Thank you for the opportunity to provide written evidence to the above inquiry. The following represents the views of the Mental Health Pharmacy Strategy Group (MHPSG). The MHPSG is a special interest group drawn from mental health pharmacy services from each of the mainland health boards. The group has strong links to NHS Directors of Pharmacy, the Royal Pharmaceutical Society in Scotland and a variety of other national pharmacy and mental health bodies.

The group welcomes the opportunity to provide evidence to this important inquiry and hopes the points made below will assist in the development of improved mental health service for young people in Scotland. Our comments are limited to the following key questions

- How access to services and ongoing support can be improved

- What problems there are around transition from CAMHS to adult mental health services and how a smoother transition may be achieved.

1. How might access to services and ongoing support be improved

The following comments relate to access to pharmaceutical care services.

As with the general population, younger people with mental health problems would access pharmaceutical care service in primary care via community pharmacies or in secondary care via specialist mental health services. However, prescription supply aside, there has been little focus to date on pharmaceutical care for younger people with mental health problems in community pharmacy. The development of the chronic disease management component of the community pharmacy contract may offer community pharmacists the opportunity to engage more effectively with this patient group. The MHPSG would encourage the inquiry to seek to promote this aspect of the community pharmacy contract.

Similarly in secondary care, with a few exceptions, there has been little development nationally to support specialist CAMHS pharmaceutical care services. Competing priorities and resource constraints have held back the development of such services in CAMHS. The MHPSG would encourage the inquiry to seek a commitment from NHS Boards to develop such services for the benefit of patient care.

2. What problems there are around transition from CAMHS to adult mental health services and how a smoother transition may be achieved?

The transition from CAMHS to adult services is recognised as a problem. The following are comments from a pharmacist working in CAMHS services

‘I find that the lack of knowledge and understanding of childhood behavioural and emotional disorders and the role of medication as the biggest problem. If there was better education and training of the adult health professionals they may be more sensitive and receptive to ‘childhood conditions’. I think if the adult team
knew what to expect and how to deal with it then the transition itself would be less problematic. For example, ADHD is probably one of the most misunderstood diagnoses of all and problems tend to occur when adult teams are faced with the continuous supply/prescribing of psychostimulants. We need consistency across health boards on how to deal with this issue.'

There is a potential role for specialist pharmacy services here to support the education of adult mental health professionals with particular emphasis on the drug treatments and their impact on patients. The MHPSG would ask the inquiry to endorse an educational programme to improve the understanding of adult mental health professionals of CAMHS issues and treatments thereby helping to improve the transition process.

Andrew Walker
Chair
Mental Health Pharmacy Strategy Group
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