NHS Borders

Communications & Engagement

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Freedom of Information request 192-22

Request and Response

Q1. For the financial years 2019/2020, 2020/2021 and 2021/22 how much did you spend on:

Osteoporosis medication with:

i) Oral bisphosphonates (alendronate, risedronate, ibandronate)

	ALENDRONATE	IBANDRONATE	RISEDRONATE
2019/2020	£37,773.49	£3,763.88	£6,682.53
2020/2021	£40,675.77	£3,598.91	£7,765.80
2021/2022	£34,949.18	£3,012.41	£8,527.29

ii)Denosumab

2019/2020	£3,491.58	
2020/2021	£2,815.72	
2021/2022	£3,984.44	

iii)DXA scans. Please provide:

- i) budget/spend for DXA
- a. 2019/2020
- b. 2020/2021
- c. 2021/2022

NHS Borders do not have a specific budget for DEXA scans therefore this data is not held under Section 17 of the FOI(S)A 2002.

- ii) Number of scans performed:
- a. 2019/2020 1333
- b. 2020/2021 **680**
- c. 2021/2022 1370
- iii) DXA VFA (vertebral fracture assessment) scans commissioned
- a. 2019/2020
- b. 2020/2021
- c. 2021/2022

All DEXA patients get an IVA with a few exceptions as follows;

- Patients under 40
- Breast cancer patients on Aromatase Inhibitors (AI)
- Prostate cancer patients on Hormone therapy

The above group is a minority and if anyone within that group has a history of back pain or a T-score of -2 or less we would perform the IVAs.

Q2. What proportion of GP practices have a systematic process in place (e.g., regular data search) for identifying people who require a fracture risk assessment?

This information is not held by NHS Borders. This data would be accessible from individual GP practices therefore under Section 25 this data is not available. Under Section 15 Duty to provide advice and assistance please find a link to information on GP practices within the NHS Borders area: http://www.nhsborders.scot.nhs.uk/patients-and-visitors/local-services-directory?page=1&cat=3&lat=55.5964521&lon=-2.740281399999958

- Q3. What proportion of GP practices have osteoporosis identification/management tools embedded into their electronic patient management systems?
- a) FRAX
- b) QFracture
- c) Other (please state)

There are no osteoporosis management tools available locally on our EMIS Primary & Community Service patient management system.

- Q4. For financial years 2019/20, 2020/2021 and 2021/22.
- a) What proportion of patients across your Health Board aged 50 and over had a fracture risk assessment using FRAX or QFracture in line with NICE / NOGG recommendations?
- i. 2019/2020 **80%**
- ii. 2020/2021 **80%**
- iii. 2021/2022 80%
- b) What proportion of these were referred for a DXA scan?
- i. 2019/2020
- ii. 2020/2021
- iii. 2021/2022
- Q5. What proportion of practices have an identified clinician or other healthcare professional with special interest in osteoporosis?

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Q6. How much of your Additional Role Reimbursement Scheme funds have you invested into community pharmacists?

This is an NHS England initiative, and is not applicable in Scotland. Therefore under Section 17 this data is not held.

Q7. What proportion of GP practices have access to a community pharmacist (CP)?

All GP practices within NHS Borders have access to a Pharmacotherapy Service.

i. What proportion of these CPs have a designated role in identifying/managing osteoporosis?

0%

ii. What proportion of these CPs routinely perform osteoporosis medication reviews?

0%

Q8. What proportion of GP practices have access to a First Contact Practitioner (FCP)?

100% of GP practices in Borders have access to FCP. This is based on their population size and some have FCP for a day, while others have FCP 3 days a week. There is some overflow in the hybrid system and care is delivered in a combination of face-to-face or telephone triage.

i. What proportion of these FCPs have a designated role in identifying/managing OP?

All advanced practitioners have the responsibility to identify the possibility of osteoporosis in all presenting patients with pathologies fitting the criteria or high suspicion of osteoporosis. FCPs refer for DEXA scans where indicated. As a first contact triage service FCPs refer onwards for ongoing management but do add advice and education re. weight bearing exercises for the benefit of osteoporosis, either prevention or as part of management.

As this is a relatively new service FCPs always welcome ongoing training and support to assist and streamline patient care and pathways and are very appreciative of keeping conversations going as to how they can improve patient education and onward referrals.

Q9. What proportion of patients being treated in primary care with osteoporosis medications have had a review of their medication within 12 months of treatment initiation?

This information is not held by NHS Borders. Therefore under Section 17 of the FOI(S)A we cannot provide.

Q10. What proportion of patients being treated in primary care with oral bisphosphonate therapy have had their treatment reviewed at 5 years of treatment?

This information is not held by NHS Borders. Therefore under Section 17 of the FOI(S)A we cannot provide.

If you are not satisfied with the way your request has been handled or the decision given, you may ask NHS Borders to review its actions and the decision. If you would like to request a review please apply in writing to, Freedom of Information Review, NHS Borders, Room 2EC3, Education Centre, Borders General Hospital, Melrose, TD6 9BS or foi.enquiries@borders.scot.nhs.uk.

The request for a review should include your name and address for correspondence, the request for information to which the request relates and the issue which you wish to be reviewed. Please state the reference number **192-22** on this request. Your request should be made within 40 working days from receipt of this letter.

If following this review, you remain dissatisfied with the outcome, you may appeal to the Scottish Information Commissioner and request an investigation of your complaint. Your request to the Scottish Information Commissioner should be in writing (or other permanent form), stating your name and an address for correspondence. You should provide the details of the request and your reasons for dissatisfaction with both the original response by NHS Borders and your reasons for dissatisfaction with the outcome of the internal review. Your application for an investigation by the Scottish Information Commissioner must be made within six months of your receipt of the response with which you are dissatisfied. The address for the Office of the Scottish Information Commissioner, Kinburn Castle, Doubledykes Road, St Andrews, Fife.