

# Service Evaluation of a New Pharmacist-Led Memory Clinic in the Taff Ely Older Persons Mental Health Team

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## Introduction

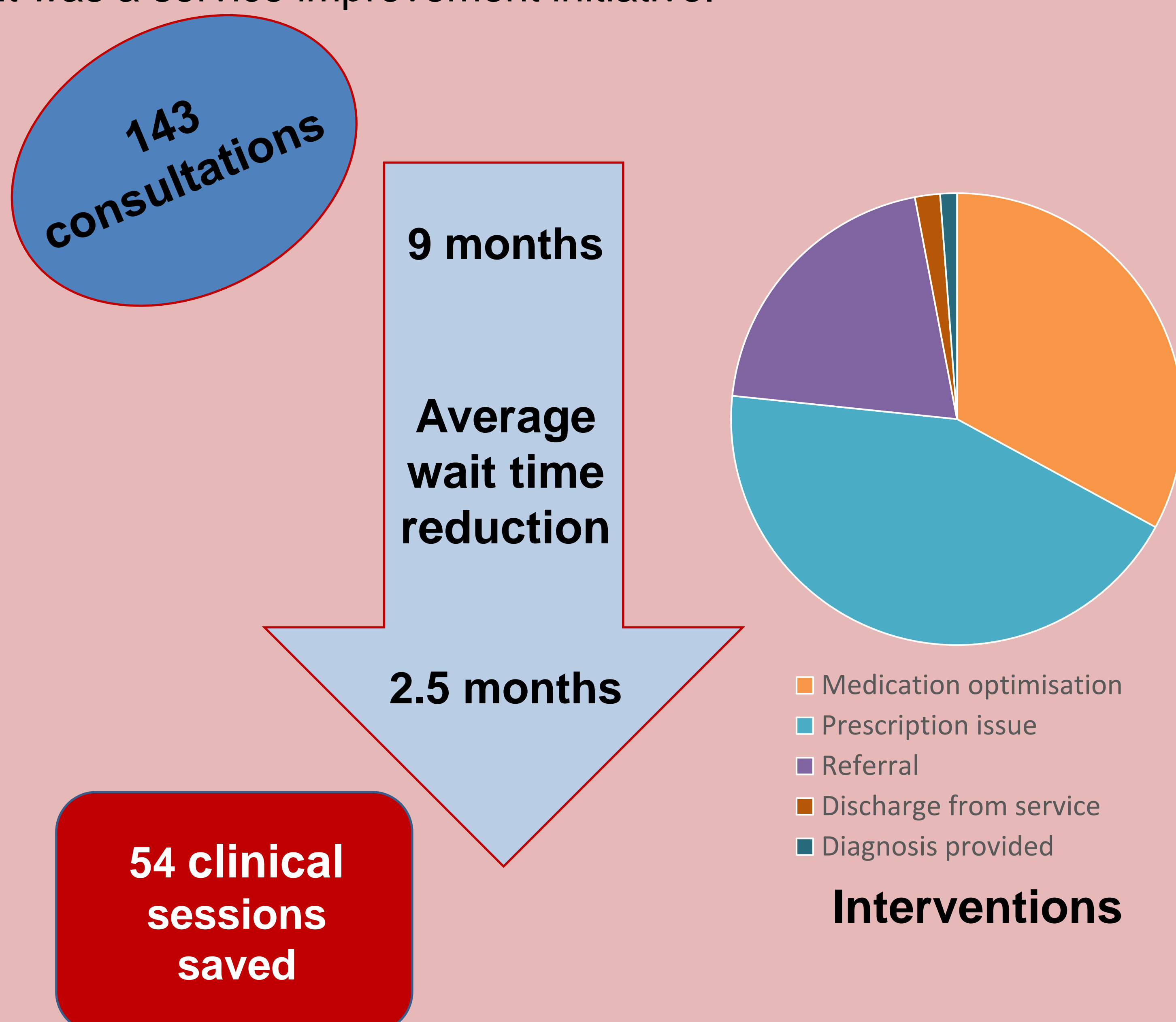
The increasing demand on memory assessment services and dissatisfactory wait times to diagnosis, necessitated innovative approaches to optimise consultant time and improve patient care. Nationally there has been a push towards integrating pharmacists into multidisciplinary teams to enhance service delivery<sup>1,2</sup>, and how their involvement can positively influence patient outcomes<sup>3</sup>. This project aimed to evaluate the impact of a pharmacist-led memory clinic within the Taff Ely Older Persons Mental Health Team.

## Aims

- To explore the benefits of a pharmacist-led memory clinic within a community mental health team.
- Determine if there was a reduction in wait time for a consultant appointment for new patients.
- Evaluate the number of clinical sessions and hours of consultant time freed up by the pharmacist clinic.
- Evaluate the types and frequency of medication interventions made by the pharmacist.

## Method/Design

By collecting data pooled from GP letters over a 14 month period, this service evaluation employed a quantitative approach to assess interventions made within the pharmacist clinic. Data was collected on the following interventions made by the pharmacist: medication optimisation, prescription issues, referrals to additional services, providing diagnosis and discharging patients. As 'complex follow-ups' these patients would routinely have been seen by a consultant; therefore time saved was calculated by totalling clinic and administrative time. The project did not require ethical approval as it was a service improvement initiative.



## Results

The pharmacist-led memory clinic assessed a total of 143 patients. This initiative resulted in the freeing up of 54 clinical sessions, equivalent to 189 hours, with a concomitant reduction in wait time for a new patient appointment with a consultant from 9 months to 2.5 months. 95 consultations resulted in a prescription issue, 34 referrals made to services such as Carers Group, Social Services and Audiology, and 7 de-prescribing recommendations to GP. Other meaningful interventions included the expedition of two cataract surgeries and two more rapid diagnoses of movement disorders that required pharmacological intervention.

## Conclusions

The implementation of a pharmacist-led memory clinic significantly reduced consultant workload, allowing consultants to see more new patients to provide diagnosis and focus on complex cases. The upskilling of the pharmacist within the clinic demonstrated the value of multidisciplinary approaches in mental health services. The variety of interventions, particularly the high number of prescriptions issued and medication advice provided, highlights the critical role pharmacists can play in patient care. These findings support the continued integration of pharmacists into memory clinics and may inform future service developments within the Cwm Taf Morgannwg University Health board. Further studies could explore the attitudes of dementia patients and their carers towards a pharmacist-led memory clinic patient, and the broader impact on healthcare systems.

## References

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