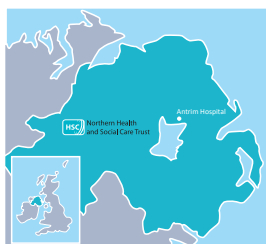


Pharmaceutical Clinical Effectiveness Programme - The Role of STEPSelect

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Introduction

In order to optimise medicines use, the procurement process must be based on safety and quality to deliver both health gain and economy. To this end a novel system was developed to namely Safe Therapeutic Economic Pharmaceutical Selection (STEPSelect). Further it is important to optimise use at the point of prescribing and in the Netherlands a decision has been developed for prescribing during patient consultation.

Stage 1: Clinical Evaluation

- Usually already completed by Dutch colleagues (Digitalis)
- Review evidence supplied by Pharmaceutical Industry:
Additional to the Literature Review (STEPSelect) & best evidence
- Assign scores to each product and relative weights to each selection criteria
- Ranking of chemical entities to proceed to Stage 2

Stage 2: Safety & Risk Assessment

- Product samples obtained from Industry
- Assessed using modified versions of national QC and Risk Assessment tools for Medicinal products:
Product Quality and Fitness for Purpose (PQFFP) & Medicines Error Potential Assessment (MEPA)
- PQFFP (Pass/ Fail) ; MEPA (Low, Med, High)
- Ranking of chemical entities & MEPA scores to proceed to Stage 3

Stage 3: Budget Impact Analysis

- Annual usage data obtained across primary & secondary care to allow comparison of products within the same class
- Ranking of chemical entities to proceed to Stage 4
- Guidance commenced - will inform service of products suitable for prescribing first line in NI

Benefits

- Improved Safety:
Full product integration between primary & secondary care
Reduced patient confusion
Improved concordance
- Improved Quality:
Drug selection based on safety & efficacy, then cost
- Improved Efficiency:
Cost-effective drug selection
Reduced stockholding & reduction of out of date stock
- Robust, Transparent, Defensible

Efficiency Gains

CSR 2004 – 2007 £55 million
CSR 2008-2011 £40 million
2010-2011 primary care extra £41 million
2004-2011 £150 million
Secondary care £ 16 million
Return on Investment 1:25

Hospital Prescribing £ per need weighted patient (McKinsey Report)

N.Ireland	£58
N.Ireland 7%	£54
N.Ireland 16%	£50
England	£64

Interactive Website

- Tablet devices for Expert Group members
- Project mentor
- Project key for limited access for special target groups
- e-sessions to highlight choices for special interest groups
- Comprehensive stakeholder input via these interactive mechanisms

Summary

- Supports goal oriented therapeutic navigation within prescribing process: from complaint or disease to treatment.
- GP is driving force and is responsible for minor adjustments
- Supports multisource national, regional and/or local prescription formularies
- National guidelines and Patient information leaflets
- Integration of a national "Drug Dictionary"
- Prospective Medication Surveillance is integrated
- Now used in 65% of GP Practices in Netherlands

Conclusion

The STEPSelect process has contributed significantly to the benefits of the Pharmaceutical Clinical Effectiveness Programme based on safety and quality principles with full stakeholder ownership. When combined with Prescripitor it gives a comprehensive optimised medicines selection and prescribing point of use system

References:

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