## Implementation of advanced pharmaceutical services in Europe

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6th PCNE Working Symposium 2018 1st February 2018

### From medication centred service towards patient centred services

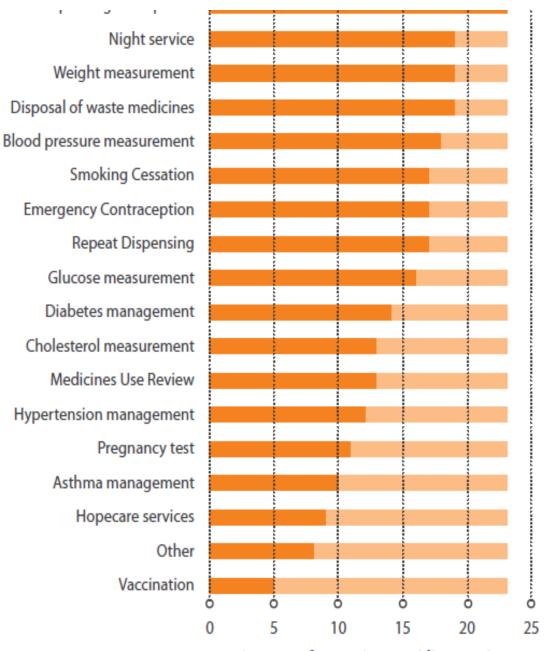




#### Classification of services

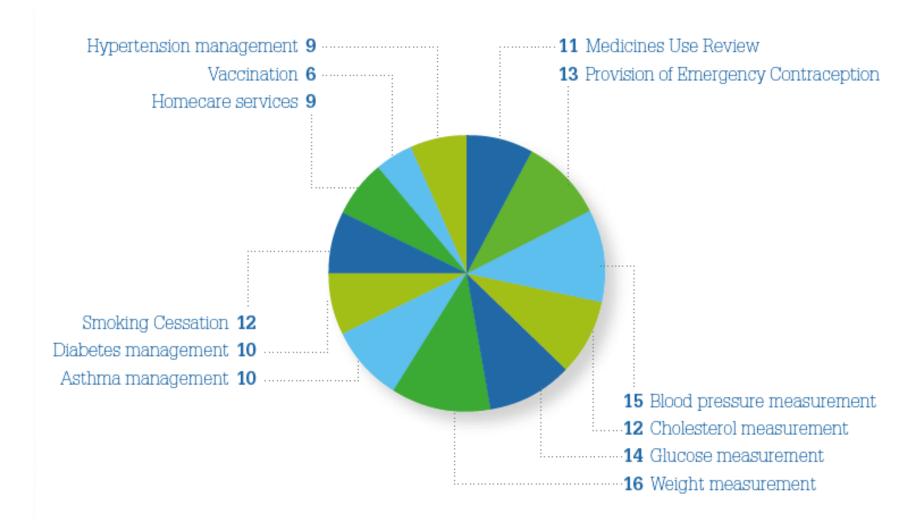
- Core Services: essential services provided by all licensed pharmacies during core pharmacy opening hours.
- Basic Services: may require separate consultation facilities
  and special training of pharmacy staff; may need to be
  available outside core pharmacy opening hours
- Advanced Services: require separate consultation facilities in the pharmacy and accredited pharmacists to provide it.

## What has been described?

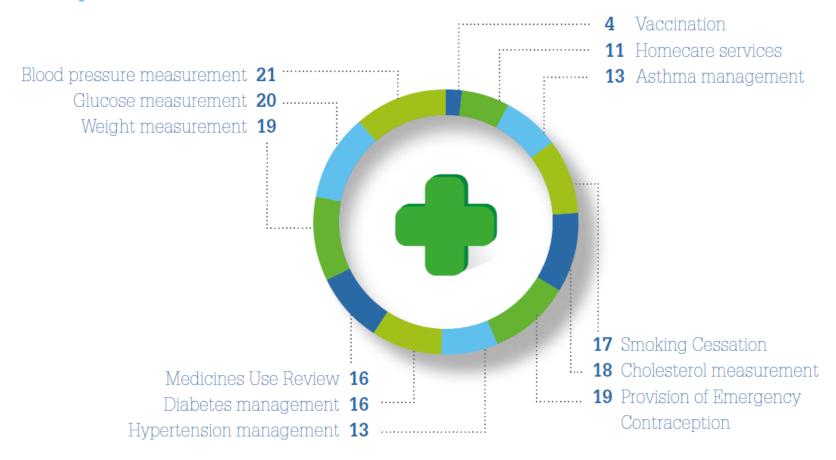


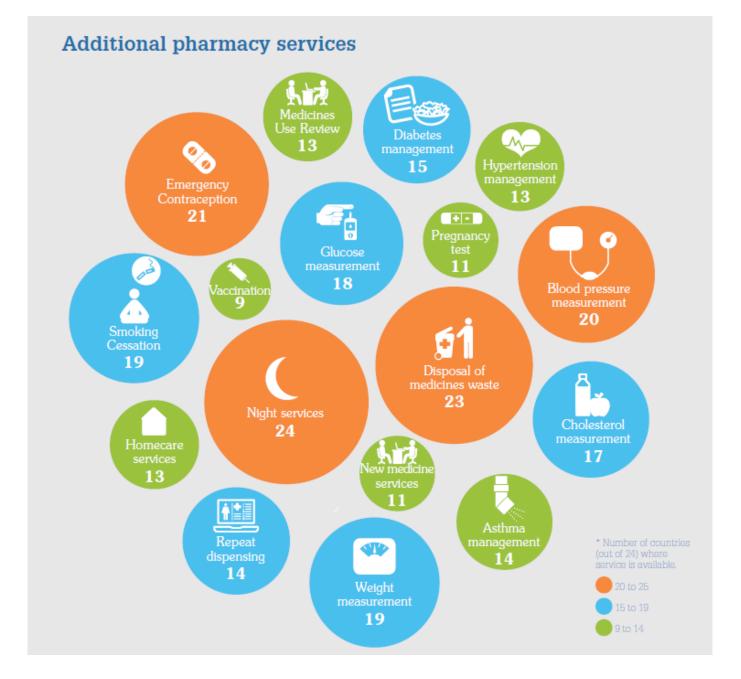
Amount of countries providing service

## Additional pharmacy services by number of countries



### Additional pharmacy services by number of countries





#### In a community pharmacy one can measure: Blood Body mass glucose Index level Number of countries Cholesterol Blood pressure

Smoking cessation: In 20 European countries pharmacists educate smokers about the benefits of giving up and provide support for them to stop smoking. **G** European countries

where it is possible to receive your seasonal influenza vaccination at a pharmacy

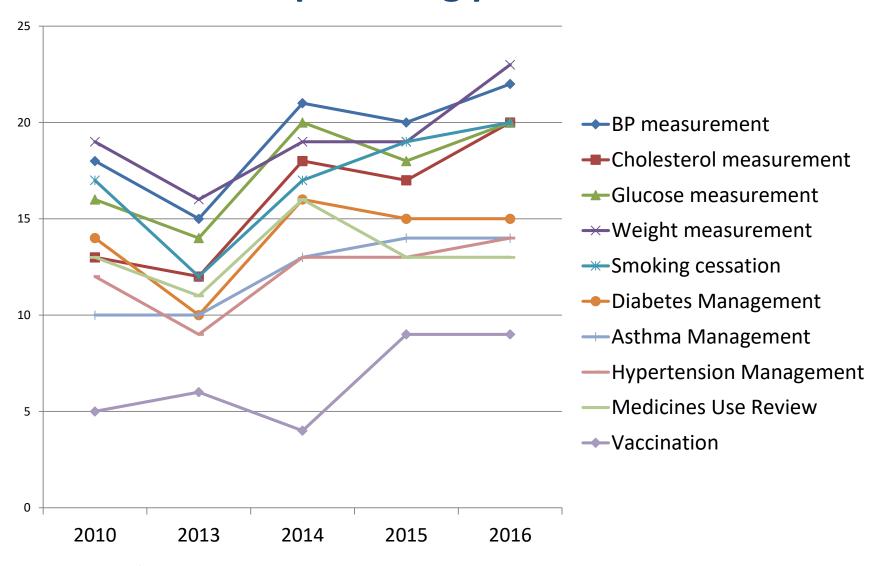
Bowel cancer screening programmes are provided through pharmacies in Italy, Spain and Switzerland. This screening model is offered by multiple providers (including community pharmacies) and has been proven to improve the screening uptake of the population at risk.

Services for patients starting a new medicine are available in a pharmacy in 11 European countries. These services provide support for people with long-term conditions with a newly prescribed medicine. It aims to improve medication adherence and patient outcomes, as patients are most likely to discontinue treatment in the first month or two.

Source: PGEU Annual Report 2016

Medication review is available in a pharmacy in 13 European countries. These services aim to improve patients' understanding of their medicines, improve adherence, reduce wastage, identify drug-related problems and propose solutions where appropriate.

## **Evolution of the number of European countries providing patient-centred services**



Source: PGEU Annual Reports 2010-2016



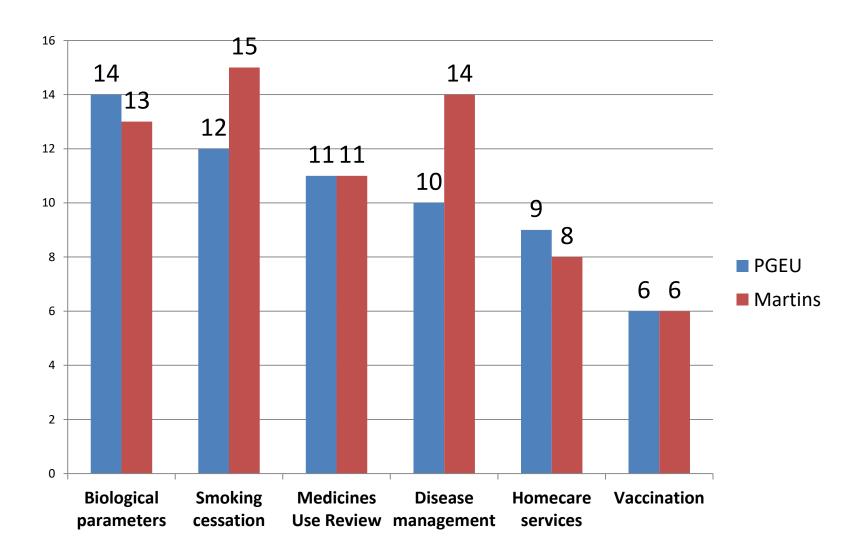
#### RESEARCH ARTICLE

#### The organizational framework of community pharmacies in Europe

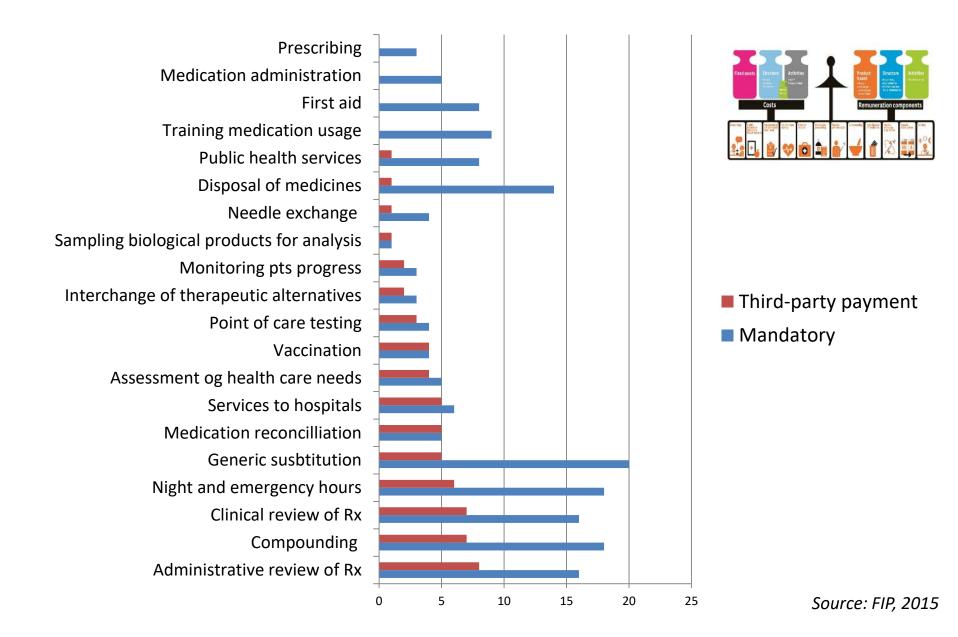
Sílvia Filipa Martins<sup>1</sup> · J. W. Foppe van Mil<sup>2</sup> · Filipa Alves da Costa<sup>1</sup>

Country	Home care support	Administration of medicines e.g. injectable drugs	Administration of vaccines	Medical appointments (e.g. nutrition) consultations	Measurement of biological and bioche mica l parameters	Phama- ceutical care programmes	Smoking cossation programme	Nee die exchange programme	Me dication to view	Drug waste namagement programme	Prescribing	Provision of written standardized Information
Belgium	Yes	No	No	No	No	Yes*	Yes*	Yes**	No	Yes	No	Yes
Bulgaria	No	No	No	Yœ*	Yes*	Yes*	Yes*	_	Yes*	_	No	Yes**
Croatia	No	No	No	Yes*	_	No	Yes*	_	No	Yes*	No	No
Denmark	Yes*	No	No	No	Yes	Yes	Yes	No	Yes*	Yes	No	No
Spain	No	No	No	Yœ*	Yes	Yes*	Yes*	Yes*	Yes*	Yes*	No	Yes*
Netherlands	Yes*	No	No	Yœ*	Yes	Yes*	Yes*	Yes	Yes*	Yes	No	Yes
Hungary	No	No	No	Yes*	Yes	Yes*	Yes*	No	Yes*	Yes <sup>A4</sup>	No	No
England	Yes*	Yes	Yes*	Yœ*	Yes	Yes*	Yes*	Yes	-	Yes	Yes	Yes
Ireland	No	_	Yes*	_	Yes	No	_	Yes*	No	Yes	Yes	No
N. Ireland	No	No	Yes*	No	No	Yes*	Yes*	Yes*	Yes*	Yes*	Yes*	No
lecland	No	No	Yes <sup>a</sup>	Yes	Yes	No	Yes	No	No	Yes	No	No
Italy	Yes*	No	Yes*	Yes*	Yes	Yes*	Yes*	Yes*	Yes*	Yes*	No	Yes*
Macedonia	No	Yes	No	No	Yes*	No	No	No	No	No	No	No
Malta	No	No	No	Yes	Yes*	No	No	Yes*	No	No	No	No
Norway	No	No	No	Yes*	No	Yes*	Yes*	Yes	Yes*	Yes	No	Yes
Postugal	Yes*	Yest	Yes <sup>ad</sup>	Yœ"	Yes*	Yes*	Yes*	Yes	Yes*	Yes <sup>A,6</sup>	No	Yes
Serbia	No	No	No	No	No	Yes*	No	No	Yes*	No	No	Yes
Swoden	Yes	No	No	No	No	Yes	Yes <sup>ab</sup>	No	Yes <sup>a,b</sup>	Yes <sup>ab</sup>	No	Yes
Switzerland	Yes*	Yes	No	Yes <sup>4</sup>	Yes*	Yes*	Yes	Yes	No	Yes <sup>4</sup>	No	Yes <sup>4</sup>

#### Comparing two data sources



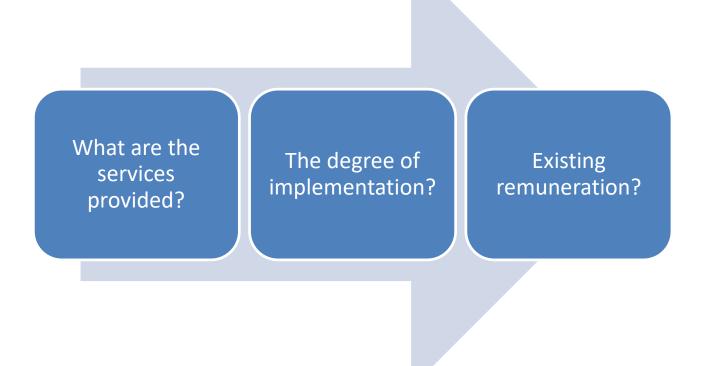
#### **Provision and remuneration**





## PRACTISE - PhaRmAcist-led CogniTive Services in Europe





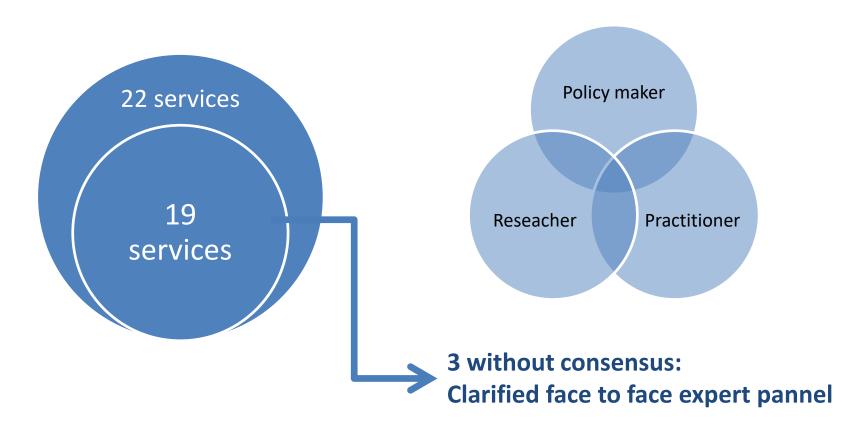
Tamara L. Isenegger , Maria I. Branco Soares , Urska Makovec , Netj HOrvat , Mitja Kos, Filipa Alves da Costa , Kurt E. Hersberger



## PRACTISE - PhaRmAcist-led CogniTive Services in Europe



**Preliminary Results: The example of Portugal** 

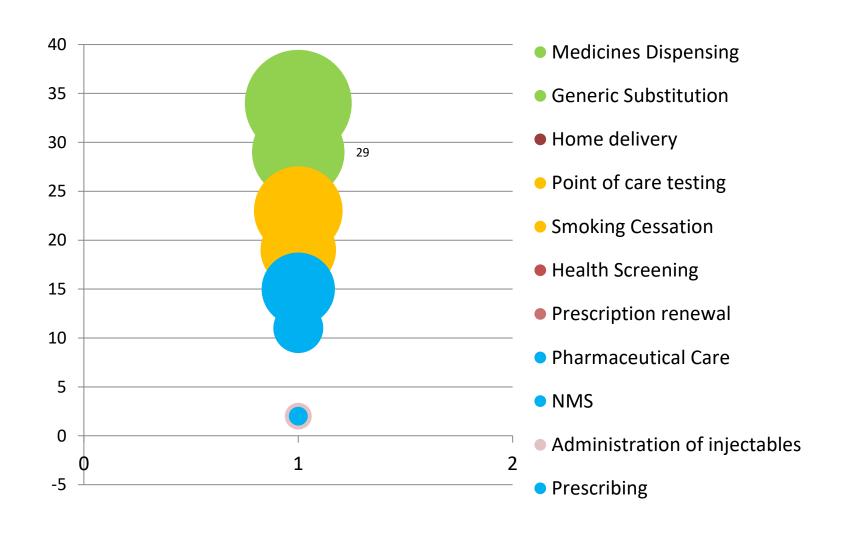


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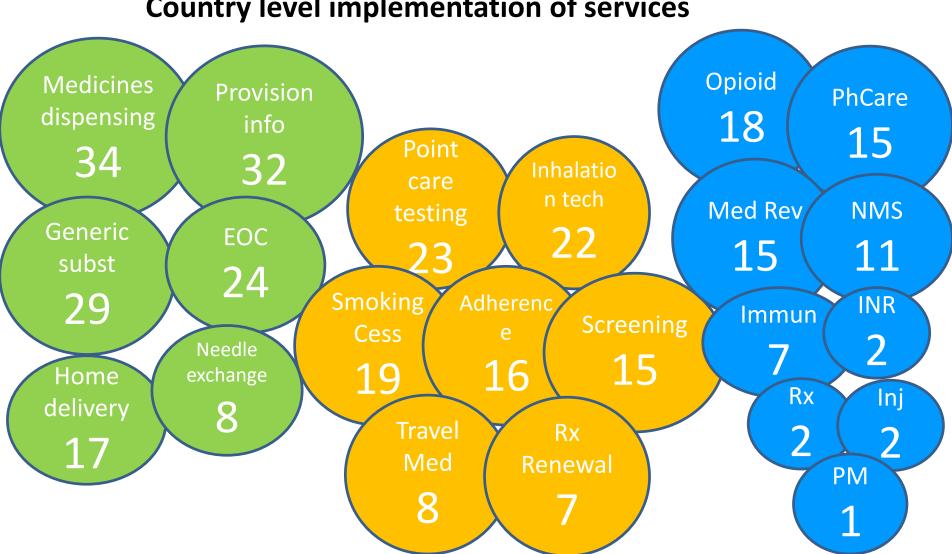
#### **Country level implementation of services**



### **PRACTISE - PhaRmAcist-led CogniTive Services in Europe**



**Country level implementation of services** 

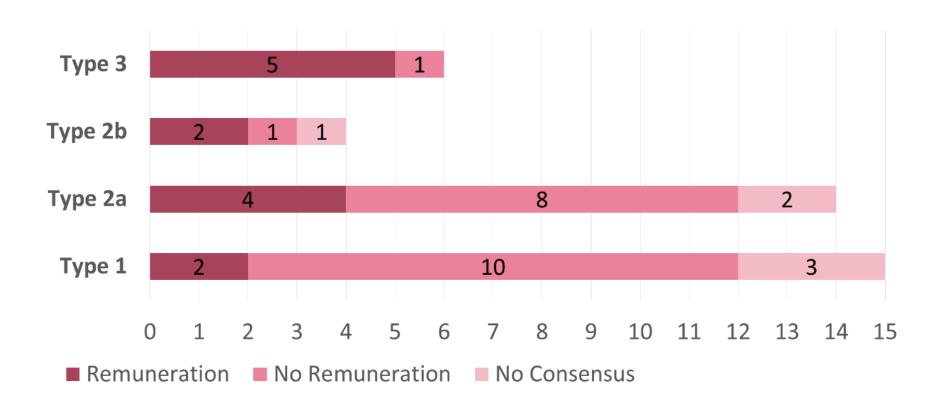


#### Preliminary data on medication review

Country/Region	Type 1	Type 2a	Type 2b	Type 3
Austria	р			
Belgium		р		
Croatia				
Denmark	р	р		
England	x°			
Finland				
France		?	?	?
Germany	р	Р		р
Hungary	р	Р		
Northern Ireland				
Norway				
Portugal				
Slovakia	р			
Slovenia				
Sweden	x°			
Switzerland				
The Netherlands				
Ukraine		Р		
Total	15	13	4	6

Data fully available at Imfeld-Isenegger Tamara L.¹, Costa Filipa A.², Branco Soares Inês², Kos Mitja, Horvat Nejc, Makovec Urska N., Hersberger Kurt E.¹. PRACTISE - PhaRmacist-led CogniTive Services in Europe – Part B: Mapping of Medication Review Services across Europe

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#### European Implementation of Services



Diabetes disease Management



**Vaccination** 



HIV management

## European Implementation of Medication Review Services

