

PRESCRIBING EFFICIENCIES – PAST, PRESENT AND FUTURE

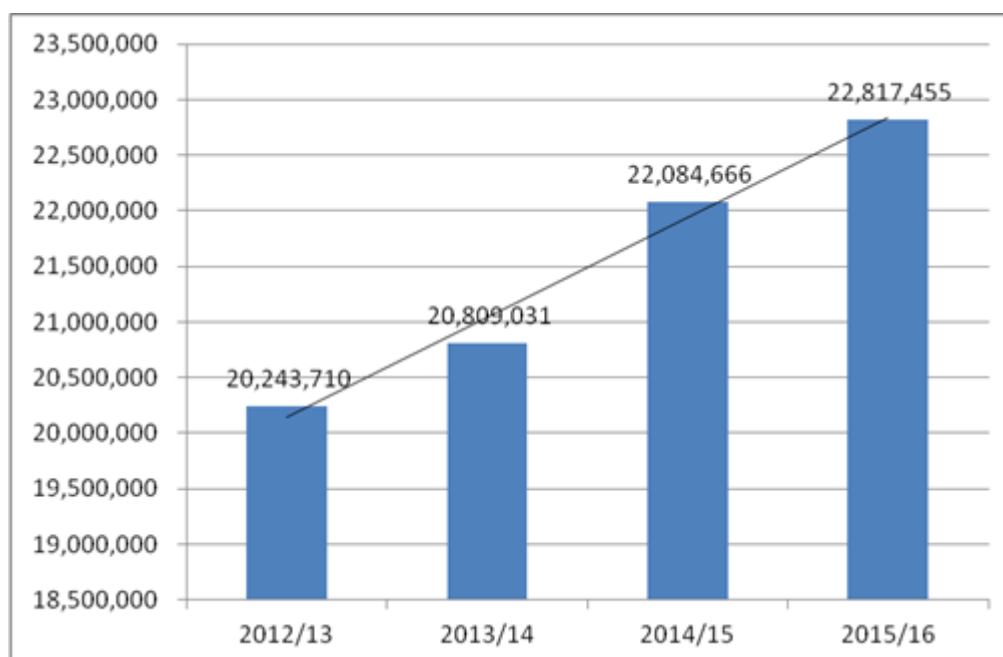
Aim

- 1.1 To inform the Integration Joint Board on Prescribing Efficiencies and show how, in 2016/17, proposed projects aim to achieve the £1m target set. Work to the beginning of March 2016 had achieved a gross saving of £616,000, excluding the GP Local Enhanced Service, primary care rebates and patent expiries. A longer Group chaired by Stephen Mather during 2015/16.

Background

- 2.1 The Medicines Resource Group (MRG) submits a budget proposal to the Clinical Executive Strategy Group annually in January and monitors expenditure against it throughout the year. All budget areas are expected to work to a savings plan and for the prescribing budget overall the savings target is £1M.
- 2.2 The GP prescribing budget for 2016-17 is 22,769,872; an uplift of 6.56% from 2015- 16.

Drug Growth in Primary Care



- 2.3 A number of cost pressures have been identified as likely to affect primary care prescribing:

- The continued move away from warfarin to alternative oral anticoagulants will have considerable impact on the drug budget (see MRG Budget prediction 2013-14). The growth in clinical use of new oral anticoagulants leads to a reduction in the requirement for laboratory monitoring of anticoagulants, reduces length of stay in hospital for patients who are being anticoagulated and reduces GP and community nurse time commitment for INR monitoring.
- Supply chain problems and changes in manufacturer

- Increasing elderly population and the corresponding increase in spend on drugs for treatment of long term conditions and cancer.

2.4 A series of documents are attached shows how the MRG is planning to achieve the savings target. The pharmacy teams will continue to work with clinicians to identify other opportunities for efficiencies. NHS Borders was fortunate to have benefitted from the patent expiry of a number of high volume drugs in the past. There are no significant drug patent expiries expected in 2016-17.

APPENDIX 1 – Past Present and Future – showing historical, current and potential efficiency projects.

APPENDIX 2 – Efficiency Savings 2016/17 – estimated savings proposed for 2016/17.

APPENDIX 3 – Prescribing Efficiency Schemes - in progress and proposed for 2016/17.

Summary

- 3.1 Integration Joint Board should note the estimated gross savings of £1,029,000 and the likelihood of achieving this saving.
- 3.2 Some elements of this paper have been presented at the Financial Position Oversight Group in June.

Recommendation

The Health & Social Care Integration Joint Board is asked to **note** the report.

Policy/Strategy Implications	Supports financial management
Consultation	Appendices 2 and 3 reviewed monthly at MRG
Risk Assessment	N/A
Compliance with requirements on Equality and Diversity	Complies
Resource/Staffing Implications	Financial implications

Approved by

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