# Prescribing in general practice in Scotland

Self-assessment checklist for NHS boards





Prepared for the Auditor General for Scotland January 2013

## **Auditor General for Scotland**

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She is responsible for investigating whether public spending bodies achieve the best possible value for money and adhere to the highest standards of financial management

She is independent and not subject to the control of any member of the Scottish Government or the Parliament.

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The following bodies fall within the remit of the Auditor General

- directorates of the Scottish Government
- government agencies, eg the Scottish Prison Service, Historic Scotland
- NHS hodies
- further education colleges
- Scottish Water
- NDPBs and others, eg Scottish Enterprise.

Audit Scotland is a statutory body set up in April 2000 under the Public Finance and Accountability (Scotland) Act 2000. It provides services to the Auditor General for Scotland and the Accounts Commission. Together they ensure that the Scottish Government and public sector bodies in Scotland are held to account for the proper, efficient and effective use of public funds.

# Self-assessment checklist for NHS boards

- 1. Audit Scotland published its national report, Prescribing in general practice in Scotland, on 24 January 2012. This checklist sets out some of the high-level practical issues around prescribing in general practice raised in our main report. NHS boards should assess themselves against each statement and consider which statement most accurately reflects their current situation. This approach will enable boards to identify the actions they need to take forward.
- 2. The last column in the checklist can be used to record sources of evidence and supplementary comments to support your assessment or to highlight areas of interest.

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#### **Assessment of current position**

		No – action needed	No – but action in hand	Yes – in place but needs improving	place and working	Not applicable	Comments
W	e have measures in place to:						
•	reduce unnecessary drug wastage						
	<ul> <li>we are aware of the amount of unused drugs returned to pharmacists in our area and we work with GPs and others to reduce the unnecessary waste of drugs</li> </ul>						
	<ul> <li>we encourage patients to value their medication and comply with the treatment regime recommended by their GP</li> </ul>						
	<ul> <li>we support GPs to ensure that their repeat prescribing systems are effective.</li> </ul>						
•	reduce the use of drugs considered less suitable for prescribing						
•	increase generic prescribing where appropriate						
•	encourage GPs to only prescribe more expensive versions of drugs to those patients who have a clinical need for them.						

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	No – action needed	No – but action in hand	Yes – in place but needs improving	working	Not applicable	Comments
We have examined our level of prescribing support staff in relation to the level of prescribing and spending in our area.  We have considered whether to prepare a business case for making additional prescribing support available as part of an invest to save initiative.						
We are implementing Scottish Government guidance to improve the quality of prescribing for people who have multiple illnesses in old age and need to take a lot of different drugs.  We are using the prescribing information system to help GPs identify patients at most risk of drug interactions.  We are supporting GPs to work with other health professionals to review the medication of patients most at risk of drug interactions and side effects.						
We are using the information available to us through ISD Scotland, particularly by linking CHI numbers and prescribing data, to identify geographical areas where particular drugs appear to be under-prescribed or over-prescribed.  We are using this information to target prescribing support resources to areas where they will have the most benefit and improve longer-term outcomes						

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	No – action needed		working	Not applicable	Comments
We are working with GP practices to help them reduce the unnecessary use of antibiotics.					

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