



AGENDA ITEM NO 9

REPORT NO IJB 20/21

ANGUS HEALTH AND SOCIAL CARE

INTEGRATION JOINT BOARD 23 JUNE 2021

PRESCRIBING MANAGEMENT

REPORT BY GAIL SMITH, INTERIM 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) Notes the content of the paper and the ongoing measures being taken to ensure efficient and effective prescribing within Angus.
- (ii) Requests a further update to be provided to the Integration Joint Board in November 2021.
- (ii) Notes ongoing opportunities to progress the use of prescribing savings to support sustainable investment in evidence-based models of care.

2. BACKGROUND

Historically Family Health Service (FHS) Prescribing has presented a financial challenge within Angus. The drivers behind prescribing spend are multifactorial and complex. There are ongoing supplies issues that continue to play a part in variations in spend. The position also includes the after-effects of the COVID-19 pandemic and the subsequent drive to ensure the prompt delivery of the vaccination program. The active management of prescribing has continued but has been secondary to the demands placed on clusters to continue to deliver General Medical Services (GMS) in addition to the contribution they have made in vaccinating our Angus population. The vaccination program though continuing, will be more proactively planned and manageable allowing for prescribing management to be addressed with renewed vigour through the annual work plan.

3. CURRENT POSITION

Prescribing governance continues through the Angus Prescribing Management Group (PMG), with good clinical engagement and buy-in. An annual work plan is now in place, tracked and updated at each PMG meeting. This most recent plan is included as Appendix A; this will be updated following the forthcoming quality management systems for prescribing event described below.

Quality Management Systems for Prescribing

Much progress has been made within Angus HSCP to reduce the costs of prescribing, reducing the variation from the Scottish average. This has involved good engagement across

Angus General Practitioners (GP), the Locality Pharmacy Team and the expanded multi-disciplinary team within GP practices. The focus has remained on prescribing improvements rather than cost reduction, thus maintaining the engagement of patients and clinicians.

The developing GP Clusters and the expanded Pharmacotherapy Team have presented fresh opportunities to work differently. With the increasing maturity of teams it is time to look again at sustainable prescribing quality management for the future. Currently the systems for supporting prescribing are heavily dependent on a few key individuals. A stakeholder event will take place on Friday 2nd July 2021 in order to develop the future model for quality management in prescribing which will aim to create a sustainable system for the ongoing management of prescribing in Angus.

Serial Prescribing

The serial prescribing aspect of the Medicines Care and Review Service provided by Community Pharmacy has proven to be an asset in the past 12 months. This service means that those patients who are stable on their long term repeat medicines can be reviewed and assessed as suitable to have a 24 week, 48 week or 56 week prescription. There is additional benefit to the patient at the end of the serial prescription because this triggers a robust medication review by both the pharmacy team and the GP before the next serial prescription is produced.

There is an ongoing commitment from the GP practice teams in Angus to continue to increase the numbers of suitable patients onto serial prescriptions. This has moved at pace this past year with the added benefit of managing more appropriate patient contact with the GP Practice as they have moved through the COVID-19 pandemic. The clusters will aim for all Practices within each cluster to move toward a figure of 40% of suitable patients on to serial prescriptions by March 2022. The drive for this improvement piece of work will be a focus on quality and proactive reviews.

Social Prescribing

The past 12 months has seen the rapid expansion of Social Prescribing. In the period October 2020 to March 2021 there were over 1500 referrals to the Social Prescribing Service across Angus. Due to social distancing measures in place because of the pandemic many of these interactions have been telephone consultations however, the Social Prescribing Team are keen to develop more face to face interactions as the phasing down of levels allows. The teams have integrated well into the GP practices in which they are situated. A recent initiative has been the community garden that is developing within the car park at The Links Health Centre. Over 30 volunteers and patients have come together to create this garden. This has addressed issues for many people experiencing loneliness and social isolation. Future work planned includes Social Prescribers working with Public Health to undertake Activity Training. This will allow the team to further expand their outreach work with the community.

Tayside Prescribing Strategy

The Angus PMG as part of the Angus Health and Social Care Partnership is now well established with excellent clinical engagement to continue to work with our clinical leaders as well as grass roots staff to deliver the vision for quality prescribing as set out in the Tayside Prescribing Strategy.

As discussed in the previous IJB paper in December, the Tayside Prescribing Strategy 2020-22 is now endorsed. Implementation of the strategy has been progressed at a slower pace than might of been planned due to the restrictions imposed by the COVID-19 pandemic and the resultant time constraints for key individuals. The current work plan focuses on several key areas for development:

Prescribing of Non-Medicines Advisory Group (PONMAG)
Three year financial framework
Shared decision making in prescribing and social prescribing
Improvement to medicines management governance framework to deliver safe, effective prescribing
Mental health prescribing in primary care and social prescribing accessibility
Chronic Pain Service Improvement Group
Decision support tools for management of polypharmacy
Communication of Tayside Prescribing Strategy and three year programme to deliver it

There is a Prescribing Strategy Steering Group in place to support progress through the work plan with a programme management approach.

4. PROPOSALS

The Angus PMG as part of the Angus Health and Social Care Partnership will continue to work in partnership with our clinical leaders to deliver the vision for quality prescribing as set out in the Tayside Prescribing Strategy.

5. FINANCIAL IMPLICATIONS

The overall FHS prescribing (combining GP Prescribing and General Practice Services (GPS) Others) position to March 2021 shows a cumulative under spend of c£330,000. This reflects the position following receipt of actual prescribing data for April 2020 to January 2021, and accruals for February 2021 and March 2021. This very positive position reflects systematic progress in recent years.

A 3 year financial framework has now been agreed for Angus prescribing resources. This reflects work progressed through the regional PMG. The detailed financial forecast for 2021/22 indicates an over spend of c£19,000. However shortfalls for subsequent year are forecast to be much more significant without further intervention and support. This highlights the need for Pharmacy resources to be able to support this process to avoid prescribing reverting to becoming a financial burden for the overall IJB.

	Overall FHS Prescribing(combining GP Prescribing and GPS(others))			
	Annual Budget	Annual Expenditure	Year End Position (Over) /under	2020/21 Financial Plan Full Year Forecast (Over) /Under
	£000	£000	£000	£000
Angus	21,539	21,209	330	(13)

6. RISK

The Angus HSCP Strategic Prescribing Risk continues to be monitored through Angus PMG. It has a previous risk scoring of 25. Extensive mitigating actions are in place including practice prescribing projects, quality improvement activities, and implementation of pharmacotherapy, polypharmacy reviews and review of the top 70 GIC drugs. Use of the national therapeutic indicators is encouraged at practice, cluster and at HSCP level, this is publicly available accessible data.

A workshop is planned to focus on quality management of prescribing. The recently launched NHS Tayside Prescribing Strategy is being promoted and actions are being progressed to implement the strategy locally.

Current risk: Inherent risk (without mitigation): 25; Residual risk (with mitigation): 9

7. OTHER IMPLICATIONS

N/A

8. EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment is not required.

9. DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in Section 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Angus Council and NHS Tayside.

Direction Required to Angus Council, NHS Tayside or Both	Direction to:	
	No Direction Required	X
	Angus Council	
	NHS Tayside	
	Angus Council and NHS Tayside	

**REPORT AUTHOR: Michelle Logan Rena, Pharmacy Lead
Dr Alison Clement, Associate Medical Director
Alexander Berry, Chief Finance Officer**

EMAIL DETAILS: tay.AngusHSCP@nhs.scot

List of Appendices: Appendix A - Annual Prescribing Work plan