

Medication history (psych)
- Luvox (fluvoxamine) 50mg Aug 2014 (100mg 2015)
- duloxetine 60mg introduced Aug 2015 (20mg/day in 2015)
- Adjunct with aripiprazole and olanzapine at some stage in 2017 (after introduction of levamisole)
MS/hallucinations)
the patient had a Myxoma (rare brain tumor) currently on 5mg nocte

HOW CAN WE

GOO!

MANAGE RICK

MEET

Current medications

Tofacitinib 5mg BD
Fab iron + Vit B complex
Aspirin 100mg nocte
Atorvastatin 80mg nocte

BACKC

IN THE

COMMUNITY

MEDIC

Clopidogrel 75mg dinner
Esomeprazole 40mg nocte
Folic acid 5mg weekly (as a
Methotrexate weekly 20mg on thursdays

AND AVOID

MEDIC

Panadol osteo 2 BD
Prednisolone 7.5mg mane
Nifedipine 10mg nocte
Fluvoxamine 100mg dinner

HOSPITAL

ADMISSIONS?

Mirtazapine 45mg nocte
Diazepam 5mg BD
Oxycodone 5mg nocte
Targin 20/10mg mane
Targin 20/10mg nocte
Mobic (meloxicam) 7.5mg nocte
Panadeine Forte prn



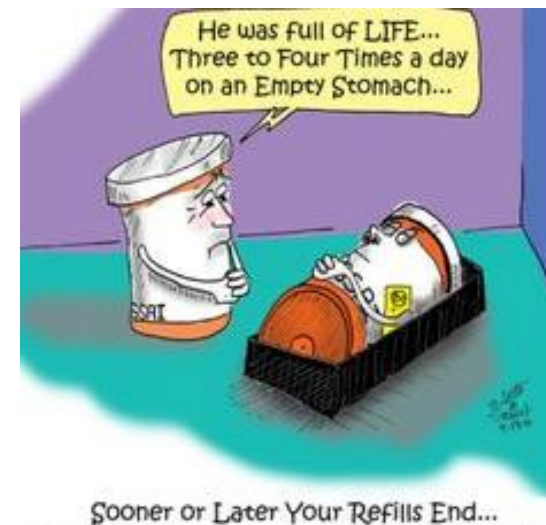
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INTEGRATIVE MULTIDISCIPLINARY SERVICES- KEY TOWARDS IMPROVEMENT IN MH CARE DELIVERY

Steven David
Senior Clinical Pharmacist
Mental Health
Bloomfield Campus, Orange

& team...

Sponsors, mentor/s, CMHT staff, patient



TEAM PHOTO



HOW IT ALL STARTED...

Outcome from accreditation 2017: "the excellent Pharmacy services in the Hospital should be extended out to the community mental health sites"

Patients with psychiatric disorders have shorter lifespans compared to the general population.

MH clients are at a high risk of non-compliance to medications and/or adverse drug reactions



Metabolic diseases, cardiovascular diseases & other adverse health conditions are common among patients with psychiatric disorders.

FACTS



"Using worst case scenario as a baseline,
I consider this data quite encouraging."

1. **More than 80% of individuals with a psychotic illness endure unpleasant side effects from their medicines**
2. **Cardiovascular risk factors should be routinely monitored in people on antipsychotics. However, monitoring levels are low and there is often failure to follow-up and treat patients.**
3. **Medication reviews for clients in CMHTs support identification and resolution of medication-related problems**

Clinical Pharmacy interventions are hugely cost effective: with a ratio of cost saving of \$24 returned for every \$1 spent

Mental Health, Drug & Alcohol transformation plan:

1. "Decrease inpatient care and increase community services"
2. "Increase access to evidence based approaches, multidisciplinary input and peer support"

Driver Diagram

Primary Drivers

Secondary Drivers

Change Ideas

Priority Change Ideas

The Problem:

Lack of medication management plans for community mental health clients

SMART Aim:

By January 2019, 100% of all community mental health clients will have a completed medication management plan.

Outcome Measure:

- % of patients with an accurate medical history
- % of patients who had a documented cardio metabolic screening in the previous 3 months

Team Members:

- Project Sponsor/s – Richard Cheaney, Jason Crisp
- Quality Advisor: Lauren Herd
- Mentor: Prue Kevans
- Team Leader - Steven David
- Community Mental Health staff Dr. Faisal Yaseen (Psychiatry trainee)
- Mental Health Pharmacists (Bloomfield hospital)
- Community Pharmacists (Hogan's)
- Consumer: Rick

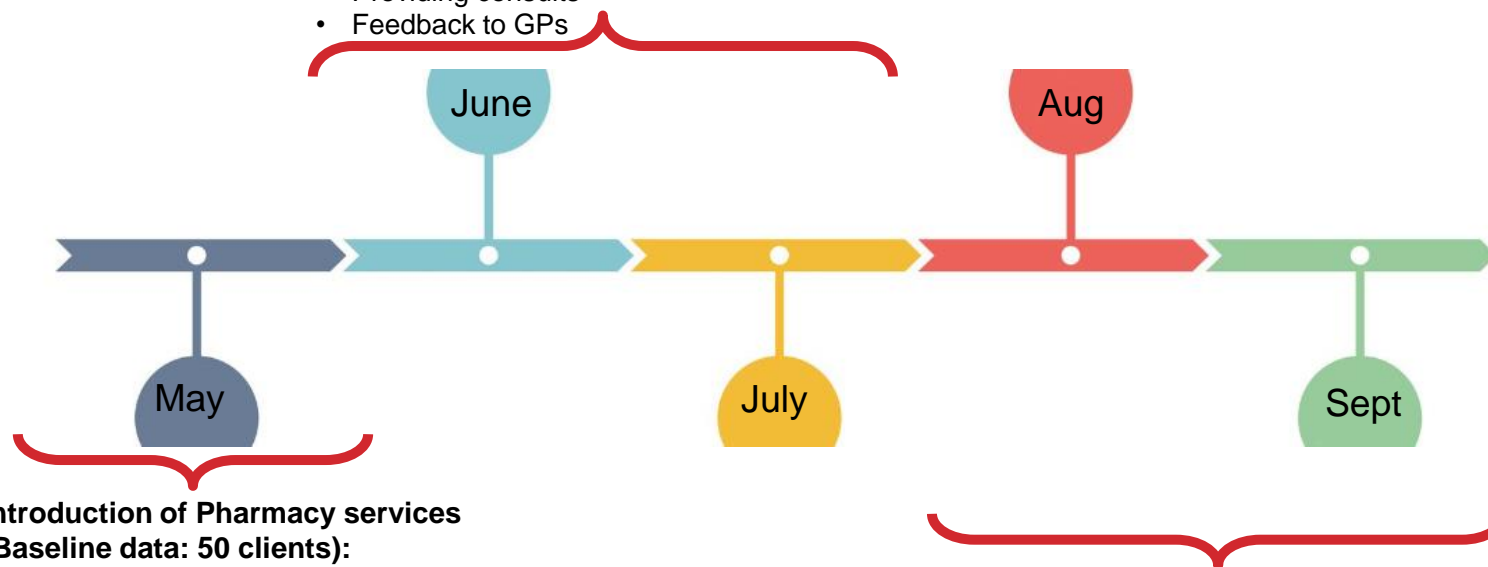




TIMELINE (2018)

Intervention period and establishment of process:

- Ongoing training on metabolic diseases/medication reconciliation
- Providing consults
- Feedback to GPs



Introduction of Pharmacy services (Baseline data: 50 clients):

- Less than 8% of clients had an accurate medication history (minimum of 2 sources used in obtaining a medication history).
- Less than 5% of clients that visited Likemind had a documented cardio metabolic screen in the previous 3 months

Sustainability measures

- Recruit a Pharmacist for Community Mental Health sites to sustain interventions
- Plans to increase the involvement of GPs in the project
- Ongoing monitoring of metabolic parameters via community services. E.g. community pharmacies.

EXISTING PROCESS

No structured method of:

- **Metabolic monitoring**
- **Medication reviews**
- **Facilitating effective engagement with GPs and other stakeholders**

NEW PROCESS



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A clinic nurse on site performs cardio metabolic screens (BP, POC glucose testing, waist, height and weight)

Clinical nurse on site initiates the medication reconciliation process (via Pharmacist's training & education)

Pharmacist engages with nurse to appropriately document medication history & cardio metabolic review on eMR

Pharmacist referrals:

- Referrals from Psychiatrists
- Referrals from case managers
- Referrals from clinic nurse (clients on >5 medications/complex medication regimen)

Pharmacist facilitates ordering of pathology to screen for cardio metabolic diseases (every 3 months according to NSW health guidelines)

Pharmacist reviews pathology in the context of their medical history & medications and closes the loop by discussing results with client's GP/Psychiatrist/case manager.



RESULTS

June 2018- July 2018

A total of 79 clients attended Likemind for a review by a Clinician between 1 June 2018 – 31 July 2018

17 clients were referred to the Pharmacist for a medication review

67% of clients had a documented Metabolic screen: 53/79

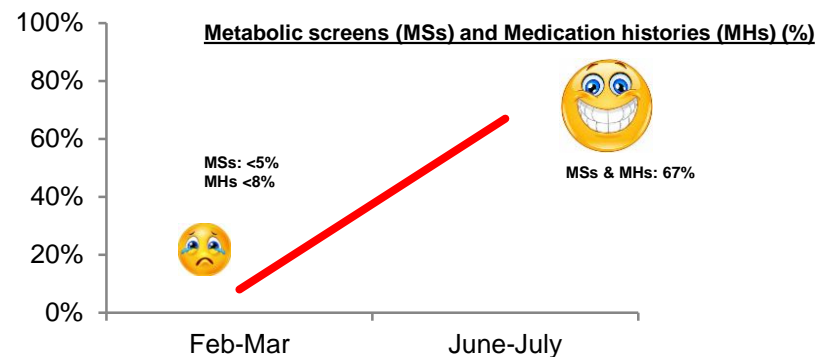
67% of clients had an accurate medication history: 53/79

13 Medication related errors were identified

8 clients were commenced/ had their therapy modified for a diagnosed cardio metabolic disease

9 Clients were provided with NRT education and strategies for smoking cessation

6 events of adverse drug reactions were identified and prevented



A PATIENT STORY... A LITTLE MORE ABOUT RICK



GOING FORWARD...

- Support would not have been possible without sponsors- Jason Crisp and Richard Cheney
- Support to increase the funding towards recruiting a Pharmacist at Likemind (Project: 0.2 FTE, 6 months)
- Explore alternative funding options
- Support to extend services to other CMHT sites in the district



STAFF SATISFACTION SURVEYS



1. Improvement with metabolic monitoring
2. Clients appreciative of Pharmacist's contact and education
3. Positive benefits to clients & case managers have identified clients who have limited contact with their GPs
4. Have a contact point for advice/education
5. I found the support & education beneficial. The Pharmacy service at Likemind is the first introduction Aftercare's new clinicians had experienced, so was appreciative that it was positive.
6. Improved client care and improved client outcomes
7. Improved knowledge regarding client's medications
8. Advise on medication use is readily accessible



THANK YOU

