

Medicines Governance Strategy

2023- 2027

Supporting safe, effective and

efficient use of medicines

**Area Drug and Therapeutics Committee**

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**1.0 Introduction**

The Area Drug and Therapeutics Committee (ADTC) is the professional advisory group for medicine governance in NHS Lothian. It is a clinically driven committee that ensures medicines issues are addressed across the health system and reports to NHS Lothian’s Board through the clinical governance structure.

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.

Medicines governance is supported by an advisory sub-committee structure, with the ADTC Committee as the parent committee. The ADTC reports to the Healthcare Governance Committee, and from there on to NHS Lothian Board. The strategy outlines both the structure and function of medicines governance, with strategic alignment with NHS Lothian. There are various subcommittees with specific advisory functions (Appendix 1&2). Engagement for the Multidisciplinary Team across the interface between primary and secondary care 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. This strategy outlines the medicines governance framework for transparent accountability and visibility with assurance reporting of issues pertaining to medicines issues in NHS Lothian. With increasing demands and expectations of patients, it is essential that NHS Lothian maintain and improve on that record.

1.1 Aim

To ensure the safe, clinically effective, and cost-effective use of medicines in NHS Lothian, aligning with Scottish Government Policy and NHS Lothian Strategy.

1.2 Objectives

* To provide a transparent assurance framework to support safe high quality and appropriate prescribing (maximising therapeutic benefit, minimising medication incidents, and avoiding drug interactions and adverse events).
* To optimise the use of medicines by achieving efficiency in prescribing (reducing harm, getting value for money and reducing waste).
* Provide assurance that key priorities pertaining to medicines are effectively communicated across sectors, including a framework for escalation of rapidly evolving issues.

1.3 Scope

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

2.0 Strategic Statements

The strategic statements are aligned with the NHS Lothian ADTC Constitution with consideration to the aims identified in the Lothian Strategic Development Framework.

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.

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.

How?

The committee structure (ADTC and subgroups) supports medicine governance function and minimises duplication (Appendix 1). A Roles and Responsibilities matrix, clearly outlining roles and responsibilities for the medicine’s governance sub-committees, has been developed (Appendix 2) defining roles in relation to a wide range of required deliverables. The overarching functions and roles of a select number of these subgroups include:

**Drugs and Therapeutics Committees (GPPC, REAS DTC & UHD DTC)**

* Support, consult and collaborate with clinical services in relation to prescribing issues including formulary, prescribing policy, new drug recommendation and national medicines directives.
* Responsible for supporting the optimisation workstreams and reviewing the real life impact (clinical outcome data)
* Assess adherence to medicines policy are being implemented appropriately and communicate issues.

**Medicines Utilisation Review Group (MURG)**

* Utilisation of medicines in clinical practice, monitoring and react/communicate issues with relevant subgroups.
* Advises on the best use of available resources currently in use across NHS directorates to ensure patients receive equitable, appropriate, and timely access to medicines.
	+ Benchmark utilisation of medicines against predicted usage and other health boards in Scotland; and to inform any local considerations for potential efficiency saving initiatives.
	+ Supply of prescribing data and interrogate the data and highlighting variations to inform decisions.

**Medicines Safety and Risk Group (MSRG)**

* + Reviews and advises on Medicines and Healthcare Products Regulatory Agency (MHRA) safety advice.
	+ The recording of Adverse Drug Reactions is promoted to improve medicines safety.
	+ Responsible for identifying common themes reported via Datix affecting medicines safety in NHS Lothian and communication to the appropriate groups.
	+ Utilise the YCC Scotland data to improve safety within NHS Lothian
	+ Medication incidents are monitored and analysed, and learning is shared across NHS Lothian.

**Medicines Policy Sub-committee**

* + Develops and reviews all policies involving procurement, supply, storage, handling, prescribing and administration of medicines within NHS Lothian, and across interfaces with other health boards and organisations, taking account of relevant legislation, national guidance and local service needs.
	+ Evolve and implement local pathways to meet with national directives in medicines governance.

**Hospital Electronic Prescribing and Medicines Administration (HEPMA) Group**

* + Identify areas of clinical risk and realised benefits through the collation of prescribing and administration data for analysis.
	+ Is accountable for protocol development and approvals, systems roles including clinical training and testing.

The ADTC and its subgroups are closely aligned with numerous committees within NHS Lothian’s Clinical and Pharmacy Directorates. These groups include, but are not limited to, Acute Prescribing Forum, Individual Patient Treatment Request Panel, Cancer Medicines Management Committee, Medicines Homecare Governance Group, and others. Assurance of communication and interdependences are detailed within the appropriate medicine’s governance sub-committees’ constitution.

East Region Formulary (ERF) is supported by the ADTCs in Lothian, Borders and Fife. The ERF recommends first and second choice drugs for individual indications, dosages, and information for prescribers. These recommendations are based on advice from Scottish Medicines Consortium (SMC), National Institute for Health and Care Excellence (NICE), Scottish Intercollegiate Guidelines Network (SIGN), NHS Quality Improvement Scotland (QIS), New Cancer Medicines Advisory Group (NCMAG) and regional requests. The ERF advises and collaborates with the relevant NHS Lothian DTC on implementation of the Formulary recommendations.

The ADTC is responsible for ensuring communication with the public, patients and health care professionals regarding medicines use is effective. Key factors in ensuring this is delivered include:

* Communication of evolving issues from DTCs to the relevant clinical groups via links with lead clinicals and pharmacists.
* Maintaining procedures and policies for clear communication to prescribers and patients.
* 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 in both primary and secondary care.

**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 NHS Lothian Board.

**How?**

* NHS Lothian Board is supported in meeting its statutory responsibilities in relation to medicines and prescribing.
* Digital enablement continues to be developed and implemented.
* The Digital 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 use of patient identifiable prescribing data to monitor and maximise effective prescribing is explored further in both primary and secondary care through evolving platforms such as HEPMA and primary care databases.
* Implementation of Patient Safety strategies in line with the NHS Lothian Quality Strategy
* Utilise the YCC Scotland data to improve safety within NHS Lothian
* Support professional development relating to medicines safety and governance.
* Support and establish dynamic initiatives to support safe use of medicines.
* Audit and research tools to support prescribing developments are developed and maintained.
* The inclusion of sustainable models of care will be encouraged in medicines governance procedures.

**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.
* Medicines governance policies are coproduced with our Social Care partners.
* Patients and carers are involved as equal partners, enabling individuals to manage their own health and wellbeing and that of their families.
* Seek patient engagement to test our governance process and assure quality.
* Membership of the ADTC should include public and professional representation.
* 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. .
* 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, affordable, appropriate and timely access to medicines.
* 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.
* Acute and Primary Care prescribing forums will invite services to review the effective use of resources in the presence of finance, management and clinical leads.
* The General Practice Prescribing Committee (GPPC) will continue to provide advice to NHS Lothian on setting practice prescribing budgets and develop 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.

3.0 Resources

Lothian Strategic Development Framework

Area Drug and Therapeutics Committee Constitution. NHS Lothian.

List of Appendices

*Appendix 1*

Medicines Governance Sub-Committee Structure

*Appendix 2*

Medicine Governance Roles and Responsibilities Matrix

*Appendix 1*

Medicines Governance Sub-Committee Structure



*Appendix 2*

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