



# Review of the Quality Use of Medicines Program's Delivery the National Prescription Service

Submission to the Commonwealth  
January 2019



The Victorian and Tasmanian PHN Alliance is pleased to provide this submission to the Review of the Quality Use of Medicines Program's Delivery by the National Prescribing Service (NPS MedicineWise).

## Context and roles

The Alliance provides a platform for the one Tasmanian and six Victorian Primary Health Networks (PHNs). PHNs have been established with the key objectives of increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes, and improving coordination of care to ensure patients receive the right care in the right place at the right time. The Alliance enables the Victorian and Tasmanians PHNs to collectively achieve the best possible outcomes for local communities and organisations through leadership, collaboration, coordination and synergy across the jurisdiction.

The Australian Government funds the not-for-profit, NPS MedicineWise, to provide evidence based information, support tools and education services to health professionals and consumers to improve the quality use of medicines and diagnostic services in Australia. In practice, the QUM Grant Program and NPS MedicineWise focus nationally on best practice for a core suite of defined **medicines, therapeutic practice issues, and topics** (e.g. back pain). Alongside this, it is important to note that PHNs contribute to medicines best practice through the advancement of **topics which may be system based and/or regionally specific** in nature not otherwise covered within topics delivered through the QUM Grant Program and NPS MedicineWise activities. For example, PHNs may deliver academic detailing for General Practices on system issues such as a clinical governance framework to support the accountable prescribing of 'drugs of dependence' under state-based legislation (e.g. Schedule 8 requirements and pharmacotherapy for opioid dependence). PHNs also work with primary care as a **quality improvement partner** through the development and dissemination of [HealthPathways](#), digital health enablement, and practice support activities. PHN efforts are founded in an **overall commissioning approach** which is responsive to health needs and the service environment across the defined geographical catchment. Of paramount interest is robust system integration.

Alongside national developments, the Victorian PHNs operating within the Alliance currently partner with NPS MedicineWise to develop and deliver state-wide training that supports the introduction of **real-time prescription monitoring**, [SafeScript](#) by the Victorian Government. This arrangement has been structured through a consortium with NPS MedicineWise, led by Western Victoria PHN. Hence, PHN sub-contracting arrangements exist with NPS MedicineWise for scoped work. The project delivery has been a productive working relationship from the outset, NPS MedicineWise medicines and training expertise has been closely coupled with localised PHN sector expertise and delivery capability. The implementation of training to support the introduction of [SafeScript](#) is supported by the Victorian Government.

## Key points

Consistent with the scope of the review, as defined in the Terms of Reference, the Alliance emphasises the following key points:

- **That the Quality Use of Medicines Grant Program must be adequately integrated as part of an overall health systems strengthening and quality improvement approach. As a national program, it must be nationally relevant and regionally responsive.**





- The Australian PHNs are a mechanism for realising high performing primary care. PHNs apply national guidance and policy to local context. Hence, there is a need for strategic and operational alignment which systematically integrates approaches with those delivered within/as part of the QUM Grant Program and NPS MedicineWise efforts.
- Grant initiatives delivered on behalf of the Australian Government must ensure transparency of approach. This is central to ensuring legitimacy and accountability, but also credibility among the primary care sector and associated workforce.

The Alliance submission outlines key considerations for The Review under each scope area.

## Governance, transparency, accountability and performance

Victorian and Tasmanian PHNs have had longstanding working relationships with the QUM Grant Program and NPS MedicineWise. The Review's interest in governance, transparency and accountability is aligned with the PHN support for strategic alignment with the QUM Grant Program and NPS MedicineWise activities. This requires clarity of roles and interface with partners, ideally including formalisation of mechanisms for integration with other entities funded by governments. The lack of coordination is a risk to efficiency and effectiveness. To date, strategic and annual planning activities have been variably integrated at a range of levels:

- The extent to which **national priorities and focus areas** cascade into that of the NPS MedicineWise strategic and annual priorities. Formalisation of the contribution of the Australian Commission on Safety and Quality in Health Care in priority setting is supported. It is noted that the core suite of topics must be of an adequate scale to maximise the value of the program.
- The extent to which **local priorities and service needs** inform NPS MedicineWise priorities. The PHN needs assessment process draws from qualitative and quantitative data, and guide PHN procurement and delivery efforts at the local level. These methods and outputs are ideally placed to inform NPS MedicineWise efforts, and respond to local community and service needs in parallel with pursuits toward the national agenda.
- The manner in which **performance indicators** are harmonised across partners to ensure delivery against shared **safety and quality goals**, including all those that pertain to overuse, underuse and misuse of care including medicines.<sup>1</sup> It is noted that the PHN Performance and Quality Framework may provide a mechanism for shared indicators.<sup>2</sup>

Strengthened governance and planning arrangements would complement the Review's interest in performance and accountability. The intended outputs and outcomes of Government investment in NPS MedicineWise activities is not consistently understood, which challenges the capacity for partners and indeed practitioners to work collaboratively. This may be compounded by perceived threats to neutrality and commercial interests derived through VentureWise offerings.

Government-funded initiatives must publish the scope of work, including outputs and outcome measures (i.e. performance indicators), and associated evaluation/review findings. Program outputs, including data assets, should be available for non-commercial use at no cost. Within the context of the

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<sup>1</sup> <https://www.ncbi.nlm.nih.gov/pubmed/9749483?dopt=Abstract>

<sup>2</sup> [http://www.health.gov.au/internet/main/publishing.nsf/Content/PHN-Performance\\_Framework](http://www.health.gov.au/internet/main/publishing.nsf/Content/PHN-Performance_Framework)





QUM Grant Program and NPS MedicineWise, the commercial interests of the subsidiary VentureWise risk being perceived as being at odds with data use in the public interest.

## Efficiency, effectiveness and appropriateness of work delivered

PHNs have an established track record in primary care workforce training, development and quality improvement. Over recent years, partnership with NPS MedicineWise has increasingly occurred through program specific arrangements, rather than through overarching PHN program or individual PHN organisational arrangements. As a consequence, at the operational level, there has been some variation on the following:

- **The formality of planning and delivery arrangements, including the interface with PHNs.** QUM program activities risk being delivered independently of the suite of activities that can be delivered by partners with a peer program focus or across a broader region. This creates a reliance on ad hoc or person-dependent arrangements which are not conducive to sustained clinical behaviour change at the practitioner, organisational, or regional levels over the longer term.
- **The capacity to effectively coordinate quality improvement initiatives delivered across a region.** There is a need for consistent quality improvement messages between NPS MedicineWise and PHN practice support activities delivered within primary care. For example, there should be cross referral to NPS MedicineWise and PHN resources such as it pertains to [HealthPathways](#), digital health, and program specific efforts. In the absence of this, activities risk being inefficient and potentially competitive in nature, while increasing the likelihood of disengagement by the primary care workforce.
- **The extent to which data sharing contributes to regional planning efforts.** It is acknowledged that the MedicineInsight data holdings have varied relevance to the 31 PHNs by virtue of the proportion of participating practices.<sup>3</sup> However, the fact that de-identified and aggregated medicines use data analytics is not openly accessible is inconsistent with the Australian Government's commitment to open government<sup>4</sup> and the manner in which other Government-funded datasets are handled. Moreover, practitioners have reported limited understanding in relation to how primary care data shared with NPS MedicineWise will be used, and sensitivities in relation to potential utility derived by General Practices contributing data to MedicineInsight, compared with the relative utility derived by NPS MedicineWise and its commercial subsidiary VentureWise.

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<sup>3</sup> Refer table 3.2 -

[https://cdn0.scrvt.com/08ab3606b0b7a8ea53fd0b40b1c44f86/63df68106933b7b1/100a108a779c/GPIR-2016\\_17\\_FinalVersion13-Dec.pdf](https://cdn0.scrvt.com/08ab3606b0b7a8ea53fd0b40b1c44f86/63df68106933b7b1/100a108a779c/GPIR-2016_17_FinalVersion13-Dec.pdf)

<sup>4</sup> <https://www.finance.gov.au/blog/2010/07/16/declaration-open-government/>





## The evaluation of programs delivered by NPS MedicineWise including savings evaluation methodology and reporting of broader health outcomes

The Alliance are not placed to comment specifically on the efficiency and effectiveness of activities in light of the limited independent evaluation information (including details of evaluation design and methodology) which is publicly available.<sup>5</sup> The benefits of regular/timely and independent publication of program activities, outcomes, and savings attributed to these activities are noted.

It is also worthy to highlight that quality data reporting is essential. Stakeholders, including General Practitioners have reported concerns regarding the content, format and quality of primary care data reporting. Best practice data reporting principles must apply.

## Options to inform the efficient, flexible and innovative delivery of the QUM Grant Program

The Alliance acknowledges the QUM Grant Program and the significant expertise that has been established by NPS MedicineWise. The following are proposed as options for an enhanced approach going forward:

1. **Recognition of the breadth of quality use of medicines roles** – There are a suite of parties and programs that have a role in quality use of medicines. The QUM Grant Program and NPS MedicineWise efforts which are largely therapeutically oriented, would benefit from further recognition of the suite of efforts that are complementary in nature. For example, the breadth of activities that may be undertaken by PHNs in advancing the system issues associated with embedding the principles of quality use of medicine is worthy of recognition. Efforts towards formalising activities, investment (including how activities are managed through PHN funding schedules), and measures of success in relation to these functions is considered essential for longer term sustainability of Australian quality use of medicines interests not otherwise limited to the Grant Program and Australian Government funded NPS MedicineWise activities.
2. **Strategic sectoral alignment** – Formalise the NPS MedicineWise's organisational roles, including key interface points with partners including PHNs as a national program. Ensure formal inputs to strategic planning and priority setting are transparent, and reflect the national quality improvement agenda, and include provision for regional priorities to bear influence. Eliminate potential threats to perceived independence and resolution of any concerns of data governance issues associated with MedicineInsight and VentureWise may enhance partnership and practitioner trust.
3. **Optimised operational delivery** – Formalise, publish, and independently evaluate programmatic roles and activities. Formalise programmatic activities to include proactive operational planning within the context of broader partner activities delivered locally (e.g. PHN [HealthPathways](#), digital health enablement, and practice support activities). The PHN annual planning cycle, including health needs assessment and activity work plan development is ideally placed to inform the regional planning approach. Hence, NPS MedicineWise may be placed to develop PHN catchment level operational plans which are prepared in partnership

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<sup>5</sup> <https://www.nps.org.au/about-us#evaluation>





with local stakeholders. Alternatively, formalised contractual arrangements may be led as part of an overall commissioning approach. Coordinated efforts which facilitate consistent quality improvement and quality use of medicines messaging is considered essential.

4. **Enhanced evaluation and review** - Evaluation of impact and outcome must be adequately understood at both the regional (PHN catchment) and national levels. Sustainability of impact reported through clinical behaviour change activities must be understood by quality improvement partners in a region and longitudinally over the short, medium and longer term (i.e. not limited to short-term audit cycles). Shared learning and knowledge transfer is essential.

The Alliance looks forward to advancing the goals of the QUM Grant Program and realising the value of the Australian Government investment in the national interest, and for the benefit of regional communities of patients, carers, and practitioners.

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