

Evaluation and feedback – excerpts from Camden practice action plans

Some of the most common action points from practices were:

Arrange follow up when any changes to medication are made or advice given. Ensure medication reviews involve an agreed individualised management plan, details of which are documented in the notes. Encourage the use of screening tools such as STOPP/START when conducting medication reviews especially in the elderly.

We have weekly clinic with Clinical Pharmacist where complex patients are booked and are reviewed. We arrange appointments with Practice Nurse for Asthma review and spirometry. We have invited the community pharmacist to our MDT meetings for ongoing support for frail house bound patients.

6 monthly medication reviews in patient with multiple and chronic health problems can lead to:

- 1) better patient understanding of their prescribed medicines and therefore better drug adherence;
- 2) improved cost-effectiveness and less wastage;
- 3) better disease management;
- 4) identification and flagging up of at risk patients and thereby improving patient safety

Offer long appointments to patient for medication review to discuss polypharmacy and offer follow-up to check patient safety.

Use specific Emis based template to perform the medication review in a standardised and reproducible manner.

At each medication review, to review the treatment period with the patients and giving them the opportunity to discuss concerns with short versus long term prescribing of antidepressants. This is to avoid lifelong prescribing of antidepressants.

Doctors to address polypharmacy and deprescribing during routine medication reviews and frailty review.

Clinicians should use the correct template for polypharmacy review, to enable regular audits.

A significant number of these patients went on to require further mental health support and this need was only identified at these reviews. Review these patients at least annually so that we can highlight additional support for the vulnerable patients

Some medication reviews contained no information about what had happened/been decided even if this was 'no change'. This made it more difficult to determine what had happened during the review e.g. it was necessary to search medications and look into the medication history of each and every drug on EMIS. It would be useful to have comments on drugs next to drug names for ongoing medications. It is not easy to find out whether a patient uses a dosette box or not using EMIS. It would be easier to identify this if a note was made next to each drug name on EMIS so that is clear to anyone reviewing the notes or prescribing medications.

Check whether changes are acceptable to patients and as to the management of their condition

Ensure that decisions take into account the patients' needs, priorities and preferences and that the patient understands and is comfortable with any decisions made.



Results from 2018/19 review

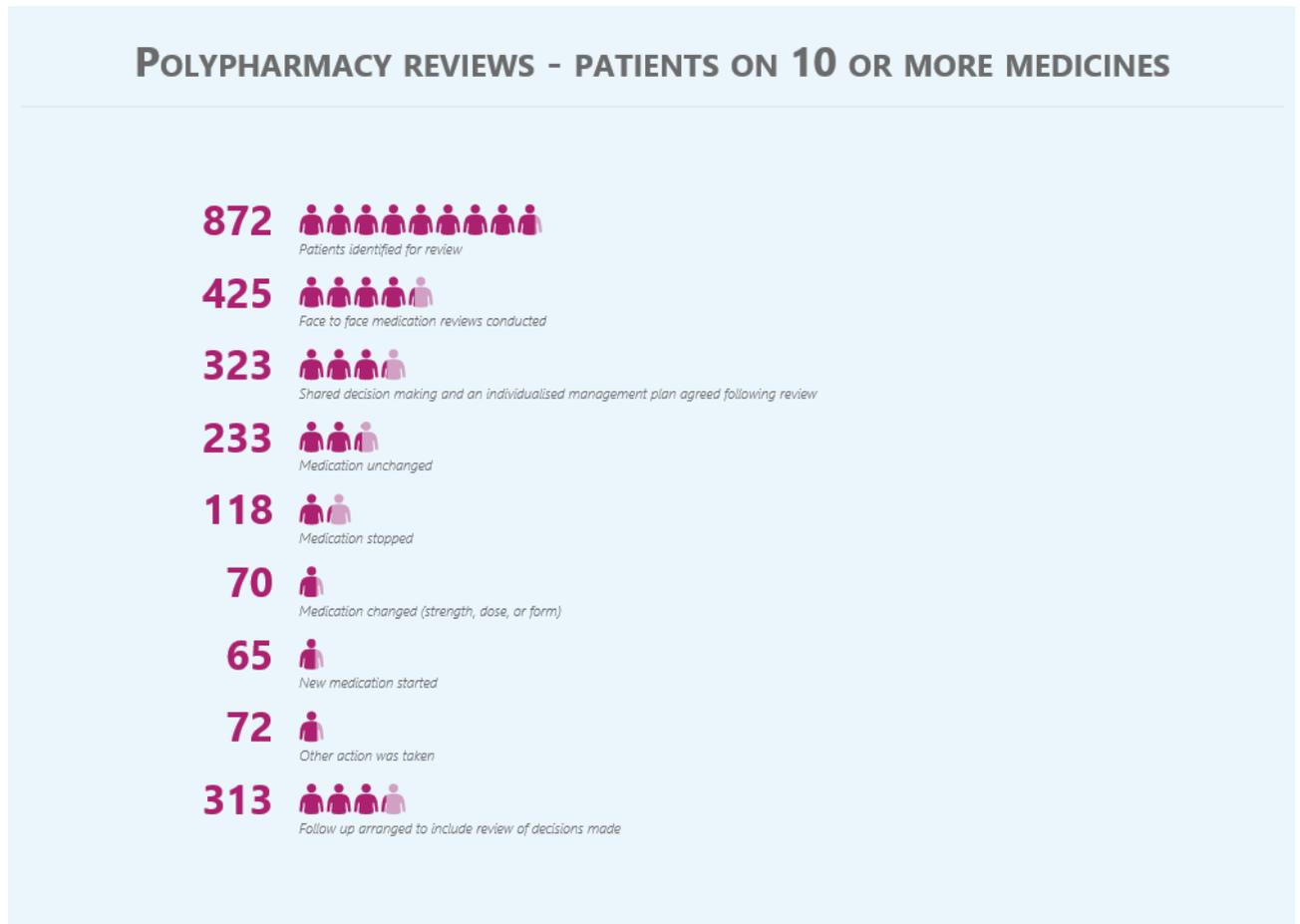
19 practices selected
13 practice submitted

Review criteria 1: Patients taking 10 or more medicines = **10 practices**

Review criteria 2: Patients on selected medications/medication groups being considered for deprescribing= **3 practices**

Camden CCG data results extracted from Camden GP practice submissions on Citizen Space.

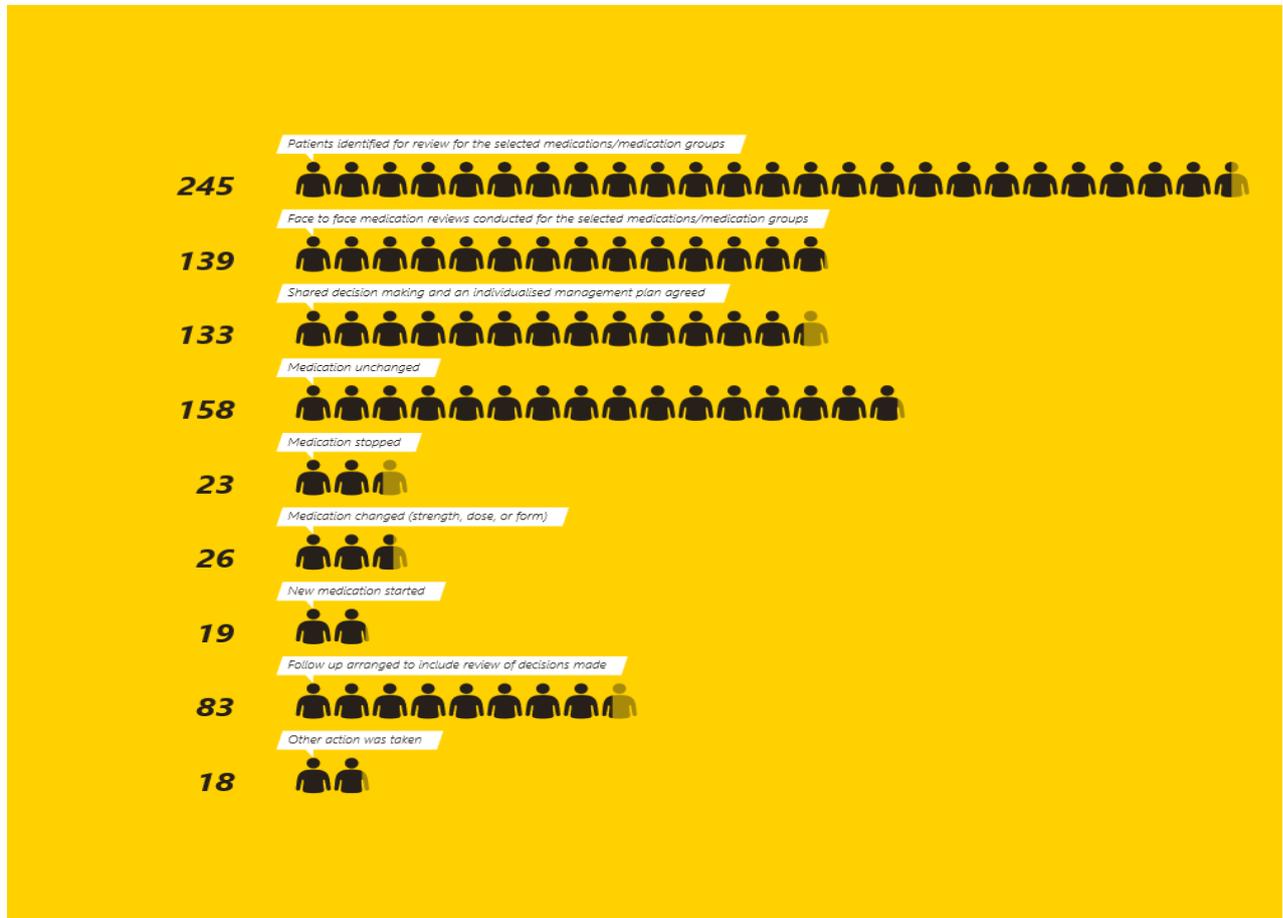
Review criteria 1: Patients taking 10 or more medicines



Camden CCG 2018/19 polypharmacy reviews – patients on 10 or more medicines - results extract	Totals
Number of face to face medication reviews conducted	425
Number of patients with shared decision making and an individualised management plan agreed following review	323
Percentage of patients with medication stopped or changed	44%

Review criteria 2: Patients on selected medications/medication groups being considered for deprescribing

POLYPHARMACY REVIEW - MEDICATIONS FOR DEPRESCRIBING



Camden CCG 2018/19 polypharmacy reviews – Patients on selected medications/medication groups being considered for deprescribing - results extract	Totals
Number of face to face medication reviews conducted	139
Number of patients with shared decision making and an individualised management plan agreed following review	133
Percentage of patients with medication stopped or changed	35%

Clinical rationale for selection of medicine / medicine group being considered for deprescribing – GP practice reports

Antidepressants

- The practice has a high number of patients with mental health conditions and often with complex medical and social histories. These patients are often vulnerable and would benefit from regular reviews and signpost to appropriate services for additional support where appropriate.

Action outcomes

- To empower patients to self-monitor their mood and seek advice in times of crisis. To discuss with colleagues current guidelines on changing antidepressants when appropriate.

Bisphosphonates

- I chose to look into deprescribing bisphosphonates as often it is a medication which is prescribed on a repeat basis, most of the time without looking into guidelines as to when it should be stopped. Continuing bisphosphonates when not needed can lead to unnecessary side effects.

Action outcomes

- Asking patients who are on bisphosphonates to also be more aware as to how long they should be taking it for. Improving patient education.

Laxatives

- The practice chose to look at laxatives:
 - To identify patients who may not be obtaining optimal benefits from their medicines.
 - To conduct a clinical medication reviews in identified patients with inappropriate polypharmacy and consider to stop of withdrawing inappropriate or ineffective medicines and to prevent any risk of harms.
- Medicines with high risk of adverse events.
- Stimulant laxatives are only licensed for short term use. Excessive doses or inadequate fluid intake can cause intestinal obstruction. Also it can lead to electrolyte disturbance and dehydration.
- Non pharmacological treatment as a possible alternatives such as diet.

Action outcomes

- Agree treatment target with patients and set a defined treatment period with a review plan and needs and make sure condition resolved.