A multi-perspective evaluation of specialist mental health clinical pharmacist prescribers practising within general practices in NHS Highland.

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BACKGROUND

Mental health issues are a common feature of primary care consultations and around a third of GP consultations have a mental health element. The Scottish Government’s 10 year Mental Health Strategy has ambitions to transform services so every GP practice has a multi-disciplinary teams (MDTs) who can support and treat patients with mental health issues while ensuring good communication with community mental health teams (CMHT) and secondary care services. Despite these strategic plans, there is currently a lack of specialist mental health clinical pharmacist prescriber input to the care of patients with mental health issues within general practice in NHS Highland. A 12 month pilot, funded by the Scottish Government’s Primary Care Transformation Framework, has been conducted during which two specialist mental health clinical pharmacist prescribers consulted with patients with depression and anxiety by appointment at one of two GP Practices in NHS Highland.

SERVICE AIM & OBJECTIVES

To improve the pharmaceutical care delivered to patients with depression and/or anxiety in primary care by:
- providing evidence based psychopharmacological interventions
- evidence based prescribing in line with NHS Highland Formulary
- MDT working within primary care, and liaison with CMHT and secondary care
- reducing GP workload relating to the treatment of mental health disorders

RESEARCH QUESTIONS

Multi-perspective evaluation of the pilot:
- Phase 1 Quantitative - Level of uptake, pharmaceutical care issues identified, resultant actions and outcomes
- Phase 2 Qualitative - Views and experiences of patients and the healthcare team

DISCUSSION AND CONCLUSION

Even when considering the evaluation limitations, it is clear that this pilot study has been successful. All four service objectives were met either fully or partially. Responses to the patient survey were overwhelmingly positive. Written comments from patients were highly appreciative of the pharmacists and the impact of the service on their mental health. Analysis of interviews with the members of the MDT and the pharmacists identified that the service had been well-integrated within primary care, leading to key perceived benefits for patients and the MDT. The only negative comments were around barriers to implementation which are to be expected when setting up a new service. In conclusion, the evaluation has identified that the pilot was successful from a number of key perspectives. These results should be considered in planning further mental health services within NHS Highland and beyond.

REFERENCES

3. CARE-EM Measure, Scottish Executive 2004: The CARE Measure was originally developed by Dr Stewart Mercer and colleagues as part of a Health Service Research Fellowship funded by the Chief Scientist Office of the Scottish Executive (2000-2005).