Health Innovation Network



Health Innovation Yorkshire and Humber

Mark Dines-Allen, Senior Programme Consultant

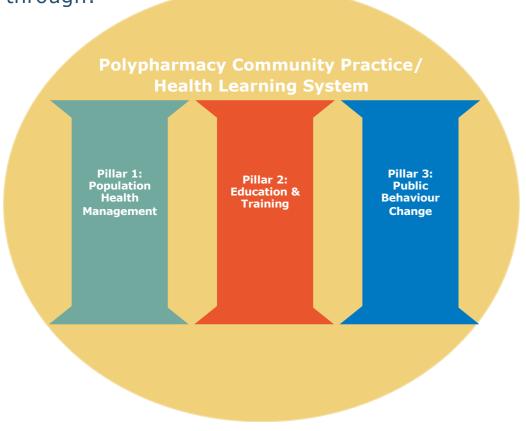
Kirsty Bramley-Dove, Pharmacy Clinical Lead





Health Innovation Network Polypharmacy Programme

The core principle of **Polypharmacy** is to support local systems address problematic polypharmacy through:



Polypharmacy aims to support local systems and primary care to identify patients at potential risk of harm and support better conversations about medicines by promoting shared decision making. The core principles of **Polypharmacy** are:

Pillar 1: Population Health Management Using data (NHS BSA Polypharmacy Comparators) to understand PCN risks and identify patients for prioritisation for a Structured Medication Review

Pillar 2: Education & Training

Running local **Polypharmacy** Action Learning Sets (ALSs) to upskill the primary care workforce to be more confident about stopping unnecessary medicines. ALS model originally developed and piloted by Wessex AHSN and supported by Health Education England (HEE)

Pillar 3: Public Behaviour Change

A menu of public-facing campaigns to change public perceptions of a "pill for every ill" and encourage patients to open up about medicines. e.g., Me + My Medicines, Are Your Medicines Working For You?

Pillar 1: Population Health Management



Pillar 1: Population Health Management
Using data (NHS BSA Polypharmacy
Comparators) to understand PCN risks and
identify patients for prioritisation for a Structured
Medication Review

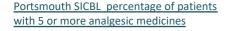
What does the tool look like?





Know your data.

Look at your local polypharmacy data via ePACT 2 and select an area of concern







Find patients at risk.

Complete the "request procedure" to access the NHS numbers of the patients in your practice deemed to be at risk and invite those patients for a medication review





Make a difference!

NE Hampshire and
Farnham CCG
supported every
practice to do this well
and demonstrated a
decrease in all
polypharmacy
comparators at double
the national average
rates!



Epact2 Training

23rd Jan (Tues) 12:00 - 13:30

The AHSN Polypharmacy
Programme: Getting the
balance right Tickets,
Multiple Dates | Eventbrite



To access your data go to:

nhsbsa.nhs.uk/epact2/dashboards-and-specifications/medicines-optimisation-polypharmacy
For more resources go to

https://wessexahsn.org.uk/projects/160/polypharmacy-what-next-planning-for-wessex

What do the comparators measure?



The average number of unique medicines prescribed per patient



Percentage of patients prescribed multiple anticoagulant regimes



Patients prescribed 4,5 or 6 (or more) medicines with low to moderate and moderate to high anticholinergic activity



Patients concurrently prescribed 5 or more analgesics



Patients prescribed 2,3, 4 or more medicines with an unwanted hypotensive effects

Volume comparators



Percentage of patients prescribed 8 or more unique medicines, 10 or more unique medicines, 15 or more unique medicines, 20 or more unique medicines



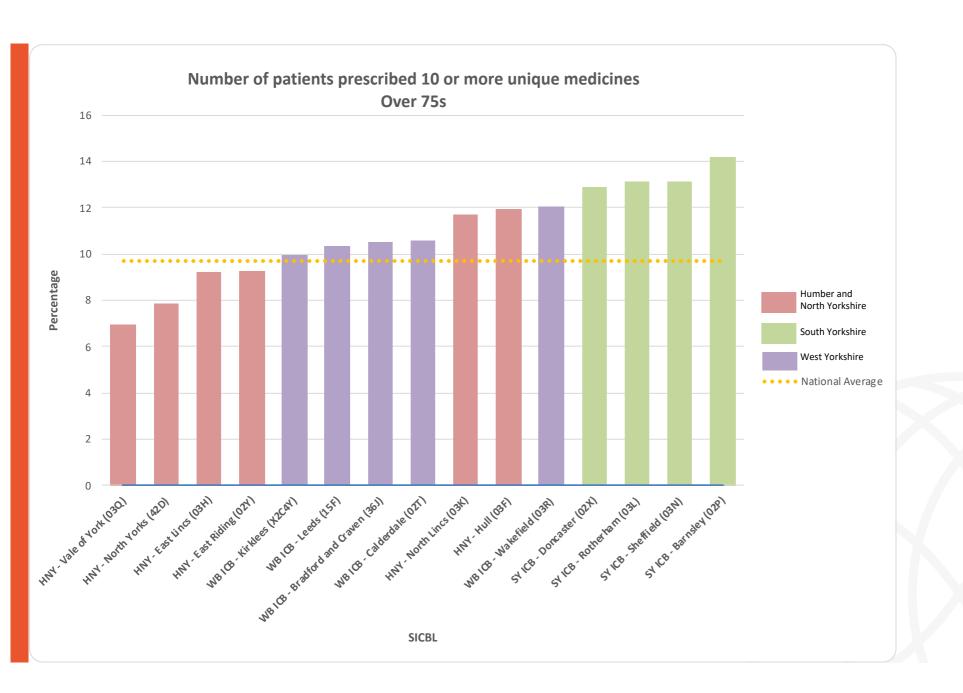
Percentage of older patients prescribed medicines likely to cause Acute Kidney Injury (DAMN Drugs) Percentage of patients
prescribed a NSAID and
one or more other
unique medicines likely
to cause kidney injury

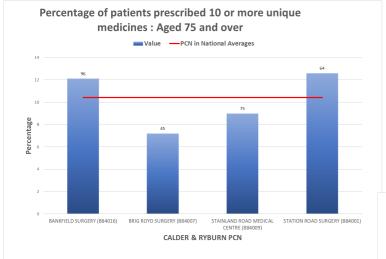
Clinical/ therapeutic comparators

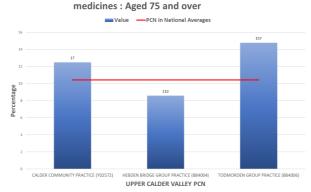
(DAMN medicines)



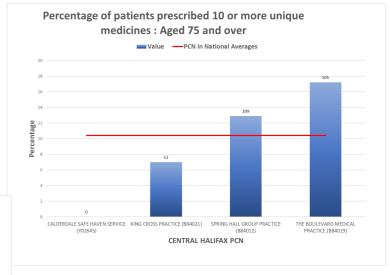
Patients prescribed and SSRI or and SNRI concurrently with other medicines known to increase the risk of bleeding.

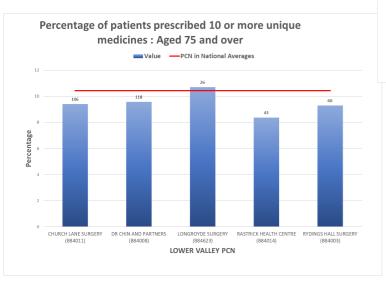


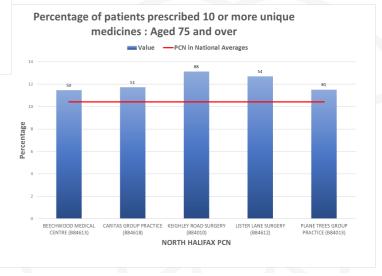




Percentage of patients prescribed 10 or more unique







Pillar 2: Education & Training



Pillar 2: Education & Training

Running local **Polypharmacy** Action Learning Sets (ALSs) to upskill the primary care workforce to be more confident about stopping unnecessary medicines. ALS model originally developed and piloted by Wessex AHSN and supported by Health Education England (HEE)

Core Principles of Polypharmacy

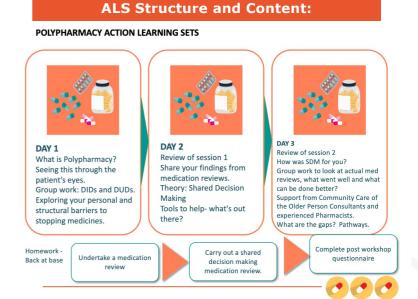
Pillar 2: Education & Training

The **Polypharmacy** ALSs build on the evaluated model and content developed by Wessex AHSN in partnership with Health Education England (HEE).

The Action Learning Sets are a structured method enabling small groups to address complicated issues by meeting regularly and working collectively. This format is especially suitable to learning around a complex topic. It supports personal development at the professional and managerial levels, and ideally suits the aims of our work. Learning is achieved through the ALS process.

The key principles of Action Learning include

- Creating the context and environment for empowered action
- Learning from experience what has and has not worked well
- A multi-disciplinary approach to addressing complex issues
- Acknowledging that people in the room have the capability and capacity to effect change
- Utilising the resources in the room fully



Evidence Base for ALS training: Brooks et al 2022

Key areas of improvement include awareness, confidence and management of inappropriate polypharmacy, equipping with relevant knowledge, information, tools and resources and decision-making and discussion about stopping medicines with colleagues in different set- tings. In addition, the ALS tool was well received as an educational learning tool in terms of being comprehensive, meeting expectations and strongly recommended.

Action Learning Set Training Dates

Cohort 12:

- Session 1- 25th Jan
- Session 2-8th Feb
- Session 3- 22nd Feb

Registration link: https://events.weahsn.net/PolypharmacyActionLearningSetCohort12

Cohort 13:

- Session 1- 6th March
- Session 2- 20th March
- Session 3- 3rd April

Registration link: https://events.weahsn.net/PolypharmacyActionLearningSetCohort13

Cohort 14:

- Session 1- 28th March
- Session 2- 11th April
- Session 3- 25th April

Registration Link: https://events.weahsn.net/PolypharmacyActionLearningSetCohort14

Polypharmacy Masterclass

Reviewing Anticholinergic Burden - improving peoples' health and well-being

Yorkshire and Humber AHSN are running a Masterclass to highlight the practicalities of assessing ACB score and how to withdraw medication effectively and safely. Presenters Heather Smith and Anne Bentley will set the scene around the impact of Anticholinergic Burden as well as calculating ACB scores alongside cases studies showing how to work with patients to reduce anticholinergic impacts.

Anne Bentley- Lead Pharmacist, Digital Care Hub, Airedale NHS Foundation Trust, and Chair of the Pharmacist Group at the British Geriatric Society

Heather Smith- Consultant Pharmacist: Older People, West Yorkshire ICB.

ABC Masterclass: https://youtu.be/_lm4nPeWC08

Pillar 3: Public Behaviour Change

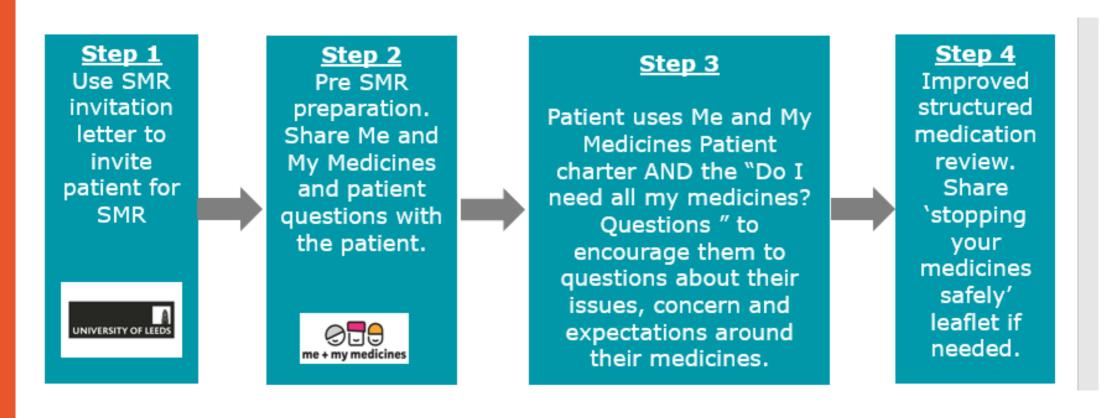


Pillar 3: Public Behaviour Change

A menu of public-facing campaigns to change public perceptions of a "pill for every ill" and encourage patients to open up about medicines. e.g., Me + My Medicines, Are Your Medicines Working For You?

The structured medication review pathway

Supporting patients to voice their issues and encourage better conversations about medicines



Patient SMR Invitation Letter

Text box for GP practice name and address NHS

Dear < name of patient>

Reviewing your medicines





What will happen at the review?

- You will have a face-to-face appointment or telephone call with the practice pharmacist or GP.
- They will check your medicines are working - and not causing side effects.
- It is also a chance for you to tell us how you are getting on with your medicines - and to ask questions and find out more about them.

What happens next?

We will contact you to make an appointment to speak with the practice pharmacist or the GP at the practice or over the telephone.

- The pharmacist or GP will explain what your medicines are for.
- They will check if any changes to your medicines are needed.
- There will also be a chance to have your questions answered.

If someone helps you with your medicines, It may be helpful for them to be with you when you speak to the practice pharmacist.

Why are we doing this?

We are doing this to make sure that your medicines are the right ones for you.

- The purpose of the review is not to save money.
- Also It is not to check if you are taking your medicines.

No medicines will be altered without agreement between you and the pharmacist or GP.

On the other side there are some questions you might want to ask about your medicines at the appointment.

Text box for name and signature

NIHR | Yorkshire and Humber Patien



The AHSN Network

Copyright © Bradford Teaching Hospitals N-S Foundation Trust, University of Bradford and University of Leeds 2022



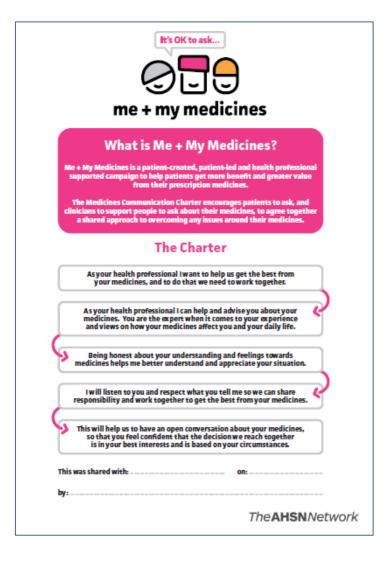


Year 1 Evaluation:

Need for 'setting the scene' information

- Why is this important?
- What do expect from a SMR
- Prompt questions
- Materials to be tested and used by patients
 - NIHR
 - Leeds University

Me and My Medicines



Notes	
See other language versions Pro OK to ark.	
me + my medicines	The AHSN Network

Year 1 Evaluation:

- 74% said materials did not need improving
- Explain what the Charter is.
- Simplify some of the text.
- Room for notes.

Safely stopping medicines leaflet



NIHR Yorkshire and Humber Patient Safety Research Collaboration

Year 1 Evaluation:

Request for information on what to do if a medicine is to be stopped.

Materials to be tested and used by patients

- NIHR
- Leeds University

Accessibility

An easy-read, audio version of the materials is available by scanning the QR code on each resource.



The resources are available in the following languages in addition to English:

- Arabic
- Bengali
- Gujarati
- Polish
- Panjabi Gurmukhi
- Punjabi Shahmukhi
- Urdu
- Romanian



In addition, an <u>animation</u> has been created to help patients think about their medicines and to prepare for a Structured Medication Review.

All three resources in the various languages are available via the <u>AHSN Network national Polypharmacy website</u>. The resources are free to use and can be amended with local information including logos etc.

Partnership working and endorsement



Authorised use of Age UK logo Materials reviewed by Age UK Health Policy, Branding and Media Teams August > all staff briefing and public helpline teams & website



Shared with patient involvement review team



Authorised use of NHS Logo Pharmacy Communications Lead Transformation Directorate Social Media and Media Teams





Innovators (Gemma Donovan and Graham Prestwich)

Two patient reps

Resources

Polypharmacy Action Learning Set Promotional 5min video https://vimeo.com/852300976?share=copy

- Cohort 12: 25th Jan, 8th Feb & 22nd Feb
 - **Registration link**: https://events.weahsn.net/PolypharmacyActionLearningSetCohort12
- Cohort 13: 6th March, 20th March & 3rd April
 - Registration link: https://events.weahsn.net/PolypharmacyActionLearningSetCohort13
- Cohort 14: 28th March, 11th April and 25th April

Registration Link: https://events.weahsn.net/PolypharmacyActionLearningSetCohort14

Polypharmacy dashboard training- understanding the data.

The AHSN Polypharmacy Programme: Getting the balance right Tickets, Multiple Dates | Eventbrite

Community of Practice Y&H contact Graham.Finney@yhahsn.com

Recordings of previous events

Anticholinergic burden masterclass https://youtu.be/_lm4nPeWC08
Community of Practice patient participation https://www.youtube.com/watch?v=6W401VYvf90
Polypharmacy Programme Launch of Resources for Patients Webinar recording https://vimeo.com/868360325?share=copy



Contact:

Mark Dines-Allen, Senior Programme Consultant

mark.dines-allen@yhahsn.com

Kirsty Bramley-Dove, Pharmacy Clinical Lead

kirsty.bramley-dove@yhahsn.com