Acute Trust - Safer Prescribing of Warfarin – 10%

CQUIN Scheme	Indicator Name	CQUIN Goal	%
Scheme 5	Medicine Management – Warfarin prescribing (Regional Pick list)	Prescribing the correct dose of Warfarin	10%

Description of indicator	Prescribing the correct dose of warfarin
Numerator	Number of patients prescribed warfarin with INR within the target range (INR – International Normalised Ratio)
Denominator	Number of patients prescribed warfarin attending routine monitoring at outpatient clinics
Rationale for inclusion	Warfarin is a high risk medicine. It has a narrow therapeutic index. Under or over treatment can lead to patient harm. It interacts with other prescribed, over the counter medicines and certain foods. It is a priority for the national Patient Safety First campaign.
Data source and frequency of collection	Baseline audit at 2 months First re-audit at 6 months Second re-audit at 10 months
Organisation responsible for data collection	Provider
Frequency of reporting to provider	Report at 4 months Report at 8 months Report at 12 months
Baseline period / date	
Baseline value	TBC
Final indicator period / date on which payment is based	
Final indicator value (payment threshold)	% Target to be agreed at CQR meeting following baseline (% of INR values are within the target range)

Indicator 4 - Acute Trust - Safer prescribing of Warfarin

Description of indicator	Prescribing the correct dose of warfarin
Numerator	Number of patients established on prescribed warfarin with INR within the target range i.e. 50% of established INRs within 0.5 INR units of target and 80% within 0.75 INR units of target. (INR – International Normalised Ratio) Anticoagulant therapy is defined as established after 2 months on therapy. (ref British Committee for Standards in Haematology 2006)
Denominator	Number of patients established on prescribed warfarin
Rationale for inclusion	Warfarin is a high risk medicine. It has a narrow therapeutic index. Under or over treatment can lead to patient harm. It interacts with other prescribed, over the counter medicines and certain foods. It is a priority for the national Patient Safety First campaign.
Data source and frequency of collection	Baseline data at 2 months Monthly Provider data collection via Pharmacy/PAS IT System
Organisation responsible for data collection	Provider
Frequency of reporting to provider	Monthly data report
Baseline period / date	
Baseline value	TBC
Final indicator period / date on which payment is based	
Final indicator value (payment threshold)	95% of INR values are within the target range each month.
Final indicator reporting date	
Rules for partial achievement of indicator at year-end	100% payable if 95% of INR values are within the target range 50% payable if 90% of INR values are within the

	target range
Rules for any agreed in-year milestones that result in payment	*Reconciliation at month 6 and 9, with final reconciliation at month 12. For each month achieved in line with the rules stipulated above.*
Rules for delayed achievement against final indicator period/date and/or in-year milestones	None