Improving the quality, clinical and cost-effectiveness of ONS prescribing within GGC through collaborative working

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Introduction
In NHSGGC, for the year 2015-16, increasing trends for oral nutritional supplement (ONS) use and examples of inappropriate prescribing were recognised. The ONS spend was £4.8 Million and the volume use had increased 5.8% on previous year. The volume of ONS prescribed and the associated costs were increasing and there were clear areas of inefficiency. Furthermore in view of our ageing population it is imperative that resources are used efficiently.

ONS was now in the top 10 spends within prescribing budgets.

Aim
The aim of this work fits within the 2020 vision in terms of improving the quality of patient care and also achieving associated cost efficiencies.

The aim was to switch, reduce and discontinue ONS where appropriate. This work stream was delivered collaboratively by pharmacy and dietetic staff.

Targets by Quarter 4 17/18
• Preferred List ONS as a percentage of all ONS (Target 80%)
• First-line Preferred List powder ONS as a percentage of all Preferred List ONS (Target 25%)
• Reduction in quantity of prescribed oral nutritional supplements by 5%

Method
In response Prescribing Support Services agreed to implement a GP prescribing indicator. Prior to the indicator process The Nutrition Sub Committee of the Area Drugs and Therapeutic Committee undertook a formulary review process.

The following recommended process is based on local NHSSGG&G policy and NICE Clinical Guideline 32: Nutrition Support for adults.1

The preferred method for addressing this change to prescribing was screening of patient records and a face-to-face review of patient by Practice (e.g. GP, Practice Nurse, Prescribing Support Pharmacists/Technicians)

A search was carried out by the prescribing support teams in each GP practice to identify patients >18 years on ONS.

Exclusions Criteria
• Exclude patients currently under the care of a Dietitian
• Exclude patients deemed inappropriate for review e.g. end of life care

Onward referrals to Prescribing Support Dietitian for review of complex patients
• Patients who are prescribed a combination of ‘standard ONS’ and ‘high energy low volume or modular ONS’
• Patients prescribed 3 or more bottles / sachets of standard ONS per day
• Patients who are prescribed high protein / high energy ONS
• Patients with diabetes who are prescribed a fibre containing ONS
• Patients with Stage 4/5 Chronic Kidney Disease
• Patients unable to attend the GP practice (i.e. housebound –excluding those in care homes)

Results

<table>
<thead>
<tr>
<th>Work stream</th>
<th>Target</th>
<th>Progress until end March 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preferred List ONS as a percentage of all ONS</td>
<td>80%</td>
<td>80%</td>
</tr>
<tr>
<td>First-line Preferred List Powder ONS as a percentage of all Preferred List ONS</td>
<td>25%</td>
<td>30%</td>
</tr>
<tr>
<td>Quantity of prescribed oral nutritional supplements</td>
<td>5% reduction</td>
<td>18% reduction</td>
</tr>
</tbody>
</table>

These improvements in prescribing have subsequently led to cost efficiencies in excess of £1million.

Conclusion
Appropriate prescribing has not only improved NHS spending, but will help to improve patient outcomes and patient safety.

All patients reviewed had a face to face review. This allowed
- Malnutrition Universal Screening Tool score to be completed (Endorsing routine use of MUST at GP practices)2
- education on food first approach
- the appropriateness of current product to be assessed and where required switch to a formulary product

All Prescribing Support Pharmacists and Technicians were trained to complete MUST screening and gained improved knowledge of the ONS products now on formulary.

The targets above have only been achieved because of the improved collaborative working between dietetic and pharmacy services.

Acknowledgements
All Prescribing Support Pharmacists, Technicians and Dietitians within the Pharmacy Prescribing Support Unit. All Dietitians across both the Primary Care and Acute setting. For further info Email: presupdiet@ggc.scot.nhs.uk

References
1 NICE CG 32 – Nutritional support for adults (2006)
2 BAPEN - A Guide to the ‘Malnutrition Universal Screening Tool’ (MUST) for Adults (2003)