



## Frequently asked questions supporting the RPS report and guidance on Improving patient outcomes – the better use of multi-compartment compliance aids

### **Why is the RPS report on multi-compartment compliance aids important?**

Care for patients must be continually improved so as to be centred around the needs of the patient.

Care must be provided in a way that supports patient capability and independence and doesn't in itself perpetuate dependence and incapacity.

### **Who is the report for?**

The report is intended for pharmacists, and other health and care professionals who support patients with their medicines. It is also aimed at people involved in commissioning and procuring services and health and social care service providers.

### **What this guidance will tell you**

This quick reference guide addresses some of the frequently asked questions raised by our report *Improving patient outcomes – the better use of multi-compartment compliance aids*. More detail can be found in the report including: recommendations; practical information for the development of patient assessment frameworks; medicines suitability and best practice advice once an MCA is assessed as the most appropriate intervention.

### **What does the RPS mean by multi-compartment compliance aids (MCA)?**

We are referring to systems intended to support medicines adherence, including monitored dosage systems (MDS), daily dose reminders, cassettes or blisters systems, and sealed or unsealed systems. A more detailed definition is provided in the report.

### **In summary, what does the report recommend?**

Our report recommends:

- That there is patient assessment to identify the most appropriate intervention to help people use their medicines effectively and safely
- That original packs of medicines are preferred in the absence of specific need for an MCA
- That carers have appropriate training to administer medicines from original packaging
- That an evaluated national patient assessment framework be developed
- Best practice is followed where an MCA is assessed as the most appropriate intervention for a patient
- That policies and processes are reviewed or created that ensure they are patient-centred
- That patient-centred services delivered by pharmacy are maintained, incentivised and developed
- That research into the impact of using an MCA on outcomes is needed

### **Does the RPS wish to discourage the use of MCA?**

No, MCA are a valuable way of providing adherence support that may help some people to maintain healthy independent lifestyles. However, different people may need help in different ways and alternative approaches may be preferable.

### **Why is the RPS promoting the use of medicines in original packs?**

There are numerous reasons, which include:

- Finding the most appropriate way of helping a person to take their medicines as they were intended. Many suitable solutions use original packaging
- Reducing the risk of an error occurring during the complex repackaging process step
- Problems with accurately identifying medicines which have been repackaged within an MCA
- Reducing the risks that two or more systems are used at the same time, leading to confusion and error
- Some medicines must not be repackaged because of problems with stability

### **How quickly should the recommendations be implemented?**

The time taken for implementation of the recommendations within our report will be variable and be dependent upon national developments in Scotland, England and Wales. Implementation will require effective leadership, collaboration between health and social care commissioners and service providers, and appropriate incentives to encourage change.

The RPS will work with pharmacy bodies and other interested parties to carefully plan the implementation of the recommendations in the MCA report at a national and local level.

### **Should there be immediate changes?**

No. There will be people for whom an MCA is the most appropriate intervention, but there will be others who would benefit from an alternative approach. Careful planning will help to ensure that any changes do not have an adverse impact on care or unintended consequences.

### **How do the RPS recommendations affect pharmacists working directly with patients?**

We recognise pharmacists will need help to implement the recommendations and that an integrated approach between health and social care commissioners and service providers and between pharmacy bodies is required to improve patient outcomes.

This report provides information and guidance for pharmacists working directly with patients

Until nationally agreed approaches are adopted, the information contained in the three appendices of the report can be used to guide individual pharmacists in their own practice.

### **How can pharmacists help?**

As well as having a detailed understanding of pharmaceuticals, pharmacokinetics and therapeutics, pharmacists are experts in the way that people actually use their medicines. This combination of skills and knowledge is unique amongst healthcare professionals and means that pharmacists can contribute to medicines optimisation and the pharmaceutical care of their patients directly. Advising on the appropriate use of MCA tailored to an individual's needs is a good example of how pharmacists can use this knowledge and experience to improve outcomes.

### **What sort of interventions might a pharmacist make?**

There are many ways in which pharmacists can help patients to take their medicines. Examples include:

- Patient counselling and health coaching
- Reminder charts (as a memory aid)
- Medicines administration record (MAR) charts
- Labels with pictograms
- Large print labels
- Information sheets
- Reminder alarms
- Telemedicine and IT solutions e.g. phone apps
- MCA/MDS

### **When is the use of an MCA appropriate?**

We recommend that an individual assessment is used to determine the most appropriate support and that the patient is directly involved in choosing what suits them. Depending on the outcome, an MCA may or may not be the best option.

Appendix 1 of our report provides criteria for the creation of assessment frameworks. However, [our website hub for MCA](#) includes examples of frameworks that have already been

developed. We recommend the development of a single assessment framework for MCA for England, Wales and Scotland based on those that have been shown to work well in practice previously.

### **Is there evidence that MCA improve medicines adherence or that they improve outcomes?**

Currently there is poor evidence to support claims that MCA improve medicines adherence in patients or that they improve patient outcomes across the board. However there is evidence that MCA may be of value for some patients who have been assessed as having practical problems in managing their medicines.

### **If an MCA is the intervention of choice, how can pharmacists ensure they are used in the safest way?**

Best practice exemplars are included in appendix 3 of the RPS report.

### **Are there risks to stability of placing medicines in an MCA?**

As part of obtaining a marketing authorisation, medicines manufacturers spend significant resources on packaging to ensure that medicines remain with product specification throughout its shelf-life. Use of an MCA may invalidate the marketing authorisation.

### **Where can I get information on possible stability problems if a UK medicine is placed in an MCA?**

UK Medicines Information (UKMi) are currently working on an online, open access database which collates and publishes stability data for common medicines. It is expected to be available in the autumn of 2013 on the UKMi website.

### **What practical guidance is available within the report?**

Appendix 1 provides guidance on developing patient assessment frameworks (assessing the patient to find the most appropriate intervention).

Appendix 2 provides information about assessing whether medicines are suitable for inclusion within an MCA.

Appendix 3 includes examples of good practice once an MCA has been selected as the most appropriate intervention.

### **Where to go for more information**

The *RPS hub page for MCA* includes a full copy of the report, examples of patient assessment tools currently used in practice and additional reference documents.

#### **RPS Support**

Online: [www.rpharms.com/enquiry](http://www.rpharms.com/enquiry)

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