

STOPPING OVER- MEDICATION OF PEOPLE WITH A LEARNING DISABILITY, AUTISM OR BOTH

GP PILOT - NORTH EAST June 2017

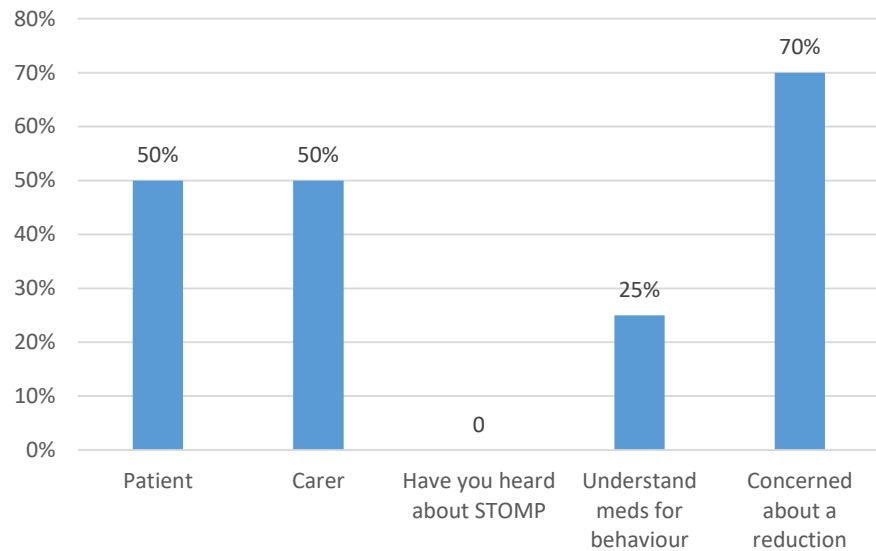
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AIMS AND METHOD

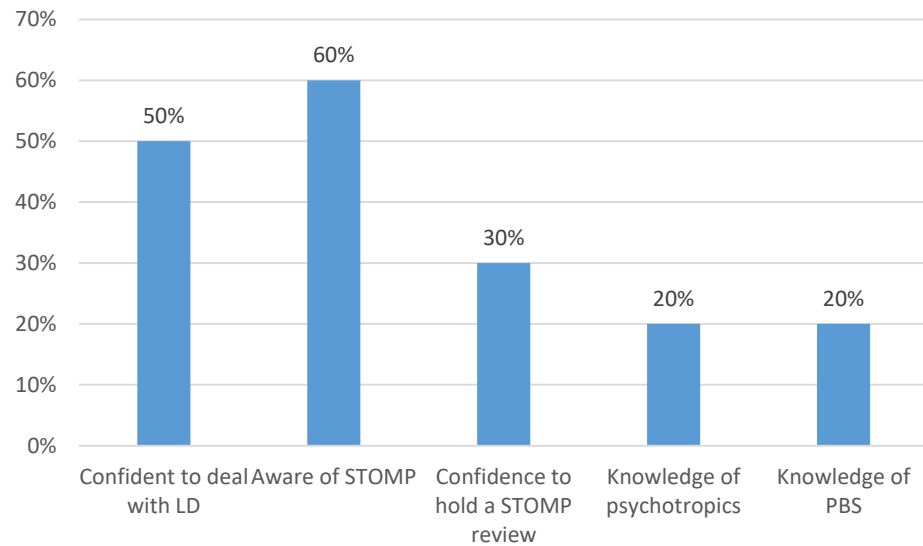
- ▶ GATHER CONCERNS AND OPINIONS OF PATIENTS, CARERS AND FAMILY
- ▶ GAUGE CONFIDENCE OF GPs TO HOLD ENHANCED STOMP REVIEWS
- ▶ IDENTIFY PATIENT NUMBERS AND QUALITY OF CODING BY GPs
- ▶ GRADE QUALITY OF INFORMATION FROM SECONDARY CARE
- ▶ HOLD STOMP ENHANCED REVIEWS AND IDENTIFY BEST PRACTICE
- ▶ 6 SURGERIES RECRUITED
- ▶ INITIAL SCOPING REVIEW TO INTERROGATE GP RECORDS
- ▶ PATIENTS+CARERS INVITED TO ATTEND A STOMP REVIEW
- ▶ REVIEWS EITHER IN SURGERY OR AS A HOME VISIT
- ▶ SELECTED REVIEWS WITH A LEARNING DISABILITY NURSE AS PART OF THE TEAM

SURVEY RESULTS

▶ PATIENT

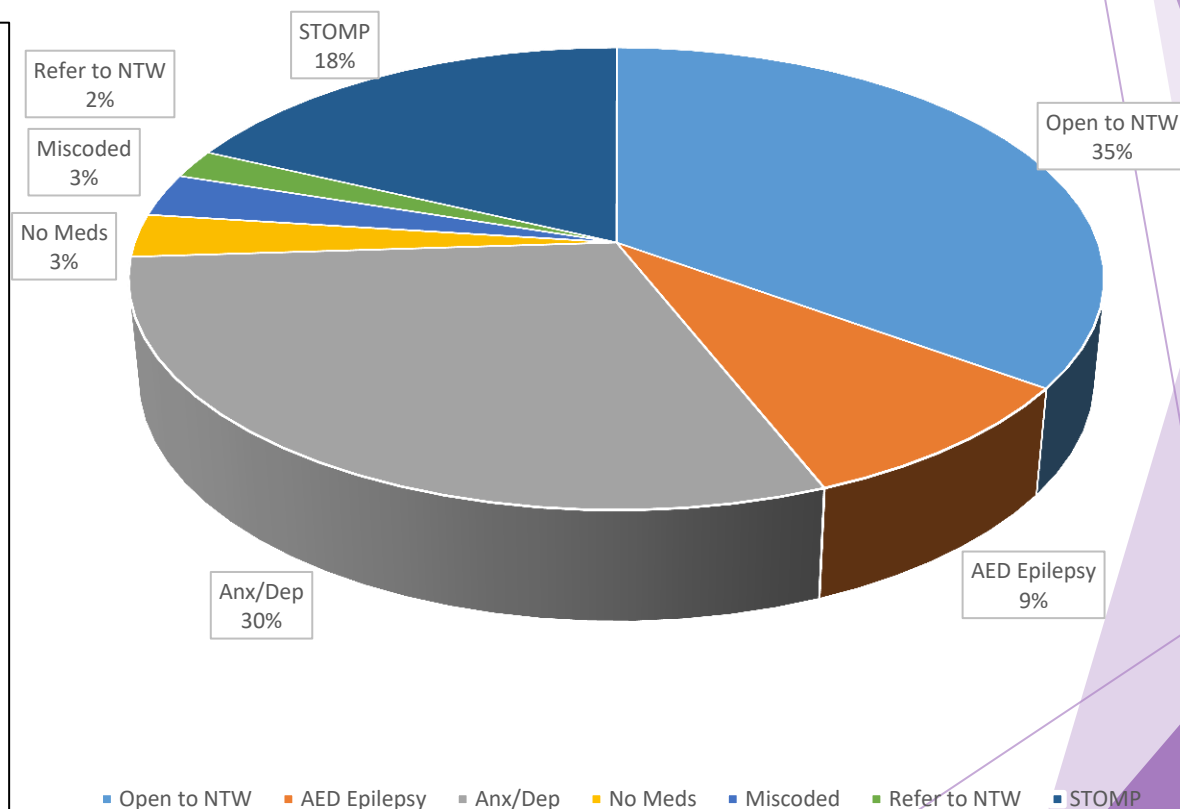


▶ GP CONFIDENCE



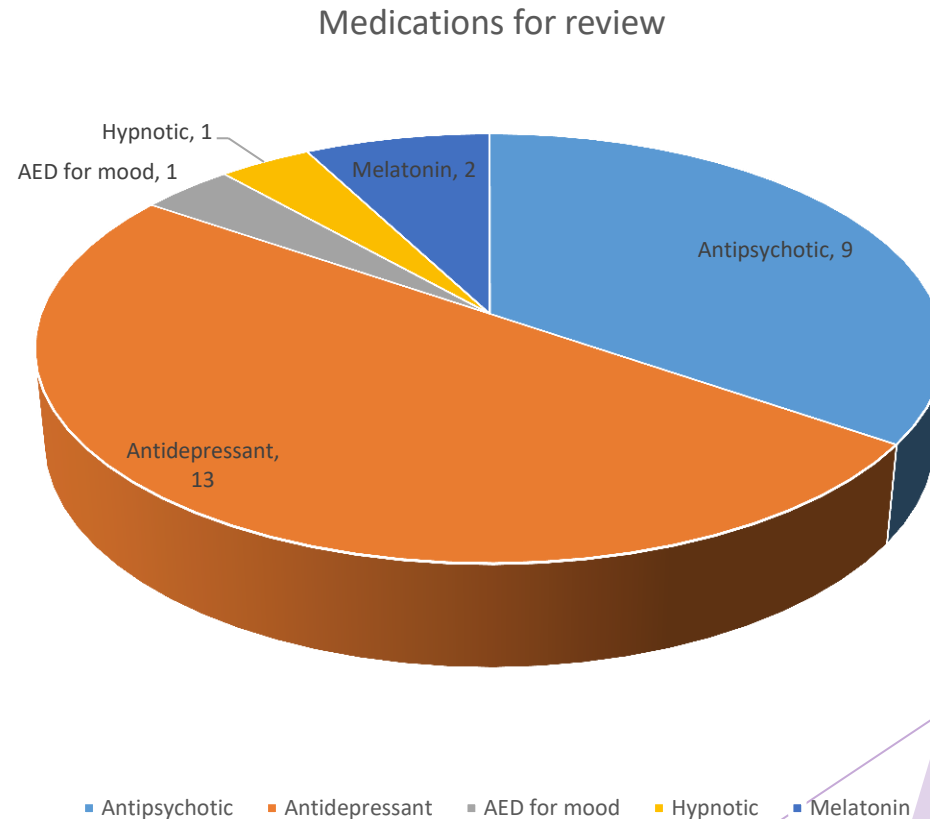
THE NUMBERS

- ▶ TOTAL LD REGISTER 326 (0.6%)
- ▶ TOTAL FOR A STOMP REVIEW 106
- ▶ EXCLUSIONS;
 - ▶ OPEN TO NTW 37
 - ▶ ANX/DEP 33
 - ▶ EPILEPSY 10
 - ▶ MISCODED 3
 - ▶ NO MEDS 3
- ▶ TOTAL FOR A STOMP REVIEW 19 (6% of the LD register)



OUTCOMES FROM THE REVIEWS

- ▶ 26 MEDICATIONS WERE DISCUSSED
- ▶ 21 WERE LEFT UNCHANGED
- ▶ 4 WOULD BE CONSIDERED FOR REDUCTION IN THE FUTURE
- ▶ REVIEWS LASTED FOR 45 MINUTES ON AVERAGE
- ▶ 15 REVIEWS WERE HELD AND 4 PATIENTS DNA
- ▶ 10 REVIEWS WERE HELD IN THE SURGERY AND 5 WERE HOME VISITS
- ▶ ALL REVIEWS LED BY SPECIALIST PHARMACIST



LEARNING CAPTURED

- ▶ PATIENTS AND CARERS HAVE HUGE CONCERNS ABOUT MEDICATION REDUCTION
- ▶ AWARENESS OF STOMP (0%) FUELLED THIS CONCERN
- ▶ DOMICILLIARY VISITS WERE RELAXED AND MORE PRODUCTIVE
- ▶ MDT APPROACH WORKS BEST
- ▶ GP CONFIDENCE IMPROVED WITH INPUT FROM A SPECIALIST
- ▶ *“ Why change something that is working?” (Patient)*
- ▶ *“Being at home made it easier for me” (Patient)*
- ▶ *“I remember what life was like before the medication was started” (Carer)*
- ▶ *“I didn’t start the medication and haven’t got the specialist knowledge to reduce it” (GP)*

LEARNING CAPTURED

- ▶ CARERS ARE KEY TO A GOOD REVIEW - SUPPORT + INFORMATION
 - ▶ AWARENESS OF PBS IS LIMITED
 - ▶ SOME CARERS ARE PBS TRAINED
 - ▶ CARERS CHANGE REGULARLY
 - ▶ A STABLE HOME ENVIRONMENT IS CRUCIAL
 - ▶ PAST EXPERIENCE OF REDUCTION IMPACTED NEGATIVELY
 - ▶ SECONDARY CARE INFORMATION POOR OR NON EXISTENT
- ▶ *“ Another patient had a reduction and ended up in hospital for months” (Carer)*
 - ▶ *“ The staff team is constantly changing thereby reducing stability in the home” (Carer)*
 - ▶ *“ I believe it is right to challenge medication being used to control behaviour” (Carer)*
 - ▶ *“ I had more confidence knowing that a specialist in learning disability was supporting me” (GP)*

RECOMMENDATIONS

- ▶ GREATER AWARENESS RAISING
- ▶ ALL GPs TO SCOPE NUMBERS AND IDENTIFY PATIENTS FOR REVIEW
- ▶ PRE-REVIEW DISCUSSION OFFERED WITH SUITABLE LITERATURE
- ▶ REVIEW LASTING 60 MINUTES WITH HOME VISIT CONSIDERED
- ▶ ADVICE AVAILABLE FROM SPECIALIST TEAM
- ▶ DEVELOP ROLE OF THE WIDER MDT
- ▶ TRUSTS TO DEVELOP BETTER INFORMATION SHARING NICE NG11
- ▶ CCGs+TRUSTS TO DEVELOP JOINT WORKING STRATEGY
- ▶ CARE STAFF TO RECEIVE PBS TRAINING
- ▶ ADVOCACY SERVICES AND THIRD SECTOR ORGANISATIONS INVOLVED
- ▶ LEAD PRACTITIONERS APPOINTED BY CCG AND LOCAL AUTHORITY

THANK YOU - ANY QUESTIONS?

- ▶ THE 3 MONTH PILOT RAN FROM FEBRUARY TO APRIL 2017
- ▶ THE PILOT WAS FUNDED BY A GRANT FROM THE NORTH EAST REGIONAL TRANSFORMING CARE PARTNERSHIP
- ▶ NORTHUMBERLAND TYNE WEAR NHS FOUNDATION TRUST RELEASED A SPECIALIST LEARNING DISABILITY PHARMACIST FOR TWO DAYS PER WEEK TO UNDERTAKE THE PILOT PROJECT
- ▶ THE RESEARCHERS WILL SHARE THE PILOT FINDINGS WITH LOCAL CCGs, NTW, REGIONAL TRANSFORMING CARE PARTNERSHIP AND NHS ENGLAND