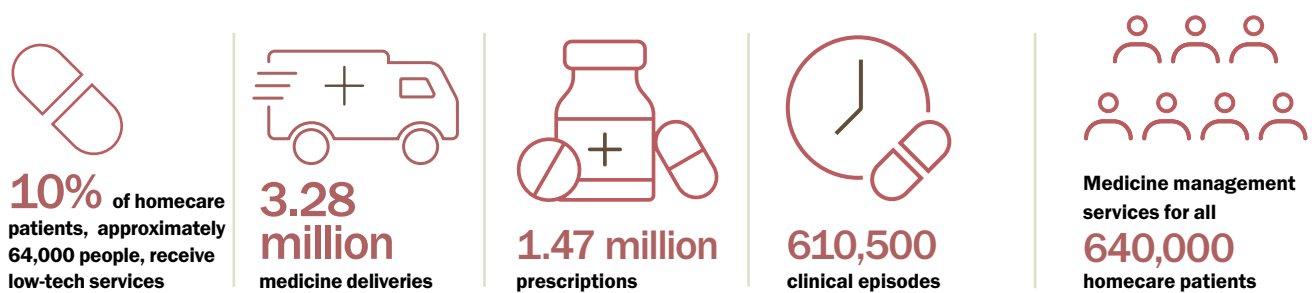


Beyond dispense and delivery: medicines management through clinical homecare

Clinical homecare is currently allowing 640,000 people with long-term or chronic health conditions in the UK to receive complex hospital treatment at home. But despite the NHS commissioning homecare for almost 30 years, the complexity of the service is not well understood. This document has been prepared by the National Clinical Homecare Association to help stakeholders better understand the scope of these services.

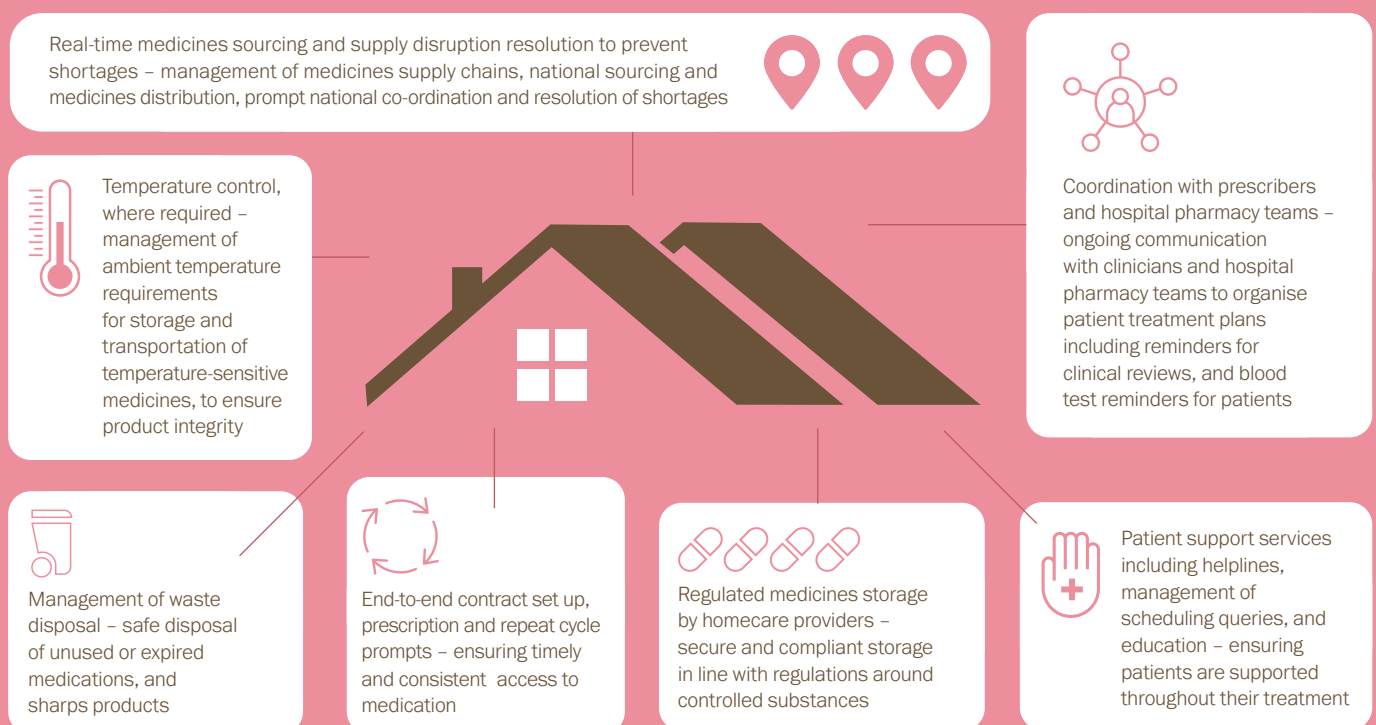
Medicines management is a core component of all clinical homecare, from low- to high-tech. Across the different levels of pathway complexity, hospitals and patients benefit from a comprehensive medicines management service supporting clinical oversight and review of patient outcomes, safe supply of medicines through efficient prescription prompts, patient education, and logistical coordination. Low-tech homecare refers to the management of therapies for patients who do not require administration by a healthcare professional but still needs regulated prescribing, controlled supply, and robust treatment monitoring.



The medicine management service provided by homecare companies means effective and continuous delivery of prescribed medicines can be given in a home setting,

Core components of medicines management through homecare

Medicines management is key to all homecare - including low-tech homecare. All homecare services include:



While elements of medicines management - such as prescription prompts, clinical support, dispensing, supply, and patient interaction - can be delivered in settings like hospitals or community pharmacies, only clinical homecare offers a fully integrated, end-to-end service that encompasses all elements of regulated supply, clinical oversight, logistical coordination, and personalised patient support into one seamless model.

The recent review of medicines homecare services in Scotland suggested the potential for community pharmacies to play a role in the homecare model. However, the report also emphasised barriers that must be addressed for this to be a viable and sustainable option, including matters of cost – such as considerations around VAT savings which are currently delivered by clinical homecare – staffing, and resources, all of which would require substantial investment and operational change.

Low-tech clinical homecare services across the UK are already in place and operating at scale, offering a proven model for medicines management outside of the hospital setting. These services are flexible and well-positioned to adapt to growing demand - demonstrated previously for example through rapid shift to biosimilars rollout in line with government medicines optimisation objectives.

The continuous investment in services by homecare providers also comes in the form of patient-centric technology solutions, such as patients companion apps and portals which improve the patient experience and enhance oversight of treatment journeys. One such example is through Sciensus, which started sending SMS reminders to patients, leading to a 25% increase in blood test completions. Beyond improved patient satisfaction, these technological investments have shown direct links to improved patient medicines possession adherence and persistence with therapies, leading to improved health outcomes.

National oversight for proactive medicines shortage management

National oversight and management of medicines supplies by homecare providers enables optimised controlled distribution, ensuring all patients receive the correct amount of their treatment at the right time. This reduces the risk of shortages and delays, whilst minimising waste by preventing overstocking or unused medicines.

Effective management in this way is critical given that wasted or unused medicines cost the NHS an estimated £300 million every year, an issue which is growing. It also allows timely response to medicines supply disruptions and subsequent shortage prevention strategies, safeguarding patients from the health consequences that can occur if patients are unable to get their treatment on time.

For example, The Royal Pharmaceutical Society reports that shortages of Pancreatic Enzyme Replacement Therapy (PERT) since 2023 have severely affected patients with cystic fibrosis and pancreatic cancer, causing digestive issues, weight loss, and heightened stress.

There is the need for responsive, coordinated medicines supply management to minimise patient harm – something homecare providers are already doing. For example, Sciensus have proactively managed 904 medicines shortages over the last 12 months, and are often managing more than 20 shortages at any one time allowing the continuity of treatment even during supply constraints.

Clinical governance and NICE compliance

One of the core strengths of low-tech homecare services is the robust clinical governance that ensures adherence to the highest standards of care, including compliance with NICE guidelines. Homecare providers support hospital pharmacy teams in monitoring prescribing of all therapies in line with NICE guidelines.

This is essential for the large number of high-cost drugs that are provided to patients via low-tech homecare such as biologics, where pharmacists must ensure adherence to NICE guidelines at all times. Where regular clinical review, disease scoring and other clinical tests are necessary for NICE compliance, clinical homecare providers can support with reminders for clinical reviews via their prescription prompt services.

The partnership between NHS Trust and homecare provider ensures clinical oversight, patient safety and cost efficiency. If prescribing and/or supply of medication were to move to community or primary care, ensuring NICE compliance would become harder to monitor and report, providing an additional administrative burden for the NHS staffing community settings.

Improved patient outcomes through adherence and persistence

Patient adherence and persistence with long-term treatments remains a challenge in chronic disease management yet is an essential factor for achieving optimal health outcomes.

Homecare services support ongoing engagement in patient treatment plans through structured scheduling, medication reminders, blood test reminders, and clinical follow-up, as well as the convenience and accessibility of organising medication deliveries around the rest of their life.

By supporting adherence through improved medicines possession and keeping patients on first-line therapies for longer, homecare services both improve patient clinical outcomes by delaying disease progression and deliver greater cost efficiency for the medications given. Patients maintain more treatment options for longer and have a better clinical response.

Sciensus' data from 70 million interactions shows that investing in digital support tools (like adherence apps and patient portals) improves treatment persistence. One digital programme with University College London (UCL) increased adherence by 10% and reduced medication discontinuation by 25%.

Benefits and value of homecare

Martin, has been receiving low-tech clinical homecare for the last 10 years to help manage his ankylosing spondylitis.



I need to have injections every two weeks to help me manage my condition. Without these deliveries, this would mean travelling to a clinic every fortnight. It means that it is just part of my usual routine, and I don't have to go to the trouble of taking time off work to travel to a clinic every two weeks – it allows me to get on with my life and largely not think about my condition or medication.

Low-tech clinical homecare services support equitable access by ensuring patients across the country - regardless of location - can reliably receive their medications at a convenient location. Through national coordination and infrastructure, homecare providers reduce geographical disparities in access to treatment, particularly for patients living in rural or underserved areas. This approach ensures high-quality medicines management is not limited by postcode, contributing to a more consistent and inclusive healthcare experience.

A patient-preferred service

49% of people not receiving clinical homecare said they would be more likely to go through with medical treatment if they could receive it at home instead of attending hospital for it.



Patient reported benefits of homecare:

	Low-tech homecare	Mid-tech homecare	High-tech homecare	Hospital, GP or pharmacy
A positive impact on health	81%	79%	77%	36%
A positive impact on recovery	76%	85%	68%	41%
A positive impact on relationships	66%	56%	64%	27%
A positive impact on ability to work	59%	55%	66%	26%
A positive impact on ability to get on with life	73%	76%	76%	39%

62% of people receiving any type of clinical homecare reported that it has allowed them to stay in work or education – in line with current government objectives – compared to 26% receiving the same care in a hospital or community setting. This benefit was seen across all homecare pathways, with 64% of people receiving low-tech clinical homecare saying that it helps them stay in work or education, 55% for those receiving mid-tech and 62% for those receiving high tech.

Low-tech clinical homecare, and the extensive medicines management within it, is an essential part of the UK’s medicines infrastructure. It enables cost-effective, well-governed and patient-centric care - supporting NHS objectives on safety, adherence, and resource optimisation.

Yousaf Ahmad, ICS Chief Pharmacist and Director of Medicines Optimisation at NHS Frimley ICB, said:



Homecare delivers a unique blend of clinical excellence, convenience, and personalised support that adds tremendous value to the complement of pharmacy and medicines services within the NHS. There is a clear case that Homecare and its value extends far beyond cost savings — it enables patients to live fuller, more independent lives, while relieving pressure on hospitals and improving health system efficiency.

Recognising and integrating this distinct model into NHS strategy would be a transformative step forward. As an ICB Chief Pharmacist, Homecare integrates clinical care, medicines optimisation, and patient-centred support into one seamless pathway. It has the ability to improve outcomes, reduce system pressures, and promote equity across all sectors of care with the potential impact in the future being seen in community.