

T: 0131-244 2518 F: 0131-244 2375  
E: [bill.scott@scotland.gsi.gov.uk](mailto:bill.scott@scotland.gsi.gov.uk)



LEGACY 2014  
XX COMMONWEALTH GAMES  
SCOTLAND

Dear Colleague

## ACCESS TO NEW MEDICINES – TRANSITIONAL ARRANGEMENTS FOR PROCESSING INDIVIDUAL PATIENT TREATMENT REQUESTS

You will be aware that the Cabinet Secretary for Health and Wellbeing responded positively to the Health and Sport Committee's Report on Access to New Medicines. A debate held in the Scottish Parliament last month showed a great deal of consensus and support from MSPs across the Chamber to the recommendations from the Committee and the Scottish Government's positive response to them. There is a lot of work that will need to be done in the coming months to put in place these changes and we do not underestimate the impact that this will have on Boards as changes are put in place.

There is one specific aspect of the proposed package of changes that we particularly want to flag up now. The Cabinet Secretary announced that the current IPTR system will be replaced with a new Peer Approved Clinical System (PACS). This will be administered locally (i.e. within NHS territorial Boards) but within a national framework, and will be audited by Healthcare Improvement Scotland. The new system will focus on patient outcomes.

We are very mindful that as these changes are put in place (and the Cabinet Secretary has asked that they are implemented urgently) there are patients across Scotland whose clinicians may currently be considering, or in the process of, an IPTR. The Scottish Government does not think that it is acceptable for these patients to be disadvantaged because of the timing of events. We are therefore writing to you to ask you to consider 2 things.

**From the Chief Medical Officer  
Sir Harry Burns MPH FRCS(Glas)  
FRCP(Ed) FFPH  
Professor Bill Scott BSc MSc  
FRPharmS**

### Enquiries to:

Professor Bill Scott  
St Andrew's House  
EDINBURGH EH1 3DG

Tel: 0131-244 2518  
Fax: 0131-244 2375  
[Bill.scott@scotland.gsi.gov.uk](mailto:Bill.scott@scotland.gsi.gov.uk)

5 November 2013

SGHD/CMO(2013)20

### Addresses

#### For action

Chief Executives, NHS Boards  
Medical Directors, NHS Boards  
Directors of Pharmacy, NHS Boards  
Directors of Finance, NHS Boards

#### For information

Chairs, NHS Boards  
Directors of Public Health, NHS Boards

### Further Enquiries

Kathryn Fergusson  
Head of Medicines Branch  
St Andrew's House  
0131 244 2532  
[Kathryn.fergusson@scotland.gsi.gov.uk](mailto:Kathryn.fergusson@scotland.gsi.gov.uk)

Firstly, the Cabinet Secretary has asked us to re-emphasise that the concept of exceptionality should not be a factor in any IPTR under consideration in your Board but should be primarily about the individual clinical case. In addition, IPTR panels should exercise flexibility in their decision making in recognition of the issues highlighted in the Health and Sport Committee Report, and of the fact that we are entering a period of transition to a new clinically led peer review process. Patients should not be adversely impacted by this transition.

Secondly, we will be seeking input from you and others in putting in place the PACS. To help implement this new system, and to be able to assess the impact and effect of the changes made, we will need information on the types of applications you are currently dealing with. Therefore we are asking that you take the steps necessary within your Board to be able to share information on IPTR applications made in this transitional phase with the Scottish Government.

We will keep in contact with you as the process develops.

Yours sincerely

*Harry Burns*

*Bill Scott*

**HARRY BURNS**

**BILL SCOTT**