

Using Medication to Manage Behaviour Problems in Adults with a Learning Disability:

Interdisciplinary Working The Pharmacist's Perspective

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What is an LD Pharmacist?

- A specialist Psychiatric Pharmacist with LD responsibilities
- Member of UKPPG
- Has a Post-Grad Certificate or Diploma from the College of Mental Health Pharmacists which has an LD component
- Often based at a psychiatric hospital or within a community/PCT LD team
 - Someone with an interest in LD and good knowledge of the best use of psychotropic medication.

Pharmacist Prescribing

- This may be happening in some areas but:
 - This is not the most efficient use of pharmacist knowledge and training
 - There are not enough of us - 25% of posts in MH are unfilled
 - We need a clear divide between the roles of prescribing and monitoring.

What can we do?

1. Be part of the interdisciplinary team
2. Monitor interactions and side effects
3. Provide information
4. Provide support to overstretched carers

What can we do? 1

- Be part of the interdisciplinary team:
 - **Attend patient reviews - get to know the patients**
 - **Bring another perspective as an informed professional to promote good practice in complex situations**
 - **Look at the patient holistically**
 - **Suggest alternative medications/formulations**
 - **Ensure suitable doses are prescribed**
 - **Do medication histories**
 - **Remind the team that medication is NOT necessarily the answer**
 - **Help ensure we meet 'Valuing People' recommendations.**

What can we do? 2

- Monitor interactions and side effects
 - **Check prescriptions**
 - **Visit care homes to improve medicine management**
 - **Ensure the medicines used and doses given are appropriate**
 - **Ensure that there are suitable care plans for the use of PRN medication**
 - **Remind carers about blood tests and reviews**
 - **Check Lithium levels (try to close the circle)**
 - **Advise carers on improved medicine regimes to reduce the causes of problem behaviours, e.g. constipation and other side effects**
 - **Promote regular reviews with GPs.**

What can we do? 3

- Provide
 - information to patients, carers and colleagues (e.g. UKPPG information leaflets and suitable dose forms for use with PEGs)
 - training for staff in social care and nursing homes
 - Support for the carers.
- Better Knowledge = better use of medication.

- Monitoring is important as can be seen from the recent reports about Cornwall LD homes.
- CSCI sends inspectors, but the service provider needs the skills of a pharmacy team to get to know the home carers and help them to manage the medication better, and improve the lives of all people with a learning disability.