



Royal  
Pharmaceutical  
Society  
of Great Britain



CCA  
COMPANY  
CHEMISTS'  
ASSOCIATION



## PRESS RELEASE

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### Patients to have a say in decisions about their medicine

Up to 50 per cent of medicines prescribed for long-term conditions are not taken as recommended. This can have dire consequences for patients leading to treatment failure and a worsening of their condition.

The pharmacy bodies have jointly welcomed the new guidance published by NICE, aiming to help all health professionals to engage with patients and to ensure that patients are involved in decisions about their treatment. Pharmacists have a key role to play in helping patients to understand more about their medicines and the options that they have.

“The guidance is a golden opportunity for all healthcare professionals involved in prescribing, dispensing or reviewing medicines to take their relationship with patients further, by working together to achieve the best results from the treatment of their patients. Pharmacists are critical to this process, if we are to solve the problem of non-adherence to medicines.” Beth Taylor, Chair, English Pharmacy Board of the Royal Pharmaceutical Society of Great Britain (RPSGB).

The new guidelines apply across all sectors of the pharmacy profession and cover all parts of the medicines management process from prescribing, dispensing, medication review, including Medicines Use Reviews (MURs), through to admission, discharge and medicine reconciliation.

The pharmacy bodies will work in partnership to support pharmacists to implement the recommendations outlined in the guidelines and to improve communication with other healthcare professionals involved in the patient's care.

“This guidance puts patients at the centre of medicines use and provides an opportunity for pharmacists to play a key role, as envisaged in the White Paper, *Pharmacy in England: Building on strengths – delivering the future*, published in April 2008, helping individual patients to take their medicines as intended.

Pharmacists across primary and secondary care have an important contribution to make to this process – at the point of supply, as part of MURs and as prescribers." Jonathan Mason and Martin Stephens, National Clinical Directors for Pharmacy.

John Turk, Chief Executive, National Pharmacy Association (NPA), said: "The most expensive medicines prescribed by the NHS are those that aren't taken correctly, or at all. This guidance recognises that the best way of improving adherence is to involve patients in decisions about treatments, to inform them of risks and benefits and view each patient as an individual, rounded person, not merely the embodiment of a disease group.

Pharmacists, as the health professionals seen more frequently than any other by people taking long term prescribed medicines, are carrying out interventions such as MURs and repeat dispensing, to support patients. These guidelines will focus the NHS, pharmacists and other health professionals on creating opportunities for greater patient involvement, improving clinical outcomes through greater adherence."

"All the evidence tells us that patients will open up to pharmacists about their use of medicines – appropriate and inappropriate. On this occasion we believe that pharmacists should be centre stage in working with general practice to ensure a coherent patient-centred approach. The guidance would just be the focus adherence needs to make it centre-stage in NHS planning." Rob Darracott, Chief Executive, Company Chemists' Association (CCA) and AIMp

Sue Sharpe, Chief Executive, Pharmaceutical Services Negotiating Committee (PSNC) said: "Community pharmacy has a central role in helping people understand more about the medicines they use; the MUR service was introduced in 2005 to focus community pharmacy efforts on this task and to tackle problems with adherence. Over three quarters of pharmacies in England are now providing the service and we expect around 1.5 million MURs to be conducted this year."

### **Notes to Editors**

The PSNC, CCA, NPA, RPSGB and DH have jointly responded to the guidelines published by NICE, encouraging healthcare professionals to open a two-way dialogue with their patients. Implementation of these guidelines will give patients an opportunity to make informed decisions about the medication available and is crucial in understanding any concerns that they might have about the benefits or the side-effects of taking prescribed medicines and how this may influence their condition in the future.

### **Royal Pharmaceutical Society of Great Britain (RPSGB)**

The RPSGB is the professional and regulatory body for pharmacists in England, Scotland and Wales. It also regulates pharmacy technicians on a voluntary basis, a role that is expected to become statutory under forthcoming

legislation. The primary objectives of the RPSGB are to lead, regulate, develop and represent the profession of pharmacy.

**Company Chemists Association (CCA)**

Through the CCA, its member companies work together to create an environment where community pharmacy can flourish, and where pharmacy contractors compete in a fair and equitable way. Our nine companies – Alliance Boots, Co-operative Group Pharmacy, Lloyds pharmacy, Tesco, J Sainsbury, Wm Morrison Supermarkets, Asda Wal-Mart, Rowlands Pharmacy and Superdrug – together operate over 6,000 pharmacies in the United Kingdom.

**National Pharmacy Association (NPA)**

The NPA has, in voluntary membership, the vast majority of the UK's community pharmacy owners. The Association supplies members with a range of services to help them maintain and improve the health of the communities they serve.

**Pharmaceutical Services Negotiating Committee (PSNC)**

The PSNC is the body recognised by the Secretary of State for Health as representing community pharmacy owners in England on NHS matters. It negotiates the national community pharmacy contractual terms with the Department of Health and the NHS.

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