

Hospital pharmacist prescribers win awards for patient care

Two projects in which hospital pharmacists have used supplementary prescribing skills to deliver marked improvements in patient care have won Pharmaceutical Care Awards for 2005.

Labib Tadros, specialist pharmacist at the County Durham and Darlington Acute Hospitals NHS Trust, and his team won one of the awards for a clinic Dr Tadros provides in a local general practitioners' surgery for patients with uncontrolled type 2 diabetes, who would otherwise be referred to a hospital consultant for treatment. Patients are selected for the clinic on the basis that they have glycosylated haemoglobin levels of more than 10 per cent, cholesterol levels of more than 5.5mmol/L and a systolic blood pressure of more than 160mm/Hg, with no other complications. Of 50 such patients identified, 42 agreed to attend the clinic.

The clinic is held once a week at the GP practice, with an average of six patients per clinic. Dr Tadros establishes a clinical management plan for each patient, evaluates their drug therapy and gives advice on issues such as the self-monitoring of blood glucose levels.

Once the clinic had been in place for 12 months, patients' mean glycosylated haemoglobin levels had reduced from 10.8 to 7.4 per cent, mean cholesterol levels from 7.9 to 4.1mmol/L and mean systolic blood pressure from 184 to 133mm/Hg. The number of pharmaceutical interventions made increased from 84 to 144. There was also a 28 per cent saving in diabetes-protected time in primary care and an 18 per cent saving in secondary care.

When interviewed by the GP surgery's practice manager, all the patients believed that their quality of life had improved and were keen to continue attending the clinic. The clinic is to be extended into two more GP practices in the area.



Left to right (front): winners Margaret Ledger-Scott, Labib Tadros and Christine Oates, with Niall Dickson, chairman of The King's Fund, and Stephen Ross, GSK's vice-president, specialist business units (back)



Winner Sandra Melville with (left to right) Digby Emson, chairman of the Company Chemists' Association, Niall Dickson and Stephen Ross

Sandra Melville, oncology pharmacist at Lorn and Islands District General Hospital, and her team also won an award for the services they provides to patients in Argyll who have lung, colorectal, breast or ovarian cancers.

As a supplementary prescriber, Mrs Melville is able to prescribe medicines to deal with side effects (eg, antiemetics) and adjust chemotherapy doses to reduce toxicity or optimise efficiency, in accordance with a patient's clinical management plan. Previously, such drugs had to be prescribed and dose-adjustments made by an oncologist during twice-monthly visits to Argyll, a remote area of Scotland, from his base in Glasgow. Between visits, prescribing was carried out using telephone and facsimile

communications with the oncologist or one of the junior doctors, the latter of whom might never have met the patient involved.

The number of occasions on which patients' therapy has been delayed while waiting for changes to be made to their prescription has reduced from 34 (five of which involved unnecessary overnight stays in hospital) to three (none of which involved an overnight stay). The number of medicines prescribed by junior doctors (per six-month period) has fallen from 43 to three, and the number of pharmaceutical interventions made has increased from 45 to 72.

The Pharmaceutical Care Awards for 2005 were sponsored by GlaxoSmithKline, The Company Chemists' Association and *The Pharmaceutical Journal*.

brief

■ The Department of Health has launched a guide describing the planned investment in a new generation of community hospitals. It aims to help them develop their services, bringing blood tests, X-rays and minor operations closer to patients' homes. "Our health, our care, our community: investing in the future of community hospitals and services" is available via *PJ Online* (www.pjonline.com/links/hp)

■ All sensitive information about patients should be encrypted automatically, rather than just password protected, according to a report in *E-Health Insider* (of 28 June). A survey found that 20 per cent of portable storage devices used by NHS professionals and suppliers have no encryption or password protection, with 40 per cent having password protection but no encryption. The most popular storage device was a USB stick.

■ Patients in clinical trials who take their medicines regularly have a lower risk of death than those with poor adherence, even if the medicine is a placebo, according to a new study (*BMJ* 2006; 333:15-18). The authors suggest that good adherence to study drugs might be associated with other healthy behaviours, which could independently affect mortality.

■ New legislation to give NHS bodies new powers to deal with people causing a nuisance or disturbance on NHS premises is proposed in a recent Department of Health consultation document. The paper seeks comments on the need for such legislation and aspects of its application. It can be accessed via *PJ Online*, (www.pjonline.com/links/hp). Closing date 1 September.

New ways of working needed to achieve better health care, King's Fund chief says

New ways of working will be necessary to get the most out of health care resources in the future. This was one of the main messages in a speech given by Niall Dickson, chief executive of The King's Fund, an independent charitable foundation working for better health.

Mr Dickson was the keynote speaker at the Pharmaceutical Care Awards 2005, held on 29 June at Stationers' Hall and Apothecaries' Hall, both in London (see p237 for details of two of the teams presented with awards).

Moves away from providing services at hospital sites, particularly for outpatients, should gather pace, Mr Dickson suggested. In particular,

hospitals should be viewed not in terms of the number of beds they have, but in terms of patient flow, with flexibility to make them bigger or smaller depending on need.

Other changes should include redrawing the boundaries between health professions, he said. "It is truly remarkable that when people are willing to attack problems and look at them in new ways, and people are willing to look again at the traditional demarcations between professions, how much can be achieved, using both supplementary and independent prescribing."

He added: "There is no reason why other people cannot be doing different

things. If you start from the patient's perspective, then you can start redrawing the boundaries that way."

Information technology will also provide an impetus for changing the way services are delivered, he suggested.

"Information will change relationships between patients and professionals. It will change relationships between professions. Developments in technology will make the notion of a single gateway to

health care through a GP superfluous, meaning that health care services can be differentiated to a greater degree, he added.

One cautionary note from Mr Dickson was that those with good working practices and ideas need to ensure that others are following their lead. "Otherwise pharmacists will simply end up repeatedly doing innovative work without it being taken up by anyone else," he said.

New delivery arrangements for *Hospital Pharmacist*

New postal charges mean that subsequent issues of *Hospital Pharmacist* will be sent out in the same wrapper as *The Pharmaceutical Journal*. If any hospital pharmacist or subscriber does not receive their journals, please e-mail your name, address and Society registration number to jo.cook@rpsgb.org

Competency framework designer wins Schering award for excellence

David Webb, director of clinical pharmacy for London, Eastern and South East specialist pharmacy services, has been awarded the 2005 Schering award, presented annually to a pharmacist who has made an outstanding contribution to pharmacy practice.

Mr Webb received the award for his leadership in the development of clinical pharmacy training, including the design, evaluation and implementation of competency frameworks. Mr Webb was presented with the Schering award at the College of Pharmacy Practice silver jubilee celebrations held at Apothecaries' Hall, London on 19 June.

In addition, to mark the 25th anniversary of the foundation of the college, honorary fellowships were awarded to all past Schering award winners. Honorary fellowships were also awarded to holders of the



David Webb (right) receiving the Schering Award from Geoff Bailey, vice president of Schering

Chairman's award and the Bryan Veitch award (for outstanding service to the College of Pharmacy Practice), officers and former officers of the college

(who completed at least one term of office for two years) and to people who have distinguished themselves in professional or public life.

Slow progress in NHS safety

Despite notable improvements in developing an open reporting culture in NHS trusts, under-reporting of safety incidents remains a problem, according to a new government report.

"A safer place for patients: learning to improve patient safety" acknowledges progress made by the National Patient Safety Agency, but questions its value for money, mainly in respect to delays and over-run costs of establishing the National Reporting and Learning System. The report makes several recommendations to the NPSA and to NHS trusts about how to improve reporting levels and improve feedback. It can be accessed via *PJ Online* (www.pjonline.com/links/hp).

Hospital Pharmacist conference

Owing to refurbishment of the hall at the Royal Pharmaceutical Society, the next *Hospital Pharmacist* conference will be held in February 2007.