Local Perspectives: Pharmacists working in a GP practice

Clare Morrison
Senior Clinical Quality Lead / Lead Pharmacist (North)
NHS Highland
New Pharmacy Model in North Highland

Clare Morrison
Lead Pharmacist (North) & Senior Clinical Quality Lead
NHS Highland
NHS HIGHLAND GMS 2015/16 PROJECT: RATIONAL PRESCRIBING OF EMOLIENTS

Project Aim

The aim of this project is to review current prescribing of emollients using two or more different products simultaneously to rationalise.

Also for the practice to agree a preferred emollient and align this with Highland Formulary guidance to ensure consistency in prescribing can be achieved.

Project Rationale

Emollients soothe inflamed skin and help keep the skin soft and moist. They also assist in the repair of skin damage and help keep the skin barrier intact. The skin appears to return to a more normal state as adequate quantities of water are retained.

NHS HIGHLAND GMS 2015/16 PROJECT: METFORMIN IN RENAL IMPAIRMENT

Project Aim

The aim of this project is to ensure that patients prescribed metformin are having renal function monitored and, if patients with impaired renal function, the dose is adjusted accordingly or received a Medicineick Day Risk policy.

Project Rationale

Metformin is usually regarded as a safe drug in patients with renal impairment but it should not be prescribed to patients with an estimated glomerular filtration rate (eGFR) of less than 30 mL/min/1.73 m². The project will identify patients taking metformin who are likely to have kidney dysfunction and these patients will be reviewed if the eGFR is less than 30 mL/min/1.73 m².

NHS HIGHLAND GMS 2015/16 PROJECT: REVIEW OF HIGH COST PATIENTS

Project Aim

The aim of this project is to contribute to cost effective prescribing through focused review of the top high cost patients in the practice.

Project Rationale

Repeat prescriptions account for 60-75% of all prescriptions written in primary care in the UK and 80% of medicines costs. Approximately half of a practice's population will be receiving repeat prescriptions but a Highland GMS project offered in 2014/15 identified that the top 20 high cost patients will normally account for 10 to 20% of a practice's total prescribing spend.

This project therefore focuses on reviewing the practice's high cost patients to determine if prescribing could be more cost-effective. The Prescribing Information System (PIS) allows for the review of prescribing data at a patient level. PIS can be used to list the highest cost patients in the practice.
Promoting Safer Use of High-Risk Pharmacotherapy: Impact of Pharmacist-Led Targeted Medication Reviews

Clare Morrison¹ · Yvonne MacRae²
2015: year of big change

<table>
<thead>
<tr>
<th>Challenges</th>
<th>Opportunities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shortage of GPs</td>
<td>Primary Care Investment Fund</td>
</tr>
<tr>
<td>Quality of medicines management?</td>
<td>High risk medicine study &amp; Prescription for Excellence</td>
</tr>
</tbody>
</table>
Pharmacist support to GP practices in North Highland

**Community Pharmacist**

**Specialist Clinical Pharmacist**
- **Role:**
  - Provide pharmaceutical care to a caseload of patients with complex pharmaceutical needs (e.g., frail, care homes, Care at Home, frail elderly)
  - Part of integrated multidisciplinary team, virtual ward and specialist services (e.g., geriatrician clinics)
- **Location:**
  - Primary care
  - Work across a locality, routinely visit patients in community settings
  - Employed by NHS Highland

**Advanced Pharmacist Practitioner**
- **Role:**
  - Responsible for medicines management in a GP practice
  - Overseeing repeat prescribing
  - Medication reviews
  - Medicines reconciliation (discharge and clinic letters)
  - Acute medicine requests
  - Support a caseload of patients
- **Location:**
  - Single GP practice
  - Employed by NHS Highland but funded by GP practice

**GP Practice Pharmacy Technician**
- **Role:**
  - Provide simple medication reviews
  - Undertake Formulary compliance and cost-saving work/audits in GP practices and other settings (e.g., care homes)
  - To provide technical medicines management support to APP
- **Location:**
  - GP practices
  - Employed by NHS Highland
  - Role in development, recruited Jan 2018

**Hospital Pharmacist**
Advanced Pharmacist Practitioners
Advanced Pharmacist Practitioner

• Oversee repeat prescribing through medication review
• Medicines reconciliation – discharge letters and clinic letters
• Acute medicines requests
• Intensive medicines support for a caseload of patients
• Medicines advice to rest of practice
PROVISION OF ADVANCED PHARMACIST PRACTITIONER TO GP PRACTICE

This agreement defines how an Advanced Pharmacist Practitioner will be provided by NHS Highland to a GP practice. This agreement is between:

GP Practice: [Name and Signature]

And

On behalf of NHS Highland: [Name and Signature]

Role practised under: [Role Practised Under]

Duration of agreement (usually one year): [Duration]

Date of agreement: [Date]

Purpose of Advanced Pharmacist Practitioner role

The purpose is to be clinically responsible for medicines management at a GP practice in order to deliver safe, effective, high quality, rational, legal and cost-effective medicines use, to optimise the pharmaceutical care of patients.

This may include:

- Undertaking annual medicines reviews and PEP reviews
- Dealing with patient prescription requests
- Providing advice on the use of the recent prescription process
- Delivering medicines management for a defined caseload of patients
- Undertaking medicines revalidation
- Providing clinical advice on medicines use within the practice, including prescribing protocol

The specific roles will be agreed with the GP practice when the pharmacist takes up the post, with advice from the Local Lead Pharmacist, and defined in processes. It must be acknowledged that during the pharmacist's training, some roles will need to be modified to reflect a level of competence and then modified as training progresses.

Training

To become an Advanced Pharmacist Practitioner, the following training must be completed:

- Essential training in clinical practice (training) delivered by the lead pharmacist for Scotland, includes a training manual, video training and transcription. The e-learning module fundamentals should be completed as soon as possible after taking up post. The clinical skills should be completed as soon as possible.

Programme for Advanced Pharmacist Practitioner

- 12 months
- Clinical supervision
- Medicines training
- Consultation skills
- Prescribing
- Pharmacology
- Medicines review
- Community pharmacy
- Emergency services
- Pain management
- Mental health

Inclusion and exclusion criteria for pharmacist role

Inclusion criteria:

- Completed essential training in clinical practice
- Minimum of 2 years' experience in community pharmacy
- Good knowledge of medicines management

Exclusion criteria:

- History of disciplinary action
- History of medication errors
- History of professional misconduct
- History of substance misuse
- History of criminal convictions

Fees

- [Fees Details]

- [Fees Payment Details]

- [Fees Review Details]
<table>
<thead>
<tr>
<th>Pharmacist activity</th>
<th>GP hours saved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medication reviews</td>
<td>260 hours / year</td>
</tr>
<tr>
<td>note: all patients not 4+ meds</td>
<td></td>
</tr>
<tr>
<td>Use of CMS serial prescriptions</td>
<td>60 hours / year</td>
</tr>
<tr>
<td>Medicines reconciliation</td>
<td>220 hours / year</td>
</tr>
<tr>
<td>Acute medicine requests</td>
<td>400 hours / year</td>
</tr>
<tr>
<td>Dose titrations</td>
<td>(not done)</td>
</tr>
<tr>
<td><strong>Total pharmacist input</strong></td>
<td></td>
</tr>
<tr>
<td>28 hours / week / 5,000 patients</td>
<td></td>
</tr>
<tr>
<td>1,260 hours / year</td>
<td></td>
</tr>
<tr>
<td><strong>Total GP time saved</strong></td>
<td></td>
</tr>
<tr>
<td>960 hours / year</td>
<td></td>
</tr>
</tbody>
</table>
“This is the first time someone has had the time to talk through all of my medicines with me.”

Patient, Thurso
Specialist Clinical Pharmacists
Specialist Clinical Pharmacist in Primary Care

This document describes the role of the Specialist Clinical Pharmacist in Primary Care, providing support for patients and healthcare professionals.

Key Duties:
- Patient consultations
- Information and advice for patients
- Support for healthcare professionals
- Medication reviews
- Prescribing support
- Patient education

Professional Skills:
- Knowledge of medications and their use
- Communication skills
- Problem-solving ability
- Ability to work independently

This document is an essential resource for healthcare professionals and patients, ensuring optimal medication management and patient care.
Value of pharmacist intervention

<table>
<thead>
<tr>
<th>From population of 38,399 patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of patients taking a high risk medicine</td>
</tr>
<tr>
<td>Pharmacist recommend to stop/amend medicine</td>
</tr>
<tr>
<td>GP agreement to recommendation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Follow up after one year – number of adverse outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group following pharmacist recommendation</td>
</tr>
<tr>
<td>Group not following pharmacist recommendation</td>
</tr>
</tbody>
</table>
# Overall: most frequent interventions

<table>
<thead>
<tr>
<th>Problem</th>
<th>Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excessive dose of paracetamol due to patient’s low weight</td>
<td>Dose reduced</td>
</tr>
<tr>
<td>Falls risk with hypnotic or sedating antihistamine</td>
<td>Medicine stopped</td>
</tr>
<tr>
<td>Swallowing difficulties</td>
<td>Medicine changed</td>
</tr>
<tr>
<td>Out of date monitoring</td>
<td>Tests arranged</td>
</tr>
<tr>
<td>Unnecessary use of PPIs</td>
<td>Dose reduced or stopped</td>
</tr>
</tbody>
</table>
Pharmacy Anywhere: Addressing remote & rural challenges

<table>
<thead>
<tr>
<th>Telehealth function</th>
<th>System</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmacist remote access to medical records</td>
<td>Vision Anywhere</td>
</tr>
<tr>
<td>Patient-pharmacist video consultation</td>
<td>Attend Anywhere</td>
</tr>
</tbody>
</table>
What’s next?

clare.morrison2@nhs.net  Twitter @clareupnorth