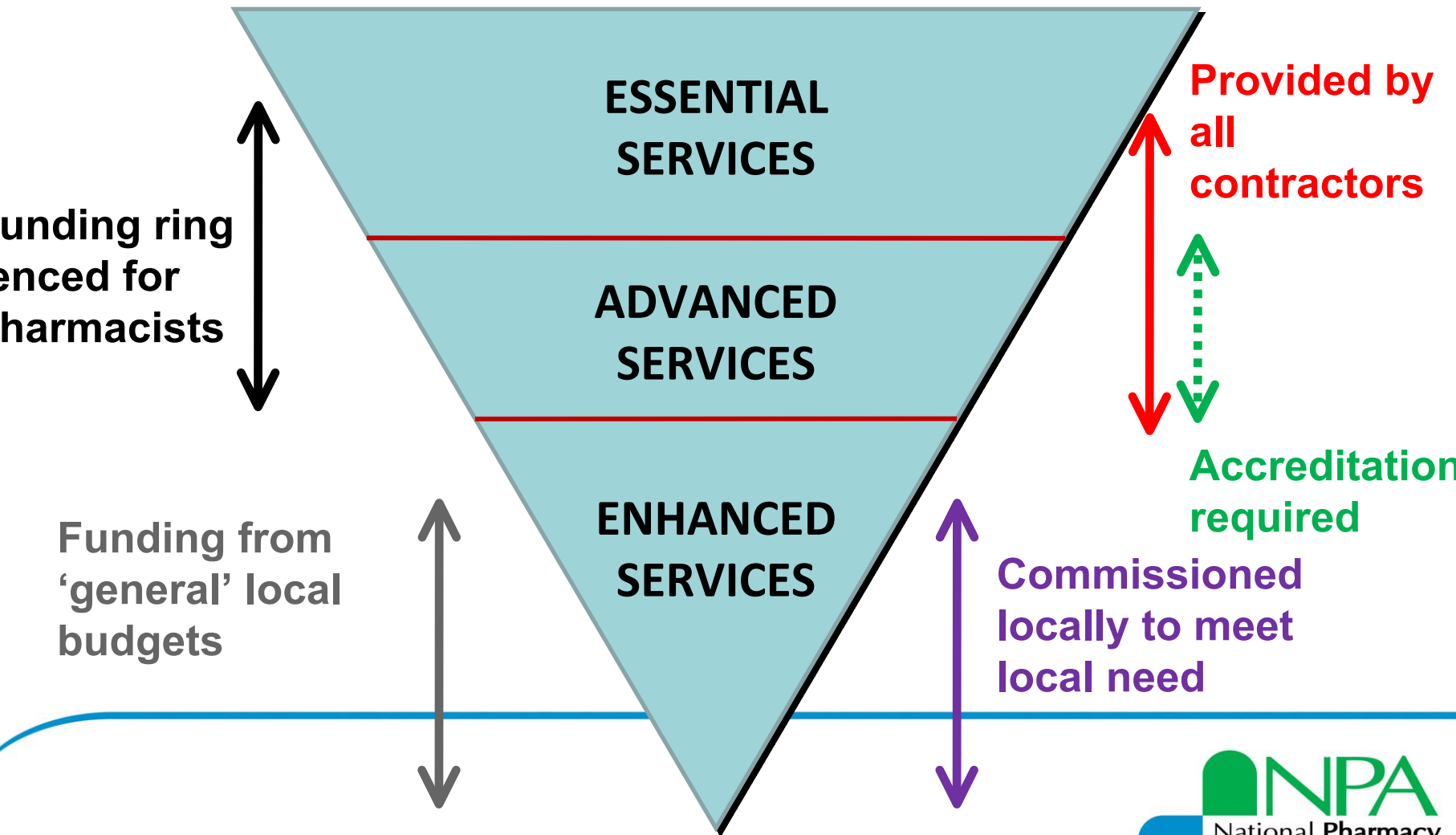


# MEDICINES USE REVIEW

*Colette McCreedy  
Chief Pharmacist & Director of Practice  
National Pharmacy Association, UK  
October 2008*

# PHARMACY CONTRACTUAL FRAMEWORK FOR ENGLAND AND WALES FROM APRIL 2005



# MEDICINES USE REVIEW

## Outline of the Service

- Structured concordance-centred medication review – conducted regularly (12 months)
- Assessment of problems with medication and its administration
- Patients are identified by the pharmacist (by reviewing records or ‘ad hoc’)
- Feedback to the physician

# MEDICINES USE REVIEW

## Structure

- ❖ Nationally agreed template form (4 pages)
- ❖ Triplicate forms
  - GP
  - Patient
  - Pharmacist
- ❖ Reviews by appointment or 'walk-in'

# MEDICINES USE REVIEW

## Funding

- ❖ £28 (35.2 euros) per medicines use review (MUR) from October 2008 (increased from £27 (33.9 euros))
- ❖ Limit of 400 MURs per pharmacy, per year (increased from 250 in October 2006)
- ❖ Maximum potential income per pharmacy, per year £11,200 (14,048 euros)

# MUR PERFORMANCE HISTORY

## Pharmacy Engagement

- ❖ 90% of pharmacies have consultation areas
- ❖ 6,113 pharmacies made an MUR claim in June 2008
- ❖ 17,433 pharmacists had completed a competency-based assessment for the MUR service in June 2008

*\* Figures are for England only*

# MUR PERFORMANCE HISTORY

## Financial

	<b>Year 1 April 05 – March 06</b>	<b>Year 2 April 06 – March 07</b>	<b>Year 3 April 07 – March 08</b>
Maximum possible number of MURs	2,522,500	3,344,250	4,199,200
Maximum possible payment for MURs	£58,017,500 (73,107,852 euro)	£80,262,000 (101,138,146 euro)	£109,179,200 (137,478,450 euro)
Actual number of MURs claimed	146,623	557,359	950,887
Value of MURs claimed	£3,372,329 (4,250,483 euro)	£13,544,749 (17,071,802 euro)	£24,854,153 (31,321,204 euro)

*\*Figures are for England only*

# BARRIERS TO MUR UPTAKE

- ❖ Time
- ❖ Understanding the service
  - ❖ Pharmacists
  - ❖ Patients
  - ❖ Physicians
- ❖ Training
  - ❖ Clinical
  - ❖ Communications
- ❖ Lack of collaboration
- ❖ Premises
- ❖ Publicity and awareness
- ❖ MUR targets
- ❖ GP issues
- ❖ Continuity
- ❖ The 'MUR' brand

# SOLUTIONS

- ❖ Engagement with physicians
- ❖ MUR forms re-designed
- ❖ Re-designed reporting procedures
- ❖ Increased support at local level
- ❖ Better marketing and publicity for the service

# LESSONS LEARNT

- ❖ Do not assume that the main barrier to new services is money!
- ❖ Design the service from the beginning with the GPs
- ❖ IT solutions are the best
- ❖ Keep going

# THE FUTURE

- ❖ Continued Government commitment
- ❖ Focus on quality
- ❖ A second main stream pharmacy service on the horizon

# Thank you!

[c.mccreedy@npa.co.uk](mailto:c.mccreedy@npa.co.uk)