ROYAL PHARMACEUTICAL SOCIETY

Pharmacy and the NHS Long Term Plan

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Our Mission

We put pharmacy at the forefront of healthcare

Our mission is why we exist — an emphatic promise to elevate the whole profession as healthcare evolves. We use it to focus and direct everything we do.

Our Vision

We are the world leader in the safe and effective use of medicines

Our vision is a state we are striving towards

The NHS Long Term Plan

The Five Things You Need to Know!

1. Drive towards integrated care & population health

"to improve out-of-hospital care"

2. Detailed proposals on a set of clinical priorities

"together are a daunting delivery challenge"

3. Workforce is the key

"Concern about its ability to deliver existing commitments, let alone any new ones"

The NHS Long Term Plan

The Five Things You Need to Know!

4. Spotlight is on Digital

"Ambitious agenda - where the NHS has struggled before"

5. A lot more to come

"A greater focus on prevention and on health inequalities"

"other partners are fundamental to making broader progress"

The Kings Fund (Jan 2019)

The NHS Long Term Plan

The Five Things You Need to Know!

"clear thread leading from the NHS Five Year Forward View toward a more integrated, place-based care..."

"recognition of the challenges facing the NHS workforce and a plan for a plan to alleviate them."

"This will still require considerable leadership capabilities and capacity to deliver."

The Kings Fund (Jan 2019)

The Challenge for STPs, ICS and PCNs

Establishing a framework that enables the integration of pharmacy into evolving care systems / networks to support a whole system approach to medicines optimisation to improve population health.

The Challenge for Pharmacy...

To adopt a 'collaborative pharmacy approach' to delivering system wide medicines optimisation which is integrated around the patient.

Establish an Integrated Pharmacy & Medicines Optimisation Framework for STPs:

- 1. Creating a Culture Shift
- 2. Supporting Protected Time
- 3. Developing a local System-Wide Medicines Optimisation Vision
- 4. Appointing a Medicines Optimisation Advocate within STP Structures.
- 5. Integrating the Medicines Value Programme into STP Priorities
- 6. Integrated Governance Structures
- 7. Utilising the Pharmacy Integration Fund

[&]quot;7 National Integrated Pharmacy & Medicines Optimisation Pilots"

The Case for Change

- NHS spends over £17bn each year on medicines (c.£1 in £7 that the NHS spends).
- Up to 50 per cent of patients don't take their medicines as intended.
- An estimated 237million errors involving medication occur in the NHS in England every year
- The estimated NHS costs of definitely avoidable adverse reactions are £98.5m per year, consuming 181,162 bed-days, causing 712 deaths, and contributing to 1,708 deaths.
- Up to £500m of extra value could be generated if medicines were used in an optimal manner in just five therapeutic areas.
- Medicines wastage in England cost £300m each year, £150m of which is recoverable.
- An estimated £135m a year could be saved through pharmacist led interventions and medicine reviews in care homes across the UK.

Boost "Out of Hospital" Care

"Expanded community multidisciplinary teams, including pharmacists, aligned with primary care networks"

Section 1.9 Long Term Plan

"Primary care networks to expand the number of pharmacists, including greater use of community pharmacists' skills and opportunities to engage patients"

Section 4.21 Long Term Plan

Key Considerations for Primary Care Networks

Royal Pharmaceutical Society Nov 2018

- Patient and public involvement
- Leadership drawn from all of primary care
- The value of medicines is recognised
- Interoperability of data
- A greater focus on prevention

Boost "Out of Hospital" Care

"NHS 111 & GPs will refer on to community pharmacies to support urgent care and promote self care."

Section 1.10 Long Term Plan

"Urgent Care Treatment Centres will work alongside primary care, community pharmacist and other community based services"

Section 1.26 Long Term Plan

NHS 111 & GP Direct Referral Service to Community Pharmacies

Boost "Out of Hospital" Care

"to reduce avoidable medication related A&E attendances, admissions and delayed discharge through pharmacist reviews"

Section 1.10 Long Term Plan

"The estimated NHS costs of definitely avoidable adverse reactions are £98.5m per year, consuming 181,162 bed-days, causing 712 deaths, and contributing to 1,708 deaths."

Prevalence & Economic Burden of Medication Errors in the NHS England (2018)

Boost "Out of Hospital" Care

Transfer of care initiative of electronic referral from hospital to community pharmacy in England: a formative service evaluation.

Hamde et al. BMJ Open October 2016

"statistically significant lower rates of readmissions and shorter hospital stays"

Support for people living in Care Homes

"Care Home Residents will get regular pharmacist-led medicines reviews"

Section 1.10 Long Term Plan

"An estimated £135m a year could be saved through pharmacist led interventions and medicine reviews in care homes across the UK."

The Right Medicine: Improving Care in Care Homes Royal Pharmaceutical Society Feb 2016

Long Term Conditions

"Community Pharmacists and GP practices will also provide opportunities for the public to check on their health"

Section 3.68 NHS Long Term Plan

"<u>Pharmacist</u> and nurses in primary care networks to <u>case find</u>

<u>and treat</u> people with high risk conditions"

Section 3.68 NHS Long Term Plan

"Pharmacists in primary care networks will undertake a range of medicines reviews to support those with respiratory disease to receive and use the right medication"

Section 3.86 NHS Long term Plan

Long Term Conditions

"Up to 50 per cent of patients don't take their medicines as intended"

"Up to £500 million of extra value could be generated if medicines were used in an optimal manner in just five therapeutic areas:

(asthma, diabetes, raised blood pressure, vascular disease, the care of people with schizophrenia.)

Frontline pharmacists:

Making a difference for people with long term conditions
Royal Pharmaceutical Society (November 2016)

Pharmacy and Mental Health Services

- 1. Community pharmacies support medication monitoring in children and young people with attention deficit/hyperactivity disorder (ADHD)
- 2. Physical health checks in community pharmacies
- 3. Widening access to pharmacist expertise: pharmacists in liaison psychiatry team

"No health without mental health: How can pharmacy support people with mental health problems?"

NHS Staff will get the backing they need

"Pharmacist have an essential role to play in delivering the Long Term Plan."

"Primary care networks will be used to substantially expand the number of pharmacist...."

Section 4.21 **Long Term Plan**

NHS Staff will get the backing they need

"The practice pharmacist role will fundamentally improve the safety of medicines, ensuring excellent communication and collaboration between pharmacist colleagues working in both community pharmacies and hospitals."

RCGP and RPS Policy Statement on GP Practice Based Pharmacists

'Pharmacists remain one of the most underutilised professional resources in the system and we must bring their considerable skills in to play more fully.'

(NHS England, 2016)

ROYAL PHARMACEUTICAL SOCIETY

Together, we are pharmacy.



Supporting Slides

Chapter 1: Boost "Out of Hospital" Care

- 60% of patients have three or more changes made to their medicines during a hospital stay. The transfer of care process is associated with an increased risk of adverse effects (AEDs) (1)
- 30 -70% of patients experience unintentional changes to their treatment or an error is made because of a lack of communication or miscommunication. Only 10% of elderly patients will be discharged on the same medication that they were admitted to hospital on. (2)
- 20% of patients have been reported to experience adverse events within 3 weeks of discharge, 60% of which could have been ameliorated or avoided (3).

The NHS Five Year Forward View acknowledged:

"The traditional divide between primary care, community services, and hospitals - is increasingly a barrier to the personalised and coordinated health services patients need."

"The need to manage systems — networks of care — not just organisations."

"And services need to be integrated around the patient."

The NHS Five Year Forward View (Next Steps)

"As Sustainability and Transformation Partnerships

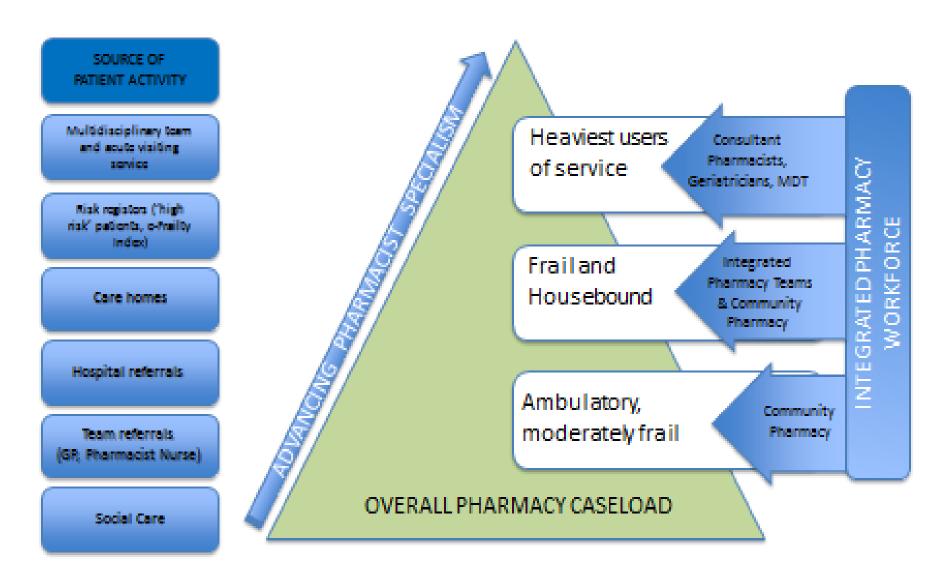
evolve, organisations will work in partnership to take on

collective responsibility for resources, providing joined

up, better coordinated care to improve health

outcomes within defined populations."

A Collaborative Pharmacy Approach.....



Supporting People to Age Well

"Improving the care we provide to people with dementia, whether they are in hospital or at home"

Section 1.20 Long Term Plan

Over 70,000 registered dementia friends in community pharmacy

Social Prescribing Support

"over 900,000 people will be able to be referred to social prescribing schemes by 2023/24"

Section 1.40 Long Term Plan

North West Social Prescribing Scheme in Community Pharmacies

Cardiovascular Disease

"Community Pharmacists and GP practices will also provide opportunities for the public to check on their health, through tests for high blood pressure and other high risk conditions"

Section 3.68 Long Term Plan

"Pharmacist and nurses in primary care networks to case find and treat people with high risk conditions"

Section 3.68 Long Term Plan

NHS Staff will get the backing they need.

"Pharmacists contribute significantly to patient safety,
bring medicines and prescribing expertise, support with prescribing tasks,
support for patients with long term conditions
including support for healthy lifestyles"

Pharmacists in General Practice: Pilot scheme

Independent Evaluation Report

The University of Nottingham