

Reducing costs to make a difference to patient care

The importance of patient and staff engagement was discussed at this year's Guild of Healthcare Pharmacists Procurement and Distribution Interest Group summer symposium. By Shona Kirk.

We need to engage the public in healthy living issues, or healthcare will not be affordable in the next 10 years, according to Martin Stephens, national clinical director with responsibility for hospital pharmacy at the Department of Health. Speaking at the Guild of Healthcare Pharmacists Procurement and Distribution Interest Group summer symposium, Mr Stephens said: "It is also important to empower frontline staff to lead changes that improve quality for the patient."

Mr Stephens also discussed the importance of the pharmaceutical industry in the UK. He said that having a thriving pharmaceutical industry in the UK will help us to get out of the current recession. He added: "The most cost-effective spending on pharmaceutical research is done by the UK ... and a significant number of our medicines are UK-developed."

Challenged to make changes

Mr Stephens challenged delegates to make sure that every trust represented at the meeting starts to make changes before next year's PDIG summer symposium. "Even small changes can make very significant differences," he said. "You should go back [to work] and ask the difficult questions, address the difficult issues and make a difference so that we can put cost-effective and high quality pharmaceutical services in place," he told symposium attendees. Changes needed include using the best models for homecare and ensuring quality, safety, effectiveness and a positive patient experience.

Ways to make savings

Yearly reports about exponential increases in the cost of drugs are unfounded — the cost stays at around 10% each year said David Taylor, professor of pharmaceutical



Adrian Towse (left) and David Taylor

and public health policy at The School of Pharmacy, University of London. "We haven't spent an undue amount on medicines," he said.

During his presentation, Professor Taylor noted that the UK has the highest generic prescribing rate in the world. "This has huge implications, including for the future income of community pharmacy," he said.

Turning to other ways to make savings, Professor Taylor commented that there is a danger in not differentiating between immediate prices and short-term costs, and the longer-term costs. We need to make sure that there is a real investment for the future, and this involves spending more now. He also suggested that we should investigate extensions on intellectual property rights for drugs, in return for negotiations worldwide, although this is unlikely to be possible.

NICE evaluation methods

Should the National Institute for Health and Clinical Excellence take into account the broader impact on the economy — including people returning to work and the impact on carers, and not just quality of

life and NHS costs? This question is being addressed by researchers at the University of York, explained Adrian Towse, director at the Office of Health Economics. The research is investigating the potential for NICE to take a broader perspective on value for money in its assessments and will be presented to the Secretary of State. The work is due to be completed this month and a consultation on the document is likely to follow.

Professor Taylor also commented on NICE appraisals and the fact that NICE does not take into account social factors when developing guidance. He described health economic calculations as useful "on the back of the envelope" calculations, but nothing more.

The annual David Samways award for outstanding contribution in the field of procurement was presented to V'Iain Fenton-May.

The Guild of Healthcare Pharmacists Procurement and Distribution Interest Group summer symposium took place in Birmingham on 11 June.