

Introduction to the antibiotic Quality Premium

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NHSE Antibiotic Quality Premium 2015-16 and what it means for CCGs

The Quality Premium is intended to

- Improve the quality of services commissioned, improving health outcomes and reducing inequalities in health outcomes
- Reward CCGs for quality improvement, paid in the following financial year, and must be reinvested in quality or health outcome improvement

And has a maximum value of £5 per head of population; weighted allocation to a variety of measures. The CCG has to meet certain performance criteria for part/full Quality Premium payment

Quality Premium – improving antibiotic prescribing in primary and secondary care

Aim

To reduce over use and inappropriate use of antibiotics in order to reduce the spread of antimicrobial resistance

Value

This is a composite QP measure consisting of 3 parts a), b), and c); each part funded independently. The measure is worth 10% of the QP
part a) = 50%, part b) = 30%, part c) = 20%

Primary care component (50% + 30%)

- a) Reduction in the number of antibiotic prescriptions by 1%
- b) Reduction in the proportion of broad spectrum antibiotics cephalosporins, quinolones & co-amoxiclav by 10%
or to below England median value = 11.3%

Quality Premium – improving antibiotic prescribing in primary and secondary care

Secondary care component (20%)

Secondary care providers with 10% or more of their activity being commissioned by the relevant CCG have validated their total antibiotic prescribing data as certified by PHE

- CCGs will need to decide how to communicate with providers, and each other, on this activity.
- PHE will be leading the validation activity with a rolling programme over 8 months, and will be certifying provider activity
- Providers are likely to be expected to reduce antibiotic prescribing in 2016-17

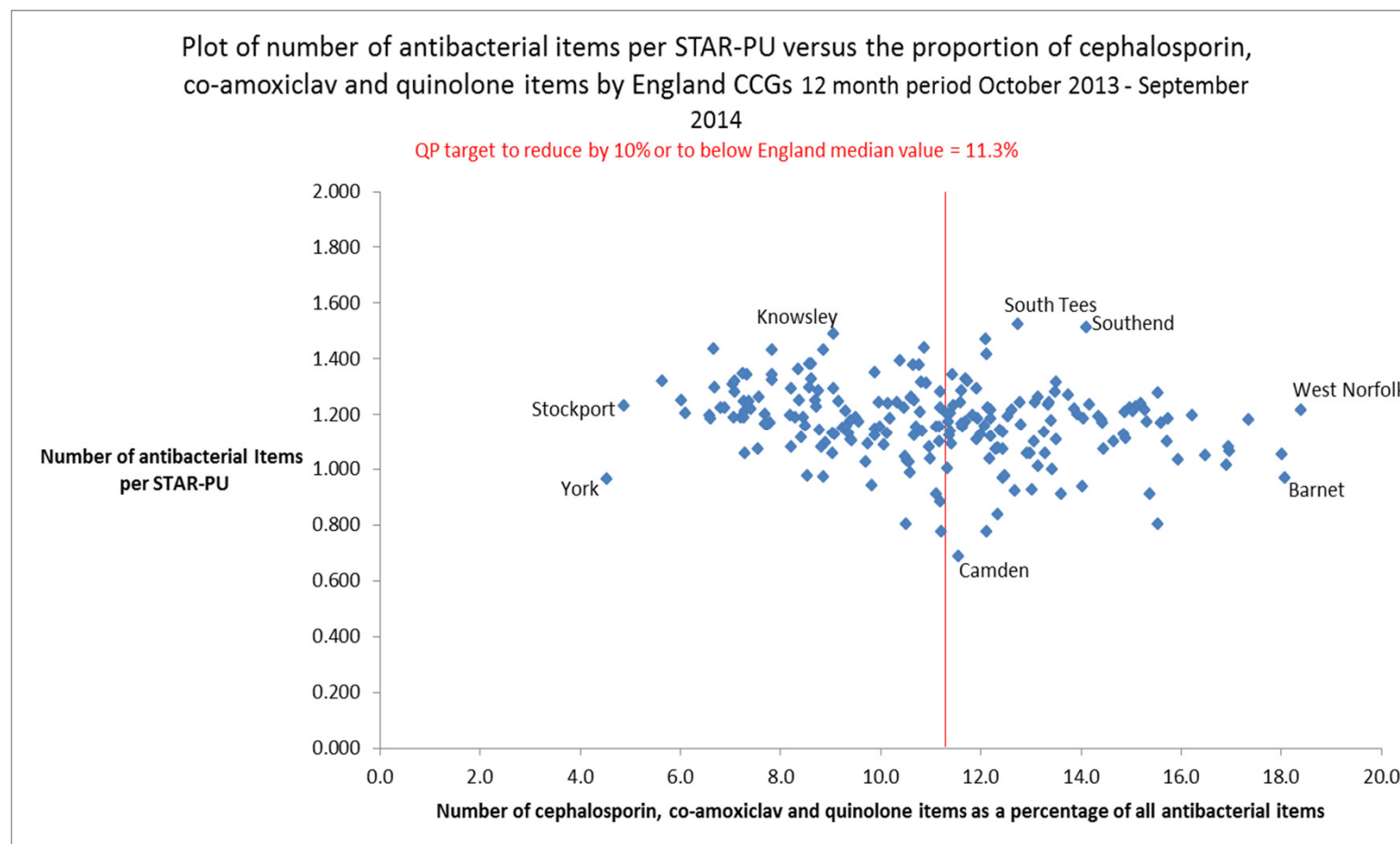
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Primary care component (50% + 30%)

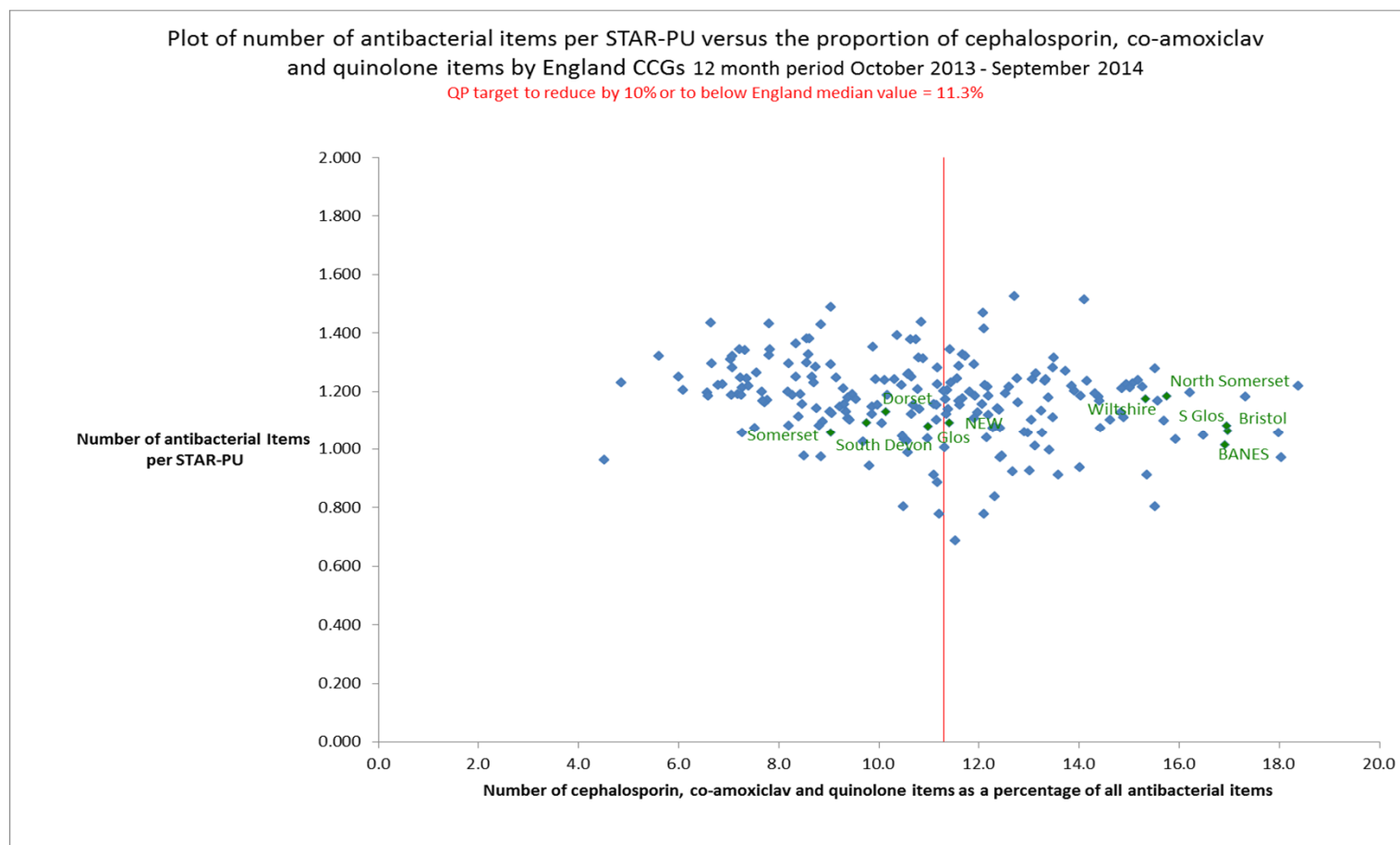
CCG target values for both indicators have been calculated from the financial year 2013-14 NHS BSA prescription services data set, and apply to the financial year 2015-16. Payment is made on full 2015-16 financial year data set published by the NHS BSA in June 2016. A QP annex will publish full data details for all CCGs – excel format

- a) Reduction in the number antibacterial items/STAR-PU by 1% (or greater) from 2013-14 baseline value
- b) Reduction in the proportion of cephalosporins, quinolones & co-amoxiclav by 10% from 2013-14 baseline value OR to stay below England median value = 11.3%

Antibiotic prescribing variability – CCG level

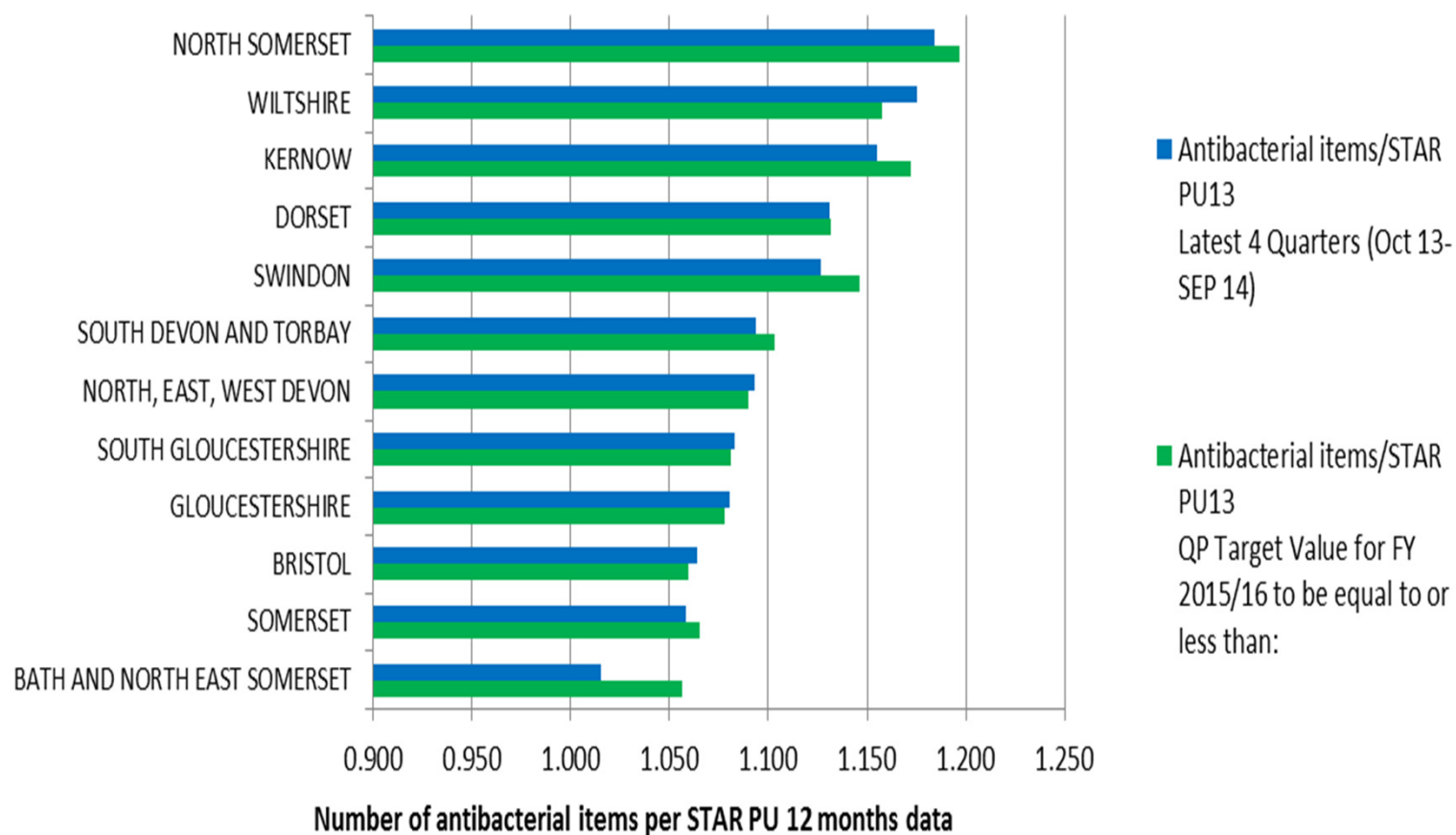


Antibiotic prescribing variability – in the South West

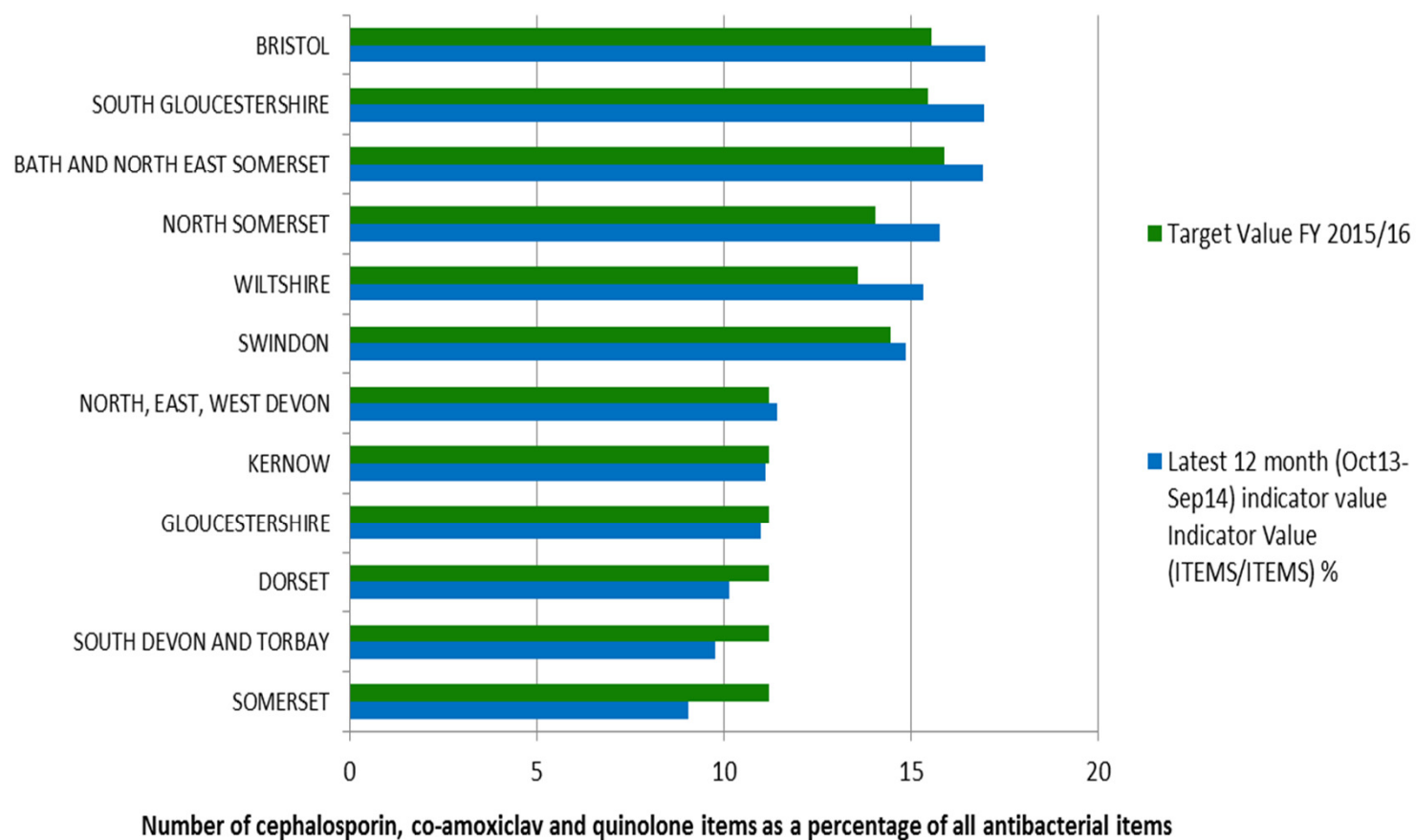


Plot of the number of antibacterial items per STAR PU SOUTH WEST CCGs 12 month period
October 2013 - September 2014

with Quality Premium target to reduce by 1% or lower for FY 2015-16



Plot of the proportion of cephalosporin, co-amoxiclav and quinolone items by SOUTH WEST CCGs
12 month period October 2013 - September 2014
with Quality Premium target to reduce by 10% or to below England median value = 11.3%



Antibiotic prescribing variability – practice level

