

Derby and Derbyshire ICB uses OptimiseRx to facilitate best practice in community care settings



FDB OptimiseRx is the UK's leading medicines optimisation software, delivering clinical decision support in real-time across primary care. The solution's unrivalled patient specificity enables prescribers to benefit from targeted messages on quality, safety and cost within the prescribing workflow.

After many years of successfully using OptimiseRx across primary care, Derby and Derbyshire Integrated Care Board (ICB) took part in a pioneering pilot that saw the solution extended into the community Trust services. By using their existing GP clinical system unit, staff within the community Trust settings benefited from OptimiseRx's highly targeted and patient specific messages to improve best-practice and safety in prescribing.

Introduction

Derbyshire Community Health Services NHS Foundation Trust (DCHS) has approximately 300 non-medical independent prescribers (NMPs) working across their community services, including nurses, Allied Health Professionals and Pharmacists. When NMP service representatives within the Trust requested additional medicines optimisation support software to help them as prescribers, similar to that available to general practice prescribers, FDB worked alongside the Derby and Derbyshire ICB pharmacy team as well as representatives from DCHS to pilot OptimiseRx within these extended care settings for the benefit of these prescribers and their patients.

Background

OptimiseRx has been successfully tried and tested within the ICB's primary care settings for many years but had never been deployed across hospital clinical units within DCHS. To successfully carry out this pilot, it was essential that extended care settings could successfully access the OptimiseRx profile already in place across GP services to ensure that appropriate messages were shown to prescribers within a hospital setting. Initial testing then confirmed that OptimiseRx could be trialled within the Trust's Community Unit and Urgent Treatment Centre Unit.

The first service to gain access was the community Heart Failure service, who quickly identified that they were getting appropriate localised messages about initiating specialist medicines, as well as other supportive messages that they could action. **Following this initial success, OptimiseRx was then rolled out across other services over a period of 6 weeks until 29 more service areas in total were benefiting.**

“OptimiseRx was intuitive and easy to use. Prescribers found the messages generally supportive and welcomed the recommendations and advice from the messages, while retaining complete autonomy to accept or decline the suggestion, depending on the individual patient circumstances.”

KATE NEEDHAM Chief Pharmacist and Head of Medicines Management, DCHS



Ensuring seamless integration and rollout

Promoting the pilot and encouraging uptake of OptimiseRx was a collaborative effort, with DCHS sharing communication briefs, regular reminders, and a series of webinars for staff to attend. As each service gained access to OptimiseRx, the staff attached to the unit were emailed to notify them of the change and provided with detailed instructions on how to start using the medicines optimisation software straight away, both in clinic and remotely.

As rollout continued, it was evident that services were easily adapting to the introduction of a new solution, and quickly benefiting as a result of the straightforward implementation process. The messages and content were well received within these community care settings.

Building confidence across teams

A survey carried out by DCHS found an overall increase in prescribing confidence among NMP staff, and focus groups provided generally positive feedback. This was also evident when the usage across teams was reviewed, with high acceptance rates of best practice, safety, and cost-saving messages. **Messages relating to best practice were accepted at a rate of 34%, above the national average, suggesting prescribers within these settings especially valued the additional guidance they were given to help them improve the quality of prescribing.** In particular, the survey found that staff felt more confident when selecting items to prescribe, adhering to formulary and prescribing in line with guidelines.

The introduction of OptimiseRx has also provided a useful resource for the Trust when looking to further train and educate prescribing teams. For example, by identifying common safety messages that have been raised, the Trust is able to identify additional training sessions, communications or support that may help improve future prescribing decisions.

Improving best practice and safety in prescribing

The introduction of OptimiseRx has been a helpful tool for these NMPs as they seek to adhere to the Derby & Derbyshire Joint Area Prescribing Committee's prescribing guidance and

maintain best practice. This can go on to reduce the need for subsequent medication changes by general practice and maintain continuity of care, while ensuring the patient remains at the centre of decision-making. As within primary care, messages can be accepted or declined as appropriate for the individual patient and their circumstances, so staff always maintain their professional autonomy.

A number of messages displayed through the system at the point of prescribing supported safer prescribing of antibiotics, a wider medicines optimisation priority for the health service. For example, the most common best practice message throughout the pilot, 'Cepaholosporin oral preparations – recommended first-line for only a limited range of conditions', is just one example of the safety warnings provided to prescribers to ensure patient safety is maintained.

Driving efficiencies across the Trust

The post-pilot survey found that with increased confidence in prescribing also came increased efficiencies across the Trust.

Of the individuals surveyed, more of them said that they were taking a shorter amount of time to prescribe following the rollout of OptimiseRx, freeing up more time for direct patient engagement.

Alongside greater formulary adherence and consistency of high quality prescribing, the Derbyshire system also benefited from prescribing cost savings within these extended care settings which would continue once care is transferred back to the GP, although this was not a primary aim of the pilot.

Moving forward

The success of the pilot was in large part because of the collaborative efforts of DCHS, and the ICB pharmacy team who already worked well as a system, allowing for a smooth rollout and a strong support system.

Now, the pharmacy team at Derby & Derbyshire ICB are eager to deploy the use of OptimiseRx into other extended care settings so they can enjoy similar benefits and are looking to use the data from the pilot to evidence care quality, as well as to build on existing training and education.



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