# **TEAMM-Pharmacist Project**

# **Fact Sheet**

#### Q. Who will be eligible to receive this service?

A. Patients who reside in EMPHN's catchment, referred to RDNS Eastern Clinical Hub for medication management support and have been assessed at higher risk of medication misadventure. New and existing patients may be eligible.

#### Q. Are there out-of-pocket expenses for patients?

A. There will be no charge to patients. EMPHN's funding provides for employment of the clinical pharmacists.

#### Q. How are patients engaged?

A. The RDNS nurse informs eligible patients about the service, provides an information pack, and seeks the patient's consent before the clinical pharmacist service is provided.

#### Q. How is the GP involved?

A. TEAMM-Pharmacist is a collaborative service to reduce the risk of medication errors and improve the interdisciplinary care of older people. GPs will be consulted by the clinical pharmacists during the medication reconciliation process and to discuss and authorise any recommendations after medication reviews. A report of the medication review will be provided to the GP.

### Q. Is there a role for Practice Nurses?

A. Practice Nurses are integral to the patient's care team and will be engaged by the clinical pharmacists to facilitate communication with the GP and assist with the clinical pharmacy service provision.

#### Q. Why is this service needed rather than using Home Medicines Review(HMR)?

A. For this vulnerable, higher risk group of patients an in-house clinical pharmacist service:

- Avoids delays for GP referral, pharmacist review, patient recall for complete HMR process
- Provides a more connected experience for the patient the TEAMM-Pharmacist home visit is conducted alongside the nurse's visit therefore nurse insights and management needs are taken into account
- Addresses management and information needs of the patient/carer and the RDNS nurse
- Provides follow-up and ongoing support for patients/carers, nurses, GPs and pharmacy to ensure medication issues are resolved

• Coordinates medication management across the care team

Home Medicines Reviews via usual processes may well be recommended for patients with less urgent medication management needs.

## Q. How long will the service continue?

A. The TEAMM-Pharmacist service is funded from July 2017 until end June 2018.

For more information about the TEAMM-Pharmacist project contact Christine Bellamy Christine.bellamy@emphn.org.au

Read the media release