

Health

Pull-out checklists

 **audit**
commission



Primary care prescribing

A bulletin for primary care trusts

Self-assessment checklist

This can be completed by the prescribing team, and other appropriate people in the PCT (eg the finance team). The aim is to help the PCT to highlight its strengths and weaknesses in the management of prescribing. For a rough and ready assessment of your performance, allocate scores to your answers as follows;

Yes = 2 points, Partially = 1 point, No = 0 points

Enter a score in each unshaded box. Add up your score for each sub section, and in total.

Self-assessment questions	Yes/Partially/No
Managing the increases	
<i>General management of high-growth areas</i>	
1 Have you carried out detailed analyses of your prescribing patterns and spending in high-growth areas? Eg on key drug areas such as:	
• statins	
• diabetes drugs	
• anti hypertensives	
• other high-growth areas relevant to your PCT	
• Have you attempted to forecast future spending patterns?	
<i>Specifically on the NSF for Coronary Heart Disease...</i>	
2 Does the PCT have a treatment protocol for CHD (based on the NSF and taking account of the results of more recent medical research), that incorporates guidance on appropriate prescribing?	
3 Has training been organised for GPs on implementing the NSF?	
4 Have you taken steps to review practices compliance with the PCTs protocol?	
<i>Realising savings</i>	
5 Are you aware of the specific areas of your drugs spend where money could be released to fund other pressures?	
6 Have you taken steps to achieve savings, eg by:	
• setting targets in incentive schemes?	
• organising initiatives targeted at particular practices or drug areas?	
SUBTOTAL (out of 22)	
Strategy and Planning	
7 Have you drafted a prescribing strategy document that:	
• sets out the specific medium-term strategic goals for prescribing	

Self-assessment questions

Yes/Partially/No

<ul style="list-style-type: none"> is based on an analysis of your prescribing issues? 	
<ul style="list-style-type: none"> takes account of national policy implications for your PCT? 	
8 Have you drafted an implementation plan that:	
<ul style="list-style-type: none"> sets out the detailed action that needs to be taken to achieve the strategic goals? 	
<ul style="list-style-type: none"> sets out timescales for each action, with interim review points for longer-term goals? 	
<ul style="list-style-type: none"> sets measurable targets that enable achievement of actions to be judged? 	
<ul style="list-style-type: none"> quantifies the resources needed to achieve the plan? 	
<ul style="list-style-type: none"> links to other PCT plans where appropriate? 	
<ul style="list-style-type: none"> includes targets for the PCT that equate to practice level targets in the incentive scheme? 	
9 Are your reports to the Board on prescribing issues written in clear, non-technical language and do they include more than just financial information?	

SUBTOTAL (out of 20)
Influencing prescribers
Leadership

10 Do you have a policy or approach to dealing with GPs who prescribe inappropriately?	
11 Do education events for GPs include advice on appropriate prescribing?	
12 Does the PCT have policies on corporate sponsorship, and on dealing with drug company representatives?	
13 Are practices encouraged to develop their own policies on dealing with drug companies and their representatives?	

GP Prescribing lead

14 Does your GP lead have a written job description?	
15 Does your GP lead attend some practice visits?	

Sharing performance information

16 Do you identify all practices on performance data?	
17 If not, are you taking steps to introduce this approach?	

Incentive scheme

18 Do you have an incentive scheme in place for 2002/03?	
19 Do all or most practices participate in the scheme?	
20 Does the scheme include a range of targets that:	
<ul style="list-style-type: none"> cover cost and quality issues? 	
<ul style="list-style-type: none"> link to your strategic aims? 	
<ul style="list-style-type: none"> are monitored at PCT level as well as at practice level? 	
21 Does the scheme reward improvements in performance (rather than simply requiring achievement of fixed targets)?	

Self-assessment questions	Yes/Partially/No
22 Is the financial improvement target designed to be achievable and specific eg based on achieving savings in particular areas of the drugs budget (as opposed to an overall requirement to underspend or overspend by less than the previous year)?	
23 Do you give in-year feedback to practices on their performance against the targets in the scheme – to enable them to take corrective action where necessary?	
24 Is support (eg from the prescribing team) available to assist practices in achieving the incentive scheme targets?	
25 Do you evaluate the overall impact of your scheme at the end of each year, that is, comparing savings and quality improvements to the cost of the scheme?	

SUBTOTAL (out of 36)**Effective teams***General*

26 Does your current prescribing team have sufficient resources (staff, IT, and so on) to achieve the targets set in your prescribing plan?

Targeting of effort

27 Does your prescribing team spend enough time in face-to-face contact with GPs?

28 Does your prescribing team have access to:

- admin support?
- IT support?

Impact evaluation

29 Do you routinely evaluate and quantify the impact of the initiatives undertaken by the prescribing team?

Joint working with other PCTs

30 Do you share approaches with neighbouring PCTs in order to minimise duplication of effort?

31 Do you have a system in place for representing primary care views at local trusts and the Area Prescribing Committee (APC) (or local equivalent) – while minimising the amount of time that PAs spend in meetings?

32 Have you agreed arrangements with local PCTs for carrying out health-economy-wide functions – such as assessing new drugs, liaising with trusts and APC, negotiating shared care?

Relationships with secondary care

33 Have your local Drugs & Therapeutic Committees (D&TCs) been reconstituted to take account of the demise of the HAs and the newly formed PCTs?

34 Has your local APC been reconstituted to take account of the demise of the HAs and the newly formed PCTs?

35 Are the views and interests of your PCT, and primary care in the area, taken into account in the decisions made by these bodies?

36 Do you have a red/amber list of drugs agreed with local trusts?

35 Do you have a full set of shared care protocols agreed for all amber drugs?

SUBTOTAL (out of 26)**Grand total (out of 104)**

Scores

- >78 Your arrangements for the management of prescribing comply with good practice in most areas.
- 52-78 A lot of good practice. Refer to sub totals for areas needing further development.
- 26-51 Some good practice, but a large number of areas for development. Refer to the subtotals in the checklist for specific areas to address.
- <26 Your arrangements for the management of prescribing do not follow good practice in most areas.