

## South Sefton Clinical Commissioning Group PRESCRIBING QUALITY SCHEME 2014-15

Management of the practice prescribing budget	Points available	How it will be measured	How can this be demonstrated
Practice spend less than or equal to their allocated prescribing budget for 2014-15	10	Final outturn on the budget statement	Actual spend for 2014-15 from epact
Planning and management			
All prescribers attend a quarterly meeting with medicines management to discuss the agreed agenda items as determined by the Medicines Management Operational Group (MMOG).	5	Record of GP attendance and minutes of the meetings	Record of GP attendance and minutes of the meetings
Complete 3 areas from the Medicines Optimisation Plan developed at Medicines Operational Group. Agree to complete the Budget Optimisation work stream and two other workstreams agreed with the practice pharmacist at practice meeting	10	Completion of /engagement with three workstream areas	Reduction in spend in work stream areas for 2014-15 from review of ePACT data



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Audit the prescribing of antipsychotics in dementia patients	5	Audit all patients with a diagnosis of dementia prescribed antipsychotic medication	Complete audit cycle, review change in practice, re audit by end of Q4 14-15
Review of Practice			
Analyse and reflect on a near miss or significant event related to medicines management. Identify areas for improvement and implement changes.	2	<ul> <li>Analysis to include:</li> <li>title of the event</li> <li>date of the event</li> <li>date the event was discussed and the roles of those present</li> <li>description of the event</li> <li>what went well?</li> <li>what could have been done differently?</li> <li>reflections on the event in terms of knowledge, skills and performance</li> <li>reflections on the event in terms of safety and quality</li> <li>reflections on the event in terms of communication, partnership and teamwork</li> </ul>	Completion of analysis
		reflection on the event in terms of	



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		<ul> <li>maintaining trust</li> <li>what changes have been carried out and their effect</li> </ul>	
Complete ONE NICE audit	5	Audit patients on AF register to ensure treatment is in line with draft NICE clinical guideline on AF (focusing on patients on antiplatelets) <b>Or</b> Complete the NICE diabetes audit	Complete audit cycle of review, change in practice, re audit by end of Q4 14-15
Safety audit: Audit prescribing in line with the RCGP prescribing indicators	5	Complete audits of all RCGP prescribing indicators	Complete audit cycle of review, change in practice, re audit by end of Q4 14-15
Antimicrobial audit Undertake clinical audit of antimicrobial prescribing for patients in care home unless no/low numbers of care home patients in which case the UTI audit should be completed	5	Audit for one week in each quarter of patients living in a care home prescribed ANY antimicrobial drug during the audit week <b>Or</b> Audit for one week in each quarter of any patient (male or female) over the age of 16 years with a consultation including specified read codes for cystitis and UTI	Peer review of audit results at locality
Red/Black drug review	3	Regular review of new requests for red and black drug prescribing and review / return of long- standing red drug prescribing to appropriate specialist.	Discussion of practice red drug prescribing and actions at quarterly practice meeting