



All Wales Therapeutics & Toxicology Centre
Canolfan Therapiwteg a Thocsicoleg Cymru Gyfan

What's new at AWTTC?

Tony Williams – Head of Patient Access to Medicines (PAMs)

Claire Thomas – Head of Welsh Analytical Prescribing Support Unit (WAPSU) and Medicines Optimisation



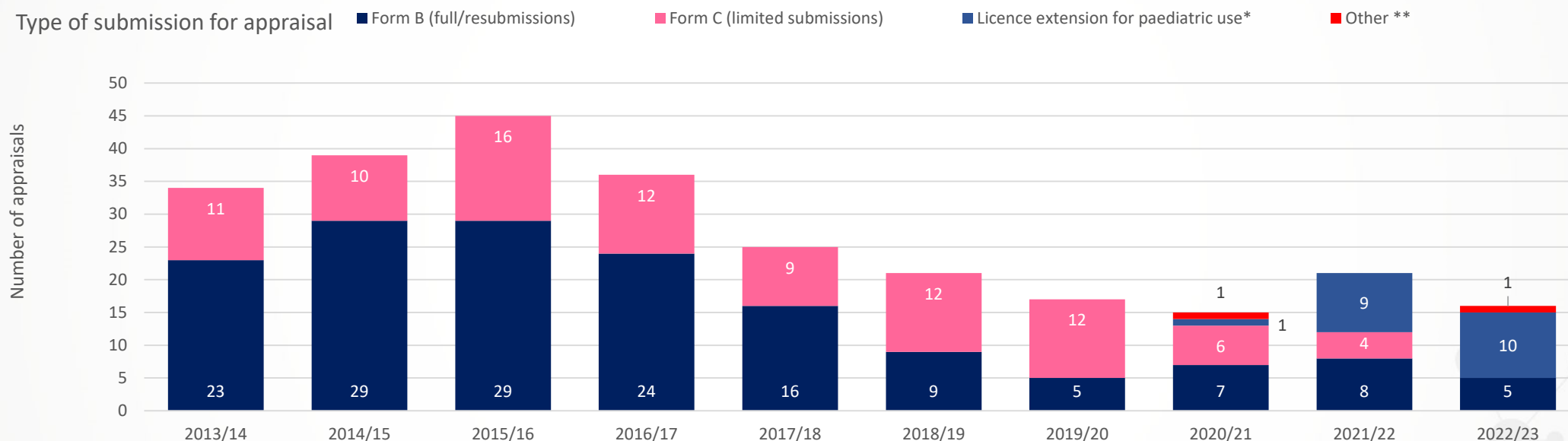
Grŵp Strategaeth Meddyginiaethau Cymru Gyfan
All Wales Medicines Strategy Group



Patient Access to Medicines

Helping to ensure that access to medicines is fair, timely and continuously improving for the people of Wales

AWMSG HTA Appraisal Trend



* Process introduced in 2021

** reassessment of emtricitabine/tenofovir disoproxil

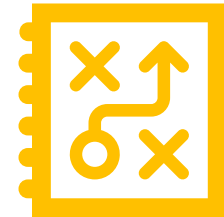
NHS Wales Medicines Ecosystem



Aligned AWMSG HTA
processes to NICE



Evolving the AWMSG process
for medicines access in Wales



Developing Strategy/Action
Plans e.g. Biosimilar Strategy

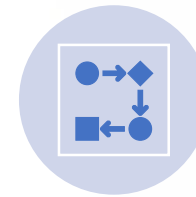
Aligning AWTTC work plan to NHS priorities



Early Access to
Medicines Scheme
(EAMS)



Uptake of best value
biologics



Improved governance
– continued roll out of
Blueteq



Use of real-world
evidence



Complex therapies e.g.
genomics, ATMPs



Implementation

'Once for Wales' approach



HORIZON SCANNING



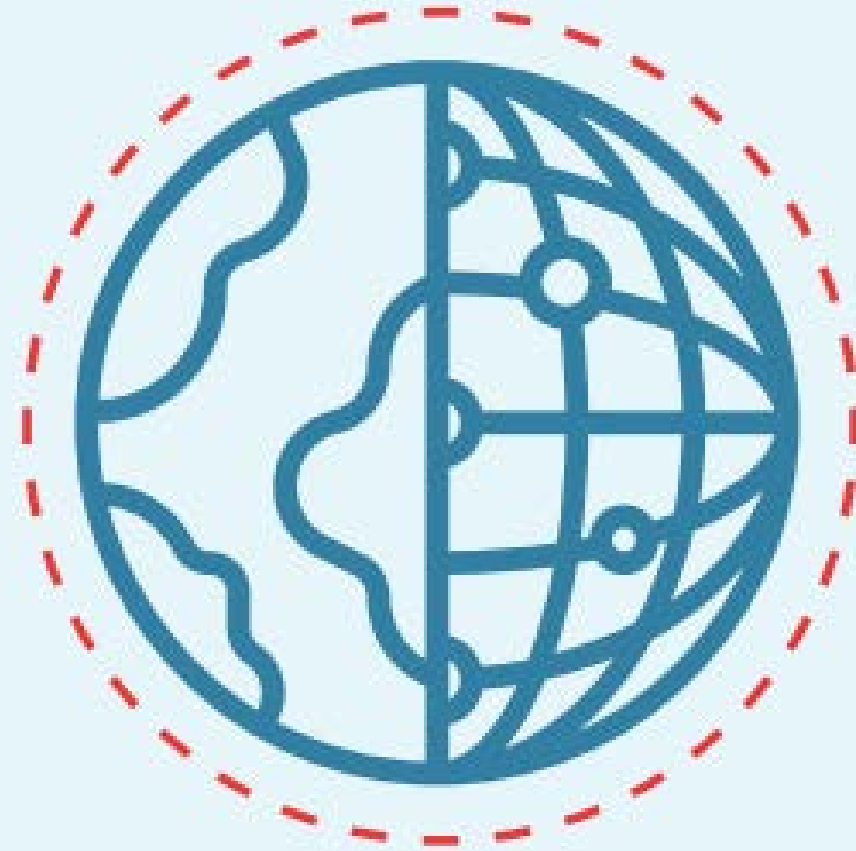
STRENGTHENING NATIONAL
COLLABORATIONS WITH KEY PARTNER
ORGANISATIONS



REDUCE DUPLICATION, IMPROVE
EFFICIENCY AND FREEING UP OF NHS
RESOURCES

National/international collaboration

- National Strategic Clinical Networks
- Strengthen collaboration with NICE/SMC/MHRA
- Forge international relationships e.g. Can/Aus/NZ





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Sustainability



NHS Wales Decarbonisation Strategic Delivery Plan

2021-2030

(including Technical Appendices)

Published March 2021

Transition the existing use and distribution of carbon-intensive and high global warming potential (GWP) inhalers to alternative lower GWP inhaler types where deemed suitable.

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Decarbonisation: inhaler prescribing, use and disposal 2023–2030

A national strategy for Wales

November 2023

Top 12 actions to deliver the strategy

1. Establish a Task and Finish Group to co-ordinate and oversee activity relating to inhaler prescribing, use and disposal.
2. Work in partnership with all stakeholders across three broad areas: i) prescribing of inhalers; ii) use of inhalers; and iii) responsible disposal of inhalers.
3. Engage with national and local environmental and clinical networks (such as [Respiratory Health Implementation Group](#), [Green Health Wales](#), [Greener Practice](#), and local 'green' groups) to support progress towards decarbonisation.
4. Ensure interventions, guidance and services are designed and developed using best available evidence and data including behavioural science.
5. Ensure Welsh national guidance encourages patient-centred, correct diagnosis and regular reviews of asthma and COPD by clinically appropriate staff, to promote quality respiratory care with low carbon outcomes.
6. Develop advice on repeat prescription ordering for inhalers which prompts for a chronic respiratory disease review and supports the inhaler decarbonisation strategy to reduce prescriptions for unnecessary reliever inhalers.
7. Ensure that healthcare professionals are appropriately informed, trained and carbon literate to assess a person's inhaler technique and offer more environmentally friendly products first line. The training should emphasise the importance of making sure that a patient can demonstrate good inhaler technique.
8. Use prescribing decision support software, where available, to signpost prescribers to consider an inhaler with a lower carbon footprint as first choice.
9. Use drivers such as National Prescribing Indicators and primary care contracts to encourage more environmentally sustainable prescribing, use and disposal of inhalers.
10. Publicly report and monitor data on the progress in reducing the carbon footprint of inhalers used in primary care in Wales, and highlight prescribing practice that is not in line with national asthma and COPD guidelines.
11. Support and evaluate a pilot to recycle inhalers being conducted in Swansea Bay University Health Board. Pending evaluation outcomes, NHS Wales and its partners will work together to develop and implement the necessary steps to scale and spread this initiative.
12. As well as sharing knowledge, research and best practice across Wales, we will work with governments of the other UK nations, as well as NHS colleagues across the UK, to maximise the impact our work can have on the global carbon footprint.



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Canolfan Therapiwteg a
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All...

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Sustainability



Our sustainability pledge

The All Wales Medicines Strategy Group (AWMSG) and the All Wales Therapeutics and Toxicology Centre (AWTTC) pledge to:

- support measures to address the climate change emergency
- contribute to achieving the NHS's goal to reach net zero carbon emissions by 2030
- consider the environmental impact of medicines
- consider the impact of our work on people and future generations, and on their health and wellbeing
- involve patients and the public in our work, ensuring that our work is inclusive and fully reflects

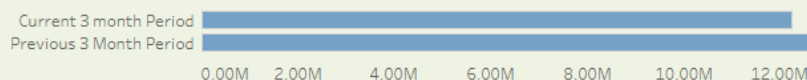


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Summary of Progress Made in Reducing the Indicative Carbon Footprint, comparing June 2023 to August 2023 versus March 2023 to May 2023

Progress For (All) Health Board

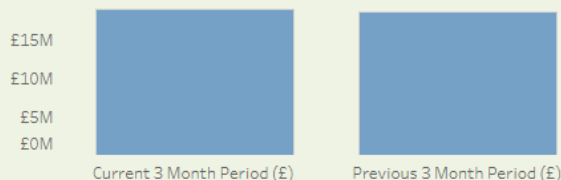
Change in indicative carbon footprint (all inhalers) (CO₂Kg) -704,450 (-5.45%)



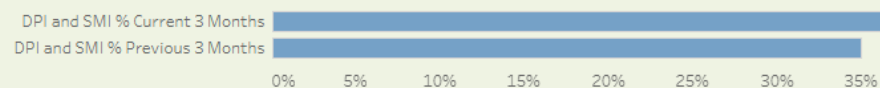
Change in MDI Usage (CO₂Kg) -715,343 (-5.65%)



Change in Cost (all inhalers) £190,139 (1.02%)

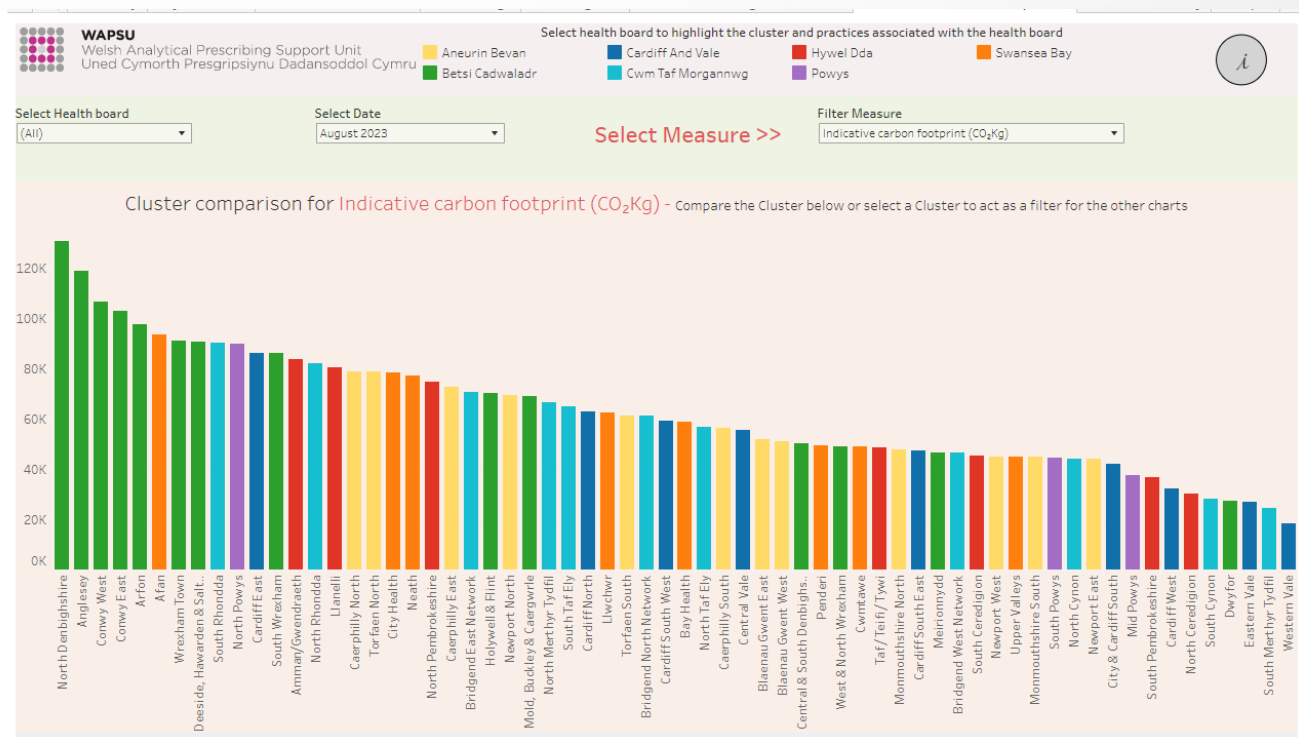


Change in DPI and SMI Inhalers as a percentage of total items (%) 1.43 (4.09%)



Number of trees that need to be planted to offset the annual indicative carbon footprint from all Inhalers

2,674,942



Green Inhaler QI Project

Summary of measures to help track progress

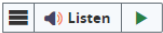
Please note there is a 3 month lag time for data becoming available

Select Practice from dropdown: Aneurin Bevan > Blaenau Gwent East > W93007 - CWM CALON

Latest Month Totals (August 2023)

DPI and SMI Items as a Percentage of Total Items	Carbon Footprint Per 1000 Patients (CO ₂ Kg)	SABA Items as a Percentage of Total Items	Carbon Footprint Per 1000 Patients (SABA) (CO ₂ Kg)
34.07%	1,935	41.14%	1,187
Change and Percentage Change			
July 2023	vs August 2023	August 2022	vs August 2023
DPI and SMI Items as a Percentage of Total Items	34.19%	-0.12	-0.34%
Carbon Footprint Per 1000 Patients (CO ₂ Kg)	1,834	100.8	5.50%
SABA Items as a Percentage of Total Items	41.74%	-0.60	-1.44%
Carbon Footprint Per 1000 Patients (SABA) (CO ₂ Kg)	1,146	41.1	3.59%
DPI and SMI Items as a Percentage of Total Items	29.43%	4.6	15.78%
Carbon Footprint Per 1000 Patients (CO ₂ Kg)	2,339	-404.5	-17.29%
SABA Items as a Percentage of Total Items	43.46%	-2.32	-5.35%
Carbon Footprint Per 1000 Patients (SABA) (CO ₂ Kg)	1,491	-304.1	-20.40%

Home > Medicines optimisation and safety > Medicines optimisation guidance, resources and data > Prescribing guidance > All Wales guidance for prescribing intervals



All Wales guidance for prescribing intervals

In 2019, as part of a commitment made regarding the contractual reform agreement with Community Pharm commissioned the Welsh Institute for Health and Social Care (WIHSC) to undertake a review of dispensing vc with the purpose of considering the feasibility of reducing prescription volumes in primary care through prac arrangements, including the consideration of prescribing intervals. The review also aimed to establish whethe amounts of pharmacist time to provide direct patient care, thereby supporting the increased range of clinical pharmacists. The review concluded that, on balance, there would be a benefit to pharmacies, GPs and patient

This document presents an overview of the current situation regarding prescribing intervals, and sets out a s prescribing intervals where appropriate.

↓ All Wales Guidance for Prescribing Intervals 293KB (PDF)

(October 2022)

Equality and Health Impact Assessment (EqHIA) form

- All Wales Guidance for Prescribing Intervals - EqHIA form (October 2022)

Equality and Health Impact Assessment

AWTTC Equality and Health Impact Assessment

Project/Policy title: All Wales Guidance for Prescribing Intervals

AWMSG and AWTTC will consider and complete an Equality and Health Impact Assessment in parallel with each development stage of our projects and policies. This will help us to follow the five ways of working for public bodies, and work to achieving the wellbeing goals, outlined in the Well-Being of Future Generations (Wales) Act 2015.

Date: 15/06/2022

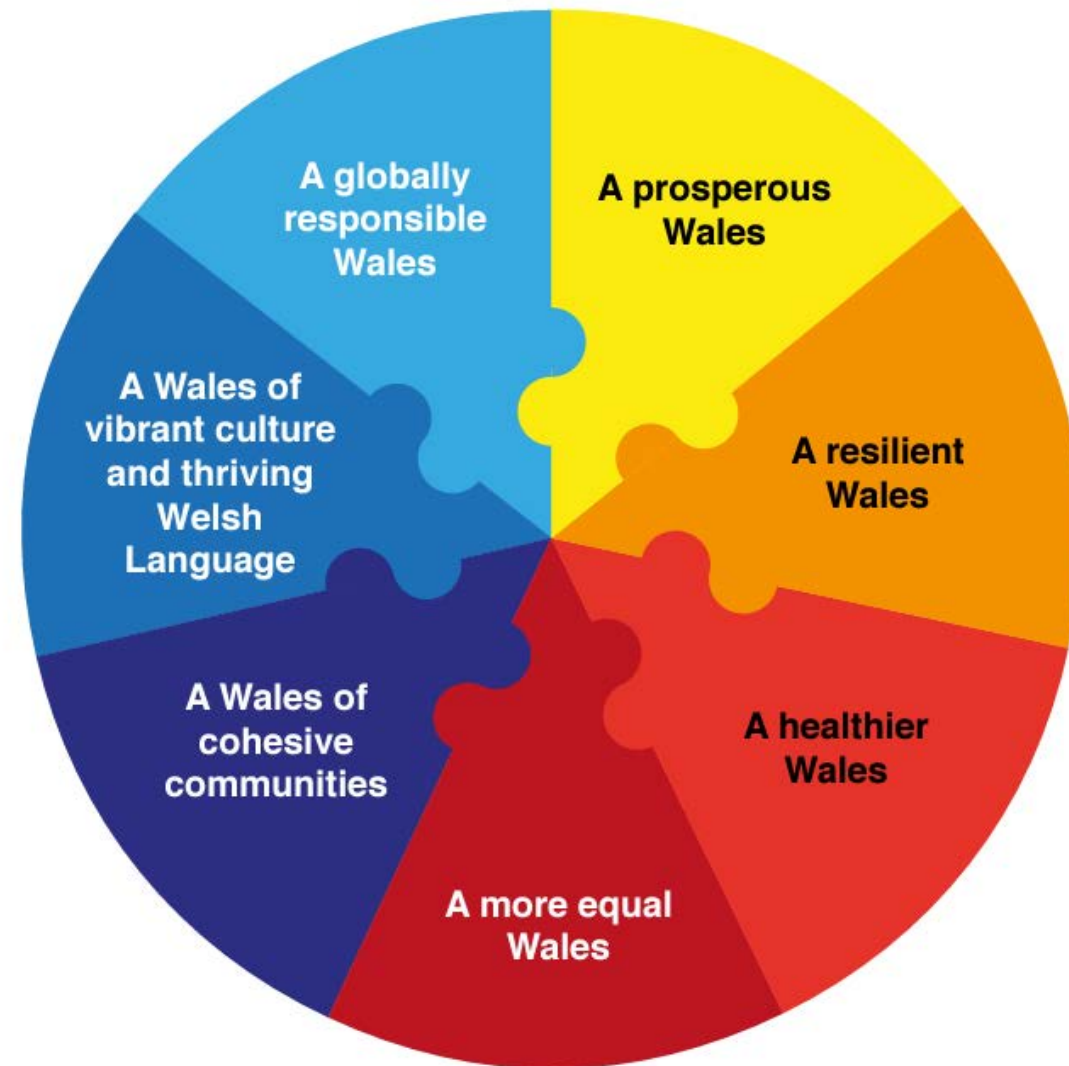
1.	Names of the project/policy lead, and AWTTC contact details	AWTTC contact details: Tel:02921 826900; email: awttc@wales.nhs.uk
2.	State the objectives of the project/policy. (include what outcomes will be measured and who by, when, any other details? Perhaps who else will be involved?)	<p>To review and update the existing "All Wales Review and Guidance for Prescribing Intervals" published in February 2013.</p> <p>In 2019, Welsh Government and Community Pharmacy Wales (CPW) commissioned an independent review of dispensing volumes in Wales. The Welsh Institute for Health and Social Care (WIHSC) at the University of South Wales undertook the review, which specifically aimed to consider:</p> <ul style="list-style-type: none">- Whether it is feasible to reduce the volume of prescriptions issued and dispensed in Wales through practical changes to prescribing and dispensing arrangements; and- Whether such changes would significantly release pharmacist time to provide direct patient care.



Comisiynydd
Cenedlaethau'r
Dyfodol
Cymru

Future
Generations
Commissioner
for Wales

Well-being of Future Generations (Wales) Act 2015





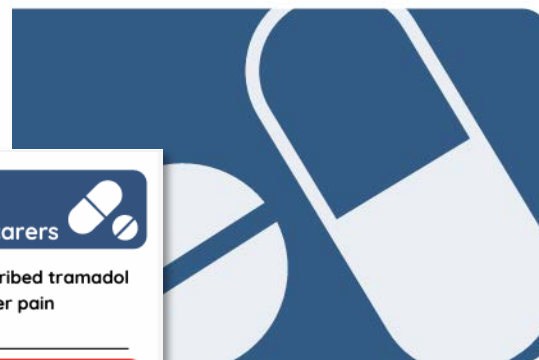
Tramadol Educational Resources Review 2021

Easy Read



Tramadol

Information for patients and carers



as written by the All Wales Therapeutics
Centre and the All Wales Medicines
Strategy Group. It is an easy read version of 'Tramadol -
Information for patients and carers'.



May 2023

Tramadol

Information for patients and carers



Tramadol is a pain reliever. You may be prescribed tramadol if you have moderate to severe pain, and other pain relievers have not worked.

Only take tramadol if it has been prescribed for you by a healthcare professional.

Tramadol should usually only be taken for short periods (less than 3 months).



Your prescriber will usually start a short trial of treatment (2-4 weeks) to see if tramadol is the right medicine for you. This will also lower the chance of you taking tramadol for longer than you need. Tramadol should only be continued if it reduces pain and allows you to do more.



If you are thinking of stopping treatment, talk to your prescriber before you stop. Talk to your prescriber about gradually reducing your dose and stopping treatment if tramadol is not working for you or you have been on tramadol for a long time (more than 3 months).

Stopping tramadol too quickly can cause withdrawal symptoms such as flu-like symptoms, anxiety, insomnia, nightmares and feeling irritable.



Taking too much tramadol can cause severe harm. Do not take more than has been prescribed for you. Do not lend or share your tramadol with anyone else.



If you have taken more than you should then call your pharmacy, call NHS 111 Wales, or in an emergency call an ambulance - dial 999.

Starting tramadol



A doctor will want to see how you get on with tramadol.



They might prescribe it for 2 to 4 weeks. They will only give you more after that if it helps reduce your pain.

What is tramadol?



Tramadol is medicine that helps reduce pain.



A doctor might have prescribed tramadol for you if you have a lot of pain. Or if other pain medicine has not worked.



Usually, you should only take tramadol for a short time.



Only take tramadol that has been prescribed for you.



Diolch yn fawr Thank you

<https://awttc.nhs.wales>

<https://cttcg.gig.cymru>

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