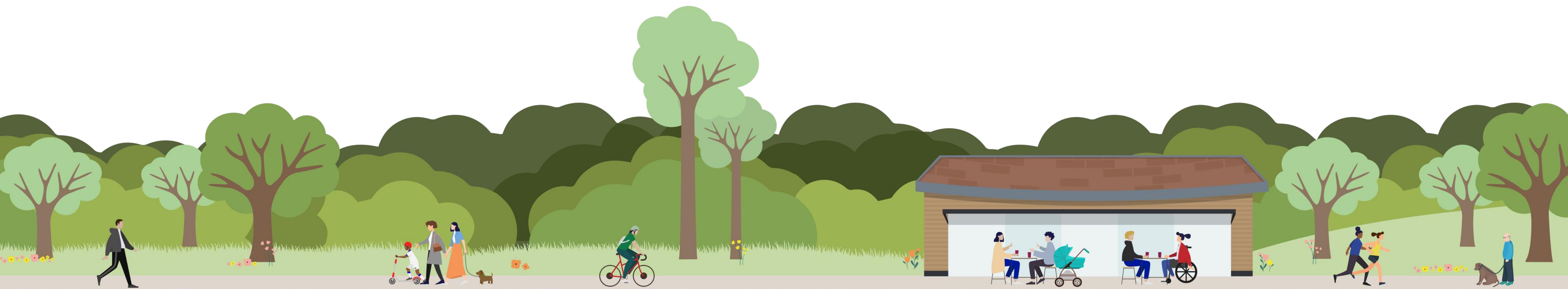


Delivering through advanced and specialist pharmacists -peer support and advice hub

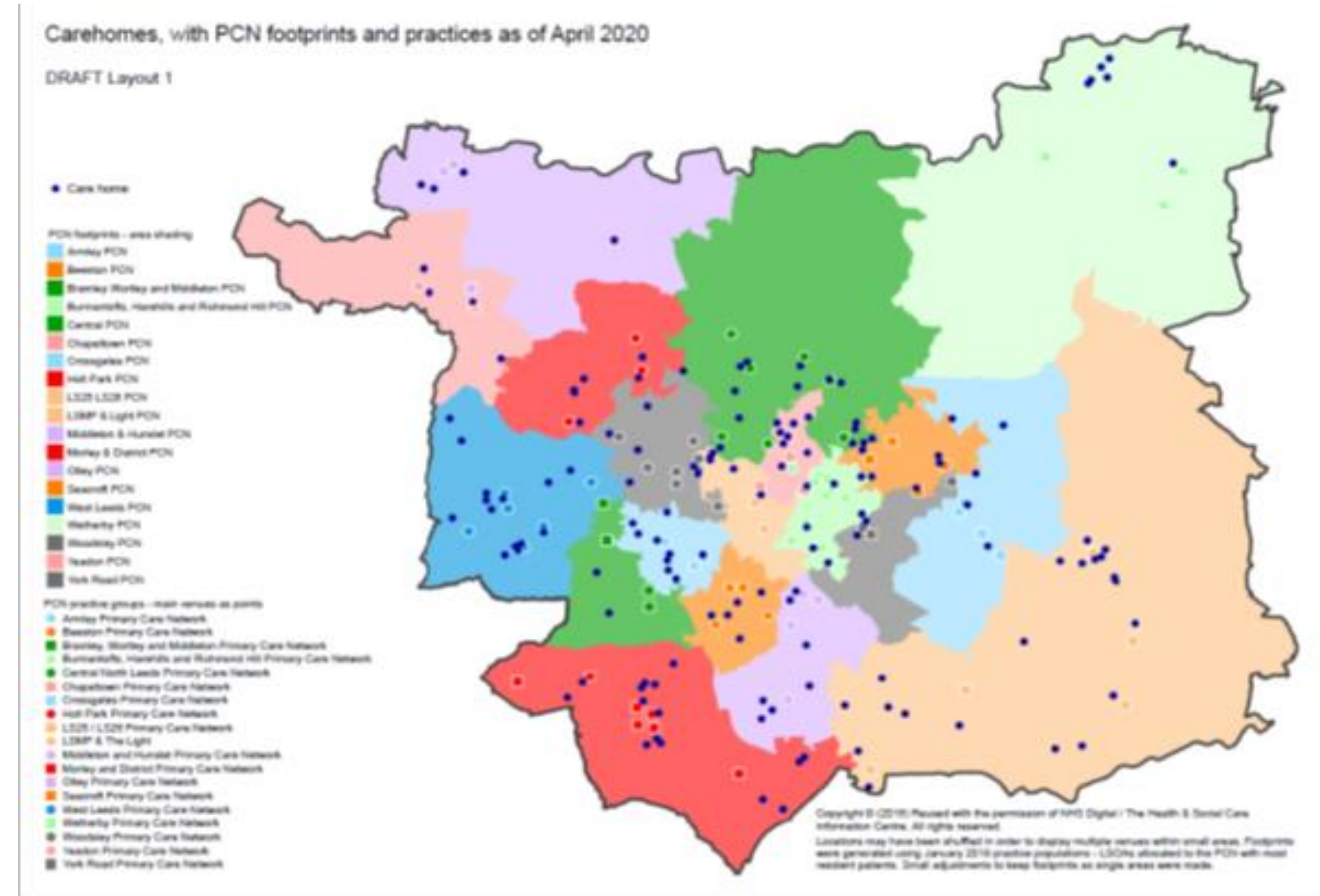
Heather Smith

Consultant Pharmacist: Older People



Leeds

- 19 PCNs
- 95 practices
- 1 acute Trust
- 1 MH Trust
- 1 Community Trust
- 5000 Care home beds



Peer Support in Leeds

- Training: SMRs, specialist areas e.g. AC in AF
- Peer support meetings e.g. case review, CH
- Advice and guidance services e.g. OP meds queries, AC, diabetes
- MDTs for specific areas e.g. AF



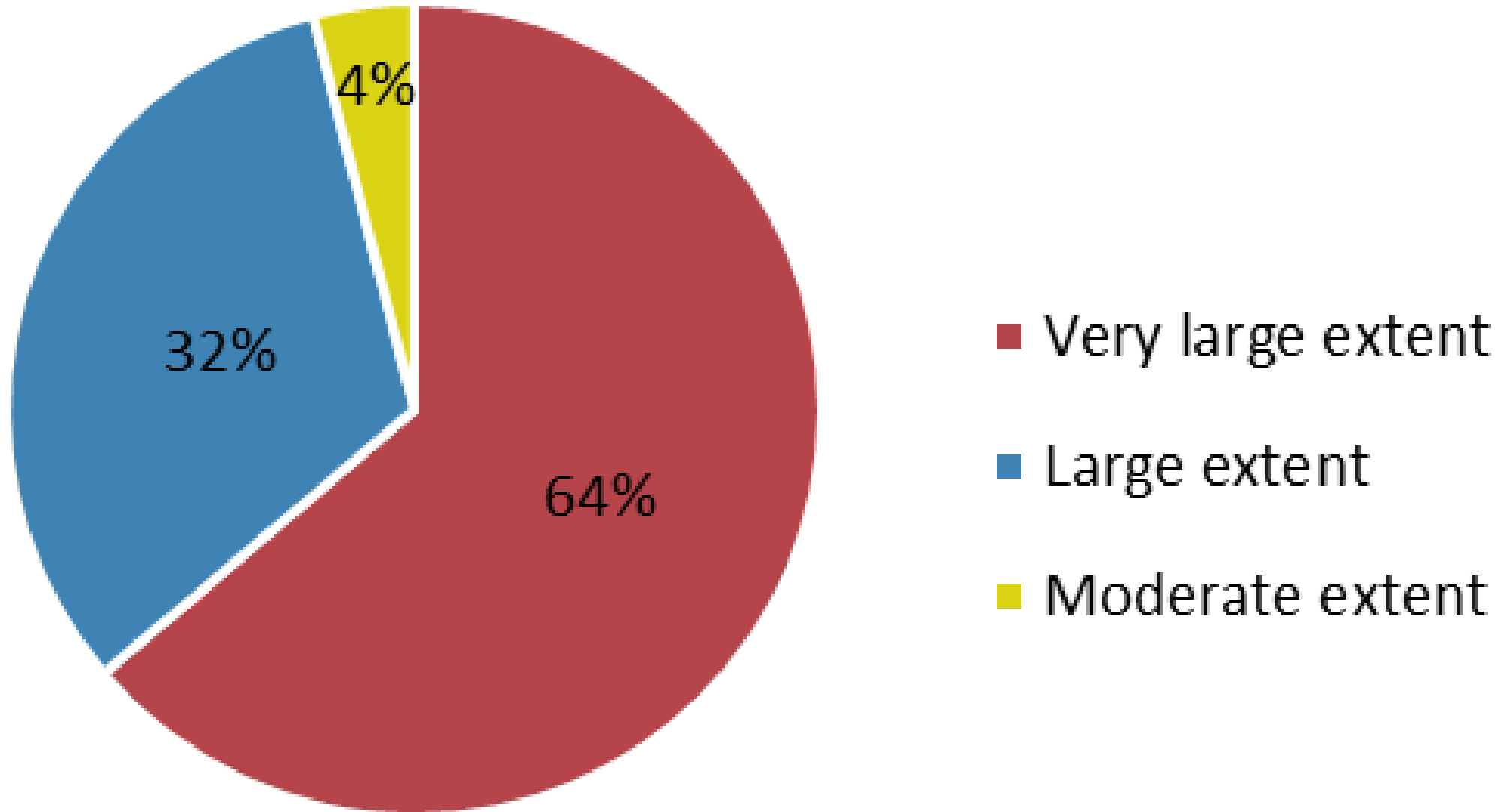
Peer Support Case Review Meetings

- Theory into practice
- Blatantly copying London!
- Pharmacists and pharmacy technicians
- Pre-Covid, F2F meetings for 3 hrs quarterly
- 2 cases- CH, domiciliary
- Group discussion
- Networking
- Burning issues



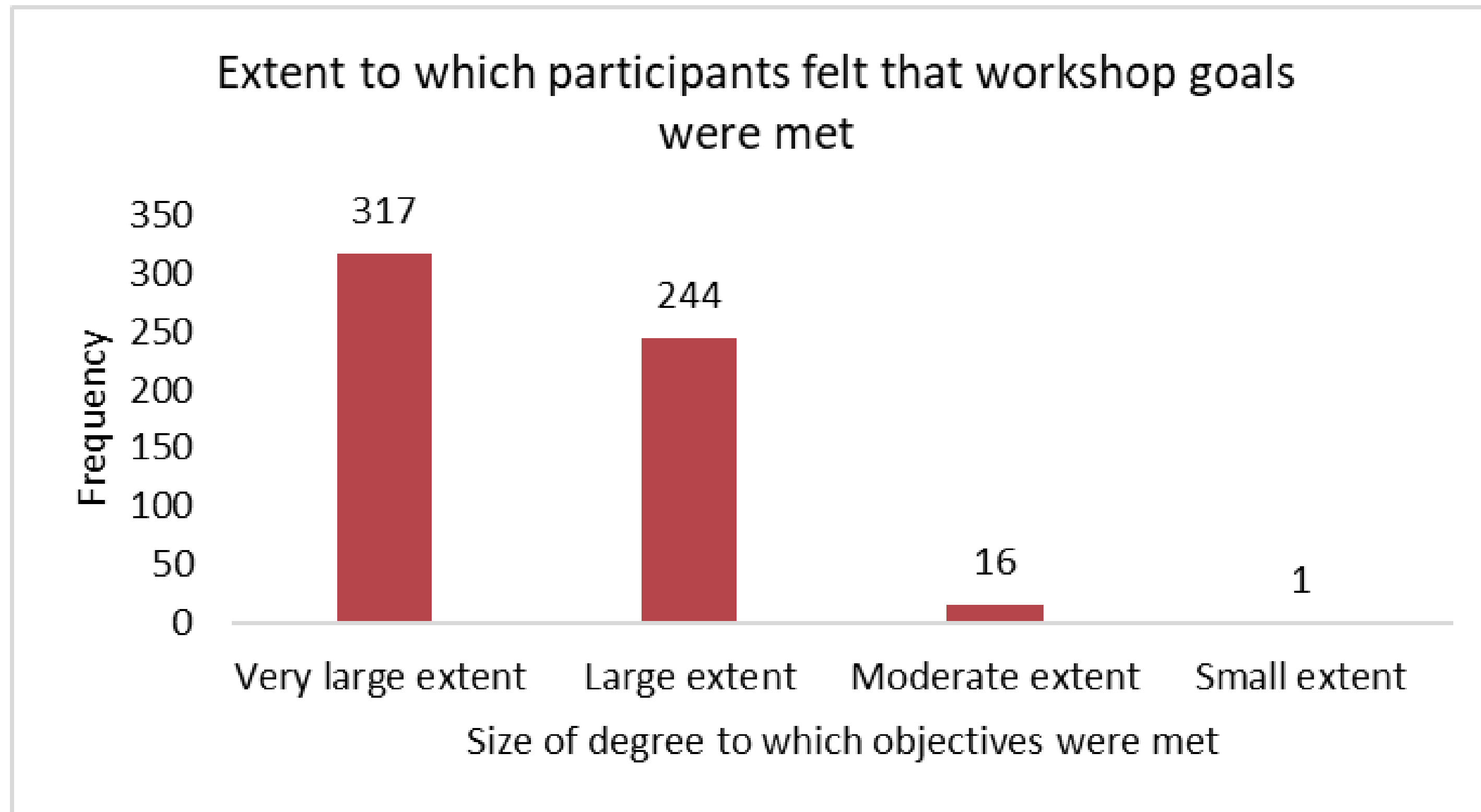
Peer Support Meeting Evaluation

Percentage of responses based on perceived impact on day-to-day practice of regular peer-to-peer workshops



To what extent do you think that attending regular meetings of this kind will positively impact on your day-to-day practice?

Peer Support Meeting Evaluation



To what extent do you think the meeting today met its objectives?



FEEDBACK

...chance to learn
new aspects,
broaden
experience, meet
peers with similar
roles

Explanations of
the rationale
behind
decisions

discussing 'grey' areas
in patient management
with peers and
'burning issues'

very helpful having
peer discussions of
their experience in
practice

...learned a lot
from this session,
looking at patients
in a holistic way

safe space-
no stupid
questions!!

case
discussions
really
relevant and
real life

ability to discuss
questions I've
had for a while

Peer Support Remotely?

- During Covid pandemic as alternative to F2F
- Teams meeting 1 hour- 1 case
- Tech not easy to navigate/ connection issues/ facilitator unable to move between break out groups on Teams
- Good feedback
 - 13/14 responses very or extremely useful
 - interactive breakout sessions
 - easier to attend online session
- But.....
 - reduced engagement c.f. F2F
 - lack of networking/ relationship building
 - no time for "burning issues"



Advice and Guidance Service

- Service for pharmacists doing MO for complex frail older people
- Started as pilot in 2021 in 3 PCNs, then expanded to 8 PCNs
- Initially proforma
 - what do you need from the consultant pharmacist?
 - what have you done/ tried already?
 - information about level of frailty/ function
- Coaching style approach over teams to discuss patient in depth
- Positive feedback from pilot
- Feedback from PCN CDs- use existing referral systems



Advice and Guidance Service

- A&G available via Accumail/ AccuRx for number of secondary care medical specialities e.g. Elderly Med, Gastro, Dermatology
- Now Leeds-wide for anyone working in Primary Care
- Accessed via Accumail/ AccuRx direct from patient record
- Email called medicines queries older people
- Response within 2 working days
- Q and response appear in GP clinical record
- Arrange teams meeting for more complex Qs/ patients



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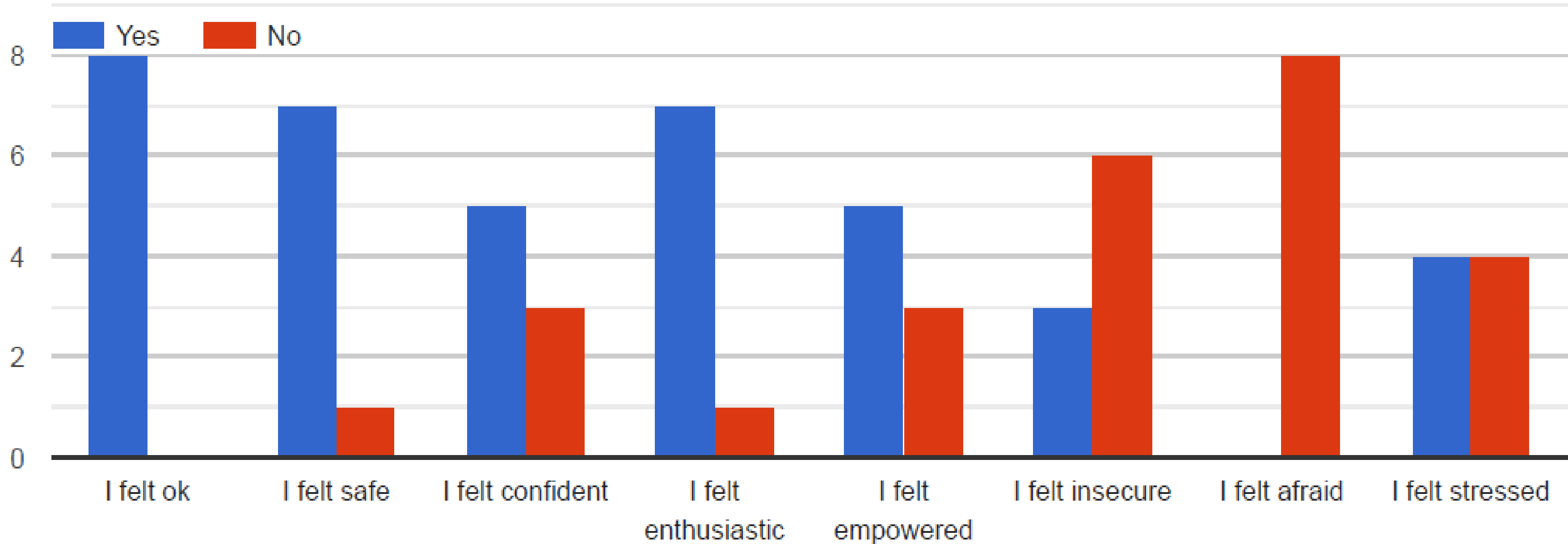
Examples of queries:

- Optimisation of HF medicines in patient who's had 3 falls in last month
- Management of challenging behaviour in care home where care home staff want to give lorazepam regularly
- Continuation of melatonin beyond 13 weeks in patient with Parkinsons Disease
- Can I reduce primidone dose in patient with essential tremor?
- Can I stop antiplatelet in patient who's on antiplatelet and DOAC with stroke and complicated cardiac history who has bruising?
- Should I change any medicines in patient with hyponatraemia (on multiple medicines that can cause hyponatraemia but all long-standing)?



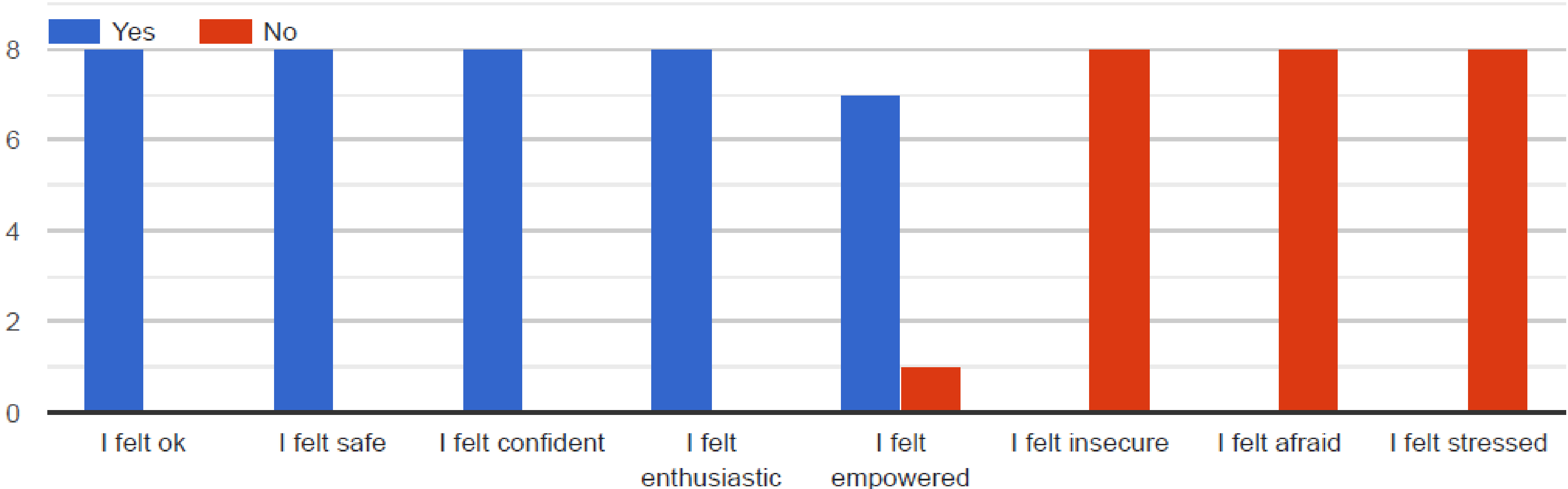
Advice and Guidance Pilot Feedback

3. PRIOR to input from the Consultant Pharmacist, which of these statements best describes how you felt about conducting face to face or remote/ telephone structured medication review?



Advice and Guidance Pilot Feedback

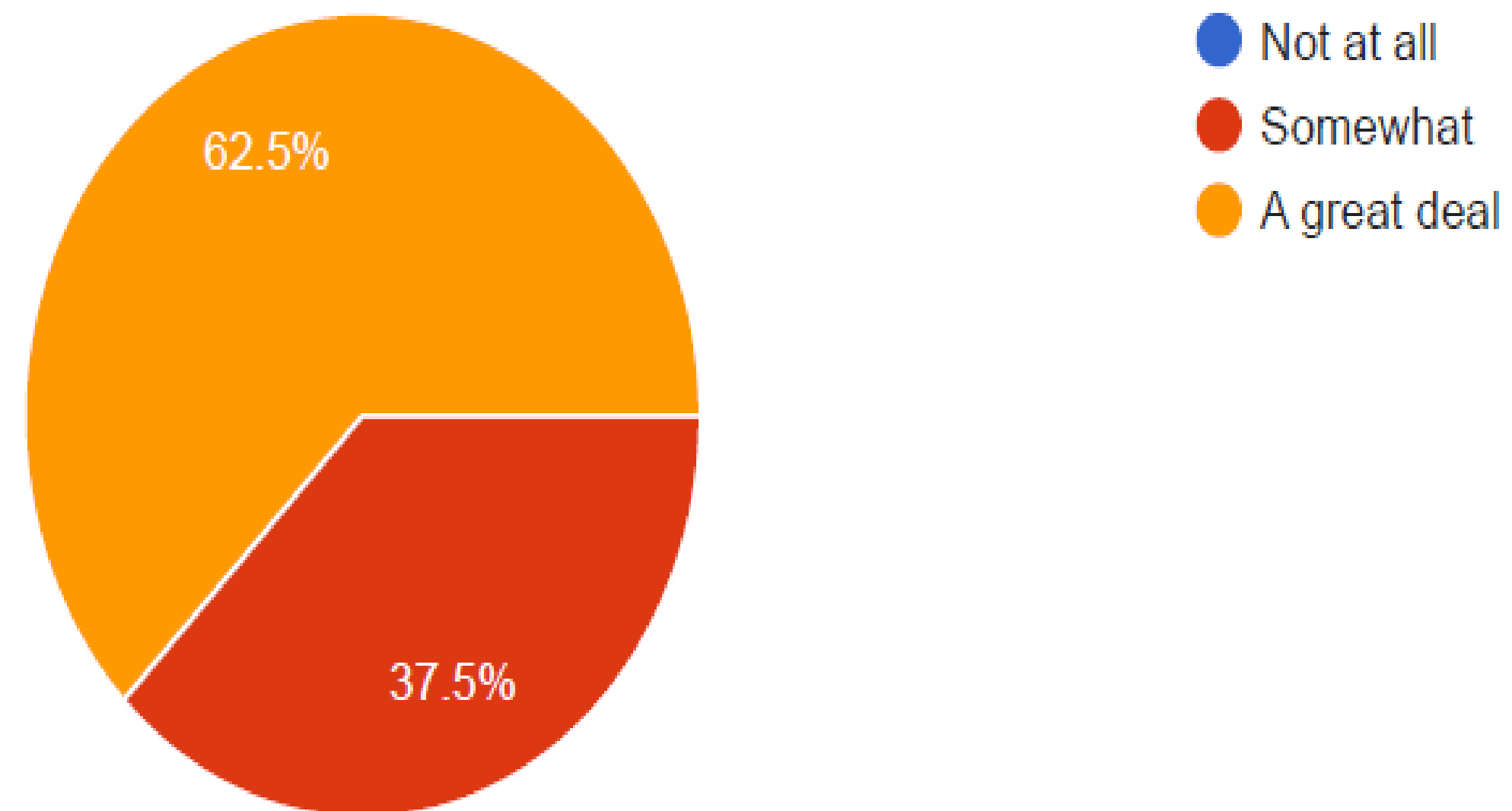
4. AFTER the input from the Consultant Pharmacist, which of these statements best describes how you felt about conducting face to face or remote/ telephone structured medication review?



Advice and Guidance Pilot Feedback

5. Did the input from the Consultant Pharmacist improve your practice?

8 responses



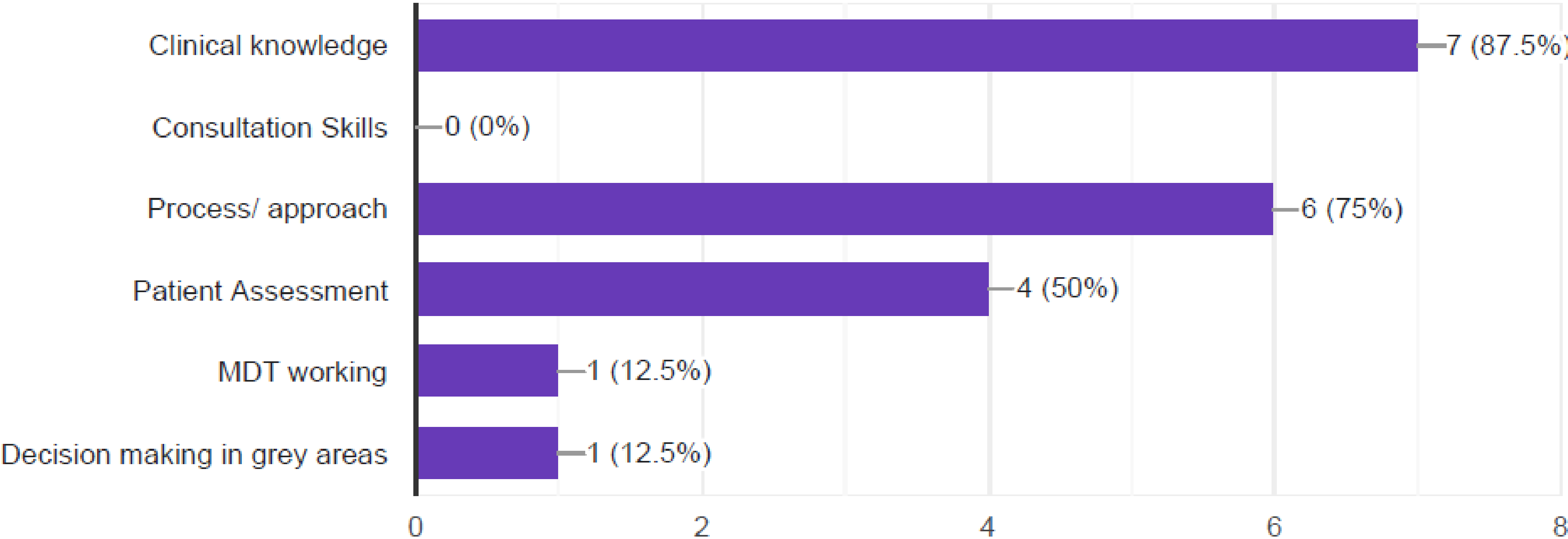
Advice and Guidance Pilot Feedback



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6. If your practice was improved, what aspects were improved?

8 responses



Advice and Guidance Pilot Feedback

I felt comfortable asking questions and "thinking out loud"

I appreciate being able to talk through my thought processes first and being guided thereafter as opposed to being told what to do..... it felt collaborative

Good to pick up decision making tips

Taught me to consider the patient holistically and whilst you might have an idea about what medication may be changed, the consultation should be patient centred and based on the patient's preferences

Helped prioritise issues in a very complex patient. Great holistic approach- focussing on patient's priorities at centre of decision-making

Signposted me to some useful resources I'd never used before

Very useful articles sent after the session and use of evidence to guide decision

Thank you for listening

