

Local System Experience of a **STOMP** Project

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Introduction, Scope & Objectives

Proposed by Integrating Pharmacy and Medicines Optimisation (IPMO)

Endorsed by STP Pharmacy Leadership Group (PLG)

Endorsed by STP Clinical Leadership Group (CLG)

Endorsed by Transforming Care Partnership Board (TCP)

Objectives

Patients in cohort taking psychotropic medications are receiving an annual specialist review.

Review collaboration between Mental Health Trusts and GPs.

Review criteria for referral on these pathways, to ensure appropriate patient selection.



Approach & Methodology

Discussed with secondary care LD Consultants

EMIS search criteria developed based on LD patients + antipsychotic agent

Review of non-pharmacological interventions available

Review of carer input / support

Single Point of Referral (SPOR) Pathway

Review of LD Annual Health Check



STP STOMP Template



Appendix 1 – IPMO STOMP Trial review template.

BC STP IPMO - STOMP LD Reviews	
Rationale: - Public Health England data states that every day about 30,000 to 35,000 adults with a learning disability are taking psychotropic medicines, when they do not have the health conditions the medicines are for. Children and young people are also prescribed them.	
Psychotropic medicines can cause problems if people take them for too long. Or take too high a dose. Or take them for the wrong reason. This can cause side effects like:	
<ul style="list-style-type: none"> • putting on weight • feeling tired or 'drugged up' • serious problems with physical health. 	
Aim of Workstream	
(1) Identify those who are not under the care of the LD services or had a review in the last 12 months	
(2) Where possible, as clinically appropriate, consider a review and deprescribe hypnotics and/or anxiolytics and/or antihistamines to reduce the side effect and tablet burden	
Face - to - face reviews are the gold standard, but to identify the patients that will benefit from them is key to ensure that we target the right patients that require a detailed review.	
PLEASE DO NOT INCLUDE ANY PATIENT IDENTIFIABLE DETAILS AS PART OF THIS REVIEW.	
Retain all patient details at the practice for future reference if required.	
Process -	
No specific system search is required as this workstream will use the current QOF LD register within the system to identify the patients.	
Open the LD Register and open the most recent version to list the patients.	
With EMIS and <u>System</u> One you can expand/configure the search outputs to collate most of the information listed on the workbook below. However, you will need to carry out a notes-based review to support this workstream.	
From the detailed list, sort the patients to list all the patients current prescribed and antipsychotic medication.	
For the trial review, please review at least 30% of the patients listed. The list of patients taking an antipsychotic maybe small, so please consider reviewing all the patient on the LD register taking an antipsychotic medicine. This is the main cohort to review.	
Any IMMEDIATE clinical concerns must be raised with the GP as soon as identified.	
Please complete the workbook below and submit to snandra@nhs.net	
DO NOT INCLUDE ANY PATIENT DETAILS	
Practice	
No of pts on LD register	
No on LD reg and taking AP	

Patient number	
Patients listed on the LD register	
Patient has a LD diagnosis	
Patient reviewed by the LD services/Patient is seen by the LD	
Is the patient still under regular follow-up or discharged	
Patient is supported by carers	
Has the carer been listed on the practice carer register	
Is the patient on the social care register (usually held by the	
Patients taking antipsychotic medication (if on second AP please list comments section)	
Does the patients have challenging behaviour listed?	
Does the pts have a diagnosis of autism	
Patients taking antidepressant medication	
Patients taking antiepileptic medication	
Does the patients have a <u>u</u> epilepsy diagnosis	
Patients taking hypnotics and/or anxiolytics medication (if on second agent prescribed please list comments section)	
Patients taking antihistamine medication	
Patients taking ADHD medication	
Other meds for mental health indication medication (propranolol, clonidine)	
Patient has had an annual LD health in the last 12 months (Annual health checks are recommended to be carried out every year)	
ACB Score for current regimen Use score list in tab to calculate the ACB score. ACB Calculator - www.acbcalc.com	
Pts requires a review via the GP	
Pts referred to LD specialist for review (via the BCPFT Single Point of Access process)	
Recommendations List the key points from the review which require attention/action.	
Actioned (Sign and Date)	
Patient/carer informed If <u>possible</u> please include Pts carer as part review, in the decision and discussion	
Review notes /Comments	

Facts & Findings (i)

GP Registers revealed 7177 LD Patients, 811 Patients reviewed against templates in total

Sandwell & West Birmingham, Dudley and Wolverhampton

- 77% patients under LD specialist and regular review
- 22% patients not under LD service (7% other MH, 8% d/c back to GP, 4% LD service no regular review)
- 88% of the patients reviewed were supported by a carer
- 48% challenging behaviour, 41% autism and 27% both challenging behaviour and autism.
- 54% patients receive an LD annual health check.
- 30% patients had an annual health check, but not every year.



Facts & Findings (i) *continued*

Sandwell & West Birmingham, Dudley and Wolverhampton

- 36% patients were taking Antipsychotic + Antidepressant
- 29% patients were taking Antipsychotic + Antiepileptic (79% diagnosis of epilepsy)
- 39% patients were taking Antipsychotic + Hypnotic
- 19% patients were taking an Antipsychotic + Antihistamine
- 6.7% of patients were found to be taking Antipsychotic & 2+ other agent types
- 13% patients required referral to GP
- 1% patients required referral to LD/MH/Other specialist team



Facts & Findings (ii)

Walsall – Preliminary findings (based on mid year)

59% patients also had a MH read code

68% patients reviewed by LD or MH specialist in last 2 years

60% patients have receive an LD annual health check

6% patients required referral to LD/MH/Other specialist team

Most commonly prescribed antipsychotics use across STP for cohort

Risperidone	41%
Olanzapine	11%
Quetiapine	13%
Aripiprazole	13%



Analysis

- The majority of patients reviewed were under regular review of LD specialist services
- Most LD patients receive carer support (either family or external agency/social care)
- Just over half of patients are receiving a regular LD annual health check
- Signposting to non-pharmacological interventions
- Workforce component proposed to support this within primary care
- LD Registers issues & Read codes
- Wider collaborative approach



Next Steps

- STOMP remains a national, regional a priority project for 21-22
- EMIS project to review PRN medications (focus on sedating) @ each 'Place'
- Consider small dose reductions of 5-10%
- Working with care settings to build resilience and confidence, (best interests)
- Signposting and refreshing wider knowledge of existing referral mechanisms
- Education & Upskilling of primary care workforce

