

## Advice to support primary care providers in assessing patients prior to referral for assessment for a Multi-compartment Compliance Aid

(MCA, MCCA, MDS, Blister pack, Dossette, NOMAD, etc.)

Guidance from Community Pharmacy Surrey and Sussex and Surrey and Sussex LMCs advises that it is useful for the prescriber, or practice clinical pharmacist to review medication and carry out an initial assessment of the patient, prior to the community pharmacist carrying out a patient assessment that includes determining eligibility for an MCA. Prescribers and practice clinical pharmacists can request that an MCA is supplied, but the supplying pharmacist makes the final decision. It is important that patient and carers expectations be managed.

This document provides some advice and factors to consider that support this process. It can also be used to identify and stop MCAs for patients where they may not be actually improving outcomes.

Explore adherence

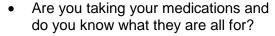


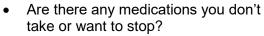
Perform a comprehensive medication review with the patient

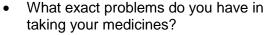


Refer patient to community pharmacist for an assessment

## Questions to ask the patient

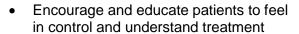






 How can I help you manage your medications more easily?

## Approaches to improve adherence





- Encourage support from family/carers
- Use personalised medication charts and medicine administration records
- Suggest reminder alarms, phone Apps where suitable



See other factors to consider:

Patient specific Medicines specific

Patient Factors where MCA unsuitable	Considerations
Moderate confusion or memory impairment, living on their own without carer support	MCA unlikely to reduce risk of confusion
High complexity of medication regimen	Those on alternate day/once a week dosing
	Multiple medicines/frequent changes to medication regimen
	<ul> <li>Parkinson's disease medication – CANNOT be put into MCAs.</li> </ul>
Likelihood medication regimen will change in coming months	<ul> <li>Frequent hospital admission or out-patient appointments</li> </ul>
	Unstable medical condition leading to frequent medication changes

Specific medications not suitable for MCAs	
Soluble, effervescent and orodispersible formulations	Non-tablet/capsule formulations i.e. suppositories, liquids, powders
Chewable, sublingual and buccal tablets	Drugs requiring special temperature control
Drugs which may cause skin/ hypersensitivity reactions	Moisture sensitive preparations
Medicines with cytotoxic potential	Medicines intended for "as required" use
Medicines whose dose may vary frequently (e.g. Warfarin)	Drugs which require specific instructions for administration (e.g. Alendronate)
Heat/Light sensitive drugs	Taking medicines via other routes e.g. inhalers, topical preparation

## References:

- SPS (2019) Summary of guidance and evidence for use of multi-compartment compliance aids (MCCAs). [Online] Available from: <a href="https://www.sps.nhs.uk/wp-content/uploads/2019/05/SPS\_MCCA\_briefing\_May2019\_final.pdf">https://www.sps.nhs.uk/wp-content/uploads/2019/05/SPS\_MCCA\_briefing\_May2019\_final.pdf</a> [Accessed 30/03/20]
- 2. M.Duerden, What is the place for monitored dosage systems? DTB 2018; 56(9):102-106 <a href="https://dtb.bmj.com/content/56/9/102">https://dtb.bmj.com/content/56/9/102</a> [Accessed 13/11/20]
- 3. Daniel S Furmedge et alm, Evidence and tips on the use of medication compliance aids. Br Med J 2018; 2018;362:k2801 doi: 10.1136/bmj.k2801 <a href="https://www.bmj.com/content/362/bmj.k2801">https://www.bmj.com/content/362/bmj.k2801</a> [Accessed 13/11/20]