

# MedsIndex



## Staff Q & A

**The following questions and answers will assist in a streamlined implementation of MedsIndex ensuring that all staff are brought up to speed with this important new program.**

### **Q: What is MedsIndex?**

A: MedsIndex is a medicines compliance indicator. It is based on an analysis of the medicines repeat intervals expected for prescription refill of chronic medicines (normally 30 days) compared with actual days elapsed since last the prescription was filled.

### **Q: How is the score calculated?**

A: If a patient on a once-per-day medicine (pack of 30) is due to have their repeat filled every 30 days. The patient only comes in after 45 days. Patient should have taken  $45 \times 1$  doses = 45 and has only had 30 doses therefore the patient has missed 15 doses.

Rate of compliance = Quantity of medicine needed to comply with doctor's prescription instructions divided by the number of days since prescription first supplied. Rate of compliance = 30 divided by 45 which rounds to 67%. The compliance is therefore 67% so the score is 67.

### **Q: Is the score a percentage or a total?**

A: The score is a total out of 100 – no percentage signs are used.

### **Q: Can someone have a compliance of more than 100?**

A: No, the maximum score is 100. Patients who get their medicines refilled early will still have a maximum score of 100.

### **Q: Does the MedsIndex Score refer to an individual medicine or an overall score for all their medicines?**

A: There is a MedsIndex Score allocated for both. A patient may have various scores for each of their specific medicines and the MedsIndex Microsoft Excel calculator also gives an overall score across all medicines. The MedsIndex Score is averaged over the repeats i.e. the repeat intervals are averaged to get the overall score.

### **Q: If a patient takes medicines under a doctor's direction of 'prn' can a MedsIndex Score be calculated?**

A: No, a MedsIndex Score is only for those medicines with a specific prescribed dosage regime. If doses change for the medicine then a new MedsIndex Score sheet must be used.





## Staff Q & A (continued)

### **Q: How can MedsIndex improve medicines compliance?**

A: Patients rarely think about how consistent they are at taking their medicines as per their doctor's instructions. Simply by focusing on this issue patients will improve compliance. In addition the MedsIndex Score gives a pharmacist an intervention point where they can discuss compliance issues in a non threatening way with the patient. The pharmacist can refer the patient to other professional pharmacy programs which may improve compliance. E.g. Dose Administration Aids (DAAs). In DAAs the medicines are packed and this makes it easier for patients to remember to take their medicines on time.

### **Q: Who gets the MedsIndex Score?**

A: The MedsIndex Score is kept for pharmacy records and a copy is given to the patient. Pharmacists should not send a report directly to another health professional without first receiving permission from the patient (the only exception to this rule is where MedsIndex is used in another professional pharmacy program to enhance that specific report. E.g. it is expected that MedsIndex will become a regular element of a Home Medicines Review (HMR) and in this instance a separate request to the patient to have permission to pass on MedsIndex Score to their GP is not required.

### **Q: Can pharmacy assistants generate a MedsIndex?**

A: Pharmacy Assistants can fill in the data entry requirements however the 'Pharmacist's Comments' in the individual medicine MedsIndex Score and the overall MedsIndex summary should only be completed by a pharmacist.

### **Q: Where should records for MedsIndex be stored in a pharmacy?**

A: The pharmacy should have a written protocol on where MedsIndex Scores are to be stored. In addition, the electronic records should also be saved in a specific file. The security level for storage of these documents should be at the same high level as prescription records.

### **Q: How should patients be recruited for MedsIndex?**

A: The Guild recommends that in the first instance patients who have reached an SN concession card or a CN concession card should have their MedsIndex calculated at least once per year. In addition the MedsIndex manual suggests a number of key disease state groups and patients with these conditions should be targeted in a systemised way with the benefits of MedsIndex explained. Finally, resources are supplied in the MedsIndex kit such as template letters to doctors which allows a pharmacist to promote the service to other health professionals. It is expected that those health professionals would refer patients for this service.

