





Bath and NE Somerset CCG Medicines Optimisation Service

Executive Summary

To reduce excessive prescribing BANES CCG commissioned community pharmacy to actively review their patients medication and to look for opportunities to optimise their care. The community pharmacists identified items to either not dispense or optimise and then worked with the CCG employed practice support pharmacists to make the changes permanent on a patient's record.

In the first eight weeks of the service (18th May 2017 - 12 July 2017) the five initial pilot pharmacies have identified £15,421 of annualised savings of which £9,396 have been actioned by the surgery, with £2,498 rejected and £3,528 awaiting resolution in the surgery.

Currently 120 medicines optimisation opportunities have been identified by the community pharmacies with 69 being actioned by the CCG pharmacists. The average annual saving per actioned suggestion is £136 (£9,396 / 69).

The £30 professional fee is only paid to the community pharmacist once the change has been actioned by the surgery. The 69 approved changes resulted in £2,070 being paid in a professional fee, which represents a return on investment of 1:4.5 (£2,070:£9,396). In year two, the CCG will continue to gain the benefits of these savings with no additional professional fee.

Background

To enable BANES CCG to rationalise its spend on medication a range of projects are being considered to reduce the amount of prescribed medication being wasted. The important role that community pharmacies plays within the supply and optimisation of a patients medication is recognised by the CCG and as a result, a medication optimisation service has been developed.

Project Outline

The community pharmacist carries out a review of prescriptions received and identifies any areas where the medication can be optimised. Examples include, but not limited to:

- 1. Removal of unwanted medication
- 2. Reduction in prescribed quantities to synchronise with other medication
- 3. Change of form e.g. from liquid to tablets
- 4. Changing expensive specials to drug tariff lines
- 5. Reduction in prescribing frequencies to synchronise with other medication
- 6. Merging medication e.g. multiple strengths into one

Once an opportunity is identified, the community pharmacist consults the patient to ensure they are bought into the required changes.

The information is then entered in PharmOutcomes using a template to capture the following (see appendix 1):

- 1. Patient details
- 2. Surgery
- 3. Medication involved
- 4. Prescribing interval and quantity

Following the consultation with the patient the pharmacist will make a recommendation of what changes to the medication would benefit the patient (as per the above categories).







Once the record is completed, an electronic transcript is provided to the nominated GP practice. To enable this to work, the CCG have funded PharmOutcomes licences for the CCG Practice Support Pharmacists. Once notification is received in the surgery, the CCG pharmacist examines the recommendation from the community pharmacist against the patient's surgery record. They can then either approve or refuse the change based on knowledge of the patient (appendix 2).

Once the change has been made to the patients record and the pharmacist has completed PharmOutcomes, the system triggers the £30 professional fee to be released.

This provided the CCG with security regarding the payment as they will only reimburse the community pharmacies once their team have approved the change.

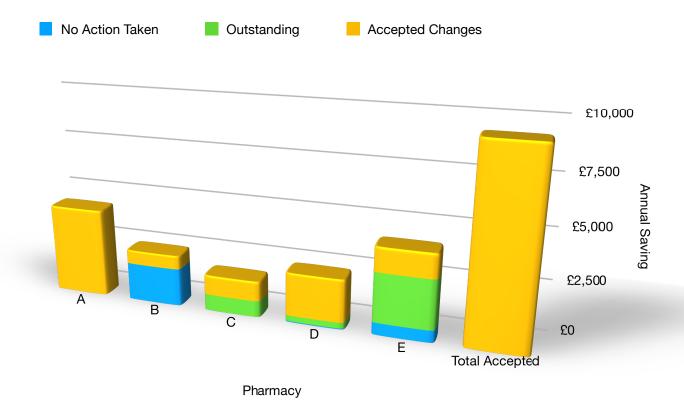
Project Implementation

Funding was provided to enable the LPC to co-ordinate a go live meeting to bring the community and practice support pharmacists together to launch the initiative. It also allowed project management support post go live to provide further training where required to both parties. This meant that modifications could be made to the PharmOutcomes service along with personalised PharmOutcomes training for the practice support pharmacists as they are not used to working with the system.

Following a successful eight weeks, the project is being expanded to a further 10 pharmacies.

Results

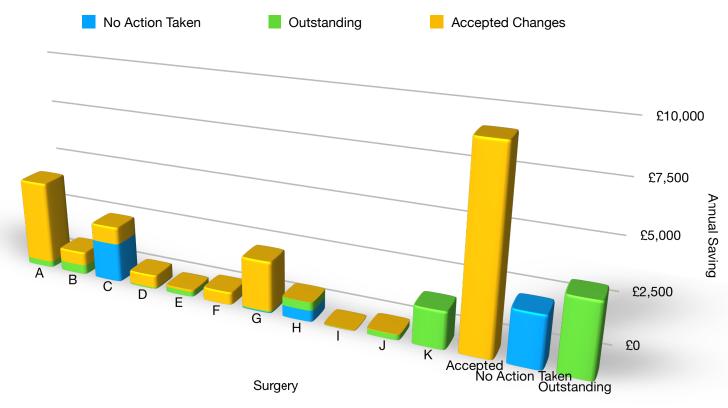
The project initiated on the 18th May 2017 and therefore the data presented relates to eight weeks across five pilot pharmacies. In total 120 suggestions have been made by the community pharmacists, of which 69 have been accepted with an annualised saving of £9,396. 13 have been rejected and 38 are still pending.











Of the 120 suggested changes 40% (48) have been to remove the medication from the patients

record followed by switching to an alternative, reducing the quantity and then the prescribing frequency. (see pie chart)

Out of the 120 recommendations made, 69 have been actioned resulting in a realised annual saving of £9,396. This resulted in the CCG paying the community pharmacies £2,070 in professional fees (£30 fee * 69 actioned suggestions). This represents a £4.50 saving for the CCG per £1 invested in the community pharmacy.



The future development of the project is expected to be as follows:

- 1. Expand the project from five to 15 pharmacies
- 2. Expand the number of trained practice support pharmacists

Remove medication
Switch to alternative
Reduce quantity
Reduce the prescribing frequency

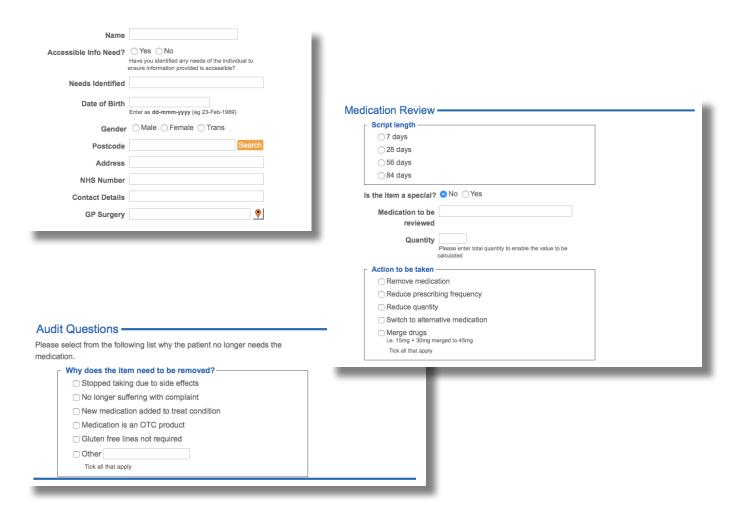
The project will develop further with these 15 pharmacies. To align with the CCG, the community pharmacies will receive further disease specific medicines optimisation training. This will enable them to work collaboratively with the practice support pharmacist to consult with their patients and suggest alternative treatment regimes to ensure compliance with local CCG guidance.







Appendix 1



Appendix 2

