

Cyfarwyddwr Cyffredinol Iechyd a Gwasanaethau Cymdeithasol/
Prif Weithredwr GIG Cymru
Grŵp Iechyd a Gwasanaethau Cymdeithasol

Director General Health and Social Services/
NHS Wales Chief Executive
Health and Social Services Group



Llywodraeth Cymru
Welsh Government

Nick Ramsay AM
Chair
Public Accounts Committee
National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

Our Ref: AG/AE

17 January 2019

Dear Mr Ramsay,

Medicines Management

Further to my letter of 16 August, it was agreed I would write again in to the Committee in January with a final update on the Welsh Government's response to the Medicines Management report.

I trust the additional information in Annex A clarifies the position in relation to the particular recommendations you highlight.

Yours sincerely

Dr Andrew Goodall

cc: Andrew Evans, Chief Pharmaceutical Officer, Welsh Government
CGU Mailbox
Cabinet Mailbox



Response to the recommendations contained in the report from the National Assembly for Wales Public Accounts Committee entitled Medicines Management - Annex A



Llywodraeth Cymru
Welsh Government

Recommendation	Welsh Government response	Update	Completed/ Ongoing
<p>Recommendation 1. The Committee recommends that the Welsh Government produce an annual report detailing information of improvements in medicines management across all the Health Boards, to increase accountability and ensure that the profile of medicines management remains high on the agenda of Health Boards.</p> <p>Accept</p>	<p>We do not consider an additional annual report published by Welsh Government is the most appropriate means to achieve the Committee’s objectives. As an alternative to an additional annual report published by the Welsh Government, we will require the All Wales Medicines Strategy Group (AWMSG) to undertake work to inform and develop their existing annual report and quarterly reporting of progress against national prescribing indicators to ensure the content and format is more relevant and accessible to Board members of NHS bodies. This work will be completed in time for the publication of AWMSG’s 2018-19 annual report.</p> <p>In addition we will continue to develop medicines management indicators as part of the NHS Wales Delivery Framework and hold NHS bodies to account for performance against the Framework.</p>	<p>As previously advised, this work will be completed in time for the publication of AWMSG’s 2018-19 annual report, expected to be published in September 2019.</p> <p>Medicines management indicators are included as part of the NHS Wales Delivery Framework; NHS bodies’ are held to account against the framework.</p>	<p>Ongoing until AWMSG 2018-19 annual report published</p> <p>Ongoing</p>

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<p>Recommendation 2. The Committee recommends that the Welsh Government issue a national directive that all Health Boards need to develop campaigns to raise the profile of medicines management. These campaigns should be based on examples of best practice from the existing campaigns which have been built up from a local level.</p> <p>Accept</p>	<p>The Welsh Government is providing funding to health boards to support communication activities which promote new models of primary care and its benefits for citizens. Citizen responsibility including their responsibilities in respect of prudent use of medicines is a core component of that work.</p> <p>We recognise there have already been successful local campaigns which raise the profile of medicines management in particular the <i>Your Medicines Your Health</i> campaign in Cwm Taf University Health Board. In addition to the funding being provided to health boards for primary care, we will make a further £50,000 available to health boards in 2018-19 to undertake local activity to promote the most successful elements of the <i>Your Medicines Your Health</i> campaign.</p>	<p>Funding of £100,000 over a 2 year period (2018-19 and 2019-20) has been provided to Cwm Taf University Health Board to oversee an All-Wales campaign based on their successful Your Medicines Your Health campaign to fund a campaign co-ordinator, communications activity and production of resources.</p> <p>The campaign's aim, with its message 'Take them if you can, tell us if you can't' is to prompt people who may not take their medication, for whatever reason, to speak to their doctor or pharmacist.</p>	<p>Completed</p>
<p>Recommendation 3. The Committee recommends that the Welsh Government sets out a plan to maximise the use of pharmacy resource, including developing the modules for delivery in</p>	<p>We will work with the NHS Wales Informatics Service and health boards to develop further modules within Choose Pharmacy which support community pharmacists delivering an increased range of clinical services. To that end further modules are in development within</p>	<p>Officials are monitoring the take up of independent prescribing courses and the independent prescribing pathfinder sites in community pharmacies over the two year funding period – to be</p>	<p>Ongoing – funding provided to March 2020</p>

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<p>choose pharmacy and enabling independent pharmacists. This plan should build on the recommendations in the Royal Pharmaceutical Society report.</p> <p>Accept</p>	<p>Choose Pharmacy to support the national emergency contraception service and a sore throat test and treat service from community pharmacies. It is intended that both modules will be available later in 2018-19. In addition to modules supporting service commissioning,</p> <p>Choose Pharmacy is being developed to improve communication between community pharmacies and other NHS providers, these developments include the transfer of electronic letters from pharmacies to GPs and secondary care (to be delivered by March 2019), and systems to allow Wales' NHS 111 service to refer appropriate patients to a community pharmacy.</p> <p>Independent prescribing by pharmacists has grown considerably in recent years, facilitated by the increase in GP practice based roles. In January 2018 in primary care, 65 pharmacist independent prescribers issued 50,484 prescriptions from 111 GP practices. This represented an increase of 150 percent in the number of active pharmacist independent prescribers, a 640 percent increase in</p>	<p>completed March 2020. Updated position from all Health Boards as at December 2018 is provided at Annex A.</p>	

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	<p>pharmacist prescriber prescriptions and a 171 percent increase in GP practices utilising pharmacist independent prescribers in the two years since January 2016.</p> <p>In April, we confirmed funding for up to 100 community pharmacists to take up independent prescribing courses in the next two years and to provide funding to health boards to support establishing up to 40 independent prescribing pathfinder sites in community pharmacies.</p> <p>We will ask the Welsh Pharmaceutical Committee to work with stakeholders including the Royal Pharmaceutical Society to develop a plan describing the future roles of pharmacy professionals in Wales and the steps to be taken by all stakeholders to maximise their use. The plan will be completed in the early part of 2019-20.</p>	<p>The Welsh Pharmaceutical Committee's plan will be finalised by 1 April 2019.</p>	<p>Ongoing – to be completed 1 April 2019</p>
<p>Recommendation 6. The Committee recommends that the Welsh Government amends the Community pharmacy contract to achieve</p>	<p>In October 2016, I announced the Welsh Government's intention to make new contractual arrangements for community pharmacies which ensure in future they provide a greater range of clinically</p>	<p>Significant progress has been made in 2018-19 to realise the potential of the community pharmacy sector in Wales.</p>	<p>Ongoing – to be completed February 2019</p>

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<p>the necessary changes to release the full potential of the pharmacy sector and realise the aim of moving from a quantity to a quality based set of arrangements, and implementation timescales.</p> <p>Accept</p>	<p>focused services and demonstrate a commitment to improving service quality. In 2017-18, we introduced new contractual arrangements which included 1) increased and ring-fenced funding for local commissioning of additional clinical services by health boards; 2) funding to support collaborative working between pharmacists and other healthcare professionals; and 3) a new quality and safety scheme for community pharmacies. Changes were funded through redistribution of £3.5million of contract funding from volume driven arrangements (i.e. dispensing) to the new quality focused elements.</p> <p>For 2018-19, agreement has been reached with Community Pharmacy Wales to redistribute a further £3million to support further service commissioning, to strengthen and expand the collaborative working and quality and safety schemes and to support developing the community pharmacy workforce.</p> <p>We will continue to transition to new community pharmacy contractual arrangements through annual</p>	<p>The funding to support commissioning and delivery of value adding clinical services from community pharmacies has been increased by over 75% since 2016-17 (from £3.9m to £6.9m). This has resulted in both the delivery of a wider range of services from pharmacies; and more consistent access to established services including the national common ailment, influenza vaccination, and smoking cessation services which are now routinely available in all health boards.</p> <p>By March 2019 the Welsh Government will have funded the training of over 45 community pharmacists as independent prescribers.</p> <p>In 2019-20 these pharmacists will use their prescribing training to improve access to treatment for an extended</p>	

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	negotiations with new arrangements fully in place by the end of 2020-21.	<p>range of minor ailments and to routine contraception from community pharmacies across Wales.</p> <p>Changes to the pharmacy collaboration and quality and safety schemes, which we introduced in 2017-18, have provided pharmacists with more opportunities to work with other healthcare professionals to improve the patient experience and improve the safe and effective dispensing and use of medicines.</p> <p>Negotiations on the 2019-20 contractual changes will be finalised by February 2019.</p>	
<p>Recommendation 8. The Committee recommends that the Welsh Government investigates ways of harnessing the academic expertise in Wales to understand the scale of Medicine Related Admissions</p>	<p>In January 2018, the Chief Pharmaceutical Officer established a short life working group (SLWG) comprised of medicines safety experts from across Wales to advise on the overall approach and programme required to drive improvements in medicines safety in the NHS in Wales.</p>	<p>A draft report has been prepared by the Short life working group (SLWG) which describes the components of a medicines safety programme for Wales, this is currently being considered by group members. The</p>	<p>Ongoing – to be completed March 2019</p>

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<p>and how to reduce them.</p> <p>Accept</p>	<p>The SLWG, which brings together experts both from practice and academia, met in January and March and further meetings are planned for 2018.</p> <p>The SLWG is currently examining sources of data, including but not limited to admissions to hospital, to determine an appropriate suite of measures of medicines related harm as the focus for a programme of work to improve medicines safety in Wales.</p> <p>We recognise significant harm results from medicines related admissions (MRAs) but are concerned that a focus on <i>post hoc</i> quantification of MRAs would detract from actions to stop harm before it occurs. The identification of MRAs is made difficult by the presence of confounding factors in many cases, and robust assessments of the prevalence of MRAs have been limited to research studies. There is however, a good understanding of the medicines and situations most frequently associated with MRAs; the priority for reducing medicines related harm will be to address these. The SLWG will conclude its work by</p>	<p>programme recommended by the SLWG requires agreement to support various elements of the programme from a range of stakeholders including 1000 Lives Improvement, Health Education and Improvement Wales (HEIW), the NHS Wales Informatics Service (NWIS) and the Welsh Analytical Prescribing Support Unit (WAPSU).</p> <p>Discussions are planned for early 2019 with the 1000 Lives Improvement Service to agree how they will coordinate the programme starting in Spring 2019 as part of its support for the six priority areas for quality improvement set out in a Healthier Wales. Work has also been undertaken with NWIS and WAPSU to define a series of medicines safety measures and develop a reporting tool which against</p>	

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	October 2018 after which it will perform the role of steering committee for the national medicines safety Programme.	which progress can be measured. The reporting tool will be completed by the end of 2018-19 in readiness for the start of the programme.	
<p>Recommendation 10. The Committee recommends that the Welsh Government co-ordinates a piece of work to share best practice from Health Boards relating to automated vending to help inform future decisions on medicine storage approaches.</p> <p>Accept</p>	<p>A workshop on automated ward vending arranged by the NHS Chief Pharmacists peer group, took place in November 2017 and involved a wide range of stakeholders from across all NHS bodies in Wales. The workshop allowed participants to share the experience of implementing automated ward vending in Welsh hospitals and to discuss future approaches to utilizing ward automated medicines storage. An initial report of the workshop has been produced and will be shared with the Committee as part of the comprehensive update on progress against the recommendations made by the Auditor General for Wales, in May 2018. Further work is now being undertaken to agree a set of principles for the further roll out of automated medicines storage. It is envisaged this work will be completed by October 2018.</p>	<p>Report on NHS Chief Pharmacists peer group automated ward vending workshop provided to Committee May 2018.</p>	<p>Completed</p>

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<p>Recommendation 11. The Committee recommends that the Welsh Government identifies whether any lessons could be learnt from NHS England relating to guidance on items which should not be usually be prescribed and the potential savings this approach may deliver.</p> <p>Accept</p>	<p>The Welsh Government has reservations regarding the approach being taken by NHS England to restrict the prescribing of some medicines on the basis they are available to purchase ‘over the counter’ from pharmacies. Such measures have the potential to limit access to effective treatment particularly amongst people on low incomes, and therefore to widen inequalities. The Committee will wish to note the final guidance on this matter from NHS England, included a number of exemptions to allow GPs to continue to prescribe these medicines in specified situations.</p> <p>We encourage NHS bodies in Wales to take measures to reduce unwarranted variation in prescribing and to restrict the prescribing of medicines of limited clinical value.</p> <p>In June 2017, the Chief Medical and Chief Pharmaceutical Officers wrote to NHS Medical Directors requiring health boards to identify all GP practices in their area and any clinical area within secondary care, where co-proxamol was being prescribed, and to instigate the</p>	<p>The All Wales Medicines Strategy Group (AWMSG) has developed guidance identifying a number of treatments that represent poor value for money, or are ineffective or dangerous (published October 2017). This guidance is being implemented by health boards.</p> <p>Follow up guidance which identifies further medicines/ medicines groups is currently being consulted on.</p> <p>Further guidance is being developed which has a focus on the prescribing of over the counter medicines.</p>	<p>Completed</p> <p>Further guidance will be consulted on and provided as required.</p>

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	<p>urgent review of patients with the intention of switching them to alternative, safer treatments.</p> <p>Subsequently in October 2017, the AWMSG issued guidance supporting restrictions to the prescribing of a further four medicines, with a combined annual expenditure of £5.4million in 2016-17) identified as low priority for funding in NHS Wales. Progress to reduce expenditure on these medicines will be tracked by the NHS Chief Pharmacists' Peer Group and reported to the Welsh Government's Efficiency, Healthcare Value and Improvement Group. During 2018-19 the AWMSG will work with the NHS bodies in Wales to identify further opportunities to reduce expenditure on medicines of limited clinical value. The NHS England guidance will be considered in this work.</p>		
<p>Recommendation 12. The Committee recommends that the Welsh Government produces a report on best practice on repeat prescription ordering by</p>	<p>The work of the prudent prescribing implementation group (PPIG) was instrumental in identifying areas where repeat prescribing systems could be improved. Subsequent to Welsh Government officials giving evidence to</p>	<p>The AWTTC has undertaken some initial work collating evidence of the outcomes of various initiatives being undertaken in Wales to improve repeat prescribing,</p>	<p>Ongoing</p>

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<p>cluster groups within the care home settings to help inform policies and actions on repeat prescriptions. And Recommendation 13. The Committee recommends that the Welsh Government provides an update on the work of the prudent prescribing group in relation to its work on the various models for repeat prescribing systems in September 2018 to allow the Committee to monitor progress on this.</p> <p>Accept</p>	<p>the Committee in March 2016, the PPIG was stood down and responsibility for implementing the recommendations of the group and testing the various approaches recommended to improve repeat prescribing and reduce waste passed to the NHS Chief Pharmacists' peer group.</p> <p>The Welsh Government will collate, from each health board and Community Pharmacy Wales, evidence of the outcomes of various pieces of work being taken forward to improve repeat prescribing, including work to improve repeat prescription ordering within care homes, and provide the committee with an update on this work in January 2019.</p>	<p>including work within care homes.</p> <p>The AWTTTC is engaging with health boards and Community Pharmacy Wales to identify suitable examples for inclusion. This work will be concluded by June 2019.</p> <p>On 24th January the Welsh Government and NWIS are also hosting a roundtable of stakeholders to consider issues around prescribing in primary care.</p>	
<p>Recommendation 14. The Committee recommends that the Welsh Government evaluates the roll out of Medicines Transcribing and e-Discharge system to consider the progress and the benefits of this approach.</p> <p>Accept</p>	<p>There is a substantial body of evidence that shows when patients move between care providers the risk of miscommunication and unintended changes to medicines are a significant problem. Improving the transfer of information about medicines across all care settings reduces incidents of avoidable harm to patients, improves patient safety and contributes to a reduction in avoidable medicines related</p>	<p>The uptake and evaluation of MTeD across NHS Wales is being monitored as part of routine progress reports.</p> <p>MTeD has been implemented across the majority of LHBs; the remaining LHBs operate existing medicines discharge systems but are working toward MTeD</p>	Ongoing

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	<p>admissions and readmissions to hospital. Evaluations of the benefits of the Medicines Transcribing and e-Discharge (MTeD) system have been undertaken previously by NWIS¹ and by Cwm Taf University Health Board² which demonstrate improvements in the quality and timeliness of discharge information being shared with patients' GPs. During the course of the Committee's inquiry the availability of MTeD across NHS bodies in Wales has increased significantly with MTeD implemented in five and pre-existing e-discharge solutions in place in two health boards. Further enhancements to the MTeD system are planned which will then facilitate its implementation in the two remaining health boards starting later in 2018-19.</p> <p>We expect NWIS and health boards to have appropriate evaluation arrangements in place which ensure the anticipated benefits of the MTeD system are being realised. We will work with NWIS to ensure these evaluation</p>	implementation.	

¹ NHS Wales Informatics Service. Medicines Transcribing & e-Discharge Project Evaluation Report. January 2014

² Davies C. e-Discharge Advice Letter Project – End Project Report. Cwm Taf University Health Board, November 2017.

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	measures form part of routine progress reports in relation to MTeD roll out.		
<p>Recommendation 16. The Committee recommends that as part of the Welsh Government's commissioning and roll out of a new e-prescribing system, it develops a supporting plan of action to help achieve the cultural shift that needs to accompany the introduction of a new system.</p> <p>And</p> <p>Recommendation 17. The Committee recommends that the Welsh Government shares its action plan and key milestones for the Electronic Prescribing and Medicines Administration (EPMA) system with the Committee.</p> <p>Accept</p>	<p>NWIS has established the Welsh Hospital Electronic Prescribing, Pharmacy and Medicines Administration (WHEPPMA) project to develop and implement the national plan for electronic prescribing in secondary care.</p> <p>The project team is currently working with stakeholders to complete the business case for procurement of a replacement hospital pharmacy system and an electronic prescribing and medicines administration solution. The business case will be considered by the Welsh Government in due course. Subject to the completion of a satisfactory business case, it is expected that the procurement of these systems will be initiated during 2018-19 with implementation beginning in 2019. The action plan, including the actions required by NHS bodies to deliver the necessary business change to maximise the benefits of e-prescribing, and key milestones will be established by NWIS through the WHEPPMA project and subject to approval of the business</p>	<p>Outline Business case for the WHEPPA project was approved by the then Cabinet Secretary in December 2018. Development of the Final Business Case is underway and is expected to be submitted by September 2019.</p> <p>e-Prescribing Outline Business Case is being developed by WHEPPMA and is expected to be submitted by September 2019</p>	<p>Ongoing</p>

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	case, we will ask NWIS to share their plans with the Committee.		