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The role of pharmacy is changing. Traditionally, pharmacists have been involved in the preparation and dispensing of medicines in accordance with a doctor's prescription. Historically, pharmacists would have made medicines according to specific recipes, using ingredients to compound creams, tablets, pessaries and so on. With the advent of the pharmaceutical industry and pharmaceutically manufactured medicines, the pharmacist's role in the compounding of medicines was reduced. In countries such as New Zealand, pharmacists became more involved in the clinical aspects of therapeutics, and have taken on the roles of checking prescriptions for appropriateness of medicines, accuracy of doses and presence of drug-drug interactions. More recently this role has expanded to include comprehensive assessment of therapy, often termed "pharmaceutical care" or "medicines management". Thus we have seen a move away from a focus on the medicine, towards a focus on the patient.

Now, in many countries, pharmacists are no longer in the dispensary, dispensing prescriptions, but are providing advice to patients, liaising with doctors and other health professionals and engaging in interprofessional healthcare provision in areas such as point-of-care testing, health promotion, disease prevention, medicines therapy assessment, and screening and brief interventions. These expanded roles offer opportunities for the profession. However, they also require a change in the way pharmacists are educated and trained. Thus, the academic disciplines of "social pharmacy" and "pharmacy practice" have become more important. Social pharmacy has been defined as a discipline which looks at the interplay between medicines and society, whilst pharmacy practice is a discipline which describes and explores pharmacists' professional roles, and the two disciplines have considerable overlap.

In my presentation I will examine the drivers for this change towards a patient focus, I will present information about the changing educational and research needs for pharmacy, and I will give examples of innovations in social pharmacy/pharmacy practice and the research which accompanies it. Finally I will try to predict the future of social pharmacy.