



## ANNUAL REPORT 2018/19

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Supporting quality, optimised  
prescribing in the NHS

[www.prescqipp.info](http://www.prescqipp.info)

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(PRESCQIPP) REDUCES DUPLICATION AND IS VERY RESPONSIVE TO OUR NEEDS IN THE REQUIRED TIME FRAMES. IMPROVES ROBUSTNESS OF DECISION MAKING FOR REBATES - AND ONE YEARS REBATE PAYMENT WOULD FUND THE COST FOR SEVERAL YEARS.

SARAN BRAYBROOK, HEAD OF MEDICINES OPTIMISATION, NHS HEREFORDSHIRE CCG

”

“

EXCELLENT RETURN ON INVESTMENT AND ESSENTIAL FOR RUNNING A MEDS OPTIMISATION TEAM

SEDINA AGAMA, CHIEF PHARMACIST, NHS MERTON CCG

”

# FOREWORD



**Carol Roberts**  
**Chief Executive**

The NHS Long Term Plan sets out the next steps in changing the way the NHS will work. As CCGs merge and take a more strategic perspective, it is essential to maintain clinical input at neighbourhood, place and system level, and continue the collaborative approach which CCGs use when working with other organisations in their local area.

There is still uncertainty for CCGs as many move to one CCG per integrated care system (ICS), with it still unknown how many ICSs there will ultimately be.

It is all the more imperative to retain some commissioning functions separate from the delivery of care, and to allow commissioners to continue to drive real improvements for their populations.

In parallel we should see increased joint decision making between commissioners and providers, at all levels. This collaborative approach should lead to improved outcomes within systems.

From July 2019 all patients in England are covered by a primary care network (PCN); the most significant reform to general practice in England in a generation. PCNs should help to integrate primary care with secondary and community services, and bridge a gap between general practice and emerging Integrated Care Systems.

As the NHS landscape transforms, we must ensure that PrescQIPP continues to provide the resources to add value to the system. PrescQIPP represents you at a national level in an increasing number of significant areas of work, helping to keep you better

informed on key prescribing issues. We have representation on the RMOC MOPP, Low Priority Prescribing Group and are included in the recent Overprescribing workstreams.

In our third full year of operation as a CIC we continued to benefit from the hard work and innovation of all our staff, with support from the directors and Council of Members, whose commitment throughout the year has been invaluable.

It is rewarding to see our work referenced in a number of national documents such as the Public Health England Prescribed Medicines Review and the CQC Safer management of Controlled Drugs report. NICE have also provided endorsement statements for our e-learning packages based on NICE guidelines.

This year we continued to welcome new subscribers and are currently awaiting a decision from the Scottish health boards who are seeking central funding.

Our new website had over 103k visitors in the past 12 months and over 13,500 people enrolled on e-learning courses on a new separate improved e-learning platform.

We have seen the launch of two exciting new developments, a pilot for Face2Face training, and the announcement of the PrescQIPP Champions initiative to support commissioners to optimise the use of PrescQIPP resources and data locally.

Over the next 12 months we will continue to innovate with support resources for PCNs and ICS/STP data packs, combining primary and secondary care data. We understand the significant challenges faced by our community and remain grateful for the opportunity to work with and for you.

## OUR MISSION

To proactively help NHS organisations to improve medicines-related care to patients, through the delivery of robust, accessible and evidence-based resources. We will seek to put our members at the centre of our work, considering their collective thoughts, opinions and needs.

Our work will seek to balance responding to the challenges of the present, and the aspirations for improving systems of care in the future.

## Our vision

To be seen by NHS professionals as an exemplar for quality, safety, robustness and innovation.

## Our values

- Trust is the foundation of PrescQIPP: we are independent, impartial and honest.
- The patient is at the heart of everything we do.
- We take pride in delivering quality and value for money.
- Community is the lifeblood of our programme.
- We are receptive to the opinions of all stakeholders.

## Our pledges

- We will strive to constantly improve and build platforms to face challenges for the future.
- We will provide a wider ranging and more cost effective support.
- We will improve our understanding of our subscribers' needs and deliver better implementation resources.
- We will continue to find new ways to support sharing and dissemination of good practice.
- We will keep our subscribers at the heart of our work.



**PRESCQIPP SUPPORTS WORK ON THE BIG ISSUES AND HOT TOPICS IN MEDICINES OPTIMISATION, REDUCING THE AMOUNT OF LOCAL WORK THAT IS REQUIRED TO START TAKING ACTION.**

JANET KENYON, DEPUTY HEAD OF  
PRESCRIBING AND MEDICINES MANAGEMENT,  
VALE ROYAL CCG



# GOVERNANCE

Our Council of Members provides strategic oversight and ensures that the organisation is run for the benefit of the community. It is made up of the PrescQIPP directors, twelve members from across the PrescQIPP community, and four specialist expert members.

## Directors

- **Carol Roberts** - Chief Executive
- **Sajida Khatri** - Director of Medicines Optimisation and Deputy Chief Executive
- **Katie Smith** - Director of Clinical Quality
- **Kevan Wind** - Non-Executive Director
- **Carole Crawford** - Non-Executive Director

## Specialist members

- **Elizabeth Beech** - National Project Lead, Antimicrobial Resistance, NHS England
- **Dr Catherine Bennett** - Prescribing Lead, Cambridgeshire and Peterborough CCG
- **Gill Eddy** - Regional Technical Adviser, NICE
- **Dr Stephen Pike** - Clinical Lead for Medicines Management, NHS Coastal West Sussex CCG

## Community members

- **Laura Angus** - Strategic Lead Pharmacist, NHS Vale of York CCG
- **Susan Bamford** - Head of Medicines Optimisation, NHS East Staffordshire CCG
- **Gary Barnfield** - Head of Medicines Management, NHS Sheffield CCG
- **Richard Croker** - Deputy Director for Medicines Optimisation, NHS Devon CCG
- **Michael Dennis** - Head of Medicines Optimisation, NHS Great Yarmouth and Waveney CCG
- **Sanjay Desai** - Director of Medicines Optimisation, NHS Berkshire West CCG
- **Joanne Fitzpatrick** - Head of Medicines Optimisation, NHS Wakefield CCG
- **Jane Freeguard** - Head of Medicines Management, NHS Worcestershire
- **Dr Brian Hawkins** - Chief Pharmacist, Practice Unit, Cwm Taf University Health Board
- **Andrea Hollister** - Medicines Optimisation Lead, NHS Buckinghamshire CCG
- **Steve Hulme** - Director of Medicines Management and Business Continuity, NHS Southern Derbyshire CCG
- **Paula Wilkinson** - Chief Pharmacist, NHS Mid Essex CCG

For the Council of Members terms of reference and the biographies of each member, visit the [Governance page](#).

# YOUR VIEWS ON PRESCQIPP IN 2018/19

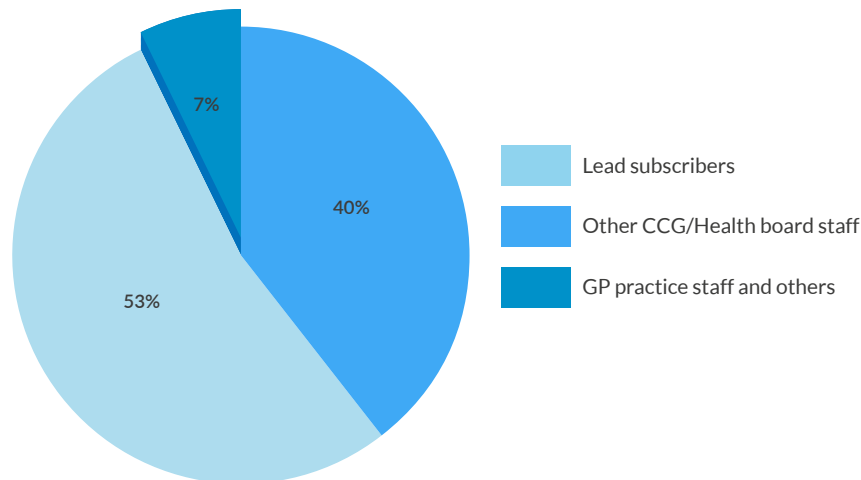


**Sajida Khatri**  
Director of Medicines  
Optimisation

In our last subscriber satisfaction survey, we sought more detailed feedback from the community about our performance and use of our resources over the previous 12 months. Although this resulted in a lower response rate - a reduction of 35% from the previous year - it yielded more useful information about where and how we can better support our subscribers.

## Respondents

The overwhelming majority of respondents (93%) were directly employed by our subscribing CCGs and Health boards, with a further 7% comprised of GP practice staff and others.



**AS A MM TEAM WE DO NOT HAVE THE RESOURCES TO BUILD COMPLEX SEARCHES AND WRITE BULLETINS. OUR FINANCE DEPARTMENT FINDS THE FINANCIAL DATA SUCH AS NCSO AND CAT M CONCESSIONS VERY USEFUL.**

JENNIFER FYNN, HEAD OF MEDICINES MANAGEMENT, NORTH EAST HAMPSHIRE AND FARNHAM CCG



## Overall satisfaction

All respondents agreed or strongly agreed that:

- They are satisfied as a subscriber
- PrescQIPP resources are of a high quality

All but two respondents agreed or strongly agreed that PrescQIPP is responsive to communications, and all but four said that they feel a part of the wider PrescQIPP community. This closely mirrors results of previous years, though we will continue to work towards ensuring that all respondents feel listened to and connected with the community.

## Accessed resources and support

The overwhelming majority of respondents had used our clinical guidance (98%), data and intelligence reports (90%) and implementation materials (73%) in the previous year.

Fewer than 50% of respondents had accessed the following:

- Primary care rebate governance and support (44%)
- Virtual professional support groups (41%)
- E-learning courses (41%)
- Best practice and innovation webinars (37%)
- Skills training (24%)
- Entered the PrescQIPP awards (7%)

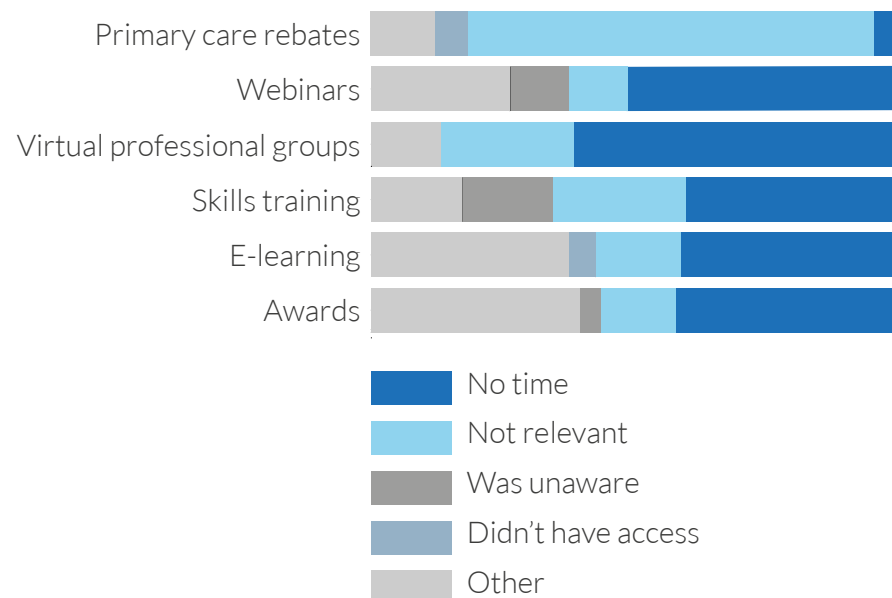
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**I HAVEN'T USED MANY OF THE TRAINING OPPORTUNITIES, BUT THIS IS LARGELY BECAUSE OF TIME PRESSURES AND BECAUSE MY ROLE ISN'T CLINICAL**

”

## Reasons for not accessing

We asked respondents why they hadn't used the full range of available resources and support over the previous year.



The main reason given was insufficient time available, followed by not feeling that it was relevant to their role. The latter was cited particularly in the case of primary care rebates (13 respondents), and several comments indicated that they did not sign up to such schemes.

Some respondents said that they had been unaware of the webinars, skills training and the opportunity to enter the awards, making it important to highlight these opportunities as well as possible in 2019/20.

## Website

The survey also sought feedback on the relaunched PrescQIPP website. Comments on the one thing that we could do in order to further improve it overwhelmingly highlighted the search function, and we have since carried out improvements to indexing.

We also asked respondents which resources they most frequently searched for.

Data (68%) was the most popular, followed by bulletins (55%), rebates (26%) and self care/OTC resources (23%).

Antimicrobial stewardship, out of stock bulletins and innovation came next (6%), with single respondents also highlighting e-learning and PAC.



### Bulletins

Evidence-based clinical guidance with a range of practical implementation materials for local delivery, all robustly quality assured with input from key stakeholders.

[VIEW BULLETINS >](#)

### Data and analysis

Sophisticated prescribing intelligence, across strategic, financial, project (scorecards), clinical (snapshots) areas.

[GO TO DATA AND ANALYSIS >](#)

Direct links to our full suite of data reports and bulletins are available on the home page, and we will continue our work to look at user journeys and ensure that all resources can be located as easily as possible.

**TAKES TIME TO NAVIGATE THROUGH AVAILABLE INFORMATION AND ENSURE WE ARE USING THE MOST VALUABLE PARTS.**

## Resources review

We will be conducting an in-depth review on the format and usability of our clinical guidance and implementation materials in 2019/20. 60% of those responding said that they would be happy to participate in a group to support this.

We received some useful initial thoughts that will be further explored through the process.

**OFTEN WE ARE HAPPY WITH MOST OF THE CONTENT OF BULLETINS ETC BUT WOULD LIKE TO ADD SOMETHING LOCAL SUCH AS PREFERRED FORMULARY CHOICE.**

## Summary

The annual survey is an important source of information, but we are committed to ensuring that subscribers can feedback throughout the year. Our helpdesk remains the quickest and easiest way to submit queries and suggestions to the team, while subscriber groups provide the opportunity for direct dialogue. Our work plan consultation and selection process seeks to ensure that items are as pertinent and valuable to the community as possible. We also hope that the new network of PrescQIPP Champions will prove to be an important source of knowledge and support for subscribers. We will always welcome your thoughts, so please don't hesitate to share them at any time.



# OUR PRODUCTS AND SERVICES

## Evidence-led and quality assured guidance and resources



- Bulletins and clinician-friendly briefings
- Implementation resources - clinical audit templates, presentations, posters and patient information letters, leaflets, posters and videos

## Training



- Short video skills training courses
- CPD certified e-learning courses with online assessments and certificates
- A wide array of clinical and skills webinars delivered live and available to rewatch online

## Collaboration and sharing



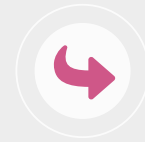
- Annual awards and event
- Regular virtual professional support groups
- Online operational documents repository 'Sharepoint'

## Data and intelligence



- Interactive and user friendly visual data reports based on national prescribing data to benchmark prescribing activity, monitor changes, identify priorities and see potential savings.
- Scorecards linked to our key projects
- Financial reports to monitor spend and growth
- Tools to support budget setting, RightCare, and monitor controlled drugs, and NCSO price concessions cost pressures
- Snapshots across a wide range of clinical areas
- Interactive maps offering instant visual intelligence
- Data support tools to help you with your work
- Commissioner level and practice level data reports, with individual practice visit and progress reports

## Primary care rebates



- Governance, assessment and monitoring and a tool to assess possible financial returns

# HIGHLIGHTS FROM 2018/19



**Kevan Wind**  
Non-Executive  
Director and Chair of  
Primary Care Rebates  
Board

## Rebates

It was a busy year for rebates. We updated our operating model, produced a 'Principles of Governance of Primary Care Rebates for Commissioners' document with recommendations for developing your own local policy for dealing with rebates, and produced a short video explaining our work in this area. All materials together with schemes assessed by the Board can be found on the [Primary Care Rebates webkit](#).

## Self care/Over the counter (OTC)

We significantly expanded our suite of self care resources, including several dynamic infographic posters and the first in a series of short video animations for patient awareness campaigns featuring our popular pill characters.



NHS England OTC guidance was published and we developed a suite of materials to support its implementation including:

- Bulletin and briefing
- Project planning tools
- Postcards, social media messages, and template press releases
- A patient information leaflet and a tool for making it available on clinical systems
- Resources for professionals: a “no prescription required” pad, receptionist checklists and a pharmacy label.



## Skills courses

Building on our [skills framework](#), we ran a number of expert-led bespoke training courses to upskill medicines optimisation teams. Sessions were delivered live and have been built into online courses for subscribers to access at any time.

- [Engaging and influencing clinicians to change practice](#)
- [Writing winning tenders](#)
- [Behavioural change and social marketing](#)
- [Risk management](#)

## E-learning

We became a Skills for Care endorsed provider of e-learning and launched three more CPD certified courses:



- Managing medicines in care homes: Course 3
- Reducing opioid prescribing in chronic pain
- Anticoagulation: Stroke prevention in Atrial Fibrillation

## 2018 PrescQIPP Awards

- **Gold and Patient safety:** [Nottingham North and East CCG](#), [Nottingham West CCG](#), and [Rushcliffe CCG](#)
- **Silver award and Utilising and driving technology:** [Leicester CCG](#), [East Leicestershire and Rutland CCG](#), [West Leicestershire CCG](#) and [Leicestershire Health Informatics Service](#)
- **Addressing problematic polypharmacy:** [East and North Hertfordshire CCG](#)
- **Adherence and waste:** [Northern Eastern and Western Devon CCG](#)
- **Working across integrated care systems:** [Birmingham and Solihull CCG](#)
- **The Big Idea Award:** [Wakefield CCG](#)

## Face to face training

Our Head of Education Sue Smith, delivered three pilot workshops to a group of London CCGs. Following very positive feedback, these comprehensive full day sessions are now available to commission by any subscriber or group of subscribers, covering Type 2 diabetes; Pain; and Anticoagulation.



**I FOUND THIS WORKSHOP TO BE WELL STRUCTURED WITH A CLINICAL UPDATE/ BACKGROUND INFORMATION PRESENTED FIRST FOLLOWED BY LOCAL DATA. SUE IS AN ENGAGING AND FRIENDLY PRESENTER.**



PrescQIPP 2018 Award winners

# OUR 2019/20 WORK PLAN



**Kate Smith**  
Director of Clinical Quality

The publication of our work plan follows an extensive consultation with our subscribers and a democratic selection. This process is essential in ensuring that the resources and support we deliver align as closely as possible with the priorities and needs of our community. Every item of our published clinical guidance is subject to rigorous [quality assurance](#) including strategic and quality peer reviews and stakeholder consultation.

“  
**GOOD QUALITY EASY TO USE  
 RESOURCES TO IMPACT LOCAL  
 PRESCRIBING CHOICES AND  
 SAFETY.**  
 GILLIAN BOOTHMAN, PRACTICE  
 PHARMACIST, BETSI CADWALADR  
 UNIVERSITY HEALTH BOARD  
 ”

<b>BNF 1 - GASTROINTESTINAL</b>	Lactase (Colief), simeticone (Dentinox Colic Drops) and gripe water for infantile colic	
<b>BNF 4 - CENTRAL NERVOUS SYSTEM</b>	Branded mesazaline prescribing	Gastroprotection advice with multiple antiplatelets
<b>BNF 8 - MALIGNANT DISEASE &amp; IMMUNOSUPPRESSION</b>	Melatonin	Modafinil
<b>BNF A2 - BORDERLINE SUBSTANCES</b>	Low priority prescribing - Vitamins and minerals	
	Nutrition: Enteral feeds/ONS	Dental products on FP10

## Our 2019/20 work plan continued

CARE HOMES	Covert administration: Update	Video for care home staff on enteral feeds/ONS	
	Pharmacy Technician Care homes / domiciliary care medication review and process reviews		
PAIN	NSAIDs	Dependency forming medications including opioids, analgesic, and benzodiazepines	Review of tapentadol
	Medicines safety: Medicines without harm	Low priority prescribing (LPP) guidance implementation	
GENERAL - CLINICAL	Medicines optimisation: Formulary/ shared care development across STP/ICS tool		Medicines safety resource pack for CCGs
	Specials: Alternative to specials database	Deprescribing overview	Acute kidney injury (AKI)
	Self care: Additional self care resources for patients	Waste: Prevent medicines waste in targeted drug groups	
GENERAL - NON-CLINICAL			

The [work plan tracker](#) shows the progress of our resources as they pass through the various stages of quality assurance, from drafting to publication.

## Our 2019/20 work plan continued

### SKILLS TRAINING

Understanding contracts and tenders - how to request tenders

Understanding drug budgets and prescribing incentive schemes

Negotiation, influencing and assertiveness

Medicines optimisation project management

Critical appraisal of clinical trials and evidence

How to use GP clinical systems (for medicines optimisation teams)

**INFORMATION IS PRODUCED TO A HIGH STANDARD ONCE AND THEN SHARED MAKES MORE FINANCIAL/CAPACITY SENSE.**

NICOLA SWINDELL, MEDICINES  
OPTIMISATION QIPP LEAD,  
MANCHESTER CCG

### Work plan breakdown:

- Skills and competencies - 18%
- QIPP/savings - 36%
- Clinical/therapeutic - 30%
- Non-clinical medicines optimisation - 13%
- Other - 3%

## FINANCE



**Carole Crawford**  
Non-Executive Director

At the end of February 2019, we finished the third year of trading as a community interest company. The company is showing a sustainable position as we face the forthcoming changes in NHS commissioning structures, and in particular the raft of CCG mergers which will dramatically reduce the overall number of our current subscribers.

While we continue to out perform on our budgets, we are cautious with financial planning and always striving to maximise subscriptions and minimise costs.

The new financial year is progressing as planned, and we are working with members to review our fee model to ensure that it is fair and sustainable within the new NHS structures, while continuing to offer exceptional value and return on investment for our community.

### Statement of income and retained earnings for the year ended 28 February 2019

	2019	2018
Turnover	£1,476,101	£1,137,004
Cost of sales	(£374,388)	(£382,336)
Gross surplus	£1,101,731	£754,668
Administrative expenses	(£842,420)	(£617,046)
Other interest receivable and similar income	£388	£63
Surplus before tax	£259,681	£137,685
Taxation	£64,871	£26,368
Surplus for the financial year	£324,552	£111,317
Retained earnings brought forward	£195,416	£84,099
Retained earnings carried forward	£519,968	£195,416

### Balance sheet as at 28 February 2019

	2019	2018
<b>Current assets</b>		
Debtors	£113,208	£92,589
Cash at bank and in hand	£804,903	£531,596
	<b>£918,111</b>	<b>£624,185</b>
<b>Creditors: Amounts falling due within 1 year</b>	(£205,421)	(£236,048)
<b>Net assets</b>	<b>£712,690</b>	<b>£388,137</b>
<b>Capitals and reserves</b>		
Capital contribution reserve	£192,721	£192,721
Profit and loss account	£519,969	£195,416
<b>Total equity</b>	<b>£712,690</b>	<b>£388,137</b>

## USEFUL LINKS

[PrescQIPP work plan tracker](#)

[PrescQIPP newsfeed](#)

[Quality assurance process](#)

[Stakeholder pages](#) - for people with interest in our work including patient groups, voluntary sector organisations, pharmaceutical companies and NHS professionals and networks.

[E-learning Hub](#) - with details of our CPD certified e-learning courses available for buy including:

- Practice medicines co-ordinators
- Polypharmacy and deprescribing
- Medicines use in care homes: Courses 1, 2 and 3
- Anticoagulation: Stroke prevention in atrial fibrillation
- Anticholinergic burden
- Managing medicines for adults receiving social care in the community: Courses 1 and 2
- Optimising medicines for adults with type 2 diabetes
- Reducing opioid prescribing in chronic pain

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**I FIND PRESCQIPP SENIOR MONTHLY BRIEFING A MASSIVE SUPPORT TO MY ROLE, HELPING ME KEEP ABREAST OF NATIONAL HIGH LEVEL INFORMATION.**

NICOLA CARTWRIGHT, ASSISTANT DIRECTOR  
MEDICINES MANAGEMENT, ST HELENS CCG

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## Contact us

Please feel free to email any queries, suggestions or comments to [help@prescqipp.info](mailto:help@prescqipp.info)

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**GOOD ROI, REBATES MORE THAN OFFSET COSTS.**

KATE NEEDHAM, ASSISTANT DIRECTOR OF  
MEDICINES OPTIMISATION AND DELIVERY,  
NORTH DERBYSHIRE CCG

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