## General Pharmaceutical Council



Katy Thorne KC Assistant Coroner for the area of Berkshire

By email via:

24 July 2024

Dear Katy Thorne KC

## Regulation 28 Report to Prevent Future Deaths: Sewa Kaur Chaddha

Thank you for sending us your Regulation 28 report regarding the death of Sewa Kaur Chaddha. We are sorry to hear about this sad death and we would like to pass on our sincere condolences to Mrs Chaddha's family.

Thank you for sharing the circumstances of what happened and how Mrs Chaddha sadly used one of Mr Chaddha's dosette boxes, rather than her own, for several days. You have highlighted that the inquest heard evidence that there was no guidance or policy in place for pharmacists to follow when issuing medication to patients with cognitive impairment, or if there was, it was not well disseminated. You also mention evidence at the inquest that dosette boxes of different colours or labels with different colours were not routinely given to elderly or cognitively impaired patients living at the same address.

By way of background, the GPhC is the independent regulator for pharmacists, pharmacy technicians and registered pharmacies. Our role is to protect, promote and maintain the health, safety and wellbeing of members of the public by upholding standards and public trust in pharmacy. As part of this, we set regulatory standards for pharmacists, pharmacy technicians and registered pharmacies, which describe how safe and effective care is delivered through 'person-centred' professionalism and support the right environments for safe and effective care.

We also produce supporting guidance to help pharmacy owners and pharmacy professionals to put the standards into practice. This includes our equality guidance, which is designed to help pharmacy owners improve the experience and healthcare outcomes of patients and members of the public using their pharmacy's services. The guidance sets out examples taken from our GPhC Knowledge Hub and our pharmacy inspections work about how pharmacy teams are supporting patients with different needs, including cognitive and visual impairment.

Linked to our equality, diversity and inclusion strategy, we have also published a series of equality insight articles. These are designed to support pharmacy teams to deliver person-centred and inclusive

care that takes account of the diverse needs and cultural differences in the communities they serve. To share an example, we recently published information to the pharmacy profession about providing services to patients and their carers living with dementia, as an umbrella term for a range of over 200 subtypes of progressive conditions that affect the brain and a person's ability to remember, think and speak. Through this communication, we highlighted the following points about supporting patients who may need assistance with their medicines:

- The optimal method of supplying medicines is one that meets the person's health and care needs and provides person-centred care with the ultimate aim of maintaining the person's independence wherever possible. Pharmacy professionals should make reasonable adjustments to help people with conditions such as dementia take their medicines.
- There are a variety of ways to promote people's independence including reminder charts, winged bottle caps, large print labels, alarms (such as notifications on mobile phones), tablet splitters and support from carers.
- Multi-compartment compliance aids (MCAs) such as dosette boxes are another option, but they may not always simplify how people with cognitive impairment take their medicines. The most appropriate option should be selected in partnership with the patient, their carer if they have one, and other healthcare providers involved in the care of the patient.
- The importance of pharmacy teams connecting with charities and patient groups for further information and support and signposting patients and carers to useful advice.

We have also published good practice examples of what pharmacies are doing to support patients with cognitive impairment and progressive conditions such as developing toolkits for staff, collaborating with other local service providers to support patients showing early signs of progressive conditions, and developing services to meet the needs of patients.

Finally, thank you for raising this matter with us and we will consider how we can continue to raise awareness of these important issues through our future communications and engagement with the wider pharmacy sector. We will also raise this issue with our colleagues at the professional and representative bodies for pharmacy as they also play an important role in providing advice and support to the pharmacy professions.

Please don't hesitate to contact us if you need anything further.

Yours sincerely,



Chief Executive & Registrar