

“For many years I had battled an addiction to prescription medication with no idea how to overcome it. My life on the surface seemed good. Wife, two young children, nice house and a good income. But my health was getting worse with each month and it was only a matter of time before it all came crashing down around me. Then we rang Pharmacist Support and it was the best thing we ever did.”

Our impact on addiction 2010-2017



Pharmacist Support

working for pharmacists & their families

About Addiction

Admitting to addiction may seem like admitting to weakness and it can be very difficult for someone facing addiction to ask for help, particularly when they feel their life, relationship and/or career are on the line.

Our Support

Pharmacist Support’s mission is to support pharmacists throughout life and this underpins our addiction service, which is one of several services provided by the Charity. We aspire to support individuals in a holistic way to achieve their full potential and are on hand to provide both practical and emotional support in confidence.

Our addiction service assists both people seeking help with, and those supporting someone affected by addiction. We have supported people dependent on alcohol, illegal substances, prescription medicines as well as those affected by compulsive gambling and eating disorders.

For pharmacists affected by dependency issues, our aim is to support them in overcoming addiction and sustaining their recovery to maintain positive wellbeing, for example, helpful relationships, stable housing, steady employment (which may include returning to work as a pharmacist), social activity and a sense of purpose and self-worth.

For a pharmacist approaching us for help, specialist support from an addiction counsellor can be provided from their first contact with us, through treatment and into recovery. Treatment may be residential or accessed through local services and where someone is unable to self-fund we can help with the costs.

For family members and others supporting someone with addiction, help is also available through our addiction counsellor.

For those in recovery who wish to take part, we also provide a peer support group which has regular facilitated telephone meetings and members can also attend an annual face to face meeting.

The Numbers

We dealt with 205 calls to our helpline during the period 2010 – 2017.

Year	Contacts with the Charity	People who underwent residential treatment
2010	36	5
2011	21	2
2012	27	2
2013	28	3*
2014	26	7*
2015	21	1
2016	17	2
2017	29	4*
Total	205	26

(*one of these beneficiaries self-funded their treatment)

The Issues

From October 2013, calls to the service were brought in-house, rather than outsourced to an external helpline. This enabled us to gain more information about the nature of the calls and to provide a better, more comprehensive service to callers, identifying and responding to their needs.

Alcohol addiction is the most common issue for which people seek our support, followed by drug addiction. In some cases, more than one dependency occurs. Drug addiction includes misuse of prescription or over the counter drugs as well as illegal drug use. However, addictive relationships can develop with many different behaviours, including eating, gambling and sex, as shown in the pie chart of issues from 2013-2017.



“Ringing Pharmacist Support was the best thing I ever did. They arranged for a specialist addictions counsellor to call me. A few weeks later I was admitted to Clouds House for residential treatment funded by Pharmacist Support and received intensive therapy and medical care. I could not have afforded this myself and the professional support I received made me see why all my previous attempts to come off the painkillers had been futile. During this time Pharmacist Support were also providing emergency financial assistance to my wife so that bills could be covered.

Returning home forced me to face the reality of the financial mess I was in. My wife and I looked to make drastic changes and cut back where we could but demands from creditors were piling up and we were unsure what to do. Pharmacist Support was still in touch and arranged for a debt adviser to call and offer support and advice on managing the debts. Financial assistance to help cover essential living costs continued and helped us to keep our heads above water. Approximately six months later things were starting to get better. We had found a cheaper house to live in, the debts were under control and I was working again and independent from charitable financial support.”

Residential treatment

24 residential stays were funded by the Charity over the period covered in this report (one person had 2 separate stays during the period and 3 self-funded their treatment). The initial period of residential treatment is usually four weeks. Some people are ready to be discharged after this, others are not and may stay for an additional period. In some situations a further stay in a centre providing second stage treatment that is focused on enabling someone to live independently may be recommended and this has also been funded by Pharmacist Support.

Supporting the journey

Residential treatment is not appropriate for everyone and indeed for some may not be a preferred option. Instead people may be signposted to local services or other specialist support or therapy, or may opt for a self-help approach.

Addiction impacts on many areas of a person’s life. In addition to the core support to deal with the addiction itself, we work with the pharmacist to support them holistically. Our advice on benefit entitlement and managing debt, combined with financial assistance helps to stabilise the financial circumstances of the person and their family. Often there will be employment and fitness to practice matters and we can support someone through this, providing specialist employment advice, a listening ear through our Listening Friends helpline at this stressful time and help with fitness to practice such as covering the cost of

attendance at a hearing, medical tests and reports and even attendance at a hearing by the addiction counsellor.

Families are also affected by addiction. There are some specific programmes tailored to help partners and children and we have helped with the cost of attending these. Once someone is ready to return to work, we can provide 1:1 careers coaching to help with finding work, plus we can assist with the costs of return to practice training and other expenses.

Assessment of Recovery Capital (ARC)

The term *recovery capital* is used to describe the internal and external resources that a person can draw upon to initiate and sustain recovery from addiction. Recovery is a process rather than an end state, with the goal being an ongoing quest for a better life.

Recovery capital is assessed by asking clients to agree or disagree with a number of statements which fall into one of four categories – social capital, physical capital, human capital and cultural capital. The results of the assessment show the strengths and threats for that individual in terms of maintaining their recovery. This can then be used to inform a discussion with the client, focussing on the strengths but also asking open questions based on the threats identified.

Support can then be offered as appropriate, for example, input from the addiction counsellor,

financial assistance, benefits advice and/or counselling. The results can be compared with earlier responses.

Use of the ARC assessment

The ARC assessment is used with the client by the addiction counsellor at the beginning of their residential stay and just before they leave.

Pharmacist Support aims to carry out the ARC assessment within three months of completion of treatment with all clients who have received financial assistance for their treatment costs and/or for their living expenses.

Below are some example assessment scores from one of our service users:

Date	Strengths	Threats
Assessment 1	36	19
Assessment 2	40	4
Assessment 3	42	3

It was identified that a focus on ‘meaningful activities’ and ‘coping and life functioning’ would reduce the *threats* score and the client decided to address this by looking for volunteering activities.

“Meeting other pharmacists going through almost exactly what you are going through is invaluable... having a pharmacist on the other end of the phone this year (they came to see me when I was in treatment) has helped so much, whether it was a quick question via text about something specific or a long chat on the phone whenever we both had the time to talk about whatever was on our minds. They are a few years down the line from me in recovery so have almost been like a mentor who has known more about the recovery process and dealing with the GPhC than any lawyer or doctor I have dealt with. Certainly hearing their story two weeks after being suspended lying in rehab and learning that they were back working as a pharmacist with their health back gave me such hope to get through all of this, especially in that early fragile phase”.

Supporting each other

Just over half of those who have had residential treatment have participated in our ongoing peer support group which has three telephone meetings per year and one face to face. This group is facilitated by one of the peers and is a popular event with those taking part.

When asked about the impact the peer support group has had, members have highlighted the importance of sharing with others and learning

from mistakes, the rewarding nature of supporting other pharmacists, confidence gained in pursuing their career, help with individual issues and simply that it was nice to talk to others.

Members of the group also provide one to one support to each other from time to time.

The Value

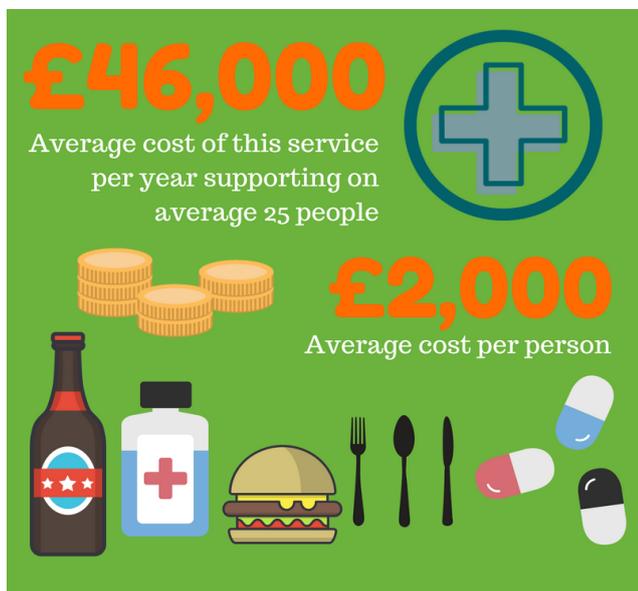
Pharmacists play an essential role in maintaining the health, safety and wellbeing of the public and the services provided by Pharmacist Support are designed to support pharmacists to carry out this role.

Between 2010 and 2016 the average cost of the addiction support programme to the Charity was just over £46k per year treating an average of 25 people per year. This covered the costs of the addiction counsellor, which include initial contact with a caller, assessment, preparation of a treatment plan, support through treatment and afterwards. The costs also included grants made for treatment where someone could not afford it

themselves, which ranged from residential or day treatment to follow up programmes and specialist counselling, for example, for eating disorders.

Our addiction support service helps to enable pharmacists to deal with their health issue, return to work whether as a pharmacist or in a different career and perform effectively. They can continue to manage their own life and be a contributing member of society. Returning to work can avoid claims for state benefits and prevent debt.

The time, effort and cost of five years of study plus a funded pre-registration year are not lost. The average cost divided by the average number of people supported equates to less than £2,000 per person supported by the service.



The Feedback

“Pharmacist Support invested in me and gave me the chance to rebuild my life. I will always be grateful for the absolutely brilliant assistance in making that possible. They made the difference and I will always be in their debt.”

Feedback on our service is crucial to us as a way of ensuring our support is relevant and appropriate and can be given anonymously if the respondent chooses.

People are asked to rate their satisfaction with the initial call to Pharmacist Support and the telephone help provided by our addiction counsellor. All respondents have been either satisfied or very satisfied with their initial call and all have been very satisfied with the help from the counsellor.

The Difference

People are also asked about the impact the service has had on their situation. Everyone said there had been a positive impact. 75% said it has had a very positive impact on their situation and no one said they were not satisfied.

Alan's Story

Alan is a 42 year old pharmacist qualified for 20 years. Describing himself as being in a “desperate state” both physically and mentally and feeling like he had exhausted the support of family and friends he approached PS in 2016.

“Following a difficult marriage and subsequent divorce I began drinking heavily. This resulted in a drink driving conviction and a subsequent reprimand from the GPhC. I didn't perceive my alcohol use to be problematic; I wasn't drinking during the day and didn't consider it to be having any effect on my work. However with hindsight I can see that it became progressive, shameful, secretive and solitary.

A stroke at the age of 39, as a direct result of excessive drinking, gave me some insight into my situation. Choosing to control my drinking rather than abstaining, I used support from a private GP for detox and CBT and attended several 12 step fellowship meetings but didn't find this relevant as I didn't want to stop drinking altogether.

I continued to drink, combining it with detox medication. A fellow pharmacist threatened to report me to the GPhC if I didn't seek help. Fear of losing a career I loved as well as my livelihood prompted me to acknowledge my problem and that alcohol had made my life unmanageable...
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(continued)...“In 2014, I admitted myself into a 5 week rehab programme. Here I realised that Alcoholism was a disease not a lifestyle choice and that I was suffering from it. This was followed by more than a year of maintained sobriety. Acknowledging a deterioration in my mental health I was prescribed anti-depressants but before these could take effect I began drinking heavily again; picking up where I had left off. Eventually I was admitted to a psychiatric ward. I made a decision to make a medical declaration to the GPhC which resulted in a very difficult time trying to manage my physical and mental health, not able to work and trying to maintain sobriety all the while.

At this point I contacted PS. I was referred to the Addiction Support Programme and following assessment was admitted into a residential treatment programme, largely funded by Pharmacist Support; literally saving my life. Following treatment I accessed further financial assistance, specialist advice and was signposted to local support groups. I cannot express in words my eternal gratitude to PS for the complete, invaluable one stop care that is provided to pharmacists and their families. Once more alcohol no longer controls my life and the desire to drink has been lifted. There are still several difficult situations and hurdles to cross but with ongoing help.... including from PS I know I will get through them.”

Pharmacist Support is the profession’s independent charity providing free and confidential services to pharmacists and their families, former pharmacists, trainees and MPharm students in GB.

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