Operational Productivity: Hospital Pharmacy and Medicines Optimisation – Stakeholder Update - February 2017

This Hospital Pharmacy and Medicines Optimisation project (HoPMOp) stakeholder update provides information and updates for external stakeholders from the team implementing the recommendations of the review of NHS productivity and efficiency by Lord Carter.

News from the HoPMOp team

HPTP planning process

Board approved HPTP plans are now beginning to arrive back with the HoPMOp team from acute non-specialist trusts. We are hoping that the majority of these will be submitted by the end of March and these will then be reviewed by the team to identify common themes, linked to the Carter recommendations, where further collaboration and support may be beneficial.

HoPMOp programme and team

Andrew Davies, currently Chief Pharmacist at North Bristol NHS trust, will become the professional pharmacy lead for the existing HoPMOp work programme. Seventeen specialist hospital trusts have also been invited to join the Hospital Pharmacy and Medicines Optimisation programme. Initial contact has been made with the trusts concerned who will be invited to send representatives to an orientation event during March 2017.

Top 10 medicines update

The governance processes to support the development and publication of an NHS Improvement top ten medicines list have been drafted and are the subject of a consultation with stakeholders. It is anticipated that this process will be completed imminently with the first “live” list scheduled for publication through the Model Hospital portal during April 2017.

Getting it right first time

The NHS Improvement Getting It Right First Time (GIRFT) programme is being expanded. Having started as a pilot within orthopaedic surgery and then expanded to a further 10 medical specialities, the GIRFT methodology and process has now been extended to a total of more than 30 medical and clinical specialities. The programme is in the process of appointing clinical leads for each speciality.

Job planning and eRostering

We are looking to work with a number of trusts who are already making progress with or thinking about clinical pharmacy job planning, particularly approaches to eRostering.

Regional Medicines Optimisation Committees

The HoPMOp team is working closely with colleagues in NHS England and NHS Clinical Commissioners to support the establishment of regional medicines optimisation committees. There have been four national engagement workshops held during February and work is now underway to formally establish the committees and agree priorities for the work programme. This is likely to focus on key medicines optimisation topics in consultation with NHS stakeholders.
For information

Advice on Advanced Therapy Medicinal Products (ATMPs)

The National Pharmaceutical Quality Assurance Committee and the National Pharmacy Clinical Trials Advisory Group have published a joint document on ATMPs for Chief Pharmacists. Since ATMPs are medicines they are subject to the same requirements as for other medicinal products and the Chief Pharmacist is responsible for their governance and management. A full version of the document will be posted on the Specialist Pharmacy Service website in March.

CPPE support for hospital pharmacy and medicines optimisation

CPPE has recently published a summary of materials and products that support hospital pharmacy and medicines optimisation. The brochure covers wide range of topics such as therapeutics, the Carter Report, leadership and workforce development and also includes links to relevant CPPE learning programmes.

BOPA position statement and guidance on biosimilars

The British Oncology Pharmacy Association (BOPA) has issued a position statement on the implementation of biosimilar monoclonal antibodies alongside a comprehensive guide on the important role that pharmacy plays in implementation.

Cost savings calculator

UKMI has updated its cost-savings calculator for use as a tool when setting local drugs budgets. Based on Microsoft Excel, the worksheets provide summaries of already-released and pending NICE technology appraisals and interventions. The tool is intended to be used alongside Prescribing Outlook – National Developments.

Medicines reconciliation

In 2016, the medicines use and safety team from the Specialist Pharmacy Service undertook a collaborative audit of over 1,400 discharge summaries (over 10,000 medicines) to assess the quality of medicines information provided. The final report suggests that there are still significant gaps in sharing information and reconciling medicines when a patient is discharged from hospital. For example, less than 12% of summaries included an indication for the medicine prescribed and only three-quarters correctly documented allergy status. The reports makes a number of recommendations for hospital pharmacists.

Sourcing ready-made chemotherapy

This guide published by the NHS Pharmaceutical Quality Assurance Committee and BOPA is available to registered users. It contains useful information on dose-bandung as well as guidance on the sourcing of ready-to-administer doses.

Antifungal stewardship

Antifungals are essential in modern healthcare due to the increased incidence of invasive fungal infections linked to immunosuppression and the widespread use of invasive devices. Despite their costs, the quality of antifungal prescribing is poor leading to unnecessary usage, the wrong choice of antifungal and suboptimal duration of treatment. NHS Improvement is working with colleagues in
Public Health England to consider an appropriate metric for future inclusion in the Model Hospital dashboard.

**Operational Productivity**

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