

ACCESS TO MEDICINES

Pharmacy plays a vital role in ensuring individuals have access to medicines. There are a number of models and routes of medicines supply ranging from the traditional dispensing in both community and hospital pharmacies through to many new and emerging models as technology advances.

The supply of medicines provides a touchpoint with patients and enables a direct interaction to take place between the patient and the pharmacist potentially including an intervention around medicines or giving lifestyle advice. The frequency of this important interaction between the patient and a pharmacist may be reduced by new and emerging routes of medicines supply such as automation. It is crucial that these important interactions are not lost and that appropriate opportunity for the patient to be supported with medicines and health advice tailored to their individual needs are maintained.

Regardless of the route of access the RPS believes that medicines supply should be:

- 1. safe
- 2. person-centred
- 3. timely
- 4. equitable
- 5. efficient & effective

Provision of pharmaceutical care by a pharmacist should be embedded throughout any medicines supply process taking into account a clinical check¹ and the principles and elements of medicines optimisation².

Advances in technology must be further utilised to ensure that pharmacists have full read and write access to the patient health record. This will allow pharmacists to make more informed clinical decisions, in partnership with patients and other health and social care professionals, to improve patient care and patient safety. Information is key to delivering more effective pharmaceutical care to patients, improving medicines adherence and reducing the medicine related errors which contribute to unplanned admissions to hospital.



THE RPS BELIEVES THAT:

I. All patients must receive medicines which:

- have been clinically reviewed by a pharmacist to ensure they are safe and appropriate for the patient
- are supplied safely and securely in a timely manner via the most appropriate route for the patient
- are labelled with clear information on how to take the medicine and any relevant warnings
- have been stored and distributed appropriately.

2. All patients should be able to:

- obtain information on the options available to them regarding how and where they receive their medicines
- order and receive their medicines in the most appropriate way for them
- receive information and support in managing their medicines to help minimise waste
- return unwanted medicines to a pharmacy for safe disposal.

3. At the time of supply of medicines all patients should be able to:

- discuss their medicines with a pharmacist including having the opportunity to ask questions or raise concerns
- access appropriate information with counselling and advice from a pharmacist via a route that is appropriate for them
- receive written information and advice, in a format that is accessible and useful to them, on how to use, store or dispose of their medicines and possible side effects
- know when and how to seek further advice.

4. All patients with long term conditions should:

- as a minimum have their medicines reviewed by a pharmacist at least once a year or whenever a medicine is started, stopped or changed and when a patient moves between different care settings
- be able to request a review of their medicines by a pharmacist at any point in their treatment.
- I. http://www.rpharms.com/support-resources-a-z/clinical-check-quick-reference-guide.asp
- 2. http://www.rpharms.com/what-we-re-working-on/medicines-optimisation.asp