

A Practical Guide to Effective Non Medical Prescribing in Care of the Older Adult *In Primary and Community Care*

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Tuesday 29th April 2025

Virtual Conference



Chair & Speakers include:

Ali Richards
Senior Lecturer
University of Cumbria

Aleksandra Howell
Senior Clinical Pharmacist Oxford University Hospitals NHS Trust; Clinical Lead West of England Academic Health Science Network

Dr Qun Wang
Trust Lead for Non-Medical Prescribing/ Nurse Consultant Geriatrics Epsom and St. Helier University Hospitals NHS Trust

HEALTHCARE CONFERENCES UK



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“Older people require special care and consideration from prescribers.”

NICE

“It is important that we recognise why this area of non-medical prescribing is different to other areas of clinical practice... There are specific challenges around medication in older people which the prescriber must be cognisant of. We all can appreciate when we have an older person in front of us, they never present themselves as a textbook, perfect case... As people get older, there are changes in the way the body handles medication... Many factors are different in older people... Whilst we must always prescribe to improve the quality of life of all patients, specifically in older people, we cannot increase the risks of worsening or inducing frailty syndromes in older people.”

Nigel Dodds, Consultant Nurse for Older People Kings College Hospital NHS Foundation Trust January 2024

“Rates of medication error are higher in older adults, in care home settings, primary and secondary care and during transfer of care, contributing to high rates of hospital admission among people over 75, especially those with frailty... patient safety is paramount when addressing older adults prescribing.”

Getting it Right First Time Geriatric Medicine

“Pharmacists play an increasing role in medicines management and optimisation for older people in hospital, including medicines reconciliation on admission, medicines optimisation and deprescribing, assessment of patients who need support with medicines administration or timely management of medicines on discharge from hospital. In some trusts, there are consultant pharmacists who lead pharmacy services for care of older people and work in multidisciplinary teams to manage problematic polypharmacy. In the community pharmacists are a vital resource to support community multidisciplinary teams and care homes. We believe that pharmacists should be supported to develop and extend these roles with appropriate training. This can help to free up geriatrician time and also support the safe practice of those who administer medicines.”

Getting it Right First Time Geriatric Medicine

“Poor prescribing practice and a lack of information sharing about medicines means that older people are being let down too often by both their clinicians and the healthcare system that is supposed to look after them.”

More harm than good Why more isn't always better with older people's medicines, Age UK

This important national conference provides an essential update on nurse/non medical prescribing for older adults in primary and community care. Through national updates and extended interactive practical case studies delegates will hear how to develop and maintain prescribing competence, and how to develop effectiveness in post qualification practice. The conference will discuss the role of the updated Prescribing Competency Framework in supporting non medical prescribing in older adults. The conference will include case studies on managing pain in the older person, improving medicines optimisation, prescribing in falls prevention, frail older people, and delirium, and developing the role of the NMP in primary care, community care and care homes. The conference will include an extended focus on ensuring patient safety and the Nurse Prescribers role with regard to medication management, polypharmacy and de-prescribing.

“Many patients treated within geriatric medicine are on multiple medications (polypharmacy), often due to common multi-morbidities such as diabetes, dementia, osteoporosis, heart failure and COPD... on average, 17% of patients over 75 in England are on ten or more prescribed medicines and up to 30% in some CCG areas... Older people with frailty may suffer from altered drug pharmacokinetics and loss of homeostatic reserve, which increases the risk of side effects such as falls and delirium. Certain medicines, such as anticoagulants, analgesics and drugs for diabetes, are particularly prone to cause serious side effects, Rates of medication error are higher in older adults, in care home settings, primary and secondary care and during transfer of care. This appears to be compounded when there is evidence of co-morbidity, such as dysphagia, kidney disease or dementia. These side-effects and errors contribute to high rates of hospital admission among people over 75, especially those with frailty. Medicines safety in care of older people For all of these reasons, it is vital that the use of medicines in care of older people is closely monitored and reviewed to improve outcomes for patients, avoid unnecessary admissions and reduce the overall cost of care.”

Getting it Right First Time Geriatric Medicine

“The use of multiple medicines is increasing due to our ageing population, and nearly half of all medicines prescribed for long-term conditions are not being taken as intended.”

NHS England

This conference will enable you to:

- Network with colleagues who are working to improving non medical prescribing for older adults in primary and community care
- Learn from outstanding practice in ensuring patient safety in older adult prescribing
- Reflect on pain management in the older adult and some of its many facets through case presentation
- Improve medicines optimisation
- Understanding how to reduce inappropriate or problematic polypharmacy
- Learn how to use the National Prescribing Competency Framework (as required by the NMC)
- Understand how to effectively develop, demonstrate and maintain continued competence in Prescribing for Older Adults
- Explore best practice in frailty, Polypharmacy & Prescribing
- Extended workshop streams for Primary Care focused on clinical areas
- Reflect on lessons from experts in non medical prescribing for specific case study areas with in depth interactive sessions focusing on cvd and diabetes, managing long term conditions, pain in the older person, medication management for falls prevention, prescribing to avoid delirium and the role of the NMP in care homes
- Working with patients with co-morbidity
- Develop your role and confidence as a non medical prescriber
- Self assess, reflect and expand your skills in prescribing practice whilst understanding your limits of practice
- Supports CPD professional development and acts as revalidation evidence. This course provides 5 Hrs training for CPD subject to peer group approval for revalidation purposes

10.00 Chair's Welcome and Introduction

Ali Richards *Senior Lecturer, University of Cumbria*

10.10 Non-Medical Prescribing in the Older Person

Claire Wong

Nurse Consultant

Rotherham Doncaster And South Humber NHS Foundation Trust

- non-medical prescribing and the older person
- developing confidence and competence in your ability to prescribe
- demonstrating compliance with the NMC Code, and the RPS Competency Framework for revalidation
- the benefits of non-medical prescribing for older people

10.40 EXTENDED SESSION: Ensuring Patient Safety in Older Adult Prescribing

Heather Smith

Consultant Pharmacist: Older People

NHS West Yorkshire ICB

- current issues and effective prescribing
- ensuring patient safety in prescribing for the older adult
- the importance of medication review and reducing 'medication creep'
- reducing inappropriate and problematic polypharmacy
- reducing and monitoring drug side effects and interactions in older people
- supporting non-medical prescribers to ensure appropriate prescribing and deprescribing

11.25 *Comfort Break and Virtual Networking*

11.40 Prescribing to Avoid Delirium

Helen Davison

Senior Lecturer in Advanced Clinical Practice

Co-Module Lead Non-Medical Prescribing

Sheffield Hallam University

- recognition of delirium
- how to recognize dementia v delirium
- evidence for pharmacological treatments
- delirium in the community and supporting care home to recognize and treat delirium
- medications management and review

12.15 *Lunch Break and Virtual Networking*

13.10 Extended Workshop: Nurse/Non Medical Prescribing in Frail Older Adults

Eunice Sirkett

Associate Nurse Consultant

Central North West London (CNWL) NHS Foundation Trust

- prescribing and frailty
- challenges of polypharmacy
- physical changes and its limitations on medication choice
- biochemical changes and its implication on pharmacological options

14.00 Case Study Based Deprescribing in Elderly Patients

Speaker to be announced

- deprescribing in older adults
- polypharmacy and its consequences
- medicines optimisation
- case studies: how and when to deprescribe
- role of MDT in elderly care

15.15 *Comfort Break*

15.30 Mental Health Prescribing And Deprescribing In Older Adults

Anna Mould

Advanced Nurse Practitioner in Older Person's Mental Health Liaison

Trust Non-Medical Prescribing Co-Lead

Hampshire & IOW Healthcare NHS Foundation Trust

- working across boundaries to improve prescribing practice for older people
- mental health prescribing and deprescribing in older adults
- understanding deprescribing of antidepressants, and managing withdrawal symptoms
- case studies: Addressing inappropriate antidepressant prescribing in older adults

16.00 EXTENDED SESSION: Frailty, Polypharmacy & Prescribing

Dr Clifford Lisk

Consultant Physician, Acute and Geriatric Medicine

Royal Free NHS Foundation Trust

- frailty and its relation to polypharmacy
- what an aged body does to a drug and a drug does to an aged body
- why patients end up with extensive polypharmacy
- improving medicines optimisation
- prescribing for patients with malnutrition
- how to deprescribe
- deprescribing tools
- a word on herbal medicine use in older adults

16.45 Prescribing, Medication Management and Falls

Aleksandra Howell

Senior Clinical Pharmacist, Oxford University Hospitals NHS Trust and

Clinical Lead West

England Academic Health Science Network

- understanding which medications contribute to falls and syncope
- assessing medications within falls services and clinics
- deprescribing and falls
- understanding when falls is a side effect of medication

17.00 *Questions and Answers, then Close*

There will be time after each session for Questions and Answers

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Venue

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Date

Tuesday 29th April 2025

Conference Fee

- £295 + VAT (£354.00) for NHS, Social care, private healthcare organisations and universities.
- £250 + VAT (£300.00) for voluntary sector / charities.
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