



Patients applaud local coagulation testing

Surinder Singh Kalsi, pharmacist, Kalsi Pharmacy, Barking, Essex

ANTI-COAGULATION DRUGS MONITORING SERVICE, BARKING & DAGENHAM PCT & BOROUGH

When community pharmacist, Surinder Singh Kalsi, found out in 2006 that the local PCT was inviting bids for an anti-coagulation drugs monitoring service his reaction was that this was a service that could be provided by local pharmacies.

“I thought that community pharmacy could do just as good a job of providing this service – in fact better, because we have the advantage of being open for longer hours as well as weekends so we can offer patients much more convenient and flexible opening times than a GP surgery or hospital clinic,” says Surinder.

Surinder put in his bid in collaboration with two GPs as he was told he needed to have a clinical lead to run the service. They won the bid and started the service in March 2007. The contract was to provide anti-coagulation services to stable patients discharged from hospitals in the area.

WHY THE SERVICE WAS NEEDED

Anti-coagulation monitoring was previously carried out in hospital clinics, but there were frequent problems with GPs not getting results sent through, as well as patients finding it difficult to make the clinic times, which often involved a long wait. Patients on anti-coagulant medication need frequent blood tests, often weekly, and not turning up for an appointment can have serious consequences for their health.

“I have one patient who is a long-distance lorry driver and needs frequent monitoring for his medication. This was often difficult when he had to stick to hospital clinic times. Now he comes to me early in the morning, has his test, and can be off to work in 10 minutes,” says Surinder.

HOW DOES THE SERVICE WORK?

The pharmacist uses a coagulation analyser to measure the clotting ability of the patient’s blood. This involves taking a pin-prick sample of blood from the finger tip, which is then put onto a slide and entered into the

machine for analysis. “The machine we use has three testing channels and two quality control channels which are there to tell us if the analysis has failed and another sample needs to be taken,” explains Surinder.

The analyser gives the pharmacist the patient’s INR (International Normalized Ratio) result, which shows the clotting speed of the blood. The pharmacist then gives the patient and the GP the result and any recommended change of medication dosage needed. The whole process takes 10 minutes.

“We offer patients convenient, flexible appointment times, six days a week. We also run two lunchtime clinics in LIFT (Local Improvement Finance Trust) centres and two further clinics in GP surgeries, which will soon include a third clinic. We’re also doing home visits for those patients who are not mobile.”



WHO RUNS THE SERVICE?

There are two teams providing the service in the area. Surinder's team includes three pharmacists and two GPs. "It works well as we're in close contact with the GPs and can call them directly if we have any queries, although this is unusual," says Surinder.

MEASURING SUCCESS

An initial target of servicing 300 patients in the first year was given, but already they've seen over 400 between the two teams, with Surinder's team seeing over 300 of these and numbers growing steadily. "We know the PCT are impressed with the service as they are considering allocating us more funding," says Surinder.

POSITIVE FEEDBACK

Patient evaluation surveys are carried out regularly and the most recent received a 97 per cent satisfaction rate.

Patients particularly praise the convenient appointment times, speedy service and efficiency of the system. The GPs are happy too.

"Before we took over the service, GPs used to complain that results were not passed on from the hospital clinics quickly enough, or sometimes not sent at all. We send a report to the patient's GP immediately after each testing and this helps to ensure the patient's condition is kept stable," explains Surinder.

The PCT is more than satisfied with the service. "They attend our bi-monthly review meetings and we've had good feedback from them, which I take as a sign that we're doing it right."

BREAKING NEW GROUND

Since setting up the service, Surinder believes that it's helped to give community pharmacists in the area more credibility as clinicians, with the PCT regarding them as equals to the GPs.

"We now get invited to the PCT cluster meetings and this gives us the opportunity to air our case in front of the decision makers. GPs are now contacting me for advice on their patients in terms of antibiotic prescribing and choice of other treatment options for other conditions too. Our service is making a difference to the public and we are being recognised for its success."

**Royal Pharmaceutical Society
of Great Britain**
1 Lambeth High Street
London SE1 7JN
Tel: 020 7735 9141
Fax: 020 7735 7629
e-mail: pr@rpsgb.org
www.rpsgb.org

Scottish Office
36 York Place
Edinburgh EH1 3HU
Tel: 0131 556 4386
Fax: 0131 558 8850
e-mail: scotinfo@rpsgb.org
www.rpsgb.org/scotland

Welsh Office
Unit 2, Ashtree Court
Woodsy Close
Cardiff Gate Business Park
Cardiff CF23 8RW
Tel: 029 2073 0310
Fax: 029 2073 0311
e-mail: wales@rpsgb.org
www.rpsgb.org/wales



**Royal
Pharmaceutical
Society
of Great Britain**