

Date:	6 November 2002
Venue:	Committee Room 2, National Assembly for Wales
Title:	Three Health Care Strategies for Consultation: <ul style="list-style-type: none"><li>• Routes to Reform: A Strategy for Primary Dental Care in Wales;</li><li>• Remedies for Success: A Strategy for Pharmacy in Wales;</li><li>• The Future of Optometric Services in Primary Care in Wales</li></ul>

**Purpose**

1. The Committee’s comments are sought on the strategies for Primary Dental Care, Pharmacy and Optometric Services in Primary Care which are currently out for consultation until 31 December 2002.

**Background**

2. The strategies arise from the commitment given in the NHS Plan for Wales to consult on the future of primary care. The strategies are underpinned by the Primary Care Action Plan and are intended to develop the future role of those professions in Dentistry, Pharmacy and Optometry over the next ten years to complement the work being undertaken in primary care. The strategies were published for consultation in September 2002 and have been given a wide circulation within both the professions and other interested bodies. Copies of the strategies have been made available to Assembly Members.

**SUMMARY OF THE STRATEGIES**

**Routes to Reform: A Strategy for Primary Dental Care in Wales**

3. The strategy sets out a vision for the future, discusses the state of oral health of the nation, the current provision of dental services in Wales and the implications of these factors in influencing change. It considers the dental workforce question, across the full scope of training, recruitment and retention, and deals with the issues of access, quality and IM&T. The strategy considers how change may be brought about and acknowledges the need to examine new ways of commissioning Primary Dental Care and remunerating dental practitioners. The complexity

of reforming the delivery of primary dental care is a major challenge and the strategy recognises the need to introduce change with the full support of the profession.

4. The overall aim of the strategy would be to:

- Address health inequalities and while improving the health of the whole nation, prioritise health improvement for those who are worst off, especially children
- Promote access to services for patients and an integrated service approach to provision
- Provide flexibility in local delivery
- Take short, mid and long term considerations of dental workforce planning
- Link with the work of the IM&T Development Plan setting out a way forward for Information and IM&T development in primary dental care
- Link with the Framework for Continuous Improvement developed by the Performance Management Task and Finish Group

5. In the short term the strategy would look to:

- pilot/test innovative models of providing dental care in Wales. PDS as one tool available to pilot new approaches.
- acknowledge that the General Dental Service (GDS) requires reform, and that at the heart of this is the need to reform the system of remuneration.
- commission a feasibility study or option appraisal into expanding the number of dental undergraduates and numbers of PCDs in training. This will also need to consider further development of educational initiatives within the primary care setting.
- require Local Health Boards to develop Local Oral Health Action Plans.
- extend the availability of treatment on an occasional basis.
- instruct NHS Direct to take on the provision of all the health authority dental helplines (One of our aims will be a uniform all-Wales system for the management of access to emergency dental services available to all patients irrespective of registration status).
- review the advisory structure for dental vocational training in Wales.
- issue revised guidance into the role of the Community Dental Service ensuring that fragmentation of the CDS is avoided.
- re-establish the Welsh Joint Negotiating Committee to discuss issues affecting the salaried services in Wales with the BDA.
- discuss with the profession the potential in developing a formal training programme for Oral Health Educators.
- acknowledge the need to promote an enhanced IT infrastructure in primary dental care within the National IM&T Development Plan for Wales.
- Continue to develop and evolve the Welsh Dental Initiative that encourages dentists to work in Wales through grant incentives.

6. In the longer term the process of change described throughout this strategy would require a major change of culture which would mean:

- devolving funding to a local level and using it in a more targeted way to achieve locally-determined

objectives, with safeguards, as necessary, to ensure it remains focused on dentistry.

- addressing the issue of equity of distribution of funding and, for the future, control of entry to NHS contracting arrangements.
- ensuring that all services contribute to the objective of an NHS dental service which serves a population fully.
- reviewing the concept of registration with a General Dental Practitioner in the light of the new locally-based framework.
- ensuring that no dentist working within or contracting with the NHS loses out from any change.

## **Remedies for Success: A Strategy for Pharmacy in Wales**

7. The Pharmacy Strategy is based on a simple vision of the future by providing a service which is easily accessible to all, tailored to individual needs, efficient, co-ordinated with other professionals, and of a quality at least equal to the best in the UK. Working with others, pharmacy will use its expertise to help people:

• maintain their health

• manage common ailments

• make the best use of prescribed medicines, and

• manage long-term medication needs

8. To achieve this action is required on three broad fronts:

- Re-designing Services for Patients
- Continuously Improving Quality
- Making the Best Use of Resources

9. The strategy acknowledges that Pharmacists must form a bridge between high technology medicine and individual human need. To do this, many aspects of service provision need to be re-designed to ensure that each patient can be treated as an individual, with unique circumstances, needs and preferences. Part of the purpose of this strategy is to ensure that best use can be made of what new technologies will offer, and better support people looking after themselves.

10. The strategy points pharmacy toward ensuring that it adopts best practice in all areas with adequate structures being in place to ensure that quality is delivered. This includes attracting and retaining the best staff to Wales, careful monitoring of the use of medicines and being able to spot hazards early. Pharmacy has much to contribute to the NHS and the people of Wales. Some radical change is required, which the strategy sets out, to realise the full potential. The strategy contains 50 action points which aims to ensure that the service is always moving forward to bring to Wales a pharmacy service at least the equal of anywhere in the UK. A summary of the action points is at Annex A.

## **The Future of Optometric Services in Primary Care**

11. The strategy provides the framework in which the future development of optometric services provided in the community will be structured. Optometrists work primarily in community-based practices at primary care level with some working in a hospital environment alongside ophthalmologists in the secondary care sector. Community optometrists provide a wide range of services including sight tests and eye examinations, either through the General Ophthalmic Service or privately. They also undertake a range of services within primary care, usually in conjunction with GPs and ophthalmologists, in order to screen for and monitor eye disease such as glaucoma and diabetic retinopathy. This role can be further developed within the primary care team to improve access to and co-ordinate services for patients with visual problems as well as those with low or impaired vision.

12. There is no national shortage of optometrists although there is a difficulty in attracting optometrists to work in certain parts of Wales. There are areas which do not have access to optometric services within the Community. These are areas in which it is not economically viable to set up practice and the problems will need to be addressed along with other professions, by way of a means of underwriting this service. The strategy points to the establishment of Primary Care Resource Centres involving an integrated professional environment might address this issue.

13. The strategy also highlights the establishment of an All Wales Low Vision Services Scheme, later this year, which will develop the provision of low vision services within the community from accredited optometrists. In addition, the development of an All Wales Diabetic Retinopathy Screening Service this year affords the opportunity for optometric involvement.

14. The strategy advocates that the development of optometric services will result in an improved health service targeting the needs of the individual based not just upon treatment and appropriate referrals but also in the prevention of eye disease.

## **TIMING**

15. The consultation period ends on 31 December 2002.

## **FURTHER CONSIDERATION**

16. Following the outcome of the consultations the strategies will be finalised and implementation plan will be prepared for each.

## **FINANCIAL CONSEQUENCES**

17. The strategies are currently out for consultation and they do not give rise to resource commitments.. The next step following consultation will be to prepare implementation plans, including consideration of resource issues.

## **COMPLIANCE**

18. Section 1 and 3 of the NHS Act 1977 contains powers relating to the promotion of a comprehensive health service in Wales and the provision of services generally. This Act has been delegated to the Minister for Health and Social Services.

## **ACTION**

19. The Committee is asked for its comments on the three strategies currently out for consultation.

**Jane Hutt**

**Minister for Health and Social Services**

**Contact Point:** Rob Heaton-Jones, Health and Well-being Strategy and Planning Team

Tel: 029 20 823286

**Annex A**

**Remedies for Success: A Strategy for Pharmacy in Wales - Action Points**

- 1 The Welsh Assembly Government should establish a wide-ranging and inclusive review of the future role, organisation and nature of community pharmacy in Wales?
- 2 Health Solutions Wales will quantify the volume of urgent prescriptions and analyse the range of treatments dispensed by December 2002.
- 3 The Welsh Assembly Government will commission a study of patient and professional needs for out-of-hours services by March 2003.
- 4 Implementation of 'Informing Healthcare' is crucial to delivery of this Strategy; the implications for pharmacy will be examined by December 2002.
- 5 Completion of Phase One of "Medusa" on common drug code project should be achieved by March 2003.
- 6 Pharmacists access to NHS intranet and the electronic patient record to be included in the programme for the development of IM&T in NHS Wales.
- 7 The Welsh Committee for the Professional Development of Pharmacy to ensure that adequate training in critical appraisal skills is available to pharmacists in Wales.
- 8 The electronic information requirements of pharmacy will be reviewed in the light of the implementation of 'Informing Healthcare', significant additional resources will be required in this area.
- 9 Welsh Committee for the Professional Development of Pharmacy to explore with the Royal Pharmaceutical Society for Great Britain (RPSGB) and education providers opportunities to exploit eLearning.
- 10 Welsh Assembly Government to issue guidance to facilitate the introduction of original pack dispensing in 2002 .
- 11 Welsh Assembly Government with Community Pharmacy Wales (CPW), and hospital pharmacy services to explore potential links with NHS Direct.
- 12 Modernisation to be addressed as part of the Review of Community Pharmacy in Wales (see Action 1).
- 13 The Welsh Assembly Government will work with Pharmacy's representative bodies to identify and remove the barriers to service innovation, and to stimulate the development of new models of service delivery
- 14 Local Health Boards (LHBs) and local interests will be encouraged to apply best practice in pharmacy service delivery, and to experiment with new models as appropriate, including ways of better incorporating community pharmacy expertise into the work of the wider primary healthcare team.

- 15 An original pack dispensing implementation plan should be developed and should include standardisation to 28 days supply.
- 16 Welsh Assembly Government should open discussions with the Wales Industry Group to address those therapies where dose titration or short courses are required to ensure appropriate packs are available.
- 17 The facilities and staff to accommodate services for patients with special pharmaceutical needs must be included in the future design of premises where appropriate.
- 18 Medicines management services should be developed to care settings.
- 19 Pharmaceutical Clinical Networks should be established.
- 20 The Welsh Assembly Government will develop of the role of pharmacy in the delivery of public health.
- 21 All NHS Trusts, Local Health Boards and Local Authorities will need to have access to a pharmaceutical public health service.
- 22 The use of a contract between the pharmacist and the individual to support the public health role should be encouraged.
- 23 Facilitate the establishment of a Pharmacy Public Forum.
- 24 A capacity planning tool for pharmacy services will need to developed.
- 25 A clinical governance maturity matrix will be developed by October 2002.
- 26 Welsh Pharmacy Forum should examine the concept of Risk Management Standards and develop an appropriate set of standards for primary care.
- 27 There needs to be pharmacist involvement in the implementation of each NSF in Wales.
- 28 The Welsh Assembly Government to support the case for further investment in Education and Training posts.
- 29 Welsh Committee for the Professional Development of Pharmacy should encourage the uptake of the use of CPD portfolios prior to the introduction of mandatory CPD
- 30 Welsh Assembly Government to put in place a training framework to ensure delivery of training and continuous professional development.
- 31 A programme of formal education/training and Continuing Professional Development (CPD) will be developed for specialists in pharmaceutical public health.

- 32 The Welsh Assembly Government should commission a programme of leadership and management development for pharmacists.
- Welsh School of Pharmacy should engage in debate with the profession and the Welsh Assembly Government to shape the curriculum to meet the future needs of the service in Wales.
- 33
- 34 The adequacy of current undergraduate pharmacy provision in Wales to be reviewed in relation to the demands of the Strategy, and measures to increase that capacity appropriately considered.
- 35 The medication error reporting system used in hospitals will be extended to primary care and will be introduced in April 2003.
- 36 The Welsh Assembly Government should consider the establishment of a pharmacy practice development unit in Wales.
- 37 The Welsh Assembly Government should examine the current extent of practice to determine areas for further research in Wales.
- 38 Wales Industry Group will consider the development of a Welsh Pharmacy Practice Research Award and other measures to foster joint research activity.
- 39 Welsh Assembly Government to provide administrative support to the Professional Advisory machinery.
- 40 All Wales Medicines Strategy Group to review the practice of the parallel importation of medicines.
- 41 The All Wales Medicines Strategy Group should work with primary and secondary care pharmacy to explore new ways of developing effective working relationships with the pharmaceutical industry.
- 42 All Wales Medicines Strategy Group will address the managed entry of new medicines.
- 43 The Welsh Assembly Government is already committed to the extension of supplementary prescribing rights to pharmacists by 2004. It is hoped that Independent prescribing status will follow.
- 44 Welsh Assembly Government should programme investment in student technician training places.
- 45 Welsh Committee for the Professional Development of Pharmacy should ensure the development of a structured, standardised training package for pharmacy support staff.

- 46 The Welsh Assembly Government will conduct a thorough review of workforce planning processes in Wales, and work with the other Home Countries to review the future development of roles and career structures in hospital pharmacy.
  - 47 Welsh Assembly Government should prepare advice and guidance to the service to facilitate the development of creative contracts of employment.
  - 48 The Assembly to encourage Trusts to evaluate the suitability of their pharmacy premises, and to identify appropriate development plans.
  - 49 Provision should be made in the Welsh Assembly Government's capital programme to provide automated dispensing systems, upgrade or replace older hospital pharmacies.
  - 50 Explore extension of the cost rent scheme to community pharmacies.
-