

# General Practice Prescribing Data (Chemical Level)

# **Glossary of Terms**

The CSV file of practice prescribing data contains the following data items:

- Strategic health authority (SHA) code (3 characters)
- Primary care trust (PCT) code (3 characters)
- Practice code (6 characters)
- British National Formulary (BNF) code (9 characters for chemical level medicines; 4 characters for appliances and dressings)
- Chemical name (40 characters)
- Total Items
- Total Net Ingredient Cost (£)
- Total Actual cost (£)
- Processing date (YYYYMM)

Data was released monthly for June 2010 to December 2012.

# **Prescribing Data Source**

This information was obtained from NHS Prescription Services of the NHS Business Services Authority (BSA) prescribing and dispensing information systems, which covers prescriptions prescribed by GPs (General Medical Practitioners) and other non-medical prescribers (nurses, pharmacists and others) in England and dispensed in the community in the UK. Prescriptions written in England but dispensed outside England are included. The data do not cover private prescriptions.

Prescribing figures at practice level include items prescribed by GPs and non-medical prescribers attached to each practice. These figures exclude all prescriptions which cannot be linked to a practice, about 0.2% of total prescribing.

## **BNF Classifications**

The BSA prescribing and dispensing information systems use the therapeutic classifications defined in the British National Formulary (BNF) as extended by the BSA, The same drug may appear in different areas of the BNF as it can be

prescribed to treat more than one condition. For example: aspirin is licensed for use as an antiplatelet and as an analgesic.

NHS Prescription Services have created pseudo BNF chapters for items not included in BNF chapters 1 to 15. The majority of such items are dressings and appliances, which have been classified into four pseudo BNF chapters (20 to 23). Chapters 18 and 19 include preparations used in diagnosis, and 'other preparations. There is no chapter 16 or 17. NHS Prescription Services have produced a booklet on BNF classifications and the pseudo classifications used. This is available on the internet at:

http://www.nhsbsa.nhs.uk/PrescriptionServices/Documents/PrescriptionServices/BN F\_Classification\_Booklet-2013.pdf

The BNF is updated in March and September each year. NHS Prescription Services update their BNF Classifications annually. While the therapeutic classification of drugs occasionally changes, all practice level publications reflect the classification in use at the time of publication.

# **Data field descriptions**

### SHA

This is code of the Strategic Health Authority (SHA) in which the practice resides.

#### **PCT**

This is code of the Primary Care Trust (PCT) in which the practice resides. Note that for a small number of PCTS, Prescription Services do not use the same codes for Care Trusts as Organisation Data Services (ODS). The codes this affects are shown below.

Prescription Services code	ODS code	Name
5ZT	TAP	Blackburn with Darwen
5ZU	TAN	North East Lincolnshire
5ZW	TAL	Torbay
5ZX	TAK	Bexley
5ZZ	TAC	Northumberland

## **Practice**

This is code for the practice and is the same one as used by ODS. The format is Axxxxx where "A" is a letter and "xxxxx" is a 5 digit number. Accompanying the release of the prescribing data is a file giving the name and address of each practice indexed by this code. The practice name and first line of the address are often the same. Where a practice does not supply a practice name the first line of the address is used. This file is arranged so the final column is usually the postcode even if this requires other parts of the address to be repeated to achieve this.

## **BNF**

This is the BNF code for the drug.

For drugs in BNF Chapters 1 to 15 the code is 9 digits:

- Characters 1 & 2 show the BNF Chapter
- 3 & 4 show the BNF Section
- 5 & 6 show the BNF paragraph
- 7 shows the BNF sub-paragraph
- 8 & 9 the Chemical Substance

For BNF Chapters 18 to 23 the code is 4 digit, giving the BNF Section. Dressings and appliances do not have chemical names.

## **Drug name**

Most medicines are shown by chemical name. This is the International Non-proprietary Name (INN) and is the standard registered name for the active constituent of that medicine, for example Omeprazole. For compounds the name may be more complex, e.g. Co-Magaldrox (Magnesium/Aluminium Hydrox). In some cases the name is a collective one for a range of medicines, e.g. Alginic Acid Compound Preparations. Note that the description may use abbreviations due to the limited number of characters available in the BSA Drug and Appliance database.

For prescriptions in BNF Chapters 19 to 23, there is no "chemical" name, as these are dressings and appliances. Therefore these items are reported under the BNF Section name, for example: Night Drainage Bags.

#### **Items**

This gives the number of items for this chemical or section that were dispensed in the specified month. A prescription item refers to a single supply of a medicine, dressing or appliance prescribed on a **prescription form**. If a prescription form includes three medicines it is counted as three prescription items.

Item figures do not provide any indication of the length of treatment or quantity of medicine prescribed. Patients with a long term condition usually get regular prescriptions. Whilst many prescriptions are for one month (28 or 30 days supply) items will be for varying length of treatment and quantity

# **Net Ingredient Cost (NIC)**

The net ingredient cost (NIC) is the basic price of a drug i.e. the price listed in the Drug Tariff or price lists. NIC refers to the basic cost of the drug and does not include any dispensing costs, fees or discount. It does not include any adjustment for income obtained where a prescription charge is paid at the time the prescription is dispensed or where the patient has purchased a pre-payment certificate. The figures are in £s and pence.

## **Act Cost**

Actual Cost is the Net Ingredient Cost less the average discount percentage received by pharmacists calculated from the previous month plus container allowance. This is the estimated cost to the NHS, which is lower than NIC.

Community pharmacists are reimbursed for medicines they have dispensed on the basis of the NIC less a deduction related to the discount that they are assumed to have received from their suppliers (for details see the Drug Tariff Part V - Deduction Scale). A container allowance is then added (see Drug Tariff Part IV). The figures are in £s and pence.

Note: electronic Drug Tariff can be found at:

http://www.ppa.org.uk/ppa/edt intro.htm

## **Date**

The date is given as the year and month to which the file refers. For example, September 2011 would be 201109. This date relates to the month in which the prescriptions were dispensed.

# **Accuracy**

All prescription statistics in this data are based on information systems at NHS Prescription Services, part of the NHS Business Services Authority. The figures used are collected as an essential part of the process of reimbursing dispensers (mainly pharmacists and dispensing doctors) for medicines supplied. All prescriptions which are dispensed in England need to be submitted to NHS Business Services Authority if the dispenser is to be reimbursed and so coverage should be complete.

NHS Prescription Services quality assures the data they provide. They state that due to the complex and manual processes involved there may be inaccuracies in capturing prescription information which are then reflected in the data. Currently the prescription processing activity is internally audited to 97.5 per cent accuracy (i.e. at least 97.5 per cent of prescriptions are recorded accurately). While the BSA can adjust payments to dispensers if an error is identified they are unable to correct the prescribing data.

## Unidentified prescribing

This is prescribing which cannot be allocated to a specific practice, so is not included in this data.

# **Dummy practices**

The data contains prescribing information for "dummy" practices. These are created by PCTs to enable them to identify prescribing in certain environments or circumstances (including: specialist clinics, hospices, prisons, out of hours services, training units, etc).