

## The value added of community pharmacy

### Benefits for patients, healthcare providers and doctors

There is no doubt that healthcare systems differ enormously across the 27 Member States of the European Union. It is therefore not possible to directly compare different health systems, however if one assesses Community Pharmacy from a "micro" community healthcare perspective, and the demands of local and community populations, it is possible to make comparisons within and between countries.

#### Basic community pharmacy facts

All EU pharmacies dispense prescription only medicines
All EU pharmacies must, by law, be owned by or employ a professional pharmacist
All EU pharmacies can extemporaneously dispense medicines
All EU pharmacies give free and trusted healthcare advice
All EU pharmacies offer a range of non-prescription medicines
EU pharmacies face decreasing returns from dispensing

#### Key value added services throughout all EU countries

#### Dispensing medicines

- Community pharmacy provides a highly accessible network for the safe and effective dispensing of medicines to around 500 million citizens in the European Union. Community pharmacists provide free advice and pharmacy services across the Member States.
- The 160,000 community pharmacies are the primary care service with the most frequent contact with patients of all healthcare professionals. Their services and advice has the greatest accessibility for the general population. Pharmacists have a professional responsibility to provide sound and unbiased advice.
- Community pharmacies offer access to highly trained health professionals. Community pharmacies are open on average 60 hours per week.
- The dispensing procedures of community pharmacists are process driven to guarantee safety. They involve a number of steps ranging from translating prescription scripts into understandable instructions, advising the patient on the safe and effective use of their medicines, to the physical handing of the medicines and associated advice. These steps build patients confidence in the healthcare delivery system, ensure proper patient compliance and contribute to a high level of public health intervention and protection for Europe's citizens.
- When carrying out their dispensing function, pharmacists use their professional judgement to assess the likelihood of drug interactions or contra indication for their patients.
- Pharmacists are also manufactures of medicines in the dispensary. This is especially important for paediatric medicines and chemotherapeutics (anti-cancer agents).
- When necessary, pharmacists will regularly contact prescribers to clarify matters relating to what
  has been prescribed. They communicate prescription errors and ensure their correction. This
  intervention is often unseen by the public, but it contributes in a significant way to patient safety.
- A community pharmacy is not just a retail business. Healthcare providers should see the pharmacy as a key part of the primary healthcare team with frontline access to the public.
- In many countries pharmacists maintain an electronic patient medication record, which allows for detailed analysis of compliance, allergies, long term conditions and other patient safety benefits.





- The primary concern of all pharmacists is the health and welfare of their patients. This is a key difference between the pharmacy and other commercial retail businesses.
- Pharmacists are part of a network of healthcare professionals with access to a full range of expertise on specific diseases and treatment areas.
- Pharmacists offer a front line focal point for information and education to citizens on general health issues.

Examples of specific services offered by community pharmacies to patients<sup>1</sup>:

#### Better access

- home deliveries
- quick desk for fast prescription handling
- medication availability: 24/7 health centres: one stop shop services
- longer opening hours

#### One-on-one service

- medication consulting hours
- consulting rooms
- compliance intervention conversations
- counselling
- travel medical centre

# New information technology

- internet information
- hay fever alert,weather forecasttext message service
- osteoporosis text message reminder service
- medication compass

   internet-based
   program for chronic
   patients

#### **Customised patient care**

- patient-specific blistering
- cooperation with GPs
- health check
- asthma check up
- cholesterol tests
- blood sugar tests, blood sugar meter check up
- calcium- & vitamin D checks
- skin consultation
- thrombosis self check

#### **Evolving value added services in some EU countries**

#### Chronic Disease Management

- The community pharmacist has the most frequent contact with chronic disease patients of any healthcare professional. Therefore pharmacists can play a crucial role in disease management.
- There are clinical benefits and cost-effectiveness arguments for patients' management supported by pharmacists in a range of chronic diseases.<sup>2</sup> This can alleviate some of the costs associated with secondary care.
- There is minimal capital expenditure in rolling out chronic disease management programmes and it therefore represents a cost effective solution to a significant problem.
- There is easy access to medication identifier data for patients at risk of chronic diseases, using patient medication record databases, which are employed in many EU pharmacies.
- In order to achieve consistently high levels of service delivery, there is a need to provide conversion training and ongoing accreditation for pharmacists in each of these chronic disease areas. For graduates, this can be delivered through continuing professional education. Formal training for these emerging areas of practice should be incorporated into existing pharmacy undergraduate curricula.

#### Pharmacist involvement in drug safety systems

Drug safety systems, such as medication error reduction and adverse drug reaction (ADR) reporting systems, require the use of electronic patient records. Where these drug safety systems exist, pharmacists are registered, just like a doctor, with the national data controller's office, ensuring the highest level of security for patient data. These systems can:

- Reduce inappropriate prescribing of medication to a large extent
- Reduce emergency admissions and associated healthcare costs related to adverse drug reactions

 $<sup>^{2}</sup>$  Osteoporosis, diabetes, cardiovascular disease, heart failure and Chronic Obstructive Pulmonary Disease.



<sup>&</sup>lt;sup>1</sup> The list is non-exhaustive. Some of these services are subject to an additional fee.



- Improve rates of medication under-prescribing
- Improve patient adverse events associated with poly-pharmacy
- Improve discharge planning in the community
- Improve patient quality of life associated with better medicines management
- Provide more accurate information on adverse drug reaction rates and pharmacovigilance to statutory drug regulatory authorities and develop better patient-centred safety systems.

#### Pharmaceutical care, medicines management and medicine use reviews

Medicines Use Reviews (MUR) are becoming more widely available not just in Europe but also in the USA (MTM) and Australia (HMR). A MUR involves a face-to-face interview between a pharmacist and a patient, who is taking one or more medicines. During the interview, the pharmacist reviews the existing medication and highlights any concerns on a report for the patient's doctor. This can suggest changes to the current medication and helps the patient understand – in simple terms – exactly what all the medicines are for, and why it is important to take them correctly (compliance). If MUR systems are implemented across the EU, they would provide the following benefits:

- Patients can be assured that they are receiving the best therapy possible in compliance with internationally accepted guidelines.
- Quality assurance and quality control of the prescription improves patients' medicines compliance and doctors are assured that they are operating at best international standards.
- Health service providers can be sure that patients receive optimal therapy and that the process is quality assured and validated.
- Pharmacists play an increased role in managing their patients' therapy.
- Costly medicines related to secondary care emergency admissions are reduced and public health is improved.

#### Minor Ailments Schemes, if implemented, would have significant benefits:

Minor Ailment Schemes allow pharmacists to treat a range of ailments that would normally be treated by a doctor or in a hospital emergency room. The basis of the scheme is an agreed list of medicines, e.g. antibiotic eye drops for uncomplicated minor eye infections, for which pharmacists are reimbursed and are paid a fee per consultation. If Minor Ailment Schemes are implemented, significant benefits can be achieved.

- Patients become empowered to treat their own ailments.
- Patients have reduced access times to healthcare advice, as no appointments are required.
- Health service providers can better target resources and the savings can be assigned to further improve health services.
- Doctors' resources are freed up to treat more patients with serious diseases.
- Pharmacists can maximise their professional expertise and develop a greater role in managing minor ailments.

The introduction of a Minor Ailments Scheme would provide a cost effective, easily accessible service for patients with minor conditions, thus reducing the time and resources GP services have to spend on more minor ailments. Standards would need to be established for the scheme, including the type and range of ailments that can be treated, the protocols to aid diagnosis, the development of a minor ailments formulary, private consultation areas, audit procedures and inspection validation procedures. Pharmacy pilot sites should be used to develop, evaluate and refine the scheme. Minor Ailment Schemes are currently running very successfully in England and Scotland.





#### Healthcare screening services in pharmacies

Screening services include services such as the screening for type 2 diabetes and the screening for vascular risk using a combination of cholesterol, blood pressure and body mass indexing. People found to be at risk are referred to their doctor for further investigation. Those who are at increased risk can receive from the pharmacy intervention and management advice, which encourages these people to change their lifestyle habits and diet.

- Pharmacies are the healthcare service with most frequent contact with high-risk chronic disease patients and are ideally placed to screen for disease development and progression.
- There is broad acceptance of healthcare screening in pharmacies, with 92% of the general populations in countries where it is available, agreeing that services such as diabetes screening should be available in this setting.
- Minimal capital expenditure is required to roll out programmes in the existing pharmacy network.
- Medication databases provide access to identifier data for targeting high-risk patients.

These additional patient-centred developments allow for a competitive market environment, which leads to increased innovation in both services and processes.

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#### Contact us

Rue de la Loi 26 10<sup>th</sup> floor, box 14 B - 1040 Brussels

**Phone:** +32 2 777 99 77 **Fax:** +32 2 770 36 01

Email: girp@girp.org Website: www.girp.eu

