Community Pharmacy
Paediatric Asthma
Medicines Use Review + Service
Project Protocol

Isle of Wight NHS
Primary Care Trust

This project has been supported by a financial grant from Merck Sharp & Dohme Ltd. Merck Sharp and Dohme Ltd have also assisted in the development and printing of supporting materials.
<table>
<thead>
<tr>
<th>Document History</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preliminary Draft</td>
</tr>
<tr>
<td>Approval Draft</td>
</tr>
<tr>
<td>Final Draft</td>
</tr>
<tr>
<td>First Published</td>
</tr>
<tr>
<td>First Revision</td>
</tr>
<tr>
<td>Second Revision</td>
</tr>
<tr>
<td>Third Revision</td>
</tr>
</tbody>
</table>

Hampshire & Isle of Wight LPC
Old Bank House
59 High Street, Odiham
Hampshire RG29 1LF
Tel. 01256 704455
Fax. 08716 613991
Email: office@hampshirelpc.org.uk
Web: www.hampshirelpc.org.uk
Introduction

Medicines Use Review (MUR) is a service which can be offered to their patients by accredited community pharmacists as an Advanced Service within their Contractual Framework.

The aim of the Service is to achieve a concordant approach to medicine taking by:

- establishing the patient’s actual use, understanding and experience of taking their medicines;
- identifying, discussing and resolving poor or ineffective use of their medicines;
- identifying side effects and drug interactions that may affect patient compliance;
- improving the clinical effectiveness and cost effectiveness of prescribed medicines and reducing medicine wastage.

Currently, MURs are often a stand-alone service and not always integrated into patient care pathways. In addition, the national specification does not technically allow a concordant consultation with a carer as would be the case with a paediatric asthma service.

By targeting this non-compliant group of patients and by auditing and evaluating the outcomes, community pharmacy can demonstrate the benefits of supporting this patient group and their carers. The outcomes could then be used as credible evidence to persuade the Department of Health to change the service specification to permit carer involvement in MURs for patient groups who are not in a position to grant consent.

The Pharmacy White Paper seeks to optimise the benefits of community pharmacists supporting patients with long-term conditions and screening at risk groups for the benefit of patients and the broader NHS; this project seeks to do so and evaluate the outcomes.

Benefits

To patients:
Improving patients’ and carers’ understanding of their condition and treatment should:

- improve compliance with prescribed medication;
- improve health outcomes;
- improve quality of life;
- increase ownership of condition and treatment; and
- encourage self-care.

To the NHS:

- 80% of patients with asthma do not comply with some element of their prescribed treatment;
- An estimated 5-20% of prescribed medication is wasted (£10million in Hampshire alone);
- A large proportion of GP practice appointments are taken by patients with long-term conditions; and
- Over half of hospital re-admissions in the elderly are a direct result of poor compliance with prescribed medication.

1 Pharmacy White Paper, Department of Health, April 2008
3 Pharmacy in the Future - Implementing the NHS Plan. London: Department of Health; 2000
4 H&ICO WLPC SP080801 - 3 - Sept 2008
It does not matter how clinically appropriate prescribed treatment is if the patient does not follow the recommended regimen the desired health outcomes will not be achieved. Improving a patient’s compliance with their treatment through the effective delivery of MURs involving their carer should improve patients’ health outcomes thus reducing workload for GP practices, unnecessary secondary care admissions and ensure more appropriate use of NHS resources.

Aims and intended service outcomes

Aim:
To optimise the outcomes of treatment of asthma in paediatric patients through the effective delivery of Medicines Use Reviews involving the patient’s carer and demonstrating the benefits through audit and evaluation.

Intended service outcomes:
- improved concordance and adherence of paediatric patients with asthma
- improved access to support, particularly for those traditionally hard-to-reach patients
- integration of community pharmacy services into patient care pathways
- updated knowledge of the condition and management guidelines for community pharmacy healthcare teams
- some demonstrable benefits of the MUR service
- demonstrate the benefits of involving carers in the MUR service
- create an evidenced case for the Department of Health to change the service specification for MURs to permit the engagement and involvement of carers.

Measurable outcomes:

Quantitative:
- number of patients accessing the MUR service by age group
- number of these patients receiving a GP/nurse review in previous 12 months
- Royal College of Physicians “Key Questions” score pre and post MUR intervention
- Use of reliever medication
- Compliance issues – belief, device, medicine
- Concordance
- Intervention – patient education, carer education, device training, referral

Qualitative:
- Patient/carer feedback
- Community Pharmacist feedback
- Healthcare professional (GP/nurse) feedback

Service outline and scope

Outline:
This initiative builds the established Medicines Use Review service by providing:
- Training events that cover:
  - updates on the condition, treatment options and local & national management guidelines – provided by local NHS respiratory experts
  - steps to be taken to deliver and expectations of a successful paediatric asthma MUR
  - audit and evaluation process

---

• Resources to support community pharmacists in the delivery of the service:
  o pharmacy team information leaflets and support tools
  o patient information leaflets

• Audit and evaluation deliverables:
  o Anonymised audit of consultation outcomes (appendix 1)
  o Service evaluation feedback from patients, pharmacists and other healthcare professionals
  o A full analysis and report will be made available to participating community pharmacy contractors and other interested parties.

Scope:
The initiative will be delivered through 10 community pharmacies on the IOW with engagement criteria being based on location, MUR accreditation status and recent history of successful delivery of MURs. This process will be managed by the PCT.

The target for asthma patient consultations over the period is a minimum of 20 per participating pharmacy. It is desirable to target a balance of age groups, i.e. 10 patients between 0-5 years and 10 between 5-12 years.

It is important to record that there is no desire to limit a pharmacy’s MUR activity to paediatric patients with asthma as this may be detrimental to the broader patient population.

Timelines:
Launch event to be held on September 3rd 2008; the project will run for a period of nine months before evaluation.

Service Protocol

The provision of this service is commissioned as a time limited enhanced service targeted at paediatric patients with Asthma which can be identified opportunistically at the point of dispensing their prescription, by actively searching the pharmacy patient database or by referral from a GP practice (N.B. this does not imply or include direction of patients to a particular pharmacy).

The critical steps in the process are:

1. Following the initial training, familiarise the whole pharmacy team with the documentation and support tools.

2. Make an appointment to meet the local GPs, practice managers and asthma nurses to brief them on the initiative. Printed briefing materials explaining the aims of the pilot and designed to be given to the practices are included in the resources together with a more general leaflet on MURs (N.B. these must not be a substitute for a face-to-face briefing). The objective of this meeting is to engage with the GP practice team, get them to understand the aim of the initiative, integrate with their existing care pathway, support their hard-to-reach patients who do not attend their clinics and/or may be non-compliant with their therapy, and agree protocols for referral and administration.

3. Identify and actively recruit patients who may be good candidates for an asthma MUR.
4. Complete a normal MUR concordance consultation involving the patient’s carer. Ask patient the 3 RCP questions (Appendix 1); record outcomes on Audit Form (Appendix 2).

5. Identify and address any concordance and compliance issues with referral to GP and/or asthma nurse where appropriate and as agreed in the initial briefing.

6. Complete the MUR forms and send the white copy of the action plan to the patient’s GP.

7. Give the patient/carer a copy of the MUR form together with any patient and carer information leaflets required to support concordance and compliance.

8. Make follow-up appointment within 3-6 months to assess change in condition management.

9. Complete follow-up audit and record outcomes on audit form.

10. Provide patient/carer a copy of the Patient Feedback Form (Appendix 3) which is anonymous and should be sent back to the LPC at the FREEPOST address for collation and analysis.

11. Copies of the Audit Form should be routinely posted or faxed back to input into a database, analysis and report generation. They should be posted to Patrick Leppard at Hampshire & IOW LPC or faxed to 08716 613991

12. At the end of the project, give the GPs and asthma nurses a copy of the Healthcare Professional Feedback Form (Appendix 4) which they can fax back to the LPC for evaluation. Complete a Pharmacist Feedback Form (Appendix 5) and fax back.

Service finance

All costs related to the provision of training, pharmacy fees, resources and the evaluation of the initiative will be funded by the PCT with support from a financial grant from MSD. MSD have also assisted in the development and printing of educational materials being used in the project.

Pharmacies will be paid £27 for the first intervention and £8 for the follow-up audit. This will be claimed from the PCT using a modified version of the standard claim sheet.

Contacts

Kevin Noble MRPharmS, kevin.noble@iow.nhs.uk
Community Pharmacy Lead, Isle of Wight NHS Primary Care Trust 01983 534271

Patrick Leppard MRPharmS, patrick.leppard@hampshirelpc.org.uk
Service Development Lead, Hampshire & IOW Pharmaceutical Committee 01256 704455
Appendices

1. RCP Key Questions
2. Audit form
3. Patient feedback form
4. Healthcare Professional feedback form
5. Pharmacist feedback form
6. Paed MUR pilot briefing document

Appendix 1

Royal College of Physicians 3 Key Questions

1. In the last month/week have you had difficulty sleeping due to your asthma (including cough symptoms)?

2. Have you had your usual asthma symptoms (e.g. cough, wheeze, chest tightness, shortness of breath) during the day?

3. Has your asthma interfered with your usual daily activities (e.g. school, sport, play activity)

One "yes" indicates medium morbidity and two or three "yes" answers indicate high morbidity.
## Appendix 2

### PAEDIATRIC ASTHMA MEDICINES USE REVIEW SERVICE AUDIT

**Pharmacy Name:**

**Pharmacy Code:**

<table>
<thead>
<tr>
<th>Name</th>
<th>S/N</th>
<th>DOB</th>
<th>Age</th>
<th>Date of Review</th>
<th>Review 1 or 2</th>
<th>Last review with difference</th>
<th>-12 months</th>
<th>&gt;12 months</th>
<th>Patient ECP Score</th>
<th>Use of Reducer (Brown)</th>
<th>Use of Control (吸入剂 in last month)</th>
<th>Compliance Issues (complete any that apply)</th>
<th>Patient Concordant?</th>
<th>Intervention (complete all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This project has been supported by a financial grant from Merck Sharp & Dohme Ltd. Merck Sharp and Dohme Ltd have also assisted in the development and printing of supporting materials.

---

**Notes:**

1. To complete box either insert figure or simply tick the box.
2. Date of review and is this the initial review (1) or follow-up (2)?
3. Compliance issues:
   - Belief: Is the patient non-compliant due to their beliefs/see-beliefs about their treatment?
   - Patients may make a risk/benefit analysis in which beliefs about the need to take their medicines are balanced against the potential/perceived benefits/adverse effects
   - Formulation: Does the patient have difficulty with practical issues about the medicine - difficulty in swallowing, taste etc
   - Side effects: Dry throat, headache etc
4. Concordance: Does the patient understand their condition and treatment and are they in agreement with the diagnosis and treatment regime?
5. Pharmacist Intervention:
   - Patient/Doctor Education: Providing information or education to the patient/doctor on the appropriate use of the medicines
   - Device Training: Inhailer technique check and issues addressed
   - Referral: Patient referral for action by another healthcare professional - GP, asthma nurse

---

09-09 MGS/77006-08
Appendix 3

**Medicines Use Review Service**

**FEEDBACK FORM**

Thank you for taking part in the above service at your local pharmacy for the benefit of the child in your care.

In order to assess how useful you found your involvement in this service, we would be grateful if you could complete this short questionnaire.

All replies will remain strictly confidential and it is not possible for any party to identify you.

If you have any questions, please contact your local pharmacist involved in this service.

**Pharmacy to complete before giving to patient’s carer:**

<table>
<thead>
<tr>
<th>Pharmacy</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmacist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pharmacy Tel no.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Date:**

__/__/__

1. Why did you decide to use this service?
   (You may cross more than one box)
   - [ ] I was concerned about my child’s condition
   - [ ] I wanted advice from my pharmacist
   - [ ] I wanted to know more about the medicines he/she was using
   - [ ] I was confident that my pharmacist would give me good advice
   - [ ] Other (please state)__________________________

Please rate how strongly you AGREE or DISAGREE with each of them by making an ‘X’ in the most appropriate box.

<table>
<thead>
<tr>
<th>Level of Agreement</th>
<th>Please mark ‘X’ in ONE box for EACH statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly disagree</td>
<td></td>
</tr>
<tr>
<td>Disagree</td>
<td></td>
</tr>
<tr>
<td>Neither agree nor disagree</td>
<td></td>
</tr>
<tr>
<td>Agree</td>
<td></td>
</tr>
<tr>
<td>Strongly agree</td>
<td></td>
</tr>
</tbody>
</table>

2. The importance of taking part in this service was made clear to me
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neither agree nor disagree
   - [ ] Agree
   - [ ] Strongly agree

3. I know more about my child’s condition since using this service
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neither agree nor disagree
   - [ ] Agree
   - [ ] Strongly agree

4. The pharmacist clearly explained how to gain maximum benefits from the medication
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neither agree nor disagree
   - [ ] Agree
   - [ ] Strongly agree

5. The advice given by the pharmacist was useful
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neither agree nor disagree
   - [ ] Agree
   - [ ] Strongly agree

6. I feel that I understand more about the medication I am using this service
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neither agree nor disagree
   - [ ] Agree
   - [ ] Strongly agree

7. A follow-up visit to the pharmacy would be of benefit to me
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neither agree nor disagree
   - [ ] Agree
   - [ ] Strongly agree

8. I am happy with the length of time that we spend in the pharmacy
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neither agree nor disagree
   - [ ] Agree
   - [ ] Strongly agree

9. I would recommend this service to others
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neither agree nor disagree
   - [ ] Agree
   - [ ] Strongly agree

10. What did you **like most** about the service?

11. What did you **like least** about the service?

12. Please write any other comments you have about the service:

Thank you for taking time to complete this form. Please return the completed form to:

[Address]

This project has been supported by a financial grant from Merck Sharp & Dohme Ltd. Merck Sharp and Dohme Ltd have also assisted in the development and printing of supporting materials.

H&IOWLPC SP080801
09-09 MGS/77006-08
Sept 2008
Appendix 4

HEALTHCARE PROFESSIONAL FEEDBACK FORM
PAEDIATRIC ASTHMA MEDICINES USE REVIEW

Fax

To: Hampshire & IOW LPC
Fax: 08716 613991
Phone: 01256 704455
From: ____________________________
Pages: 1
Date: ____________________________

Please rate your level of agreement with each of the following statements by ticking one box for each statement, add any additional comments and fax back to the LPC on 08716 613991.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Uncertain</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am aware of this initiative and what it set out to achieve from discussion with local community pharmacist(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Criteria and protocol for referral of patients were clearly agreed with the community pharmacist(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community pharmacists have an important role to play in the management of paediatric patients with asthma</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asthma MURs are of benefit to my paediatric patients</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The inclusion of the patient’s carer in the consultation is of benefit to the health outcomes of the patient</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>This service supports the achievement of my QOF targets</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>This programme should reduce my long-term workload</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I would support similar initiatives in the future on the following clinical areas:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Further comments:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Thank you for taking the time to provide this feedback.

LPC Office · Old Bank House · 59 High Street · Oadham RG20 1LF
Tel 01256 704455 · Fax 08716 613991 · office@hampshirelpc.org.uk · www.hampshirelpc.org.uk

This project has been supported by a financial grant from Merck Sharp & Dohme Ltd. Merck Sharp and Dohme Ltd have also assisted in the development and printing of supporting materials.
Appendix 5

Pharmacy: ___________________________ Date: _______ / ______ / ______

Paediatric Asthma Medicines Use Review Project

PHARMACIST FEEDBACK FORM

- Thank you for participating in this evaluation.
- In order to help us to evaluate the benefits of the service, please would you complete the following questions.
- Questions may be completed by marking ‘X’ in the most appropriate box(es).
- We would also welcome any additional comments you may have.

Q1. Please indicate who recruited patients for this Asthma MUR Service.

1. Pharmacist
2. Technician
3. Dispensing Assistant
4. Medicines Counter Assistant
5. GP
6. Asthma Nurse

Q2. Please rate your level of agreement with each of the following statements by marking ‘X’ in ONE box for EACH statement.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Uncertain</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community pharmacists have an important role to play in the management of paediatric patients with asthma.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Including the patient's carer in the consultation was of benefit to all parties.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The training provided enabled me to implement the service confidently.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I received sufficient information in order to be able to implement the service.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I received sufficient support in order to enable me to implement the service.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I found the Pharmacist Meetings of benefit in implementing the service.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I found the progress updates of benefit.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Participation in the service has developed my professional working relationship with other healthcare professionals.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I would welcome this opportunity to work closer with other healthcare professionals in similar services.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional comments

Thank you for taking the time to complete this form
Please fax the completed form to Hampshire & IOW LPC on 0871 6613991

Hampshire & IOW LPC, Paed Asthma MUR Project, June 2007

This project has been supported by a financial grant from Merck Sharp & Dohme Ltd. Merck Sharp and Dohme Ltd have also assisted in the development and printing of supporting materials.
Appendix 6

Paediatric Asthma Medicines Use Review Project

The purpose of this letter is to support the briefing of GP practices by participating community pharmacies in a Paediatric Asthma MUR project which has been developed with input from the PCT and partnership support from Merck, Sharp and Dohme. This letter is supported by a leaflet explaining the broader benefits of MURs. We would be grateful if all GPs and staff in the practice have an opportunity to read both.

Aim:
To optimise the outcomes of treatment of asthma in paediatric patients through the effective delivery of Medicines Use Reviews involving the patient’s carer and demonstrating the benefits through audit and evaluation.

Intended outcomes:
- improved concordance and adherence of paediatric patients with asthma
- improved access to support, particularly for those traditionally hard-to-reach patients
- integration of community pharmacy services into patient care pathways
- updated knowledge of the condition and management guidelines for community pharmacy healthcare teams
- some demonstrable benefits of the MUR service
- demonstrate the benefits of involving carers in the MUR service
- create an evidenced case for the Department of Health to change the service specification for MURs to permit the engagement and involvement of carers.

Outline:
This initiative builds the established Medicines Use Review service by providing:

- Training events to cover:
  - updates on the condition, treatment options and local & national management guidelines provided by local NHS respiratory expert
  - audit and evaluation process

- Service overview:
  - Appropriate patients identified by pharmacy and/or referred by GP practice
  - Normal MUR concordance consultation involving the patient’s carer. Patient asked the 3 RCP questions; outcomes recorded
  - Any concordance and compliance issues identified and addressed with referral to GP and/or asthma nurse where appropriate and as agreed
  - MUR forms completed and the white copy of the action plan sent to the patient’s GP where appropriate
  - Patient/carer given a copy of the MUR form together with any patient and carer information leaflets required to support concordance and compliance
  - Follow-up audit completed within 3-6 months to assess change in condition management with outcomes recorded

- Evaluation of anonymised consultation outcomes and service evaluation feedback questionnaires from patients, pharmacists and other healthcare professionals.

Scope:
The target for paediatric asthma patient consultations over the period is 20 per participating pharmacy. There is no desire to limit a pharmacy’s MUR activity to patients with asthma as this may be detrimental to the broader patient population.

Timelines:
This time-limited initiative which will run through until the end of June 2009 followed by the evaluation phase. A full analysis and report will be made available to all interested parties.

This project has been supported by a financial grant from Merck Sharp & Dohme Ltd. Merck Sharp and Dohme Ltd have also assisted in the development and printing of supporting materials.