

# MUR—What GP's, Practice Managers & PHO's need to know

## What is the Medicine Use Review (MUR) & Adherence Support Service?

The Medicine Use Review (MUR) and Adherence Support Service is the first service in the Advanced level of the MOH Community Pharmacy contract. It is a one-on-one structured consultation between a pharmacist and a patient, the aim is to help the patient manage their medicines more effectively.

It involves the pharmacist reviewing the patients use of their medication, ensuring that the patient knows why they are taking them, how they should be used and to identify any problems that may affect their use. A Report Form is then provided to the prescriber with relevant feedback, as appropriate. The patient also receives a copy. After the initial consultation, a patient may have 3 more follow-ups within a 12-month period.

The Adherence Support service is part of the MUR, the pharmacist may offer this as part of the dispensing service, over and above basic interventions, in relation to safety issues with a patients prescription medicine.

### An MUR provides a way to:

- Improve a patients understanding of their medicines
- Improve adherence
- Identify side effects & propose solutions where appropriate
- Reduce hospitalisations due to medicine related complications
- Reduce medicine wastage

### An MUR is not:

- About making changes to medication
- A full clinical review
- About discussing a medical condition beyond what the drug is intended for
- About discussing effectiveness of treatment based on clinical test results

### What does it involve?

As it is a concordance (adherence) based review, the patient will be asked to bring in all their medications, whether these are prescribed, OTC, complimentary or herbal.

### The review discussion may include:

- Asking the patient how compliant they are with prescriber's instructions
- How and when they take medication labeled with "as directed" or "as required"
- Assessing the patients knowledge of each medicine to see if they know what it is for, when and how to take it
- Assessing perceived side effects and advice on tolerability
- Dealing with practical issues that prevent the patient obtaining, taking, ordering and using their medicines
- Identification of overstocking or unwanted medicines & removal if safety is an issue
- Assessment of potential change of dosage form to facilitate effective use with due regard to formularies and cost implications (on approval of GP)
- Suggestions on optimisation in dose and strength, but not to impact on clinical management

The review is recorded (either paper based or electronically). Results are accessible by the patient, the accredited pharmacist and the patients GP. A Report Form is given to both the patient and GP with points of action for all parties concerned, as appropriate, but will most commonly be patient orientated.



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## **Who can have a Medicine Use Review?**

There is set criteria for eligibility and it is for the pharmacist to decide if the patient meets this criteria. However PHO's and GP's can refer patients to the service, and patients themselves can ask about eligibility. It is a voluntary service and the patient can decide to 'opt out' of it if they wish.

## **Who can provide MURs?**

Only pharmacists who have passed the New Zealand College of Pharmacy competency assessment training. Once accredited, pharmacists are able to provide MURs for a set number of patients annually (subject to conditions set out in DHB contracts). Reviews must be conducted in a private consultation area, which ensures patient confidentiality.

## **Who funds this service?**

The service is funded by the regional DHB's. There is yet to be national agreement of set funding criteria, currently there are variances from one DHB to another. Pharmacy is reimbursed for each time monitored consultation on an annual capitation basis, there is a limit of 4 consultations per patient per annum. The service is free to patients.

## **What are the benefits to patients?**

The aim is to improve a patients understanding of their medicines in relation to their condition and this should:

- Improve compliance with medicines
- Improve health outcomes
- Improve quality of life
- Increase ownership of their condition and treatment
- Encourage self-care.

## **What are the benefits for GP's?**

It is well recognised that at least 50% of patients do not comply with their prescribed medicine regimes. Most GP's would agree that the majority of their appointments are taken up by patients with long term chronic conditions. A high proportion of hospital admissions by the elderly are as a direct result of poor compliance with prescribed medication. Improving a patients understanding of their medicine and how to take it properly should improve their health outcomes, thus reducing workloads for GP's and unnecessary hospitalisations.

## **What are the benefits to stakeholders?**

Improving accessibility and patient care is the platform to developments within the Ministry of Health's Primary Care Strategy. Compliance with appropriately prescribed treatment is fundamental to ensuring that the outcomes of care are realised. Non-compliance can lead to:

- Unnecessary increased workload for healthcare professionals
- Non-achievement of health goals
- Increased hospital admissions
- Poor use of DHB resources.

Medicine Use Reviews conducted by community pharmacists can play an important role in achieving all stakeholder goals. It does not matter how clinically appropriate prescribed treatment is if the patient does not understand and follow the recommended regimen.