

# Briefing

# Room for review

A summary guide to medication review:  
the agenda for patients, practitioners and managers

## We increasingly rely on medicines to sustain good health

- Medication is by far the most common form of medical intervention
- Four out of five people over 75 take prescription medicines, and 36% are taking 4 or more <sup>(1)</sup>
- Better and more expensive medicines are constantly being introduced.

## Using medicines to best effect is a major challenge

- Up to 50% of medicines are not taken as prescribed <sup>(2)</sup>
- Many drugs in common use can cause problems. For an average PCT with 100,000 patients, non-steroidal anti-inflammatory drugs result in 18 hospital admissions for gastro-intestinal bleeding and 22 admissions with congestive heart failure each year <sup>(3)</sup>
- Adverse reactions to medicines are implicated in 5-17% of hospital admissions, and once in hospital, 6-17% of older patients suffer an adverse drug reaction during their stay <sup>(1)</sup>
- Taking several medicines increases the risk of adverse reactions and hospital readmission. <sup>(1)</sup>



This briefing summarises our 44-page guide. To order, see back cover

## Involving patients and carers as partners in prescribing decisions and supporting them in medicine taking is key to improving patient safety, health outcomes and satisfaction with care <sup>(2)</sup>

- Non-compliance with prescribed medicine can cause unnecessary ill-health, premature death and significant avoidable cost to the NHS <sup>(2,4)</sup>
- Patients' beliefs and views about medicines are a key influence on whether, when and how they take their medicines. <sup>(2)</sup>

**Medication review is increasingly recognised as a cornerstone of medicines management.**

# The role of the briefing and the guide

## Medication review is increasingly recognised as a cornerstone of medicines management

- Many problems with medicines could be prevented by monitoring long-term drug therapy, identifying those at risk, and modifying their medication where necessary <sup>(5)</sup>
- The National Service Framework for Older People includes specific milestones for medication review that all PCTs are expected to meet <sup>(1)</sup>
- Medication review offers a key opportunity to involve patients as partners in relation to their medicines

## Research with patients and carers shows that they welcome the idea of medication review, once its purpose and benefits have been explained <sup>(6)</sup>

- Few older people and people with long term conditions are aware of medication review
- Most would like their medicines reviewed and want a chance to ask questions about their treatment
- People who have experience of having their medicines reviewed value it very much.

## There is significant scope to improve the practice of medication review, for the benefit of patients and the NHS

- Current performance is patchy, with very variable levels of patient involvement
- Greater use could be made of the skills of different health professionals including pharmacists and nurses
- Examples of innovative practice show what can be achieved.

## We hope that this guide can support health professionals and patients to improve medication review by:

- Proposing a common set of definitions and principles for medication review
- Suggesting standard ways to record different models of review
- Disseminating good practice through practical case study examples
- Providing a website with a range of useful tools and materials for practitioners and patients.

**Most importantly, we hope that the guide will help PCTs, health professionals, patients and carers work towards the greater involvement of patients in medication review.**

## REFERENCES

- (1) *Medicines and Older People* (supplement to the National Service Framework for Older People). 2001, Department of Health, London
- (2) *From Compliance to Concordance*, 1997, Royal Pharmaceutical Society of Great Britain, London
- (3) *Bandolier* Sept 2000. *More on NSAID adverse effects*. 79: 6
- (4) Royal College of Physicians, *Medication for older people*, *J R Coll Physicians London* 1997; 31:254-7
- (5) *MeReC Bulletin* 2000, *Prescribing for the older person*, 11:10
- (6) Medicines Partnership unpublished research, 2002

# Importance of medication review

**Medication is by far the most common form of medical treatment in the UK. Many people are prescribed multiple and long term medication, so ensuring that patients get the maximum benefit from all their medicines is a major challenge.**

There is considerable published evidence of problems associated with medicines and an increasing body of evidence for the effectiveness of medication review as a route to optimising therapy, improving health outcomes, reducing the likelihood of medicine-related problems and cutting waste.

Evidence is also emerging that targeted medication review can enable people to maintain their independence and avoid admission to residential care or hospital.

Against this background, the process of *medication review* is now emerging as an important component of broader *medicines management*. The milestones for medication review included in the National Service Framework (NSF) for Older People testify to the significance of medication review within the bigger picture of health and well being for older people. Medication review provides an important opportunity to discuss medicine taking and to work towards partnership between patients and health professionals in relation to medicines.

## **OLDER PERSONS NATIONAL SERVICE FRAMEWORK MILESTONE**

**All people over 75 years should normally have their medicines reviewed at least annually and those taking four or more medicines should have a review 6-monthly**

*To be reached by April 2002*

Partly as a result of the NSF milestone, there is ongoing activity around the country aimed at implementing processes for medication review. These efforts are hampered by the lack of a common understanding of what a medication review should consist of, how to provide it and how to record that it has been done (see chart overleaf). Consequently, the quality and effectiveness of medication review can vary widely and there is a need for practical guidance to support the provision of reviews that meet the needs of patients, as well as fulfilling the obligations of primary care organisations under the NSF.

# Role of the guide

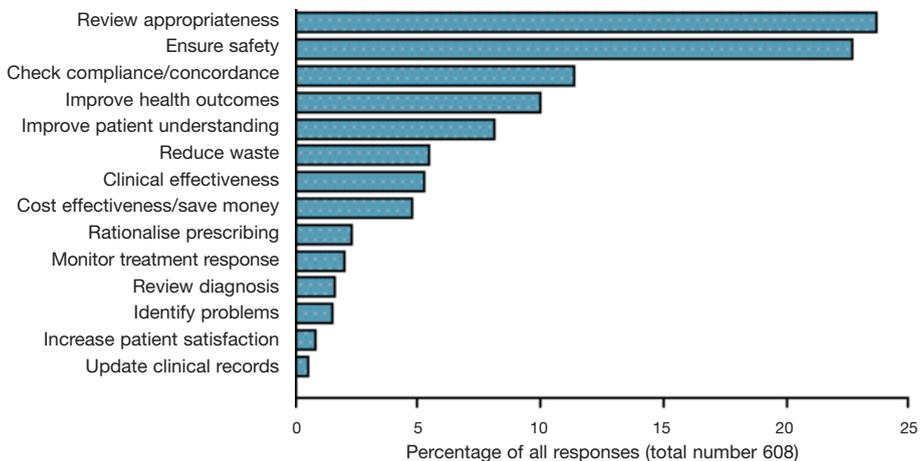
This briefing, the full guide and the website, [www.medicines-partnership.org/medication-review](http://www.medicines-partnership.org/medication-review), focus on the practice of medication review in primary care, with the needs of older people and people with long term conditions particularly in mind.

They are primarily for practitioners and managers working within the NHS. This includes GPs, pharmacists, nurses and practice staff, as well as PCTs being performance managed by the new Strategic Health Authorities, and their partners in local authorities who are responsible for ensuring high quality, cost-effective services for their communities. They should also be helpful to patient groups and to any individual older people, patients or carers who are interested in how to get the most out of medication review. Finally, they should be of interest to decision-makers at a national level who are concerned with how the NHS can deliver effective and efficient services, to improve the health of particular groups of patients and the population as a whole.

## OBJECTIVES OF THE GUIDE

- Offer practical advice for practitioners to increase the positive impact of medication review for patients
- Point towards greater patient and carer involvement in medication review as a route to partnership in treatment decisions and medicine taking
- Help primary care organisations develop effective review processes
- Share good practice that is emerging in medication review at a local level
- Provide practical tools for practitioners and patients through the website
- Propose definitions and a framework which should help local and national tracking of medication review activity.

## Views on the main purpose of medication review



Source: Unpublished survey of participants in the National Collaborative Medicines Management Services Programme, 2002

# Contents of the guide and website

**The guide begins with background information about medication review and why it is important. It describes what has been achieved in delivering medication reviews locally and some gaps and limitations in current practice.**

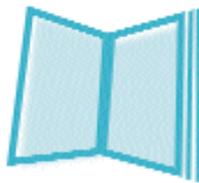
The guide proposes an over-arching definition of medication review, key principles that should underpin review, and different models of review that reflect alternative approaches. The models are illustrated by case studies from around the country which show how different NHS organisations have adapted the core principles of medication review to meet the needs of their own patients. This is followed by a section describing older people's and other patients' and carers' experience of medication review, and their opinions about how reviews could best meet their needs. Finally the guide offers specific advice about how to translate the

principles of medication review into practical action at a local level, to assist organisations and professionals considering how to introduce or improve medication review processes. This includes suggesting standard ways to record the different models of medication review and indicators of progress that should be of value, not only to local organisations wishing to chart their own performance, but also to national policy-makers who need to track the delivery and impact of medication review across the NHS as a whole.

**Of the many aspects of medication review that could be improved, the most pressing need is to work towards involving patients as partners in review, in order to reach informed agreement about their medicines, improve health outcomes and increase satisfaction with care.**

## Contents of the guide and website

### GUIDE



- *Background (Section 1)*
- *Overview of current practice (Section 2)*
- *Definition, principles and models of review (Section 3)*
- *Case studies (Section 3)*
- *Patients' views (Section 4)*
- *Guidance on implementation (Section 5)*

### WEBSITE



- *Downloadable versions of Guide, Briefing*
- *Proforma tools to download and tailor*
- *Directory of tools in use*
- *Extended case study library*
- *Full report of user research*
- *References and links*

[www.medicines-partnership.org/medication-review](http://www.medicines-partnership.org/medication-review)

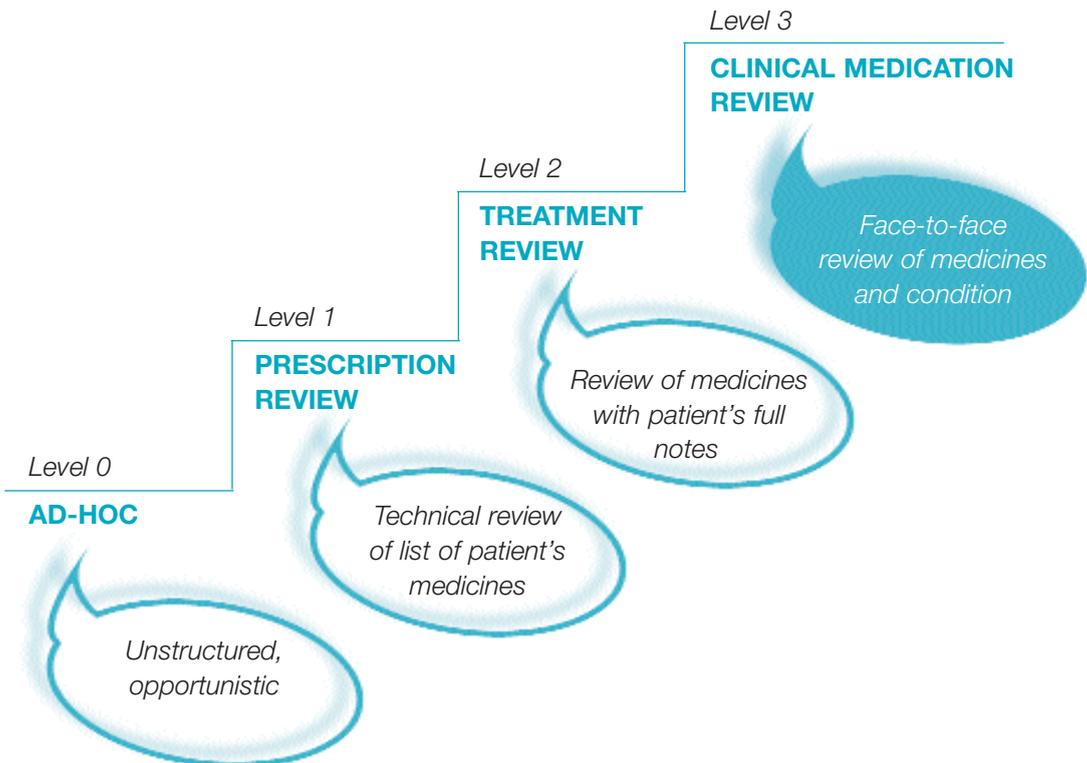
# What is medication review?

## PROPOSED DEFINITION OF MEDICATION REVIEW

A structured, critical examination of a patient's medicines with the objective of reaching an agreement with the patient about treatment, optimising the impact of medicines, minimising the number of medication-related problems and reducing waste.

There are several distinct approaches to medication review being followed in practice. By no means all reviews are conducted with the patient present. Some involve professionals scrutinising a patient's list of medications to identify anomalies and problems. Others include looking at the patient's full record so that appropriateness of medication can be assessed in relation to their condition and history. Both of these activities have value, but neither is as effective as a face-to-face discussion with the patient themselves.

## Levels of medication review



# The needs of patients and health professionals

Our hope is that, ultimately, fully concordant face-to-face clinical medication reviews will be available to all patients who would benefit from and want them.

Until this can be achieved, there is a need to establish a set of underlying principles for medication review that should apply to any type of review. These might be seen as the fundamentals without which any medication review process may be considered as flawed.

## SUGGESTED PRINCIPLES OF MEDICATION REVIEW

- 1 All patients should have a chance to raise questions and highlight problems about their medicines**
- 2 Medication review seeks to improve or optimise impact of treatment for an individual patient**
- 3 The review is undertaken in a systematic way, by a competent person**
- 4 Any changes resulting from the review are agreed with the patient**
- 5 The review is documented in the patient's notes**
- 6 The impact of any change is monitored.**

## Patients and carers welcome medication review.

Although a relatively small proportion of the people we spoke to had direct experience of having medicines reviewed, those who had said they found it helpful and almost everyone else would welcome it.

People were open-minded about who should carry out reviews and recognised that different health professionals have complementary knowledge and skills. Overall, they simply wished to tell their health professional how they felt and to discuss whether they were receiving the most appropriate treatment for their problems.

To do this they felt that they needed:

- specific time set aside for medication review
- someone to listen carefully to questions
- clear explanations in simple language
- an open interaction where they could be honest about what they were actually taking, and the health professional would be honest about the consequences of taking (or not taking) the medicines
- a written record of what had been discussed in the review.

**By understanding how patients feel about medication review and what they want from it, health professionals should be in a better position to deliver reviews that meet patients' needs.**

# The way forward

**There are many practical steps that PCTs, practices, health professionals and patients can take to get more out of medication review.**

The guide makes a number of suggestions about what can be done to involve key stakeholders, including patient forums and PALS, in determining local priorities for medication review, developing detailed guidance and gathering feedback from patients and professionals about how things can be improved.

There are real issues for the NHS in relation to capacity and staff time to undertake medication review and meet NSF and other targets. Targeting those at greatest risk, applying different levels of intervention prioritised to the needs of the patient, and using the skills of different health professionals as appropriate can make capacity issues more manageable. By suggesting how this can be delivered in practice, the guide may make medication review more achievable for local organisations, bringing real benefits for patients and moving towards genuine partnership between patients and health professionals.

We are keen to hear from more organisations, professionals and patients about their experiences of putting medication review into practice, and of using the guidance and tools in the first edition of the briefing, guide and website so that they can be refined and improved. Feedback can be sent to [info@medicines-partnership.org](mailto:info@medicines-partnership.org) or to [npc-mms@npc.nhs.uk](mailto:npc-mms@npc.nhs.uk).

*The **Task Force on Medicines Partnership** is a Department of Health funded programme designed to involve patients as partners in prescribing decisions and support them in medicine-taking, to improve health outcomes and satisfaction with care.*

*The **National Collaborative Medicines Management Services Programme** is based at the National Prescribing Centre in Liverpool and has the remit of improving the capability for medicines management in primary care through a systematic and co-ordinated programme of quality improvement.*

*The **National Prescribing Centre (NPC)** is an NHS organisation. Its aim is to facilitate the promotion of high quality, cost-effective prescribing and medicines management through a co-ordinated and prioritised programme of activities aimed at supporting all relevant professionals and senior managers working in the modern NHS.*

## CONTACTS AND FURTHER COPIES

**To order more copies or the full guide, contact:**

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**Or order from the web site:**

[www.medicines-partnership.org/medication-review](http://www.medicines-partnership.org/medication-review)