New Medicines Intervention Service Tools (NMIST)

(This guide should be read in conjunction with the PCR User Guide Version 6; available on www.communitypharmacy.scot.nhs.uk)

This tool was added to the Pharmacy Care Record in April 2012 and was designed to support community pharmacists with a structured intervention with patients who received new medication from their GP or other prescribers.

It should be treated as a guide for a CP in a discussion with a patient around key aspects of their new medication and allows this discussion to be recorded within the PCR. As with the High Risk Medicine tool, there is a direct link to the care planning section of the PCR, with pre-populated fields.

NMIST may also provide a hook to engage potential patients into CMS as it demonstrates the pharmaceutical care aspect of the service.

Getting started

As with all PCR work, you must associate to the PCR and then log in to the records. Create or select the patient that you require. You will now notice that there is an additional tab across the top of the patient profile section – this is how you access both the HRM and NMIST tools.

The first step is to add the details of the new drug which is being prescribed and the service that is being used to prescribe it – there are five options:

- AMS (as per current prescriptions)
- CMS (serial prescription)
- MAS (not quite sure why you would use this option, though...)
- o OTC (again, not sure why you would use this either)
- CPUS (ditto above!)

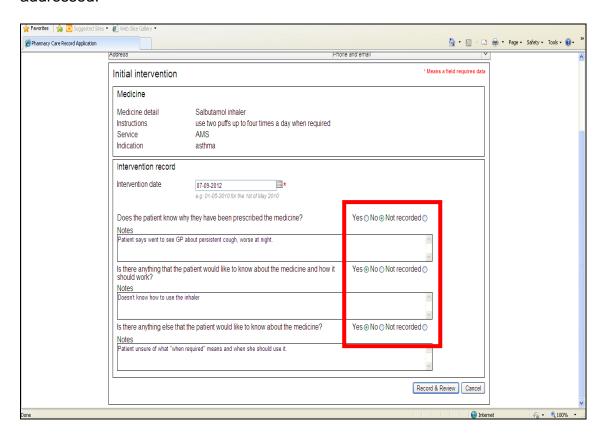
It is expected that in most cases, either AMS or CMS options would be used. If you also know the indication for the medication, please add by free text. It is acceptable if you don't know the indication but the patient may know the reason.

There are then three questions for you to ask the patient. Try and use open or closed questions to get the answers from the patient to ensure that you can gather as much information as you can. There are also free text boxes for you to annotate the conversation with the patient or to add other relevant information.

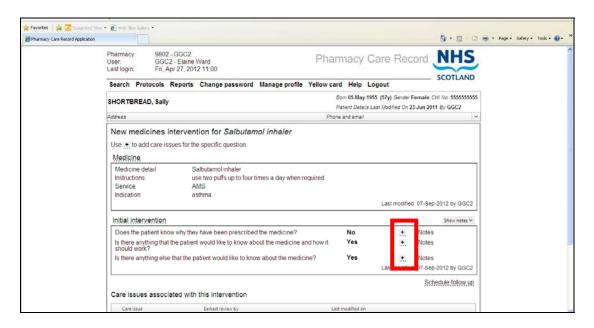
Watch the intervention date box – it will default to today's date (i.e. the date of PCR entry) and this may not necessarily be the date on which the intervention took place. The date entered here needs to be the date on which the intervention took place.

NB the questions are structured in a different manner from both HRM and risk assessments. Depending on the yes or no answer, this will indicate whether

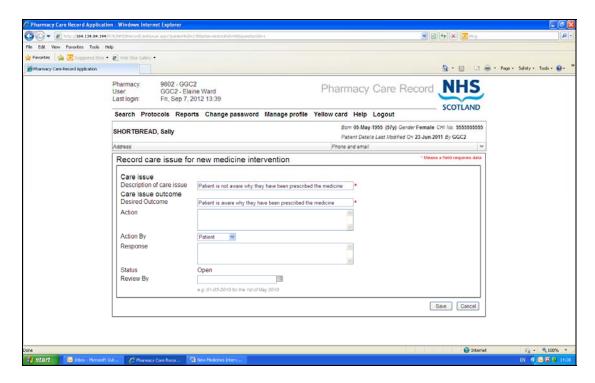
there is a care issue or not!!! In the example below, all three questions were answered differently and all suggest that there is a care issue to be addressed!



Use the + buttons at the side of the summary, you can go use these to go direct into a care issue:



This then takes you into a pre-populated screen for you to complete the outstanding boxes.



You can also manually add a care record using the care intervention box below the summary and clicking on the "Add" box:



It is not expected that the pharmacist will be able to achieve resolutions for all issues during this initial discussion. To accommodate this, there is a "follow up" functionality (on right hand side underneath the summary of initial intervention) to allow the pharmacist to make an "appointment" to have another discussion with the patient. Ideally, this should be face to face but could be carried out by telephone.

You should then return to patient home screen to exit and save at this stage.

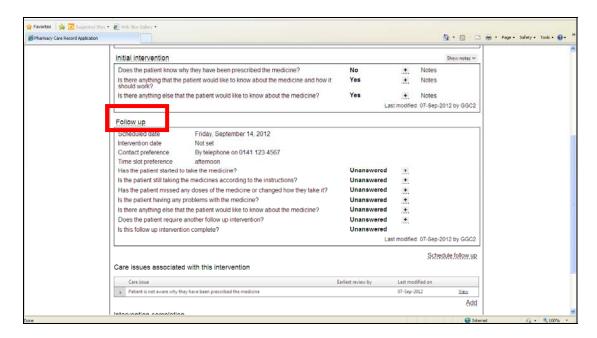
Follow up Interventions.

Once the appointment is made for the follow up, the screen alters and gives you further structured questions to guide the conversation with the patient.

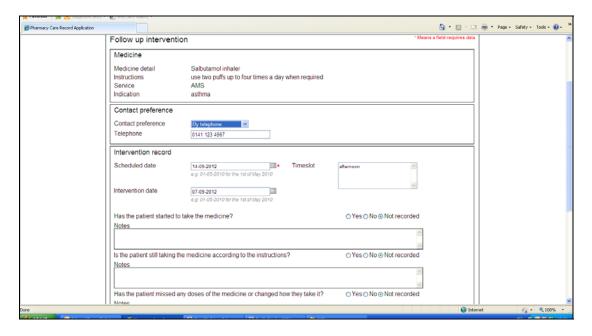
The idea of this part of the tool is to provide the patient with further reassurance, to check on their compliance and provide early feedback to the GP/ prescriber if necessary.

Access to the follow up questions is gained on the (future) date by re-entering the PCR; clicking on NMIST then Edit on right hand side. This will take you to

the summary/ review page and then you click on "follow up" at the top of the box.



Clicking here will allow you to go through the next discussion (you can have this discussion in advance of completing/ updating the PCR if time is an issue).



Follow ups can go on for a number of appointments until the pharmacist and patient are satisfied that the issues are resolved. Once this stage is reached, then the pharmacist can complete the intervention.

Completing the intervention

This can be done for a number of reasons:

- Confirmation that the patient is taking the medication as prescribed
- Confirmation that the patient is <u>not</u> taking the medication as prescribed (refer back to GP)
- o Patient is lost to follow up.

The pharmacist must select a reason for closing the intervention and then press the button to finish and save.

Planning workload

The report functionality has been update to help pharmacists to plan their CMS/ PCR workload. Ideally, this could be scheduled in line with dispensing iterations for a serial prescription as it gives the pharmacist a good idea when the patient is likely to be accessing the pharmacy.

The pharmacist selects the report (and time frame) that they need and the report will be generated.

