The National Pharmacy Strategy (NPS) is a 10-year plan to transform the delivery of pharmaceutical care and medication management in Singapore. Establishing the model of person-centric pharmaceutical care in the community care setting is an approved initiative that will support MOH’s Beyond Hospital to Community.

A proof-of-concept study involving community pharmacists delivering Pharmaceutical Care Services (PCS) to seniors in different community-based care service facilities within the central region was conducted.

### Objectives

The key objectives of the study were to identify medication-related issues in the community and to establish PCS workflow in empowering seniors and caregivers to manage their medications independently and safely.

### Method

#### 1 to 1

- Pharmacist consultation with seniors and/or caregivers

- Understand the challenges faced by seniors and caregivers with medications given by various prescribers when they are at home

- Engage seniors and caregivers to develop a personalised plan to take their medications

- Coordinate with multi-disciplinary care team across care settings

- Follow-up with seniors and caregivers until all medication-related problems were resolved. If no MRP, seniors were discharged from study.

- Leverage National Electronic Health Records (NEHR) to securely communicate seniors’ medication list and plan with healthcare professionals across care continuum

- Empower seniors and caregivers with information about their own medications (both hardcopy printout and electronic HealthHub medication list were shared)

#### Person-Centred PCS Model

- Identify and refer to PCS

- Coordinate follow-up with PCS Pharmacist

- Activate available volunteers

### Results

<table>
<thead>
<tr>
<th>Year</th>
<th>Seniors</th>
<th>MRPs</th>
</tr>
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<tbody>
<tr>
<td>100%</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>61%</td>
<td>227</td>
<td></td>
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</tbody>
</table>

#### Causes of daily doses of medications

- Lack of understanding on why, when and how to take and store (36%)

- Need changes to routine (26%)

- Hand changes to routine (17%)

- Inability to manage medications (14%)

#### Resolved by

- Education and counselling to empower seniors and/or caregivers to self-manage medications (43%)

- Referral to centre based services (17%)

- Referral to prescriber (14%)

- Regular review and feedback with seniors and caregivers (74%)

### Clients’ Stories

- **Uncle A**
  - 82 yr old male
  - Centre nurse was concerned as Uncle A’s routine blood pressure (BP) were high despite taking medications regularly
  - He did not show any signs and symptoms of urinal

- **Mdm Y**
  - 72 yr old female
  - Centre nurse liaised to help with centre nurse to arrange for pre-nursing high blood drop

### Feedback

- “Pharmacist has a role in planning with clients (in the day care centre) especially about new medications and what to look out for”

- “Satisfying to have the opportunity to work hand-in-hand with centre staff to resolve client’s issues”

### Conclusion

The study showed that seniors and caregivers experienced challenges in handling medications which could impact medication safety. These challenges could be addressed by empowering them with tailored solutions to meet their medical-social needs and communicating with their prescribers. The study also established the PCS workflow to connect back to the seniors’ prescribers through public healthcare institutions pharmacy point of contact, which would ensure continuity of care for the seniors.

**Next step:**

A 3-year island-wide study will commence from 2020 to establish sustainable solutions in empowering seniors and caregivers to manage their medications independently and safely within the community.

### Beyond Hospital to Community

Ensuring that Singaporeans receive good healthcare closer to home and support to age well in the community.