



A healthy future: a public health strategic framework for Wales – a briefing paper to support development

Healthy eating, food and fitness

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- 1) Pharmacists work at the heart of the communities they serve and have frequent opportunities to offer health messages and advice. The local community pharmacist is readily accessible, without an appointment. They are visited by both the fit and the unwell and give ready access to people who are not in contact with any other health professional. They act as a crucial lifeline and primary point of contact with a healthcare professional for many rural and disadvantaged communities.
- 2) Pharmacists have an excellent record of offering non- judgemental advice on sensitive issues and generally have the trust of the public.
- 3) Community pharmacy has access to areas of the population that have traditionally been hard for the NHS to reach, for example men and ethnic minorities.
- 4) Pharmacists and their staff can identify individuals with risk factors for disease offering them lifestyle assessments. Under their contractual framework they are expected to give advice to people with diabetes, coronary heart disease, high blood pressure, those who smoke and those who are overweight.
- 5) They can offer opportunistic or targeted information and advice on diet and physical activity. However to optimise the impact support needs to be given within a program framework, not a one off intervention.
- 6) Scotland is now introducing community pharmacy based weight management service. Participants get lifestyle advice, a reduced calorie diet and regular weighing for three months. If weight loss is not achieved the addition of drug therapy by a pharmacist under a patient group direction maybe appropriate.
- 7) LHBs can target support Community Pharmacies in those areas where health inequalities are manifest and target groups where rising obesity levels are a key concern e.g. halting the year on year rise in childhood obesity, within the broader strategy to tackle obesity in the population as a whole.
- 8) Pharmacists have provided education programs in schools, presented seminars on healthy living, the importance of a balanced diet and the health risks of being obese. These tend to be individual initiatives and would be more effectively delivered within a strategy and framework commissioned by the LHB.

9) Community pharmacies may also include signposting to other services and if appropriate referral to required support. They provide a readily accessible healthcare facility that can host other peripatetic health professionals such as dieticians as part of local strategy for addressing public health issues.

Conclusion

The Community Pharmacy is a central part of the local community. It provides ready and convenient access to a healthcare professional without an appointment. They provide support to those who do not need to access NHS services and act as a “first port of call” for those seeking advice and treatment. They often have routine contact with a patient population who have chronic conditions.

The Community Pharmacist is often the only healthcare contact for many of the traditionally hard to reach groups in the community e.g. men and ethnic minorities.

Many Community Pharmacies provide both generalised and individualised advice and support for members of the public. However to maximise the effectiveness of interventions members of the public need to be seen on a regular basis within the context of a structured program to address their individual needs. Such programs need milestones and outcomes agreed with the individual patient and LHBs.

The opportunity exists for LHBs to target support to community pharmacies in areas where health inequalities are greatest.

LHB local strategic plans on health and wellbeing need to recognise and optimise the contribution that can be made by and through the Community Pharmacy. The use of Community Pharmacy premises as a base for services delivered by other professionals is an opportunity to be explored.

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