

Medicines Use Review (MUR)

- **Principles**
- **Boundary Determinants**
- **Competence Standards**

Principles of Medicines Use Review

- 1 Medicines Use Review is undertaken in a structured and systematic manner by an accredited Medicines Use Review pharmacist. The pharmacist is accountable and responsible for the delivery of the Medicines Use Review service to the patient.
- 2 Medicines Use Review aims to help the patient find out more about the medicines they are taking; identify any problems they may be having with their medicines and improve the effectiveness of the medicines being taken. This includes complementary medicines and relevant lifestyle issues.
- 3 Medicines Use Review is undertaken within the context of the national and local healthcare strategies and requires collaboration and teamwork with the local community healthcare team.
- 4 Medicines Use Review is a therapeutic relationship between the pharmacist and the patient. The pharmacist actively elicits the patient's viewpoint/perspective. There is mutual agreement between the pharmacist and the patient in determining the recommendations. Any changes arising from the Medicines Use Review are agreed with the patient.
- 5 Medicines Use Review requires formal documentation of the review process including problems identified, goals set, the action plan, recommendations made (to patient, GP or other health professionals) implementation of any changes and follow-up. The impact of any change should be evaluated and documented.
- 6 Medicines Use Review assists in identifying patients who require referral to other Medicines Management Services or to other health professionals

Boundary Determinants	Name of Service	Medicines Use Review
	Level of MM Service	Level B
	Definition of Service	Medicines Use Review is a structured, systematic, documented and consultation-based service undertaken by an accredited pharmacist. Medicines Use Review aims to improve the patient's understanding of their medicines-related health outcomes by identifying access, adherence, and day to day management issues a patient has with their medicines and setting goals with the patient to resolve these issues.
Patient Interview	Structured/Formal The pharmacist meets with the patient to: <ol style="list-style-type: none"> 1 Help the patient find out more about the medicines they are taking 2 Identify any problems the patient may be having with their medicines 3 Improve the effectiveness of the medicines being taken 	
Documentation Process	Formal documentation Documentation of the process taken to conduct a Medicines Use Review is mandatory. This could be through a nationally developed template which includes patient details, prescribed and non-prescribed medicines details (including complementary meds), allergies, results of the screening questions, action taken and any correspondence with the healthcare team of the patient. The reason for having formal documentation is to ensure transparency of the process and to ensure all relevant information can be communicated and picked up by other members of the patient's healthcare team including pharmacists.	
Reactive or Proactive Service	Proactive The medicines use review as a service is a <u>partnership</u> between the patient and the pharmacist and therefore a 2 way process. The service will proactively identify any problems the patient has which are associated with medicines use. It is based on patient needs and therefore requires proactive identification of the patient/group in need.	
How instigated	Referral (self/health practitioner) For the medicines use review service patients may be able to self refer, or be referred to pharmacists via other health practitioners or the local DHB/PHO.	
Service Users	For individuals or groups The service can be for targeted individuals or others i.e. those at risk of medicine-related problems e.g. taking four or more medicines every day, where non-adherence is suspected, specific patient groups e.g. older people, physical problems like arthritis or patients where there is opportunity to improve care e.g. new formulation which may be easier for patient to take, new compliance aids available.	
Access to Individual patient information	Limited access to patient medical information from healthcare team This service may take place with/without full access to the patient's medical information from the healthcare team. It must however have full access to the patient's medicines record (PMR). The patient must be present whenever possible as dictated by best practice, unless, due to disability or geographical isolation within New Zealand as well as the inability to visit a pharmacy regularly, this is impractical. In this case the pharmacist must document the reason that a face-to-face interview did not take place and conduct the same detailed consultation with the patient by telephone or electronic means as they would have had the patient been present. Medicines Use Review will also be helpful in identifying anomalies and help identify patients who require referral to other Medicines Management Services or to another Healthcare professional.	
Support Provider (to pharmacist)	Peer Support required Peer support would require pharmacists providing Medicines Use Review services to maintain a formal network with other pharmacists providing similar services in order to learn from each others experiences e.g. PSNZ (Inc) Branch Meetings, E-mail discussion groups etc. Peer support will also be required from the local healthcare team.	
Collaboration	Collaboration with healthcare team Collaboration is required with the patient's healthcare team in order to recommend/ implement any changes, e.g. patient is not taking some medicines, patient may require to be referred to other medicines management services, patient needs to be referred back to the GP, patient needs support to take/use medicines.	
Accreditation/Competence	Some services may require provider accreditation An Accredited Medicines Use Review pharmacist can provide this service in any practice location. The pharmacist: <ul style="list-style-type: none"> o Must be registered in the pharmacist scope of practice and hold a current APC without conditions o Must be participating in recertification and be meeting the Medicines Use Review recertification requirements as set by the Council i.e. undertake CPD to accumulate a minimum of 2 Outcome Credits in Competence Standard 2 (Contribute to the Quality Use of Medicines) per year. o Must demonstrate competence in all current Competence Standards for the Pharmacy Profession except not necessarily Competence standard 6 (dispense medicines) and 7 (prepare pharmaceutical products) o Must be assessed as competent in the Medicines Use Review competencies as defined by the Pharmacy Council of NZ through an accredited provider organisation. 	

MEDICINES USE REVIEW COMPETENCE STANDARDS

MUR 1	Understand Medicines Use Review in the context of Medicines Management Services
MUR 2	Establish and maintain effective working relationships
MUR 3	Document the Service
MUR 4	Maintain Ongoing Quality

MUR 1 UNDERSTAND MEDICINES USE REVIEW in the context of MEDICINES MANAGEMENT SERVICES

1.1 Differentiate between the levels of Medicines Management Services

- 1.1.1 Describes the Pharmacy Council of NZ competence framework for medicines management services
- 1.1.2 Describes the boundary determinants of levels of medicines management services in the Council framework

1.2 Describe the principles, aims and scope of the Medicines Use Review Service

- 1.2.1 Describes the principles of Medicines Use Review
- 1.2.2 Describes the limitations of the Medicines Use Review Service
- 1.2.3 Demonstrates the application of the boundary determinants of Medicines Use Review
- 1.2.4 Takes responsibility for patient care
- 1.2.5 Assesses and interprets information gained and applies its relevance to the individual patient

1.3 Describe the place of Medicines Use Review in the wider context of national and local healthcare goals

- 1.3.1 Understands the goals of the relevant national health care strategies e.g. Primary Health Strategy, Maori Health Strategy
- 1.3.2 Identifies local area support and facilitation to assist with meeting local healthcare needs
- 1.3.3 Identifies the roles and responsibilities of members of the local community healthcare team
- 1.3.4 Informs and advises patients of the members of the local community healthcare team

MUR 2

ESTABLISH AND MAINTAIN EFFECTIVE WORKING RELATIONSHIPS

2.1 *Understand the principles of privacy and consent*

- 2.1.1 Describes the principles of gathering patient consent
- 2.1.2 Ensures privacy of patient is maintained

2.2 *Build a relationship with the patient*

- 2.2.1 Acknowledges patient partnership and involvement of family/whanau/caregiver
- 2.2.2 Takes into account patient's individual circumstances and preferences including cultural and health beliefs
- 2.2.3 Maintains an effective relationship with the patient and family/whanau/caregiver

2.3 *Build a relationship with the healthcare team*

- 2.3.1 Explains partnership with and involvement of healthcare team
- 2.3.2 Takes into account individual healthcare team members circumstances and preferences including cultural and health beliefs
- 2.3.3 Maintains an effective working relationship with the healthcare team

2.4 *Communicate effectively with the patient*

- 2.4.1 Understands and applies the concept of the concordance/adherence model
- 2.4.2 Agrees and sets goals with the patient
- 2.4.3 Communicates accurate and relevant information to the patient in a timely manner
- 2.4.4 Describes the principles of consultation skills including the structure of the consultation process
- 2.4.5 Describes the principles in motivating and facilitating behavioural change
- 2.4.6 Monitors and follows up on patients appropriately

2.5 *Communicate effectively with the healthcare team*

- 2.5.1 Identifies appropriate communication skills needed to work collaboratively with the healthcare team
- 2.5.2 Communicates accurate and relevant information with the healthcare team in a timely manner
- 2.5.3 Acts on feedback received by the healthcare team in a timely manner
- 2.5.4 Refers or consults appropriately with other health professionals

MUR 3 DOCUMENT THE SERVICE

3.1 *Develop effective recording systems*

- 3.1.1 Documents the process including prioritisation of recommendations, goal setting, planning and writing of report or action plan, implementation of action plan and follow up.
- 3.1.2 Ensures records are relevant and up to date
- 3.1.3 Contributes to other health professionals records where appropriate

3.2 *Maintain patient records*

- 3.2.1 Records patient information and updates patient records in the MUR setting
- 3.2.2 Maintains privacy and security of patient information
- 3.2.3 Records goals set and recommendations

MUR 4 MAINTAIN ONGOING QUALITY

4.1 *Undertake professional development*

- 4.1.1 Uses the continuing professional development (CPD) cycle to evaluate and identify learning needs
- 4.1.2 Recognises limitations and works within them
- 4.1.3 Achieves a minimum of 2 (two) Outcome Credits each year in Competence Standard 2

4.2 *Maintain peer support*

- 4.2.1 Maintains a formal network with other pharmacists providing similar services to share and learn from each other's experiences

4.3 *Implement a quality improvement procedure*

- 4.3.1 Describes the principles of Quality Improvement Procedures
- 4.3.2 Uses standardised documentation e.g. questionnaires/surveys to evaluate the service