

Dr Andrew Goodall
Director General Health & Social Services/NHS Wales
Chief Executive
Welsh Government
Cathays Park
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19 July 2018

Dear Dr Goodall,

Medicines Management

As you will be aware, the Cabinet Secretary for Health and Social Services recently wrote to me with the Welsh Ministers' response to the Public Accounts Committee Report (2 May). They also provided an update on progress made against the recommendations made by the Auditor General for Wales in the report *Managing Medicines in Primary and Secondary Care* (31 May). The Public Accounts Committee considered both responses on 11 June and I am writing to seek clarification on the following issues.

Response to the Public Accounts Committee report recommendations

The Committee were pleased to note that 14 of its 17 recommendations had been accepted. Collectively the responses to these recommendations indicate that positive steps are being taken in response to the Committee's report. It was also noted 3 recommendations were rejected.

In discussing the response, the Committee referred back to its previous [letter](#) (14 December 2017) to the Permanent Secretary and her subsequent [response](#) (17 January 2018) which had requested that when officials accept or reject Committee recommendations, the basis of the acceptance or rejection is clear. Whilst that was the case for the majority of the recommendations here, there were several



responses where the Committee thought the basis of the acceptance or rejection could have been clearer or more compelling:

- **Recommendation 1: The Welsh Government produce an annual report detailing information on improvements in medicines management across all Health Boards to increase accountability and ensure the profile of medicines remains high on the agenda of Health Board.** The Committee noted that the Welsh Government does not intend to produce a specific annual report referred to in the recommendation, and as such it wasn't clear that the recommendation was being fully accepted. The Committee were pleased to note that the Welsh Government intend to adapt existing national reporting mechanisms to achieve the objectives of the Committee's recommendation but thought that the response to this recommendation was indicative that the issues raised previously with the Permanent Secretary had not been fully absorbed.
- **Recommendation 4: The development of a database to quantify the numbers of pharmacists and pharmacy technicians working in Wales, and to help plan their training requirements.** Whilst we note that the recommendation has been rejected on the grounds that there are already several sources of information on the number of pharmacists and technicians employed by NHS bodies, it appears that in practice the recommendation has been partially accepted given the commitment made to working with HEIW to ensure current sources of information on staff numbers support the identification and planning of training needs. I would welcome further clarification on the acceptance/rejection of this recommendation.
- **Recommendation 7: The use of smart packaging technology to permit the safe re-use of unopened medicines, and reduction in wasted medicines.** The response highlights a number of legitimate reasons why implementing the recommendation would be very difficult. However, the Committee felt that the response was a little dismissive of the issue at the heart of the recommendation, which is about looking at new and innovative ways to safely re-use unopened medicines. This recommendation arose from the evidence we heard about the vast amount of medicines that are wasted in the community through this route. The response to the recommendation is largely silent on that matter, and I would welcome any further information



you could provide on what action is being taken to address this significant issue.

- **Recommendation 5: Evaluation of cluster pharmacists specifically in relation to funding models and recruitment.** The Committee felt that the rationale for rejecting this recommendation was less compelling. The response argues that the cluster pharmacist role is well established, generally accepted to be working well, and that it is the responsibility of clusters to decide how to invest in these roles, based on their own evaluation. Members felt that this perhaps misses the point that across the system as a whole, it would be helpful to get assurance that the cluster pharmacist role is working as intended, and generating intended benefits. Given that it is likely that cluster pharmacists are used in slightly different ways across Wales, there may be merit in the sharing of learning and good practice within and between health boards. The rejection of a formal evaluation has been noted, but the Committee wishes to receive assurance that the Welsh Government includes evidence on how health boards are using cluster pharmacists in a future update to the Committee.

I would also wish to highlight the following points:

- The response to **Recommendation 2** looks slightly passive. The aim of the recommendation was to issue a national directive requiring all health boards to develop campaigns to help raise the profile of medicines management. The response refers to sources of funding to promote engagement and communication with citizens. However, the response is silent on the Welsh Government's expectations on what will be put in place as a result of this funding, or indeed how the government will monitor whether the necessary action has been taken. The Committee would welcome further information on the Welsh Government's intended actions in these areas.
- The combined response to **Recommendations 16 and 17** makes reference to sharing the action plan for the implementation of an electronic prescribing system with the Committee, "subject to approval of the business case". I recall from previous inquiries (most notably hospital catering) that business case approval for NHS IT systems can be problematic, and am looking for an assurance that both NWIS and the Welsh Government are moving this forward apace given the delays on implementation of the system we referenced in our report.



Update on progress with the implementation of Auditor General for Wales recommendations in: Managing Medicines in Primary and Secondary Care

I appreciate that some activities are taking a little longer to implement than envisaged in the Welsh Government's original response to the Auditor General's report, but am pleased to note that the latest update demonstrates that some important actions have been taken forward, most notably:

- The identification of a suite of indicators to better assess the quality and safety of prescribing;
- Work by national groups to identify where scope exists for efficiency savings from better prescribing;
- Enhancing the format of the annual report from the All Wales Medicines Management Strategy Group to support better scrutiny at the local health board level;
- National and local work to improve safety and effectiveness of homecare services;
- Work to ensure pharmacists get better access to the Welsh GP record

However, there would be an expectation of more progress in some specific areas (in addition to the electronic prescribing system already mentioned):

- Initiatives to improve repeat prescribing and reducing waste;
- Improving medicines storage, noting that the updated guidance that was promised has not yet been issued;
- Evidence that positive work to identify indicators of cost and quality improvements is driving actual improvements on the ground.

In the response to the PAC recommendations, the Welsh Government indicated that a further update will be forthcoming on some specific issues (eg repeat prescribing) in January 2019. In that update, I would like to request that the January update is broadened out to include the issues I have raised in this letter.

Yours sincerely,



Nick Ramsay AM, Chair

