

IPAC project criteria for non-HMR

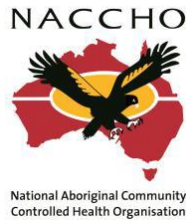
Core role 1 for pharmacists in the IPAC project relates to the provision of Medication Management Reviews. For this core activity, the pharmacist initiates and facilitates a Medication Management Review, which may be either a Home Medicines Review (HMR) or a non-HMR.

The IPAC protocol defines a non-HMR as comprising some or all the elements of a HMR, but not fulfilling all relevant MBS HMR criteria (see [here](#)). [A non-HMR allows for an opportunistic medication review without a referral from the patient's GP.](#)

Patients for whom a HMR has been conducted [within the last 12 months](#), but who do not meet the exemption criteria for repeat HMR, may be considered for a non-HMR if clinical needs exists. Similarly a patient may have a HMR conducted & then followed by one or more non-HMRs (& vice-versa). A single patient may have several non-HMRs conducted over the 15 months of the IPAC project.

Criteria for a non-HMR should include:

- An interactive face-to-face or telehealth interview with the patient (& caregiver, AHW as deemed appropriate)
- Collection of patient-specific data such as demographic and/or personal information, relevant social history, medical history, consumer assessment (eg. frailty, vision, hearing, swallowing, falls risk, balance, cognition, memory, mood, gait, mobility or dexterity)
- Compilation of a comprehensive medication profile (this may include information gathered from various sources such as the patient, carers, other health care providers, ACCHS patient profile, dispensing history, lab test results & hospital admission or discharge summaries)
- Education of the patient about their medicines in response to assessed needs at the interview
- Assessment of the medication profile to identify medication-related problems, including problems identified by the patient
- Prioritising a list of medication-related problems – it is optimal that these be discussed with the patient during the interview if possible
- Recommendations made & documented in the ACCHS clinical information system to resolve medication-related problems with the patient, caregiver and prescriber
- Recommendations discussed with the prescriber



As per the IPAC protocol, the project pharmacist will schedule patient follow-up 3-6 months after completion of the non-HMR. Criteria for follow-up should include:

- Reinforcement of advice and recommendations provided by the pharmacist (and GP if appropriate) at the non-HMR
- Monitoring of the impact of any actions arising from the non-HMR
- Assessment of the need for future pharmacist activity (eg another non-HMR, HMR, education session, preventive intervention)

The collection of non-HMR data will inform the evaluation of core roles #1-3. Information on core roles #1-3 can be sourced from GRHANITE which enables non-HMR encounters to be linked to the CIS study measures. Further information related to the provision of non-HMRs will also be captured in the pharmacists' logbook.