

Supporting patients through Reasonable Adjustments

A step-by-step guide for pharmacy teams

Background information

Community pharmacies have a legal duty under the Equality Act 2010 to support patients who may face barriers in managing their medicines due to disability – This may be a visible or invisible disability.

Below we have provided practical guidance on how to:

- Assess patient needs
- Offer a choice of reasonable adjustments
- Determine the suitability of supplying a multi-compartment compliance aid (MDS)
- Agree when the patient's needs should be reviewed

You can also read further [information and guidance from CPE](#)

Key actions for pharmacy teams

Pharmacy teams must assess patients with identified needs and make appropriate reasonable adjustments—beyond just offering MDS, to support them in taking their medicines, in line with the Equality Act 2010.

Pharmacy Teams should review the [Assisted Medicines Taking' Toolkit](#) and adhere to the following steps for patients where a reasonable adjustment or MDS (multi-compartment compliance aid) is requested — whether by a GP, hospital, social care team, carer, or the patient themselves.

1

Identify and acknowledge the request:

- Acknowledge all requests, regardless of who raises them
Please note: Patients receiving Level 2 or 3 care (who receive medicines support via carers) do not usually need reasonable adjustments to be made. Carers making these requests should be directed to the [Assisted Medicines Taking' Toolkit](#)

2

Assess the patient's needs:

- Speak directly with the patient (or representative if appropriate)
- Understand the nature of their difficulties (e.g., physical disability, memory problems)
- Use a standard assessment template – an example can be found in the 'Assisted Medicines Taking' Toolkit
- Clearly record:
 - Reason for the request
 - Assessment outcome
 - Adjustment(s) provided
 - Any referrals made
 - Review date
- Ensure that existing patients using MDS are reviewed periodically to assess continued need. Patients' circumstances and abilities may change over time, and ongoing use of MDS should not be assumed appropriate without reassessment.

3

Consider suitable reasonable adjustments:

- Before offering an MDS, consider other options, for example:
 - Large-print labels
 - Reminder charts
 - Easy-open packaging
 - Simplified dosage regimens
 - Tablet cutter (medication specific)
- MDS should only be offered **if other options are unsuitable**

4

Involve other professionals if necessary:

- If adjustments alone are insufficient, liaise with GPs, hospital teams, and/or social services for a coordinated approach. Record any meetings or discussion held

5

Understand when 7-day prescriptions are appropriate:

- Review the [GMMM 7-day prescription guidance](#) and note the following:
 - A 7-day prescription should only be issued when:
 - the patient has a clinically assessed need related to medicines compliance **and**
 - other reasonable adjustments have been explored and are unsuitable such as providing a prompt or reminder chart
 - a patient's need has been assessed, and it is essential to safely manage their medicines
 - 7-day prescriptions **should not** be issued for operational or commercial reasons
 - If a GP issues a 28-day prescription, then all 28 days of medication should be supplied at once
 - Supplying in weekly instalments without clinical justification can cause confusion, delays, is not in line with the prescriber's intent, even if MDS has been decided upon as a reasonable adjustment
 - Dispensing FP10 prescriptions in instalments is not allowed under current legislation
 - Where a 7-day prescription is issued the patient should be issued their medication weekly

6

Review regularly:

- Set a review date (e.g., every 6–12 month) to assess ongoing suitability for MDS
- Review sooner if the patient's situation changes (e.g., hospital discharge, new Level 2 care package introduced, cognitive decline)

7

Respond to changes of circumstances promptly:

- If a patient moves to Level 2 or Level 3 care (receiving medicine support from carers), reassess the need for pharmacy-supplied adjustments like MDS

Frequently Asked Questions

- ?** **What should I do if a GP, hospital, or social care team insists the patient must have an MDS?**
You are responsible for completing your own assessment under the Equality Act. An MDS should only be supplied if, after your own assessment, it is the appropriate adjustment for the patient's individual needs.
- ?** **Can we charge the patient for providing an MDS?**
In most cases, if an MDS is needed as a reasonable adjustment under the Equality Act, it must be provided free of charge. However, if an MDS is requested but not legally required, pharmacies may charge. However, this should be made clear upfront.
- ?** **What happens if a patient now has Level 2 care and carers can prompt medicines?**
Reassess the need for an MDS. If carers are supporting medicines, an MDS may no longer be necessary or appropriate.
- ?** **What if a patient refuses all alternatives and insists on an MDS?**
You should document the discussion carefully. If the patient's preference for MDS is not based on a disability-related need, you are not legally obliged to provide one under reasonable adjustment duties.
- ?** **Does a 7-day prescription automatically mean a patient should have an MDS?**
No. A 7-day prescription simply limits the supply period. Whether an MDS is needed must still be determined through an individual assessment of reasonable adjustments for the patient.
- ?** **Who is responsible for deciding how frequently medicines should be dispensed?**
The prescriber decides the dispensing interval based on clinical need. If you have concerns regarding a patient receiving more than 7-days supply of their medication this should be discussed with the prescriber and other HCPs involved in their care plan.
- ?** **Can GPs refuse to issue 7-day prescriptions when requested by pharmacies?**
GPs should consider the pharmacy's professional assessment seriously. However, they are not automatically obliged to prescribe in 7-day intervals. If there are concerns, these should be discussed with the prescriber.
- ?** **Can we charge for deliveries if an MDS is provided free of charge?**
Yes. Delivery is a separate service and is not included in the Equality Act reasonable adjustment duty. If a patient needs delivery of their medicines, including those in an MDS, a charge may apply depending on your pharmacy's delivery policy. This should be clearly communicated in advance.