

South Sefton Clinical Commissioning Group Southport and Formby Clinical Commissioning Group

Repeat prescription ordering service (RPOS)

Summary evaluation (September 2016 - October 2017)



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Introduction

In May 2016, our governing bodies approved a pilot¹ of a repeat prescription ordering service (RPOS) scheme. RPOS was designed to improve patient safety and reduce the cost of wasted medicines to the local NHS which are estimated at around £2 million each year, although we (NHS Southport and Formby Clinical Commissioning Group (CCG) and NHS South Sefton CCG) believe the real total is much higher and likely to be around £5 million.

This paper gives an overview of the first 13 months of RPOS, which has now been adopted by all 49 member GP practices across both Sefton clinical commissioning groups (CCGs).

Background

In addition to the cost of wasted medicines, other problems had also been identified by member GP practices and members of our medicines management team including patient safety.

As well as working to deliver the highest standards of patient safety at all times, we want to ensure our budget is used as effectively as possible in securing the best outcomes for as many patients as possible. That's why our joint medicines management team began a repeat prescription ordering pilot.

To begin with, our medicines management team carried out a range of activities and exercises to make sure RPOS would be effective. This included speaking with the public, patient groups and professionals to explain the reasons for RPOS.

Key points about the RPOS pilot:

- An equality impact assessment of the pilot has been central to informing the implementation of RPOS.
- Engagement with all stakeholder groups began at the point of initial design and was continued throughout to ensure views and experiences of how RPOS was working in practice were captured.
- Our joint medicines management team provided ongoing support to GP practices when they implemented the scheme.

An overview of these activities can be found in the RPOS pilot initial outcomes and findings document:

http://www.southseftonccg.nhs.uk/media/1946/final-rpos-pilot-3-month-evaluation-dec-16.pdf

If you don't have access to the internet please call 0151 317 8428 to request a copy of the three month evaluation report.

Art 19 1

¹ A small-scale, short-term experiment that helps an organisation learn how a large-scale project might work in practice

What is RPOS?

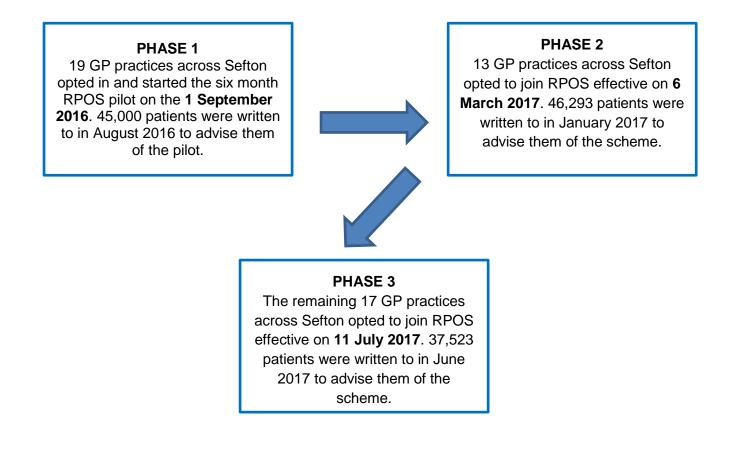
RPOS means that participating GP practices only accept repeat prescription requests direct from patients or carers (excluding blister pack patients), no longer accepting orders from pharmacies or other third party providers on behalf of patients.

How RPOS works

In total, 128,816 patients across Sefton on repeat medication were sent a letter relating to the RPOS scheme. The CCGs engaged Healthwatch Sefton for views on the content of the letter and an accompanying information leaflet.

The CCG funded the cost of sending the letters and leaflets to patients and production of additional leaflets and posters used in surgeries and community pharmacies.

Timeline





Engagement

Digital communications / feedback

Prior to introduction of the initial pilot, people could comment and ask questions using various digital communication channels including our websites (http://www.southseftonccg.nhs.uk/ http://www.southportandformbyccg.nhs.uk/) and Twitter feeds (@NHSSSCCG | @NHSSFCCG), along with Healthwatch Sefton's online feedback system (www.healthwatchsefton.co.uk). These communication channels continue to be available for people to use.

This feedback was mainly from patients with queries or issues about the RPOS scheme which were addressed through our Patient Advice and Liaison Service (PALS).

| Query or Complaint | Total received | Total resolved by PALS | Total forwarded to NHS complaints email |
|--------------------|----------------|---------------------------|---|
| Query | 589 | 437 | 152 |
| Complaint | 158 | 107 | 51 |

Table 1. - Breakdown of queries or complaints and outcomes following PALS intervention

Online survey

We developed a bespoke online survey to gain feedback and experiences from community pharmacies and GP practices about the scheme. The 32 GP practices in phase 1 and 2 and all community pharmacies across Sefton were invited to complete this online survey in May 2017, after phase 2 of the project.

Community pharmacy survey results

- Of the 33 responses received, 84.8% were completed by a pharmacist.
- 63.7% of responses rated the communications and support received by the medicines management team as good to excellent.
- Generally, it was felt that clearer communication and more support for patients, particularly vulnerable groups, would have improved things when the scheme was introduced.
- 69.7% of respondents felt that there had either been no change or definite improvements to systems, workload or both.
- 42.4% of respondents felt that the scheme had led to deterioration in how vulnerable patients' medication was managed
- Overall, 66.7% of respondents felt that the scheme had been positive.



Patient questionnaire

From the introduction of the scheme, the intention was to limit the impact on patients that required assistance with managing their medication, which for the purpose of the scheme and ordering medication, we deemed 'vulnerable patients'. In practice, the individual needs of each patient were considered on a case-by-case basis. Generally, most GP practices allowed vulnerable patient groups to telephone the surgery to order ongoing repeat prescriptions while several GP practices allowed community pharmacies to continue ordering prescriptions on behalf of their vulnerable patient groups.

Vulnerable patients

Following concerns from third parties, including Healthwatch Sefton and some pharmacists about how vulnerable patients had been managed since implementing the scheme, a small cohort of patients ('vulnerable' and non-'vulnerable') were surveyed focusing on their level of satisfaction of how they were dealt with by the GP practice during the transition period.

Our medicines management team developed a patient questionnaire to capture the views of a random selection of both vulnerable and non-vulnerable patients across both CCGs. The recording of specific feedback quotes (positive or negative) was encouraged to add a qualitative aspect to the report. This was completed, with patient permission, during domiciliary visits to review medication, over the telephone and at a 'Keep Warm Keep Well' event for Sefton residents. Patients were informed and permission given for anonymised data to be used as part of the evaluation process.

Total of 279,048 patients registered with a Sefton GP (Oct. 17 data)

Approximately 3231 (1.16%) patients, excluding blister pack patients, identified as vulnerable

Approximately 4654 (1.67%) patients are currently using a blister pack to manage repeat medication, across all Sefton GP practices

This gives a combined total of approximately 7885 (2.83%) patients who are either vulnerable or using blister packs across all Sefton GP practices

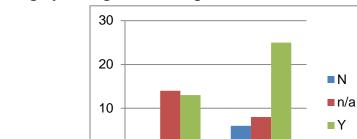


Results of patient questionnaire

The results from our patient questionnaire include feedback from 39 vulnerable patients and 29 non-vulnerable patients.

These results indicated that overall, the majority of patients whether vulnerable or non-vulnerable were satisfied with the process of (a) how the GP surgery managed the change and (b) how happy they were with the way their medicines were now managed. (See tables below.)

| | No | n/a | Yes | Grand Total |
|---------------------|----|-----|-----|----------------|
| Non - Vulnerable | 2 | 14 | 13 | 29 |
| Vulnerable | 6 | 8 | 25 | 39 |
| Grand Total | 8 | 22 | 36 | 68 |



Non

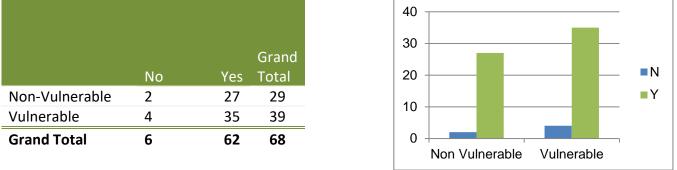
Vulnerable

Vulnerable

0

(Q3) - Were you happy with how the GP surgery managed the change?

(Q6) - Are you happy with the way your medicines are managed now?



The patient questionnaire results include feedback from two patients on the learning disability register (one considered vulnerable and one non-vulnerable).

Neither patient ordered prescriptions themselves, as this was done by their pharmacy or a carer.

Both reported they were happy with how their GP surgery had managed the change to the way their medicines were ordered and were also happy with how their medicines were managed now.

The data was collected after all 49 GP surgeries had adopted the scheme and over a period of 12 weeks a total of 68 questionnaires have been completed to date.

Further details about the results of the patient questionnaire can be found in our full evaluation document, available on request from the CCGs using the contact details on the back cover of this report.



Outcomes

Summary

The RPOS scheme has delivered significant benefits. In particular, RPOS has reduced spend on unnecessary medicines at participating GP practices by at least:

- £379,000 in south Sefton
- £111,000 in Southport and Formby

We believe the actual cost savings to be greater which will be discussed later in this report. This reduction in spend is the result of a significant reduction in the number of items prescribed to patients unnecessarily:

- GP practices show an average 1.23% reduction in items prescribed in south Sefton, equalling 44,124 items
- GP practices show an average 0.55% reduction in items prescribed in Southport and Formby, equalling 14,273 items

Patient access

GP practices have reported an increase in the uptake of online access for ordering prescriptions and other services. Informal feedback regarding the scheme suggests that this has led to a reduced workload for GP practice staff and maximised the efficiency of the repeat prescription ordering process.

Impact on GP surgeries

Practice managers, prescription staff and GPs involved in the RPOS scheme have been asked to feedback what impact the changes had on them.

Initially, the RPOS scheme increased the workload for practice staff, as they had to deal with patient queries and complaints when patients received the letter about the scheme. However, they did receive assistance from the CCGs medicines management team who provided ongoing support, as required.

There has subsequently been positive feedback relating to an overall reduction in workload, general practice staff having increased confidence in dealing with medication requests and an observation of patients starting to take responsibility for their medication.

Some practices report they continue to experience queries from patients relating to the ordering of medication. However, there has also been an increased uptake of online access for ordering prescriptions and making appointments which has reduced the time spent by reception staff in processing prescriptions, dealing with queries and booking patient appointments via the telephone. Ordering prescriptions via online access also provides a clear audit trail and avoids the risk of request slips going missing.

GPs have reported that they are dealing with less medication related queries and are typically very positive about the RPOS scheme. It is important that GP practices have a robust system in place to manage repeat prescription ordering for vulnerable patient groups, with dedicated reception staff taking responsibility for ongoing management.



Patient quality improvements

As part of implementing the RPOS scheme, our medicines management team supported GP practices to run monthly searches to identify patients who were not ordering their repeat medication. This has highlighted a significant number of patients with potential safety problems.

The safety issues highlighted pre date the introduction of the RPOS pilot, however, given the implications, this needs to be continually monitored.

As a result of the scheme, our medicines management team and GPs have introduced a new process to better identify and contact patients who may not be taking their medicines correctly. This means patients identified as being at risk of medicines safety issues are contacted directly, allowing a discussion as to why they may not be taking their medicines as prescribed. This also helps to continually consider how best to meet the needs of these patients in the future and significantly improves patient outcomes.



Summary and conclusions

Overall, results from the RPOS scheme are showing positive outcomes.

- In general, all GP practices have found the scheme effective in reducing dispensed items and in improving quality and safety issues relating to their patients medicines.
- A review of prescribing data shows a reduction of dispensed items for both CCGs when compared to our comparator CCGs and national items growth, which we assume, correlates to a reduction in spend. Some comparator CCGs show a similar trend in items reduction and, when comparing our prescribing data, we contacted our statistical neighbours and have been informed that they have undertaken similar schemes involving repeat prescription management, self-care policies, projects relating to Waste Management campaigns and the stopping gluten free products that would contribute towards the reduction of prescription items.
- Based on the available data for GP practices in NHS South Sefton and NHS Southport and Formby CCGs and comparing the 12 month period up to the introduction of the RPOS scheme against the 12 month period of its implementation we estimate cost savings to be £379k in south Sefton and £111k in Southport and Formby. However we think this is an underestimate when annual growth, population growth and NCSO (no cheaper stock obtainable) cost pressures are considered against the reduction in prescribing activity.
- Whilst there is broad support of the scheme amongst Sefton residents, people generally feel strongly that it should not disadvantage vulnerable patients and carers and there could have been improvements in its implementation.
- Whilst we tried to understand the experiences of GP practices involved in the scheme through an online survey, the response was low. Anecdotally, many practices have already reported a reduction in overall workload for both GPs and reception staff.
- Results from the community pharmacy online survey were mixed but 66.7% of respondents felt that outcomes from the scheme had been positive.
- There are approximately 7885 (2.83%) patients, including blister pack patients, deemed 'vulnerable' across all Sefton GP practices (0.25% of total population in NHS South Sefton CCG and 3.19% of total population in NHS Southport and Formby CCG). There are significantly more vulnerable patients in SFCCG and this may have affected the results, particularly as pharmacies can continue to order repeat medication for patients using a blister pack. Undertaking this RPOS scheme has enabled us to better understand our patient population with regard to vulnerability and medicines.
- Results from the patient questionnaire were generally positive and 89% of the vulnerable patient group questioned were happy with the way that their prescriptions are managed now. Although only 1% of vulnerable patients have been surveyed, these results make us feel more confident that generally, this group of patients have been well supported though this change.

We believe that for the vast majority of patients, the best person to order their repeat medication is the patient themselves and by putting patients back 'in charge' of their medication we are empowering them to understand and take control of their medical conditions and treatment.

Improving systems for repeat prescriptions brings benefits to providers, commissioners but most importantly to patients themselves. Any change to the system that tackles medicines waste will maximise efficiency gains and lead to more effective use of NHS resources and, we believe, improvement in patient safety.



Acknowledgements

The senior medicines management team would like to acknowledge all the hard work undertaken by GP practices, community pharmacies and the medicines management team in Sefton CCGs to support the smooth roll-out of this significant system change to ordering repeat prescriptions, to improve medicines use and safety in Sefton. We would also like to thank the CCG communications team and PALS for their invaluable support to patients and the medicines management team, throughout this programme.

The CCG would like to thank all stakeholders for their valued contribution, including Sefton Local Medical and Pharmaceutical Committees and Healthwatch Sefton for their input and comments which helped to shape many key aspects of the programme.



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