Clinical Pharmacy Services

Priority	Who (criteria for referral)	Action
Level 1	All patients with low risk, self-managing short term conditions e.g. Mild eczema, asthma, cold & flu All patients with low-to-moderate risks, self-managing, and long term medications, who are limited in their functional ability on a daily basis by symptoms. E.g. Elderly patients with confusion surrounding medications, patients with poor medication compliance.	Led within the practice by the General Practice Team and additional support can be provided by community pharmacies for minor ailments e.g. Green Rx, smoke cessations and dietary advice, over the counter medicines and pharmacist only medications. For low to moderate risk patients: GPs - Perform risk assessments e.g. CVDRA, HbA1c, and eGFR. - Schedule regular appointments to remind patients for check-ups. - GP or practice nurse can use adherence screening tool to assess compliance. Community Pharmacists - Monitor medicines adherence and provide support when needed. - New medication education - MURs if possible via referral.
Level 2	All patients with moderate-to-high risks, likely to benefit a multi-disciplinary team care, who need some assistance with managing their health conditions. This may include patients with a LINC score of 20 or more points, on high risk medications/medications with a narrow therapeutic index, mental health patients with complex medical issues, and elderly patients at high risk of medication related falls.	GPs - Identify which patients would benefit the most in a multi-disciplinary care and refer them as and when appropriate. - Have a system in place to monitor this cohort of patients closely. - GP or practice nurse can use adherence screening tool to assess compliance. Pharmacists - Frequent dispensing to monitor medicine adherence. - Record and report any ADRs, interactions and adherence issues.

Level 3	<u>High risk patients meeting all of the following inclusion criteria</u>: - 55 & over for NZ Maori & Pacific island; OR 65 & over for all others - 3 or more long term chronic health conditions - Polypharmacy (defined as 5 or more daily medications) These may include palliative patients, aged residential care patients, complex mental health patients, patients with multiple comorbidities, patients at high risk of admission to hospital. Patients in this category will likely score 30 or more on the LINC score schedule.	GPs to send eReferral to clinical pharmacist facilitators containing NHI, name and reason(s) for referral. Clinical pharmacist facilitator is to complete a pre-assessment non-face to face therapeutics assessment and if appropriate followed by a face to face consultation with the patient. A care plan report will be generated and feedback to the GP in the desired format (electronic letter or entered directly into electronic patient notes)
ANY PATIENT MEETING LEVEL 2 OR 3 IS APPROPRIATE FOR AN INITIAL REFERRAL TO THE CLINICAL PHARMACIST FACILITATOR		