

**GP MEDICINES OPTIMISATION PLAN (MOP) 2017-18****AUDITS****Quinine**

Practices are asked to assess all patients currently prescribed quinine (sulfate and bisulfate) with a view to stopping treatment.

Quinine is indicated for leg cramps although it has limited efficacy and safety issues. The MHRA issued a warning about the use of quinine in 2010 that recommended quinine treatment should be interrupted approximately every 3 months to reassess the benefit and that in patients taking quinine long term, a trial discontinuation may be considered.

Safety issues include drug interactions, toxicity in overdose and rare but serious side-effects such as thrombocytopenia.

A template form has been developed for this review, along with a letter to send patients and a patient information sheet.

The template form should be completed and returned to [MedicinesQIPP@dorsetccg.nhs.uk](mailto:MedicinesQIPP@dorsetccg.nhs.uk) no later than 28<sup>th</sup> February 2018.

**Anti-platelets**

Practices will be asked to audit patients taking anti-platelets (clopidogrel, prasugrel and ticagrelor), as part of a dual anti-platelet (anti-platelet plus aspirin) regime, to ensure that the duration of therapy is appropriate and that all prescriptions of limited duration have a stop date. While dual anti-platelet therapy has benefits in terms of reducing cardiovascular morbidity and mortality the risk of bleeding increases with increasing length of dual therapy.

A template form has been developed for this review that should be completed and returned to [MedicinesQIPP@dorsetccg.nhs.uk](mailto:MedicinesQIPP@dorsetccg.nhs.uk) no later than 28<sup>th</sup> February 2018.

**Payment**

On submission of the information detailed above, namely the following two items, practices will be paid £0.20/patient on the registered list, list size to be measured as at March 2018.

- Completed Quinine Audit Report Form ( £ 0.06/patient)
- Completed Antiplatelet Audit Form (£ 0.12/patient)
- Completion of both patient safety audits (£ 0.02/patient)

**GP MEDICINES OPTIMISATION PLAN (MOP) 2017-18****PRESCRIBING QUALITY MEASURES****Antibiotics**

There is a National Quality Premium for antibiotic prescribing in 2017/19; there are three parts to the indicator, parts b and c are related to primary care prescribing:

**Part b)**

Reduction of inappropriate antibiotic prescribing for UTI in primary care. Practices must achieve:

- i) A 10% reduction (or greater) in the Trimethoprim : Nitrofurantoin prescribing ratio based on baseline data (June 15-May16)
- ii) A 10% reduction (or greater) in the number of trimethoprim items prescribed to patients aged 70 years or greater on baseline data (June 15-May16).

**Part c)**

Sustained reduction of inappropriate prescribing of antibiotics in primary care. Practices must achieve:

- i) items per STAR-PU must be equal to or below England 2013/14 mean performance value of 1.161 items per STAR-PU.

More information about the National Quality Premium can be found here <https://www.england.nhs.uk/wp-content/uploads/2015/12/ann-b-qual-prem.pdf>

**Broad Spectrum antibiotics**

In order to maintain the good prescribing position in Dorset for broad spectrum antibiotics practices are asked to maintain a reduction in the number of items for co-amoxiclav, cephalosporins and quinolones as a proportion of total antibiotic prescribing. Practices must achieve:

- Equal to or below 10%

As part of the information sent out with these practice packs, information detailing baseline data and thresholds for 2017/18 is included alongside the practice's current position.

**Payment**

Practices meeting the outlined measures, having agreed these alongside any additional practice measures in conjunction with the Medicines Management team, confirmed by prescribing data up to and inclusive of March 31<sup>st</sup> 2018 will receive a payment of £0.12/patient on the registered list for achievement of the three indicators included as part of the National Quality Premium, £0.04/patient for achieving the broad spectrum antibiotic indicator, and £0.04/patient for achieving all four indicators, list size being taken as at March 2018.

To confirm participation in the MOP for 2017/2018 practices are asked to complete and return the GP declaration form by 30<sup>th</sup> April 2017.