



AGENDA ITEM NO 6

REPORT NO IJB 35/19

**ANGUS HEALTH AND SOCIAL CARE
INTEGRATION JOINT BOARD – 26 JUNE 2019
PRESCRIBING MANAGEMENT UPDATE
REPORT BY VICKY IRONS, CHIEF OFFICER**

ABSTRACT

This report provides an update to the Integration Joint Board (IJB) on prescribing management in Angus.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board: -

- (i) note the content of the paper and the ongoing measures being taken to ensure efficient and effective prescribing within Angus.
- (ii) request a further update to be provided to the Integration Joint Board in December 2019.

2. BACKGROUND

FHS (Family Health Service) Prescribing has presented significant financial challenges within NHS Tayside, and historically disproportionately within Angus, for many years. While we are developing a greater understanding of the reasons behind our historical prescribing position, the complexities driving prescribing practice and spend cannot be overestimated. Population health and demand, medicines supply and pricing and clinician prescribing practice within both primary and acute care all determine prescribing spend.

Given the improved governance and performance regarding Prescribing, it is suggested reporting to the IJB moves to a 6 monthly basis from the current 4 monthly basis.

3. CURRENT POSITION

Work continues in line with the prescribing management plan, as outlined in Appendix 1 to the Report, which was approved by the IJB in February 2019.

Progress of note since our last report:

1. Cost per weighted patient. Prescribing spend within Angus which was at c14% above the national average at times during 2017 is now less than 8% above the national average. This has significantly improved the associated financial position as outlined below. This has been achieved through the comprehensive actions undertaken both regionally and locally, with an increasing focus on delivering realistic medicine and supporting enhanced alternatives or adjuncts to prescribing where that is clinically appropriate.

2. Practice review report. Angus practices all received updated prescribing report in May 2019 and are in the process of agreeing their prescribing programmes for 2019/20. It is anticipated that most of the large-scale efficiency prescribing programmes have now been completed and that further incremental efficiencies will be delivered through a larger number of programmes with smaller scale returns.

3. Establishment of Non- Medicines Advisory Group. This regional group chaired by Angus Clinical Prescribing Lead Dr Scott Jamieson is in the process of finalising a workplan for 2019/20, with work already commenced on several high priority areas. This includes specialist baby milk, continence products, diabetes consumables, stoma products, wound care products and oral nutritional supplements. This group provides a governance structure for an area of high cost prescribing with opportunities for improvement.

4. Pharmacotherapy service development. As reported to the IJB in April 2019 recruitment to the additional pharmacotherapy posts as part of the Primary Care Improvement Plan, has been successful with relative confidence that the approved staffing levels for 2019/20 will be achieved.

5. Diabetes Pathway Reviews. A test of change is underway in North East Angus to help to inform the development and implementation of a more holistic pathway of care for people living with or at risk of developing diabetes.

6. Technical switches. The pharmacy team have worked hard to ensure all agreed regional switch programs are implemented, and completion is currently circa 84%, with further work ongoing to conclude.

4. FINANCIAL IMPLICATIONS

As noted previously, historically Angus has been an outlier in terms of Prescribing spend per weighted populations. While the variance to national averages was at c14% at times during 2017/18, it has reduced now reduced to under 8% based on more recent 2018/19 information. This progress reflects the good work described in this report.

While the year-end position for Prescribing does contain an element of estimation (and accrual), it can be seen that the previously forecast improvement in the prescribing out-turn has materialised with a year end over spend on FHS Prescribing of £1.4m – approximately half the level of overspend reported last year and a lower over spend than most recently forecast for 2018/19. The overall improvement in Prescribing has been a major factor in improving the IJB's financial position in this year. The improvement also helps support some of the assumptions made in the IJB's Strategic Financial Plan for 2019/20 to 2021/22 (as set out in report 21/19) and therefore, very importantly, the delivery of the IJB's Strategic Plan.

As noted in the Finance report to the June 2019 IJB, there is still a lack of clarity regarding the IJB's financial planning framework for Prescribing for 2019/20 onwards. It is was reasonable for Angus IJB to expect this to be driven forward via the Tayside Prescribing Management Group (with Finance input through that group), however prescribing financial plans for 2019/20 onwards remain incomplete. Given the scale of the IJB's Prescribing resources, the ongoing over spend (despite significant progress made to date) and the underlying risks that always exist re prescribing, the lack of a final associated financial plan does need resolved. The IJB will continue to work with NHS Tayside Finance to conclude this matter.

5. OTHER IMPLICATIONS

The strategic risks associated with prescribing are detailed within the Angus IJB Strategic Risk Register.

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List of Appendices:

Appendix 1 – Angus HSCP Prescribing Management Plan: Active Interventions 2019/20