



ANGUS HEALTH AND SOCIAL CARE

INTEGRATION JOINT BOARD – 24 JUNE 2020

PRESCRIBING MANAGEMENT

REPORT BY GAIL SMITH, INTERIM CHIEF OFFICER

ABSTRACT

This report provides an update to the Integration Joint Board 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 2020.
- (ii) Endorse the use of prescribing savings to provide sustainable investment in evidence-based models of care including social prescribing.

2. BACKGROUND

Historically FHS (Family Health Service) Prescribing has presented a financial challenge within Angus. The drivers behind prescribing spend are multifactorial and complex with recent chronic supply issues playing a large part in variations in spend. There has also been an impact more recently on supply issues due to the corona virus. The previously approved Angus Primary Care Improvement Plan which includes the roll out of pharmacotherapy services is one aspect in which sustainable improvement in prescribing will emerge. The social prescribing initiative is another priority area which it is hoped will reduce the reliance on prescribed medicines for some conditions. In addition by developing an improved understanding of the reasons for our prescribing position in conjunction with a multidisciplinary approach with strong clinical leadership and buy in, a steady and sustainable improvement is emerging.

3. CURRENT POSITION

Work continues in line with the prescribing management plan (Appendix One), which is in the process of being updated for the year 2020/21. This is for noting and will be submitted to the Integration Joint Board (IJB) for approval on completion of the plan.

Progress of note since our last report:

Cost per waited patient

The Angus cost per waited patient continues to fall. Previous spend within Angus was running c6-9% above the national average. The most recent data shows that this is now running c5-8% above the national average. This has been achieved by implementing both a regional prescribing work plan in addition to a targeted local approach that has focussed on

clinical engagement with individual practices supporting realistic medicine and alternatives to prescribing where that is clinically appropriate.

Transforming Tayside

Angus prescribing leads are currently contributing to the Transforming Tayside programme, which aims to support the redesign of services across Tayside, including prescribing. Two priority areas identified for focussed investment through the Transforming Tayside programme are chronic pain service improvement and the prescribing of non-medicines.

Chronic Pain

As previously highlighted, there are plans in place to support improved options for people experiencing pain with a proposal to reinvest savings from reduced reliance on medicines. The Chronic Pain Non-Pharmacological Pain Pathway is expected to be approved within the next 2 weeks after wider engagement, consultation and feedback has been completed. This evidence based pathway will be introduced across Tayside to ensure access to the most appropriate treatment for patients within communities.

With the introduction of this pathway alongside GP and practice pharmacist' reviews of patients on long term pain management medication it is planned that there will be a reduction in the prescribing of gabapentinoids and opiates towards the Scottish Average. The intention is prescribing savings will release funds to provide sustainable investment in evidence based models of care including social prescribing.

PONMAG (Prescribing of Non-Medicines Advisory Group)

The previous iteration of this report detailed the work of the Tayside Prescribing of Non-Medicines Advisory Group, chaired by Angus GP Prescribing Lead Dr Scott Jamieson. The work plan that includes the piloting of stoma product review, the baby milk pathway and the review of diabetes consumables is all still underway. The impact of the corona virus has meant that the driving forward of these projects has been temporarily on hold. The next PONMAG meeting will be held in July with the plan to restart projects in August. Continence and wound care reformation is now underway due to the successful appointment to a nursing post dedicated to support work in this area within Tayside.

4. FINANCIAL IMPLICATIONS

The IJB's regular Finance Reports provide an update regarding the financial position for Prescribing. The previous submission of this paper indicated that there would be c£800k overspend for the year end 2019/20. The year-end position also includes an increased accrual for March to reflect a spike in prescribing activity during the second half of the month directly linked to the Covid-19 pandemic 'lockdown' period, along with some additional funding from Scottish Government to offset the financial impact at IJB and Board level.

Included in the year end position is an impact of COVID-19 of £374k in March 2020 reflecting an estimate of approximate 20% increase in drugs dispensed in March. From information now available, patterns are emerging of reduced dispensing in April and May 2020 and it is currently estimated the net impact on prescribing costs for the 3 months March -May 2020 will be for a 1% to 2% increase in costs above previous expectations. In due course, finance representatives will liaise with Pharmacy representatives through the regional PMG to monitor longer term impact of COVID-19 on prescribing costs

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 One - Angus HSPC Prescribing Management Plan: Active Interventions 2019/20