



Clinical Commissioning Group

Sheffield Teaching Hospitals

NHS Foundation Trust



Developing A Medicines Support Pathway in Sheffield



Sarah Alton

Head of Medicines Management

Sheffield Teaching Hospitals Foundation Trust

Community Services

salton@nhs.net



**NICE Shared Learning
Awards 2016**

Background

- Initial pilot project “MOT 1” Nov 13 to Apr 14
- Results
 - Success rate of 80% for patients with re-ablement goal
 - Reduced time for care calls
 - Significant interventions contributing to admissions avoidance
 - Estimated savings to health (£18k) and social care (£60k)

Next Steps

- To build on MOT 1 and scale up from 6 practices to whole GP locality
- To develop a pathway for medicines optimisation involving Community Pharmacy for the ongoing management of patients

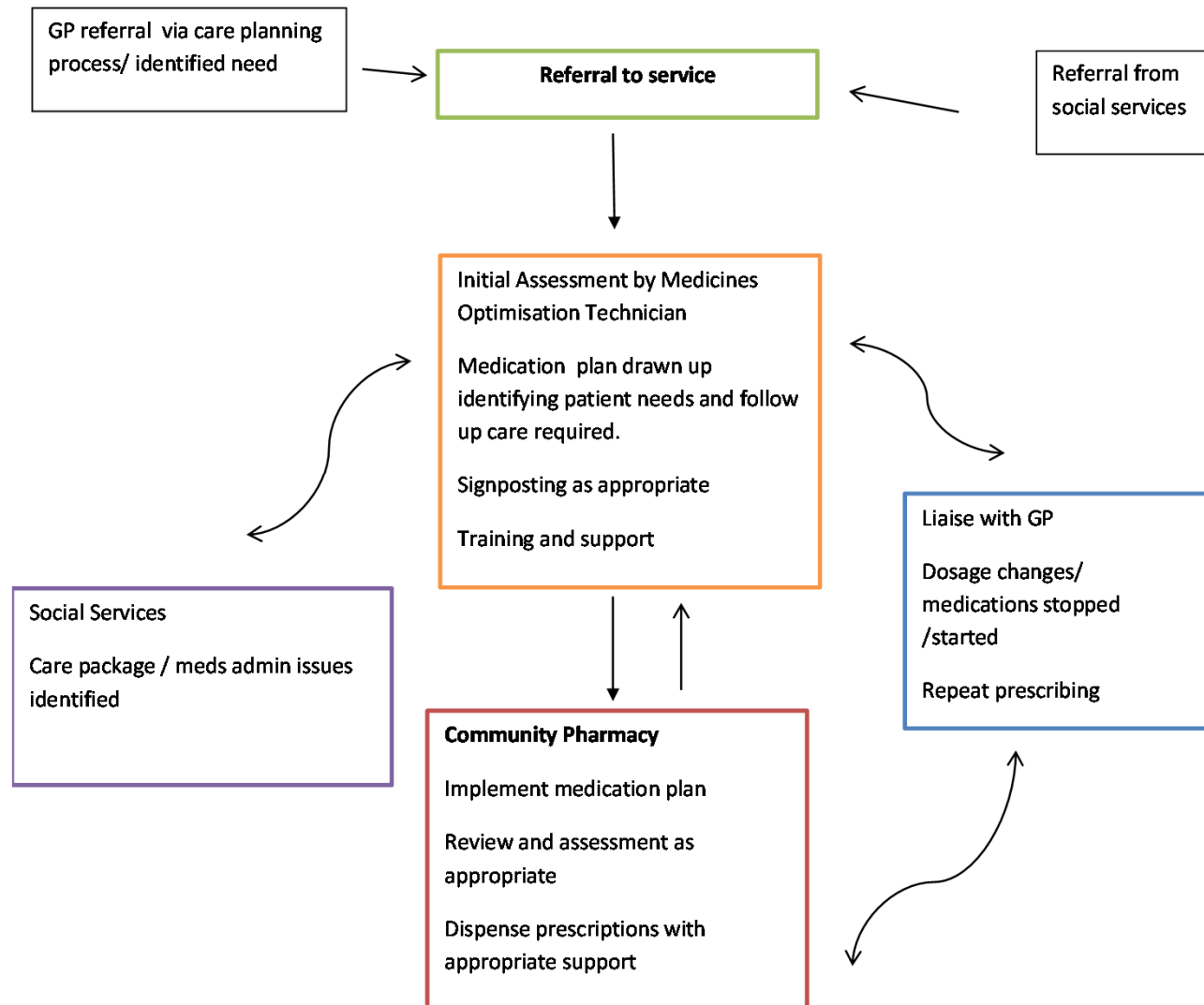
Developing the Model

Patients can be referred at any point into the medicines optimisation hub for initial assessment triage and onward referral



The Pathway

Proposed Medicines Optimisation Service



MOT 2 Pilot

- All Community Pharmacies dispensing prescriptions for HAS locality GP practices invited to take part
- Local service agreement in place including funding for community pharmacy involvement in the scheme

Results

- 217 referrals from 24 GP practices
- 20 Community Pharmacies participated
- 81 (37%) patients were referred to their Community Pharmacist for follow up
- 98% patients had at least one agreed goal
- 90% achieved their primary goal

Results Cont:

- STOPP-START criteria used (small net saving on meds)
- A number of significant interventions made which potentially avoided a hospital admission

Feedback from patients, health and social care professionals



“We very much appreciate the time care and help you have given us . Its extra special people like you that make life better”



Pharmacy experience, knowledge, guidance and their ability to support us in understanding how the medication can effect outcomes for service users is essential



This service has saved GP time as well as providing a safe and clinically effective service to patients often in their own homes- the “difficult to reach” patients for practice staff.

Key Outcomes

- GPs saved time by referring patients to the medicines optimisation team to address more complex medication issues.
- Savings were made through medicines optimisation.
- A number of significant interventions were made which potentially avoided an acute admission.
- Patients and referrers regarded the service highly.

Future Plans

- Scale up to provide an integrated medicines support pathway across the city
- Single point of referral into community services pharmacy teams linking into neighbourhood medicines management services
- Focus on patients post discharge / at transfer of care
- Referral from hospital to Community Pharmacy

