

Interim Community Pharmacy Medicines Adherence Service Frequently Asked Questions

ELIGIBILITY CRITERIA COHORT 3 (TRUST DISCHARGE)

The service will be available to patients who meet **all of the following criteria:**

- **Patient in hospital** and ready for discharge.
- Patient prescribed regular medicines
- Patient normally lives in their own home with **no family/advocate support able to assist with safe medicines administration** (those in nursing or residential care homes are excluded from the service)
- Patient/advocate consents to be referred into the service where possible

FAQ	Answer
Can I refuse to provide the service?	This is a core pharmaceutical service. All community pharmacies in NI must provide the service, alongside other core services such as dispensing.
Do I decide what support the patient needs e.g. MDS?	No, if the patient has been referred to you under this service the Trust will advise you what support the patient needs. The pharmacy is to implement the plan for supporting the patient. Varying types of adherence support may be needed to suit the requirements of individual patients.
I thought that community pharmacies are not taking on new patients for compliance support at the moment?	On 18 th July, the Interim Community Pharmacy Medication Adherence Service was launched. This allows Trusts to recommend compliance support plans for individual patients being discharged from hospital and refer the patient to their chosen pharmacy for that plan to be implemented. CPNI have been part of the development of this service and support community pharmacies managing these patients in line with the service specification.
I have a waiting list of patients for adherence support. Do I need to clear this list before I start these new patients?	People referred into community pharmacy through this service are high priority and clinically vulnerable patients. All community pharmacies in NI must provide this core service, alongside other core services such as dispensing. As such these patients must be prioritised.
How long do I have before I start a patient's adherence support?	As per the service specification the community pharmacist will implement the adherence support laid out in the Adherence Referral Form (ARF), ideally within 72 hours of receipt of the first post discharge prescription (up to a maximum of five working days).

FAQ	Answer
<p>How many days' supply of medication does a Trust provide to a patient on discharge?</p>	<p>In normal circumstances patients are discharged with 28 days' supply of medication. In some cases this is not appropriate: See Link for more information on Trust dispensing on discharge from hospital. HSCTs will provide enough medication to cover the patient between discharge and set-up of the service. This should be discussed between Trust pharmacy and community pharmacist during the initial phone call. Only some Trust sites supply MDS; where they do their policy is generally to provide a one week supply to patients on discharge.</p>
<p>What if a patient is already on MDS before admission to hospital? Do they have to have an adherence assessment completed on discharge?</p>	<p>Existing patients on MDS will not require an adherence assessment as an inpatient. There should be no changes to existing MDS patients' adherence support as part of the interim service. Community pharmacy should continue to supply the patient's MDS as usual.</p>
<p>Do prescriptions for these patients need to have instalment dispensing noted on them e.g. dispense weekly?</p>	<p>No – prescriptions for patients referred into this service must not be endorsed with such annotations. Funding for the service is separate to dispensing fees. Pharmacies should not ask practices to add these annotations to the prescription forms. If a pharmacist feels that a patient referred to them under this service needs their MDS/MCA in weekly intervals, they can take the professional decision to provide this amount, without it noted on the prescription.</p>
<p>How do I respond to Trust staff in the community (e.g. social worker, district nurse) requesting adherence support?</p>	<p>This phase of the medicines adherence service is only for those patients awaiting discharge from hospital - please refer to the eligibility criteria above. Advise the relevant staff that there is no commissioned service currently available for these patients in the community (cohort 2).</p>
<p>Can patients in the community access this medicines adherence service?</p>	<p>No. Refer to eligibility criteria above. This phase of the interim service applies to cohort 3 patients only. Patients in the community requiring adherence support will be cohort 2, where the adherence assessment will be carried out by the patient's community pharmacist. These patients cannot be referred into the Trust for adherence assessment.</p>

All documentation, correspondence and training resources for the service can be found at [link](#)

Please contact CPNI or your local SPPG office if you have any queries. Thank you to contractors who have contributed to the feedback to date.