

To: The Community Care Health and Wellbeing Thematic Board

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Report by:

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TITLE:

PHARMACY SHARED CARE PROJECTS

1. Summary

- 1.1 This report describes the 'Smokefree Pharmacy Shared Care Pilot' and the Making Advice Work Financial Literacy Project both of which have been carried out in Lloyds Tannahill pharmacy in Ferguslie park and supported by the RHSCP Public Health pharmacist. Both projects demonstrate community pharmacy as ideally placed to support vulnerable people and reduce barriers to improving health outcomes in our most deprived communities.

2. Recommendations

- 2.1 The Community Care Health and Wellbeing Board is asked to note the outcomes of both the Smokefree Pharmacy Shared Care and the Making Advice Work projects detailed in this report.

3. Background

3.1 Pharmacy Shared Care; an integrated service for Smoking Cessation

The national smoking cessation reviews identified that a priority for NHS health boards would be to deliver a targeted approach to reduce smoking prevalence for people living in areas of high deprivation. Within Renfrewshire, Ferguslie Park was identified as having one of the highest smoking prevalence rates within Scotland (55%). Renfrewshire took the decision to enhance the local Pharmacy service in this area by testing a model of 'shared-care' in order to try and link the high footfall rates of the Pharmacy Smokefree service to the intensive support offered by the Community Smokefree Service. Clients who signed up for the pharmacy scheme were offered intensive support from a community service advisor within the pharmacy setting. A protocol for the delivery and recording of 'shared care' support delivery was developed and agreed between the NHS and Lloyd's pharmacy.

Outcomes

A model of client led shared care delivery of the Smokefree Service within Lloyds Tannahill Pharmacy gave better outcomes than both of the individual services combined.

- The 2013-4 pre implementation data showed that only 14 clients successfully quit for 4 weeks and 1 client for 12 weeks within the pharmacy direct service. Post implementation data recorded between January 2015 to March 2016 showed a marked increase in the number of quitters from the Pharmacy shared-care support model, with 52 clients now having quit for 4 weeks and 49 clients quitting for 12 weeks within this shared-care support model. Furthermore, 96% of clients accessing this shared-care support were from SIMD 1.
- Improvement was also seen in the pharmacy direct service where clients receive pharmacy support only, with an additional 49 recorded quits at 4 weeks and 26 recorded quits at 12 weeks.
- In total 101 clients from Ferguslie quit smoking by 4 weeks and 65 clients by 12 weeks as a result of joint working between Pharmacy and Community Smoking Cessation service.
- Partnership working led to an enhanced relationship with the staff within the pharmacy in relation to Smoking Cessation Services

The programme has provided a new model of service delivery, supported by robust data, which can now be shared with colleagues across the NHS

3.2 Making Advice Work: Financial literacy within community pharmacy setting

Renfrewshire Recovery Across Mental Health (RAMH) received funding from the Scottish Legal Aid Board (SLAB) to develop a service delivering welfare rights and financial literacy support to individuals with mental health problems and addiction issues in Renfrewshire. Clinics held within Renfrewshire Drug Service were not well attended due to poor engagement. It was recognised that Pharmacy staff in Tannahill knew their clients well usually by their first names, creating warm friendly atmosphere and were ideally placed to signpost their clients to the financial literacy service.

Pharmacy staff were supported by the Public Health Pharmacist and encouraged to refer more vulnerable clients to the financial literacy clinic which was held weekly over 12 weeks in the pharmacy consultation room. A small cost of £15 per session for room hire was set aside by Health Improvement (but waived by the pharmacy).

Outcomes

- 21 clients accessed service, including 4 re-engagers who had lost contact.
- 14/21 clients on methadone programme:- fall under “shared care”
- 20/21 expressed difficulties with their mental health
- Most individuals seen on x4 occasions
- X4 clients given benefit advice
- X1 referral to RAMH First Crisis Service; x1 to You First Advocacy

- X2 referrals to RAMH Counselling; x2 to “Control Your Stress” Group
- X1 Crisis Grant Application £60
- X1 Community Care Grant Application £800
- X5 PIP applications made: 2 decisions to date, financial gain of £9,412.20
- 14/21 still currently active clients within service
- Total Actual Financial Gain £10272.20;

These outcomes demonstrate that:

Clinics were accessed appropriately and were well received by service users, RAMH and the pharmacy staff. It is also evident that this low cost targeted project supported vulnerable people to access a service they need and produced real financial gain for those concerned.

Ongoing work:

The RAMH financial literacy worker continues to hold clinics within Tannahill Pharmacy and an additional clinic has recently been set up in a Boots Pharmacy in Johnstone.

4 Conclusion

- 4.1 Overall the outcomes of these pilots demonstrated that partnership working to provide enhanced support between NHS, third sector organisations and community pharmacy services, within an area of multiple deprivation, can increase the number of people accessing the services which will enable them to improve their health and reduce inequalities.