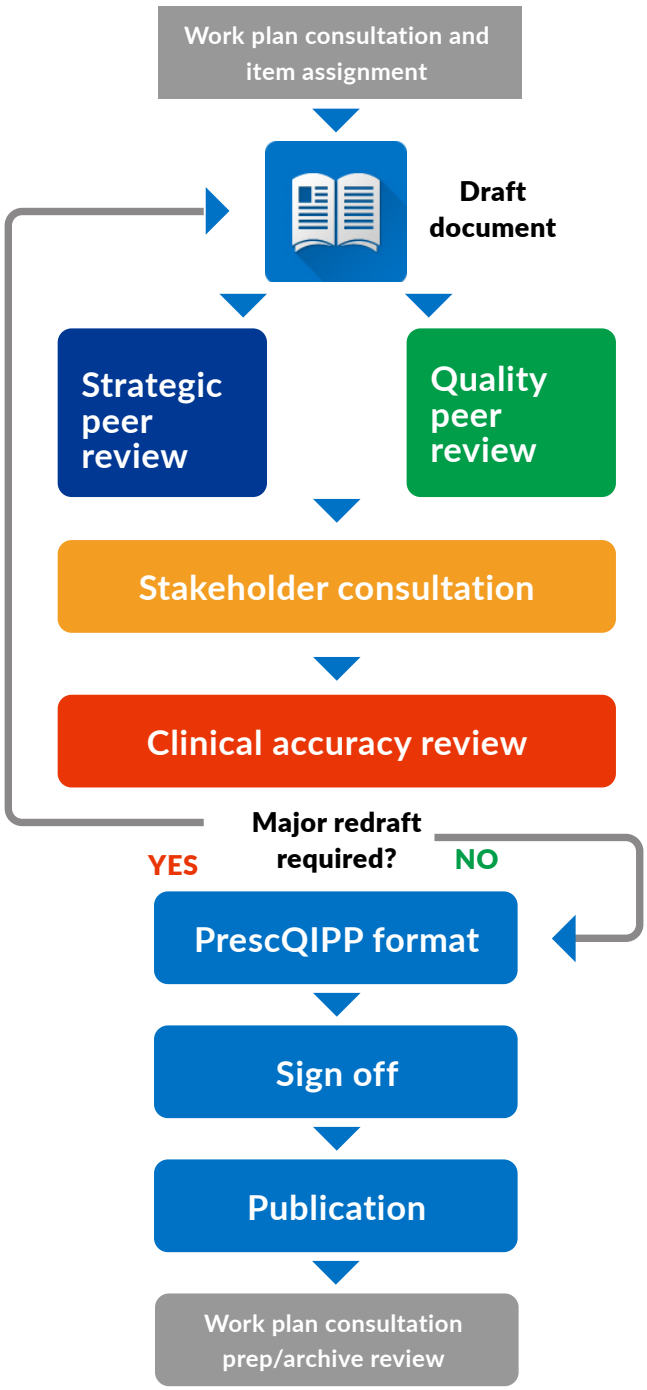
PrescQIPP quality assurance process

PrescQIPP's number one priority is ensuring that the quality and evidence base of our resources is of the highest standard. We regularly review our quality assurance (QA) process to ensure that it is providing a robust framework.

Our annual work plan is designed in collaboration with our subscribers during the work plan consultation process. Once the work plan is signed off by our Council of Members, the Director of Medicines Optimisation or Associate Director of Medicines Optimisation, as the document editors, assign items to the most appropriate authors. All authors work to a comprehensive set of writing and referencing guidelines to draft the resource. The document editors review all actions at the end of each stage and only move the resource on to the next stage if appropriate.



Once the drafts are complete they enter a two week peer review, which includes a:

- Strategic peer review
- Quality peer review

Strategic peer review

This review has a specific focus on subscriber priorities and considers local impact of the proposed resources. The review group includes PrescQIPP Council Members, PrescQIPP Champions and individual interested parties. Strategic peer reviewers consider if:

- The proposed resource supports strategic needs at a local level.
- They support the position (recommendations) within the proposed resource.
- The proposed resource contains what is needed to deliver these changes locally.
- They wish to provide additional feedback, resources, signposting.

The responses are captured and filed for transparency purposes, along with conflict of interest statements.

Quality peer review

This review considers the quality and content of the resource, in isolation from local or organisational considerations. A minimum of three quality reviews are required for each resource.

Quality reviewers are asked to consider the following questions:

- Do the documents provide a compelling case for the recommendations?
- Are there any key points missing from the evidence base that should be considered?
- Do you find the language within the resource to be clear, understandable and with a straightforward flow?
- Do you think any additional resources could improve implementation of this resource?
- Do you have any concerns around specific aspects of this resource?

The group is encouraged to make additional comments and suggestions to challenge and/or improve the resource. The responses are captured and filed for transparency purposes, along with any conflict of interest statements.

The document author updates the materials based on the peer review responses. If significant changes are required, or conflicting opinions from different organisations arise, the board will make the final decision on the recommendations in the document. If the changes are significant or fundamentally different, the document may need to go back into strategic and/or quality peer review before moving on in the process.

Stakeholder consultation

Organisations and companies are able to take part in a stakeholder consultation on relevant work plan items. All stakeholders are required to register a single point of contact and complete an expression of interest form for our records.

Post-peer review drafts are sent to registered stakeholders for comment (one week warning and two week response window).

Stakeholders are asked to feedback on the following questions:

- Is the information in the resource factually correct?
- Do you support the position of the resource?
- Do you have any specific concerns that you would like to comment on?
- Is there any evidence that you feel is missing from the resource? (Please provide full reference and if necessary, where this can be accessed)

All responses must be submitted via the online form and by the deadline stated. Responses will be considered by the document author and will be submitted along with the final draft to the clinical accuracy review.

Once the resources are published each respondent will be provided with reference copies for their records.

Any comments received from the **peer review or the stakeholder consultation** that are not actioned will be logged with the reason for not actioning the comments. The document editors will review these to ensure this is appropriate.

Clinical accuracy review and publication of bulletins

The Director of Clinical Quality or the Senior Clinical Quality Pharmacist completes a clinical review of the final draft, checking the factual accuracy of the text and the references used to support the statements.

Following the review the resource will be formatted and sent to either the Director of Clinical Quality or Senior Clinical Quality Pharmacist for a final accuracy check and finally sign off by the Chief Executive. Documents are published on a secure area of the PrescQIPP website and are only accessible by PrescQIPP subscribers until they are made public (one year following publication).

Updating or archiving resources after publication.

After publication, resources will be reviewed and updated if there is any significant change in national guidance or evidence base. Unchanged resources will be considered for update, leaving as they are or archiving two years after the publication year as part of the work plan consultation.

If resources are left unaltered then they will either be updated or archived three years after the publication year.