

NHS Rotherham Clinical Commissioning Governing Body

Operational Executive – Date

Strategic Clinical Executive – Date

GP Members Committee (GPMC) – Date

Clinical Commissioning Group Governing Body - 07/12/2015

NHS Rotherham CCG 2016-17 prescribing cost growth

Lead Executive:	Ian Atkinson Deputy Chief executive
Lead Officer:	Stuart Lakin Head of Medicines Management
Lead GP:	Avanthi Gunasekera

Purpose:

To inform the Governing Body of the prescribing cost growth challenges for 2016-17 and of the measures introduced to contain and manage these cost pressures.

Background:

- The GP prescribing budget for 2016/17 = £42,841,309 (£46,790,892 including non GP prescribing)
- Budget for 2015/16 = £42,953,159 the CCGs begins the year with a deficit of - £111,850 on practice prescribing expenditure.
- Current cost growth = 6.92% if not reversed this has the potential to add an additional £2,964,618 to prescribing costs.
- The CCG is also experiencing very strong cost growth in areas that are not managed by GPs I.e. Nutrition and continence-catheters.

Analysis of key issues and of risks

. Prescribing cost growth.

For the best part of a decade Rotherham has benefitted from a very competitive prescribing cost growth compared to neighbouring CCGs/ PCTs. This has been achieved by;

- 5 service redesign products (Nutrition 1 + 2, continence, stoma, wound care), where prescribing was removed from the GP and transferred to the clinician responsible for making the intervention (2015/15 savings estimated £1,264,914)
- Managing the introduction of new drugs through the use of joint primary-secondary care therapeutic guidelines.

Over the last two years this strategy has been revisited as fewer new drugs are landing in primary care and there are no further areas of prescribing that can be transferred.

Prescribing cost growth has been fuelled over the last two years by

- Large increases in item's (volume growth).
- Rapid fluctuations in the cost of well-established generic drugs
- Drugs being discontinued by one manufacturer and re-launched as a new brand with a different manufacturer at a increased price.
- Continual drug supply problems with medication not being available at the drug tariff prices.

In response to these different challenges the MMT have;

- Introduced a range of branded generic drugs.
- Undertaken an extensive patient consultation exercise on the causes of medicines waste.
- Launched a medicines waste campaign
- Supported 12 practices to stop third party medicine ordering. A further 13 practices will have stopped third party ordering by April 2017.

RDTC data. Year to date April-September 2016/17

CCG	2016/17 Cost Growth
Doncaster	3.02%
Barnsley	2.41%
Sheffield	1.18%
Yorkshire and the Humber	1.07%
Rotherham	0.86% ↓
England	0.23%
Bassetlaw	0.03%
Wakefield	-0.3%

CCG	2016/17 Item Growth
Barnsley	4.80%
Rotherham	4.13% ↑
Doncaster	3.97%
Yorkshire and the Humber	3.30 %
England	2.84%
Sheffield	2.82%
Bassetlaw	2.72%
Wakefield	1.34

As of September 2016 Rotherham's prescribing cost growth had decreased to below the average for the Yorks and Humber regional average, despite item growth remaining relatively high.

Patient, Public and Stakeholder Involvement:

Patient engagement\consultation exercises have been undertaken and are on-going regarding medicines waste and the proposed self-care scheme.

Equality Impact:

In helping practices to redesign their repeat prescribing systems every effort has been made to ensure that no patients will be disadvantaged or excluded from ordering their medication.

Financial Implications:

If cost growth continued at the 2015/16 rate, an additional £3,000,000 would be required to fund prescribing this money would have to be found from other services the CCG contracts\ commissions.

Human Resource Implications:

None

Procurement:

None

Approval history:

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Recommendations:

.For information

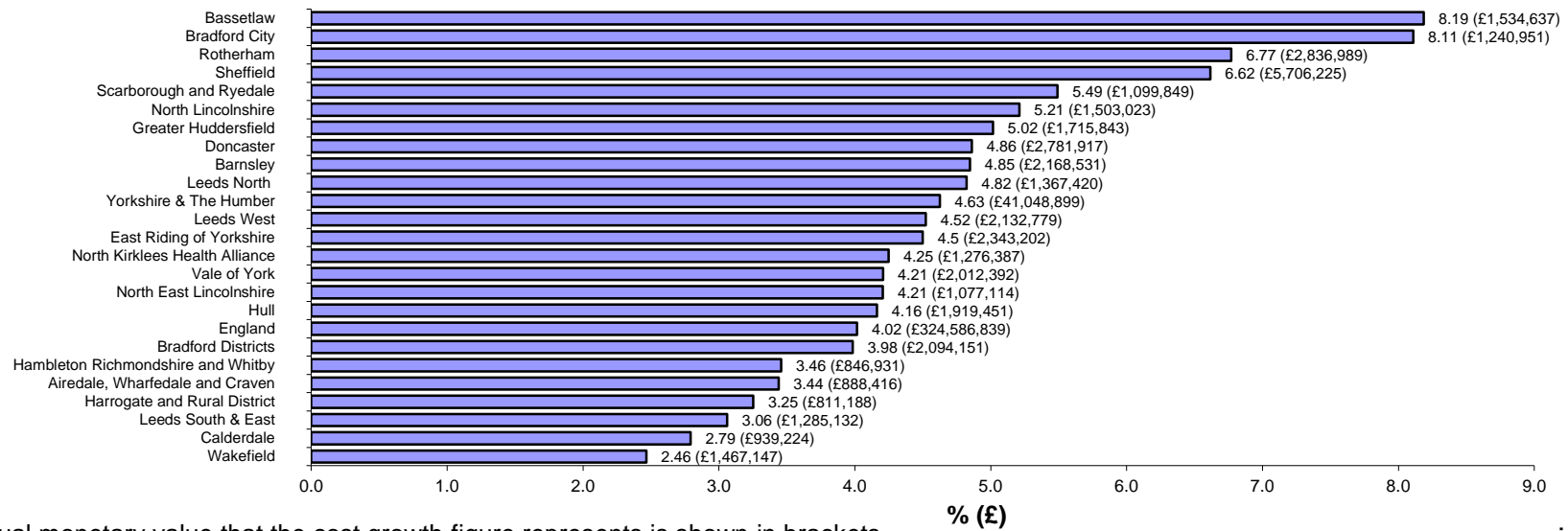
Medicines Management QIPP report September 2016.

End of year position 2015-16 (RDTC)

CCG	2015/16 Cost Growth
Bassetlaw	8.19%
Rotherham	6.77%
Barnsley	4.85. %
Sheffield	6.62%
Doncaster	4.86%
Yorkshire and the Humber	4..63%
England	4.02%
Wakefield	2.46%

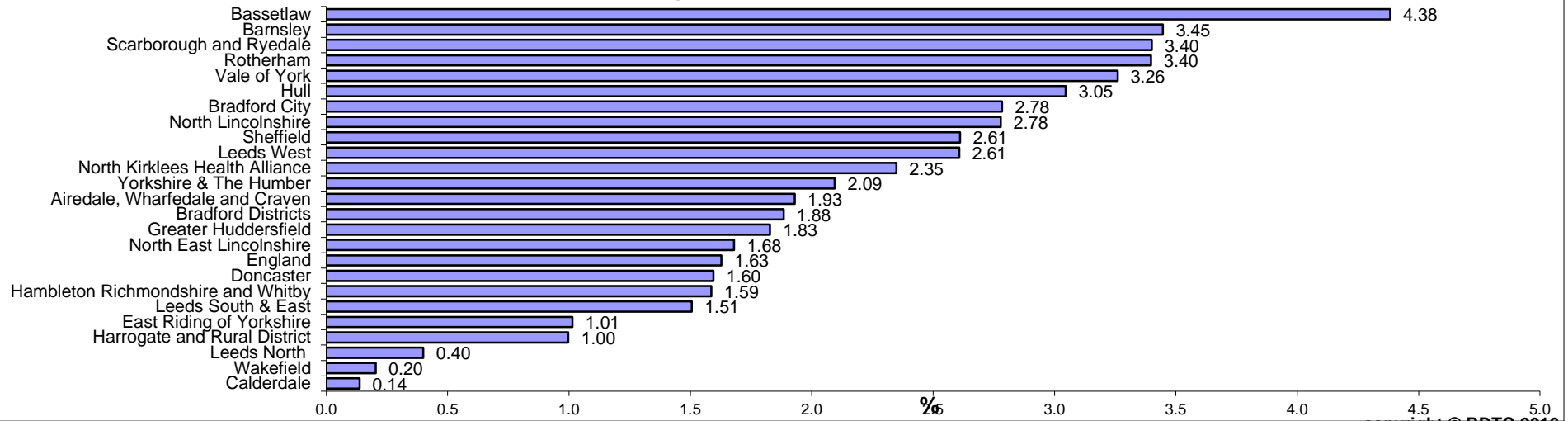
CCG	2015/16 Item Growth
Bassetlaw	4.38%
Barnsley	3.45%
Rotherham	3.4%
Sheffield	2.61%
Yorkshire and the Humber	2.09%
England	1.68%
Doncaster	1.60%
Wakefield	0.20%

Yorkshire & The Humber CCGs: Cost growth - April 2015 to March 2016



The actual monetary value that the cost growth figure represents is shown in brackets

Yorkshire & The Humber CCGs: Item growth - April 2015 to March 2016



PrescQIPP Data 2015-16

Cost Growth		Cost\Item		Item Growth	
ROTHERHAM	7.04%	CCG NOT SUBSCRIBED	£8.90	BARNSELY	3.58%
BARNSELY	5.09%	HALTON	£8.66	ROTHERHAM	3.40%
CCG NOT SUBSCRIBED	4.95%	DONCASTER	£8.00	CCG NOT SUBSCRIBED	2.47%
DONCASTER	4.83%	CCG NOT SUBSCRIBED	£7.92	WIRRAL	2.30%
WIRRAL	4.78%	WIRRAL	£7.85	CCG NOT SUBSCRIBED	2.22%
HALTON	4.76%	CCG NOT SUBSCRIBED	£7.85	HARTLEPOOL AND STOCKTON-ON-TEES	1.94%
CCG NOT SUBSCRIBED	4.70%	Cluster Average	£7.80	CCG NOT SUBSCRIBED	1.93%
Cluster average	4.42%	WAKEFIELD	£7.80	Cluster Average	1.89%
HARTLEPOOL AND STOCKTON-ON-TEES	4.01%	HARTLEPOOL AND STOCKTON-ON-TEES	£7.65	DONCASTER	1.51%
CCG NOT SUBSCRIBED	3.40%	STOKE ON TRENT	£7.59	HALTON	0.59%
STOKE ON TRENT	3.12%	ROTHERHAM	£7.30	STOKE ON TRENT	0.58%
WAKEFIELD	2.50%	BARNSELY	£6.75	WAKEFIELD	0.16%
<i>England</i>	<i>4.07%</i>	<i>England</i>	<i>£7.81</i>	<i>England</i>	<i>1.64%</i>

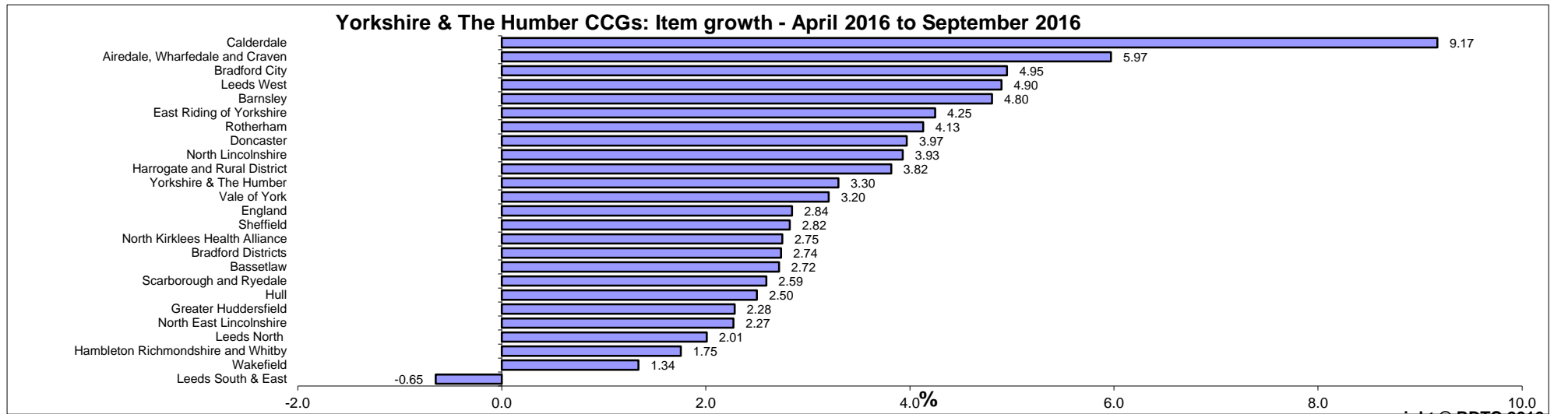
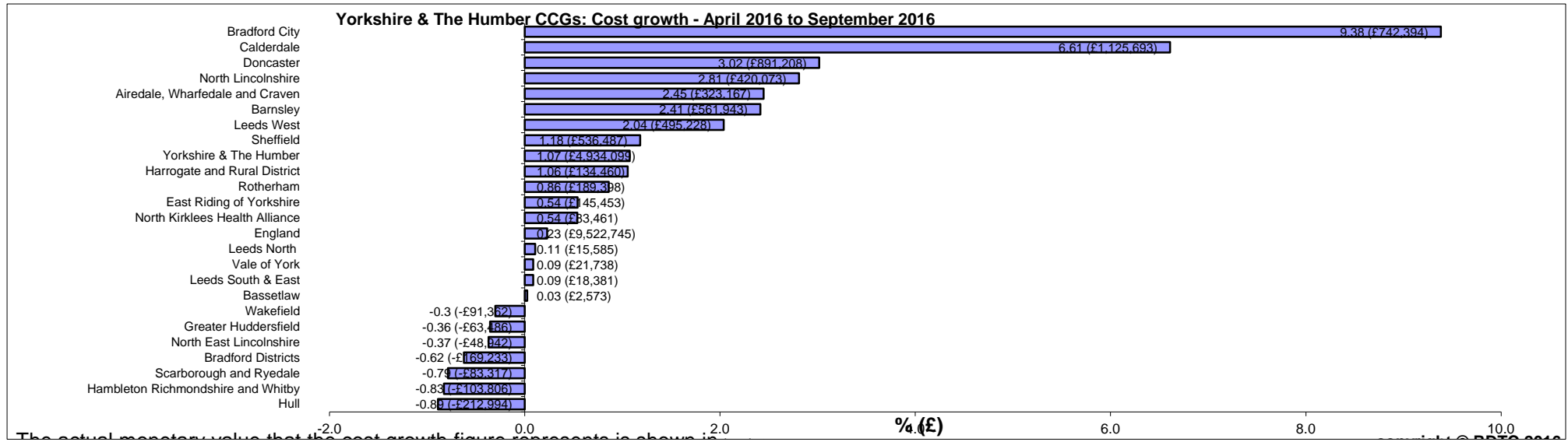
2016-17 Year to date position (September 2016-17)

RDTTC data. Year to date April-September 2016/17 (Table 1)

CCG	2016/17 Cost Growth
Doncaster	3.02%
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Forecast end of year cost growth -2.21% (-539,940)



PrescQIPP data (12 month data to September 2016) (Table 2)

Cost Growth		Cost\Item		"Cost per 1,000 Cost based AstroPUs"		Item Growth	
DONCASTER	3.67%	WIGAN BOROUGH	£8.82	HALTON	£54,676	BARNSELY	4.32%
ROTHERHAM	3.61%	HALTON	£8.60	DONCASTER	£53,693	ROTHERHAM	4.22%
HALTON	3.39%	DONCASTER	£7.97	ST HELENS	£52,746	ST HELENS	3.70%
BARNSELY	3.38%	ST HELENS	£7.81	BARNSELY	£51,705	CCG NOT SUBSCRIBED	3.39%
CCG NOT SUBSCRIBED	2.56%	WIRRAL	£7.79	CCG NOT SUBSCRIBED	£51,022	DONCASTER	2.95%
ST HELENS	2.11%	CCG NOT SUBSCRIBED	£7.74	WIGAN BOROUGH	£50,666	HARTLEPOOL AND STOCKTON-ON-TEES	2.79%
WIGAN BOROUGH	2.03%	WAKEFIELD	£7.73	STOKE ON TRENT	£49,533	HALTON	2.68%
HARTLEPOOL AND STOCKTON-ON-TEES	1.52%	HARTLEPOOL AND STOCKTON-ON-TEES	£7.54	ROTHERHAM	£48,098	WIGAN BOROUGH	1.94%
WIRRAL	1.39%	STOKE ON TRENT	£7.44	WAKEFIELD	£46,843	WIRRAL	1.74%
STOKE ON TRENT	0.83%	ROTHERHAM	£7.49	WIRRAL	£46,280	STOKE ON TRENT	1.64%
WAKEFIELD	0.31%	BARNSELY	£6.70	HARTLEPOOL AND STOCKTON-ON-TEES	£45,837	WAKEFIELD	0.28%
Cluster average	2.15%	Cluster average	£7.63	Cluster average	£50,083	Cluster average	2.60%
England	1.44%	England	£7.65	England	£41,762	England	2.17%

QIPP Work Streams (Table 3)

	Annual Target	Savings to date (Sept 2016)	Comments										
Branded Generics													
Mesalazine/asacol to Otasa	£44.5K	£34,845	% of branded generic beginning to decline new patients is not being kept on the recommended brand.										
Quetiapine mr to Biquelle mr	£73K	£19,803											
Tolterodine to Neditol XL	£66K	£31,100											
Ropinerole XL to Repinex XL	£31K	£5,836.											
Stalevo to Sastravi (or Stanek)	£44k	£9,237											
Butec	£78.5K	£59,478											
MST to Zomorph	£4K	£236											
ALL Oxycodone MR tabs and immediate release caps to Longtec and Shortec		£3071											
TOTAL		£163,607											
Projects													
Pen needle switch	47K	£17,533	A mass pen needle switch has been done (2015/16 spend on needles was £191,979.06 for 19,447 items –average cost per item =£9.87. If formulary used it would be £5.95 per item or 100 so we would envisage this cost to reduce by £76,270. If approx. 2/3 of patients switched we would project an 47k saving.										
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Apr -Sept 1617	PCT ROTHERHAM CCG	All Pen Needles	9,926	£78,024.06																									
Naproxen EC to Plain					100K	£54,890																							
Vitamin D "do not prescribe maintenance"					100K	£67,720																							
Self-Blood Glucose Monitoring					70K	£14,258	Meter swaps shops have been completed 6 practices more are planned.																						
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Emollient swaps Diprobase to Epimax, E45 to Exocream and Doublebase to Isomol						£5,065																							
Aripiprazole 30mg OD to 15mg 2OD					£18,900	£5,233	<table border="1"> <thead> <tr> <th>Period Name</th> <th>Total Items</th> <th>Total Act Cost</th> <th>Saving</th> </tr> </thead> <tbody> <tr> <td>Jan-16</td> <td>15</td> <td>£1,332.24</td> <td></td> </tr> <tr> <td>Feb-16</td> <td>18</td> <td>£1,620.21</td> <td></td> </tr> <tr> <td>Mar-16</td> <td>19</td> <td>£1,627.16</td> <td>PEAK</td> </tr> <tr> <td>Apr-16</td> <td>18</td> <td>£1,569.97</td> <td>£57.03</td> </tr> </tbody> </table>			Period Name	Total Items	Total Act Cost	Saving	Jan-16	15	£1,332.24		Feb-16	18	£1,620.21		Mar-16	19	£1,627.16	PEAK	Apr-16	18	£1,569.97	£57.03
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			May-16	16	£1,240.70	£386.30
			Jun-16	16	£799.32	£827.68
			Jul-16	12	£524.94	£1,102.06
			Aug-16	8	£229.73	£1,397.27
			Sep-16	8	£164.05	£1,462.95
SBGM Tamsulosin MR tabs to MR caps	30K					
Total Projects		£164,699				
Category M		£754,456				
Self-Care	Not calculable	Planned launch early 2017				
Cessation of third part ordering	Not calculable	Awaiting data				
Total		£1,082,762				

Analysis

Rotherham finished 2015/16 with the second highest cost growth in South Yorkshire (6.8%) and third highest item growth (3.4%). PRESCQIPP data demonstrated that Rotherham had the highest cost growth in the cluster (7.04%) and the second highest item growth (3.40%).

As of month 6 (September 2016/17) Rotherham's prescribing cost growth at 0.86%% is below that of Doncaster (3.02%), Barnsley 2.41%, and Sheffield (1.18%), and the regional average (1.07%) but above that of that of Bassetlaw (0.52%) and Wakefield (-0.37%) PRESCQIPP data has Rotherham's 12 month cost growth at (3.61%) = 2nd of the 11 CCGs in the cluster.

Item growth (4.13%) remains stubbornly strong the RDTC report places Rotherham 7th from 23 Yorkshire & Humber CCGs, although this is an improvement on previous months. PRESCQIPP data shows Rotherham to have the second strongest item growth in the cluster.

Barnsley, Bassetlaw and Sheffield have made substantial investment in their Medicine Management offers during 2016/17.

The MMT are working actively with 12 practices covering 56% of Rotherham's population, to redesign their repeat prescribing systems. The work programme involves maximising patients ordering medication online, maximising the potential of EPS repeat dispensing and stopping third party ordering, all 12 practices have now implemented these system changes. A further 13 practices will have stopped third party prescription ordering and redesigned their repeat prescribing systems by 1st April 2017. Online prescription ordering requests have risen by 15% from April to September 2016 and practice data shows that there have also been big increases in online ordering in October. The impact of this work stream will not be become fully apparent until November's outturn data is available expected January 2017.

There are only two areas of cost growth attributed to new products these are;

New oral anticoagulants (NOACs) £381,633 (54%) annual cost pressure

Antidiabetic drugs £320,586 (18%) annual cost pressure

Both of these cost pressures where predicted, and efforts have been made in conjunction with TRFT to control the cost growth of NOACs with very limited success, although growth does mirror the national picture.

There are a number of drugs were large price increases are resulting in a subsequent cost pressure this are detailed below

Drug	Cost\item previous 12 months	Cost\item current12 months	12 cost growth	Comment
Lercanidipine	£1.82	£7.19	£100,484	Prescribers will be directed to an alternative Calcium antagonist
Procyclidine	£3.19	£20.01	£63,192	No alternative.
Nefopam	£11.07	£53.39	£530,088	No alternative
Trazodone	£19.63	£23.89	£59,711	Once established switching patients is difficult
Trimipramine	£91.55	£253.38	£43,538	Patients to be reviewed
Fludrocortisone	£2.13	£21.51	£43,839	No alternative
Hydrocortisone	£151.87	£179.13	£58,462	No alternative
Total			£899,314	

- Branded generics

12 branded generics will be introduced during 2016/17, with the aim of reducing prescribing costs. Patients will be switched to the preferred brand by the Medicine Management Team, practice computers have been programmed to remind prescribers with a “pop-up” message to prescribe the preferred brand, 10 schemes have been delivered to date. Unfortunately the early switches are not being maintained by practices and the percentages of patients on the recommended brands are showing signs of decline. Prescribing decision software would help maintain prescribing rates.

Estimated savings = £163,607

- Practice Prescribing Projects

Up to 12 projects will be delivered across all Rotherham practices to improve both the cost effectiveness and quality of prescribing, 7 schemes have been delivered to date.

Estimated savings = £164,699

- Stopping Third Party Ordering

To date 12 practices have stopped third party ordering this will have increased to 25 by April 2017

Estimated savings.

Stuart Lakin
Head of Medicines Management
NHS Rotherham CCG.
November 2016