Purpose

Our work will help to shape the uptake and use of all medicines not just those directly commissioned by NHS England.

Our focus will be on outcomes:

- Quality of care (efficacy and safety),
- Patient experience - working with patients’ to meet their needs,
- Value – working with CRGs to promote best value health gain from use of medicines
- Financial sustainability - appropriate investment by eliminating wasted resources.

The purpose of the Medicines Optimisation Clinical Reference Group (MO CRG) is to provide advice to optimise the use of medicines directly commissioned by NHS England. The overall objective to improve patient outcomes of care through the principles of medicines optimisation as evidenced through measurement including patient experience.

We will follow the principles in the Five Year Forward View and remain flexible and adaptable as policy develops. We will provide advice to other Clinical Reference Groups, commissioners, providers and patients. Our advice will be patient centred and focussed on quality, outcomes and value. We will develop an open, transparent relationship with the pharmaceutical industry.

We are accountable to the Specialised Commissioning Oversight Group (SCOG), NHS England.

Mission Statement

The MO CRG will enable the best patient care with all medicines not just those directly commissioned by NHS England to achieve best possible outcomes, experience and value, for the population whilst balancing individual rights

Values

Patient centred

- We will ensure that all our decisions are patient centred
- We will seek to ensure that a wide range of patient perspectives are included in our work
- We will seek consensus but where that is not possible we expect the chair to take the final decision based on the interests of patients
- We will ensure our patient members feel confident in making contributions to our work
Collaborative

- We will work openly and honestly, by creating an environment during our meetings where everyone feels able to contribute
- We commit to a shared ownership of actions
- We will facilitate everyone working to achieve the group’s objectives

Fair

- We will respect the views of all in the room and listen to contributions even when not directly affected

Empowered

- We will take full responsibility for the decisions made by the group
- We believe that decisions taken when we are not present still stand
- We will ensure the decisions made are actioned and delivered

Accountable

- We will work through open, robust processes so that decision making is clear to all.

Role and Responsibilities

In line with the values, all members commit to supporting the MO CRG activities. The role of the Group is to ensure the overall delivery of the MO CRG work programme through:

- Approving the Work Programme and timeframes
- Taking overall responsibility for the effective running of the work programme
- Providing visible leadership about MO CRG
- Linking with other CRGs
- A two way channel with colleagues
- Being cognisant of other relevant other programmes such as the Procurement and Efficiency Carter Programme, ABPI / NHSE Medicines Optimisation Programme and IHW obligations
- Working with others leading on Medicines Optimisation, such as the Academic Health Science Network.

Work Programme 2015 -17 (to be signed off by SCOG)

- To collate, summarise and publish a report into the current metrics used to measure outcomes of care with specialised medicines commissioned directly by NHS England by 2016

- To provide a set of incentivisation principles to support NHS England commissioners and provider organisations in eliminating wasted resources associated with medicines procurement, preparation, prescribing and supply by Autumn 2015
• To create a network of pharmacists associated with CRGs, NHS England area teams and clinical commissioning pharmacists to enable their sharing of best practice with the aim of improving medicines optimisation and financial sustainability

• Through the data presented in the Innovation Scorecard and “Define” provide information and challenge to other CRGs to achieve greater consistency in use of medicines commissioned by NHS England across England by publishing a report for each CRG with recommendations to aid their decision making

• To reduce costs and waste with chemotherapy regimens by:
  
  - standardising the payment for supportive therapies,
  
  - standardising the payment for chemotherapy provision from a pharmacy
  
  - proposing a national approach to chemotherapy dose banding

• To publish a set of principles concerning the presentation of specialised medicines to enable patients to best manage their own care with efficient use of NHS facilities and resources.

• To maintain overview on the list of medicines commissioned directly by NHS England, and where possible encourage uptake of relevant products into tariff

• To define a minimum provider / commissioner data set on medicines costs and savings to achieve transparency on product pricing

September 2015

Optimising patient outcomes with specialised medicines