

A pharmacist-led travel health clinic

Community pharmacists have been providing general travel advice to their customers for years. NHS Grampian has gone one step further and is piloting pharmacist-run travel clinics. Dawn Connelly reports

In 2006, 68 million UK residents travelled abroad. Most of these visits were to Europe but an increasing number of travellers are going to tropical destinations. Last year there were 1,754 cases of malaria diagnosed in people returning to the UK from malaria-endemic countries. Eight of these cases were fatal and most people had not taken the correct precautions needed for their visit.

Access to travel medicine services, immunisations and antimalarials varies throughout the UK and, since the new general medical services contract was introduced, some GPs have stopped providing them. Caroline Hind, pharmacist facilitator in the pharmacy medicines unit at NHS Grampian, explains that this is true in Grampian, where GP travel services are variable and the local NHS travel clinic is oversubscribed. For this reason, the health board decided to investigate the demand for, and feasibility of, travel clinics run by community pharmacists.

The resulting research project, conducted in association with NHS Grampian and Aberdeen University, and funded by the Chief Scientist Office (part of the Scottish Executive Health Department), identified a need for additional services and a willingness of the public to attend a community pharmacy for these services. This led to a pilot study, launched in September 2006, in two community pharmacies within Grampian.

A number of pharmacists in the area were already participating in the successful NHS Grampian pharmacy influenza immunisation scheme (*PJ*, 29 July 2006, p134), which started in October 2002, so extending the service to include travel health was a natural next step, says Dr Hind.

Charles Michie is the proprietor of Michies The Chemist in Aberdeen, where one of the clinics is located. He has been running a flu vaccination clinic in the pharmacy for the past five years.

The pharmacy has one consultation room and two clinic rooms, which are larger and equipped with full-length couches in case people feel unwell after receiving a vaccination. In the basement there is a 100-seater coffee shop where patients are offered a complimentary drink so as to encourage them to stay on the premises for the required 15 minutes post-immunisation.

Mr Michie and his pharmacists run two clinics per week, with the option of additional bookings if a travel health qualified pharmacist is available. They see about 20 to 30 patients weekly and each is allocated a 30-minute appointment.

During the appointment, a customer's travel health risk is assessed with the aid of the Travax website (www.travax.nhs.uk) for

health professionals. The pharmacist then decides what immunisations and antimalarials are required, and can provide or administer most of them immediately. The clinic is not licensed to administer yellow fever or Japanese encephalitis vaccinations and patients requiring these are referred to a doctor. Advice on bite prevention, personal hygiene, food and water, sun exposure, sexual activity, bites and stings, prescription medicines and what to include in a basic first aid kit is also given.

The clinic is self-financing, with patients paying a consultation fee only if they do not subsequently receive vaccinations or purchase antimalarials at the clinic.

The pharmacy always has at least two pharmacists on duty, something which Mr Michie considers essential. "If you are going into travel medicine, in my opinion, it should only be done when supported by a second pharmacist supervising the regular pharmacy duties," he says.

In terms of training, Mr Michie explains that he has attended two travel medicine courses, one organised by NHS Grampian (see Panel), and one provided by one of the vaccine manufacturers. He is also a member of the British Travel Health Association and attends its courses and conferences. In addition, as part of the ongoing flu immunisation scheme, he attends annual courses on flu vaccination and treating anaphylaxis.

The pharmacy clinic operates in conjunction with the local NHS travel clinic, which is run by doctors and nurses, and is located at a nearby hospital. "If they get overloaded they send the more straightforward cases to us. And, likewise, any difficult cases, such as pregnant women or people who have had transplants or a severe reaction to a previous vaccine, we refer to the NHS travel clinic. In



my experience the system works extremely well," he says.

The service is under constant evaluation via anonymous patient questionnaires. Data collected to 19 May includes 147 questionnaires, 76 from females and 71 from males. Vaccines were administered to 81 per cent of clients and 47.6 per cent received malaria prophylaxis. Of those who responded 98 per cent would use the pharmacy again and 98.6 per cent thought the pharmacist had provided all the information they required about travel health. The pharmacy service provided value for money in the opinion of 83 per cent of respondents.

The largest group of customers (50 per cent) were referred to the clinic from their GP surgery, with around 30 per cent hearing about it through friends. The questionnaires also revealed that a third of respondents considered the pharmacy to be a more convenient location than their GP surgery and a quarter said that their GP was not providing the service. A quarter of respondents also said they could get an earlier appointment at the pharmacy clinic and 30 per cent said that it offered more convenient times. Overall, respondents rated the service as 10 out of 10.

Dr Hind says that the next steps will be to integrate the pharmacy service with GP and travel clinic services in order to create a tiered approach.

"There has also been interest from community health partnerships that want to provide a pharmacy service on an NHS basis on a much wider scale," she says.

Dr Hind hopes to identify more pharmacists in the area who wish to run travel health clinics.

NHS Grampian training topics

- Travel medicine risk assessments, vaccinations and antimalarials
- Principles of immunisation
- Legal requirements for consent
- Data protection
- Documentation required
- Professional accountability
- Use of patient group directions
- Cold chain requirements
- Assessment of fitness for vaccination, contraindications for vaccination
- Practical vaccination skills
- Preparation and disposal of vaccination equipment
- Identification and treatment of anaphylaxis