

CHARMER MANAGEMENT GROUP



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CompreHensive geriAtRician-led MEDication Review (CHARMER)

A programme grant to develop and test a practitioner behaviour change intervention for deprescribing in the hospital setting

Wednesday 22 September 2021

MINUTES

1. Attendees:

Debi Bhattacharya (Chair)	DB	Katherine Murphy	KM
David Alldred	DA	Martyn Patel	MP
Allan Clark	AC	Sion Scott	SS
Janet Gray	JGray	Caroline Smith	CS
Jennie Griffiths	JGrif	Dave Taylor	DTay
Caroline Hill	CH	Sujata Walkerley	SW
Ian Keller	IK	David Wright	DW
Jackie Martin-Kerry	JM		

2. Apologies: Bethany Atkins (BA), Victoria Keevil (VK), Martin Pond (MPo), Erika Sims (ES), Jo Taylor (JT), David Turner (DT), Miles Witham (MW)

3. Minutes of previous meeting 7 July 2021

The minutes were approved by the group and will be published to the CHARMER website.

Discussion arising from the minutes:

- With regard to the proposed assessment of cases by independent geriatricians, DB advised the group that one of the aims of the feasibility study (WP3) would be to decide how best to go about this. A pragmatic approach would be required, using Standard Operating Procedures which will be developed after ethics approval has been given.
- The group noted that the project had achieved good levels of engagement from hospitals via expressions of interest for future work packages. The possibility of an event with CRN had not

been progressed due to Covid-19, and the fact that dealing with the pandemic is the main priority for hospitals for the time being.

DB would discuss the situation with MW and MP outside the meeting and feedback at the next meeting of the PMG.

- DB confirmed that the recording of videos of team members are a work in progress
- For the next NIHR report it would be necessary to include details of outputs, and the group members were asked to let the team know of any relevant conferences etc.

Action - All

4. Feasibility outcomes

DB advised the group that WP1 engagement with participants was now complete and she shared details of the 13 suggested/proposed outcomes, briefly explaining each and asking for the group's comments on them.

The group discussed the outcomes one by one and comments were recorded to the document. The group voted on which outcomes should form the Core Outcome Set and 7 outcomes were agreed.

5. Intervention overview and discussion

DB advised the group that all pre-planned intervention development work was now complete. Details of the barriers and enablers to deprescribing were shared with the group alongside the behaviour change techniques suggested to address these.

There was some discussion about whether incentivising geriatricians to deprescribe should come from Trust, directorate or departmental level. The PMG agreed that further work was needed on this subject. Offline discussions with the three Trusts we have been working with would hopefully prove fruitful.

The group briefly discussed the need to engage with senior members of the integrated care systems and others involved in primary care.

6. WP progress update – please refer to newsletter

7. Changes to the team

- 4 new PPI members have recently joined the team – Janet Gray, Jennie Griffiths, David Taylor and Sujata Walkerley.
- DW and SS would be leaving UEA and joining University of Leicester on 1 October. DB and DT would be moving to Leicester in January 2022. The CHARMER project will go to Leicester with DB but all meetings will remain virtual.
- CS is back working on the project for now, until she begins work on her PhD in November.
- The project is currently understaffed. The Trial Manager (in CTU) will be in post from 1 October (1fte). She will lead work on the Programme Steering Committee & work on the WP3 protocol. However the project will still be 2.6 fte staff down, and so far we have been unable to recruit to two positions.
- The project will advertise for a 1 fte RA to work on WP2 and WP3. The advert will be 'tweaked' and the appointment will be at University of Leicester.

8. Research timetable

The updated Gantt chart was shared with the group and it was noted that although some elements had taken slightly longer than expected, the project is still on track to deliver as planned.

The Programme Steering Committee agreed that the Feasibility Study (WP3) could be delayed until Spring 2022. Although the groundwork and preparation would be complete and ready, it would not be possible to deliver WP3 in hospitals in January 2022 as planned because of the Covid-19 pandemic. A no-cost extension would allow for this delay.

9. Budget

The latest expenditure report was presented to the group. There had been no unexpected expenditure, and it was anticipated that there would be an underspend in some areas (eg travel).

10. Engagement and dissemination plans and activities

It was agreed that the high-level stakeholder figure should now be added to the website – **Action CH.**

11. Patient involvement

Km advised the group that the four new PPI members are very engaged and influential. The new members introduced themselves.

12. Risk Register / horizon scanning

DB shared the document and advised that the issue of insufficient staff had been added to the risk register recently as a risk to project delivery.

It was noted that the overprescribing review report had been published today – the team would be looking at this carefully.

13. Any other business

None

14. Date of next meeting Wed 12 Jan 2pm