**ICB Board Meeting**

**30 November 2022**

**Public Questions**

**QUESTIONS for the ICB**

1. Will Glos ICB endeavour to meet all the above objectives of “Our Plan for Patients”?
2. In implementing “The National Endeavour” will all known volunteers (and their support organisations) be retained and expanded?
3. "What is GLOS ICB proposing for services to meet the published "NHS Plan for Patients and National Endeavour'' in relation to much needed action following the latest "PHE Prescribed Medicines Review and a Key Recommendation - To Improve the support available from the healthcare system for patients experiencing dependence on, or withdrawal from, prescribed medicines"? "As a family carer, I would stress that such involuntary dependence affects several other persons as well as the sufferer".
4. What progress is being made in Glos ICB on the STOMP (Stopping the Over-Medication of People with a Learning Disability, Autism, or both) Project? Can Glos ICB obtain statistics on the number eligible for withdrawing, and the number actually receiving appropriate help from Glos Health&Care NHS, GP’s, pharmacists, and other prescribers?

**Answers provided by the ICB**

**Questions 1 and 3 responses**

The ICB has recognised for a while that there is a great deal of work to do in order to support patients experiencing dependence on, or withdrawal from, prescribed medicines. Recent NICE guidance (NG215) has made a number of recommendations associated with this which we are working with clinicians to understand and implement. Specifically we have been working on:

1. Offering more non-pharmacological options for patients. For example our LWwP Clinical Programme group have commissioned an online exercise offer for people with persistent pain to help them reduce their dependence on medications for their chronic pain called “It’s Your Move”
2. Supporting clinicians to have difficult and personalised conversations about distress and the limited role of medication in these situations. The ICB have funded placements for Gloucestershire Primary Care professionals around taking health coaching approaches that draw on behavioural science to support these conversations.
3. Developed resources to share with patients about the potential side effects of some drugs to be discussed prior to initiating medication so that shared decision making can occur and a sensible management plan agreed between both parties.
4. Education and training events have been provided to support the personalised approach and also give direction for how to reduce doses of medication sensibly.
5. Structured Medication Reviews are being undertaken by pharmacy teams in primary care to have conversations with patients about their medications and understand any issues associated with them so that appropriate shared decision making can occur and actions taken.
6. We are also looking at supporting our community pharmacy colleagues to understand more about the dependence challenges associated with some prescribed medicines and their role in supporting patients to discuss the issues they are facing and support management plans.

Whilst we have been actively working on this agenda for a number of years we also recognise that this is still a great deal of work to do in this space.

***Question 2 about volunteers***

**Question 4 about STOMP**

NHS England developed a national campaign called STOMP.  This stands for “Stopping overmedication of people with a learning disability, autism or both”. STOMP is about making sure people get the right help for challenging behavior or sometimes referred to as behaviours of distress.

This means getting psychological and other interventions first or at the same time as medicine.  It is about encouraging people to have regular medication reviews if they are given medicine, supporting health professionals to involve people in decisions and showing how families and social care providers can be involved. Medications that are often given for behaviours of distress include antipsychotics, antidepressants, anti-anxiety medications, sleeping medications and antiepileptics (when they are used purely for a person’s mood).

Gloucestershire as a system has been working as a multi-disciplinary team e.g., GPs, Community Pharmacists and [Community Learning Disability Team](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fyoutu.be%2FrxwINdfu4-k&data=05%7C01%7Cchristina.gradowski%40nhs.net%7C9fbdaa1d723d41a3d8a008daceeae9cd%7C37c354b285b047f5b22207b48d774ee3%7C0%7C1%7C638049805589263707%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=34zaRELiljnbT6uAljWTf%2BUaP9E2UaE3UAry1AN%2FrYg%3D&reserved=0) (CLDT) to ensure anyone on medication (outlined above) is reviewed annually either as part of the primary care Annual Health Check or if still known to secondary care by the CLDT, to ensure a continued health need to remain on the medication or alternatives to be considered.  Based on an audit completed of GP Learning Disabilities Registers in 2017/2018 19.2% of people were prescribed antipsychotic medications and 3% of this number were coded in the system with challenging behaviour. Unfortunately, due to covid, this audit has not been able to be repeated recently, but work continues as a system to address the ambitions set by NHS England.  The [STOMP Toolkit](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.england.nhs.uk%2Fpublication%2Fstopping-over-medication-of-people-with-a-learning-disability-autism-or-both%2F&data=05%7C01%7Cchristina.gradowski%40nhs.net%7C9fbdaa1d723d41a3d8a008daceeae9cd%7C37c354b285b047f5b22207b48d774ee3%7C0%7C1%7C638049805589263707%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=9%2FlcfycvZ%2BL0Cqhn9vVJW7%2BfGhW1KbfCk1FLqiBMkYE%3D&reserved=0) produced in 2017 is used by health care professionals to ensure a person centred approach is taken to these reviews (see the algorithm in the toolkit for further details).  Care providers are also encouraged to support people in their care through a number of key areas, which will help holistically to manage behaviours that are deemed challenging for services;

1. **Support for physical health** – as we know people with a learning disability have poorer physical health than other people and often live shorter lives (LeDeR, Public Health England Fingertips data etc),  Many of the powerful medications prescribed for behaviour that challenges can often make this ill health worse.  If someone feels ill, is in pain, cannot do things the way they usually do or feels uncomfortable then they are more likely to engage in behaviour that is seen as challenging.  Health Check Action Plans and [Annual Health Checks](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fg-care.glos.nhs.uk%2Feducation%2F650&data=05%7C01%7Cchristina.gradowski%40nhs.net%7C9fbdaa1d723d41a3d8a008daceeae9cd%7C37c354b285b047f5b22207b48d774ee3%7C0%7C1%7C638049805589263707%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=xVZo2wgGTtnOth1ptMDCzgZ%2Bt54bOE1j%2Fw%2F98VSMSIs%3D&reserved=0) with a GP and more recently ensuring a [RESTORE2 mini documentation](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fyoutu.be%2FSOOJjF8bCmY&data=05%7C01%7Cchristina.gradowski%40nhs.net%7C9fbdaa1d723d41a3d8a008daceeae9cd%7C37c354b285b047f5b22207b48d774ee3%7C0%7C1%7C638049805589263707%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=64vk%2F%2BHy9V8UnGSv8OVvn%2FQKi76nOLddb%2ByboubH1XM%3D&reserved=0) (Unique Wellness)are three ways of helping people maintain and improve their physical health.
2. **Communication** - A lot of people with a learning disability and/or autism have some level of communication difficulty. Training for care providers on total communication is available through Learnpro.
3. **Activities** - Keeping busy with meaningful activities is an important part of life for most people.  People with learning disabilities often need to find, access and take part in activities they would like to do.  If they are not given support to do this, they can feel anxious, frustrated, and confused, which may make it more likely that they will engage in behaviours that can be seen as challenging. Care providers are encouraged to provide meaningful activities and the [You’re Welcome Website](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.yourewelcomeglos.org%2F&data=05%7C01%7Cchristina.gradowski%40nhs.net%7C9fbdaa1d723d41a3d8a008daceeae9cd%7C37c354b285b047f5b22207b48d774ee3%7C0%7C1%7C638049805589263707%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=fAqu%2Bzo6OIEHADX3XG1oIOU0K8t3PLtmq%2BYDOzc8Igc%3D&reserved=0) is a resource they can utilise to find accessible things to do.
4. **Support for mental wellbeing** – The CLDT offers a dedicated pathway for professionals to access help and support for people with a learning disability who are displaying behaviours of distress.  [Information for healthcare professionals](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fg-care.glos.nhs.uk%2Fpathway%2F1093&data=05%7C01%7Cchristina.gradowski%40nhs.net%7C9fbdaa1d723d41a3d8a008daceeae9cd%7C37c354b285b047f5b22207b48d774ee3%7C0%7C1%7C638049805589263707%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=btn2wCr5bldnuuki72YPFU50k0AcWQHF305C2nzH6yk%3D&reserved=0) is available through G:care website.  This pathway is a person-centred framework for providing long term support.  This pathway alongside Positive Behaviour Support (PBS) framework helps us understand the reason for the behaviour so we can better meet people’s needs, enhance their quality of life, reduce the likelihood that the behaviour will happen.
5. **Positive Behaviour Support (PBS)** - PBS is a person-centred framework for providing long-term support to people with a learning disability, and/or autism, including those with mental health conditions, who have, or may be at risk of developing, behaviours of distress. It is a blend of person-centred values and behavioural science and uses evidence to inform decision-making. Behaviour happens for a reason and may be the person's only way of communicating an unmet need. PBS helps us understand the reason for the behaviour so we can better meet people's needs, enhance their quality of life, and reduce the likelihood that the behaviour will happen.  A [useful introductory video](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fyoutu.be%2Fepjud2Of610&data=05%7C01%7Cchristina.gradowski%40nhs.net%7C9fbdaa1d723d41a3d8a008daceeae9cd%7C37c354b285b047f5b22207b48d774ee3%7C0%7C1%7C638049805589263707%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=IJAErVnmW02xGHxZx7bl6v3iWiHoM8BXriL96cRRMHw%3D&reserved=0) about PBS is available on G:care.  CLDT and the Local Authority PBS Team have set up [PBS Clinics](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fg-care.glos.nhs.uk%2Fuploads%2Ffiles%2FPositive%2520Behaviour%2520Support%2520Consultation%2520Clinics.docx&data=05%7C01%7Cchristina.gradowski%40nhs.net%7C9fbdaa1d723d41a3d8a008daceeae9cd%7C37c354b285b047f5b22207b48d774ee3%7C0%7C1%7C638049805589263707%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=UEuWHvjPg8TAM15dK1%2F50KAU%2BlRYuPL27wObROF7SoU%3D&reserved=0) for care providers to get help in managing behaviours of distress.

It is right that some people remain on this medication due to their assessed health needs and we would not advocate for anyone to stop taking the prescribed medication with advice as this could be dangerous.  Some medicines can be very effective in treating some people with learning disabilities or autistic adults when used appropriately.