



How can automation  
address Homecare Medicines  
Service concerns?



Centred Solutions™

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## Introduction

**It is widely agreed that homecare medicines services have the “potential to transform the lives of patients”<sup>1</sup> as well as providing a significant opportunity to alleviate pressure on hospitals.**

When it works well it has been described as “fantastic for patients”<sup>2</sup>. However a report published by the House of Lords Public Services Committee late last year raised a number of concerns with the current homecare medicines provision across the country. NHS England is analysing the report findings alongside their own analysis and an update is expected in the summer.

A similar in-depth review into homecare medicines services, commissioned by the Scottish Government, has already been taking place in Scotland and was expected to conclude at the end of last year.

Despite the concerns raised, the House of Lords report reaffirms the commitment that a homecare medicines service should be a key part of future planning and resourcing for the NHS. However it’s absolutely clear that changes undoubtedly lie ahead for the sector which is about to come under a whole new level of scrutiny.

This white paper explores how pharmacy automation supports providers to address concerns raised in the initial report. This will allow providers to get ahead of any future reviews and potential changes by improving efficiency and transparency within their organisation.

1,2: <https://committees.parliament.uk/publications/42033/documents/209781/default/>

## A growth in demand

To some extent you could argue homecare medicine service providers are a victim of their own success. The service is now provided to 500,000 patients with chronic conditions across the UK, with 2.85m deliveries taking place every year<sup>3</sup>.

Since 2011 the sector has grown by a staggering 150%<sup>4</sup>. This growth was even more significant during the Covid 19 pandemic with the use of homecare patients increasing by 15% in 2020 alone and a further 17% in 2021<sup>5</sup>.

This rapid level of growth has brought with it a number of challenges. Over the past decade major homecare providers have experienced periods of significant capacity constraints. Like many others in the healthcare sector, this worsened in the pandemic as a result of Covid 19 related absences and challenges with the recruitment and retention of staff coupled with medicine shortages and a growing service demand.

The problems are exacerbated further for homecare providers due to a lack of digital interoperability within NHS Trusts, driven by slow implementation of electronic prescribing systems. The complex process involved with manufacturer-funded homecare and a lack of standard contractual arrangements also impact efficiencies within the sector.

The report, Homecare Medicines Service: An Opportunity Lost (House of Lords, Public Services Committee, November 2023) acknowledges these challenges and says as a result of this, and other concerns, the significant potential of a homecare medicines service is not being met. NHS England is working on a "desktop exercise" to look at homecare medicines services and it will bring together data from that exercise and the House of Lords report recommendations to undertake an analysis of the findings. Further steps and a response to the recommendations are expected in the summer.



The report by the House of Lords states that following the findings of the NHS England interim review, and by no later than April 2024 the Government should establish and fund an independent review into the homecare system. It says the review should consider:

1. The potential role of homecare as a pillar of the future health service;
2. The extent and impact of existing problems on patients and the NHS;
3. A radical new approach to transparency and information sharing;
4. Support and resources required for effective procurement;
5. Steps to develop a tougher and more proactive regulatory approach;
6. Steps to encourage a competitive and fair market for providers;
7. Digital infrastructure to support effective delivery; and
8. Robust governance and accountability arrangements, including ministerial oversight.

## Be the change

While it has called for an independent review into the sector, the House of Lords Public Services Committee has said it must not delay the “enactment of those measures which we, and others have identified”. Equally there are some common themes emerging which indicate what may change for homecare medicines services in the future.

Pharmacy technology and automation already exists to help support with these common themes, which we will outline in detail in this paper. Adopting them now would mean providers are fully prepared for the changes that lie ahead. It's brilliant to see some pioneers within the homecare medicines sector already starting to emerge and embracing this technology.

Early adopters are implementing this technology despite a number of challenges which don't exist in the community pharmacy sector. This includes a lack of an electronic prescription service between NHS Trusts and the provider and the fact that the majority of items they need to dispense are cold chain medicines.

The technology they use automates the dispensing process from picking and packing to labelling and checking and also provides a robust and clear audit trail for compliance purposes.

There are a number of benefits associated with using this type of technology which can help address many of the concerns which have been raised around a homecare medicines service.



## An invaluable safety net

Patient safety incidents and delays in receiving medication are areas of concern raised in both England and Scotland. Patient groups claim that many patients using a homecare medicines service experienced problems. For example, a survey by Crohn's and Colitis UK with IBD nurses and patients revealed incidents of providers sending incorrect medication, out of date drugs or incorrect dosage to patients.<sup>10</sup>

Part of the problem is there is no clear data on how often patient safety incidents happen. The National Clinical Homecare Association said in 2020 there were 58,460 patient safety incidents representing 13.7% of active patients. This fell to 6.8% in 2022. However these incidents include a broad range of events such as administration of incorrect medication, safeguarding issues and aggressive behaviour towards clinical staff. Having highlighted this, the House of Lords report has said NHS England must identify how many patients become unwell or have been harmed as a result of homecare medicines service and it calls for this information to be published and shared.

Technology acts as an invaluable safety net for all pharmacy settings, including homecare. The technology we have referenced earlier in this paper, and already being used by some providers and a number of community pharmacies, has checks and balances throughout the entire dispensing process to ensure right quantity, right drug, right patient.

*“There have been reports of providers delivering the wrong, faulty or outdated medicines or devices.”<sup>9</sup>*

The technology reduces the risk of errors, improves accuracy and gives greater visibility. Manual tasks can introduce potential for errors and inefficiency and this automation narrows those gaps by reducing the need for human interaction resulting in a more continuous, safer and traceable automated workflow.



## An invaluable safety net

*“Some patients are experiencing delays, receiving the wrong medicine or not being taught how to administer their medicine. Where this happens it is no inconvenience, it can have a serious impact on patient’s health, sometimes requiring hospital care.”<sup>8</sup>*

It provides drug data integrity and validation by comparing a multitude of inventory management codes against the drug item code. Barcode and RFID technology not only ensures the right medication is prepared for the right patient, it also provides a warning which halts the dispensing process if the drug type and dose don't match what has been prescribed for a patient.

Many hospital homecare medications are cold chain that require a very limited time exposure outside of the refrigerated environment. The speed of the automation ensures they are picked, labelled and sorted quickly to reduce the time medications are exposed to higher temperatures.

*“Service issues have led to some patients missing doses, led to delays in treatment initiation and caused considerable stress and anxiety for patients.”<sup>7</sup>*

Delivering prescriptions to patients on time can often be impacted by stock issues, workforce challenges or a high workload. Technology ensures faster and safer processes so you can process more prescriptions accurately and at speed. Robotic dispensing technology can label up to 1500 packs per hour with a single dispensing line and 3000 with a double dispensing line.

*“No one – not the Government, NHS England or patient groups or regulators know how often nor how seriously patients suffer harm from service failures in homecare. This indicates significant failure of oversight and hinders the ability of NHSE to ensure patient safety.”<sup>6</sup>*

Finally prescriptions only need clinical intervention at the start of the process, they can then be processed through the production line without further intervention as the technology is checking at every stage.

6: <https://committees.parliament.uk/publications/42033/documents/209781/default/>

7: <https://committees.parliament.uk/writtenevidence/122243/pdf/>

8: <https://committees.parliament.uk/publications/42033/documents/209781/default/>

9: <https://committees.parliament.uk/publications/42033/documents/209781/default/>

10: [https://crohnsandcolitis.org.uk/media/jzvdmxv/ccuk\\_-pcs-homecare-inquiry-written-submission.pdf](https://crohnsandcolitis.org.uk/media/jzvdmxv/ccuk_-pcs-homecare-inquiry-written-submission.pdf)

## Clear and visible audit trail and robust data

Another area highlighted was a lack of visibility around performance of homecare medicines service providers and the lack of a lead regulator.

The report by the House of Lords Public Services Committee says while performance data for the 27 KPIs developed by the National Homecare Medicines Committee is collected and reported back to the NHS by providers, it is not published. This, it says, impacts public scrutiny and makes it difficult to get a clear picture on the reliability of services delivered. NHS England is currently reviewing the data points collected and this could include a greater focus on patient experience in the future. The Department of Health and Social Care has said it supports the House of Lords' committee's recommendation that the KPIs should be published in a standardised form to allow "meaningful public scrutiny".<sup>11</sup>

There are calls for a lead regulator to be identified for homecare medicines service with the skillset necessary to take action if a provider is under performing. The Department of Health and Social Care has accepted the regulatory position regarding homecare medicines service is complex. They said given the regulatory oversight of these services was not wholly delivered by one regulator, more work was needed before a commitment could be made regarding any changes to the regulatory regime.<sup>12</sup>

Based on the above, governance and compliance is likely to come under further scrutiny for homecare service providers as we move forward. The good news is that there is automation and technology available which will help providers get ahead of the changes. This technology provides a full end to end audit trail right down to patient and pack level from receipt to storage through to dispensing.



With multiple verification checks, it post alerts for expired medications, provides lot number tracking, manages inventory effectively as well as recording critical drug information such as EAN and GTIN codes. All this information can be shared back to the NHS to meet all their compliance requirements. Should it be required in the future it also supports compliance with EU FMD regulations requiring the capture of pack serialisation.

Easy access to data within the automated system can also improve efficiency of inventory management, ensuring providers always have the items in stock they need to fulfil the orders received. Software ensures the patient's prescription is visible at every step of the process. There is no room in the process for ambiguity and robust standard operating procedures ensure this.

11, 12: <https://pharmaceutical-journal.com/article/news/government-rejects-house-of-lords-call-to-give-chief-pharmacists-more-powers-over-homecare-medicines-services>



## Ready for interoperability

**It is very clear that a lack of interoperability and a reliance on paper based systems create a real challenge to streamlined and efficient homecare medicines service. Prescriptions for homecare providers are still generally sent by post.**

The report by the House of Lords committee says there is scepticism at how urgently this issue is being addressed and it called for more urgency in developing an electronic prescription service for homecare providers and NHS Trusts. This would significantly streamline processes and improve visibility. Equally the reports call for a single homecare portal to be created and provided by NHS England.

As we have mentioned some providers are already using technology to automate their dispensing process despite the lack of an electronic prescription service. This is because the software is agnostic and can interface with a range of bespoke platforms be they manual or automated. A lack of digital platforms should not be a barrier to using the technology. In addition the solution is able to interface directly with warehouse management systems or robotic dispensing systems for improved stock management.

Because the software is agnostic it will support integration with any electronic prescription service once that becomes available. It makes sense for providers to automate the elements they can now while waiting for the rest of the NHS to catch up. This will ensure they are putting themselves in the driving seat of change and are well-prepared for all the anticipated changes that lie ahead.



This white paper was produced by  
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