

# Street Pharmacist Assertive Outreach

## Lauren Gibson- Edinburgh



BBC.COM

**Getting medicine to Edinburgh's homeless**

Meet the pharmacist who goes out onto the streets...

# Hello !

- Lauren Gibson
- Clinical Pharmacist
- 10 years qualified
- Independent Prescriber, Clin Dip, PhD
- Background in GP Practices, Addiction Services Prescriber & Homeless Healthcare
- Work Across Glasgow & Edinburgh City Centre
- I started up the Pharmacist Homeless Outreach Service in Edinburgh



# What I am trying to do...

- Aim- to take healthcare to the people
- To engage with **the** most entrenched, **the** most vulnerable homeless population
- Traditionally challenging to engage
- Make accessing healthcare easy, more attractive, and sustainable- less drop out /disengagement
- Build a service responsive & that moulds to patients and NOT expect patients to mould to services
- Recognise this not a mainstream service
  - Needs to be run differently

**To take  
healthcare  
to the  
people**

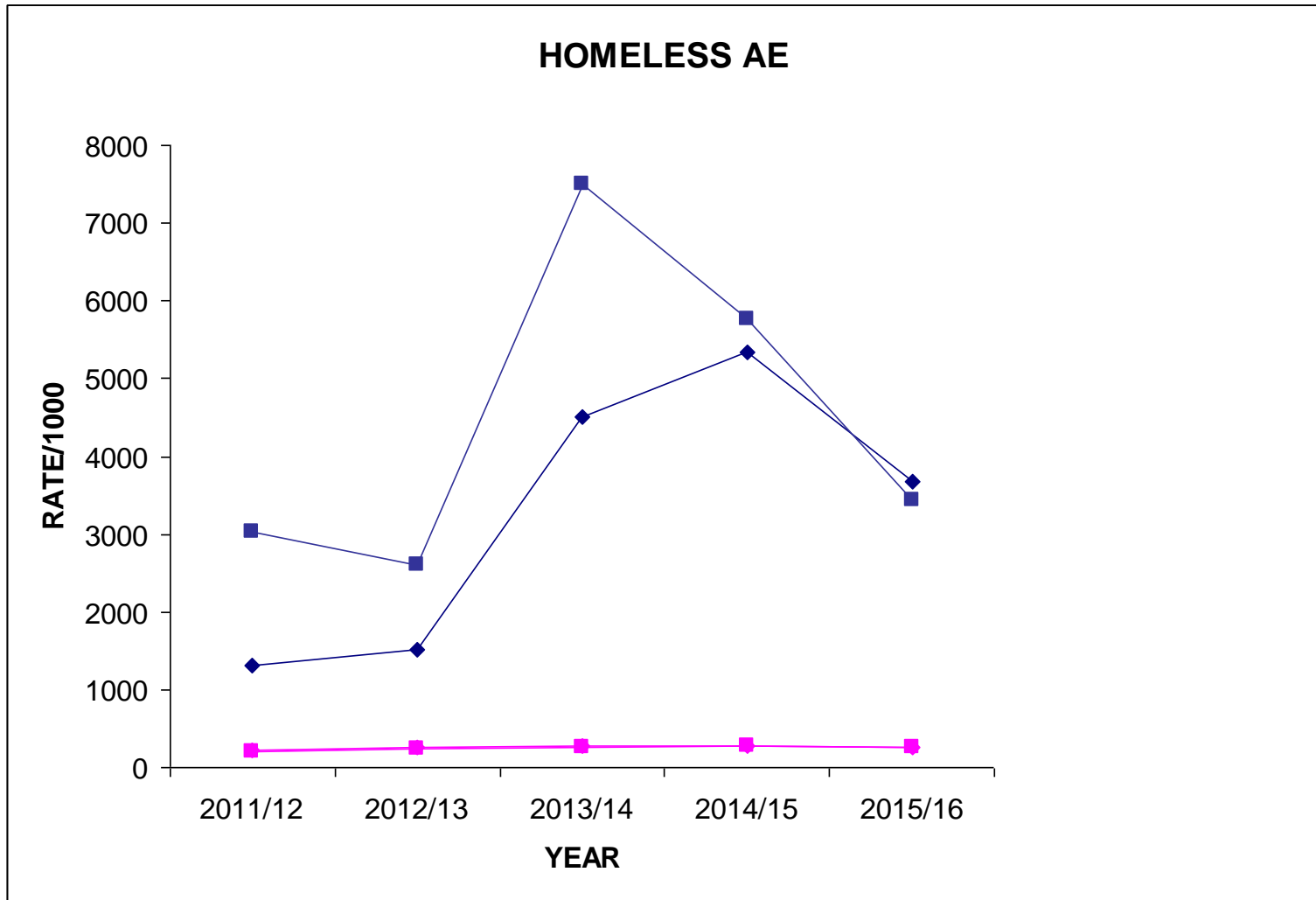


# Why I am doing this?

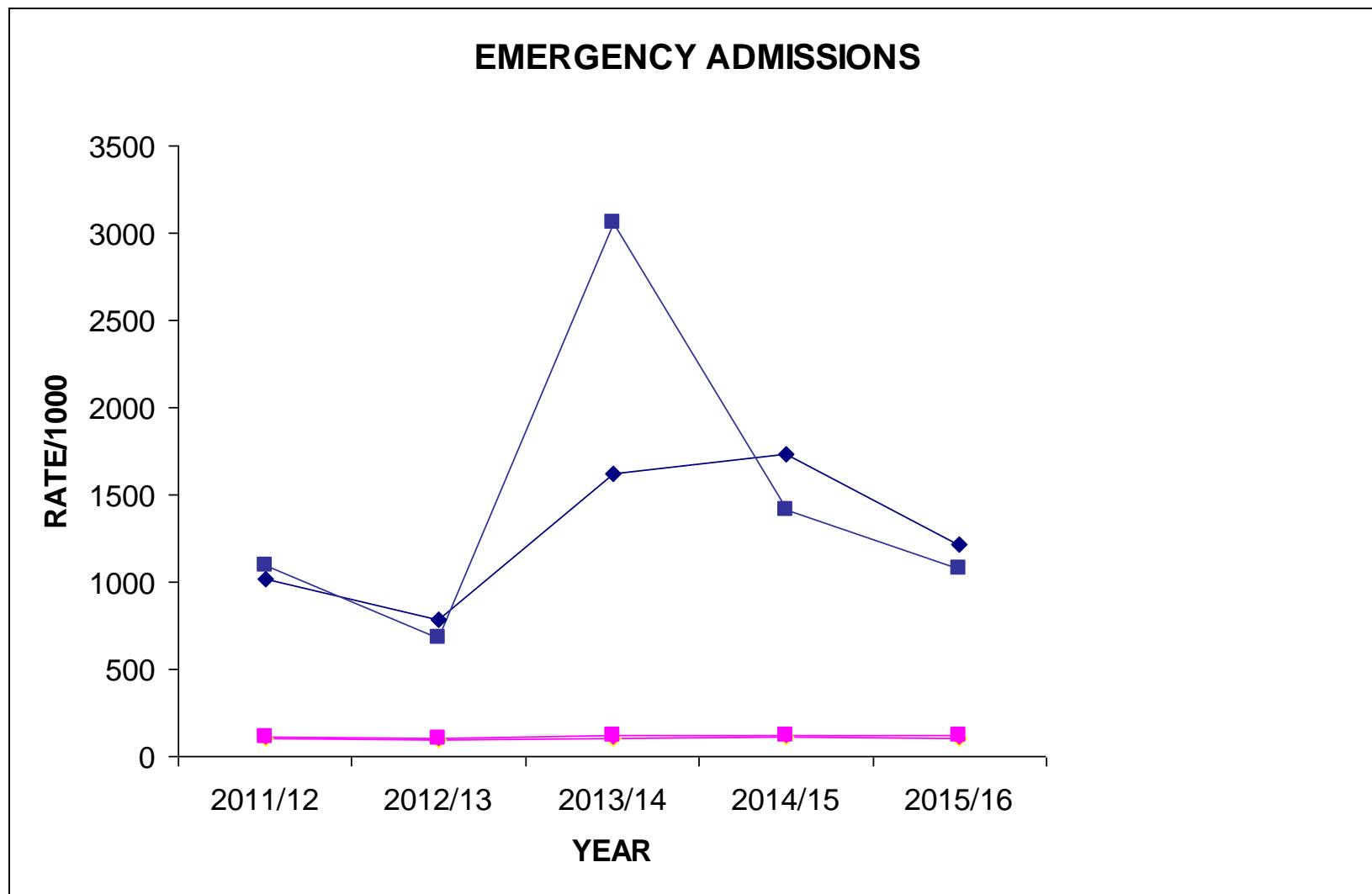
- Age of mortality in homeless
  - 47/ 77 years male
    - 43/81 female
- **Forty times less likely** to have a registered GP
- Visit A&E **four times as much**
- 45% /25% of homeless have diagnosed mental health problems
- 41% /28% of homeless have long term physical health problems
- Higher incidence of substance misuse and BBVs include Hep C & HIV

**To take  
healthcare  
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# Why make healthcare easier to access?



# Why make healthcare easier to access?



# How am I doing this?

Collaboration between health care & third sector  
**Edinburgh Access GP Practice & Streetworks**

- Pharmacist and Streetworks Outreach Worker
- One full day per week assertive street outreach
- We walk the streets to known begging routes and rough sleeping / injecting sites
- Have pop up clinics in known homeless engagement sites
  - Salvation Army Niddry Street
  - Streetwork Hub
  - Hostels & Day Centres





# Who are we? The Team

Lauren Gibson – Street Pharmacist

David Miller- Streetwork Outreach Liaison

Dr John Budd – GP EAP- Clinical Leadership

## Supported by

Dr Daisy Higginson GP Fellow

Wider EAP team CPNs, Nurses

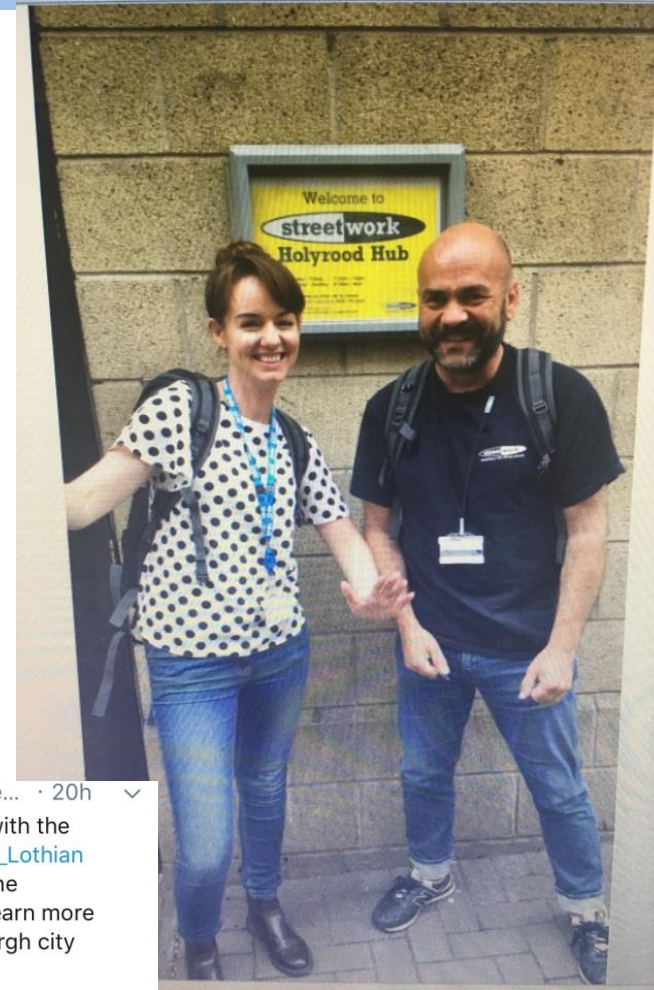
Wider Streetworks outreach team

Wider third sector organisation



## Full team effort

Expertise, experience, passion



Scot Gov Health  @scotgovhe... · 20h  
.[@JoeFitzSNP](#) spent some time with the outreach pharmacist from [@NHS\\_Lothian](#) Edinburgh Access Practice and the [@street\\_work](#) outreach team to learn more about the work they do in Edinburgh city centre





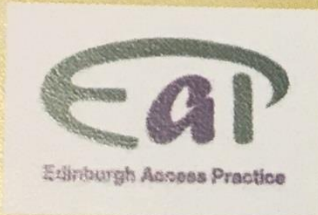
- BBC News
- <https://www.facebook.com/bbcthesocial/videos/2242780475969935/>





# Results - Six Month Report

- We have reached around **170 people**, around **8 a day**
  - Total unique patients seen- 82
  - 48% of patients we were able to follow up
- Of those we reached that did **not** have a GP, we registered **74%** of them **same day** to the Access GP Practice – **increasing access**
- Of those we registered, **61 %** then went on to visit the GP- **good conversion rate to registrations to attendance**
- Of those seen & assessed that needed a further GP consult, **70%** of those referred went on to actually attend the appointment- **good conversion rate to increased access to a GP & triage good**
- **Gold Card Scheme**
- **56% of all patients seen** where given an on the spot street prescription and access to medication- taken to them- **increased access to treatments- pharmacist manage solo**



**\*\*Seen on  
Outreach\*\***



**Please see this patient**

Name:  
To See:

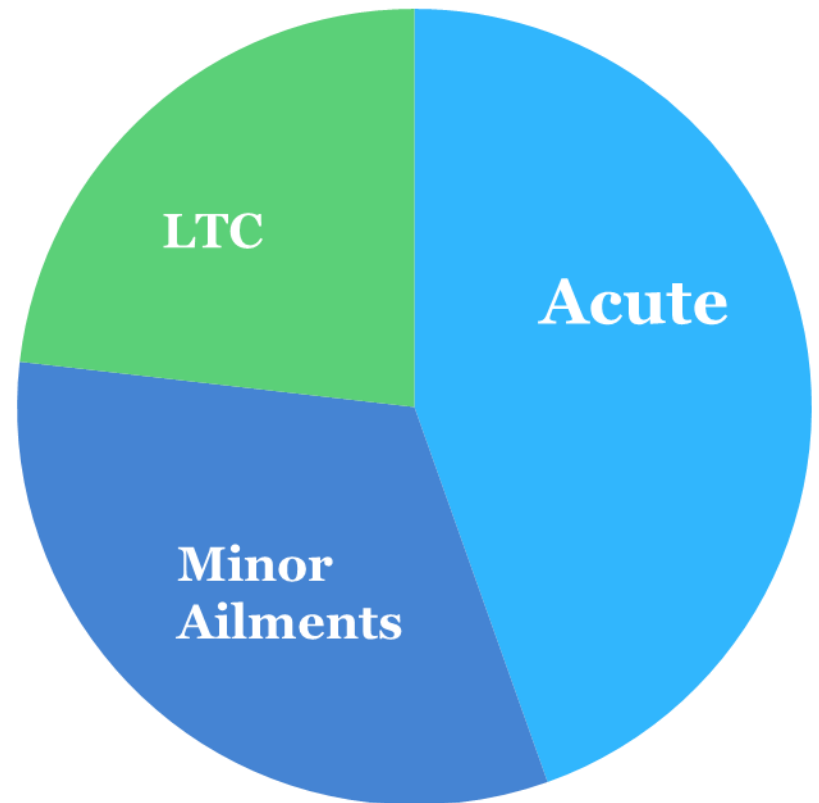
# Prescribing - IP NMP- some detail..

- 56% of all interventions resulted in patients receiving immediate on the spot medication
- 95 from 172 interventions
- 113 items prescribed



# What am I prescribing for?

- Acute conditions 44.2%
- Minor Ailments 32%
- Long Term Conditions 23%



# Acute

- Skin = 26%
  - *infections (topical antibiotics), rashes & bites (topical steroids), dryness (emollients), clean dressings*
- MSK = 22%
  - *muscle pains & strains (topical NSAIDs, tubagrips)*
- Thiamine = 18%
- Gastro = 14%
- Infection = 14%
  - *Eye = (8%) chloramphenicol*
  - *Dental = oral antibiotics (4%)*
  - *Tonsillitis = oral antibiotics (8%)*
- Respiratory = 4%
- ORT = **METHADONE- 2%**

# Minor Ailments (Pharmacy)

- **coughs & colds= 40%**
- **skin =22%**
- GI=12%
- smoking cessation = 6%
- MSK=6%
- dental = 3%
- allergy = 3%
- pain= 3%
- nasal= 3%

# Long Term Conditions Medications for repeat Rx....

- **Mental Health= 40%**
- **COPD = 27%**
- Epilepsy= 14%
- Gastro= 7%
- Pain= 7%
- Osteoarthritis =7%

# Complex Cases Study 1

- Male Age 36
- Identified begging on pharmacy outreach Nov 2018
- Rough sleeping, no registered GP, intravenous drug injector, not on any methadone script, at risk of BBVs, poor mental health, no accommodation, no benefits
- Health Support Lauren Pharmacist & Access Practice
- Patient same day registered with the Edinburgh Access Practice.
- Patient was started on ORT script same day at clinic presentation, methadone.
- Is being prescribed this by myself on outreach to ensure engagement
- Patient tested for BBVs and hep C- in hep C treatment
- Patient treated for his mental health

- Social Support Via Streetworks & David Miller

- Entered into the Streetworks Rapid Access project in order to get accommodation.
- He was booked into a B&B in 2018.
- Then supportive long term accommodation
- Supported patient to benefits appointments- complex

- Current Outcome

- In secure supportive accommodation
- Benefits sorted and secure
- On ORT treatment methadone script
- On hep C treatment
- Reduced IVDU
- Weekly visits by pharmacy outreach team
- Took months and months of work



# Complex Cases Study 2

- Male aged 58 years
- No history of drug/alcohol misuse
- Living on a bench, has been for a number of years
- Lack of engagement with any services for a number of years
- Identified by Pharmacy Outreach – August 2018
- Health Support Lauren Pharmacist & Access Practice
- Same day GP practice registration
- Medical conditions identified on outreach (GI) and treatments & medications given on the street
- Referral to GP practice, coordination of visit
- Referral to hospital, coordination with hospital about patients unique circumstances
- Accompanied to hospital with patient
- Weekly visits to bench for medical review

- Social Support Via Streetworks & David Miller
- Driven to GP appointments and hospital appointment by Streetworks
- Personal belongings stored safely by streetworks during hospital admissions
- New clothes, and outdoor survival equipment by streetworks
- Weekly visits
- Housing options offered by streetworks
- Engaging with local council to stop eviction plans
- Linking in with other agencies to coordinate care
  
- Current Outcome
- Housing options available if patient agrees to this
- Medical conditions currently treated and well controlled
- Weekly access to a medical professional
- Direct delivery of medication to his bench
- Months and months of work

# The service as been a huge success.... Won permanent funding



**Improvement Hub** @ihubscot · 1h  
Great to see ihub funded "Pharmacists for Homeless" outreach work on the BBC's [#ReportingScotland](#) yesterday. For more info about this project read our impact story: [tinyurl.com/ybqq4tl6](https://tinyurl.com/ybqq4tl6)  
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# Why is this working?

- Culture & Expertise of Streetwork
  - Street intelligence and up to date knowledge
- Culture & Expertise of the GPs Access Practice
  - \*Dr John Budds clinical leadership\*
- Strong & supportive clinical leadership
  - Clinical freedom to innovate
  - Autonomy
  - Service nimble & responsive
- Patient centric
  - The Service moulds to patients
  - Immediate medication access & street prescribing/registration
- Lack of barriers in services
  - For staff & patients to navigate



**Teamwork**  
**Collaboration**  
**Innovation**  
**Agility**  
**Nimble**  
**Responsive**

# Future Developments

- Link into hospital homeless discharges- reduce A&E admissions
- Increase ORT street prescribing/ same day start
- Build and sustain the service and team

## Questions?

Thanks

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