

Pharmacy Project

Summary Report

1. Introduction

1.1 This is a summary report of key conclusions from a project undertaken by the Patient Participation Group (PPG) of Clarendon Lodge Medical Practice (CLMP) between October 2023 and March 2024.

1.2 The purpose of the project was to assess the service provided by local pharmacies to CLMP patients and to help overcome any issues identified.

1.3 The project involved 3 main pieces of work:-

- An interview with medicines management staff of the Practice and the Hub that serves all the GP practices in Leamington. (The Hub was set up by the two Leamington Primary Care Networks - PCNs)
- A survey and interviews with most of the pharmacies that CLMP patients use.
- A patient questionnaire that was completed by 312 CLMP patients.

1.4 Reports on the project and this summary report were written by members of the PPG of CLMP. The reports do not necessarily represent the views of the Practice, the Hub or the local pharmacies. The Practice, the Clinical Director of the North Leamington PCN, and the Hub have commented on the issues raised in this report, corrected errors and the report has been amended to reflect their views where relevant. They have all welcomed the report, commended the PPG for their work and have undertaken to respond positively to the issues raised.

1.5 The volume of work involved in medicines management is an important context. 14,200 patients in the Practice, generate annually 78,000 repeat prescriptions and 30,000 non-repeat prescriptions.

1.6 **The most significant finding** is that the large majority of CLMP patients are happy with their prescription and pharmacy arrangements. Patients like prescriptions going digitally to pharmacies and pharmacies texting them when their medicine is ready to collect, normally within 2 days. They also like ordering repeat prescriptions digitally on the NHS App or through Patient Access. The Practice, the pharmacies and the staff of both were generally praised for their service.

The conclusions that follow arise from:-

- issues raised by a minority of people surveyed who have concerns about some aspects of the prescription and pharmacy arrangements
- issues raised by pharmacies themselves.
- issues arising from discussion of the project by the PPG

2. Communications – there are 8 areas identified for improvement in communications.

2.1 Patients would like to have easier means of communicating with the Practice such as email if they have medication queries. When they add notes to their medication requests online, they would like them to be acknowledged. The Practice has concerns about the potential volume of work this could generate. However, there is scope for the form on the website for non-urgent medication questions to be made easier to access, and to make patients more aware of this means of raising medication queries.

2.2 For a number of reasons, some medicines can be in short supply or out of stock. There are procedures in place for the pharmacies and the Hub to manage out of stock items but the procedures are not always followed by the pharmacies. This can cause confusion and stress for patients. Patients need clearer advice about what happens and what they should do if their medicines are not available.

2.3 Pharmacies are required to contact the Hub (usually by email) rather than the Practice if there are patient medication queries. Some of these can be urgent. However the Hub closes at 3.30 pm for phone calls (although they can be emailed up till 5pm) while the pharmacies and the Practice are open later. Either the Hub should be open for urgent phone calls later than 3.30 or the Practice should have a simple means for pharmacies to contact them on urgent issues when the Hub is not taking calls, rather than queueing on the public phone system.

The Hub has undertaken to re-communicate to pharmacies on these matters and ensure that the system for dealing with urgent queries is known to them, so that there are no unnecessary delays in responding to patients' needs.

2.4 There is a case for the pharmacies to have a more formal networking arrangement for communication purposes. The Hub seems to be well respected by the pharmacies and their pharmacists and could create such a network to communicate, for example, on out of stock items and alternatives, common queries, changes in systems and anything that pharmacies in

Leamington need to know to ensure good services for patients.

For example, when 2 pharmacies changed hands in 2023, although the Hub did contact them, the new owners indicated that the arrangements for informing them and their staff about the local prescription system and related matters were inconsistent and not altogether satisfactory. An active pharmacy network could overcome this. The Hub feels this would be a positive step and will assess its feasibility.

2.5 Reviews of repeat medication are undertaken by the medicines management teams at the Practice and the Hub. Whilst over 80% of patients surveyed were satisfied with the review process, there were some negative comments and some uncertainties about the process. The review process needs to be better and clearer for some patients. The medicines management teams are working towards reviews taking place on a patient's birthday but this does not appear to be well known. All patients should know which repeat medicines are subject to review, who undertakes them and how, and the frequency/date of reviews. The Practice and the PPG have agreed to review communications for patients about repeat medication and the associated processes, and prepare a leaflet for patients and/or other communications.

2.6 Patients feel that hospitals need to have clearer communications with them about medication prescribed by the hospital and where to obtain it. Patients can end up running out of medication and unsure of what to do. The PPG will review hospital communications on this.

2.7 It also appears that some letters from hospitals to the Practice containing information about what the hospital has prescribed, may not be acted upon to update patients' records about their medication needs. The Practice acknowledges that this should not happen and has undertaken to check its procedures to avoid difficulties for patients.

2.8 Some patients may not have access to computers, tablets or smartphones, or as a result of disabilities, may not be able to use them. The PPG does not know who they are and has therefore not heard their views. It is incumbent on the Practice to ensure that patients who do not or cannot use digital methods of access (or phones) are known and appropriate means of communicating with them to enable full access to all GP services are maintained. Identifying who these patients are is the difficult issue for the Practice. The PPG will support the Practice in working on this.

3. Pharmacy First (PF)

Nearly three quarters of patients surveyed have confidence in local pharmacists being able to give good medical advice on minor ailments, and on the 7 additional conditions under the Pharmacy First scheme they are being paid extra by the Government on which to advise patients and prescribe treatment. The local pharmacies have all signed up to PF although at the time they were surveyed before PF was launched, they were advising relatively few patients (5 to 10 per week at most).

However there are some patient concerns:-

- Pharmacists may be too busy to provide good advice and service;
- Pharmacists may miss a serious medical problem;
- There is a lack of privacy for patients in some pharmacies.

This needs to be kept under review by the Practice and the PCN if Pharmacy First is to have a positive impact on reducing pressure on GP practices. The PPG could assist with monitoring patient experience.

4. Dosette Boxes/Bespoke Blister packs

25% of patients surveyed would find it helpful to have their daily and weekly prescription tablets sorted into dosette boxes or bespoke blister packs so that they remember to take the correct medication each day. Forgetting to take medicines or taking too much can be a health risk for patients. Many pharmacists plus online pharmacies can provide them but they are generally not promoted locally because pharmacists are not paid by the NHS for this service and it is quite costly in time. Pharmacists would prefer weekly prescriptions to facilitate preparation of these but this would mean significantly more work for the Practice. The Hub tries to keep up to date on which local and online pharmacies provide this service but the picture can change frequently. More investigation is required on this to establish patient need for dosette boxes/bespoke blister packs, and then on-going up to date advice is required for relevant patients on who can supply them and on whether there is a cost.

5. The Hub

The Hub is an excellent asset for Leamington patients but largely invisible to them. It supports all Leamington GP practices and pharmacies in facilitating effective management of medicines. Patients cannot contact the Hub directly, which seems reasonable, but given that it is in frequent contact with patients, the PPG feels that the Hub should be more visible to patients and its role explained to them. The Hub agrees that some publicity on their role and the work they do would be beneficial for patients.

6. Waste

6.1 Patients on repeat medication have a number of ways of ordering repeats, which they find helpful. If a pharmacy initiates the repeats, it can be wasteful if they order everything listed rather than what is specifically required by the patient. The PPG thinks there may be a lot of waste prescription medicine in patients' cupboards. All patients, including those who are not initiating their own repeats, could be advised to ensure that orders should be only for what is required, and help to avoid waste. Waste of medicines is a national issue for the NHS. The PPG feels that there may be scope for local action.

6.2 When pharmacies hand over prescribed medicines to patients, the package includes a paper copy of the prescription that the patient can use to reorder. Since most patients use digital means to reorder, the paper copy (which contains confidential information) is wasted and usually thrown away. The PPG will raise this with local pharmacies.

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