



Social Services Directorate
Fourth Floor
Welsh Government
Cathays Park
Cardiff
CF10 3NQ

31st May 2012

Dear Sir/Madam

Social Services (Wales) Bill Consultation

The Royal Pharmaceutical Society (RPS) welcomes the opportunity to contribute to the consultation on the Social Services (Wales) Bill.

Key Recommendations

- **We recommend that the Social Services (Wales) Bill should strengthen requirements for pharmaceutical care needs to form part of integrated health and social services packages of care and support tailored to meet individual needs.**
- **We recommend that statutory obligations should be placed on social services departments to work with Local Health Boards to ensure that the pharmaceutical needs of individuals are assessed as part of the unified or integrated assessment process.**

General Comments

1. The Royal Pharmaceutical Society welcomes the attention that is being placed by the Welsh Government on social services and the recognition that services must change to meet the changing needs of Welsh society, particularly as the growing ageing population places increasing pressures on our public services.
2. We support the overall intention of the Welsh Government to develop a coherent legislative framework for social services, particularly in the areas of maintaining and enhancing wellbeing of people in need, safeguarding and promoting the wellbeing of citizens, and in regulation and inspection as identified in the white paper *Sustainable Social Services for Wales: A Framework for Action*.

3. We believe that in order to deliver the aspirations of high quality, responsive, citizen centred social services, the legislative framework proposed in the Social Services (Wales) Bill must place a legal duty on social services departments to work in partnership with other departments and organisations, especially Local Health Boards.
4. In many circumstances social care needs, from the young to the very old, cannot be separated from medical care needs. The care needs of citizens cannot be neatly compartmentalised into 'health' or 'social care' and citizens should not be allowed to fall through the net as a result of local disputes between social services departments and the NHS over who has responsibility for packages of care. The Social Services (Wales) Bill must be robust enough to ensure the problems of past are not re-rehearsed.
5. We advocate that a holistic approach to health and well being should be enshrined in this legislative framework for social services, placing duties on appropriate bodies to deliver care services which fully meet the needs of our citizens and which ensure their health and wellbeing is promoted and safeguarded. We strongly support the principle that the Social Services (Wales) Bill should place legal duties on partnership working.

Recognition of Medicines Management

6. Our concerns for the future delivery of health, social care and well being services lie in the area of medicines management and pharmaceutical care. We are concerned that the Social Services (Wales) Bill currently does not contain any reference to the obligations of social services departments in supporting people who have both social care and medical care needs, particularly those who have intensive medication requirements, including older people with multiple health conditions who may have limited support structures to assist them in their daily living and their medication use.
7. We are concerned that intensive users of medicines can be placed at risk if they are unable to benefit from direct support and advice from pharmacists, the experts in medicines. We have been concerned for some time about the use of medicines in social care settings. Recent research has highlighted for example an unacceptable level of medication errors and patient safety concerns in the use of medicines in care homes¹. A recent literature review conducted by Public Health Wales also highlighted that medication administration errors in care homes are common despite the introduction of national and minimum standards which were

¹ Barber ND, Allred DP, Raynor DK, Dickinson R, Garfield S, Jesson B et al (2009) [Care homes' use of medicines study: prevalence, causes and potential for harm of medication errors in care homes for older people](#). Qual Saf Health Care 2009; 18: 341-6.

introduced to protect the safety of residents². **We recommend that the Social Services (Wales) Bill should strengthen requirements for pharmaceutical care needs to form part of integrated health and social services packages of care and support tailored to meet individual needs.**

8. We believe that a new legislative framework for social services in Wales should act to galvanise the existing national guidelines, statutory requirements and facts relating to medication which will help to develop and deliver services from an 'informed position' consistently across Wales. It should place obligations on social services departments to work closely with Local Health Boards to assess and address the pharmaceutical needs of clients/patients whether they are living independently in their own homes or in residential care settings. **We recommend that statutory obligations should be placed on social services departments to work with Local Health Boards to ensure that the pharmaceutical needs of individuals are assessed as part of the unified or integrated assessment process.**
9. Not only would pharmaceutical needs assessment be of benefit at an individual level in terms of improving health and well being outcomes but it could also contribute to reducing pressures on other parts of the health and social care system i.e. emergency admissions to hospital and the knock on impact on social care rehabilitation following discharge from hospital.
10. We also believe that care could be vastly improved if obligations are placed on social services departments and Local Health Boards to address the implications of medication needs as people are moved between care settings i.e. from hospital to home or to a residential care setting. It is during patient transfer when patients/clients can be put at considerable risk. Research has shown that between 30 and 70% of patients can have either an error or an unintentional change to their medication when their care is transferred³. The RPS has developed a professional guide⁴ to support the safe transfer of patients between care providers which contains several principles and practice examples which may be useful in drafting this legislation.
11. Finally, in terms of regulation and inspection of care premises we advocate that pharmacists should be directly engaged in the inspection of care homes and that the Social Services (Wales) Bill should place a statutory duty on the Care and Social Services Inspectorate Wales (CSSIW) to work with a network of pharmacists as part of their inspection processes when regulatory breaches are observed. As the experts in medicines we advocate the pharmacists

² Public Health Wales (2010) [Medication administration errors in care homes](#). Public Health Wales NHS Trust.

³ National Patient Safety Agency and National Institute for Health and Clinical Excellence (2007) [Technical safety solutions, medicines reconciliation](#).

⁴ Royal Pharmaceutical Society (2011) [Keeping patients safe when they transfer between care providers – getting the medicines right](#) RPS, London

are best placed to advise those responsible for care settings and care agencies on maintaining regular standards through prescribing, use, administration, storage, record keeping and disposal of drugs, particularly the safe disposal of controlled drugs where appropriate.

I trust this information is helpful. If any further information is required please do not hesitate to get in touch.

Yours sincerely,



Mrs Mair Davies
Chair, Welsh Pharmacy Board

About the Royal Pharmaceutical Society (RPS)

The RPS the professional body for pharmacists in Wales and across Great Britain.

RPS is the only body that represents all sectors of pharmacy. We promote and protect the health and well-being of the public through the professional leadership and development of the pharmacy profession. This includes the advancement of science, practice, education and knowledge in pharmacy. In addition, it promotes the profession's policies and views to a range of external stakeholders in a number of different forums.

For further information please see:

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