

Medicines Optimisation Programme

The Academic Health Science Network for the North East and North Cumbria



Programme background

The AHSN Medicines Optimisation (MO) Programme is committed to working across sectors and disciplines as a means of producing innovative workable solutions to medicine related issues, including aspects of safety. It cuts across other AHSN clinical programmes with an aspect of medicines usage in addition to initiating specific MO and patient safety work. There is also a strong national AHSN MO network with good communication links ensuring good practice is shared and disseminated beyond regional boundaries.

Programme aims

The overall aim of the programme is to improve patient care using the principles of medicines optimisation:

- Patient's experience should be at the forefront of all decisions, enabling patients to feel empowered to make the most of their healthcare and confident enough to voice their beliefs, preferences and views about their medicines.
- The most appropriate choice of medicines should be informed by the best available evidence, cost effectiveness and the need of patients. Access to new medicines should be in line with the NHS Constitution and decisions should be transparent.
- The use of medicines should be as safe as possible. Patients and their families should have confidence that they will not be harmed by the healthcare system. This may range from ensuring safe decisions are made in relation to prescribing, administration and monitoring of medicines through to disposal of unwanted medicines.
- Medicines Optimisation should be a part of routine practice to ensure that patients and their carers get the best outcomes from their medicines. It is estimated that when patients do not take their medicines in line with recommended advice it costs the NHS an estimated billion pounds a year in lost patient benefits. The NHS and the public expects value for money from their healthcare system.

This is to be achieved through a series of structured projects and collaborative work. All AHSN MO initiatives will adopt a person centred approach.



Medicines Optimisation work programme in the NENC region

Current projects



Transfer of Care - The aim of this project was to embed into routine practice a method of electronic referral between secondary care and community pharmacy to enable patients to have continued support with their medicines after leaving hospital. A decision was made to use *PharmOutcomes* as it was already established in community pharmacies across the region. The purchase of a 'super-user' licence has enabled referrals to be made to any community pharmacy within the NENC footprint (approx. 700). By January 2016 nine hospital trusts were making referrals and a further three trusts including Cumbria will be going live early in 2016. An evaluation is being undertaken by Durham University. Positive outcomes in terms of patient care have already been demonstrated.



Supporting Vulnerable Adults with their Medicines - This project has provided information about the current activity in the NENC with regards to medication reviews being conducted in care homes. The report highlighted inconsistencies in commissioning and the outcome measures used. Potential for further cost savings was also identified. The intention is to present the report to CCGs and social care providers.

Future projects



A Person Centred Approach to Medicines Adherence - developing a consistent approach to assessing the type of compliance support required.



An Education Programme for community pharmacist to help improve mental health patient's physical health - Mental health patients suffer from more physical health problems than the general population but are less likely to seek help about their physical health needs. This programme is designed to help community pharmacists, who are a regular point of contact, to support and signpost patients.

For further information on any of the work the MO programme is undertaking or to suggest further areas of work, please contact;
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