

Paediatric Asthma Medicines Use Review Project

The purpose of this letter is to support the briefing of GP practices by participating community pharmacies in a Paediatric Asthma MUR project which has been developed with input from the PCT and partnership support from Merck, Sharp and Dohme. This letter is supported by a leaflet explaining the broader benefits of MURs. We would be grateful if all GPs and staff in the practice have an opportunity to read both.

Aim:

To optimise the outcomes of treatment of asthma in paediatric patients through the effective delivery of Medicines Use Reviews involving the patient's carer and demonstrating the benefits through audit and evaluation.

Intended outcomes:

- improved concordance and adherence of paediatric patients with asthma
- improved access to support, particularly for those traditionally hard-to-reach patients
- integration of community pharmacy services into patient care pathways
- updated knowledge of the condition and management guidelines for community pharmacy healthcare teams
- some demonstrable benefits of the MUR service
- demonstrate the benefits of involving carers in the MUR service
- create an evidenced case for the Department of Health to change the service specification for MURs to permit the engagement and involvement of carers.

Outline:

This initiative builds the established Medicines Use Review service by providing:

- Training events to cover:
 - updates on the condition, treatment options and local & national management guidelines provided by local NHS respiratory expert
 - audit and evaluation process
- Service overview:
 - Appropriate patients identified by pharmacy and/or referred by GP practice
 - Normal MUR concordance consultation involving the patient's carer. Patient asked the 3 RCP questions; outcomes recorded
 - Any concordance and compliance issues identified and addressed with referral to GP and/or asthma nurse where appropriate and as agreed
 - MUR forms completed and the white copy of the action plan sent to the patient's GP where appropriate
 - Patient/carer given a copy of the MUR form together with any patient and carer information leaflets required to support concordance and compliance
 - Follow-up audit completed within 3-6 months to assess change in condition management with outcomes recorded
- Evaluation of anonymised consultation outcomes and service evaluation feedback questionnaires from patients, pharmacists and other healthcare professionals.

Scope:

The target for paediatric asthma patient consultations over the period is 20 per participating pharmacy. There is no desire to limit a pharmacy's MUR activity to patients with asthma as this may be detrimental to the broader patient population.

Timelines:

This time-limited initiative which will run through until the end of June 2009 followed by the evaluation phase. A full analysis and report will be made available to all interested parties.

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