

# How pharmacists can support self care for patients with long-term conditions

Last week the Department of Health published its guide on strategies and good practice to enable people in England with long-term conditions to take control of their own care. **Tom Moberly** looks at the guide's messages for pharmacists

Providers of health services still fail to pay enough attention to how people can be helped to understand and take control of their own long-term conditions, Lord Warner, Minister of State for NHS Reform, argues in the Department of Health's new self care guide. "As a result," he says, "resources are wasted, medication goes unused, people's health deteriorates more quickly than it should, and quality of life is compromised."

## Supporting self care

This new self care guide, "Supporting people with long term conditions to self-care — a guide to developing local strategies and good practice", is designed to be used alongside the White Paper on community services for England (*PJ*, 4 February, p123) to help local organisations and health professionals — including pharmacists — develop strategies to deliver self care support for people with long-term conditions.

Such strategies should, it argues, be based on a combination of generic solutions, good planning and individually tailored support. In addition, the people who will use the services should be consulted during the development of self care strategies. "If self care is based on this approach it is likely to be more effective, and achieve significant benefits for people as well as the NHS," the guide says.

## Pharmacists' role

The document outlines how health and social care services can support self care through information, self-monitoring devices, education and training and support networks. It also explains what pharmacists should be doing to help patients with long-term conditions care for themselves and gives examples of innovative projects that pharma-

cists are running to help patients take control of their own long-term conditions (see Panel).

Community pharmacies can be a valuable source of information for people suffering from long-term conditions, the guide says, because of their convenient locations, because people can ask for advice without having to make an appointment and because advice and support are often available during longer hours than is the case for other health care providers.

The guide recommends that those developing a self care support strategy should work with their local pharmaceutical committee to ensure that community pharmacists are making the most of the opportunities in the community pharmacy contract to support self care and medicines management.

Developers of self care support strategies should also, it urges, explore how national initiatives for community pharmacy and medicines management link into self care support initiatives. And support strategies should aim to improve people's knowledge and understanding about how they can connect with the wider community and professionals working in GP surgeries, local hospitals and health centres, community pharmacies and social, voluntary and community groups.

The document also recommends that, to make the most of their advantageous position, pharmacists should ensure that they maximise their expertise in the effective and safe use of medicines and the promotion of healthy lifestyles, particularly in relation to people with long-term conditions.

In addition, it outlines how the essential services of the community pharmacy contract can be used to support patients with long-term conditions, as well as those with

minor ailments, to self care by signposting, providing prescription-linked healthy lifestyle advice, online prescription ordering and medicines use reviews.

The DoH also emphasises the importance of tools and devices in helping people to monitor their conditions and control their medicines. It recommends that health care professionals developing strategies for self care should explore ways of making more self care tools, self-monitoring equipment and technological aids available, as well as increasing support for their use, and that all health care professionals should be "aware of the tools and devices — both technological and non-technological — that can make a significant impact on a person's ability to live independently with a long-term condition".

## Government commitments

The Government makes a number of commitments in the guide as to how it will help to encourage support for individuals to take control of their long-term conditions. "The DoH will be taking forward work that not only creates a clear self care competency framework for staff, but also embeds key elements, including values and behaviours around assessment and support in appraisal and continuing professional development requirements," the guide says.

To achieve this, the DoH says it will work with a range of organisations, including Skills for Health and Skills for Care (to develop a self care competency framework for all staff), NHS employers (to include self care in the knowledge and skills framework, so that it is embedded in job descriptions and annual appraisals under Agenda for Change) and professional bodies (to include self care in core curricula). The DoH is also, the guide reminds us, developing a health search engine to allow people to find information they need and an accreditation scheme for information providers to help people easily find trustworthy information.

The changes and tools outlined in the document set out to empower patients with longer-term conditions to manage their own care with the help of skilled health care staff, Lord Warner says. But, he acknowledges, minds — as well as systems — will need changing if this is to succeed. "We need to reach the stage where doctors, nurses, pharmacists, allied health professionals and others recognise that self care is a real choice and actively support the individual in this choice," he says.

## Pharmacy self care projects already under way

"Supporting people with long term conditions to self-care" describes examples of good practice in self care support, including three pharmacy projects. The head of pharmacy at Norfolk and Norwich University Hospital, together with rheumatology consultants and a rheumatology nurse practitioner, has developed guidelines for methotrexate therapy for patients with inflammatory arthritis. An education programme for patient self-administration of subcutaneous methotrexate and study days for all health professionals were also organised and the programme helped to address a number of safety issues around methotrexate therapy.

In Manchester, a pilot scheme currently under way is allowing patients with cardiovascular disease or diabetes to have consultations carried out in one of 22 community pharmacies taking part in the project. When patients visit the pharmacy to collect their medicines, they are offered the chance to have point-of-care HbA<sub>1c</sub> and cholesterol tests. In addition, the guide describes how the community pharmacy diabetes service being run in 10 pharmacies in Hillingdon — a personalised programme of health monitoring, education and medicines management — is improving patients' health and their understanding of the condition.