CARE HOME MEDICATION REVIEW BY CLINICAL PHARMACISTS ACROSS BRIGHTON AND HOVE CCG

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Summary of the Care Home Project

Brighton and Hove CCG have commissioned an innovative pharmacist-led service to provide thorough clinical medication reviews in collaboration with all GP surgeries across the CCG for care homes with elderly residents.
Reasons for Commissioning

• NICE Guidance - GPs should ensure that arrangements for medication reviews are in place
• These reviews are recommended to include a pharmacist
• Cost effective and impacts on the 17% admission rate due to medicines in over 65s
Commissioning, Delivering & Continuation

- Need for medication reviews in vulnerable care homes residents
- Specific contract with number of reviews defined and structured reporting
- Liaison with all GP surgeries with supportive feedback
- Multimorbidity and polypharmacy deprescribing
## Summary of success

<table>
<thead>
<tr>
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<th>2012-13</th>
<th>2013-14</th>
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<tbody>
<tr>
<td><strong>No. of Care Homes</strong></td>
<td>90</td>
<td>110</td>
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<td><strong>No of Reviews</strong></td>
<td>1600</td>
<td>2000</td>
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<td><strong>No. of interventions</strong></td>
<td>4000</td>
<td>6000</td>
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<tr>
<td><strong>Annual cost savings</strong></td>
<td>£354,573</td>
<td>£330,000</td>
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<tr>
<td>*<strong>Potential hospital cost savings</strong></td>
<td>Not calculated</td>
<td>£380,450</td>
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Commissioning, Delivering & Continuation

• Now in its third year the project has delivered clinical benefits and cost savings
• Focus on sip feeds, continence products, reduction of risk of Acute Kidney Injury plus deprescribing where risks outweigh benefits
• Overall the project has provided savings of around three times cost
Outcomes Achieved

- Safety, quality, cost effectiveness Rx
- Reduction in pill burden
- Increase in deprescribing
- Sustainable Changes
- Financial Savings

LESS

MORE

- Waste
- Prescription errors
- Polypharmacy
- Inappropriate medication
Successful Medication Reviews

Passion in Medication Reviews

Clinical Specialist Pharmacist
  • Highly specialised experts in clinical pharmacy
  • Range of pharmacists: primary, secondary, community and strategic
  • Access to specialist pharmacist e.g. Wound care
  • Peer support to each other

Engagement
  – Patient,
  – Clinicians
  – Specialists

Access to records
Library of resources
Successful Medication Reviews

Administration
- Calendar Management
- Activity Tracking
- Reporting

Senior Pharmacy Technicians
- Preparation
- Implementing
- Costing
- Summarising final reviews

Refining and improving data tool
- Standardise wording and reviews
- Automate cost calculations and savings
- Peer Review and feedback
“I have not only learnt so much, but I feel that my interventions make a real difference to the patient. The GPs value me as a pharmacist and Care Home Love it as it resolves many issues”
“I AM WRITING TO SAY THANK YOU, MY MOTHER IS SO MUCH MORE ALERT SINCE STOPPING CODEINE”
“I HAVE STARTED WITHDRAWING PPIS IN OTHER PATIENTS SUCCESSFULLY AND THIS WAS BECAUSE OF THE KNOWLEDGE GAINED FROM iRX REVIEWS”
FOR THE PATIENT AND ALL INVOLVED IN THEIR CARE
References

- **BEERS recommendation**: The initial Beers criteria identified medications whose risks outweigh their benefits and those that should be avoided or used with caution in adults 65 and older. First published in 1991 by Mark Beers, MD, and colleagues, the criteria were subsequently updated in 1997 and 2003 and were recently revised and updated by AGS in 2012.

- **Anticholinergic Burden Score**: A list of medicines and associated anticholinergic scales. Evidence for this has been reviewed by the National Prescribing Centre.

- **Guidance for Prescribing in Frail Adults**: All Wales Medicines Document published in September 2014

- **Suggestions of Drug Monitoring in Adults**: UKMI document published in February 2014