

**NHS DORSET CLINICAL COMMISSIONING GROUP
PRIMARY CARE COMMISSIONING COMMITTEE
MEDICINES MANAGEMENT REPORT**

Date of the meeting	02/08/2017
Author	K Gough, Head of Medicines Optimisation
Purpose of Report	The purpose of this report is to update the Committee on medicines, prescribing and dispensing issues and the activity of the Medicines Optimisation Group (MOG).
Recommendation	The Committee is asked to note the report and MOG minutes.
Stakeholder Engagement	There are patient representatives on the Medicines Optimisation Group (MOG) and the GP prescribing leads for each locality are members of the MOG and work closely with the medicines team on prescribing issues.
Previous GB / Committee/s, Dates	N/A

Monitoring and Assurance Summary

This report links to the following Strategic Principles	<ul style="list-style-type: none"> • Services designed around people • Preventing ill health and reducing inequalities • Sustainable healthcare services • Care closer to home 		
	Yes [e.g. ✓]	Any action required?	
		Yes Detail in report	No
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		✓
Board Assurance Framework Risk Register	✓		✓
Budgetary Impact	✓		✓
Legal/Regulatory	✓		✓
People/Staff	✓		✓
Financial/Value for Money/Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓
I confirm that I have considered the implications of this report on each of the matters above, as indicated	✓		

Initials : KMG

1. Introduction

- 1.1 The purpose of this report is to present to the Committee the minutes of the Medicines Optimisation Group (MOG) and to provide a brief update on some general medicines optimisation topics.

2. Report

- 2.1 The draft minutes for the June MOG are attached as Appendix 1. The Committee is asked to note the minutes.
- 2.2 The NHS Business Services Authority (BSA) have launched a new version of ePACT. ePACT is an online application which gives authorised users access to 60 months of prescription data. ePACT 2 is able to link prescribing data with NHS numbers and, as a result, has a number of additional reporting functions. Members of the medicines team have received training in how to use the new system and will be developing new reporting as the year passes.
- 2.3 Nationally the new data sets are expected to be used to inform polypharmacy measures which will be used to identify patient age cohorts on multiple medicines. This information is anticipated to be helpful in identifying medicines review needs.
- 2.4 In July there are expected to be details of pharmacy integration fund initiatives announced with plans to have care home pharmacist input and integrated community care pharmacist resources. It is hoped that these can integrate with the initiatives already underway in Dorset and ensure that medicines optimisation can be fully integrated into new service developments.
- 2.5 It is expected that NHS England will publish public consultations on lower priority medicines which will include seeking opinion on the prescribing of over the counter medicines etc. When these consultations are announced, organisational responses will be drafted.
- 2.6 NICE guidance on use of medicines in social care NG67 was published in March 2017. Representatives from the medicines team presented to a group of social care providers from across Dorset outlining the updated recommendations for this guideline for medicines support in social care. Critical to this is appropriate medication review when patients are identified with medicines support needs, and this fits with work being undertaken as part of the frailty agenda.
- 2.7 The medicines team are working on some medicines review minimum standards to accompany the frailty work, first drafts are expected to be circulated to GP prescribing leads at the end of July.
- 2.8 Budget and forecast: prescribing budget forecasts first become available in late August. The medicines team are promoting the 2017/18 savings plan at meetings with practices and localities. First quarter progress reports will be developed with forecasts.

- 2.9 Antibacterial resistance strategy: A consultant microbiologist starts work with the CCG medicines team in August, working one day a fortnight. One of the first tasks will be to work with Practices and prescribers who received letters from the DH chief medical officer as they were in the top 10 or 20% of antibiotic prescribers in England.

3. Conclusion

- 3.1 The medicines team continues to promote medicines optimisation in all settings and cost effectiveness in the use of medicines.

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Date : July 2017

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APPENDICES	
Appendix 1	June 2017 MOG minutes