

**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

10 December 2019

Dear Mr Ramsay,

Medicines Management

Further to your letter of 15 February, you asked me to write again to the Committee with an update on a number of the Welsh Government's responses to the Medicines Management Inquiry report.

The enclosed document provides an update on progress on the remaining actions.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Andrew Goodall'.

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



Llywodraeth Cymru
Welsh Government

| Recommendation | Welsh Government response | Update | Completed/ Ongoing |
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| <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>The Chief Pharmaceutical Officer (ChPO) and the Deputy Chief Medical Officer (DCMO) wrote to health board Chief Executives on 16th October advising the reports had been published on the WAPSU website https://www.awttc.org/annual-prescribing-reports-2018%E2%80%932019. These reports provide a summary of each health boards’ progress to improve prescribing against eight measures in the four priority areas identified by the Welsh Government i.e.: safe prescribing; antimicrobial stewardship; cost efficiency; and access to medicines. An individual comparative report is available for each health</p> | <p>Completed</p> <p>(WAPSU will continue to provide this report on an annual basis)</p> |

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| | | <p>board, giving their rank and progress since the previous year, relative to the other health boards, against a common set of measures</p> <p>The reports have been designed to provide a snapshot of health boards' progress, providing a summary of the quality and safety of prescribing against a number of measures. In their letter to Chief Executives, the CPhO and DCMO stated that in all cases the expectation, as a minimum, would be for the reports to be disseminated to members of the board and provide opportunities are provided for them or the Quality and Safety committee, to scrutinise its content.</p> | |
| <p>Recommendation 3. The Committee recommends that the Welsh Government sets</p> | <p>We will work with the NHS Wales Informatics Service and health boards to develop further modules within Choose</p> | <p>Funding of £0.7m has continued to be made available to health boards</p> | <p>Ongoing – funding provided to March 2020</p> |

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| <p>out a plan to maximise the use of pharmacy resource, including developing the modules for delivery in choose pharmacy and enabling independent pharmacists. This plan should build on the recommendations in the Royal Pharmaceutical Society report.</p> <p>Accept</p> | <p>Pharmacy which support community pharmacists delivering an increased range of clinical services. To that end further modules are in development within 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</p> | <p>under the Community Pharmacy Contract Framework again in 2019-20 to support existing IP sites and increase the number of IP pathfinders across Wales.</p> <p>A service specification has been agreed with Community Pharmacy Wales (CPW) and the first IP pathfinder sites went live in Betsi Cadwaladr University Health in October 2019. Services in other health boards are anticipated to start before the end of 2019-20 once pharmacists have completed their IP training.</p> <p>In addition to the 45 pharmacists commencing IP training in 2018-19 funding is available to support up to 50 more in 2019-20.</p> <p>Choose Pharmacy is now available in 98% of community pharmacies</p> | |

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| | <p>from 111 GP practices. This represented an increase of 150 percent in the number of active pharmacist independent prescribers, a 640 percent increase in 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>across Wales and developing and rolling out new services such as the Sore Throat Test and Treat service.</p> <p>The Welsh Pharmaceutical Committee has completed its work to describe the pharmacy professions' ambitions for future roles. The report <i>Pharmacy: Delivering a Healthier Wales</i> describes actions to be taken by the pharmacy profession between now and 2030. The Minister for Health and Social Services has agreed to establish a Delivery Board to coordinate the necessary actions from across the pharmacy profession in Wales. The Board will meet in early 2020.</p> | |

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| <p>Recommendation 6. The Committee recommends that the Welsh Government amends the Community pharmacy contract to achieve 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>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 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</p> | <p>The funding to support commissioning and delivery of value adding clinical services from community pharmacies increased by 130% since 2016-17 (from £3.9m to £9.0m by the end of 2019-20).</p> <p>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, as well as transformative IP pathfinder services which are being initiated in 2019-20.</p> <p>By March 2020 the Welsh Government will have funded the training of more than 80 community pharmacists as independent prescribers to</p> | <p>Completed</p> |

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| | <p>and to support developing the community pharmacy workforce.</p> <p>We will continue to transition to new community pharmacy contractual arrangements through annual negotiations with new arrangements fully in place by the end of 2020-21.</p> | <p>improve access to treatment for an extended 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, continue to provide 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>Recommendation 8. The Committee recommends that the Welsh Government investigates ways of harnessing the academic expertise in Wales to understand the scale of</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>In response to the recommendations of the SLWG, “safer medicines management” was included one of the six quality areas within a Healthier Wales.</p> | <p>Completed</p> |

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| <p>Medicine Related Admissions 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.</p> | <p>The Welsh Government has been working with Improvement Cymru (IC) and partners at Health Education and Improvement Wales (HEIW), the NHS Wales Informatics Service (NWIS) and the Welsh Analytical Prescribing Support Unit (WAPSU) to put in place the components of a programme to support improving medicines safety. These include:</p> <ul style="list-style-type: none"> - Developing a medicines safety dashboard which combines data on medicines related admissions in the areas of bleeds, acute kidney injury and falls, with data on the prevalence of risk factors for harm by health board and primary care cluster (available since summer 2019); - A stronger focus on reducing medicines related | |

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| | <p>The SLWG will conclude its work by October 2018 after which it will perform the role of steering committee for the national medicines safety Programme.</p> | <p>harm in primary care contracts through the Quality and Safety Scheme for community pharmacies and the Quality Assurance and Improvement Framework (QAIF) for GPs (implemented in 2017 and 2018 respectively); and</p> <p>- A planned national medicines safety collaborative delivered by IC to oversee quality improvement activity by NHS organisations with the aim of reducing medicines related harm (to be launched in November 2019).</p> | |
| <p>Recommendation 12. The Committee recommends that the Welsh Government produces a report on best practice on repeat prescription ordering by cluster groups within the care home settings to help inform</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 the Committee in March 2016, the PPIG was stood down and responsibility for implementing the recommendations of</p> | <p>The AWTTTC has undertaken work collating evidence of the outcomes of various initiatives being undertaken in Wales to improve repeat prescribing, including work within care homes. This has included engaging with health boards and Community</p> | <p>Completed</p> |

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| <p>policies and actions on repeat prescriptions. And</p> <p>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 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>Pharmacy Wales to identify suitable examples for inclusion. This work has concluded and will be made available to all health boards in Wales before the end of the calendar year.</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 admissions and readmissions to hospital.</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 implementation.</p> | <p>Completed</p> |

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| | <p>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> | | |

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>The Final Business Case for the WHEPPA project has been submitted to the Welsh Government and is currently undergoing the scrutiny process.</p> <p>e-Prescribing Outline Business Case is being developed by WHEPPMA and is expected to be submitted by December 2019.</p> | <p>Ongoing</p> |

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