

In Wales, see: www.cpwales.org.uk/Contract-support-and-IT/Advanced-Services.aspx.

In Northern Ireland, see: www.hscbusiness.hscni.net/services/2427.htm.

In Scotland, see: www.cps.scot.nhs-services/core/medicines-care-review/.

www.therapeutics.scot.nhs.uk/wp-content/uploads/2018/09/Polypharmacy-Guidance-2018.pdf

Supporting adult carers. National Institute for Health and Care Excellence. NICE Guideline 150. January 2020.

www.nice.org.uk/guidance/ng150

Medicines Optimisation: Helping patients to make the most of medicines. Royal Pharmaceutical Society. May 2013.

www.rpharms.com/resources/pharmacy-guides/medicines-optimisation-hub

Communication

As health professionals from various disciplines and specialties may be caring for the same patient at the same time, good communication is required between health professionals in order to avoid fragmentation of care.

Medication reviews may be carried out by health professionals other than the prescriber, therefore the prescriber should be informed of the review and its outcome—particularly if difficulties with adherence were discussed and further review is required.

There is a greater risk of poor communication and unintended medication changes when patients transfer between different care providers (such as when a person is admitted to or discharged from hospital). To support high-quality care when moving from one care setting to another, relevant information about medicines should be shared with patients, their family members/carers (if appropriate), and between health and social care practitioners using robust and transparent processes. Information should be securely shared between health and social care practitioners ideally within 24 hours of patient transfer.

Good communication between health professionals and patients, and their family members/carers (if appropriate) is needed for shared decision-making and supporting adherence. Information about their condition and possible treatments should be provided in a format that meets a patient's (and carer's) individual needs and preferences. The use of patient decision aids during consultations can help support a shared decision-making approach, and ensure patients and their family members/carers (where appropriate) are able to make well-informed choices that are consistent with their values and preferences.

For further guidance around communication between health professionals and patients (and carers), NICE have produced guidelines on **Medicines optimisation**, **Medicines adherence**, and **Supporting adult carers** (see *Useful resources*).

Organisations such as the 'NHS Specialist Pharmacy Service' help support medicines optimisation across the NHS by joining health professionals together through online networks (e.g. Regional Medicines Optimisation Committees and the English Deprescribing Network). This is available at: www.sps.nhs.uk/home/networks/.

Useful resources

Medicines optimisation: the safe and effective use of medicines to enable the best possible outcomes. National Institute for Health and Care Excellence. NICE guideline 5. March 2015.

www.nice.org.uk/guidance/ng5

Multimorbidity: clinical assessment and management. National Institute for Health and Care Excellence. NICE guideline 56. September 2016.

www.nice.org.uk/guidance/ng56

Medicines adherence: involving patients in decisions about prescribed medicines and supporting adherence. National Institute for Health and Care Excellence. Clinical guideline 76. January 2009.

www.nice.org.uk/guidance/cg76

Medicines Optimisation. NHS RightCare. NHS England. www.england.nhs.uk/rightcare/useful-links/medicines-optimisation/

Polypharmacy Guidance, Realistic Prescribing. Scottish Government Polypharmacy Model of Care Group. 3rd Edition. 2018.