

Workshop: Understanding the Use of Psychotropic Medication in Primary Care: Sharing Outcomes from a Six Practice Review

Workshop facilitator: Clare Scarlett - GP Lead for Learning disabilities, Newcastle & Gateshead CCG and North Tyneside CCG

The **aim** of this workshop was to share learning from a six practice review of the use of psychotropic medication in the North East and explore some of the issues surrounding reviewing medication within primary care.

The **objectives** were to:

- Describe an approach to identifying who needs an enhanced medication review
- Discuss the issues surrounding reviewing medication in primary care
- Consider strategies to address these issues

Background

Psychotropic medications are drugs that affect mood and behaviour. It is recognised that some people with learning disabilities benefit from taking medication as part of their care and treatment. However, some people with a learning disability are prescribed medication that is no longer appropriate for their needs. The Public Health Observatory published population based statistics which are a broad indicator of the need for enhanced reviews, but at the local level there is a clear need to understand for every individual the risks and benefits of continuing, changing or withdrawing medication.

In the North East and Cumbria, a search on GP data found a third of people on the GP learning disability registers and who were not on the serious mental health register were on one or more psychotropic medications. We needed to know more about these people - their history, their support, their views and their carer's views – in order to recommend an approach to safe, person centred medication reviews. We wanted to know how confident GPs are in managing psychotropic medication in relation to people with learning disability and a description of challenging behaviour.

With some NHSE funding, a GP and a clinical pharmacist worked with six GP Practices over three months in the North East to understand the complexity of carrying out effective reviews and what more needs to be done. In this workshop we will discuss the issues affecting primary care, highlighted through discussions with GPs, service users, family carers and support staff.

Workshop Discussion

The aims of the scoping exercise described in the workshop introduction were to increase understanding and knowledge and to assess confidence in this area. They identified 19 individuals with a learning disability who were not under the care of a psychiatrist, but were taking psychotropic medication without a reason clearly identified by carrying out desktop reviews in GP Practices. Surveys of service users and carers showed no awareness of STOMP and a lot of caution about altering medication. A GP survey found GPs lack confidence in assessing the role of psychotropic medications for challenging behaviour. This indicates a strong need for a multi-disciplinary approach.

The Local Authority should include within contracts that social care providers need to ensure as a minimum that a medication review takes place. This should be targeted at ADASS and LGA through a letter written by Simon Cartland and Sue Turner, with the CBF's support. There are tools that are already available, such as the BODG STOMP pledge, which social care can use. Such reviews should be annual at a minimum.

The Local Authority should ensure that the social care providers are supported to do this, have tools to record information and are aware of PBS. There is a risk that without proper planning and implementation this plan will have little impact. There is a health charter for social care providers already in existence. Sue Turner will be adding information in this related to STOMP this summer, which may be helpful as a tool for social care providers.

The specialist learning disability sector should help to develop ways to support primary care. There should be advice available from a specialist team, there is a need for more than just Psychiatry. Ashok will share the recommendations of Clare's study with the LD Professional Senate and ask them to share amongst their individual networks. May need engagement from TCPs to ensure this happens, and someone to lead the work. NHS England should also include in early intervention programmes the principles from STOMP and Clare's project.

Preventative work needs to take place as well and families need access to timely information. Doctors will also need the right information as well. Sometimes behaviour analysts are involved at a stage which is far too late. NHS England are a driver of influence of GP practice, following the recommendations they should ensure health checks also include a medication review. GPs are often not trained to carry out medication reviews, when there are more complex and behavioural aspects involved.

CCGs and Local Authorities need to better understand their own population that are taking psychotropic medication, this was highlighted in the study. May need a decision tree to support GPs, to increase their confidence. This potentially could be through a link/liaison nurse to support when needed and to refer to a higher level.

Work needs to be coordinated, with a strong voice for Local Authorities and family carers. In addition, the right tools are needed and an additional focus on prevention for children and young people, to stop inappropriate prescribing of psychotropic medication and learning from the medication review focused on individuals with dementia.

Action

Action	Who?	When?
1. Include medication in Local Authority health contracts. Social care providers to work with local health services to implement and support a minimum annual medication review	LGA, ADASS, NHSE, Simon Cartland and Sue Turner	July 2017
2. LD Professional Senate to produce a message about medication reviews and	Ashok Roy	September 2017

professionals roles within it		
3. Each CCG needs to understand their learning disability population who are taking psychotropic medication. Consider changing GP contracts to include this. Ask Anne Webster to share Clare's information with CCGs and GPs	Clare Scarlett Dimensions to share templates CBF to follow up	
Ask NHSE for a GP learning STOMP champion		

Further information/guidance/ background reading

NHS England, (2016) Stopping Over-Medication of People with Learning Disabilities - www.england.nhs.uk/wp-content/uploads/2016/06/stopping-over-medication.pdf

Royal College of Psychiatrists, Faculty of Psychiatry of Intellectual Disability, (2016) Psychotropic drug prescribing for people with intellectual disability, mental health problems and/or behaviours that challenge: practice guidelines - www.rcpsych.ac.uk/pdf/FR_ID_09_for_website.pdf