

2023-24 Prescribing Incentive Scheme

Q3 & Q4

Target 5: Frailty & Deprescribing
Eclipse Deprescribing Module




2023-24 Prescribing Incentive Scheme Eclipse Deprescribing Project





Bath and North East Somerset,
Swindon and Wiltshire
Integrated Care Board

- Project emailed to practices
4/10/2023
- Included attachment with
details of project & user guide
for Eclipse module
- Any problems or questions to:
bswicb.prescribing@nhs.net

2023/24 Prescribing Incentive Scheme - target 5 frailty & deprescribing

 PRESCRIBING (NHS BATH AND NORTH EAST SOMI)
To
Cc ○ PRESCRIBING (NHS BATH AND NORTH EAST SOMERSET, SWINDON AND WILTSHIRE ICB - 92G) Wed 04/10/2023 12:10

 BSW Service Specification PIS LES 23-24.docx 74 KB  Incentive Scheme target 5 Eclipse deprescribing module - final.docx 1 MB

Dear BSW ICB Prescribing Leads, Practice and PCN Pharmacists and Practice Managers,

Please find attached the final part of the Prescribing Incentive Scheme for this financial year: the deprescribing in frailty project (target 5).

We have worked with Eclipse to produce a new deprescribing tool which highlights cohorts of frail elderly patients who, because of the medicines they are prescribed, are at increased risk of hospital admission. These patients can then be prioritised for a Structured Medication Review to address the identified risk(s).

Uniquely, this deprescribing tool links prescribing data with hospital activity data to give quantitative information on the risk of emergency hospital admission in these specific patient cohorts. It is hoped this information will help clinicians make informed prescribing or deprescribing decisions.

Full details of the project are contained in the attached document. The project will also be discussed at next week's Medicines Optimisation webinar, on Wednesday 11th October at 1.30pm, which you should already have received invites for.

If you have any concerns or questions, please do not hesitate to contact us via bswicb.prescribing@nhs.net

Thank you for your continued support.

BSW ICB Medicines Optimisation Team

BSW ICB Medicines Optimisation Team Website: <https://bswtogether.org.uk/medicines/>
BSW ICB Medicines Optimisation Team E-mail: bswicb.prescribing@nhs.net

Eclipse Deprescribing Project


- New Eclipse module: BSW Deprescribing Pathways
- Identifies high-risk patients for a deprescribing intervention
 - i.e. **Prioritise for SMR**
- Moderately or severely frail patients
 - eFI calculated by Eclipse (does not use recorded frailty read codes or eFI scores)
- 65 + years old
- Combines clinical system information with hospital admission data
 - **Links hospital admissions with prescribing data**
 - Identifies high impact deprescribing interventions
 - Displays increased risk of admission with high-risk prescribing




Eclipse Deprescribing Module

<https://secure.nhspathways.org/>


Please Select Pathway of Choice




Diabetes




Eclipse Live



VISTA Pathways



BSW Deprescribing Pathways




Other

Deprescribing Dashboard Summary

Area	Search	Total Patients	Patients Reviewed	View Patients
Other	Systolic < 115mmHg and on Hypertensive Medication (no HF or left ventricular systolic dysfunction), aged >=65 and eFI >=0.25	761	22	View
Other	Diabetes - HbA1c < 48 and on Sulphonylurea, aged >=65 and eFI >=0.25	121	7	View
Other	Diabetes - HbA1c < 48 and on Insulin, aged >=65 and eFI >=0.25	112	2	View
Other	ACB score >=4, aged >=65 and eFI >=0.25	2020	6	View

Eclipse Deprescribing Project

Select patients to review from these cohorts:

1. **Over-treated hypertension: SBP <115mmHg**
 2. Over-treated diabetes: HbA1c <48 on sulphonylurea
 3. Over-treated Type 2 diabetes: HbA1c <48 on insulin
 4. Over-treated Type 1 diabetes: HbA1c <48 on insulin
 5. Anticholinergic burden score ≥ 4 (calculated by Eclipse, using ACBcalc.com)
 6. On benzodiazepine
 7. On opiate
 8. On Z-drug
 9. On pregabalin
 10. On gabapentin
 11. On codeine 30mg
- 

Eclipse Deprescribing Project

- Risk of admission – examples:
 - for SBP <115mmHg:
Patients in this cohort have an indicative associated **increased emergency admission risk of 50%**.
 - For ACB score ≥ 4 :
Patients in this cohort have an indicative associated **increased emergency admission risk of 29%**.
- This risk is calculated using retrospective national data for patients aged ≥ 65 with an eFI score of ≥ 0.25 , comparing patients in this cohort with a baseline group.



Project requirements

Part 1

- Minimum number of reviews/SMRs to be recorded based on practice/PCN list size:
 - up to 10,000 patients 15
 - 10,000-20,000 patients 30
 - 20,000-30,000 patients 45
 - Above 30,000 60
- Can be completed as practice or PCN
 - Include this information with evidence return for part 2
- Document review or intervention within Eclipse by 31/3/24
 - no evidence/return needed for Part 1

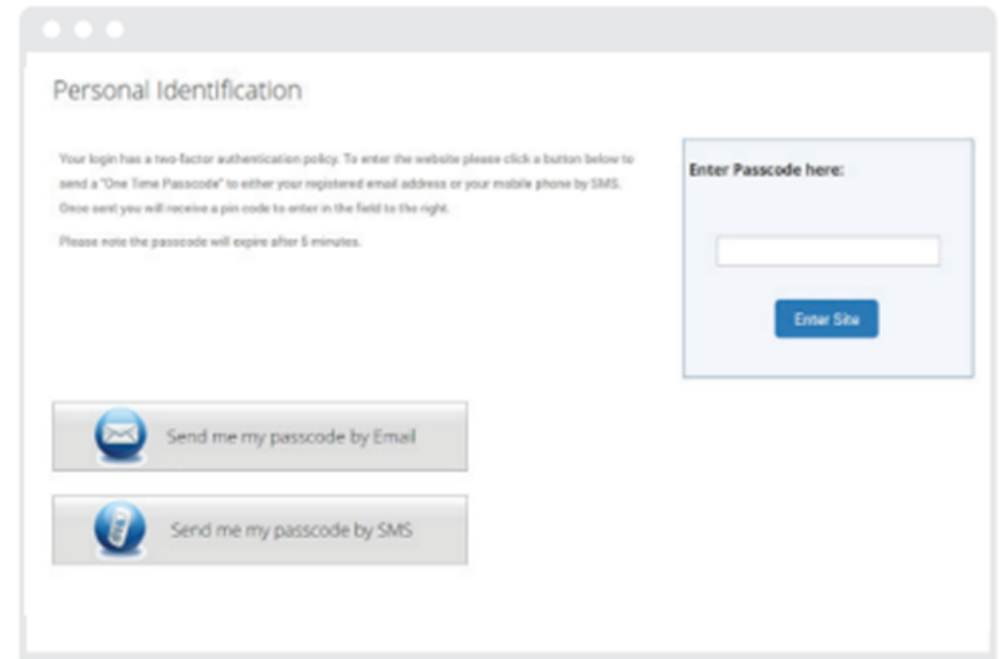
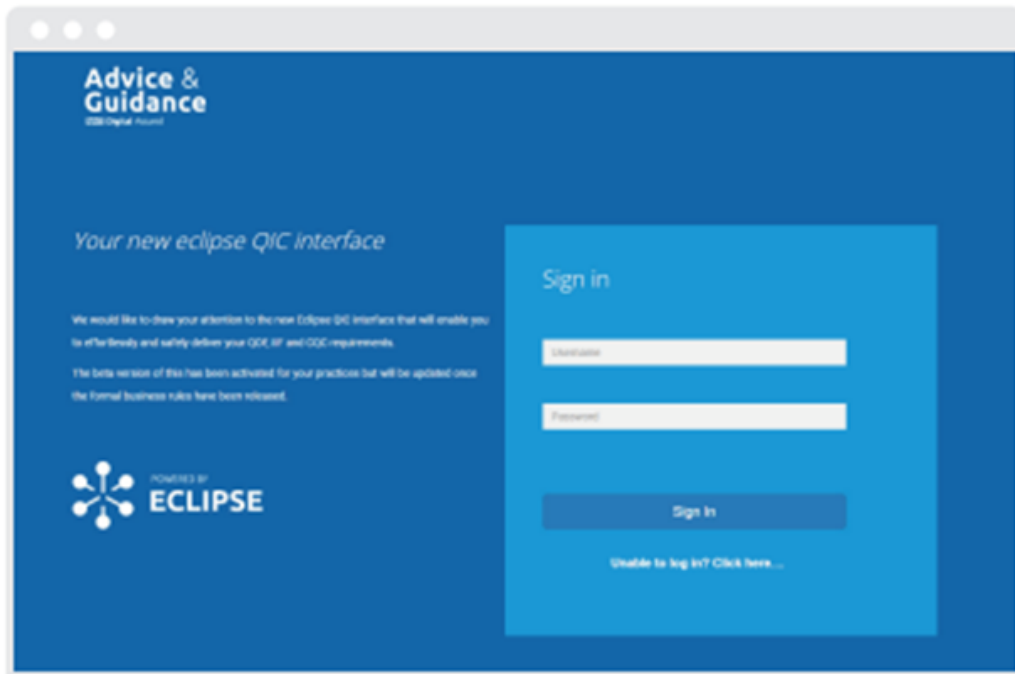
Part 2

- Discuss process & outcomes of SMRs with full prescribing team
 - Include information on risk of admission with high-risk prescribing
- Submit evidence (use template in appendix 2 if useful) to: bswicb.prescribing@nhs.net

Eclipse module process

1. Log into Eclipse via: secure.nhspathways.org

2. Complete two-factor authentication



Eclipse module process

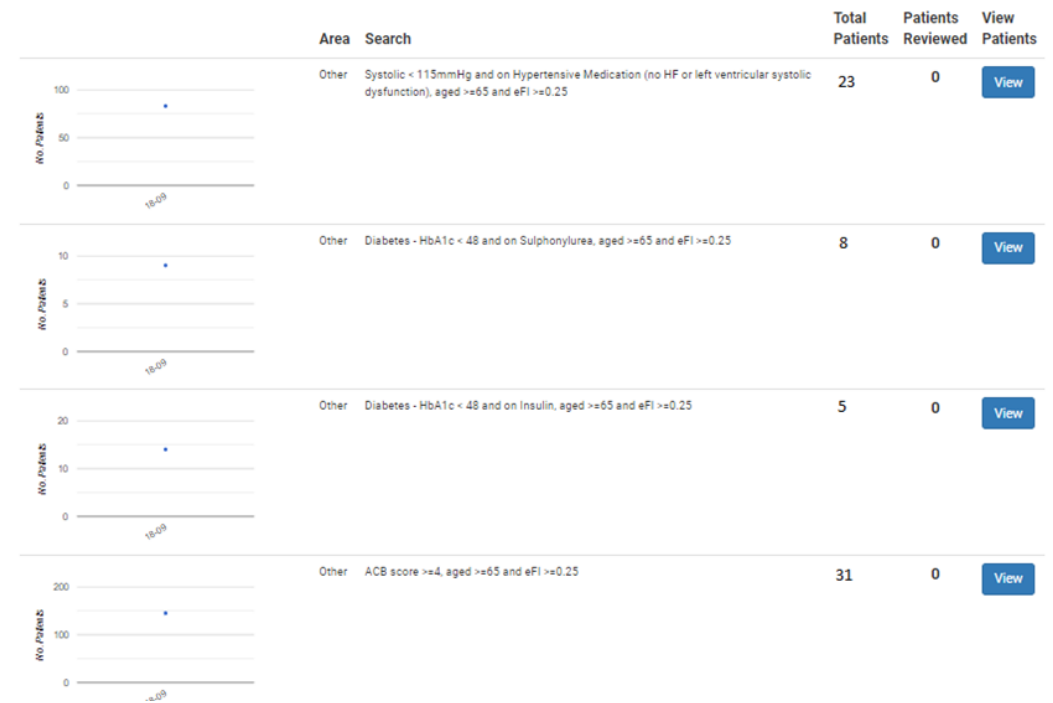
3. Select BSW Deprescribing Pathways

Please Select Pathway of Choice

The screenshot shows a blue interface with the text "Please Select Pathway of Choice". There are two rows of circular icons. The first row contains icons for Diabetes, Eclipse Live, VISTA Pathways, Eclipse QIC, SMRLive, and Core20PLUS5. The second row contains an icon for BSW Deprescribing Pathways (highlighted in green) and an icon for Other. At the bottom, there is a copyright notice: "Copyright © 2023 Prescribing Services Ltd - All Rights Reserved. | GDPR".

4. Select cohort & click “view”

Deprescribing Dashboard Summary



Eclipse module process

5. Expand to show patient list

Admission Avoidance Alerts
Alerts ● - Patients ● Unreviewed ●

Level	Type	Search	Total Patients	Reviewed
Blue	Admissions Avoidance (CCC)	<p>Systolic < 115mmHg and on Hypertensive Medication (no HF or left ventricular systolic dysfunction), aged >=65 and eFI >=0.25</p> <p>Patient appears to have a Systolic < 115mmHg and on Hypertensive Medication (no HF or left ventricular systolic dysfunction), aged >=65 and eFI >=0.25</p> <p>Patients in this cohort have an indicative associated increased emergency admission risk of 50%.</p> <p>This risk is calculated using retrospective national data for patients aged >=65 with an eFI score of >= 0.25, comparing patients in this cohort with a baseline group.</p> <p>★ ★ ★ ★ Feedback No feedback added.</p>	●	●

Type	Reference	Last Extract	Search Run	Status	Review	Address	SMURF
 Age ●	●	Wed 20/09/23 12:54	Mon 18/09/23 11:49	×	Review	Address	SMURF
 Age ●	●	Wed 20/09/23 12:54	Mon 18/09/23 11:49	×	Review	Address	SMURF

6. Click i symbol to display pt's NHS number



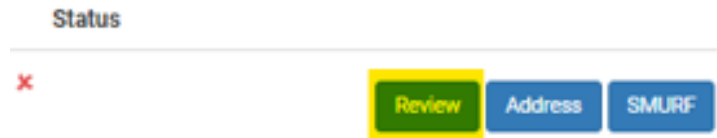
7. Use NHS number to locate patient in clinical system & carry out appropriate action(s)

e.g. conduct SMR



Eclipse module process

8. Once appropriate action(s) taken, click “review” button in patient list



9. In Alert Review pop-up:

- i. Select action from drop-down menu
- ii. Enter brief notes about outcome or actions
- iii. Click “Review Patient” to mark review as actioned.

A screenshot of the 'Alert Review' pop-up form. The form has a title bar with 'Alert Review' and a close button. Below the title bar, it says 'Enter details below.' The form contains several sections: 'Action:' with a dropdown menu set to 'Please Select'; 'Notes:' with a large text area; 'Notes for Patient:' with a smaller text area and '(Optional)' below it; 'Exclude:' with a checkbox and a dropdown menu set to '3 Months', with a note 'Tick to exclude this patient from future runs of this search.'; 'Message Recipients:' with a note 'This is optional but you can use the below to specify who to notify about this alert'; and four dropdown menus for 'GPs:', 'Other Practice:', 'Community:', and 'Hospital:', all set to 'Please Select'. At the bottom of the form, there are two buttons: 'Review Patient' (highlighted in yellow) and 'Unreview'.

Eclipse module process

10. Once actioned the patient status changes to a green tick

Type	Reference	Last Extract	Search Run	Status	
 Age		Fri 22/09/23 11:33	Mon 18/09/23 11:55	✓ (Reviewed) 22/09/2023	Review Address SMURF

11. The number of patients reviewed increases.

This can be used to keep track of progress towards the practice/PCN target number.

Level	Type	Search	Total Patients	Reviewed
Blue	Admissions Avoidance (CCG)	Systolic < 115mmHg and on Hypertensive Medication (no HF or left ventricular systolic dysfunction), aged >=65 and eFI >=0.25 Patient appears to have a Systolic < 115mmHg and on Hypertensive Medication (no HF or left ventricular systolic dysfunction), aged >=65 and eFI >=0.25 Patients in this cohort have an indicative associated increased emergency admission risk of 50%.	23	1



Summary

Part 1 (essential)

- Minimum number of reviews/SMRs to be recorded based on practice/PCN list size:
 - up to 10,000 patients 15
 - 10,000-20,000 patients 30
 - 20,000-30,000 patients 45
 - Above 30,000 60
- Can be completed as practice or PCN
 - Include this information with evidence return for part 2
- Document review or intervention within Eclipse by 31/3/24
 - no evidence/data return needed for Part 1

Part 2 (essential)

- Discuss process & outcomes of SMRs with full prescribing team
- Include information on risk of admission with high-risk prescribing
- Submit evidence to: bswicb.prescribing@nhs.net
 - Use template in appendix 2 if useful.