



OLDER  
PEOPLE

## National Clinical Programme for Older People

Specialist Geriatric Services Model of Care, Part 3: Mental Health Service Provision

Consultation Period: 15<sup>th</sup> April to the 26<sup>th</sup> May 2015

Comments to be received no later than 5:00 pm Tuesday 26<sup>th</sup> May 2015

### Public Consultation Comments

Please use this form for submitting your comments to the Programme.

1. Please put each new comment in a new row.
2. Please insert the **section number** (eg 3.2) in the 1<sup>st</sup> column. If your comment relates to the document as a whole, please put **'general'** in this column
3. Please insert the **page number** (ie '7') in the 2<sup>nd</sup> column.
4. **Please note forms with attachments such as research articles, letters or leaflets will not be accepted. If forms are received with an attachment they will be returned without being read. Any resubmitted forms without attachments must be by the consultation deadline.**

<b>Name &amp; Title:</b>		<b>Conor O'Leary, Senior Pharmacist Advisor</b>
<b>Profession and/or specialty:</b>		<b>Pharmacist</b>
<b>Please indicate if this is feedback as an individual or representative of a group and name this group:</b>		<b>Group; The Pharmaceutical Society of Ireland (PSI) – The Pharmacy Regulator</b>
<b>Section Number</b>	<b>Page Number</b>	<b>Comments</b>  Please insert each new comment in a new row.

Please return the comments form to: [dervelagray@rcpi.ie](mailto:dervelagray@rcpi.ie)

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General		<p>The Model of Care as outlined in the draft document is welcomed. The patient is at all times at the centre of the proposed initiatives, and the range of inter-professional engagement and collaboration described is commendable. The executive summary describes effectively the need for the development of specialised mental health services for older people, which provides clear pathways from primary care through to tertiary care within a fully integrated allied healthcare professional framework. The PSI feels that in light of this cross-collaboration between various healthcare professionals, the pharmacist could play a key role in the transition of care from the home to more formalised secondary and tertiary care settings. Communication channels have been established in both the community and the hospital settings between medical practitioners, nurses and other healthcare professionals, and the specialised knowledge of pharmacists in the area of pharmacology and medication therapy has been shown to be of benefit to patients and professionals alike.</p> <p>Perhaps the acknowledgement of this role of the pharmacist in the care of older people could be explored in the document.</p> <p>The PSI would also suggest that the development of the National Clinical Programmes is an opportunity to focus on the development of interdisciplinary team-based approaches to patient care rather than multidisciplinary approaches and it is perhaps a missed opportunity not to promote an interdisciplinary ethos throughout this and other Programmes.</p>
9	37	<p>The roles of the various multidisciplinary team members are clearly set out and explained succinctly. Doctors, nurses, clinical psychologists, social workers, occupational therapists and administrators are all referred to and their duties within the MHSOP framework discussed.</p> <p>We would suggest that the role and duties of pharmacists in both community and hospital care settings be included in this section to provide a complete overview of all members of the multidisciplinary team providing geriatric services.</p>

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11	54	The education and professional learning of each member of the multidisciplinary team is outlined clearly in this section. Pharmacists are omitted from this section. Perhaps this exclusion could be addressed by referencing the mandatory continuing professional development (CPD) requirements for pharmacists and the establishment of the <a href="#">Irish Institute of Pharmacy</a> (IloP). The IloP has been established by the PSI to establish and operate the new system of CPD for pharmacists in Ireland, and for supporting the development of pharmacy practice to ensure that it meets the emerging needs of patients and the wider healthcare system. The IloP is also responsible for the management of and support mechanisms for pharmacists' engagement with CPD and it commissions education and training programmes in line with national policy, evolving healthcare needs and the needs of the profession. This is in line with the provisions of the Pharmacy Act 2007 regarding mandatory CPD and the "acquisition of specialisation" by pharmacists in Ireland to safeguard the high standard of care provided to all patients in all care settings. The establishment of both the mandatory CPD system and the IloP ensures that pharmacists maintain and build on their competence as part of lifelong professional learning.
5	17	The issues impacting upon the health of older people is plainly explained in section 5, with the prevalence of alcohol and drug misuse examined. Pharmacists can play an important role in assisting physicians and other healthcare professionals to accurately prescribe medications to combat the issues highlighted and mitigate the incorrect use of prescribed and over-the-counter medications in older people. The common mental health disorders referred to in the draft document are those which are predominantly treated with a combination of psychotherapy and pharmaceuticals. As experts in the use and effects of medications, there is scope once more here, for pharmacists to positively contribute to the care and medication concordance of older people.

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7.3	29	The residential care setting and the mental health morbidity of residents in nursing homes is examined in section 7.3. Pharmacists in the community actively engage with residential care facilities on an ongoing basis, by supplying medication to the care home residents. This process requires inter-professional communication and the establishment of sound policies and procedures to ensure the safe and effective continuation of care for those older patients who have transitioned from the community into a formal residential setting. To ensure that pharmacists are acting optimally at all times within their scope of practice, The PSI has issued <a href="#">Guidance</a> to the profession on how best to conduct the supply of medicines to nursing home patients. Additionally section 7.3 could be expanded, so that the added burden of polypharmacy on patients' healthcare needs is explored and possible solutions to this potential problem addressed by the inclusion of pharmacists in the MHSOP professional team.

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