

## CONFERENCE ABSTRACT

### Proactive medicines management supports more patient centric services

1<sup>st</sup> Asia Pacific Conference on Integrated Care, Brisbane, 06-08 Nov 2017

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**Introduction (context and problem statement):** The current New Zealand (NZ) Health System is under pressure as our population ages and the burden of long-term conditions (LTC) such as diabetes, heart disease and dementia grows. LTC consume a vast amount of resources in NZ – both in terms of direct health care and the indirect costs on society as a whole.

**Short description of practice change implemented:** Waimauku Pharmacy is committed to continuous quality improvement in all that we do. Over the past two years, we have evaluated and have been optimising our workflow and business design to deliver innovative patient-centred care.

**Aim and theory of change:** Waimauku Pharmacy's aim has been to redesign our model of care and Medicines Management Services (MMS) to deliver proactive, quality, patient-centred care to patients and whaanau. Our critical success factors have been:

Collaboration with primary care team

Redesign of workflow and model of care

Making better use of pharmacist and technicians unique skills set

Adapting smart IT systems including robotic dispensing and Whanau Tahi Shared Care

Targeted population and stakeholders

Target population- Patients and whaanau with long term conditions/high needs

Stakeholders- Patients, community pharmacists, technicians, GPs, nurses and other members of patients care team

**Timeline:** Our improvement journey started 2 years ago and it has been continuously reviewed, improved, modified and added too as time goes on.

**Highlights (innovation, impact and outcomes):** Placing the patient at the centre of care has enabled us to support them proactively to manage their medicines better. Over the improvement journey, we have already seen many benefits, such as:

Increased collaboration amongst Primary Care team members

Ability to enrol more patients (from 70-190 patients in 2 years) into Medications Management Service as a result of efficiencies in dispensing and medication management workflows

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Major quality and safety contributions from medicines reconciliation for at-risk patients

Better management of pharmacy staff and workload meaning more time spent working with the patient

Created a Health Literate workplace

Pharmacists and technicians working at the top of our scope of practice

**Comments on sustainability:** Our key has been to plan in collaboration with staff from the pharmacy and GP practice so that we had buy-in and engagement throughout the journey. It was also important to communicate openly and regularly and provide on-going support and opportunity for feedback.

Our objectives also align with the NZ Health Strategic vision of empowering people to 'live well, get well, stay well', closer to home.

Comments on transferability

We feel that our service model can be adapted by any committed pharmacy and primary care team.

**Conclusions:** As IT ability has expanded, and as the business environment has changed and staff have developed confidence and respect for each other's skills we have truly innovated the way we provide care to our patients and whaanau. We value spending more time getting to know our patients, really understanding their needs and have been able to offer more services targeted towards higher-needs patients.

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**Keywords:** pharmacists; general practice; gp; nurses; collaboration

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Doolan-Noble, F et al 2017 Establishing a rural research network to promote capacity and capability within rural communities in New Zealand. *International Journal of Integrated Care*, 18(S1): A30, pp. 1-8, DOI: [dx.doi.org/10.5334/ijic.s1030](https://doi.org/10.5334/ijic.s1030)