Non-Medical Prescribers’ Current Awareness Bulletin

No. 15
October 2020

Produced by the NHS Staff Library and Knowledge Service
Mid Yorkshire Hospitals NHS Trust
midyorks.library.pgh@nhs.net
Contents

Research Articles

- Antimicrobials
- Hormone Replacement Therapy
- Hypertension
- Inequalities
- Learning Disability
- Mental Health
- Non-medical prescribers
- Nurse prescribing
- Older people
- Optometry
- Osteopathy
- Palliative care
- Paramedic prescribing
- Pharmacy
- Physiotherapy
- Primary care
- Respiratory Diseases
- Safety
- Statins

Prescribing Journals - Table of Contents

Guidance

Resources
**Antimicrobials**

*Identifying targets for antibiotic stewardship interventions through analysis of the antibiotic prescribing process in hospitals - a multicentre observational cohort study*

**Antimicrobial Resistance and Infection Control**

The aim of this study was to identify targets for antibiotic stewardship interventions in Norwegian hospitals through analysis of the antibiotic prescribing process from admission to discharge across five groups of infectious diseases.

*Investigating the mechanism of impact and differential effect of the Quality Premium scheme on antibiotic prescribing in England: a longitudinal study*

**BJGP Open**

To investigate whether the effects of the Quality Premium (QP), which provided performance-related financial incentives to clinical commissioning groups (CCGs), could be explained by practice characteristics that contribute to variations in antibiotic prescribing. In high-prescribing practices, those with low workforce and high diabetes prevalence had more reduction following the QP compared with other practices, highlighting the need for targeted support of these practices and appropriate resourcing of primary care.

*Risk assessment and antibiotic prescribing decisions in children presenting to UK primary care with cough: a vignette study*

**BMJ Open**

The validated 'STARWAVE' (Short illness duration, Temperature, Age, Recession, Wheeze, Asthma, Vomiting) clinical prediction rule (CPR) uses seven variables to guide risk assessment and antimicrobial stewardship in children presenting with cough. This study compared general practitioners' (GPs) risk assessments and prescribing decisions to those of STARWAVE. Relative to STARWAVE, GPs underestimated risk of hospitalisation, overprescribed and appeared to misinterpret illness duration (prescribing for longer rather than shorter illnesses).

*A systematic review using the Theoretical Domains Framework to identify COPD and facilitators to the adoption of prescribing guidelines*

**International Journal of Pharmacy Practice**

Multiple behavioural factors affect the adoption of prescribing guidelines. The results aided the understanding of factors that may be targeted to increase guideline compliance.
Community antibiotic prescribing for children in France from 2015 to 2017: a cross-sectional national study

Journal of Antimicrobial Chemotherapy.

GPs prescribed more antibiotics than paediatricians [prescription rate 26.1 (95% CI 25.9-26.3) versus 21.6 (95% CI 21.0-22.2) per 100 visits, respectively; P < 0.0001]. Respiratory tract infections (RTIs) accounted for more than 80% of antibiotic prescriptions, with presumed viral RTIs being responsible for 40.8% and 23.6% of all antibiotic prescriptions by GPs and paediatricians, respectively.

Rapid diagnostic tests for common infection syndromes: less haste, more speed

Journal of Antimicrobial Chemotherapy.

Rapid diagnostic tests, which accurately distinguish bacterial from viral infections, are being heralded as the solution to antibiotic overuse, which is a key driver of antimicrobial resistance. The authors have concerns that this approach is oversimplistic.

Interventions to improve appropriate antibiotic prescribing in long-term care facilities: a systematic review

BMC Geriatrics

Systematic identification of the active ingredients of antimicrobial stewardship in long-term care facilities was facilitated through the application of behavioural science frameworks. Incorporating environmental restructuring and performance feedback may be promising intervention strategies for antimicrobial stewardship interventions within long-term care facilities.

Influences on antibiotic prescribing by non-medical prescribers for respiratory tract infections: a systematic review using the theoretical domains framework

Journal of Antimicrobial Chemotherapy

A review to identify what evidence exists regarding the influences on NMPs' antimicrobial prescribing behaviour and analyse the operationalization of the identified drivers of behaviour using the Theoretical Domains Framework.

How did a Quality Premium financial incentive influence antibiotic prescribing in primary care? Views of Clinical Commissioning Group and general practice professionals

Journal of Antimicrobial Chemotherapy

CCG and practice professionals expressed positive views of the Quality Premium and associated prescribing targets and feedback. The QP helped influence change mainly by raising the priority of antimicrobial stewardship and defining change targets rather than providing additional funding.
Prescriber Commitment Posters to Increase Prudent Antibiotic Prescribing in English General Practice: A Cluster Randomized Controlled Trial

Antibiotics

Interventions were a commitment poster (CP) advocating safe antibiotic prescribing or a CP plus an antimicrobial stewardship message (AM) on telephone appointment booking lines, tested against a usual care control group. The primary outcome measure was antibiotic item dispensing rates per 1000 population adjusted for practice demographics. Commitment posters did not reduce antibiotic prescribing. An automated patient antimicrobial stewardship message showed effects and requires further testing.

Delayed prescribing of antibiotics for self-limiting respiratory tract infections in an urgent care out-of-hours setting

Journal of Prescribing Practice

This article analyses the practice of delayed prescribing of antibiotics for the treatment of self-limiting respiratory tract infections in an out-of-hours service. The advantages and disadvantages associated with delayed prescribing, to safely treat patients whilst facilitating the reduction of antimicrobial resistance, are discussed. In addition, recommendations for future practice are offered.

Hormone Replacement Therapy

Socioeconomic status and HRT prescribing: a study of practice-level data in England

British Journal of General Practice

The overall prescribing rate of HRT was 29% lower in practices from the most deprived quintile compared with the most affluent. In more deprived practices, there was a significantly higher tendency to prescribe oral HRT than transdermal preparations.

Hypertension

Association of Low-Dose Triple Combination Therapy with Therapeutic Inertia and Prescribing Patterns in Patients With Hypertension: A Secondary Analysis of the TRIUMPH Trial

JAMA Cardiology

Fixed-dose combination (FDC) therapies are being increasingly recommended for initial or early management of patients with hypertension, as they reduce treatment complexity and potentially reduce therapeutic inertia. In this Sri Lankan study triple pill FDC therapy was associated with greater rates of therapeutic inertia compared with usual care.
Inequalities

An examination of trends in antibiotic prescribing in primary care and the association with area-level deprivation in England

BMC Public Health

This study aimed to examine trends in antibiotic prescribing (including broad-spectrum), and the association with area-level deprivation and region in England. Although antibiotic prescribing has reduced over time, there remains significant variation in by area-level deprivation and region in England - with higher antibiotic prescribing in more deprived areas.

Learning Disability

Changes over a decade in psychotropic prescribing for people with intellectual disabilities: prospective cohort study

BMJ Open

Despite concerns about antipsychotic prescribing and guidelines recommending their withdrawal, it appears that while fewer antipsychotic prescriptions were initiated by 2014 than in 2004, people were not withdrawn from them once commenced. People with problem behaviours had increased prescribing. There was also a striking increase in antidepressant prescriptions.

Mental Health

Use of antidepressants with pharmacogenetic prescribing guidelines in a 10-year depression cohort of adult primary care patients

Pharmacogenetics and Genomics

Medication use and pharmacogenetic testing results were collected on 128 primary care patients enrolled in a 10-year depression cohort study. One-quarter of primary care patients used an antidepressant that was not recommended for them based on CYP2D6- and CYP2C19-based prescribing guidelines and switching medications tended to be more common in this group.

An exploration of why qualified mental health nurse prescribers do not prescribe

Journal of Prescribing Practice

This article is an exploratory study of perceptions in mental health nurses who are qualified to prescribe yet choose not to do so. In-depth semi-structured face-to-face interviews, field notes and analysis of documents were used to investigate the perceptions of the non-prescribing nurse prescriber.
Prescribing in mental health nursing in the Republic of Ireland is still an unusual occurrence and despite an uptake in prescriber training, this does not often translate to practice. Recent Irish research, however, has identified that nurse prescribing when offered, is perceived to enhance care and offer better delivery of services.

**Non-Medical Prescribers**

*Investigating non-medical prescribers' awareness of compliance*

*Journal of Prescribing Practice*

This paper sought to investigate non-medical prescribers' awareness of compliance and what is required for them to be compliant when prescribing in an acute NHS trust.

**Nurse Prescribing**

*Experiences of registered nurse prescribers; a qualitative study*

*Contemporary Nurse*

Sixteen semi-structured interviews were conducted with registered nurse prescribers across New Zealand. Participants explained how they enjoyed the challenge and responsibility of the new prescribing role yet were frustrated with the realities of the restrictions of what they could actually prescribe and in some cases lack of role recognition. Registered nurse prescribing also improved access to care as nurses felt they provided more comprehensive care, resulting in reduced wait times, better continuity of care and a reduction in patient costs.

**The Educational Terrain of Preparing Registered Nurses to Prescribe: An Environmental Scan**

*Nursing Leadership*

Expanded nursing roles are being explored in Canada as a means to better support the health of the population, enable access to quality care and contribute to the sustainability of the healthcare system. This paper describes the results of an environmental scan that sought to explore the educational practices of national and international jurisdictions through published and grey literature sources.
Older People

The burden of psychotropic and anticholinergic medicines use in care homes: population-based analysis in 147 care homes
Age and Ageing
Care-home residents have high psychotropic and anticholinergic burden, with considerable variation between care-homes that is not related to existing measures of quality of care. Research to better understand variation between care-homes and the interaction with local prescribing cultures is needed.

Potentially inappropriate prescribing to older patients receiving multidose drug dispensing
BMC Geriatrics
Multidose drug dispensing (MDD) is an adherence aid that provides patients with machine-dispensed medicines in disposable unit bags, usually for a 14 day period. Previous studies have suggested that the quality of prescribing, with time, is lower for MDD users, compared to patients receiving prescriptions dispensed as usual. This study aimed to examine the quality of prescribing to Norwegian elderly home care service patients receiving MDD.

Intervention elements to reduce inappropriate prescribing for older adults with multimorbidity receiving outpatient care: a scoping review
BMJ Open
The aims of this scoping review were to (1) identify the intervention elements that have been adopted to reduce potentially inappropriate prescribing in the outpatient setting and (2) determine the behaviour change wheel (BCW) intervention functions performed by each of the identified intervention elements.

Effect of Academic Detailing on Promoting Appropriate Prescribing of Antipsychotic Medication in Nursing Homes: A Cluster Randomized Clinical Trial
JAMA Network Open
The intervention did not further reduce antipsychotic prescribing in nursing homes beyond system-level secular trends occurring alongside usual care.

The role of nurses in antimicrobial stewardship near the end of life in aged-care homes: A qualitative study
International Journal of Nursing Studies.
There are opportunities for aged-care home nurses to undertake antimicrobial stewardship activities near the end of life in the provision of routine care.

Patient and provider perspectives on the development and resolution of prescribing cascades: a qualitative study
This qualitative study employed semi-structured interviews to explore the existence of prescribing cascades and to gather patients', caregivers' and clinicians' perspectives about how prescribing cascades start, persist and how they might be resolved. Participants were older adults (over age 65) at a Canadian outpatient Geriatric Day Hospital (GDH) with possible prescribing cascades (identified by a GDH team member), their caregivers, and healthcare providers.

**Antibiotic prescribing and non-prescribing in nursing home residents with signs and symptoms ascribed to urinary tract infection (ANNA): study protocol for a cluster randomized controlled trial**

BMC Geriatrics

This Dutch study is the first cluster Randomized Controlled Trial to evaluate the recently developed, international decision tool for empiric treatment of suspected UTI in NH residents.

**Prescribing medicines to older people-How to consider the impact of ageing on human organ and body functions**

British Journal of Clinical Pharmacology

This review article summarizes the most clinically relevant changes in human organ and body functions and the consequential changes in pharmacokinetics and pharmacodynamics in older people, along with possible dosing consequences or alternatives for drugs frequently prescribed to this patient population.

**Assessing the effect of Independent Prescribing for community optometrists and referral rates to Hospital Eye Services in Scotland**

Eye

This is the first analysis of independent prescribing optometrists and associated referral rates in Scotland. Despite good geographical distribution and increased supplementary attendances, optometric referrals to hospital eye services have doubled and continue to rise.

**Australian osteopaths as non-medical prescribers: comparison of healthcare practitioner characteristics from a nationally representative survey**

Australian Journal of Primary Health.

The study aimed to compare the characteristics of Australian osteopaths who definitely agree that prescribing scheduled medicines is part of their future scope of practice with those who do not.
Anticipatory prescribing (AP) of injectable medications in advance of clinical need is established practice in community end-of-life care. Changes to prescribing guidelines and practice have been reported during the COVID-19 pandemic. The challenges of the COVID-19 pandemic for UK community palliative care has stimulated rapid innovation in AP.

Independent non-medical prescribing has been a safe, effective and economical initiative for St Teresa's nurse-led hospice.

This article aims to raise awareness of potential barriers to early adoption of paramedic independent prescribing in primary care. It identifies common pitfalls prior to training and provides seven practical steps for paramedics considering pursuing non-medical prescribing training.

Online databases MEDLINE, EMBASE and Global Health were used to identify articles describing either the competence or confidence of physician, pharmacist or student prescribing, including inappropriate prescribing and prescribing errors. While some reflect positively on prescribing competence and confidence, others show major deficits in competence and lack of confidence.

To assess the effect of non-dispensing clinical pharmacists integrated in primary care teams on general practitioners' prescribing quality. This study did not demonstrate a consistent effect of the introduction of non-dispensing clinical pharmacists in the primary care team on the quality of physician's prescribing.
Limited pharmaceuticalisation: a qualitative case study of physiotherapist prescribing practices in an NHS Trust in England following the expansion of non-medical prescribing in the UK

Ethnographic methods were used to gather data from an outpatient orthopaedic service in an NHS Trust in England employing physiotherapist prescribers.

An expert-based mapping of healthcare system strategies to support rational drug prescribing in primary care across 13 European countries

This paper explores the following research question via expert opinions: to what extent have European countries implemented strategies to support rational prescribing (targeted and system oriented) and what are the types implemented?

The effect of a mystery shopper scheme on prescribing behavior in primary care: Results from a field experiment

To investigate whether informing physicians of a forthcoming mystery shopper audit influences their prescribing behaviour.

Suboptimal prescribing behaviour associated with clinical software design features: a retrospective cohort study in English NHS primary care

'Ghost-branded generics' are a new category of medicines savings, caused by prescribers specifying a manufacturer for a generic product, often resulting in a higher reimbursement price compared with the true generic. A design choice in a commonly used EHR has led to £9.5 million in avoidable excess prescribing costs for the NHS in 1 year. Notifying the vendor led to a change in user interface and a rapid, substantial spend reduction.

A service evaluation of new independent prescribers within a COPD Team

Conference Abstract: In this Respiratory Team 3 clinicians undertook Non-Medical Prescribing qualifications at Masters Levels: 2 physiotherapists and 1 nurse. This service evaluation aims to review actual prescriptions versus the expected prescriptions between April and September 2018.
Voluntarily reported prescribing, monitoring and medication transfer errors in intensive care units in The Netherlands

International Journal of Clinical Pharmacy.

This study aimed to characterize prescribing, monitoring and medication transfer errors that were voluntarily reported in the ICU, in order to reveal medication safety issues. Prescribing errors were reported most frequently (n = 233, 33%), followed by medication transfer errors (n = 85, 12%) and monitoring errors (n = 27, 4%). Other findings were: medication transfer errors frequently caused serious harm, especially the omission of home medication involving the central nervous system and proton pump inhibitors; omissions and dosing errors occurred most frequently; protocol problems caused a quarter of the medication errors; and medications needing blood level monitoring (e.g. tacrolimus, vancomycin, heparin and insulin) were frequently involved.

Are Further Interventions Needed to Prevent and Manage Hospital-Acquired Hyponatraemia? A Nationwide Cross-Sectional Survey of IV Fluid Prescribing Practices

Journal of Clinical Medicine

A cross-sectional survey was performed in Danish emergency department physicians in spring 2019. Prescribing practices were assessed by means of four clinical scenarios commonly encountered in the emergency department. Thirteen multiple-choice questions were used to measure knowledge. Inappropriate prescribing practices and limited knowledge of a large number of physicians calls for further interventions to minimise the risk of hospital-acquired hyponatraemia.

Interventions to ensure medication safety in acute care: an umbrella review

International Journal of Evidence-Based Healthcare

The aim of this umbrella review was to synthesize the evidence from all systematic reviews investigating the effectiveness of medication safety interventions, in comparison to any or no comparator, for preventing medication errors, medication-related harms and death in acute care patients.

Statins

Prescription of suboptimal statin treatment regimens: a retrospective cohort study of trends and variation in English primary care

British Journal of General Practice

Breaches of guidance on choice of statin remain common, with substantial variation between practices. Some have implemented rapid change, indicating the feasibility of rapid prescribing behaviour change. This article discusses the potential for a national strategic approach, using data and evidence to optimise care,
including targeted education alongside audit and feedback to outliers through services such as OpenPrescribing.

Prescribing Journals – Table of Contents

International Journal of Pharmacy Practice

October

Journal of Prescribing Practice

September August

Prescriber

September July/August

Pharmaceutical Journal

September August July

Guidance

Medicines and Healthcare products Regulatory Agency

**Opioids: risk of dependence and addiction**

New recommendations following a review of the risks of dependence and addiction associated with prolonged use of opioid medicines (opioids) for non-cancer pain.

Public Health England

**Flu vaccines for children**

A quick reference guide to the childhood flu vaccines for winter 2020 to 2021.

**Flu vaccines: 2020 to 2021 flu season**

Poster showing the different types of flu vaccines available for the 2020 to 2021 flu season and the clinical risk groups that they apply to.

Health Education England – e-learning

**SCRIPT – supporting safer prescribing practices by healthcare professionals**

General Medical Council

**Bringing physician associates and anaesthesia associates into regulation**

This guide provides an overview of GMC work to bring physician associates and anaesthesia associates into regulation.
General Pharmaceutical Council

**GPhC guidance on managing fitness to practise concerns in pharmacy education and training**

Updated guidance intended to provide advice to everyone involved in the education and training of pharmacy professionals about their responsibilities in relation to the fitness to practise of students and trainees.

**National Roundtable on Inclusive Pharmacy Professional Practice**

This [statement](#) is the initial outcome of the first National Roundtable on Inclusive Pharmacy Professional Practice, co-hosted by the Chief Pharmaceutical Officer at NHS England and NHS Improvement, the President of the Royal Pharmaceutical Society and the President of the Association of Pharmacy Technicians UK.

**Royal Pharmaceutical Society**

*The future of pharmacy in a sustainable NHS: Key principles for transformation and growth*

- Priority 1: Establishing a valued and supported pharmacy workforce to improve patient care
- Priority 2: Enabling an integrated and connected pharmacy workforce to enhance patient care
- Priority 3: Empowering the pharmacy profession to transform patient care

**Resources**

**NICE Guidelines - July to September**

Evidence-based recommendations on a wide range of topics, from preventing and managing specific conditions to planning broader services and interventions to improve the health of communities

**Clinical Knowledge Summaries** have prescribing information within them relating to specific conditions/diseases and the drugs administered/considered for treatment. The latest major updates can be found [here](#).

**British National Formulary**

Available in digital & print for health and social care professionals.

Latest updates: [BNF BNF for Children](#)

**BNF Publications mobile app**

All adult and child BNF content is available through a single mobile app. The app is free for:

- health and social care professionals who work for or are contracted by the NHS in England, Scotland and Wales.
- students who are studying on NHS-commissioned courses such as medicine or nursing.
UKMI [UK medicines information] newsletter

New Medicines Newsletter July 2020

New Medicines Newsletter August 2020

New Medicines Newsletter September 2020

MHRA

The Medicines and Healthcare products Regulatory Agency regulates medicines, medical devices and blood components for transfusion in the UK. It is an executive agency, sponsored by the Department of Health and Social Care. Drug Safety Updates

Disclaimer:

While we make every possible effort to ensure that the information in this publication is accurate and up to date at the time of publishing, we do not accept any responsibility for errors or omissions. Nor do we accept any responsibility for loss or damage resulting from making use of this information. Links to third party websites are provided for the convenience of users and we in no way endorse the contents, views or information held on such sites.