

## Agenda

1. Introductions
2. Aims
  - a. Target Patient population
  - b. Polypharmacy
  - c. Frail patients
  - d. Diabetes pilot
  - e. NOACS
  - f. PPIs
3. Benefits
  - a. Reduction in GP appointments
  - b. Reductions in hospital admissions
  - c. Medicines Optimisation, Reducing tablet burden, ACB, polypharmacy etc. etc
  - d. Reduction FALLS
  - e. Reduction ADR, DI etc.
  - f. Improving Quality life patients
  - g. Safe prescribing
  - h. Cost savings for QIPP
4. Paperwork
  - a. Home visit template
  - b. Checklist for reviews
  - c. Review form
  - d. letter
5. Resources-time at practice , computer access, log in, folder on practices system to store work electronically
6. Searches- support from appropriate person at practice
  - a. Aims e.g. over age 85 and on more than 10 meds
  - b. All residents in particular care home
7. Process for medication reviews
  - a. Pharmacist review patients using checklist, review form and home visit template data
  - b. GP reviews recommendations and documents form
  - c. GP or pharmacist make changes
  - d. Copy of agreed recommendations scanned on medical record and read code documented for pharmacist medication review
  - e. Pharmacists communicates changes to patient/carers/care home and community pharmacies if appropriate
8. Further points for discussion
  - a. Remote access – working from SRCCG office remotely for Sys 1
  - b. Number days at practice/ local care homes
  - c. Ensure practice website has privacy policy on it clearly indicating medication reviews take place amongst patients

- d. Obvious on the electronic prescribing systems for pharmacist if any patients have refused access of their notes i.e. opted out, to be reviewed by a flag popping up if pharmacist tries to access their patients records
- e. Ensuring Summary care record updated to explain why some medications have been stopped to prevent them being restarted either at the practice or on admission to hospital
- f. Contact with patients? easy with care home residents as can visit care home what about other patients- telephone or from paper and leave to GP after prep from pharmacist
- g. Note: Pharmacist not a prescriber

Paper work to take

Medication review form

Checklist

Letter

ACB scale

The seven steps

Stop Start tool

GP privacy statements – see email