**Evaluation of a pharmacist-led diabetes educational outreach programme**

U Hin Lai1, Bharat Patel2, Simon White1 and Stephen Chapman1

1Keele University, Staffordshire, UK. 2Walsall Clinical Commissioning Group, Walsall, UK

**Background**

Independent Monitoring of Prescribing Analysis Cost Trends (IMPACT) campaigns, also known as educational outreach programmes, involve pharmacists providing training programmes in GP surgeries on prescribing for particular clinical issues. These are supported by analysis of local before and after campaign prescribing and provision of training updates to optimise prescribing and reduce costs.

**Aim**

This study aimed to evaluate an IMPACT campaign on type 2 diabetes within Walsall Clinical Commissioning Group (CCG) in terms of reported satisfaction of GPs and cost savings arising from increasing biosimilar prescribing and decreasing blood glucose testing strip prescribing.

**Methods**

A questionnaire was developed and internally piloted on the basis of the aims of the study. As a measure of satisfaction, respondents were asked to rate the perceived usefulness of the topics covered by the IMPACT campaign and their perceived likelihood of changing prescribing practice as a result of the campaign. The survey form was disseminated to health professionals immediately after attending the IMPACT campaign. The electronic Prescribing Analysis Cost Tabulation (ePACT) system was used to analyse biosimilar prescribing (absagalar prescribing as a percentage of total glargine prescribing) and blood glucose testing strip prescribing pre-campaign (October – December 2015) and post-campaign (September – November 2016). Data were subjected to descriptive statistical analysis. Ethical approval was not required.

**Results**

The survey was completed by 145 respondents and ePACT data was collected from all 59 GP surgeries within the CCG pre- and post-IMPACT campaign. The majority of respondents reported the topics covered by the campaign as either ‘very useful’ or ‘useful’ (80% - 89%), with less than 5% (1% - 4%) of respondents rating campaign topics as ‘not useful’. A total of 77% (n=111) of respondents reported being either ‘extremely likely’ or ‘likely’ to change prescribing practice as a result of the campaign, whilst 4% of respondents reported being ‘unlikely’ or ‘very unlikely’ to change their prescribing practice. Absagalar post-campaign prescribing was 10% of total glargine prescribing, compared to 0.1% pre-campaign (i.e. an increase of 9.1%), representing an annual saving of £13,663. The prescribing volume of blood glucose testing strips post-campaign was very similar to the pre-campaign prescribing volume, but an annual saving of over £101,165 was identified due to prescribing cheaper brands

**Conclusion**

The findings suggest that the majority of survey respondents were satisfied with the IMPACT campaign and cost savings were identified from increased absagalar prescribing and blood glucose testing strip prescribing. However, the savings from the latter arose from cheaper brand prescribing rather than decreasing prescribing volume. This implies that the IMPACT campaign had broadly been a success, although it is acknowledged that the savings were not necessarily wholly due to the campaign. Further work is required to identify whether blood glucose testing strip prescribing is in line with local guidance and whether similar results are obtained from diabetes IMPACT campaigns in other localities.