Implementation of the PINCER Medication Safety Intervention in CCGs Across Wessex

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Aim and Objective
To reduce the level of harm to patients from clinically significant medication errors in primary care.

Prescribing errors in general practice are a preventable cause of safety incidents, illness, hospitalisations and even deaths. A DH commissioned report on the prevalence and cost of medication errors recently concluded that an estimated 66 million clinically significant errors occur per year in England, 71% of which are in primary care.


Serious errors affect one in 550 prescription items, while hazardous prescribing in general practice contributes to around one in 25 hospital admissions. (The PRACTiCe Study GMC 2012)

What is PINCER?

PINCER is Pharmacist-led IT Intervention for reducing Clinically important ERRors in general practice prescribing.

A 2013 trial published in the Lancet (Vol 379; 7/4/12) showed a reduction in error rates of up to 50% following adoption of PINCER. The original trial covered 72 practices and over 480,000 patient records.

The PINCER audit tool interrogates the GP practice record systems, to identify “at-risk” patients who are being prescribed drugs commonly and consistently associated with medication errors; e.g. prescribing an oral NSAID (non steroidal anti-inflammatory drug) without co-prescription of an ulcer-healing drug for certain patients. Corrective action can be taken by a pharmacist working with the practice to reduce the risk of harm to those patients that have been identified. The Pharmacist uses Root Cause Analysis and QI methodology to make sure that corrective actions are addressed and risks reduced and, where needed, practice systems are improved.

Actions Taken

Wessex AHSN working with the Nottingham University PRIMIS team (www.nottingham.ac.uk/primens/) provided Introduction to PINCER training for GPs, CCGs and practice pharmacists. Learning formats included group workshop sessions, video resources, smaller Action Learning Sets and practice visits.

More recently we have provided Enhanced PINCER Training covering Root Cause Analysis and Quality Improvement methodology. A PINCER Facilitator is available across Wessex to support the introduction of the tool into individual practices and provides additional training and support as required.

Learning Outcomes

Over 235 practices across Wessex have now used the audit tool. The data highlighted a number of fundamental issues such as blood test results not being incorporated into patients records and training gaps around the prescribing and monitoring of high risk medicines.

The audit cycle demonstrated some considerable improvements, such as in improvement in routine monitoring for patients taking ACE (angiotensin-converting enzyme) Inhibitors. Other indicators require further work, but the process has demonstrated the size, scale and impact of the levels of risk.

Key Themes

- The inclusion of PINCER in a local CQUIN or prescribing incentive scheme can be very helpful in getting GP practices engaged.
- Support from the local CCG is instrumental to change.
- Medication safety is an important topic locally and nationally and the PINCER tool is a proven method to effect demonstrable change.

Conclusion

Through being supported to implement and use evidence-based audit tools and evaluated activity to address levels of risk, practices can effect demonstrable improvements (i.e. reduced levels of risk) in clinically significant medication issues known to be a leading cause of harm to patients.

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**MEASURES and OUTCOMES**

**PHASE 1:**

PINCER 1 introduced to 237 Wessex GP practices in 7 CCGs.

**PHASE 2:**

Includes the remaining 2 CCGs and 66 practices as early adopters of PINCER 3.

**Number of Practices Uploading PINCER**

<table>
<thead>
<tr>
<th>Area</th>
<th>No. of Practices</th>
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<tbody>
<tr>
<td>Fareham &amp; Gosport</td>
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<tr>
<td>North Hants</td>
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<td>NE Hants &amp; Farnham</td>
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<td>SE Hants</td>
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Wessex Practices engaged with PINCER by CCG

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**Results of work on all 10 indicators across Wessex practices.**

(No. of patients highlighted in each audit).