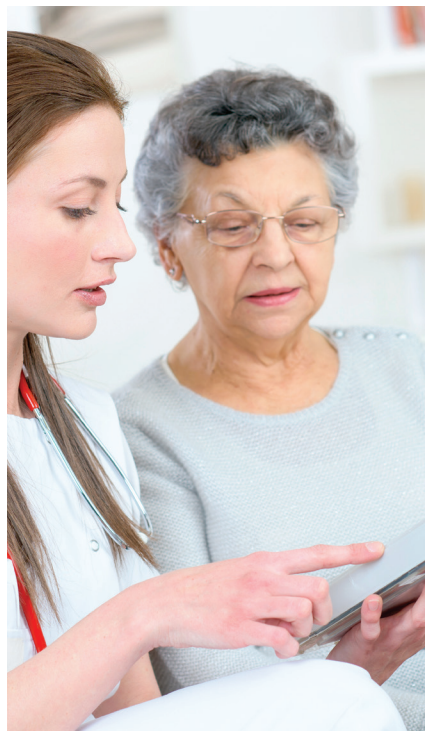


Home Medicines Review

- A Home Medicines Review (HMR) is a comprehensive review of a patient's medicines by an Accredited Pharmacist, and takes place in the patient's own home.
- A referral from the patient's GP or Specialist in Palliative Medicine is required for this service.
- The intent of the HMR Program is to support the quality use of medicines and minimise adverse medicine events by helping people to better understand and manage their medicines.
- HMRs may be especially useful to consider deprescribing options.
- Following the patient interview, the pharmacist will send a report to the referring doctor to enable development of a Medication Management Plan (after which GPs may claim MBS item 900)



MedsCheck

- This is an in-pharmacy service provided by a community pharmacist.
- The aim of the MedsCheck is to identify problems the patient may be experiencing with their medicines.
- The pharmacist may forward a copy of the MedsCheck report to the nominated GP if issues requiring follow up are identified.



Supported by:

COMMUNITY PHARMACY SUPPORTIVE SERVICES AVAILABLE TO PALLIATIVE CARE PATIENTS AND THEIR CARERS



Information for health professionals

Services that may be provided by community pharmacy include:

- Guidance on the PBS Palliative Care Schedule and Prescriber Bag medicines for terminal phase symptoms
- Supply of specialised palliative care medicines if needed
- Advice on strategies to assist with swallowing difficulties
- MedsCheck: in-pharmacy medicines review
- Home Medicines Review (HMR): comprehensive medicines review conducted in the home
- Dose Administration Aids
- Staged supply
- Return of Unwanted Medicines

Formulation and swallowing

- Advice on whether a medicine can be crushed or dispersed for ease of swallowing.
- Measures to aid swallowing of medication and recommendations on optimal methods of administration to avoid interaction with food and other medicines
- Advice on alternative dose forms or other medicines available.



Staged supply

- A service that aims to support people who are at risk of medication misuse, by limiting the quantity of certain medicines held in the home.
- The prescriber, patient and pharmacist enter into an agreement to determine the quantity and frequency of medicines to be supplied.
- A nominal fee may be charged by the pharmacy to provide this service.



Dose Administration Aid – DAA

- A DAA is a weekly pack containing individually sealed compartments containing your patient's regular oral tablets and capsules, packaged into dosing times such as morning, lunch, dinner and bedtime.
- Most pharmacies charge a weekly fee for the packing and supply of the DAA, along with the usual cost of the medicines.
- War veterans, war widows and other Department of Veterans Affairs clients may be eligible for subsidy of the DAA fee. See https://www.dva.gov.au/sites/default/files/Providers/gp-lmo-at_a_glance.pdf.
- Aboriginal and Torres Strait Islander people may be eligible for subsidy of the DAA fee under the Indigenous Dose Administration Aid Program. For more information, see <https://www.ppaonline.com.au/programs/medication-adherence-programs-2/indigenous-dose-administration-aids>.



Core Palliative Care Medicines

- The NSW Clinical Excellence Commission has developed the Core Palliative Care Medicines List for NSW Community Pharmacy, which recommends that pharmacies routinely stock the following injectable medicines for management of common end-of-life symptoms:
 - o Morphine 10mg/mL
 - o Haloperidol 5mg/mL
 - o Hyoscine butylbromide 20mg/mL
 - o Metoclopramide 10mg/2mL
 - o Clonazepam 1mg/mL (*Note many pharmacies stock Midazolam 5mg/mL instead)
- This list is not intended to restrict which medicines can be prescribed for individual patients, but is one approach which will allow community pharmacies to anticipate the medicines most likely to be prescribed, and allow prescribers to anticipate the medicines most likely to be readily available in New South Wales community pharmacies.
- The ACT/SNSW HealthPathway includes a list of community pharmacies in the region that have made a commitment to stocking the above medicines or a similar list as agreed upon by local prescribers.



RUM (Return Unwanted Medicines) project

- Any unwanted medicines should be promptly returned to the pharmacy for disposal.
- Disposal is facilitated via the RUM project to ensure that medicines are destroyed appropriately without causing harm to our environment.

