

**Recognising the value
of pharmacy in
delivering patient-
centred care**

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**Dr Bruce Warner
Deputy Chief Pharmaceutical Officer
NHS England**



Five Year Forward View



Two Key messages:

1. A shift to prevention as a way of managing demand
2. Huge opportunity to develop new models of care

The future NHS

The Forward View identifies three 'gaps' that must be addressed:

- 1** **Health & wellbeing gap** **Radical upgrade in prevention**

 - Back national action on major health risks
 - Targeted prevention initiatives e.g. diabetes
 - Much greater patient control
 - Harnessing the 'renewable energy' of communities
- 2** **Care & quality gap** **New models of care**

 - Neither 'one size fits all', nor 'thousand flowers bloom'
 - A menu of care models for local areas to consider
 - Investment and flexibilities to support implementation of new care models
- 3** **Funding gap** **Efficiency & investment**

 - Implementation of these care models and other actions could deliver significant efficiency gains
 - However, there remains an additional funding requirement for the next government
 - And the need for upfront, pump-priming investment
 - Demand, efficiency and funding need to be addressed

There are new opportunities

Use of New technologies and treatments

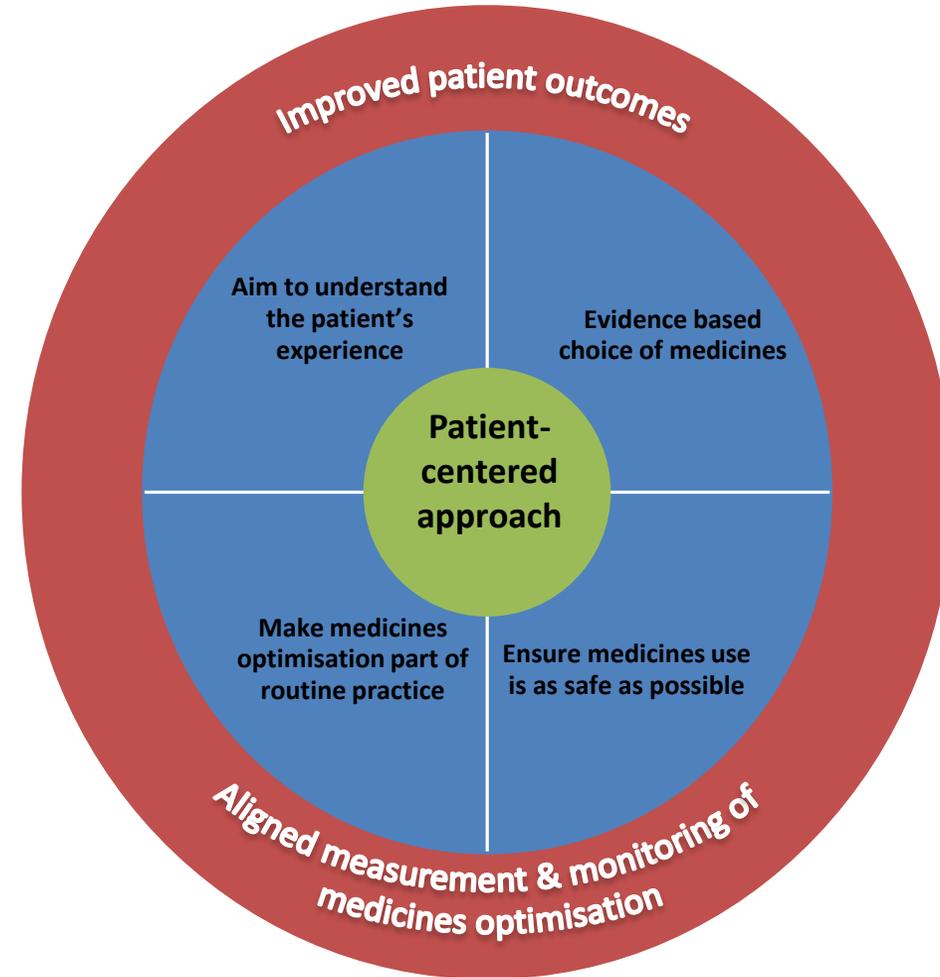
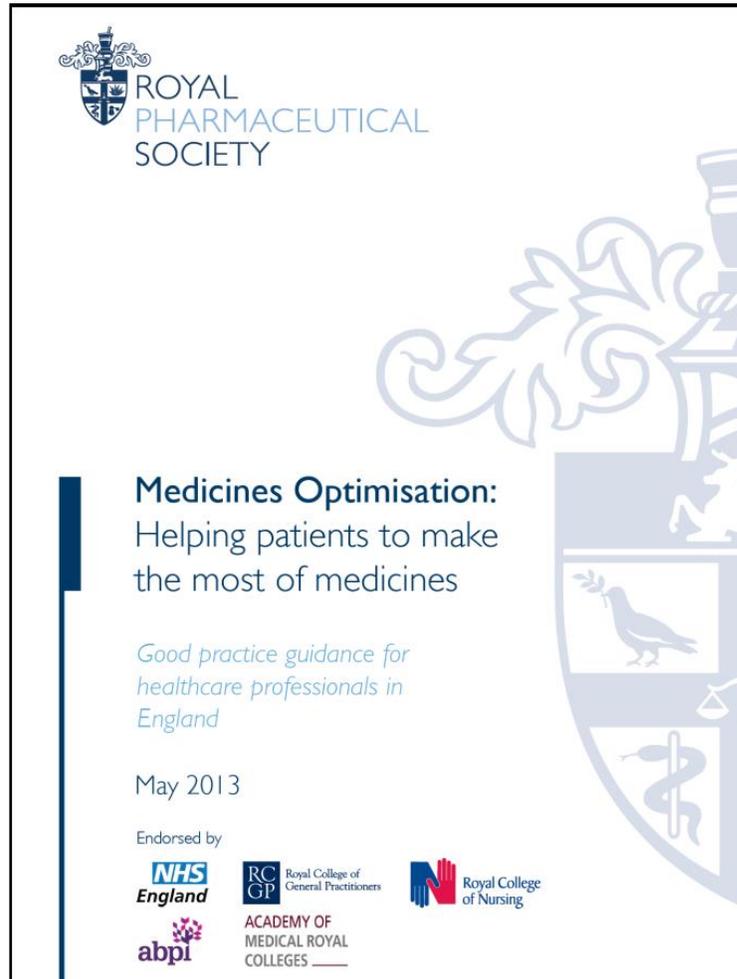
- Improving our ability to predict, diagnose and treat disease
- Keeping people alive longer
- But resulting in more people living with long term conditions

New ways to deliver care

- Dissolving traditional boundaries in how care is delivered
- Improving the coordination of care around patients
- Improving outcomes and quality

...but the **financial challenge** remains, with the gap in 2020/21 previously projected at £30bn by NHS England, Monitor and independent think-tanks

Medicines Optimisation Principles



All centred around measurement/metrics and outcomes

NHSE and ABPI PPRS/Medicines Optimisation Programme

**Guided by Principles of Medicines Optimisation, Royal
Pharmaceutical Society published in May 2013**

— Look beyond the cost of medicines to the value they deliver and
recognise medicines as an investment in patient outcomes.

Programme goals:

- Help patients improve their outcomes, including better monitoring and metrics
- Have access to an evidence-based choice of medicine
- Improve adherence and take medicines correctly
- Avoid taking unnecessary medicines
- Reduce wastage of medicines
- And improve medicines safety

The role of industry and opportunity of PPRS

- To address **persistent low levels of patient access to modern medicines**, industry has agreed to keep growth in the branded medicines bill flat for 2 years and below 2% for a further 3 years
- Presents the NHS with a unique opportunity to ensure patients are getting **the right medicines at the right time**, less constrained by cost
 - It gives the NHS the flexibility to act based on the full long-term value of medicines rather than using short-term cost containment measures
- Estimated that industry will pay **£800m** into NHS budget 2015/16

PPRS / Medicines Optimisation Roadshows



A series of 14 events from March - May across England, delivered as a joint programme of action by NHS England, AHSNs, and the ABPI



East Midlands
Academic Health Science Network
Igniting **Innovation**



South West



Kent Surrey Sussex Academic Health Science Network



Key Points from 1st MO Patient Panel

- 1. **Improving national awareness** - of the services available to support patients in their medicines-taking;
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- 2. **Enriching 'consultations'** (in all care settings) to consider the life stage/ patient perspective
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- 3. Encouraging patients to be more responsible and honest about their **attitudes and behaviours** around medicines-taking
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- 4. Encouraging the provision of **better information & support** to enable patients/ carers to get the best from their medicines
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- 5. Ensuring that the views of patients are incorporated into the **Value for Money** element of any strategy

Key Finding from 2nd MO Patient Panel

“There was little concrete evidence that these themes [from previous workshop] had consistently worked their way through to practical changes in the way that patients interact with health professionals, particularly their GPs and community pharmacists.”

Practical actions and next steps

- Communicating better with the public / patients regarding NHS medicines-related services
- Improving public understanding of the professional role of community pharmacists
- Placing a much greater emphasis on, and investment in, patients being partners in medicines-related decisions
- Improving the level and quality of medicines related patient feedback
- Making medicines optimisation truly person, not just system, centric
- Working with other NHS teams and organisations to deliver a consistent, enhanced service

Mo Dashboard

- Evaluation of prototype due end of March
- Next iteration due out in April
- Improved presentation and usability
- 3rd Iteration following full review of indicators next November and annually thereafter
- Data refresh every 6 months
- Further indicators added as data becomes available

Pharmacists in GP practices

System Wide Approach

- **The Five Year Forward View** supports a the role for Pharmacists including supporting working with patients with minor ailments and management of long term conditions. Such prevention, treatment and management work will relieve the pressures on General Practice and Emergency Services.
 - **The RPS and the NHS Alliance** recently published a joint statement highlighting the benefits that employing pharmacists within general practice can bring as a member of the practice team, particularly supporting those with long term conditions and complex medication regimens.
 - **RPS and the RCGP** have collaborated to develop a joint proposal to expand the number of practice based pharmacists in England.
 - **HEE and CPPE** considering training needs and models
 - **Pharmacists working in A&E** - 53 trusts confirmed within pilot

Community Pharmacy

- Essential Role in helping to deliver the 5YFV
- Need to demonstrate a clinical approach based on principles of MO
- Need to create the headroom to allow CP to fulfil its potential focused on the patient
- Need to unlock the commissioning system to allow CP to provide more patient focused services
- Already 'stepping up to the plate' e.g. Community Pharmacy Futures projects, Flu Vaccinations, Minor Ailment schemes, NMS, MUR etc.

Thank you

bruce.warner@nhs.net