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Module code: LCHS4003_BIRM

Module title: Introduction to Health and Social Care

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Assignment title: Portfolio – 2 tasks



NHS Pharmacy Services

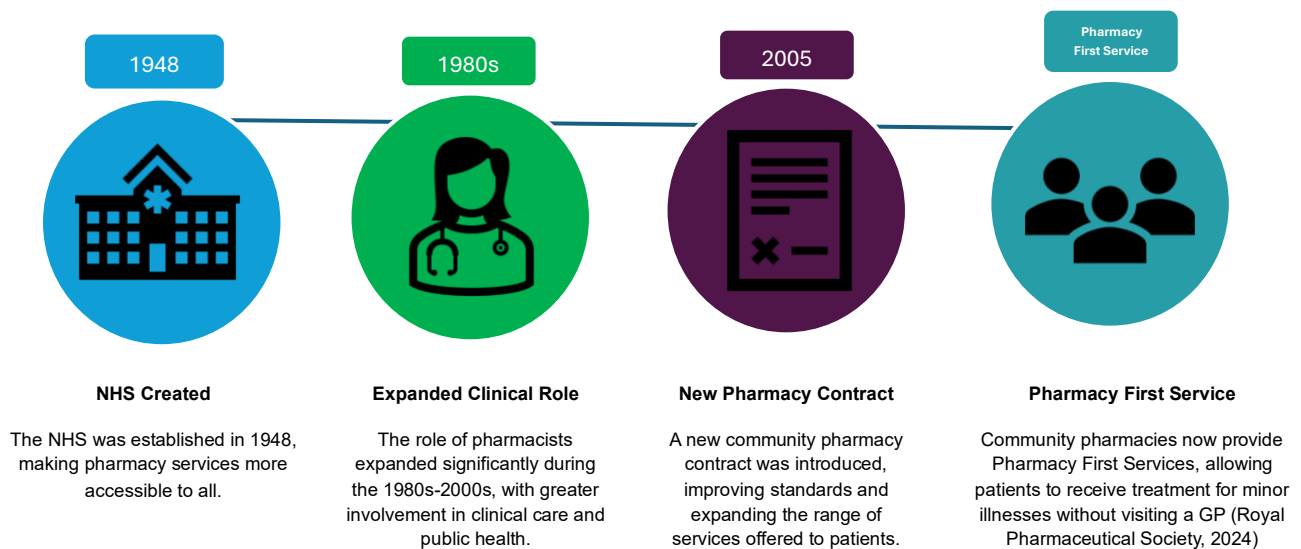
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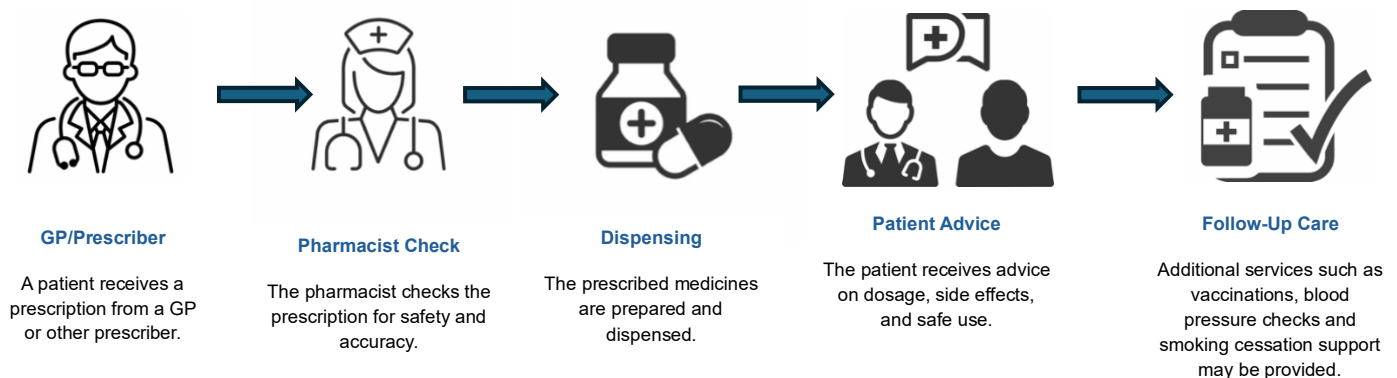
PHARMACY SERVICES: AN ESSENTIAL PART OF THE NHS

Pharmacy services are an essential part of the NHS and provide safe access to medicines, health advice, vaccinations, and support for long term conditions. Community pharmacies are often the first point of contact for patients seeking healthcare advice (NHS England, 2025)

A BRIEF HISTORY OF NHS PHARMACY SERVICES



HOW PHARMACY SERVICES WORK





THE IMPORTANCE OF PHARMACY SERVICES

- ✓ Improve access to healthcare
- ✓ Support self-care and prevention
- ✓ Reduce pressure on GP surgeries and hospitals
- ✓ Ensure medicines are used safely and effectively
- ✓ Promote public health through vaccination and screening programmes.

THE CHALLENGES WE FACE



CHALLENGE 1: WORKFORCE SHORTAGES

Many pharmacies face difficulties recruiting and retaining pharmacists and support staff. This can lead to increased waiting times, staff burnout, and reduced service availability (The King's Fund, 2024).



CHALLENGE 2: FUNDING PRESSURES

Rising operating costs and limited funding have placed pressure on community pharmacies. Some pharmacies have reduced services or closed, affecting patient access to care (National Pharmacy Association, 2024)

THE IMPACT OF PHARMACY SERVICES

Percentage of patients using each service in the past year (England, 2025)



Medicines Supply – 88%



Health Advice – 72%



Vaccinations – 45%



Health Checks – 35%



Public Health Services – 30%



Residential Care Homes:

Residential care homes are an essential social care service that provide accommodation, personal care and support for individuals who are unable to live independently. They support older adults, people with disabilities and those with long-term health conditions. Residential care homes play an important role in promoting wellbeing, safety, and independence while ensuring that vulnerable individuals receive appropriate care.

The origins of residential care homes can be traced back to the 19th century. Before organised social care services existed, support for vulnerable people was mainly provided by families, churches, and charitable organisations. The Poor Law Amendment Act 1834 introduced workhouses, which provided shelter and basic care for people who could not support themselves (Royal Commission on the Poor Laws, 1909). However, workhouses were often criticised for poor living conditions and a lack of dignity for residents. During the 20th century, attitudes towards welfare began to change, leading to greater recognition of the need for compassionate and person – centred care. The establishment of the National Health Service (NHS) in 1948 and the expansion of welfare services contributed to the development of modern residential care facilities (Giddens and Sutton, 2021).

Several policies have shaped residential care homes into the services they are today. The Care Standards Act 2000 introduced national smallest standards and increased regulation of care services (Department of Health, 2000). More recently, the Care Act 2014 emphasised wellbeing, choice, and person – centred care, ensuring that service users have greater involvement in decisions affecting their lives (Department of Health and Social Care, 2014). These changes show how the social care has moved away from institutional care and now focuses on helping people maintain their dignity and independence.

Today, residential care homes provide 24-hour support to residents. Staff help the residents with their personal care, taking medication, eating healthy meals and everyday tasks. Many care homes also offer activities, chances to socialise and emotional support ensuring the residents feel included. The Care Quality Commission (CQC) checks the quality of services to make sure they provide good – quality care and follow the law (Care Quality Commission, 2025). For example, care homes supporting individuals with dementia often provide specially designed settings and trained staff to help people with extra care needs.

Despite the benefits, residential care homes also face several challenges. One major challenge is workforce shortages. According to Skills for Care (2024), the adult social care sector struggles to recruit and keep staff, which can affect the quality-of-care people receive. Additionally, the growing number of older people needing care puts pressure on services and resources (The King's Fund, 2024). Limited funding can also affect the number of staff, training, and improvements to services.

Residential care homes have both advantages and disadvantages. One advantage is that they provide a safe place with 24-hour support for individuals who find it difficult to live independently. Professional care can help prevent accidents; ensure medication is taken correctly and improve health (Glasby, 2017). However, some people believe that living in a care home can reduce a person's independence and sense of control over their daily life. Research shows that involving residents in decisions about their care can

help them feel more independent and satisfied with the support they receive (Department of Health and Social Care, 2014).

Residential care homes help improve people's quality of life significantly. They help reduce loneliness and social isolation by encouraging residents to socialise and take part in activities. This is especially important for older people who may not have many chances to interact with others. Residents also receive emotional support, companionship, and access to healthcare services. Families also feel reassured knowing their loved ones are always receiving care and support.

In conclusion, residential care homes have developed significantly since the workhouses of the 19th century. They are now modern services that focus on people's wellbeing and individual needs. Although, there are still challenges such as staff shortages and limited funding, residential care homes continue to provide support for vulnerable people. They help improve safety, health, social connections, and the overall wellbeing, making them an important part of the social care system.

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