



My name is Graham stretch, the Primary Care Pharmacy Association president, the PCPA is an organisation that supports thousands of pharmacy professionals in primary care, and I'm delighted the National Overprescribing Review has been released. Improving the daily lives of care home residents through avoidance of over medication has been the focus of my professional life and together with colleagues at the Argyle care home service in West London we help look after more than a thousand care home residents.

Nationally this review brings us another step further towards our goal of bringing effective pharmaceutical care to every patient and care home resident.

People living in care homes take seven medicines a day on average, with some taking more, and many are still not being regularly reviewed.

As people get older, their medicines needs change, patients and care home residents often take medicines that are inappropriate or even unsafe. Residents often don't get a say or are involved in decisions about their medicines.

This is not just about older people but also those with learning disabilities and those with complex mental health needs, put simply we need to recognise the impact on people and help them live with the right amount of medicine that they can cope with, manage and want.

The NHS has been working nationally on introducing regular structured medication reviews by trained pharmacists for patients and care home residents for several years I, and we have made great progress allowing huge investment and hard work by so many people.

The Medicines optimisation in care homes program or MOCH as its known and other initiatives have seen clinically trained pharmacists and pharmacy technicians being deployed into care home settings working through primary care networks in collaboration with other NHS organisations and partners, community and mental health trusts and community pharmacies.

The MOCH programme demonstrated that trained clinical pharmacists and pharmacy technicians improved quality of care, reduced risk of harm from

medicines and improved efficiencies (e.g., less medicines waste, more time for care home staff).

Embedding pharmacists and pharmacy technicians into wider multidisciplinary team reviewing medicines, improves patients and residents' quality of life, reducing unnecessary use and bringing down emergency admissions, with less time spent in hospitals, and better quality of daily life, alertness, and mobility as well as far fewer falls.

Pharmacy teams have also supported safe prescribing and rapid access to end of medicines ensuring patients are as symptom free as possible in the last phase of their lives.

The MOCH programme introduced 356 pharmacists and pharmacy technicians who are now working with PCNs, community services and other partners to support the delivery of Enhanced Health in Care Homes. Around 2,800 pharmacists and pharmacy technicians are currently working in teams in primary care networks to review medicines and support deprescribing, with thousands more coming soon.

Structured medication reviews allow a personalised approach to reviewing and optimising medicines, where the patients preferences, beliefs and values are consider along with efficacy and safety of medicines, and decisions made jointly with patients and their family and carers.

Key elements of the overprescribing review will help further ensure that people only receive medicines that are appropriate and safe, and they have the opportunity to have a say in what treatments they get, including non medicine options.

Please do take the time to read the review and discuss it with colleagues, together we can make a real difference to the lives of residents and patients by putting them at the centre of decisions about their care.

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Graham Stretch, PCPA President www.pcpc.org.uk

Video: [Overprescribing Review](#) by Graham Stretch PCPA

[Good for you good for us good for everybody Overprescribing review.pdf](#)