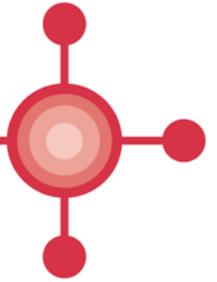


All Wales Medicines Strategy Group

Grŵp Strategaeth Meddyginiaethau Cymru Gyfan



AWMSG Five-year Strategy 2013–2018

**‘Improving the patient’s
experience of medicines in
Wales’**

January 2014

This report has been prepared by the All Wales Therapeutics and Toxicology Centre (AWTTC), and has subsequently been endorsed by the All Wales Medicines Strategy Group (AWMSG).

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This document should be cited as:
All Wales Medicines Strategy Group, AWMSG Five-year Strategy 2013–2018. January 2014.



EXECUTIVE SUMMARY

1. The All Wales Medicines Strategy Group (AWMSG) was established in 2002 to provide advice on new and existing medicines, medicines management and prescribing to the Welsh Government's Minister for Health and Social Services in an effective, efficient, timely and transparent manner.
2. AWMSG brings together an expert panel of health professionals, scientists, health economists, industry representatives, patient advocates and lay representatives to reach a consensus on the use of new medicines and on policies that promote the best use of medicines, in order to achieve the best health outcomes for patients in Wales. All work together to aim for equity of access to the most clinically appropriate and cost-effective medicines for patients in Wales.
3. AWMSG is supported by the All Wales Therapeutics and Toxicology Centre (AWTTC) – a partnership organisation launched in 2012 comprising the former Welsh Medicines Partnership, the Welsh Medicines Resource Centre, the Yellow Card Centre Wales (YCC Wales), the Welsh Analytical Prescribing Support Unit (WAPSU) and the National Poisons Information Service. AWTTC provides medical, scientific and administrative support to AWMSG and its subgroups, and its roles include development and support of the health technology appraisal process, medicines safety and therapeutics, education, toxicology and prescribing analysis.
4. This document sets out a five-year strategy for AWMSG to ensure safe and effective medicines are made available for patients in Wales. This will be achieved by working in partnership with many organisations within NHS Wales, and also outside Wales.
5. AWMSG has aligned this strategy with Welsh Government's publication 'Together for Health'¹. Consistent with the values in 'Together for Health', AWMSG is committed to conducting its work in an open and transparent manner. The recommendations in the text relate to seven priority areas identified in 'Together for Health': *Improving health (Medicines appraisals, Prescribing guidance)*, *One system for health*, *Fully integrated network of care*, *Aiming at excellence*, *Transparency of performance*, *Partnership with the public*, and *Making every penny count*.

KEY RECOMMENDATIONS AND OUTCOMES

1. Improving health – Medicines appraisals

AWMSG will continue to provide an internationally respected health technology assessment (HTA) process for the introduction of new medicines for patients in Wales, which responds to the changing needs of the NHS in Wales.

Outcomes:

- Re-accreditation of the HTA process by NICE

Outcome measure: Re-accreditation achieved

Date of outcome: by October 2016

- Improved access to medicines by patients, based on technology appraisals that are reviewed to maintain their currency

Outcome measure: Establishment of a review process

Date of outcome: by December 2014

- Sharing of real-time information with health professionals, the public and pharmaceutical companies on the progress of a medicine throughout the appraisal process

Outcome measure: Update of AWMSG Communication Strategy

Date of outcome: by December 2014

2. Improving health – Prescribing guidance

AWMSG will work with health boards and other stakeholders to promote the safe, effective and cost-effective use of medicines in Wales.

Outcomes:

- Continued improvement in appropriate prescribing in Wales. AWMSG will prioritise antibiotic prescribing over the next five years, and support processes in Wales that promote a reduction in antibiotic resistance

Outcome measure: Demonstration of continued trend of improvement through the relevant National Prescribing Indicators

Date of outcome: December 2017

- Audit of therapeutic areas identified as priorities in NHS Wales

Outcome measure: Production and promotion of an annual audit in a specific therapeutic area identified as a priority by stakeholders

Date of outcome: Annual

- Improved liaison and communication with health board therapeutics committees in Wales

Outcome measure: Annual meetings with health board therapeutics committees in Wales

Date of outcome: Annual

3. One system for health

AWMSG recognises the importance of modernisation and delivery of IT services in Wales in ensuring that patient care in Wales is improved. AWMSG will work with stakeholders to support the development of an integrated technology system to promote the safe and effective use of medicines for patients across Wales.

Outcomes:

- Improve the transfer of medicines information between healthcare settings by supporting the roll-out of electronic discharge advice letters across Wales

Outcome measure: Availability of electronic discharge letters across Wales as outlined in the NHS Wales Delivery Framework²

Date of outcome: September 2015

- The introduction of clinically appropriate electronic prescribing (e-prescribing) and medication administration systems within an integrated healthcare setting in partnership with stakeholders, including the NHS Wales Informatics Service and NHS Wales Shared Services Partnership, and the implementation of AWMSG guidance

Outcome measure: Endorsement of an implementation plan

Date of outcome: September 2015

4. Fully integrated network of care

AWMSG will work with stakeholders so that care can be delivered in the most appropriate setting.

Outcomes:

- Collaboration with stakeholders and provision of education centred on prudent prescribing, and development of appropriate learning resources to enable health professionals to provide evidence-based advice and training in therapeutics to their colleagues, ensuring optimum care in the appropriate setting

Outcome measure: Demonstration of provision of learning opportunities for health professionals (including medical and non-medical prescribers) in each health board in Wales

Date of outcome: March 2015

All Wales Medicines Strategy Group

- Development of shared care protocols through multiprofessional consultation for appropriate medicines that have been approved by NICE and AWMSG, and as agreed by stakeholders

Outcome measure: Annual provision of protocols for medicines considered appropriate for shared care by NICE or AWMSG

Date of outcome: Annually for the next 5 years

5. Aiming at excellence

AWMSG will promote the quality use of medicines in Wales in order to maximise benefit and minimise harm.

Outcomes:

- Demonstration of continued improvement in appropriate prescribing of medicines designated as National Prescribing Indicators over the next five years

Outcome measure: Continuing trend of improvement in appropriate use of National Prescribing Indicators, benchmarked against the rest of the UK

Date of outcome: December 2017

- Continued improvement in spontaneous reporting rate of suspected adverse drug reactions (ADRs) in Wales over the next five years

Outcome measure: A sustained increase in reporting of suspected ADRs in Wales over the next five years

Date of outcome: December 2017

6. Transparency of performance

AWMSG will conduct its work in an open and transparent manner.

Outcomes:

- Continue to publish all meeting papers, prescribing guidance and medicines appraisals recommendations on its website and to conduct its meetings in public

Outcome measure: Timely publishing on the AWMSG website of all meeting documents and work programme outputs

Date of outcome: Ongoing – December 2017

- Continue to provide publicly available reports on performance to the Welsh Government's Chief Medical Officer (CMO)

Outcome measure: Monthly publication of CMO updates on the Welsh Government website

Date of outcome: Ongoing – December 2017

7. Partnership with the public

AWMSG will ensure patients and service users are involved in its work and decisions as equal partners.

Outcomes:

- Establish a Patient and Public Interest Group to increase public involvement in medicines-related issues, including medicines adherence and reducing medicines waste

Outcome measure: Patient and Public Interest Group established

Date of outcome: December 2014

- Establish a Citizens' Jury to address specific aspects of access to medicines (e.g. social value judgements)

Outcome measure: Citizens' Jury established and reported

Date of outcome: December 2016

8. Making every penny count

AWMSG will work with NHS Wales and the people of Wales to promote better value prescribing and reduce inappropriate prescribing by providing high quality advice on prudent prescribing in general practice, hospitals and the community.

Outcomes:

- A continued improvement in, and reduction in variation of, prescribing quality and cost measures across Wales

Outcome measure: Demonstration of continued improvement in appropriate use of National Prescribing Indicators, with reduced variation across health boards

Date of outcome: December 2017

- Audit the impact of the Welsh Patient Access Scheme (WPAS) on providing access to high cost medicines in Wales

Outcome measure: Audit of WPAS completed

Date of outcome: April 2015

- Development of a financial forecasting process for use by health boards

Outcome measure: Robust process established and the benefit to service reviewed

Date of outcome: December 2015

- Support the evaluation of "healthcare packages at home" across Wales to ensure they provide cost-effective use of NHS resources and that clinical and financial governance procedures are in line with policy

Outcome measure: Satisfactory evaluation completed

Date of outcome: December 2015

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1.0 INTRODUCTION

Established in 2002, the All Wales Medicines Strategy Group (AWMSG) provides advice on both new and existing medicines, medicines management, and prescribing to the Welsh Government’s Minister for Health and Social Services in an effective, efficient, and transparent manner. AWMSG remains committed to providing advice to Welsh Government and developing mechanisms to audit and implement this advice within NHS Wales.



The work of AWMSG is planned by the AWMSG Steering Committee. This Committee prioritises AWMSG’s work programme to ensure efficient use of resources.

Two advisory subgroups report to AWMSG and provide expert advice: the New Medicines Group (NMG) and the All Wales Prescribing Advisory Group (AWPAG). In addition, various working groups are set up to develop projects in specific areas, such as the Homecare Working Group and National Indicator Working Group. AWMSG and its subgroups are supported by the All Wales Therapeutics and Toxicology Centre (AWTTC).

1.1 Principles underlying the strategy

AWMSG brings together an expert panel of NHS clinicians, professions allied to medicines, health economists, industry representatives, patient advocates and lay representatives to reach a consensus on the use of new medicines and on policies that promote the best use of medicines for patients in Wales. All involved work together to ensure equity of access to the most clinically appropriate and cost-effective medicines.

AWMSG has aligned its strategy for the next five years with the Welsh Government's strategy, which is outlined in the publication 'Together for Health'¹. Seven priority areas are identified in 'Together for Health':

- Improving health
- One system for health
- Fully integrated network of care
- Aiming at excellence
- Transparency of performance
- Partnership with the public
- Making every penny count

With over ten years' experience of appraising and delivering advice on medicines, AWMSG is well placed to support Welsh Government in achieving these objectives and is committed to building on the successes and achievements of a decade working with Welsh Government and prescribers in Wales.

1.2 AWMSG achievements

Noteworthy NHS Wales achievements to which AWMSG has contributed over the last five years include:

- Improved patient safety through the development of National Prescribing Indicators (NPIs), meeting Quality and Outcomes Frameworks targets and implementing automated dispensing
- Improved timely access to new medicines through the AWMSG health technology assessment (HTA) process. This process was broadened to include all newly licensed medicines not on the National Institute for Health and Care Excellence (NICE) work programme in October 2010, and was awarded NICE accreditation in October 2011
- Provided information, educational aids and training resources to promote safe, clinically effective and cost-effective prescribing in Wales through the establishment of the Welsh Analytical Prescribing Support Unit (WAPSU) in 2010
- Improved prescribing practice in primary care through development of national audits as part of the Clinical Effectiveness Prescribing Programme (CEPP)
- Improved training in therapeutics and prescribing in Wales through collaboration with universities across Wales and the British Pharmacological Society
- Improved cost-effectiveness of medicines and promoted company engagement with the appraisal process through the development of the Welsh Patient Access Scheme (WPAS)
- Ensured robust clinical and financial governance arrangements for homecare services through development of a homecare 'toolkit' to support health boards in NHS Wales

1.3 Context and Challenges

The Welsh Government's 'Together for Health' five-year vision for Wales states that:

*"Everyone should have easier access to a wide range of safe, effective, well-run, fully integrated services, sustainable over the longer term, services Wales can be proud of."*¹

'Together for Health' has highlighted a number of challenges for the next five years:

- *"Health has improved but not for everyone and our population is ageing*
- *Health care quality has improved but the NHS can do even better*
- *Expectations are continually rising*
- *Medical staffing is becoming a real limitation on our services*
- *Funding is limited"*¹

AWMSG has the infrastructure to provide medicines and prescribing advice for Wales, which will support the achievement of the recommendations in 'Together for Health' in Wales.

AWMSG is committed to providing patients in Wales with the best advice on the medicines they take. It has already established an accredited medicines appraisal process; improved access to medicines for patients in Wales; developed strategies to ensure safe, effective and cost-effective prescribing; and undertaken ongoing monitoring of prescribing performance in Wales. AWMSG is also committed to strengthening accountability and maximising the use of available resources. It aims to ensure equity of access to the most appropriate and cost-effective medicines and to improve performance, reward good work and tackle medicines waste.

These aims will be delivered through innovative services, delivered by a high quality workforce, designed to meet the needs of all patients within all levels of healthcare.

2.0 BACKGROUND

2.1 Medicines appraisals

Since October 2010, AWMSG has appraised all newly licensed medicines (as well as licence extensions and/or new formulations of existing medicines), not on the NICE work programme.

Medicine appraisal assesses clinical effectiveness and cost effectiveness of a medicine compared with treatment options that are currently available in Wales, taking into account medical expert and patient organisation views, and societal and budget impact factors.

Clinical networks and specialist groups across Wales help inform the AWMSG work programme by supporting horizon scanning, advising on appraisal prioritisation and providing specialist clinical advice to AWMSG.

AWMSG has developed a webpage that informs prescribers, commissioners and the public of medicines that have been “recommended for use in Wales”³.

Between July 2003 and March 2013, AWMSG conducted 163 appraisals of which 96 (59%) medicines received a positive recommendation, 31 (19%) received a positive recommendation for ‘optimised use’, and 36 (22%) received a negative recommendation.

A breakdown of appraisal outcomes by British National Formulary (BNF) chapter is provided in Table 1.

Table 1. Appraisal outcomes by BNF chapter: 1 July 2003–31 March 2013

	Number of appraisals	Recommended in full	Recommended for optimised use	Not recommended
All AWMSG appraisals	163	96 (59%)	31 (19%)	36 (22%)
Appraisal outcomes by BNF chapter				
1. Gastro-intestinal system	2	1 (50%)	0	1 (50%)
2. Cardiovascular system	20	12 (60%)	4 (20%)	4 (20%)
3. Respiratory system	3	2 (67%)	0	1 (33%)
4. Central nervous system	19	11 (58%)	3 (16%)	5 (26%)
5. Infections	33	28 (85%)	4 (12%)	1 (3%)
6. Endocrine system	13	9 (69%)	1 (8%)	3 (23%)
8. Malignant disease and immunosuppression	38	16 (42%)	8 (21%)	14 (37%)
9. Nutrition and blood	26	12 (46%)	8 (31%)	6 (23%)
10. Musculoskeletal and joint diseases	5	2 (40%)	3 (60%)	0
13. Skin	2	1 (50%)	0	1 (50%)
15. Anaesthesia	2	2 (100%)	0	0
Appraisal outcomes by BNF subsection*				
5.3.1 HIV infection	23	21 (91%)	2 (9%)	0
8.1.5 Other antineoplastic drugs	19	9 (47%)	4 (21%)	6 (32%)
9.1.3 Drugs used in hypoplastic, haemolytic, and renal anaemias	10	3 (30%)	3 (30%)	4 (40%)
*Only the BNF subsections where most AWMSG appraisals have been undertaken have been included for comparison.				

2.2 Prescribing guidance

The AWMSG guidance and resources outlined below have resulted in improvements in prescribing. The impact of AWMSG prescribing advice can also be seen in the trends over time in the National Prescribing Indicators (NPIs) listed in Table 2. AWMSG guidance and resources produced over the last five years include:

National Prescribing Indicators

NPIs form part of the CEPP and are developed annually to promote rational prescribing, balancing both quality and cost (see Table 2 for NPI data collected over the last ten years).

National Prescribing Audits

The following National Prescribing Audits have been developed to highlight prescribing, safety and cost-effectiveness issues. The audits are intended to support AWMSG NPIs.

[CEPP All Wales Audit: Towards Appropriate Non-Steroidal Anti-Inflammatory Drug \(NSAID\) Prescribing](#)

[CEPP All Wales Audit: Reducing the use of High Acquisition Cost \(HAC\) Proton Pump Inhibitors \(PPI\) 2011–2013](#)

[CEPP Community Pharmacy Contract All Wales Multi-Disciplinary Audit PPI](#)

[CEPP National Audit: Patient Safety: Lithium Prescribing](#)

[CEPP National Audit: Repeat Prescribing](#)

[CEPP National Audit: Towards More Appropriate Management of Depression in a Primary Care Setting](#)

[CEPP National Audit: Focus on Antibiotic Prescribing](#)

Prescribing of Denosumab (Prolia[®]) in Wales: Review (October 2013)

This document provides recommendations and guidance relating to the prescribing in Wales of denosumab (Prolia[®]) for the prevention of osteoporotic fractures in postmenopausal women, and is intended to complement NICE TA204. [Link to document](#)

Primary Care Prescribing Analysis 2012–2013: Gluten-free Products (October 2013)

This document reviews the prescribing of gluten-free products in Wales, with reference to the updated All Wales Guide to Prescribing Gluten-Free Products. [Link to document](#)

Patient Information Leaflet: Opioids in Palliative Care (July 2013)

Opioids are offered frequently in palliative care to help reduce pain and breathlessness. The initiation and titration happens in wards, clinics and in outpatient settings. As their prescription sometimes forms part of a much wider consultation on disease status and other important matters in the palliative care context, it can be difficult for a patient (and their carer) to take in all the relevant information with regard to taking these strong medicines. These patient manuals represent a useful take-home supplement to consultations where opioids have been discussed, considered and/or prescribed.

[Patient Information Manual - Opioids in Palliative Care \(Morphgesic SR\)](#)

[Patient Information Manual - Opioids in Palliative Care \(MST\)](#)

All Wales Common Ailments Service Formulary (May 2013)

The Common Ailments Service aims to improve patient access to consistent, evidence-based advice for the management of common ailments. The formulary was developed using recognised resources and involved multi-professional consultation to ensure the provision of consistent advice by pharmacists and GPs. [Link to document](#)

All Wales Proton Pump Inhibitor and Dyspepsia Resource Pack (May 2013)

This educational pack aims to support the appropriate prescribing of PPIs across Wales by providing key health professionals with a practical approach for the initiation and review of PPI prescribing. It includes examples of support material which can be used or adapted for this purpose. [Link to document](#)

NHS Wales Primary Care Prescribing Analysis: Tramadol (April 2013)

As part of the NHS Wales CEPP, local comparators are produced to allow benchmarking across a range of prescribing indicators and are available for both local and national comparative measurement as necessary in accordance with local prioritisation. Prescribing of tramadol and tramadol-containing combination products as a percentage of all opioid prescribing has been a local comparator since April 2011. [Link to document](#)

All Wales Review and Guidance for Prescribing Intervals (February 2013)

A 28-day prescribing interval has been promoted across the UK, primarily to reduce waste from unused medicines. The evidence base for 28-day prescribing was reviewed to promote a geographically consistent, evidence-based approach to prescribing in NHS Wales. [Link to document](#)

All Wales Guide to Prescribing Gluten-Free Products (February 2013)

Gluten-free products are an essential part of the clinical treatment of coeliac disease. This guide aims to support general practitioners and other healthcare professionals in the management of patients with coeliac disease, and aid the decision-making process in relation to prescribing Advisory Committee on Borderline Substances (ACBS)-approved gluten-free foods. [Link to document](#)

Monitoring of Medicines Appraised by NICE and AWMSG (February 2013)

This paper is intended to inform AWMSG of progress made in monitoring the usage of medicines appraised by AWMSG and NICE. [Link to document](#)

All Wales Advice on the Role of Oral Anticoagulants for the Prevention of Stroke and Systemic Embolism in People with Atrial Fibrillation (October 2012)

This guidance aims to address the variation in existing health board guidance and promote the safe, effective and equitable use of oral anticoagulant therapies for the prevention of stroke and systemic embolism in people with atrial fibrillation. [Link to full document](#)

In-patient Medication Administration Record (October 2012)

In-patient medication administration records have been produced by the All Wales Drug Chart Review Subgroup of the All Wales Chief Pharmacists Committee, with endorsement from AWMSG. [Link to record](#)

Initiating Contraception in Primary Care (September 2012)

Prescribing guidelines for contraception initiation in primary care have been developed by AWPAG, based on work by NHS Greater Glasgow and Clyde, in order to reduce variation across the health boards and increase patient safety. [Link to document](#)

All Wales Paediatric Steroid Replacement Therapy Card (September 2012)

A standardised All Wales Paediatric Steroid Replacement Therapy Card has been developed to support the emergency treatment of children with adrenal insufficiency. The card aims to aid ambulance and hospital admission teams in administering appropriate steroid replacement therapy for affected patients, and will be issued to families of the patient by paediatricians, along with the necessary education and advice. [Link to document](#)

Statin Template Guidance: Use of Statins in Primary and Secondary Prevention of Vascular Disease (September 2012)

This guidance relates to the use of statins in primary and secondary prevention of vascular disease and serves as an aid to the implementation of NICE clinical guidelines on lipid modification (CG67) and type 2 diabetes (CG66). [Link to document](#)

Warfarin Monitoring (June 2012)

Warfarin monitoring aims to stabilise a patient's international normalised ratio within set limits to help prevent serious side effects, while maximising effective treatment. This document contains recommendations for best practice in relation to the monitoring of warfarin therapy in Wales. [Link to document](#)

All Wales Guidance on Prescribing for Erectile Dysfunction (March 2012)

Drug treatments for erectile dysfunction may only be prescribed in NHS Wales under certain circumstances. Welsh Health Circular (WHC) (99) 148, published in 1999, provided guidance for NHS Wales on the identification and management within specialist services of men diagnosed as suffering severe distress resulting from erectile dysfunction. WHC (99) 148 has been reviewed and the following document provides updated recommendations regarding the prescribing of treatments for erectile dysfunction. [Link to document](#)

Patient Information at the Point of Discharge: Medicine Reminder Chart (December 2011)

The need for medicine reminder charts upon discharge from hospital was raised as an issue following anecdotal examples of difficulties experienced by patients. The current situation, and measures required to alleviate issues raised, are discussed in this document, and a template medicine reminder chart for local adaptation has been provided. [Link to document](#)

Educational Resource Pack: Material to support appropriate prescribing of hypnotics and anxiolytics across Wales (December 2011)

This educational pack aims to support the appropriate prescribing of hypnotics and anxiolytics across Wales by providing key health professionals with a practical approach for the initiation and review of hypnotic and anxiolytic prescribing. It includes examples of support material which can be used or adapted for this purpose. [Link to document](#)

Patient Information Leaflet: Medicines for Mild to Moderate Pain Relief (November 2011)

Patients should be able to easily access information to enable them to make informed decisions about their health. This leaflet provides written information on the medicines that are available for mild to moderate pain relief, both over the counter and on prescription. [Link to English template](#)

Prescribing of Dronedarone (Multaq®) (November 2011)

Dronedarone (Multaq®), indicated for the maintenance of sinus rhythm after successful cardioversion in adult clinically stable patients with paroxysmal or persistent atrial fibrillation (AF), has been considered in light of its safety profile. This document addresses outstanding issues relating to the prescribing of dronedarone. [Link to document](#)

Prescribing Dilemmas: A Guide for Prescribers (July 2011)

This document provides guidance for health professionals regarding prescribing situations not covered by NHS Wales, including private care and private prescriptions, travel, foodstuffs, infertility treatment, minor ailments, homoeopathy, erectile dysfunction, prescribing for self and family, visitors from overseas, unlicensed medicines, and prescribing outside national guidance. [Link to document](#)

Monitored Dosage Systems (March 2011)

Patients need to be able to take their medication safely and obtain discharge medication in a manner that avoids delays and appropriately uses NHS Wales resources. Many hospitals have not been able to provide medication directly to the patient upon discharge in cases where the patient has previously been receiving a monitored dosage system (MDS). The purpose of this document is to reduce risk and variation in the discharge process in Wales for patients that have been receiving an MDS prior to admission and continue to require an MDS on discharge.

[Link to Monitored Dosage Systems Guidance](#)
[Link to Monitored Dosage Systems Standards](#)

Primary Care Guidance: Prescribing Medicines for Adults who are Unable to Swallow Oral Solid Dosage Forms (December 2010)

Some adults have difficulty swallowing oral solid dosage forms such as tablets and capsules; therefore prescribers must work with the patient and/or carer(s) to address their needs. This guideline provides a framework for healthcare professionals to support their prescribing decisions in response to the increased demand, complexity and cost of some “specials”. This guidance was developed by Betsi Cadwaladr University Health Board and endorsed by AWMSG as an example of good practice. [Link to full document](#)

Management of patients historically prescribed or initiated on amiodarone (August 2010)

Amiodarone has an important place in the treatment of severe cardiac rhythm disorders where other treatments either cannot be used or have failed; however, its use requires regular monitoring due to potential toxicities. Primary and secondary care clinicians have recognised that it would be beneficial to review all patients taking amiodarone in Wales to establish the need for ongoing treatment. This document has been developed to assist this process. [Link to document](#)

Prescribing of Low Weight Molecular Heparin (March 2010) Concerns were raised due to divergent professional views on the most appropriate place of prescribing of low molecular weight heparin (LWMH), the increased volume of prescribing in primary care and the lack of information or guidance to support prescribers. AWMSG considered these issues and has produced material to promote the safe provision of LMWH and timely access to specialist care when needed. [Link to document](#)

Table 2. National Prescribing Indicators set by AWMSG from 2002 to 2013

Prescribing Indicators	2002-2003	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013
Generic medicines (% of items)	74	77	79	81	83	84	85	84	84	84	84
Low cost statins (% of statin items excl. simvastatin and ezetimibe combination products)	60	57	57	59	65	69	71	72	72	N/A*	N/A*
Low cost statins i.e. simvastatin and pravastatin (% of statin items incl. simvastatin and ezetimibe combination products)	Measure changed in 2011–2012								72	74	N/A*
Low cost statins i.e. simvastatin, pravastatin and atorvastatin (% of statin items incl. simvastatin and ezetimibe combination products)	New measure for national indicator in 2012–2013								N/A*	N/A*	94
Antibiotics (items/ 1,000 PUs)	150	146	156	155	163	148	146	146	160	167	159
Antibiotics (items/ 1,000 STAR-PUs)	New measure for national indicator in 2012–2013								395	415	397
Top nine antibiotics (% of antibiotic items)	76	76	78	78	78	77	76	76	78	81	81
Quinolones (items/ 1,000 PUs)	5	5	5	5	5	5	4	4	4	3	3
Quinolones (% of antibacterial items)	New measure for national indicator in 2012–2013								2.49	2.03	1.98
Cephalosporins (% of antibacterial items)	New national indicator for 2012–2013								7.12	5.35	4.95
Co-amoxiclav (% of antibacterial items)	New national indicator for 2012–2013								5.88	4.86	4.63
Morphine (% of strong opioid items)	New national indicator for 2012–2013								40	41	46
Hypnotics & anxiolytics (DDD/ 1,000 patients)	3178	3095	2917	2801	2639	2479	2288	2181	2075	1977	1811
Hypnotics & anxiolytics (ADQ/ 1,000 STAR-PUs)	New measure for national indicator in 2012–2013								2606	2452	2227
NSAIDs (DDD/ 1,000 PUs)	2896	2933	2889	2800	2592	2565	2456	2380	2389	2331	2159
NSAIDs (ADQ/ 1,000 PUs)	Measure changed in 2011–2012								2188	2030	1857
NSAIDs (ADQ/ 1,000 STAR-PUs)	New measure for national indicator in 2012–2013								1384	1283	1175
Ibuprofen & naproxen (% of NSAID items)	27	25	29	31	32	36	41	48	56	69	73
Dosulepin (DDD/ 1,000 PUs)	New national indicator for 2011–2012				175	164	150	140	124	93	72
Long-acting insulin analogues (% of total long and intermediate acting insulin items, excluding biphasics)	New national indicator for 2012–2013								93	93	92

Figures are taken from the quarter ending March in each financial year. Shading indicates the indicators that were included in the incentive scheme for the relevant year.

PU = prescribing unit

ADQ = average daily quantity

DDD = defined daily dose

STAR-PU = specific therapeutic group age-sex related prescribing unit

N/A = data not available/not appropriate to continue to monitor

2.3 Invest-to-Save initiatives

In 2009–2010, AWTTTC made a successful bid for £352,000 to the Welsh Government's Invest-to-Save Fund to establish WAPSU as a service to NHS Wales and to undertake the following initiatives:

- to monitor the uptake of medicines approved or not approved by AWMSG;
- to encourage the safe and effective prescribing of NSAIDs;
- to encourage the safe and effective prescribing of PPIs; and,
- to encourage the safe and effective prescribing of hypnotics and anxiolytics.

On 2 October 2012, WAPSU was featured in the Welsh Government's publication on selected Invest-to-Save case studies. The following key achievements were recognised:

- Key prescribing initiatives are increasingly showing a benefit to NHS Wales from both a quality and cost perspective.
- All health boards have succeeded in reducing the volume of hypnotics and anxiolytics prescribed by their highest prescribing GP practices.
- £5.8 million of cost savings were achieved between 2009–2010 and 2011–2012 for the three therapeutic initiatives, which has surpassed the projected savings of £4.8 million by some £970,000.
- The initiative has delivered positive outcomes, which are associated with both increased clinical benefit, as well as attendant cost savings – in excess of those originally anticipated.

2.3.1 Encouraging the safe and effective prescribing of hypnotics and anxiolytics

Submitted a report on the nature and scope of the benzodiazepine and “Z” drug prescribing to Welsh Government in October 2010 and produced an educational resource pack.

2.3.2 Encouraging the safe and effective prescribing of NSAIDs

Promoted the continued uptake of the national audit on NSAIDs (developed with the Primary Care Quality and Information Service as part of the CEPP) and continued to analyse statistical data to inform an educational initiative.

2.3.3 Encouraging the safe and effective prescribing of PPIs

Developed an audit pack to review prescribing of high acquisition cost PPIs, and produced a patient information leaflet on the use of PPIs for the treatment of dyspepsia and heartburn, available in both English and Welsh. WAPSU also continued analysis of statistical data to inform a targeted educational initiative.

2.3.4 Initiating a system to monitor the managed introduction of medicines

Produced an audit of medicines appraised by AWMSG (medicines recommended and not recommended by AWMSG), and a report on the uptake of medicines recommended for use.

3.0 PRESCRIBING IN WALES

In 2009–2010, Central Government spent £6,440 million on health in Wales. Revenue expenditure by Local Health Boards, Dental Practice Board and Health Commission Wales was £6,059 million, of which 22% was for primary healthcare services and 64% was for hospital and community health services. Of the £1,313 million spent on primary healthcare, 39% was accounted for by prescribed drugs and appliances and 35% was for general medical services⁴.

Around 72.4 million prescription items were prescribed (and subsequently dispensed) by GPs in Wales during 2012–2013, an increase of 2.1% over the previous year. This equated to 24.3 items on average for each person registered with a GP in Wales. The average net ingredient cost per prescription item was £7.55 in 2012–2013. Compared with England, Scotland and Northern Ireland, Wales had the highest number of prescription items dispensed per head of population but the lowest net ingredient cost per prescription item.

Table 3. Prescriptions by GPs in the UK (2012–2013)⁵

	Wales	England	Scotland	Northern Ireland
Average net ingredient cost per prescription item (£)	7.55	8.52	9.80	10.80
Number of items dispensed per head of population	24.3	18.7	18.6	20.8
Net ingredient cost (£) per head of population	183.40	159.33	182.19	224.13

4.0 KEY RECOMMENDATIONS AND OUTCOMES

4.1 Improving health – Medicines appraisals

AWMSG will continue to provide an internationally respected health technology assessment (HTA) process for the introduction of new medicines for patients in Wales, which responds to the changing needs of the NHS in Wales.

Outcomes:

- Re-accreditation of the HTA process by NICE

Outcome measure: Re-accreditation achieved

Date of outcome: by October 2016

- Improved access to medicines by patients, based on technology appraisals that are reviewed to maintain their currency

Outcome measure: Establishment of a review process

Date of outcome: by December 2014

- Sharing of real-time information with health professionals, the public and pharmaceutical companies on the progress of a medicine throughout the appraisal process

Outcome measure: Update of AWMSG Communication Strategy

Date of outcome: by December 2014

4.2 Improving health – Prescribing guidance

AWMSG will work with health boards and other stakeholders to promote the safe, effective and cost-effective use of medicines in Wales.

Outcomes:

- Continued improvement in appropriate prescribing in Wales. AWMSG will prioritise antibiotic prescribing over the next five years, and support processes in Wales that promote a reduction in antibiotic resistance

Outcome measure: Demonstration of continued trend of improvement through the relevant National Prescribing Indicators

Date of outcome: December 2017

- Audit of therapeutic areas identified as priorities in NHS Wales

Outcome measure: Production and promotion of an annual audit in a specific therapeutic area identified as a priority by stakeholders

- Date of outcome: Annual

- Improved liaison and communication with health board therapeutics committees in Wales

Outcome measure: Annual meetings with health board therapeutics committees in Wales

Date of outcome: Annual

4.3 One system for health

AWMSG recognises the importance of modernisation and delivery of IT services in Wales in ensuring that patient care in Wales is improved. AWMSG will work with stakeholders to support the development of an integrated technology system to promote the safe and effective use of medicines for patients across Wales.

Outcomes:

- Improve the transfer of medicines information between healthcare settings by supporting the roll-out of electronic discharge advice letters across Wales

Outcome measure: Availability of electronic discharge letters across Wales as outlined in the NHS Wales Delivery Framework²

Date of outcome: September 2015

- The introduction of clinically appropriate electronic prescribing (e-prescribing) and medication administration systems within an integrated healthcare setting in partnership with stakeholders, including the NHS Wales Informatics Service and NHS Wales Shared Services Partnership, and the implementation of AWMSG guidance

Outcome measure: Endorsement of an implementation plan

Date of outcome: September 2015

4.4 Fully integrated network of care

AWMSG will work with stakeholders so that care can be delivered in the most appropriate setting.

Outcomes:

- Collaboration with stakeholders and provision of education centred on prudent prescribing, and development of appropriate learning resources to enable health professionals to provide evidence-based advice and training in therapeutics to their colleagues, ensuring optimum care in the appropriate setting

Outcome measure: Demonstration of provision of learning opportunities for health professionals (including medical and non-medical prescribers) in each health board in Wales

Date of outcome: March 2015

All Wales Medicines Strategy Group

- Development of shared care protocols through multiprofessional consultation for appropriate medicines that have been approved by NICE and AWMSG, and as agreed by stakeholders

Outcome measure: Annual provision of protocols for medicines considered appropriate for shared care by NICE or AWMSG

Date of outcome: Annually for the next 5 years

4.5 Aiming at excellence

AWMSG will promote the quality use of medicines in Wales in order to maximise benefit and minimise harm.

Outcomes:

- Demonstration of continued improvement in appropriate prescribing of medicines designated as National Prescribing Indicators over the next five years

Outcome measure: Continuing trend of improvement in appropriate use of National Prescribing Indicators, benchmarked against the rest of the UK

Date of outcome: December 2017

- Continued improvement in spontaneous reporting rate of suspected adverse drug reactions (ADRs) in Wales over the next five years

Outcome measure: A sustained increase in reporting of suspected ADRs in Wales over the next five years

Date of outcome: December 2017

4.6 Transparency of performance

AWMSG will conduct its work in an open and transparent manner.

Outcomes:

- Continue to publish all meeting papers, prescribing guidance and medicines appraisals recommendations on its website and to conduct its meetings in public

Outcome measure: Timely publishing on the AWMSG website of all meeting documents and work programme outputs

Date of outcome: Ongoing – December 2017

- Continue to provide publicly available reports on performance to the Welsh Government's Chief Medical Officer (CMO)

Outcome measure: Monthly publication of CMO updates on the Welsh Government website

Date of outcome: Ongoing – December 2017

4.7 Partnership with the public

AWMSG will ensure patients and service users are involved in its work and decisions as equal partners.

Outcomes:

- Establish a Patient and Public Interest Group to increase public involvement in medicines-related issues, including medicines adherence and reducing medicines waste

Outcome measure: Patient and Public Interest Group established

Date of outcome: December 2014

- Establish a Citizens' Jury to address specific aspects of access to medicines (e.g. social value judgements)

Outcome measure: Citizens' Jury established and reported

Date of outcome: December 2016

4.8 Making every penny count

AWMSG will work with NHS Wales and the people of Wales to promote better value prescribing and reduce inappropriate prescribing by providing high quality advice on prudent prescribing in general practice, hospitals and the community.

Outcomes:

- A continued improvement in, and reduction in variation of, prescribing quality and cost measures across Wales

Outcome measure: Demonstration of continued improvement in appropriate use of National Prescribing Indicators, with reduced variation across health boards

Date of outcome: December 2017

- Audit the impact of the Welsh Patient Access Scheme (WPAS) on providing access to high cost medicines in Wales

Outcome measure: Audit of WPAS completed

Date of outcome: April 2015

- Development of a financial forecasting process for use by health boards

Outcome measure: Robust process established and the benefit to service reviewed

Date of outcome: December 2015

- Support the evaluation of "healthcare packages at home" across Wales to ensure they provide cost-effective use of NHS resources and that clinical and financial governance procedures are in line with policy

Outcome measure: Satisfactory evaluation completed

Date of outcome: December 2015

5.0 MAKING IT HAPPEN

This strategy can only work in an integrated healthcare system with all the partners committed to the same common goal of taking healthcare in Wales forward, as outlined in 'Together for Health'¹, over the next five years. AWMSG will review current communication pathways with Welsh Government, health boards, medical and non-medical prescribers and patients. Following this review, AWMSG will build on the results to improve these pathways to assist NHS Wales in its aim of achieving a fully integrated system to allow dissemination and uptake of medicines and prescribing recommendations across Wales.

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