

The AHSN Medicines Optimisation Programme (MO) 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.

Guided by the four principles of Medicines Optimisation the programme seeks to have a person centred approach to improving routine usage of medicines and ensuring initiatives are based on evidence, safe systems, value for money and sustainability.

Programme background

The NHS cannot afford not to optimise the use of medicines. Using a person centred approach the MO programme seeks to find opportunities to improve medicine usage and improve health outcomes. To date the MO programme has approached their work through directed MO projects and by collaboration with the other AHSN programmes and specialist groups. The following 'facts' that have been central to our current projects illustrate just a few reasons why optimisation of medicines is key to the future of the NHS and local economy.

It has been estimated that between 30 and 50% of the 15 million patients with a long term condition do not take their medicines as intended. The number of people who are expected to have more than one long term condition is expected to rise to 2.9 million by 2018.

The number of prescribed items per year per person in England increased from 13 in 2003 to 19 in 2013.

Currently in the NENC region there are nearly 600,000 people over the age of 65 of which 10% are classed as frail rising to 25% at the age of 85 and nearly 50,000 of these people receive supported care. This number is set to rise.

Priority areas

- Ensuring patients receive a continuity of medication support after leaving hospital.
- Illustrating where and how patient outcomes could be improved and money could be saved for patients receiving supported care.
- Developing a region-wide and cross sector approach to supplying medication adherence support packages.
- Providing an education programme to support community pharmacists with the physical health needs of people with mental health problems.



Overview of current projects

- **Transfer of Care Project** - 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. Each Local Pharmaceutical Committee (LPC) owned an individual user's licence but this did not allow referrals to be made across LPC boundaries. In December 2014 the LPCs agreed to purchase a 'super-user' licence enabling referrals to be made to any community pharmacy within the NENC footprint (approx. 700). Information Governance concerns have delayed the implementation in some trusts but in January 2016 nine hospital trusts are making referrals and a further three trusts/LPCs including Cumbria will be going live soon. An evaluation is being undertaken by Durham University although 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 pharmacists** - to help improve mental health patients' 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.

Why this work is important for the region

Medicines are the most common therapeutic intervention in healthcare. The people of the North East and North Cumbria are entitled to expect that they will receive a consistent, safe and cost effective approach to healthcare in line with the values of the NHS Constitution.

The Academic Health Science Network for the North East and North Cumbria (AHSN NENC)

The AHSN NENC is committed to improving both the health and economic prosperity of the region through innovation and dissemination of best practice. Key aims for the Network are to improve patient care and population health outcomes and to create wealth and stimulate engagement with industry to promote economic growth. The AHSN NENC health improvement programmes have already delivered the following:

- Investment of over £3m into projects designed to disseminate best practice and make a demonstrable impact on health outcomes.
- Established strategic partnerships with organisations including the North East Quality Observatory Service, the Northern England Strategic Clinical Network and Health Education North East for the successful delivery of the Health Improvement Programmes.
- Successful delivery of the Patient Safety Collaborative with close to £500k invested in projects focused on improving patient safety and leading towards transformational change.
- Secured over £800k matched funding for investments from partner organisations.

Contact us

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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