



Learnings from the HSJ Integrated Care Summit 2019 Interactive Discussion Groups

Session Theme:

Helping patients get the most out of their medicines

Session Leader:

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Questions Posed

Adherence and Persistence is a key issue across the UK Healthcare system. Only 50% of patients take their medication as directed assuming they take their prescription s to be fulfilled. Research studies report that 40-60% of patients can not accurately report how to take their medications after consultation

What can we do as a healthcare system to improve upon that: How can we help patients get the most out of their medicines?

Outcomes and Learnings

The discussion group format provided an opportunity for the attendees to share both professional and personal reflections of the impact of poor patient adherence to medication. Discussions were focused around three areas:

What lies behind this problem?

- 1. Knowledge how does poor knowledge of the disease and treatments impact the problem?
- 2. Behaviour how does inherent or learnt behaviour play a role?
- 3. Tools is there a role for technology or tools in providing part of the solution?

The groups supported the concept of three areas where patient support could be augmented: increased knowledge (disease, medication etc), application of behaviour understanding (core beliefs behind behaviours, demographics, social groups and communities) and the support of technology and tools (digital solutions both existing and emerging).



Each group clearly articulated the very real need for additional support for patients. The impact on the NHS through medicine wastage, increased pressure on healthcare services and most importantly the loss of patient's quality of life were all clearly articulated.

Knowledge

- In some instances, the clinical interaction can be felt to be judgemental by patients and therefore might not be the ideal setting for discussion around the reasons behind poor adherence or persistence to their medication. HCP often fall into the behaviour of telling a patient what they should do from a perspective of greater knowledge and insight. Research data has shown that patients, up to 60%, often don't remember or misunderstand the information given to them by their HCP.
 - In this context utilising the multi-disciplinary team is an important concept in engaging and understanding the patient's knowledge of their condition, treatments and possibly uncovering the behaviours impacting patients not gaining the full benefit of their treatment.
- Solutions which manage the complete patient across the range of co-morbidities are important. Poly pharmacy is seen as a critical area for improvement, patients can be in receipt of several therapies, confirming these are all relevant and current would be a good idea.
- Pharmacists represent an important, trusted interface with patients through regular contact, especially amongst patient populations suffering chronic or long-term conditions. Integrating pharmacists more holistically as part of the multi-disciplinary team to help tackle some of the knowledge gaps and underlying behaviours associated with adherence and persistence would have significant benefits.
- Patients need to feel they are part of the solution and work in partnership with a key healthcare provider who will support and empower them. Importantly this should be accessible when the patient requires it and re-enforced during their journey.
- Sharing information needs to be completed at the correct time, ill-judged or mistimed interventions can be ignored or sometime antagonise patients. Key to this approach is adapting and personalizing based on the patient's specific circumstances.

Behaviour

- 69% of non-adherence is due to a behavioural issue such as procrastination, forgetfulness, concerns about medication and belief that healthy outcome are out of reach.
- Addressing these behaviours is closely linked to an individuals personal value system which is ingrained from their culture and beliefs. Working with key members in the local community



to understand beliefs and values will support how patients should be engaged; in terms of language, support offered, and communication channel used.

- Ultimately it is important to engage with the individual patient with one to one communication rather than a one size fits all approach. Where possible, the interventions should be personalized and linked to the patient's values and circumstances.
- Building reward for the patient is important, helping the patient to understand what they value from their life and how medication may support them to reach the goals is fundamental. Ensuring the patient feels they are getting closer to those goals and reaching personalized milestones is essential.
- An honest look at the negative aspects of not taking their medication and how this will impact their life and achieving their goals versus the perceived benefit of not taking their medications can be a powerful tool to overcome barriers to adherence.

Tools

- Technology can certainly play a role across several parameters, digital engagement has the power to reach individuals at times convenient to them, reducing costs in terms servicing large groups of patients whilst having the ability to interact at an individual level. Regular monitoring of patients and varying levels is important; however, this needs to be transparent and provide feedback to the patient so they, themselves, can understand their progress. Technology can support monitoring and two-way communication and therefore help keeping patients engaged with their treatment.
- Utilising social media can be an important approach in reaching specific patients or cohorts of patients. In this regard trying new methods of engagement can yield excellent and sometimes unexpected results.
- Patients are complex, they are individuals, therefore it is critical that programmes to support patients are multifactorial, not relying on one single intervention delivered through one communication route. The ideal programme would draw on numerous activities channelled through a range of communication options.

