



Healthy Living Pharmacy Project

"Bringing Health & Wellbeing to the Community"

Dr Tarlochan Gill, Chair of Kent LPC

&

Jessica Mookherjee, Consultant in Public Health



Overview

- Why Community Pharmacy?
- Background to Healthy Living Pharmacies – Portsmouth Model
- The HLP Framework
- What is a Healthy Living Pharmacy?
- Services provided by HLP's
- What is known about HLP's nationally?
 - Stop smoking, sexual health, minor ailments, alcohol awareness, MUR & NMS
- Preliminary findings: Dover & Shepway HLP Project
- Summary & Next Steps

Why Community Pharmacy?

- Over 11,000 community pharmacies in the UK;
319 in Kent & Medway; 30 in Dover & Shepway
- 1.6 million visits daily; 1.2 million for health-related reasons
- 99% of the population – even in the most deprived areas - can access a pharmacy within 20 minutes by car; 96% by walking or by public transport
- Pharmacist always on site
- Highly trained: 4 years at University + 1 year practice [5 years!]

Why Community Pharmacy? (cont)

- No appointment necessary; No registration necessary
- Advice provided for free
- 84% of adults visit a pharmacy at least once a year; 78% for health-related reasons
- Adults in England visit on average 14 times a year
- Majority (75%) use the same pharmacy
- Pharmacies see the walking well – ideal location for health promotion and illness prevention
- **Must** work in partnership with GP's to reinforce health related messages

Background: The Portsmouth Model

- Densely populated city
- Population of 205,000
- 4/14 wards are in the lowest quintile for deprivation in England
- Gap in life expectancy for men nearly 8 years
- 1 in 4 adults smoke; higher than the England average
- The rates of alcohol related hospital stays & violent crime are higher than the England average
- 38 community pharmacies
- Birth of HLP via a Framework

HEALTHY LIVING PHARMACY FRAMEWORK

PUBLIC HEALTH MODEL

NEED	CORE	LEVEL 1 <i>Promotion</i>	LEVEL 2 <i>Prevention</i>	LEVEL 3 <i>Protection</i>
Smoking	Health promotion, self care, signposting, OTC supply	Pro-active health promotion. Brief advice, assess willingness, signpost to services	NHS stop smoking service, cancer awareness, Health Check	COPD and cancer risk assessment with referral. Prescriber for stop smoking service.
Obesity	Health promotion, self care, signposting, OTC supply	Pro-active health promotion. Brief advice, assess willingness, signpost to services	NHS weight management service, cancer awareness, Health Check	Prescriber e.g. obesity, CVD, diabetes. Cancer risk assessment
Alcohol	Health promotion, self care, signposting	Pro-active health promotion. Brief advice, assess willingness, signpost to services	NHS alcohol intervention service, cancer awareness, Health Check	Structured care planned alcohol service. Cancer risk assessment
Physical Activity	Health promotion, self care, signposting	Pro-active health promotion. Brief advice, assess willingness, signpost to services	NHS Health Checks, healthy lifestyle consultation service	Structured physical activity plans, activity prescriptions
Sexual Health	Health promotion, self care, signposting, OTC supply	Pro-active health promotion. Brief advice, signpost to services	NHS EHC & chlamydia screen and treat PGD service	Assessment, support, contraception & vaccination
Men's Health	Health promotion, self care, signposting	Pro-active health promotion. Brief advice, signpost to services	NHS Health Check. PGD treatment	PwSI/Prescriber in men's health
Substance Misuse	Health promotion, self care, signposting	Supervised consumption, needle & syringe exchange	Harm reduction, Hep B & C screening	Client assessment, support and prescribing. Hep B vaccination
Other	Health promotion, self care, signposting	Oral health, travel health, sun & mental health awareness	Cancer screening and treatment adherence support, vaccination	Prescriber for travel health and immunisation and vaccination
Minor Ailments	Health promotion, self care, OTC supply, signposting	NHS service (advice and treatment with P & GSL medicines)	NHS service (PGD treatment)	NHS service (prescribed POMs)
Long-term Conditions	Health promotion, self care, signposting, dispensing supply, risk management	Medicines adherence support (targeted Medicine Use Reviews)	Parameter monitoring, clinical review and management	Prescriber/PwSI for LTCs
ENABLERS - QUALITY CRITERIA				
Workforce Development	Core capabilities	Health Trainer Champion Leadership skills	Behavioural change skills Leadership skills	PwSI/Prescriber Leadership skills
Environment	GPhC standards	Advanced IT and premises	Enhanced IT and premises	Enhanced IT and premises
Engagement	Operational	Primary Care	Community	Public Health & Clinical leadership

What is a Healthy Living Pharmacy?

- Consistently delivers a broad range of commissioned services to a high quality
- Promotes healthy living and wellbeing as a core activity (*rebranding*)
- Has a proactive team that supports health and wellbeing
- Has an ethos of the community's health at the centre of what it does
- Has a Healthy Living Champion on site..... (Health Trainers?)
- Is identifiable by the public and other healthcare professionals



Services provided by HLP's

- Medicines Use Review (MUR) & New Medicines Service (NMS)
- Respiratory MUR
- Stop Smoking
- Emergency Hormonal Contraception
- Sexual Health
- Minor Ailments
- Alcohol Identification & Brief Advice
- Weight Management
- ?? In the future, depending on need: NHS Health Checks, vaccination, falls reduction, palliative care.....

How can the HLP approach impact Health and Wellbeing?

- Dispensing of medicines is still an important responsibility of the pharmacist
- Move from a Product focus to a Service focus
- Example Services:
 - Medicines Use Review (MUR)
 - Respiratory MUR's
 - New Medicines Service (NMS)

Why Review Medication?

- Medication is the most common healthcare intervention
- In 2011/12: 885 million Rx's dispensed, costing £8bn
- However, £300-£600m is wasted!
- 30-50% of drugs are not taken as intended
- Many patients stop taking their medicines after 1 month
- 4-5% of hospital admissions are due to preventable adverse drug reactions
- 41% of patients receive little explanation of side effects
 - What can we do?

Medicines Use Review (MUR)

- MUR's are designed to “improve patients knowledge, concordance and use of medicines”
- A confidential discussion in a private consultation room lasting 20-30 minutes
- It complements the annual clinical review conducted by GP's. The outputs are reported to GP's.
- It establishes the patients actual use, understanding and experience of taking medicines
 - resolving poor or ineffective use of medicines
 - identifying side effects and drug interactions that may affect a patients willingness to take medicines

Check if patient can still use the medicine!



Check if patient is ordering and not taking!



~£5000 wasted!

Outcomes: Respiratory MUR's

- 976 patients seen at first intervention; 94 at follow-up
- 35% had not been seen by any HCP in past 12 months
- 70% uncontrolled
- 74% with adherence issues
- 53% referred to their GP
- 27% were smokers, 75% were recruited for stop smoking
- 48% seen on second occasion had improved
- 12 of the 27 smokers quit (44%)

Outcomes: Isle of Wight

- Emergency admission due to asthma reduced by > 50%
- Total hospital bed days due to asthma reduced by >50%
- Deaths due to asthma reduced by 75%
- Prescribing costs reduced
- Lowest rates of emergency admissions and readmissions for COPD



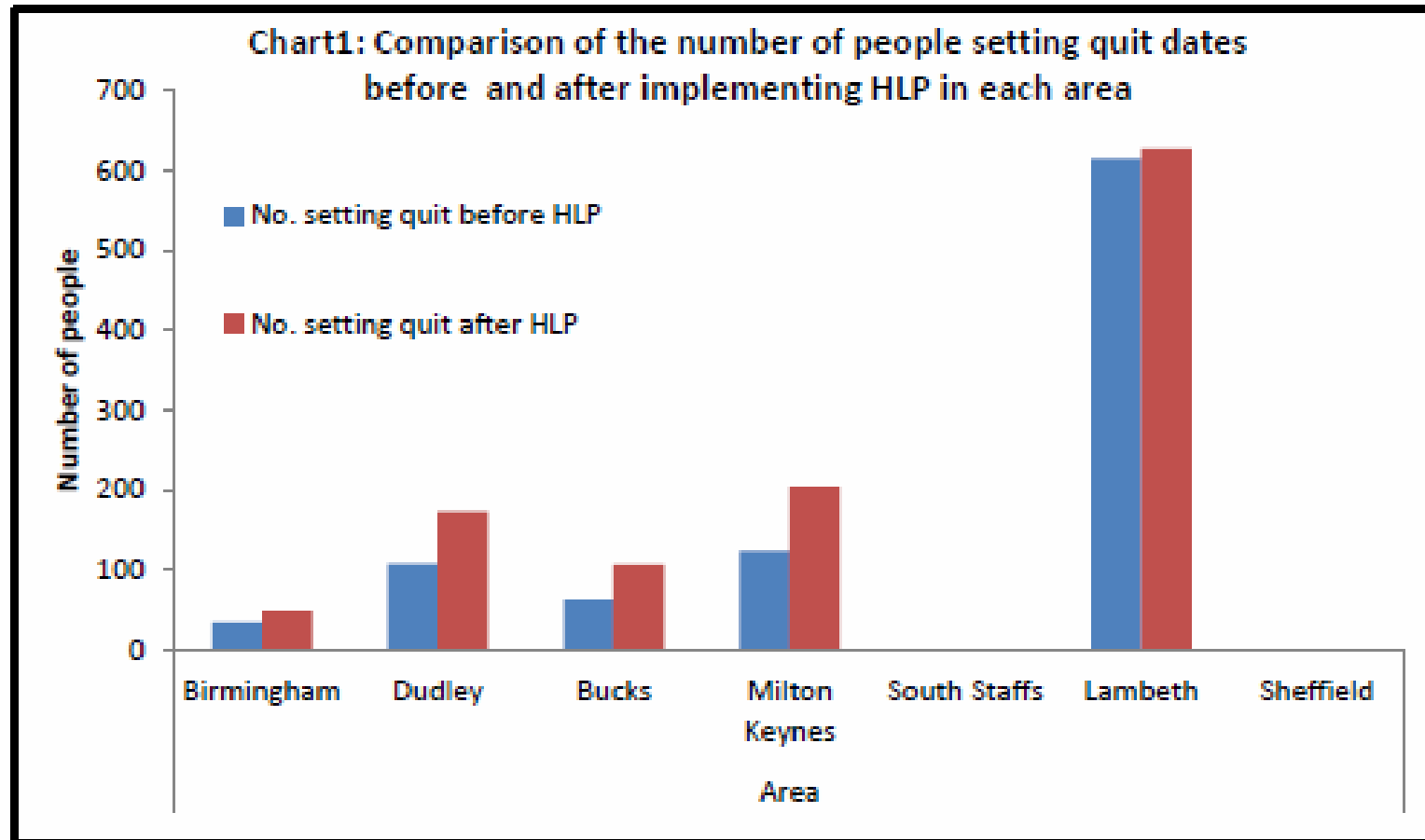
National HLP Project & Evaluation

- Lord Howe on visiting a Portsmouth HLP:

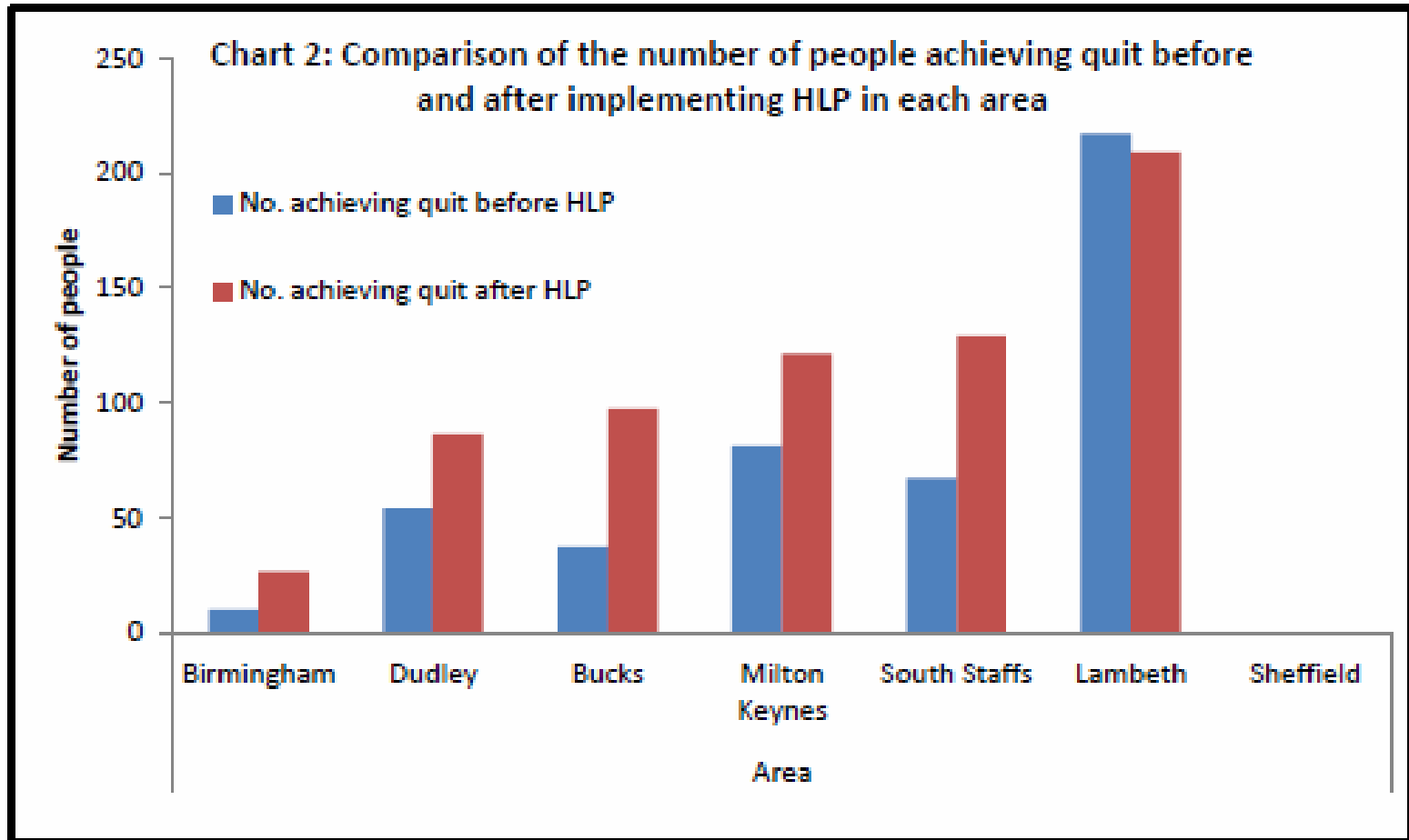
“ Can the results seen in Portsmouth be replicated elsewhere with different demography and geography?”

- National Leadership: Department of Health, Royal Pharmaceutical Society, PSNC, NPA, CCA
- NHS Kent & Medway selected as one of 20 national pathfinders

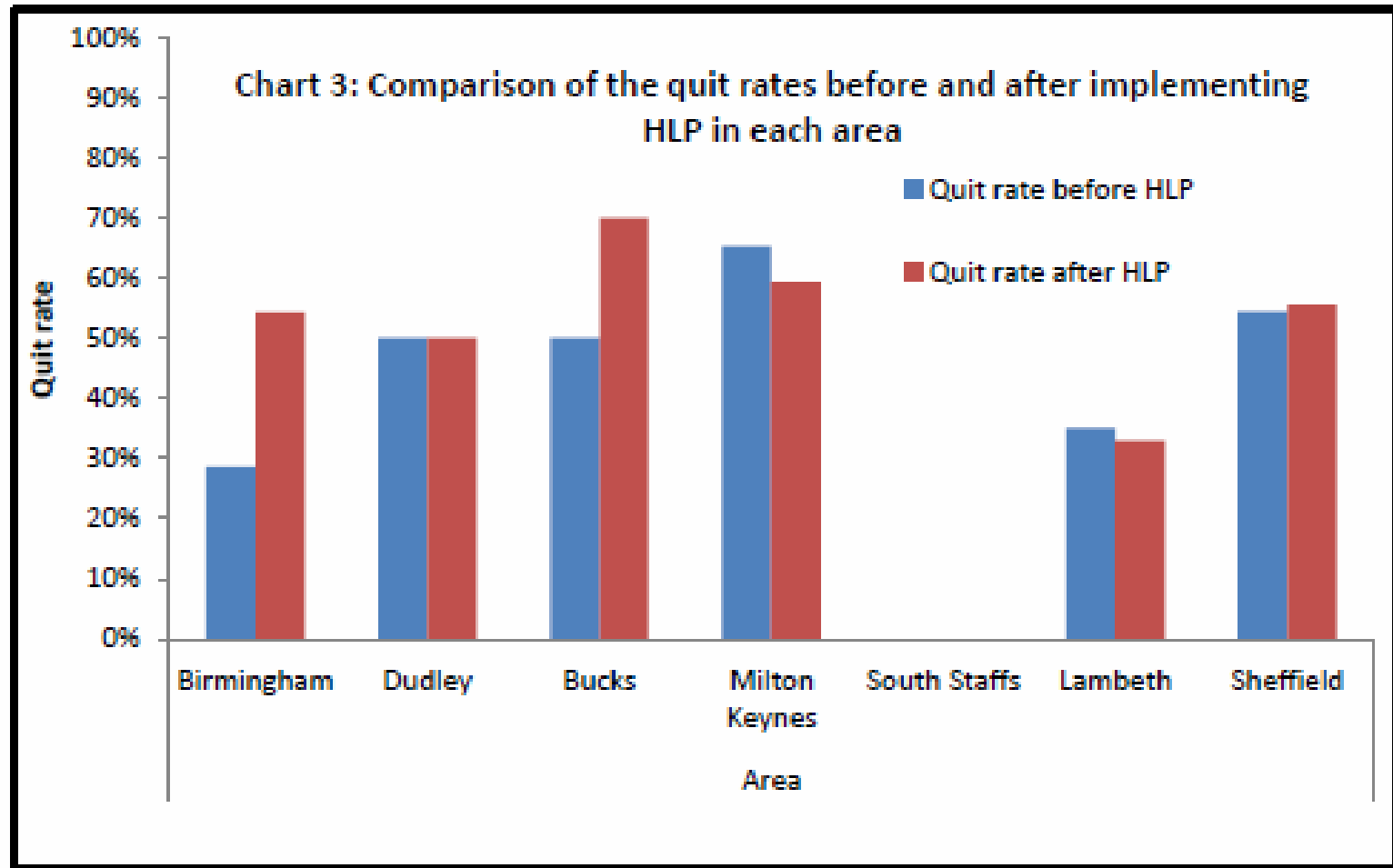
Outcomes for Stop Smoking



Outcomes for Stop Smoking



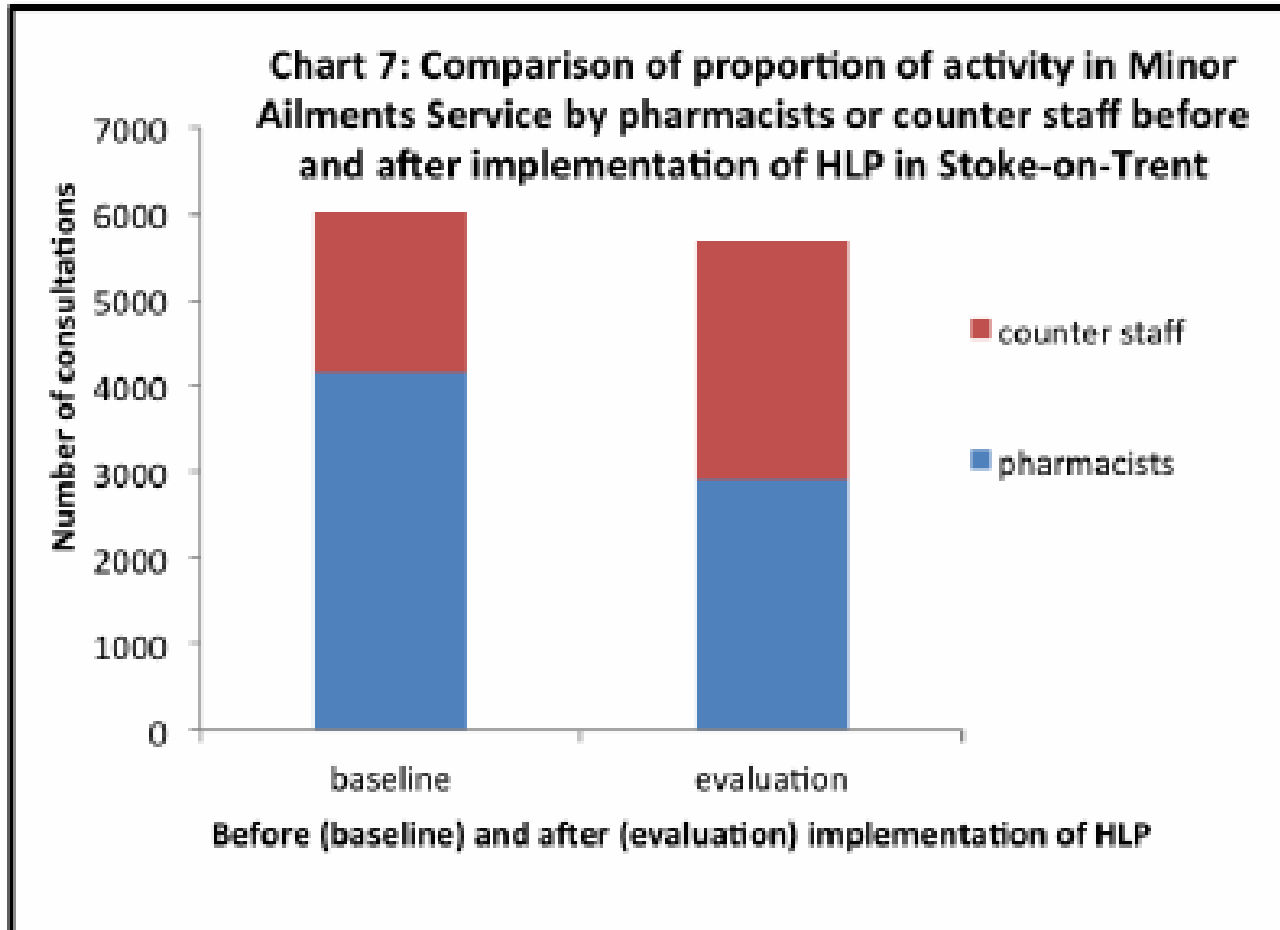
Outcomes for Stop Smoking



Outcomes for Sexual Health

- Buckinghamshire:
 - Pre-HLP, 75% of EHC through pharmacy; Post-HLP increased to 86%
 - Increase in condom distribution by 13%
 - Increase in Chlamydia screening discussion by 16%
- Stoke on Trent:
 - Increase in consultations from 1600 to 1848
 - 29% increase in Chlamydia screening
- East Riding and Hull:
 - Average consultations in HLP 123; non-HLP 73
 - Increased condom distribution HLP 22.6%; Non-HLP 16.1%
- Portsmouth:
 - Average consultations in HLP 160; Non-HLP 85

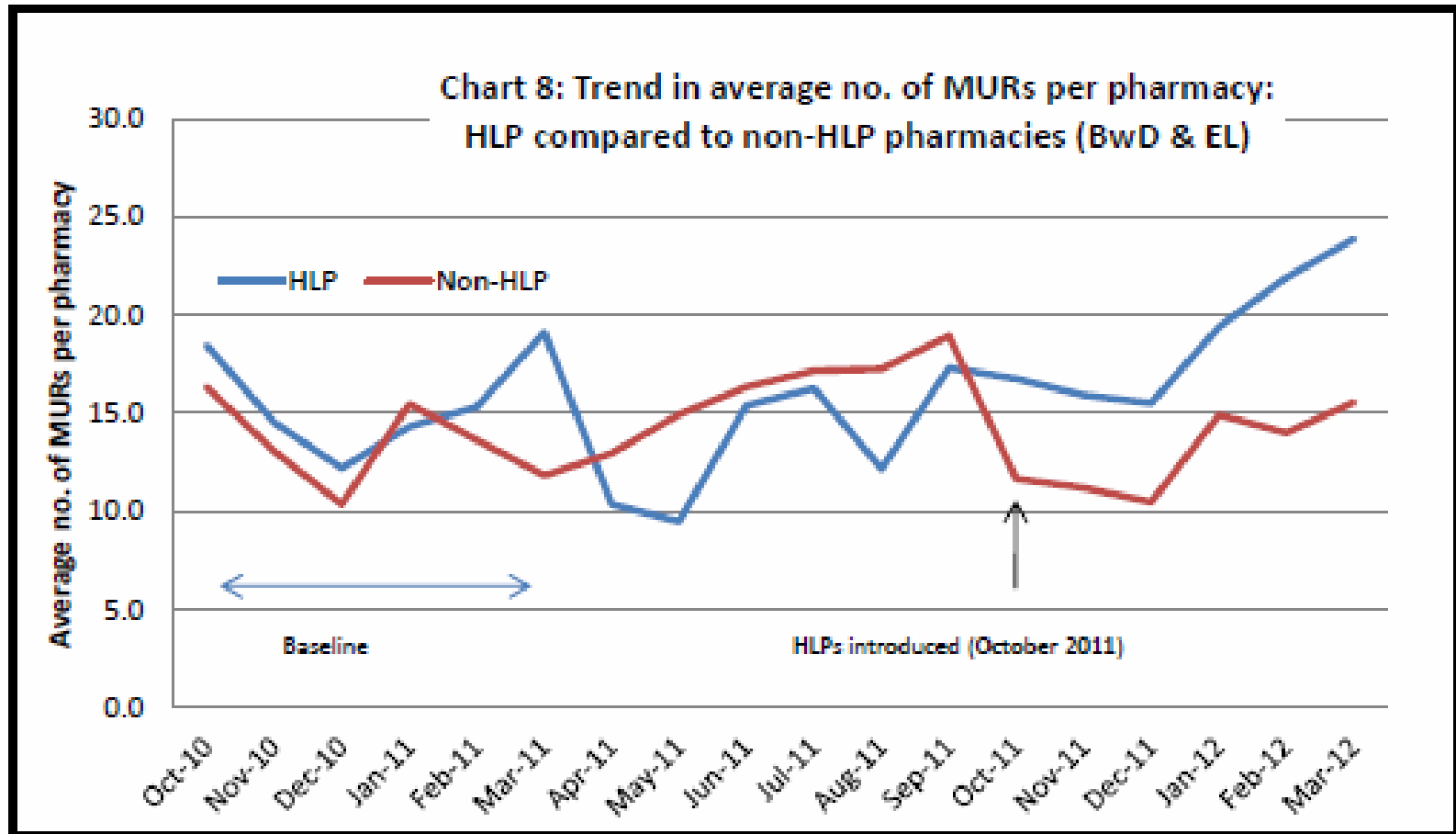
Outcomes for Minor Ailments



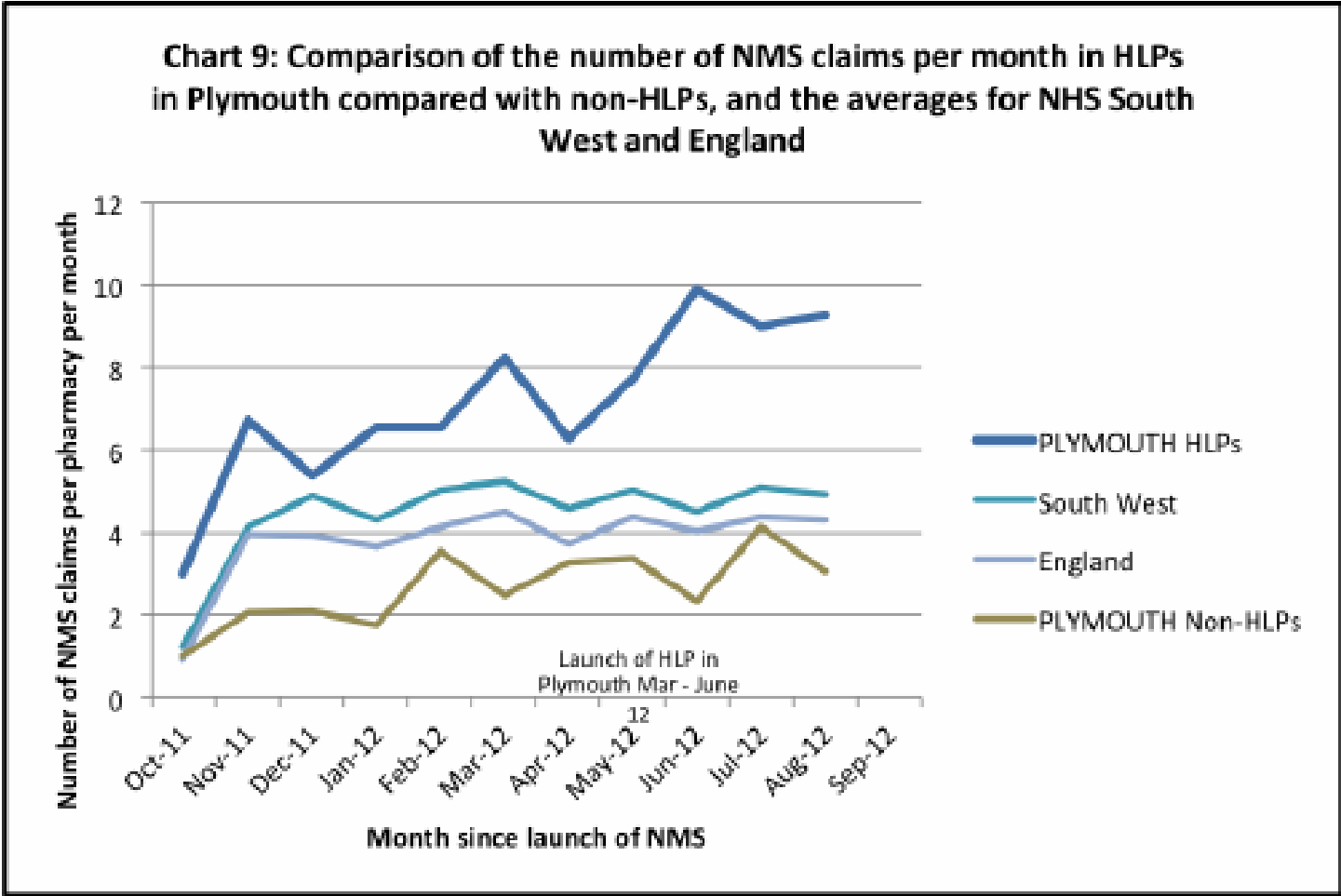
Outcomes for Alcohol Awareness

- Dudley:
 - Pre-HLP, 55 interventions/pharmacy
 - Post-HLP increased to 280 per pharmacy
- Milton Keynes:
 - Non-HLP, 31 per pharmacy
 - Working towards HLP, 38 per pharmacy
 - HLP, increased to 59 per pharmacy
- Portsmouth:
 - Non-HLP, 90 per pharmacy
 - HLP, 218 per pharmacy

Outcomes for Medicines Use Review

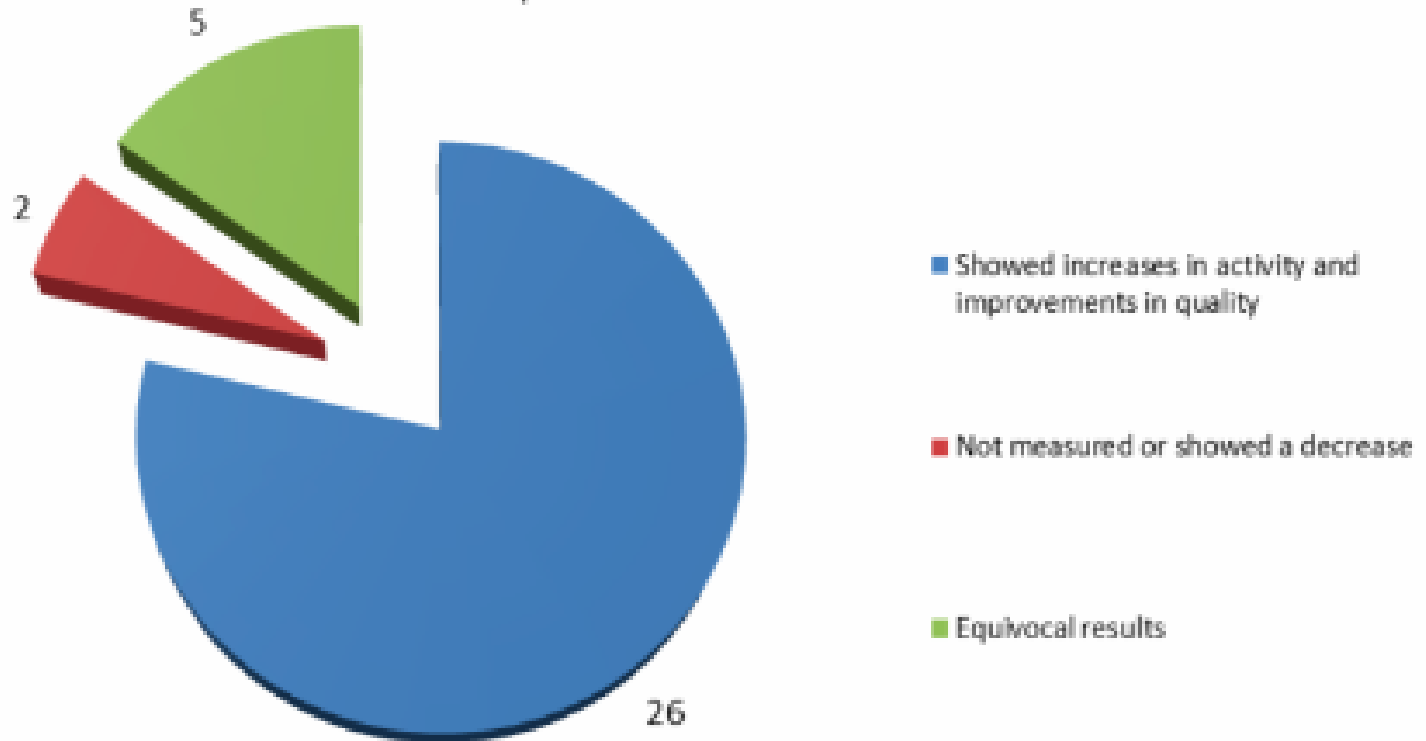


Outcomes for New Medicines Service

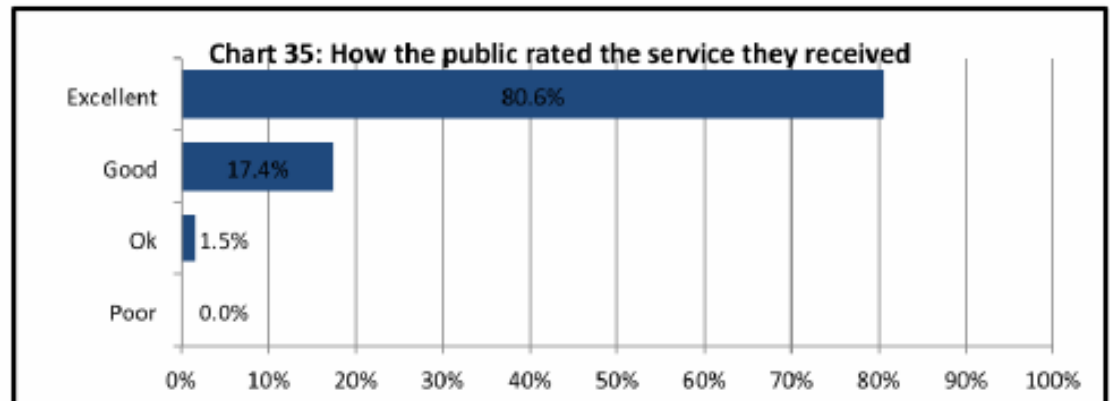
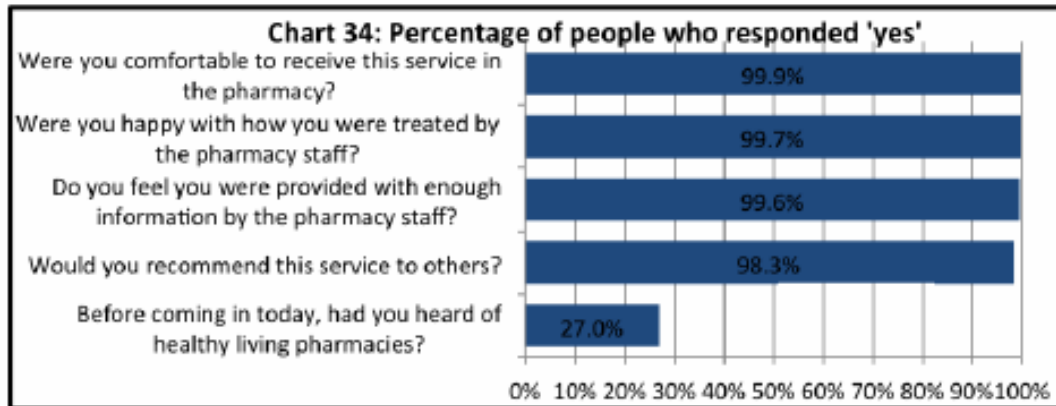


Summary of Service Outcomes

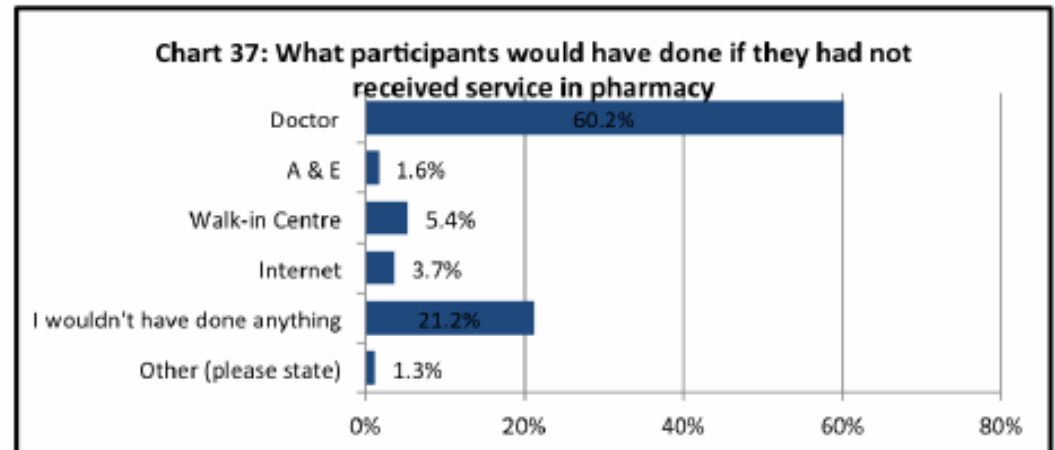
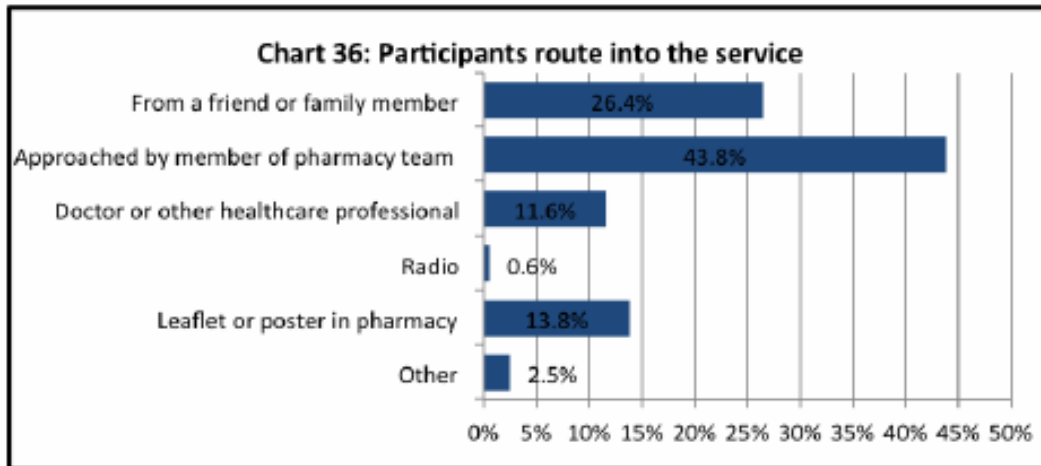
Chart 12: Number of services evaluated and the outcomes from the services following implementation of HLP



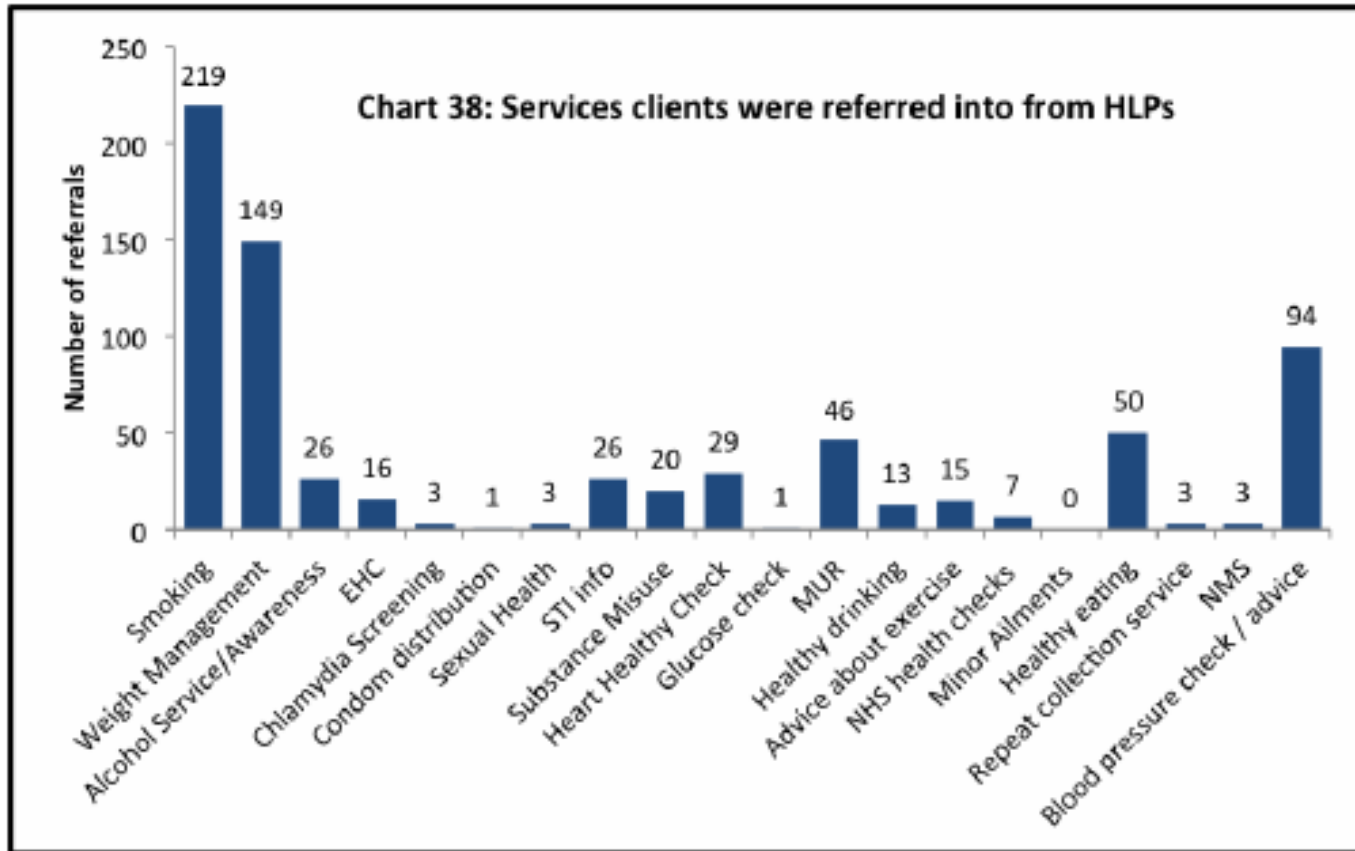
Public Reported Experience



Public Reported Experience



Public Engagement



There were 683 referrals/recommendations into other services offered by pharmacy.

What have we done in Dover & Shepway?

- 3 existing HLP's from Kent Pathfinder programme
- 10 additional ones will be accredited by July 2013
- What made the difference:
 - Dedicated Project Support
 - Networking Events
 - Visited Pharmacies
 - Healthy Living Champion training
 - Leadership training
 - Accreditation by portfolio
 - Worked to enhance quality

Preliminary results for Dover & Shepway?

- Process outcomes (team working, enthusiasm for the project) are very positive
- Actual outcomes will take more time to deliver, but we are confident we will mimic Portsmouth
- NOTE: Portsmouth took 2-3 years and several million (£) to deliver their outcomes.
- **We could not have achieved the local HLP programme without the SKC Health & Wellbeing Board support.**

In summary, Healthy Living Pharmacy..

- Provides a commissioning framework linked to local needs
- Is a quality mark
- Is about the entire pharmacy team
- Is an enabling framework to engage, inspire and motivate
- Is a recognisable brand
- Is a wrapper linking all community pharmacies
- **Brings community pharmacy teams together with other healthcare providers with a common vision and goal**



Next Steps

- Increase the visibility of HLP's to the public – marketing
- Facilitate collaboration between HLP's and GP's to 'target' patients for better outcomes