

Community pharmacy intervention and documentation in  
medication management: a national telephone survey  
in the United Kingdom: The de Il in the de ail

Jasmine Riea<sup>a</sup>, Naalia Shchebakova

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of e ice ha b imi/e he a e ic b come fo indi id al a ien .<sup>2</sup> M e ecen l y in 2018, he J bin C ommi ion of Pha mac y P ac i one (JCPP) B oa d of G b e n b e i ed he e m and modified he defini ion b Medica ion Managemen Se ice (MMS).<sup>3</sup> MMS enc om a e a b oa d ec m of a ien -cen e ed, ha maci - b ided, collab a i e e ice ha foc on medica ion a b ia ene , effec i ene , afe y and adhe ence i h he g bal of im b ing heal h b come . While he c en e idence ela ed b he b come of MTM/MMS e ice i in- con i en , e ea ch bin b he high ben ial fo he e e ice b im b e medica ion- ela ed, a ien - ela ed, and heal hca e e b - come if he e e ice a e effec i el y c b b dina ed be een ha maci and b he heal hca e b fe ional .<sup>4,5</sup> The fi e c b e elemen of MTM e ice incl de com eh en i e medica ion e ie (CMR), e onal medica ion ec b d (PMR), medica ion- ela ed ac ion lan (MAP), in- e en ion and/ b efe al, and doc men a ion and fo ll b - .<sup>2</sup> Ab b half of he MTM e ice a e deli e ed ia ele h one.<sup>6</sup> MTM deli e ed ia ele h one can be ad an age b hen a ien a e h ome b b nd, li e in emb e a ea , ha e limi ed acce b an b a ion b a e non-Eng- li h eaking and can be m b e ea il y acc om m b da ed b y lo ca ing a ha maci b ficien in hei lang age.<sup>7</sup> H b e e , if he a ali y of h one- ba ed enc b n e i infe i b b ha of a face- b- face one, he ad- an age can a ickl y di a ea . T b he a h b ' kn b ledge, n b d y b da e com a ed he medica ion- ela ed b blem , ha maci in e en- ion and -337.3(a e)-338( ik(be28.41575f0./m(H b e 533.020507.9702174.8976669( 5-21.m506H b M1)Tj432d(con-)Ti(H b e)--1.32( ha maci )-d b c me

in en ion b b ain a CMR bge he i h b he fac b ma y edic he ecei , and all a iable e ce a ien heal h a e e n ela ed b b aining a CMR.<sup>17</sup> Cbe e al. hb ed ha in he 2014 na ion al am le of CMR-eligible b la ion, a ien i h highe n mbe of combidi ie , Medica e and Medicaid d al eligible a ien , and hb e i h a hi b .y of hb i ali/a ion b eme genc y b b m i i e e le likel y b ecei e a CMR.<sup>18</sup> S die bin b a d b lde a ien , female , and a ien hb a enb comfo able eaking i h hei ha maci a being mb e likel y b acce MTM.<sup>19</sup>

O d y a ici an a ea b e e en .y ical a ien hb acce MTM - b lde a ien and female . Tb b knb ledge, nb die of MMS com a ed medica ion- ela ed bblem and com le ene of d b c men a ion b y m b de of e ice deli e .y hile a fe die com- a ed b come be een he b m b de of deli e .y fb e ice b he han medica ion managemen .<sup>20-22</sup> Pinn b ck e al. e al a ed he im ac of bffe ing a ele hb ne-ba ed a hma clinic b n ake and b come of a hma e ie and fb nd ha he hb ne b ion inc ea ed he ake of e ie and im b ed a ien ' confidence in elf-managemen ha a nb ignifican l y diffe n fb m a face- b-face deli e .y m b de.<sup>20</sup> Schmid e al. e al a ed he diffe ence in glycem ic con bl b come among VA diabe e a ien b y m b de of deli e .y (face- b-face e hb ne a bin men i h a clinical ha mac y eci ali ) and fb nd nb diffe ence in ab bl e HbA1c ed c ion.<sup>21</sup> William e al. com a ed a life .y e b g am deli e ed face- b-face e ele hb ne b im b e me ab blic indica b among a ien ne l y diagn b ed i h

.y ea ( > 0.05, da a nb hb n). F e . enc y of d b c men a ion in "Pa ien di c ion nb e " and "Pha maci e commenda ion " did nb diffe b y m b de of e ice deli e .y and a nea l y al a y e en .

## Discussion

Abb hb ne- hi d of eligible MTM ca e i hin hb ne di ic of a comm ni .y ha mac y chain cce f ll y com le ed a CMR. A ecen anal y i of na ion al Medica e Pa D MTM file hb ed ha 18% of beneficia ie mee ing c i e ia fb MTM ecei ed a CMR.<sup>15</sup> I i nknb n h y b- hi d of ca e in hi d y e e ei he declined b nb e ed fb b he ea b n. Th fa , e ea ch ha nb iden ified blid edic b of illingne b a ici a e in MTM.<sup>16</sup> Fa i e al. e amin ed he he he

in the Beekeeping Medication, the "Amen" and "Plan" were added to the medication's kit, a significant portion of which remained unchanged.

Since the development of the Beekeeping Medication, the data on the effectiveness of the medication and the agent added.<sup>25</sup> The finding also affected by the change. H2-blockers were used from the time they were first used. H2-blockers were added to the list in 2019, which is already classified as a health benefit in the form of similar Beekeeping.

Pharmacological recommendations for a healthy life are being developed by the medication, which may be a benefit and should be an important element of health care. Side effects have been found to be a leading issue in the diagnosis of the condition. <sup>26,27</sup> On the other hand, the identification of the health care team can be challenging and general practice (GP) diagnosed pharmacological recommendations for an individual and individual are particularly important. <sup>28</sup> The use and efficacy of the b-336.5(d)-341a-321.2856036.5(d)-341a-321a5a health hh32-345(ae aie . h)4e9 al d

## Conclusion

Pharmacokinetic differences in the metabolism of medication-related problems and the identification of MTM in the identification of the mode of medication delivery. In addition, the identification of medication-related problems in the "Amen" and "Plan" identified the role of medication, especially during face-to-face encounters. In addition, the identification of MTM in the identification of communication between the patient and the provider, the identification of medication-related problems has a role in the provider domain, which is accompanied by high medication. With the help of the case, the case identified during face-to-face encounters is unlikely to be significant.