

Faculty Examples

EXAMPLE A

Improving safety of high risk medicines within a GP practice in East London

ENTRY TITLE	Improving safety of high risk medicines within a GP practice in East London
DESCRIPTION	Develop and implement a policy for high risk drug (HRD) use in a GP practice to minimise the risk of significant untoward incidents.
ENTRY SUMMARY	<p>In response to a patient suffering a significant untoward incident (SUI) from a repeat prescription for a high risk drug (HRD), the GP practice involved asked me to support them in developing and implementing a HRD policy to minimise future risk to the practice in this area.</p> <p>I reviewed the literature around safe prescribing of HRDs and wrote a project plan covering the changes required by both the clinical and non-clinical GP practice teams to implement national priorities for HRD safety. I presented the plan to the GP partners for approval and gained agreement to extend the boundaries of the HRD policy to include clinical and non-clinical staff involved with managing prescriptions for HRDs. I developed the HRD policy, interpreting national patient safety alerts and applying their recommendations in to a practical policy to improve standards in using HRDs across the practice.</p> <p>Working one day a week as an acknowledged member of the GP practice team, I discussed the new HRD policy with a range of staff members to identify learning needs about HRDs. I then prepared and implemented 2 learning events, one for clinicians and one for non-clinical staff to support policy implementation.</p> <p>Following completion of the HRD policy I developed a HRD audit tool and standards for HRD safety, by consensus with the GPs, to monitor implementation of the policy.</p>

MAPPINGS

Cluster 1: Expert Professional Practice

Competency: 1.2 DELIVERY OF PROFESSIONAL EXPERTISE Impact Statement
In this project I was accountable for the delivery of a professional service directly to a GP practice team to improve use of high risk medicines within the practice.
Competency: 1.4 PROFESSIONAL AUTONOMY Impact Statement
I interpreted national patient safety alerts and applied their recommendations in to a practical policy and associated audit in order to establish goals and measure standards for use of high risk medicines for the GP practice team.

Cluster 2: Teamwork and Consultation

Competency: 2.2 TEAMWORK AND CONSULTATION Impact Statement
During this project I worked one day a week as an acknowledged member of the GP practice team. I participated in clinical meetings and responded to medicines queries from practice staff.

Cluster 4: Management

Competency: 4.1 IMPLEMENTING NATIONAL PRIORITIES Impact Statement
I shaped the response of the GP practice team to national priorities for safety of high risk medicines.
Competency: 4.4 MANAGING RISK Impact Statement
In response to a patient suffering a significant untoward incident (SUI) from a repeat prescription for a high risk drug (HRD), I developed and implemented a HRD policy to minimise future risk to the practice in this area.
Competency: 4.7 MANAGING CHANGE Impact Statement

I successfully managed a process of change for the GP practice team by developing and agreeing a comprehensive project plan that included all clinical and non-clinical staff involved with managing prescriptions for high risk medicines. I communicated the project plan widely and identified and addressed learning needs from across the GP practice team.

Competency: 4.8 WORKING ACROSS BOUNDARIES
Impact Statement

Recognising that non-clinical staff have responsibilities for technical aspects of managing repeat prescriptions for high risk medicines I sought and gained agreement from the GP partners to extend the boundaries of the project to include the clinical and non-clinical practice teams.

Cluster 5: Education, Training and Development

Competency: 5.3 CONDUCTING EDUCATION AND TRAINING
Impact Statement

I shadowed non clinical staff handling requests for repeat prescriptions for high risk medicines and I talked to them about potential medicines safety issues to assess their learning needs. I then planned a series of effective learning experiences tailored separately to clinicians and to non-clinical staff to support implementation of the new high risk medicines policy.

Competency: 5.5 LINKS PRACTICE AND EDUCATION
Impact Statement

I participated in education and training in an external GP practice.

Cluster 6: Research and evaluation

Competency: 6.1 CRITICAL EVALUATION
Impact Statement

I reviewed the literature around safe prescribing of high risk drugs (HRDs), wrote a project plan to apply the findings in a GP practice and presented the evidence and the project plan to the GP partners.

EXAMPLE B

QIPP prescribing audits

ENTRY TITLE	QIPP prescribing audits
DESCRIPTION	Plan and undertake appropriate audits of topics included in the national Quality, Innovation, Productivity and Prevention (QIPP) medicines use and procurement work stream to support a GP practice with meeting QIPP targets.
ENTRY SUMMARY	<p>I reviewed the literature around medicines management options recommended by NICE to support the national QIPP medicines use and procurement work stream. I also reviewed the GP practice prescribing data against national and local QIPP medicines targets and prioritised the QIPP topics with the greatest potential for prescribing change to improve the practice's performance against QIPP targets.</p> <p>I met with the GPs and presented a range of options for QIPP audits and we agreed a project plan for undertaking the audit work and for target audit standards.</p> <p>Using complex searching on the GP computer system I identified patients on high cost statins, high cost renin angiotensin system (RAS) medicines and on blood glucose test strips. I exported clinical data from the GP computer system in to excel and then undertook further manual checks in patients' clinical records to identify those with the potential to switch to low cost alternative medicines to support QIPP targets.</p> <p>I documented recommendations for prescribing change in these patients and fed back my suggestions to the relevant GPs for review and action. Following the audits, I identified potential annual cost savings of £10,598 towards meeting the practice's QIPP productivity targets.</p>

MAPPINGS

Cluster 1: Expert Professional Practice

Competency: 1.3 REASONING AND JUDGMENT Impact Statement
I analysed GP prescribing data in line with national and local QIPP medicines targets and compared options for undertaking audits to improve the practice's performance against QIPP targets.

Cluster 6: Research and evaluation

Competency: 6.1 CRITICAL EVALUATION Impact Statement
I reviewed the literature around medicines management options recommended by NICE to support the national QIPP medicines use and procurement work stream and critically evaluated the options with the greatest potential for prescribing change in the specific GP practice I was working in.
Competency: 6.3 DEVELOPS AND EVALUATES RESEARCH PROTOCOLS Impact Statement
I designed a rigorous protocol to improve the practice's performance against QIPP targets.
Competency: 6.4 CREATES EVIDENCE Impact Statement
I generated evidence for presentation to the GPs in the practice about patients with the potential to switch to low cost alternative medicines to support QIPP targets.
Competency: 6.5 RESEARCH EVIDENCE INTO WORKING PRACTICE Impact Statement
Using the evidence I created about patients with potential for prescribing change in order to meet QIPP targets, I applied the findings to prepare suggestions for change in individual patients and fed back my recommendations to the relevant GPs for review and action. Following the audits, I identified potential annual cost savings of £10,598 towards meeting the practice's QIPP productivity targets.