

ScriptSwitch

Introduction

ScriptSwitch is a computer program that interacts with GP Clinical Systems and operates at the point of prescribing to promote rational prescribing choices and adherence to local guidelines. The PCT has offered ScriptSwitch to all practices for the last five years.

ScriptSwitch Message Profile

The lead undertakes monthly reports of any switches in the local ScriptSwitch message profile that result in negative savings, following monthly national updates to prices. These ScriptSwitch messages are locally amended to maintain cost effective choices. The ScriptSwitch profile is amended centrally and uploaded automatically on to GP Clinical Systems.

There would be no value in undertaking these updates more frequently than monthly because prices are amended monthly via the drug tariff and MIMS and these are fed nationally into the Multilex and EMIS drug databases. The drug databases are updated on practice systems at various intervals by GP practices, so ScriptSwitch savings seen by GPs at practice level are in relation to the current version of their drug database. Where these practice updates are delayed a negative saving for a particular switch from the ScriptSwitch message profile may be displayed and cause GPs to perceive that the ScriptSwitch message profile is out of date when this isn't the case. Some switches to branded generics are based on an agreement that those companies will amend their price if generic prices change and make the switch less favourable. This can take two to three weeks and could result in the generic appearing cheaper for a short period only. Sometimes prices for different pack sizes viewed on practice systems can cause confusion because prescriptions are still charged at drug tariff price, which is what the ScriptSwitch messages are based on. If known to be significant then a message is added locally on ScriptSwitch to note that a switch will deliver savings but may not appear as a saving so that GPs do not ignore it.

Benefits

Messages highlighting non-formulary prescribing continue to improve rational prescribing across primary and secondary care and make prescribers aware of locally 'black listed' medicines that have not been approved for the Wirral formulary, or are new and require local evaluation.

Early warning of prescribing of new, non formulary drugs leads to targeted education strategies. Via the reporting tool, declined messages for black listed drugs can be identified early - rather than waiting two months to review prescribing data from ePACT.

Reminders at the point of prescribing also focus on PCT priority areas such as reducing C difficile risk, improvement in national productivity metrics and increasing patient safety.

Information messages to improve the quality of prescribing, for example:

- NICE guidance that recommends a change in current practice

- Following incidents/alerts e.g. NPSA alerts highlighting high risk prescribing that has resulted in fatalities

- Drug withdrawals eg insulins

Reduced clinical and financial risk for practices employing locums or training practices.