

30 January 2019

Emeritus Professor Lloyd Sansom AO  
PO Box 9848,  
CANBERRA  
ACT 2601

Email: [NMP@health.gov.au](mailto:NMP@health.gov.au)

Dear Professor Sansom,

***Re. The review of the Quality Use of Medicines program's delivery by the National Prescribing Service (NPS MedicineWise)***

The Royal Australian College of General Practitioners (RACGP) welcomes the opportunity to submit to the above review. General practitioners (GPs) are key stakeholders in, and targets of, the quality use of medicines (QUM) activities delivered by NPS MedicineWise. The RACGP's key recommendations are:

- VentureWise should be subject to a separate and independent review.
- MedicineInsight's data use should be subject to a separate review.
- NPS MedicineWise's activities could be broadened from individual medicines or diseases to include activities about improving practice systems to support QUM
- Health outcomes should be used to evaluate the programs delivered by NPS MedicineWise

**Governance, transparency and accountability issues, including the impact on the QUM Grant Program on NPS MedicineWise's commercial arm VentureWise.**

From the general practice perspective, NPS MedicineWise's greatest value is as a source of independent and trusted information about medicines and interventions. Its evidence appraisals and academic detailing are an important counterbalance to the marketing information provided by pharmaceutical and other industry interests.

Education modules delivered by NPS MedicineWise are high quality, and the fact that these are created independently of industry interests is highly valued by GPs.

The RACGP expresses some reservations about NPS MedicineWise's commercial arm, VentureWise. There is potential for conflict of interest between the two organisations, and this possibility does compromise the NPS MedicineWise's value to GPs.

Every effort should be made to ensure that the two organisations remain separate. It is particularly important, given recent funding cuts to NPS MedicineWise by the Government, that the NPS MedicineWise does not become dependent on commercial funding. VentureWise itself should be subject to a separate and independent review.

The MedicineInsight program is generally regarded by practices as a useful way to promote QUM. A review of NPS MedicineWise should include a review of MedicineInsight's data use, to ensure it remains ethical and transparent and that practices and patients are fully aware of how data is collected and what it is used for.

### **NPS MedicineWise's delivery of the QUM Grant Program and NPS MedicineWise's long-term sustainability.**

The RACGP supports QUM activities and highly regards content produced by NPS MedicineWise. Effective QUM activities can lead to better long-term outcomes and improved patient safety.

We believe there is scope to improve the QUM program. NPS MedicineWise's activities could be broadened from individual medicines or diseases to include activities about improving practice systems to support QUM. Feedback from our members also suggests that they can feel like recipients of information delivered by NPS MedicineWise rather than active participants in a quality improvement activity.

We believe there should be a greater focus on self-directed quality improvement. For example, developing skills in data management, review and analysis and self-directed audits would help build a valuable quality improvement skill set within practices.

Advocacy from the NPS to encourage the integration of high-quality QUM decision support tools into clinical software would also be welcome.

The value of the QUM program could also be improved by NPS MedicineWise's working with primary health networks (PHNs). General practices are heterogeneous, and one size does not fit all. In some regions PHNs have more-nuanced knowledge of the needs of practices in their areas, which would help NPS better tailor and target its work.

NPS could also support PHNs to build their capability in supporting general practice quality improvement.

### **Evaluation of programs delivered by NPS MedicineWise, including savings evaluation methodology and reporting of broader health outcomes.**

The RACGP notes while NPS MedicineWise programs play a role in reducing PBS and MBS expenditure, the government's prioritising of this function may at times be at odds with quality use of medicines principles. We therefore advocate for the use of health outcomes to evaluate the programs delivered by NPS MedicineWise. National quality prescribing standards are also needed to properly evaluate quality outcomes and to further guide practices in QUM. However, we do acknowledge that routinely measuring the cost and savings is critical to ensuring the viability of different NPS MedicineWise programs.

Methodology for evaluating savings should be independently driven by existing and emerging evidence with input from representative bodies such as the RACGP.



Royal Australian College of General Practitioners

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Thank you again for the opportunity to comment. For queries on this submission, please contact Mr Stephan Groombridge, Manager, eHealth and Quality Care on 03 8699 0544 or at [stephan.groombridge@racgp.org.au](mailto:stephan.groombridge@racgp.org.au)

Yours sincerely,

**Dr Harry Nespolon**  
President