

National Guideline for the Establishment and Functioning of Pharmaceutical and Therapeutics Committees in South Africa

Provincial Self-Assessment - \_\_\_\_\_ Province

Part 2

1. Process Indicators – measure whether planned activities took place
2. Output Indicators - performance of a set of activities that a PTC is expected to carry out
3. Outcome Indicators – how well change has been achieved as a result of PTC activities

Number	Indicator	Result	Comment
<b>PROCESS INDICATORS</b>			
<b>Governance</b>			
PR1	Does the PTC have TORs that have been updated in the last 3 years?		
PR2	Does the PTC have a defined place within the applicable level of organisational structure with clear authority and accountability?		
PR3	Does the PTC have Confidentiality Declarations signed at the time of appointment, as well as Declaration of Interest that are signed at every meeting?		
PR4	Are potential conflicts of interest of members managed in accordance with the applicable policy and suitably captured in the minutes of the meeting?		
PR5	Is there a process for monitoring of ADRs?		
PR6	Is there a process for monitoring of product quality complaints?		
PR7	Does the PTC consist of membership and expertise in accordance with its TORs?		
PR8	Does the PTC meet at least quarterly and in accordance with its TORs?		
<b>OUTPUT INDICATORS</b>			
<b>Governance</b>			
P1	What is the average attendance of PTC members at meetings?		

P2	Does the PTC include an antimicrobial stewardship representative, NEMLC representative, finance representative, bid specification/ bid evaluation committee representative and a pharmacovigilance committee?		
P3	Is an agenda prepared before every meeting in accordance with the TORs, including items covering Adverse Drug Reactions (ADRs), Antimicrobial Stewardship, Third-Line Antiretrovirals, NEMLC report, tender specification and evaluation report back, medicine availability, payment of pharmaceutical suppliers, individual patient use and pharmaceutical expenditure?		
P4	Does the PTC have an updated Operational Plan, guiding the implementation and monitoring of the PTCs activities?		
P5	Does the PTC have an annual schedule for meetings (year planner)?		
P6	Are minutes circulated within 30 days after a PTC meeting, in accordance with the TORs?		
<b>Core Functions</b>			
P7	Does the PTC have a formulary has been reviewed in the last quarter through stakeholder consultation?		
P8	What proportion of PTC decisions on changes to formularies were made using evidence-based principles?		
P9	Does the PTC have a standard operating procedure for development and management of formularies, including non-EML medicines, in line with the National Guideline for the Development, Management and Use of Formularies?		
P10	Has the current formulary been signed off by the Head of Health/ Chief Director/ CEO?		
P11	Is the depot catalogue aligned with the latest approved formulary?		
P12	Is a health needs assessment performed prior to formulary review, such as by using an ABC analysis?		
P13	Are motivations for medicines for individual patient use completed with required evidence?		

Commented [AB1]: Outcome - how many approved compared with formulary

P14	Are all Third Line Antiretroviral Therapy (TLART) applications approved by the NDoH Peer Review Committee and is TLART expenditure tracked?		
P15	How many motivations for addition, deletion or amendment of a medicine on the EML were sent in the last 12 months using the appropriate application form including evidence?		
P16	How many quantitative analyses identifying medicine use problems performed in the last 12 months e.g. Defined Daily Dose (DDD), ABC Analysis, Indicator studies, MUE?		
P17	How many qualitative analyses identifying medicine use problems performed in the last 12 months e.g. Focus Group Discussion, In-Depth Interviews, Structured Observations, Structured Questionnaires?		
P18	How many educational interventions to improve medicine use were performed in the last 12 months?		
P19	How many managerial interventions to improve medicine use were performed in the last 12 months?		
P20	Does the PTC have an escalation procedure to manage stock challenges, based on the National Stock-Out Escalation Protocol?		
P21	Does the PTC have a down-referral procedure based on the National Referral Policy for South African Health Services?		
P22	Is there a mechanism for assessing the percentage of prescriptions developed in accordance with the STGs and/ or applicable formulary?		
<b>Pharmaceutical Expenditure</b>			
P23	Are no more than 10% of formulary items Non-EML (i.e. either not reviewed or under review by NEMLC)?		
P24	Does expenditure of non-EML medicines fall within 10% of the pharmaceutical expenditure in the last month?		
<b>Communication and Relationship Management</b>			

P25	Does the PTC have a matrix of stakeholders that have been classified as responsible, accountable, should be consulted or should be informed?		
P26	Does the PTC have a communication plan/ framework detailing the feedback mechanism for all decisions taken by the PTC to all stakeholders?		
<b>Human Resource Management</b>			
P27	Does the PTC have an annual training plan to develop capacity in other District/ Institutional PTCs?		
P28	What is the percentage annual turnover of PTC members based on resignations?		
<b>OUTCOME INDICATORS</b>			
O1	What is the medicines expenditure compared to budget for the last 12 months?		
O2	How many approved individual patient access medicines are there compared with total medicines on the formulary?		
O3	What is the average percentage availability of medicines in the institution/ district/ province (as applicable) according to the National Surveillance Centre?		

**PTC Self-Assessment Completed By:**

Name			
Position			
Email Address			
Telephone Number			
Date		Signature	