

My Care in Pharmacy (MyCiP)

Qualitative feedback from key stakeholders

Feedback from Children and Young People	Feedback from parents
<p><i>"Because it was closer"</i></p> <p><i>"Long trip Ashurst. Short trip pharmacy"</i></p> <p><i>"waiting time"</i></p> <p><i>"It was easy and quick"</i></p> <p><i>"Closer to home; I don't have to get in a car"</i></p> <p><i>"I'm not bothered by it"</i></p> <p><i>"Prefer coming to clinic. [They] tell you what's going on"</i></p> <p><i>"It was boring there (at camhs)"</i></p> <p><i>"[visiting pharmacy was] boring"</i></p>	<p><i>"Happy with the new service of visiting the chemist for the physical checks; I know the staff there and it was bit more personal when I went for the check for my son - Lot easier and less stressful, unlike at the doctors where they could be running late and everyone looking at me and my son and wondering why he is getting stressed. I have five children and so this arrangement is really helpful for me; Happy to go to the chemists regularly for physical checks in the future".</i></p> <p><i>"Convenient, can choose time that suits which is great as no time is wasted"</i></p> <p><i>"Convenient, closer to home; did not have to rely on a lift"</i></p> <p><i>"Very convenient; [The pharmacy was] local, within walking distance and open on Saturday"</i></p> <p><i>"Liked the ability to choose which pharmacy; service was quick and easy. Lady at the pharmacy was very good with the children."</i></p> <p><i>"More personal service"</i></p> <p><i>"Correspondence of results took far too long"</i></p> <p><i>"Not much room to sit and wait"</i></p> <p><i>We've been messed about with appointments (by pharmacy) for the checks</i></p>
Feedback from GPs	Feedback from Community Pharmacy staff
<p><i>"It is important these children are monitored. This relieves some of the current pressures in primary care"</i></p> <p><i>"More accessible to for patients and family"</i></p> <p><i>"No delay in scripts as we have the measurements all sent through to us before scripts are requested"</i></p> <p><i>"Patients prefer to go to pharmacy for BP/height/weight than the surgery [and] much easier for family than having to make appointments at the surgery"</i></p>	<p><i>"Engagement in the CAMHS-Pharmacy project has been a positive experience for me and the pharmacy team. Although we were a little nervous about performing the height, weight, blood pressure and pulse checks on a new group of clients once we got started taking the measurements was for the most part trouble free thanks to the training and support we had from the CAMHS nursing team.</i></p> <p><i>The children appear to be relaxed about coming into the community pharmacy to have their measurements taken and their parents/carers appreciate the convenience of both the location and flexibility of appointment times. Both groups prefer not to have to take time out of school for the measurements to be taken. I am a governor of a local school and they have commented on the benefits of</i></p>

<p><i>“No appointment [at surgery] necessary”</i></p> <p><i>“Appointments [at surgery] freed up”</i></p> <p><i>“Better monitoring to any medications’ possible side effects [and] easy to reach [for the patient]”</i></p> <p><i>“Better experience for patient. Easier and more likely to attend”</i></p>	<p><i>not disrupting the pupils schooling and identifying them as a special group”.</i></p> <p><i>“Very easy adding information into pharmoutcomes”</i></p> <p><i>“We have had positive feedback from clients regarding the ease and accessibility of service.”</i></p> <p><i>“Concerned about how we handle the children but reality has been that perhaps more difficult children go to hospital, so no issues at any time”</i></p> <p><i>“We have had some problems with making appointments with the parents and ensuring they keep their appointments but this has not been a huge issue.”</i></p> <p><i>“Payments for the service took a long time to sort out which was discouraging but these issues have now been resolved.”</i></p>
<p>Feedback from CAMHS Staff</p>	<p>Feedback from Project Team Members</p>
<p><i>“I have been able to make adjustments to medication more confidently over the phone ...[and] Young people and families don’t have to wait for a face to face clinic appointment [or] take time off from work/school for having physical checks or have to attend clinic every 6 months to have these done (many now have annual clinic appointments). “</i></p> <p><i>“Longer time during appointment to discuss patient’s issues”</i></p> <p><i>“Family feedback has been positive, if checks had been left to CAMHS, children/YP’s checks would not be safely vetted. We are already behind with face-to-face reviews so checks have not/would not be on time and meet local guidelines and nice guidelines”</i></p> <p><i>“Group for young people with ADHD; ADHD team development/supervision has increased. Telephone consultation has increased. Capacity for ADHD nurse to do independent nurse prescribing training to further improve services and timely support”</i></p> <p><i>“Although many children are having these checks done on time...there are a number of children who have not had these checks done on time despite being referred to their local pharmacy. This is probably due to setting up a new service and stakeholders not being familiar with the system”</i></p> <p><i>“...helped as part of an overall restructuring of our ADHD care pathway to provide care that’s a lot more family centred, so families now</i></p>	<p><i>“Nearly everyone who hears about it straight away sees the benefits and there is a lot of interest nationally in the outcome ... From my own perspective it has been a very positive experience. I am really pleased to see that the vast untapped potential of utilizing our community pharmacies is being accessed in this way. I have enjoyed working with the team and have felt that my particular skills, e.g. in pulling together questionnaires and designing patient friendly documents, has been of value to the project.</i></p> <p><i>Going forward I really hope that the principle of community pharmacists taking on a role of monitoring patients on certain medicines, not just for under 18s on ADHD medication, can become the norm, as early feedback from families make it clear that this is much more convenient than having to travel to a secondary care hospital or clinic and it will of course free up capacity.”</i></p> <p><i>“Usually it is my own organisation, as a professional representative body, that generates proposals to further the role of community pharmacy and then attempt to engage with potential commissioners. On this occasion, the original thinking, leadership and passion originated from within the Trust itself and most notably from Subha Muthalagu, Lead Psychiatrist and Ray Lyon, Chief Pharmacist who have helped to not only move an idea into action, but have also been welcoming partners with which to collaborate.</i></p> <p><i>This spirit of collaboration and team working has more recently strengthened further as the wider project leadership team have embraced the many challenges encountered. The ‘can do attitude’ is ever present in our meetings and discussions and is a breath of fresh air.”</i></p>

have a lot more choice. They have choice of where they can have their observations done which strangely enough leads to choice in other parts of the pathway, in that it's created flexibility in when people can have their appointments.

...in every service I've worked ADHD clinics are full of young people and families whose needs are not clearly understood and they often are very very complex but given the least of the resources. They've often had a very inadequate 'work-up', there's an expectation they can be seen every six months to a year and tweak the medicine and that would be a solution to often very difficult, entrenched needs and so anything that can provide a better service for that group is vital I think."

"I'm noticing at the moment that children and their families appear to be more engaged as participants their care. They feel that they're more listened to - that's the feedback that I've been getting - and that the clinic appointments now have had some time freed up within them to explore some of the other comorbidities and holistic needs of children and their mental health needs ...

It's also enabled us as a team to work more collaboratively with one another, formulating the care plans and titrating medications, we've been able to offer more telephone consultations and we're more aware of which children are in the clinic and what their needs are, so we're working much better as a team.

I think I've got increased job satisfaction now when I participate in the ADHD clinic it's not just about getting certain things done within the very short time span. I feel that I'm more able to give quality care as a nurse."

"It has instigated change within the team, making it a better service, far more accessible to service users and we are giving more time and they have more control over the care given to their child.

I feel we are taking a more broad approach and more family oriented approach ... and not just doing medication reviews and physical obs"

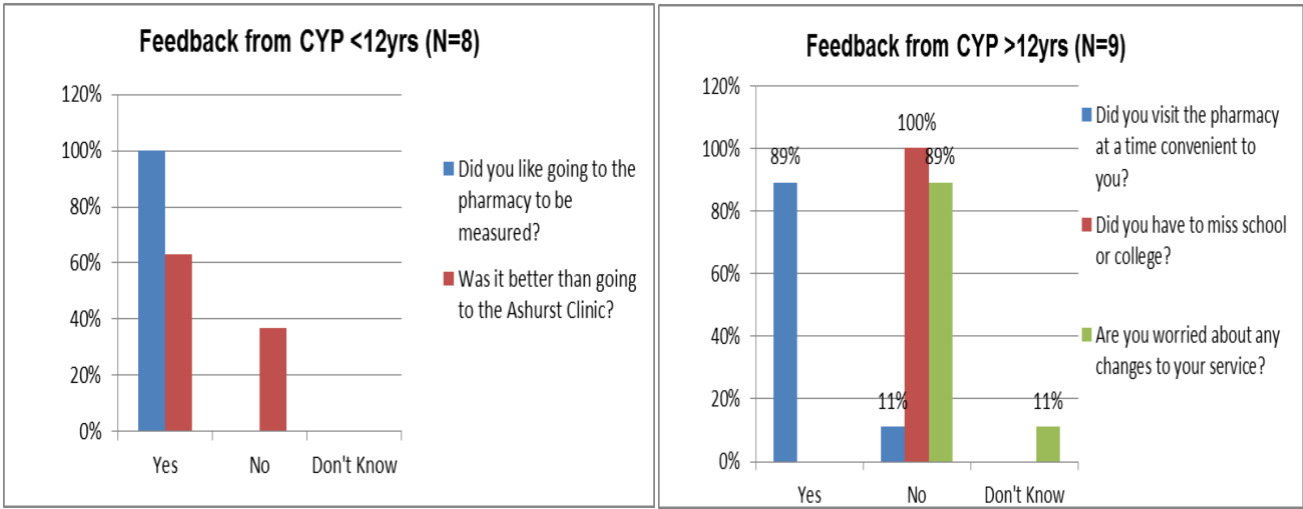
"the feedback that we've had from families have been really good, really positive ... it's saving us time in the clinic so that we can actually concentrate on giving people a choice in their care, so running groups and things like that and giving clinicians more head space."

"I have had a main focus on the contractual and payment side of the project in which there have been a few stumbling blocks, mainly around ensuring adherence to Trust process whilst also considering the needs of the project/pharmacies and how the two can work in partnership.

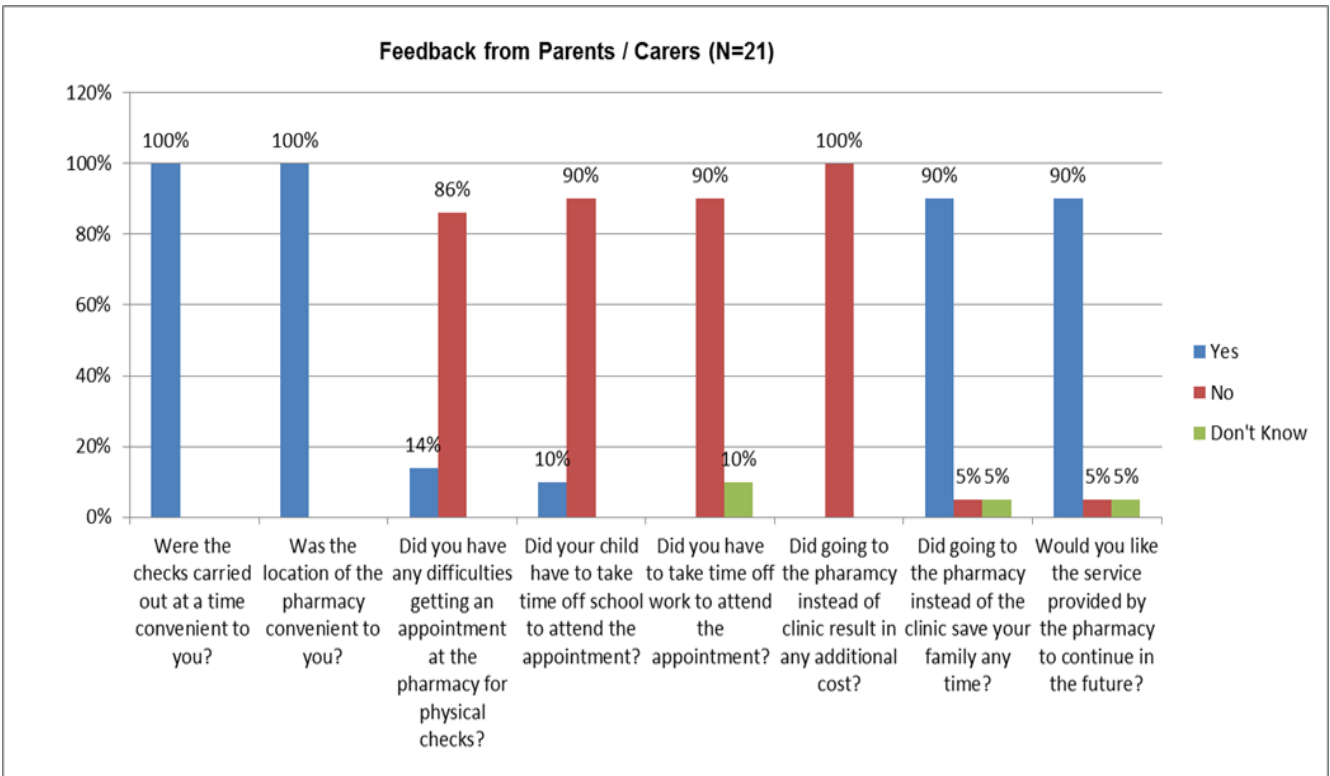
I can clearly see the advantage of this project, not just specifically for ADHD medication but the larger national picture of community pharmacies and their input in the long term patient monitoring and medication delivery. Thankfully, this is clearly a view held by our commissioning partners and moving forward I am hopeful that the positive impact of the project and its sustainable future can be discussed and planned."

Quantitative feedback from CYP and Parents/Carers

Feedback from Children and Young People



Feedback from Parents and Carers



Audit against modified NICE standards for ADHD medication monitoring

	NICE standards (CG72)	2015 POMH-UK audit for ADHD prescribing – % compliance amongst Hampshire CAMHS	Pre Project % (N=30)	Post Project % (N=30)
Evidence of weight, height, blood pressure and pulse (WHBP)	100%	9.2%	86% (26)	100% (30)
Evidence of WHBP centile recording	100%	0%	20% (6)	100% (30)
Evidence of use of standardised questionnaires to monitor ADHD progress	100%	0%	36% (11)	73% (22)
Annual specialist reviews	100%		5% (1)	26% (8)
Physical reviews completed on time (at least 6 monthly as per agreed Trust standards)	100%		6% (2)	60% (18)

My Care in Pharmacy (MyCiP) – overall benefits for key stakeholders

For service users	For CAMHS clinic	For Community Pharmacy
Timely physical monitoring and improved access to care	Timely physical monitoring and improved access to care	Formally included in the patient care pathway
Receive regular repeat prescriptions	Reduction in missed, delayed or non-attended appointments	Greater job satisfaction
Minimal disruption to school, work and family life	Compliance with NICE standards	New business opportunities
Saving in travel costs, time and inconvenience	Freed up clinical time - reduce waiting lists	
Expert advice on medication	Greater use of technology – PharmOutcomes, emails	
Reduced stigma	Enhanced quality of care	