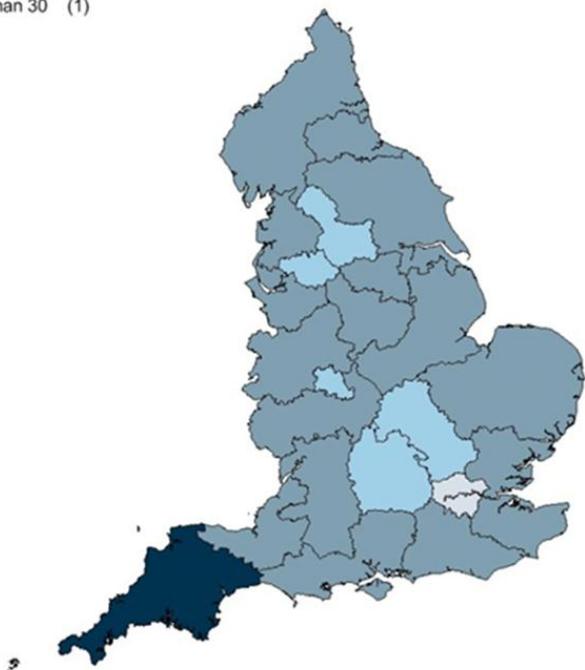
1. Information is based on those practices that participated in QOF in both years. Therefore information for 2012/13 does not match previously published.
2. 2013/14 figures are provisional and are subject to change in future reports.

**Figure 3.2: Percentage of patients aged 50 and over, by Area Team in England, 2014**

Percentage of practice list size aged 50 and over  
by Area Team in England, 2014

Coverage by Area Team

40 or above	(1)
35 to 39.9	(18)
30 to 34.9	(5)
Less than 30	(1)



Contains Ordnance Survey data (C) Crown copyright and database right (2014)

Notes:

1. Information is based on those practices that participated in QOF in both years.
2. Figures are based on data taken from Exeter on 1st April 2014

## 5.2.3 Dementia Prevalence CCG summary

Table 4.0 lists the CCGs with the highest levels of recorded prevalence in 2013/14, table 4.1 lists the CCGs with the lowest levels of recorded prevalence in 2013/14. The tables show that those CCGs with higher rates of recorded prevalence have higher proportions of patients over 50 than those CCGs with lower rates.

**Table 4.0: Recorded dementia prevalence from QOF, ten<sup>4</sup> CCGs with highest rate 2013/14, England**

Org Code	Org Name	Recorded dementia prevalence 2012/13	Recorded dementia prevalence March 2014	Change in Prevalence Rate 2012/13 to March 2014	Per cent of all patients on practice list aged 50 and over
10L	NHS ISLE OF WIGHT CCG	1.13	1.10	-0.03	46.4
06V	NHS NORTH NORFOLK CCG	0.92	1.00	0.08	50.2
04M	NHS NOTTINGHAM WEST CCG	0.88	0.99	0.11	39.1
01V	NHS SOUTHPORT AND FORMBY CCG	0.93	0.98	0.05	45.2
99Q	NHS SOUTH DEVON AND TORBAY CCG	0.86	0.96	0.10	45.4
03E	NHS HARROGATE AND RURAL DISTRICT CCG	0.83	0.94	0.11	41.5
00N	NHS SOUTH TYNESIDE CCG	0.89	0.93	0.04	39.2
00C	NHS DARLINGTON CCG	0.77	0.92	0.15	38.1
02M	NHS FYLDE & WYRE CCG	0.83	0.92	0.10	46.0
09F	NHS EASTBOURNE, HAILSHAM AND SEAFORD CCG	0.99	0.92	-0.06	44.7
09P	NHS HASTINGS AND ROTHER CCG	0.87	0.92	0.05	44.4

Notes:

1. Information is based on those practices that participated in QOF in both years.
2. Patient age data are based on data taken from Exeter on 1st April 2014
3. 2013/14 prevalence figures are provisional and are subject to change in future reports.
4. Eleven CCGs are listed as four share the same rate.

**Table 4.1: Recorded dementia prevalence from QOF, ten CCGs with lowest rate 2013/14, England**

Org Code	Org Name	Recorded dementia prevalence 2012/13	Recorded dementia prevalence March 2014	Change in Prevalence Rate 2012/13 to March 2014	Per cent of all patients on practice list aged 50 and over
08V	NHS TOWER HAMLETS CCG	0.22	0.25	0.04	15.5
02W	NHS BRADFORD CITY CCG	0.24	0.26	0.01	15.5
08M	NHS NEWHAM CCG	0.24	0.26	0.02	18.4
00W	NHS CENTRAL MANCHESTER CCG	0.26	0.28	0.02	19.8
07T	NHS CITY AND HACKNEY CCG	0.22	0.28	0.06	20.0
08K	NHS LAMBETH CCG	0.25	0.28	0.03	21.3
08D	NHS HARINGEY CCG	0.27	0.30	0.03	24.5
10T	NHS SLOUGH CCG	0.28	0.31	0.02	23.6
07W	NHS EALING CCG	0.36	0.31	-0.06	25.0
08Q	NHS SOUTHWARK CCG	0.28	0.31	0.03	21.9

Notes:

1. Information is based on those practices that participated in QOF in both years.
2. Patient age data are based on data taken from Exeter on 1st April 2014
3. 2013/14 prevalence figures are provisional and are subject to change in future reports.

Figure 4.0 provides an overview of recorded prevalence by CCG, with an overview of the age profile (percentage of patients aged 50 and over) shown in figure 4.1. The maps indicate that CCGs with older patient demographics have higher rates of recorded prevalence. A full table containing data for CCGs is available in Annex 1.

**Figure 4.0: Prevalence of QOF dementia by Clinical Commissioning Group, 2012/13 and 2013/14**

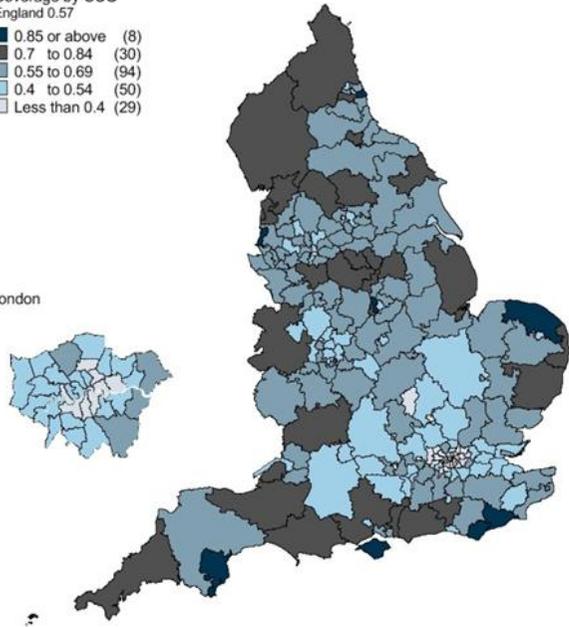
Quality Outcomes Framework (QOF)  
Dementia prevalence by Clinical Commissioning Group (CCG)  
in England, 2012/13

Quality Outcomes Framework (QOF)  
Dementia prevalence by Clinical Commissioning Group (CCG)  
in England, 2013/14

Coverage by CCG  
England 0.57

0.85 or above	(8)
0.7 to 0.84	(30)
0.55 to 0.69	(94)
0.4 to 0.54	(50)
Less than 0.4	(29)

London

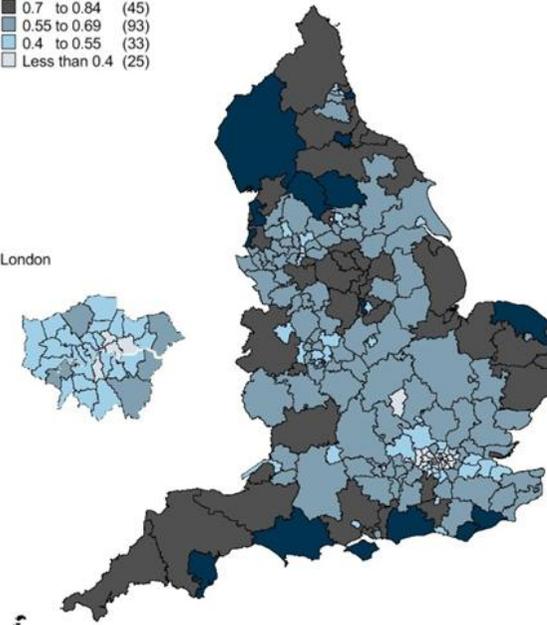


Contains Ordnance Survey data (C) Crown copyright and database right (2014)

Coverage by CCG  
England 0.61

0.85 or above	(15)
0.7 to 0.84	(45)
0.55 to 0.69	(93)
0.4 to 0.55	(33)
Less than 0.4	(25)

London



Contains Ordnance Survey data (C) Crown copyright and database right (2014)

**Notes:**

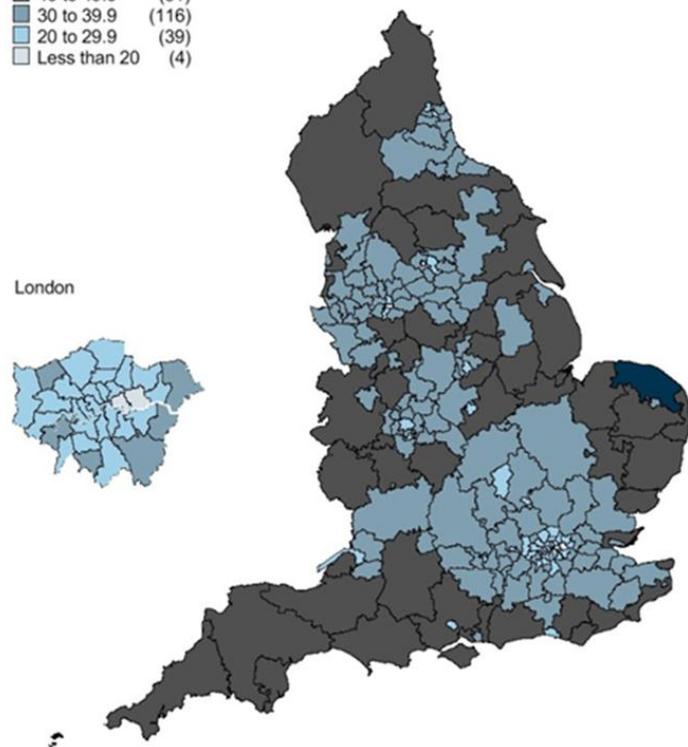
1. Information is based on those practices that participated in QOF in both years. Therefore information for 2012/13 does not match previously published.
2. 2013/14 figures are provisional and are subject to change in future reports.

**Figure 4.1: Percentage of patients aged 50 and over, by Clinical Commissioning Groups in England, 2014**

Percentage of practice list aged 50 and over  
by Clinical Commissioning Group (CCG) in England, 2014

Coverage by CCG

■ 50 and over	(1)
■ 40 to 49.9	(51)
■ 30 to 39.9	(116)
■ 20 to 29.9	(39)
■ Less than 20	(4)



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Notes:

1. Information is based on those practices that participated in QOF in both years.
2. Figures are based on data taken from Exeter on 1st April 2014

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# Annex 1 table listings

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Title

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[Numbers on QOF disease registers and recorded prevalence rate in England](#)  
[Numbers on QOF disease registers and raw prevalence rate by Region in England](#)  
[Numbers on QOF disease registers and raw prevalence rate by Area Team \(AT\) in England](#)  
[Numbers on QOF disease registers and raw prevalence rate by Clinical Commissioning Group \(CCG\) in England](#)  
[Numbers on QOF disease registers and raw prevalence rate for England, practice level](#)

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[Table 1.0: Recorded dementia prevalence time series, England](#)  
[Figure 1.0: Recorded dementia prevalence time series, England](#)  
[Table 1.1: Prevalence of dementia from QOF, England](#)  
[Table 2.0: Recorded dementia prevalence from QOF, by Region, England](#)  
[Figure 2.0: Recorded dementia prevalence from QOF by Region in England in 2012/13 and 2013/14](#)  
[Table 2.1: Percentage of all patients on practice lists by gender, age band and Region, England, 2014](#)  
[Figure 2.1: Age distribution of practice lists, London region and England 2013/14 in 2012/13 and 2013/14](#)  
[Figure 3.0: Recorded dementia prevalence from QOF, and percentage of patients aged 50 and over by Area Team \(AT\) in England in 2012/13 and 2013/14](#)  
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[Table 4.0: Recorded dementia prevalence from QOF, ten4 CCGs with highest rate 2013/14, England](#)  
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[Figure 4.0: Prevalence of Dementia from QOF by Area Team \(AT\) in England in 2012/13 and 2013/14](#)  
[Figure 4.1: Percentage of patients aged 50 and over, by Clinical Commissioning Groups in England, 2014](#)

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