Community Pharmacy Discharge Medicine Review Service

What you need to consider to be DMR ready:

- ✓ **Training and accreditation requirements via HEIW NCSA**
- ✓ **Awareness of service requirements**
- ✓ **Develop a standard operating procedure**.
- ✓ **Understand how to use Choose platform**
- ✓ **Engage with and identify suitable patients**
- ✓ **Identify any local key contacts: e.g. primary care teams, practice teams, cluster pharmacists, etc.**

How do you complete a DMR? Watch these helpful videos

DMR video – Community Pharmacy teams – how to complete a DMR – English

DMR video – Community Pharmacy teams – how to complete a DMR – English with subtitles

Use these videos below to help promote the service in your pharmacy

DMR video –Public – What is the DMR service? – English with subtitles

DMR video –Public – What is the DMR service? – English

DMR video –Cyhoeddus – Beth ydy'r gwasanaeth DMR ? – Cymraeg

DMR video –Cyhoeddus – Beth ydy'r gwasanaeth DMR ? – Cymraeg gyda isdeitalau

DMR video – For hospital pharmacy teams – English

DMR video – For hospital pharmacy teams – English with subtitles

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DMR CHECKLIST-Completion by Pharmacy Technician or Pharmacist

Part 1: Registration

- Consent gained and patient registered on DMR module of choose pharmacy
- Can be done at any time ("pre-registration")
- This ensures that if electronic discharge information is available it will automatically come through to your pharmacy
- Useful to take telephone number to contact patient for later processes

Part 1: Discharge information obtained and compared vs first prescription

- With patient consent, compare the discharge information (e-dal/printed discharge sheet/take home meds) vs the first GP prescription

Part 1: Initial Support for Adhering to Medication Regimen

- Discuss what medicines patient is actually taking (face-to-face or remotely) with the patient or person responsible for the patient's medication, identify any discrepancies and act to resolve:
    - patient's use of medicines since discharge;
    - whether any problems identified during reconciliation; and
    - any changes to the patient's medicine regimen.

Part 1: Record consultation

- Enter this information on the Choose Pharmacy platform

Part 2: Ongoing review of adherence

- Usually 28 days post discharge and after Part 1
- Can be with patient or carer (anyone who helps with medicines administration/usage)
- Can be face-to-face or remotely (video/telephone)
- Review medicine adherence and assess any difficulties with using medication
- Check understanding of medicines and answer any questions:
    - Are there any changes to the patient's medicine regimen identified in the first part of the service?
    - Does the patient need any help in taking their medicines?
    - Are there any adjustments the pharmacy can make to improve adherence?
- Provide pharmaceutical care and advice leading to agreed actions which support self-care, promote adherence and reduce waste

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Part 2: Referral pathways

- Address any difficulties, referring on any issues if required
- The patient may be referred to a primary care pharmacist (cluster or practice) for a full medicine review
- The patient may be referred onto Community Resource Teams for further assessment if appropriate
- The patients GP and or secondary care team will be contacted for further review and ongoing assessment
- Methods of possible communication can include face-to-face, written. telephone, NHS email or Teams message of call as appropriate

Part 2: Record consultation

- Record review locally and enter on Choose Pharmacy
- If Part 2 can't be completed (e.g. patient re-admitted to hospital) record reason and submit claim

Part 2: Further Clinical review

- If during the consultation a pharmacy technician identifies issues with the use, understanding and/or experience of taking a new medicine, or if there is a medicines optimisation opportunity or a medicines interaction which needs to be discussed this can then be referred to a pharmacist on the premises.
- Record any discussions locally on patients PMR
- **Ensure patients understand the following:**
  - **New medicines:**
    - what the medicines are for
    - what the medicines look like
    - How and when they should be taken to get best effect and to reduce any side effects.
    - It is also important for the patient to understand any risks of taking the medicines and who they should contact if they are unsure about any symptoms they may experience.
  - **Medicines optimisation:**
    - How to get optimum benefits from their medicines
    - When is best to take their medicines.
  - **Medicines interactions:**
    - Are there any side effects from taking a number of medicines together?
    - Are there any foods to avoid while taking the medicines?
    - Individual conversations with patients alongside Medicines information leaflets may be more helpful.

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DMR PROCESS PART ONE

Registration
- Consent gained and patient registered on DMR module of choose pharmacy

Medicines Reconciliation Part 1
- Discharge information obtained and compared with the first GP prescription

Initial support for adhereing to Medication regimen
- Discuss what medicines patient is actually taking either face to face or remotely

Record Consultation
- Record locally and enter on Choose pharmacy

DMR PROCESS PART TWO

Ongoing review of adherence
- Usually 28 days post discharge and after part 1
- Can be with patient or carer and take place either face to face or remotely

Referral pathways
- Address any difficulties, referring on any issues if required

Record consultation
- Record review locally and enter on Choose pharmacy
- If Part 2 cannot be completed record reason and submit claim

Further Clinical Review
- If during the consultation a pharmacy technician identifies issues with the use, understanding and/or experience of taking a new medicine this can then be referred to a pharmacist on the premise