Dear Colleague

GUIDANCE ON EXPLORING EFFECTIVE STRATEGIES TO EMPOWER PATIENTS AND INFORM PATIENTS AND THE PUBLIC ABOUT THEIR MEDICINES

Summary

1. The Scottish Executive’s strategy for pharmaceutical care, “The Right Medicine: A Strategy for Pharmaceutical Care in Scotland”, was published in February 2002. The Strategy recognised that more could be done by pharmacists to empower and inform patients and the public about medicines. The aim of the enclosed guidance is to provide an overview and update on national policies relating to patient and public involvement and to highlight some principles and examples of good practice that may be applied at local level.

Action

2. NHS Boards, NHS Education Scotland, Schools of Pharmacy and pharmacists at locality and practitioner level are asked to consider the principles and incorporate them into their local plans and practice.

Yours sincerely

W SCOTT
Chief Pharmaceutical Officer

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Dear Colleague

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Policy Context and Background

In December 2000, *Our National Health: a plan for action; a plan for change* signalled a move towards more patient focused services in NHSScotland. The *Patient Focus and Public Involvement* initiative (2002), was created to take forward the key recommendations from *Our National Health* and published a framework for developing and delivering a more “patient focused” NHS. ([http://www.show.scot.nhs.uk/involvingpeople/](http://www.show.scot.nhs.uk/involvingpeople/))

The framework includes a *Building Strong Foundations* toolkit, which describes a number of approaches to help healthcare professionals to work with patients, their representatives including carers, the public and other stakeholders to develop patient and public focused services. ([www.show.scot.nhs.uk/involvingpeople/bsftoolkit.htm](http://www.show.scot.nhs.uk/involvingpeople/bsftoolkit.htm))

In December 2001, the Scottish Executive Health Department published the *Fair for all* report, a ‘stocktake’ of the services it provides for people from ethnic minority backgrounds. This report is the cornerstone in a programme of work that encourages NHS organisations to act in a way that is sensitive to the cultural and religious needs of ethnic minority groups. ([http://www.scotland.gov.uk/library3/society/ffar-00.asp](http://www.scotland.gov.uk/library3/society/ffar-00.asp))

The same patient and public focused principles which underpin the principles of *The Right Medicine: A Strategy for Pharmaceutical Care in Scotland* (2002), aim to help pharmacists empower and better inform patients and the public about their medicines. It recommends that pharmacy services are designed around patients and their needs, allowing pharmacists and the pharmacy team to spend more time with patients. ([http://www.scotland.gov.uk/library5/health/gojw-10.asp](http://www.scotland.gov.uk/library5/health/gojw-10.asp))

The following sections set out some principles and practice examples to help practitioners to plan and provide more patient focused pharmaceutical care services.

**Principle 1**
Pharmacists working in all care settings should reflect on their current practice and take any necessary steps to empower patients by developing a more patient focused approach.

<table>
<thead>
<tr>
<th>All patients</th>
<th>want to know the <strong>purpose</strong> and <strong>benefits</strong> of prescribed drug therapy and have an <strong>open discussion</strong> about any potential side effects and how to manage them.</th>
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<tr>
<td><strong>Scottish Association of Health Councils</strong></td>
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**Empowerment** is about offering information in such a way that people can make informed choices about their drug therapy, their medical condition and lifestyle. There has to be a multi-agency, multi-professional approach to giving people access to information on drug therapy and alternatives at every stage of their treatment.

**Scottish Consumer Council**
The Right Medicine identified that:

- patients are more likely to be motivated to take their medicines if they understand and agree with their treatment and it is the most convenient way for them to take it;
- patients need to be active partners in the decision-making process relating to their prescribed medicines.

The philosophy and practice of pharmaceutical care provides an opportunity to improve patients’ understanding of their medicines and optimise the benefits and reduce the risks of medicines. Packages of pharmaceutical care will be provided to patients as part of the new pharmacy contract planned for 2005. Pharmacists are contributing to chronic disease management initiatives in the community pharmacy and the GP Practice settings. In the hospital setting, a more patient focused approach is the underpinning principle of the major redesign of hospital pharmacy services, with many pharmacists involved at ward level undertaking medication reviews. Pharmacist prescribers in all care settings will be applying the principles of patient focused care as part of their prescribing practice.

**Principle 2**

**Patient focused care requires a commitment to change the historical relationships between healthcare practitioners and patients at an individual and strategic level.**

Pharmacists should consider the idea that they are working in a community of people rather than community based. They must find out what is happening around them and develop services that will link them more effectively with the community they serve.

*Voluntary Health Scotland*

As the pharmacy profession continues to embrace and develop more patient focused services, the historical relationships that pharmacists have with their patients will naturally change. Pharmacists should consider raising awareness of their role and how they can empower patients through initiatives such as publicity campaigns, road shows and information leaflets.

**Principle 3**

**Full and effective involvement of the public and patients should be an integral component in the development of strategies and services, both nationally and locally.**

Pharmacists should be involved in work with local users groups and National Awareness Campaigns. This should be a collaborative effort with other healthcare providers.

*National Asthma Campaign*

All pharmacists involved in service redesign should consider engaging patient and lay representation using techniques such as user focus groups and one to one interviews with patients and their carers. The results can then form the basis for local service developments. *Patient Focus and Public Involvement* recommended that as a minimum all national groups should have lay or patient representation. The pharmaceutical needs assessment tool kits being designed by the Scottish Specialist in Pharmaceutical Public Health should support this principle. In North Ayrshire a number of techniques were used to review patient and carers views on local mental health services. This formed the basis for service development, including Pharmaceutical Care Model Schemes and integrated care initiatives.

**Principle 4**

**Effective change management requires a team effort. The Right Medicine encourages pharmacists to develop the skills and expertise of their pharmacy technicians and support staff and to work collectively through Pharmacy Locality Groups.**
National Demonstration Projects such as *Have a Heart Paisley* encourage community pharmacists and their support staff to work together to support health improvement targets and coronary heart disease primary prevention interventions. In addition, developments in smoking cessation have demonstrated the benefits of involving the wider pharmacy team and sharing the workload.

In the hospital and community setting senior technicians and support staff are providing some services previously carried out by pharmacists.

**Principle 5**
A patient focused approach, including effective communications and public involvement, should be incorporated into training and development activities.

The Scottish Centre for Post Qualification Pharmaceutical Education (SCPPE), as part of NHS Education Scotland, should ensure that postgraduate pharmacy education and continuing professional development consolidates both clinical and patient focused skills. The Schools of Pharmacy should review their undergraduate and postgraduate courses in line with the principles of *Patient Focus and Public Involvement*.

NHS Boards should, wherever possible, support pharmacists to attend *Patient Focus and Public Involvement* multi-disciplinary, communication skills training events.

All healthcare professionals need to be more responsive to the needs of their patients and the public. National clinical guidelines, including the Scottish Intercollegiate Guidelines Network (SIGN), number 63, on the management of Asthma, recommend the development and use of self-management plans and patient held records. This allows patients to be fully involved in decisions relating to their care and pharmacists should be prepared to support the use of such tools.

**Principle 6**
Good communication must also be applied to interactions with the wider public.

National campaigns such as the appropriate use of antibiotics, the annual influenza immunisation programme and *Ask Your Pharmacist* are all good examples of effective communication. Pharmacy bodies should consider highlighting new services and new or extended roles as they develop. Many NHS Boards have local multi-disciplinary newsletters that are open to contributions from pharmacists. Some Boards have produced their own local pharmacy newsletter highlighting *The Right Medicine* and local pharmacy services. These have been widely distributed through local health settings and community centres.

**Principle 7**
Pharmacists should be aware of any cultural and religious issues that may affect an individual's attitude and feelings about their medication and their condition.

In Glasgow, pharmacists are involved in a diabetes clinic for Urdu speakers. In Lothian, a pharmacist is providing outreach work which involves educational needs assessment for Asian people with diabetes. All pharmacists should be more aware of ways to help people from ethnic minority groups get the most from their medicines.
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