Care At Home Pharmacy Technician Service Working in Partnership

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Health & Social Care
Partnership



Introduction

Ageing populations, improved life expectancy, more complex conditions, greater care needs!

Burden of care, ensuring people live independantly at home or homely setting as long as possible, rather than in care home or hospital, falls to Health and Social Care Partnerships. Collaborative working with patients, carers, health, social care and third sector professionals is crucial to deliver this integrated care.

Ayrshire Care At home Pharmacy (CAP) Technician Service exemplifies partnership working, delivering patient-centred, pharmaceutical care in the community.

I can't remember if I've taken this tablet?

How do I use my inhaler?



Patients are often confused or struggle with their medicines.

Aims

Health and Social Care working together, ensuring the right person, doing the right job, at the right time:

- CAP technician single point of contact for all referrals
- Patient and carer support to ensure independent, safe medicines management
- Comprehensive assessment of concordance and compliance with prescribed medicines; provision of appropriate aides and SMART supports
- Medicines reconciliation, with referral to acute sector /
 GP / Community Pharmacist for review, when required



CAP Technician offers support to patients and carers to promote compliance and concordance.

Method

Excellent inter-professional working relationships, role definition, clear referral pathways and process mapping were fundamental in service development.

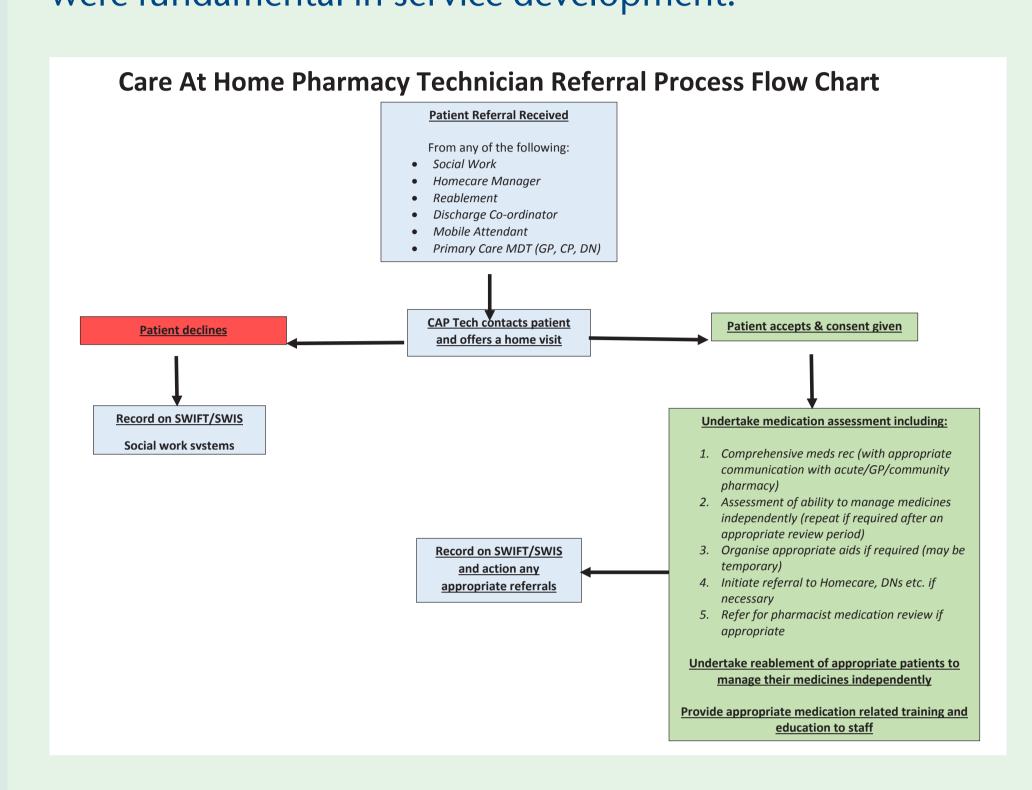


Fig 1. CAP Technician Service Referral & Process Flow Chart

CAP Service receives referrals from multi-disciplinary team

Other Primary (GP, PSP, DN, MHT) Hospital discharge Homecare Re-ablement hub Social work (Community) Social work (Hospital) 0 50 100 150 200 250 300 350 East Ayrshire South Ayrshire

Fig 2. Referrals to Care at Home Pharmacy Service

CAP Technician contacts patient and/or carer:

- Obtain consent for review
- Discuss situation / concerns
- Resolve issues by phone or arrange home visit, where appropriate
- Complete comprehensive medicines review
- Provide information, education, compliance aides (if required)
- Onward referral to health or social care colleagues, as appropriate
- Follow up visit for review

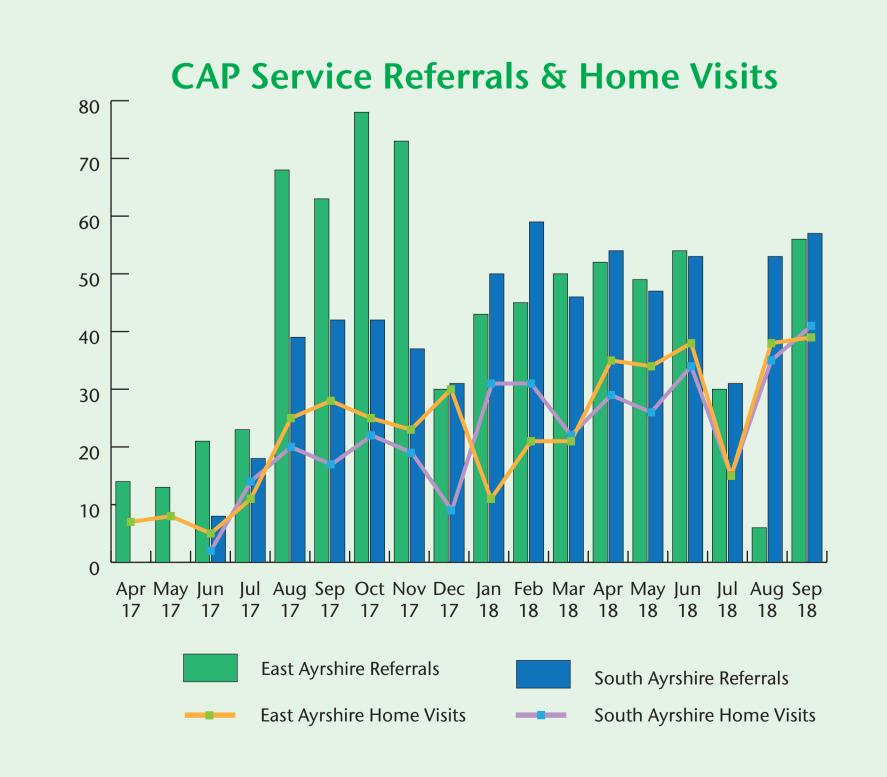


Fig. 3 CAP Service Referrals, Home visits per month

CAP Service Key Outcomes

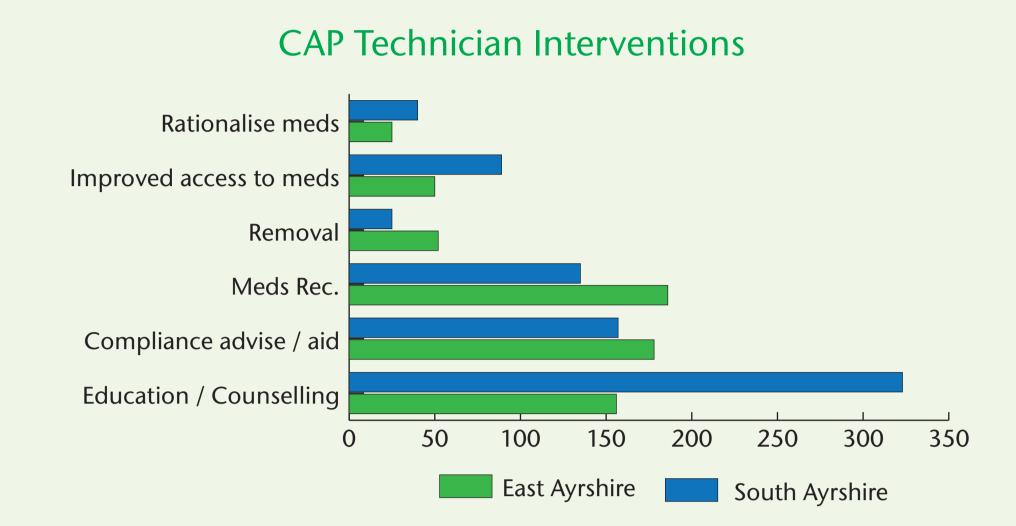


Fig 4. Top 6 CAP Technician Interventions

- Patients supported to understand and manage their medicines independently
- Improved patient safety through rationalisation of medicines and Polypharmacy reviews
- Medicines cost efficiencies
- Redesign of Homecare, increased use of Enablement Services, allowing patients to remain at home with reduced input from Social Services
- Reduced care packages and District Nurse input:
 Redirection of savings to other services
- Improved hospital discharge experience, increased patient and carer confidence to manage medicines, reduced HSCP burden of care
- Reduction in unplanned hospital admissions and readmission



CAP Technician supports patient compliance with SMART aides e.g. 'talking alarm watches'

Feedback

"I am absolutely overwhelmed with the first class service your team has provided for my family" (patient's daughter)

"CAP Tech role prioritises independence for people living in the community, supporting health and wellbeing"

(Senior Manager)

"I've not missed any medicines since the technician gave me the Medi-dose and downloaded the reminder app. to my phone. I'm happy I can now manage my tablets" (patient)

"an invaluable
service which
we could not do
without"
(Vibrant
Communities)

"CAP Tech service is a great support to have working in a busy community Care at Home team, facilitating medication changes and building strong relationships between health and social services" (Home Care Manager)

Acknowledgements

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