

CV: ALESHA SMITH		
Name	Alesha Smith	
Nationality	New Zealand	
Country/regional experience	New Zealand, Australia, UK	
Relevant qualifications		
Academic qualifications	<ul style="list-style-type: none"> • PhD, University of Queensland, Australia, 2009. • MSc, University of Otago, 2005. • BSc, University of Otago, 2003. 	
Professional organisation memberships	<ul style="list-style-type: none"> • Member, Health informatics New Zealand (HINZ) • Member, International Society for Pharmacoepidemiology (ISPE) • Member, International Society for Pharmacoeconomics and Outcomes Research (ISPOR) • Member, The Health Services Research Association of Australia and New Zealand (HSRAANZ) 	

Professional experience

Alesha has more than 10 years' experience in the field of health as an academic and consultant in New Zealand, Australia and the UK. She has provided research and education solutions and outputs for a wide range of organisations including national and global health bodies, government departments, universities and private companies.

Alesha has comprehensive research and analysis skills. She has published over 25 peer reviewed journal articles and book chapters and is the lead author on the majority of them. Alesha uses a mixed methods approach to most of her research utilising qualitative and quantitative research methods. She has experience using databases, and statistical packages and has vast experience using the national data collections in New Zealand. Alesha has a unique skill in bridging the gap between research and policy/practice, with many of her projects involving these dynamics. Nearly all the projects that Alesha undertakes, help inform policy and practice with outcomes submitted to funders as reports. Being a research active academic and consultant, she has vast experience in project management.

Project experience

Principal Investigator, Reducing polypharmacy in primary care, HRC, 2014 – 2018. Alesha is currently the Principle Investigator on a HRC partnership grant, an innovative study which is aiming to integrate patient data to optimize medicines and reduce polypharmacy in New Zealand (a national health priority).

Named investigator, Randomised controlled trial of prescription charges: Feasibility study, HRC, Current. This is a feasibility study to investigate the impact of providing free medicines to deprived populations in New Zealand. This study had to determine how to recruit participants who would most benefit from this project and provide them with the mechanisms to obtain free medicines. This involved working with a number of community organisations and local clinicians.

Project Lead, Development of national guidelines for 'Diagnosis and Treatment of hypertension and pre-eclampsia in pregnancy', Ministry of Health, New Zealand, 2015 – current. This project is a Ministry of Health, New Zealand initiated and funded project for the development of a national guideline for the diagnosis and treatment of hypertension and preeclampsia in pregnancy. Alesha had oversight and was responsible for the day to day running of this project. This guideline, which will soon be released to all DHBs in New Zealand, will be the leading guide used across New Zealand for this condition. This guideline will be

endorsed by key organisations e.g. the royal college of general practitioners and the Minister of Health. To ensure that the guideline is of high quality we have developed a very structured plan and used a systematic approach to obtain an up-to-date literature search and analysing the evidence using the GRADE approach. We have used a very similar method to that proposed in this study including using the Downs and Black scoring system and determining measures such as relative risk. We have also assembled experts and representatives from key stakeholder groups from across the country to form a guideline development team. This team has reviewed the scoping document and plan produced by the team at Inquisit and provided feedback to ensure that the evidence is of high quality and also aligns to current clinical practice.

Consultant Research Manager, Bi-monthly provision of data analyses (using the Pharmaceutical Collection and National Minimum Dataset) and evidence based, best practice reports to all general practices in New Zealand, bpacnz (PHARMAC funded, 2013 – current. Alesha is contracted to bpacnz to undertake the bi-monthly analyses (for PHARMAC contract) of these databases to produce reports to primary care around pharmaceutical use and lab test ordering (DHB contract). Alesha is responsible for analysing and producing prescribing reports for all prescribers in New Zealand and measuring the impact of programs undertaken through bpacnz and its sister organisations. She has experience working on a day-to-day basis with this data in SQL and understands its limitations and has experience interpreting what these data mean in relation to these caveats. She has strong statistical background and has worked with PHARMAC analysts in the past to ensure interpretations of the data are correct. Alesha has extensive knowledge of working with and linking the Pharmaceutical Collection, National Minimum Dataset and the Laboratory Claims Collection (datasets that span the whole of New Zealand population health records).

Evaluator, Evaluation of Community Pharmacy Services Agreement In 2014 – 2015. Alesha was funded by the New Zealand pharmacy education and research foundation to evaluate the new community pharmacy services agreement in New Zealand. This required surveying all 900+ pharmacies in New Zealand to determine the impact the recent pharmacy service model has had on workforce and provision of care in New Zealand. This work is currently submitted to a primary care journal for review and is informing the development of curriculum at Pharmacy Schools in New Zealand.

Evaluator, Evaluation of the New Zealand Formulary, 2013 and 2015. Alesha completed the evaluation of the New Zealand Formulary (a New Zealand wide medicines resource for health professionals) post implementation for the Adult formulary and Children's formulary. This involved surveying more than 1000+ users and acting on feedback to improve the resource usability and relevance.

Study Coordinator, Evaluation of Nurse and pharmacist prescribing in England, 2009 – 2011. This project was commissioned by the United Kingdom Department of Health to evaluate nurse and pharmacist independent prescribing in England. Alesha was responsible for the day-to-day running and management of the project, including study design, implementation, analyses and reporting. She was responsible for the co-ordination of staff and leading experts working on the study and ensuring that the project met the contracted milestones and objectives.

This study is the largest study to date evaluating non-medical prescribing. It involved a number of different study aspects including: identifying the scope and scale of prescribing by nurses and pharmacists; the current prescribing models; the safety and quality of their prescribing; patients experience of the impact of non-medical prescribing; identifying changes to be made to educational programmes for non-medical prescribing and clinical governance; and risk management of non-medical prescribing. It involved collaborating with a wide range of stakeholders and had a multi-disciplinary working group advising on the project. The recommendations from this study have been used for policy development and change in the United Kingdom. (<http://eprints.soton.ac.uk/184777/3/ENPIPfullreport.pdf>).

Presentations

1. Reith, D.; Simpson, B.; Medicott, N.; Smith, A., Dabigatran Exposure and Outcomes: A PK/PD/PV Study. 2017; Vol. 39, p e8.
2. Simpson, B.; Reith, D.; Medicott, N.; Smith, A., Choice of Renal Function Estimator May Affect Adverse Outcomes with Dabigatran. 2017; Vol. 39, p e7.
3. Simpson, B.; Reith, D.; Medicott, N.; Smith, A., Utilisation of New Zealand Primary Care Electronic Data to Guide Clinical Decision Support System Design—A Retrospective Cohort for Dabigatran. 2017; Vol. 39, p e7.
4. Smith A, Young A. Polypharmacy: What's the problem and how do we fix it? Canberra, May 2016
5. Raghunandan R, Smith A. Non-medical prescribing in New Zealand—An update on prescribing rights, service delivery models and training. National Medicines Symposium. Canberra, May 2016
6. Young A, Tordoff J, Smith A. Patients' requirements for design and content of medicine information leaflets. Canberra, May 2016
7. Alexa J, Smith A. Investigation of the current non-medical prescribing in New Zealand. National Medicines Symposium. Canberra, May 2016
8. Simpson B, Reith D, Medicott N, Smith AJ, Tilyard M. New Zealand formulary for Children – a case study of national paediatric formulary development. Archives of Disease in Childhood. January 2016
9. Binti Mohamad Noor, Z., Smith, AJ.. Community Pharmacy Intervention in Managing Sleep Disorders: Customers' Beliefs and Opinions. 12th Malaysian Pharmaceutical Society Pharmacy Scientific Conference, At Taylor's University, Sunway, Malaysia, Volume: 2. November 2015.
10. Binti Mohamad Noor, Z., Smith, AJ., Smith, S., Nissen, L. Optimising Community Pharmacy Intervention in Managing Sleep Disorders: Extended Role of Community Pharmacists. 12th Malaysian Pharmaceutical Society Pharmacy Scientific Conference, At Taylor's University, Sunway, Malaysia, Volume: 2 (1). November 2015.
11. Niyomnaitham N and Smith AJ. Utilization and government subsidized cost of antisecretory drugs among elderly in Australia and New Zealand. 30th ICPE, Taiwan Oct 2014
12. Ng M, Coombes J, Smith AJ. Prevalence of potentially inappropriate prescribing in residential aged care facilities. Medicines Management Conference, Darwin Sep 2014.
13. Smith A, Dovey S, Lloyd H, Tilyard M. The prevalence of chronic conditions in New Zealand primary care patients. National Medicines Symposium, Brisbane, May 2014
14. Niyomnaitham S, La Caze A, Smith AJ. Changes in the prescribing of rosiglitazone and pioglitazone following safety warnings. National Medicines Symposium, Brisbane, May 2014
15. Niyomnaitham S, Page A, La Caze A, Whitfield K, Smith AJ. Changes in coprescribing antisecretory drugs with clopidogrel in clinical practices. Australasian Pharmaceutical Sciences Association (APSA) Conference, Dunedin, Dec 2013
16. Smith AJ. Non-Medical Prescribing In New Zealand: An update. 8th Health Services and Policy Research Conference. Wellington, Dec 2013
17. Noor, ZM, Smith, AJ, Smith, SS & Nissen, LM 2013, 'Identifying undiagnosed sleep disturbances among self-reported 'good sleepers' – future role of community pharmacists?' FIP World Congress, Dublin, 31 August – 5 September 2013.
18. French A, Peel N, Smith A, Gray L, Hubbard R. The Drug Burden Index and its Association with Frailty, Function and Prescribing Patterns in Australian Hospital Inpatients. The Australian & New Zealand Society for Geriatric Medicine Annual Scientific Meeting (ANZSGM ASM), Adelaide, Jun 2013

Papers

1. Raghunandan R, Tordoff J and Smith AJ. Non-medical prescribing in New Zealand: an overview of prescribing rights, service delivery models and training. Therapeutic Advances in Drug Safety (In press)
2. Tomlin, A. M., Reith, D. M., Woods, D. J., Lloyd, H. S., Smith, A., Fountain, J. S., & Tilyard, M. W. (2017). A pharmacoepidemiology database system for monitoring risk due to the use of medicines by New Zealand primary care patients. Drug Safety. Advance online publication. doi:
3. 10.1007/s40264-017-0579-1

4. Mulvogue, K., Roberts, J. A., Coombes, I., Cottrell, N., Kanagarajah, S., & Smith, A. (2017). The effect of pharmacists on ward rounds measured by the STOPP/START tool in a specialized geriatric unit. *Journal of Clinical Pharmacy & Therapeutics*, 42(2), 178-184. doi: 10.1111/jcpt.12489
5. Young, A., Tordoff, J., & Smith, A. (2017). Regulatory agencies' recommendations for medicine information leaflets: Are they in line with research findings? *Research in Social & Administrative Pharmacy*. Advance online publication. doi: 10.1016/j.sapharm.2017.02.014
6. Fieldwick, D., Smith, A., & Paterson, H. (2017). General practitioners and preconception weight management in New Zealand. *Australian & New Zealand Journal of Obstetrics & Gynaecology*. Advance online publication. doi: 10.1111/ajo.12609
7. Noor ZM, Smith AJ, Smith SS, Nissen LM. A feasibility study: Use of actigraph to monitor and follow-up sleep/wake patterns in individuals attending community pharmacy with sleeping disorders. *J. Pharm. Bioallied Sci.* 2016 Jul-Sep;8(3):173-80.
8. Williamson D, Roos R, Verrall, Smith A, Thomas M. Trends, demographics and disparities in outpatient antibiotic consumption in New Zealand: A national study. *Journal of Antimicrobial Chemotherapy* (in press)
9. Young A, Tordoff J, Dovey S, Reith D, Lloyd H, Tilyard M, Smith A. Using an electronic decision support tool to reduce inappropriate polypharmacy and optimize medicines: Rationale and Methods. *JMIR Research Protocols*. 2016 Jun 10;5(2):e105.
10. Williamson DA, Ritchie SR, Best E, Upton A, Leversha A, Smith AJ, Thomas M. A bug in the ointment: topical antimicrobial usage and resistance in New Zealand. *The New Zealand Medical Journal* 2015, 128 (1426)
11. Hubbard R, Peel N, Scott I, Martin J, Smith A, Pillans P, Poudel A, Gray L. Polypharmacy among Older Inpatients in Australia. *The Medical Journal of Australia*. 2015; 202 (7):373-377
12. Tinelli M, Blenkinsopp A, Latter S, Smith A, Chapman S. Survey of patients' experiences and perceptions of care provided by nurse and pharmacist independent prescribers in primary care. *Health Expectations* 2015, 18 (5):1241-1255
13. Thomas M, Tilyard M, Smith AJ. Rising antimicrobial resistance: a strong reason to reduce excessive antimicrobial consumption in New Zealand. *New Zealand Medical Journal* 2014, 127(1394):72-84.
14. Niyomnaitham S, Page A, La Caze A, Whitfield K, Smith AJ, Utilisation trends of rosiglitazone and pioglitazone in Australia before and after safety warnings. *BMC Health Services Research* 2014, 14:151
15. Noor ZM, Smith A, Smith S, Nissen L. A study protocol: a community pharmacy-based intervention for improving the management of sleep disorders in the community settings. *BMC Health Services Research* 2014, 14:74
16. Smith, A., Latter, S., Blenkinsopp A. Safety and quality of nurse independent prescribing: a national study of experiences of education, continuing professional development and clinical governance in place in England. *Journal of Advanced Nursing*. 2014, Nov; 70 (11): 2506-17
17. Noor ZM, Smith A, Smith S, Nissen L. Feasibility and acceptability of wrist
18. actigraph in assessing sleep quality and sleep quantity: a home-based pilot study in healthy volunteers. *Health*, 2013. 5: 63-72
19. Latter, S., Smith, A., Blenkinsopp, A., Nicholls, P., Little, P., Chapman, S. Are nurse and pharmacist independent prescribers making clinically appropriate prescribing decisions? An analysis of consultations using the Medication Appropriateness Index. *Journal of Health Services Research & Policy*, 2012. 17(3):149-156.
20. Gerard, K., Tinelli, M., Latter, S., Blenkinsopp, A., Smith, A. Valuing the extended role of prescribing pharmacist in general practice: Results from a discrete choice experiment. *Value in Health*, 2012. 15: 699-707.
21. Latter S., Blenkinsopp A., Smith A., Chapman S. et al. Evaluation of nurse and pharmacist independent prescribing. Department of Health Policy Research Programme Project Report (UK). 2011. <http://eprints.soton.ac.uk/184777/>