

# A Review of Oral Nutritional Supplement Prescribing Across Leeds to Optimise Care

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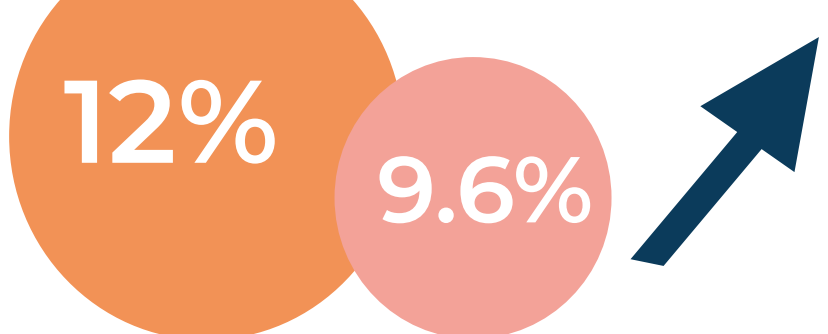


## BACKGROUND

Oral Nutritional Supplements (ONS) are an important treatment option for adults who are malnourished or at risk of malnutrition.

Malnutrition is a significant public health problem that costs around £23.5 billion per year in the UK.<sup>1</sup>

Across West Yorkshire Integrated Care Board (ICB) ONS spend had increased to 15.9 million, a 12% annual increase compared to 9.6% nationally. ONS spending for Leeds had increased by more than £0.5 million in the same time period.



## AIMS

The Medicines Optimisation Team (MOT) at Leeds Place identified a need to address ONS prescribing within Leeds. The team developed a programme of work to review patients receiving ONS via repeat prescription to:

- Align to first choice product where clinically appropriate and in the best interest of the patient
- Stop ONS repeat prescriptions where indicated in accordance with MUST Score<sup>2</sup> and the Leeds Malnutrition Pathway<sup>3</sup>
- Create system wide awareness of the issues associated with ONS including costs and quality of prescribing through collaborative working
- Leave an educational legacy which supports sustained quality improvement in the management of ONS.



## METHODOLOGY

To effectively reduce ONS prescribing required involvement from a multidisciplinary team. The programme was split into two phases:

### PHASE ONE

Phase One focused on immediate interventions to address the issue of inappropriate ONS prescribing. During the initial scoping, 500 patients were identified as receiving repeat ONS prescriptions who did not meet the appropriate criteria. If 100% of these products were stopped it would release 60k in savings month on month and a total of £720k in the financial year.

Based on this data, it was determined that Phase One would involve a city-wide review of patients receiving repeat ONS. To conduct this review efficiently, the Medicines Optimisation Team collaborated with Interface Clinical Services, an IQVIA business, to deliver reviews and interventions at a rapid and comprehensive scale. Funding for the clinical reviews was provided by a healthcare company.



### PHASE 2

Establishing a system wide approach to preventing ONS overuse, implementing change and positively impacting the quality of ONS prescribing going forward. This involved stakeholders from primary, secondary care and community services. The purpose of this phase was to identify and address the challenges associated with ONS prescribing, with the goal of making changes that would enhance its quality in the future. Some examples of the work undertaken included:

- Raised awareness of the first choice community products with secondary care services.
- Refresh & relaunch of Leeds Malnutrition Guidelines & Creation of a One Minute Guide for ease of information for prescribers
- Encouraging clinicians to improve clarity of information on Edans (Electronic Discharge information) e.g when to discontinue ONS
- Raised awareness within dietetics regarding the need for regular ONS reviews and increased costs associated with non-first choice prescribing.

## RESULTS- Phase 1

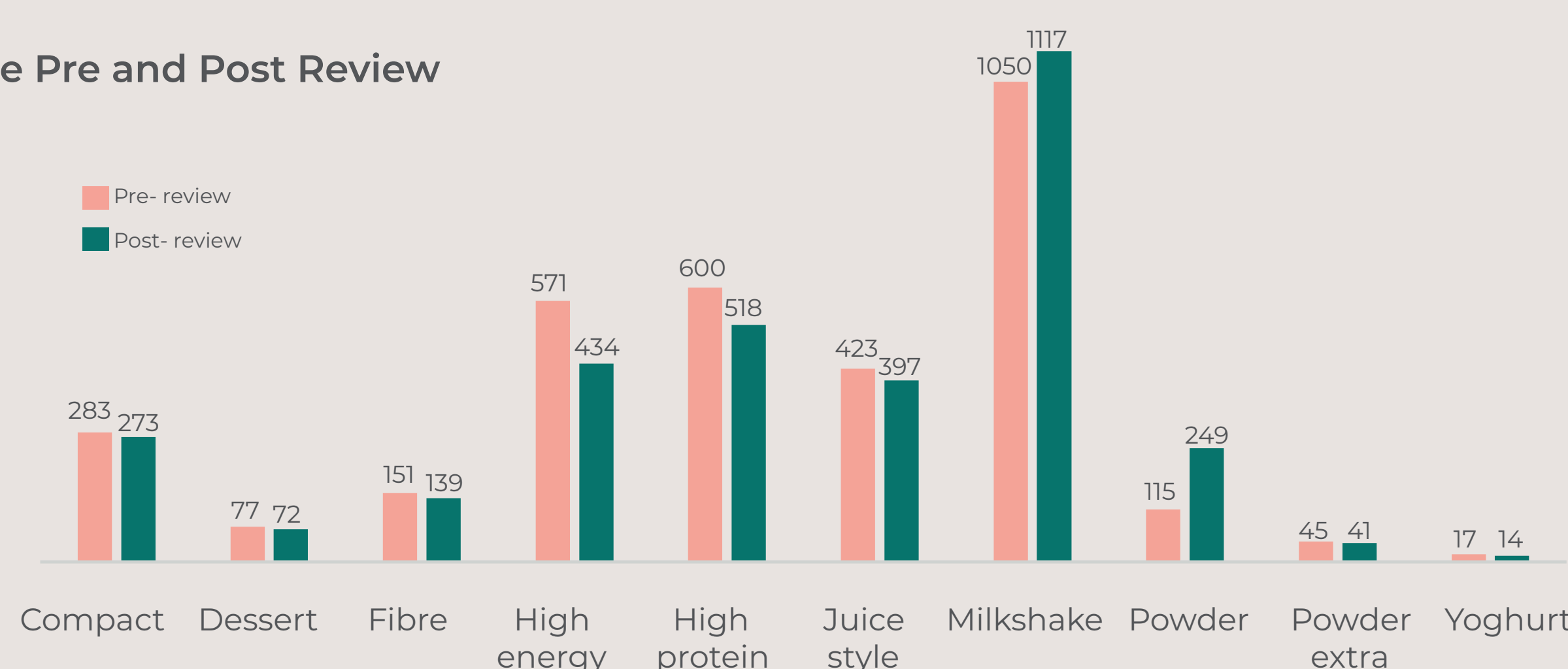
65 practices participated across the ICB  
 2,540 patients on ONS were reviewed by clinical pharmacists in line with NICE guidelines.

759 patients had their ONS changed (in line with patient need, patient preference and the locality's first line choice of product).

- 74 patients had their ONS treatment stopped.
- 52 patients had a dose reduction.
- 65 patients had a dose increase.

### ONS Product Type Pre and Post Review

The wide range of ONS products available allows choices to be made to cater for personal preference as well as a wide range of clinical need.

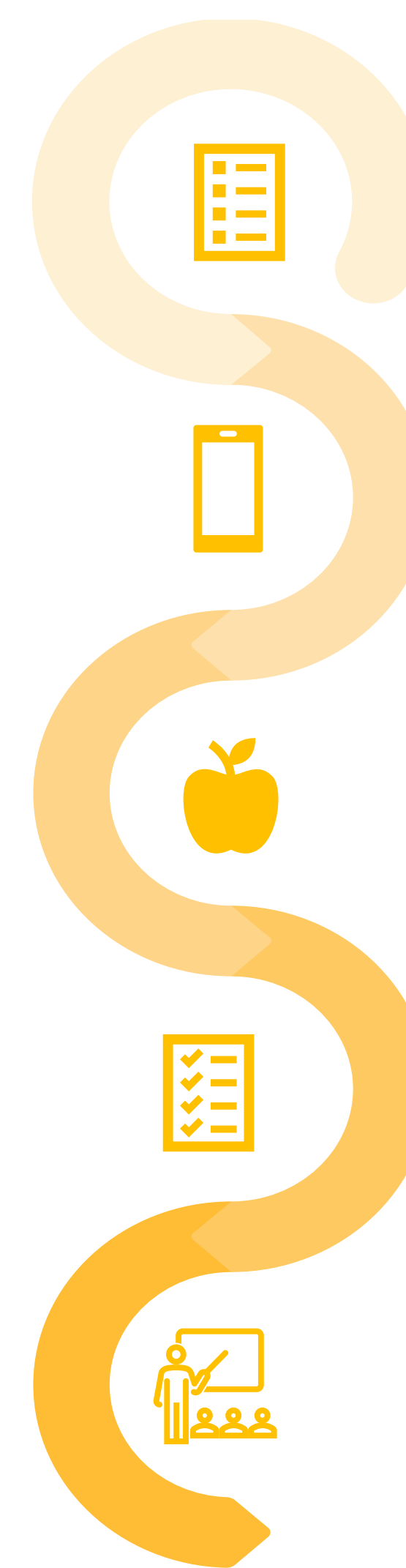


### Projected Monthly Prescribing costs of Current ONS



The review generated an estimated **£397,887 in annual cost savings** and **increased practice adherence to preferred ONS from 18.8% to 50.13%** (in line with ICB formulary).

## RESULTS- Phase 2



The implementation of phase 2 involved working collaboratively and implementing a system-wide approach to ONS Management including:

- Updated Malnutrition guidelines
- Enhanced digital notifications relating to ONS prescribing
- Establishing a communication network for dietitians across the system
- Creation of support materials for health care professionals including:
  - A one minute guide, to provide prescribers with an overview of all the information
  - A ready reckoner for prescribers to help them with decision making re: variability in ONS usage. To help make it simpler to prescribe, whilst supporting alignment to formulary.
- An educational legacy to optimise patient care and support sustained quality improvement in the management of patients using ONS

## PATIENT FEEDBACK

As part of the programme, feedback based on the interactions with patients was captured by the MDT. They highlight the importance of reviewing ONS, to ensure the needs of the patients are being met.

### PATIENT C: Patient undergoing chemotherapy using ONS

Patient was poorly managed and couldn't speak English.  
 Luckily, she spoke Bengali and I managed to run the whole consult in Bengali, finding out she can't eat at all due to chemo.  
 Great intervention made and increased the calorie and protein intake by nearly double!



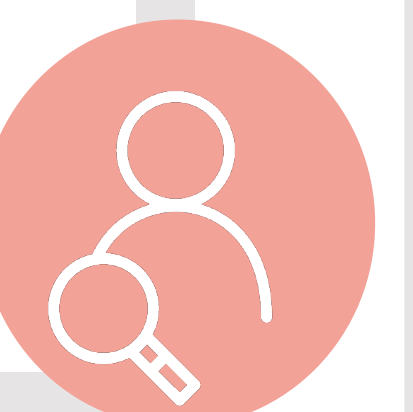
### PATIENT G: Patient had been consistently losing weight despite son's efforts.

Patient's son was very grateful for discussing ONS options for his mother who has dementia, is struggling to eat and has a very poor appetite.  
 Moved to higher calorie powder drink that son can mix with. Son expressed he was 'very thankful' for the call.



### PATIENT H: Patient had Fortisip Compact Protein on repeat- 40ml 6 times daily and a quantity of 1000ml.

They were getting 8 x 125ml bottles a month and is having 1 a day for 8 days then nothing for the rest of the month.  
 Their BMI is 16.45 which has been declining over the past year.  
 Changed to formulary Complete BD. They're palliative and have severe COPD and were very thankful for the pharmacist input.



## EVALUATION

The project showed how collaboration and system-wide working can create efficiencies in ONS prescribing, whilst benefiting patients and optimising treatment. To deliver a programme at scale required engagement from all stake holders and regular communication was key to its success. The project showed how utilisation of existing medicines optimisation relationships with practices and PCNs can support in uptake of work programmes at scale to ensure maximum outcomes. The provision of patient clinics played a pivotal role in engaging patients, including patients considered vulnerable and at risk of poor health. Patient feedback was positive with many appreciating the opportunity to discuss their treatment.

As well as creating significant cost savings, the programme has created an educational legacy to effectively manage ONS patients and promoted adherence to local formularies. Feedback from practices involved in the project was positive with the collaborative approach and regular meetings and communication between stakeholders listed as a key driver behind the project's success. This work was more than about cost savings, it was about the quality of prescribing and considering the needs of the individual patients. Practices also commented on how the review process has helped to raise awareness and adherence, which will have a long term impact on prescribing within ONS.

The project continues to benefit the locality, in February 2024 ONS spending in Leeds was 1.03% lower than in February 2023. This compares to a national increase of 19.49% and an increase of 16.48% in other areas of West Yorkshire. If that level of deviation from the national average is maintained over 12 months it will result in around £750k of savings, far greater than the £397,887 anticipated at the close of the review. This is resource that can be utilised across other clinical areas, for example it could fund over 90 hip replacements.