

## **GP MEDICINES OPTIMISATION PLAN (MOP) 2018-19**

### **AUDITS**

#### **Amiodarone**

Practices are asked to assess all patients who are currently, or have received amiodarone in the last 6 months with an aim to ensure the need for continuing treatment is reviewed for all patients and that a stop date is added to the prescription if appropriate. All patients should receive 6 monthly monitoring of renal function, liver and thyroid function, in addition to an annual ECG and pulse check, and symptom check for pulmonary and visual side effects.

Amiodarone is a very effective antiarrhythmic drug, but pulmonary complications can lead to patient death. A similar audit carried out in West Hampshire suggests that some patients are given it for much longer than necessary. See the audit guidelines for more information.

A template form has been developed for this review, along with individual patient review forms, a template patient letter and 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 2019.

#### **Direct Oral Anticoagulants (DOACs)**

Practices will be asked to audit all patients taking a DOAC (apixaban, dabigatran, edoxaban and rivaroxaban), for non-valvular atrial fibrillation (AF), to ensure that the dose of therapy is appropriate and that all prescriptions have a documented indication. While DOAC therapy has benefits in terms of preventing stroke and systemic embolism, inappropriately dosed patients are at an increased risk of bleeding or clot formation where dosing is higher or lower respectively than the appropriate therapeutic dose. Dosing can depend on renal function, age and weight.

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 2019.

#### **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 October 2018.

- Completed Amiodarone Audit Report Form (£ 0.06/patient)
- Completed Direct Oral Anticoagulants (DOAC) Audit Form (£ 0.12/patient)
- Completion of both patient safety audits (£ 0.02/patient)

## GP MEDICINES OPTIMISATION PLAN (MOP) 2018-19

### PRESCRIBING QUALITY MEASURES

#### Antibiotics

There is a National Quality Premium for antibiotic prescribing in 2017/19, however NHSE plans to update the targets for 2018-9. 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 ? reduction in the Trimethoprim : Nitrofurantoin prescribing ratio
- ii) A ? reduction in the number of trimethoprim items prescribed to patients aged 70 years or older

#### 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 ?? Potentially 0.965 items per STAR-PU.

More information about the National Quality Premium can be found here

<https://www.england.nhs.uk/wp-content/uploads/2016/09/annx-b-quality-premium-14-07-17.pdf>

#### Broad Spectrum antibiotics

In order to meet the *Improvement & Assessment Framework* target 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 ??

#### Targets to be confirmed by NHSE

#### 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> 2019 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 October 2018.

To confirm participation in the MOP for 2018/2019 practices are asked to complete and return the GP declaration form to [MedicinesQIPP@dorsetccg.nhs.uk](mailto:MedicinesQIPP@dorsetccg.nhs.uk) by 31<sup>st</sup> May 2018.

## Payment Schedule Medicines Optimisation Plan: Prescribing Quality and Audit 2018/2019

Quality Indicator	Measure	Payment
Reduction in the number of antibiotics prescribed in primary care.	Equal to or below <b>new target*</b> Items per STAR PU	Practices must achieve all three of these indicators, included as part of the National Quality Premium, to qualify for the payment of £0.12 per registered patient
Reduction of Inappropriate antibiotic Prescribing for UTI in primary Care	A <b>new target*</b> reduction (or greater) in the Trimethoprim : Nitrofurantoin prescribing ratio (number of items)	
	A <b>new target*</b> reduction (or greater) in the number of trimethoprim items prescribed to patients aged 70 years or older	
Reduction in the number of items for co-amoxiclav, cephalosporins and quinolones as a proportion of total antibiotic prescribing.	Equal to or below the national threshold <b>new target*</b> as outlined in IAF guidance	£0.04 per registered patient
Delivery of all four indicators as specified	Achievement of all 4 indicators above	£0.04 per registered patient
<b>Total Payment Available for MOP</b>		<b>£0.20 per registered patient</b>

Audit	Payment
Amiodarone – Undertake an audit, using CCG provided template, of all patients prescribed amiodarone with a view to stopping treatment where appropriate	£0.06 per registered patient
DOACs – Undertake an audit, using CCG provided audit template, of all patients prescribed DOACs for AF to confirm appropriate dosing dependent on renal function, age and weight	£0.12 per registered patient
Complete both audits as specified	£0.02 per registered patient
<b>Total Payment Available for Audits</b>	<b>£0.20 per registered patient</b>
<b>Total Payment Available to Practices</b>	<b>£0.40 per registered patient</b>

\*Targets to be published by NHSE as part of the Quality Premium/IAF