



PCN Annual Health MOT: Definitively Addressing Polypharmacy

Background

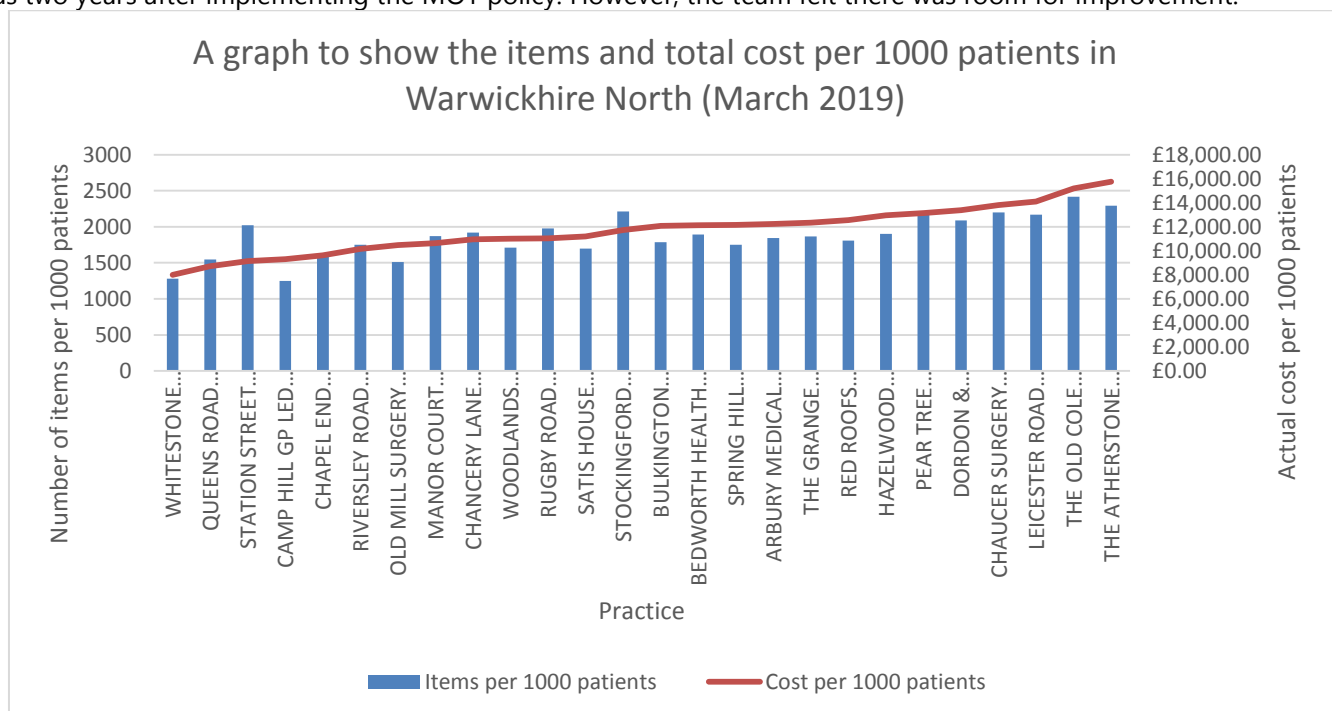
Nationally general practice is coping with an aging population with increasingly complex chronic disease management issues. At Whitestone Surgery, the team has developed an Annual Health MOT policy (<https://whitestonesurgery.org/clinics-and-services#annual-health-mot>), which appropriately implemented across the entire PCN, will deliver substantial economic and operational efficiencies. Using the Scottish programme as the evidence base, <https://www.prescriber.co.uk/article/the-polypharmacy-programme-in-scotland-realistic-prescribing/> the MOT has identified six key recommendations to improve medication safety, of which polypharmacy is an essential element:

1. Use a systems approach that has multidisciplinary clinical and policy leadership
2. Nurture a culture that encourages and prioritises the safety and quality of prescribing
3. Ensure that patients are integral to the decisions made about their medicines and are empowered and supported to do so
4. Use data to drive change and measure outcomes
5. Adopt an evidence-based approach with a bias towards action
6. Utilise, develop and share tools to support implementation.

This policy can improve collaboration between practices, networks and community pharmacists to share learning and improve systems to reduce harm and improve safety.

Structure

In March 2019, in partnership with the Clinical Pharmacist, a snapshot of prescribing across WNCCG was taken. This was two years after implementing the MOT policy. However, the team felt there was room for improvement.



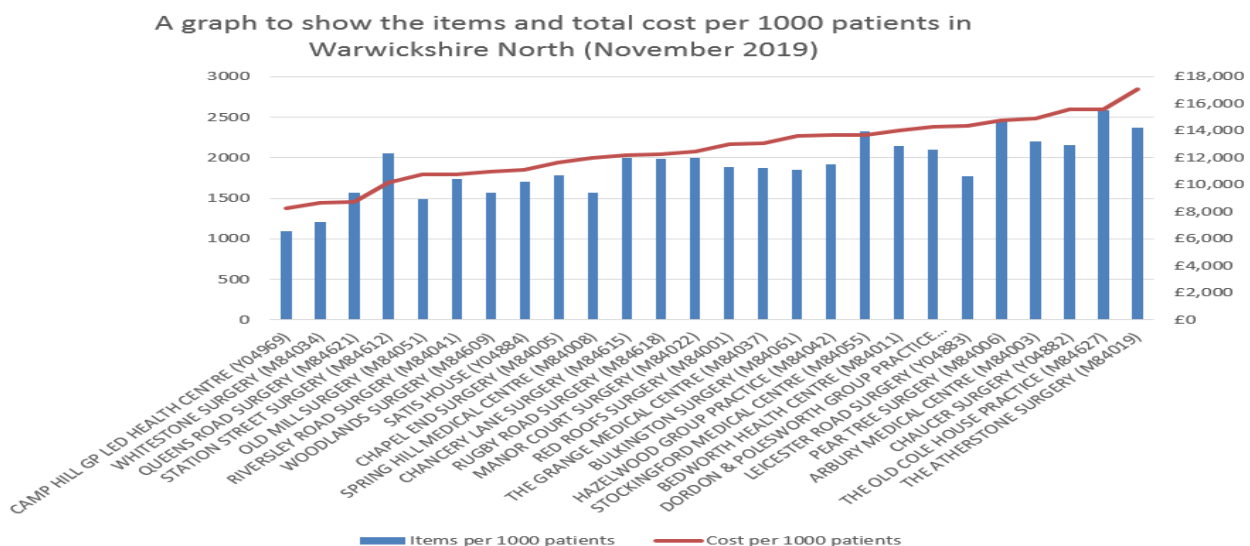


Process

Implementing the principles found in [The 10 Building Blocks of High-Performing Primary Care](#), these measures were introduced to increase our efficiency in delivering the Annual Health MOT:

1. The policy was agreed in our annual practice development plan.
2. All patients are offered MOT in the month of their birth. In reality the uptake is mainly by the 20% highest service using patients already on our chronic disease register.
3. Annual repeat medication is set to 10, which ensure patient contact two months before their date of birth.
4. The patient is offered an annual blood test and booked in for MOT.
5. The Senior Nurse and Healthcare Assistant (HCA) will discuss personalised patient objectives **prior** to the clinic appointment.
6. MOT clinic appointment times vary according to the number of chronic diseases registers listed for the patient.
7. The vast majority of Quality and Outcome Framework indices are addressed.
8. Any complex patient, characteristically on four or more medications which we were unable to reduce in the past 12 months, are discussed in weekly team meeting including GP, Senior Nurse and HCA.

Outcome



In November 2019, we repeated the prescription rate analysis, to complete the audit loop. This confirmed, compared to other practices, this relationship between the Annual Health MOT and the tight control of polypharmacy was maintained.¹

Anecdotally we see that patients readily make the subconscious association of regular MOTs for their car with the desire for a preventative health check. The birth month is easy for the patient to remember and for the receptionist fielding telephone calls. These simple systems and protocols have significantly smoothed the workflow for the practice to collect statutory, annual chronic disease management data.

Even at this preliminary stage we have seen significant economic and operational efficiencies. With the introduction of the preventative health strategy underpinned by the Annual Health MOT, Whitestone Surgery has seen substantial improvement in [long term condition quality of health indices](#), with a subsequent reduction in unnecessary GP appointments and polypharmacy. This, in association with our award winning [Digital Inclusion Strategy](#), and [Care Navigation](#) protocol is reaping gains as our patients progressively improve their [self-management skills](#).

1. Data from Medicines Optimisation Team, Arden & Gem CSU www.ardengemcsu.nhs.uk