

# Medicines Governance Strategy 2016 - 2020

**Supporting safe, effective and  
efficient use of medicines**



**Area Drug and Therapeutics Committee**

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## 1.0 Introduction

This document sets out a four-year strategy to ensure safe and effective medicines are made available for patients in NHS Lothian. It defines four strategic statements relating to safe patient care, strategic planning, working in partnership and effective use of resources. Accompanying each strategic statement is a description of how medicines will continue to be managed safely, effectively and economically through good practice, risk assessment and other control mechanisms, and to advise NHS Lothian Board accordingly. The strategy was developed in partnership with key stakeholders, including patients. An impact assessment was carried out in August 2015 and no positive or negative impacts were identified. In terms of equality, health and wellbeing and human rights, the strategy does not consider how individual decisions or plans about medicines will impact on populations in Lothian. That is a matter for consideration on a case-by-case basis and will involve specific impact assessments where appropriate.

Medicines governance is supported by an advisory committee structure with Area Drug and Therapeutics Committee as the parent committee, itself reporting to the Healthcare Governance Committee, and from there on to NHS Lothian Board. There are various subcommittees with specific advisory functions, these being prescribing, approval of formulary recommendations and the introduction of new medicines, medicines policy, and medicines utilisation. Clinical engagement is essential for the operational development and implementation of associated work streams and recommendations.

NHS Lothian has a strong record of governance in medicines management underpinned by many policies and including the Lothian Joint Formulary (LJF) [www.ljf.scot.nhs.uk](http://www.ljf.scot.nhs.uk). With increasing demands and expectations of patients, it is essential that NHS Lothian maintain and improve on that record. Medicines management is a multidisciplinary activity involving doctors, pharmacists, nurses, managers and patients, who are involved in prescribing medicines and/or the implementation of prescribing policies. Those who are involved in the medicines management process in Lothian have developed expertise and knowledge in data interpretation, prescribing regulations, the pharmaceutical industry, critical appraisal of drug trial information and skills in influencing prescribing and communication. Decisions taken about the use of medicines not only have an important impact on the public health, as well as individual patients, but also form an essential component of NHS clinical governance activity.

Over the last 15 years medicines management activity has gradually increased in response to patient needs. This includes:

- ✓ a greater proportion of the population receiving medicines
- ✓ an increase in the elderly population
- ✓ an increase in the number of indications for drug therapy
- ✓ a tendency for individual patients to be taking more medicines simultaneously
- ✓ an increase in the overall cost of medicines
- ✓ increasingly powerful and effective marketing strategies from the pharmaceutical industry
- ✓ an increasing pressure from litigation surrounding the availability and use of medicines
- ✓ an increasing awareness about drug therapies by patients, the media and the Scottish Government has raised the profiles of medical therapies and also concerns over the possible
- ✓ an increase in the number of non-medical prescribers.

## 1.1 Aim

To ensure the safe, secure and the most clinically and cost effective use of medicines.

## 1.2 Objectives

- To provide an assurance framework to support high quality, safe and appropriate prescribing (maximising therapeutic benefit, minimising medication incidents, and avoiding drug interactions and adverse events).
- To optimise the use of medicines by achieving financial efficiency in prescribing (getting value for money and reducing waste).

## 1.3 Scope

This strategy is applicable to patients being treated with medicines within all care settings, including social care settings.

## 2.0 Philosophy, Principles and Objectives

This strategy is aligned with the following strategies:

- ‘Our Health, Our Care, Our Future’, NHS Lothian’s draft strategic plan 2014-2024<sup>1</sup>, which describes what NHS Lothian proposes to do over the coming decade to provide a high quality and sustainable healthcare system for the people of Lothian, in line with the strategic challenges set out in 2011 by the Scottish Government in its ‘2020 Vision’.<sup>2</sup> This vision is that by 2020 everyone is able to live longer healthier lives at home, or in a homely setting.
- Healthcare Improvement Scotland’s (HIS) Strategic Delivery Plan for Medicines 2015-18<sup>3</sup> sets out key priorities in line with the HIS Driving Improvement in Healthcare Our Strategy 2014-2020.<sup>4</sup>
- Prescription for Excellence<sup>5</sup> sets out a vision to “*Deliver NHS pharmaceutical care to all Patients by clinical pharmacist independent prescribers working across health and social care and hospital settings in the community through collaborative partnerships with patients and other health and social care professionals to ensure that patients have appropriate treatments with medicines and interventions at the right time and to ensure that all will benefit, and wasteful harm and variation avoided.*”
- In line with recommendations in the Scottish Government’s 2013 report on the function and role of Area Drug and Therapeutics Committees (ADTCs) as part of the New Medicines Reviews, NHS Scotland should retain the existing ADTC structure to maintain alignment of patient and GP interests, safe prescribing and enable Boards to manage their costs.<sup>6</sup>

### 3.0 Strategic Statements

The strategic statements are aligned with the NHS Lothian ADTC Constitution<sup>7</sup> with consideration to the aims identified in 'Our Health, Our Care, Our Future', NHS Lothian's draft strategic plan 2014-2024<sup>1</sup>.

#### **Strategic Statement 1    SAFE PATIENT CARE**

To provide professional advice, clinical advice and leadership to Lothian NHS Board, that supports safe, clinically effective, cost effective and patient centred medicines governance, in all care settings.

#### **How?**

- The medicines governance structure will continue to be robust and efficient to support the safe use of medicines in all health care settings.
- The committee structure (ADTC and subgroups) will be reviewed to strengthen functions and roles and minimise duplication. This will include consideration of other groups, e.g. Prescribing Resource Group, Acute Prescribing Forum, Individual Patient Treatment Request Panel, Cancer Medicines Management Committee, Medicines Homecare Governance Group, and others.
- Clinicians will be supported to actively engage in the advisory structure, as evident in operational management objectives and job plans.
- NHS Lothian will demonstrate effective engagement at national and local committee level.
- Guidelines, policies and systems to support the safe use of medicines will continue to be evidence-based, incorporate best practice, foster innovation and achieve safe, seamless and sustainable care pathways for patients.
- All medicines management related policies and guidelines are subject to regular review.
- All medicines governance information and policies are published in an accessible format.
- Communication with the public, patients and health care professionals regarding medicines use is effective.
- The Lothian Joint Formulary (LJF) will continue to provide clear recommendations to promote safe and cost effective use of medicines, which are aligned with national guidance.
- There is continued resource to support the LJF.
- The LJF continues to be easily accessible by health professionals, the public and patients.<sup>6</sup>
- Regional clinical working is explored with regard to networks could have a role in agreeing equitable access to new medicines in relation to their populations.<sup>6</sup>
- The Lothian Prescribing Bulletin (LPB) continues to be produced, disseminated and developed to ensure that key medicines information is communicated and health professionals can keep up to date with local medicines issues.
- Further development of electronic media for improved communication of prescribing advice.
- The use of existing, new medicines and technologies continues to be clinically and cost effective by implementing evidence based guidance.<sup>5</sup>
- Local decisions in respect of Scottish Medicines Consortium (SMC) advice continues to be available via the NHS Lothian website within 90 days in a manner which is accessed easily by the public and patients, as required by the Scottish Government Circular CMO 2012(1).<sup>6</sup>
- Medication incidents are monitored and analysed, and learning is shared.
- The recording of Adverse Drug Reactions is promoted to improve medicines safety.
- The use of patient identifiable prescribing data to monitor prescribing is explored further.<sup>5</sup>

## **Strategic Statement 2    STRATEGIC PLANNING**

To advise and support the strategic direction of all aspects of medicines governance and usage in all care settings ensuring inclusion within wider strategic planning carried out by Lothian NHS Board.

### **How?**

- NHS Lothian Board is supported in meeting its statutory responsibilities in relation to medicines and prescribing.
- The eHealth agenda continues to be supported.
- The eHealth team is engaged in the process to develop improved systems for the analysis of medicines use, for future planning, and for feedback to prescribers.
- The Scottish Patient Safety Programme and the Medicines Reconciliation Programme continue to be implemented in primary and secondary care.<sup>5</sup>
- The Centre for Adverse Reactions to Drugs Scotland (CARDS) and the Yellow Card Centre Scotland are supported, to improve medicines safety in NHS Lothian.
- Educational initiatives support safe use of medicines.
- Audit and research tools to support prescribing developments are developed

## **Strategic Statement 3    WORKING IN PARTNERSHIP**

To ensure multi-stakeholder engagement and joint working on all medicine related issues within all care settings, including social care settings.

### **How?**

- Robust systems are in place to support the delivery of the best model of integrated care for the population across primary, secondary and social care.<sup>1</sup>
- Medicines governance policies take account of social care partners and takes Health and Social Care Integration.<sup>6</sup>
- Patients and carers are involved as equal partners, enabling individuals to manage their own health and wellbeing and that of their families.<sup>1</sup>
- Members of the public are involved in the work of the ADTC (drawn from the members of the Board Patient and Public Forum (PPF) and will continue to assist with describing the processes in a way that is 'user-friendly' for the general public, and act as a link with the wider PPF.<sup>6</sup>
- The ADTC demonstrates the engagement of their PPF. For preference, Board ADTC should have at least one member drawn from the PPF or demonstrate the connection between the PPF and the work of the ADTC.<sup>6</sup>
- Clinicians are engaged in initiatives to develop, implement and monitor systems to ensure seamless care for patients at the transition points of admission and discharge from hospital.
- There is appropriate joint working and a productive relationship between NHS Lothian Board and the pharmaceutical industry.
- Research and Development and Audit Committees are aware of medicines governance policies to support safe practice.

#### **Strategic Statement 4      EFFECTIVE USE OF RESOURCES**

To inform the financial planning and governance of Lothian NHS Board to ensure the effective use of resources, in relation to medicines.

##### **How?**

- The use of available resources (including scientific and pharmacoeconomic evidence, personnel and money) is optimised to improve quality and reduce waste and to ensure patients receive equitable, appropriate and timely access to medicines. (The total annual budget for medicines for NHS Lothian for 2015-16 was £256 million; £117.7 million for acute / managed services and £138.6 million for primary care.)
- Robust prescribing budget setting mechanisms, for both primary and secondary care, are in place with joint financial planning and monitoring within defined timescales.
- Finance, management and clinical teams in primary and secondary care should work together to share financial planning processes, capture information to inform realistic budgets, and develop systems for monitoring and tracking of medicines use and expenditure.
- The budget setting process will be monitored to ensure that it accurately reflects requirements.
- Systems to improve budgetary management will continue to be improved.
- The General Practice Prescribing Committee (GPPC) will continue to provide advice to NHS Lothian on setting practice prescribing budgets, and developing Prescribing Indicators (PIs) to encourage and reward good prescribing practice.
- Identified personnel are charged with the collation of prescribing pressures from across primary and secondary care to present a comprehensive report that reflects the needs of the Lothian population.
- Performance indicators, used in primary care, should be explored for application and adaptation in secondary care.
- Horizon scanning and systematic forecasting of expenditure on new medicines and those in development will be co-ordinated by medicines management personnel across primary and secondary care in consultation with clinical teams.
- Information on the impact of new medicines is available to the appropriate clinical and finance managers.
- Information on changing trends in medicines use is coordinated, reviewed and available to the appropriate clinicians, managers and committees.
- Annual prescribing pressures reports will be collated and presented to the Director of Finance to fit with NHS Lothian planning cycles.

## 4.0 References

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## 5.0 List of Appendices

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**Appendix 1**  
**Members of Short-Life Working Group**

Ms Jo Bennett	Associate Director for Quality Improvement and Safety, Clinical Governance Support Team
Dr Dave Caesar	Clinical Director, Emergency Medicine
Dr James Cowan	Clinical Lead, Edinburgh Community Health Partnership
Dr David Farquharson	Medical Director
Ms Anne Gilchrist	Vice Chair, Area Drug and Therapeutics Committee and Lead Pharmacist, Medicines Management Team
Ms Melanie Johnson	Nurse Director
Dr Ian McKay	Clinical Director, Edinburgh Community Health Partnership
Professor Simon Maxwell	Chair, Area Drug and Therapeutics Committee and Pharmacology Consultant Physician and Clinical Pharmacologist
Ms Jenny Scott	Clinical Pharmacist
Professor Angela Timoney	Director of Pharmacy

**Appendix 2**  
Medicines Governance Committees involved in Consultation

Acute Prescribing Forum  
 Cancer Medicines Management Committee  
 Cancer and Therapeutics Advisory Committee  
 Community Health (Care) Partnership Prescribing Forum  
 Formulary Committee  
 General Practice Prescribing Committee  
 Hospital and Specialist Services Medicines Committee  
 Medicines Policies Subcommittee  
 Medicines Utilisation and Review Committee  
 Paediatric and Neonatal Drug and Therapeutics Committee  
 University Hospitals Division Drug and Therapeutics Committee