**CO-DESIGN OF A NEW TEXT MESSAGE INTERVENTION WITH PATIENTS AND PROFESSIONALS TO SUPPORT MEDICINES ADHERENCE**

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**Background**

It is estimated that 30% - 50% of patients do not take medicines as prescribed. Medication taking can be described as a behavior, at which behavior change techniques (BCTs) can be applied. Text messages have been highlighted as a potential tool to support medicines adherence and could incorporate BCTs to support adherence. It is important that stakeholders and intended recipients of new interventions are involved in any design process.

**Objectives**

To co-design a personalised two-way automated text messaging intervention to support medication adherence, delivered from community pharmacies.

**Methods**

A human centred design (HCD) approach was used. Six prototypes were developed based on a systematic review. These included a personalisation questionnaire and patient information leaflet; videos of an introduction to the intervention and medication review; diagrammatic representations for personalising the intervention and the implementation process. Nominal group technique was used as a framework to gather feedback for the co-design process, using focus groups with patients and professionals.

**Results**

Nine patients and 21 healthcare professionals (pharmacists, nurses, general practitioners) were included in the co-design process across five focus groups. The design concept was positively received by all participants. There was agreement that a pharmacy setting and a review by a pharmacist was desirable by both patients and professionals. Patients found the questionnaire to personalise the intervention and patient information leaflet easy to understand. An important change suggested by patients was to ensure that recipients understood that communication was automated. Professionals liked the range BCTs included in the intervention, especially the support for habit formation. However, they felt uncomfortable with the use of more negatively framed BCTs and wanted more support included for patients to use home monitoring equipment.

**Conclusions**

HCD methods were effective for supporting a co-design process to assess initial acceptability of a new behavioural intervention to support medicines adherence.

**Key words**

Medication adherence, behavior change, human centred design, patient involvement, professional involvement, digital health.

**Biography**

Gemma Donovan is an Academic Practitioner working jointly as a Senior Lecturer n the School of Pharmacy at the University of Sunderland and as a Medicines Optimisation Pharmacist in NHS Sunderland Clinical Commissioning Group. She completed her MPharm at the University of Manchester in 2008 and a MSc in Clinical Pharmacy at Robert Gordon University in 2014. She started her current post at the University of Sunderland in 2013. Gemma’s research looks at how pharmacists can support medicines optimisation in all settings as well as working together across boundaries of care.

**Desired presentation:** Oral

**Topic:** Social Pharmacy and the Patient Perspective

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