

Patient Profiling briefing paper September 2009.

Patient Profiling has become core business for the PCT. The enhanced profiling incorporates ethnicity, language, religion and access needs for all newly registered patients and those on disease registers. General Practices are offered support, training and tool kits. The tool kits include data collection templates, information on BME health, leaflet advice in different languages and community group contacts.

By cross-matching the profile information with CHD, Diabetes and Obesity data, a much clearer, more useful and equitable picture has been obtained; differences in ethnicity-related health status and gaps in health care can be identified. The process will enable improved service provision and reduction in health inequalities through:

- Enabling equitable commissioning
- Developing health equity audit tools
- Ensuring services are relevant
- Identifying 'hot spots' for health promotion and targeted services
- Helping the PCT and general practices better understand patients

The study of 20 GP Practices in 2009 using Patient Profiling, looked at prevalence of CHD, Diabetes and Obesity by the Broad Census categories (Asian, Black, Chinese, Mixed, Other ethnic group and Not Stated [includes patients that refused/omitted to give their ethnicity and those who have not been profiled]). The prevalence of Diabetes is as follows below:

Prevalence of Diabetes Mellitus in 20 GP Practices in Liverpool

*Aged 17 and over
(percentage)*

	Caribbean	African	Indian	Pakistani	Bangladeshi	Chinese	Irish	General Population
2007								
Men	20	5	12	11	11	5	6	5
Women	13	4	7	7	7	6	3	4
2009								
Men	33	11	11	8	12	4	7	6
Women	24	6	9	7	14	7	5	4

Source: Liverpool PCT

There has been a rise in Diabetes in all groups although the increases vary from group to group and by gender. Overall in the general population there is no change in women but men have increased slightly.

In the Caribbean and African groups, the rises are notable in both genders when comparing 2007 to 2009. This is also true for the Bangladeshi and Irish groups. In the Chinese, Indian and Pakistani groups there is a slight decrease for men and a slight increase for women.

In 1997 a Patient Profiling pilot started in one health centre in Liverpool. In 2009 this initiative now covers 96 of the 98 GP practices. The data is gathered using standard NHS categories and codes that can be used by the practice but it can also be aggregated back up into broader census categories for analysis.

Patient Profiling data sits on the GP practice clinical system and is living data; unlike Census data which is a snap shot at that point in time but goes out of date quickly.

The Quality and Outcomes Framework (QOF) supports the collection of ethnicity data from new patients reregistering at the practices. The Directed Enhanced Services (DES) for ethnicity supports the collection of both ethnicity and spoken language from all patients registered at the practice. Both the QOF and the DES have further reinforced the need to gather and use this data and has significantly increased the volume and quality of the data.

Use of profiling data

Patient Profiling data will be used to support the World Class Commissioning Competency five which is 'Manage knowledge and undertake robust and regular needs assessments that establish a full understanding of current and future local health needs & requirements'

As Liverpool PCT is part of the Race for Health programme Patient Profiling information informs around the Key Performance Indicators (KPI's); of diabetes, CHD and mental health. A profile of all diabetic patients registered with a GP is due to be undertaken in November; this will inform the Out of Hospital Service Redesign for the diabetic service and the 2010 Race for Health diabetic KPI

The Patient Profiling Team is currently building a Profile of patients registered with the GP's in the Liverpool Health Care Consortium. The information will support a Vitamin D audit in these practices. This is part of a wider PCT programme to increase awareness of Vitamin D deficiency.

National Recognition

Patient Profiling in Liverpool is recognised nationally as the gold standard for ethnicity monitoring.

- In 2005 Patient Profiling work was show cased as two examples of good practice in the Department of Health document – 'A Practical Guide to Ethnicity Monitoring in the NHS and Social Care.'
- In August 2007 Patient Profiling was highlighted in a Health Service Journal article; Why minorities still stand out from the primary care crowd.'
- In 2008 the work in Liverpool was entered as a good practice case study on the Equality & Human Rights Database.
- Also in 2008 Patient Profiling was acknowledged as good practice in the publication Health & Migration in the North West of England.

The Patient Profiling team have presented at national conferences and support other PCTs around the country sharing good practice around ethnicity monitoring.