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Hampshire & Isle of Wight LPC  
Supporting Local Community Pharmacy

## Introduction

Nationally, community Child and Adolescent Mental Health Services (CAMHS) teams are struggling to meet increasing clinical demands whilst maintaining safety and quality of service delivery. Hence, there is an urgent need to think creatively and in a joined up way to be able to meet the needs of our local population (Future in Mind, 2015; Five Year Forward View, 2014).

The New Forest CAMHS (Hampshire, UK) ADHD clinic has struggled like most teams to meet the rising clinical demand with its existing staffing resources. It has a large caseload of under 18's prescribed medication for attention deficit hyperactivity disorder (ADHD) needing regular monitoring of their height, weight, blood pressure and pulse/heart rate as per NICE guidelines (CG72). As the existing clinical model was unable to meet the needs of children and young people under the CAMHS ADHD clinic, we developed an innovative project.

## Innovative Project

The innovative project involved training staff from 18 local community pharmacies in the New Forest CAMHS catchment area to carry out physical monitoring in children and young people (CYP) on psychotropic medications to treat ADHD and related conditions. The measurements are recorded onto 'PharmOutcomes' a well-established commissioning and provider electronic platform and accessible by the CAMHS team to act upon. Provisions are in place for the community pharmacists to discuss any concerns with the specialist CAMHS clinicians either by an urgent phone call or via the PharmOutcomes website.

Local community pharmacists provide extended hours with appointments that can suit school, home and work commitments. They are also able to discuss any questions that families may have around medication side effects, drug interactions, mode of administration etc. Most pharmacies are already providing enhanced services to adults with many having consulting rooms and facilities to do height, weight, BP and pulse checks.

By moving the physical health monitoring to a local community pharmacy, the project team anticipated that this approach would support timely access to the clinic, improve symptom and side effect monitoring and support CYP and better compliance with the NICE guidelines (CG72). It was predicted that this service model would free up specialist resources to deliver more effective, efficient and high quality service for patients on ADHD medications.

## The Health Foundation Innovating for Improvement Award

We were successful in receiving The Health Foundation Innovating for Improvement Award (Round 3) to evaluate the practicality, acceptability and patient experience of the pilot project.

Our evaluation includes collecting both qualitative and quantitative data and analyzing the information. As part of this we have collected experience of service feedback from; parents, children and young people, GPs, community pharmacy staff and CAMHS staff. We are also auditing our clinic against the NICE guidelines for monitoring ADHD medications (CG72).

## Findings

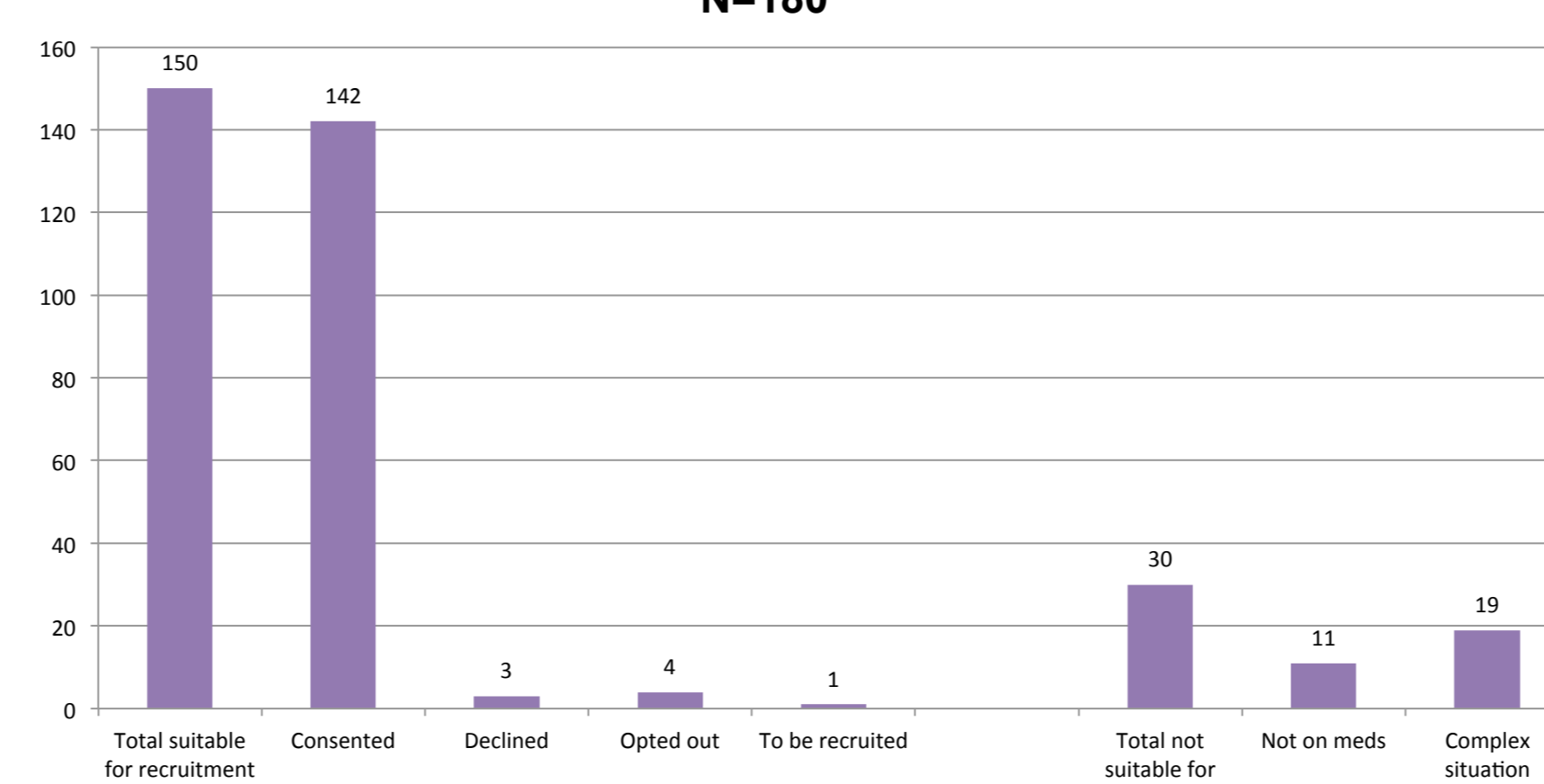
The clinic has a total of 180 patients who need regular monitoring in the ADHD clinic. All patient files were screened for suitability of recruitment. Over 83% of these patients were deemed suitable to be recruited into the project while 17% were excluded from the project. The reasons for exclusions included - not being on any medication, not on medication that required physical monitoring, patient due to turn 18 in a few months or patient suffering from complex psychopathology that needed physical measurement by a CAMHS clinician or GP. Of those who were suitable over 94% of parents/patients consented to participate in the project.

Patients who are participating in the project are having regular physical monitoring and their measurements are recorded on a centile chart consistently. Feedback from families shows that 100% of respondents saved time in visiting the pharmacy, with no added cost to them and 97% of respondents want the project to continue beyond the pilot. CAMHS clinicians are also feeling more confident in making any adjustments to treatments over the phone when patients have had their physical checks already done at the pharmacy and are able to closely monitor for any untoward side effects.

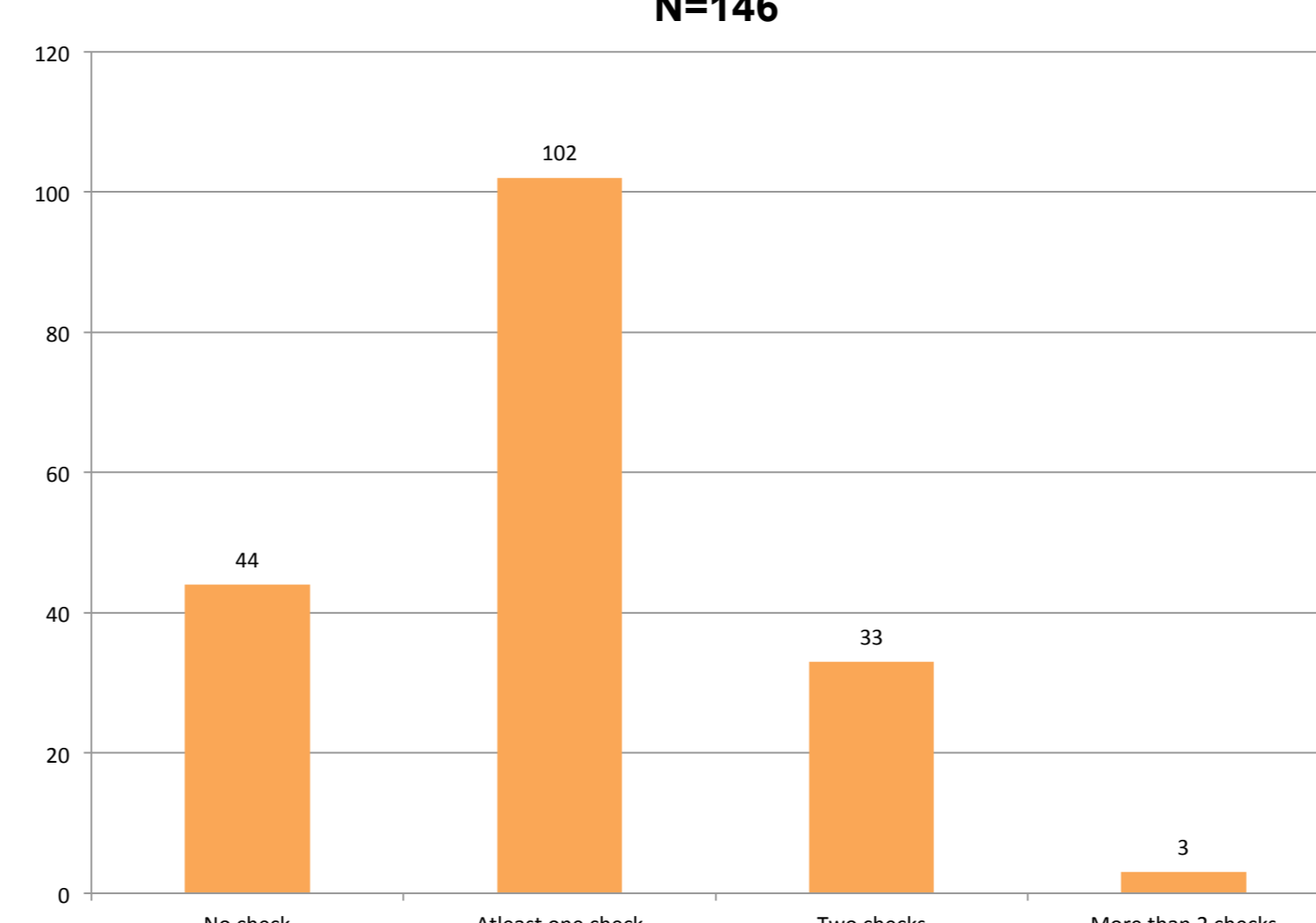
## KEY BENEFITS

Service Users	CAMHS clinic	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, and emails	
Reduced stigma	Delivery of enhanced quality of care	

Recruitment Activity breakdown  
N=180



Pharmacy Activity breakdown  
N=146



## Acknowledgements

This project is funded by The Health Foundation through 'Innovating for Improvement Award' (Round 3)

## Strategic Partners in the Project:

1. Sussex Partnership NHS Foundation Trust (**Lead organisation**)
2. Hampshire & Isle of Wight Local Pharmaceutical Committee (LPC)
3. Children and Maternity Collaborative Hampshire Five CCGs (hosted by North East Hampshire & Farnham CCG)
4. Strategic Clinical Network for NHS England (Wessex) for Maternity, Children and Young People
5. Wessex Academic Health Science Network (AHSN)

## References

NHS England (2015), 'Future in Mind', [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/414024/Childrens\\_Mental\\_Health.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Mental_Health.pdf)  
NHS Five Year Forward View (2014) <https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf>  
NICE Guidelines (CG72) - <https://www.nice.org.uk/guidance/cg72/chapter/recommendations#how-to-use-drugs-for-the-treatment-of-adhd>

## Feedback from Key Stakeholders

### Feedback from a parent

*"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"*



### Feedback from children & young people

*"Closer to home. I don't have to get in a car"  
"Long trip Ashurst. Short trip pharmacy"*

### Feedback from a General Practitioner (GP)

*"More accessible for patients and family ... No delay in scripts as we have the measurements all sent through to us before the scripts are requested ... much easier for family than having to make appointment at surgery"*

### Feedback from a community pharmacist

*"Engagement in the CAMHS-Pharmacy project has been a positive experience for me and the pharmacy team. 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"*

### Feedback from CAMHS staff

*"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)"*

## Discussion

Despite some setbacks and hurdles to navigate while setting up a novel service, the project has been very rewarding and all the key stakeholders are generally satisfied with the service model. Nearly everyone who hears about it, families in particular, are enthusiastic about the benefits to them. It has also allowed the clinic staff to reflect on how they put their limited resources to best use. This project has also acted as a catalyst to make wider changes to delivering care thereby improving the quality of the service which is going beyond the utilization of community pharmacies.

Looking to the future, utilization of community pharmacies that have staff with expertise in psychopharmacology, convenient opening hours and easy access should be explored, not just for under 18s on ADHD medication, but across the NHS to see if more clinical support and monitoring can be done outside of secondary care and GP practices.

## For further information please contact

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