Medicines at the heart of NHS Wales

This briefing provides an overview of the key issues around medicines management in Wales and highlights initiatives happening across the Welsh NHS to achieve greater value and effectiveness for patients.

Key Points

A growing, ageing population with complex needs means that greater demand is being placed on all parts of the Welsh NHS and requires new models of care to ensure a sustainable healthcare system.

Primary and community based models of care, supported by well co-ordinated multi-disciplinary teams, can deliver positive outcomes for patients, reduce health inequalities, help people avoid hospital admissions and support patients to take greater responsibility for their own health and well-being. With so much of society’s contact with the health service now taking place in the community setting, the role of the pharmacist is critical to the health and well-being of the population and a sustainable NHS in Wales.

By providing access to medicines and clinical advice on its use, pharmacists bring significant benefits to patients and the NHS. Co-production between pharmacists and patients also enhances the patient experience, empowers individuals to better self-manage their condition, obtain the optimum outcome from their medicines, reduce avoidable waste and minimise unnecessary demand on other parts of the NHS.

This briefing addresses some of the key issues around medicines management and highlights how patients can benefit from the full integration of the pharmacy team into health and social care services in Wales. Integrated and collaborative working between health professionals has the advantage of delivering a seamless service for the public, improving population health and well-being and ensuring we have a sustainable healthcare system for the future.
1. From development to delivery

It is widely recognised that medicines are the most common therapeutic intervention in the NHS today. Advances in the delivery and availability of innovative drugs, as well as continuous investment in scientific research, are critical to ensuring that patients benefit from the positive impact of medicines.

UK pharmaceutical science has made huge contributions to improving the health and wealth of the nation, being a net earner for Britain for more than 30 years. It is an important employer and leading investor. Since the introduction of the Pharmaceutical Price Regulation Scheme in 2014, pharmaceutical companies have contributed £1.87 billion to help the NHS across the UK purchase new medicines and develop further scientific breakthroughs.

The NHS across the UK has made a positive contribution to this process. Death rates for breast, bowel, lung and prostate cancers have fallen by almost a third (30%) over the last 20 years; advances in medicines used to treat HIV/AIDS have contributed to an 85% reduction in death rates and has helped downgrade the disease from a fatal illness to a chronic condition. These are just some examples of how continuous improvement in the development and delivery of medicines has contributed hugely to population health and wellbeing.

The NHS in Wales spends more than £800 million each year on prescribed medicines. The number of items prescribed in Wales in 2016-17 was 80 million – this is an increase of 35% on 2006-07, when the figure stood at 59.1 million. There has also been an increase in the number of items prescribed per head of the population to patients registered with a GP - in 2016-17 the figure was 25, up from 19.1 in 2006-07.

2. Approval of medicines in Wales

As pressures on budgets grow, ensuring decisions around the use of medicines are rational, fair and cost-effective becomes increasingly important. Each year, approximately one hundred new medicines, or new formulations of existing medicines, receive a marketing authorisation from the European Medicines Agency (EMA). The managed introduction of new medicines in Wales, of which the medicines appraisal process is part, aims to ensure that valuable NHS resources are used responsibly to benefit patients.

Before new medicines can be routinely used to treat patients in the NHS, they undergo an appraisal process to determine if the benefits of the medicine justify the cost. For medicines for use within the NHS in Wales, this process is carried out by the National Institute for Health and Clinical Excellence (NICE) and the All Wales Medicines Strategy Group (AWMSG). Health Boards in Wales are legally obliged to fund medicines with a positive recommendation from NICE or AWMSG.

If a medicine has not been approved by either NICE or AWMSG, a clinician can make an Individual Patient Funding Request (IPFR) to the Health Board, if they believe this is the best treatment for the patient. There has recently been an independent review of the IPFR process and it was recommended that IPFR decisions should be based on whether a patient will gain significant clinical benefit from a treatment, and whether the treatment offers reasonable value for money. The Cabinet Secretary responded to the review in March 2017 confirming the implementation of the recommendations by the end of September 2017.

In January 2017, the Welsh Government established the New Treatment Fund. The Fund provides £16 million each year over a five-year period, with the aim of speeding up access to new medicines in Wales recommended by NICE or AWMSG. Medicines must now be made routinely available within two months of the published NICE Final Appraisal Determination (FAD) or AWMSG published advice, ensuring quicker access to approved medicines for patients in Wales.
3. The role of the pharmacist

As experts in medicine, pharmacists provide clinical and therapeutic services to patients on a daily basis whether working in the community, hospital, primary care or another pharmacy sector. The pharmacy profession is rapidly evolving to meet the challenges facing the NHS in Wales, with a wide range of roles emerging, including pharmacists working in urgent and emergency care, clinical specialist pharmacists, consultant pharmacists and intermediate care pharmacists.

In the average general hospital 97% of patients take medicines. Hospital pharmacists work on a daily basis with doctors, nurses and other members of multi-disciplinary teams to advise on the selection of medicine, the dose and route of administration for individual patients. They provide information about potential side effects and ensure that new treatments are compatible with existing medication and monitor the effects of treatment to ensure that it is safe and effective.

Establishing how pharmacists fit into the strategic agenda for health and social care is critical to the future configuration of health and care services in Wales. One of the most recent developments in the configuration of primary care services has been the establishment of 64 cluster networks across Wales. They offer significant opportunities to shift care closer to home through developing multi-disciplinary approaches to care, which includes input from cluster pharmacists. Utilising their clinical expertise, this cohort of pharmacists work across a group of practices to deliver local health priorities. These cluster roles have seen an increase in the number of individual GP practices employing pharmacists to work directly in individual practices to enhance the skill mix of their multi-disciplinary team.

Community pharmacy continues to play a vital role in improving and maintaining the nation’s health. The network of over 700 community pharmacies across Wales ensures that services and advice from healthcare professionals is easily accessible without an appointment and at a time that suits the needs of the patient. As the population ages and care delivered in the community becomes more complex, GPs are experiencing an increase in demand. In the UK, GPs undertake 57 million consultations for minor conditions each year and studies indicate that over 30% of these consultations could be effectively managed by pharmacists. In Wales the Common Ailments Service (CAS) enables patients to consult a community pharmacist, rather than their GP, for a range of common (minor) ailments. CAS is underpinned by the Choose Pharmacy IT infrastructure which provides a platform onto which further services can be built. The Welsh Government has allocated funding from the Efficiency through Technology Fund to roll out the Choose Pharmacy Platform to all community pharmacies in Wales. It provides an IT Infrastructure which can allow a ‘once for Wales’ approach to the development of patient facing services, ensuring consistent community pharmacy services for patients across Wales.

Pharmacists also have the knowledge and skills to support patients with long-term conditions in the community. One of the tools to enable this is the Medicines Use Review (MUR) and Prescription Intervention Service. The underlying aim of the MUR is to improve patients’ knowledge and use of medicines. Additionally, the Discharge Medication Review (DMR) service is specifically aimed at patients moving from one care setting to another. This service ensures that the person’s medicines are maintained accurately (reconciled) during transfer of care and that no unintentional changes are made.

Care home residents are particularly at risk of medication related problems as they often are elderly, prescribed several medicines and can have multiple co-morbidities. Clinical pharmacists have the key skills required to support GP practices to undertake medication reviews within care homes. Increasing the access to a pharmacist and/or a pharmacy technician could potentially improve the quality of medicines management within care homes and enhance patient medication safety.

Within the community, pharmacists and their teams also deliver public health messages on a daily basis, as well as supporting local and national public health campaigns. Community pharmacy teams can deliver advanced services, such as smoking cessation and emergency hormonal contraception (EHC) providing essential, professional support and reducing pressures on GPs and other services.
A significant number of the pharmacist workforce in Wales has successfully qualified as independent prescribers. A pharmacist independent prescriber can prescribe autonomously for any condition within their clinical competence. With extensive knowledge of medicines and the way they work in the body, pharmacists are able to complete their training and qualify as an independent prescriber in six months. This offers significant opportunities to the NHS when agility is needed to find innovative workforce and service solutions.

4. Medicine Waste

For patients to continue to receive high quality treatments the NHS and the public must ensure that NHS resources are used in the most efficient manner. With regard to medicines, efficiency means combining evidence based, cost effective prescribing for those who need it while ensuring the amount of unwanted medicines is minimised.

In 2008, waste contractors regulated by the Environment Agency declared that 254 metric tons of pharmaceutical waste originated in Wales, the equivalent to 20 double decker buses. This figure does not include the estimated 10% of waste medicines that are disposed of through other channels e.g. household waste, incineration with garden rubbish or into the sewer system. Furthermore, using audits from Community Pharmacy Wales, the Welsh Government estimates the total cost of unwanted or unused medicines in Wales to be between £15 - £50 million per year. In 2011-12 alone, more than 72 million items were dispensed in Wales, with an estimated £21.6m being wasted.

Reducing waste is everybody's responsibility and the NHS in Wales is working hard with patients, carers and the wider public to improve their understanding of medicines, ensuring medicines are used correctly and how medicine waste can be reduced.

5. Public and patient engagement

A multi-disciplinary approach to patient care is essential for effective patient-focused care. The NHS is working hard to remove traditional boundaries between healthcare sectors and healthcare professionals to ensure that patients benefit from the best skill mix and expertise across health and social care. However, informing the public about the evolving shape of new models of primary care and how to access members of the multi-disciplinary team is vital in changing patient pathways, reducing pressures on GP services, improving patient flow through the NHS and outcomes for patients.

As highlighted, the role of pharmacists is developing quickly in Wales with more clinical/patient facing roles being based in primary care settings and greater opportunities for clinical services to be led by pharmacists in community pharmacy settings. This means that promoting new pharmacy roles, as well as the benefits of accessing a pharmacist in primary and community care settings, is critical in the challenge to shift capacity and reduce pressures on GPs. An example of this is through Choose Pharmacy.

The Choose Pharmacy common ailments service aims to make better use of community pharmacy and the Choose Pharmacy IT Platform allows patients' hospital discharge information to be shared with a nominated pharmacy so that a follow-up review can be completed by a pharmacist. Through increasing patient understanding of these issues it is hoped that patients will be able to better self-manage their condition, obtain the optimum outcome from their medicines, and minimise unnecessary demand on other NHS services.
6. Brexit

a. Workforce

The development and distribution of medicines is international and intrinsically collaborative. Scientific breakthroughs and new ways of distributing innovative medicines are not developed in isolation, and mobility is crucial to the highest standards of performance. The free movement of technicians, innovators and pharmaceutical workers therefore, gives the UK a competitive advantage by opening up access to skills and international networks. It is for this reason that preserving the UK’s close ties with the medicine sector across Europe must be considered a key priority both during the Brexit negotiations and after March 2019.

b. The Brexit Health Alliance

The Welsh NHS Confederation is a member of the Brexit Health Alliance, made up of 15 organisations from the NHS, medical research, industry, patients and public health. The Alliance seeks to ensure that issues such as access to, and the development of medicines are given the prominence and attention they deserve as the UK prepares to leave the EU.

The Alliance does not adopt a stance on the merits or otherwise of Brexit - the aim is to make sure that the UK, and consequently Wales, is in the strongest possible position by March 2019. To this effect, the Alliance advocates a negotiated implementation period that adequately reflects the time needed to achieve key outcomes, including the following, relating to medicine:

- Alignment with the EU on the regulation of medicines and medical devices to ensure patient safety and access to treatment;
- Patients and the public do not suffer from possible disruptions in the supply and trade of medicines, other health technologies and goods, or a reduction of standards or patient safety;
- Patients have early access to new medicines and medical devices by securing maximum cooperation and alignment with the EU on the regulation of medicines and medical devices to deliver proportionate, robust and effective regulation of medicines and medical devices in the UK; and
- Pragmatic solutions allowing patients and the public to benefit from the UK’s participation in EU systems such as data sharing networks, pharmacovigilance and the clinical trials portal and databases post Brexit.

“The free movement of technicians, innovators and pharmaceutical workers gives the UK a competitive advantage by opening up access to skills and international networks.”
Medicines in practice across NHS Wales

The case studies below highlight the range of initiatives provided across NHS Wales:

**Pharmacy-led GP medication review service: Betsi Cadwaladr UHB**

The project started in 2016 with funding made available for a pharmacist supporting the local population (22,000 patients) accessing services from Healthy Prestatyn Iach (HPI). The pharmacist provided medication reviews and medicines management support. These included:

- Care home medication reviews undertaken in consultation with the care home staff and GPs;
- House bound reviews with social services and district nursing; and
- Private and local authority run care homes visits.

Pharmacy-led Polypharmacy reviews meant that HPI achieved an under spend of £50,000 against the allocated prescribing budget for the previous year, equating to a £309,000 reduction in prescribed medication costs versus the previous year spend for the GP practices that merged to become HPI. Activity data for the work of the pharmacist shows that they undertook at least 7,000 interventions in the financial year 2016-17. If each of these interventions saved 10 minutes of a GP’s time, it would equate to 31 weeks of a full time salaried GP per year.

**Reducing £4 million in wasted medicines: Abertawe Bro Morgannwg UHB**

From March 2017 patients in the Abertawe Bro Morgannwg University Health Board (ABMU) area are being asked to help save millions of pounds in wasted medicines which end up being destroyed unused. An estimated £4 million worth of prescription medicines are destroyed each year in the ABMU area because they are not needed. In many cases, these drugs were ordered on monthly repeat prescriptions, stockpiled unused in peoples’ homes or returned to local pharmacies for disposal.

In 2016, ABMU spent £97.6 million on prescribed medicines. Unfortunately, around £4 million of those drugs were wasted: £1.2 million were unused in patients’ homes; £1.4 million returned to community pharmacies and approximately £650,000 of unused drugs in care homes.

ABMU Pharmacist and Prescribing Advisor Vanessa Morton said: “we work with GP practices and the local community pharmacies to look at whether the prescribing they are doing is appropriate. We need to be looking at all areas to try and improve this. The whole community needs to be looking at this, not just pharmacists and doctors. It needs to be patients that help as well”.

**Pharmacist prescribers in the community: Powys Teaching HB**

A prescriber-led pharmacy service in Powys is reducing the demand for GP practice appointments from patients suffering with common conditions. Implemented in Llanidloes in December 2016, the service has seen the number of GP consultations for the most common conditions reduce by up to 21%.

The early evaluation suggests that the pharmacy service has successfully met the initial aim of providing patients with an alternative means of accessing an effective prescriber-led service for the management of common conditions. Feedback from patients is positive and the service is effective, accessible and can integrate successfully with existing services.

Indications are that with investment, the service can be replicated elsewhere and has the potential to be part of the multi-faceted programme support GP services.
Your Medicines, Your Health (YMYH): Cwm Taf UHB

Your Medicines, Your Health (YMYH) is a Cwm Taf UHB campaign to promote public education and awareness of the effective use of prescription medicines. The campaign highlights the important role prescription medicines can play in a person’s health and well-being.

Campaign initiatives include:

• Spring clean your medicines cupboard;
• Take them if you can, Tell us if you Can’t;
• Remember to bring your medicines into hospital; and
• The Holiday Health Travel Checklist for Medicines.

People can bring all their unwanted and unused prescription medicines, including creams, ointments, liquids, inhalers, pills and tablets, into their local branch where they can also arrange to have a free medicines use review with their pharmacist. Medicines use reviews are available to people who regularly take more than two prescription medicines or to people who are taking medicines for a long-term illness, such as asthma, heart disease, osteoporosis or diabetes.

Omnicell Project: Welsh Ambulance Service NHS Trust (WAST)

WAST is implementing a national programme to standardise its medicines management arrangements across Wales. The £500k project has been funded by the Welsh Government’s Efficiency Through Technology Fund and will install 20 identical Omnicell cabinets at 14 Welsh hospital sites and six ambulance stations across Wales. The project will provide a national, standardised solution that will modernise existing medicines management arrangements (heavily reliant on paper transactions), improving governance, audit and monitoring capabilities on the supply and use of medicines.

Working collaboratively with Health Board Pharmacy and Unscheduled Care Leads, the WAST Project Team has identified and agreed suitable locations for the WAST Omnicell units to be installed. Phased implementation by Health Board area began in February 2017 with full implementation of the project before the end of March 2018.

The main benefits of this project are:

• A national standardised system across Wales for WAST clinicians;
• Improved control on access and traceability of medicines;
• Improved stock management, reduction of out of date stock with potential associated cost savings;
• Full compliance with current and future legislation;
• Reduction in time taken to replenish controlled drugs;
• Enhanced security and reduction in potential for losses of benzodiazepines;
• Improved compliance with Medicines and Healthcare Products Regulatory Agency alerts;
• Improved reporting; and
• The potential for shared resources at compatible District General Hospital sites, which could lead to a reduction in overall medicine stock requirements for the wider NHS.
Conclusion

Medicines are key to the health and well-being of the population and as a trusted and professional partner in supporting individuals within the community and primary care, effective pharmacy services have a significant and increased role to play in ensuring we have a sustainable healthcare system in the coming decades. However, it is only by working with the public that the pharmacy team and the wider NHS, can empower the individual to better self-manage their condition, obtain the optimum outcome from their medicines, reduce avoidable waste and minimise unnecessary demand on the NHS.

How can the Welsh NHS Confederation help you?

Please get in touch if you want further details on any of the issues raised in this briefing.

For more information, please contact Nesta Lloyd-Jones, Policy and Public Affairs Manager: Nesta.Lloyd-Jones@welshconfed.org

The Welsh NHS Confederation is the only national membership body which represents all the organisations that make up the NHS in Wales: the seven Local Health Boards and three NHS Trusts.

You can visit our website at www.welshconfed.org or follow us on Twitter @WelshConfed