

## Community pharmacy

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The NHS has been subject to great change since the 1990 NHS and Community Care Act. The introduction of market forces has led to a greater emphasis on patients as customers with the right to expect a quality service that takes into account their individual needs. Initiatives such as the Patient's Charter have raised people's expectations of the service they can expect from the NHS. At the same time the focus of NHS care is shifting to community based services with the Government promoting a future "primary care led NHS". In this atmosphere of change it is appropriate that the Royal Pharmaceutical Society is developing a strategy for the future of pharmacy especially as community pharmacists are seen as an integral part of the primary care team.

As the consumer's watchdogs in the NHS, Community Health Councils (CHCs) can make a valuable contribution to this debate, reflecting the interests and concerns of consumers. One area of concern to CHCs is the maintenance of a network of local pharmacies, ensuring that the service is accessible to all. CHCs are consulted on the location of new pharmacies, for example if a superstore has applied to have an in-store pharmacy. Although this would be convenient for shoppers, the CHC will consider whether the increased competition could threaten local pharmacies. CHCs also acknowledge the important role of community pharmacists in providing advice and information to members of the public. Pharmacists can help the

individual decide whether they should consult the GP; give advice on the treatment of minor ailments and suggest appropriate over the counter medication. In addition, pharmacists can reiterate advice from doctors on how to take prescribed medication. People may have been given instructions by the GP but forgotten or not understood. Pharmacists can make sure people know what they are taking, when they should take it, and describe common side effects. This role is obviously a valuable use of pharmacists' specialised knowledge and of potential benefit to the whole community though an individuals' right to consult their GP for advice must be respected.

There has been research in the past that suggests that not all pharmacies have delivered the best service for customers. The most widely reported information comes from various Consumers' Association surveys. These may have angered many professionals but this research is a valuable reminder that there must be safeguards to ensure that all pharmacies meet minimum accepted standards. Prescription drugs can be lethal, as can OTC drugs if they are not taken properly. This is illustrated by reports of individuals taking a combination of cold relief products, leading to an overdose of paracetamol. Of course the pharmacist cannot be held responsible for this kind of tragic accident but they have a part to play in educating the public about the safe use of medications. The danger of paracetamol overdose has led CHCs to call for tighter controls on sales of the drug. Pontefract CHC carried out a survey on the supply of paracetamol to children in which they sent a 12 year old to 31 local retailers to buy paracetamol tablets, including eleven pharmacies. None of the outlets refused the sale. In two pharmacies the child was asked who the tablets were for, in another three the assistant checked with the

pharmacist but in no case was the child questioned by the pharmacist directly or given instructions about how to use the drug safely. This survey highlights the often quoted example of the assistant in a pharmacy holding up a particular product for the approval of the pharmacist, often an affirmative nod. This is a meaningless check unless the customer has been advised about what they are buying. Nobody would want to be quizzed by an unqualified assistant demanding personal information, but there is a case for some basic safety checks.

However, even where checks are made and advice offered by a qualified pharmacist there are issues to be addressed. In theory it is a good idea to be able to ask a pharmacist advice but if the problem is personal it is difficult to have to give details of your condition in front of an audience of interested customers. Pharmacists cannot achieve their full potential as advisers unless they can offer privacy. This does not have to be a private consulting room, just an area where people can talk without being overheard. Training in communications skills is also important so that people feel secure enough to give an accurate account of their symptoms.

There also needs to be an increased awareness that not everyone can read the instructions in patient information leaflets, this source of information should not be seen as a replacement for information provided by the pharmacist. There are also people whose first language is not English, their needs have to be considered. Pharmacists have to be aware of confidentiality issues and should not rely on a member of the family acting as an informal translator.

These are all important issues that need to be considered as part of any debate about the future of pharmacy. In the discussion document, "Pharmacy in a New Age", The Royal Society expresses " a desire to see our profession and our services play a valued central role in the health care of the future". In order to achieve this, the profession must take into account the needs of people who use their services. All community pharmacists must be encouraged to meet the high standards of the majority of the profession who provide a valued service for their community.

Community Health Councils (CHCs) were set up by law in 1974 to represent the interests of the public in the NHS. There are 207 CHCs in England and Wales, acting as independent watchdogs to ensure that local services meet the needs of local people.

The work of CHCs includes:

- Monitoring local health services by visiting hospitals, clinics and other NHS premises to assess the standard of care.
- Conducting surveys to find out what local people need from the NHS and what they think of existing services.
- Representing local interests when changes are proposed for local health services.
- CHCs also have a proactive role in suggesting areas where services could be improved, identifying good practice and reporting back to the local health authority.