

## Data Source Reference Document

## Quality Prescribing Scheme Data

Based on Population of 270K. Current 250k BUDGET = Payment of £925 per 1000 patients

	Proposed payment per 1000 patients	100% achievement by all practices would require the following budget	Potential savings if implemented fully	Comments	Source
<b>PART 1: Antibiotic prescribing</b>	<b>£400</b>	£108,000	44,797	Linked to Quality Premium	from Mids and Lancs CSU QIPP document
<b>PART 2a: Antibiotic prescribing for UTI in primary care. Ratio of trimethoprim to nitrofurantoin prescribing</b>	<b>£150</b>	£40,500	0	Linked to Quality Premium	
<b>PART 2b: Antibiotic prescribing for UTI in primary care. Number of items prescribed for trimethoprim</b>	<b>£150</b>	£40,500	0	Linked to Quality Premium	
<b>PART 3: Hypnotics optimisation</b>	<b>£125</b>	£33,750	16,967		from Mids & lancs CSU QIPP document
<b>PART 4: NSAIDs</b>	<b>£100</b>	£27,000	44,337		from Mids & lancs CSU QIPP document
<b>Parts 1 to 4 = £249,750.</b>					
<b>PART 5: Low cost Blood Glucose Testing Strips</b>	<b>£150</b>	£40,500	127,275		extracted from diabetes dashboard
<b>Part 6: Lower cost branded buprenorphine patches</b>	<b>£125</b>	£33,750	175,000	Assumes 75% uptake of brand prescribing	epact data
<b>Part 7 : Diabetic pen needles</b>	<b>£125</b>	£33,750	39,803	Increase in lower cost needles from 30% to 60%	PresQipp data
<b>Part 8: Lower cost branded tiotropium inhalers</b>	<b>£200</b>	£54,000	82,861	increase to 50% uptake of preferred brand prescribing	epact data
<b>Part 9: Brand prescribing of inhalers</b>	<b>£125</b>	£33,750	200,000	Increase from 48.7% to 85%	epact data
<b>Parts 5 to 9 = £195,750.</b>					
<b>Total</b>	<b>£1,650</b>	<b>£445,500</b>	<b>603,766</b>		